

Pf7: an open dataset of *Plasmodium falciparum* genome variation in 20,000 worldwide samples.

MalariaGEN

Contributing partner studies

The Pf7 open dataset of *Plasmodium falciparum* is coordinated by the MalariaGEN Resource Centre and is comprised of partner studies – independent studies undertaken in malaria endemic areas from three principle projects - Pf3k Project, the *Plasmodium falciparum* Community Project and the GenRe Mekong Project. Each partner study is unique with their own research objectives. They have agreed to contribute samples to this dataset on the understanding that this will not interfere with their research objectives. Prior to submitting samples, all partner studies complete a Partner Study Information Form that captures information about their study and confirms that all relevant ethical and regulatory requirements have been met and that all stakeholders have agreed to contribute samples and data to the dataset. Each partner study is represented on the MalariaGEN website with a brief description of the study, and details of the study contact person, key associates and their affiliations. Details of the partner studies as well as an overview of the data they have produced are available in MalariaGEN's data exploration tool (<https://www.malariagen.net/apps/pf7/>) for the Pf7 release. Below is a summary of the information presented at the time of publication.

1001-PF-ML-DJIMDE

Developing the Community Project with partners in Mali

Abdoulaye Djimde and colleagues worked with the MalariaGEN team to collect clinical parasite samples from three sites in Mali: Bamako, the capital, and Kollo and Faladje, rural villages approximately 60km and 80km away. These samples helped form the cornerstone of MalariaGEN's initial efforts to characterise global *Plasmodium* genome variation, and contributed to the development of field and lab-based sample handling methods, sequencing approaches, and data analysis pipelines.

Key people:

- **Abdoulaye Djimde** (contact: adjimde@icermali.org)
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

1004-PF-BF-OUEDRAOGO

Developing the Community Project with partners in Burkina Faso

In Burkina Faso, Jean-Bosco Ouedraogo and colleagues worked with the MalariaGEN team to collect samples from three urban clinics in Bobo-Dioulasso – Colsama, Ouezzin-ville and Sakaby – each up to 8km from the laboratory at the Institut de Recherche en Sciences de la Santé. These samples helped form the cornerstone of MalariaGEN's initial efforts to characterise global *Plasmodium* genome variation, and contributed to the development of field and lab-based sample handling methods, sequencing approaches, and data analysis pipelines. Jean-Bosco and team are keen to investigate signatures of population structure and other unique features of genome variation between the three locations where samples were collected.

Key people:

- **Jean-Bosco Ouedraogo** (contact: jbouedraogo.irssbobo@fasonet.bf)
Institut de Recherche en Sciences de la Santé, Burkina Faso

1006-PF-GM-CONWAY

Genome-wide analysis of genetic variation in The Gambia

Alfred Amambua-Ngwa, David Conway, and colleagues surveyed clinical *Plasmodium falciparum* isolates from The Gambia to assess several measures of genetic variation including allele frequency spectra and signatures of balancing selection, across geographical regions and developmental stages. Using Illumina sequencing data from these parasites, the team published the first population-based study of signatures of balancing selection throughout a pathogen genome — a landmark in understanding pathogen polymorphism. They continue to study the functional and immunological targets identified in this study, and to extend the geographical range of their population genetic studies. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of Plasmodium parasites across Africa.

Key people:

- **Alfred Amambua-Ngwa** (contact: angwa@mrc.gm)
Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia
Wellcome Sanger Institute, UK
- **David J Conway**
London School of Hygiene and Tropical Medicine, UK

1007-PF-TZ-DUFFY

Mother Offspring Malaria Study (MOMS) in Tanzania

Led by Patrick Duffy, the Mother Offspring Malaria Study (MOMS) aims to understand the relationship between parasite phenotype and clinical outcomes, and to identify parasite ligands and soluble mediators involved in malaria infections during early life. Longitudinal and cross-sectional cohorts were recruited at Muheza Designated District Hospital and Morogoro Regional Hospital. Pregnant women, children and infants were recruited, and children were followed at regular intervals to capture parasite samples and clinical phenotypes from birth up to the age of 5 years. MOMS clinical activities have been completed, but sample and data analyses continue. Samples sequenced through the MalariaGEN *P. falciparum* Community Project are being analysed to understand the local diversity and population structure of malaria parasites from Tanzanian mothers and children. Subsets of sequenced samples have also been assayed by RNA-seq and microarray platforms, and these data provide an additional dimension of information for ongoing expression studies in the Duffy group.

Key people:

- **Patrick Duffy** (contact: duffype@niaid.nih.gov)
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA

1008-PF-SEA-RINGWALD

Containment of artemisinin tolerant malaria parasites in South-East Asia (ARCE)

ARCE is a WHO-lead strategy for the containment of artemisinin resistant parasites in Southeast Asia, aiming to ultimately contribute to the elimination of *falciparum* malaria from the area. Samples collected as part of ARCE-lead studies of artesunate efficacy at sites in Myanmar, Laos and Viet Nam were contributed to the MalariaGEN *P. falciparum* Community Project for whole genome sequencing and subsequent analysis of genetic variation, population structure and signatures of selection. The genetic data is also being used in a replication genome-wide association study to validate and extend the outcomes of the ARC3 GWAS, with the hope of identifying molecular markers of artemisinin resistance.

Key people:

- **Pascal Ringwald** (contact: ringwaldp@who.int)
World Health Organization (WHO), Switzerland
- **Christopher Plowe**
University of Maryland School of Medicine, USA
- **Mayfong Mayxay**
Lao-Oxford-Mahosot Hospital-Wellcome Trust Research Unit (LOMWRU),
Vientiane, Lao PDR
Institute of Research and Education Development (IRED), University of Health
Sciences, Ministry of Health, Vientiane, Lao PDR
- **Tran Tinh Hien**
Oxford University Clinical Research Unit (OUCRU), Vietnam
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Myat Phone Kyaw**
The Myanmar Oxford Clinical Research Unit, University of Oxford, Myanmar
University of Public Health, Yangon, Myanmar
- **Shannon Takala-Harrison**

Center for Vaccine Development and Global Health, University of Maryland,
School of Medicine, Baltimore, MD, USA

1010-PF-TH-ANDERSON

Genetic variation underlying drug resistance at the Thai-Burmese border

In one of the first partnerships of the MalariaGEN *P. falciparum* Community Project, Timothy Anderson and colleagues used whole genome sequencing and genotyping to identify genetic variants that underpin drug resistance in *Plasmodium falciparum*. Working with Francois Nosten at his field site in Mae Sot on the Thai-Burmese border, clinical parasite samples were collected, cloned and lab-adapted to use for both genetic and phenotypic analyses, namely evaluating drug resistance *in vitro*. The central aim of the project was to combine these analyses to investigate genotype-phenotype association using high-resolution SNP data generated by Illumina sequencing, as well as traditional genotyping platforms.

Key people:

- **Tim Anderson** (contact: tanderso@txbiomed.org)
Texas Biomedical Research Institute, San Antonio, USA
- **Francois Nosten**
Centre for Tropical Medicine and Global Health, Nuffield Department of Medicine
Research building, University of Oxford Old Road campus, Oxford, UK
Shoklo Malaria Research Unit, Mahidol-Oxford Tropical Medicine Research Unit,
Faculty of Tropical Medicine, Mahidol University, Mae Sot, Thailand

1011-PF-KH-SU

Genome-wide scans of cultured adapted parasites in Cambodia

Xin-zhuan Su and colleagues provided samples from their field site in Pursat province, Cambodia at an early stage in the MalariaGEN *P. falciparum* Community Project. These samples were contributed to support the development of our sequencing and analysis pipelines, and to provide geographical representation of parasites from Cambodia for preliminary analysis of global population structure. For the analyses, parasites were culture adapted and analysed for genome-wide scans for positive selection, recombination hot spots and resistance to antimalarial drugs.

Key people:

- **Thomas E Wellems** (contact: twellems@niaid.nih.gov)
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA
- **Xin-zhuan Su**
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA

1012-PF-KH-WHITE

Developing the Community Project with partners in Cambodia

Several investigators contributed to the early stages of the MalariaGEN *P. falciparum* Community Project by providing samples that were not themselves the basis of a partner study, but were used in establishing our laboratory and analytical pipelines. For example, some samples were used to compare early Illumina sequencing outputs with capillary sequencing data, or for preliminary analysis of population structure.

Key people:

- **White Nicholas** (contact: nickw@tropmedres.ac)
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK

1013-PF-PEGB-BRANCH

Developing the Community Project with partners in Peru

Samples from Zungarococha, Peru were collected in 2005-06 as part of the Malaria Immunology and Genetics in the Amazon (MIGIA) project. Malaria caused by *Plasmodium falciparum* emerged near the Amazonian city of Iquitos in recent history in the 1990s. Since 2003, MIGIA has been following a cohort of approximately 2000 Peruvians longitudinally at least 6 times per year in active-household based visits, as well as seeing patients in clinics and hospitals at each febrile episode. A unique feature well-characterised in this study is the high proportion of asymptomatic infections given the low malaria transmission rate. Low transmission dynamics or host-parasite characteristics may explain the rapid development of immunity compared to observations in high transmission settings. This is a collaboration with Dr. Branch at New York University School of Medicine, Dr. Lastenia Ruiz at the Universidad Nacional de la Amazonia Peruana and Dr. Moises Sihuincha at the Peruvian Ministry of Health.

Key people:

- **Julian C Rayner** (contact: jcr1003@cam.ac.uk)
Cambridge Institute for Medical Research, University of Cambridge, Cambridge,
UK
- **Oralee Branch**
NYU School of Medicine Langone Medical Center, USA
- **Lastenia Ruiz**
Universidad Nacional de la Amazonia Peruana, Peru

1014-PF-SSA-SUTHERLAND

Analysis of *Plasmodium falciparum* samples from UK travellers returning from malaria endemic countries

In collaboration with Colin Sutherland and Tim Robinson, we sequenced samples obtained from travellers returning to the UK from malaria-endemic countries being treated for clinical malaria in the Hospital for Tropical Diseases, London. Malaria isolates were obtained from four patients, two of which had recently travelled to Ghana, one to Kenya and one to Mozambique. We have previously described parasite clearance dynamics in each of these patients while they were being treated (Beshir et al, 2010).

Analysis of the genome sequences obtained from these isolates resulted in the first manuscript published using data generated from the MalariaGEN *P. falciparum* Community Project: Drug-resistant genotypes and multi-clonality in *Plasmodium falciparum* analysed by direct genome sequencing from peripheral blood of malaria patients by Robinson T, Campino SG (co-first authors) *et al.*

Each patient was found to harbour multiple clone infections, and this was verified in each case using standard PCR genotyping of the original blood sample. Evidence was found for known and novel gene deletions and amplifications, and full-length sequence was analysed for eight known loci implicated in drug resistance. We were thus able to demonstrate that Illumina whole genome sequencing of peripheral blood *P. falciparum* taken directly from malaria patients provides high quality data useful for drug resistance studies, genomic structural analyses and population genetics, and also robustly represents clonal multiplicity.

Key people:

- **Colin Sutherland** (contact: colin.sutherland@lshtm.ac.uk)

London School of Hygiene and Tropical Medicine, UK

1015-PF-KE-NZILA

Genome-wide association study of in vitro drug resistance in Kenya

As a part of clinical studies being undertaken by the KEMRI-Wellcome Trust Research Programme, samples were collected in the Kilifi district of Kenya. Alexis Nzila and his colleagues adapted these field isolates to laboratory culture and tested their in vitro sensitivity to antimalarial drugs including lumefantrine, chloroquine, piperaquine and dihydroartemisinin (DHA). The phenotypic data are now being used in genome-wide association studies with parasite genotypes generated by Illumina sequencing to identify regions associated to decreased sensitivity to the antimalarial drugs.

