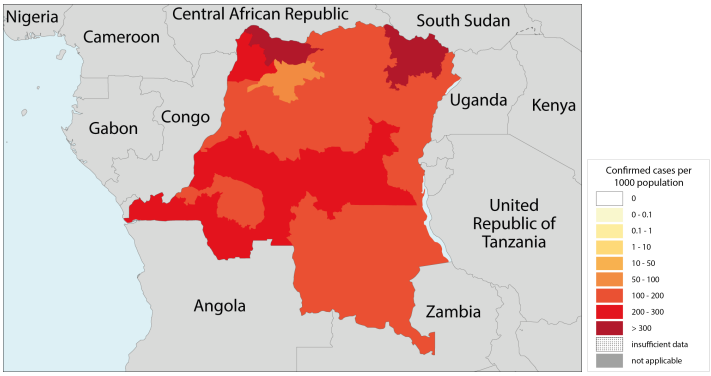
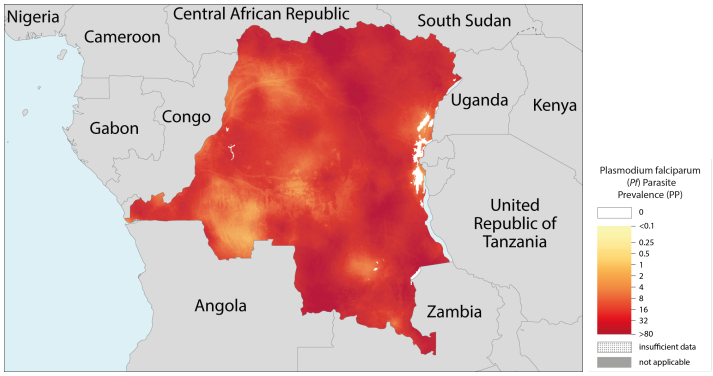
# Democratic Republic of the Congo

African Region




## I. Epidemiological profile

| Population (UN Population Division) | 2017 | % |
|---|---|---|
| High transmission (>1 case per 1000 population) | 78.9M | 97 |
| Low transmission (0-1 case per 1000 population) | 2.4M | 3 |
| Malaria free (0 cases) | 0 | - |
| Total | 81.3M | |

Parasites and vectors

| | |
|---|---|
| Major plasmodium species: | P.falciparum: 100 (%) , P.vivax: 0 (%) |
| Major anopheles species: | *An. gambiae, An. funestus, An. nili, An. moucheti* |

| | | | |
|---|---|---|---|
| Reported confirmed cases (health facility): | 15 176 927 | Estimated cases: | 25M [15.7M, 38.6M] |
| Confirmed cases at community level: | 1 616 075 | | |
| Confirmed cases from private sector: | - | | |
| Reported deaths: | 27 458 | Estimated deaths: | 46.8K [36.2K, 57.3K] |

## II. Intervention policies and strategies

| Intervention | Policies/Strategies | Yes/ No | Year adopted |
|---|---|---|---|
| ITN | ITNs/LLINs distributed free of charge | Yes | 2006 |
| | ITNs/LLINs distributed to all age groups | Yes | 2008 |
| IRS | IRS is recommended | Yes | 2007 |
| | DDT is used for IRS | No | - |
| Larval control | Use of Larval Control | Yes | 1998 |
| IPT | IPT used to prevent malaria during pregnancy | Yes | 2004 |
| 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 | 2006 |
| | The sale of oral artemisinin-based monotherapies (oAMTs) | is banned | 2009 |
| | 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 | 2010 |
| Surveillance | ACD for case investigation (reactive) | No | - |
| | ACD at community level of febrile cases (pro-active) | Yes | 2010 |
| | 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 | 2005 |

| Antimalaria treatment policy | Medicine | Year adopted |
|---|---|---|
| First-line treatment of unconfirmed malaria | AS+AQ | 2005 |
| First-line treatment of P. falciparum | AS+AQ | 2005 |
| For treatment failure of P. falciparum | QN | 2005 |
| Treatment of severe malaria | AS, QN | 2005 |
| Treatment of P. vivax | - | - |
| Dosage of primaquine for radical treatment of P. vivax | | |
| Type of RDT used | | P.f only |

Therapeutic efficacy tests (clinical and parasitological failure, %)

| Medicine | Year | Min | Median | Max | Follow-up | No. of studies | Species |
|---|---|---|---|---|---|---|---|
| AL | 2011-2014 | 0 | 0.55 | 5.9 | 28 days | 8 | *P. falciparum* |
| AS+AQ | 2011-2014 | 0 | 1.1 | 4.7 | 28 days | 7 | *P. falciparum* |

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 | 2010-2016 | 9.09% (11) | *An. gambiae s.l.* | Yes |
| Organochlorines | 2010-2015 | 100% (10) | *An. funestus s.s., An. gambiae s.l.* | No |
| Organophosphates | 2012-2015 | 18.18% (11) | *An. gambiae s.l.* | No |
| Pyrethroids | 2010-2017 | 90.48% (21) | *An. funestus s.s., An. gambiae s.l.* | Yes |

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

[2] Principal vectors that exhibited resistance

[3] Class used for malaria vector control in 2017