

4.1 Malaria

Summary

Number of cases malaria, 2014: 71
Crude incidence rate malaria 2014: 1.55/100,000

In 2014, 80 malaria cases were notified in Ireland, an increase of 13% compared to 71 cases in 2013 (Figure 1). The incidence rate now stands at 1.74 per 100,000 population. Among European Union (EU) member states reporting malaria data to the European Centre for Disease Control, Ireland had the third highest incidence rate for imported malaria in 2012 (the latest year for which comparative data are available); only the United Kingdom and Belgium had higher reported incidence rates.

In common with the rest of the EU, males predominated (male: female ratio 2.2:1), with the highest numbers of cases among males aged between 35 and 54. The number of paediatric cases reported was 10, a slight decrease compared to 12 cases reported during 2013 (Figure 1).

Four of the paediatric cases reported "visiting family in country of origin" as their reason for travel, two were new entrants to Ireland and one was an Irish citizen

living abroad. There was no information on reason for travel for the remaining three paediatric cases. Of the four paediatric cases that travelled to visit family, three visited sub-Saharan Africa and one visited South Asia. Duration of the visit was reported for two of these cases and ranged between 20 days to 4 months duration. Two of the paediatric cases reported taking malaria prophylaxis but were not fully compliant, four paediatric cases reported not taking any prophylaxis for their travel, while the remaining four paediatric cases did not have information on prophylaxis reported.

Among all age groups, the category of traveller most affected in Ireland continued to be African immigrants and their families who were exposed while returning to 'visit family in country of origin'. This almost certainly reflects the greater frequency with which this group travels to malarious areas, but also reflects Ireland's importance as a destination for those emigrating from English speaking West Africa. Where the reason for travel was reported in 2014, 62% cited 'visiting family in country of origin', 91.7% of whom travelled to Africa.

The second most commonly cited reasons for travel this year were "Business/professional travel" (n=8, 13.8%) and "New entrant to Ireland" (n=6, 10.3%).

Nigeria remained the country most frequently visited, accounting for 49% of total cases and 60% of cases

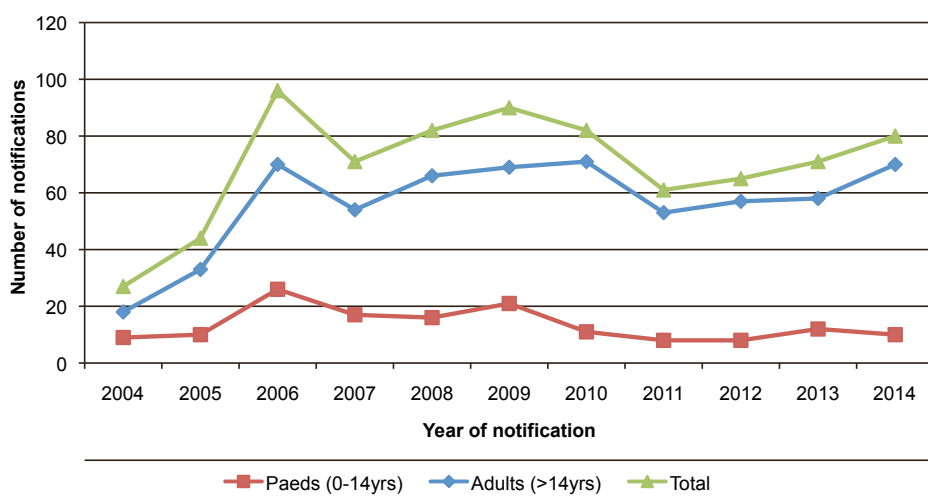


Figure 1: Annual number of malaria notifications by age, Ireland 2004-2014

where country of infection was reported. The remaining cases were exposed in other countries within Africa and South Asia. The majority of cases who reported travel to Nigeria were "visiting family in country of origin" (25/34) with known reason for travel.