Key people:

- **Irene Omedo** (contact: io7@sanger.ac.uk)
KEMRI Wellcome Trust Research Programme, Kenya
Wellcome Sanger Institute, Hinxton, UK
- **Steffen Borrmann**
Institute for Tropical Medicine, University of Tübingen, Germany
- **Alexis Nzila**
King Fahid University of Petroleum and Minerals (KFUMP), Saudi Arabia
- **Norbert Peshu**
KEMRI Wellcome Trust Research Programme, Kenya
- **Philip Bejon**
KEMRI Wellcome Trust Research Programme, Kenya

1016-PF-TH-NOSTEN

Developing the Community Project with partners in Thailand

Several investigators contributed to the early stages of the MalariaGEN *P. falciparum* Community Project by providing samples that were not themselves basis of a partner study, but were used in establishing our laboratory and analytical pipelines. For example, some samples were used to compare early Illumina sequencing outputs with capillary sequencing data, or for preliminary analysis of population structure.

Key people:

- **Francois Nosten** (contact: francois@tropmedres.ac)
Centre for Tropical Medicine and Global Health, Nuffield Department of Medicine
Research building, University of Oxford Old Road campus, Oxford, UK
Shoklo Malaria Research Unit, Mahidol-Oxford Tropical Medicine Research Unit,
Faculty of Tropical Medicine, Mahidol University, Mae Sot, Thailand

1017-PF-GH-AMENGA-ETEGO

Population genetics of natural populations in Northern Ghana

In collaboration with colleagues at the Navrongo Health Research Center, Lucas Amenga-Etego conducted his thesis research under the guidance of Dominic Kwiatkowski on genetic diversity in natural populations of *Plasmodium falciparum* sampled from seven clinical sites throughout the Kassena-Nankana Districts of the upper East region, Ghana. Based on ecological and epidemiological differences, the study delineates six sub-populations partitioned into three broad categories: 1) lowland savannah, comprising mainly the central district, mid-south villages and eastern cluster of villages; 2) rocky highlands, comprising Chiana and Kayoro; and, 3) forest, mainly the enclave of Naga. Whole genome sequencing and genotyping are being used to study the population genetics of parasites from the different micro-ecological zones of the study area, and to compare these to patterns observed across West Africa.

Key people:

- **Lucas Amenga-Etego** (contact: lucasmenga@gmail.com)
West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana
Navrongo Health Research Centre, Ghana Health Service, Navrongo, Ghana
- **Abraham Oduro**
Navrongo Health Research Centre, Ghana Health Service, Navrongo, Ghana
- **Patrick O Ansah**
Ghana Health Service, Ministry of Health, Ghana

1020-PF-VN-BONI

Measuring in vitro drug sensitivity in Vietnam

Samples were collected in the southern province of Binh Phuoc, Vietnam, as part of a set of clinical studies initiated by Professor Tran Tinh Hien and Christiane Dolecek in 2009 to measure in vivo and in vitro drug sensitivity in this region. In collaboration with Maciej Boni, Professor Hien's research team also worked towards characterising signatures of sulfadoxine/pyrimethamine and chloroquine resistance, and *pfMDR* copy number in these samples using the Illumina sequence and genotype data. Where samples were found to contain *Plasmodium vivax* data, for example due to mixed infection, this data was contributed to the *P. vivax* Genome Variation project.

Key people:

- **Thuy-Nhien Nguyen** (contact: nhientt@oucru.org)
Oxford University Clinical Research Unit (OUCRU), Vietnam
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Tran Tinh Hien**
Oxford University Clinical Research Unit (OUCRU), Vietnam
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Christiane Dolecek**
Nuffield Department of Medicine, University of Oxford, UK
- **Maciej Boni**
Oxford University Clinical Research Unit (OUCRU), Vietnam
Nuffield Department of Medicine, University of Oxford, UK

1021-PF-PG-MUELLER

Building a national repository of malaria isolates in Papua New Guinea

Samples from Papua New Guinea were collected as part of ongoing malaria surveillance efforts to build a national repository of malaria isolates. Some of these samples were obtained as part of MalariaGEN Consortial Project 1 (<https://www.malariagen.net/human/cp1>). These samples helped form the cornerstone of MalariaGEN's initial efforts to characterise *Plasmodium* genome variation, and contributed to the development of field and lab-based sample handling methods, sequencing approaches, and data analysis pipelines. In a follow-up study, MalariaGEN is working with Dr. Alyssa Barry from the Walter and Eliza Hall Institute, Australia, to sequence *Plasmodium falciparum* isolates from two additional populations and to develop a PNG-specific assay for genotyping and population genetic studies of a nation-wide *P. falciparum* sample collection.

Key people:

- **Ivo Mueller** (contact: mueller@wehi.edu.au)
Walter and Eliza Hall Institute, Australia
University of Melbourne, Australia
- **Alyssa Barry**
Walter and Eliza Hall Institute, Australia
Deakin University, Australia
Burnet Institute, Australia
- **Peter Siba**
Papua New Guinea Institute of Medical Research, PNG

1022-PF-MW-OCHOLLA

Genome variation and selection in clinical isolates from rural Malawi

As part of his PhD research Harold Ocholla worked with colleagues at the Liverpool School of Tropical Medicine and in Malawi to collect uncultured paediatric *Plasmodium falciparum* isolates from malaria patients in a region of high malaria transmission in the Chikwawa and Zomba districts of Malawi over multiple malaria seasons. The goal of his work is to map genome variation and genetic signatures of evolutionary selection in these parasite populations in space and time, to identify associations between genetic variants and important clinical malaria phenotypes.

Key people:

- **Brigitte Denis** (contact: bdenis@mlw.mw)
Malawi-Liverpool Wellcome Trust Clinical Research Programme, Malawi
- **Alister Craig**
Liverpool School of Tropical Medicine, UK
Malawi-Liverpool-Wellcome Trust Clinical Research Programme, Malawi
- **Jaqui Montgomery**
World Mosquito Program, Monash University, Australia
Malawi-Liverpool-Wellcome Trust Clinical Research Program, Blantyre, Malawi
- **Harold Ocholla**
KEMRI - Centres for Disease Control and Prevention Research Program, Kisumu,
Kenya
Centre for Bioinformatics and Biotechnology, University of Nairobi, Kenya

1023-PF-CO-ECHEVERRI-GARCIA

Comparative analysis of permeome genes and drug resistance in Colombia

Colombia is among the countries with the highest malaria burden outside of Africa, and one of the least successful in reducing case numbers, with approximately 100,000 cases per year. The emergence and evolution of antimalarial resistance started approximately 50 years ago, however this problem is poorly understood and no whole genome sequences are yet available for Colombian *Plasmodium falciparum* parasites. This project aims to use sequence data from *P. falciparum* parasites from the Colombian Pacific region, the predominant area for falciparum malaria in the country, to identify genomic regions with strong evidence for recent selection with a particular focus on variation in permeome drug transporters, potential candidates in the mechanism of action of multidrug resistance.

Key people:

- **Diego F Echeverry** (contact: difereg77@gmail.com)
Departamento de Microbiología, Facultad de Salud, Universidad del Valle, Cali,
Colombia
Centro Internacional de Entrenamiento e Investigaciones Médicas - CIDEIM, Cali,
Colombia
- **Tim Anderson**
Texas Biomedical Research Institute, San Antonio, USA

1024-PF-UG-BOUSEMA

FightMal - Correlating protection from malaria with immune profile of infected individuals in Uganda

This study aims to correlate protection from malaria with the immune profile of infected individuals. Cross-sectional and longitudinal studies were conducted in all-age cohorts living in Apac, northern Uganda. This area is characterised by intense perennial malaria transmission with *Plasmodium falciparum* as major malaria species, and *Plasmodium malariae* and *Plasmodium ovale* as prevalent other species. Detailed immune-profiling is undertaken by protein microarray, and individuals protected and unprotected from clinical malaria episodes are compared. Site and cohort descriptions are given in <http://www.ncbi.nlm.nih.gov/pubmed/23473542> and <http://www.ncbi.nlm.nih.gov/pubmed/21540398>.

Key people:

- **Teun Bousema** (contact: teun.bousema@radboudumc.nl)
London School of Hygiene and Tropical Medicine, UK
Radboud University Medical Center, The Netherlands
- **Federica Verra**
Sapienza University of Rome, Italy
- **Thomas G Egwang**
Biotech Laboratories, Uganda
- **Chris Drakeley**
London School of Hygiene and Tropical Medicine, UK

1026-PF-GN-CONWAY

Effects of transmission intensity on population structure and signatures of selection in Guinea

This study was designed to identify malaria parasite genes under selection in the highly endemic forested area of southern Guinea, where very few studies on malaria have been conducted previously. These results were compared with a parasite population from the Greater Banjul Area where malaria transmission is highly seasonal and relatively low. The findings contributed to global research efforts to identify parasite genes involved in pathogenesis, susceptibility to immune responses, and therapeutic agents. This study also provided a training opportunity in population genomics and bioinformatics for Victor Mobegi as a PhD student. Some analyses of the data are given in the original publication: Mobegi, V.A. *et al.* (2014) Genome-wide analysis of selection on the malaria parasite *Plasmodium falciparum* in West African populations of differing infection endemicity. *Molecular Biology and Evolution*, 31:1490-1499.

Key people:

- **David J Conway** (contact: david.conway@lshtm.ac.uk)
London School of Hygiene and Tropical Medicine, UK
- **Victor Mobegi**
Department of Biochemistry and Centre for Biotechnology and Bioinformatics,
University of Nairobi, Kenya
- **Alfred Amambua-Ngwa**
Medical Research Council Unit The Gambia at the London School of Hygiene and
Tropical Medicine, The Gambia
Wellcome Sanger Institute, UK
- **Kovana Marcel Loua**
University Gamal Abdel Nasser of Conakry, Conakry, Republic of Guinea
Institut National de Santé Publique, Conakry, Republic of Guinea

1027-PF-KE-BULL

Genomics of severe malaria and low host immunity in Kenya

Plasmodium falciparum var genes are a large and diverse gene family that encode PfEMP1, an important set of antigenic virulence molecules that are inserted into the surface of parasite erythrocytes. Pete Bull and colleagues have a long-standing collaboration with the Sanger Malaria Programme using capillary sequence tag analysis to measure expression of *var* genes in clinical isolates from Kilifi, Kenya, and have identified genes that are associated with severe malaria and low levels of host immunity. Their current interests extend this work to whole transcriptome analysis, which will provide information on whole *var* genes that are associated with severe forms of malaria, as well as other variant antigens such as the RIFINS and STEVORS. Peter Bull and colleagues have kindly agreed to allow these samples to also be whole genome sequenced for analysis in the MalariaGEN *P. falciparum* Community Project.

