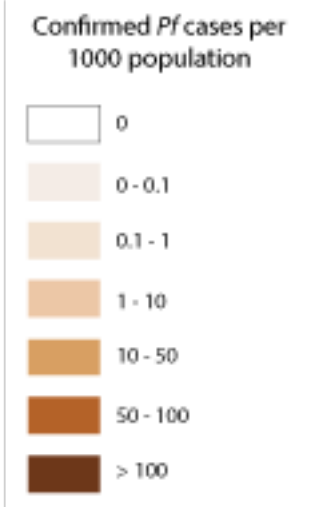


Thailand

South-East Asia Region



I. Epidemiological profile

Population (UN)	2015	%	Parasites and vectors
High transmission (> 1 case per 1000 population)	5,440,000	8	Plasmodium species: <i>P. falciparum</i> (81%), <i>P. vivax</i> (19%)
Low transmission (0-1 cases per 1000 population)	28,500,000	42	Major anopheles species: <i>An. dirus</i> , <i>An. minimus</i> , <i>An. maculatus</i> , <i>An. sundaicus</i>
Malaria-free (0 cases)	34,000,000	50	Reported confirmed cases (health facility): 8,022 Estimated cases: 52,000 [16,000 ; 150,000]
Total	67,960,000		Confirmed cases at community level: 9,405 Reported deaths: 33 Estimated deaths: <50

II. Intervention policies and strategies

Intervention	Policies/strategies	Yes/No	Adopted
ITN	ITNs/ LLINs distributed free of charge	Yes	1992
	ITNs/ LLINs distributed to all age groups	Yes	1992
IRS	IRS is recommended	Yes	1953
	DDT is authorized for IRS	No	-
Larval control	Use of larval control recommended	Yes	1953
IPT	IPT used to prevent malaria during pregnancy	N/A	-
Diagnosis	Patients of all ages should receive diagnostic test	Yes	1943
	Malaria diagnosis is free of charge in the public sector	Yes	1953
Treatment	ACT is free of charge for all ages in public sector	Yes	1995
	The sale of oral artemisinin-based monotherapies (oAMTs)	Never allowed	1995
	Single dose of primaquine is used as gametocidal medicine for <i>P. falciparum</i>	Yes	1995
	Primaquine is used for radical treatment of <i>P. vivax</i>	Yes	1965
	G6PD test is a requirement before treatment with primaquine	Yes	2015
	Directly observed treatment with primaquine is undertaken	Yes	2008
	System for monitoring adverse reactions to antimalarials exists	Yes	-
Surveillance	ACD for case investigation (reactive)	Yes	1958
	ACD of febrile cases at community level (pro-active)	Yes	1958
	Mass screening is undertaken	Yes	1958
	Uncomplicated <i>P. falciparum</i> cases routinely admitted	Yes	1995
	Uncomplicated <i>P. vivax</i> cases routinely admitted	Yes	1995
	Foci and case investigation undertaken	-	-
Case reporting from private sector is mandatory	No	-	

