Malaria Prevention & Prophylaxis for Children



Refer to <u>CDC: Travelers' Health (wwwnc.cdc.gov/travel)</u> for recommendations or <u>Heading Home Healthy (www.headinghomehealthy.org)</u> to enter patient information including age, reason for travel, and medical conditions.

Insect repellent

Choose a safe and effective insect repellent (containing DEET, IR3535, or picaridin) and use on all travelers, including children

DEET-based repellents are safe for children, but take care in applying to avoid the eyes and mouth

Use a long-acting repellent, or one with a concentration of 20-30% of the active ingredient, and always apply following the label directions

Barrier protections

Wear protective clothing when possible

Use insecticide treated nets over beds/cribs/car seats

Protected environments

Avoid time outdoors late in the evening and at night when mosquitoes are most active

Staying in households/living quarters with screens on windows may decrease exposure

Malaria prophylaxis

Most antimalarials are only available in pill form and have a bitter taste

- May crush/grind appropriate dosage and place in a small amount of a sweet/thick food item (e.g., Nutella, ice cream, cream-filled cookie, jam, jelly)
- Do not put crushed/ground pills in juice it makes the juice bitter and undrinkable

Children whose dosage falls below an easily divided tablet (e.g., <1/4th a mefloquine tablet) should have the dosage prepared by a compounding pharmacy

• They may make it a powder and place in a capsule (that can be opened, mixed with liquid, and can administer with a bottle nipple, syringe, or dropper)

As with any drug, keep out of reach of children (particularly chloroquine)