



National Center for Vector Borne Diseases Control

Directorate General of Health Services

Ministry of Health & Family Welfare, Government of India



MONTHLY MALARIA SITUATION

CATEGORY – III

STATES/UTs



Monitoring and Evaluation Division

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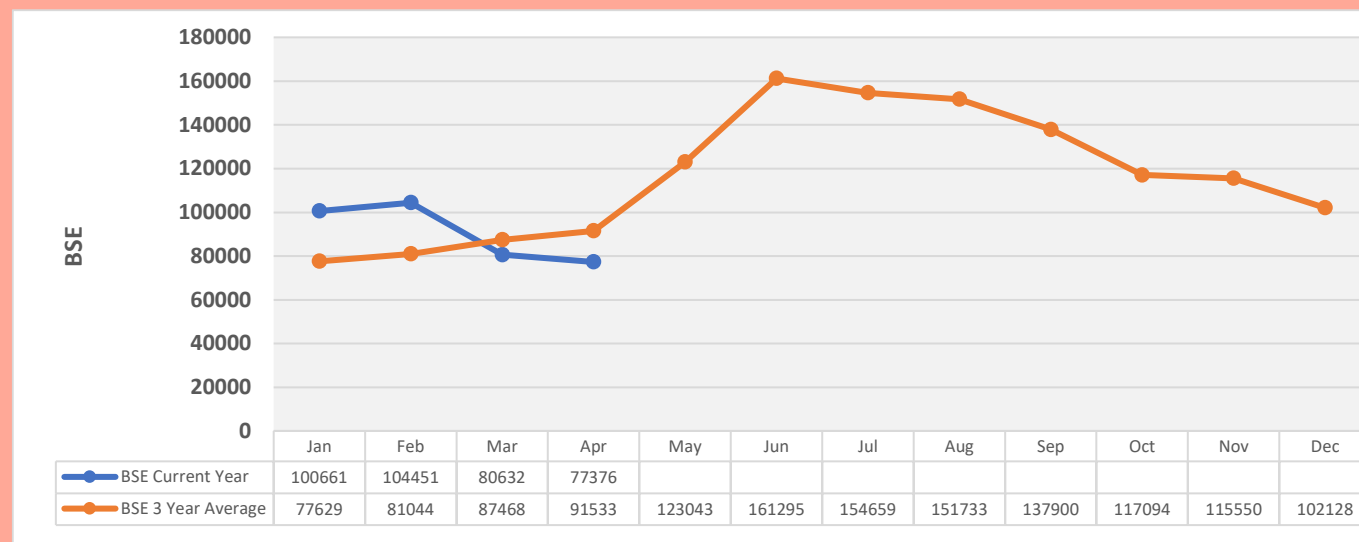
State categorization as per API 2023 status.

INTRODUCTION AND SUMMARY SHEET FOR CATEGORY III

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

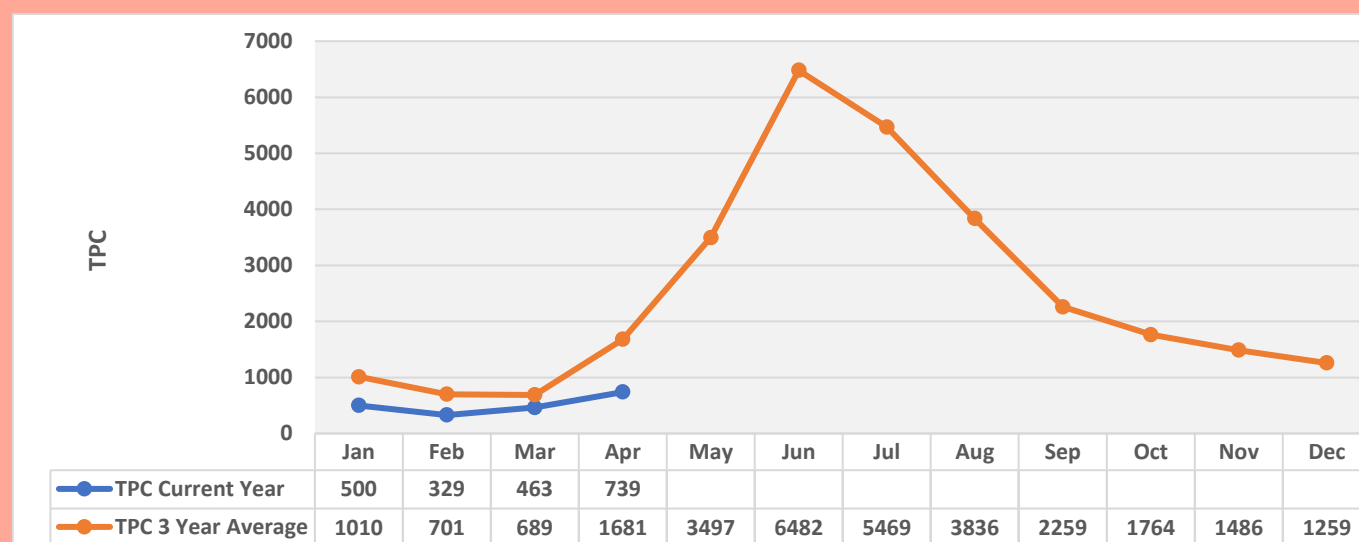
*BSE (Blood Slide Examination), TPC (Total Positive Cases), PF (Plasmodium falciparum) and TPR (Total Positivity Rate).

