



The Republic of Uganda

MINISTRY OF HEALTH

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## PRESS RELEASE

### MINISTRY OF HEALTH ADVISORY ON RISE IN MALARIA CASES IN THE COUNTRY

**KAMPALA, 12/08/2019**– The Ministry of Health would like to state that there has been an increase in the Malaria cases by over 1 million countrywide for the period of June-August 2019.

There has been a 40% increase in the Malaria cases from 1 million cases in June 2018 to 1.4 million cases in June 2019. While this is lower than the number of cases registered between 2016-2017, it is important to note that this is the peak Malaria season where an increase in the Malaria cases are registered.

The increase in Malaria cases is attributed to the following reasons;

- Seasonality: This period of June- July usually has the most malaria cases following the rainy season
- Climate change: Prolonged intermittent rains in various parts of the country that have lasted till to date (August 2019)
- Reduced net ownership and use due to the aging of nets distributed in 2017 mass campaign
- Low malaria prevalence in areas such as Kampala, and as such people have become lax in prevention practices such as net use, closing doors windows early, early seeking of care and treatment.
- Population growth and refugee immigration in specific regions
- Movement of populations from high burden areas (Busoga, West Nile, Northern Uganda, Karamoja) to low burden areas (Kampala, South Western Uganda) and vice versa for festive season, employment like farming. This was supported by evidence we got from Naguru hospital in July 2019 where 85% of the malaria patients had travel history outside Kampala.

People in areas with very little malaria such as Kampala ( parasite prevalence less than 1%) are prone to severe malaria due to reducing/low immunity. It is therefore important that everyone protects themselves whenever they travel upcountry in areas with high malaria burden/transmission

In order to mitigate this situation, the Ministry of Health has put in place a number of interventions that will lead to a decrease in the overall number of Malaria cases. These are;

- Supported districts with increased cases to order and receive emergency supplies ( Artemisinin-based Combination Therapy (ACTs) and Rapid Diagnostic Tests (RDTs) to ensure facilities are well stocked.
- Revised the quantification of ACTs for this financial year, 2019/20 to take into account this increase in cases
- Redistribution of Malaria Commodities from facilities and districts with overstocks to those that are facing a stock out of malaria commodities
- Monitoring of malaria cases, admissions and deaths and using data to guide decisions at all levels that has helped identify and contain many outbreaks
- Strengthening the capacity of Village Health Teams (VHTs) at community level through training and providing adequate stock of antimalarials
- Continue the routine distribution of Long Lasting Insecticide treated mosquito Nets (LLINs) to pregnant women attending Antenatal care and children in immunization clinics
- Fast tracking the implementation of the 2020 LLIN Mass Campaign
- Introducing new channels of LLIN distribution such as school distribution in selected districts.
- Community outreaches in high burden areas to conduct testing and treatment, communication campaigns to encourage

Malaria is transmitted by female Anopheles mosquitoes which normally bites at night when a person is sleeping. An infected mosquito bites a human being and transmits the plasmodium into the blood of the person.

The signs and symptoms of Malaria are; fever, headache, vomiting, Chills ( shivering), sweating, Backaches, Body weakness, loss of appetite and diarrhoea

The Ministry of Health would therefore like to appeal to the general public to;

1. Sleep under a mosquito net every night to avoid Malaria
2. Always seek early treatment from the nearest Health Facility within 24 hours of onset of symptoms
3. Take and complete your dosage of Malaria medicine as advised by the health worker
4. Clear all mosquito breeding sites (stagnant water, bushes and broken containers) around your homestead
5. All pregnant women must attend all antenatal care visits
6. Avoid self-medication and sharing of medicine

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