Taking seasonal malaria chemoprevention to new geographies

SMC with SPAQ* in Mozambique and Uganda is

√ safe

bhase

- ✓ feasible with high coverage achieved
- acceptable in the local context

It appears to be highly effective

• In non-randomised controlled trials, children in SMC districts were

86% (Mozambique) and

92% (Uganda)

less likely to develop clinical malaria during the peak transmission season than those in non-SMC districts

The next project phase focuses on

- understanding chemoprevention efficacy of SPAQ to clear existing infections/prevent new ones in the context of high parasite resistance
- gathering more robust evidence of effectiveness through randomised controlled trials to inform policy change

PHASE 2

Despite high SP resistance, one annual round of SMC did not have a negative impact on the resistance profile

*sulfadoxine-pyrimethamine + amodiaquine

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THE BIGGER PICTURE

Understanding **changes in SP resistance** in symptomatic malaria cases to determine the short-term impact on the resistance profile



Understanding **infection clearance**, **infection prevention and disease prevention interface** to inform scale-up decisions in the medium term



Exploring **alternative SMC drug regimens** that could replace SPAQ in the longer term



Determining areas in **east and** southern Africa where SMC would be a viable malaria prevention strategy