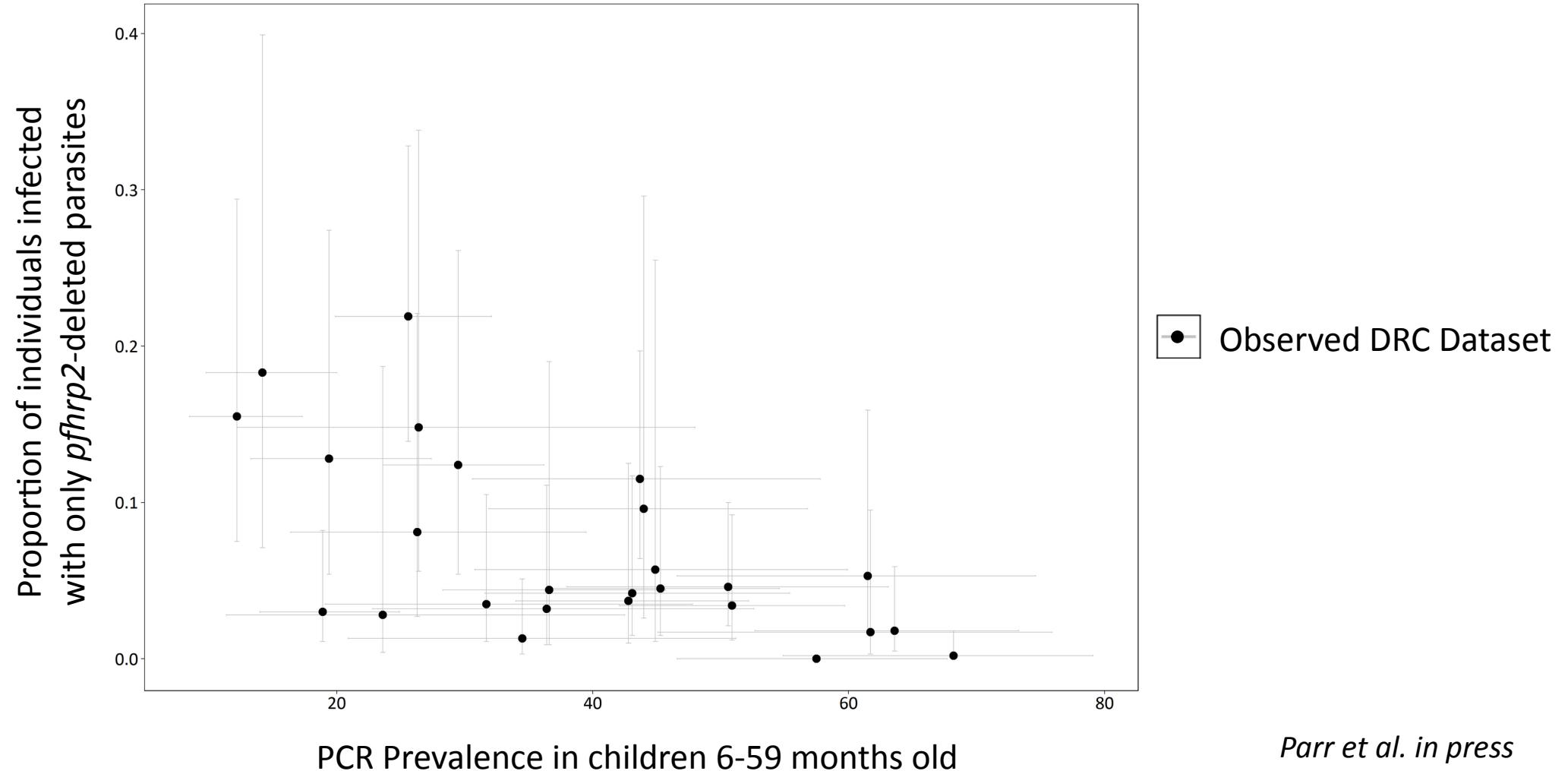


Oliver Watson

# Modelling the spread of *pfhrp2* deletion concern in Africa

MRC Centre for Outbreak Analysis & Modelling, Department of Infectious Disease Epidemiology, Imperial College London

