Diagnosis Workstream

Update of Progress
Aug 2010 – July 2011

Case Mgmt Working Group
Geneva
July 27 – 28, 2011

Revised WHO Guidelines on Diagnostic Testing for Malaria, 2010

Where malaria transmission is low-to-moderate and/or unstable

- Parasitological confirmation of the diagnosis of malaria is **strongly recommended.** This should be provided by high quality microscopy or, where this is not available, by RDTs.

In stable high-transmission settings

- Parasitological confirmation of the diagnosis of malaria provided by high-quality microscopy or, where this is not available, by RDTs is **recommended** for all suspected cases of malaria.

Diagnosis Workstream Work Plan Update

WG Sub-Activities	Milestones (Date)	Status
1. Assist the Procurement and Supply Chain Management Working Group in the forecasting of country requirements for RDTs	1. Technical assistance provided to PSM WG on technical aspects of RDT Procurement (2nd half 2010)	Draft Manual in Late Stage of Development. Projected completion Sept 2011
2. Assist the PSM Working Group to develop a global forecast of RDT requirements	1. PSM Working Group assisted to develop a global forecast of RDT requirements	Funding recently identified. TORs under development.
3. Document best practices for scaling up diagnostics to national scale	1. Best practices documented in 1-2 countries (2nd quarter 2011)	No funding currently available.
1. Support the development, finalization, and dissemination of an inter-agency operational manual for program managers on key components of a malaria diagnostics program.	1. Draft operational manual developed (September 2010)	To be published Aug 2011
	2. Finalized manual disseminated through CMWG member networks (1st quarter 2011)	Dissemination to follow publication
2. Support provided to the development of a malaria diagnostics tool kit	1.Existing tools currently in operational use collected (June 2010)	Tools collected.
	2. Tools posted to an easily-accessible website with short descriptions of each tool (November 2010)	Funding identified. TORs to be developed. Target completion 4th quarter 2011.
3. Provide guidance to the Global Fund TRP on appropriate criteria for evaluating diagnostics components of applications for funding	1. Guidance document developed (July 2010)	Guidance provided July 2010. Recently updated.
	2. Document provided to Harmonization Working Group for dissemination to Global Fund TRP members and applicant country NMCPs (July 2010)	Dissemination completed August 2011. Revised version to be shared with WHO to be included in next update for TRP.
4. Develop a position statement promoting adoption by countries of the revised WHO guidelines for diagnosis of malaria	1. Position statement developed and vetted with CMWG (May 2010)	Completed July 2010.
	2. Position statement submitted to RBM Board for ratification (November 2010)	Resolution adopted by the Board Feb 2011.

ROLL BACK MALARIA

DECISION

RBM/BOM/2010/SUB.1
3 FEB 2011
Draft document

General distribution
English Only

RBM Board Meeting – Electronic Vote - 10 Feb 2011

Resolution on scaling-up implementation of the WHO revised recommendations on universal diagnostic testing for malaria

