



# Status of Severe Malaria – Country Experiences and Best Practices

## NMEP Nigeria

### RBM Case Management WG

### Kigali Rwanda

### 24 September 2024

**Vision - a Malaria free Nigeria;**

*Goal – to achieve a parasite prevalence of less than 10% and reduce mortality attributable to malaria to less than 50 deaths per 1,000 live births by*

*2025*



# Nigeria Malaria Strategy

- Nigeria currently implements the National Malaria Strategic Plan (NMSP 2021 – 2025) with the goal of
  - ✓ Achieving a parasite prevalence of less than 10% and reduce mortality attributable to malaria to less than 50 deaths per 100,000 livebirths by 2025.
- A pivotal strategy to achieve this goal as contained in the NMSP is under Objective 2, speaking to severe malaria intervention strategy
  - ✓ **Strategy 2.3: Ensure appropriate treatment for individuals with confirmed malaria with effective antimalarial medicines**
    - 2.3.1. Provision of treatment services for uncomplicated malaria in public and private health facilities and the community level.
    - 2.3.2. Strengthen capacity of public and private facilities for management of severe malaria.
    - 2.3.3. Scale-up community case management of malaria as a component of iCCM through the CHIPS programme, especially in hard-to-reach areas.





# National Guidelines Recommendations (4<sup>th</sup> Edition – 2020)

Severe malaria is a medical emergency. After rapid clinical assessment and confirmation of diagnosis where feasible, commence immediate treatment with parenteral medication.

## Parenteral medication

Intravenous Artesunate is the first treatment of choice for severe *Plasmodium falciparum* malaria.

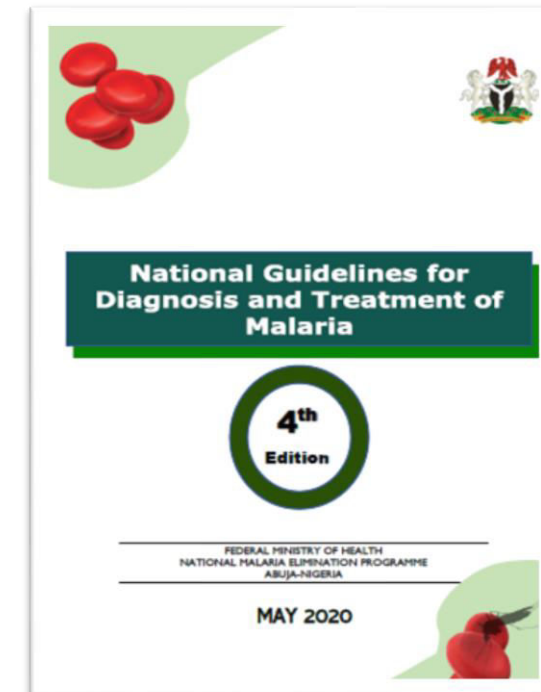
- Artesunate alternatives:
  - Intravenous Arthemeter
  - Intravenous Quinine

Complete course (3-Days) of an oral ACT



## Pre-referral treatment

Rectal Artesunate Suppository recommended for pre-referral treatment at community and PHC level for children under 6 years

