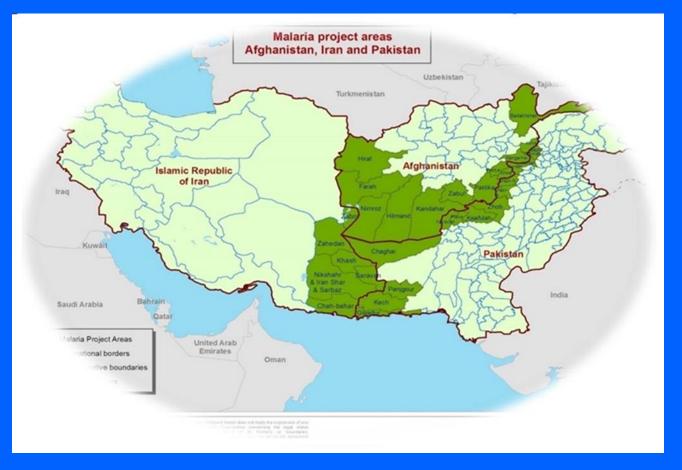


PIAM Net: Pakistan, Iran & Afghanistan Malaria Network

Ahmad Raeisi; Associated Professor of Epidemiology, Tehran University of Medical Sciences & National Program Manager for Malaria Elimination, IR Iran, Geneva, 7-9 Feb. 2018







The First C.B Meeting in Chabahar, IR Iran held in July 2003

Since 2008, every year the Annual Meeting of

Malaria Programme Managers from PIAM Net

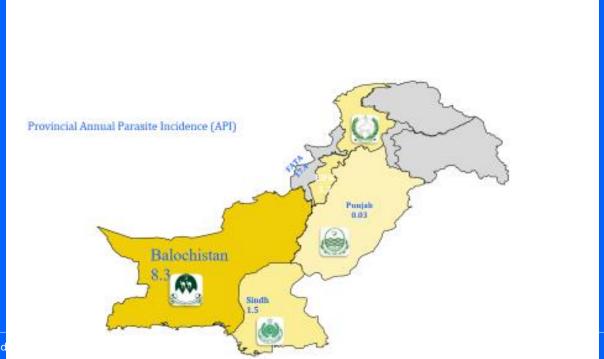
countries is held jointly with the HANMAT

countries (Djibouti, Ethiopia, Somalia, Sudan)



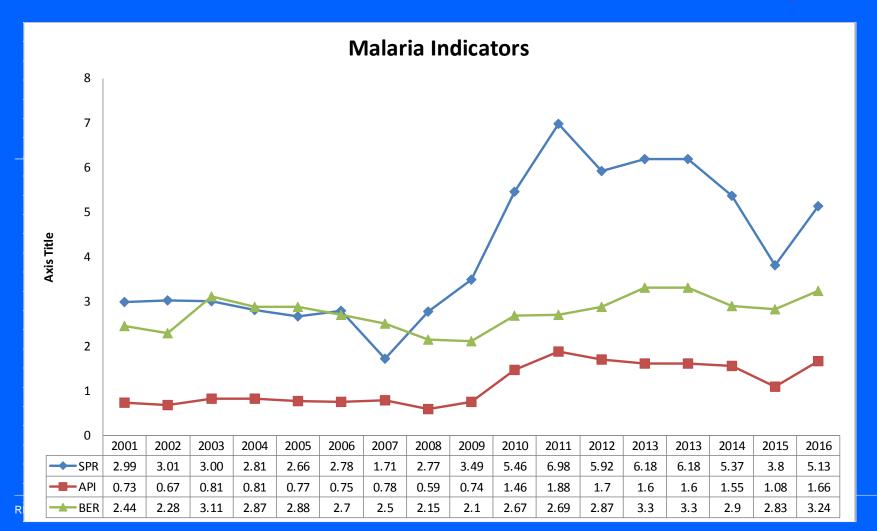
Current situation of PIAM - Net Countries:

Pakistan,100 million out of 208 million total population are at risk





Malaria Burden in Pakistan – Public sector reporting 2017





The program in Pakistan is malaria Control **Achievements:**

- Plan and budget approval of 2.3 billion PKR for Balochistan MCP
- The first ever survey to assess the quality of AMDs in private market is almost complete.

