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Malaria: a reminder for travellers over the winter holiday season

Advice for travellers and health professionals about malaria

<u>Malaria</u> is a potentially serious parasitic infection transmitted through the bite of an infected mosquito.

There has been an increase in malaria cases globally; with Africa accounting for the majority of global cases of malaria; 249 million malaria cases in 85 malaria-endemic countries, according to the World Malaria Report 2023 [1]. On 14 December 2023, UKHSA published provisional UK case numbers for 2022 and 2023 (up to October) [2]. These figures suggest that there have been over 250 more cases in 2023 to date, compared to the whole of 2022, and a higher case total in 2023 compared to the average between 2010 and 2019 of 1,612. This is despite preliminary data from the Office of National statistics suggesting that UK residents' visits abroad remain lower than precoronavirus (COVID-19) pandemic levels [3]. Travel destination data for this year is not yet available, but in previous years the majority of cases (where travel history was known) were acquired in Africa, particularly Western Africa in travellers who were visiting friends and relatives.

Around the world, COVID-19, climate change and civil unrest are having an impact on the provision of health care services, including malaria surveillance and the delivery of malaria prevention measures [1]. Travellers to malaria risk areas should be aware that there may continue to be disruptions to malaria prevention, diagnosis and treatment. Furthermore, surveillance, control and elimination programmes may not be as robust as they have been in previous years.

In the run up to the festive season, travellers are reminded to consider the risk of malaria at their destination, use preventive measures where indicated and be vigilant for the signs of malaria.

Advice for travellers

Before you travel

You should seek pre-travel advice, ideally 4-6 weeks prior to travel; although last-minute advice is still useful if time is short.

Check our <u>Country Information pages</u> and <u>Outbreak Surveillance database</u> for country-specific malaria risk and prevention advice.

Make sure you take appropriate preventive measures (e.g. vaccinations) against other health risks that may exist at your destination.

While you are away

If you are visiting a malaria risk area, ensure that you follow all the important steps for malaria prevention:

- A Awareness of the malaria risk at your chosen destination
- **B** Bite prevention



C - Chemoprophylaxis (use of appropriate malaria prevention tablets*)

D - Diagnosis, if you develop <u>symptoms of malaria</u> you should seek prompt medical advice without delay

*If taken as prescribed, modern prevention methods are highly effective and can greatly reduce your risk of dying. However, they do not give 100% protection; you should still avoid bites and seek prompt advice if you develop symptoms.

Further <u>advice for travellers about mosquito bite avoidance</u> is available.

When you return

Suspected malaria is a medical emergency. If you or any of your family has a <u>fever or flu-like illness</u> after being in a country with malaria, you must seek immediate medical attention that day. Tell them where you have travelled to, mention malaria and ask to be tested for it. Remember you could still have malaria even up to a year after a trip to a malaria-risk region [4].

Advice for health professionals

Malaria should be suspected in anyone with a fever or a history of fever returning from or having previously visited a malaria endemic area, regardless of whether they have taken prophylaxis.

The minimum incubation period for naturally acquired infection is six days. Most patients with *Plasmodium falciparum* infection present in the first month or months after exposure; almost all present within six months of exposure. Vivax or ovale infections commonly present later than six months after exposure and presentation may be delayed for years [5].

If a traveller's itinerary included travel to a malaria endemic area, they must have a blood test result for malaria on the same day. Information for health professionals about blood tests and how to request them in the UK is available from the UK Health Security Agency (UKHSA) <u>Malaria</u> <u>prevention guidelines for travellers from the UK</u> [4] (page 52).

All malaria-positives, acquired in any geographical area, should be confirmed by the <u>UKHSA Malaria</u> <u>Reference Laboratory</u>.

Resources

- <u>Country Information</u>
- Outbreak Surveillance
- Malaria in brief
- <u>Malaria factsheet</u>
- <u>UK Health Security Agency ACMP: Malaria prevention guidelines for travellers from the UK</u> 2022
- <u>Visiting friends and relatives abroad: advice for travellers</u>
- <u>Mosquito bite avoidance: advice for travellers</u>

References

- 1. World Health Organization. World Malaria Report 2023 [Accessed 21 December 2023]
- 2. <u>UKHSA. Imported malaria in the UK; statistics. Provisional imported malaria cases numbers in the UK by species:</u> 2022 and 2023 monthly figures. [Accessed 21 December 2023]
- **3.** <u>Office for National Statistics. Overseas travel and tourism, provisional: April to June 2023. [Accessed 21 December 2023]</u>



- 4. UKHSA. ACMP: Malaria prevention guidelines for travellers from the UK 2022 [Accessed 21 December 2023]
- 5. National Institute for Health and Care Excellence. NICE Treatment Summaries, Malaria. [Accessed 21 December] <u>2023]</u>