

# 6<sup>TH</sup> ANNUAL BACTERIOLOGY AND PARASITOLOGY MEETING

September 13-14, 2017 Singapore

## How effective is malaria eradication strategies in africa?

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**Background:** In Africa, malaria has continued to be a big dilemma and a primary cause of mortality and morbidity especially among children under the age of 5, pregnant women and immunocompromised people for example people infected with HIV/AIDS. Despite global efforts in the management and eradication towards malaria, African countries have fallen behind due to many factors. However, the availability of preventative method such as long- lasting insecticide treated bed nets (LLIN), insecticide treated nets (ITN), and indoor residual spraying (IRS) has been instrumental towards eradicating malaria in Africa. While other countries in the world have managed to eradicate malaria, doubts arise in Africa due to the effectiveness of present measures. Consequently, this study evaluates malaria eradication strategies in Africa, the main objective of this study is to detect if eradication strategies such as ITN and LLIN methods are reducing the rate of malaria.

**Method:** A literature search was conducted on scientific databases such as NCBI, Google scholar, PubMed etc. Strict inclusion exclusion criteria were applied in the filtration process of publication and this was done in order to have the best studies to conduct this project. Outcomes of the search were use of ITN/LLIN vs non-use.

**Results:** Seven papers were identified and analysed. Three groups were identified (Control, LLIN and ITN). The mean value for the control group is 49.69%. The participant in the LLIN group had a mean infection rate of 47.97% and the ITN group had an infection rate of 23.12% during the duration of the study these two groups were using the preventative method. This showed that LLIN and ITN use reduces malaria infection, however according to results obtained ITN reduced malaria infection more than LLIN.

**Conclusion:** Preventative method to reduce malaria infection is important, the use of LLIN and ITN shows that if used it can prevent people being infected with malaria.

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