

# Malaria, mosquitoes and other insect bites

**Malaria** is a very common illness in many parts of the world. The disease is caught from infected mosquitoes. The main symptom of malaria is usually a fever. It can be a serious, sometimes fatal illness.

The mosquitoes that carry malaria (and Japanese encephalitis), bite from dusk till dawn. However, other mosquitoes that bite during the day can transmit other serious diseases such as **yellow fever** and **dengue fever**.

There is an effective vaccine against yellow fever however, for dengue fever, mosquito bite prevention is the only method of reducing the risk of infection.

## Preventing bites

- Wear loose long sleeved tops and trousers (mosquitoes are attracted to dark clothes)
- Apply mosquito repellent containing **DEET 30-50%** to exposed skin - applied over sun cream.
- DEET containing repellent of no more than 50% can be used on small areas of children's skin, but should be avoided altogether in babies under 2 months of age.
- Alternative non-DEET containing repellents such as Mosiguard™ or Expedition Natural™ (both of which are eucalyptus based products) or Autan™ can be used on children and adults if preferred - see the manufacturer's instructions.
- If pregnant, DEET up to 50% strength may be used sparingly. Discuss this with a travel health advisor.
- For extra protection consider using a clothing treatment such as Bugproof® which contains an insecticide called permethrin.

- Accommodation should be screened or air conditioned otherwise sleep under a permethrin treated mosquito net.
- **Remember** some older mosquito nets need treating with permethrin at least every 6 months depending on the way they are used. The Long Lasting Impregnated (LLI) mosquito nets supplied in the clinic may require retreating with permethrin insecticide after 2-3 years. Consider using mosquito coils, electrical insecticide dispensers or 'knock down' sprays.

**A selection of repellents and mosquito nets can be bought at clinic reception.**

## Anti-malarial tablets

The type of anti-malarial tablet you require depends on the area visited. You must start taking your tablets as instructed before travel, while at risk and for a specified period after you leave the malaria risk area.

No anti-malarial tablet is 100% effective, therefore if you develop a **fever, flu like illness or diarrhoea** 7 or more days after arriving in a malaria risk area or within a year of your return it is **strongly advised** that you:

- Contact a doctor at once (within 24 hours)
- Inform the doctor that you have visited a malaria risk area
- Have a blood test for malaria on the same day