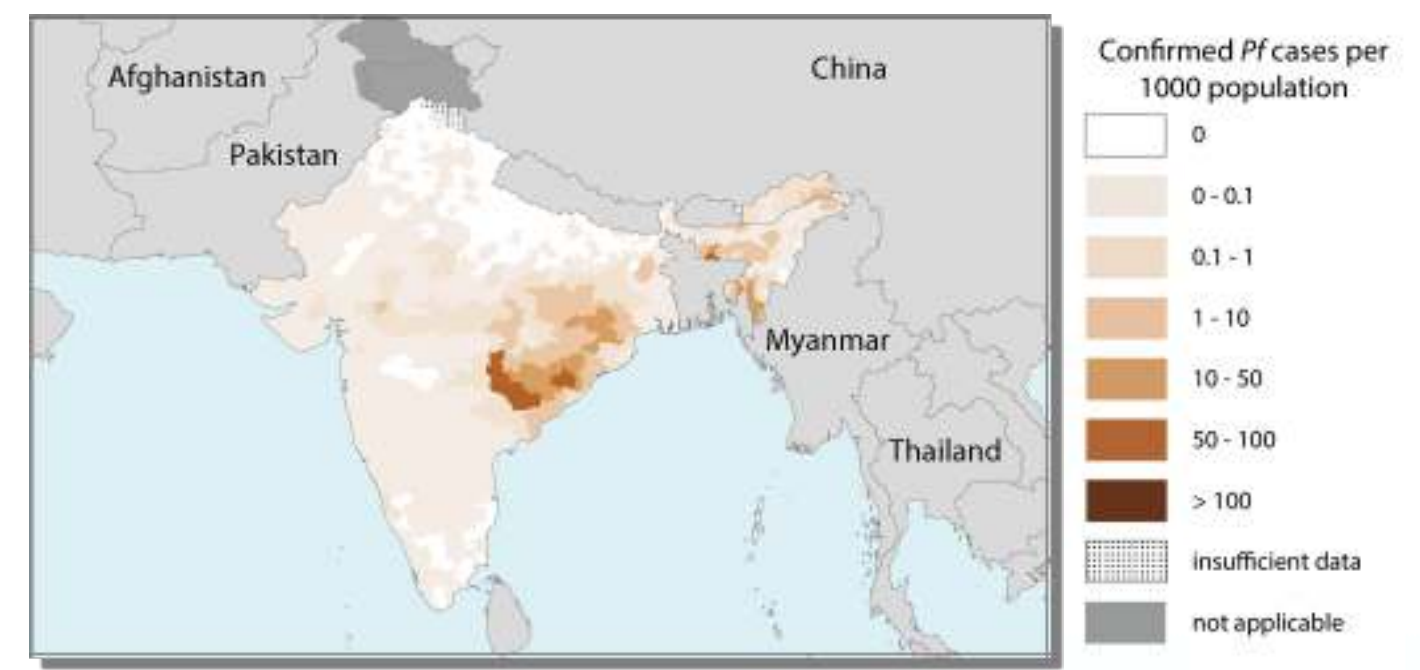
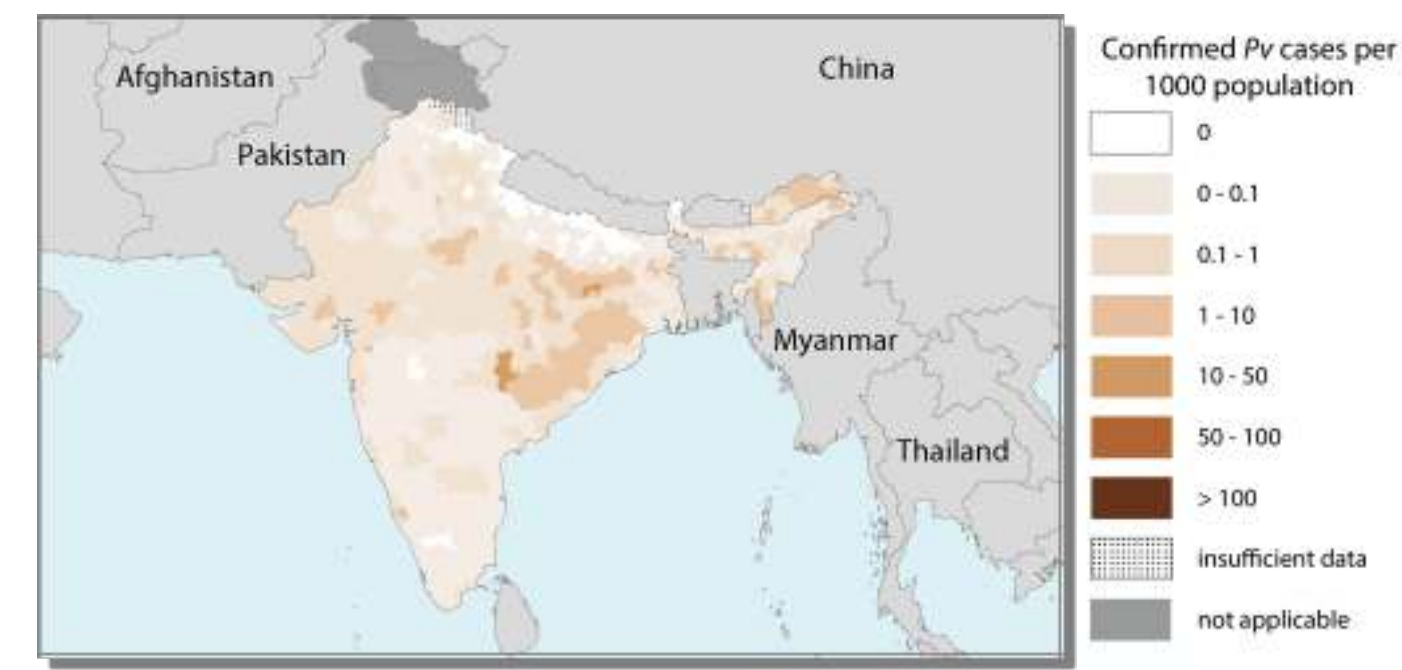


