

National Malaria Strategy: Paradigm Shift from Control to Elimination in Bangladesh

*Prof. Be-Nazir Ahmed

Public Health and Infectious Disease Specialist, Director, Disease Control, Line Director, Communicable Disease Control, National Focal Point, IHR & HPED, DGHS, Ministry of Health & Family Welfare, Bangladesh, Chairperson Rabies in Asia Foundation, Bangladesh, GS, Bangladesh Society of Medical Microbiologists (BSMM)

*Corresponding Author

Malaria had been widely endemic throughout Bangladesh for long time like other regions of the world. With the success of DDT insecticide and the advent of less toxic and more effective antimalarials, the World Health Organization (WHO) adopted Malaria Eradication Program with success in elimination of malaria in nations with temperate climates and seasonal malaria transmission. South Asia, including Bangladesh also observed sharp reduction in the number of cases and shrinking of endemic areas. The emergence of drug and widespread insecticide resistance, wars, massive population movement and fund constraint made the long-term maintenance of the effort untenable and gradual reemergence of malaria throughout the world including Bangladesh.

The malaria cases continued to increase after independence up to 2008. With this background, the malaria control strategy was started with fund from the Global Fund for AIDS, Tuberculosis and Malaria (GFATM). The objectives of the strategy were to reduce malaria cases and mortality by 75% of the base line within 2015. The strategic approaches included early diagnosis and effective case management, prevention of transmission with vector control, surveillance, health system research and, advocacy, communication and social mobilization (ACSM) with objectives of reduction of cases and mortality by 75% of the 2008 baseline within 2015.

Successful implementation of these programs could help to achieve the target in 2012 before the target year of 2015. Early diagnosis has been one of the cornerstones in malaria control. From hospital based malaria microscopy, it has been brought to door steps of the people with introduction of rapid diagnostic test (RDT) and through combination of hundreds fixed and makeshift hospitals and has ensured detection of the malaria cases. Treatment of the malaria cases by thousands of field health workers of government and NGO within 24-48

hours have brought the development of severe malaria cases and thereby mortality. For prevention of transmission, long lasting insecticidal nets (LLIN) is instrumental. More than 60 lakhs LLIN have been used by the people of the 13 malaria endemic districts. With alignment of the MDG goals our under five children and pregnant women use to have malaria save sleep under these LLINs.

With the above mentioned efforts, from 84 thousands malaria cases of 2008, the cases have come down to 26 thousands (80% reduction) in 2013 and from 254 deaths in 2008, the deaths have come down to 15 (94% reduction). Out of 13 malaria endemic districts, 4 districts entered into pre-elimination phase with very few or no cases in the endemic villages. With these remarkable achievements, there has been paradigm shift in the national malaria control strategy from control to elimination of malaria by 2020. With phased elimination of transmission through all out efforts, we really can achieve the goal.

The strategy has adopted a number of innovative interventions to strengthen the initiatives to achieve elimination. Integrated vector control with epidemiological intervention through community involvement in hot spots of the three hyper endemic districts namely Rangamati, Banderban and Khagrachori is regarded to be one of the effective interventions. Malaria free town in malaria endemic districts with vector control, malaria management centres with free diagnosis and management is considered to ensure malaria safe tourism in some beautiful towns.

GO-NGO collaboration, strong political commitment and financial contribution of GOB and the Global Fund for Aids, Tuberculosis and Malaria (GFATM) have been providing consistent opportunity towards the aspirated goal. If the national malaria program continues to work in the same pace as it has been, then the expected malaria free Bangladesh will be a reality.