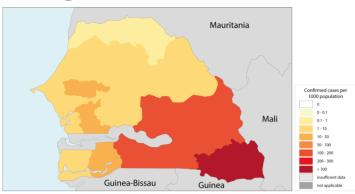
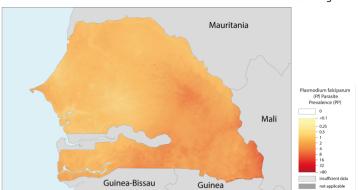
Senegal African Region





## I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	15.8M	99
Low transmission (0-1 case per 1000 population)	91.5K	1
Malaria free (0 cases)	0	
Total	15.9M	

## II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/	Year
Intervention	Toticies/ Strategies	No	adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2009
	ITNs/LLINs distributed to all age groups	Yes	2005
IRS	IRS is recommended	Yes	2005
	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	2007
	Malaria diagnosis is free of charge in the public sector	Yes	2007
Treatment	ACT is free for all ages in public sector	Yes	2010
	The sale of oral artemisinin-based monotherapies (oAMTs)	has never been allowed.	2007
	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for P. falciparum	Yes	2017
	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	Yes	2017
	System for monitoring of adverse reaction to antimalarials exists	Yes	2006
Surveillance	ACD for case investigation (reactive)	Yes	2012
	ACD at community level of febrile cases (pro-active)	Yes	2013
	Mass screening is undertaken	No	-
	Uncomplicated P. falciparum cases routinely admitted	Yes	2006
	Uncomplicated P. vivax cases routinely admitted	No	-
	Case and foci investigation undertaken	Yes	2012
	Case reporting from private sector is mandatory	No	-

Antimalaria treatment policy					1	Medicine	Year adopte
First-line treatment of unconfirmed malaria						AL; AS+AQ; DHA-PP	PQ 2005
First-line treatment of P. falciparum						AL; AS+AQ; DHA-PP	Q 2005
For treatmen	t failure of P.	falcipar	um			-	-
Treatment of severe malaria					AS; QN	2005	
Treatment of	P. vivax					-	-
Dosage of pr	imaquine for	radical	treatmen	t of P. v	rivax		
Type of RDT used					P.f only		
Therapeutic	efficacy tests	(clinical	and para	asitolog	jical failure, 🤊	6)	
Medicine	Year	Min	Median	Max	Follow-up	No. of studies	Species
AL	2010-2014	0	0	1.6	28 days	5	P. falciparum
AS+AQ	2010-2014	0	0.5	1.7	28 days	3	P. falciparum
DHA-PPQ	2010-2014	0	0	0.9	42 days	3	P. falciparum
Resistance st	atus by insec	ticide cl	ass (2010	)-2017)	and use of c	lass for malaria vecto	or control (2017)
Insecticide c	lass Years	(%) sit	es <sup>1</sup> Vec	ors <sup>2</sup>			Use
Carbamates	2010- 2017	51.029 (49)	An.	arabiens	is, An. gambia	e s.l., An. gambiae s.s.	No
Organochlorin	2010- 2017	96.089 (51)	6 An s.s.	arabiens	sis, An. funestu	s s.l., An. gambiae s.l., ,	An. gambiae No
3	Organophosphates 2010- 15.69% (51)		6 40	arahiens	is. An. gambia	e s.l., An. gambiae s.s.	Yes
-	nates		AII.		.,	, · <b>y</b>	103

Principal vectors that exhibited resistance

 $<sup>\</sup>ensuremath{^{\circ}}$  Includes cases from the community and the private sector

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