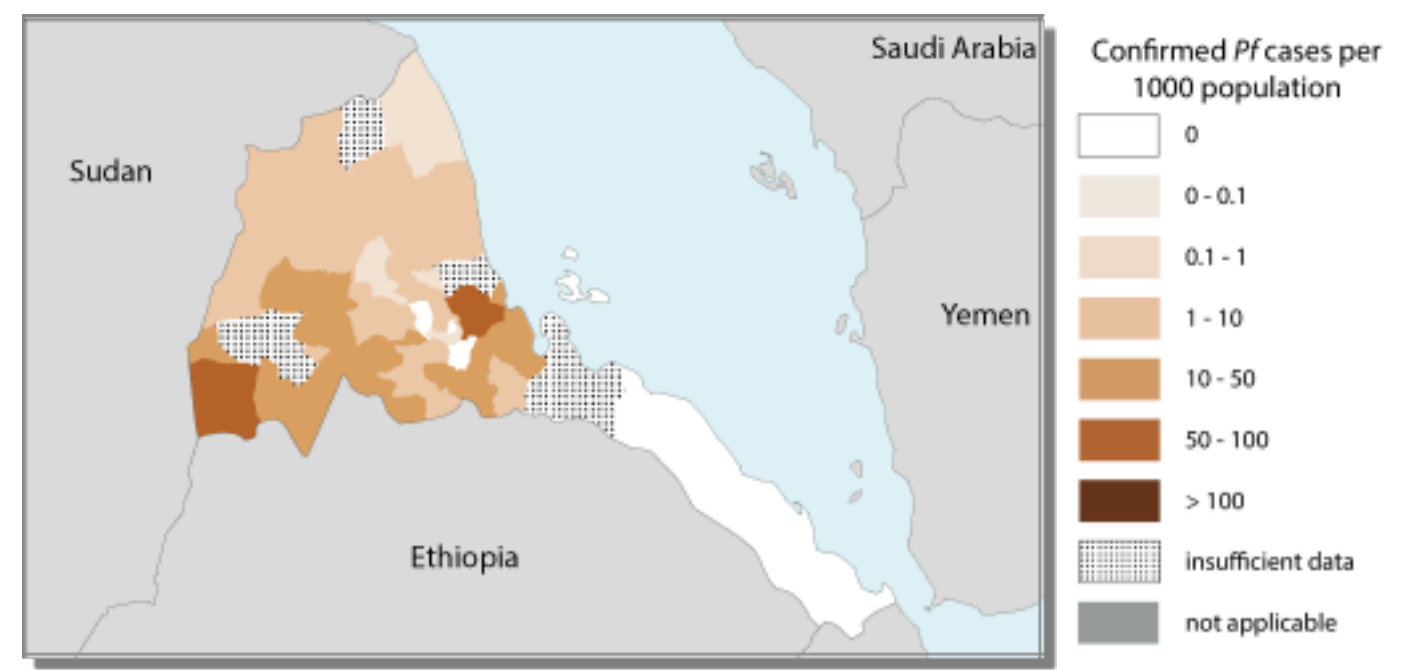
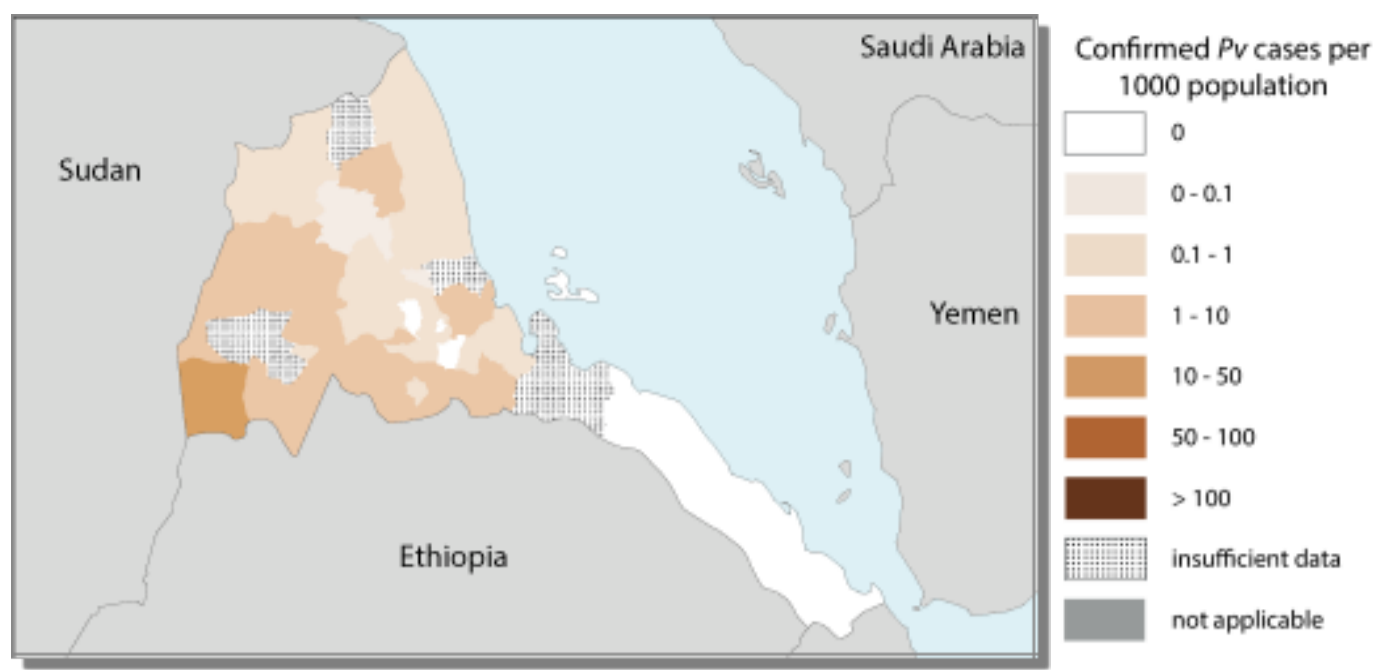


