सत्यमेव जयते

National Center for Vector Borne Diseases Control

Directorate General of Health Services

Ministry of Health & Family Welfare, Government of India

राष्ट्रीय वैक्टर जनित रोग नियंत्रण कार्यक्रम
N V B D C P

MONTHLY MALARIA SITUATION

NATIONAL LEVEL

April, 2025

Monitoring and Evaluation Division

INDEX

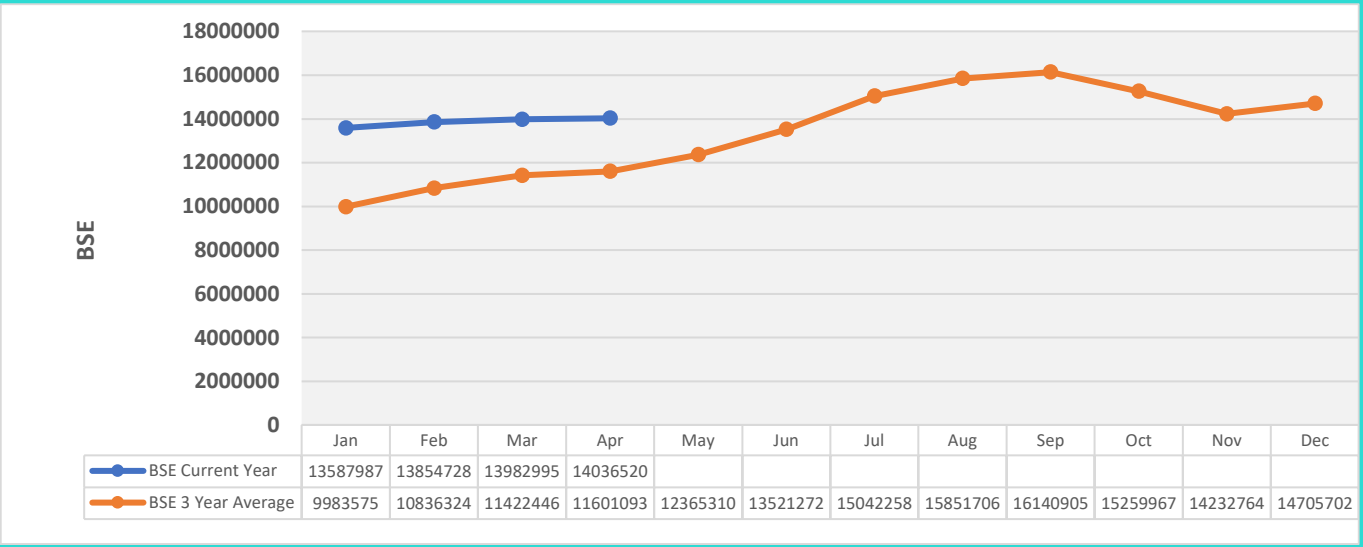
State categorization as per API 2023 status.

INTRODUCTION AND SUMMARY SHEET FOR COUNTRY

The surveillance information of Malaria of April, 2025 in India is enclosed in this Monthly Malaria Situation Information Report. The various indicators analyzed in this report are *BSE, *TPC, *TPR & *PF.

***BSE (Blood Slide Examination), TPC (Total Positive Cases), PF (Plasmodium falciparum) and TPR (Total Positivity Rate).**

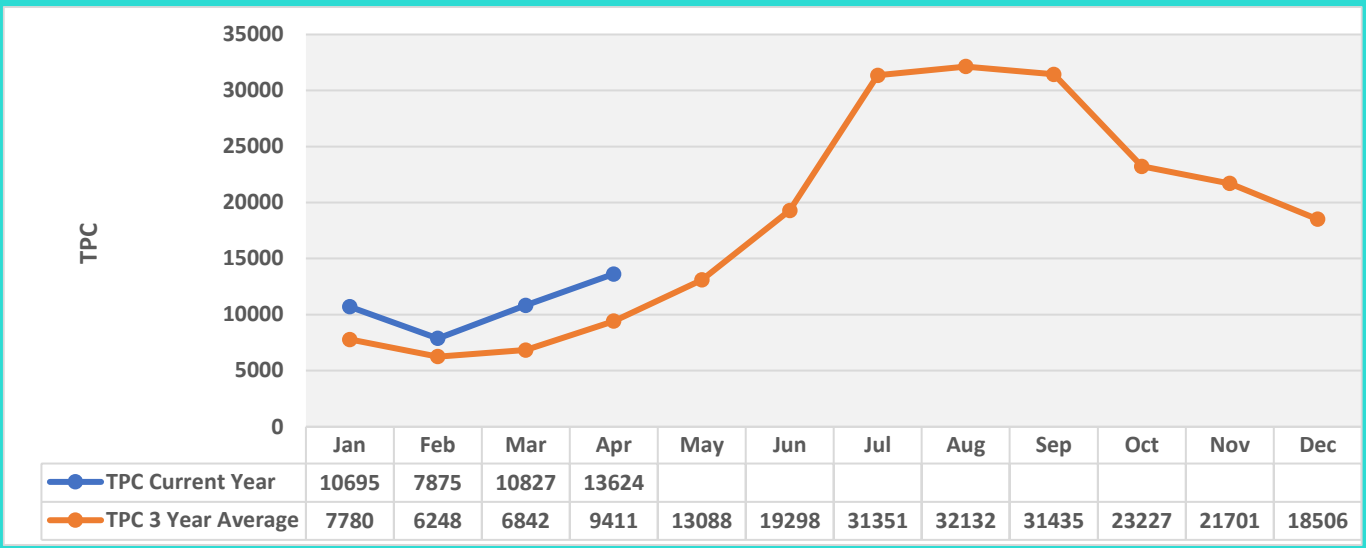
GRAPH 1: MONTH WISE TREND OF BSE IN COUNTRY



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
BSE Current Year	13587987	13854728	13982995	14036520								
BSE 3 Year Average	9983575	10836324	11422446	11601093	12365310	13521272	15042258	15851706	16140905	15259967	14232764	14705702

There is an increase of BSE by 26.5% up to April, 2025 as compared to last three years average cumulative and also an increase of BSE by 11.25% up to April, 2025 vis-à- vis up to April, 2024.

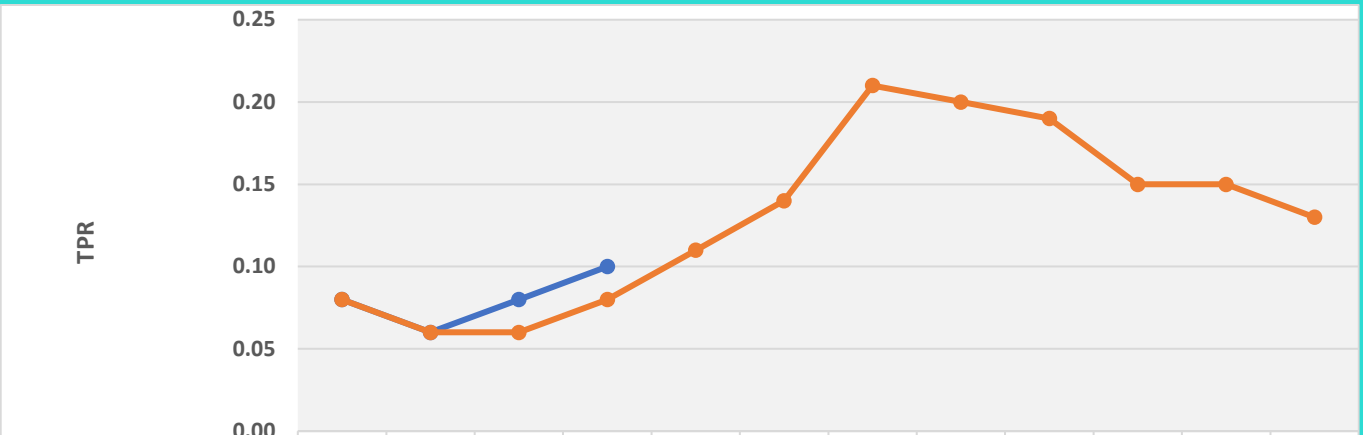
GRAPH 2: MONTH WISE TREND OF TPC IN COUNTRY



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPC Current Year	10695	7875	10827	13624								
TPC 3 Year Average	7780	6248	6842	9411	13088	19298	31351	32132	31435	23227	21701	18506

There is an increase of TPC by 42.07% up to April, 2025 as compared to last three years average cumulative and also an increase of TPC by 11.24% up to April, 2025 vis-à- vis up to April, 2024.

