MSF treats highest number of malaria patients in years in parts of South Sudan



Figure 1. A MSF doctor treats Achan, aged 5 years, for cerebral malaria (credit Jacob Kuehn)

The medical humanitarian organization, Médecins Sans Frontières (MSF), fears people living in some regions of South Sudan are facing one of their worst malaria seasons in years as exceptionally high numbers of patients are being treated for severe malaria in MSF medical facilities.

In August this year MSF warned that South Sudan, particularly the malaria prevalent north-west, may have an equally devastating malaria season as was seen in 2014. Then, in some project locations, MSF treated three times the number of patients as they did in 2013. The situation in 2014 was made worse by lack of access to suitable treatment in other medical facilities as well as shortages of malaria treatment drugs in some parts of the country. This prompted MSF to issue a warning that access to treatment and malaria medicines must be urgently reinforced in the most-affected parts of the country in order to avoid preventable loss of life.

In a review of MSF's medical data spanning from May to late September 2015, spikes of malaria in MSF projects in Northern Bahr al Ghazal, Warrap State and the Abyei Special Administrative Area have continued, and even intensified, surpassing the 2014 figures. In its project in Aweil hospital, MSF has been forced to rapidly expand its hospitalization capacity to 215 beds, as the number of children admitted with severe malaria has approached or exceeded 200 per week, representing an overall increase of more than 11 percent from last year.

In Agok, in the Abyei Special Administrative Area,



Figure 2. A MSF medical staff member treats a child recovering from malaria in Agok (credit Pierre-Yves Bernard)

MSF has treated more than 6000 patients with simple malaria between May and September. More than 900 patients have been hospitalized with severe, lifethreatening malaria in the same period, representing an increase of more than 40 percent from 2014. This has prompted MSF to take exceptional measures in an effort to provide earlier access to treatment. Since June, MSF has expanded its hospitalization bed capacity from 125 to 169 beds and trained a network of community healthcare workers. These workers test for malaria in the community using the rapid diagnostic test (RDT); they check for fever and history of fever and refer cases with fever and negative tests to health facilities. They provide early access to treatment for simple malaria by giving a first dose of artemisinin-based combination therapy (ACT) and demonstrating how to take further doses so patients know how to complete their regimens, thus decreasing patients' risk of developing severe malaria.

Similarly, MSF is increasing its support to healthcare structures in Warrap State as malaria caseloads in the MSF health centre in Gogrial are also exceeding the alarmingly high figures from 2014. From May to September of this year, MSF provided hospital care to over 640 patients with severe malaria, nine per cent more than last year, and also provided treatment for more than 18,000 simple malaria cases. In response, MSF has established a dedicated malaria treatment unit in Gogrial, as well as running mobile clinics in support of four healthcare facilities in the surrounding area.

The severe malaria season is also affecting refugee

populations living in South Sudan. In the Doro refugee camp in Upper Nile State, MSF is providing hospital care to nearly double the number of severe malaria patients as last year. In the Yida refugee camp in northern Unity State, MSF provided hospital care to over 60 percent more patients than last year from May to September and the number of patients treated for simple malaria more than doubled. In recent weeks, the trend has accelerated, with up to four times as many patients hospitalized for malaria and 10 times as many treated for simple malaria in some weeks this October compared to last year.

Taken as a whole, these trends lead MSF to fear many locations in South Sudan may be experiencing the worst malaria season in many years. While the availability of medical services and stocks of life-saving malaria drugs varies across different locations within the country, MSF has seen evidence of drug shortages and ruptures again this year, particularly in Northern Bahr al Ghazal. Many patients are arriving in MSF facilities after long journeys because treatment is not available in other healthcare facilities.

MSF is responding with urgency to this exceptional

malaria season. It is also deeply concerned the situation may deteriorate further if these spikes in malaria persist and they are not met with an urgent response. MSF is calling upon health authorities to ensure urgently access to life-saving malaria drugs and treatment in the worst-affected parts of the country.

Médecins Sans Frontières (MSF) is an international, independent, medical humanitarian organization that offers assistance to people based on need, irrespective of race, religion, gender or political affiliation. MSF has been working in the region that today constitutes the Republic of South Sudan since 1983, and currently runs 17 projects in the country. MSF employs more than 3,200 South Sudanese staff to work alongside 300 international staff in its projects. In 2014, MSF treated over 170,000 malaria patients in South Sudan. For more information contact Jacob Kuehn msf-ssudan-com@msf.org or go to our website http://www.msf.org/south-sudan.

INFORMATION ON MALARIA

See the following websites for information on malaria, and its diagnosis, prevention and treatment:

http://www.msf.org.uk/malaria

http://www.who.int/malaria/areas/diagnosis/en/ and

http://www.who.int/malaria/publications/atoz/9789241549127/en/

http://www.who.int/mediacentre/news/releases/2015/sage/en/