# Eritrea

African Region



## I. Epidemiological profile

Population (UN)	2016	%
High transmission (> 1 case per 1000 population)	3,520,000	71
Low transmission (0-1 cases per 1000 population)	1,440,000	29
Malaria-free (0 cases)	-	-
Total	4,955,000	

Parasites and vectors			
Plasmodium species:	<i>P. falciparum</i> (88%), <i>P. vivax</i> (12%)		
Major anopheles species:	<i>An. arabiensis</i>		
Reported confirmed cases (health facility):	24,251	Estimated cases:	72,800 [44,000–107,400]
Confirmed cases at community level:	0		
Reported deaths:	21	Estimated deaths:	170 [≤ 10–400]

## II. Intervention policies and strategies

Intervention	Policies/strategies	Yes/No	Adopted
ITN	ITNs/ LLINs distributed free of charge	Yes	2002
	ITNs/ LLINs distributed to all age groups	Yes	2000
IRS	IRS is recommended	Yes	1995
	DDT is authorized for IRS	Yes	-
Larval control	Use of larval control recommended	Yes	1995
IPT	IPT used to prevent malaria during pregnancy	No	-
Diagnosis	Patients of all ages should receive diagnostic test	Yes	1997
	Malaria diagnosis is free of charge in the public sector	Yes	1997
Treatment	ACT is free of charge for all ages in public sector	Yes	2007
	The sale of oral artemisinin-based monotherapies (oAMTs)	Never allowed	-
	Single dose of primaquine is used as gametocidal medicine for <i>P. falciparum</i>	No	2015
	Primaquine is used for radical treatment of <i>P. vivax</i>	Yes	2002
	G6PD test is a requirement before treatment with primaquine	No	-
	Directly observed treatment with primaquine is undertaken	Yes	2016
	System for monitoring adverse reactions to antimalarials exists	Yes	2013
Surveillance	ACD for case investigation (reactive)	Yes	-
	ACD of febrile cases at community level (pro-active)	No	-
	Mass screening is undertaken	No	-
	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	No	-

Antimalarial treatment policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	AS+AQ	2007
First-line treatment of <i>P. falciparum</i>	AS+AQ	2007
Treatment failure of <i>P. falciparum</i>	QN	2002
Treatment of severe malaria	QN	2002
Treatment of <i>P. vivax</i>	AS+AQ+PQ	2007
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, %)

