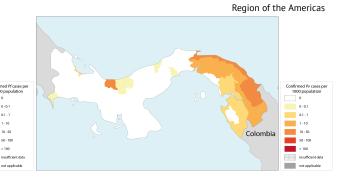
Panama

0 0-0.1 0.1-1 1-10 10-50 50-100 > 100 Colombia



I. Epidemiological profile

Population (UN Population Division)	2017	%
High transmission (>1 case per 1000 population)	172.7K	4
Low transmission (0-1 case per 1000 population)	3.8M	93
Malaria free (0 cases)	133.5K	3
Total	4.1M	
Reported cases and deaths		
Reported indigenous confirmed cases (health facility):		649
Confirmed cases at community level:		-
Confirmed cases from private sector:		5
Reported deaths:		0

Major plasmodium species:	P.falciparum: 0 (%) , P.vivax: 99 (%)					
Major anopheles species:	An. albimanus, An. pseudopunctipennis, An. punctimacula, An. aquasalis, An. darlingi					
Estimates	000 1774 0743					
Estimated cases:	808 [764, 864]					
Estimated deaths:	0					

II. Intervention policies and strategies

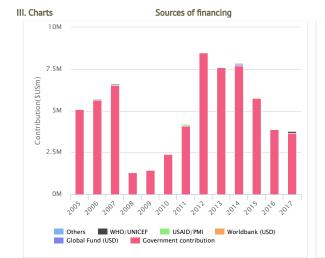
Intervention	Policies/Strategies	Yes/ No	Year adopted
ITN	ITNs/LLINs distributed free of charge	No	2012
	ITNs/LLINs distributed to all age groups	No	-
IRS	IRS is recommended	Yes	1957
	DDT is used for IRS	No	-
Larval control	Use of Larval Control	Yes	1957
IPT	IPT used to prevent malaria during pregnancy	NA	-
Diagnosis	Patients of all ages should receive diagnostic test	Yes	1957
	Malaria diagnosis is free of charge in the public sector	Yes	1957
Treatment	ACT is free for all ages in public sector	Yes	-
	The sale of oral artemisinin-based monotherapies (oAMTs)	is banned	-
Surveillance	Single dose of primaquine (0.25 mg base/kg) is used as gametocidal medicine for P. falciparum	Yes	-
	Primaquine is used for radical treatment of P. vivax	Yes	-
	G6PD test is a requirement before treatment with primaquine	No	-
	Directly observed treatment with primaquine is undertaken	Yes	-
	System for monitoring of adverse reaction to antimalarials exists	No	-
	ACD for case investigation (reactive)	Yes	2000
	ACD at community level of febrile cases (pro-active)	Yes	2000
	Mass screening is undertaken	Yes	2000
	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	-

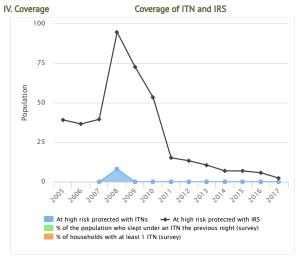
Antimalaria treatm	ient polic	y			Medicine	Year adopted	
First-line treatmer	t of unco	onfirmed ma	laria		-	-	
First-line treatment of P. falciparum				AL+PQ(1d)	2012		
For treatment failure of P. falciparum			AS+M	-			
Treatment of sever	e malaria	а			QN	-	
Treatment of P. viv	ax				CQ+PQ(7d); CQ+PQ(14c) -	
Dosage of primaguine for radical treatment of P. vivax			0.25 mg/Kg (14 days)				
Type of RDT used					P.f + P.v, P.o, P.m (Combo)		
Therapeutic effication	y tests (o	linical and	parasito	logical failure	2, %)		
Medicine Yea	ır Min	Median	Max	Follow-up	No. of studies	Species	
Resistance status t	y insecti	cide class (2	010-20	17) and use o	f class for malaria vector	control (2017)	
Insecticide class		Years		(%) sites ¹	Vectors ²	Used ³	
Carbamates		2010-201	1	40% (5)	An. albimanus	No	
Ossessellesiass						NI-	

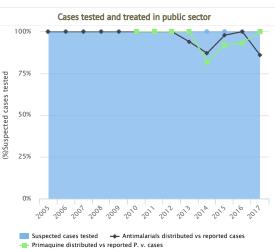
	rears	(70) SILCS	VCCLOID	oscu
Carbamates	2010-2011	40% (5)	An. albimanus	No
Organochlorines	-	-	-	No
Organophosphates	2010-2010	0% (3)	-	Yes
Pyrethroids	2010-2010	100% (3)	An. albimanus	No

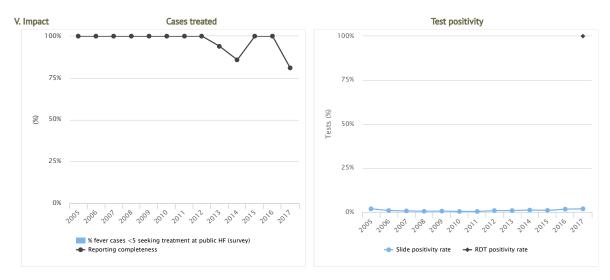
¹Percent of sites for which resistance confirmed and total number of sites that reported data (n) ²Principal vectors that exhibited resistance ³Class used for malaria vector control in 2017

Parasites and vectors









Government expenditure by intervention in 2017

Insecticides & spray materials Insection and evaluation Antimalarial medicines Monitoring and evaluation Human resources & technical assistance Management and other costs



World Malaria Report 2018