

I. Epidemiological profile					
Population (UN)	2016	%			
High transmission (> 1 case per 1000 population)	28,800,000	100			
Low transmission (0-1 cases per 1000 population)	-	-			
Malaria-free (0 cases)	-	-			
Total	28,830,000				

Parasites and vectors					
Plasmodium species: P. falciparum (100%), P.vivax (0%)					
Major anopheles species: An. funestus, An. gambiae, An. arabiensis					
Reported confirmed cases (he	ealth facility):	8,520,376	Estimated cases:	8,870,000 [5,930,000–12,700,000]	
Confirmed cases at community	y level:	1,170,497			
Reported deaths:		1,685	Estimated deaths:	14,370 [12,110–16,630]	

Intervention	Policies/strategies	Yes/No	Adopted
ITN	ITNs/ LLINs distributed free of charge	Yes	2003
	ITNs/ LLINs distributed to all age groups	Yes	2009
IRS	IRS is recommended	Yes	2003
	DDT is authorized for IRS	Yes	2006
Larval control	Use of larval control recommended	No	-
IPT	IPT used to prevent malaria during pregnancy	Yes	2006
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2009
	Malaria diagnosis is free of charge in the public sector	Yes	2005
Treatment	ACT is free of charge for all ages in public sector	Yes	2005
	The sale of oral artemisinin-based monotherapies (oAMTs)	Never allowed	-
	Single dose of primaquine is used as gametocidal medicine for P. falciparum	No	-
	Primaquine is used for radical treatment of P. vivax	No	-
	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	2002
Surveillance	ACD for case investigation (reactive)	No	_
	ACD of febrile cases at community level (pro-active)	No	-
	Mass screening is undertaken	No	-
	Uncomplicated P. falciparum cases routinely admitted	No	-
	Uncomplicated P. vivax cases routinely admitted	No	-
	Foci and case investigation undertaken	-	-
	Case reporting from private sector is mandatory	No	-

0

2005

2006

2007

2008

Cases (P. vivax)

2009

2010

ABER (microscopy & RDT) Cases (all species)

2011

2012

2013

2014

2015

Antimalarial treatment policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	AL	2004
First-line treatment of P. falciparum	AL	2004
Treatment failure of P. falciparum	-	-
Treatment of severe malaria	AS, QN	2004
Treatment of P. vivax	-	-
Dosage of Primaquine for radical treatment of P. vivax		-
Type of RDT used		P.f only

Follow-up No. of studies Medicine Year(s) Min Median Max **Species** AL 2011-2015 0 3.1 9 P. falciparum 5.8 28 days AS+AQ 2011-2012 0 0 1.4 28 days 3 P. falciparum Insecticide resistance tests (mosquito mortality, %) Years Max No. of sites Insecticide class Min Mean Species

1

1

1

45

46

62

73

An. funestus s.l., An. gambiae s.l.

An. funestus s.l., An. gambiae s.l.

An. funestus s.l., An. gambiae s.l.

An. arabiensis, An. funestus s.l., + other

Therapeutic efficacy tests (clinical and parasitological failure, %)

2010-2016

2011-2016

2010-2016

2010-2016

0

0

0.5

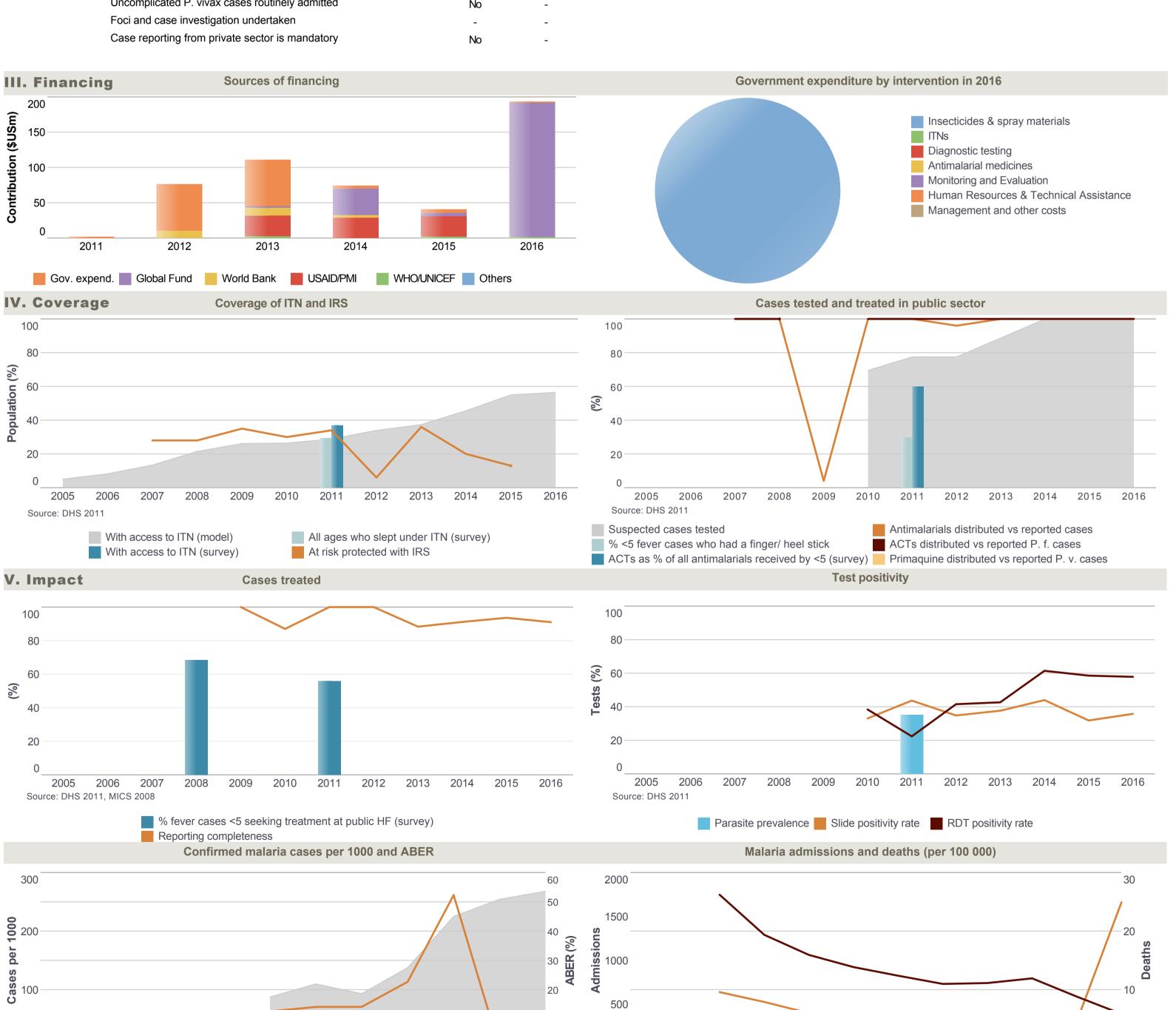
0

8.0

0.9

1

8.0



20

10

2016

500

0

2005

2006

2007

2008

2009

Admissions (all species) Admissions (P.vivax) Deaths (all species)

2010

2011

2012

2013

2014

2015

Deaths (P. vivax)

2016

Carbamates

Pyrethroids

Organophosphates

Organochlorines