



# ARMY MALARIA INSTITUTE

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611-1-6

AMI 081/00

Mr. Z Hodak  
Experimental Drugs Section  
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## ENDORSEMENT TO PRESCRIBE TAFENOQUINE

The Army Malaria Institute endorses

Dr. C. BLACKWOOD, B.N.H. MOSMAN

to be an authorised prescriber of Tafenoquine under the prescribing direction provided by the Institute.

Prescribing of Tafenoquine endorsed by the Army Malaria Institute

Tafenoquine is an aminoquinolone analogous to Primaquine. Primaquine is presently recommended by the Army Malaria Institute (AMI) for the eradication and treatment of Vivax Malaria. Tafenoquine has been trialed by AMI in both Bougainville and East Timor for eradication and treatment. It has been found to be effective and safe. This supports trials conducted by SmithKline Beecham, the manufacturer of Tafenoquine.

AMI directs prescribing of Tafenoquine for the purposes of treating recurrent Vivax Malaria in Defence Personnel after initial treatment with Chloroquine (IAW HPD215). For endorsement to prescribe Tafenoquine in treatment of recurrent Vivax Malaria, the following requirements must be met by the endorsed and prescribing medical officer:

- Discussion of each case with the AMI Medical Officer on call (T: 0407 150384),
- Diagnosis of recurrent Vivax Malaria and the primary episode of Vivax Malaria must be confirmed to AMI (to the satisfaction of the OC Clinical Field, AMI) prior to use of Tafenoquine,
- The case will be treated with Chloroquine initially IAW HPD215,
- The patient will be informed of the nature and potential side effects of Tafenoquine and this is to be recorded in the Patient Medical Documents,
- Tafenoquine treatment is to begin prior to any further evidence of Vivax Malaria (usually within one week of concluding Chloroquine treatment),

- The protocol for Tafenoquine shall be:
  - 200mg base daily for three days
  - followed by 200mg base weekly for eight weeks.
- Provision of blood slides (thick and thin film) or samples (should PCR be required for diagnosis) with results of a full blood count and liver function tests are required:
  - Prior to onset of treatment with Chloroquine (IAW HPD215),
  - Following treatment with Chloroquine,
  - Following treatment with Tafenoquine and
  - On the occurrence of any intercurrent illness requiring medical attention during the course of the treatment program, or
  - In the event of any recurrence of Vivax Malaria in the following 12 months.



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