

Improving the management of childhood Malaria: an experiment to bridge the gap between MOthers and health care Providers

Submission date	Recruitment status	<input type="checkbox"/> Prospectively registered
02/04/2007	No longer recruiting	<input type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
31/05/2007	Completed	<input checked="" type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
16/08/2011	Infections and Infestations	

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

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Additional identifiers

Protocol serial number

ICA4-CT-2001-10010

Study information

Scientific Title

Acronym

MAMOP

Study objectives

This trial will be taking place in Burkina Faso and Tanzania, with slightly different interventions taking place in each area. The differences will be noted under the relevant sections with the title of the country in which the changes are taking place.

Tanzania:

To evaluate the feasibility and effectiveness of an intervention aimed at improving case management of malaria in under-five children through the primary caretakers in collaboration with local women groups and existing health centres.

Burkina Faso:

The study hypothesis is that improved home management of malaria in young children of Sub-Saharan Africa (SSA) will result in earlier treatment with consequently reduced morbidity and mortality.

Ethics approval required

Old ethics approval format

Ethics approval(s)

The study was approved by:

1. The local Ethics Committee in Burkina Faso
2. The Tanzanian Commission of Science and Technology

Study design

Multicentre, interventional, cluster-randomised, controlled, community intervention effectiveness trial with a pre-post design.

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Treatment of childhood febrile illness; malaria

Interventions

Tanzania (trial ran from 01/02/2004 to 01/05/2005):

Study children N = 1715 children in baseline, 2169 in follow-up (aim was to enrol one under five from each of a minimum of 1200 households). Health workers were trained to train local women leaders in recognising malaria symptoms, providing first line treatment for uncomplicated malaria (sulfadoxine/pyrimethamine) and referring severe cases. The health workers were also trained to supervise the women groups. The evaluation was through a baseline survey on children aged 6 to 59 months in early 2004 and a follow-up survey in early 2005, i.e. the follow-up was after 10 months.

Burkina Faso (trial ran from 01/09/2002 to 31/10/2004):

Study children N = 2089 (1200 households). The intervention consisted of training of health

workers on malaria home treatment, of training of women group leaders on malaria home treatment, of treatment of under five children through their mothers supervised by women group leaders, of supervision of women group leaders by health workers, and of provision of malaria drugs through health workers in form of a revolving fund. Follow up in Burkina Faso was for the two rainy seasons.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

The primary outcome of the study was the proportion of moderate to severe anaemia (haematocrit less than 24%, haemoglobin less than 8 g/L) in children aged six to 59 months.

Evaluation of the trial in Burkina Faso was through a baseline and a follow-up survey.

In the Tanzanian study: Baseline survey Feb-April 2004 and follow-up survey Feb-April 2005.

Key secondary outcome(s)

1. Fever and malaria prevalence
2. Prevalence of palpable spleens (Hackett score greater than two)
3. Prevalence of other illnesses
4. Mean species-specific number of blood films positive for malaria parasites
5. Mean species-specific malaria parasite densities
6. Mean haematocrit and haemoglobin values
7. Mean weight
8. In vivo chloroquine resistance

Evaluation of the trial in Burkina Faso was through a baseline and a follow-up survey.

In the Tanzanian study: Baseline survey Feb-April 2004 and follow-up survey Feb-April 2005. The number of participants in the follow up survey was 2169.

Completion date

01/05/2005

Eligibility

Key inclusion criteria

1. Health workers: all health workers in the district were selected for training
2. Women leaders: all women from the existing women groups in the area were targeted and enrolled if:
 - 2.1. They had completed primary school
 - 2.2. They were a member of an already existing womens group
 - 2.3. They were a resident of the chosen village and expected to live there during the MAMOP study period
- This gave 36 women of which 25 were randomly selected for the intervention
3. Households: all households in the randomly sampled villages were included
4. Children: children aged six to 59 months

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Child

Lower age limit

6 months

Upper age limit

59 months

Sex

All

Key exclusion criteria

1. Women leaders who were:
 - 1.1. Illiterate
 - 1.2. Not resident in the MAMOP villages
2. For all: those who did not consent to participating
3. Children: aged less than six months or greater than 59 months

Date of first enrolment

01/09/2002

Date of final enrolment

01/05/2005

Locations

Countries of recruitment

Burkina Faso

Tanzania

Study participating centre

Centre de Recherche en Santé de Nouna

Nouna

Burkina Faso

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Sponsor information

Organisation

Research Centre in Health of Nouna (Centre de Recherche en Santé de Nouna [CRSN]) (Burkina Faso)

ROR

<https://ror.org/059vhx348>

Funder(s)

Funder type

Government

Funder Name

European Commission (Belgium) - FP5 (Fifth Framework Programme for Research and Technological Development, Quality of Life and Management of Living Resources Programme) (ref: ICA4-CT-2001-10010)

Results and Publications

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?
<u>Results article</u>	results	01/01/2007		Yes	No
<u>Results article</u>	results	01/12/2010		Yes	No