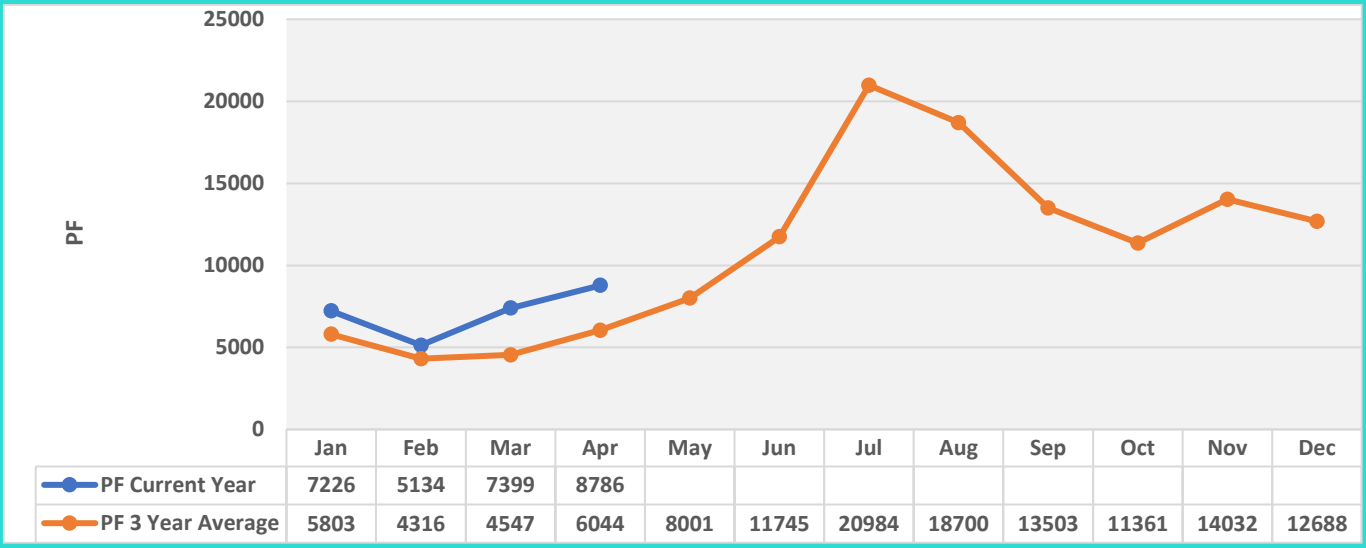
GRAPH 3: MONTH WISE TREND OF TPR IN COUNTRY



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPR Current Year	0.08	0.06	0.08	0.10								
TPR 3 Year Average	0.08	0.06	0.06	0.08	0.11	0.14	0.21	0.20	0.19	0.15	0.15	0.13

The TPR was 0.08 up to April, 2025 as compared to 0.07 last three years average and 0.08 up to April, 2024

GRAPH 4: MONTH WISE TREND OF PF IN COUNTRY



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
PF Current Year	7226	5134	7399	8786								
PF 3 Year Average	5803	4316	4547	6044	8001	11745	20984	18700	13503	11361	14032	12688

There is an increase of PF by 37.84% up to April, 2025 as compared to last three years average cumulative and also an increase of PF by 8.88% up to April, 2025 vis-à- vis up to April, 2024.

List of Districts showing a decrease in Surveillance in Country States/UTs

SN	States/UTs	Districts/Units showing decrease in Surveillance
1	Andhra Pradesh	Vizianagaram, Visakhapatnam, Sri Potti Sriramulu Nellore, Nandyal, Anakapalli
2	Arunachal Pradesh	Upper Siang, Shi Yomi, Lower Subansiri, Lower Siang, Lower Dibang Valley, Longding, Lohit, Leparada, Kamle
3	Assam	Darrang, Cachar, Barpeta, Baksa
4	Bihar	Sheohar, Sheikhpura, Patna, Kishanganj, Bhojpur
5	Chhattisgarh	Uttar Bastar Kanker, Surguja, Surajpur, Sarangarh-Bilaigarh, Sakti, Raipur, Raigarh, Mungeli, Mohla-Manpur-Ambagarh Chouki, Mahasamund, Korba, Khairagarh-Chhuikhadan-Gandai, Kabeerdham, Jashpur, Janjgir-Champa, Gaurela-Pendra-Marwahi, Gariyaband, Durg, Dhamtari, Bemetara, Balodabazar-Bhatapara, Balod
6	Gujarat	Vadodara, Tapi, Surat, Sabar Kantha, Porbandar, Patan, Panch Mahals, Navsari, Narmada, Morbi, Mahisagar, Mahesana, Kheda, Kachchh, Jamnagar, Gir Somnath, Gandhinagar, Devbhumi Dwarka, Dangs, Dahod, Bhavnagar, Bharuch, Banas Kantha, Arvalli, Anand, Amreli
7	Haryana	Hisar, Ambala
8	Himachal Pradesh	Solan, Shimla, Mandi, Kullu, Hamirpur
9	Jammu And Kashmir	Udhampur, Srinagar, Reasi, Ramban, Rajouri, Poonch, Kishtwar, Doda
10	Jharkhand	West Singhbhum, Pakur, Dhanbad
11	Karnataka	Vijayanagara, Ramanagara, Mysuru, Kolar, Belagavi
12	Kerala	Wayanad, Thiruvananthapuram, Kozhikode, Kottayam, Ernakulam
13	Ladakh	Kargil
14	Madhya Pradesh	Umaria, Tikamgarh, Shivpuri, Sheopur, Sehore, Sagar, Ratlam, Rajgarh, Panna, Neemuch, Narsimhapur, Mandsaur, Khargone (West Nimar), Katni, Jabalpur, Indore, Datia, Damoh, Chhatarpur, Bhopal, Bhind, Betul, Ashoknagar, Anuppur, Alirajpur

15	Manipur	Tamenglong, Senapati, Noney, Imphal West
16	Meghalaya	Eastern West Khasi Hills, East Jaintia Hills
17	Mizoram	Siaha, Serchhip, Mamit, Lunglei, Lawngtlai, Kolasib, Champhai, Aizawl
18	Nagaland	Tuensang, Mokokchung, Longleng
19	Odisha	Sundargarh, Kandhamal, Jharsuguda, Dhenkanal, Balangir
20	Puducherry	Puducherry, Karaikal
21	Punjab	Shahid Bhagat Singh Nagar, S.A.S Nagar, Rupnagar, Moga, Ludhiana, Kapurthala, Gurdaspur, Ferozepur, Barnala
22	Rajasthan	Udaipur, Rajsamand, Pratapgarh, Pali, Jaipur, Hanumangarh, Ganganagar, Dholpur, Dausa, Churu, Bharatpur, Barmer, Banswara, Alwar, Ajmer
23	Tamil Nadu	Tiruvannamalai, Tiruppur, Tiruchirappalli, Thoothukkudi, Thiruvallur, Theni, The Nilgiris, Thanjavur, Tenkasi, Sivaganga, Namakkal, Nagapattinam, Mayiladuthurai, Karur, Kanniyakumari, Kallakurichi, Erode, Dindigul, Cuddalore, Chennai
24	Telangana	Warangal, Wanaparthy, Nirmal, Nagarkurnool, Mulugu, Mancherial, Mahabubnagar, Khammam, Bhadradri Kothagudem
25	The Dadra And Nagar Haveli And Daman And Diu	Diu, Dadra And Nagar Haveli
26	Tripura	West Tripura, Sepahijala, North Tripura, Gomati, Dhalai
27	Uttar Pradesh	Sitapur, Lucknow
28	Uttarakhand	Rudraprayag, Pithoragarh, Pauri Garhwal, Haridwar, Dehradun, Champawat, Chamoli, Bageshwar
29	West Bengal	Rampurhat Hd#, Basirhat Hd#, South 24 Parganas, Purulia, Purba Bardhaman, Paschim Medinipur, Paschim Bardhaman, Murshidabad, Jhargram, Jalpaiguri, Hooghly, Darjeeling, Dakshin Dinajpur, Alipurduar

Current month data is compared with same month previous year data.

