

MALARIA



Malaria parasites are transmitted by female *Anopheles* mosquitoes. The parasites multiply within red blood cells, causing symptoms that include symptoms of anemia (light headedness, shortness of breath, tachycardia etc.), as well as other general symptoms such as fever, chills, nausea, flu-like illness, and in severe cases, coma and death. Malaria transmission can be reduced by preventing mosquito bites with mosquito nets and insect repellents, or by mosquito control measures such as spraying insecticides inside houses and draining standing water where mosquitoes lay their eggs.

Symptoms : Symptoms of malaria include fever, shivering, arthralgia (joint pain), vomiting, anemia (caused by hemolysis), hemoglobinuria, and convulsions. There may be the feeling of tingling in the skin, particularly with malaria caused by *P. falciparum*. The classical symptom of malaria is cyclical occurrence of sudden coldness followed by rigor and then fever and sweating lasting four to six hours, occurring every two days in *P. vivax* and *P. ovale* infections, while every three for *P. malariae*. *P. falciparum* can have recurrent fever every 36-48 hours or a less pronounced and almost continuous fever.

Prevention :

- evaluating the risk of exposure to infection.
- preventing mosquito bites by using DEET mosquito repellent, bed nets, and clothing that covers most of the body.
- chemoprophylaxis (preventive medications).

Treatment :

Medical treatment should be sought immediately. The effectiveness of antimalarial drugs differs with different species of the parasite and with different stages of the parasite's life cycle. Your physician will determine the treatment plan most appropriate for your individual condition.

Drugs include chloroquine, mefloquine, primaquine, quinine, pyrimethamine-sulfadoxine (Fansidar), and doxycycline. Some plasmodium have developed resistance to certain medications, and therefore, alternative medications will be prescribed for you.