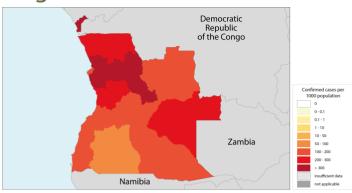
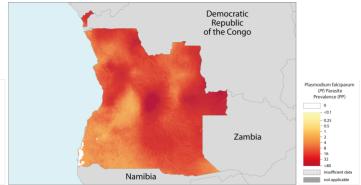
Angola





## I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	29.8M	100
Low transmission (0-1 case per 1000 population)	0	-
Malaria free (0 cases)	0	-
Total	29.8M	

Parasites and vectors			
Major plasmodium species:	P.falciparum: 10	0 (%), P.vivax: 0 (%)	
Major anopheles species:	An. gambiae, Ar	n. funestus, An. nili	
Reported confirmed cases (health facility):	3 874 892	Estimated cases:	4.6M [3.1M, 6.7M]
Confirmed cases at community level:	-		
Confirmed cases from private sector:	-		
Reported deaths:	13 967	Estimated deaths:	13.3K [10K, 16.6K]

## II. Intervention policies and strategies

Intervention	Policies/Strategies		Year
intervention	roticles/strategies	No	adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2001
	ITNs/LLINs distributed to all age groups	Yes	2010
IRS	IRS is recommended	Yes	2003
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	Yes	2009
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	2006
Treatment	ACT is free for all ages in public sector	Yes	2006
	The sale of oral artemisinin-based monotherapies (oAMTs)	are allowed	-
	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	Yes	2006
	G6PD test is a requirement before treatment with primaquine	Yes	2006
	Directly observed treatment with primaquine is undertaken	No	-
	System for monitoring of adverse reaction to antimalarials exists	Yes	2006
Surveillance	ACD for case investigation (reactive)	No	-
	ACD at community level of febrile cases (pro-active)	Yes	-
	Mass screening is undertaken	Yes	-
	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 policy First-line treatment of unconfirmed malaria					AL	2006	
First-line ti	reatment of P. 1	falciparu	m			AL	2006
For treatme	ent failure of P	falcipar	um			ON	2006
Treatment of severe malaria					AS; QN	2006	
Treatment	of P. vivax					-	-
Dosage of	primaquine for	radical t	reatmen	t of P. viv	ax	0.25 m	ng/Kg (14 days)
Type of RD	T used					P.f + P.v	specific (Combo)
Thoropouti	c efficacy tests	(elipieal	and nar	eital a aic	al failura 9/	`	
Medicine	Year	`	dedian		ollow-up	No. of studies	Species
Al	2013-2017	2.6	4.05	13.6	28 days	6	P. falciparum
AS+AO	2015-2017	0	0	6.3	28 days	4	P. falciparum
DHA-PPQ	2015-2015	0	0.7	1.4	42 days	2	P. falciparum
Docietance	status bu incos	ticido el	sss /201/	2017) -	nd use of sl	ass for malaria vec	tor control (2017)
Insecticide		Year				Vectors <sup>2</sup>	Used <sup>3</sup>
Carbamates			-	(%) sites <sup>1</sup> 6.25% (16)		1000015	No.
					. ,	An. gambiae s.l.	No No
Organochlorines 2010-2010		100% (3)		An. gambiae s.l.	No No		
Organophosphates 2010-2015 Pyrethroids 2010-2015		0% (14) 16.67% (18)		4			
Pyrethroids					, ,	An. gambiae s.l.	Yes
<sup>1</sup> Percent of si	tes for which resi	stance con	irmed and	total numb	er of sites tha	t reported data (n)	
2p-111	tors that exhibite	d resistanc	e				