

Brand Name: Malarone™ (Atovaquone / Proguanil)

Malarone is a combination of two drugs, atovaquone plus proguanil, in one tablet. It is available in the United States as the brand name, Malarone.

Directions for Use

- The adult dosage is 1 tablet (250mg atovaquone/2100mg proguanil) once a day
- Take the first dose of Malarone 2 days before travel to the malaria-risk area
- Take your dose once a day during travel in the malaria-risk area
- Take your dose once a day for 7 days after leaving the malaria-risk area
- Take your dose at the same time each day and take the pill with food or milk

Side Effects and Warnings

The most common side effects reported by travelers taking Malarone are stomach pain, nausea, vomiting, and headache. Most people taking this drug do not have side effects serious enough to stop taking it; if you cannot tolerate Malarone, see your health care provider for a different antimalarial drug.

Travelers Who Should Not Take Malarone for Prophylaxis

The following travelers should not take Malarone to prevent malaria and should take a different antimalarial drug (see your health care provide)

- Children weighing less than 25 pounds (11 kilograms)
- Pregnant women
- Women breast-feeding infants weighing less than 25 pounds (11 kilograms)
- Patients with severe renal impairment
- Patients allergic to atovaquone or proguanil

Doxycycline (many brand names and generic drugs are available)

Doxycycline is related to the antibiotic tetracycline.

Directions for Use

- The adult dosage is 100mg (one tablet) once a day
- Take the first dose 2 days before arrival in the malaria-risk area
- Take your dose every day, at the same time each day, while in the risk area
- Take your dose once a day for 4 weeks after leaving the risk area

Side Effects and Warnings

One of the most common side effects reported by travelers taking doxycycline include sun sensitivity (sun burning faster than normal). To prevent sunburn, avoid midday sun, wear a high SPF sunblock, long-sleeved shirts, and a hat.

Doxycycline may cause nausea and stomach pain. Take the drug on a full stomach with a full glass of liquid. Do not lie down for 1 hour after taking the drug to prevent reflux of the drug (backing up into the esophagus).

Women may develop a vaginal yeast infection on doxycycline. Treat vaginal discharge or itching with either an over-the-counter medication or ask your health care provider for a prescription pill or cream.

Most people taking this drug do not have side effects serious enough to stop taking it; if you cannot tolerate doxycycline, see your health care provider. Other antimalarial drugs are available.

Travelers Who Should Not Take Doxycycline

The following travelers should not take doxycycline and should take a different antimalarial drug (see your health care provider).

- Pregnant women
- Children under the age of 8 years
- Persons allergic to doxycycline or other tetracyclines

Mefloquine (brand name Lariam™ and generic)

Directions for Use

- The adult doseage is 250mg (one tablet) once a week
- Take the first dose 1 week before arrival in the malaria-risk area
- Take your dose once a week, on the same day of the week, while in the risk area.
- Take your dose once a week for 4 weeks after leaving the risk area
- Take the drug on a full stomach with a full glass of liquid

Side Effects and Warnings

The most common side effects reported by travelers taking mefloquine include headache, nausea, dizziness, difficulty sleeping, anxiety, vivid dreams, and visual disturbances. Mefloquine has rarely been reported to cause serious side effects, such as seizures, depression, and psychosis. These serious side effects are more frequent with the higher doses used to treat malaria; fewer occurred at the weekly doses used to prevent malaria.

Mefloquine is eliminated slowly by the body and thus may stay in the body for a while even after the drug is discontinued. Therefore, side effects caused by mefloquine may persist weeks to months after the drug has been stopped.

Most travelers taking mefloquine do not have side effects serious enough to stop taking the drug. (Other antimalarial drugs are available if you cannot tolerate mefloquine; see your health care provider.)

Travelers Who Should Not Take Mefloquine

The following travelers should not take mefloquine and should ask their health care provider for a different antimalarial drug.

- persons with active depression or a recent history of depression
- persons with a history of psychosis, generalized anxiety disorder, schizophrenia, or other major psychiatric disorder
- persons with a history of seizures (does not include the type of seizure caused by high fever in childhood)
- persons allergic to Mefloquine
- Mefloquine is not recommended for persons with cardiac conduction abnormalities (for example, an irregular heartbeat)

Chloroquine phosphate (brand name Aralen™ and generics)

Directions for Use

- The adult dose is 500mg Chloroquine phosphate (one tablet) once a week
- Take the first dose of Chloroquine 1 week before arrival in the malaria-risk area
- Take your dose once a week, on the same day of the week, while in the risk area
- Take your dose once a week for 4 weeks after leaving the risk area
- Chloroquine should be taken on a full stomach to lessen the risk of nausea and stomach upset

Side Effects and Warnings

The most common side effects reported by travelers taking Chloroquine include nausea and vomiting, headache, dizziness, blurred vision, and itching. Chloroquine may worsen the symptoms of psoriasis. Most travelers taking Chloroquine do not have side effects serious enough to stop taking the drug. Other antimalarial drugs are available; see your health care provider.

Note: In malaria-risk areas where Chloroquine is the recommended drug but Chloroquine cannot be taken, atovaquone/proguanil (Malarone), doxycycline, Mefloquine, or primaquine can be used as your antimalarial drug.

The following travelers should not take Chloroquine and should ask their health care provider for a different drug:

- Patients allergic to Chloroquine