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



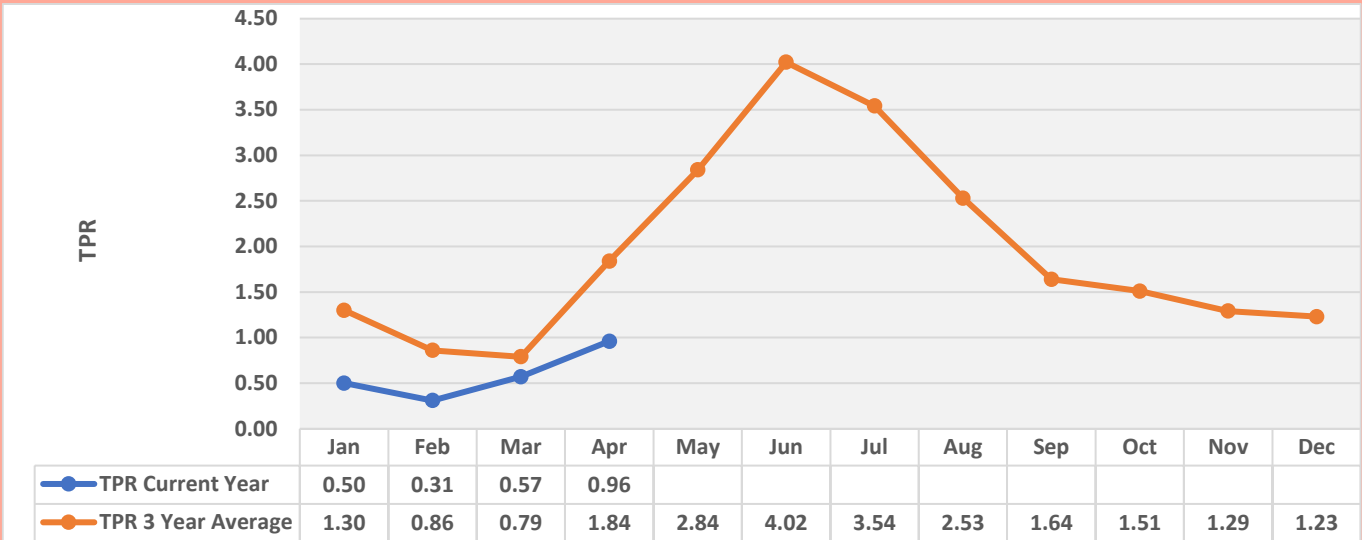
There is an increase of BSE by 7.54% up to April, 2025 as compared to last three years average cumulative but a decrease of BSE by 6.61% up to April, 2025 vis-à-vis up to April, 2024.