Objectives of the Country

- Interrupt transmission of malaria.
- Immediately notify each detected case.
- Detect any possible continuation of malaria transmission.
- etermine the underlying causes of residual transmission.
- Forecast and prevent any unusual situations related to malaria; ensure epidemic preparedness and respond in a timely and efficient manner to outbreak situations.
- Prevent re – establishment of local transmission of malaria.
- Establish an efficient malaria preventive and curative system to reduce ongoing transmission of malaria.
- Contain and prevent possible outbreaks of malaria, particularly among non-immune high-risk mobile and migrant population groups.
- Achieve universal coverage with services.
- Emphasize reducing malaria morbidity and mortality in high transmission pockets such as tribal, hilly, forested and conflict affected areas.

Key Interventions of the Country

- All efforts will be directed at interrupting local transmission in all active foci of malaria.
- Mandatory notification of each case of malaria from the private sector, other organized government sectors or any other health facility.
- Adequate case - based surveillance and complete case management established and fully functional across the entire country to handle each case of malaria.
- Investigation and classification of all foci of malaria.
- A strict total coverage of all active foci by effective vector control measures.
- Early detection and treatment of all cases of malaria by means of ACD and / or PCD to prevent onward transmission.
- State and National level malaria elimination database established and made operational.
- Implementation of interventions for effective screening, management and prevention of malaria among mobile and migrant populations.
- Establishment of an effective epidemic forecasting and response system.
- Ensuring rigorous quality assurance of all medicines and diagnostics.
- Setting up a national – level reference laboratory to serve following two functions:-

- All positive and a fixed percentage of negative slides will be referred to this laboratory for confirmation of diagnosis and cross – checking. After elimination has been achieved in each State / UT, 100% of cases will be notified to this laboratory for confirmation of diagnosis. The laboratory will be notified immediately on all positive cases of malaria by each State / UT through either SMS, e-mail or telephone with information on name, gender, address (village and district), date and type of testing and type of parasite for each positive case of malaria so that a national level database can be maintained.
- Training of master trainers and accreditation / certification of microscopists as per Indian Public Health Standards shall also be undertaken at this laboratory.

· During investigation of foci, all suspected cases of malaria are to be screened for malaria. These could include household members, neighbours, school children, workplace colleagues and relatives.

· Surveillance of special groups, migrant populations or populations residing in the vicinity of industrial areas are also to be covered under surveillance operations.

· Screening of all fever cases suspected for malaria.

· Classification of areas as per local malaria epidemiology and grading of areas as per risk of malaria transmission followed by implementation of tailored interventions.

· Strengthening of inter-sectoral collaboration.

· Maintenance of an optimum level of surveillance using appropriate diagnostic measures.

· Massive scaling up of existing disease management and preventive approaches and tools, aimed at a significant reduction in the prevalence and incidence of malaria as well as associated deaths.

· Special interventions for high-risk groups such as tribal populations and populations residing in conflict affected or hard-to-reach areas.

· One-stop centres or mobile clinics on fixed days in tribal or conflict affected areas to provide malaria diagnosis and treatment, and increasing community awareness with the involvement of other agencies and service providers as required.

· Timely referral and treatment of severe malaria cases to reduce malaria-related mortality.

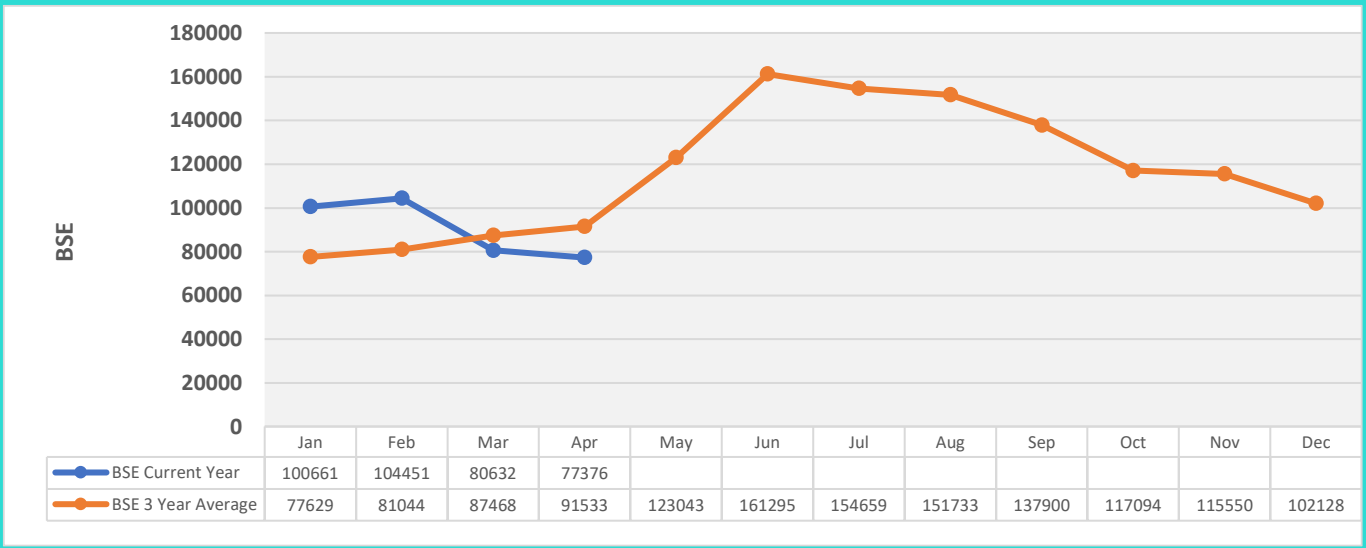
· Strengthening all district and sub-district hospitals in malaria endemic areas as per Indian Public Health Standards with facilities for management of severe malaria cases.

· Establishment of a robust supply chain management system

· Equipping all health institutions (primary health care level and above), especially in high-risk areas, with microscopy facilities and RDTs for emergency use and injectable artemisinin derivatives for treatment of severe malaria.

CATEGORY III

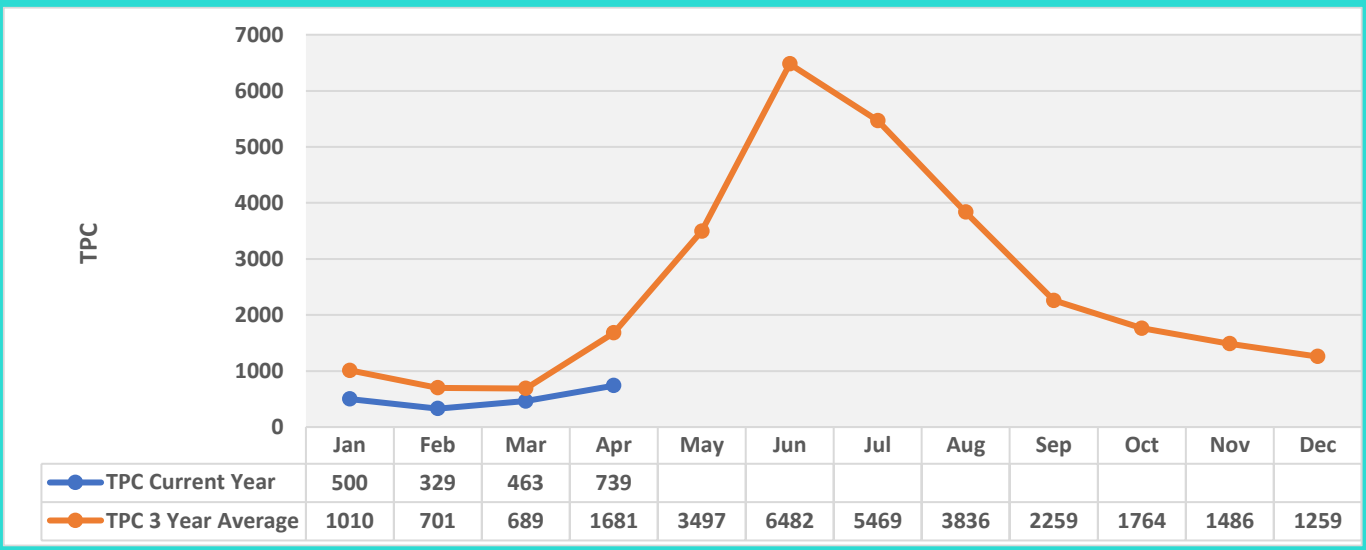
GRAPH 1: MONTH WISE TREND OF BSE IN CATEGORY III STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
BSE Current Year	100661	104451	80632	77376								
BSE 3 Year Average	77629	81044	87468	91533	123043	161295	154659	151733	137900	117094	115550	102128

There is an increase of BSE by 7.54% up to April, 2025 as compared to last three years average cumulative but a decrease of BSE by 6.61% up to April, 2025 vis-à- vis up to April, 2024.