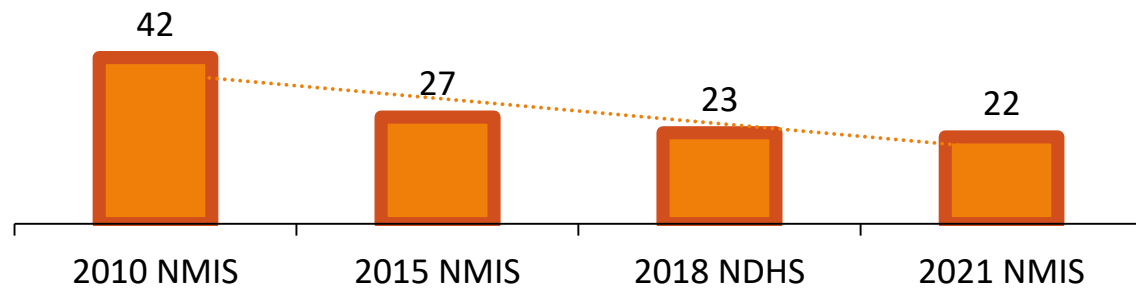




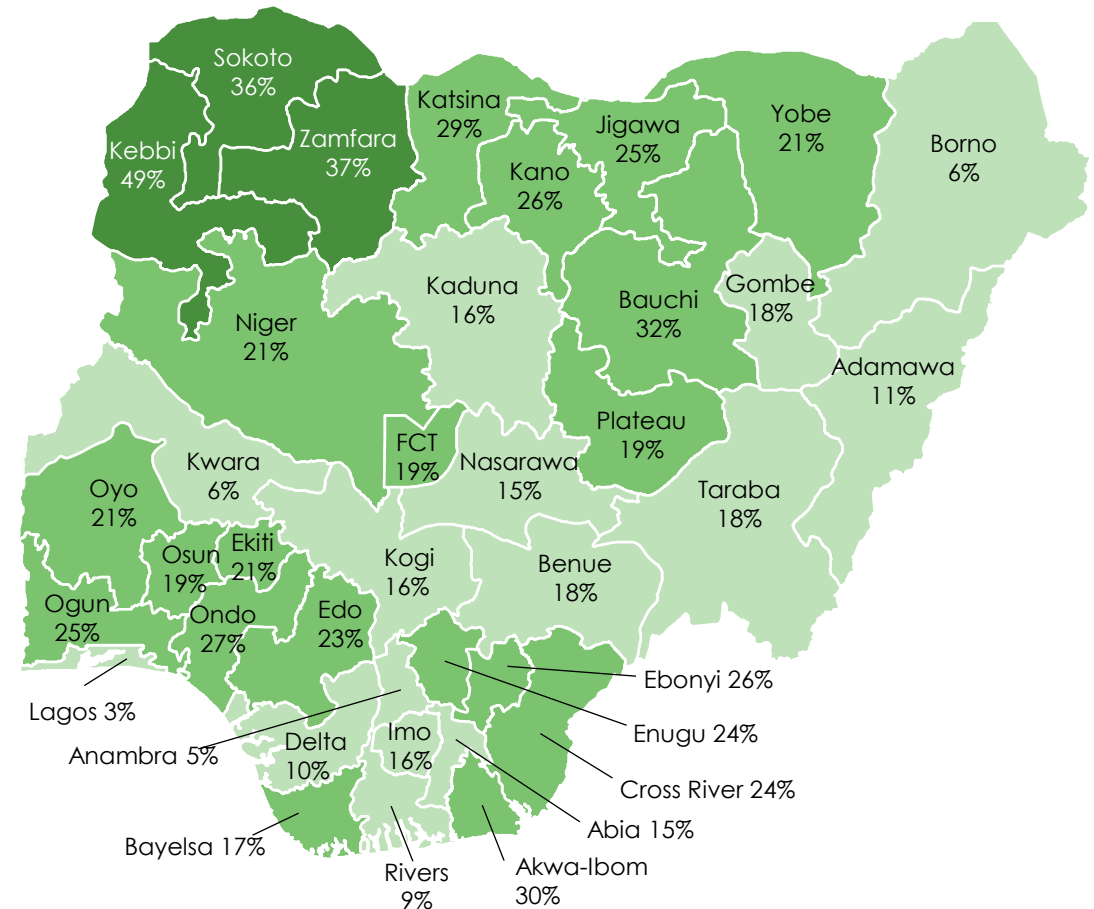
# Trends in Malaria Prevalence

Overall, while Nigeria has made substantial progress in reducing malaria prevalence nationally, regional disparities remain, especially in the north