# India

## South-East Asia Region



### I. Epidemiological profile

Population (UN)	2016	%
High transmission (> 1 case per 1000 population)	160,500,000	12
Low transmission (0-1 cases per 1000 population)	1,080,000,000	81
Malaria-free (0 cases)	83,500,000	7
Total	1,328,000,000	

Parasites and vectors			
Plasmodium species:	<i>P. falciparum</i> (66%), <i>P. vivax</i> (34%)		
Major anopheles species:	<i>An. culicifacies</i> , <i>An. fluviatilis</i> , <i>An. stephensi</i> , <i>An. minimus</i> , <i>An. dirus</i> , <i>An. annularis</i>		
Reported confirmed cases (health facility):	1,090,724	Estimated cases:	13 million [9–18 million]
Confirmed cases at community level:	-		
Reported deaths:	331	Estimated deaths:	23,990 [1,600–46,500]

### II. Intervention policies and strategies

Intervention	Policies/strategies	Yes/No	Adopted
ITN	ITNs/ LLINs distributed free of charge	Yes	2001
	ITNs/ LLINs distributed to all age groups	Yes	2001
IRS	IRS is recommended	Yes	1953
	DDT is authorized for IRS	Yes	1953
Larval control	Use of larval control recommended	Yes	-
IPT	IPT used to prevent malaria during pregnancy	N/A	-
Diagnosis	Patients of all ages should receive diagnostic test	Yes	1958
	Malaria diagnosis is free of charge in the public sector	Yes	1953
Treatment	ACT is free of charge for all ages in public sector	Yes	2006
	The sale of oral artemisinin-based monotherapies (oAMTs)	Is banned	2009
	Single dose of primaquine is used as gametocidal medicine for <i>P. falciparum</i>	Yes	1982
	Primaquine is used for radical treatment of <i>P. vivax</i>	Yes	1982
	G6PD test is a requirement before treatment with primaquine	No	-
	Directly observed treatment with primaquine is undertaken	No	-
Surveillance	System for monitoring adverse reactions to antimalarials exists	Yes	-
	ACD for case investigation (reactive)	Yes	-
	ACD of febrile cases at community level (pro-active)	Yes	-
	Mass screening is undertaken	Yes	-
	Uncomplicated <i>P. falciparum</i> cases routinely admitted	No	-
Treatment	Uncomplicated <i>P. vivax</i> cases routinely admitted	No	-
	Foci and case investigation undertaken	No	-
	Case reporting from private sector is mandatory	No	-

