Advances in Intermittent Preventive Treatment of malaria in infants (IPTi) for improved and equitable health for children under 2 in sub-Saharan Africa

Intermittent Preventive Treatment of malaria in infants (IPTi) delivered through the Expanded Program on Immunization (EPI) is a feasible, sustainable, equitable and cost-effective strategy to prevent malaria in infants in areas of moderate-to-high transmission in sub-Saharan Africa.

IPTi with sulphadoxine-pyrimethamine (SP) is safe and efficacious in reducing clinical malaria, anaemia and hospital admissions and the WHO has recommended its use for malaria prevention in this high-risk group since 2010. To date only Sierra Leone has implemented IPTi.

As efforts to control malaria are stalling there is now renewed interest in IPTi. As malaria is particularly severe in children under the age of two, there is interest to extend IPTi into the second year of life, and to give additional doses of IPTi in the first year of life. The EDCTP-funded MULTIPLY (MULTiple doses of IPTi Proposal: a Lifesaving high Yield intervention) project aims to give up to 6 doses of IPTi in the first 2 years of life alongside vaccinations and Vitamin A supplementation delivered through the EPI, and will work in Mozambique, Togo and Sierra Leone. These countries have been chosen for a number of reasons including differing levels of SP resistance, countries with areas of highly seasonal transmission and implement Seasonal Malaria Chemoprevention (SMC), and countries that already implement IPTi as a national policy.

We will present the lessons learned from implementing IPTi as a national policy in Sierra Leone, the challenges of implementing IPTi in a country with different malaria transmission patterns, and an overview of the newly MULTIPLY project.

Large scale IPTi implementation projects in Africa funded by different funders are also beginning in 2021 and representatives of these projects will be invited to take part in the questions and answers session as well as EPI and National Malaria Control Programme managers.

Chair: Clara Menendez, ISGlobal - Barcelona Institute for Global Health, Spain

Speakers:

Augustin Fombah, ISGlobal - Barcelona Institute for Global Health & Ministry of Health of Sierra Leone, Sierra Leone
Lessons learned after 4 years of IPTi implementation in Sierra Leone

Francisco Saúte, Centro de Investigação em Saúde de Manhiça (CISM), Mozambique
Challenges in the implementation of IPTi in a country with different malaria transmission patterns

Clara Menendez, ISGlobal - Barcelona Institute for Global Health, Spain
Overview of the MULTIPLY (MULTiple doses of IPTi Proposal: a Lifesaving high Yield intervention) project in Mozambique, Togo and Sierra Leone