

MALARIA ERADICATION: STILL A CHALLENGE

Habibullah Khan

Department of Medicine, Gomal Medical College, D.I.Khan, Pakistan

Malaria remains a significant cause of morbidity and mortality even in this modern era. Mortality from malaria as reported from the developing countries may just be the tip of an iceberg.

Of course, new drugs and possible vaccine are needed but the importance of effective vector control and education of the community cannot be ignored.¹

Malaria is a major public health problem in Pakistan for a long time but recent monsoon rains and floods have escalated this problem.

According to the World Health Organization (WHO), 97% Pakistani population is at risk of contracting malaria, with an estimated nationwide burden of 1.6 million cases per year.⁵

The Roll Back Malaria (RBM) is a global control strategy with emphasis on areas where malaria is endemic. Pakistan joined this program in 2001.²⁻⁴ Unfortunately the results are not promising and the goals of this program seem unachievable.

It is a known fact that environmental factors and behavioral patterns of the vector and the host combine to provide favorable conditions for malaria.

While much is known about the vector, the host behavior is largely overlooked. This failure to consider community attitude towards malaria may have contributed to the inability of achieving a control.

In the present issue of the journal there a KAP study by Khan SJ et al from Khyber Pakhtoon Khwa province showing that knowledge about prophylaxis and vector control is grossly deficient in our community. Most of the respondents did not even know about the community health worker and malaria control program.⁶ This points to the gross major flaw in the control program i.e. deficient community education.

There is another article by Soomro FR et al in the same issue reporting malaria from Sindh province highlighting its importance as well.⁷

It is not only malaria which is dangerous but the failure of programs to control it may be catastrophic. Corruption and non-commitment at personal and organizational level is probably the major cause of this failure and needs to be probed. The government and WHO should employ consultants who are honest and committed to the cause and keep a vigilant on them to eliminate this factor.

Community education by mass media and other forums should be mobilized to highlight this problem, increase the level of education and change the attitude of the community.

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