PIPADOR REVISION

MRCOG Part 1 Revision Notes

Antimalarials

PHARMACOLOGY • LECTURE 379

VISUAL EXAMINATION REVISION NOTES

2026 Edition

379

MRCOG PART 1 REVISION NOTES | PHARMACOLOGY

Antimalarials

Mechanisms, adverse effects, treatment and prophylaxis of malaria in pregnancy

IV artesunate	ACT	Mefloquine	No primaquine
Severe malaria	Uncomplicated falciparum	Prophylaxis in pregnancy	In pregnancy

■ KEY FACTS: Learning objectives

- Describe the classes and mechanisms of antimalarial drugs.
- Describe treatment of severe and uncomplicated malaria in pregnancy.
- Describe chemoprophylaxis and drugs to avoid in pregnancy and breastfeeding.

379.1 Drug classes

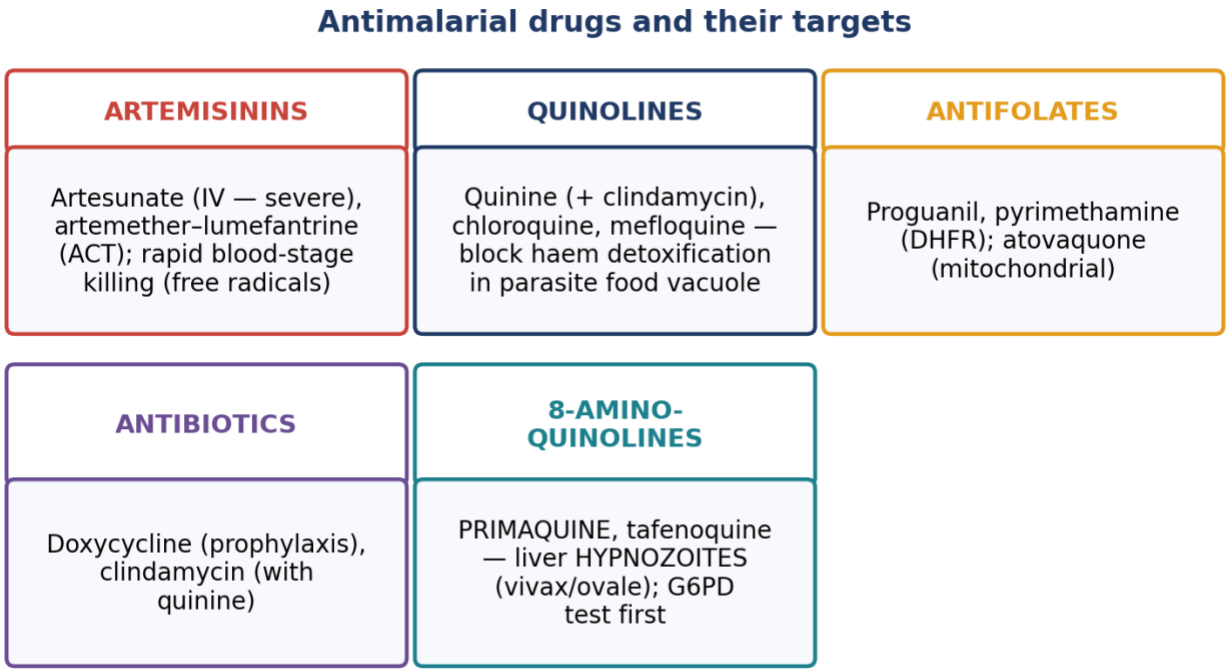


Figure 379.1 — Antimalarial drugs and targets

Drug	Key adverse effects / notes
Artesunate	• Rapid parasite clearance • Post-artesunate delayed haemolysis (check Hb at 1–4 weeks)
Quinine	• Cinchonism (tinnitus, deafness, nausea), **hypoglycaemia**, QT prolongation • IV infusion with cardiac monitoring
Chloroquine	• Retinopathy (long-term), pruritus • Widespread resistance in P. falciparum

Drug	Key adverse effects / notes
Mefloquine	Neuropsychiatric effects (anxiety, depression, psychosis) — avoid if psychiatric history or epilepsy
Atovaquone–proguanil	GI upset; limited pregnancy data
Doxycycline	Photosensitivity, oesophagitis; teeth/bone — avoid in pregnancy
Primaquine	• **Haemolysis in G6PD deficiency** — test before use • Radical cure of P. vivax/ovale