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



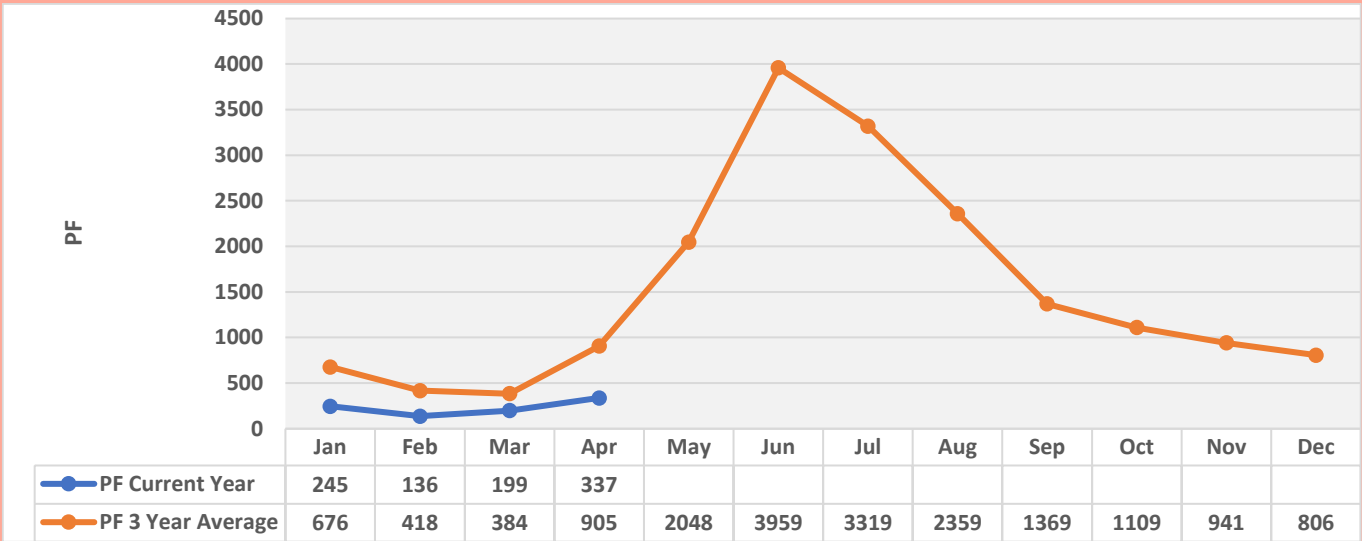
There is a decrease of TPC by 50.24% up to April, 2025 as compared to last three years average cumulative and also a decrease of TPC by 66.07% up to April, 2025 vis-à-vis up to April, 2024.

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



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



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.

List of Districts showing a decrease in Surveillance in Category III States/UTs

SN	States/UTs	Districts/Units showing decrease in Surveillance
1	Mizoram	Siaha, Serchhip, Mamit, Lunglei, Lawngtlai, Kolasib, Champhai, Aizawl
2	Tripura	West Tripura, Sepahijala, North Tripura, Gomati, Dhalai

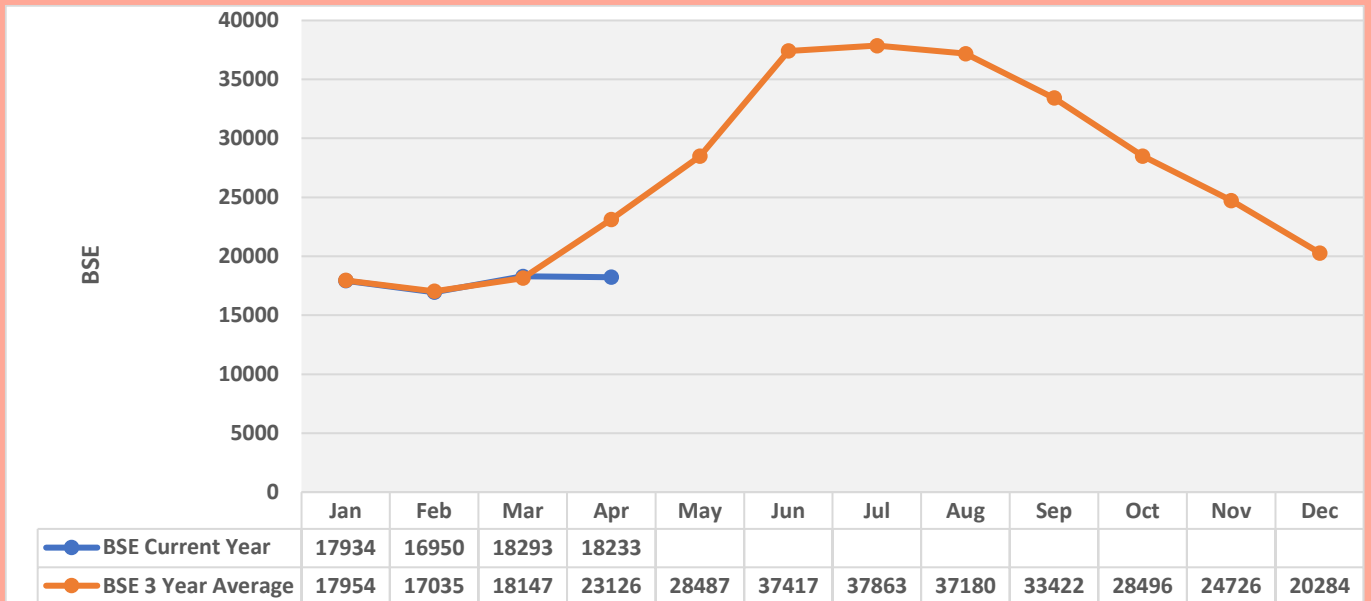
Current month data is compared with same month previous year data.

