Namibia





I. Epidemiolo	ogical profile										
Population (UN)		2015	%	Parasites an	d vectors						
High transmission (> 1 case per 1000 population)		1,140,000	46	Plasmodium species: P. falciparum (100%), P.vivax (0%)							
Low transmission (0-1 cases per 1000 population)		817,000	33	Major anophel	Major anopheles species: An. arabiensis, An. gambiae, An. funestus						
Malaria-free (0 cases)		507,000	21	Reported conf	firmed cases (h	ealth facil	ity):	12,050	Estimated case	s:	22,000 [17,000 ; 27,000]
Total		2,460,000		Confirmed cas	es at communi	ity level:		-			
				Reported deat	hs:			45	Estimated death	S:	<100
II. Interventi	on policies and strategies										
Intervention	Policies/strategies	Yes/No	Adopted	Antimalarial treatment policy					Medicine	Year adopted	
ITN	ITNs/ LLINs distributed free of charge	Yes	1998	First-line treatr	ment of unconfi	rmed mala	aria			AL	2006
	ITNs/ LLINs distributed to all age groups	Yes	2014	First-line treatment of P. falciparum AL 2006							2006
IRS	IRS is recommended	Yes	1965	Treatment failure of P. falciparum QN 2006							2006
	DDT is authorized for IRS	Yes	1965	Treatment of severe malaria QN 2006							
Larval control	Use of larval control recommended	Yes	-	Treatment of P. vivax AL 2006							
IPT	IPT used to prevent malaria during pregnancy	Yes	2005	Dosage of Primaquine for radical treatment of P. vivax -							
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2005	Type pf RDT u	ised						P.f + P.v, P.o, P.m (Combo)
	Malaria diagnosis is free of charge in the public sector	Yes	1990								
Treatment	ACT is free of charge for all ages in public sector	Yes	2005	Therapeutic efficacy tests (clinical and parasitological failure, %)							
	The sale of oral artemisinin-based monotherapies (oAMTs)	Never allowed	-	Medicine	Year	Min	Median	Мах	Follow-up	No of studies	Species
	Single dose of primaquine is used as gametocidal medicine for P. falciaprum	No	2015								
	Primaquine is used for radical treatment of P. vivax	Yes	2015								
	G6PD test is a requirement before treatment with primaquine	No	-								
	Directly observed treatment with primaquine is undertaken	No	-								
	System for monitoring adverse reactions to antimalarials exists	Yes	2008								
Surveillance	ACD for case investigation (reactive)	No	2012								
	ACD of febrile cases at community level (pro-active)	No	-	Insecticide susceptibility bioassays (reported resistance to at least one insecticide for any vector at any locality)							
		-	0040	Year Pyrethroid DDT Carbamate				ite	Organophospha	ate Species/complex tested	
	Mass screening is undertaken	No	2012								
	Mass screening is undertaken Uncomplicated P. falciparum cases routinely admitted	No No	2012	2010–2014	No	No				An. arabier	nsis
		No No -		2010–2014	No	No				An. arabier	nsis
	Uncomplicated P. falciparum cases routinely admitted		2012 - - -	2010–2014	No	No				An. arabier	nsis
	Uncomplicated P. falciparum cases routinely admitted Uncomplicated P. vivax cases routinely admitted		2012 - - 2015	2010–2014	No	No				An. arabier	nsis
III. Financi	Uncomplicated P. falciparum cases routinely admitted Uncomplicated P. vivax cases routinely admitted Foci and case investigation undertaken Case reporting from private sector is mandatory	No - -	- - -	2010–2014			ent expen	diture t	by intervention		nsis

20



Confirmed malaria cases per 1000 and ABER

Malaria admissions and deaths (per 100 000)





