

Media Release

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NT Researchers Discover Breakthrough in Malaria Treatment

An article published in the prestigious international journal *'The Lancet'* by researchers from the Menzies School of Health Research (MSHR) in Darwin has revealed a breakthrough in the battle to treat Malaria – a disease which effects 40 per cent of the worlds population.

There are two major strains of malaria effecting humans, *P. vivax* and *P. falciparum*. Although attention focuses on the more virulent *P. falciparum*, *vivax* malaria causes a huge amount of illness in the tropical countries of our region and puts many Australian travelers at risk of disease. *Vivax* malaria is becoming increasingly resistant to standard treatments, but few studies have determined the best way of treating it.

In collaboration with partners at the Indonesian Ministry of Health, the MSHR team conducted a study in Papua, where they compared, head to head, two new treatments for malaria. Both contained a combination of drug based on a Chinese herbal extract (artemisinin) with a longer acting antimalarial drug.

The researchers found that both treatments provided initial cure from disease. However those receiving a treatment which stayed in the blood stream for longer were three times less likely to have another episode of malaria within 42 days and were less likely to be anaemic.

MSHR scientist, Dr Ric Price, said that the findings have important implications for the treatment of malaria in our region and relevance to areas of Africa where the risk of malaria is greatest.

"Scientists and doctors wage a constant battle to develop and implement effective treatments for malaria. This study is one of the first to highlight the best treatment of drug resistant strains of *vivax* malaria found in the Asia pacific region." said Dr Price.

“It also provides evidence that longer acting drugs can prevent patients, who remain at risk of further infections, from getting sick again within 6 weeks. This “post treatment prophylaxis” is similar to the approach of giving travelers regular medication to protect them from infection, but can be applied opportunistically to people at high risk of infection in poor tropical communities.” he added.

A concern with such a policy is that the resistance will emerge quickly to the long acting drug. However the team believes that by combining the two drugs will help to prevent this from happening.

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