## Rationale

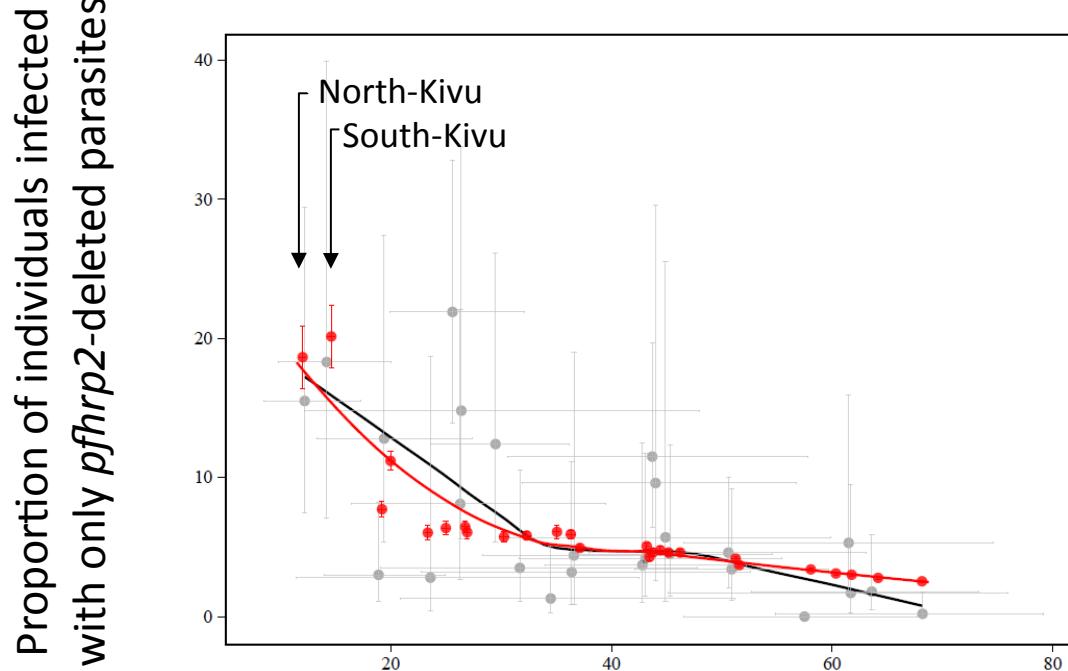


Parr et al. in press

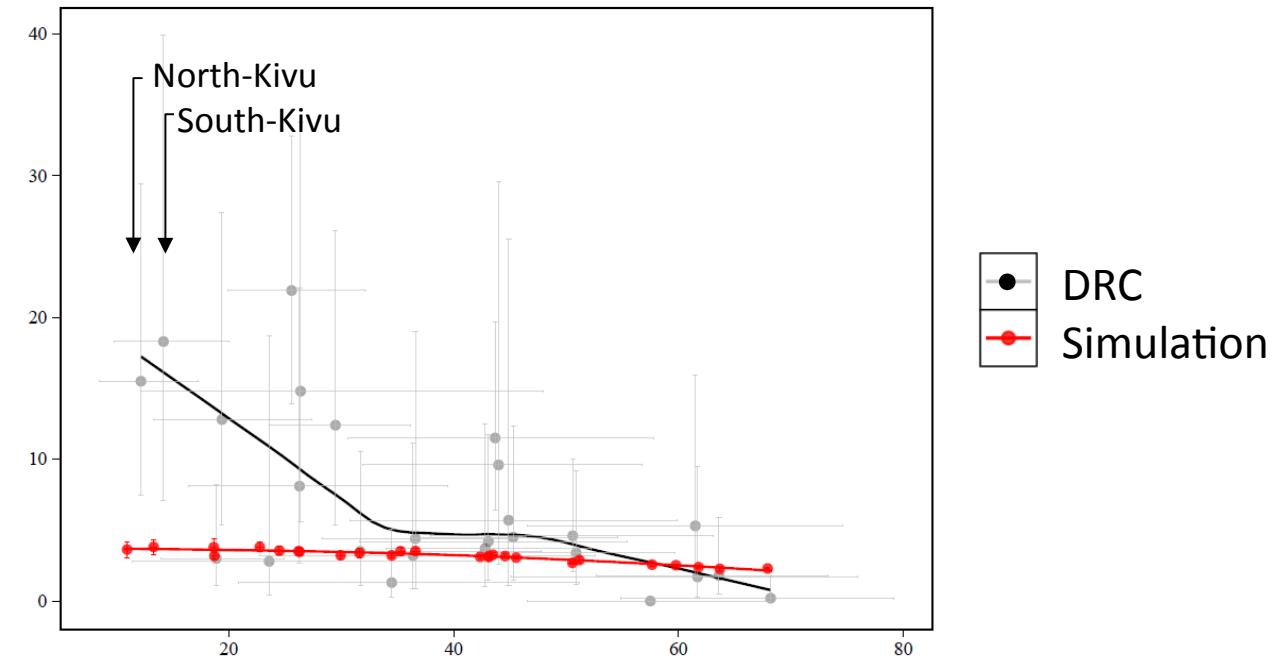
Significantly higher proportion of