Key people:

- **Irene Omedo** (contact: io7@sanger.ac.uk)
KEMRI Wellcome Trust Research Programme, Kenya
Big Data Institute, University of Oxford, UK
- **Vandana Thathy**
Department of Microbiology and Immunology, Columbia University Irving
Medical Center, New York, New York, USA
KEMRI Wellcome Trust Research Programme, Kenya
- **Peter C Bull**
Department of Pathology, University of Cambridge, UK
KEMRI Wellcome Trust Research Programme, Kenya

1031-PF-SEA-PLOWE

Artemisinin Resistance Confirmation, Characterization and Containment (ARC3)

ARC3, an international collaboration led by the World Health Organization, supported clinical trials of artesunate monotherapy in Cambodia, Thailand and Bangladesh. ARC3 aimed to confirm clinical resistance to artemisinin in South-East Asia, define in vitro drug resistance phenotypes, and identify molecular markers of resistance. One aspect of this work was developing methods to identify candidate markers of drug resistance using outputs from Illumina sequencing, laying the groundwork for large-scale studies to use whole genome sequencing and other high-throughput technologies to rapidly identify genetic loci associated with artemisinin resistance. This collaboration included investigating signatures of selection and genome-wide association studies of sensitive and resistant parasite isolates collected in the ARC3 trials, and resulted in improved handling and sequencing methods for field samples. Candidate markers discovered using this approach will be assessed for their ability to predict clinical drug resistance, and if validated, used to develop surveillance tools to guide containment efforts.

Key people:

- **Pascal Ringwald** (ringwaldp@who.int)
World Health Organization (WHO), Switzerland
- **Christopher Plowe**
University of Maryland School of Medicine, USA
- **Shannon Takala-Harrison**
Center for Vaccine Development and Global Health, University of Maryland,
School of Medicine, Baltimore, MD, USA
- **Arjen Dondorp**
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Francois Nosten**

Centre for Tropical Medicine and Global Health, Nuffield Department of Medicine
Research building, University of Oxford Old Road campus, Oxford, UK
Shoklo Malaria Research Unit, Mahidol-Oxford Tropical Medicine Research Unit,
Faculty of Tropical Medicine, Mahidol University, Mae Sot, Thailand

- **Harald Noedl**

MARIB - Malaria Research Initiative Bandarban, Bangladesh
Medical University of Vienna, Vienna, Austria

- **Mark Fukuda**

Department of Immunology and Medicine, US Army Medical Component, Armed
Forces Research Institute of Medical Sciences (USAMC-AFRIMS), Bangkok,
Thailand

1044-PF-KH-FAIRHURST

Genomics of parasite clearance and recrudescence rates in Cambodia

In field-based studies, Rick Fairhurst and colleagues investigated patient responses to artemisinin combination therapies (ACTs), in three Cambodian provinces, where artemisinin resistance is entrenched (Pursat), emerging (Preah Vihear), or uncommon (Ratanakiri). They provided samples from this study with the aim to identify genetic markers of antimalarial drug resistance, use them in real time to define frontline treatments at the provincial level, and eliminate multidrug-resistant malaria in the Greater Mekong Subregion. All three sites provided *Plasmodium falciparum* samples, with Pursat additionally providing samples from patients presenting with *Plasmodium vivax*. In related laboratory-based studies, researchers aimed to elucidate the molecular mechanisms of *P. falciparum* artemisinin and partner-drug resistance, to develop point-of care diagnostics to identify drug-resistant parasites, and discover new compounds to treat drug-resistant malaria episodes. For *P. vivax*, they investigated whether red blood cell polymorphisms protected against *P. vivax* malaria, *P. vivax*-infected erythrocyte binding to monocytes, reticulocyte invasion, immune responses to candidate vaccine antigens, and efficacy of chloroquine against *P. vivax* malaria.

Key people:

- **Thomas E Wellems** (contact: twellems@niaid.nih.gov)
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA
- **Pharath Lim**
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA
Parsons Corporation, Walter Reed Army Institute of Research (WRAIR), USA
- **Chanaki Amaratunga**
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA

1052-PF-TRAC-WHITE

Tracking Resistance to Artemisinin Collaboration (TRAC)

TRAC is investigating the scope and spread of parasite resistance to artemisinin-based therapies at sites across Asia and Africa. The first TRAC study has been completed. This multi-centre, open-label randomised trial studied the clearance rates of peripheral blood *Plasmodium falciparum* parasitaemias in patients with acute uncomplicated *falciparum* malaria treated with two different doses of artesunate. Findings were used to validate the recently discovered *kelch13* marker of artemisinin resistance. Working with MalariaGEN, TRAC samples have been sequenced and analysed for features of population genetics and signatures of selection, and contributed to the genetic basis of a genome-wide associations study for genetic markers of artemisinin resistance. Where samples were found to contain *Plasmodium vivax* data, for example due to mixed infection, this data was contributed to the *P. vivax* Genome Variation project.

Key people:

- **Elizabeth Ashley** (contact: liz@tropmedres.ac)
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Arjen Dondorp**
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Nicholas White**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Mehul Dhorda**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
WorldWide Antimalarial Resistance Network – Asia Regional Centre, Thailand

1062-PF-PG-BARRY

Understanding malaria parasite populations and outbreaks in Papua New Guinea

Microsatellite analysis has previously demonstrated that *Plasmodium falciparum* populations on the north coast of PNG are organised into distinct subpopulations. If this pattern is observed throughout PNG, maps of population structure may guide malaria control programmes by identifying isolated populations and major routes of transmission. Moreover, the data will provide a framework upon which the origins of imported infections and outbreaks in non-endemic areas can be determined. In this first stage of a much larger study, we have two main objectives: (i) to investigate the population genomics of *Plasmodium falciparum* in PNG and (ii) to develop SNP markers for defining the population structure of *P. falciparum* in PNG on a fine scale. Where samples were found to contain *Plasmodium vivax* data, for example due to mixed infection, this data was contributed to the *P. vivax* Genome Variation project.

Key people:

- **Alyssa Barry** (contact: a.barry@deakin.edu.au)
Walter and Eliza Hall Institute, Australia
Deakin University, Australia
Burnet Institute, Australia
- **G L Abby Harrison**
Walter and Eliza Hall Institute, Australia
- **Ivo Mueller**
Walter and Eliza Hall Institute, Australia
University of Melbourne, Melbourne, Australia
- **Livingstone Tavul**
Papua New Guinea Institute of Medical Research, PNG

1083-PF-GH-CONWAY

Alternative molecular mechanisms for erythrocyte invasion by Plasmodium falciparum in Ghana

The intensity of malaria transmission varies considerably among sites in Ghana due to differences in average temperatures, rainfall patterns, and urbanisation. This study has selected two locations that have among the highest transmission rates in Ghana: Kintampo in central Ghana and Navrongo in northern Ghana. It will examine the relationship between ligand gene expression in parasite isolates and anti-ligand antibody titers in the infected hosts, and expects that immune pressure will select for parasites that most effectively evade antibody recognition. Genomes of parasite isolates with contrasting phenotypes, in the context of varying antibody titres and gene expression profiles, will be sequenced to explore if polymorphisms in or flanking the ligand genes, or elsewhere in the genome, are associated with parasite resistance to anti-EBA or Rh ligand antibodies.

Key people:

- **Gordon Awandare** (contact: gawandare@ug.edu.gh)
West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana
- **David J Conway**
London School of Hygiene and Tropical Medicine, UK

1093-PF-CM-APINJOH

Population genetics of *Plasmodium falciparum* parasites in South-Western Cameroon

Tobias Apinjoh is using whole genome sequencing to investigate the genetic diversity present in natural populations of *Plasmodium falciparum* parasites collected in different micro-ecological zones along the slope of Mount Cameroon in the South-Western region. This study examines the genetic structure of these parasite populations including looking for signatures of natural selection. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Tobias Apinjoh** (contact: apinjohtoby@yahoo.co.uk)
University of Buea, Cameroon

1094-PF-GH-AMENGA-ETEGO

Population genetics of *Plasmodium falciparum* parasites in Northern Ghana

In collaboration with colleagues at the Navrongo Health Research Center, Lucas Amenga-Etego is investigating the genetic diversity and population structure of *Plasmodium falciparum* parasites collected in the Kassena-Nankana districts of Northern Ghana. *P. falciparum* isolates were sampled from individuals with a confirmed *falciparum* malarial fever. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Lucas Amenga-Etego** (contact: lucasmenga@gmail.com)

West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana

Navrongo Health Research Centre, Ghana Health Service, Navrongo, Ghana

1095-PF-TZ-ISHENGOMA

Genome variation and its effect on ACT treatment outcome in Tanzania

This study aims to assess the diversity of *Plasmodium falciparum* in regions of varying endemicity in Tanzania, and to investigate parasite genetic factors which might affect antimalarial treatment outcome among patients treated with ACTs. As part of the Plasmodium Diversity Network Africa (PDNA), an additional aim of this work is to build and strengthen the capacity of African investigators to conduct clinical trials and genomic studies in their local contexts. Over 400 samples were collected at three sites in Muheza and Muleba (hypoendemic), and Nachingwea (hyper-endemic/holoendemic) districts. The findings will provide baseline data and build the capacity for tracking and detection of emergence of artemisinin resistance in Tanzania. The PDNA is an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Deus Ishengoma** (contact: deusishe@yahoo.com)
National Institute for Medical Research (NIMR), United Republic of Tanzania
East African Consortium for Clinical Research (EACCR), United Republic of Tanzania
- **Alex Shayo**
Nelson Mandela Institute of Science and Technology, Tanzania
- **Vito Baraka**
National Institute for Medical Research (NIMR), United Republic of Tanzania
Department of Epidemiology, International Health Unit, Universiteit Antwerpen, Belgium

1096-PF-GH-GHANSAH

Population genetics of *Plasmodium falciparum* parasites in Southern Ghana

Anita Ghansah is investigating the population diversity and genetic structure of *Plasmodium falciparum* parasites collected from Cape-Coast in the coastal savanna zone of Ghana. The overall objective is to build capacity in the use of *P. falciparum* genomic data to describe the extent of genetic diversity of the parasite, discovery of new genes/SNPs that may have biological importance and to develop novel genetic analysis tools for studying well-defined phenotypes such as drug resistance, vaccine efficacy. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Anita Ghansah** (contact: aghansah2013@gmail.com)

Nogouchi Memorial Institute for Medical Research, Legon-Accra, Ghana

1097-PF-ML-MAIGA

Detection of artemisinin-resistant *Plasmodium falciparum* parasites in Southern Mali

Abdoulaye Djimdé at the Malaria Research and Training Centre at the University of Bamako and Oumou Maïga-Ascofaré are investigating the genetic signature of drug pressure on *Plasmodium falciparum* parasites collected in a seasonal transmission areas in Southern Mali. Samples collected before and after the introduction of artemisinin-based combination therapy (ACT) are compared for signatures of a recent positive selection. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Abdoulaye Djimdé** (adjimde@icermali.org)
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
- **Oumou Maïga-Ascofaré**
Bernhard Nocht Institute for Tropical Medicine, Germany
Research in Tropical Medicine, Kwame Nkrumah University of Sciences and Technology, Kumasi, Ghana
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

1098-PF-ET-GOLASSA

The prevalence of asymptomatic carriage; emergence of parasite mutations conferring anti-malaria drug resistance; and G6PD deficiency in the human population, as possible impediments to malaria elimination in Ethiopia

