

Emergency Standby Treatment for Malaria

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About Malaria

- Malaria is a disease that can be fatal within a few days. The most serious form of malaria can start to cause illness 7 days or more after arriving in a malarious area and up to a year (especially the first 3 months) after leaving.
- Preventive anti-malarial tablets are important when you are at high risk, but are never 100% effective. Break through attacks may occur.
- Emergency standby treatment is recommended for travellers taking prophylaxis and going to remote places, unlikely to be within 24 hours reach of a doctor.

The symptoms

- **Malaria almost always starts with fever or “flu” like illness.**
- The illness usually begins with marked shivering, fever and sweating. Muscle pains, headache and vomiting are common and diarrhoea or cough may also occur.
- Untreated malaria can rapidly progress to severe malaria with confusion, drowsiness and coma, jaundice (a yellow colour first seen in the white of your eyes), breathing difficulties and collapse.
- If you have developed a fever of 38°C or more, with or without any of the other symptoms listed above, you should assume it is malaria unless proved otherwise. If you are unable to get to a doctor with malaria blood testing facilities within 12 hours, then you should start your emergency standby treatment, but continue to try to reach a doctor as soon as possible. This is to ensure that your treatment has been adequate and that no other illness is involved.

Emergency standby treatment

The drug prescribed for emergency treatment should be a different drug to that being used for prophylaxis. None of the drugs are licensed for use as standby emergency treatment. There are different options for standby treatment in adults.

Option One: Malarone® (a fixed combination of atovaquone and proguanil hydrochloride)

Dose for adults:

4 adult tablets given as a single dose daily for 3 consecutive days

Doses for children:

Body Weight	Malarone – dose	
11-20 kgs	250mg/100mg	1 adult tablet daily for 3 days
21-30 kgs	500mg/200mg	2 adult tablets (as a single dose) daily for 3 days
31-40 kgs	750mg/300mg	3 adult tablets (as a single dose) daily for 3 days
>40 kgs	1g/400mg	4 adult tablets (as a single dose) daily for 3 days

The most common adverse effects reported in people using Malarone® for prophylaxis or treatment are abdominal pain, nausea, vomiting, and headache.

Option Two: Riamet® (Co-artemether, a fixed combination of artemether and lumefantrine)

Dose for adults and children over 12 years, with body weight over 35kg:

A total of 24 tablets over 60 hours. 4 tablets initially followed by 5 further doses of 4 tablets. These should be taken at 8, 24, 36, 48 and finally 60 hours after the first dose. Tablets should be taken with food.

The side effects may include abdominal pain, nausea, diarrhoea, headache and muscle pain, cough and headache.

It should **not** be prescribed for those with a history of heart arrhythmias or heart failure, if a woman is breastfeeding, or if there is a family history of sudden death or congenital QT interval prolongation.

Allow plenty of time for obtaining **Riamet®**. It is a prescription only medicine, so you will need to take a prescription to the pharmacy. It is not a drug that will usually be kept in stock by a Pharmacist, so you need to allow them time to get the drug from the manufacturer.

- Resume antimalarial tablets 7 days after the first treatment dose unless malaria treatment is still being taken, when antimalarials should be resumed after the end of treatment

How to take your 'Emergency Standby Medication'

- First take medication (usually Paracetamol) to lower your fever. Then, without delay, take the first dose of your emergency standby antimalarial medication. Stop your regular malaria prevention whilst taking standby medication.
- If you vomit within 30 minutes of taking the antimalarial drugs, repeat the first dose of them (but **do not** repeat the Paracetamol).
- If you vomit 30-60 minutes after the first dose, repeat the treatment, but take only **HALF the first dose.**
- Continue the treatment as instructed.
- Resume your regular preventative antimalarial tablets 7 days after the first treatment dose, unless malaria treatment is still being taken, when antimalarials should be resumed after the end of treatment.

Remember:

- To take a thermometer on holiday with you (usually malaria causes a fever of 38° C or more)
- If the illness has started less than 7 days after entering a malaria area for the first time, then it **isn't** malaria
- That it is usually safer to take treatment unnecessarily than risk becoming seriously ill when no medical facilities are available