

User friendly reference guide to some key facts on malaria chemoprophylaxis

Very Important: refer to UK Malaria Guidelines- see below for details, BNF & Summary of Product Characteristics (found at www.medicines.org.uk) for further details, especially on contra-indications, caution in use, special notes, precautions and less common side effects for all drugs. © Jane Chiodini – Updated October 2015

Generic Name	Chloroquine	Proguanil	Mefloquine	Doxycycline	Atovaquone / Proguanil
Trade Name	Avloclor® (AstraZeneca UK Ltd.)	Paludrine® (AstraZeneca UK Ltd.)	Lariam® (Roche Products Ltd.)	Doxycycline (non-proprietary) Vibramycin® (Pfizer Ltd.)	Malarone TM (GlaxoSmithKline UK) Atovaquone/proguanil (non-proprietary)
Available forms	Tablets	Tablet only	Tablet only	Capsules, Vibramycin also in dispersible tablet form	Tablet only (Paediatric dose tablets available for those 40 kgs in weight and lower)
Most common side effects (but see SPC for more detail)	Gastrointestinal disturbances and headache	Mild gastric intolerance and diarrhoea. Occasional mouth ulcers & stomatitis	Gastrointestinal disturbances Headache Loss of balance, dizziness	Gastrointestinal disturbances Vaginal candidiasis Oesophagitis (unless taken correctly)	Headache Abdominal pain Diarrhoea
Dosage and administration	310 mgs base (2 tablets) weekly	200mg daily (2 tablets)	250mg (1 tablet) weekly	100mg (1 capsule) daily Take capsules after food in an upright position, do not lie down afterwards for at least 30 minutes but see dosage change for those on some anticonvulsant drugs on pg 59 of 2015 malaria guidelines	Combined tablet of atovaquone / proguanil (1 tablet) taken daily with food or milky drink at the same time each day. Paediatric tablets given for persons 11 - 40 kgs in weight however new malaria guidelines discuss use from 5kgs [off license] in special circumstances.
	Refer to UK Malaria Guidelines or current BNF for child doses for these prophylactic antimalarials – useful charts are in the UK Malaria Guidelines – pages 36-38. Weight better guide in decision of doses than age in children over six months of age.				
Commencement of medication	1 week before entering malarious area	1 week before entering malarious area	2-3 weeks before entering malarious area	1 or 2 days before entering malarious area.	1 or 2 days before entering the malarious area
Duration of course	All time in malarious area and for 4 weeks after leaving on same day each week	All time in malarious area and for 4 weeks after leaving	All time in malarious area and for 4 weeks after leaving. Take on the same day of the week each time.	All time in malarious area and for 4 weeks after leaving	New SPC August 2012 states 'continue taking during period of stay' in malarious area and for 7 days after leaving malarious area
Duration of prescribing	Several years- seek specialist advice & see UK malaria guidelines – pg 78	As for chloroquine	Up to one year under licence but UK malaria guidelines suggest up to three years in the absence of side effects	No details now on Vibramycin SPC. Long term guidelines suggest two years	New SPC, no length of time stated. New Malaria guidelines state 'can be used confidently for travel up to one year'. See page 78 of Guidelines for more info.
Prescribing information	Available OTC for malaria chemoprophylaxis	Available OTC for malaria chemoprophylaxis	Available only on private prescription. Local policy may vary.	Available only on private prescription. Local policy may vary.	Available only on private prescription. Local policy may vary.

Guidelines for malaria prevention in travellers from the UK 2015, access via <http://goo.gl/nw17UH> or <http://www.janechiodini.co.uk/news/help/malaria/>

Malaria Reference Laboratory for Health Professionals fax line for complex queries – fill out form on website above where details of fax number given. www.malaria-reference.co.uk