Mefloquine:

Class: Antimalarial Agent.

Indications:

Treatment of mild-to-moderate acute malarial infections and prevention of malaria caused by *Plasmodium falciparum* (including chloroquine-resistant strains) or *P. vivax*.

Available dosage form in the hospital: 250MG TAB.

Trade Names:

Dosage:

-Malaria: Oral (dose expressed as mg of mefloquine hydrochloride):

-Mild-to-moderate, treatment: 1250 mg (5 tablets) as a single dose. **Note:** If clinical *improvement is not seen within 48-72 hours, an alternative therapy should be used for retreatment.*

-*Uncomplicated, treatment (unlabeled dose):* 750 mg (3 tablets) as initial dose, followed 6-12 hours later by 500 mg (2 tablets) (CDC, 2011)

-*Uncomplicated, chloroquine-resistant P. vivax malaria treatment (unlabeled use):* 750 mg (3 tablets) as initial dose, followed 6-12 hours later by 500 mg (2 tablets) with concomitant primaquine (CDC, 2011)

-*Chemoprophylaxis:* 250 mg weekly starting 1 week (CDC, 2012: ≥2 weeks) before arrival in endemic area, continuing weekly during travel and for 4 weeks after leaving endemic area. **Note:** Prophylaxis may begin 2-3 weeks prior to travel to ensure tolerance.

Renal Impairment :
No dosage adjustment necessary; only a small amount of mefloquine is renally eliminated.

Hepatic impairment: No dosage adjustment provided in manufacture's labeling; however half-life may be prolonged and plasma levels may be higher in patients with hepatic impairment

Common side effect:

Central nervous system: Chills, dizziness, fatigue, fever, headache

Dermatologic: Rash

Gastrointestinal: Vomiting (3%), abdominal pain, appetite decreased, diarrhea, nausea

Neuromuscular & skeletal: Myalgia

Pregnancy Risk Factor: B