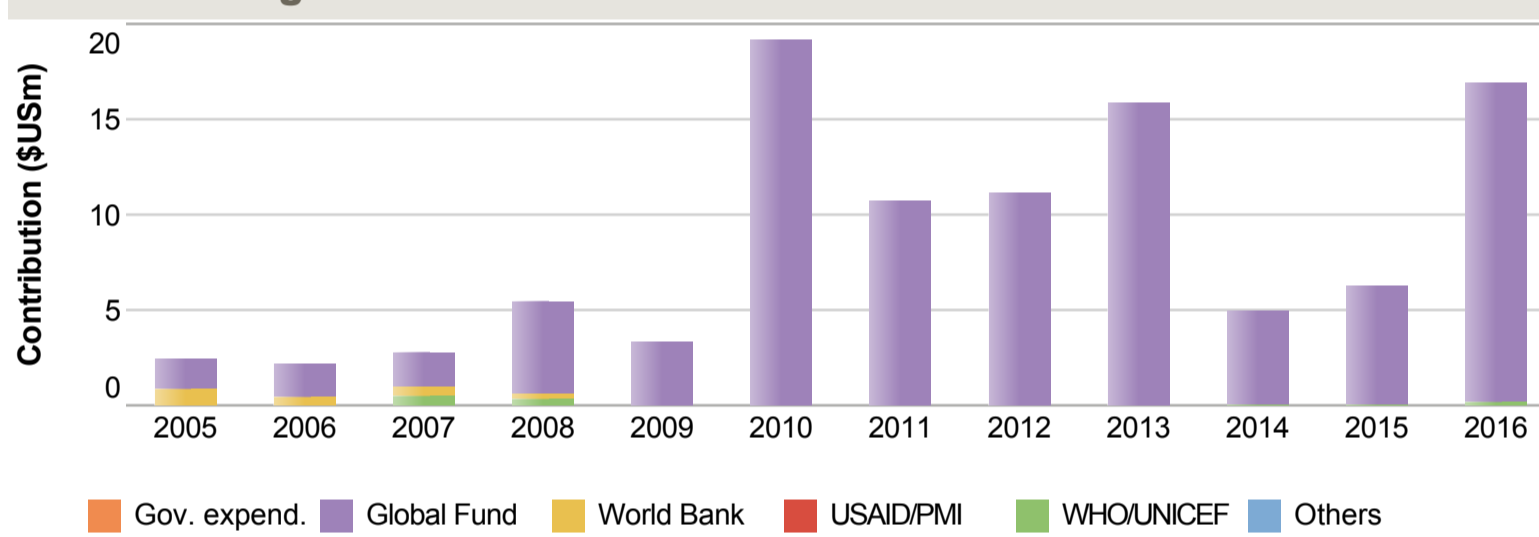
Medicine	Year(s)	Min	Median	Max	Follow-up	No. of studies	Species
AS+AQ	2010-2016	0	1.9	7.9	28 days	17	<i>P. falciparum</i>

### Insecticide resistance tests (mosquito mortality, %)

Insecticide class	Years	Min	Mean	Max	No. of sites	Species
Pyrethroids	2010-2014	0.6	0.9	1	2	<i>An. gambiae s.l.</i>
Organochlorines	2010-2014	0.7	0.8	0.9	2	<i>An. funestus s.l.</i> , <i>An. gambiae s.l.</i>
Organophosphates	2013-2014	1	1	1	2	<i>An. gambiae s.l.</i>
Carbamates	2013-2014	1	1	1	2	<i>An. gambiae s.l.</i>