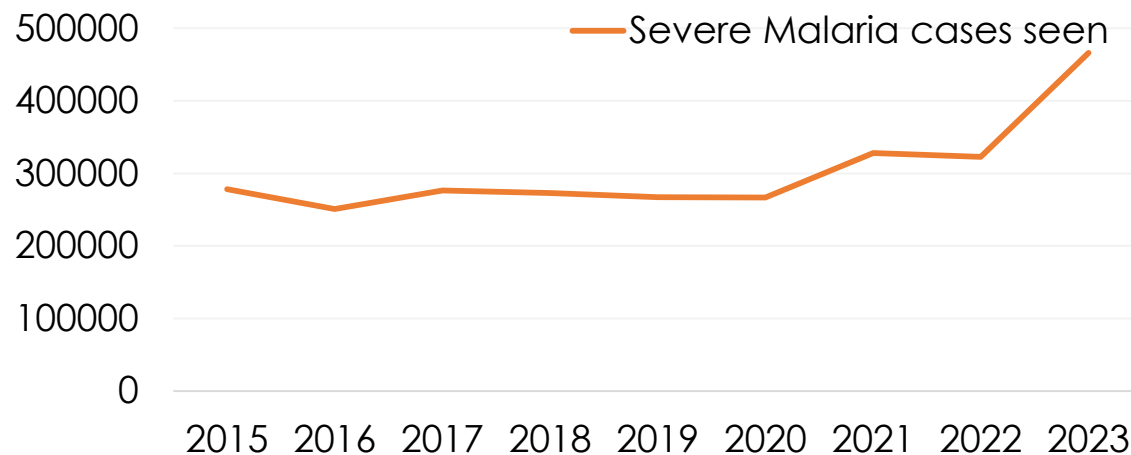
Percent of children aged 6-59 months who tested positive for malaria by microscopy (2010-2021)



Percent of children aged 6-59 months who tested positive for malaria by microscopy (MIS 2021)



