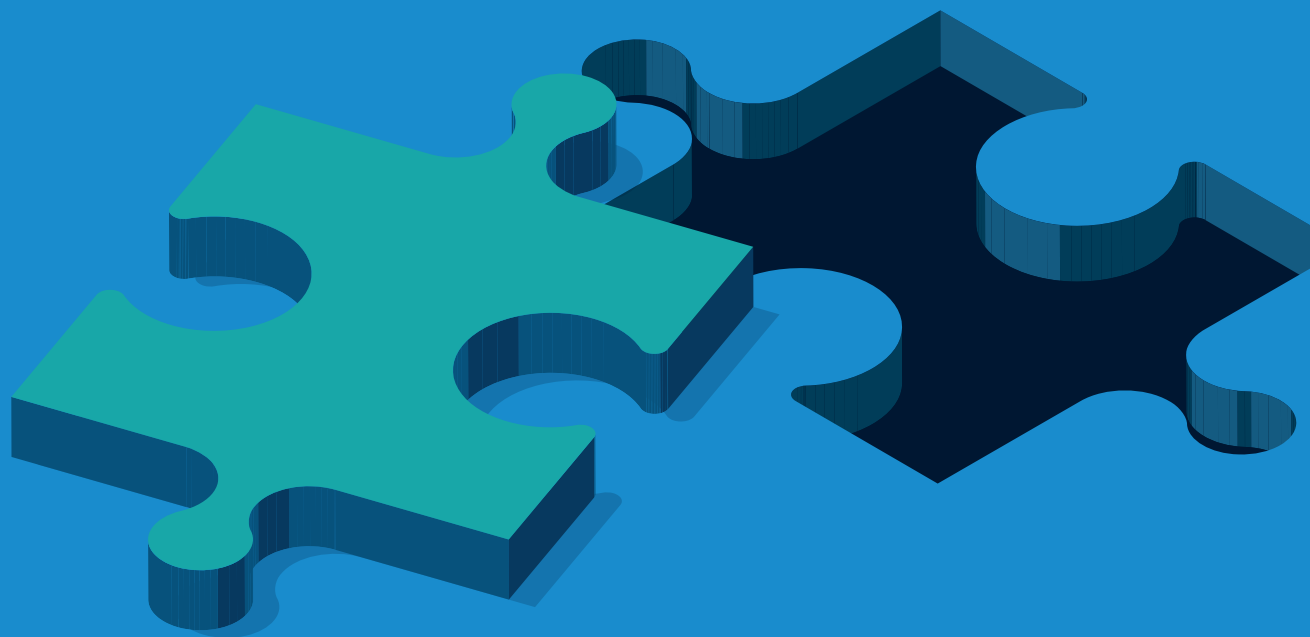


WORLD MALARIA DAY 2017

# MALARIA PREVENTION WORKS

let's close the gap



World Health  
Organization



# FOREWORD

## **DR PEDRO ALONSO**

Director, WHO Global Malaria Programme

1 April 2017

---

As World Malaria Day 2017 approaches, there is much to celebrate. According to the latest estimates from WHO, many countries with ongoing malaria transmission have reduced their disease burden significantly. On a global scale, the rate of new malaria cases fell by 21% between 2010 and 2015. Malaria death rates fell by 29% in the same 5-year period (figure 1).

In sub-Saharan Africa, where malaria is heavily concentrated, access to key interventions is expanding rapidly, particularly for the groups most vulnerable to infection and death. Since 2010, a sharp increase in malaria diagnostic testing for children and preventive treatment for pregnant women has been

reported across the region. Many other regions have made impressive progress in delivering malaria control tools to those most in need.

But there is a massive unfinished agenda. In 2015 alone, there were an estimated 212 million new cases of malaria. That same year, malaria claimed the lives of some 429 000 people worldwide, mainly young African children. One child died from malaria every 2 minutes.

Why does malaria continue to take such a heavy toll? Simply put, many people in endemic countries lack access to the tools that prevent, diagnose and treat the disease. This is particularly true in low-income countries with a high malaria burden.

## LET'S CLOSE THE GAP

Closing gaps in access to proven malaria control tools is a top priority for the WHO Global Malaria Programme. This year, on World Malaria Day, we place a special focus on prevention gaps. Next year, we will publish a more comprehensive analysis on gaps in prevention, diagnostic testing and treatment worldwide.

This brochure offers a brief summary of WHO-recommended tools in the malaria prevention arsenal. It is divided into two parts: the first chapter focuses on core

vector control measures, and the second on preventive treatment strategies for the most vulnerable groups. We touch on a key biological threat – mosquito resistance to insecticides – and highlight the need for new anti-malaria tools.

