Documentation of Clinical Profile and Prognostic Factors of Severe Falciparum Malaria

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Sir,

I went through interesting article by Rao et al published in Oct 2013 (page No. 85) issue of our esteemed journal. This is an excellent documentation and such articles may rather be sent/included in original article section. Here I would like to share my view and experience:

1. The most common manifestation was jaundice (78%), followed by bleeding tendency, which is because of changing scenario of falciparum malaria. 1

2. The authors have found that early treatment is a good prognostic factor. Here my version is that malaria is at present a problem in India but malaria in most of the population doesn’t present as catastrophe and it becomes problem only when fever is not taken care of timely. 2

3. Out of 9 recovered patients of cerebral malaria how many had neurological deficit at the time of discharge and how many required subsequent follow up for neurological deficit. This data could have given the changing scenario of neurological sequelae in survivors of cerebral malaria. 3

4. Outcome of two patients with malaria and dengue was not good, which could be because of less number of patients, as in a recent study prognosis in malaria and dengue co-infection was found to be good. 4

References


Reply from Author

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Sir,

We thank Dr. Shubhakaran for showing keen interest in our article. In our study 13 patients had cerebral malaria. The presenting symptoms were fever (100%), vomiting (53.8%), headache (38.4%), psychosis (46.15%), convulsions (23.07%) and unconsciousness (15.38%). The mortality rate was 30.7% in patient of cerebral malaria. Of the survivors (69.23%) 6 patients recovered completely. One patient complained of persistent headache, was CT brain was normal and he responded to analgesics and mannitol. One patient had psychosis and needed short-term anti-psychotic therapy and 1 patient had mild ataxia on discharge. Overall no significant long-term neurological sequelae was found.

In our study the outcome of patients with dengue co-infection was poor which may be due to the fact that study group comprised patients of severe falciparum malaria only.