Antimalarial treatment policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	CQ	2007
First-line treatment of <i>P. falciparum</i>	AS+SP+PQ; AL	2007
Treatment failure of <i>P. falciparum</i>	QN+D; QN+T	-
Treatment of severe malaria	AM; AS; QN	2007
Treatment of <i>P. vivax</i>	CQ+PQ(14d)	2007
Dosage of Primaquine for radical treatment of <i>P. vivax</i>		0.25 mg/Kg (14 days)
Type of RDT used	P.f + P.v specific (Combo)	

#### Therapeutic efficacy tests (clinical and parasitological failure, %)

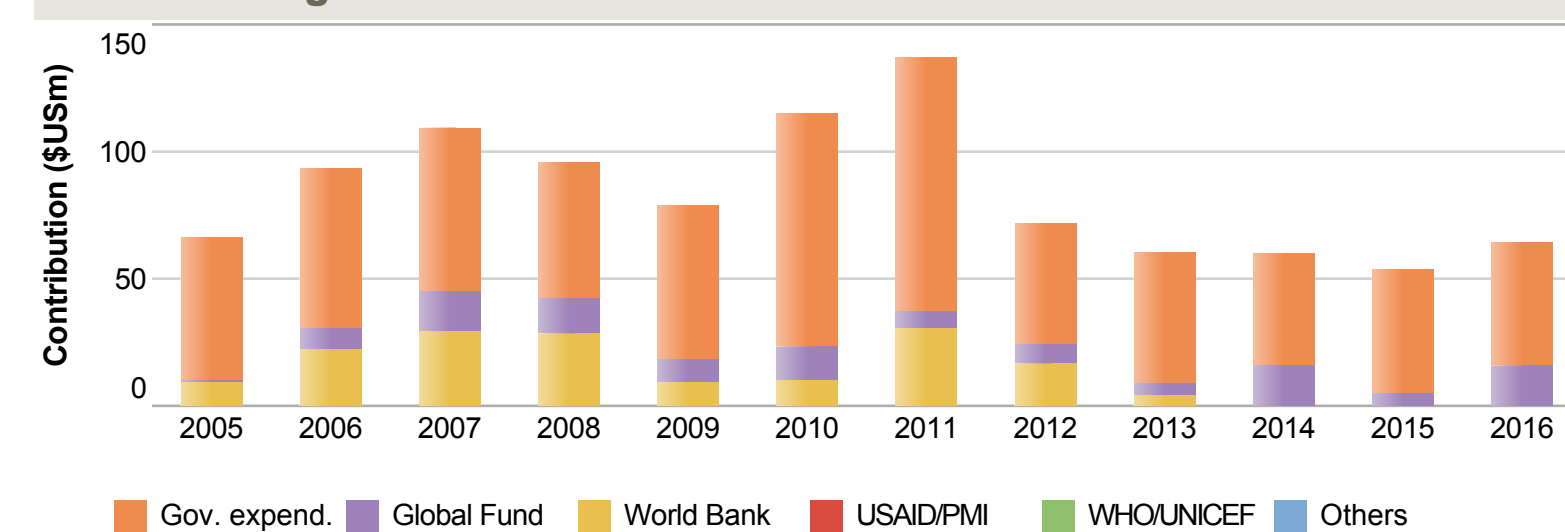
Medicine	Year(s)	Min	Median	Max	Follow-up	No. of studies	Species
AL	2010-2016	0	0	4	28 days	14	<i>P. falciparum</i>
AS+SP	2010-2017	0	0	21.4	28 days	51	<i>P. falciparum</i>
CQ	2010-2016	0	0	0.1	28 days	10	<i>P. vivax</i>