Since 2004, Ethiopia has adopted a species-specific treatment policy for malaria: artemether-lumefantrine (AL) for the treatment of uncomplicated *Plasmodium falciparum* malaria and chloroquine (CQ) for *Plasmodium vivax* infections. *P. falciparum* and *P. vivax* are co-endemic in Ethiopia. Periodic assessment of mutant and susceptible genotypes would help towards a better understanding of the effects of the current regimens. In areas where *P. vivax* is endemic and primaquine is required for the radical cure, individual's G6PD status must be known before the recommendation of this drug. Indeed, G6PD-deficient individuals are at risk of haemolysis when exposed to primaquine and tafenoquine drugs. Apparently no measures are currently in place to ensure safe delivery of this drug within the context of G6PD deficiency risk in the country. Given the incomplete removal of CQ, co-transmission of *P. falciparum* and *P. vivax* in the country and use of primaquine for the radical cure of *P. vivax*, Lemu Golassa and colleagues are interested to explore the frequencies of *P. falciparum* clinical isolates carrying mutant and susceptible genotypes in PfCRT and PfMDR-1 genes and to determine the prevalence of G6PD deficiency among endemic people. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Lemu Golassa** (lgolassa@gmail.com)
Aklilu Lemma Institute of Pathobiology, Addis Ababa University, Ethiopia
- **Berhanu Erko**
Aklilu Lemma Institute of Pathobiology, Addis Ababa University, Ethiopia

1100-PF-CI-YAVO

Drug resistance and *Plasmodium falciparum* diversity in forest zone of Côte d'Ivoire

William Yavo is investigating *Plasmodium falciparum* parasite population structures according to epidemiological facies and their impact on artemisinin combination therapy (ACT) treatment failure. Samples of the parasites were collected in the urban and suburban areas of Abidjan (economic capital of Côte d'Ivoire), the forest and coastal zone of San Pedro as well as from Abengourou (transition forest zone in the East of the country), during clinical trials comparing Artesunate-Amodiaquine vs Artemether-Lumefantrine according to WHO protocol. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **William Yavo** (contact: yavowilliam@yahoo.fr)
Malaria Research and Control Center of the National Institute of Public Health,
Côte d'Ivoire
University Félix Houphouët Boigny, Côte d'Ivoire
- **Abibatou Konaté**
University Félix Houphouët-Boigny, Côte d'Ivoire

1101-PF-CD-ONYAMBOKO

Efficacy of three ACTs in treating *falciparum* malaria in the Democratic Republic of Congo

This clinical study aims to assess the efficacy of amodiaquine-artesunate for the treatment of uncomplicated *Plasmodium falciparum* malaria in children in Kinshasa, DRC, five years after its introduction as a first line treatment. It also compares this therapy with the efficacies of dihydroartemisinin-piperaquine and artemether-lumefantrine. Parasite DNA from samples collected from infected patients will be genotyped to perform association studies with observed clinical phenotypes.

Key people:

- **Caterina A Fanello** (contact: caterina@tropmedres.ac)
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Antoinette Tshetu**
University of Kinshasa, DRC
- **Nicholas Day**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Marie A Onyamboko**
Kinshasa School of Public Health, University of Kinshasa, DRC

1102-PF-MG-RANDRIANARIVELOJOSIA

Genotyping Plasmodium falciparum and Plasmodium vivax in Madagascar

The island of Madagascar is geographically situated in the south western region of the Indian Ocean and amongst malaria-endemic countries, its situation is unique: historically, human migration has occurred from both Africa and Asia; Duffy negative people can be susceptible to *Plasmodium vivax*; there is an absence of *pfprt* mutant *Plasmodium falciparum* despite the official use of chloroquine to treat malaria for six decades (1945 - 2005). This study is mainly investigating *Plasmodium* samples collected directly from patients with uncomplicated malaria, as well as tracking malaria parasites and genetic markers of drug resistance in these parasites. This long-term study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* across Africa.

Key people:

- **Milijaona Randrianariveლოსია** (contact: milijaon@pasteur.mg)
Institut Pasteur de Madagascar
Universités d'Antananarivo et de Mahajanga, Madagascar

1103-PF-PDN-GMSN-NGWA

Population genetics of cross-border *Plasmodium falciparum* parasites in West Africa

In collaboration with colleagues at the MRC Unit The Gambia, Alfred Amambua Ngwa is investigating the population structure and signatures of selection from immunity and drugs in isolated and cross-border *Plasmodium falciparum* populations. He uses whole genome sequencing and targeted genotyping to analyse such populations across geopolitical borders and islands in West Africa. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Alfred Amambua-Ngwa** (contact: angwa@mrc.gm)

Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia
Wellcome Sanger Institute, UK

1107-PF-KEN-KAMAU

Population genetics of *Plasmodium falciparum* parasites in Kenya

Together with colleagues at the United States Army Medical Research Directorate in Kenya, Edwin Kamau is investigating population structure and signals of selection from anti-malarial drug resistance of *Plasmodium falciparum* in Kenya. The aim is to analyse the parasite's genetic diversity to inform malaria control policy in sub-Saharan Africa. Specific focus will be on finding molecular markers of antimalarial drug resistance, measuring frequencies or novel markers of resistance to artemisinin, comparing heterozygosity by conventional MoI and FWs metric and monitor the emergence and spread of artemisinin resistance in sub-Saharan Africa. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Ben Andagalu** (contact: bandagalu@yahoo.com)
United States Army Medical Research Directorate-Africa, Kenya Medical Research Institute/Walter Reed Project, Kisumu, Kenya
- **Edwin Kamau**
Walter Reed Army Institute of Research, U.S. Military HIV Research Program,
Silver Spring, MD, USA

1108-PF-GAB-BOUYOU-AKOTET

Determining parasite genetic diversity in Gabon

This study collected *Plasmodium falciparum* samples in Gabon for genomic sequencing. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of Plasmodium parasites across Africa.

Key people:

- **Marielle Bouyou-Akotet** (contact: mariellebouyou@yahoo.fr)
Department of Parasitology-Mycolology, Université des Sciences de la Santé,
Gabon

1114-PF-PDN-DBS-GH-GHANSAH

Surveillance of *kelch-13* mutation in Ghana

Anita Ghansah is investigating *Plasmodium falciparum* genomic population structure in Ghana, specifically monitoring for occurrence of the *kelch-13* mutation, known to confer drug resistance in South East Asia. This study is contributing to the Plasmodium Diversity Network Africa (PDNA), an African-led network investigating the genetic diversity and drug resistance of *Plasmodium* parasites across Africa.

Key people:

- **Anita Ghansah** (contact: aghansah2013@gmail.com)

Nogouchi Memorial Institute for Medical Research, Legon-Accra, Ghana

1125-PF-TH-NOSTEN

Investigating artemisinin resistance emergence on Thai-Burmese border

Plasmodium falciparum resistance to artemisinin derivatives emerged on the Thai Myanmar border between 2000 and 2010. The Shoklo Malaria Research Unit (SMRU) has collected phenotypic data on more than 3,000 patients with uncomplicated hyperparasitaemia and stored packed red blood cells for over 600 at the time of admission. This constitutes a unique collection of samples available for genomic analysis to determine changes in the parasite population structures and to identify potential molecular markers associated with resistance to artesunate.

Key people:

- **Francois Nosten** (contact: francois@tropmedres.ac)
Centre for Tropical Medicine and Global Health, Nuffield Department of Medicine
Research building, University of Oxford Old Road campus, Oxford, UK
Shoklo Malaria Research Unit, Mahidol-Oxford Tropical Medicine Research Unit,
Faculty of Tropical Medicine, Mahidol University, Mae Sot, Thailand

1127-PF-ML-SOULEYMANE

Genetic analysis of *Plasmodium falciparum* before and after artemether-lumefantrine treatment in Mali

Although artemisinin combination therapy (ACT) resistance has not yet been found in Mali, previous studies have shown that cases of recurring *Plasmodium falciparum* parasites within a month of infection after treatment with artemether-lumefantrine seem to be increasing. The Molecular Epidemiology and Drug Resistance Unit, at the Malaria Research and Training Center, University of Science, Techniques and Technologies of Bamako, Mali is conducting this study to characterise the phenotype and genotype of these recurrent parasites, with parasites being collected before and after artemether-lumefantrine treatment and stored for ex vivo drug efficacy studies and subsequent genotyping by next generation sequencing.

Key people:

- **Abdoulaye Djimdé** (adjimde@icermali.org)
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
- **Souleymane Dama**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

1131-PF-BJ-BERTIN

Identification of virulence factors in cerebral malaria in Benin

Gwladys Bertin is interested to facilitate the identification of variants associated to cerebral malaria in the proteomic analysis. She is correlating proteomic data from cerebral malaria samples with whole genome sequencing of these samples. The whole genome sequencing will allow adding new sequences and to facilitate the identification of variants associated to cerebral malaria in the proteomic analysis. The aim of this study is to correlate proteomic data from cerebral malaria samples with whole genome sequencing of these samples. The data from the whole genome sequencing will be used for analysis of proteomic and RNA-sequencing. The whole genome sequencing will allow adding new sequences and to facilitate the identification of variants associated to cerebral malaria in the proteomic analysis.

Key people:

- **Gwladys Bertin** (contact: gwladys.bertin@ird.fr)
Institute of Research for Development (IRD), Paris, France
- **Claire Kamaliddin**
Institute of Research for Development (IRD), Paris, France
The University of Calgary, Calgary, Canada

1132-PF-K1000G-DBS-KE-BEJON

Using whole genome sequence data to analyse the spatio-temporal genetic diversity of malaria parasites in Kilifi, Kenya

Effective control and final elimination of malaria in the face of declining transmission and increasing spatial heterogeneity of disease and infection will require the identification and targeting of hotspots or reservoirs of both symptomatic and asymptomatic infections. However, the level of parasite mixing across regions containing hotspots will likely impact the effectiveness and durability of targeted control interventions and should be taken into consideration when developing control programmes. This study aims to use whole genome sequence data of malaria parasites sampled from symptomatic and asymptomatic individuals in Kilifi, Kenya between 1994 and 2020 to analyse variation in *Plasmodium falciparum* genotype over space and time, with a view to determine the patterns of parasite connectivity and transmission networks across the region, as well as to study the evolution of the parasite over the study period, during which there have been substantial changes in the epidemiology of malaria. The findings of this study will enable us to map parasite flow and help us predict the likely outcome of malaria control interventions targeted at different spatial scales, thus informing the design of effective hotspot-targeted interventions.

Key people:

- **Irene Omedo** (contact: io7@sanger.ac.uk)
KEMRI Wellcome Trust Research Programme, Kenya
Big Data Institute, University of Oxford, UK
- **Philip Bejon**
KEMRI Wellcome Trust Research Programme, Kenya
- **Lynette I. Oyier**
KEMRI Wellcome Trust Research Programme, Kenya

1134-PF-ML-CONWAY

Population genetics of *Plasmodium falciparum* in West Africa

This project has involved studying the population genomics of malaria parasites in Mali, to compare the signatures of selection in the parasite genome with patterns seen elsewhere in West Africa. The work was supported by an ERC Advanced Grant on 'Parasite population genomics and functional studies towards development of a blood stage malaria vaccine', and some analyses of the data are reported already: Duffy, C.W. et al. (2018) Multi-population genomic analysis of malaria parasites indicates local selection and differentiation at the *gdv1* locus regulating sexual development. *Scientific Reports*, 8:15763. doi: 10.1038/s41598-018-34078-3.

Key people:

- **David J Conway** (contact: david.conway@lshtm.ac.uk)
London School of Hygiene and Tropical Medicine, UK
- **Mahamadou Diakite**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
University Clinical Research Center (UCRC), Mali

1135-PF-SN-CONWAY

Parasite adaption in Senegal at molecular, functional and population level

This project has involved studying the population genomics of malaria parasites in an area of low infection endemicity in Senegal, to compare the signatures of selection in the parasite genome with patterns seen elsewhere in West Africa. The work was supported by an ERC Advanced Grant on 'Parasite population genomics and functional studies towards development of a blood stage malaria vaccine', and some analyses of the data are reported already: Duffy, C.W. et al. (2018) Multi-population genomic analysis of malaria parasites indicates local selection and differentiation at the *gdv1* locus regulating sexual development. *Scientific Reports*, 8:15763. doi: 10.1038/s41598-018-34078-3.

