

# Colombia

Region of the Americas



## I. Epidemiological profile

Population (UN)	2016	%
High transmission (> 1 case per 1000 population)	4,890,000	10
Low transmission (0-1 cases per 1000 population)	5,880,000	12
Malaria-free (0 cases)	37,900,000	78
Total	48,650,000	

Parasites and vectors			
Plasmodium species:	<i>P. falciparum</i> (60%), <i>P. vivax</i> (40%)		
Major anopheles species:	<i>An. darlingi</i> , <i>An. albimanus</i> , <i>An. nuneztovari</i> , <i>An. neivai</i> , <i>An. punctimacula</i> , <i>An. pseudopunctipennis</i>		
Reported confirmed cases (health facility):	82,609	Estimated cases:	134,400 [98,800–173,200]
Confirmed cases at community level:	-		
Reported deaths:	36	Estimated deaths:	≤ 100

## II. Intervention policies and strategies

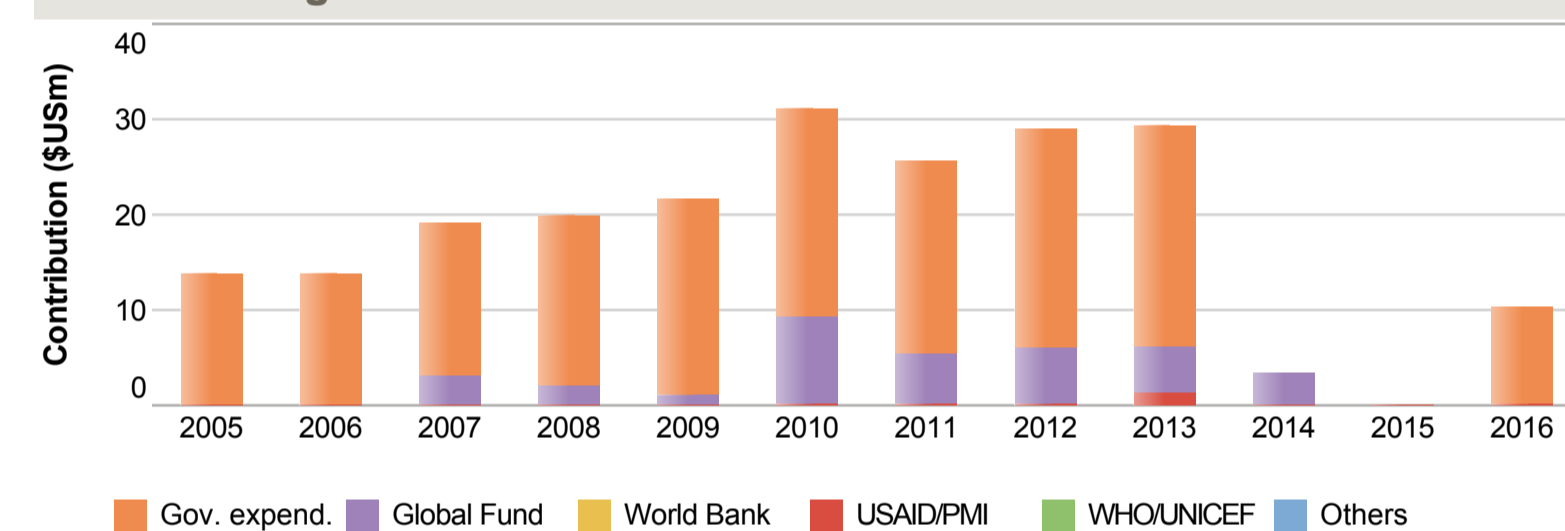
Intervention	Policies/strategies	Yes/No	Adopted
ITN	ITNs/ LLINs distributed free of charge	Yes	2005
	ITNs/ LLINs distributed to all age groups	Yes	2012
IRS	IRS is recommended	Yes	1958
	DDT is authorized for IRS	No	-
Larval control	Use of larval control recommended	No	-
IPT	IPT used to prevent malaria during pregnancy	N/A	-
Diagnosis	Patients of all ages should receive diagnostic test	Yes	1984
	Malaria diagnosis is free of charge in the public sector	Yes	1958
Treatment	ACT is free of charge for all ages in public sector	Yes	2008
	The sale of oral artemisinin-based monotherapies (oAMTs)	Is banned	-
	Single dose of primaquine is used as gametocidal medicine for <i>P. falciparum</i>	Yes	2008
	Primaquine is used for radical treatment of <i>P. vivax</i>	Yes	-
	G6PD test is a requirement before treatment with primaquine	No	-
	Directly observed treatment with primaquine is undertaken	No	-
Surveillance	System for monitoring adverse reactions to antimalarials exists	Yes	2012
	ACD for case investigation (reactive)	Yes	1998
	ACD of febrile cases at community level (pro-active)	Yes	-
	Mass screening is undertaken	Yes	-
	Uncomplicated <i>P. falciparum</i> cases routinely admitted	No	-
Uncomplicated <i>P. vivax</i> cases routinely admitted	No	-	
Foci and case investigation undertaken	-	-	
Case reporting from private sector is mandatory	Yes	1998	