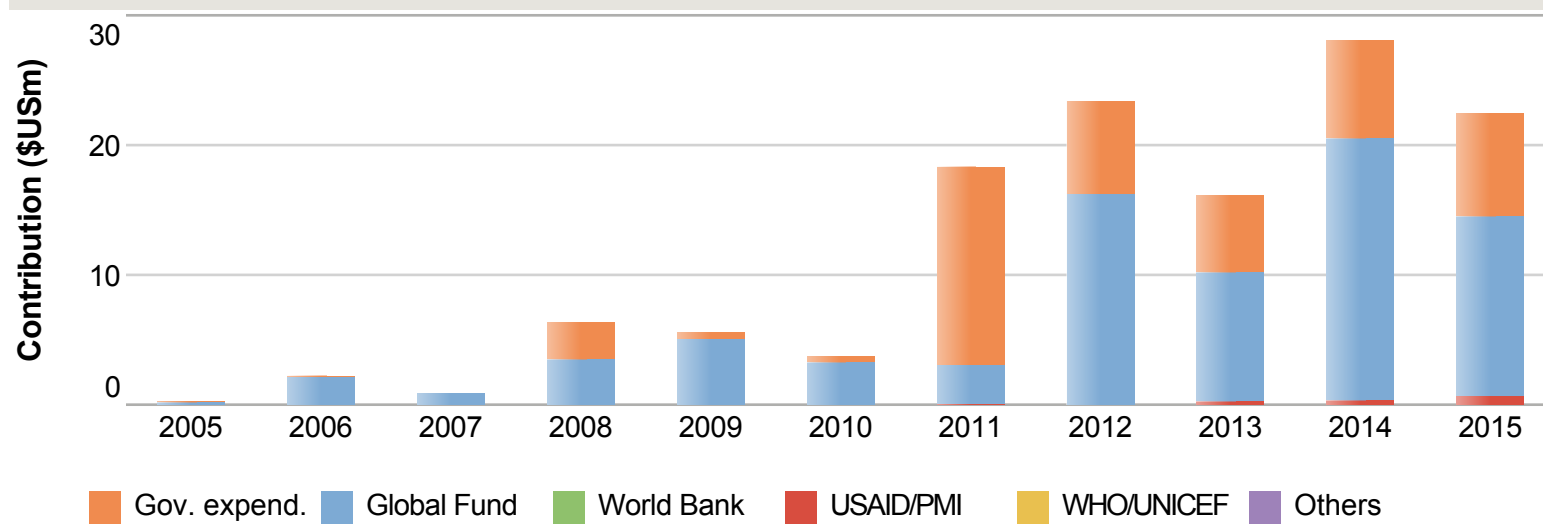
Antimalarial treatment policy	Medicine	Year adopted
First-line treatment of unconfirmed malaria	-	-
First-line treatment of <i>P. falciparum</i>	DHA-PPQ	2015
Treatment failure of <i>P. falciparum</i>	QN+D	2007
Treatment of severe malaria	QN+D	2007
Treatment of <i>P. vivax</i>	CQ+PQ(14d)	2007
Dosage of Primaquine for radical treatment of <i>P. vivax</i>		0.25 mg/Kg (14 days)
Type pf RDT used	P.f + all species (Combo)	

Therapeutic efficacy tests (clinical and parasitological failure, %)

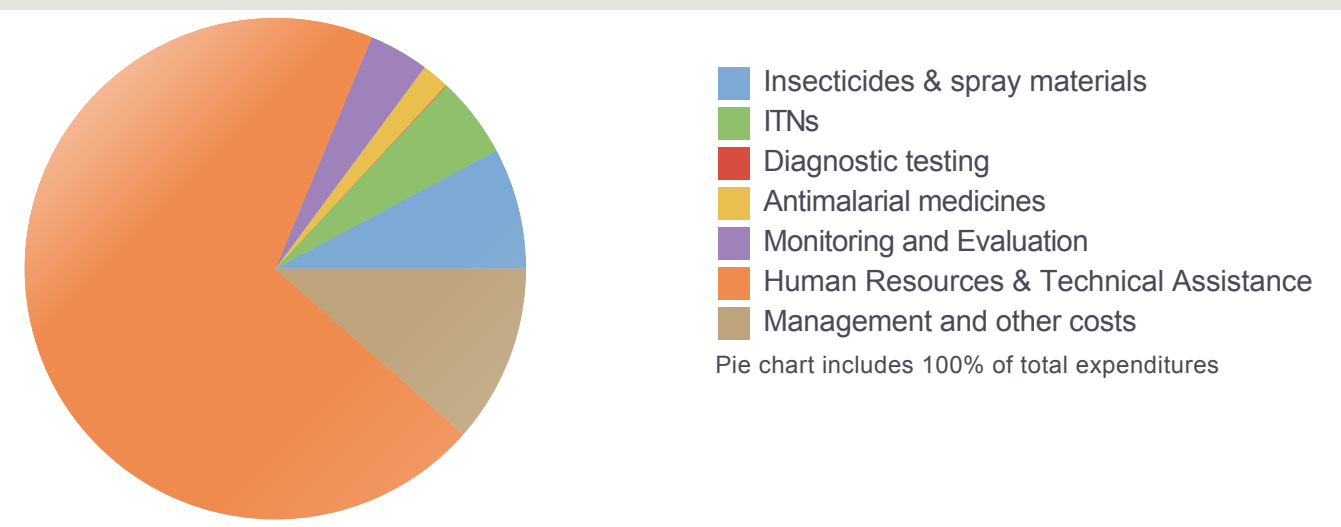
Medicine	Year	Min	Median	Max	Follow-up	No of studies	Species
Insecticide susceptibility bioassays (reported resistance to at least one insecticide for any vector at any locality)							
Year	Pyrethroid	DDT	Carbamate	Organophosphate	Species/complex tested		
2010-2014							

