

Stop misusing malaria medicine

Malaria is a life-threatening disease responsible for severe illness and deaths, common to the tropics. With socio-demographic inequity in the population such as poverty, especially in low and middle income countries including Uganda, malaria presents a significant burden to an already stretched healthcare system.

Despite efforts put in place towards malaria elimination, for example investment in prevention and treatment, both globally and nationally, the number of malaria cases and deaths remains quite high. Among the factors slowing down the strides towards malaria elimination is drug resistance.

Drug resistance occurs when disease-causing germs or parasites evolve or change in such ways that they stop responding to medicines that were designed to kill them.

For example, a patient can take a drug that is commonly known to treat a particular disease but they will not get relieved of the signs and symptoms of that disease.

Drug resistance causes infections to become harder to treat and increase the risk of worsening illnesses and death. It is largely driven by inappropriate use of medicines through self-medication, sharing medication, consumption of partial doses as well as inappropriate use of medicines in animals.

In Uganda alone, drug resistance has been shown to cause thousands of deaths attrib-

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Drug resistance



utable to treatment failures.

Putting malaria in perspective, the recommended treatment for malaria for the countries in the World Health Organisation (WHO) Africa region are the Artemisinin Based Combination Therapy (ACTs) drugs. Though further investigations are still underway, the causative agent, *Plasmodium falciparum* parasite has been shown to have developed resistance to the Artemisinins which has been registered in both Uganda and Rwanda in addition to 10 percent treatment failures.

If this trend continues, we risk running down years of research, even more deaths and even heavier healthcare costs because

of the need for more effective yet more expensive treatments.

In addition to intensifying the already implemented preventive measures, we should do everything in our capacity to stop the misuse of malaria medicines so that we can keep them working. As individuals, we ought not to prescribe medicine for ourselves but instead, get proper diagnosis by medical personnel to guide appropriate treatment.

Additionally, upon receiving the prescribed medicine, individuals should not share it with other people who may present with similar signs and symptoms.

Medicine should also be taken to full completion according to the prescription and should not be kept for future use. Medicines that have been prescribed for humans should not be shared with animals. Sick animals should also be treated after consulting veterinary professionals. These medicines have protected our health for so long since their discovery, now it is our turn to protect them. Remember that, no one deserves to die of malaria.

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