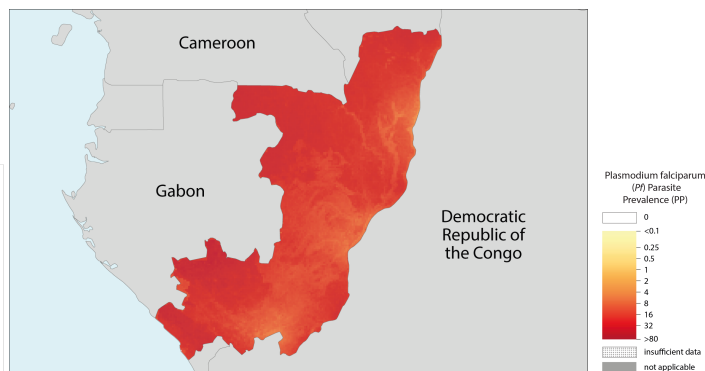
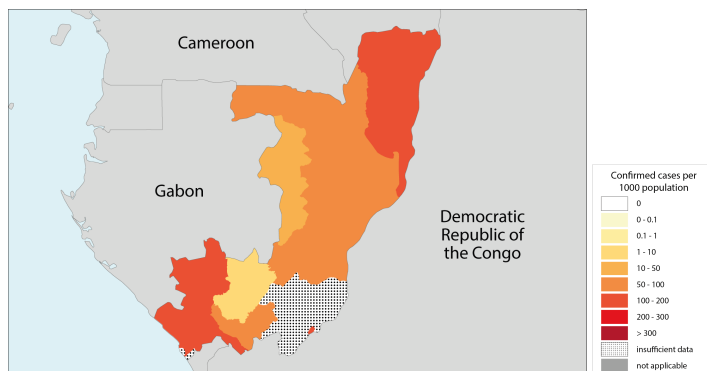


Congo

African Region



I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	5.3M	100
Low transmission (0-1 case per 1000 population)	0	-
Malaria free (0 cases)	0	-
Total	5.3M	

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):	127 939	Estimated cases:	1M [558.9K, 1.7M]
Confirmed cases at community level:	-		
Confirmed cases from private sector:	-		
Reported deaths:	229	Estimated deaths:	2K [1.8K, 2.2K]

II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/No	Year adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2007
	ITNs/LLINs distributed to all age groups	Yes	2011
IRS	IRS is recommended	Yes	2007
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	No	-
IPT	IPT used to prevent malaria during pregnancy	Yes	2006
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2014
	Malaria diagnosis is free of charge in the public sector	No	-
Treatment	ACT is free for all ages in public sector	No	-
	The sale of oral artemisinin-based monotherapies (oAMTs)	is banned	2006
	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	-
	ACD for case investigation (reactive)	No	-
	ACD at community level of febrile cases (pro-active)	No	-
	Mass screening is undertaken	No	-
Surveillance	Uncomplicated P. falciparum cases routinely admitted	Yes	-
	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	-
First-line treatment of P. falciparum						AS+AQ	-
For treatment failure of P. falciparum						AL	-
Treatment of severe malaria						QN	-
Treatment of P. vivax						-	-
Dosage of primaquine for radical treatment of P. vivax							
Type of RDT used						-	
Therapeutic efficacy tests (clinical and parasitological failure, %)							
Medicine	Year	Min	Median	Max	Follow-up	No. of studies	Species
AL	2010-2017	0	0	3.6	28 days	5	<i>P. falciparum</i>
AS+AO	2010-2017	0	2.4	4	28 days	4	<i>P. falciparum</i>

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	2013-2014	0% (4)	-	No	
Organochlorines	2013-2014	25% (4)	An. gambiae s.l.	No	
Organophosphates	2013-2014	0% (4)	-	No	
Pyrethroids	2013-2013	100% (1)	An. gambiae s.l.	Yes	

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

²Principal vectors that exhibited resistance

³Class used for malaria vector control in 2017