Malaria Project Managers' Meeting November 14-16, 2018 Washington DC

Monitoring the effectiveness and resistance to antimalarials

RECOMMENDATIONS FOR SURVEILLANCE OF EFFICACY AND RESISTANCE AND ANTIMALARIAL POLICY

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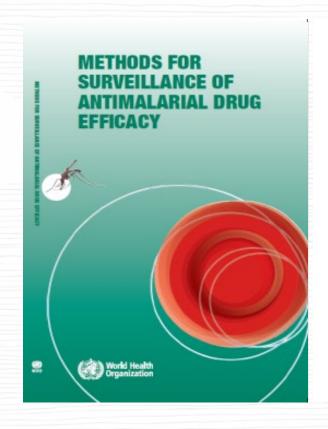
PAHO/WHO RECOMMENDATIONS

- The efficacy of first and second line treatments is warranted every two years in high, moderate and low transmission areas, and every three years in very low transmission areas.
- In this later setting, studies with molecular markers should continue to be conducted systematically every year, provided that the markers are known and validated.



AVAILABLE TOOLS

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HSD/CD/M/005-10

Guía práctica revisada para estudios de eficacia de los medicamentos antimaláricos en las Américas.



* Documento actualizado con las scomendaciones de lo Bassión Tácricos Monitoreo in siso de la eficación de medicamentos antimolóxicos, lusidos, Perú, del 29 de septiembre el 3 ectubre de 3006 Feche de los sentimorbos en esco 2006. CPS, CPC CDC 90096.

Documento revisado y actualizado con los recomendaciones de la reunión técnica de resistencia a los antimatánicos. Ciudad de Panareio. Panareio del trai to de julio de 2010.

Programa Regional de Malaria Prevención y Control de Enfermedades Transmisibles Vigilancia de la Salud, y Prevención y Control de Enfermedades ORGANIZACION PANAMERICANA DE LA SALUD

Amazon Malaria Initiative/ Amazon Network for the Surveillance of Antimalarial Drug Resistance

Strategic Orientation Document on Monitoring the Efficacy of and Resistance to Antimalarials in the Current Epidemiological Context

















Generic tools

http://www.paho.org/hq/index.php?option=com_content&view=article&id=2405&Ite mid=3624





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AVAILABLE TOOLS CONT.

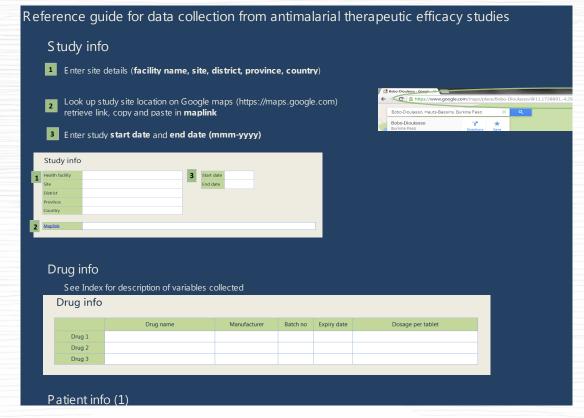
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Generic protocols

Therapeutic efficacy test protocol

Title	Efficacy and safety of name of antimalarial drug(s) or drug combination(s) for the treatment of uncomplicated Plasmodium falciparum malaria in district, province, country
Study site(s)	Site 1: Name, city, district and province Treatments tested: antimalarial drug(s) or drug combination(s) Site 2: Name, city, district and province Treatments tested: antimalarial drug(s) or drug combination(s) Site 3: Name, city, district and province Treatments tested: antimalarial drug(s) or drug combination(s) [Add more also as needed]
Protocol submission date	dd/mmm/yyyy
Protocol number	Unique protocol number/version number
Principal investigator	Name: Degree: Institution: Address: street, city, postal code, country Tel: Email:
Co-investigator (insert additional name(s) if needed)	Name: Degree: Institution: Address: street, city, postal code, country Tel: Email:
Medical monitor	Name: Degree: Institution: Address: street, city, postal code, country Tel: Email:
Participating institutions (insert additional institution(s) if needed)	Name: Complete postal address: street, city, postal code, country Tel: Email:
Planned study dates	From mmm/yyyy to mmm/yyyy
Sponsor	Ministry of Health, country Complete postal address: street, city, postal code, country Tel: Email:

Excel tool for analysis





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AS WE MOVED...

Most patients with delayed parasite clearance are cured as long as the **partner drug remains effective**. Routine monitoring must continue to ensure that the recommended ACTs are effective, that **timely changes in national treatment policies can be implemented**, and that artemisinin resistance can be detected early. Assessment of Kelch-13 propeller region mutants will greatly facilitate the tracking of artemisinin resistance as it emerges.



KEY PRIORITIES

- ☐ **TES** needs to be conducted **every 2-3 years**
 - To evaluate the efficacy of 1 and 2 line treatment
 - Capacities needs to be strength at national level
 - Tools to be updated with new information (ea. K13)
- Surveillance with molecular markers should continue to be conducted systematically every year, specifically in very low transmission areas
- Quality: External evaluation of TES, and WHO CC for molecular markers
- ☐ Implementation of the *Framework for artemisinin resistance* containment and elimination in South America –Guyana Shield (P. falciparum elimination)



GAPS AND OPERATIONAL CHALLENGES

- Capacity of NMP to institutionalize surveillance of resistance as a long-term action
- Operational aspects of surveillance (financing, sentinel sites structure, HR)
- Alliances within the countries to operationalize the surveillance (Ministry of Health - Academy- NIH – Reference Laboratories)
- Low number of cases for in vivo studies
- ☐ Interphase between routine malaria surveillance and resistance surveillance



Thank you!