III. Financing

Sources of financing

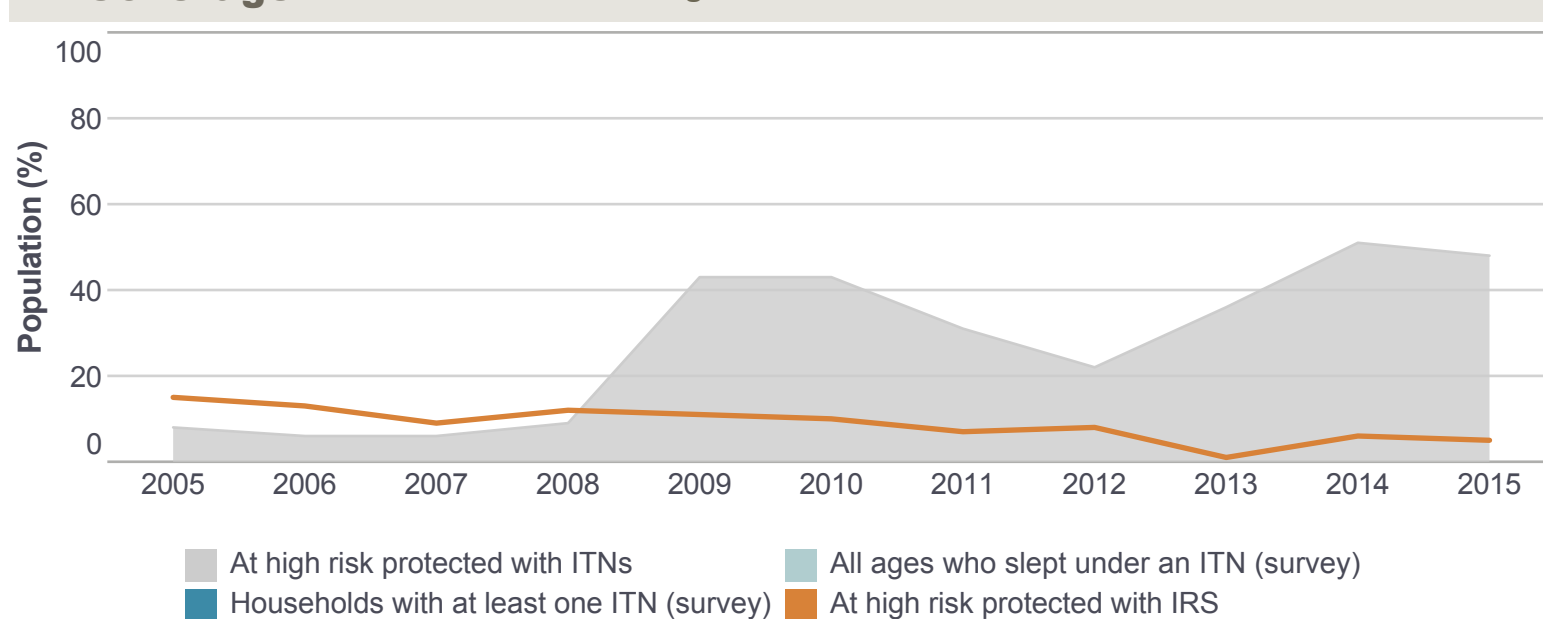


Government expenditure by intervention in 2015

