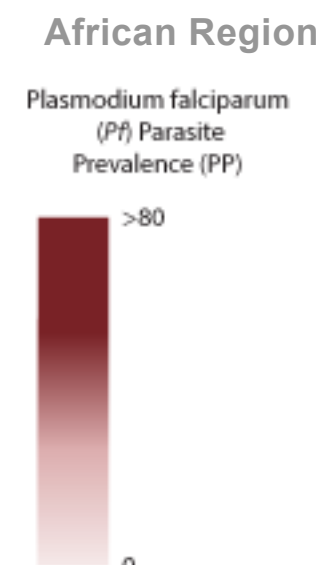
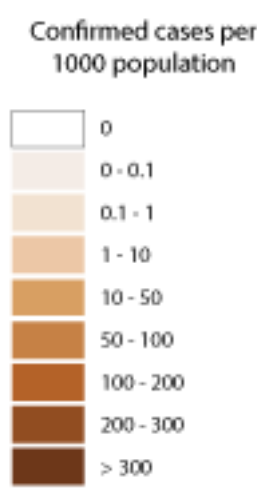
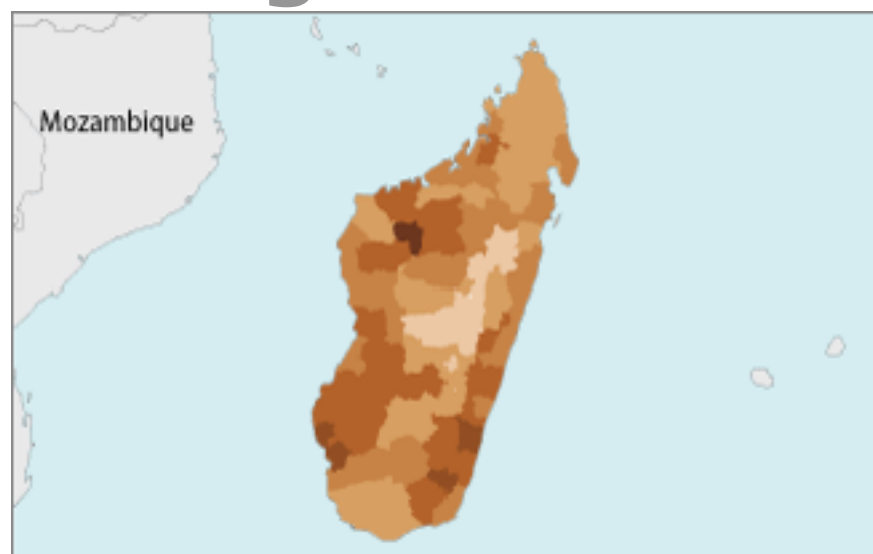


# Madagascar



## I. Epidemiological profile

Population (UN)	2015	%	Parasites and vectors
High transmission (> 1 case per 1000 population)	21,300,000	88	Plasmodium species: <i>P. falciparum</i> (96%), <i>P. vivax</i> (4%)
Low transmission (0-1 cases per 1000 population)	2,960,000	12	Major anopheles species: <i>An. funestus</i> , <i>An. gambiae</i> , <i>An. arabiensis</i>
Malaria-free (0 cases)	0	-	Reported confirmed cases (health facility): 744,103    Estimated cases: 2,400,000 [1,500,000 ; 4,000,000]
Total	24,240,000		Confirmed cases at community level: 193,138 Reported deaths: 841    Estimated deaths: 6,000 [180 ; 13,000]

## II. Intervention policies and strategies

Intervention	Policies/strategies	Yes/No	Adopted
ITN	ITNs/ LLINs distributed free of charge	Yes	2004
	ITNs/ LLINs distributed to all age groups	Yes	2009
IRS	IRS is recommended	Yes	1993
	DDT is authorized for IRS	No	-
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	2006
	Malaria diagnosis is free of charge in the public sector	Yes	2006
Treatment	ACT is free of charge for all ages in public sector	Yes	2006
	The sale of oral artemisinin-based monotherapies (oAMTs)	Is banned	2006
	Single dose of primaquine is used as gametocidal medicine for <i>P. falciparum</i>	Yes	2015
	Primaquine is used for radical treatment of <i>P. vivax</i>	No	-
	G6PD test is a requirement before treatment with primaquine	No	-
	Directly observed treatment with primaquine is undertaken	Yes	2015
	System for monitoring adverse reactions to antimalarials exists	Yes	2008
Surveillance	ACD for case investigation (reactive)	Yes	2003
	ACD of febrile cases at community level (pro-active)	Yes	1993
	Mass screening is undertaken	Yes	2003
	Uncomplicated <i>P. falciparum</i> cases routinely admitted	Yes	2006
	Uncomplicated <i>P. vivax</i> cases routinely admitted	No	-
	Foci and case investigation undertaken	-	-
Case reporting from private sector is mandatory	Yes	2008	

