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# Malaria Update

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*Group picture of district level orientation & advocacy program conducted at Health Office in Kaski district.*

## District Level Orientation & Advocacy Program

One-day orientation program conducted in 48 risk/potential districts for malaria as a part of advocacy and develop ownership in local level following the provincial level program conducted earlier. The program was organized by Health Office of the respective district with a support from JHPIEGO/USAID which was implemented and technically supported by Epidemiology & Disease Control Division (EDCD) and Save the Children.

The program was very much essential to disseminate information to aware local level about national strategy for malaria elimination and to make them responsible in national program. Through this program, it is expected the participants will internalize the issue and will prioritize or include malaria in their plan and program. Total 1,116 participants mainly health coordinators and sub coordinators from all municipalities of 48 districts were

intensively oriented and discussed on national malaria strategic plan, malaria program activities, recording & reporting, issues & challenges and their roles & responsibilities for malaria elimination.

The technical session has incorporated the presentation on basic malaria epidemiology, life cycle of anopheles, sign & symptoms of malaria, malaria program activities, basic terminologies, mission, vision, goal & objective of Nepal Malaria Strategic Plan (NMSP), malaria case trend, process of surveillance & MDIS, recording & reporting etc. Furthermore, the practical session conducted for malaria testing by using RDT kit. Logistics like RDT kit, antimalarial drugs, case investigation forms/formats, guidelines, treatment protocol, MDIS sticker etc. were also disseminated to all the participants. At the end of the session, there was a group work to discuss on microplanning of the district level program activities.



*Orientation to participants at Sarlahi district (left) and Tanahu district.*

## Mass Distribution of LLIN in Risk Areas

As per the result of malaria micro-stratification 2019, total 68,528 LLINs distributed to mass population from 18 risk wards of 16 municipalities in 8 districts. LLINs distributed to risk ward of Kamalamaai municipality at Sindhuli, Mithila at Dhanusa, Saptakoshi at Saptari, Raptisonari at Banke, Chaukune at Surkhet, Ghodaghodi, Tikapur & Lamkichuha at Kailali, Bedkot, Belauri, Bhimdutta, Krishnapur, Mahakali, Punarbas & Suklaphanta at Kanchanpur and Parsuram at Dadeldhura districts. The distribution sites or areas were newly high/potential high-risk ward as of microstratification 2019 or the high-risk wards completing 3 years cycle of LLIN distribution.

Moreover 32,349 LLINs were distributed to risk group/institutions located in high risk area (refugee, security personnel, conservation area, old age home, hostel etc.) and to the mass population of active foci where local transmission is ongoing.

This time, it was a first & good initiation from local level taking ownership and using their resources for distribution process (household survey/distribution) with technical support from EDCD and Save the Children.



Mass distribution of LLIN at Mahakali and Bedkot in Kanchanpur.

## Orientation to Private Health Sector

One-day orientation on test, treat and reporting of malaria cases conducted in various districts such as; Rolpa, Rukum East, Pyuthan, Arghakhanchi, Kapilvastu and Rupandehi during this period. The program was successful to orient total 134 medical recorder/lab personnel from different private health institutions.

The program was mainly focused on promoting private sector to follow national treatment protocol for test & treat and to report all malaria cases in national reporting system (HMIS) on timely, completely and correctly. Besides presentations, the participants were provided hands on training on RDTs performance, slide preparation, staining, examination of slides, differential diagnosis of PV/PF and reporting on HMIS. Moreover, materials related to trainings (SOPs), bench aids, good smear templates, MDIS stickers, treatment protocol, treatment algorithm, parasite chart, IEC/BCC materials were disseminated. Pre-test and post-test theory practical assessments were conducted to understand the level of knowledge of the participants.

## Malaria Mobile Clinic

Malaria Mobile Clinic (MMC) conducted in 42 municipalities of 7 districts; Rupandehi, Kapilvastu, Banke, Bardiya, Surkhet, Kailali and Kanchanpur from September to November 2019. Total 5,956 suspected cases were tested and found only 9 cases with malaria positive.

The aim of MMC is to increase access to diagnosis and treatment in the community level in the high and moderate risk areas of the districts. It is likely that malaria disease and even malaria infection will be diagnosed early and chances for onward transmission or malaria infection is unlikely through early effective and complete treated malaria case.

## Booth Exhibition in APMEN Meeting

Epidemiology & Disease Control Division (EDCD) with support of Save the Children organized booth exhibition in Asia Pacific Malaria Elimination Network (APMEN) meeting conducted on 16<sup>th</sup> October 2019 at Hotel Radisson in Kathmandu. The exhibition was planned to advocate and open-up avenues for more potential funding partners and researchers to invest in Nepal for malaria program. It was a great opportunity to showcase national malaria program work in such a diverse international forum where there were more than 150 participants/experts from different countries.