Antimalarial treatment policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	-	-
First-line treatment of <i>P. falciparum</i>	AL+PQ	2006
Treatment failure of <i>P. falciparum</i>	QN+CL	2004
Treatment of severe malaria	AS	-
Treatment of <i>P. vivax</i>	CQ+PQ(14d)	1960s
Dosage of Primaquine for radical treatment of <i>P. vivax</i>		0.25 mg/Kg (14 days)
Type of RDT used		-

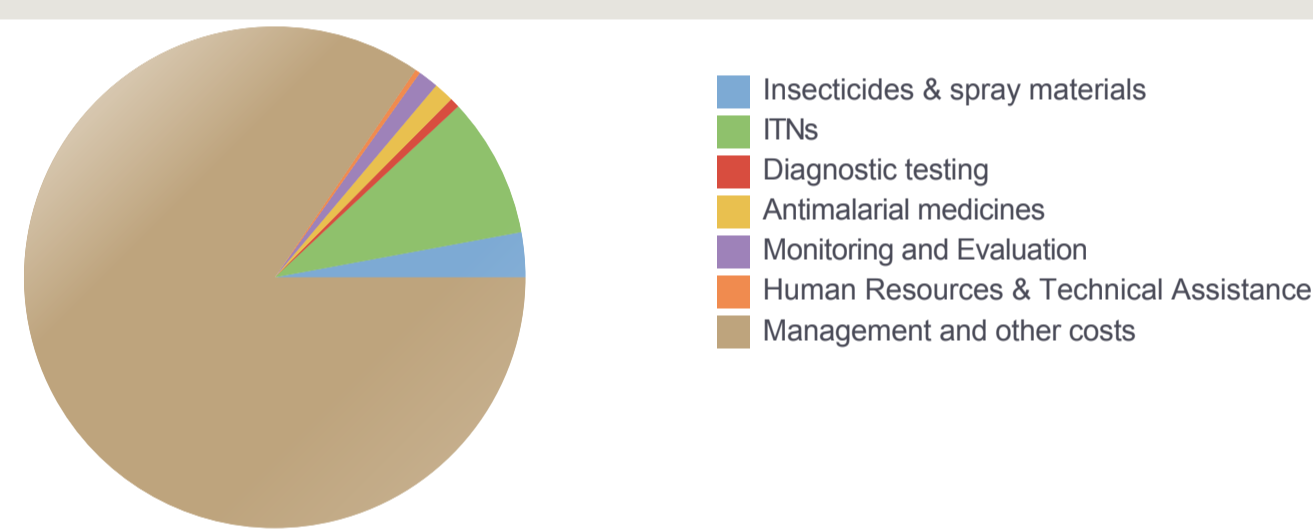
Therapeutic efficacy tests (clinical and parasitological failure, %)							
Medicine	Year(s)	Min	Median	Max	Follow-up	No. of studies	Species
AL	2011-2013	0	0	0	28 days	4	<i>P. falciparum</i>
CQ	2011-2011	0	0	0	28 days	1	<i>P. vivax</i>
CQ+PQ	2012-2013	0	0	0	28 days	2	<i>P. vivax</i>

Insecticide resistance tests (mosquito mortality, %)							
Insecticide class	Years	Min	Mean	Max	No. of sites	Species	
Organochlorines	2011-2015	0.8	1	1	21	<i>An. albimanus</i> , <i>An. darlingi</i> , + other	
Organophosphates	2011-2015	0.9	1	1	27	<i>An. albimanus</i> , <i>An. darlingi</i> , + other	
Pyrethroids	2011-2016	0.3	0.9	1	35	<i>An. albimanus</i> , <i>An. darlingi</i> , + other	

