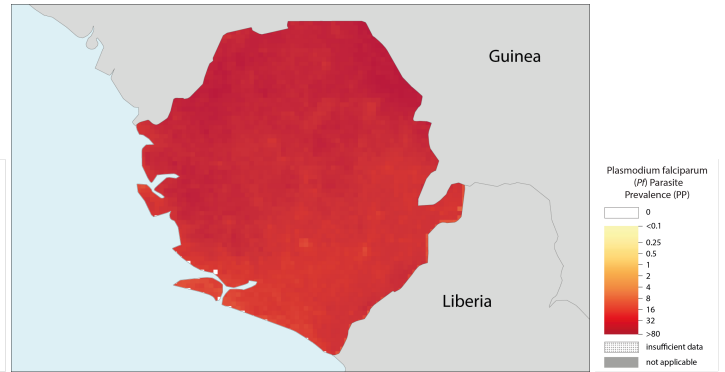
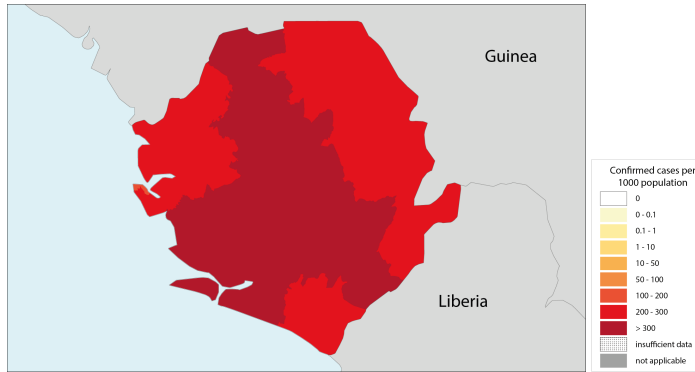


# Sierra Leone

African Region



## I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	7.6M	100
Low transmission (0-1 case per 1000 population)	0	-
Malaria free (0 cases)	0	-
Total	7.6M	

Parasites and vectors			
Major plasmodium species:	P.falciparum: 100 (%) , P.vivax: 0 (%)		
Major anopheles species:	An. gambiae, An. funestus, An. melas		
Reported confirmed cases (health facility):	1 651 236	Estimated cases:	2.9M [2M, 4.2M]
Confirmed cases at community level:	452 056		
Confirmed cases from private sector:	49 327		
Reported deaths:	1298	Estimated deaths:	17.6K [16.2K, 19K]

## II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/No	Year adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2003
	ITNs/LLINs distributed to all age groups	Yes	2006
IRS	IRS is recommended	Yes	2010
	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	2010
	Malaria diagnosis is free of charge in the public sector	Yes	2008
Treatment	ACT is free for all ages in public sector	Yes	2010
	The sale of oral artemisinin-based monotherapies (oAMTs) is banned	banned	2004
	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	-
Surveillance	System for monitoring of adverse reaction to antimalarials exists	Yes	2005
	ACD for case investigation (reactive)	No	-
	ACD at community level of febrile cases (pro-active)	No	-
	Mass screening is undertaken	No	-
	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	2011-2016	0	0	0	28 days	4	P. falciparum
AS+AQ	2011-2016	0	0	0	28 days	4	P. falciparum
Resistance status by insecticide class (2010-2017) and use of class for malaria vector control (2017)							
Insecticide class	Years	(%) sites <sup>1</sup>	Vectors <sup>2</sup>	Used <sup>3</sup>			
Carbamates	2010-2016	0% (8)	-	No			
Organochlorines	2010-2016	25% (8)	An. gambiae s.l.	No			
Organophosphates	2010-2016	0% (8)	-	No			
Pyrethroids	2010-2016	37.5% (8)	An. gambiae s.l.	Yes			

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

<sup>2</sup>Principal vectors that exhibited resistance

<sup>3</sup>Class used for malaria vector control in 2017