

Precautions Against Malaria

Please assess the risk for malaria before your travel. A summary of areas with malaria transmission and prophylaxis by country is available on the CDC (Centers for Disease Control and Prevention) website.

(<u>https://wwwnc.cdc.gov/travel/yellowbook/2018/infectious-diseases-related-to-travel/yellow-fever-malaria-information-by-country</u>)

1. Best Repellents Available in Japan

Insect repellents recommended by the United States CDC for reducing the risk of malaria include N,N-diethyl-m-toluamide (DEET) and icaridin (picaridin). DEET and picaridin have comparable efficacy for protection against malaria. DEET is contraindicated in children under 12 years old in Japan.

Our recommendation is DEET 30% for adults and picaridin for children under 12 years old.

< For Adults>



<For children under 12-years-old>



2. Chemoprophylaxis

We recommend chemoprophylaxis for patients at risk of malaria infection. Because of variation in malaria transmission and antimalarial drug resistance, individual itineraries should be reviewed together with the most recent CDC guidelines and advisories. There are two kinds of chemoprophylaxis, Malarone and Doxycycline, that are available here at NIC. These agents vary in terms of cost, adverse effects, and dosing schedule. Please discuss with our doctor about which works the best for you.

Drug	Tablet	Dosing	Initiation	Discontinuation	Use in	Use in	Price
	size				pregnancy	breastfeeding	
Malarone	250 mg	1 tablet orally	1 to 2 days	7 days	No	No	JPY 700 / T
		once daily	prior to travel	after travel			
Doxycycline	100 mg	1 tablet orally	1 to 2 days	4 weeks	No;	No	JPY 60 / T
		once daily	prior to travel	after travel	teratogenic		

Important notes)

It is important to note that travelers must also understand that no chemoprophylaxis regimen guarantees complete protection. Fever during or after travel is a medical emergency requiring urgent medical attention.

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