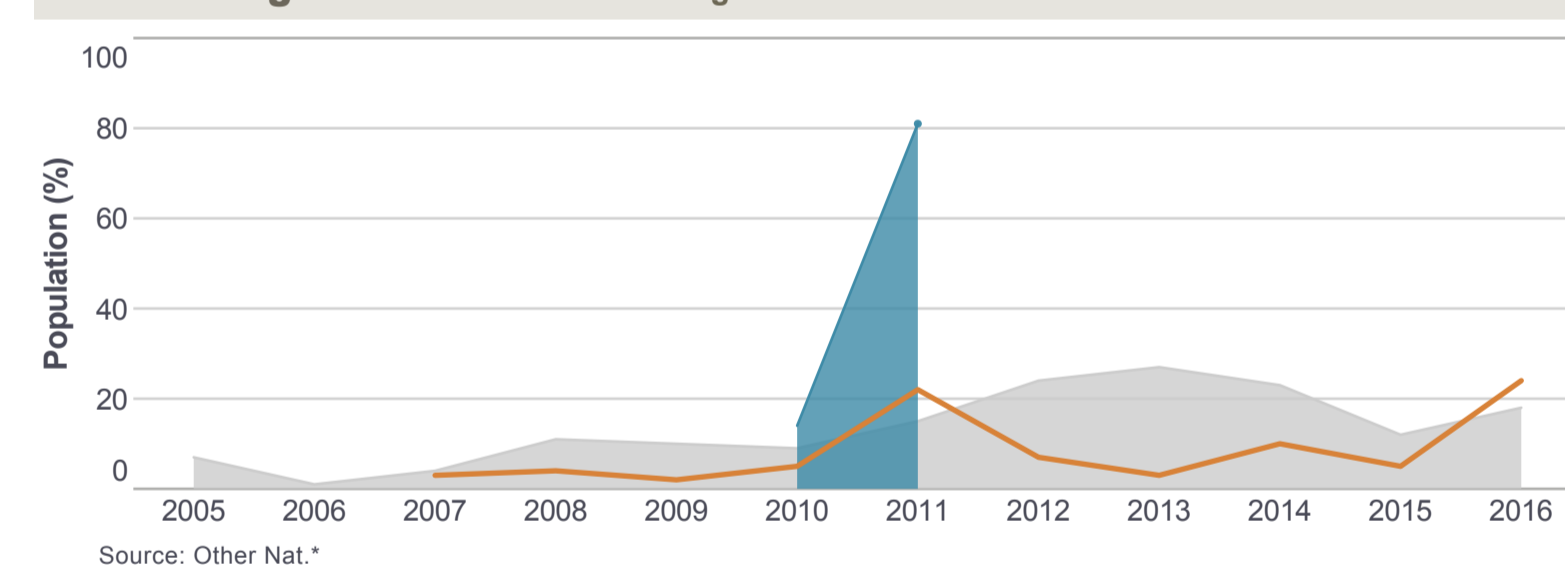
## III. Financing



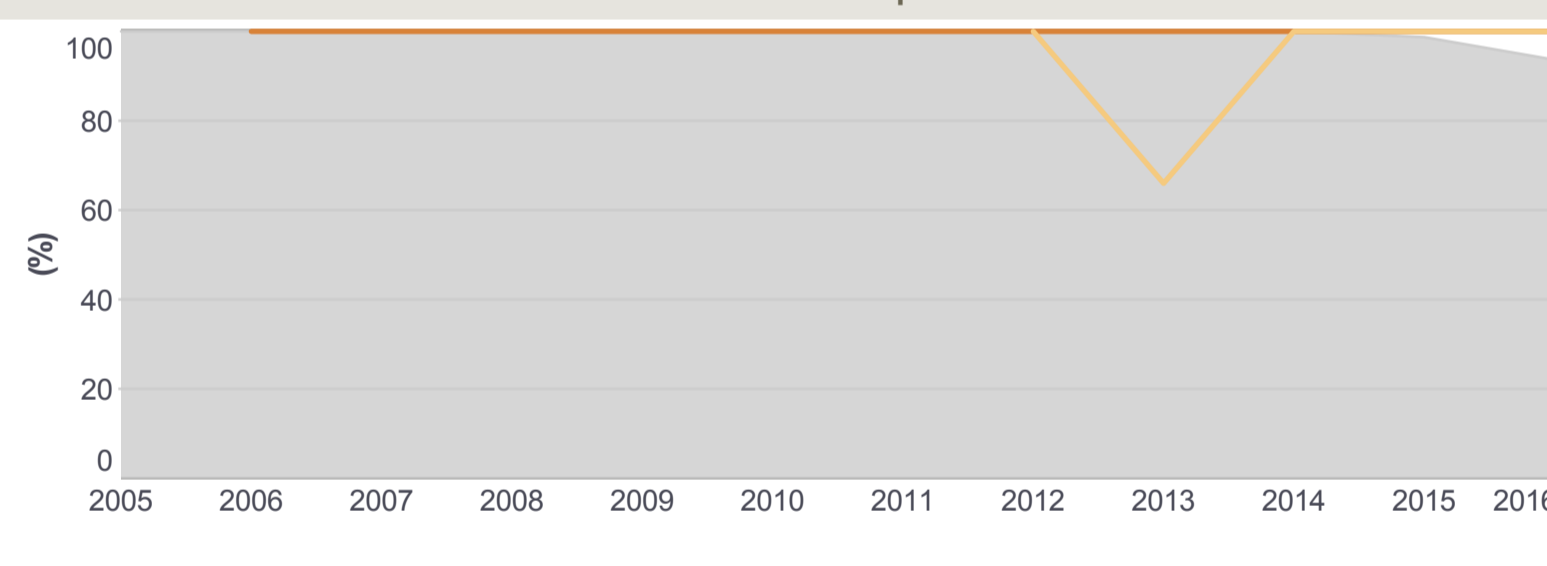
## Government expenditure by intervention in 2016



