Louth: Antimicrobial Guidelines - Louth Hospitals: Antimicrobial Guidelines: Paediatrics - Malaria

Paediatrics - Severe Malaria

Infection

Paediatrics - Severe Malaria (warrants ICU admission)

Severity indicators: Hyperparasitaemia > 5%, Neurological abnormality, renal impairment, acidosis, hypoglycaemia, respiratory distress, Hb <8g/dl, spontaneous bleeding/DIC, shock, haemoglobinuria.

Likely Organisms

Plasmodium falciparum most likely

Empiric Antimicrobial Treatment

1 st Line :

Artesunate IV for at least 24 hours, duration of IV therapy based on clinical response

Artesunate IV Dosing Regimen:

- Children ≥ 20 kg: 2.4 mg/kg IV at 0 hours, 12 hours, 24 hours, and then once daily thereafter until oral therapy can be tolerated
- Children < 20 kg: 3 mg/kg at 0 hours, 12 hours, 24 hours, and then once daily thereafter until oral therapy can be tolerated

Once patient is clinically improved and IV to oral switch appropriate, complete treatment with:

Artemether-Lumefantrine PO (Riamet®) - dose as per BNF for Children, dose given at 0h, 8h, 24h, 36h, 48h and 60h (total course given over 60 hours = 2.5 days)

N.B. Please note the timing of Riamet® doses relates to time from time zero – see worked example below:

- First Dose = Time Zero E.g. 18.00 on 12/8/19
- Next dose due at 8 hours from time zero = 02.00 on 13/8/19
- Next dose due at 24 hours from time zero = 18.00 on 13/8/19
- Next dose due at 36 hours from time zero = 06.00 on 14/8/19
- Next dose due at 48 hours from time zero = 18.00 on 14/8/19
- Next dose due at 60 hours from time zero = 06.00 on 15/8/19

N.B. Contact Pharmacy Department prior to discharge to ensure continuity of supply as Riamet® is not readily available in the community

2 nd Line:

IV Quinine no longer available (Jul 2019)

Comments

References for Artesunate IV Dose:

- Sanford Guide to Antimicrobial Therapy, available from webedition.sanfordguides.com, accessed 20/08/19
- John Hopkins ABX Guide, available from www.hopkinsguides.com, accessed 20/08/19
- World Health Organisation. Guidelines for the treatment of malaria. 3 rd Edition. 2015.

Paediatrics - Uncomplicated Malaria

diatrics - Uncomplicated Malaria: Plasmodium falciparum or species not identified rtemether-Lumefantrine PO (Riamet®) - dose as per BNF for Children, dose given at 0h, 8h, 24h, 36h, 48h and 60h I.B. Please note the timing of Riamet® doses relates to time from time zero – see worked example below Frist dose = Time Zero E.g. 18.00 on 12/8/19 Next dose due at 8 hours from time zero = 02.00 on 13/8/19 Next dose due at 24 hours from time zero = 18.00 on 13/8/19 Next dose due at 36 hours from time zero = 06.00 on 14/8/19 Next dose due at 48 hours from time zero = 18.00 on 14/8/19 Next dose due at 60 hours from time zero = 06.00 on 15/8/19 It will take 60 hours total (2.5 days) for administration of full course N.B. Contact Pharmacy Department prior to discharge to ensure continuity of supply as Riamet® is not readily available in the community. 2nd Line: Atovaquone-Proguanil PO (Malarone / Malarone Paed ®) for 3 days ssed with Infectious Diseases/Microbio ed or suspected cases must be disc Riamet®: Take with fat containing food or whole milk. Malarone®: Take with food or whole milk.

Louth: Antimicrobial Guidelines - Louth Hospitals: Antimicrobial Guidelines - Last Updated: Jan. 6, 2025, 9:56 a.m., printed: Jan. 8, 2025, 8:57 a.m.

page 1 of 1