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NOTE ON THE IMPLICATIONS OF COVID-19 ON POLICIES FOR THE USE AND PROCUREMENT OF ANTIMALARIAL DRUGS IN MALARIA-ENDEMIC COUNTRIES IN THE AMERICAS

With regards to the use of chloroquine or hydroxychloroquine in case management, or as a prophylactic measure in COVID-19; and recognizing that the current level of evidence is inconclusive and does not yet allow prediction of the potential impact on the market of an eventual increase in demand for chloroquine (CQ) in relation to the response to COVID-19, some measures to be considered by malaria-endemic countries, with regard to the possible impact on the treatment of malaria patients in the Region, are recommended below:

- In the malaria-endemic countries of the Region, where chloroquine is the main drug against *P. vivax* malaria (and against *P. falciparum* malaria such as in Central America, Haiti, and the Dominican Republic), measures should be taken to avoid that a domestic increase in the demand for CQ and the absence of proper control over current stocks of antimalarials could lead in the short term to insufficient drugs to treat people who become ill with malaria.
- Review and update the current situation of chloroquine stocks in warehouses and health services and ensure the existence of the necessary stock for the response to malaria cases for the required period of time, in case new drug purchases have to be initiated.
- Expedite ongoing efforts for the procurement of regularly planned medicines, especially procurement processes with the PAHO Strategic Fund, as part of the joint procurement actions for antimalarials for the period 2020-2021.
- Update estimates of drug needs for *P. vivax* and *P. falciparum* malaria for 2020 and 2021. Specifically for the treatment of *P. vivax* malaria, include estimates of needs for both chloroquine and artemisinin-based combination therapies (ACTs): combination of Artemether 20 mg + Lumefantrine 120 mg (AL) (the second line currently in the Region) as an eventual and temporary first line of treatment, in case it is defined in the short term that the use of chloroquine in COVID-19 may put the supply of chloroquine for malaria at risk.
- In the same vein, take the necessary steps to secure financial resources for the eventual purchase of ACTs for the treatment of *P. vivax* malaria and *P. falciparum* malaria. PAHO, through the Strategic Drug Facility, has the mechanisms and channels for expeditious procurement management of ACTs duly prequalified by WHO.
- In view of the possible need to use ACTs for the treatment of *P. vivax* malaria, countries should review their current technical guidelines and use the appropriate regulatory framework for the rapid introduction of the new therapeutic regimen as the first line (if necessary), for which purpose it is recommended that



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they refer to the WHO Guide to Case Management of Malaria¹. It is also advisable to start considering measures to disseminate and train the responsible personnel in each country, in case a change of medicines is necessary. The same measures should be taken for countries currently using chloroquine for the treatment of *P. falciparum* malaria.

- In countries that currently have a stock of ACTs for the management of *P. falciparum* malaria (Amazon countries), an update of the stock and purchase orders in process should be made, in case these processes need to be advanced, to ensure treatment of *P. vivax* malaria.

- **In these countries, before starting to use current stocks of ACTs for treatment of *P. vivax* malaria, the stocks needed to treat *P. falciparum* malaria should first be secured.** In view of the need to prioritize territories for migration to a single treatment of the two Plasmodium species, prioritization criteria could be established, such as the high proportion of mixed malaria and/or high proportion of *P. falciparum* malaria cases in a territory.

- **Finally, it is recommended that measures be taken to rationalize the use of chloroquine in malaria, in particular to avoid systematic actions of administering presumptive treatment or mass administration of drugs to manage malaria situations.** Any future preventive or containment interventions in malaria that may be considered in the context of the response to the COVID-19 pandemic should consider ensuring that sufficient stocks of antimalarials are available to treat confirmed cases of malaria.

¹ Guidelines for the treatment of malaria. Third edition. WHO 2015.