Did You Know?

Not Every Fever is Malaria
CURRENT MALARIA SITUATION IN TANZANIA

According to Tanzania HIV and Malaria indicator survey (THMIS) 2011, Malaria prevalence has declined in Tanzania from 18% in 2007 to 10% in 2011. In addition, Malaria has dropped by almost half within five years among children under 5 years, it likely that the prevalence among adults is even lower.

**Prevalence of Malaria in Children 6 – 59 months, 2007/8**

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<tr>
<th>Region</th>
<th>Prevalence</th>
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<td>Kagera</td>
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<td>Kigoma</td>
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<td>Mara</td>
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**Prevalence of Malaria in Children 6 – 59 months, 2011/12**

**Recommendation:**
Not all fever is Malaria. It is important to diagnose correctly and prescribe the right treatment.
Why is it important to test for Malaria?

The old policy said clinical diagnosis was acceptable.

Now, because of declining prevalence, a high proportion of fever patients do not have malaria.

Clinical diagnosis will incorrectly diagnose many patients.

The new government policy says that:

ALL SUSPECTED MALARIA CASES SHOULD BE CONFIRMED WITH A BLOOD TEST BEFORE TREATING FOR MALARIA

John – Provider in Muheza, Tanga.

“I have many patients everyday who come to me with fever but not all fever is Malaria. I use RDT to test them for correct diagnosis”.

Mechanism Of Action
The mechanism of action is Antigen - Antibody reaction

Why mRDT?

- It is recommended by WHO and MOHSW to be used in Tanzania where Malaria prevalence is declining.

- Quick and easy to use. Results are obtained between 15 to 25 minutes (depending on the manufacturer). Can be performed by any trained health care provider

- Reliable
  High sensitivity (88 - 99%).
  High specificity (95 - 100%).

- Helps to rapidly identify patients who might have other serious non-malarial illness

- Simple “yes or no” answer for malaria

- Low-cost
  Doesn’t require electricity or expensive equipment.

- More profit
Mama Furaha – Lives in a malaria endemic area
Brings in her 24-month old son who has a history of fever for two days. On examination you find that she is in fair general condition, weighs 20kg, with temperature 39.2°C. The rest of the physical examination is normal.

“What do you recommend I give her?”

Request for diagnostic testing to confirm or exclude malaria

Why?
• Many illnesses cause fever and have symptoms common to malaria.
• When everyone with fever is treated for malaria, drug resistance increases and people with other illnesses do NOT get the right treatment.

For all cases of fever with suspected malaria, test with mRDT treat positive cases with an ACT, and investigate for other diseases
FEVER CASE MANAGEMENT
FEVER CASE MANAGEMENT ALGORITHM


FEVER
History of fever in the last 48 hours or axillary temperature ≥ 37.5 ° C

Assess patient for:
1. Signs of Severe Malaria or
2. Danger Signs

IF YES
Refer Urgently
Very Severe Febrile Disease
• Parenteral dose of anti-malaria.
• Give first dose of an appropriate antibiotic
• Give one dose of paracetamol (38.5° C or above)

IF NO

IF TEST NEGATIVE
Perform Malaria RDT

IF TEST POSITIVE
Uncomplicated Malaria
1. TREAT with ACTs
2. Investigate other cause of disease
3. Instruct patient to come back immediately if condition worsen or in 3 days if no improvement

Danger Signs in Children
Ask:
• Is the child able to drink or breastfeed?
• Does the child vomit everything?
• Has the child had convulsions?

Look:
• See if the child is very sleepy /no able to awake
• Is the child convulsing now?

Non-Malarial Febrile Illness
1. Investigate other causes of fever and manage accordingly
INVESTIGATE OTHER CAUSE OF DISEASE IN ALL CASES
Fever of ≥ 37.5 ° that tested positive or negative with mRDTs

- Ask for Presence of COUGH
  - IF NO
  - Give one dose of paracetamol (38.5°C or above)
  - Follow up in 3 days if fever persist
  - If fever is present every day for more than 7 days, refer for assessment
  - IF NO
  - Ask for Presence of DIARRHEA
  - IF YES
  - Assess for:
    - Fast Breathing
    - Chest in-drawing
  - IF YES
  - Pneumonia
    - TREAT Amoxicillin
  - Common Cold
    - TREAT Paracetamol
  - IF NO
  - Diarrhea
    - TREAT ORS & Zinc
    - IF NO
    - IF YES
    - REFER

Normal body temperature 36.5°C – 37°C
Fever 37.5°C
Always refer to a pre-established facility

REFER FOR SEVERE MALARIA