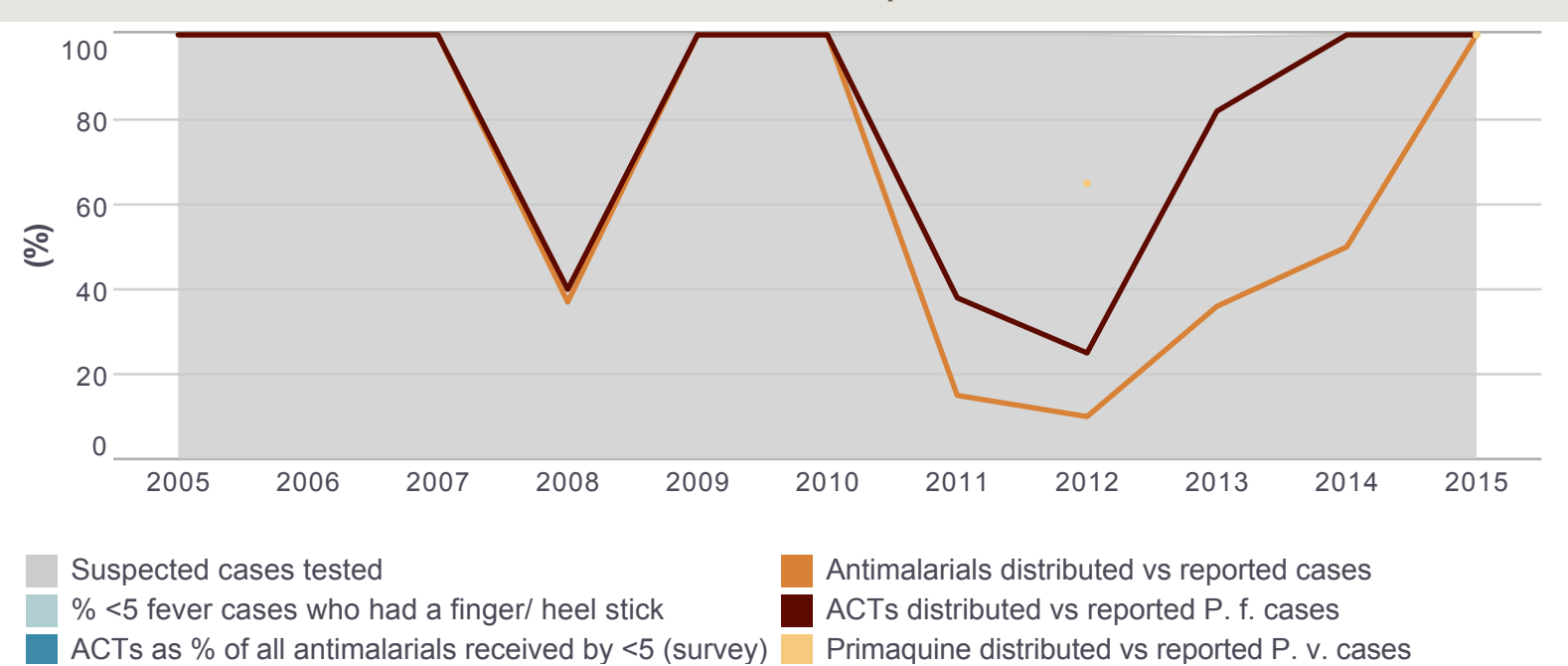


IV. Coverage

Coverage of ITN and IRS

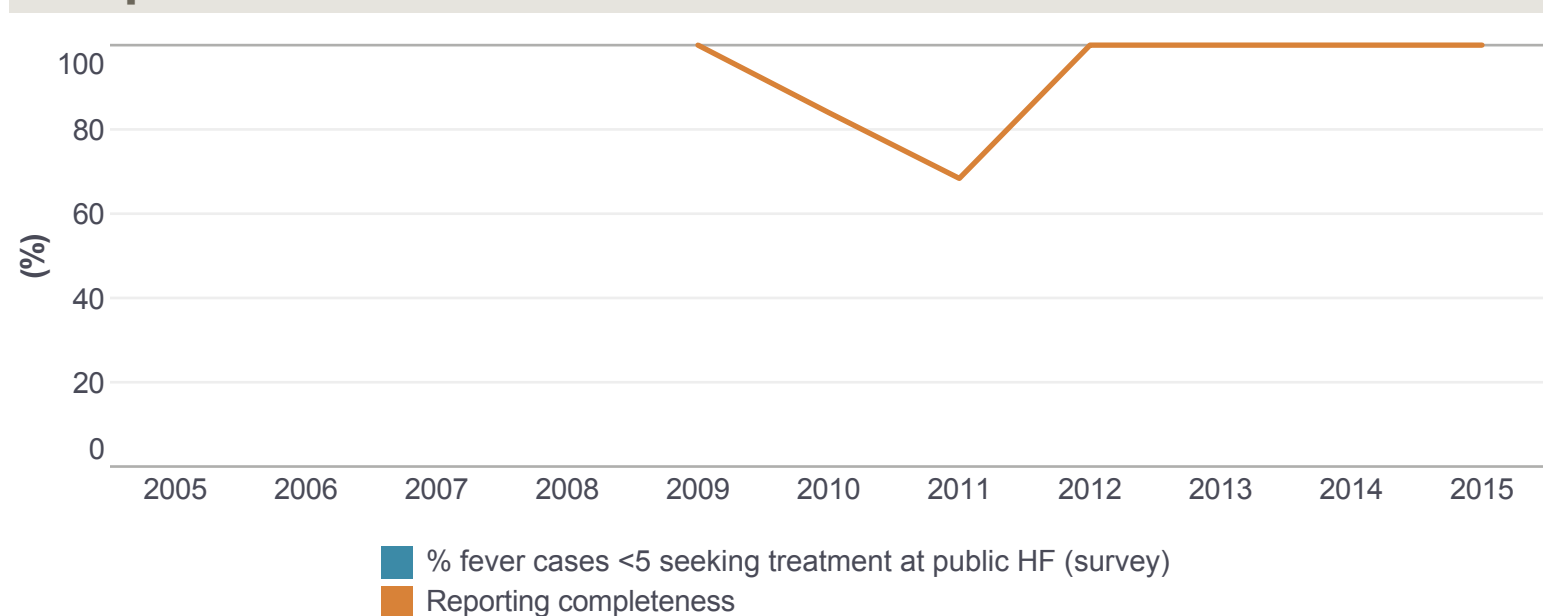


