

World Malaria Report 2018

Recently, World Health Organisation (WHO) has released World Malaria Report, 2018.

- The report has mentioned that the number of cases of the disease increased by 2 million to 219 million in 2017 from 217 million cases in 2016.
- In 2017 Malaria killed 4,35,000 people, majority of them childrens.
- Malaria occurs in 91 countries but about 90% of the cases and deaths are in sub-Saharan Africa.

Major Findings of the Report

Malaria cases

- Fifteen countries in sub-Saharan Africa and India carried almost 80% of the global malaria burden.
- Five countries accounted for nearly half of **all malaria cases** worldwide: Nigeria (25%), Democratic Republic of the Congo (11%), Mozambique (5%), India (4%) and Uganda (4%)

Malaria deaths

- In 2017, there were an estimated 435 000 deaths from malaria globally, compared with 451 000 estimated deaths in 2016.
- Nearly 80% of global malaria deaths in 2017 were concentrated in 17 countries in the WHO African Region and India. India accounted for 4% of global malaria deaths.

Malaria-related anaemia

 The 2018 report includes a section on malaria-related anaemia, a condition that, left untreated, can result in death, especially among vulnerable populations such as pregnant women and children aged under 5 years.

Challenges in Global Malaria Response

- High Burden Countries
 - In 2017, 11 countries accounted for approximately 70% of estimated malaria cases and deaths globally: 10 in sub-Saharan Africa and India.
 - Among these countries, only India reported progress in reducing its malaria cases in 2017 compared to 2016.

High Burden to High Impact

- WHO also released a new country-driven approach "High burden to high impact" to enhance response to malaria in countries where Malaria cases increased in 2017 as compared to 2016.
- Catalyzed by WHO and the RBM Partnership to End Malaria, the approach is founded upon four pillars:
 - galvanize national and global political attention to reduce malaria deaths;
 - drive impact in country through the strategic use of information;
 - establish best global guidance, policies and strategies suitable for all malaria endemic countries:
 - implement a coordinated country response
- "High burden to high impact" calls for increased funding, with an emphasis on domestic funding for malaria, and better targeting of resources.

Decline in Funding

• In 24 out of 41 high-burden countries, which rely on external funding for malaria programmes, the average level of funding available per person at risk declined in 2015–2017 compared to 2012–2014.

Drug Resistance

• Artemisinin-based combination therapy (ACTs) have been integral to the recent success of global malaria control, and protecting their efficacy for the treatment of malaria is a global health priority.

Insecticide Resistance

- Of the 80 malaria endemic countries that provided data for 2010–2017, resistance to at least one of the four insecticide classes in one malaria vector from collection site was detected in 68 countries.
- In view of the current situation, **resistance monitoring and management plans are essential**, in line with the WHO Global plan for insecticide resistance management in malaria vectors.

National Strategic Plan for Malaria Elimination (NSPME) (2017-22)

- Government of India has launched NSPME (2017-22).
- The Strategic Plan gives year wise elimination targets in various parts of the country depending upon the endemicity of malaria in the next 5 years.
- The NSPME is based on National Framework for Malaria Elimination 2016 which is in line with WHO's Global Technical Strategy for Malaria, 2016-2030.
- Strategy to Eradicate Malaria
 - The NSP divides the country into four categories, from 0 to 3. The plan is to eliminate malaria (zero indigenous cases) by 2022 in all Category 1 and 2 districts.
 - The remaining districts are to be brought under a pre-elimination and elimination programme.
 - The NSP also aims to maintain a malaria-free status for areas where transmission has been interrupted.
 - It seeks to achieve universal case detection and treatment services in endemic districts to ensure 100% diagnosis of all suspected cases, and full treatment of all confirmed cases.
 - The plan has four components, based on WHO recommendations: diagnosis and case management; surveillance and epidemic response; prevention — integrated vector management; 'cross-cutting' interventions, which include advocacy, communication, research and development and other initiatives

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