Action points for all Category III States/UTs:

- States/UTs need to perform data analysis at sub district level to identify hotspots and implementing focal strategies.
- States/UTs need preparedness and response for any Malaria outbreak.
- States/UTs need to intensify monitoring & supervision activities.
- States/UTs need to ensure >80% usage of LLIN by community.
- States/UTs need to intensify vector control measures by identifying potential vector breeding sites, environmental management, biological control and focus based adult vector intervention.

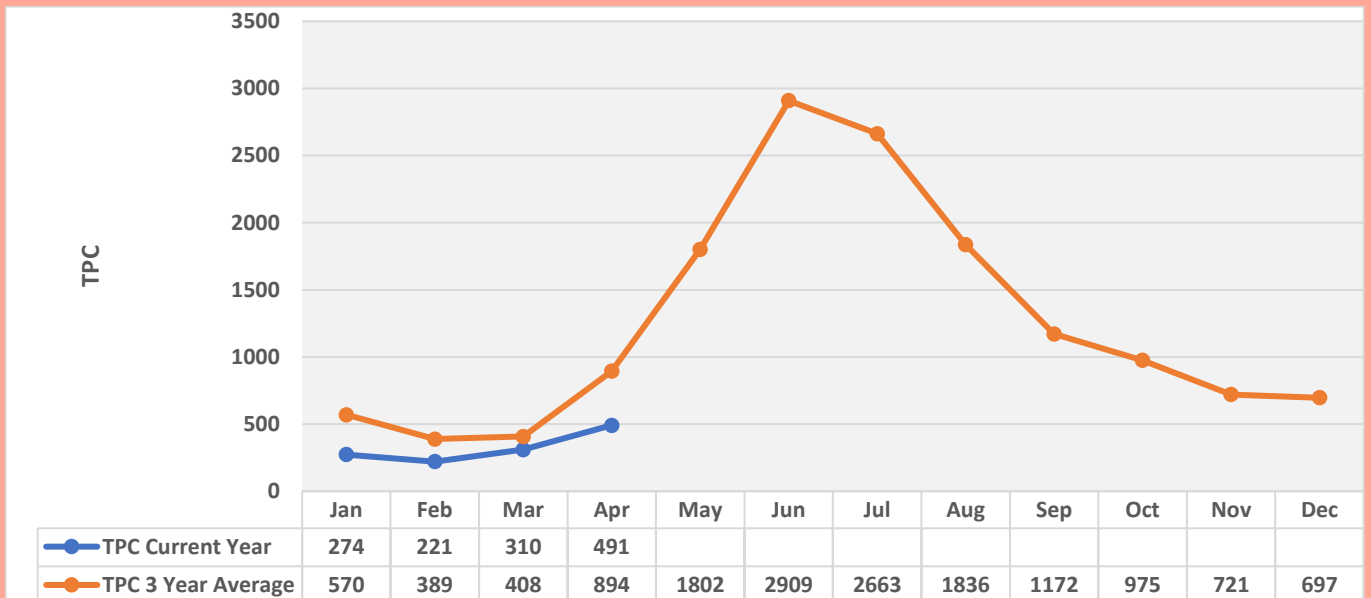
