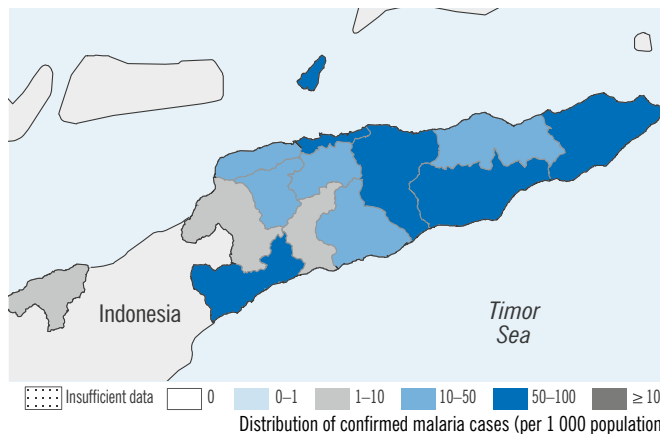


# Democratic Republic of Timor-Leste

Phase: Control. Coverage: In 2010, ITN/LLINs delivered were sufficient to protect >50% of the population at high risk.



## I. EPIDEMIOLOGICAL PROFILE

Population (UN Population Division)	2010	%
High transmission ( $\geq 1$ case per 1000 population)	866 000	77
Low transmission (0-1 cases per 1000 population)	259 000	23
Malaria-free (0 cases)	0	0
Total	1 125 000	

### Parasites and vectors

Major plasmodium species: *P. falciparum* (72%), *P. vivax*  
 Major anopheles species: *An. subpictus*

## II. INTERVENTION POLICIES AND STRATEGIES

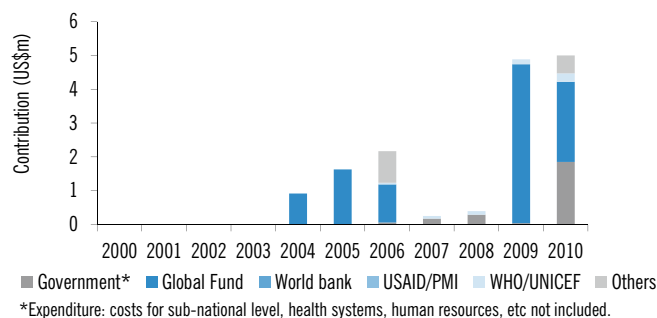
Intervention	WHO-recommended policies/strategies	Yes/No	Year adopted
ITN	ITNs/ LLINs: distributed free of charge	Yes	2003
	ITNs/ LLINs: distributed to all age groups	Yes	2007
IRS	IRS is recommended	Yes	2006
	DDT is used for IRS	No	-
IPT	IPT used to prevent malaria during pregnancy	NA	-
Case management	Patients of all ages should receive diagnostic test	Yes	2007
	RDTs used at community level	Yes	2007
	ACT is free for all ages in public sector	Yes	2007
	Pre-referral treatment with recommended medicines	Yes	2007
	Oral artemisinin-based monotherapies are not registered	Yes	2007

Antimalarial policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	-	-
First-line treatment of <i>P. falciparum</i>	AL	-
Treatment failure of <i>P. falciparum</i>	QN + D	-
Treatment of severe malaria	AM ;QN	-
Treatment of <i>P. vivax</i>	CQ + PQ(14d)	-

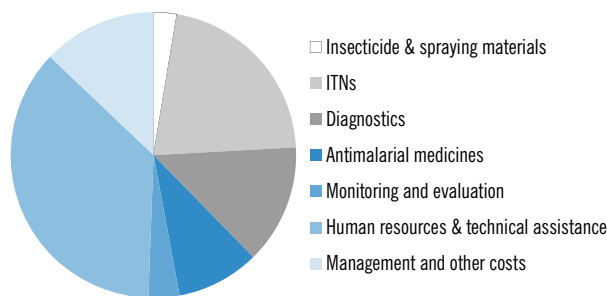
### Therapeutic efficacy tests (therapeutic or parasitological failure, %)

Medicine	Year	No. of Studies	Min	Median	Max	Follow-up
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## III. FINANCING – Government and external financing

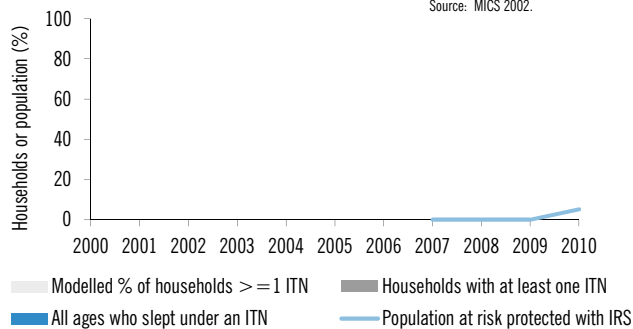


## Expenditure by intervention in 2010

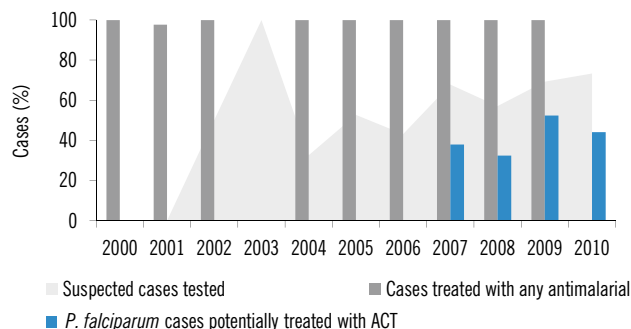


## IV. COVERAGE – Coverage of ITN and IRS

Source: MICS 2002.



## Cases tested and ACT delivered: Programme data (public sector)



## V. IMPACT – Malaria test positivity rate and ABER

## Confirmed cases, admissions and deaths (per 100 000)