#### Insecticide resistance tests (mosquito mortality, %)

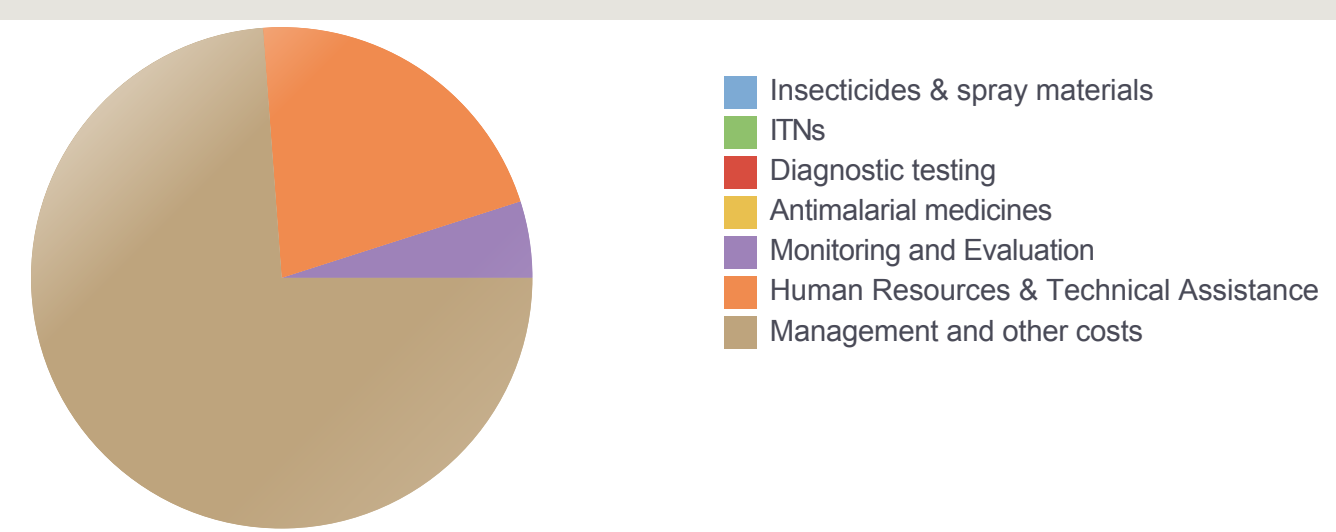
Insecticide class	Years	Min	Mean	Max	No. of sites	Species
Organophosphates	2010-2016	0.3	0.7	1	54	<i>An. culicifacies s.l.</i> , <i>An. fluviatilis</i> , +other
Carbamates	2013-2015	0.3	0.8	1	68	<i>An. culicifacies s.l.</i>
Organochlorines	2010-2016	0	0.4	1	72	<i>An. culicifacies s.l.</i> , <i>An. fluviatilis</i> , +other
Pyrethroids	2010-2016	0	0.8	1	185	<i>An. culicifacies s.l.</i> , <i>An. fluviatilis</i> , +other