Cases tested and treated in public sector

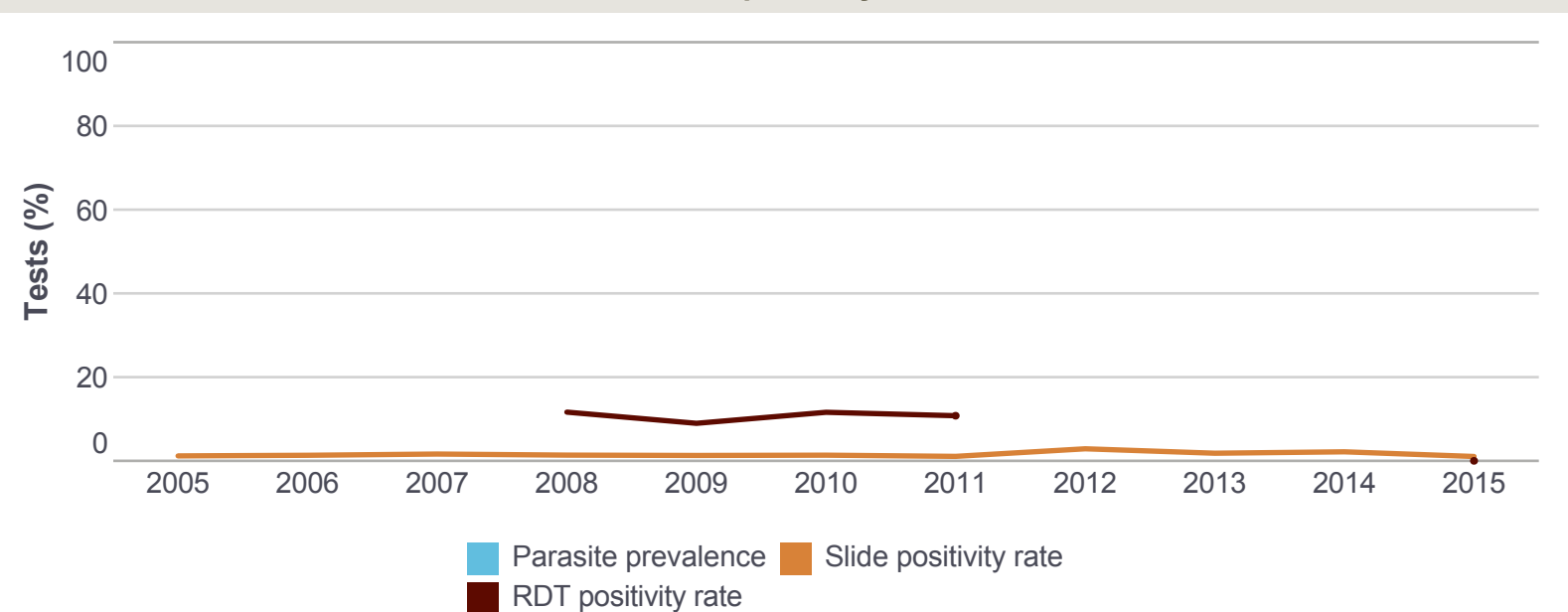


V. Impact

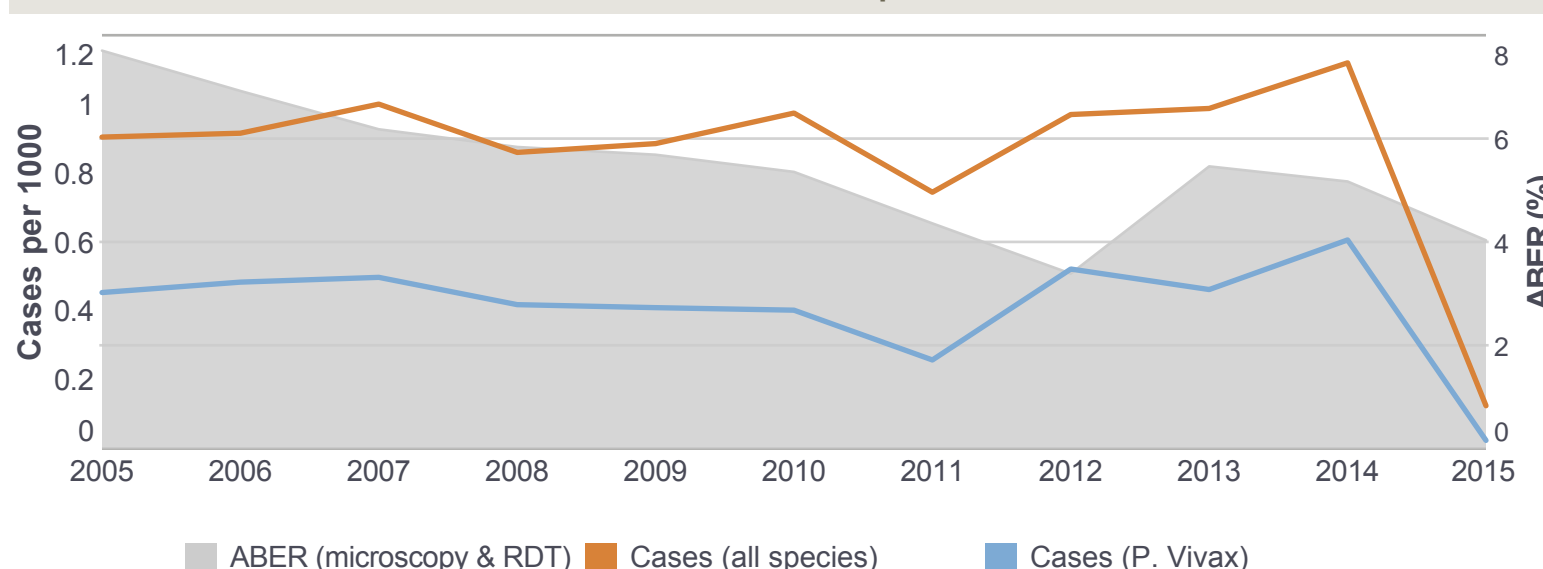
Cases treated



Test positivity



Confirmed malaria cases per 1000 and ABER



Malaria admissions and deaths (per 100 000)

