



I. Epidemiological profile

Population (UN Population Division)	2012	%
High transmission (>1 case per 1000 population)	167 000	4
Low transmission (0–1 cases per 1000 population)	2 710 000	71
Malaria-free (0 cases)	928 000	24
Total	3 805 000	

Parasites and vectors	
Major plasmodium species:	<i>P. falciparum</i> (0%), <i>P. vivax</i> (100%)
Major anopheles species:	<i>An. albimanus</i> , <i>pseudopunctipennis</i> , <i>punctimacula</i> , <i>aquasalis</i> , <i>darlingi</i>
Programme phase: Control	

II. Intervention policies and strategies

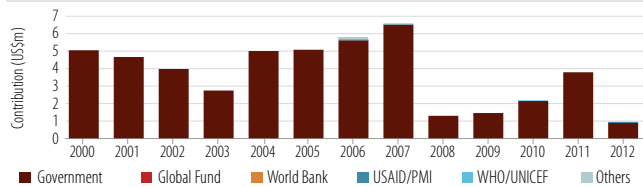
Intervention	Policies/strategies	Yes/No	Year adopted
ITN	ITNs/LLINs distributed free of charge	No	–
	ITNs/LLINs distributed to all age groups	No	–
IRS	IRS is recommended	No	–
	DDT is used for IRS	No	–
Larval control	Use of larval control	Yes	1957
IPT	IPT used to prevent malaria during pregnancy	N/A	–
Diagnosis	Patients of all ages should receive diagnostic test	Yes	1957
	Malaria diagnosis is free of charge in the public sector	Yes	1957
Treatment	ACT is free for all ages in public sector	Yes	–
	Artemisinin-based monotherapies withdrawn	–	–
	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for <i>P. falciparum</i>	Yes	–
	Primaquine is used for radical treatment of <i>P. vivax</i>	Yes	–
	G6PD test is a requirement before treatment with primaquine	No	–
	Directly observed treatment with primaquine is undertaken	Yes	–
	System for monitoring of adverse reaction to antimalarials exists	No	–

Intervention	Policies/strategies	Yes/No	Year adopted
Surveillance	ACD for case investigation (reactive)	Yes	–
	ACD at community level of febrile cases (pro-active)	Yes	–
	Mass screening is undertaken	Yes	–
	Uncomplicated <i>P. falciparum</i> cases routinely admitted	No	–
	Uncomplicated <i>P. vivax</i> cases routinely admitted	No	–

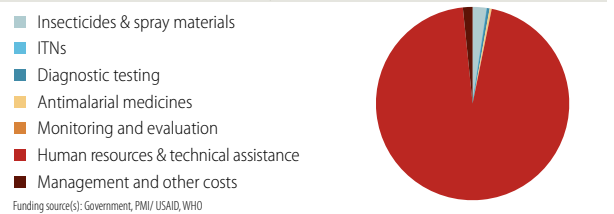
Antimalarial treatment policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	–	–
First-line treatment of <i>P. falciparum</i>	AL	2012
For treatment failure of <i>P. falciparum</i>	–	–
Treatment of severe malaria	MQ	–
Treatment of <i>P. vivax</i>	CQ+PQ(7d);CQ+PQ(14d)	–
Dosage of primaquine for radical treatment of <i>P. vivax</i>	0.25 mg/kg (14 days)	–
Type of RDT used	–	–

Therapeutic efficacy tests (clinical and parasitological failure, %)							
Medicine	Year	Min	Median	Max	Follow-up	No. of studies	Species

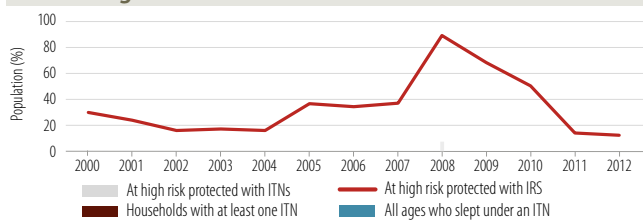
III. Financing



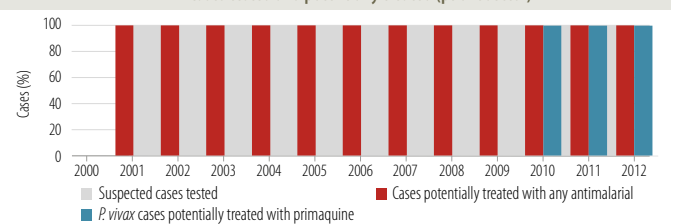
Expenditure by intervention in 2012



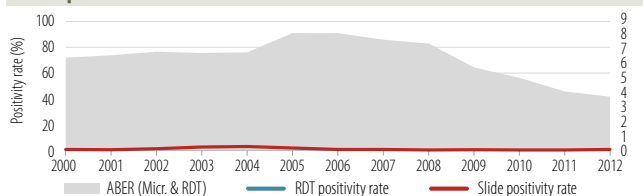
IV. Coverage



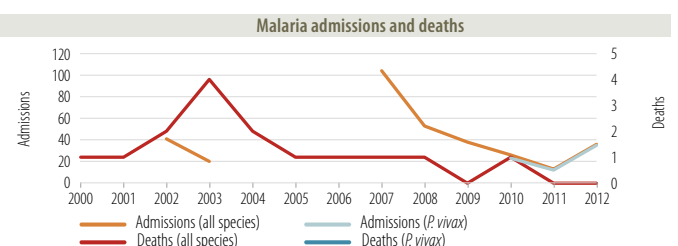
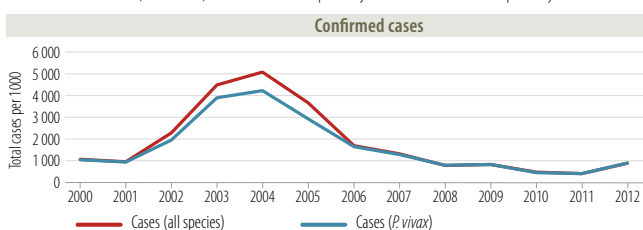
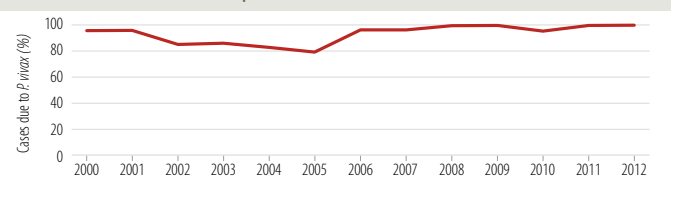
Cases tested and potentially treated (public sector)



V. Impact



Proportion of malaria cases due to *P. vivax*



Impact: <50% decrease in incidence projected 2000–2015