

Table 1: Antimalarial chemoprophylactic regimens for at-risk individuals* according to type of drug resistance present in malarial area†

Drug resistance in malarial area	Drug(s) of choice (and adult dose)	Alternative drugs (and adult dose)
No chloroquine resistance	Chloroquine (300 mg [base] weekly)‡	Doxycycline (100 mg daily)§
Chloroquine resistance¶	Mefloquine (one 250-mg [base] tablet weekly)‡	First choice: doxycycline (100 mg daily)§ Second choice: primaquine (30 mg [base] daily)*†† Third choice:‡‡ chloroquine (300 mg base] weekly)‡ plus proguanil (200 mg daily)§
Chloroquine and mefloquine resistance¶	Doxycycline (100 mg daily)§	

*Protection from mosquito bites (by means of insecticide-treated bed nets, DEET-based [*N,N*-diethyl-meta-toluamide] insect repellents and similar measures) is the first line of defence against malaria for *all* travellers. In the Americas and Southeast Asia, chemoprophylaxis is recommended *only* for travellers who will be exposed outdoors during evening or at night in rural areas.

†See also Fig. 1. More detailed information is available from Health Canada,¹³ the Centers for Disease Control and Prevention¹⁴ and the World Health Organization.¹⁵

‡Chloroquine and mefloquine are to be taken for 1 week before entering a malarial area, for the duration of the stay in the malarial area and for 4 weeks after leaving the malarial area.

§Doxycycline and proguanil may be started 1 day before entering a malarial area; they must be taken for the duration of the stay in the malarial area and continued for 4 weeks after departure from the malarial area. Doxycycline is contraindicated in pregnant women and in children less than 8 years old.

¶Evidence indicates that a fixed-dose tablet of atovaquone-proguanil also offers excellent protection against drug-resistant falciparum malaria. However, it is not currently licensed in Canada for this indication.¹⁶

*Primaquine is started 1 day before entering a malarial area; it must be taken for the duration of the stay in the malarial area and may be discontinued 7 days after leaving the malarial area.

††Contraindicated in people with deficiency of glucose-6-phosphate dehydrogenase (G6PD) and in pregnant women. G6PD level must be measured before this drug is prescribed. This drug is *not* currently licensed in Canada for use as an malaria chemoprophylactic.

‡‡Chloroquine plus proguanil is less effective than mefloquine or doxycycline in areas where chloroquine-resistant malaria occurs.

[\[Return to text\]](#)