Antimalarial treatment policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	AS+AQ	2006
First-line treatment of <i>P. falciparum</i>	AS+AQ	2006
Treatment failure of <i>P. falciparum</i>	QN	2006
Treatment of severe malaria	QN	2006
Treatment of <i>P. vivax</i>	-	-
Dosage of Primaquine for radical treatment of <i>P. vivax</i>		0.25 mg/Kg (14 days)
Type pf RDT used		P.f + all species (Combo)

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

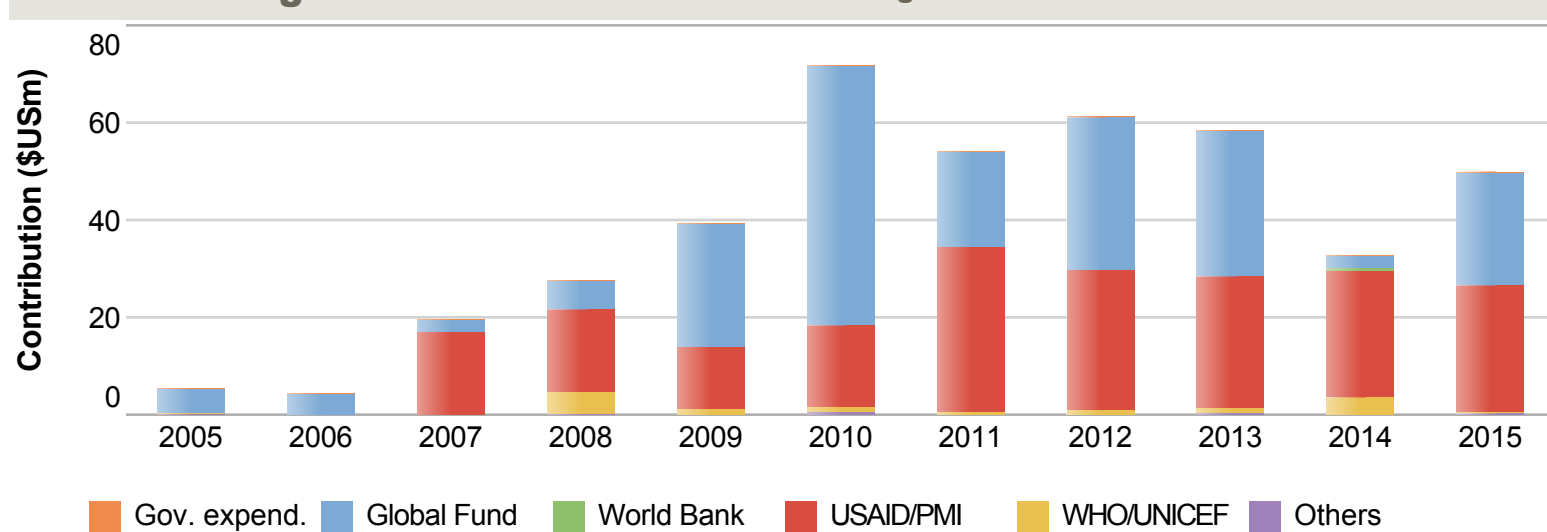
Medicine	Year	Min	Median	Max	Follow-up	No of studies	Species
AL	2006-2006	1.7	1.7	1.7	28 days	1	<i>P. falciparum</i>
AS+AQ	2006-2013	0	0	8.7	28 days	18	<i>P. falciparum</i>

### Insecticide susceptibility bioassays (reported resistance to at least one insecticide for any vector at any locality)

