

# Chinese Notifiable Infectious Diseases Surveillance Project

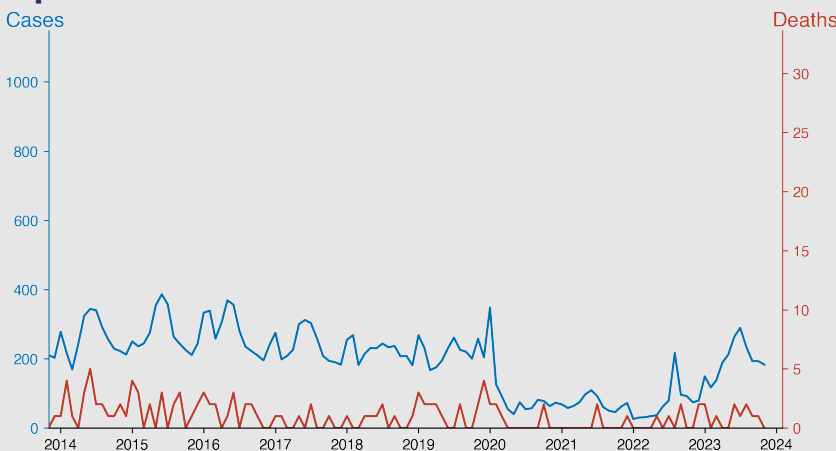
## Malaria

November 2023

### Introduction

Malaria is a life-threatening disease caused by parasites that are transmitted to people through the bites of infected female *Anopheles* mosquitoes. It is widespread in many tropical and subtropical regions, including parts of the Americas, Asia, and Africa. There are multiple types of malaria, with *Plasmodium falciparum* being the most deadly. Symptoms often include fever, fatigue, vomiting, and headaches. Severe cases can cause yellow skin, seizures, coma, or death. Prevention methods include mosquito nets and malaria vaccines. Despite global efforts to control it, malaria continues to be a significant public health challenge.

### Temporal Trend



### Highlights

- Significant decline in malaria cases from 2010, with a peak of 1,094 cases in August, to 183 cases in November 2023, indicating effective control measures.
- Fluctuations in cases have been noted throughout the years, with occasional spikes showing potential seasonal or episodic increases.
- The mortality rate associated with malaria has dramatically decreased over the years, with no deaths reported in November 2023, pointing towards improved treatment methods.
- Despite a slight increase in cases in early 2023, the situation appears to be stable with low endemic transmission and maintained control efforts.

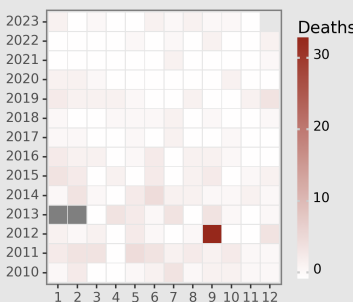
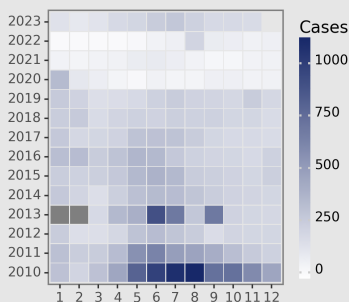
### Cases Analysis

From 2010 to 2023, malaria cases in mainland China showed a fluctuating trend with a distinct seasonal peak during the summer months. A significant drop in cases was observed starting from 2020, possibly due to stringent pandemic measures affecting vector transmission or healthcare-seeking behavior. The highest number of cases reported in July 2010 (1054 cases) followed a declining pattern, reaching a nadir in February 2022 (30 cases). The modest increase in cases during 2023 summer suggests either a waning of control measures or increased transmission.

### Deaths Analysis

Malaria-associated deaths were minimal, reflecting effective case management and possibly access to healthcare. The mortality rate fluctuated alongside case trends with notable spikes in September 2012 (32 deaths) and December 2014 (4 deaths) despite lower case counts. The significant mortalities in 2012 are an outlier and warrant investigation for potential changes in parasite virulence, reporting accuracy, or healthcare delivery. Since 2014, deaths have been sporadic, staying at or below two per month, suggesting sustained control over fatal complications.

### Distribution



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