Key issues on malaria case management

Mock TRP Round 10

Defining universal access (SUFI) for malaria case management

• How to define and quantify services (commodities) for universal coverage with diagnosis and treatment

• Indicator for measuring access to treatment (referred to WHO)
Quantification of ACTs and RDTs

• ACTs
  • General Guiding principles
    - Expanding access through more service delivery points (e.g. CCMm) = increase in ACT requirement
    - Universal coverage with vector control interventions = reduce ACT requirement by 10% in first year and subsequently by 20%
    - Expanding access to malaria diagnostics = reduction in ACT requirement (?factor)

• RDTs
  • General Guiding Principles
    - All suspected cases of malaria require confirmatory diagnosis
    - Take into account
      • the use of microscopic based diagnosis
      • the "scope and rate" of scale-up of malaria diagnosis
      • the effect of universal coverage with malaria control intervention

Impact of prevention coverage on ACT forecasting

• After the target for universal coverage of vector control is reached, countries should budget for a 10% reduction in ACT procurement for the following year. Assuming coverage is maintained, 20% reduction can be assumed for the year after that, and 30% the year after that.

• This is an interim solution recommended by the RBM HWG, and it is recommended that countries collect data to refine forecasts in future years.