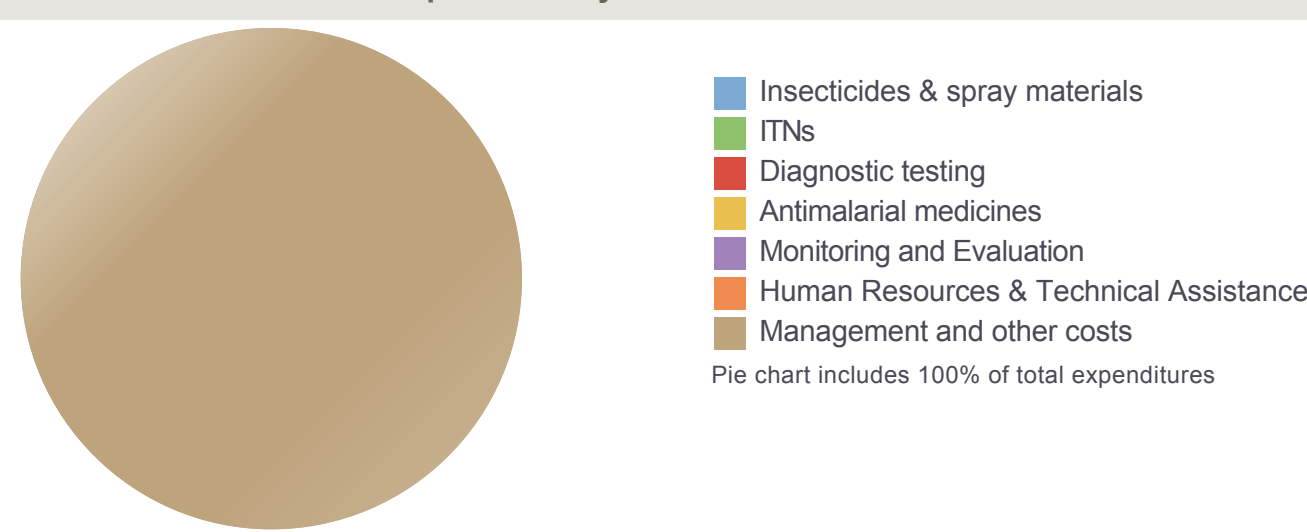
Year	Pyrethroid	DDT	Carbamate	Organophosphate	Species/complex tested
2010-2015	Yes	Yes	Yes	No	<i>An. funestus</i> s.l., <i>An. gambiae</i> s.l., <i>An. mascarensis</i>

