

Malaria resurgence is linked to reduction of malaria-control programs

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Since the 1930s, there have been 75 documented episodes of malaria resurgence worldwide, most of which were linked to weakening of malaria control programs, finds a new study published in BioMed Central's open access journal *Malaria Journal*. The study, which is allied to the theme of this year's World Malaria Day (25th April 2012) "Sustain Gains, Save Lives: Invest in Malaria", found that the most common reason for weakening of malaria control programs was funding disruptions.

There are over 200 million cases of malaria each year with 85% of all cases being children under five years old and, according to the <u>World</u> <u>Health Organization</u>, in 2010 malaria was responsible for 655 000 deaths worldwide, mostly among African children. Deaths which are unnecessary, because malaria is both preventable and curable.

Low cost treatment is available and simple solutions to prevent the diseases, like insecticide treated <u>mosquito nets</u> and <u>malaria prevention</u> during pregnancy, have all been shown to reduce the number of deaths due to malaria. Initiatives like <u>Roll Back Malaria</u>, set up in 1998, aim to reduce <u>child mortality</u> due to malaria by two thirds, by 2015, using large scale implementation of these simple solutions.

Researchers from the Clinton Health Access Initiative, the Johns Hopkins Malaria Research Institute, the Center for Disease Dynamics, Economics and Policy, and the Global Health Group at the University of California, San Francisco (UCSF) conducted a systematic review of the



literature to identify all documented malaria resurgence events where malaria had returned to an area previously under control.

The causes of malaria resurgence were categorized as being due to weakened <u>malaria control</u> programs, increased intensity of <u>malaria</u> transmission (such movement of people or mosquitoes, weather, or changes in land use), or technical obstacles including resistance of the <u>malaria parasite</u> to drugs. 91% of the 75 resurgence events found were blamed at least in part on the weakening of malaria control programs.

Lead author Justin Cohen, PhD, MPH of the Clinton Health Access Initiative explains, "Malaria control programs have been shown to be extremely successful in reducing the number of cases of malaria to very low levels, but history demonstrates that gains can be lost rapidly if financial and political support is not sustained. Finding ways to ensure continued funding for malaria control today will be crucial to building on the gains of the past decade."

Investments in malaria control have created unprecedented momentum and yielded remarkable returns in the past years. However, the future of anti-malaria programs is uncertain as current funding is projected to decline over the next few years.

Sir Richard Feachem, KBE, FREng, DSc(Med), PhD, who was the founding Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria, and current Director of the UCSF <u>Global</u> <u>Health Group</u>, calls on the malaria community and donors to heed these results in order to continue the fight against malaria. "This work demonstrates the historical evidence on what happens when malaria control efforts and funding streams prematurely turn their attention away from malaria. This paradox of success needs greater attention to maximize our investments in malaria control and elimination."



Finding innovative ways to continue investing in successful malaria control and elimination programs is necessary to ensure that the dramatic progress in the fight against malaria is maintained and extended. Maintaining support for these programs will allow them to continue to save thousands of lives year after year.

More information: Malaria resurgence: a systematic review and assessment of its causes, Justin M Cohen, David L Smith, Chris Cotter, Abigail Ward, Gavin Yamey, Oliver J Sabot and Bruno Moonen, *Malaria Journal* (in press)

Provided by BioMed Central

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