Severe Malaria cases seen





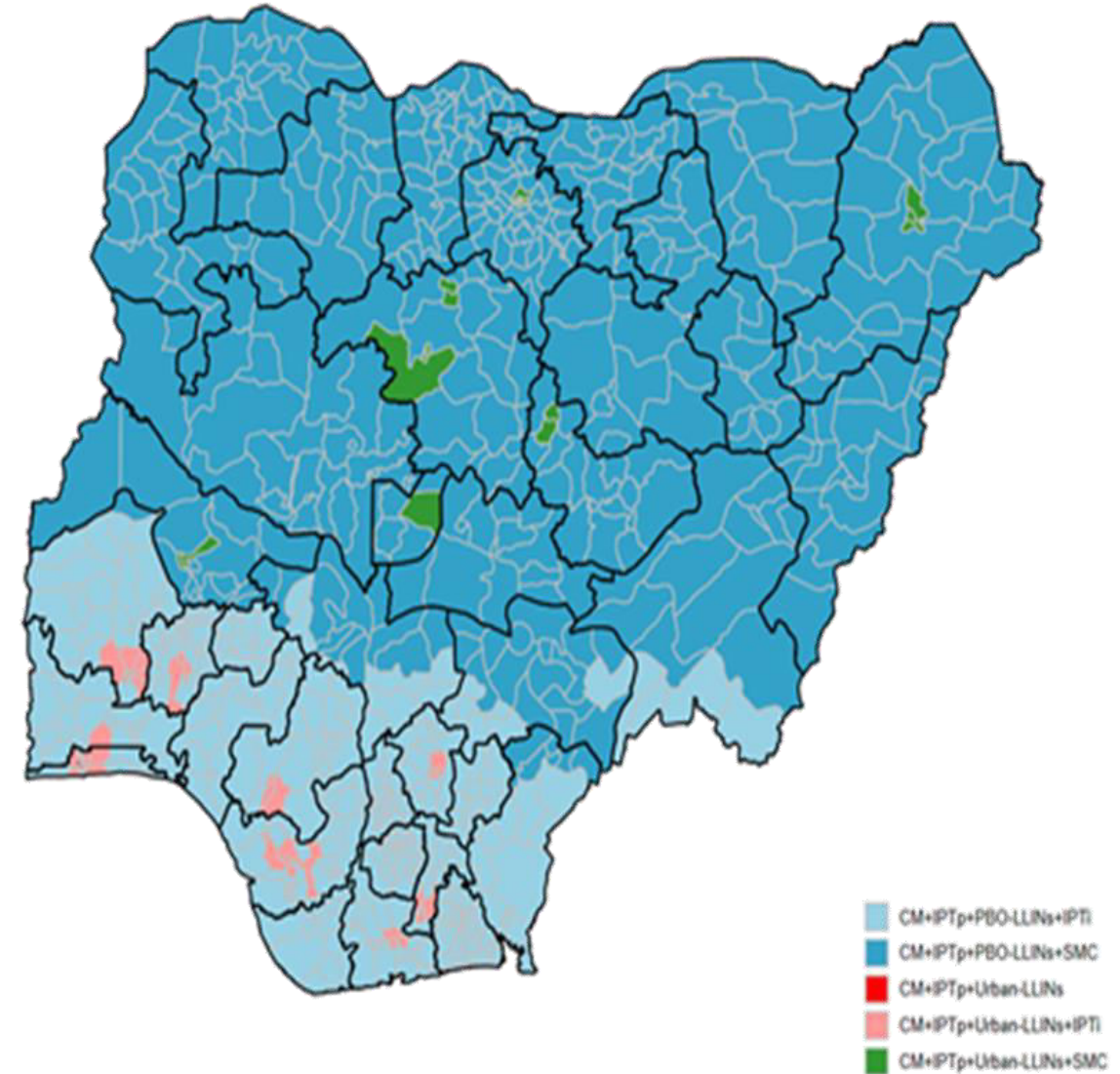
# Malaria Implementation Map



This is map showing how malaria interventions are deployed;

- Case Management and IPTp – **Everywhere**
- Seasonal Malaria Chemoprevention – **Areas in Deep blue**
- Long Lasting Nets – **Everywhere** but types are based on insecticide resistance characteristics (currently piloting targeted ITN distribution)
- Perennial Malaria Chemoprevention – **Pilot ongoing (To be deployed in light blue areas)**
- Malaria Vaccine – **Phased deployment to commence in Q4 with 2 states**
- Intermittent Prevent Treatment for School Aged School – **Commenced pilot in 2 states**
- RAS Implementation Research – **To be piloted in 5 states (Protocol submitted to NHREC)**

*Nigeria Malaria Intervention Mix*







# Country Experience

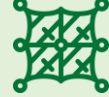
1



## Malaria Case Management

- 4<sup>th</sup> Edition - 2020 guidelines; require parasitological confirmation of malaria cases via microscopy or rapid diagnostic tests and recommend treatment with ACTs and injectable artesunate for severe malaria.
- ACT (AL) in the first trimester of pregnancy and other trimesters
- Management of uncomplicated malaria extended into the community, ensuring broader access to treatment.

2



## Chemoprevention and prevention interventions

- Seasonal Malaria Chemoprevention (SMC): Reached 28 + million children across 21 states in 2023
- Insecticidal Treated Nets (ITNs): Distributed to 36 states + one, with 41% of children protected.
- Perennial Malaria Chemoprevention (PMC): Being piloted
- Phased deployment of the malaria vaccine.
- Community-level IPTp delivery Very minimally implemented
- Intermittent Preventive Treatment for School Aged

3



## Health System Challenges

- Inadequate staffing: high attrition rates, and minimal/non-recruitment by state and federal governments hinder effective service delivery in the HFs
- Severe malaria data tools are unavailable in some states, and many private health facilities are not linked to the NHMIS.
- Inadequate referral linkages and poor implementation of two-way referral systems between healthcare tiers delay timely treatment of severe malaria cases.



# Best Practices (1/2)

## 1 Strengthening Leadership and Governance for Malaria Control



a

In line with Yaoundé declaration commitment that “*Nobody should die from malaria*”, a more coordinated leadership displayed in Nigeria through the **Rethinking Malaria and SWAP Agenda**

*“The rethinking malaria roundtable meeting marks a key moment for the country where Nigeria and Global leaders build consensus to up our game towards malaria elimination in Nigeria”*  
Coordinating Minister of Health & Social Welfare, Federal Republic of Nigeria,

b

The recent **inaugural meeting of the End Malaria Council Members** chaired by Nigeria Malaria Ambassador Aliko Dangote and members. Have **committed to filling resource gaps for malaria program**



