

Malaria deaths could double if prevention is interrupted by COVID-19

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Malaria-related deaths in sub-Saharan Africa in 2020 could be more than double those of 2019 if malaria-prevention activities are interrupted due to COVID-19, suggests a modeling study published in *Nature Medicine*.

The [malaria](#) burden is heavily concentrated in sub-Saharan Africa, where COVID-19 cases are also rising. In response to the COVID-19 pandemic, countries in this region are implementing non-pharmaceutical measures to slow the transmission of the causative SARS-CoV-2 virus. The distribution of long-lasting insecticidal mosquito nets has had a major role in the control of malaria in sub-Saharan Africa, and many countries have net-distribution campaigns planned for 2020. However, it is unknown how COVID-19-related disruptions of these campaigns would impact the malaria disease burden.

Thomas Churcher and colleagues used COVID-19- and malaria-transmission models to estimate the impact of disrupting malaria-prevention initiatives and other essential health services under four different COVID-19 epidemic scenarios. They found that if malaria-prevention measures are stopped completely, the 2020 malaria burden could be more than double that of 2019. The authors showed that in Nigeria alone, reducing the malaria case management for six months and delaying the distribution of nets could result in an average of 81,000 additional deaths.

The authors note that managing these [negative effects](#) is possible. They argue that malaria-prevention activities—especially the distribution of mosquito nets—should be prioritized, along with access to antimalarial treatments, plus social distancing and the use of other non-pharmaceutical interventions to prevent the transmission of SARS-CoV-2.

More information: Ellie Sherrard-Smith et al. The potential public health consequences of COVID-19 on malaria in Africa, *Nature Medicine* (2020). [DOI: 10.1038/s41591-020-1025-y](https://doi.org/10.1038/s41591-020-1025-y)

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