MIZORAM

GRAPH 1: MONTH WISE TREND OF BSE IN MIZORAM



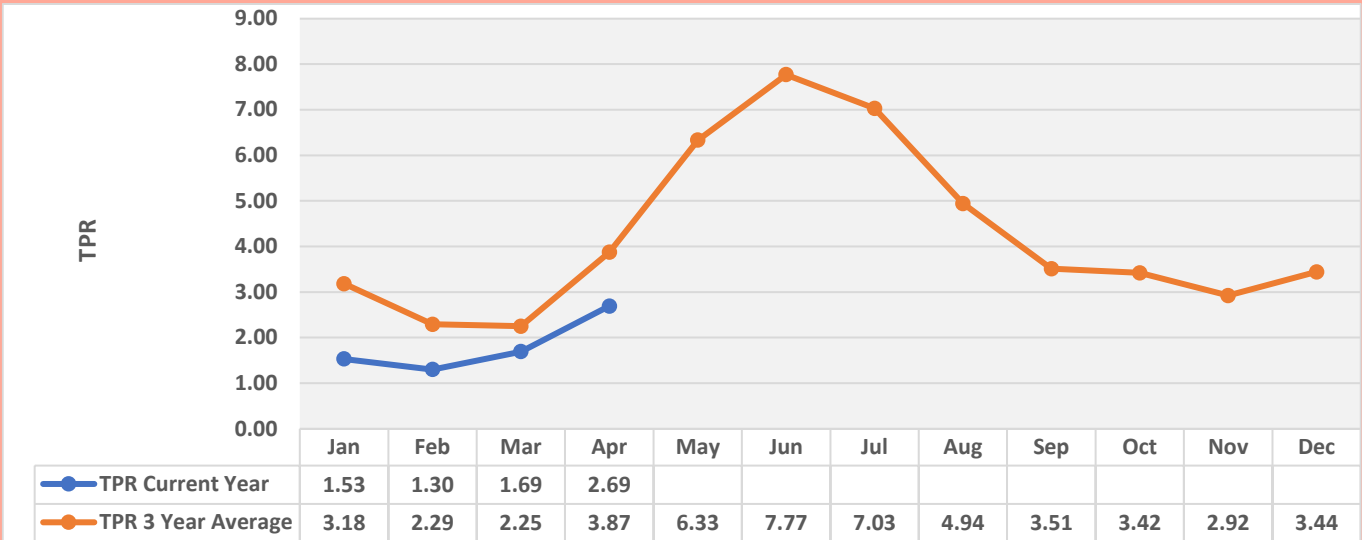
There is a decrease of BSE by 6.36% up to April, 2025 as compared to last three years average cumulative and also a decrease of BSE by 13.73% up to April, 2025 vis-à-vis up to April, 2024.

GRAPH 2: MONTH WISE TREND OF TPC IN MIZORAM



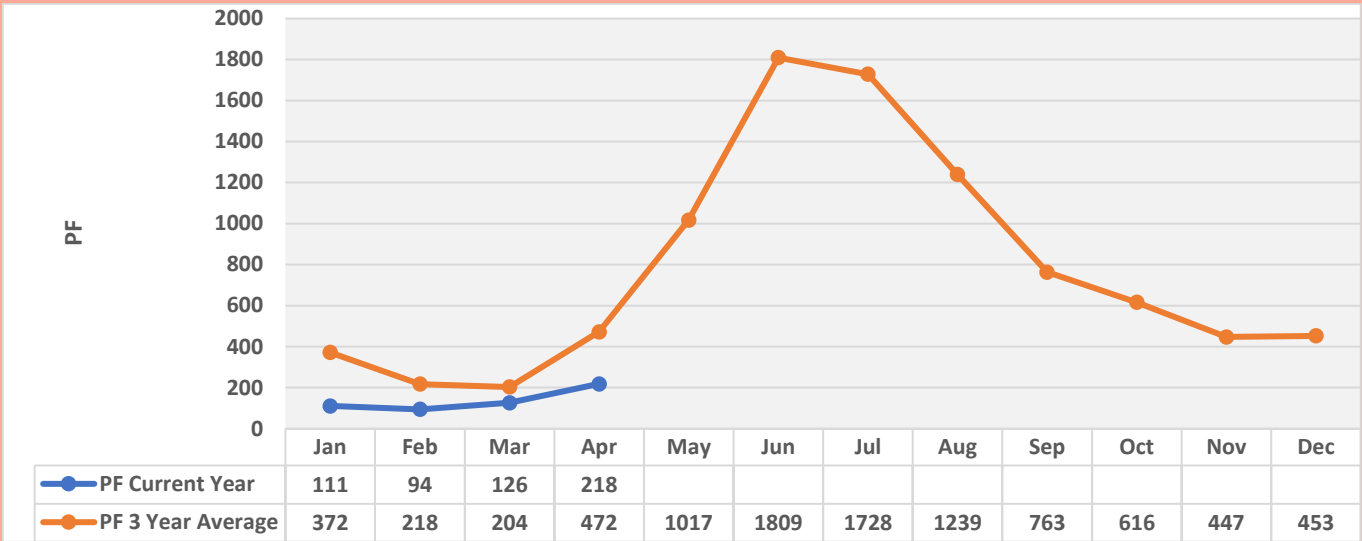
There is a decrease of TPC by 42.69% up to April, 2025 as compared to last three years average cumulative and also a decrease of TPC by 70.02% up to April, 2025 vis-à-vis up to April, 2024.