## III. Financing

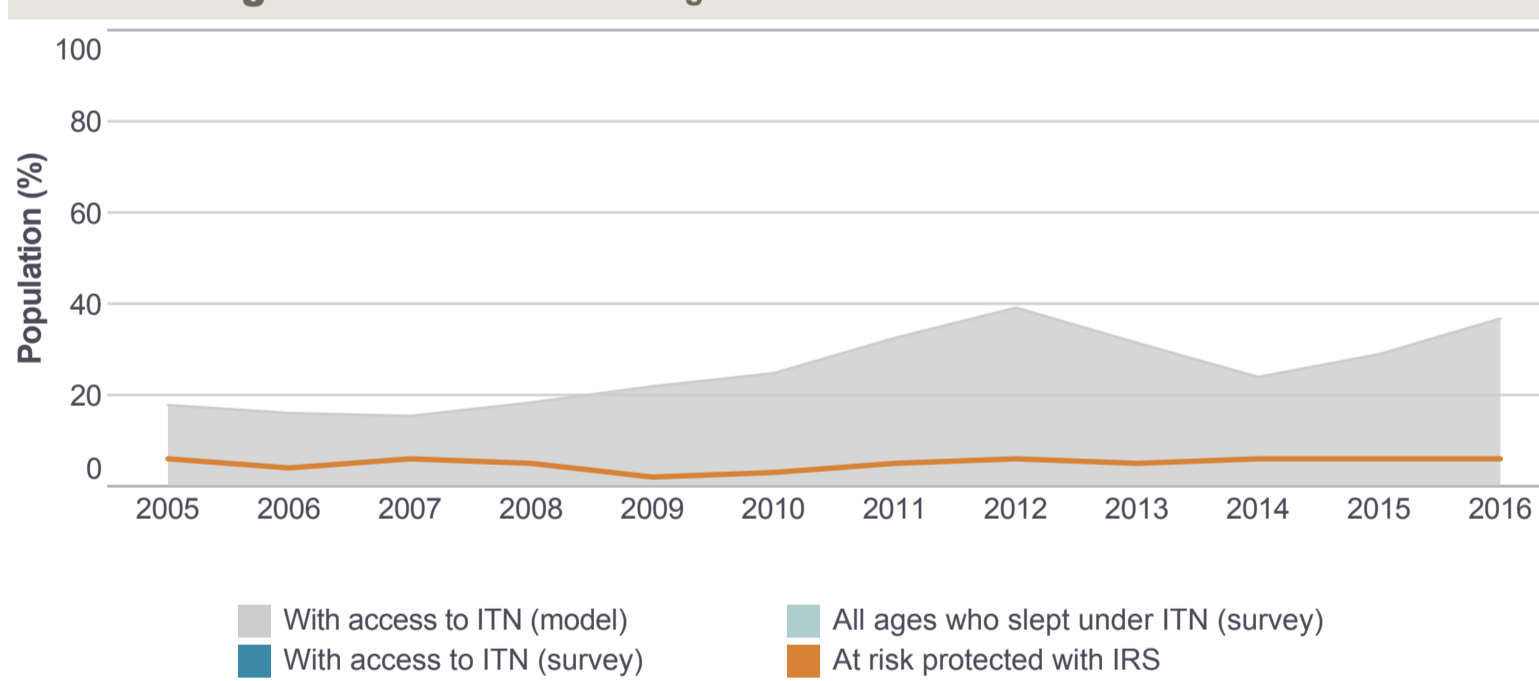
### Sources of financing