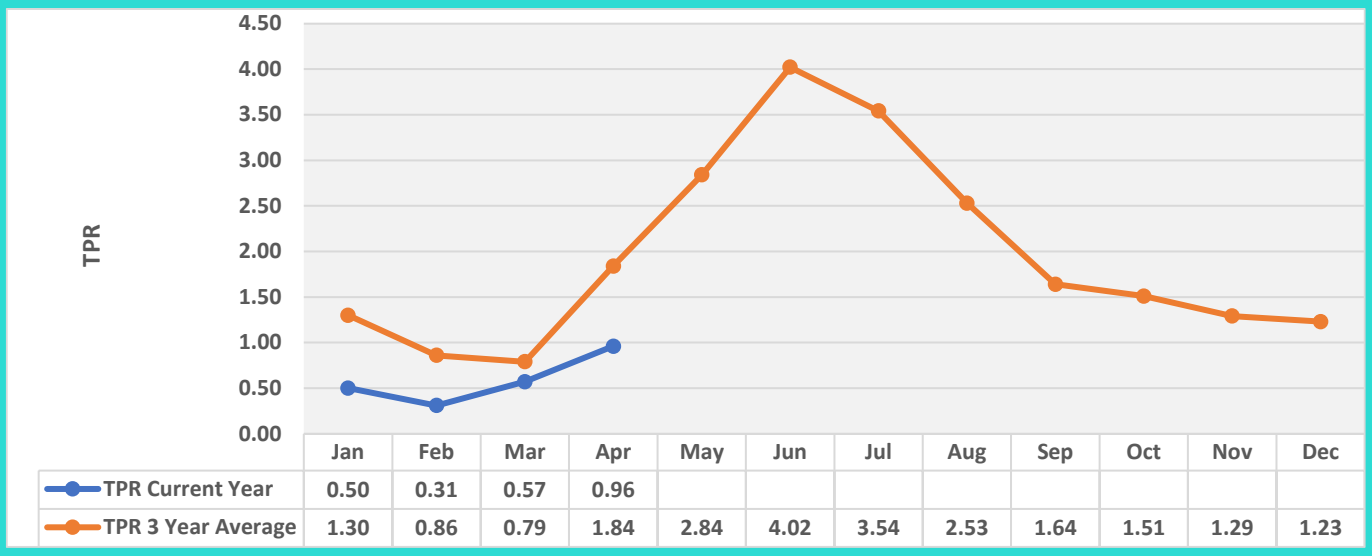
GRAPH 2: MONTH WISE TREND OF TPC IN CATEGORY III STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPC Current Year	500	329	463	739								
TPC 3 Year Average	1010	701	689	1681	3497	6482	5469	3836	2259	1764	1486	1259

There is a decrease of TPC by 50.24% up to April, 2025 as compared to last three years average cumulative and also a decrease of TPC by 66.07% up to April, 2025 vis-à- vis up to April, 2024.

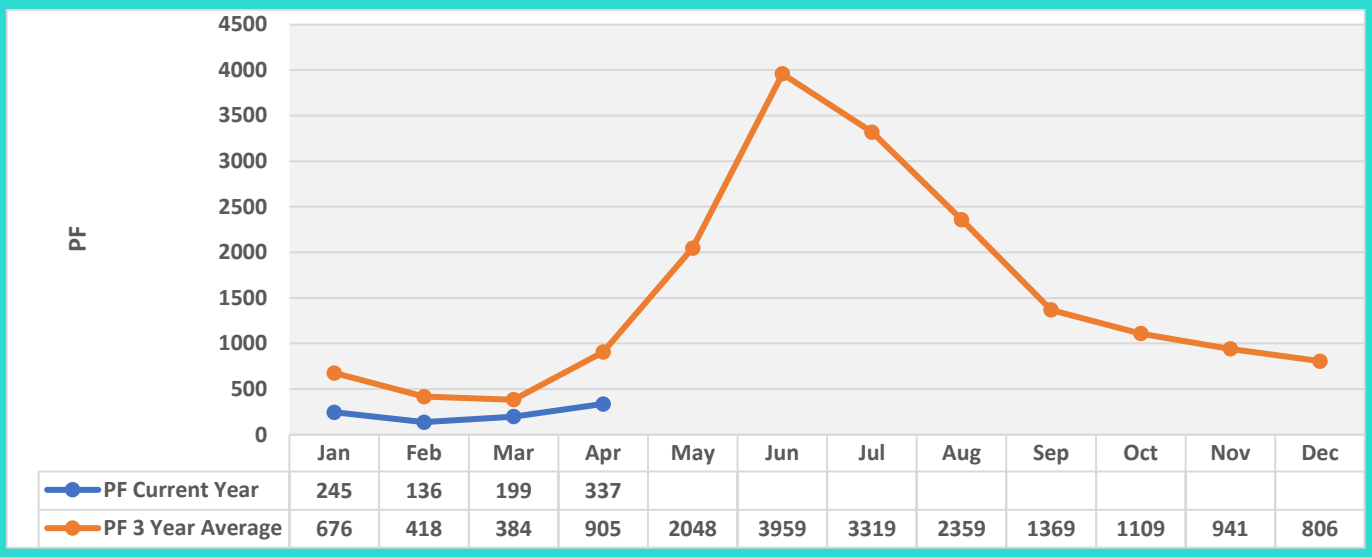
GRAPH 3: MONTH WISE TREND OF TPR IN CATEGORY III STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPR Current Year	0.50	0.31	0.57	0.96								
TPR 3 Year Average	1.30	0.86	0.79	1.84	2.84	4.02	3.54	2.53	1.64	1.51	1.29	1.23

The TPR was 0.56 up to April, 2025 as compared to 1.18 last three years average and 1.54 up to April, 2024

GRAPH 4: MONTH WISE TREND OF PF IN CATEGORY III STATES/UTs

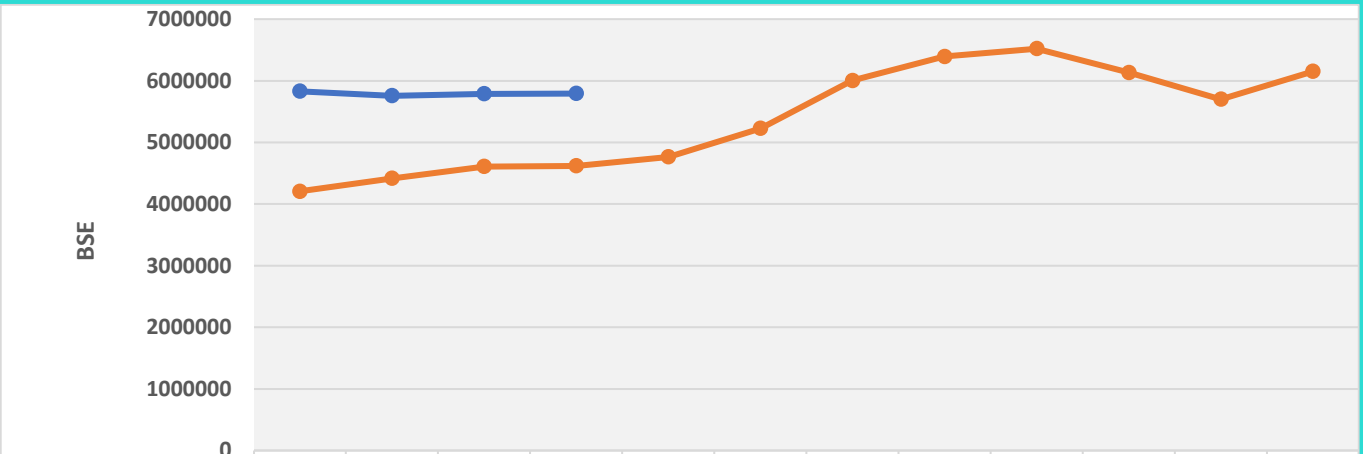


	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
PF Current Year	245	136	199	337								
PF 3 Year Average	676	418	384	905	2048	3959	3319	2359	1369	1109	941	806

There is a decrease of PF by 61.52% up to April, 2025 as compared to last three years average cumulative and also a decrease of PF by 69.73% up to April, 2025 vis-à- vis up to April, 2024.