GRAPH 3: MONTH WISE TREND OF TPR IN MIZORAM



The TPR was 1.81 up to April, 2025 as compared to 2.82 last three years average and 5.22 up to April, 2024

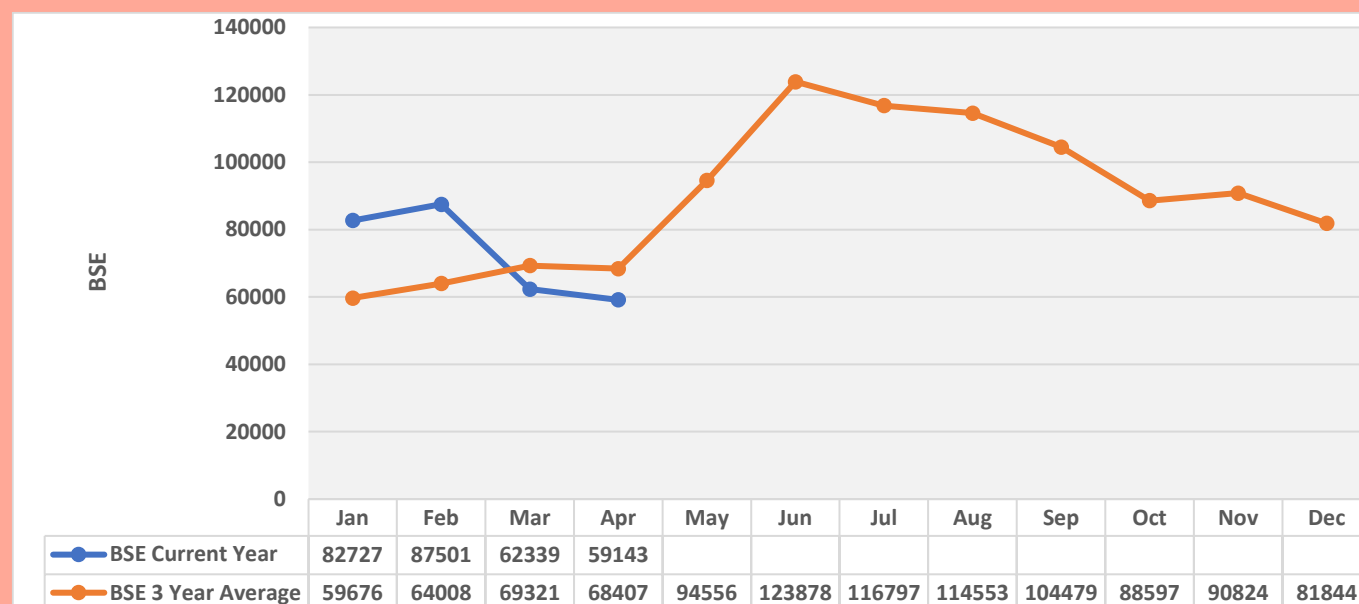
GRAPH 4: MONTH WISE TREND OF PF IN MIZORAM



There is a decrease of PF by 56.6% up to April, 2025 as compared to last three years average cumulative and also a decrease of PF by 75.58% up to April, 2025 vis-à- vis up to April, 2024.