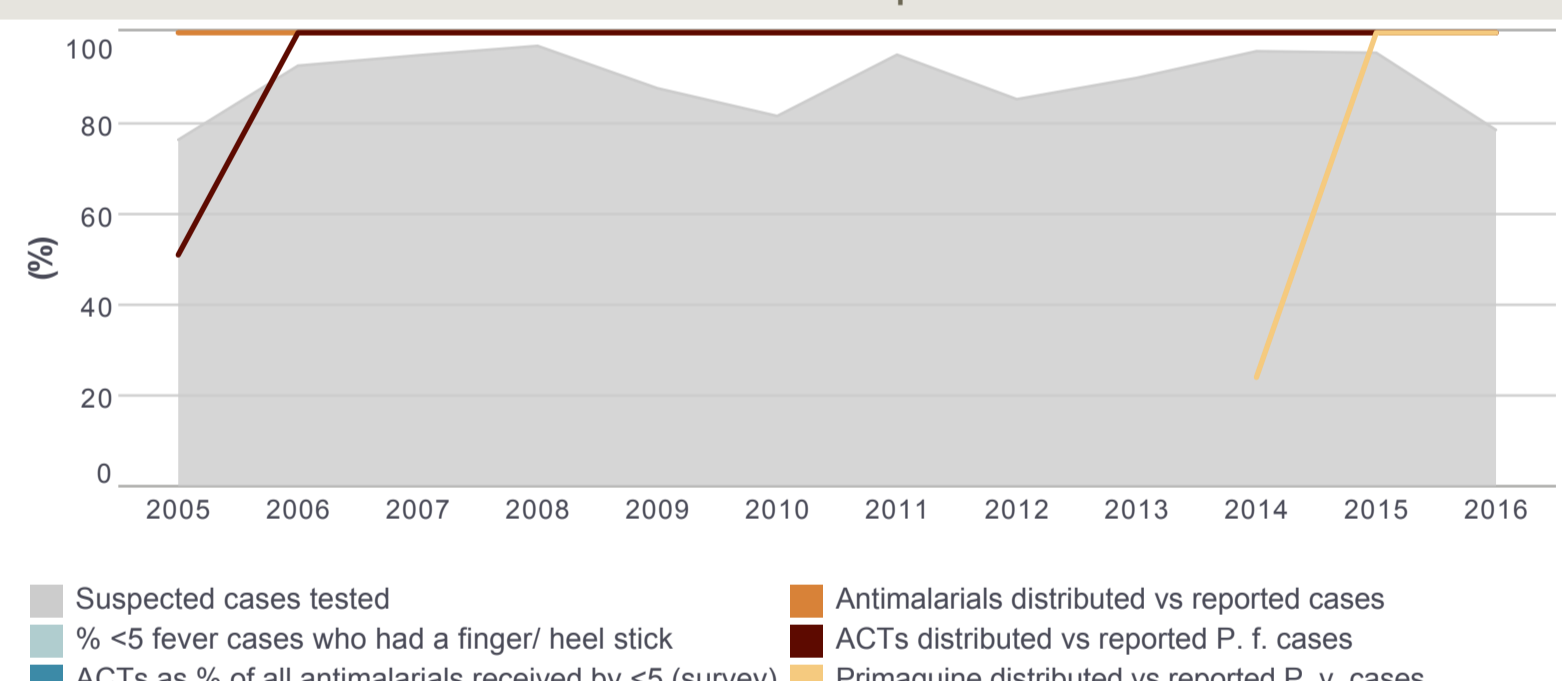
### Government expenditure by intervention in 2016