### III. Financing

#### Sources of financing

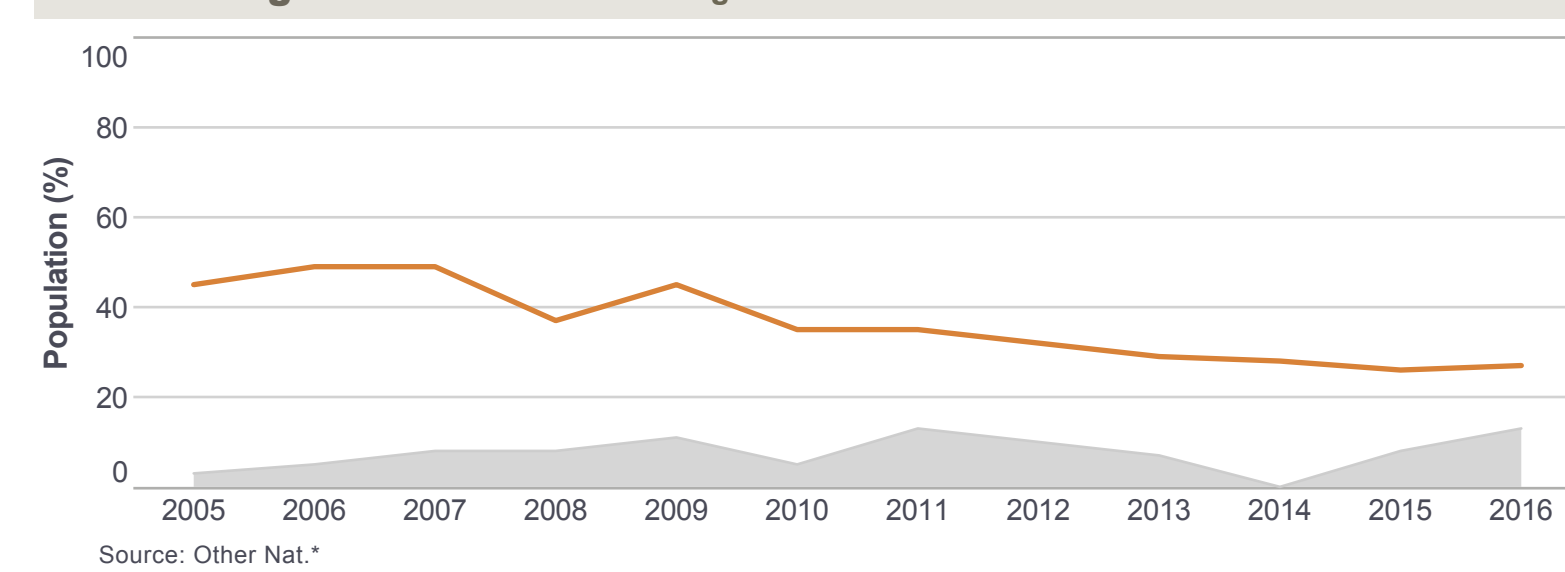


#### Government expenditure by intervention in 2016

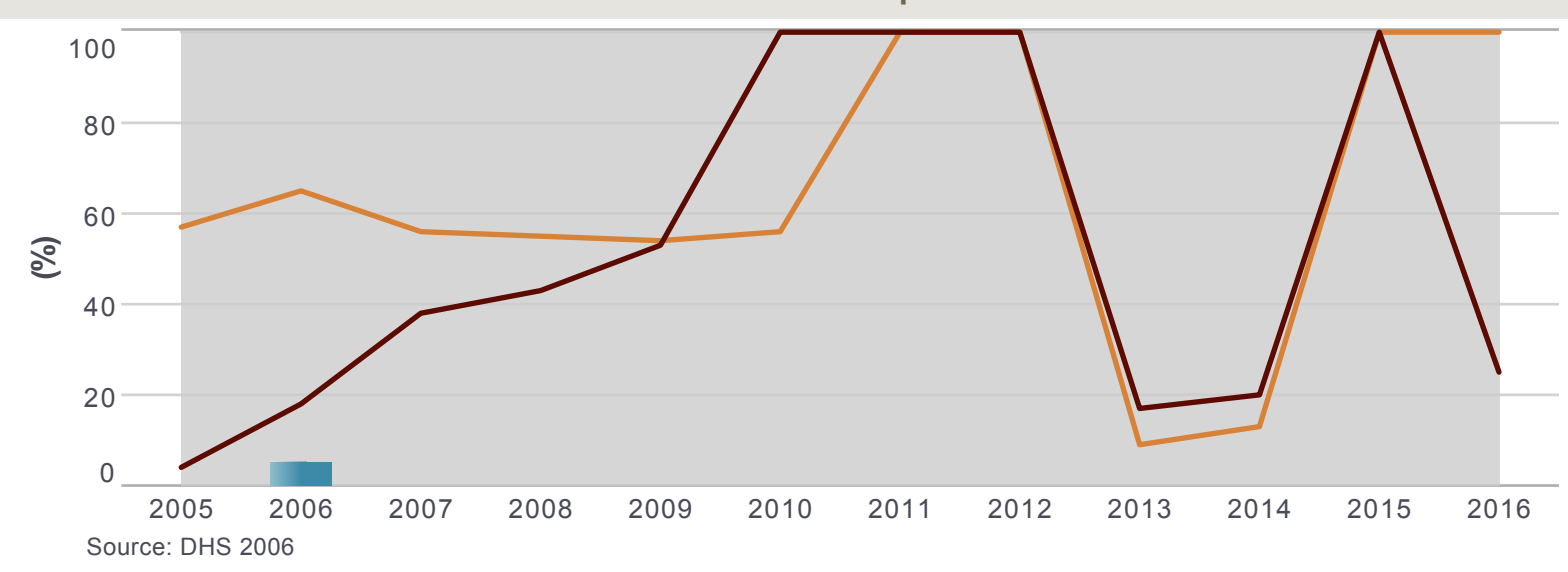