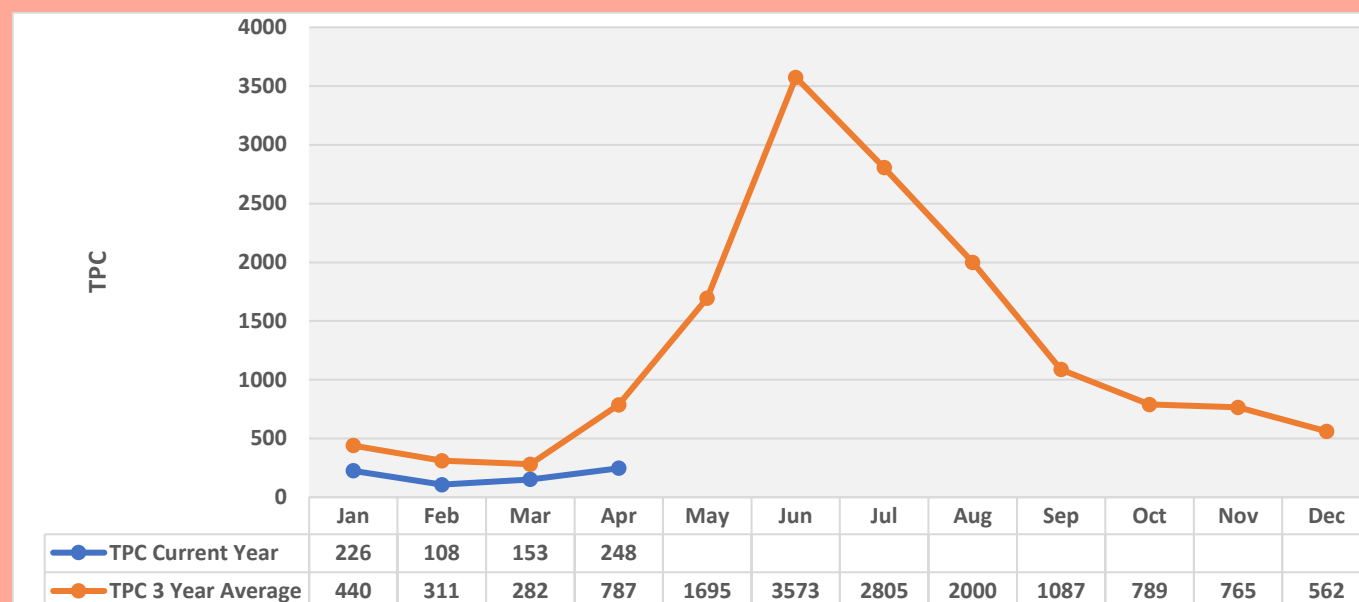
TRIPURA

GRAPH 1: MONTH WISE TREND OF BSE IN TRIPURA



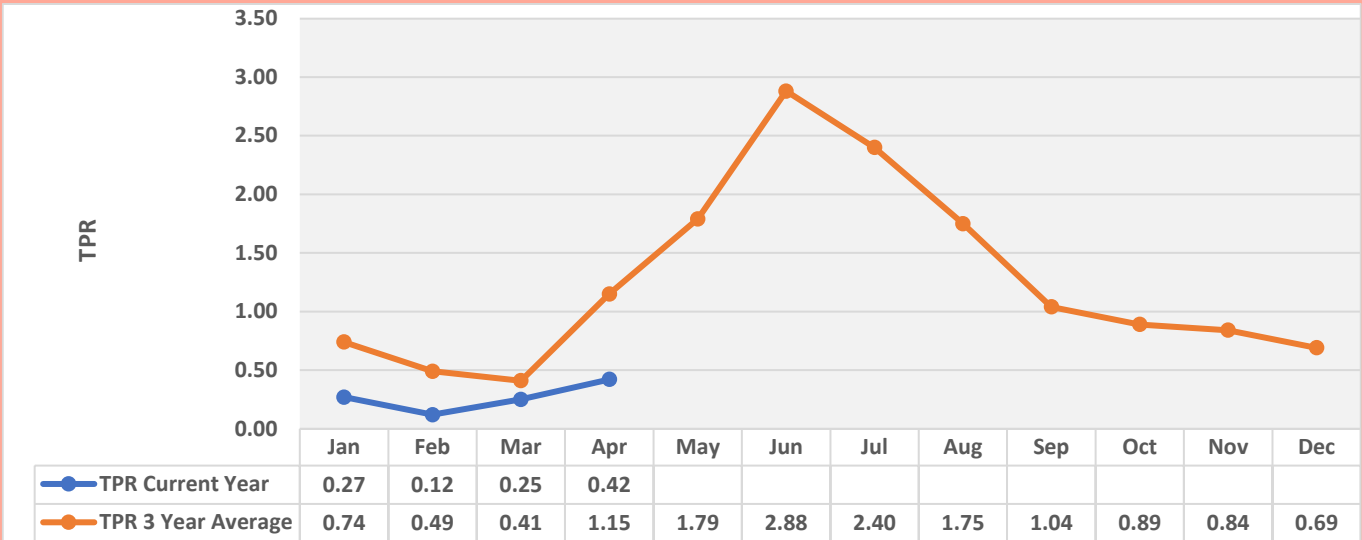
There is an increase of BSE by 11.59% up to April, 2025 as compared to last three years average cumulative but a decrease of BSE by 4.68% up to April, 2025 vis-à-vis up to April, 2024.

