






**Interim Guidelines on
Parasitological Surveillance
for malaria during the
COVID-19 Pandemic**

**Anti-Malaria Campaign
Ministry of Health – Sri Lanka**

ANTI-MALARIA CAMPAIGN

Interim Guidelines on Parasitological Surveillance for malaria during the COVID-19 Pandemic

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| Approved by: |  Director Anti Malaria Campaign Narahenpita, Colombo 05. | | | Date | 27.05.2020 |

Guiding principles

- All efforts must be sustained to detect every infection of malaria while preventing the spread of COVID-19 and ensuring the safety of those who deliver the services.
- **Instructions given regarding the prevention of COVID-19 pandemic by Ministry of Health and other relevant authorities should always be adhered to while planning and conducting surveillance activities.**
- The fact that malaria can present along with COVID-19, should be taken into account as per national and local guidelines when planning/conducting parasitological surveillance.
- The outcome of the parasitological surveillance should be to conduct minimum measures required to detect imported malaria cases.
- Collecting blood for laboratory diagnosis should always be performed based on the “Instructions on sample collection for laboratory diagnosis of malaria during Covid 19 pandemic” by Anti Malaria Campaign.
- To prevent cross contamination, do not wear the same pair of gloves for more than one individual. Change gloves after obtaining blood for laboratory testing from one individual.
- Morning health checks for all team members involved in parasitological surveillance should be performed with temperature checks if feasible.

- Daily reminders should be sent to all individuals involved in parasitological surveillance to wash their hands with soap and water, seek care if feeling sick, and avoid physical contact.
- Vehicle passengers should be limited to one team at a time, when providing transport for the team attending to the parasitological surveillance.
- These guidelines will be updated regularly, based on additional evidence.

Passive case detection

- All APCD centres should be actively functioning. Sufficient stocks of laboratory items should be available.
- All support should be given to perform malaria diagnostic testing in other PCD institutions especially where risk people would be attending.
- All suspected malaria patients, as per the General Circular No: 02-112/2014 (Guidelines on malaria chemotherapy and management of patients with malaria) should be tested for malaria.

Reactive case detection

- Travel contacts with similar history of travel to a malarious country
 - Every effort should be taken immediately to learn about such contacts
 - Testing should be carried out after obtaining approval/informing relevant officers including those responsible for COVID 19 control.
- Primary and secondary screening of geographical contacts
 - Should be performed only if risk of local transmission is envisaged and according to table 3 of the Manual for the Parasitological Surveillance in Prevention of Re-introduction / re-establishment of malaria in Sri Lanka (pages 27- 28).
 - Testing should be carried out after obtaining approval/informing relevant officers including those responsible for COVID 19 control.
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- **Mass gatherings are not recommended.** RACD should preferably be performed by visiting house to house.
- Physical distancing should be practiced by maintaining 2 meters apart. Contact with the person to be tested should be kept minimum and should only be to prick the finger and collect blood for tests to be performed.
- Clear instructions should be given to families to also practice physical distancing from their neighbours while conducting parasitological screening
- Individuals with fever should be tested for malaria under strict instructions from the Relevant RMO, AMC HQ, or MOH., (preferably tested under APCD/PCD).

Proactive case detection (PACD)

- A thorough risk categorization and risk group mapping should precede PACD activities. The risk of re-establishment of malaria depends on
 - the **vulnerability** (number of malaria cases imported into a malaria-free area) and **receptivity** (the risk in a malaria-free area of local mosquitoes becoming infected with malaria parasites and subsequently transmitting the infection to humans).
- PACD should be conducted based on a careful review of the risks (in terms of safety of health care workers) and benefits (in terms of likelihood of detecting malaria cases). Avoid non-essential PACD activities that expose workers and the public to COVID-19 risk.
- Special attention is drawn to the guidelines given in page no. 24 of the of the Manual for the Parasitological Surveillance in Prevention of Re-introduction / re-establishment of malaria in Sri Lanka. Accordingly
 - Objective of the PACD - searching for additional malaria cases in vulnerable populations for importation of malaria cases residing in receptive areas.
 - Who should be tested- Persons with a known **exposure** to a malaria infection, i.e. travelers from a malaria endemic country
 - When - Should be performed on return of travel groups. In areas with increased receptivity these in which vulnerable populations reside.
- **Mass gatherings are not recommended.** All PACDs should be organized in a manner that minimizes the gathering of people (i.e., keeping 2 metres apart and limiting groups to 10 people), and participants should use available precautions for personal protection.
- Contact of the health staff with the person to be tested should be kept minimum and should only be to prick the finger and collect blood for tests to be performed.
- Individuals with fever should be tested for malaria under strict instructions from the Relevant RMO, AMC HQ, or MOH., (preferably tested under APCD/PCD).

References

1. Instructions on sample collection for laboratory diagnosis of malaria during Covid 19 pandemic” by Anti Malaria Campaign.
(http://www.malariacampaign.gov.lk/images/PublicNotice-Repository/Instructions_on_sample_collection_for_laboratory_diagnosis_of_malaria_during_Covid_19_pandemic.pdf)
2. General Circular No: 02-112/2014 Guidelines on malaria chemotherapy and management of patients with malaria
<http://www.malariacampaign.gov.lk/images/PublicNotice-Repository/Manual-for-Parasitological-Surveillance-in-prevention-of-reintroduction--or-reestablishment-of-malaria-in-Sri-Lanka.pdf>
3. Manual for the Parasitological Surveillance in Prevention of Re-introduction / re-establishment of malaria in Sri Lanka.
<http://www.malariacampaign.gov.lk/images/PublicNotice-Repository/Manual-for-Parasitological-Surveillance-in-prevention-of-reintroduction--or-reestablishment-of-malaria-in-Sri-Lanka.pdf>
4. <https://www.who.int/malaria/publications/atoz/tailoring-malaria-interventions-in-the-covid-19-response/en/>
5. https://www.who.int/gpsc/5may/Glove_Use_Information_Leaflet.pdf?ua=1

Annex i

Contact Details of RMO Offices

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