Key people:

- **David J Conway** (david.conway@lshtm.ac.uk)
London School of Hygiene and Tropical Medicine, UK
- **Ambroise Ahouidi**
Health Research Epidemiological Surveillance and Training Institute (IRESSEF)
Université Cheikh Anta Diop, Dakar, Senegal

1136-PF-GM-NGWA

Plasmodium falciparum anti-malarial drug resistance in the Gambia: Identification of potential genetic markers by retrospective whole genome approaches

In The Gambia, malaria transmission has substantially declined in the last 5-10 years and access to treatment is good. The relatively high drug pressure, reduced transmission and consequent waning of population immunity would increase opportunities for parasite inbreeding, possibly favouring the establishment of ART/ACT resistant parasite genotypes. Therefore, this setting offers a unique opportunity to understand the evolution of the natural variation of *Plasmodium falciparum* populations and the potential for the emergence of ART resistance. For this reason, we propose to characterise the *P. falciparum* genomic and phenotypic variations that occurred after the large-scale implementation of ACTs to identify novel genetic mechanisms of antimalarial drug resistance.

We will analyse patterns of genome-wide temporal SNP and microsatellite diversity to identify evolving genomic loci that have been involved in recent adaptations. To our knowledge, this will be the first attempt of retrospective genome scanning to identify genome-wide signatures of directional selection in a natural *P. falciparum* population following ACT implementation. The project proposes to analyse 540 *P. falciparum* specimens from archival and recent sampling.

Key people:

- **Alfred Amambua-Ngwa** (angwa@mrc.gm)

Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia
Wellcome Sanger Institute, UK

1137-PF-GM-DALESSANDRO

Malaria transmission dynamics in The Gambia: Defining the spatial and temporal spread of malaria at micro-level (village)

The overall objective of this study is to understand the determinants of malaria heterogeneity and the spatial and temporal spread of malaria infections. Alfred Amambua Ngwa and Umberto d'Alessandro will analyse *Plasmodium falciparum* specimens from 3 consecutive years in the country to describe infection, complexity and identify parasite genotypes adapting to current interventions and environmental changes in the population. The aim is to integrate high-throughput genomic technologies into detailed field epidemiology and entomology studies to increase our understanding of what drives the heterogeneities in host-parasite-vector interactions and ultimately transmission, providing the basis for the rational application of interventions and the development of evidence-based plans for elimination.

Key people:

- **Alfred Amambua-Ngwa** (angwa@mrc.gm)
Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia
Wellcome Sanger Institute, UK
- **Umberto D'Alessandro**
Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia

1138-PF-CD-FANELLO

Parenteral artesunate compared to quinine as a cause of late post-treatment anaemia in African children with hyperparasitaemic *Plasmodium falciparum* malaria (DHART)

Caterina Fanello and colleagues investigated the incidence of late onset anaemia in children with uncomplicated hyperparasitemic *Plasmodium falciparum* malaria treated with intravenous (IV) artesunate or IV quinine. Two blood samples were taken from patients in the Democratic Republic of Congo. The first to examine the parasite DNA to establish information on the frequency of the major alleles associated to drug resistance in the area and the other to analyse the human DNA for the presence of Sickle Cell Disease, thalassemia, G6PD deficiency and other hemoglobinopathies or enzyme deficiencies that might have affected the primary outcome of the clinical trial.

Key people:

- **Caterina A Fanello** (caterina@tropmedres.ac)
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Marie A Onyamboko**
Kinshasa School of Public Health, University of Kinshasa, DRC

1140-PF-ML-DUFFY

PfSPZ phase I trial in Doneguebougou, Mali

This study is a phase I clinical trial to evaluate the safety of repeated intravenous (IV) immunizations with irradiated *Plasmodium falciparum* sporozoites (PfSPZ) in African adults. In collaboration with Sanaria and the MRTC in Bamako, the Laboratory of Malaria Immunology and Vaccinology at NIH recruited randomly assigned healthy adults from the area around Doneguebougou, Mali to receive test product or control. Vaccinees received five inoculations of PfSPZ, or placebo, by IV injection, and were monitored for natural infection during the ensuing transmission season. In addition to the primary objective of evaluating safety, this study assessed the protective efficacy of the vaccine against natural infections, related host responses to protection, and evaluated transmission blocking potential. The study also planned to perform whole-genome sequencing of parasites isolated from the peripheral blood of participants who become infected. It was planned that the genotypes provided by MalariaGEN would be used to answer several specific questions: (1) Are parasites from test patients more diverged from the vaccine strain (NF54) than those from the control group? (2) Is there evidence of selective pressure in specific genomic loci that might inform selection of (or validate) pre-erythrocytic vaccine antigens? (3) Is the genetic diversity of parasite populations different amongst the treatment groups?

Key people:

- **Jason Wendler** (jason.wendler@seattlechildrens.org)
Seattle Children's Hospital, USA
National Institute of Allergy and Infectious Disease (NIAID), USA
- **Patrick Duffy**
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA
- **Ogobara Doumbo**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

- **Sara Healy**

National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA

- **Mahamadou S. Sissoko**

Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

1141-PF-GM-CLAESSENS

Genomic characterization of *Plasmodium falciparum* from asymptomatic infections in The Gambia

The dry season in The Gambia presents a bottleneck for the total parasite population as there is little or no malaria transmission. Some individuals maintain a malaria infection through this period, usually at very low densities, without having any symptoms, and are the source from which the transmission restarts the following season. In this study, Antoine Claessens and his colleagues from the MRC Unit The Gambia at the London School of Hygiene and Tropical Medicine aim to test the hypothesis that some *Plasmodium falciparum* “strains” are more likely to survive the ~8 month long dry season. More specifically, the frequency of alleles conferring dry season growth advantage will be high in June but lower towards the end of the transmission season in December. In practice, fingerpick and venous blood samples are collected every three months from ~1000 participants in a village in the eastern part of The Gambia. All blood samples are filtered through a cellulose column to remove white blood cells. *P. falciparum* status is determined by nested-PCR or qPCR. All *P. falciparum* positive samples are shipped to the Wellcome Sanger Institute for whole genome sequencing, after a DNA amplification step. This work will provide important information for the possible elimination of malaria in The Gambia, as the last remaining parasites are likely to show a similar phenotype of infection to parasites in the dry season (low parasitaemia and asymptomatic, i.e. “the last parasite standing is the strongest” hypothesis).

Key people:

- **Antoine Claessens** (antoineclaessens@gmail.com)

Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia

LPHI, MIVEGEC, INSERM, CNRS, IRD, University of Montpellier, France

1145-PF-PE-GAMBOA

Genotype-phenotype study of erythrocyte invasion in Peruvian *Plasmodium falciparum* isolates

Dionicia Gamboa, Joseph Vinetz and colleagues are analysing Peruvian *Plasmodium falciparum* host-parasite interactions during invasion of the parasite into the human red blood cell. Samples for this study were collected as part of a study of erythrocyte invasion phenotypes by the Universidad Peruana Cayetano Heredia, New York Blood Center and the University of California San Diego. The team will use whole genome sequencing on these phenotyped strains as part of broader genotype-phenotype studies of invasion both locally and globally. Samples from Peru that were collected as part of a study of erythrocyte invasion phenotypes by Universidad Peruana Cayetano Heredia, New York Blood Center and University of California San Diego. *P. falciparum* parasites were collected and tested for invasion phenotypes, as described in PMID 23118907. Strains were later retested for invasion and prepared for genome sequencing at the Sanger Institute. This project is led by Dr. Dionicia Gamboa and Dr. Joe Vinetz, with sequencing carried out in collaboration with Dr. Julian Rayner. Lead investigators are interested in analysing host-parasite interactions during invasion, as well as broader studies in genomic variation within Peru as part of the Peruvian/Brazilian Center of Excellence in Malaria Research (Amazonia ICEMR). Anyone interested in analysing these samples should contact Drs. Vinetz and Gamboa.

Key people:

- **Dionicia Gamboa** (contact: dionicia.gamboa@upch.pe)
Laboratorio ICEMR-Amazonia, Laboratorios de Investigacion y Desarrollo,
Facultad de Ciencias y Filosofia, Universidad Peruana Cayetano Heredia, Lima,
Peru
- **Joseph Vinetz**
Yale School of Medicine, New Haven, CT, USA

Laboratorio ICEMR-Amazonia, Laboratorios de Investigacion y Desarrollo,
Facultad de Ciencias y Filosofia, Universidad Peruana Cayetano Heredia, Lima,
Peru

- **Julian C Rayner**

Cambridge Institute for Medical Research, University of Cambridge, Cambridge,
UK

1146-PF-MULTI-PRICE

Characterisation of drug resistance in Indonesian *Plasmodium falciparum* populations

Ric Price and Rintis Noviyanti are the principal investigators in a genome-wide study aiming to characterise the molecular profile of drug resistance-conferring variants in Indonesian *Plasmodium falciparum* populations. The study entails genome-wide scans to identify novel resistance variants as well as characterising known variants in *P. falciparum* field isolates with *ex vivo*-determined drug sensitivity profiles for a range of antimalarial drugs. Samples are contributed by consenting patients attending local health centres and hospitals in Indonesia. The study is conducted alongside a genome-wide scan to identify and characterise drug-resistance conferring variants in *P. vivax* field isolates sourced from co-endemic sites in Indonesia and from Thailand. These studies are coordinated by Sarah Auburn and Jutta Marfurt.

Key people:

- **Sarah Auburn** (contact: sarah.auburn@menzies.edu.au)
Menzies School of Health Research, Charles Darwin University, Darwin, Northern Territory, Australia
Nuffield Department of Medicine, University of Oxford, UK
- **Rintis Noviyanti**
Eijkman Institute for Molecular Biology, Indonesia
- **Ric N Price**
Centre for Tropical Medicine and Global Health, University of Oxford, UK
Menzies School of Health Research, Charles Darwin University, Darwin, Northern Territory, Australia
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Jutta Marfurt**
Menzies School of Health Research, Darwin, Australia

1147-PF-MR-CONWAY

Population genetics of *Plasmodium falciparum* parasites in Mauritania

This project is led by the London School of Hygiene and Tropical Medicine and the Institut National de Recherches en Santé Publique (INRSP), Mauritania, and supported by an MRC Project Grant entitled 'Malaria parasite population structure and adaptation on the edge of endemic distribution in Africa'. Some of the analyses of data are reported already: Duffy, C.W. et al. (2017) Population genetic structure and adaptation of malaria parasites on the edge of endemic distribution. *Molecular Ecology*, 26:2880-2894. doi: 10.1111/mec.14066. This indicates that discrete foci of infection on the edge of the Sahara are genetically highly connected to the wider parasite population in Africa, and local elimination would be difficult to achieve without very substantial reduction in malaria throughout the region.

Key people:

- **David J Conway** (david.conway@lshtm.ac.uk)
London School of Hygiene and Tropical Medicine, UK
- **Hampate Ba**
Institut National de Recherche en Santé Publique, Nouakchott, Mauritania

1148-PF-BD-MAUDE

Assessing the contribution of migration to the emergence and spread of antimalarial drug resistance in Southeast Bangladesh

This study measured population movement by travel surveys and mobile phone call record data and combine it with parasite genotype data and malaria incidence to examine the role of population movement on the spread of malaria and antimalarial drug resistance.