deleted samples in low transmission areas

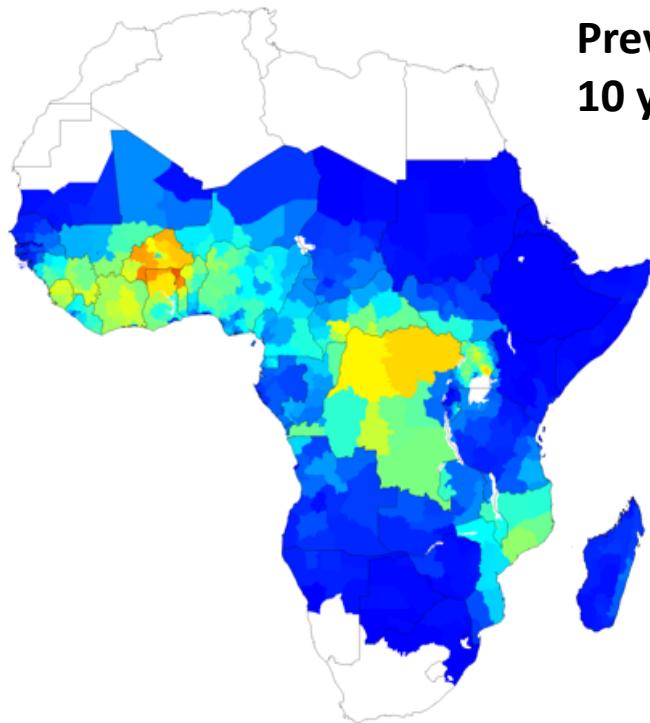
- Can only be explained by selection through RDT-guided treatment decisions