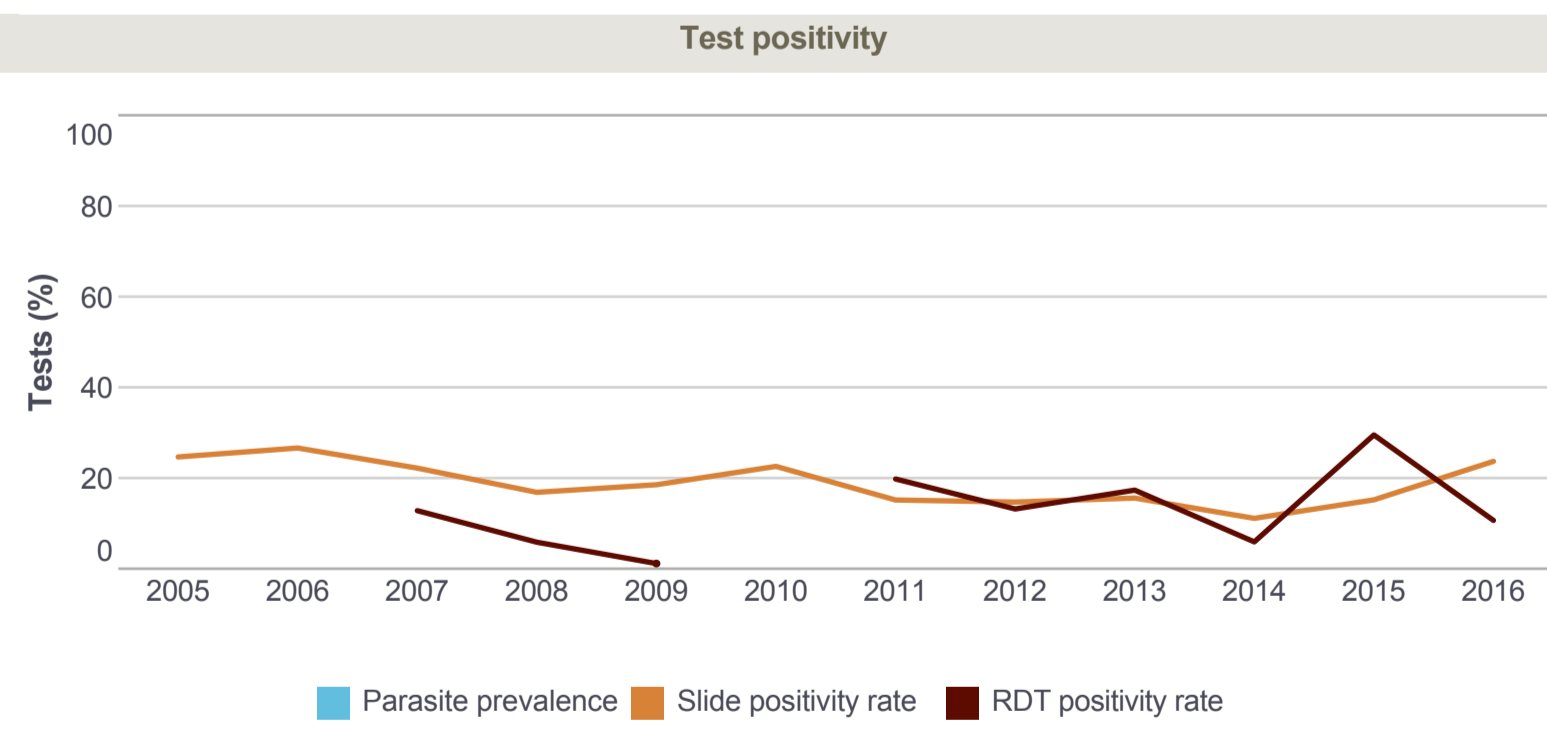
