

COMMENTARY

The Efficacy of Amodiaquine plus Artesunate Combination in Ghana

Prompt and effective treatment of malaria cases is a goal desired by all as we await the imminent discovery of an effective vaccine made available to the population at risk, especially the vulnerable groups. This desired goal cannot be achieved without having available efficacious medicines to treat acute infections. However, coming to terms with the fact that the *Plasmodium falciparum* is a crafty parasite capable of developing resistance to once effective anti malarial drugs like chloroquine and SP, there is the need to constantly monitor both clinical and parasitological responses to the currently available medicines. It is for this reason that the National Malaria Control programme has instituted the monitoring of the efficacy of artemisinin combination therapy (ACT), particularly Amodiaquine+Artesunate combination (AQ/AS), in Ghana. This combination was the first ACT to be recommended for the treatment of uncomplicated malaria in the face of chloroquine resistance.

In this issue of the journal, Koram *et al* (page 55) report findings on the efficacy of AQ/AS combination for the treatment of uncomplicated malaria in children under five years. The choice of this age group is appropriate since about 90% of malaria cases in Ghana, as elsewhere in sub-Saharan Africa, occur in this age group. The authors established from their preliminary report that AQ/AS combination therapy, resulted in rapid, high clinical and parasitological cure rates in children in the first full year of implementation of the uncomplicated malaria treatment policy. They have shown with data that almost all children monitored (99.8%) had cleared their parasitaemia by Day 3 and the cure rates remained at more than 90% throughout the 28 days of follow up. Perhaps, the good news was that the treatment was effective at all the study sites, which represented all the three ecological zones of Ghana, and did not differ by gender.

With this evidence, policy makers and the general public should not be discouraged by the numerous complaints that have bedevilled the introduction of this highly effective treatment for uncomplicated malaria in Ghana. This effort to provide evidence-based information to both prescribers and consumers should continue. The national malaria control programme also needs to monitor the implementation process in addition to the drug efficacy in order to constantly and innovatively address implementation challenges to enhance acceptability of the drugs by the population.

What should occupy us now is how to make this effective treatment available to the population that needs it. This is where implementing home management using AQ/AS combination is recommended. This recommendation is informed by the fact that varied factors affect treatment seeking behaviour other than just having efficacious drug treatment available at facility levels. Some of these factors could be social, cultural, economic and political and the national control programme must be at the forefront, as usual, to make this possible. The desired effect of this treatment on morbidity and mortality as well as prevalence level cannot be achieved without the treatment being made available to the majority of those who need them.

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Conflict of Interest: None declared