There were posters presented by EDCD on Microstratification, Current Scenario, G6PD Deficiency, Susceptibility Status and Submicroscopic Prevalence. Similarly, IEC/BCC materials, books & publications on malaria showcased in the program. Two documentary video and short glimpse of malaria activities displayed continuously through 3 televisions. The participants eagerly showed their interest on malaria case notification through SMS in Malaria Disease Information System (MDIS) which was lively presented.



IEC/BCC materials and videos displaying at exhibition.

## List of High & Moderate Risk Areas (Malaria Microstratification 2019)

**Total High Risk Wards: 47**
**Total Moderate Risk Wards: 151**
**❖ Province 1: Total High Risk Wards = 0, Total Moderate Risk Wards = 0**
**❖ Province 2: Total High Risk Wards = 6, Total Moderate Risk Wards = 6**

Districts	Municipalities (Wards)	Risk Type
Bara	Jitpur Simara NP (6)	Moderate (1)
Dhanusa	Ganeshman Charnath NP (1, 3, 9); Mithila NP (4, 11)	High (5)
	Ganeshman Charnath NP (6); Mithila NP (3); Sabaila NP (3)	Moderate (3)
Saptari	Saptakoshi NP (11)	High (1)
	Saptakoshi NP (3); Bodebarsaien NP (2)	Moderate (2)

**❖ Province 3: Total High Risk Wards = 1, Total Moderate Risk Wards = 0**

Districts	Municipalities (Wards)	Risk Type
Sindhuli	Kamalamai NP (14)	High (1)

**❖ Gandaki Province: Total High Risk Wards = 0, Moderate Risk Wards = 1**

Districts	Municipalities (Wards)	Risk Type
Nawalparasi (East)	Gaidakot NP (18)	Moderate (1)

**❖ Province 5: Total High Risk Wards = 3, Total Moderate Risk Wards = 22**

Districts	Municipalities (Wards)	Risk Type
Banke	Raptisonari (3)	High (1)
	Baijanath (2, 4); Duduwa (2); Kohalpur NP (12, 15); Narainapur (3)	Moderate (6)
Bardiya	Thakurbaba NP (4)	High (1)
	Bansgadhi NP (1, 2, 5); Barbardiya NP (6); Madhuban NP (4); Thakurbaba NP (1, 2, 3, 5)	Moderate (9)
Dang	Babai (5, 7); Shantinagar (6); Tulsipur NP (13)	Moderate (4)
Kapilbastu	Maharajgunj NP (4)	High (1)
	Krishnanagar NP (6)	Moderate (1)
Rupandehi	Kothimai (7); Sammarimai (4)	Moderate (2)

**❖ Karnali Province: Total High Risk Wards = 7, Total Moderate Risk Wards = 18**

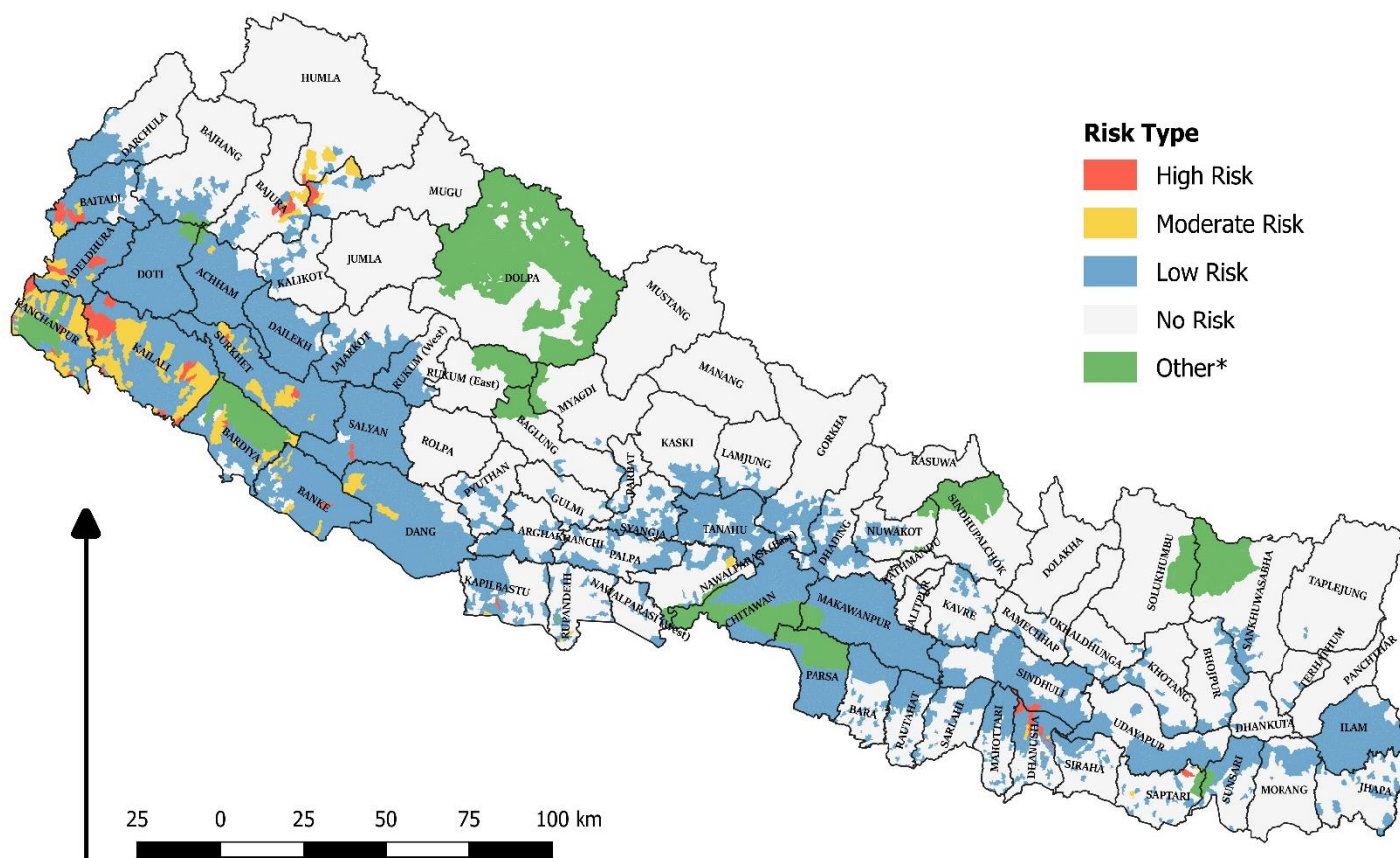
Districts	Municipalities (Wards)	Risk Type
Hulma	Tanjakot (2, 3)	High (2)
	Aadanchuli (5); Sarkeegad (2); Tanjakot (4)	Moderate (3)
Mugu	Khatyad (8, 10)	High (2)
	Khatyad (11); Soru (3, 5)	Moderate (3)
Salyan	Kalimati (3)	High (1)
Surkhet	Chaukune (8); Lekhbesi NP (10)	High (2)
	Barattaal (2); Bheriganga NP (1); Birendranagar NP (10, 11); Chaukune (6); Ghurbhakot NP (13); Lekhbesi NP (7, 8, 9); Panchapuri NP (3, 4, 9)	Moderate (12)

