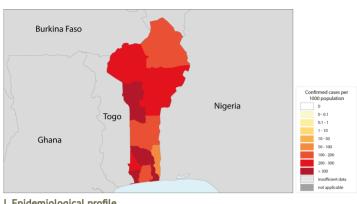
Benin African Region





## I. Epidemiological profile

Population (UN Population Division)	2017 %
High transmission (>1 case per 1000 population)	11.2M 100
Low transmission (0-1 case per 1000 population)	0 -
Malaria free (0 cases)	0 -
Total	11.2M

Parasites and vectors			
Major plasmodium species:	P.falciparum: 100	(%), P.vivax: 0 (%)	
Major anopheles species:	An. gambiae, An.		
Reported confirmed cases (health facility):	1 573 163	Estimated cases:	4.1M [2.8M, 6.6M]
Confirmed cases at community level:	171 442		
Confirmed cases from private sector:	159 890		
Reported deaths:	2182	Estimated deaths:	7.3K [5.7K, 8.9K]

## II. Intervention policies and strategies

Intervention	Policies/Strategies		Year
Intervention	roticles/ strategies	No	adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2007
	ITNs/LLINs distributed to all age groups	Yes	2007
IRS	IRS is recommended	Yes	2006
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	No	
IPT	IPT used to prevent malaria during pregnancy	Yes	2005
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2011
	Malaria diagnosis is free of charge in the public sector	Yes	2008
Treatment	ACT is free for all ages in public sector	No	-
	The sale of oral artemisinin-based monotherapies (oAMTs)	is	_
		banned	
	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for P. falciparum	No	-
	Primaquine is used for radical treatment of P. vivax	No	-
	G6PD test is a requirement before treatment with primaquine	-	-
	Directly observed treatment with primaquine is undertaken	No	-
	System for monitoring of adverse reaction to antimalarials exists	Yes	2005
Surveillance	ACD for case investigation (reactive)	-	-
	ACD at community level of febrile cases (pro-active)	No	-
	Mass screening is undertaken	No	-
	Uncomplicated P. falciparum cases routinely admitted	Yes	-
	Uncomplicated P. vivax cases routinely admitted	No	-
	Case and foci investigation undertaken	No	
	Case reporting from private sector is mandatory	Yes	-

Antimalaria trea	tment poli	су			Medicine	Year adop	ted
First-line treatment of unconfirmed malaria				AL	200	)4	
First-line treatment of P. falciparum				AL	200	)4	
For treatment failure of P. falciparum			QN	200	)4		
Treatment of severe malaria			AS; QN	200	)4		
Treatment of P. v	/ivax				-	-	
Dosage of prima	quine for r	radical treat	ment of P.	vivax			
Type of RDT use	d					P.f only	
Therapeutic effic	acy tests (	clinical and	parasitolo	ogical failure, %	)		
Medicine Yea	ir	Min Medi	ian Max	Follow-up	No. of studies	Species	
AL 201	11-2017	0 1.	.55 3.5	28 days	6	P. falcipar	um
Resistance statu	s by insect	icide class (	2010-2017	7) and use of cla	ass for malaria vecto	or control (2	2017)
Insecticide class	Years	(%) sites <sup>1</sup>	Vastors?				
			AGCTOL2-				Used <sup>2</sup>
Carbamates	2010- 2017	27.78% (36		tus s.l., An. gambi	iae s.l., An. gambiae s.	.S.	Used <sup>3</sup> No
		•	) An. funest	tus s.l., An. gambi tus s.l., An. gambi		.5.	
Organochlorines	2017 2010- 2017	•	An. funest		iae s.l.	. <i>5</i> .	No
Carbamates Organochlorines Organophosphate Pyrethroids	2017 2010- 2017 2010-	100% (21) 22.22%	An. funest An. funest An. gambi	tus s.l., An. gambi iae s.l., An. gambi	iae s.l.		No No