



REPUBLIC OF SOUTH AFRICA



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NOTICE: MALARIA PROPHYLAXIS WITH ORAL DOXYCYCLINE: TRAVEL TO MODERATE OR HIGH RISK AREAS OUTSIDE SOUTH AFRICA

The Primary Healthcare Level and Paediatric Hospital Level Standard Treatment Guidelines (STGs) and Essential Medicines List (EML) currently recommends malaria chemoprophylaxis from the age of 8 years with oral doxycycline for persons intending to travel to a moderate- or high-risk malaria endemic areas. It is important to note that moderate to high-risk malaria areas may include places which are located both in and outside of South Africa. Therefore, prophylaxis with oral doxycycline should be provided to all eligible persons traveling to a moderate-risk malaria endemic area in South Africa, between September and May, and to those who intend to travel to a malaria endemic country outside of South Africa. This should be done in conjunction with other malaria preventive measures as indicated in the STGs and EML, in accordance with the National Guidelines for the Prevention of Malaria (2018).

Please refer to the recently updated Primary Healthcare Level STGs and EML, 2020, Chapter 10, section: **10.7.3 MALARIA PROPHYLAXIS** and the Paediatric Hospital Level STGs and EML, 2023, Chapter 8, section: **8.9.4 MALARIA PROPHYLAXIS** for the complete guidance. The STG guidance for medicine treatment is provided below.

PRIMARY HEALTHCARE LEVEL STG CHAPTER 10: INFECTIONS AND RELATED CONDITIONS

MEDICINE TREATMENT

Prophylaxis

CAUTION

Immunocompromised patients, pregnant women and children <8 years of age should avoid visiting malaria-endemic areas, as they are more prone to the serious complications of malaria.

However, if this cannot be avoided, malaria chemoprophylaxis should be considered (as recommended by the National Guidelines for the Prevention of Malaria (2018) found at: <u>https://www.nicd.ac.za/wp-content/uploads/2019/03/National-Guidelines-for-prevention-of-Malaria_updated-08012019-1.pdf</u>

However, as only doxycycline is provided in the public sector, alternative options for pregnant women and children <8 years of age need to be purchased in the private sector.)

Non-pregnant adults:

- Doxycycline oral, 100 mg daily.
- Take from 2 days prior to entering endemic area until 4 weeks after exiting the endemic area.
- Children ≥8 years of age:
- Doxycycline oral, 2 mg/kg/dose daily.
 - Take from 2 days prior to entering endemic area until 4 weeks after exiting the endemic area.

Note: Doxycycline is contra-indicated in pregnant women, and in children <8 years of age.

PAEDIATRIC HOSPITAL DEVEL STG CHAPTER 8 INFECTIVE/INFECTIOUS DISEASES

MEDICINE TREATMENT

- Doxycycline (children > 8 years), oral, 2.2 mg/kg (maximum 100 mg) daily.
 - o Begin 2 days before travel; continue daily during travel, and for 4 weeks after leaving the area.

<u>Children under 8 years</u>: Refer to the National Guidelines for the Prevention of Malaria (2018) for alternative chemoprophylaxis options, which have to be procured in the private sector.

Preventative measures against mosquito bites include:

» Use of treated mosquito nets, screens, coils or pads.

» Application of a N,N-diethyl-3-methylbenzamide or N,N-diethyl-m-toluamide (DEET) insect repellent to exposed skin and clothing.

» Wearing long sleeves, long trousers and socks if outside between dusk and dawn, as mosquitoes are most active at this time.

» Visiting endemic areas only during the dry season.

CAUTION Pregnant women and children under 5 years of age should avoid visiting malaria-endemic areas, as they are more prone to the serious complications of malaria.

Procurement of oral doxycycline

NSN	Product	Supplier	Contract
222001528	Doxycycline; 100mg; Tablet; 14 Tablets	Arya Pharma (Pty) Ltd	HP02-2023AI
222001528	Doxycycline; 100mg; Tablet; 14 Tablets	Dezzo Trading 392 (Pty) Ltd t/a Shanur Healthcare (Pty) Ltd	HP02-2023AI
222000938	Doxycycline; 100mg; Tablet; 100 Tablets	Arya Pharma (Pty) Ltd	HP02-2023AI

Circular dissemination

Provinces and healthcare facilities are requested to distribute and communicate this information in consultation with the Pharmaceutical and Therapeutics Committees and all other relevant stakeholders.

Kind regards

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