## III. Financing

### Sources of financing

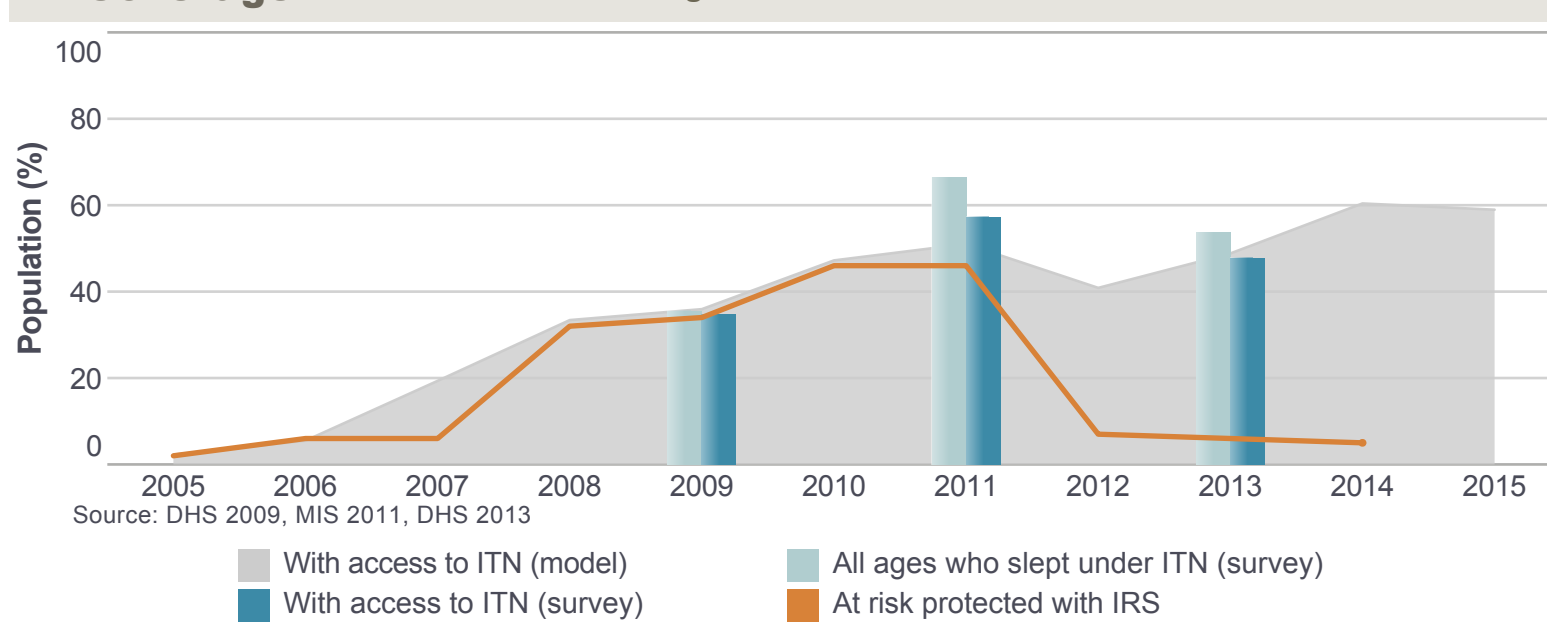


### Government expenditure by intervention in 2015

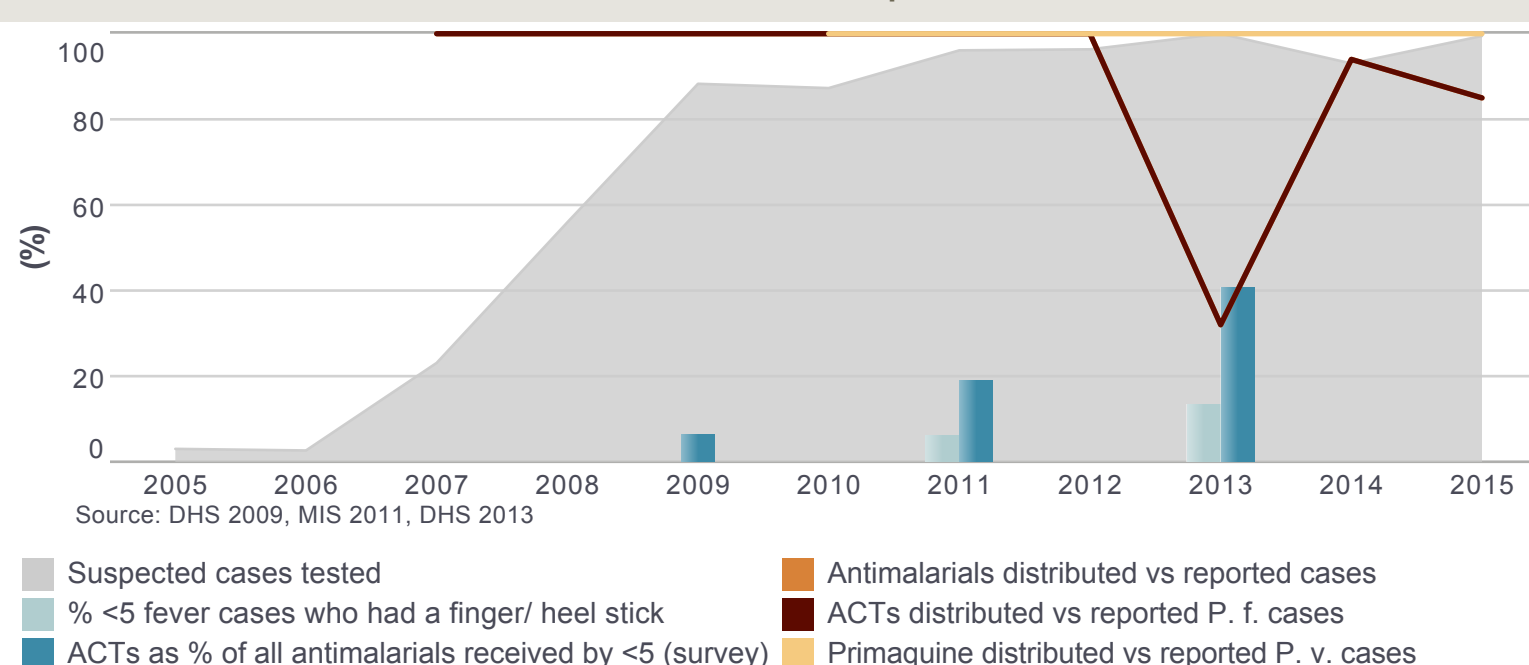


