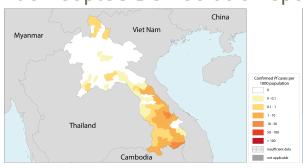
Lao People's Democratic Republic

Western Pacific Region





I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	3.6M	52
Low transmission (0-1 case per 1000 population)	0	-
Malaria free (0 cases)	3.3M	48
Total	6.9M	

Parasites and vectors	
Major plasmodium species:	P.falciparum: 50 (%), P.vivax: 49 (%)
Major anopheles species:	An. dirus, An. minimus, An. maculatus, An. jeyporiensis

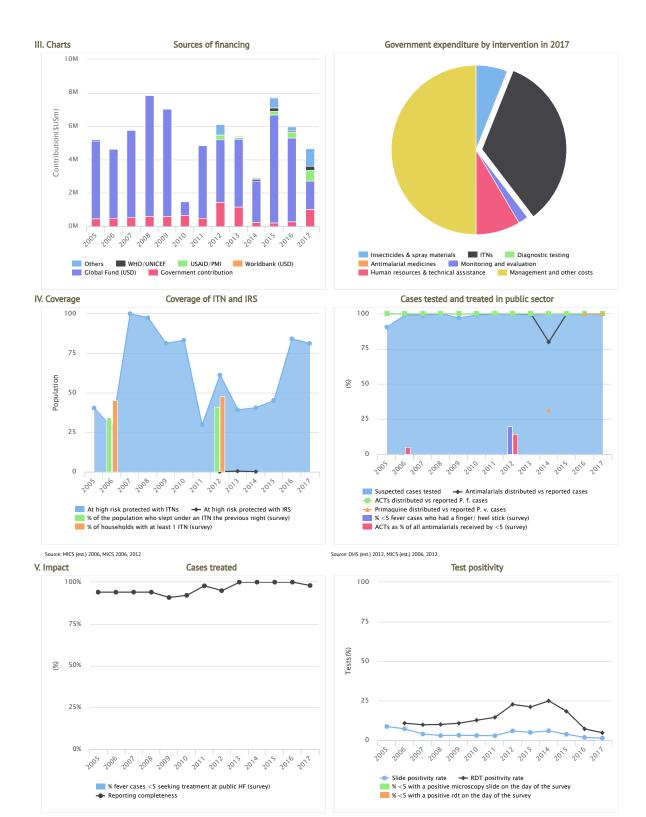
Reported cases and deaths	
Reported confirmed cases (health facility):	9333
Confirmed cases at community level:	2420
Confirmed cases from private sector:	601
Reported deaths:	2

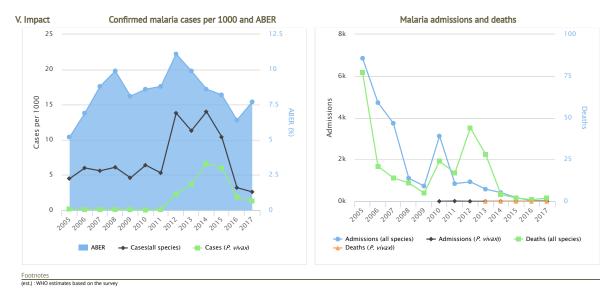
Estimated cases:	20.7K [15.5K, 26.7K]
Estimated deaths:	30 [2, 57]

II. Intervention policies and strategies

Intervention	Policies/Strategies	Yes/	Year
		No	adopted
ITN	ITNs/LLINs distributed free of charge	Yes	2003
	ITNs/LLINs distributed to all age groups	Yes	2000
IRS	IRS is recommended	Yes	2011
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	No	
IPT	IPT used to prevent malaria during pregnancy	NA	-
Diagnosis	Patients of all ages should receive diagnostic test	Yes	2003
	Malaria diagnosis is free of charge in the public sector	Yes	2005
Treatment	ACT is free for all ages in public sector	Yes	2005
	The sale of oral artemisinin-based monotherapies (oAMTs)	is banned	2005
	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for P. falciparum	Yes 2016	
	Primaquine is used for radical treatment of P. vivax	Yes	2017
	G6PD test is a requirement before treatment with primaquine	Yes	2010
	Directly observed treatment with primaquine is undertaken	No	-
	System for monitoring of adverse reaction to antimalarials exists	No	-
Surveillance	ACD for case investigation (reactive)	Yes	2015
	ACD at community level of febrile cases (pro-active)	No	-
	Mass screening is undertaken	No	-
	Uncomplicated P. falciparum cases routinely admitted	No	-
	Uncomplicated P. vivax cases routinely admitted	No	-
	Case and foci investigation undertaken		
	Case reporting from private sector is mandatory	Yes	2009

Antimalaria treatm	ent poli	су			Medicine			ear dopted	
First-line treatment of unconfirmed malaria						AL+PQ			
First-line treatment of P. falciparum				AL+PQ		2017			
For treatment failure of P. falciparum				QN+D		2001			
Treatment of sever	e malari	a				AS+AL+PQ		2017	
Treatment of P. vivax				PQ(14d): 1	PQ(14d): 1st line after AL; CQ: 2nd line		2017		
Dosage of primaquivivax	ine for r	adica	l treatment	of P.			0.25 mg/K	ig (14 days	
Type of RDT used		P.f + P.v specific (Combo)							
Therapeutic efficac	y tests (clinica	al and para	sitolog	ical failure, %)			
Medicine Year		Min	Median	Max	Follow-up	No. of studies	Speci	Species	
AL 2010-	2017	0	6.8	17.2	28 days	9	P. falc	iparum	
Resistance status b	y insecti	icide (class (2010	-2017)	and use of cl	ass for malaria v	ector contro	ol (2017)	
Insecticide class	Years	-	%) sites ¹	Vecto	rs ²			Used ³	
Carbamates	-			-				No	
Organochlorines	2013-20	015	72.73% (11)	An. maculatus s.l., An. minimus s.l.		No			
Organophosphates	-			-				No	
Pyrethroids	2013-20	015	35.71% (14)	An. di	rus s.l., An. mad	ulatus s.l., An. mi	nimus s.l.	Yes	
¹ Percent of sites for wh	hich resista	ance co	onfirmed and	total nui	mber of sites tha	t reported data (n)			
² Principal vectors that	exhibited	resista	nce						
3Class used for malaria		ntrol is	2017						





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