Key people:

- **Richard Maude** (richardmaude@gmail.com)
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
Harvard TH Chan School of Public Health, Harvard University, Boston, USA
- **Caroline Buckee**
Harvard TH Chan School of Public Health, Harvard University, Boston, USA
- **Amir Hossain**
Chittagong Medical College Hospital, Chittagong, Bangladesh
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand

1149-PF-MM-RINGWALD

Treatment Efficacy Studies in Myanmar

Treatment Efficacy Studies are conducted routinely in Myanmar, to assess the efficacy of frontline treatments. Dried bloodspot (DBS) samples for this study were collected from patients at multiple sites from 2012, and the patient clinical parasite clearance phenotypes are recorded. In this collaboration, we genotyped parasite DNA samples to establish the prevalence of drug resistance mutations and genetic backgrounds, and associate genetic variations to phenotypes.

Key people:

- **Pascal Ringwald** (contact: ringwaldp@who.int)
World Health Organization (WHO), Switzerland

1151-PF-GH-AMENGA-ETEGO

Testing the effectiveness of selective whole genome amplification on samples collected in Northern Ghana

For this study, Lucas Amenga-Etego and colleagues collected dried blood spot (DBS) and venous blood samples from patients in the Navrongo Health and Demographic surveillance area in the Upper East Region of Northern Ghana. In collaboration with the Malaria Programme at the Wellcome Sanger Institute, these samples were used to compare the effectiveness of whole genome sequencing of *Plasmodium falciparum* from DBS, using selective whole genome amplification, as opposed to other well-established methods using leucodepleted venous blood samples. The study showed that this technique overcomes a major limiting factor in *P. falciparum* genome sequencing from field samples, and paves the way for large-scale epidemiological applications. The collected samples will also be used to track drug resistance genes in the area.

Key people:

- **Lucas Amenga-Etego** (lucasmenga@gmail.com)
West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana
Navrongo Health Research Centre, Ghana Health Service, Navrongo, Ghana
- **Abraham Oduro**
Navrongo Health Research Centre, Ghana Health Service, Navrongo, Ghana

1153-PF-PF3KLAB-KWIATKOWSKI

Sequencing laboratory reference samples

This study consists of 16 laboratory *Plasmodium falciparum* samples sequenced using Illumina 100bp paired-end reads. These samples were sequenced as part of the Pf3k project using both long and short reads and this study contains the short read data. Details on the longer reads (PacBio and MiSeq) can be found in <https://pubmed.ncbi.nlm.nih.gov/29862326>. These samples are primarily intended for use in bioinformatic pipeline evaluations.

Key people:

- **Richard Pearson** (contact: rp7@sanger.ac.uk)
Big Data Institute, University of Oxford, UK
Wellcome Sanger Institute, UK
Wellcome Centre for Human Genetics, University of Oxford, UK

1162-PF-GM-NGWA-SM

Genomic variation and antimalarial resistance evolution in The Gambia

In terms of malaria prevalence, The Gambia can be divided into two strata: low prevalence in the western part and relatively high prevalence in the eastern part. Nevertheless, within these two strata, prevalence can vary substantially by village. Transmission is seasonal (August-December) and the country is working towards malaria elimination. Coverage of interventions (LLIN, IRS, IPTp, SMC) is apparently good. Nevertheless, there is still some residual transmission that in the eastern part is moderate to high during the period August-December. Samples contributed by the malaria population biology group (MPB) of MRCG are from clinical infected malaria patients from across The Gambia and Southern Senegal. This study is integrated within the malaria programme grant (MPG) and the national malaria programme efficacy studies. It explores targeted and whole genome surveys of polymorphisms for association with in vivo and ex vivo anti-malarial drug response phenotypes of *Plasmodium falciparum* isolates from The Gambia to characterise mechanisms of drug resistance in *P. falciparum*. With the clinical and mass chemotherapeutic interventions by NMCP and MPG, monitoring for emerging and known markers of drug resistance will help determine if these antimalarial interventions have selected for parasites that are less susceptible to chemotherapies.

Key people:

- **Alfred Amambua-Ngwa** (contact: angwa@mrc.gm)
Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia
Wellcome Sanger Institute, UK
- **Umberto D'Alessandro**
Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia

1164-PF-ML-DJIMDE-SM

Plasmodium falciparum clearance times in Malian villages following artesunate monotherapy

A multicentre study to evaluate the in vivo, in vitro and molecular efficacy of artesunate in monotherapy for the uncomplicated malaria treatment is currently running in two study sites in Mali; Bougoula-hameau, at 350 km from the capital town in an holo-endemic village with seasonal malaria between June and January, Faladje, a meso-endemic village at 80 km from the capital town with a malaria transmission between July and December between Jun and November. The full study will cover 12 months including two transmission seasons. During a longitudinal survey, we expect 300 uncomplicated malaria patients to be enrolled. Microscopy confirmed malaria patients will be treated with artesunate and blood samples will be collected prior and after the treatment. Parasites genotype will be associated to the in vivo parasite clearance. According to our objectives to genotype parasites samples from this study either by PCR or sequencing, we envisage to analyse genetic diversities that can have correlation with the parasite in vivo and in vitro response to artesunate treatment. Thus this project of SpotMalaria providing data on resistance markers but also other genetic markers will be a great opportunity to our study in getting access to a high throughput system and a wide range of markers which might not be available from our institution. It will give this study more data to look through as the actual available markers for artemisinines are the ones described for the Asian continent.

Key people:

- **Abdoulaye Djimdé** (adjimde@icermali.org)
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
- **Aminatou Kone**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

1165-PF-CM-APINJOH-SM

Prevalence of gene polymorphisms in symptomatic and asymptomatic *Plasmodium falciparum* infected individuals from the Southwest region of Cameroon

The study was conducted in localities on the eastern slope of Mt Cameroon, with varying malaria transmission profiles and geographic features. The terrain rises from the Atlantic ocean at the Gulf of Guinea, gradually increasing from Ombe through Mutengene to 800– 1,200 m in Buea. The area is characterised by a forested equatorial climate, modified by the ocean and mountain, comprising two seasons: a short dry season (November–March) and a long rainy season (March–November). Ambient temperatures vary from 18 °C in August to 35 °C in March while the relative humidity (75–80 %), average annual rainfall (2625 mm) and precipitation (2,000–10,000 mm) are relatively high. Malaria transmission is intense and perennial in the area, with parasitaemia higher in the rainy seasons and at lower altitude. *Plasmodium falciparum* is responsible for most of the malaria infections, with a prevalence of up to 85 % reported recently in asymptomatic adults while *Plasmodium vivax* and *Plasmodium malariae* accounted for 14.9 % and 5.8 % infections respectively. *Anopheles gambiae* is the dominant, most aggressive and most active of the three malaria vectors (*Anopheles gambiae*, *Anopheles funestus* and *Anopheles nili*), with infection rates and overall Entomological Inoculation Rates (EIR) as high as 287 infective bites/person/year and 3.93 infective bites/person/night respectively. Data from this study complements a previous study aimed at characterising the parasite populations in the area.

Key people:

- **Tobias Apinjoh** (apinjohntoby@yahoo.co.uk)
University of Buea, Cameroon
- **Vincent Ntui-Njock Ntui**
University of Buea, Cameroon

1167-PF-TZ-ISHENGOMA-SM

Surveillance of parasite populations and patterns of drug resistance, and associated parasite clearance or treatment failure in Tanzania

Artemether-lumefantrine (AL) is the recommended first-line artemisinin-based combination therapy (ACT) for the treatment of uncomplicated falciparum malaria in most of the malaria-endemic countries, including Tanzania. Recently, dihydroartemisinin-piperaquine (DP) has been recommended as the alternative anti-malarial to ensure effective case management in Tanzania. This study assessed the parasite clearance rate and efficacy of AL and DP among patients aged 6 months to 10 years with uncomplicated falciparum malaria in two sites with different malaria transmission intensity. The samples for this project were collected in an open-label, randomized trial that was conducted at two sites of Muheza Designated District Hospital and Ujiji Health Centre in Tanga and Kigoma regions, respectively. Patients meeting inclusion criteria were enrolled, treated with either AL or DP and followed up for 28 (extended to 42) and 42 (63) days for AL and DP, respectively. Parasite clearance time was monitored in the first 72 h post treatment and the clearance rate constant and half-life were calculated using an established parasite clearance estimator. The primary outcome was parasitological cure on days 28 and 42 for AL and DP, respectively, while secondary outcome was extended parasitological cure on days 42 and 63 for AL and DP, respectively. Genomic data of *Plasmodium falciparum* were generated by whole genome sequencing (WGS) using illumina short reads which was done through the *P. falciparum* Community Project at the Wellcome Sanger Institute, UK. Of the 509 children enrolled (192 at Muheza and 317 at Ujiji), there was no early treatment failure and PCR corrected cure rate ranged from 94.6 to 100% for all the treatment groups at both sites. Parasite clearance rate constant was similar in the two groups and at both sites ($<0.28/h$); the slope half-life was <3.0 h and all but only one patient cleared parasites by 72 h. The findings confirmed high efficacy of the first and the newly recommended alternative ACT for treatments for uncomplicated falciparum malaria in Tanzania. The high parasite clearance rate suggests absence of suspected artemisinin resistance, defined as delayed

parasite clearance. Parasite diversity and population structure, and the profile of drug resistance markers will be determined from the WGS data compared with those of other countries in the Pf6k dataset.

Key people:

- **Deus Ishengoma** (contact: deusishe@yahoo.com)
National Institute for Medical Research (NIMR), United Republic of Tanzania
East African Consortium for Clinical Research (EACCR), United Republic of Tanzania
- **Martha Lemnge**
National Institute for Medical Research (NIMR), United Republic of Tanzania
- **Celine Mandara**
National Institute for Medical Research (NIMR), United Republic of Tanzania

1168-PF-GH-AMENGA-ETEGO-SM

Genomic surveillance of *Plasmodium falciparum* in the Kassena-Nankana Districts, Ghana

In the Kassena-Nankana Districts (KNDs) malaria is highly endemic with marked seasonal variation in transmission intensity. The high transmission season coincides with the rainy season, which is from July to October and low transmission season is from November through June. Malaria accounts for about 40% of out-patient attendance in health facilities across these districts. About 97% of malaria infections are caused by *Plasmodium falciparum* whilst 3% are mixed infections of *P. falciparum* and *Plasmodium malariae*. The dominant malaria vector in this area is *Anopheles gambiae* (80%) with secondary transmission by *Anopheles funestus* (20%). Previous case-control studies of severe malaria reported severe malarial anaemia as the most prevalent phenotype in this region. However, recent hospital data shows an upsurge in cerebral malaria cases. This has been attributed to interventions such as Indoor Residual Spraying, which was conducted across this area in 2014 and the effect of long lasting insecticidal bednets. The current alternative first-line treatments for uncomplicated malaria in Ghana include Artesunate-Amodiaquine, Artemether-Lumefantrine and Dihydroartemisinin-Piperaquine. Several antimalarial drug trials have previously been conducted in the KNDs. However, more recently malaria parasite surveillance studies have been carried out across these locations in the KNDs. Therefore, the SpotMalaria project is an opportunity to build upon these surveillance studies and expand existing malaria surveillance datasets from the four selected locations in the KNDs. The expanded data will then offer the opportunity for location specific profiling of anti-malarial drug resistance. In addition, the data can be used to track seasonal profiles of anti-malarial drug resistance genes in this area of marked seasonality in malaria transmission. Locations have been carefully chosen to enable the analysis of markers of geographical differentiation.

