

Basic Principles for Preventing Malaria

(A) Be aware when there is a risk however small.

(B) Keep mosquito bites to a minimum

- This includes using protective clothing, insect repellents and nets.

(C) Use chemoprophylaxis correctly

- **Some drugs should be taken before departure.**

If a particular drug has not been used before, consider a trial course before departure to detect those likely to get side effects (e.g. 3 weeks for mefloquine, 1 week for chloroquine and a one or two days for proguanil, doxycycline and atovaquone/proguanil). Regardless of any trial course, drugs that are taken only once a week should be started at least one week before exposure to ensure adequate blood levels are achieved.

- **Take your medication continually while at risk.**

Tablets must be taken regularly according to the manufacturer's instructions.

- **Take your medication for the recommended period after leaving the risk area.**

Chloroquine, proguanil, mefloquine and doxycycline should be taken for 4 weeks after leaving an infected area to cover the 'incubation' period. Atovaquone/proguanil should be taken for only 7 days after leaving an infected area.

Note: Delayed illnesses - the incubation period of benign (*P. vivax* and *P. ovale*) malaria may be greater than 4 weeks (up to a year or more). Four weeks prophylaxis after return may then not prevent these delayed, less serious, illnesses.

(D) Report any feverish illness promptly to a doctor and say you have been to a malarious area.

- You may need to take a supply of personal emergency treatment abroad with you if you are going to be away from medical facilities since treatment should always be started promptly.