



# INDEPTH Network

Better Health Information for Better Health Policy

## PRESS RELEASE

### **We need more investment, commitment to defeat malaria**

**Accra, 25<sup>th</sup> April 2015.** Despite declines in malaria cases and deaths in recent years, many lives are still lost to the disease each year. But it can be treated, and eventually eradicated. As we celebrate the World Malaria Day today, we must recognize the need for sufficient global commitment and investment if we are to win the fight against malaria.

“Malaria is still a major cause of morbidity and mortality with up to 60% of the admissions locally attributed to malaria or malaria and other co-infections. The burden to the health care is huge and every effort should be directed to fight this disease and reduce the human suffering and especially for the children,” says Dr Walter Otieno, Director of the Kombewa Clinical Research Centre, an INDEPTH member centre in Kenya.

At least three quarters of malaria deaths occur in children under 5. But according to WHO, in 2013, only about 1 in 5 African children with malaria received effective treatment for the disease, 15 million pregnant women did not receive a single dose of the recommended preventive drugs, and an estimated 278 million people in Africa still live in households without a single insecticide-treated bednet.

It is important we recognize the need to invest in all aspects of malaria prevention, control, treatment and in research in order to win the war against the disease and its devastating effects. Already, the Malaria Consortium notes that drug resistance is a global problem that threatens the progress made in recent years.

In the past couple of years, there has been a 10-fold increase in funding to support elimination of malaria. But donor sources have dwindled and there are fears that a resurgence of the disease could threaten hard-won progress. The challenge is that current tools and treatments are insufficient to achieve elimination. Furthermore, the cost of maintaining these interventions amounts to several billion dollars a year, with the malaria parasite continuing to develop resistance to current insecticides and drugs.

“But it is not all gloom and doom. We have the opportunity to accelerate progress towards elimination in all countries by improving the delivery of existing interventions as well as developing new tools and strategies that target not just malaria-transmitting mosquitoes but also the parasite itself. This involves creating robust scientific evidence that will guide these changes,” says Professor Collins Ouma, a Research Scientist and Programme Leader, Health Challenges and Systems, African Population and Health Research Centre (APHRC) in Kenya. APHRC is also a member of the INDEPTH Network.

INDEPTH has a network of 52 health and demographic surveillance system (HDSS) sites run by 45 research centres in 20 countries across Africa, Asia and the Pacific region. As a Network, we track health and demographic data of millions of people in Africa, Asia and Oceania, and have over the years contributed hugely to the fight against malaria.

Mention could be made of studies at the Navrongo Health Research Institute in Ghana, a member of INDEPTH, which found that bed nets soaked in permethrine reduced child deaths by 17 per cent. This led to bed net provision being incorporated into health policies across Africa. Also the Kilombero Net (KINET) project, by the Ifakara Health Institute, another INDEPTH member centre in Tanzania which showed a correlation between regular use of ITNs and a 27 per cent reduction in child mortality, as well as a 60 percent decrease in childhood anaemia.

In 2006, INDEPTH through funding from the Bill & Melinda Gates Foundation pooled scientists and researchers to form the Malaria Clinical Trials Alliance (MCTA) to strengthen human and infrastructure capacities of African trial sites to contribute to the development of malarial vaccines and drugs. This project enabled African scientists to take part in the testing of the malaria RTS,S vaccine. RTS,S is the first malaria vaccine candidate to ever reach large scale Phase iii clinical testing. *The Lancet* reported this week that “Scientists announce final trial results of the world’s most advanced malaria vaccine.” INDEPTH scientists are among them!

The INDEPTH Effectiveness and Safety Studies of Anti-malarial Drugs in Africa (INESS) is also another project worth mentioning. This platform enables African researchers to carry out large Phase IV studies of anti-malarials and to apply the findings to inform policy.

Currently the APHRC in Nairobi is carrying out epidemiological studies geared towards eradication of malaria and reduction of associated disease burden, and implementing studies on the potential contributions of the malaria disease to the emerging epidemic of non-communicable diseases (e.g. cardiovascular disease).

In the long-run, transformative measures that could potentially accelerate malaria eradication will include single-dose treatments that are safe and well-tolerated by humans, highly sensitive field-based diagnostic tests, and long-lasting and effective vaccines that prevent infection or block transmission. Since emerging resistance to insecticides and drugs is the most important biologic threat to the goal of eradication, it is also critical to invest in the development of new tools and strategies to prevent or delay resistance.

As we join the world community in marking the World Malaria Day we call for sustained and increased funding of malaria-related efforts by donor governments and endemic countries to support this noble mission of ‘Accelerate to Zero’.

Prof. Osman Sankoh, the INDEPTH Executive Director wishes to thank research funders who fund the INDEPTH Secretariat and our member centres to engage effectively in the fight against the malaria scourge. “We must defeat malaria,” he concluded.

Policy Engagement and Communications

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