CATEGORY II

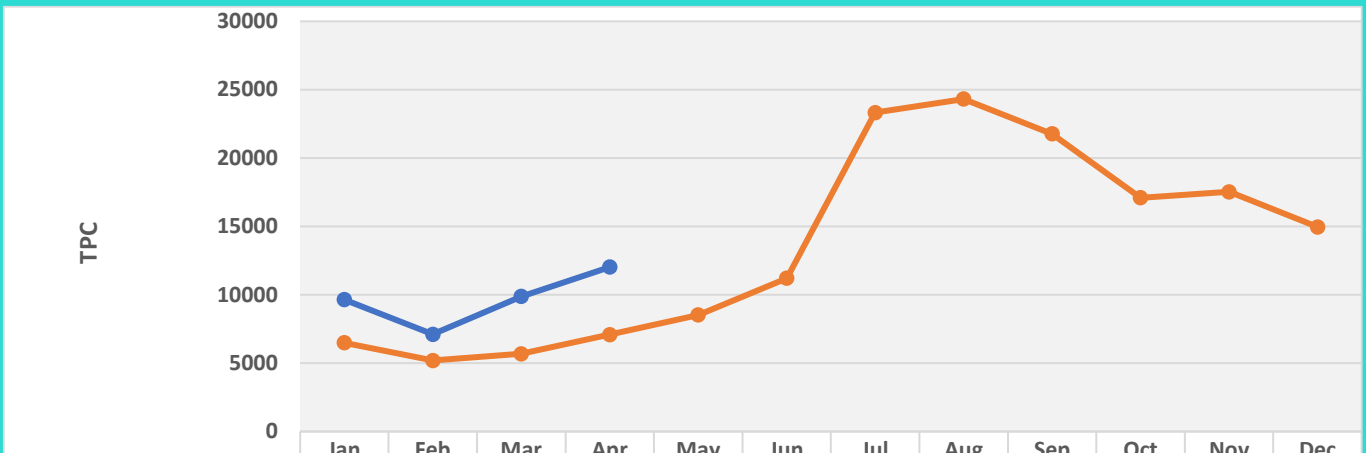
GRAPH 1: MONTH WISE TREND OF BSE IN CATEGORY II STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
BSE Current Year	5831789	5758430	5789355	5793296								
BSE 3 Year Average	4207414	4417903	4608935	4620272	4764927	5227195	6003713	6393517	6523235	6135873	5702021	6153103

There is an increase of BSE by 29.79% up to April, 2025 as compared to last three years average cumulative and also an increase of BSE by 15.43% up to April, 2025 vis-à- vis up to April, 2024.

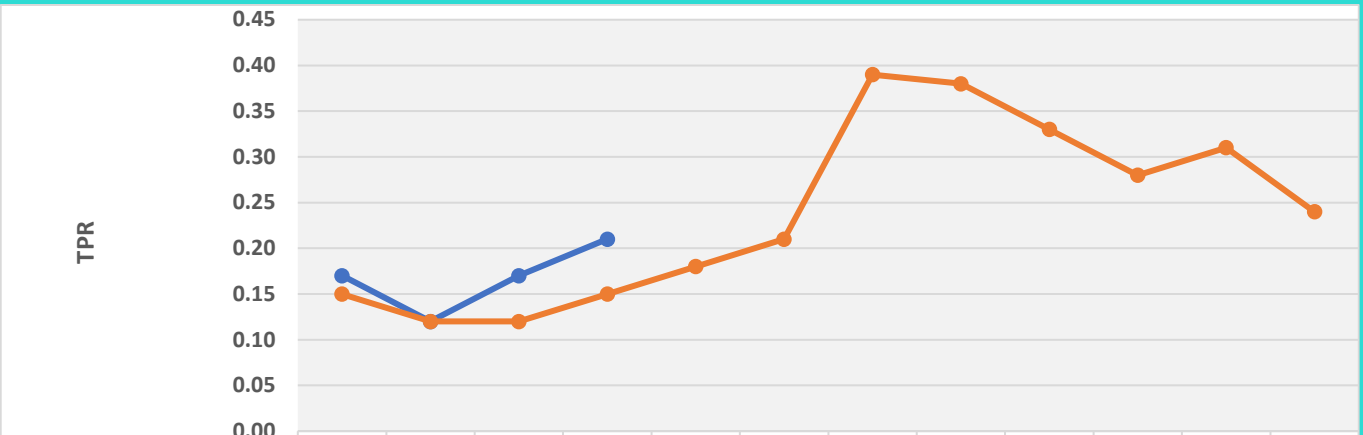
GRAPH 2: MONTH WISE TREND OF TPC IN CATEGORY II STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPC Current Year	9640	7106	9874	12026								
TPC 3 Year Average	6481	5193	5677	7081	8515	11204	23318	24316	21765	17091	17527	14951

There is an increase of TPC by 58.18% up to April, 2025 as compared to last three years average cumulative and also an increase of TPC by 25.08% up to April, 2025 vis-à- vis up to April, 2024.

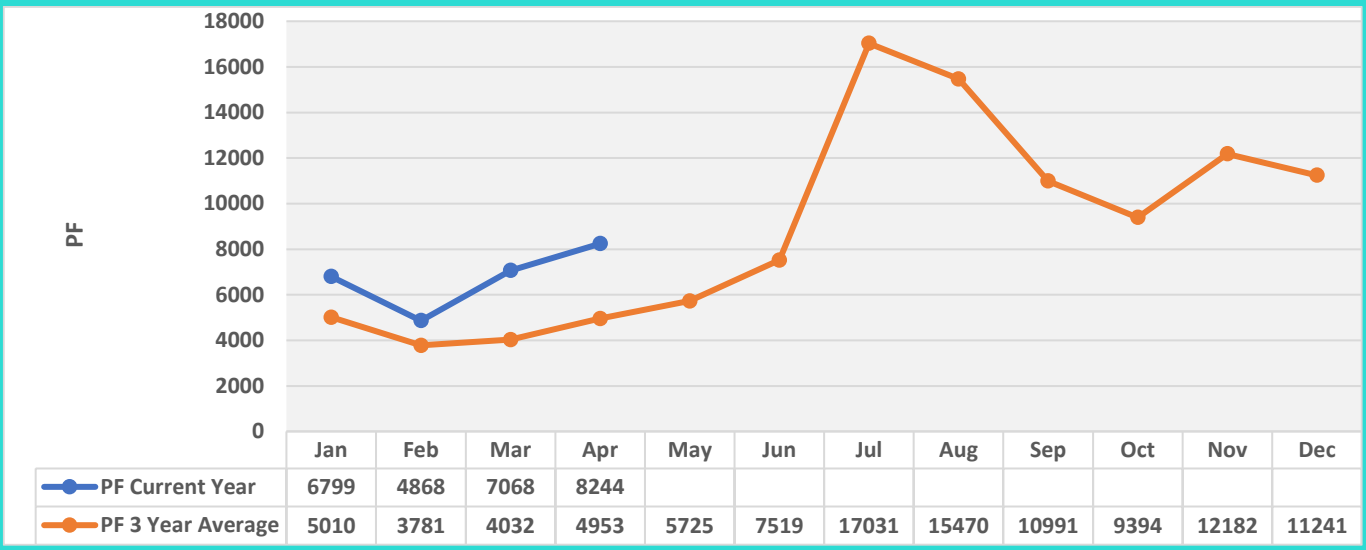
GRAPH 3: MONTH WISE TREND OF TPR IN CATEGORY II STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPR Current Year	0.17	0.12	0.17	0.21								
TPR 3 Year Average	0.15	0.12	0.12	0.15	0.18	0.21	0.39	0.38	0.33	0.28	0.31	0.24