### IV. Coverage

#### Coverage of ITN and IRS



#### Cases tested and treated in public sector

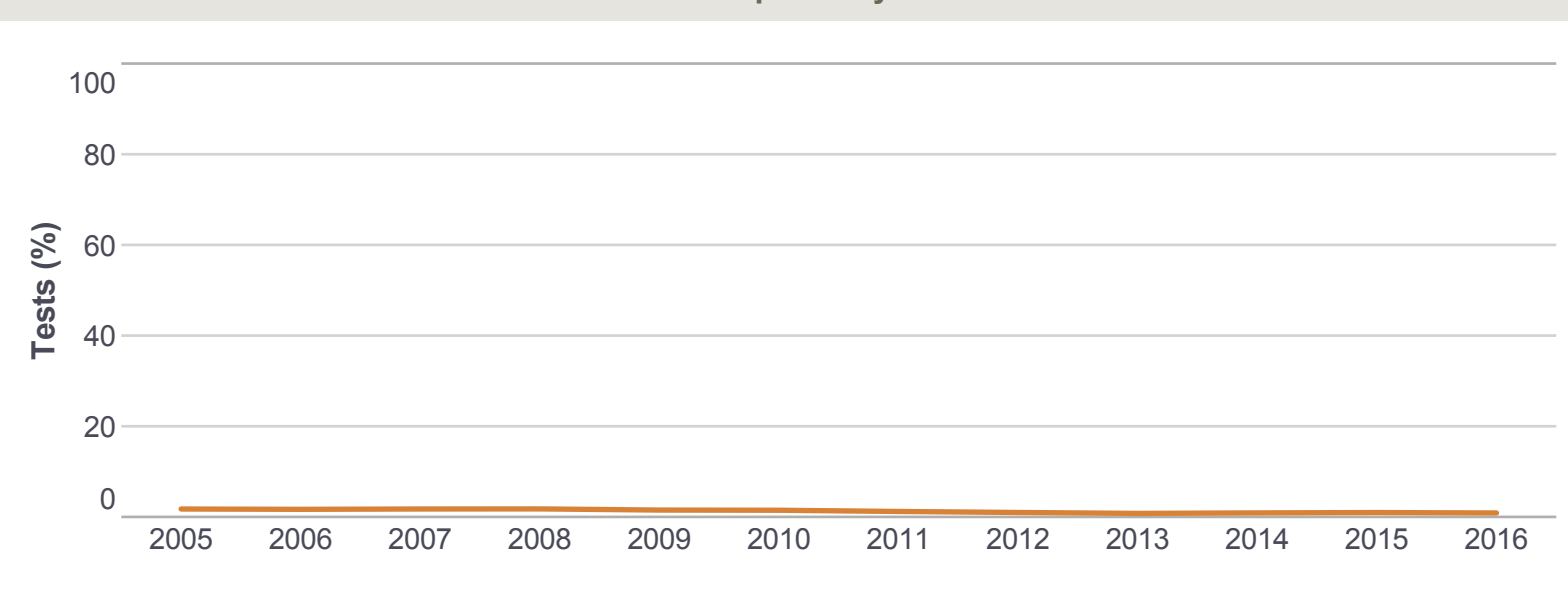


