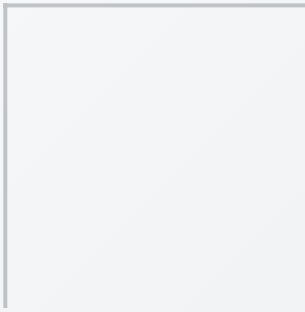




STANDARD OPERATING PROCEDURE

Management of Uncomplicated Mixed Malaria

Special Region (1)

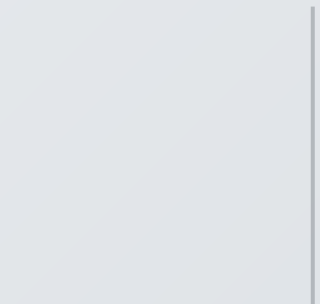
Union of Myanmar

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1. Introduction

In Myanmar, mixed *Plasmodium falciparum* (Pf) and *Plasmodium vivax* (Pv) infection without features of severe malaria is termed as uncomplicated mixed malaria infection. On rapid diagnostic test kit, mixed malaria can be seen as (Pf+ and Pv+) or (Pf+ or Pan+).

2. Recommended Treatment

Mixed malaria	Dihydroartemisinin + Piperaquine Or Artemether + Lumefantrine	Primaquine
Followed by primaquine for radical cure		

3. Dihydroartemisinin/Piperaquine (DHA/PPQ) (40/320mg)

DHA/PPQ for 3 days followed by primaquine for 7-14 days (total duration is 10-17 days to complete the treatment).

	Body weight	Dosage and duration
DHA/PPQ	36 to < 60 kg	3 tab 40/320 mg OD on D1, D2, D3
	60 to < 80 kg	4 tab 40/320 mg OD on D1, D2, D3
	>80 kg	5 tab 40/320 mg OD on D1, D2, D3
Primaquine 7.5 mg (after completion of DHA/PPQ): 0.25 mg/kg/day OD or 15 mg OD for 14 days (if G6PD deficiency cannot be screened); 1 mg/kg/day OD for 7 days (if G6PD deficiency can be excluded)		

4. Artemether/Lumefantrine (AL) (20mg/120mg)

AL for 3 days followed by primaquine for 7-14 days (total duration is 10-17 days to complete the treatment).

	Body weight	Dosage and duration
AL	15 to <25 kg	2 tab BD on D1, D2, D3
	25 to <35 kg	3 tab BD on D1, D2, D3
	>35 kg	4 tab BD on D1, D2, D3
Primaquine 7.5 mg (after completion of AL): 0.25 mg/kg/day OD or 15 mg OD for 14 days (if G6PD deficiency cannot be screened); 1 mg/kg/day OD for 7 days (if G6PD deficiency can be excluded)		

5. Notes

- Bodyweight-based dosage regimen is preferable to non-body weight-based dosage regimen.
- **Contraindication for primaquine:** Pregnant women, infants aged < 6 months, women breastfeeding older infants unless they are known not to be G6PD deficient, and people with G6PD deficiency.

6. Severe Features of Malaria

- Impaired consciousness: GCS < 11
- Multiple convulsions: More than two episodes within 24 h
- Prostration: Generalized weakness so that the person is unable to sit, stand or walk without assistance
- Hb <80 g/L
- AKI (oliguria <0.4 mL/kg/h, creatinine >265 µmol/L)
- Spontaneous bleeding/DIC
- Jaundice: Plasma or serum bilirubin > 50 µmol/L (3 mg/dL)
- Shock (BP <90/60) = 'Algid malaria'
- Acidosis (pH <7.3, a base deficit of > 8 mEq/L, a plasma bicarbonate level of < 15 mmol/L or venous plasma lactate ≥ 5 mmol/L)
- Hypoglycemia (<2.2 mmol/L)
- Hemoglobinuria
- Pulmonary oedema/ARDS
- Parasitemia >10%

7. References

1. World Health Organization. Guidelines for Malaria. Geneva: WHO; 2015.
2. World Health Organization. Guidelines for Malaria. Geneva: WHO; 2022.
3. Diagnosis and Management of Malaria, MSF guideline accessed on 24th October 2024.
4. Oxford Handbook of Clinical Medicine 10th Edition.