The TPR was 0.17 up to April, 2025 as compared to 0.14 last three years average and 0.15 up to April, 2024

GRAPH 4: MONTH WISE TREND OF PF IN CATEGORY II STATES/UTs

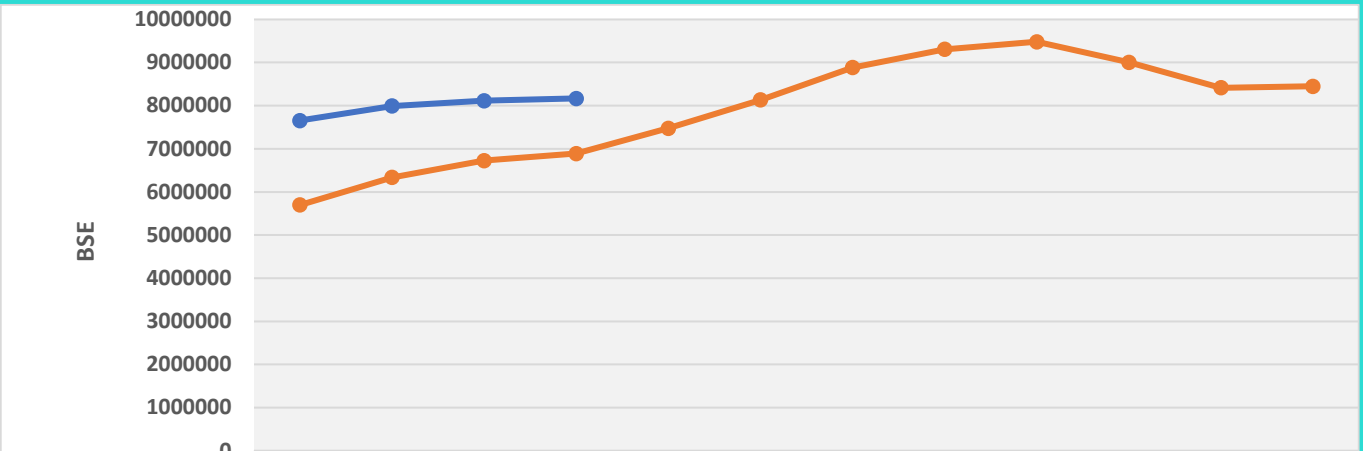


	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
PF Current Year	6799	4868	7068	8244								
PF 3 Year Average	5010	3781	4032	4953	5725	7519	17031	15470	10991	9394	12182	11241

There is an increase of PF by 51.77% up to April, 2025 as compared to last three years average cumulative and also an increase of PF by 19.43% up to April, 2025 vis-à- vis up to April, 2024.

CATEGORY I

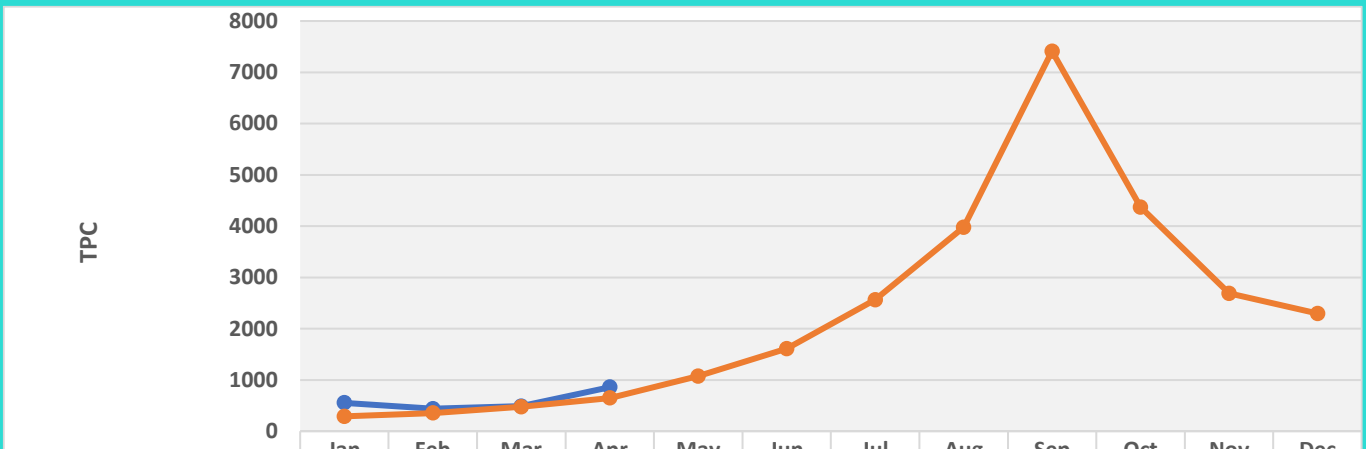
GRAPH 1: MONTH WISE TREND OF BSE IN CATEGORY I STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
BSE Current Year	7655422	7991631	8112597	8165707								
BSE 3 Year Average	5698453	6337270	6725948	6889206	7477256	8132677	8883807	9306332	9479671	9006879	8415079	8450360

There is an increase of BSE by 24.46% up to April, 2025 as compared to last three years average cumulative and also an increase of BSE by 8.63% up to April, 2025 vis-à- vis up to April, 2024.

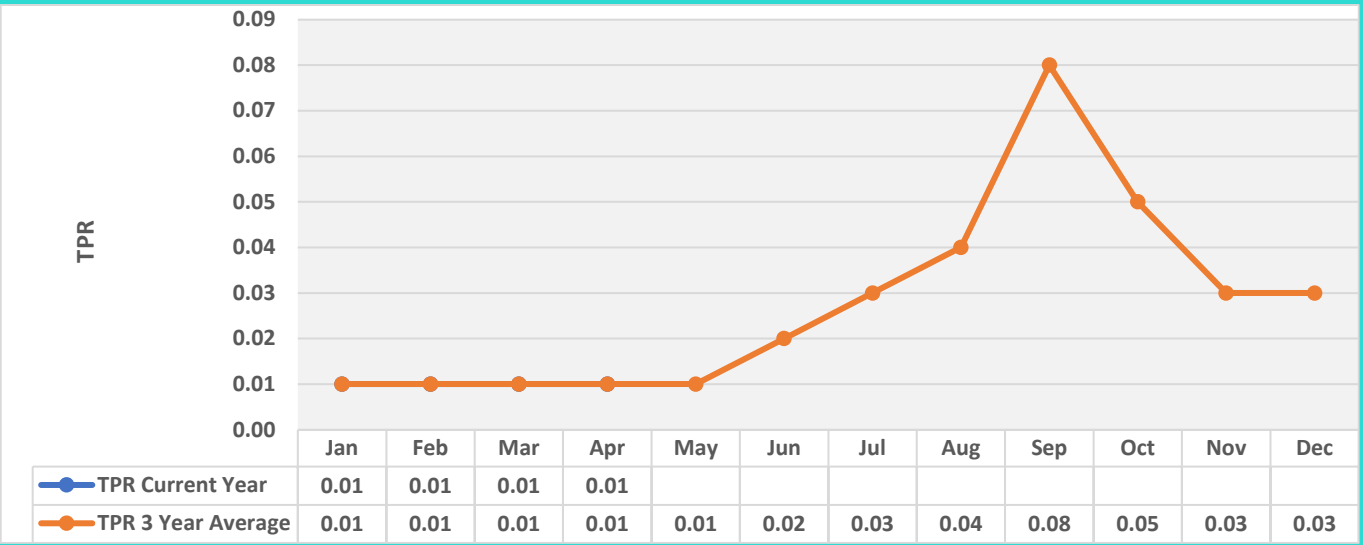
GRAPH 2: MONTH WISE TREND OF TPC IN CATEGORY I STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPC Current Year	555	440	490	859								
TPC 3 Year Average	289	354	476	650	1075	1612	2564	3980	7410	4372	2688	2296

There is an increase of TPC by 32.53% up to April, 2025 as compared to last three years average cumulative and also an increase of TPC by 30.8% up to April, 2025 vis-à- vis up to April, 2024.

