A randomised, open study to assess the safety and efficacy of a new artesunate-mefloquine coformulation with an equivalent dose regimen of the individual drugs for the treatment of acute uncomplicated falciparum malaria (Thailand)

Submission date	Recruitment status	Prospectively registered		
15/04/2005	No longer recruiting	☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
07/06/2005	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
28/03/2017	Infections and Infestations			

Plain English summary of protocol

Background and study aims

Malaria is a serious tropical disease caused by a parasite spread by mosquitoes. Malaria has become increasingly difficult to treat over the last 50 years. The reason is that the parasite is able to adapt and become resistant to antimalarial drugs. In response to this problem the approach to treating malaria has changed. Combinations of drugs are used to reduce the chance of resistance developing. At first malaria patients were given the different treatments as separate tablets. This meant there was still a chance that patients might take one of the treatments without the other, especially if one had more side-effects. Increasingly more combined treatments have been developed with both drugs present in a single tablet. The aim of this study is to compare a new combined tablet containing two antimalarial drugs (artesunate and mefloquine) with the same drugs given as loose tablets for the treatment of malaria.

Who can participate?
Adults and children with malaria

What does the study involve?

Participants are randomly allocated to receive either received the new combined tablet or the separate tablets for 3 days as treatment for their malaria. Participants are seen daily for 3 days when they are given the treatment under supervision and then weekly for 9 weeks when blood samples are taken to see if they have been cured of their malaria.

What are the possible benefits and risks of participating? Not provided at time of registration Where is the study run from? Clinics of the Shoklo Malaria Research Unit (Thailand)

When is the study starting and how long is it expected to run for? July 2004 to October 2005

Who is funding the study?

- 1. Wellcome Trust (UK)
- 2. Drugs for Neglected Disease Initiative (Switzerland)
- 3. European Commission (Belgium)

Who is the main contact? Prof. Nicholas J White nickw@tropmedres.ac

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers RPC084

Study information

Scientific Title

A randomised, open study to assess the safety and efficacy of a new artesunate-mefloquine coformulation with an equivalent dose regimen of the individual drugs for the treatment of acute uncomplicated falciparum malaria (Thailand)

Study objectives

The aim of this trial is to measure the efficacy of a new fixed dose combination of mefloquine and artesunate for the treatment of acute uncomplicated malaria in adults and children and compare this to the efficacy of the loose tablets. The tolerability and safety of the new treatment will also be assessed and pharmacokinetic data will be collected.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Institutional Review Boards of:

- 1. Faculty of Tropical Medicine, Mahidol University, Thailand, 20/02/2004
- 2. Oxford Tropical Research Ethics Committee (OXTREC), Oxford University, UK, 04/08/2004
- 3. Secretariat Committee on Research Involving Human Subjects (SCRIHS), World Health Organization (WHO), July 2004

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Other

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

Health condition(s) or problem(s) studied

Malaria

Interventions

Fixed dose coformulation (intervention):

Once a day for three days - target dose of mefloquine is 8 mg/kg/day and for artesunate is 4 mg/kg/day using paediatric tablets 25/50 mg artesunate/mefloquine, or adult tablets 100/200 mg artesunate/mefloquine.

Non fixed tablets/standard dose (control):

Artesunate 12 mg/kg split as 4 mg/kg/day for three days and mefloquine 25 mg/kg split as 15 mg/kg/day and 10 mg/kg/day on second and third days of treatment.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Artesunate-mefloquine

Primary outcome measure

- 1. Parasitological cure
- 2. Adverse effects

Secondary outcome measures

- 1. Tolerability and safety of drugs defined as incidence of adverse events within 28 days of follow up
- 2. Haematological recovery during 63 days of follow up
- 3. Incidence of Plasmodium vivax infection during 63 days of follow up
- 4. Prevalence of gametocytaemia during 63 days of follow up
- 5. Description of population pharmacokinetic profile of mefloquine and artesunate during 63 days of follow up

Overall study start date

28/07/2004

Completion date

01/10/2005

Eligibility

Key inclusion criteria

- 1. Age more than six months, either sex
- 2. Minimum weight of 5 kg
- 3. Microscopically confirmed mono or mixed infection of P. falciparum (asexual falciparum parasitaemia more than 5/500 White Blood Cell [WBC] count)
- 4. History of fever or presence of fever (tympanic or axillary temperature more than 37.5°C)
- 5. Written informed consent to participate in trial

Participant type(s)

Patient

Age group

Mixed

Sex

Both

Target number of participants

500

Key exclusion criteria

- 1. Pregnancy or lactation
- 2. P. falciparum asexual stage parasitaemia more than 4% red blood cells (175,000/µL)

- 3. Clinical features of severe malaria: impaired consciousness, inability to drink or breast feed, convulsions during the present illness, prostration, severe anaemia, respiratory distress, shock, spontaneous bleeding, acute haemolysis with haemoglobinuria
- 4. Other significant illnesses or signs e.g. severe jaundice, liver disease, renal disease, severe malnutrition
- 5. Recent ingestion of mefloquine within previous 60 days
- 6. Contraindications to mefloquine history of convulsions and/or neuropsychiatric illnesses
- 7. Known hypersensitivity to artemisinins or mefloquine
- 8. Splenectomy

Date of first enrolment

28/07/2004

Date of final enrolment

01/08/2005

Locations

Countries of recruitment

Thailand

Study participating centre Faculty of Tropical Medicine

Bangkok Thailand 10400

Sponsor information

Organisation

Drugs for Neglected Diseases initiative (DNDi) (Switzerland)

Sponsor details

15 Chemin Louis Dunant Geneva Switzerland CH-1202 +41 (0)22 906 9230 dndi@dndi.org

Sponsor type

Research organisation

Website

http://www.dndi.org

ROR

https://ror.org/022mz6y25

Funder(s)

Funder type

Charity

Funder Name

Wellcome Trust

Alternative Name(s)

Funding Body Type

Private sector organisation

Funding Body Subtype

International organizations

Location

United Kingdom

Funder Name

Drugs for Neglected Diseases initiative (DNDi) (Switzerland)

Funder Name

European Commission (Belgium) (INCO-Dev programme) (project number: ICA4-2001 10193)

Alternative Name(s)

European Union, Comisión Europea, Europäische Kommission, EU-Kommissionen, Euroopa Komisjoni, Ευρωπαϊκής Επιτροπής, Εвροπεйската комисия, Evropské komise, Commission européenne, Choimisiúin Eorpaigh, Europskoj komisiji, Commissione europea, La Commissione europea, Eiropas Komisiju, Europos Komisijos, Európai Bizottságról, Europese Commissie, Komisja Europejska, Comissão Europeia, Comisia Europeană, Európskej komisii, Evropski komisiji, Euroopan komission, Europeiska kommissionen, EC, EU

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/11/2006		Yes	No