379.2 Pregnancy

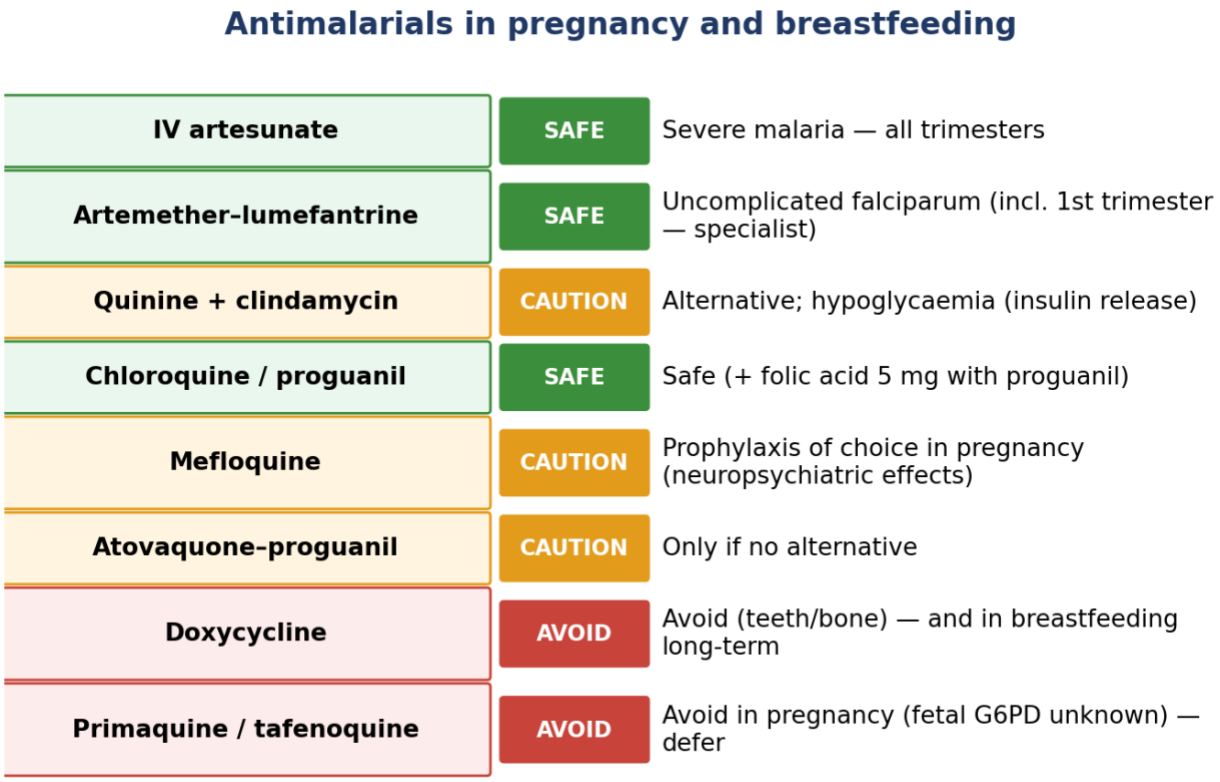


Figure 379.2 — Antimalarials in pregnancy

- **Severe malaria** in pregnancy → **IV artesunate** in any trimester (more effective than quinine, less hypoglycaemia)
  - ICU
  - Treat hypoglycaemia and anaemia
  - Monitor fetus.
- **Uncomplicated falciparum**: admit; artemether–lumefantrine (now acceptable in all trimesters per WHO) or quinine + clindamycin — specialist advice.
- **Non-falciparum**: chloroquine
  - Give weekly chloroquine prophylaxis until after birth, then **primaquine** for radical cure after G6PD testing (and after breastfeeding if infant G6PD unknown).
- **Prevention**: avoid travel; bite avoidance (DEET safe); **mefloquine** prophylaxis (or chloroquine/proguanil where effective).

379.3 Must-know summary

■ EXAM TIP

- Artemisinins (fast, severe disease), quinolines, antifolates, doxycycline, primaquine (hypnozoites).
- Severe malaria in pregnancy: IV artesunate; watch hypoglycaemia (quinine).
- Prophylaxis: mefloquine; avoid doxycycline, primaquine; atovaquone–proguanil only if no alternative.
- Primaquine → G6PD check; give after pregnancy.

■ MNEMONIC / MEMORY AID

'Artesunate Always for severe; Primaquine Postpones until after birth'.