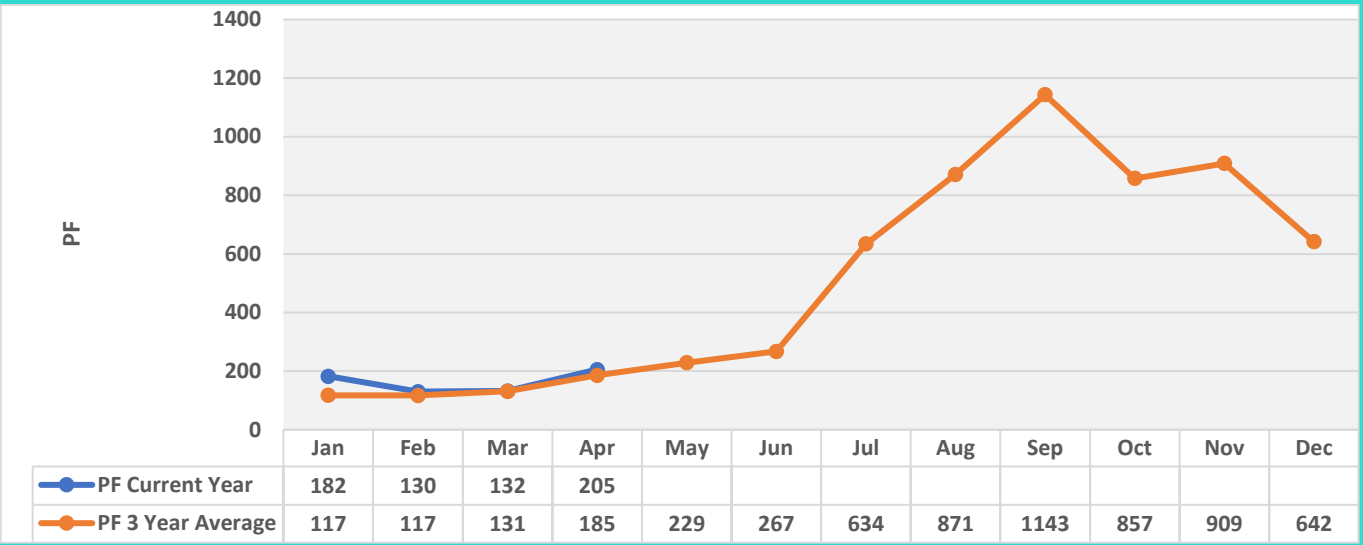
GRAPH 3: MONTH WISE TREND OF TPR IN CATEGORY I STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPR Current Year	0.01	0.01	0.01	0.01								
TPR 3 Year Average	0.01	0.01	0.01	0.01	0.01	0.02	0.03	0.04	0.08	0.05	0.03	0.03

The TPR was 0.01 up to April, 2025 as compared to 0.01 last three years average and 0.01 up to April, 2024

GRAPH 4: MONTH WISE TREND OF PF IN CATEGORY I STATES/UTs

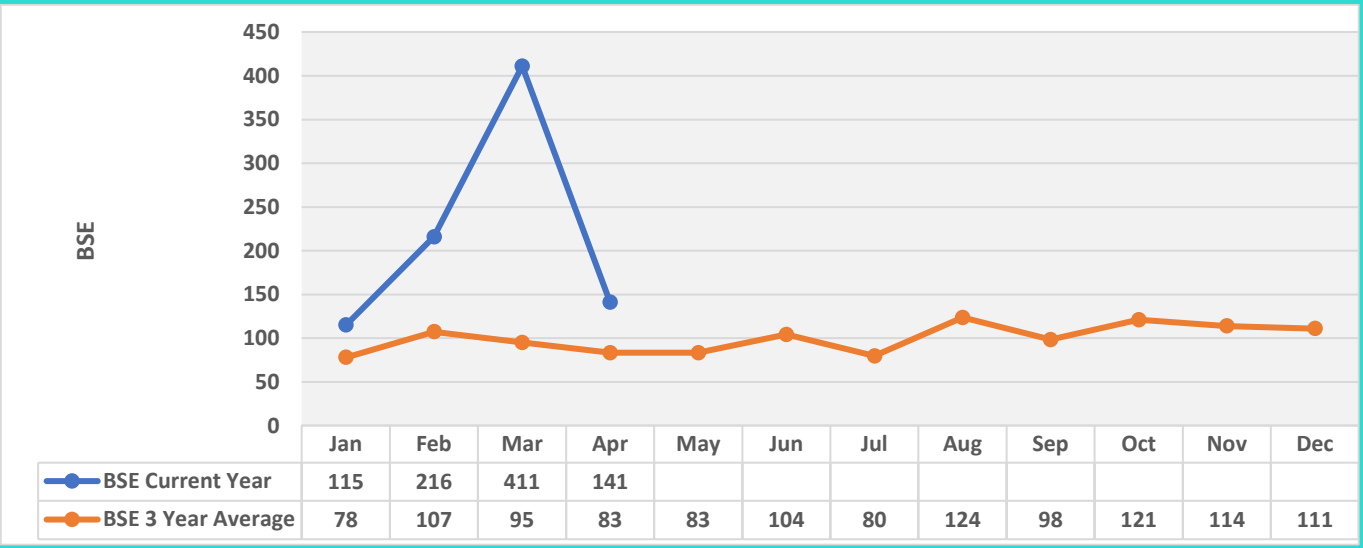


	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
PF Current Year	182	130	132	205								
PF 3 Year Average	117	117	131	185	229	267	634	871	1143	857	909	642

There is an increase of PF by 18% up to April, 2025 as compared to last three years average cumulative and also an increase of PF by 8.17% up to April, 2025 vis-à- vis up to April, 2024.

CATEGORY O

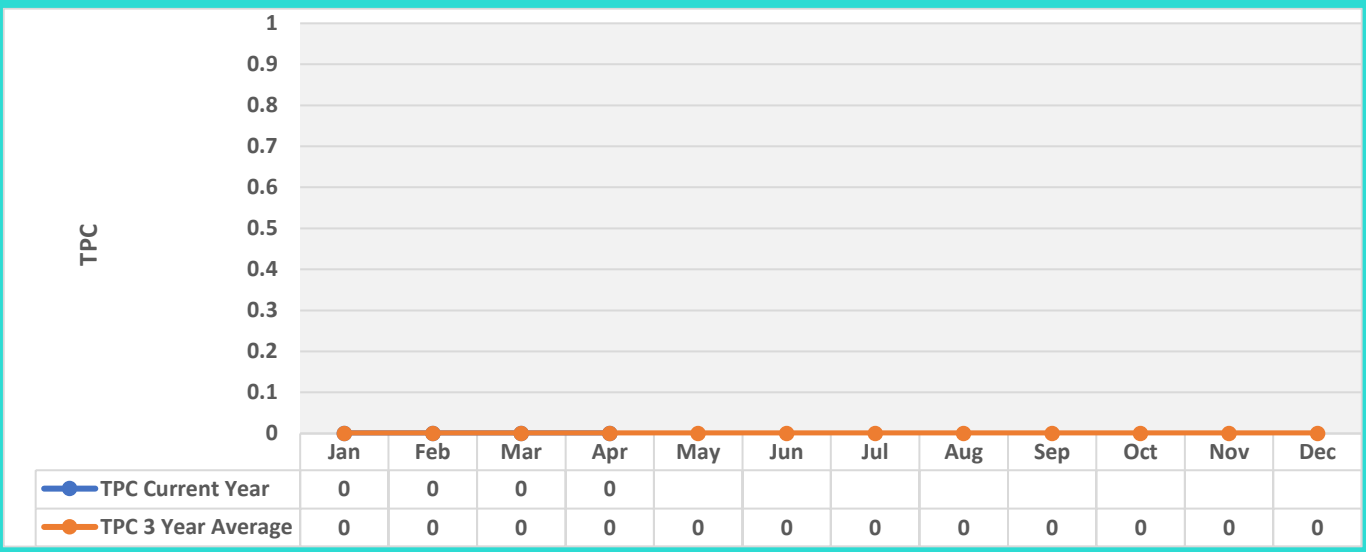
GRAPH 1: MONTH WISE TREND OF BSE IN CATEGORY O STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
BSE Current Year	115	216	411	141								
BSE 3 Year Average	78	107	95	83	83	104	80	124	98	121	114	111

There is a major increase of BSE up to April, 2025 as compared to last three years average cumulative as well as a major increase of BSE up to April, 2025 vis-à- vis up to April, 2024.

