

MALARIA ELIMINATION IN SRI LANKA : A SUCCESSFUL MULTI-SECTOR, MULTI-PROFESSIONAL COLLABORATION

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The last case of indigenous malaria was reported Sri Lanka in October 2012 and the country was certified as “malaria-free” by the World Health Organization in September 2016. This is truly a great achievement for a tropical country which had just overcome a major conflict within the country in areas that were previously endemic for malaria. Sri Lanka almost eliminated malaria in 1963 but the disease resurged in the late 1960s due to many reasons including technical issues. Today, it is almost 6 years since a case of indigenous malaria was reported implying that we have the capacity to prevent its re-introduction and re-establishment in favourable conditions.

Eliminating malaria was no easy task. It required political will, dedicated staff, committed administrators, inter-sectoral and multi-professional collaboration and sustained financial support. The main challenge was in the last stages to keep the momentum for elimination in the radar. A diminishing case load made clinicians

“forget” the disease; maintaining the technical skills of Public Health Laboratory Technicians was a challenge.

Mopping up of the last cases and eliminating two foci is a classic example of good public health practice. The Sri Lanka army immensely contributed to this elimination effort in collaborating with the Anti Malaria Campaign. Post 2009, many army personnel were diagnosed with vivax malaria. Some of these episodes were relapses. The Sri Lanka Army ensured that all soldiers were provided with radical cure for vivax malaria which included a 14-day course of primaquine. This was instrumental in the success of the malaria elimination programme.

Even today, the armed forces collaborate with the Anti Malaria Campaign to prevent the re-introduction of malaria to Sri Lanka. This collaboration will need to continue for many years to come until eradication of malaria.