



Myanmar ministers and opposition leaders agree plan to eliminate malaria by 2030

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An “unprecedented” meeting of organisations from Myanmar has agreed the first stages of an ambitious plan to eliminate malaria from the country by 2030.

Three Myanmar government ministries—health, defence, and foreign affairs—met representatives of three of Myanmar’s ethnic minority communities and of the main opposition party, the National League for Democracy, at a conference held at the University of Maryland on 3 August.

The meeting came in the wake of gene sequencing research showing the emergence in Myanmar of malaria parasites with mutations making them resistant to the main treatment for the disease, artemisinin.¹ It is feared that artemisinin resistant malaria will follow the pathway of chloroquine resistant malaria—from South East Asia to the Indian subcontinent—undermining control of the disease worldwide.

The diverse groups attending the meeting pledged to work together to move from a policy of malaria control to one of malaria elimination over the next decade. They issued a consensus statement acknowledging the “special challenges” faced by Myanmar in its efforts to build, manage, and coordinate malaria programmes.² The challenges include how to get treatment to the thousands of internally displaced people, many in remote regions still affected by conflict after decades of civil war.

Speaking at a press conference after the meeting, Eh Kalu Shwe Oo, director of the Department of Health and Welfare of Kayin (Karen) state, said that the biggest health problem for internally displaced people was malaria. Khoon Philip, director of the Karenni Mobile Health Committee, said that the area was now getting drug supplies from the government but that the challenge was transportation. “Because of the mountains and forest, we

have to carry the medicine in backpacks on people, with no cars,” he said.

The unstable political situation and ethnic tensions in the country mean that malaria control requires help from a network of organisations, including non-governmental organisations and other countries such as China, which provides drugs to some border areas. The conference participants pledged to continue to work together and with organisations such as the World Health Organization and the Bill and Melinda Gates Foundation to develop and implement their malaria elimination plan. In their consensus statement the participants described the meeting as “an important first step” that had started a dialogue that needed to be “carried forward urgently.”

Thein Thein Htay, Myanmar’s deputy minister of health, said that a priority would be “to contain the resistant strain” of malaria through prevention and surveillance. She pledged to form a steering committee and working group in Myanmar to bring in broader representation, to ensure that the whole population was covered by the plan.

The meeting was organised by the American Society of Tropical Medicine and Hygiene, the Global Health Policy Center of the think tank the Center for Strategic and International Studies, and the Institute for Global Health at the University of Maryland School of Medicine.

- 1 Tun KM, Imwong M, Lwin KM, et al. Spread of artemisinin-resistant *Plasmodium falciparum* in Myanmar: a cross-sectional survey of the K13 molecular marker. *Lancet Infect Dis* 2015;15:415-21.
- 2 Working together to eliminate malaria in Myanmar: conference statement August 3, 2015. http://csis.org/files/attachments/150804_Myanmar_Conference_Statement.pdf.

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