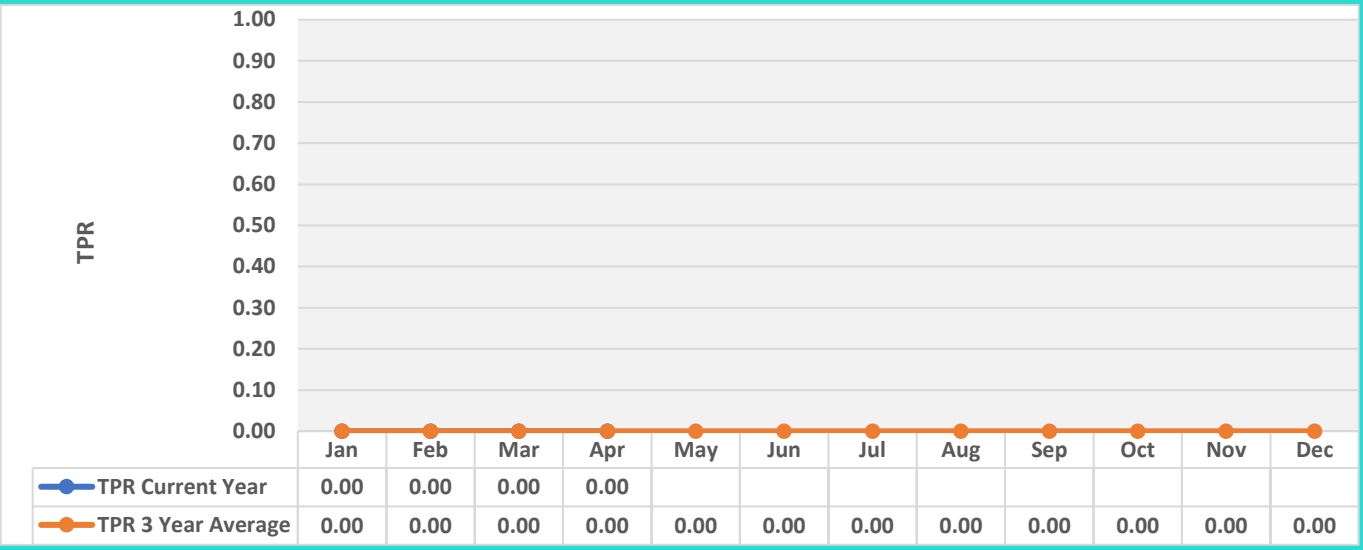
GRAPH 2: MONTH WISE TREND OF TPC IN CATEGORY O STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPC Current Year	0	0	0	0								
TPC 3 Year Average	0	0	0	0	0	0	0	0	0	0	0	0

There is no %change in TPC up to April, 2025 from last year as well as last three years average cumulative.

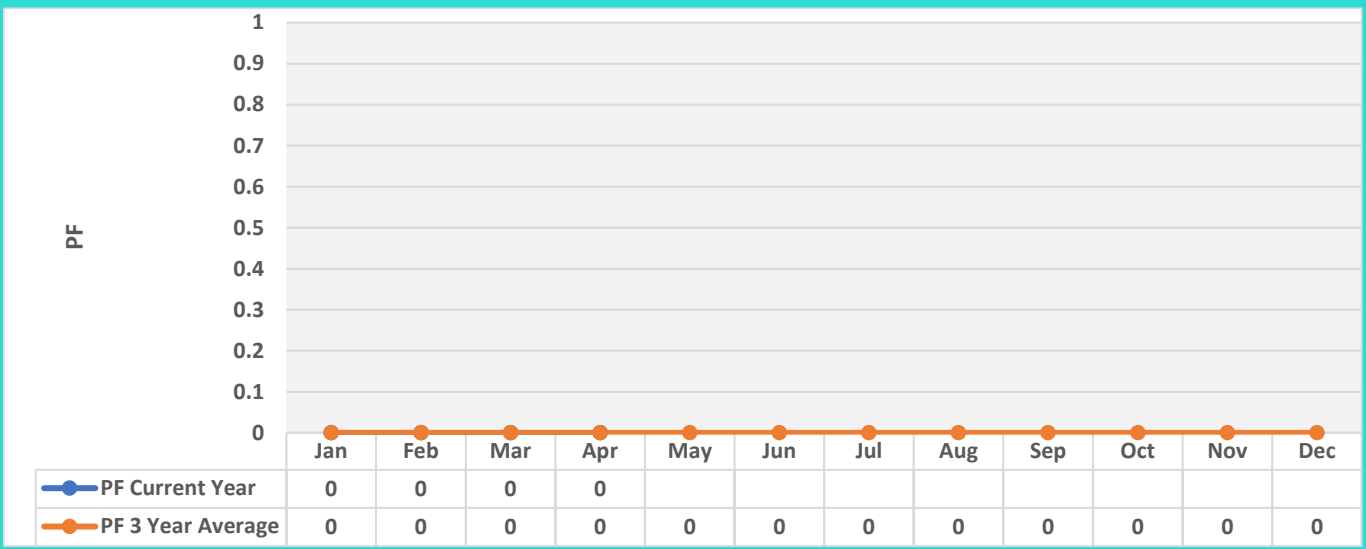
GRAPH 3: MONTH WISE TREND OF TPR IN CATEGORY O STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TPR Current Year	0.00	0.00	0.00	0.00								
TPR 3 Year Average	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

The TPR was nil for the year 2025, 2024 and last three-year average cumulative up to April.

GRAPH 4: MONTH WISE TREND OF PF IN CATEGORY O STATES/UTs



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
PF Current Year	0	0	0	0								
PF 3 Year Average	0	0	0	0	0	0	0	0	0	0	0	0

There is no %change in PF up to April, 2025 from last year as well as last three years average cumulative.

S. N	Area	Indicator
1	Surveillance/ case finding	No of Fever cases, No of Malaria cases, No of Pf cases
2	Surveillance/ case finding	Annual Blood Smear Examination Rate (ABER) should be more than 1%of population
3	Surveillance/ case finding	Annual Blood Smear Examination Rate (ABER) should be more than 10%of population
4	Disease burden & impact	Annual Parasite Incidence (API)
5	Disease burden & impact	Annual Falciparum Incidence (AFI)
6	Disease burden & impact	Slide Positivity Rate (SPR): Is independent of surveillance activity, therefore a better indicator for impact assessment
7	Disease burden & impact	Slide Falciparum Rate (SFR): It is independent of surveillance and indicates Pf preponderance
8	Disease burden & impact	Pf percentage (Pf%): Indicates trends in proportion of cases due to Pf out of total cases
	Input	**% of Additional Staff in Place (MTS, LT, DVBD Consultant)**
9	Input	No of RDTs & ACTs planned versus received & used.
10	Input	% of spray equipment in working condition
11	Input	% of spray workers trained
	Process	**BCC Activities**
12	Process	% of facilities (SC and PHC) / village level functionaries (ASHA, AWW) reporting stock-out of antimalarials lasting more than 15 days during the quarter
13	Process	% of MPHW/ASHA/other volunteers trained for use of RDT / ACT
14	Process	% of diagnostic facilities functional with microscopy/RDT in the last reporting period
15	Output	Nets treated once/twice in a year
16	Output	% of eligible villages covered by ITN,Should be 80% or more
17	Output	Insecticide use
18	Outcome	IRS coverage – Population (%) should be 80% or more
19	Outcome	IRS coverage – Rooms %
20	Outcome	% of fever cases who were tested for malaria by microscopy/ RDT with a positive test result for RDT and were started on treatment no later than the next day with ACT
21	Outcome	% of households in which beneficiaries reported having slept under ITNs/ LLINs previous night
22	Outcome	% of PHC sampled in which utilization of ITNs/ LLINs was more than 80%