**❖ Sudurpashchim Province: Total High Risk Wards = 30, Total Moderate Risk Wards = 104**

Districts	Municipalities (Wards)	Risk Type
Achham	Safhebagar NP (10)	Moderate (1)
Baitadi	Melauli NP (1, 6, 7); Pancheswor (3, 4, 6); Shibnath (6)	High (7)
	Melauli NP (3); Shibnath (1, 2, 3, 4)	Moderate (5)
Bajura	Budinanda NP (1, 5, 6, 7)	High (4)
	Budinanda NP (2); Himali (4, 6); Pandav Gufa (1); Swamikartik (4)	Moderate (5)
Dadeldhura	Aalital (2); Parsuram NP (4, 5)	High (3)
	Aalital (5); Parsuram NP (3, 6, 12)	Moderate (4)
Kailali	Bhajani NP (5); Chure (3); Dhangadi NP (9); Godawari NP (3, 4, 11, 12); LamkiChuha NP (4, 8, 10); Tikapur NP (8)	High (11)
	Bardagoriya (1, 2, 5); Bhajani NP (7); Chure (4); Dhangadi NP (1, 2, 3, 4, 5, 6, 7, 12, 14, 15, 18, 19); Gauriganga NP (1, 2, 5, 7); Godagodi NP (1, 3, 4); Godawari NP (1, 2, 5, 6, 8, 9, 10); Janaki (1, 3, 4, 6, 8, 9); Kailari (4); LamkiChuha NP (1, 2, 3, 5, 6); Tikapur NP (1, 2, 4, 5, 6, 7, 9)	Moderate (50)
Kanchanpur	Belauri NP (1, 9); Bhimdatta NP (9); Mahakali NP (3); SuklaPhanta NP (2)	High (5)
	Bedkot NP (3, 4, 6); Belauri NP (2, 3, 5, 6, 7, 8, 10); Bhimdatta NP (2, 3, 4, 6, 7, 10, 11, 13, 15, 18); Krishnapur NP (1, 2, 4, 5, 6, 7); Mahakali NP (1, 4, 7, 8, 10); Purnabash NP (2, 4, 9, 11); SuklaPhanta NP (1, 5, 7, 12)	Moderate (39)



### Map of Malaria Risk Area as of Microstratification 2019



\* National Parks, Conservation Areas, Wildlife Reserves etc.

### Glimpse of Program Activities



Group picture of advocacy meeting on malaria elimination in Gandaki Province conducted on 12<sup>th</sup> Dec 2019 at Pokhara.



Suspected malaria case testing through Malaria Mobile Clinic (MMC) conducted at risk areas in Rupandehi district.



Orientation to local level, social mobilizer & mother's group on household survey for LLIN distribution process at Sindhuli.



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