GRAPH 2: MONTH WISE TREND OF TPC IN TRIPURA



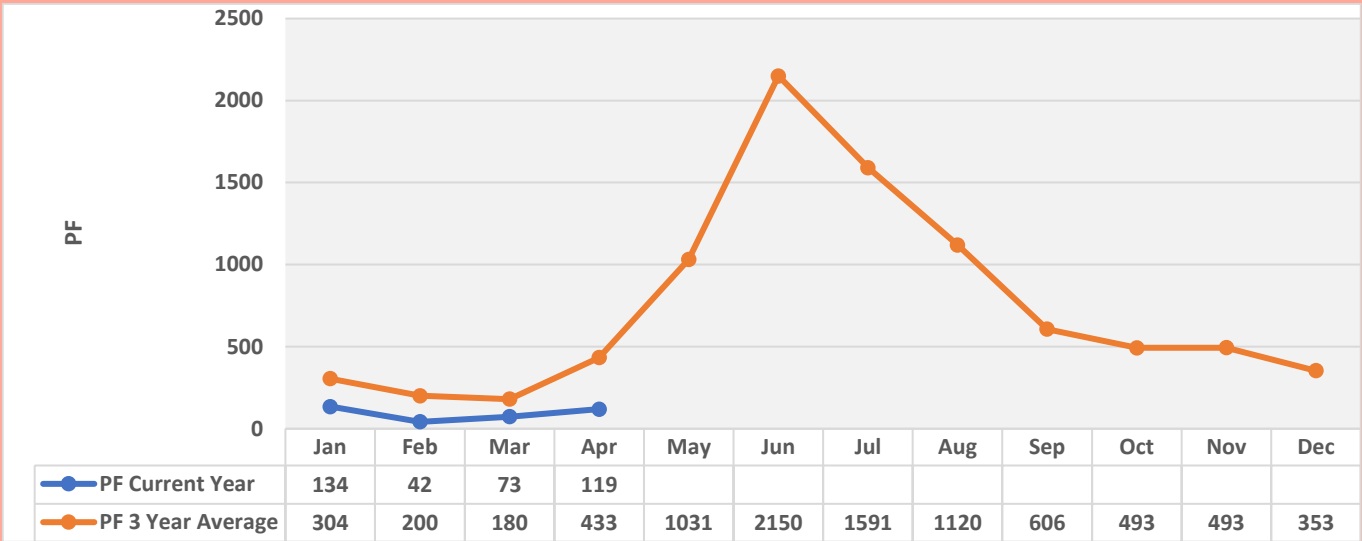
There is a decrease of TPC by 59.62% up to April, 2025 as compared to last three years average cumulative and also a decrease of TPC by 55.78% up to April, 2025 vis-à-vis up to April, 2024.

GRAPH 3: MONTH WISE TREND OF TPR IN TRIPURA



The TPR was 0.25 up to April, 2025 as compared to 0.72 last three years average and 0.54 up to April, 2024

GRAPH 4: MONTH WISE TREND OF PF IN TRIPURA



There is a decrease of PF by 67.08% up to April, 2025 as compared to last three years average cumulative and also a decrease of PF by 52.88% up to April, 2025 vis-à- vis up to April, 2024.

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 MPH/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%