

Emergency Standby Medication Traveller Information Leaflet

You have been advised to carry emergency standby antimalarial medication with you on your forthcoming trip. This leaflet provides you with advice on when and how to use it. Please keep it safely with your medication. If you are travelling with a companion, please ask them to read this leaflet as they may be able to assist you in following its advice in the event of your becoming ill.

Incubation period of malaria

The minimum period between being bitten by an infected mosquito and developing symptoms of malaria is 8 days, so a febrile illness starting within the first week of your arrival in a malarious area is not likely to be due to malaria.

Symptoms and signs of malaria

Malaria usually begins with a fever. You may then feel cold, shivery, shaky and very sweaty. Headache, feeling sick and vomiting are common with malaria and you are also likely to experience aching muscles. Some people develop jaundice (yellowness of the whites of the eyes and the skin). It is not necessary for all these symptoms to be present before suspecting malaria as fever alone may be present at first.

When to take your Emergency Standby Medication

If you develop a fever of 38°C [100°F] or more, more than one week after being in a malarious area, please seek medical attention straight away.

If you will not be able to get medical attention within 24 hours of your fever starting, start your standby medication and set off to find and consult a doctor.

How to take your Emergency Standby Medication

First, take medication (usually paracetamol) to lower your fever. If your fever is controlled, it makes it less likely that you will vomit your antimalarial drugs.

Then, without delay, take the first dose of your emergency standby antimalarial medication.

If you do vomit and it is within 30 minutes of taking the antimalarial drugs, repeat the first dose of them (but do not repeat the paracetamol). If you vomit 30–60 minutes after

taking the first dose of the antimalarial drugs, repeat the treatment, but take only HALF the first dose.

Continue the treatment as instructed for the particular drugs prescribed for you.

Please remember that this emergency standby medication has been prescribed based on your particular medical history and should be taken only by you as it may not be suitable for others.

Once you have completed your emergency standby medication you should restart your malaria prophylactic drug(s) one week after you took the first treatment dose of emergency standby medication. If your preventive medication consists of mefloquine and your standby treatment included quinine, you should wait at least twelve hours after completing the course of quinine before you restart mefloquine.

The information for the leaflet has been taken directly from the following document:

Chiodini PL, Field VK, Hill DR, Whitty CJM and Lalloo DG. Guidelines for malaria prevention in travelers from the United Kingdom. London, Public Health England, July 2013

Available online at:

<http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/Malaria/Guidelines/mala10guidelinesPrevention/>