







ELIMINATING MALARIA

ANGOLA - NAMIBIA CONSORTIUM













WELCOME TO THE HEALTH FACILITY/CLINIC

EXPLAIN
EVERYTHING
ABOUT HOW
YOU FEEL TO
THE HEALTH
CARE WORKER



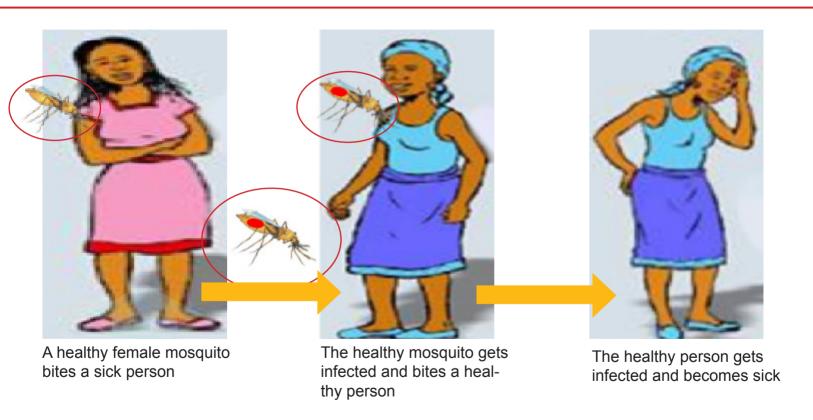


GUIDELINES AND STANDARDS OF CONDUCT FOR THE DIAGNOSIS AND TREATMENT OF MALARIA

- Classical Clinical Presentation of Malaria
- Differential Diagnosis of Simple Malaria and Other Febrile Diseases
- National Protocol for the Treatment of Simple Malaria



HOW IS MALARIA TRANSMITTED?



PROTECT YOURSELF AGAINST MOSQUITO BITES

CLASSICAL CLINICAL PRESENTATION OF MALARIA

Anaemia

Fever (>37.5oC)

Headache

Muscle and joint pain

Nausea/
Vomiting and/or
diarrhea

Shivering



Sweating

Chills

Stomach/ Abdominal pain

Appetite loss and thirst

Fatigue

CLASSICAL AND COMMON SYMPTOMS OF MALARIA



Fever and headache



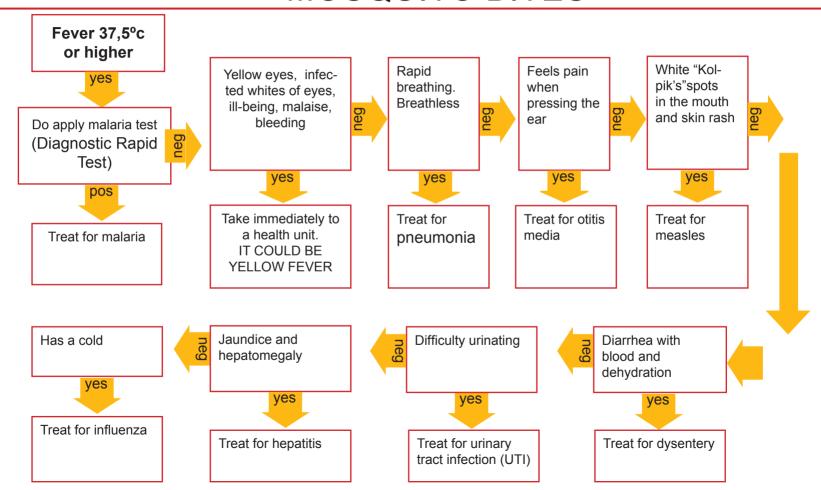
Nausea and vomiting



Muscular and joint pain

IF ANY OF THESE SIGNS OR SYMPTOMS APPEAR, GO STRAIGHT TO THE CLINIC

PROTECT YOURSELF AGAINST MOSQUITO BITES



THIS MAY BE MALARIA



A RAPID TEST CAN HELP CONFIRM MALARIA

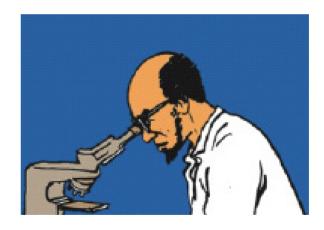
MALARIA DIAGNOSIS

Confirmation of the Diagnosis



Rapid Diagnostic Test (RDT)

