Chloroquine and Proguanil Malaria Prophylaxis

Liverpool School of Tropical Medicine



CHLOROQUINE

Adult dose is 2 tablets taken once weekly. Other name Avloclor (155mg base).

Child dosage of Chloroquine is according to weight. Chloroquine is available in a liquid form from a chemist.

Chloroquine is unsuitable if you have:

- Had epilepsy or fits, now or in the past
- Psoriasis
- Certain eye problems e.g. retinopathy
- A blood condition called porphyria
- Myasthenia gravis
- An allergy to Chloroquine or related products e.g.
 Quinine
- Caution is necessary if you have kidney or liver problems

Drug interactions include: amiodarone, zyban® ciclosporin, praziquantel, cimetidine, antacids, kaolin, digoxin, moxifloxacin, neostigmine, pyridostigmine, lanthanum, agalsidase alpha and beta and hydroxychloroquine, other antimalarials, intradermal rabies vaccine, oral typhoid vaccine. All drugs that prolong the QT interval. This list is not exhaustive so please check with a doctor or nurse for possible interactions with chloroquine and your current medication.

Side effects: Gastro-intestinal symptoms e.g. nausea, vomiting and stomach upset. There is also the possibility of headaches, fitting and blurred vision. It may cause itching in people of African descent. Chloroquine is highly toxic in overdosage. Please seek medical advice if you take too many tablets and keep out of the reach of children. Chloroquine is considered safe in long term use.

PROGUANIL

Adult dose is 2 tablets (200mg total) taken daily. Other name Paludrine.

Child dosage of Proguanil is according to weight

Proguanil is unsuitable if you have:

- If you are pregnant or trying for a baby, and taking Proguanil, it is advised to take folic acid 5 mg daily (prescription required)
- Caution with some kidney problems
- Unsuitable if allergic to Proguanil

Drug interactions include: warfarin, antacids, pyrimethamine and other antimalarials, drugs used to treat HIV and live oral typhoid vaccine. This list is not exhaustive so please check with a doctor or nurse for possible interactions with proguanil and your current medication.

Side effects include: mild nausea, stomach upset and diarrhoea. Occasionally mouth ulcers, skin reactions and hair loss.

Further information:

- Chloroquine and Proguanil are not usually recommended for travel to sub-Saharan Africa.
- If you are unable to tolerate Chloroquine or Proguanil you should change to a suitable alternative drug for malaria prevention.

No antimalaria tablet is 100% effective, careful mosquito bite preventions are important. If you have any flu like illness or fever a week after arriving in a malarious area and for up to 1 year later, it is important to seek medical advice and a blood test obtained urgently the same day.

Commence Chloroquine and/or Proguanil 1 week before going to a malarious area and continue whilst there and for 4 weeks after leaving. Considered safe for long term use. Eye examinations every 6-12 months are recommended after six years use of Chloroquine due to low risk of retinopathy.

No antimalarial drug is 100% effective, careful anti-mosquito bite measures are essential. You should use a mosquito net and an effective repellent to avoid getting bitten. A selection of repellents and mosquito nets can be bought at clinic reception.

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