## IV. Coverage

### Coverage of ITN and IRS

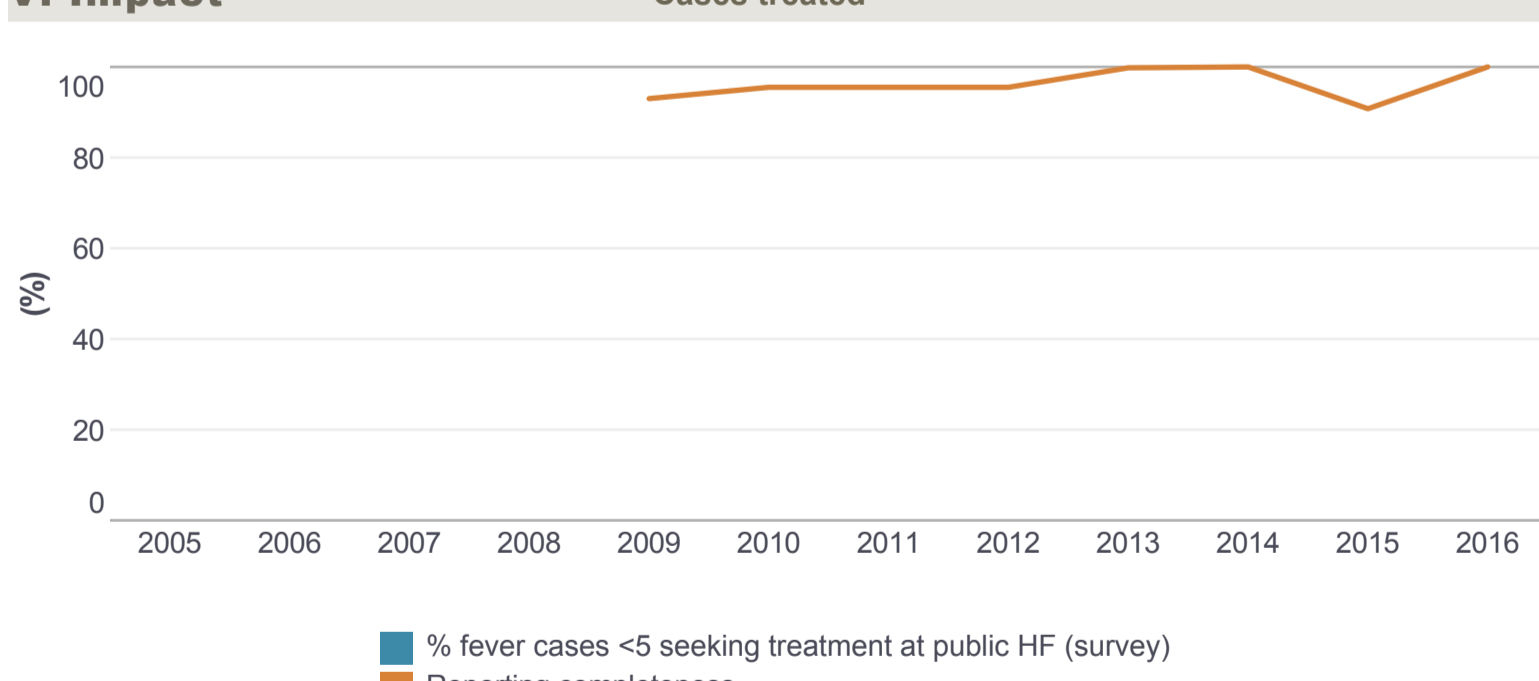


### Cases tested and treated in public sector

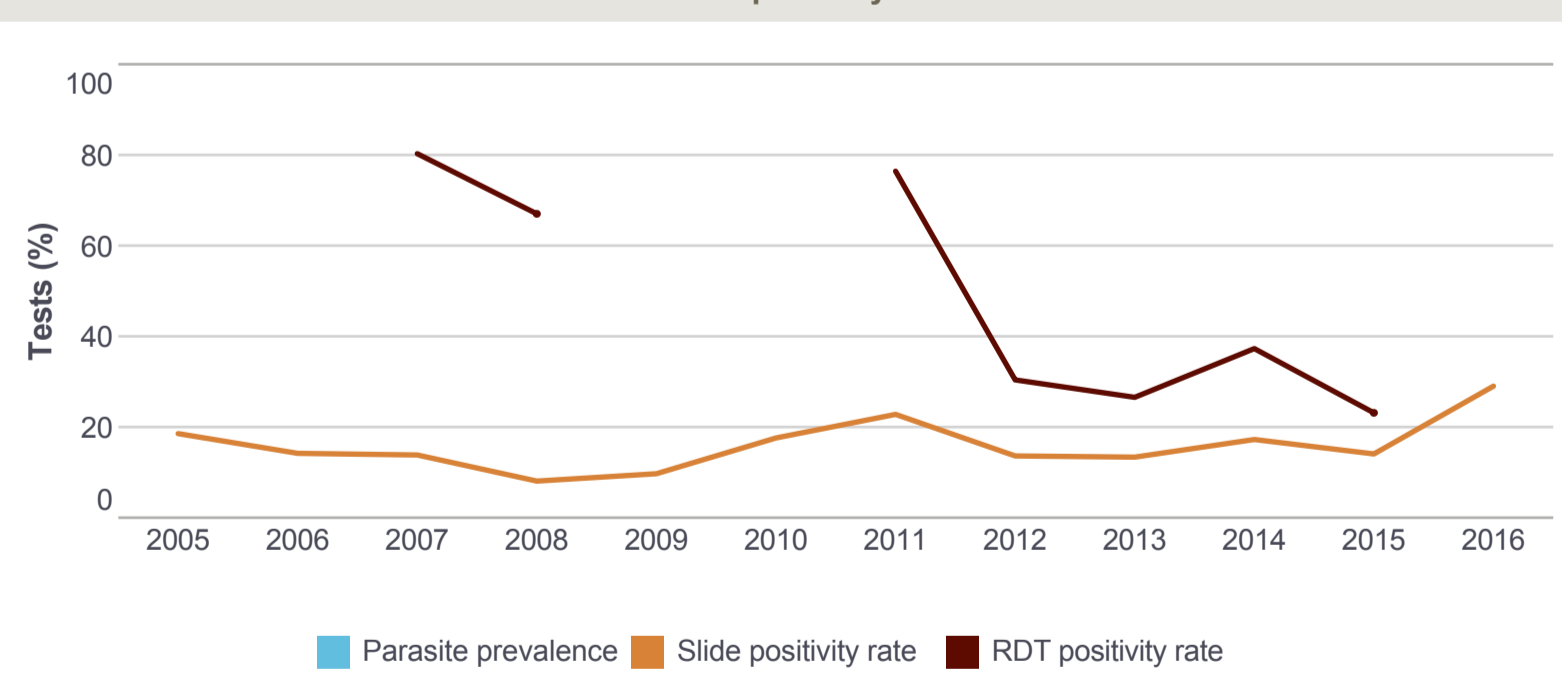