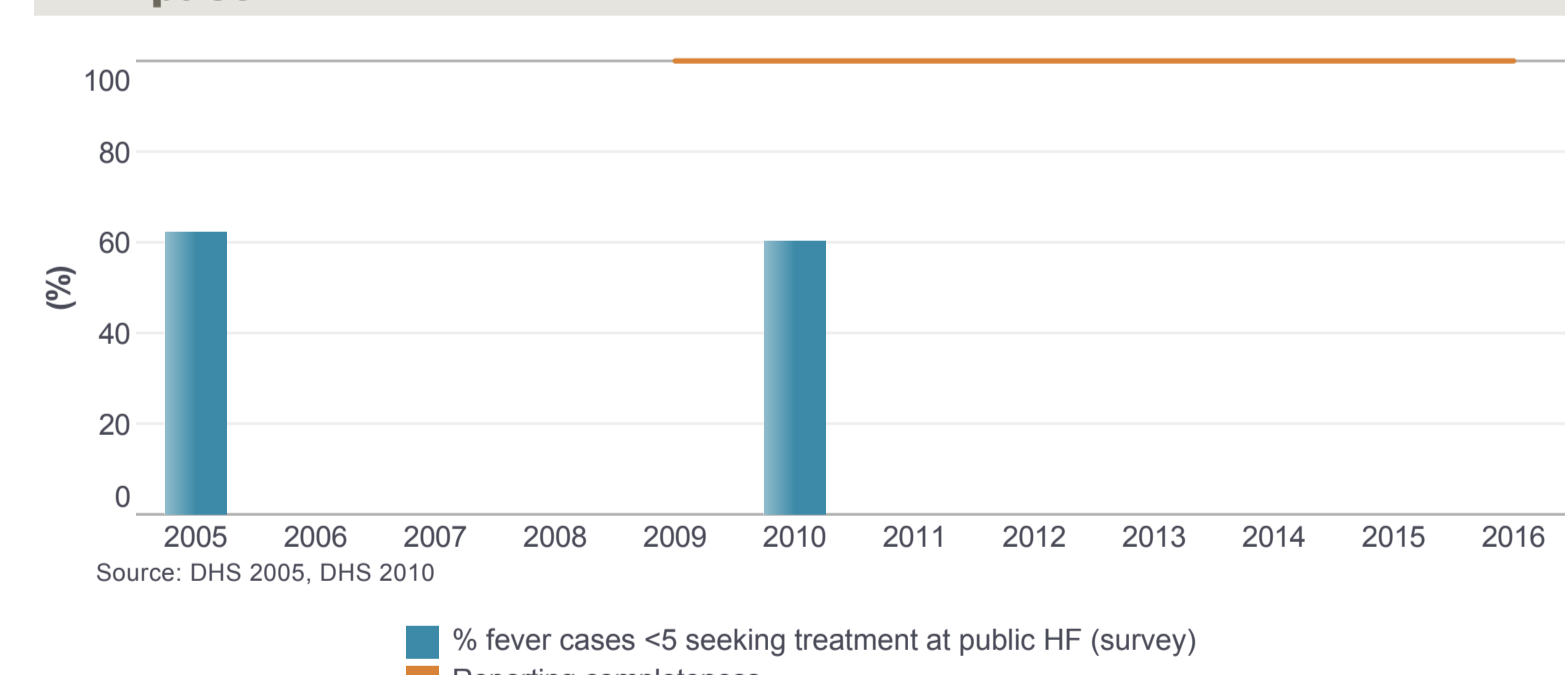
## IV. Coverage