With selection



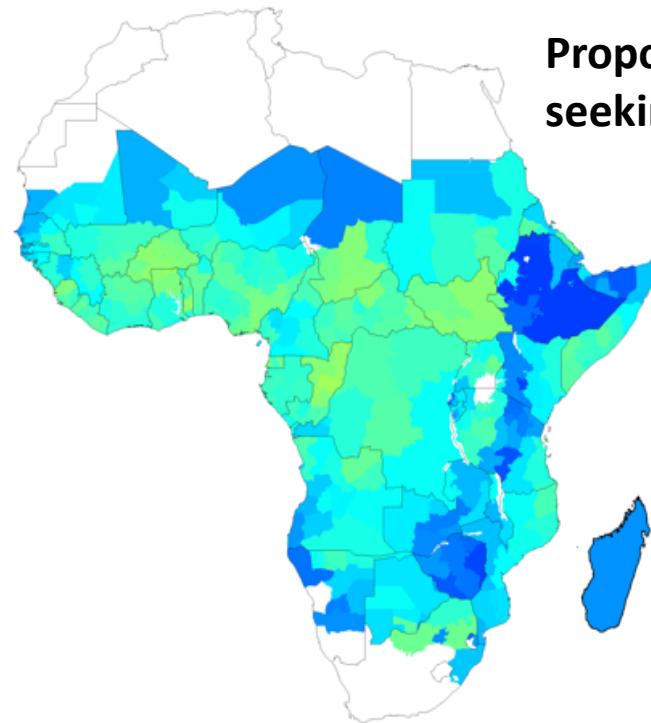
Without selection





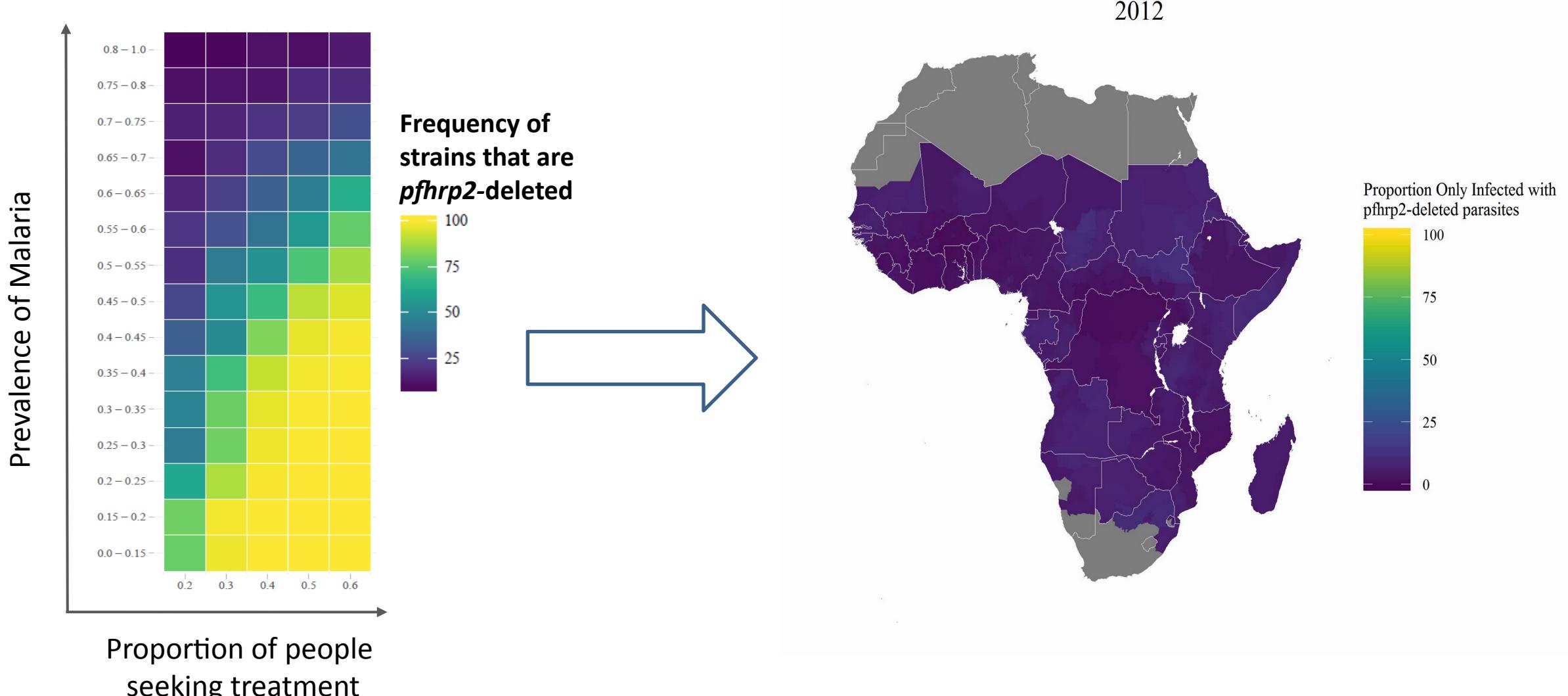
Prevalence in children 6-10 years old

100%  
75%  
50%  
25%  
0%



Proportion of people seeking treatment

100%  
75%  
50%  
25%  
0%



\* Model assumes no change in prevalence and treatment coverage – spread therefore conservative

