



## Letter to the Editor

## Global malaria eradication: Insights from Cabo Verde and implications for sub-Saharan Africa

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## Dear Editor,

Cabo Verde's recent accomplishment of WHO certification as malaria-free marks a significant milestone, particularly in the context of malaria-burdened Sub-Saharan Africa [1]. Notably, with zero indigenous cases reported for four consecutive years and no malaria deaths since 2018, the nation's success is remarkable, given that the WHO African Region accounted for 94% of global cases [2].

The journey to malaria eradication in Cabo Verde commenced in 1988 with the establishment of the National Malaria Control Program [3]. A distinctive feature of their success was the integration of malaria elimination into the National Health Policy, offering free diagnosis and treatment. Political will, cross-sectorial collaborations, and a robust surveillance system played pivotal roles in this achievement.

Cabo Verde's commitment extended to healthcare infrastructure, ensuring free access to healthcare for all residents under the Integrated Disease Surveillance, Intervention, and Response System (SVIRE) framework. Notably, the country's eco-epidemiological characteristics, like many African nations, make its strategies relevant for combating increased malaria cases linked to climate variations [4]. As a tourist destination, Cabo Verde effectively managed the external importation of malaria cases, providing an exemplary model for other African nations relying on tourism.

Key strategies included effective vector control using *Bacillus thuringiensis* var *israelensis* (Bti), aligning diagnostic methods and treatment options with WHO recommendations, and emphasizing health education and community participation [2]. This success underscores the importance of comprehensive programs, effective vector control, and continuous innovation. Sub-Saharan Africa (SSA) can glean insights from Cabo Verde's experience, particularly in implementing community interventions, ongoing research, and targeted efforts to treat asymptomatic carriers.

Given the devastating impact of malaria in SSA, there is a pressing need for a concerted effort to eradicate this scourge. Lessons from Cabo Verde's triumph offer valuable insights for fine-tuning malaria elimination policies across the region, emphasizing evidence-based, context-specific, and collaborative strategies. Understanding the pivotal role of vectors is vital in global malaria eradication efforts [4]. Given the

significant contribution of vectors to disease transmission, strategies targeting carriers are essential for interrupting the spread of malaria.

Cross-border collaboration emerges as a crucial component, where countries can exchange information to tailor strategies to their unique contexts, including vulnerable groups. Investment in health systems, facilities, staff, and education becomes vital for preparedness and resilience. To achieve lasting success, SSA needs a committed research team capable of swift responses, case investigations, diagnostic tests, and treatment. Political support and funding are indispensable, focusing on areas with a high malaria burden and risk to achieve universal health coverage (UHC) for malaria.

A comprehensive, multisectoral approach is vital, involving sectors like health, education, agriculture, tourism, and the environment. Cabo Verde's historic achievement certifies it as another sub-Saharan African country to eliminate malaria, offering valuable lessons for others. Tailored interventions, political backing, community involvement, and innovative tools are integral to this success.

Policy implications reinforce the need for evidence-based, context-specific strategies, cooperation among neighbouring countries, focused interventions, healthcare infrastructure investment, ongoing research, political backing, community involvement, and innovative tools. Cabo Verde's success stands as proof that malaria eradication is possible in SSA. Adopting tailored strategies, countries in the region can accelerate progress toward a malaria-free future, necessitating regional and global cooperation to expedite elimination efforts.

**Ethics approval and consent to participate**

Not applicable.

**Consent for publication**

Not applicable.

**Availability of data and materials**

Data sharing is not applicable to this article as no datasets were generated or analysed during the current study.

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## Authors' contributions

NA conceptualised the study; All authors were involved in the literature review; GO & EK extracted the data from the reviewed studies; All authors wrote the final and first drafts. All authors read and approved the final manuscript.

## CRediT authorship contribution statement

**Emmanuel Kokori:** Writing – review & editing, Writing – original draft, Conceptualization. **Gbolahan Olatunji:** Writing – review & editing, Writing – original draft. **Kenechukwu Umenzeakor:** Writing – review & editing, Writing – original draft. **Israel Charles Abraham:** Writing – review & editing, Writing – original draft. **Ibukunoluwa Ogunbowale:** Writing – review & editing, Writing – original draft. **Emmanuel Obokhai Uduigwome:** Writing – review & editing, Writing – original draft. **Bibek Giri:** Writing – review & editing, Writing – original draft. **Nicholas Aderinto:** Writing – review & editing, Writing – original draft.

## Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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None.

## List of Abbreviations

|       |  |
|-------|--|
| WHO   | World Health Organization  |
| SSA   | Sub-Saharan Africa   |
| SVIRE | Integrated Disease Surveillance, Intervention, and Response System |
| Bti   | Bacillus thuringiensis var israelensis                             |

UHC Universal Health Coverage

## References

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Emmanuel Kokori, Gbolahan Olatunji

*Department of Medicine and Surgery, University of Ilorin, Ilorin, Nigeria*

Kenechukwu Umenzeakor

*Department of Medicine and Surgery, Nnamdi Azikiwe University Teaching Hospital, Nnewi, Nigeria*

Israel Charles Abraham

*Department of Medicine and Surgery, University of Ilorin, Ilorin, Nigeria*

Ibukunoluwa Ogunbowale

*Department of Medicine, Babcock University Teaching Hospital, Ogun, Nigeria*

Emmanuel Obokhai Uduigwome

*Department of Medicine, Lagos University Teaching Hospital, Lagos, Nigeria*

Bibek Giri

*Hoseo University, Asan, South Korea*

Nicholas Aderinto\*

*Department of Medicine, Ladoko Akintola University of Technology, Ogbomoso, Nigeria*

\* Corresponding author. Department of Medicine and Surgery, Ladoko Akintola University of Technology, Ogbomoso, Nigeria.  
E-mail address: [nicholasoluwayesi6@gmail.com](mailto:nicholasoluwayesi6@gmail.com) (N. Aderinto).