

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



## Bhutan

Malaria is a serious public health problem in Bhutan. 74% of the total population is at risk of malaria in Bhutan. The southern part of the country bordering eastern part of India, malaria remains a big problem for malaria control. 45% of all confirmed malaria cases are *P. falciparum*. A very high Percentage of malaria cases occur in forests and forest-fringe areas where access is difficult. Indoor Residual Spray (IRS) and Long Lasting Insecticide treated bednets (ITNs / LLINs) are used as vector control measures. Human migration within the country is also a problem. Emphasis is being placed on multisectoral involvement in malaria vector control.

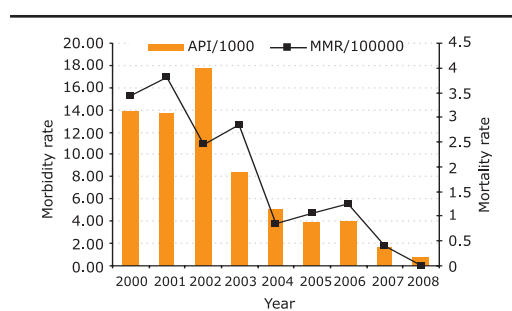
Since last three years, country is reporting around 500 confirmed cases and 5 deaths annually. The confirmed cases showing a steep decline since 2000. More than 10% of the population at risk of malaria are being diagnosed with microscopically / RDT annually. More than 80% of the population in the areas with high risk of malaria are covered under IRS and ITNs /LLINs. ACT was adopted in 2005 as treatment policy and made available through public sector without charge. Malaria control is financed mainly by external donors viz., Global Fund and by GOI under bilateral arrangement. In 2008, total budget for malaria from all the sources was USD 992000.

### Malaria situation at a glance: 2008

Total population	: 660,070
Population in malarious areas	: 487,523
Number of lab confirmed malaria cases	: 329
<i>P. falciparum</i> proportion	: 55%
Number of probable malaria cases	: 0
Number of deaths due to malaria	: 97 (Reported)
Cases treated with ACTs	: 181
No of LLINs distributed	: 10,000
No. of effective LLINs+ITNs (cumulative) availability	: 162,832
Population protectedwith ITNs	: 407,080
Population protectedwith IRS	: 97,494

- No epidemics reported in 2008.
- Supported by Global Fund

### Reported malaria incidence of confirmed cases and malaria mortality in Bhutan, 2000 - 2008



### 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 reduce the morbidity by 50%of the rate in 2000 by the year	13.9 / 1000	6.95/ 1000
To reduce the mortality by 75%of the rate in 2000 by the year	2.5 / 100000	0.63/ 100000

### Partners and donors

- WHO
- Global Fund
- Government of India

### Achievement and initiatives in 2008

- Confirmed malaria cases reduced significantly and had reached at the lowest level.
- No outbreak reported
- Strengthen the entomological capacity in field level staff.
- Sensitized the district level personal on IVM
- Trained the district level officials upon use of GPS and GIS mapping tool
- Developed SOP for malaria microscopy
- Developed BBC strategy
- Revised the malaria chapter for village Health worker (VHW)

### Issues and challenges

- Drug resistant malaria falciparum.
- Lack of resources, intersectoral collaboration and trained manpower.
- Weak programme management and inadequate health infrastructure.
- Uncontrolled population movement.
- Difficulty in establishing institutional linkage for enabling malaria – specific operational research activities.

### Best practices and success stories

- IVM (Loins, focal IRS, barricading, EM).
- Monthly vector control efficacy studies.
- ACT for uncomplicated *P. falciparum* malaria.
- Free health facility to all.
- Weekly fever reporting for outbreak control.