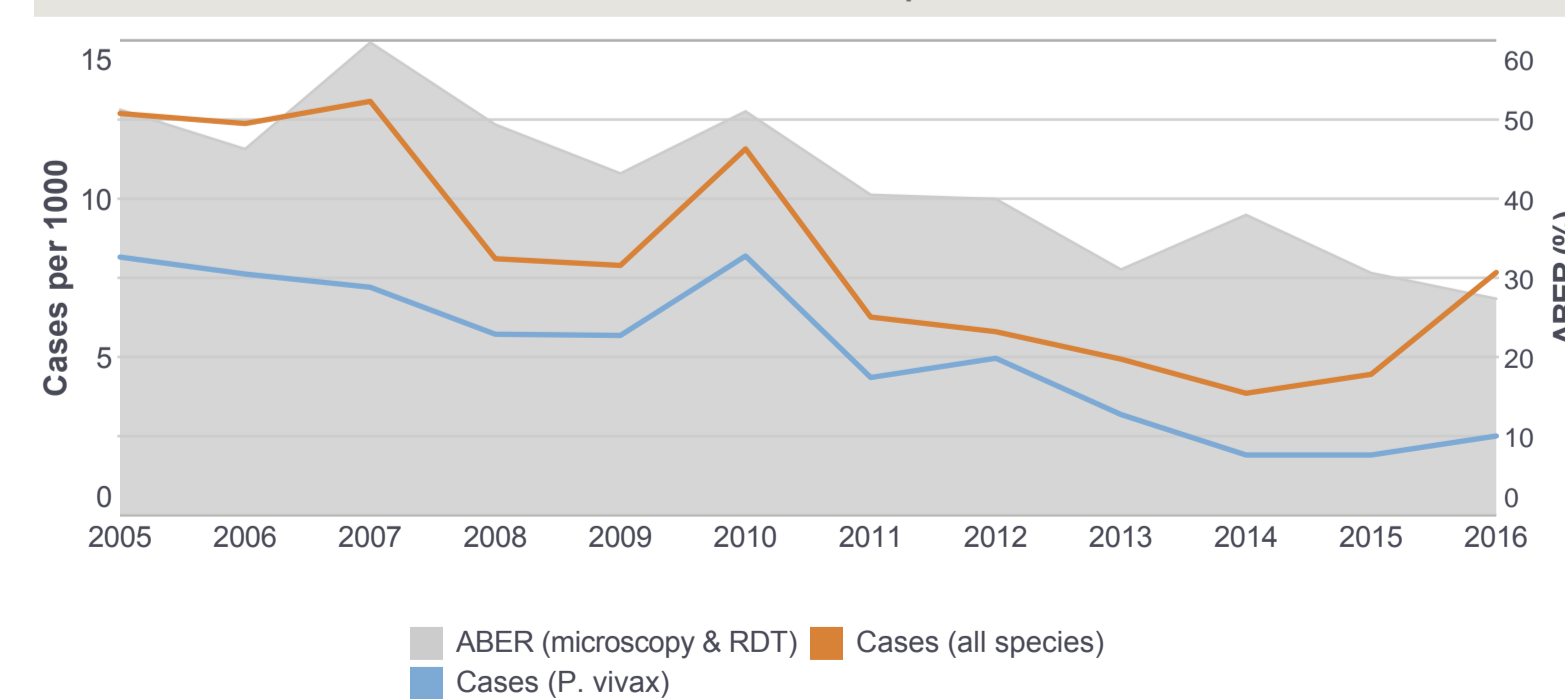
## Cases tested and treated in public sector



## V. Impact



## Confirmed malaria cases per 1000 and ABER



## Malaria admissions and deaths