Key people:

- **Lucas Amenga-Etego** (contact: lucasmenga@gmail.com)
West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana
Navrongo Health Research Centre, Ghana Health Service, Navrongo, Ghana
- **Abraham Oduro**
Navrongo Health Research Centre, Ghana Health Service, Navrongo, Ghana
- **Abraham Hodgson**
Ghana Health Service, Ministry of Health, Ghana

1169-PF-CO-CORREDOR

Using genomic sequencing to diminish the malaria burden in the Pacific coast of Colombia

This study aims to use genome-wide sequencing to establish the structure of *Plasmodium* populations in an endemic area of low malaria transmission with occasional outbreaks, in the Pacific region of Colombia, and analyse the emergence, dissemination, and frequency changes of antimalarial drug resistance genotypes, the connectivity between parasite populations, and the way epidemiologic and demographic variables affect some of the parasite's genetic properties. Patterns of malaria transmission and parasite molecular information allow to characterise spatial malaria transmission units to inform malaria control programmes.

Key people:

- **Vladimir Corredor** (vcorredore@unal.edu.co)
National University of Colombia, Colombia
- **Julian C Rayner**
Cambridge Institute for Medical Research, University of Cambridge, Cambridge,
UK

1180-PF-TRAC2-DONDORP

Tracking Artemisinin Resistance Collaboration (TRAC II) with SpotMalaria

A multi-centre, open-label randomized trial to assess the efficacy, safety and tolerability of Triple Artemisinin-based Combination Therapies (TACTs) compared to Artemisinin-based Combination Therapies (ACTs) in uncomplicated falciparum malaria and to map the geographical spread of artemisinin and partner drug resistance. Samples submitted in this study are dried blood spots.

Key people:

- **Arjen Dondorp** (contact: arjen@tropmedres.ac)
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Rob van der Pluijm**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Mehul Dhorda**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
WorldWide Antimalarial Resistance Network – Asia Regional Centre, Thailand

1181-PF-VN-THUYNHIEEN

Monitoring the susceptibility of *Plasmodium falciparum* to antimalarial drugs in malaria endemic areas in southern Vietnam

Routine monitoring of the efficacy of anti-malarial drugs used is necessary for effective case management, early detection of drug resistance and to provide background information for the development and evaluation of drug policies. In parallel with yearly clinical monitoring the susceptibility of *Plasmodium falciparum* to current ACT used in Vietnam, the study aims to investigate the molecular markers (to artemisinin and partner drugs) and using them to support the early detection of drug resistance - one of the actions required in dealing with the emergence and possible spread of *P. falciparum* resistance.

Key people:

- **Thuy-Nhien Nguyen** (contact: nhienntt@oucru.org)
Oxford University Clinical Research Unit (OUCRU), Vietnam
Centre for Tropical Medicine and Global Health, Oxford University, UK
- **Tran Tinh Hien**
Oxford University Clinical Research Unit (OUCRU), Vietnam
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Tuyen Nguyen Thi Kim**
Oxford University Clinical Research Unit (OUCRU), Vietnam
- **Ngo Viet Thanh**
Oxford University Clinical Research Unit (OUCRU), Vietnam

1182-PF-GM-DALESSANDRO-SM

Understanding the determinants of malaria heterogeneity and the spatial and temporal spread of malaria in The Gambia

In terms of malaria prevalence, The Gambia can be divided into two strata: low prevalence in the western part and relatively high prevalence in the eastern part. Nevertheless, within these two strata, prevalence can vary substantially by village. Transmission is seasonal (August-December) and the country aims at reaching the pre-elimination status by 2018. Coverage of interventions (LLIN, IRS, IPTp, SMC) is apparently good. Nevertheless, there is still some residual transmission that in the eastern part is moderate to high during the period August-December. Samples contributed are from clinical and asymptomatic infections from communities in the east, central and west of The Gambia. The overall objective is to understand the determinants of malaria heterogeneity and the spatial and temporal spread of malaria infections. This project is characterising the human reservoir of infection in a cohort of 4,300 individuals across six sites in the Gambia. It has implemented two rounds of mass drug administration with dihydroartemisinin-piperaquine. Blood samples (dried blood spots) are collected monthly from all residents in the study villages between June and December. Passive detection of clinical malaria cases among the study population is done at the local health facilities. Genotyping of parasites in samples collected from these patients will be analysed for relatedness and gene flow between villages. The fine scale resolution of parasite population structure found among clinical and asymptomatic carriers of infection is targeted.

Key people:

- **Alfred Amambua-Ngwa** (contact: angwa@mrc.gm)
Medical Research Council Unit The Gambia at the London School of Hygiene and Tropical Medicine, The Gambia
Wellcome Sanger Institute, UK
- **Umberto D'Alessandro**

Medical Research Council Unit The Gambia at the London School of Hygiene and
Tropical Medicine, The Gambia

1183-PF-GH-AWANDARE-SM

Alternative mechanisms for erythrocyte invasion by *Plasmodium falciparum*

This study looks at samples collected from two sites in Ghana. The first is Lekma Hospital, Teshie, Accra; near the coast, an eastern suburb of Accra. Malaria transmission in Teshie is lower than at the other sites previously sampled in Ghana, such as Kintampo and Navrongo. The second is the municipal hospital at Hohoe in the Volta Region of Ghana, this is within a malaria endemic area with two seasonal peaks, a major wet season April to July and a minor one from September to November. Samples were also collected in Lagos State, Nigeria. The state has stable perennial but seasonal malaria transmission with high transmission in the wet season (April to October) and low transmission in the dry season (November to March).

Key people:

- **Gordon Awandare** (contact: gawandare@ug.edu.gh)
West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana
- **Collins Morang'a**
West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana
- **Wellington Aghoghovwia Oyibo**
College of Medicine, University of Lagos, Nigeria
- **Ifeyinwa Aniebo**
Health Strategy and Delivery Foundation, Lagos, Nigeria
- **Felix Ansah**
West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana, Legon, Ghana
- **David Conway**
London School of Hygiene and Tropical Medicine, UK
- **Lucas Amenga-Etego**

West African Centre for Cell Biology of Infectious Pathogens (WACCBIP),
University of Ghana

1185-PF-KH-KYLE

Ancient Western Cambodian Plasmodium falciparum isolates

One difficulty in understanding the epidemiology of drug resistance in Cambodia is that we have little notion of what an “original” Western Cambodian parasite looked like, before the founder populations emerged. Five CB parasites have been identified that were collected around 1992-1993. The Dutch Marines were in Sok San from June 1992 through November 1993⁽¹⁾. This is the period they started seeing high levels of mefloquine resistance emerge. These samples are all resistant to chloroquine, mefloquine and quinine. Further phenotyping is underway and these data will be shared. Five cryopreserved samples collected in the course of an earlier study were revived and placed in culture in Dennis Kyle's lab. DNA extracted from these samples was processed through WGS at Wellcome Sanger Institute. The sequences will be analysed to compare these genomes to those of current parasites from Cambodia and its neighbouring countries. Through the analysis of haplotypes and ancestry we hope to be able to reconstruct a model for the emergence of resistance to antimalarials in this region.

1. Hopperus Buma AP, van Thiel PP, Lobel HO, Ohrt C, van Ameijden EJ, Veltink RL, Tendeloo DC, van Gool T, Green MD, Todd GD, Kyle DE, Kager PA. 1996. Long-term malaria chemoprophylaxis with mefloquine in Dutch marines in Cambodia. *J Infect Dis.* 173(6):1506-9. <https://doi.org/10.1093/infdis/173.6.1506>

Key people:

- **Dennis Kyle** (contact: dennis.kyle@uga.edu)
University of South Florida, USA
University of Georgia, USA
- **Amanda Hott**
University of South Florida, USA

1192-PF-ML-FAIRHURST-SM

Genomic surveillance of *Plasmodium falciparum* in Mali

This study collected *Plasmodium falciparum* dried blood spot samples in Mali for genomic sequencing between 2016 and 2018.

Key people:

- **Thomas E Wellems** (contact: twellems@niaid.nih.gov)
National Institute of Allergy and Infectious Diseases (NIAID), NIH, USA
- **Chanaki Amaratunga**
National Institute of Allergy and Infectious Diseases (NIAID), NIH , USA
- **Mahamadou Diakite**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
University Clinical Research Center (UCRC), Mali

1195-PF-TRAC2-DONDORP

Tracking Artemisinin Resistance Collaboration (TRAC II)

A multi-centre, open-label randomised trial to assess the efficacy, safety and tolerability of Triple Artemisinin-based Combination Therapies (TACTs) compared to Artemisinin-based Combination Therapies (ACTs) in uncomplicated falciparum malaria and to map the geographical spread of artemisinin and partner drug resistance. Samples submitted in this study are extracted *Plasmodium falciparum* DNA.

Key people:

- **Arjen Dondorp** (contact: arjen@tropmedres.ac)
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
- **Rob van der Pluijm**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand

1197-PF-ML-DIAKITE-SM

Multidisciplinary research for malaria control and prevention in Mali

This study looked at different field sites in Mali representing three different major eco-zones across West Africa that are different with regard to endemicity and current implementation of control strategies: (a) Dangassa and Kenieroba (rural field sites along the river Niger), where malaria has been found to be stable over the past five years and water stands from June to December/January. (b) Dioro, and Selingue are irrigated sites in the inland delta region of the Niger River, where in Dangassa a sharp rebound of malaria was observed after withdrawal of 10 years of malaria control interventions initiated by the Millennium Challenge Project. (c) The town of Niore du Sahel located in the dry Sahelian zone of northwestern Mali where relatively high prevalence of malaria was found in pregnant women in a low endemic malaria context. (d) The District of Koulikoro where indoor residual spraying has been implemented for more than eight years and where increased insecticide resistance has been reported.

Key people:

- **Mahamadou Diakite** (mdiakite@icermali.org)
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
University Clinical Research Center (UCRC), Mali
- **Seydou Doumbia**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
- **Drissa Konate**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
- **Mahamoudou Toure**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

- **Sekou F. Traore**

Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

- **Merepen dite Agnes Guindo**

Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

1198-PF-METF-NOSTEN

Malaria Elimination Task Force

The objectives of this programme were to scale-up the targeted mass drug administration strategy regionally, and measure its effect on the incidence of clinical malaria in eastern Karen/Kayin state, Myanmar, a difficult-to-access hilly and forested area with complex political and geographical landscapes, where malaria transmission is seasonal and where artemisinin resistant *Plasmodium falciparum* is prevalent.

Key people:

- **Francois Nosten** (contact: francois@tropmedres.ac)
Centre for Tropical Medicine and Global Health, Nuffield Department of Medicine
Research building, University of Oxford Old Road campus, Oxford, UK
Shoklo Malaria Research Unit, Mahidol-Oxford Tropical Medicine Research Unit,
Faculty of Tropical Medicine, Mahidol University, Mae Sot, Thailand
- **Aung Myint Thu**
Shoklo Malaria Research Unit, Mahidol-Oxford Tropical Medicine Research Unit,
Faculty of Tropical Medicine, Mahidol University, Mae Sot, Thailand

1199-PF-ML-LAWNICZAK

Developing SpotMalaria with partners in Mali

A small number of *Plasmodium falciparum* samples collected in Mali that were contributed to support the set-up of the SpotMalaria platform.