## IV. Coverage

### Coverage of ITN and IRS

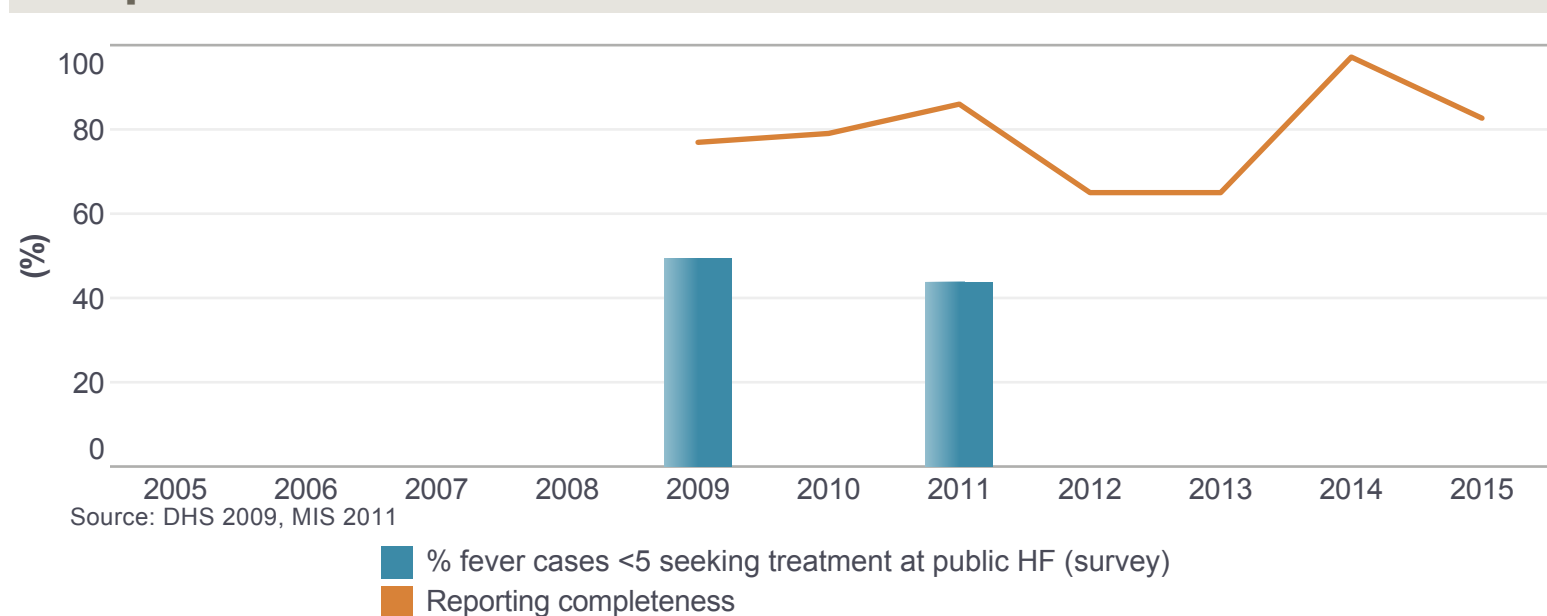


### Cases tested and treated in public sector

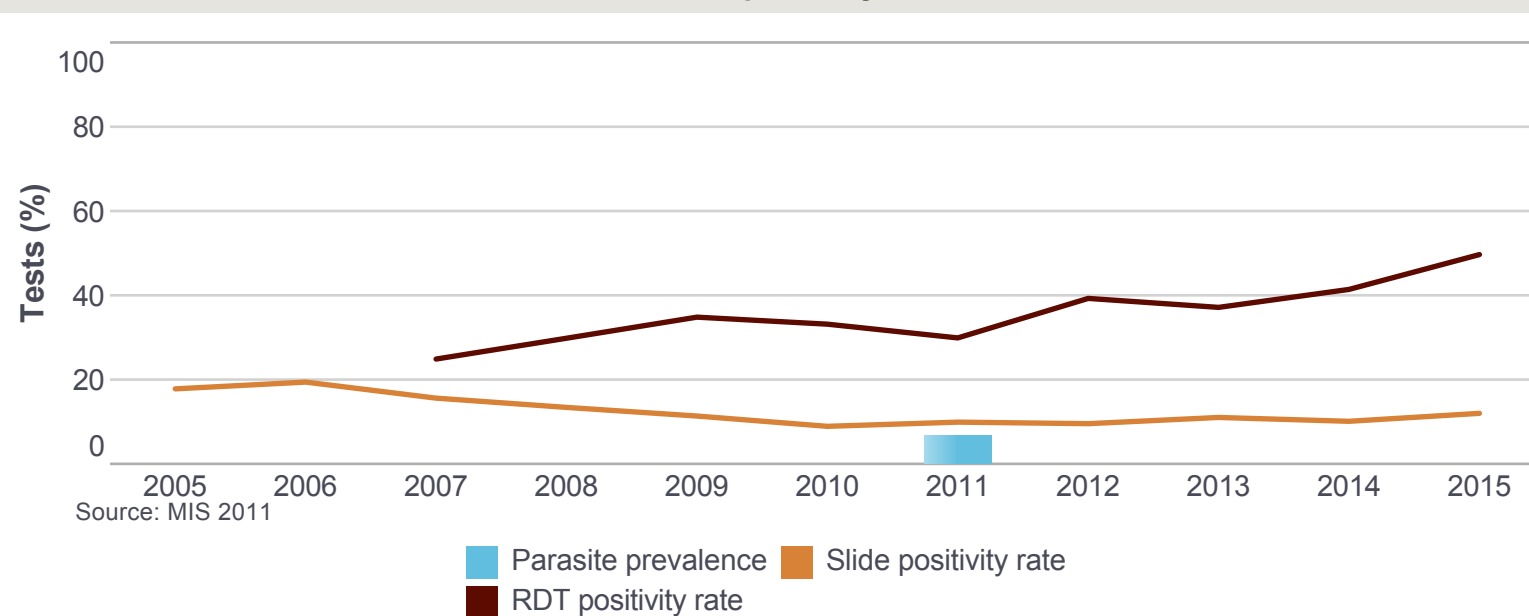


