

# Malaria Situation in South-East Asia Region: Country Reports



## Bangladesh

Malaria has been a major public health problem in Bangladesh. Approximately 33.6% of the total population is at risk of malaria with a majority of cases reported from 13 of the 64 districts in the country. Malaria cases are grossly under-reported due to shortcomings in surveillance and information.

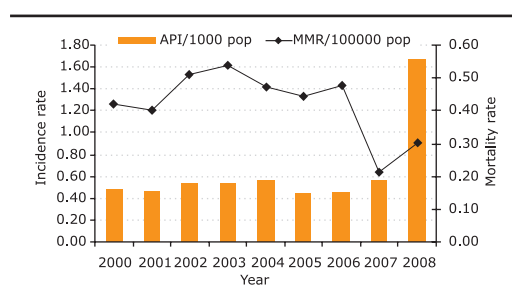
The country is reporting an average of 50,000 confirmed malaria cases with nearly 70% of Pf cases (killer malaria) and 450 malaria deaths annually. Case finding is very poor with <2% of the population at risk of malaria screened every year. In 2008, with the support of the Global Fund enhanced surveillance and case finding activities including vector control through bednets and treatment through ACTs resulted in a high increase in lab confirmed cases and a significant decrease in probable malaria cases and malaria deaths. The malaria control programme is promoting LLINs & ITNs amongst the community as a vector control measure in these areas which has increased significantly in recent years. A total of 2.57 million bednets (LLINs + ITNs) were distributed and 6.42 million people covered by it. However, its coverage in high endemic districts ranges between 40% to 63%.

### Malaria situation at a glance: 2008

Total population	: 150.4 million
Population in malarious areas	: 50.6 million
Number of Lab confirmed malaria cases	: 84,690
Number of probable malaria cases	: 83,972
<i>P. falciparum</i> proportion	: 83%
Number of deaths due to malaria	: 154 (Reported)
No. of treatment courses of ACTs delivered	: 110,280
No of LLINs distributed	: 1.2 million
No. of effective LLINs+ITNs (cumulative) availability	: 2.6 million
Population protected with LLINs+ITNs	: 6.4 million
Population protected with IRS	: Not done

- Supported by Global Fund

**Reported malaria incidence (confirmed cases) and malaria mortality in Bangladesh, 2000 - 2008**



### Achievement and initiatives in 2008

- 1.2 million LLINs procured and distributed.
- 0.66 million ITNs done with K-O tab.
- 412,500 RDT for pf procured/used.
- 225,270 courses of ACT procured/used.
- Malaria CFR reduced.
- Doctors, nurses, paramedics and field workers trained.
- Malaria treatment regimen updated.
- Public-private partnership established

### Programme goals and targets

To reduce malaria morbidity and mortality until the disease is no longer a public health problem in the country.

Targets	Baseline data in 2005	2010
To provide early diagnosis and prompt treatment (EDPT) with effective drugs to 80% of malaria patients	40%	80%
To provide effective malaria prevention to 80% of population at risk	24%	80%
To strengthen malaria epidemiological surveillance system	60%	100%
To establish Rapid Response Team (RRT) at national and district levels and increase preparedness and response capacity for containment of outbreaks	80%	100%
To promote community participation, and strengthen partnership with private sector and NGOs for malaria control	25%	80%

### Partners and donors

- WHO
- World Bank
- Global Fund
- BRAC and 14-member NGO Consortium
- Four local NGOs in Chittagong Hill Tract (CHT)

### Issues and challenges

- Inadequate access to treatment and diagnostic facilities especially in remote areas.
- Inadequate programme management capacity at various levels and management of severe malaria in hospitals.
- Poor coverage of prevention and control methods (IRS, ITN/LLIN coverage still low) in the community.
- Referral system is weak and pre-referral treatment provisions are limited.
- Optimum treatment of cases of severe malaria in different categories of hospitals is inadequate.
- Cross-border malaria at the Bangladesh, India and Bangladesh-Myanmar border.

### Best practices and success stories

- Establishment of partnership with NGO consortium.
- Promotion and use of ITNs/LLINs.
- Quality diagnosis using RDT and effective treatment using ACTs.