Key people:

- **Mara Lawniczak** (mara@sanger.ac.uk)
Wellcome Sanger Institute, UK
- **Abdoulaye Djimde**
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali
- **Arthur Talman**
MIVEGEC, Université de Montpellier, IRD, CNRS, Montpellier, France

1200-PF-GH-MAIGA-SM

Genomic surveillance of *Plasmodium falciparum* in the Ashanti region of Ghana

This study collected *Plasmodium falciparum* samples in the Ashanti region of Ghana for genomic sequencing.

Key people:

- **Oumou Maïga-Ascofaré** (contact: maiga@bnitm.de)
Bernhard Nocht Institute for Tropical Medicine, Germany
Research in Tropical Medicine, Kwame Nkrumah University of Sciences and Technology, Kumasi, Ghana
Malaria Research and Training Centre, University of Science, Techniques and Technologies of Bamako, Mali

1207-PF-KH-CNM-GENRE

Integrating genetic epidemiology as an intensified surveillance tool into the National Center for Parasitology Entomology and Malaria Control of Cambodia

Genetic surveillance project conducted by the National Malaria Control Programme in partnership with GenRe-Mekong in endemic regions of Cambodia. This is part of a large project of genetic surveillance of malaria in the Greater Mekong Subregion, funded by the Bill and Melinda Gates Foundation. Dried blood spot (DBS) samples are to be collected along with short surveys on patient demographics and population movement from every confirmed case of *Plasmodium falciparum* and/or *Plasmodium vivax* malaria presenting at public health facilities. The aim is to determine the prevalence and geographic distribution of antimalarial drug resistance-linked genetic mutations, as well as the genetic structure of the parasite population, likely routes of gene flow between populations, and geographic origins of parasites.

Key people:

- **Huch Cheah** (contact: huch.cnm@gmail.com)
National Center for Parasitology, Entomology and Malaria Control, Cambodia
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Richard Maude**
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
Harvard TH Chan School of Public Health, Harvard University, Boston, USA

1208-PF-LA-CMPE-GENRE

Genetic epidemiology of *Plasmodium falciparum* malaria and associated antimalarial drug resistance in Lao PDR

Genetic surveillance project conducted by the National Malaria Control Programme in partnership with GenRe-Mekong in endemic region of the Lao PDR. This is part of a large project of genetic surveillance of malaria in the Greater Mekong Subregion, funded by the Bill and Melinda Gates Foundation. Dried blood spot (DBS) samples are to be collected along with short surveys on patient demographics and population movement from every confirmed case of *Plasmodium falciparum* and/or *Plasmodium vivax* malaria presenting at public health facilities. The aim is to determine the prevalence and geographic distribution of antimalarial drug resistance-linked genetic mutations, as well as the genetic structure of the parasite population, likely routes of gene flow between populations, and geographic origins of parasites.

Key people:

- **Mayfong Mayxay** (contact: mayfong@tropmedres.ac)
Lao-Oxford-Mahosot Hospital-Wellcome Trust Research Unit (LOMWRU),
Vientiane, Lao PDR
Institute of Research and Education Development (IRED), University of Health
Sciences, Ministry of Health, Vientiane, Lao PDR
- **Keobouphaphone Chindavongsa**
Center of Malariology, Parasitology and Entomology (CMPE), Lao PDR
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Richard Maude**
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
Harvard TH Chan School of Public Health, Harvard University, Boston, USA

1209-PF-VN-IMPEQN-GENRE

Genetic epidemiology of *Plasmodium falciparum* malaria and associated antimalarial drug resistance in Central Vietnam

Genetic surveillance project conducted by the National Malaria Control Programme in partnership with GenRe-Mekong in endemic region of Vietnam. This is part of a large project of genetic surveillance of malaria in the Greater Mekong Subregion, funded by the Bill and Melinda Gates Foundation. Dried blood spot (DBS) samples are to be collected along with short surveys on patient demographics and population movement from every confirmed case of *Plasmodium falciparum* and/or *Plasmodium vivax* malaria presenting at public health facilities. The aim is to determine the prevalence and geographic distribution of antimalarial drug resistance-linked genetic mutations, as well as the genetic structure of the parasite population, likely routes of gene flow between populations, and geographic origins of parasites.

Key people:

- **Thuy-Nhien Nguyen** (nhienntt@oucru.org)
Oxford University Clinical Research Unit (OUCRU), Vietnam
Centre for Tropical Medicine and Global Health, Oxford University, UK
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Huynh Hong Quang**
Institute of Malariology, Parasitology, and Entomology (IMPE) Quy Nhon,
Ministry of Health, Vietnam

1223-PF-MZ-ROSANAS-URGELL

Evaluation of intermittent preventive treatment during pregnancy (IPTp) in Chókwè district, Southern Mozambique (acronym IPTpCHOKWE)

Malaria during pregnancy is an important cause of maternal and fetal morbidity and mortality. In compliance with WHO recommendations, Mozambique introduced intermittent preventive treatment with Sulfadoxine/Pyrimethamine (IPTp-SP) as standard of care for malaria control in pregnant women in 2006. However, the proportion of pregnant women who benefit from this program is still low and there is poor adherence to the adequate IPTp-SP regimen, particularly in rural communities. Careful investigations for better implementation and approaches targeting specifically the rural population are needed. The aim of this project is to contribute to the efforts towards malaria control by assessing the coverage of IPTp-SP and its effect on malaria outcomes, SP-resistance and gametocyte carriage in Chókwé district, Gaza Province, Southern Mozambique.

Key people:

- **Anna Rosanas-Urgell** (contact: arosanas@itg.be)
Institute of Tropical Medicine Antwerp, Belgium
- **Paulo Arnaldo**
Instituto Nacional de Saúde (INS), Mozambique
- **Sonia Maria Mauricio Enosse**
National Institute of Health (INS), Mozambique

1224-PF-VN-ROSANAS-URGELL

Identification of molecular mechanisms of ACT treatment failure in Vietnam

This study is a country-wide retrospective analysis of molecular markers with potential impact on resistance before and after ACT introduction (18-year period).

Key people:

- **Anna Rosanas-Urgell** (arosanas@itg.be)
Institute of Tropical Medicine Antwerp, Belgium
- **Eduard Rovira-Vallbona**
Institute of Tropical Medicine in Antwerp (ITM), Belgium
- **Hong Nguyen Van**
National Institute of Malariology, Parasitology and Entomology (NIMPE), Vietnam

1233-PF-PG-MITA

Epidemiology of *kelch13* mutants in Papua New Guinea

The spread of artemisinin-resistant *kelch13* mutants in Southeast Asia (in particular the prevalent C580Y strain) gives cause of concern in view of the possibility these strains may migrate to neighbouring regions, such as India, Indonesia and Papua New Guinea (PNG). The recent discovery of three patients infected with C580Y parasites in PNG raises alarm bells, and important questions such as whether these are recently imported strains, or whether they have been circulating for a long time, and whether they have a common origin with strains in SE Asia. In the future, we wish to monitor this population to determine whether it becomes more prevalent due to selection.

Key people:

- **Toshihiro Mita** (contact: tmita@juntendo.ac.jp)
Juntendo University, Japan
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Francis Hombhanje**
Centre for Health Research & Diagnostics, Divine Word University, Madang,
Papua New Guinea

1238-PF-VN-NIMPE-GENRE

Research on malaria molecular and genomic epidemiology in all drug-resistance regions of Vietnam: case-control research on the risk factors

Genetic surveillance project conducted by the National Malaria Control Programme in partnership with GenRe-Mekong in endemic regions of Vietnam. The study aimed to determine risk factors for catching malaria in high endemic areas of Vietnam, including travel, to identify where people were likely being infected and determine how much antimalarial drug resistance there is. Dried blood spot (DBS) samples were collected along with surveys on potential risk factors from every confirmed case of *Plasmodium falciparum* and/or *Plasmodium vivax* malaria presenting at public health facilities. The aims of the genetic analysis were to determine the prevalence and geographic distribution of antimalarial drug resistance-linked genetic mutations, as well as the genetic structure of the parasite population, likely routes of gene flow between populations, and geographic origins of parasites.

Key people:

- **Thuy-Nhien Nguyen** (nhienntt@oucru.org)
Oxford University Clinical Research Unit (OUCRU), Vietnam
Centre for Tropical Medicine and Global Health, Oxford University, UK
- **Olivo Miotto**
Mahidol Oxford Tropical Medicine Research Unit (MORU), Thailand
- **Thang Ngo Duc**
National Institute of Malariology, Parasitology and Entomology (NIMPE), Vietnam
- **Richard Maude**
Mahidol-Oxford Tropical Medicine Research Unit (MORU), Thailand
Centre for Tropical Medicine and Global Health, University of Oxford, UK
Harvard TH Chan School of Public Health, Harvard University, Boston, USA

1241-PF-GH-ANINAGYEI

Viability and pathogenicity of *Plasmodium* spp in infected blood donor units and immunological and genetic markers associated with malaria infections

The main aim of the study shall be to determine the viability and the pathogenicity of *Plasmodium falciparum* in donor blood units during storage under standard conditions (2-8°C). Specifically, the study has been designed to achieve these objectives; (1) To determine the microscopic, serological and genomic prevalence of asymptomatic *Plasmodium* spp and their associated predictive risk factors among voluntary blood donors. (2) To determine the viability, pathogenicity and the transmission potential of *Plasmodium falciparum* in donor blood units during the entire period storage under standard conditions. (3) To determine the synonymous and non-synonymous single nucleotide polymorphisms in the parasite genomes and their association with symptomatic and asymptomatic infections. (4) To assess the magnitude of various drug resistance malaria parasites in Ghana. (5) To assess the efficacy of available anti-malaria drugs on various falciparum variants in Ghana

Key people:

- **Enoch Aninagyei** (contact: eaninagyei@uhas.edu.gh)
Department of Biomedical Sciences, School of Basic and Biomedical Sciences,
University of Health & Allied Sciences, Ho, Ghana
- **Desmond Omane Acheampong**
Department of Biomedical Sciences, School of Allied Health Sciences, University
of Cape Coast, Cape Coast, Ghana

1247-PF-SD-HAMID-SM

Surveillance of antimalarial drug resistance related genes in *Plasmodium falciparum* in Sudan

This is a cross sectional and screening study to determine the prevalence of drug resistant alleles in Sudanese *Plasmodium falciparum* field isolates which has been collected from different areas in Sudan from 2017-2018. Febrile patients (>37.5 °C) positive microscopy and RDT for *P. falciparum* were consented and enrolled in the study. Blood samples were spotted on Whatman 3 filter papers and labelled separately. Nested PCR based on rDNA detected was performed to confirm the species. *P. falciparum* multi-drug resistant genes are sought for samples collected during the 2018-2019 malaria season from different endemic areas in Sudan.

Key people:

- **Muzamil Mahdi Abdel Hamid** (contact: mahdi@iend.org)
Institute of Endemic Diseases, University of Khartoum, Sudan
- **Mohamed Hassan Abdelraheem**
Institute of Endemic Diseases, University of Khartoum, Sudan
Nuclear Applications In Biological Sciences, Sudan Atomic Energy Commission,
Khartoum, Sudan
- **Maazza Hussien**
Institute of Endemic Diseases, University of Khartoum, Sudan
- **Abdelrahim Osman Mohamed**
Faculty of Medicine, University of Khartoum, Sudan