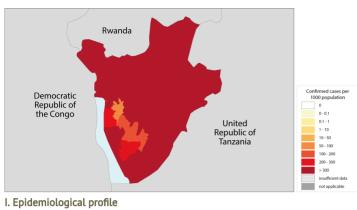
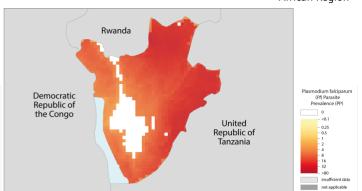
Burundi African Region





Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	10.9M	100
Low transmission (0-1 case per 1000 population)	0	-
Malaria free (0 cases)	0	
Total	10.9M	

Parasites and vectors			
Major plasmodium species:	P.falciparum: 100 (9	%) , P.vivax: 0 (%)	
Major anopheles species:	An. gambiae, An. fu	ınestus, An. arabiensis	
Reported confirmed cases (health facility): 7 670 177	Estimated cases:	2.1M [1.3M, 3.4M]
Confirmed cases at community level:	783 633		
Confirmed cases from private sector:	342 142		
Reported deaths:	4414	Estimated deaths:	5.3K [4.3K, 6.2K]

II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/	Year
Intervention	roticles/ strategies	No	adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2004
	ITNs/LLINs distributed to all age groups	No	2009
IRS	IRS is recommended	Yes	2009
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	No	-
IPT	IPT used to prevent malaria during pregnancy	Yes	-
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2012
	Malaria diagnosis is free of charge in the public sector	No	-
Treatment	ACT is free for all ages in public sector	Yes	2009
	The sale of oral artemisinin-based monotherapies (oAMTs)	is banned	2003
	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	No	-
Surveillance	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	Yes	-

Antimalaria	treatment pol	icv				Medicine	Year adopted
	eatment of un		d malaria	3		AS+AO	2003
	eatment of P. f					AS+AO	2003
	ent failure of P.					ON	2003
	of severe mala	•				AS; ON	2003
Treatment	of P. vivax					-, -	-
Dosage of p	primaquine for	radical t	reatmen	t of P. v	ivax		
Type of RD	Tused						-
Type of RD	i uscu						
,,	efficacy tests	(clinical	and para	sitolog	ical failure, %	6)	
Therapeution		`	and para 1edian		ical failure, % Follow-up	No. of studies	Species
Therapeution Medicine	c efficacy tests	`				<i>'</i>	Species P. falciparum
Therapeution Medicine AS+AQ Resistance	Year 2015-2016 status by insec	Min N 7.7 ticide cla	1edian 7.7 ss (2010	Max 7.7)-2017)	Follow-up 28 days and use of cl	No. of studies 1 .ass for malaria vector	P. falciparum or control (2017
Therapeution Medicine AS+AQ Resistance	Year 2015-2016 status by insec	Min N 7.7 ticide cla Year	1edian 7.7 ss (2010	Max 7.7)-2017)	Follow-up 28 days and use of cl	No. of studies 1 ass for malaria vector Vectors ²	P. falciparum or control (2017 Used ³
Therapeutic Medicine AS+AQ Resistance Insecticide Carbamates	year 2015-2016 status by insec	Min N 7.7 ticide cla Year: 2014	1edian 7.7 ss (2010 s	Max 7.7)-2017) (%	Follow-up 28 days and use of cl) sites ¹ % (8)	No. of studies 1 ass for malaria vector Vectors ² An. gambiae s.l.	P. falciparum or control (2017 Used ³ Yes
Therapeutic Medicine AS+AQ Resistance: Insecticide Carbamates Organochlor	year 2015-2016 status by insec class	Min N 7.7 ticide cla Year: 2014 2014		Max 7.7)-2017) (% 25	Follow-up 28 days and use of cl) sites ¹ % (8) 0% (8)	No. of studies 1 ass for malaria vector Vectors ²	P. falciparum or control (2017 Used ³ Yes No
Therapeutic Medicine AS+AQ Resistance Insecticide Carbamates Organochlor Organophos	year 2015-2016 status by insec class	Min N 7.7 ticide cla Year: 2014 2014 2014	1edian 7.7 ss (2010 s	Max 7.7)-2017) (% 25 10	Follow-up 28 days and use of cl) sites ¹ % (8) 0% (8) 6 (8)	No. of studies 1 Lass for malaria vector Vectors ² An. gambiae s.l. An. gambiae s.l.	P. falciparum or control (2017 Used ³ Yes
Therapeutic Medicine AS+AQ Resistance: Insecticide Carbamates Organochlor Organophos Pyrethroids	year 2015-2016 status by insect class rines phates	Min N 7.7 ticide cla Year: 2014 2014 2014 2014		Max 7.7)-2017) (% 25 10 09 87	Follow-up 28 days and use of cl) sites ¹ % (8) 0% (8) 5 (8) 5 (8)	No. of studies 1 ass for malaria vector Vectors ² An. gambiae s.l. An. gambiae s.l. An. gambiae s.l.	P. falciparum or control (2017 Used ³ Yes No Yes
Therapeutic Medicine AS+AQ Resistance: Insecticide Carbamates Organochlor Organophos Pyrethroids	c efficacy tests Year 2015-2016 status by insec class rines phates tes for which resis	Min N 7.7 ticide cla Year: 2014 2014 2014 2014	1edian 7.7 255 (2010 5 -2017 -2017 -2017 -2017	Max 7.7)-2017) (% 25 10 09 87	Follow-up 28 days and use of cl) sites ¹ % (8) 0% (8) 5 (8) 5 (8)	No. of studies 1 Lass for malaria vector Vectors ² An. gambiae s.l. An. gambiae s.l.	P. falciparum or control (2017 Used ³ Yes No Yes
Therapeutic Medicine AS+AQ Resistance: Insecticide Carbamates Organochlor Organophos Pyrethroids 1 Percent of si 2 Principal vec	year 2015-2016 status by insect class rines phates	Min N 7.7 ticide cla Year: 2014 2014 2014 2014 ttance confid resistance	1edian 7.7 sss (2010 5 -2017 -2017 -2017 -2017 -rmed and	Max 7.7)-2017) (% 25 10 09 87	Follow-up 28 days and use of cl) sites ¹ % (8) 0% (8) 5 (8) 5 (8)	No. of studies 1 ass for malaria vector Vectors ² An. gambiae s.l. An. gambiae s.l. An. gambiae s.l.	P. falciparum or control (2017 Used ³ Yes No Yes