19th RBM Partnership - Final Version

Background

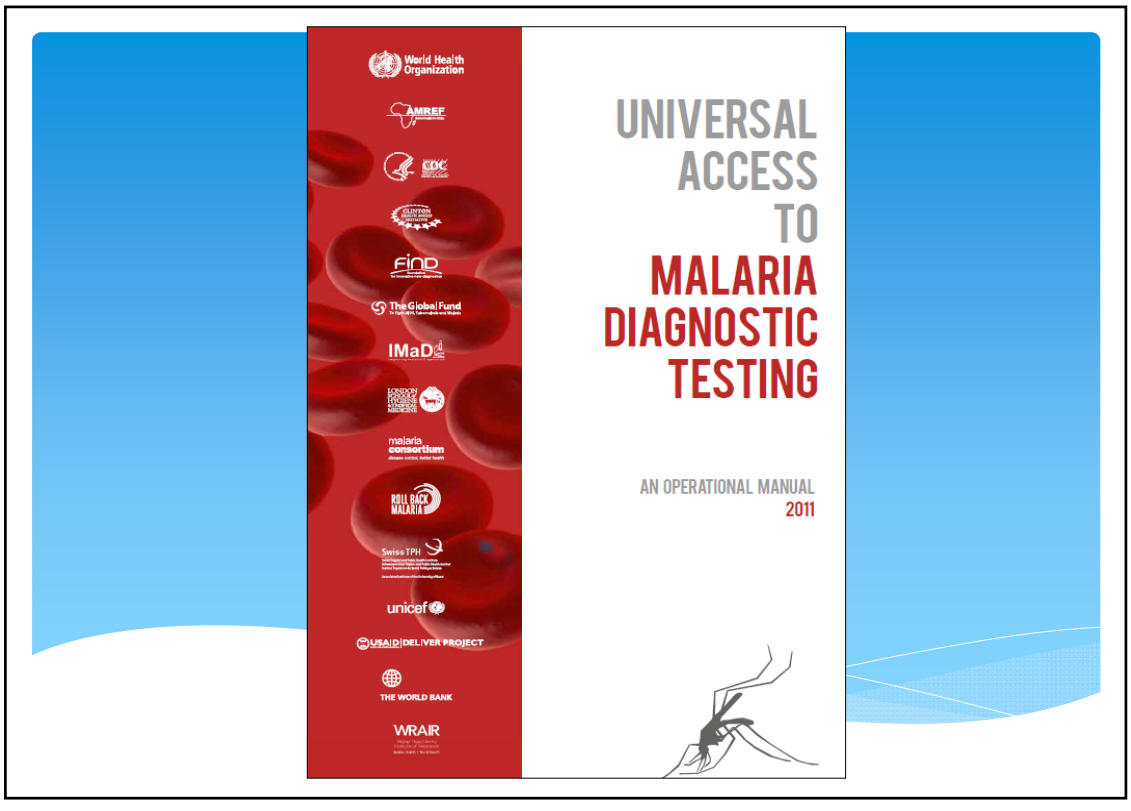
The regular session of the 19th RBM Board meeting considered on 8 December 2010 a resolution on scaling-up implementation of the WHO revised recommendations on universal diagnostic testing for malaria. The RBM Board invited Board members to provide final wording on the Resolution to the Secretariat by mid January 2010. The Secretariat was invited to submit the fina resolution text for Board approval by electronic vote as soon as possible.

Final Version

The RBM Board welcomes the recommendations laid out in the second edition of the WHO malaria treatment guidelines (2010) that prompt parasitological diagnosis is recommended, either by microscopy or by rapid diagnostic test (RDT), whenever possible before starting treatment with ACT.

Added advantages of systematic confirmation before treatment are that the inappropriate use of malaria treatments can be significantly reduced, thereby limiting drug pressure which may promote the spread of drug resistance and reduce irrational use of ACTs and costs to countries.. Reducing inappropriate drug use will diminish the number of people experiencing side effects from these drugs. Confirming cases of malaria also will greatly improve the quality of malaria case reporting, providing countries with more accurate information on malaria burden by which to monitor the success of their control programmes. In addition, use of diagnostic testing for malaria is likely to improve detection and case management of other causes of fever, particularly childhood pneumonia and diarrhoea; and other haemo-parasitological infections, when microscopy is used for diagnosis.


Existing and Developing Resources
Malaria Microscopy Quality Assurance MANUAL
Parasitological confirmation of malaria diagnosis
PROGRAMME MANAGEMENT
Basic MALARIA MICROSCOPY
Part I. Learner's guide
How To Do the Rapid Test for Malaria
TRACKING DOWN MALARIA
MALARIA CASE MANAGEMENT
OPERATIONS MANUAL
Good practices for selecting and procuring rapid diagnostic tests for malaria
Transporting, Storing, and Handling Malaria Rapid Diagnostic Tests In Health Facilites
Interagency Manual on Universal Access to Diagnostic Testing of Malaria
RDT quantification manual


World Health Organization
AMREF
CDC
FIND
The Global Fund
IMaD
malaria consortium
ROLL BACK MALARIA
Swiss TPH
unicef
USAID DELIVER PROJECT
THE WORLD BANK
WRAIR
UNIVERSAL ACCESS TO MALARIA DIAGNOSTIC TESTING
AN OPERATIONAL MANUAL
2011

Operational manual on universal access to diagnostic testing of malaria – Table of contents

Operational manual on universal access to diagnostic testing of malaria – Table of contents

Operational manual on universal access to diagnostic testing of malaria – Table of contents

Operational manual on universal access to diagnostic testing of malaria – List of Annexes

Summary

- Much of the proposed activities on the work plan have been completed or are nearing completion.
- Funding identified for the tool-kit and the global RDT quantification. TORs to be developed.
- Assessment of best practices and bottlenecks to scaling up on-hold pending identification of funding.
- With multiple new tools now available, focus will have to shift to monitoring country-level implementation to identify and develop appropriate responses to gaps.