Fitted model identifies areas of concern for potential selection-driven spread in Africa

- Highest concern: Low prevalence plus high RDT-guided treatment

Proportion of infected population  
possessing only *pfharp2*-deleted mutants

HRP2 Concern

>20% by 2016



High

>20% by 2022

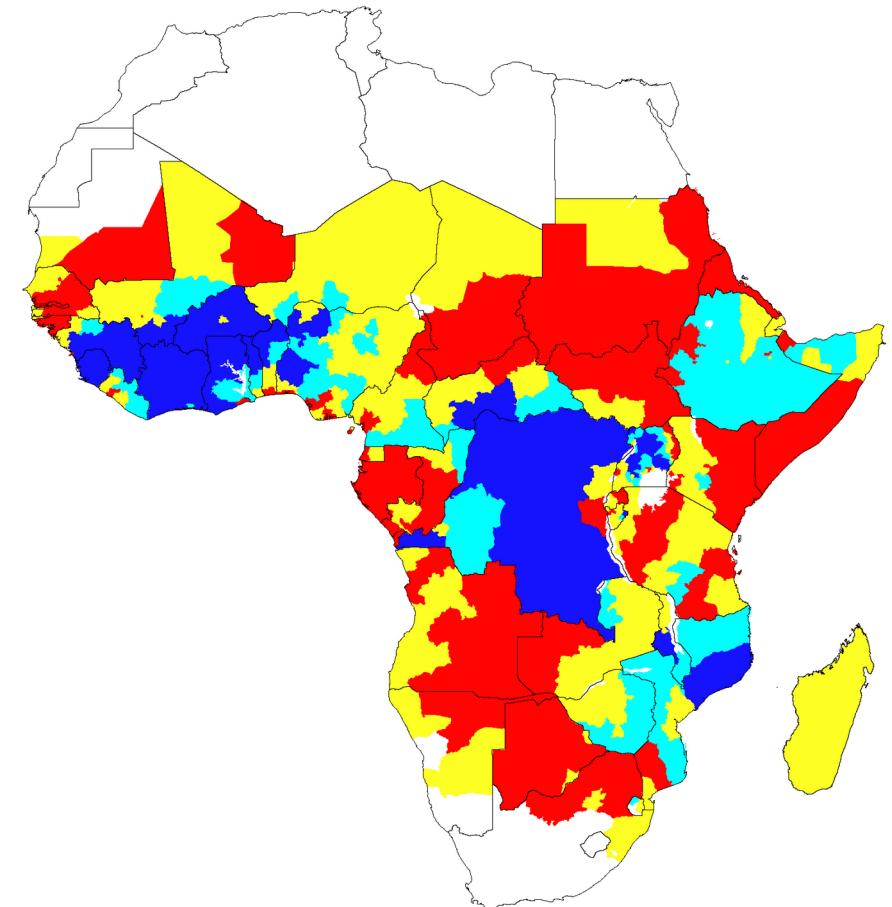
Moderate

>20% by 2030

Slight

<20% by 2030

Marginal



# Summary

1. An increased emergence of *pfhrp2*-deleted mutants can be explained by the introduction of testing by PfHRP2-based RDTs in the last 10 years.
2. The use of these RDTs will result in the greatest selection pressure in regions that have low malaria transmission and a high frequency of people seeking treatment.
3. Need for further genetic investigations in the regions identified as having a high HRP2 concern.

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**Thank you for listening**

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