In recent years, the scale-up of effective prevention tools has had a major impact in the fight against malaria. Increased investment in proven prevention measures, and in the development and deployment of new tools, will accelerate progress towards elimination and bring us one step closer to our common goal of a world free from malaria.

# MALARIA

## AT A GLANCE

Malaria is a preventable and curable disease transmitted through the bites of female *Anopheles* mosquitoes. Among the five parasite species that cause malaria in humans, two pose the greatest threat:

### ***P. FALCIPARUM***

is responsible for 99% of malaria deaths globally. It is the most prevalent malaria parasite on the African continent.

### ***P. VIVAX***

is the dominant malaria parasite in most countries outside of sub-Saharan Africa.

### **KEY FACTS ON THE GLOBAL MALARIA BURDEN (2015)**

- There were an estimated 212 million new cases of malaria and 429 000 malaria-related deaths in 2015.
- Approximately 90% of malaria cases and 92% of deaths occurred in the WHO African Region.
- Thirteen countries, mainly in sub-Saharan Africa, accounted for 76% of malaria cases and 75% deaths globally.
- 70% of all malaria deaths occurred among children under the age of five.

Source: WHO *World Malaria Report 2016*

## SYMPTOMS OF MALARIA

The classic symptoms of malaria – fever, headache and chills – typically appear 10 to 15 days after the infective mosquito bite.

*P. falciparum* malaria causes anaemia and, left untreated, can rapidly progress to severe illness and death.



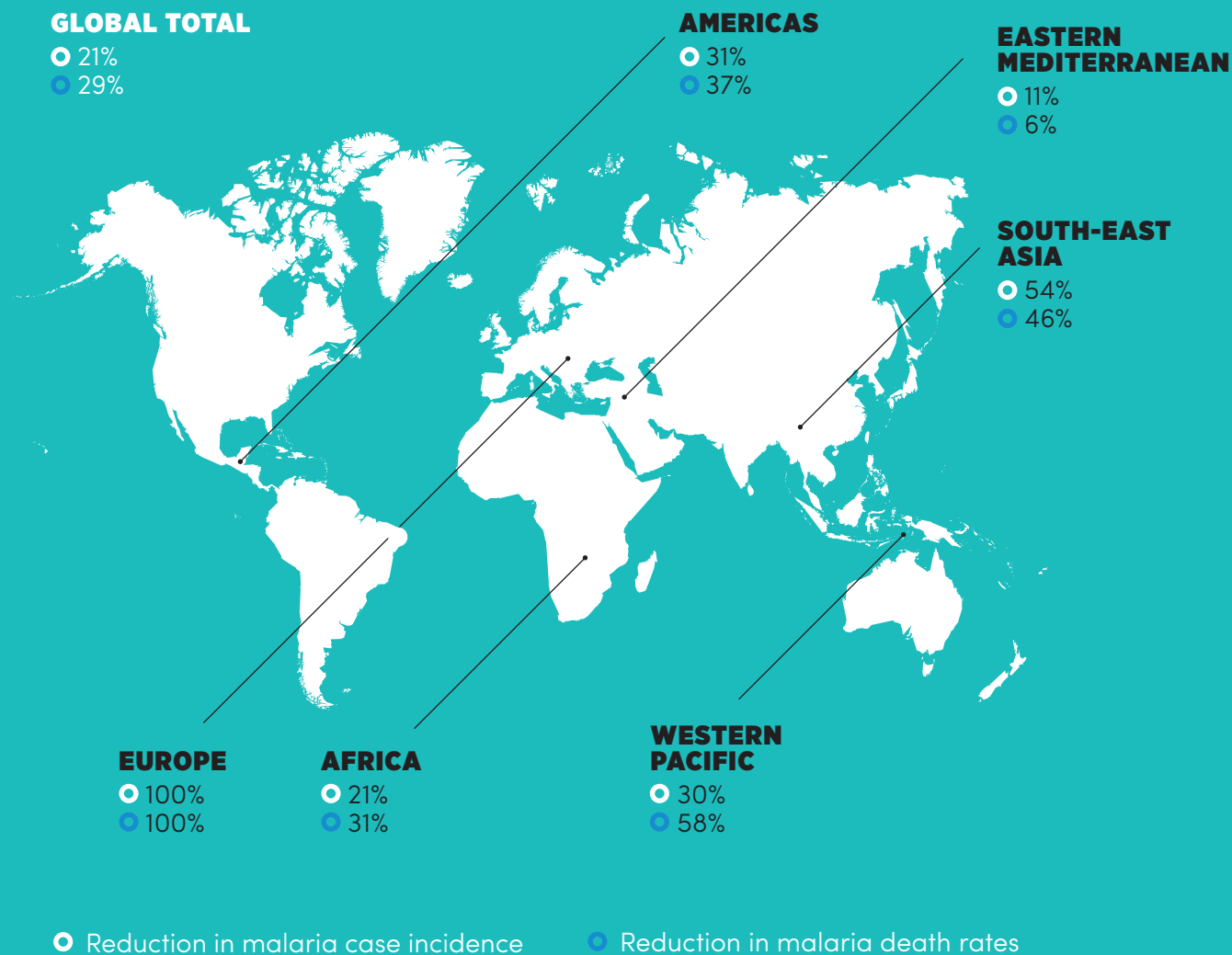
## WHO IS AT RISK?