Plasmodium blood test (thick smear)



NATIONAL POLICY GUIDELINES FOR THE TREATMENT OF CONFIRMED DIAGNOSIS

AUTHORIZED MEDICINE FOR THE TREATMENT OF MALARIA IN NAMIBIA

UNCOMPLICATED MALARIA TREAT WITH:

1. ARTEMITHER LUMEFAUTINE (AL, ACTs, ARTEFON OR COATEM).
FIST-LINE TREATMENT FOR UNCOMPLICATED MALARIA + PRIMAQUINA.

2.ORAL QUININE 10MG/kg (FOR PREGNANT WOMEN IN FIRST TRI-MESTER AND CHILDREN LESS THAN 2.5kg.

3. PRIMAQUINE - LOW DOSE + ALL EXCEPT PREGNANT WOMEN AND CHILDREN LESS THAN 1 YEAR.

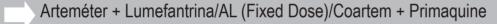


COMPLICATED/ SEVERE MALARIA REFER IMMEDIATLY TO HOSPITAL



NATIONAL PROTOCOL FOR THE TREATMENT OF MALARIA

SIMPLE MALARIA:



Observation:

- This is the medicine used at E8 health posts
- In the event of severe malaria, the health care worker should give pre-referral treatment and transfer the patient straightaway to a hospital





IF IT IS SEVERE MALARIA SHOULD BE REFERRED IMMEDIATELY TO NEAREST HOSPITAL



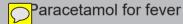


NATIONAL PROTOCOL FOR THE TREATMENT OF MALARIA

PRE- REFERRAL OF SEVERE MALARIA CASES

If the patient is diagnosed with Severe Malaria in a Clinic or Health Facility, administer:

IMI artesunate 2,4mg /kg for 20kg or more, 3,0mg /kg for less than 20kg



All patients who arrive at the clinic with severe malaria should be sent immediately to the nearest referral hospital.



MALARIA IS COMMON AMONG CHILDREN

ENSURE THE CHILD
TAKES ALL THE MEDICINE PRESCRIBED
BY THE HEALTH
WORKERS



SCHEDULE OF TREATMENT WITH ARTEMÉTER + LUMEFANTRINA (20 MGS/120 MGS)

Weight	Age	N° of pills/dose1	Total Nº of pills. ²
2,5 - 4,9 kg	< 3 years	1/2 pills	6 1/2 pills
5-14 kg	3 - 8 years	1 pill.	6 pills
15-24 kg	>9– 14 years	2 pills.	12 pills.
25-34 kg	>14 years	3 pills.	18 pills
> 35 kg	> 15 yea rs	4 pills.	24 pills

¹N° of pills per dose administered twice daily over 3 days

MALARIA PREVENTION



ALWAYS SLEEP UNDER AN INSECTICIDE TREATED
MOSQUITO NET TO PROTECT YOURSELF AND YOUR
CHILD AGAINST MALARIA

METHODS FOR MALARIA PREVENTION

- USE LONG LASTING INSECTICIDE TREATED MOSQUI-TO NET
- USE MILLIMETRIC NETS ON DOORS AND WINDOWS
- FURMIGATION / AND ALL INDOOR RESIDUAL SPRA-YING
- IEC (INFORMATION, EDUCATION AND COMMUNICATION)
- ANTILARVAL FIGHT WITH BIOLARVICIDE AND BURNED OIL
- SANITATION OF THE ENVIRONMENT









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