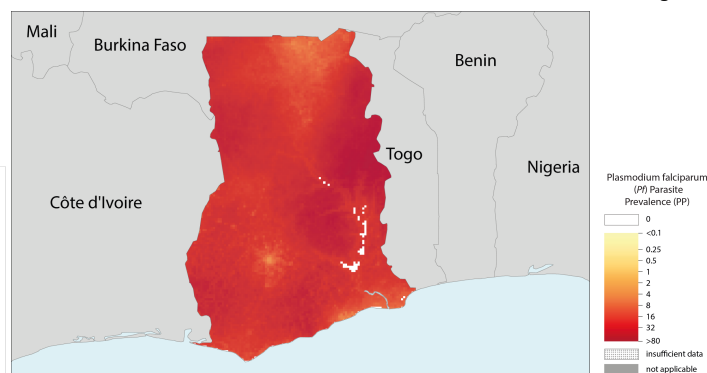
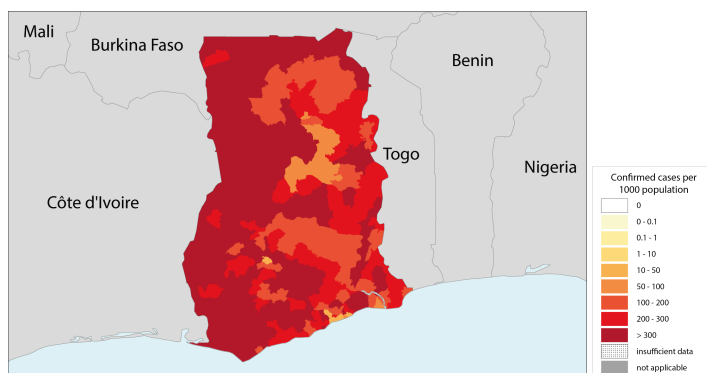


Ghana

African Region



I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	28.8M	100
Low transmission (0-1 case per 1000 population)	0	-
Malaria free (0 cases)	0	-
Total	28.8M	

Parasites and vectors			
Major plasmodium species:	P.falciparum: 100 (%) , P.vivax: 0 (%)		
Major anopheles species:	An. gambiae, An. funestus, An. arabiensis		
Reported confirmed cases (health facility):	4 348 694	Estimated cases:	7.8M [5M, 11.9M]
Confirmed cases at community level:	1 235 491		
Confirmed cases from private sector:	1 391 725		
Reported deaths:	599	Estimated deaths:	10.9K [10.1K, 11.8K]

II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/No	Year adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2004
	ITNs/LLINs distributed to all age groups	Yes	2010
IRS	IRS is recommended	Yes	2005
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	Yes	1999
IPT	IPT used to prevent malaria during pregnancy	Yes	2003
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2008
	Malaria diagnosis is free of charge in the public sector	No	-
Treatment	ACT is free for all ages in public sector	No	-
	The sale of oral artemisinin-based monotherapies (oAMTs)	is banned	2006
	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	No	-
	Directly observed treatment with primaquine is undertaken	No	-
	System for monitoring of adverse reaction to antimalarials exists	Yes	2001
	ACD for case investigation (reactive)	No	-
	ACD at community level of febrile cases (pro-active)	No	-
	Mass screening is undertaken	No	-
Surveillance	Uncomplicated P. falciparum cases routinely admitted	No	-
	Uncomplicated P. vivax cases routinely admitted	No	-
	Case and foci investigation undertaken	No	-
	Case reporting from private sector is mandatory	No	-

Antimalaria treatment policy				Medicine	Year adopted		
First-line treatment of unconfirmed malaria				AS+AQ	2004		
First-line treatment of P. falciparum				AL; AS+AQ	2004		
For treatment failure of P. falciparum				QN	2004		
Treatment of severe malaria				AS; AM; QN	2004		
Treatment of P. vivax				-	-		
Dosage of primaquine for radical treatment of P. vivax							
Type of RDT used				Pf only			
Therapeutic efficacy tests (clinical and parasitological failure, %)							
Medicine	Year	Min	Median	Max	Follow-up	No. of studies	Species
AL	2010-2014	0	0	9.4	28 days	9	<i>P. falciparum</i>
AS+AQ	2010-2014	0	0	3.8	28 days	13	<i>P. falciparum</i>
Resistance status by insecticide class (2010-2017) and use of class for malaria vector control (2017)							
Insecticide class	Years	(%) sites ¹	Vectors ²		Used ³		
Carbamates	2010-2017	72.73% (44)	<i>An. funestus</i> s.l., <i>An. gambiae</i> s.l.		No		
Organochlorines	2010-2017	100% (40)	<i>An. funestus</i> s.l., <i>An. gambiae</i> s.l.		No		
Organophosphates	2010-2017	32% (50)	<i>An. gambiae</i> s.l.		Yes		
Pyrethroids	2010-2017	98% (50)	<i>An. funestus</i> s.l., <i>An. gambiae</i> s.l.		Yes		

¹Percent of sites for which resistance confirmed and total number of sites that reported data (n)

²Principal vectors that exhibited resistance

³Class used for malaria vector control in 2017

¹Percent of sites for which resistance confirmed and total number of sites that reported data (n)

²Principal vectors that exhibited resistance

³Class used for malaria vector control in 2017