Nearly half of the world's population is at risk of malaria. While most malaria cases and deaths occur in Africa, four other WHO regions carry a significant disease burden: the Americas, the Eastern Mediterranean, South-East Asia and the Western Pacific.

In areas with high malaria transmission, young children and pregnant women are particularly vulnerable to malaria infection and death. Outside of high-transmission areas, where populations do not acquire significant immunity to malaria, all age groups are at risk.

## FIGURE 1

Global and regional progress in the fight against malaria by WHO region: 2010-2015

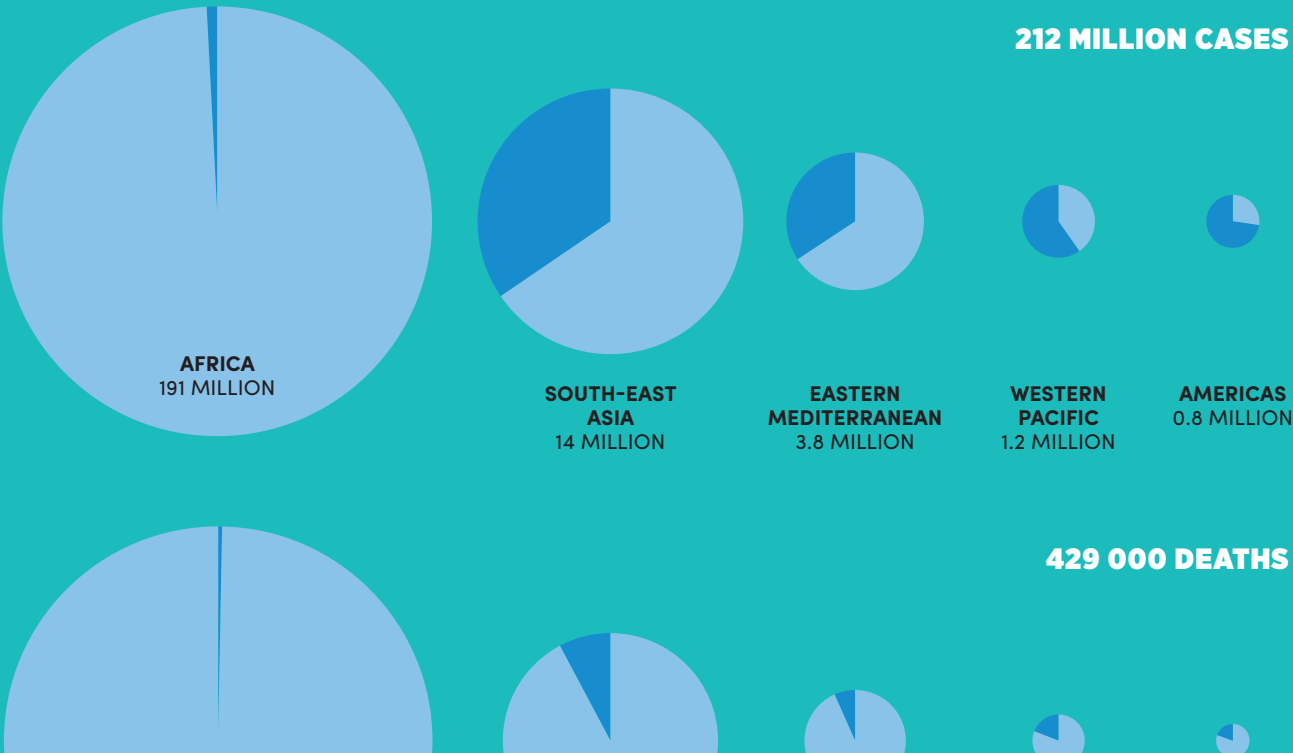


Source: WHO *World Malaria Report 2016*

**FIGURE 2**

**Estimated malaria cases and deaths in 2015 by WHO region**

The size of the following graphs represents the relative number of cases and deaths



预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_26486](https://www.yunbaogao.cn/report/index/report?reportId=5_26486)