### V. Impact

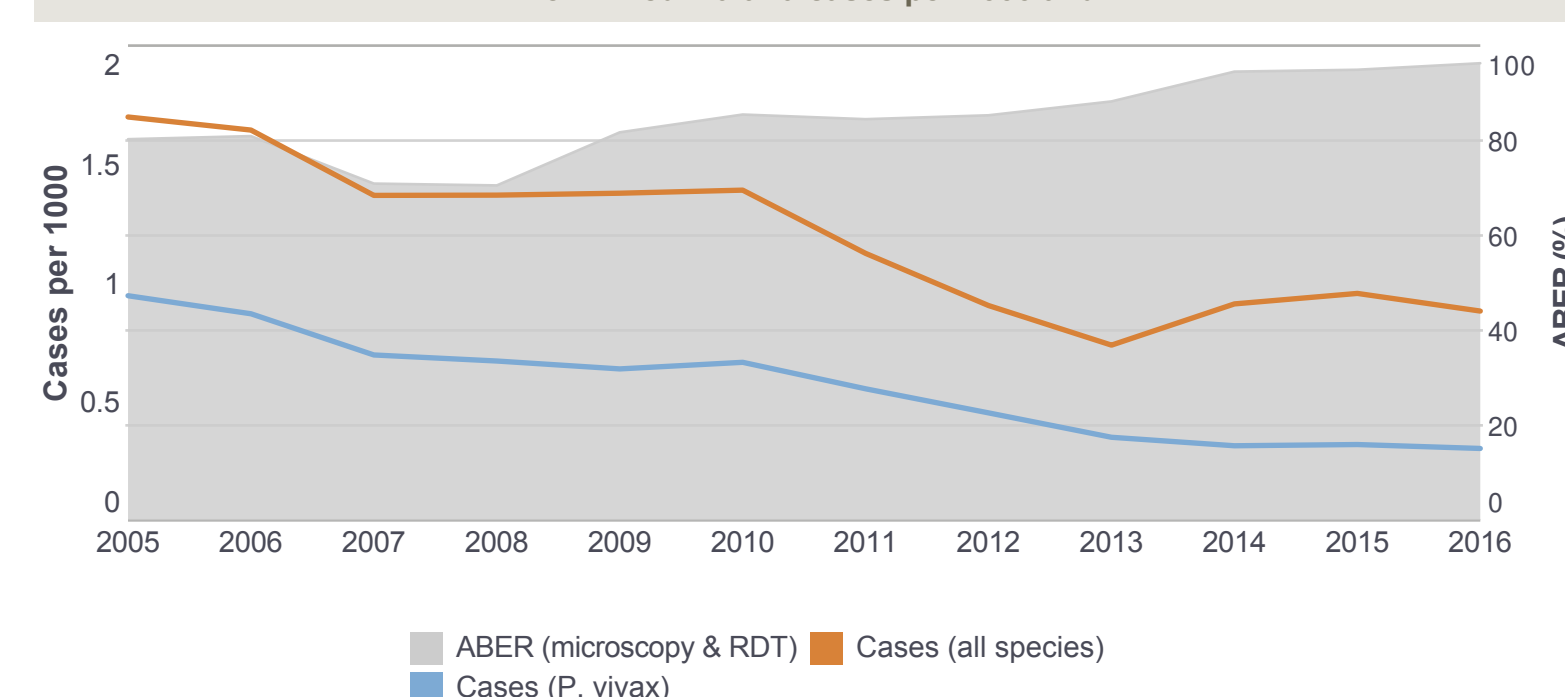
#### Cases treated



#### Test positivity



#### Confirmed malaria cases per 1000 and ABER



#### Malaria admissions and deaths (per 100 000)

