SUS incorporated tafenoquine for malaria treatment

The great advantage of this drug used against P. vivax malaria is that it is a single-dose treatment

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São Paulo. Patients over 16 years of age throughout the country will have access, through the Unified Health System (SUS), to the drug tafenoquine, used against malaria, specifically for the type caused by *Plasmodium vivax*. The great advantage is that it is a single-dose treatment.

The ordinance from the Ministry of Health's Science, Technology, Innovation and Health Complex Vice-Ministry about the topic was issued this Tuesday (June 6) on the Official Gazette. The incorporation into SUS is set to happen within 180 days.

The standard drug is primaquine, administered for seven consecutive days, period in which there is an improvement in symptoms (such as pain and fever), which frequently causes treatment abandonment, although the parasites remain in the person.

Therefore, incomplete treatments pose a challenge to the control and eventual elimination of malaria in Brazil, enabling relapses and new transmission.

The use of tafenoquine, however, is conditional to the level of an enzyme known as G6PD (glucose-6-phosphate-dehydrogenase). If G6PD levels are low, the treatment with drugs from tafenoquine and primaquine's class can generate consequences like hemolysis (destruction of red blood cells) and severe anemia. Around 5% of the Brazilian population has G6PD deficiency.

The treatment of the acute phase of malaria also includes chloroquine, a drug that was largely used without scientific backing during the COVID-19 pandemic.

P. vivax is responsible for a milder form of malaria when compared to *P. falciparum*, the main cause of deaths from the parasitic infection in the world. Still, *P. vivax* causes great suffering and social and economic hurdles to the Brazilian population, with cases concentrated in the Amazon region, where there is a greater transmission of parasites by anopheline mosquitoes, the vectors of the disease. In 2021, 139 thousand cases were diagnosed in the country, 80% of those were caused by *P. vivax*.

Among the studies that supported the decision to incorporate the drug is TRuST (Tafenoquine Roll-oUt Study), which sought to provide malaria radical cure, that is, the elimination of the parasite both in the blood and the liver, with a combination of tafenoquine and G6PD testing.