## V. Impact

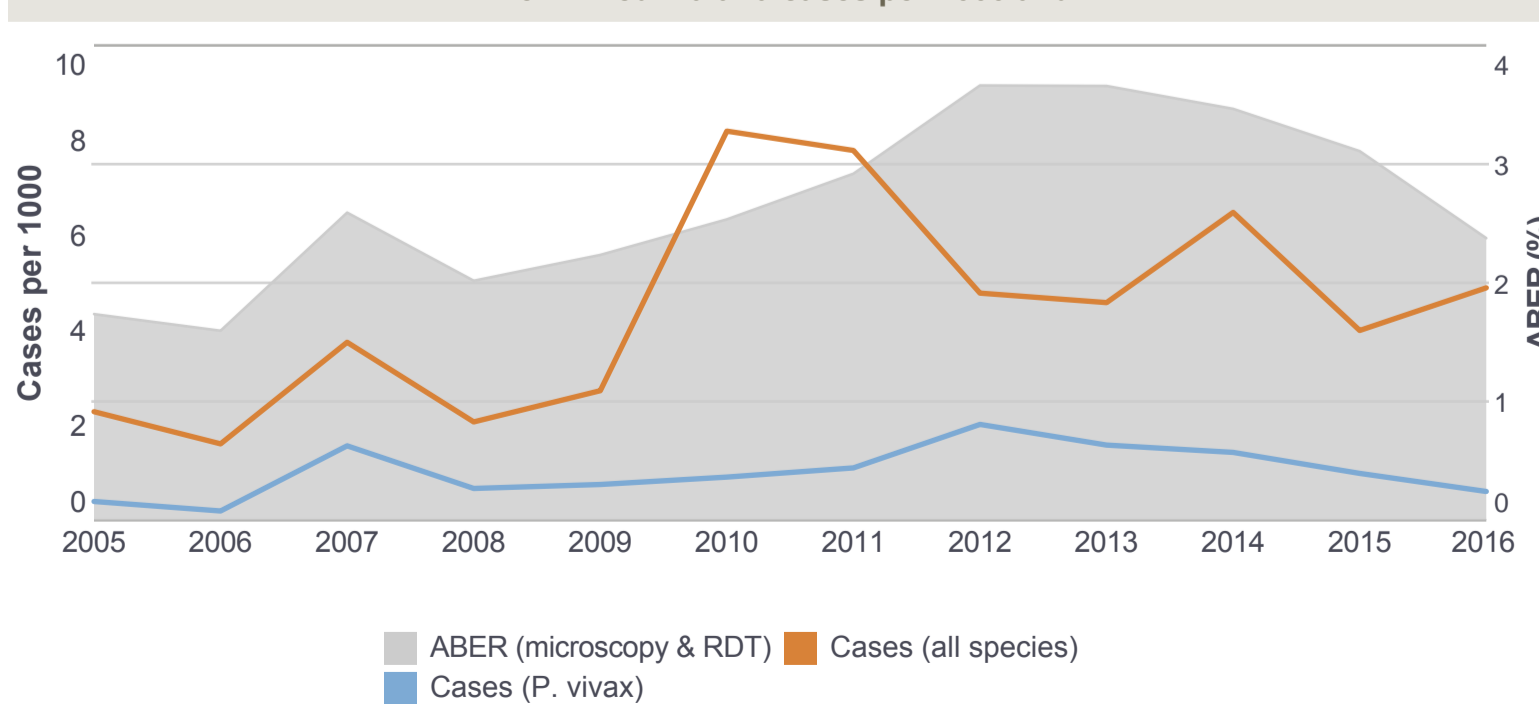
### Cases treated



### Test positivity



### Confirmed malaria cases per 1000 and ABER



### Malaria admissions and deaths (per 100 000)

