Integrated Vector Management: building the evidence, providing recommendations to users.

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RBM, Geneva, Switzerland
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What is IVM?

A

Malaria

LLINs

LSM

B

Malaria

LF/Leish

LLINs

Including tools outside the health sector
Goal:

• Develop handbooks for vector control managers at the National (and Province) level.

• It’s a tool kit.
What interventions work?
ITNs against leishmaniasis

Cutaneous leishmaniasis: PE 83% (39 – 95%), P=0.006
Visceral leishmaniasis (single study): PE 4% (-81% - 48%)
So where are VBDs co-endemic?
Mapping the distributions of vector-borne diseases

*P. falciparum*  
Onchocerciasis

Leishmaniasis  
Dengue

*P. vivax*

also: *Japanese encephalitis,*  
*human African trypanosomiasis*  
& *Chagas disease*
Areas where malaria and leishmaniasis could be controlled with ITNs
What’s likely to happen when you use one tool against 2 VBDs transmitted by the same vector?

Malaria

- LF absent
- LF present

Larval control

ITNs

ITNs + LC

Lymphatic filariasis

- Malaria absent
- Malaria present

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Stone & Chitnis Swiss TPH
What’s the information we give to program managers?

- Implementation
- Monitoring & evaluation
The team

• Anne Wilson, Durham
• Nick Golding & Simon Hay, Oxford
• Jorge Ortega & Simon Brooker, LSHTM
• Chris Stone & Nakul Chitnis, Swiss TPH
• Raman Velayudhan, WHO
• Plus a large panel of VBD experts

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