Challenges:

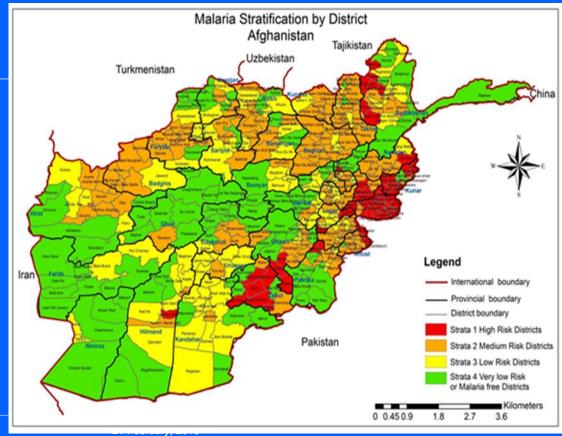
- **Deteriorating security situation, FATA & Balochistan**
- Mass movement and destruction of health system in war hit regions
 Proportionate reduction in domestic resource mobilization Shift to donor funding focus
- 4. Reduction in technical and field staff in all levels and their engagement in Polio, dengue and other programs.
- Majority of private clinicians don't follow the national guidelines **5**.
- Less confirmation rate (Clinical malaria cases treated as malaria infections at public health facilities in 2016 was 1 million but confirmed cases 316000)

RBM Partnership To End Malaria Presentation Title 21 February, 2018



Current situation in PIAM Net Countries:

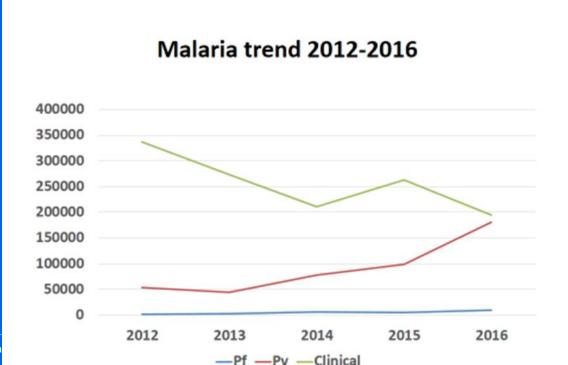
Afghanistan





The program in Afghanistan is malaria Control

Over 75% of Afghan population are at risk of malaria





Total confirmed malaria cases in 2015: 103,377

Total clinical malaria in 2015: 263,149

Total confirmed+ clinical in 2015= 366,526

Total confirmed malaria cases in 2016: 190,159

Total clinical malaria in 2016: 194,784

Total confirmed+ clinical in 2016 = 384,943

The reason for case increase few outbreaks in eastern provinces of country bordering with Pakistan and strengthen of the surveillance system



Achievements:

Pf elimination initiated in Northeastern provinces,

Vector Control

- LLINs distribution through campaign and continuous
- Susceptible and Bioassay test
- Strengthening of Kabul, Kunduz and Nangarhar insectaria
- Regular monitoring of LLINs distribution at community and health facility level



Challenges:

- Insecurity
- Inadequate funding to cover the strategic needs of the program
- LLINs distribution is planned only in stratum 1 and hotspot of stratum 2 (20 districts),
- Unavailability of radical treatment of Pv



Current situation of PIAM – Net Countries:

Iran, The program in Iran is Malaria Elimination, only three

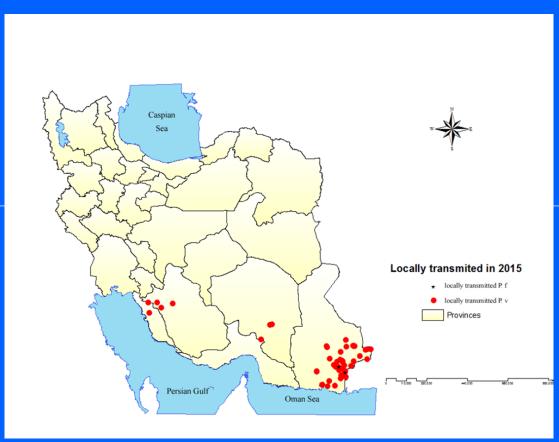
South-east provinces are considered as local malaria

- Political commitment at high level is one of the main reasons for success story of malaria elimination
- The lowest local malaria was reported in 2017: 68 with only 5 falciparum out of 881 cases which 813 were imported from abroad

(All malaria cases are confirmed whether imported or local)



Reduction of malaria active foci from 139 in 2015 to 64 in 2016 & 55 in 2017



Very precise foci classification along the Web based reporting of case and foci



Achievements:

Focal/targeted IRS in the areas classified as residual active, new active & receptive area with risk of transmission()

LLINs distribution focused in the targeted areas, mainly scattered areas without

electricity, based on national IRM plan; Intensified case finding, Very careful case / foci

classification, Prophylactic mass treatment with Primaquine

Surveillance of Insecticide Resistance;

Malaria early warning system in the area with local transmission, ECA (two times)

RBM Partnership To End Malaria 21 February, 2018 14



Challenges:

Dynamic movements of the populations across borders;

(accessing them is time-consuming and costly)

Scattered and underdeveloped areas with insecurity across the east border

Inefficient inter-country collaboration concerning hot zones across the

eastern borders; Multi-sectoral collaboration and community

participation and involvement are insufficient;

Spread of insecticide and drug resistance



Addressing high risk groups through expansion of border passive posts



Thank you for your kind attention and advices raeisia@tums.ac.ir