## Fast tracking malaria Elimination in Nigeria

Shift from Idealism to Pragmatism

**1**

Shift from Business as usual to Business Unusual

**2**

Shift from Fragmented Approaches to Coherent Coordination

**3**

Shift Focus to Outcomes

**4**

Shift from Inefficient Approaches to Efficiency

**5**

Shift from Dependency to Autonomy and Self-Sufficiency

**6**

Shift to Accountability

**7**

Promote Equality by Aligning Resources to Beneficiaries' Needs

**8**

Shift from Programme Administration to Leadership:

**9**



**Strategic shifts**

**Action points**



**1**

Establish the Advisory on Malaria Elimination in Nigeria (AMEN)

**2**

Develop a Pragmatic Costed Plan

**3**

Optimize Case Management, including NHIA reforms, domesticated AMFm, expanding primary health and frontline workforce

**4**

Promote a culture of relentless pursuit of operational excellence

**5**

Amplify Community Actions - activate community leaders - other line ministries

**6**

Prioritize Data Accountability and Learning - use Technology for Campaign Effectiveness, Research, and Development in SWAP

**7**

Strengthen Local Production - Meets international and WHO prequalification

**8**

Mitigate the impact of Climate Change on Health - Vector Dynamics and Adaptation

**9**

Foster Bold Innovation - in delivering - in resource mobilization and allocation<sup>8</sup>





# Best Practices (2/2)

2

Enhancing Stakeholder Engagement & Coordination

- **Annual Severe Malaria Stakeholders Meeting** that drives service improvement through broad engagement. (2022 meeting report was published)
- A **well-structured partnership coordination framework with subcommittees assigned by** thematic areas

3

Advancing Research and Innovation in Malaria Interventions

- **Severe Malaria Clinical Audit (Retrospective Study)** that gathers key data to inform recommendations to improve severe malaria management
- **Rectal Artesunate Implementation Research planned across five states**
- **WHO Pre-qualification of SP and Zn oxide by SWIPHA**
- **mRDT archiving and auditing guidelines** enhance malaria case reporting accuracy which has proven effective in improving the quality of malaria case reporting.

4

Improving Diagnostics and Reporting Mechanisms

- Training of Frontline Health Workers: Continuous **Nation-wide training of 120,000 health workers on-going**, with plans to restructure community service delivery.
- Strengthening the **Quality of Malaria care using** data driven approaches

5

Building Capacity and Strengthening Health Systems



MEETING REPORT

Open Access

## Severe malaria intervention status in Nigeria: workshop meeting report

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### Abstract

Nigeria accounts for 39% of global malaria deaths in children under 5 years of age and the effective management of severe malaria is a health priority. The Annual Nigeria Severe Malaria Stakeholders Workshop, held on the 5–6th of July 2023 in Abuja, Nigeria brought together representatives from 36 States, the Federal Capital Territory, and other key stakeholders to address the management of severe malaria across all levels of the health service. Aims were to provide updates and review progress on severe malaria activities, the burden of disease, commodity logistics management, and pre-referral national policy implementation as well as to disseminate research findings. Two roundtable discussions were conducted to identify the challenges, barriers, and facilitators to the effective management of severe malaria in Nigeria. A key challenge was the limited awareness of updated guidelines and strategic documents among frontline health workers, leading to the misuse of non-recommended medications, like  $\alpha$ - $\beta$ -arteether. Further to this, the need to ensure appropriate treatments during pregnancy and the adoption of the WHO directive on the use of rectal artesunate were highlighted. To address these issues, innovative dissemination channels for guideline awareness were recommended and collaboration with professional organizations to enrich training materials emphasized. Other areas for improvement considered the processes involved in severe malaria management, with insufficient coordination among government agencies, inadequate referral linkages, and inadequate human resources identified as barriers. Recommendations focused on practical measures to minimize wastage of injectable artesunate, enhance data management through scaling up electronic medical records, and strengthen referral systems. The extension of severe malaria surveillance to patients older than 5 years was also proposed. To deliver these changes, actionable plans for sustained recruitment and training are needed, as well as committed advocacy at all levels to ensure timely fund disbursement and institutional support. A key overarching theme from the workshop was that a multifaceted approach was needed to address severe malaria in Nigeria, emphasizing



THANK YOU FOR  
LISTENING