Plasmodium falciparum accounted for 74% of infections in 2014, reflecting the dominance of exposure in Africa as the source of the majority of notifications. Six cases of *P. vivax*, and one case each of *P. ovale* and *P. malariae* were also reported which remains stable in comparison to previous years. The remaining 12 cases did not have *Plasmodium* species specified.

HPSC resources for health professional include a poster which can be downloaded from the HPSC website for display in GP surgeries, maternity hospitals, paediatric hospitals and A&E departments, advising immigrant families travelling to Africa to consult their doctor about malaria before travelling. A leaflet for intending travellers, available in English and French, highlights the value of antimalarial prophylaxis and protection against mosquito bites. The poster and leaflet are available [here](#).

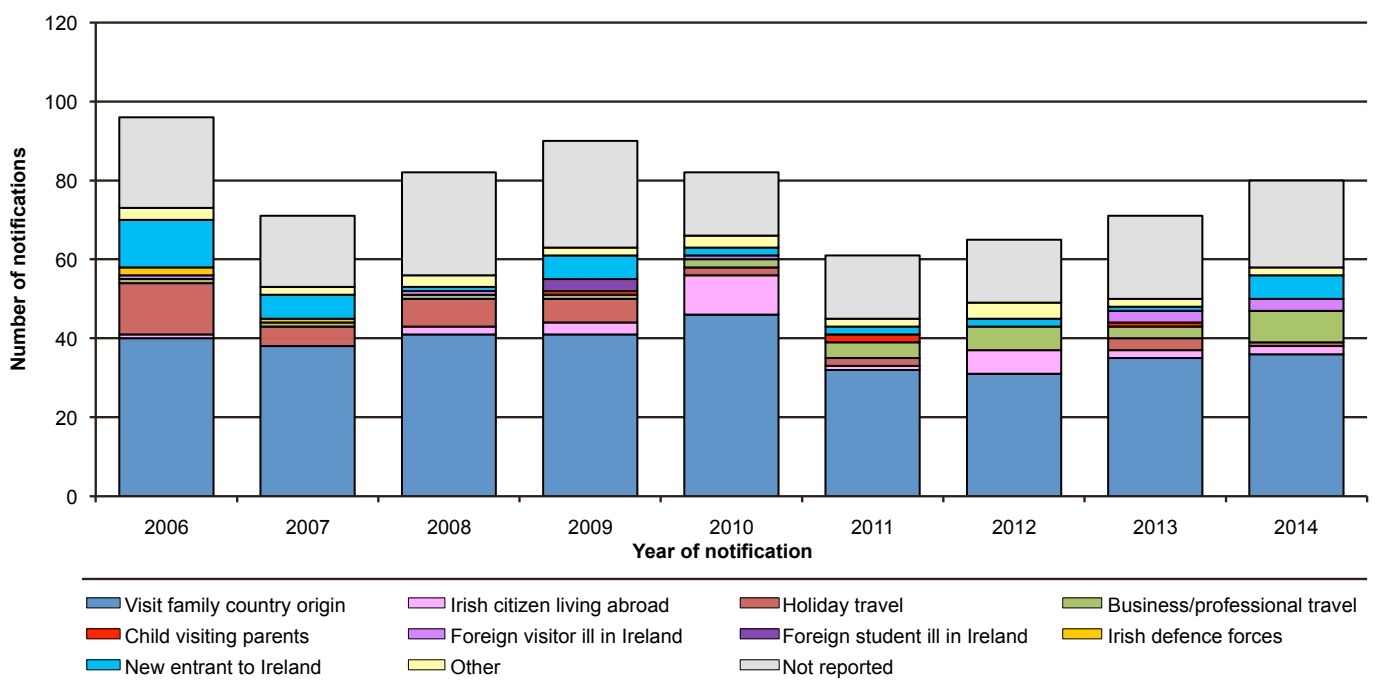


Figure 2: Annual number of notifications malaria by reason for travel, Ireland 2006-2014