## V. Impact

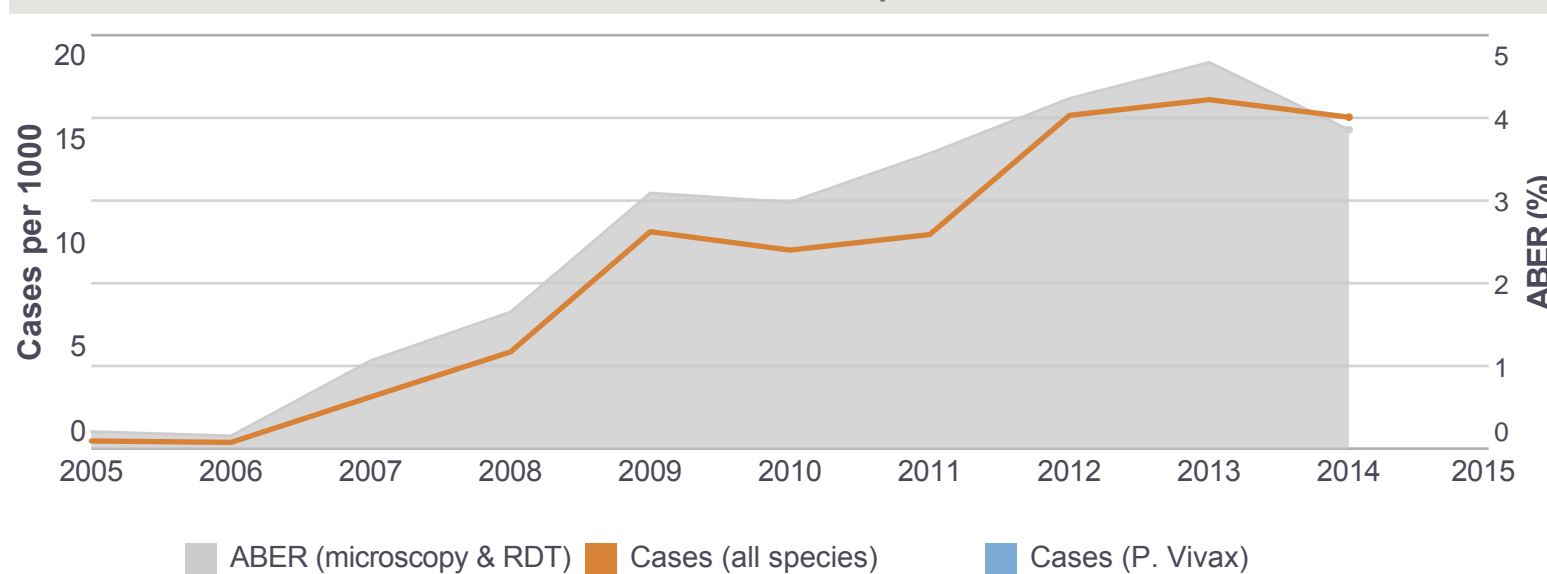
### Cases treated



### Test positivity



### Confirmed malaria cases per 1000 and ABER



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

