Multicentre, open-label randomised clinical trial of efficacy and tolerability of the fixed-dose artesunate/amodiaquine (AS/AQ) combination therapy and amodiaquine (AQ) monotherapy for treatment of uncomplicated falciparum malaria in India

Submission date	Recruitment status No longer recruiting	Prospectively registeredProtocol		
15/01/2008				
Registration date	Overall study status	Statistical analysis plan		
30/01/2008	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
28/03/2017	Infections and Infestations			

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

Protocol serial number DND-ASQ-06

Study information

Scientific Title

Multicentre, open-label randomised clinical trial of efficacy and tolerability of the fixed-dose artesunate/amodiaquine (AS/AQ) combination therapy and amodiaquine (AQ) monotherapy for treatment of uncomplicated falciparum malaria in India

Study objectives

- 1. To measure the clinical and parasitological efficacy of the fixed-dose artesunate/amodiaquine combination therapy among children and adults patients (6-month to 60-year old) suffering from uncomplicated falciparum malaria, by determining the proportion of patients achieving a negative parasitaemia without relapse before 28 days (cure rate)
- 2. To measure the parasite reduction ratio at 48 hours of treatment, parasite clearance time, fever clearance time, proportion of patients with gametocyte persistence at end-of-treatment
- 3. To evaluate the incidence of adverse events
- 4. To formulate recommendations and to enable the Ministry of Health to make informed decisions about the possible need for updating of the current national antimalarial treatment guidelines

Ethics approval required

Old ethics approval format

Ethics approval(s)

Institutional Ethics Committee of the National Institute of Malaria Research (ICMR), 26/09/2006

Study design

Multicentre open-label randomised clinical trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Malaria

Interventions

Patients will be randomised into the following treatment groups (2:1):

Group A: fixed-dose AS/AQ combination tablets (paediatric: 25 mg/67.5 mg - adult: 100 mg/270

mg), oral route, dose according to age, once-daily during three days

Group B: AQ tablets, oral route, dose according to age, three-day course

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Artesunate, amodiaquine

Primary outcome(s)

Cure rate: proportion of patients with 'Adequate Clinical and Parasitological Response' (ACPR) as defined by WHO

Key secondary outcome(s))

Secondary efficacy endpoints:

- 1. Parasite reduction ratio (PRR) at 48 hours
- 2. Parasite clearance time
- 3. Fever clearance time
- 4. Proportion of patients with gametocytes persistence at end-of-treatment
- 5. Proportion of patients with early treatment failure (ETF), late treatment failure (LTF), and late parasitological failure (LPF)

Safety variables:

Incidence of any adverse event will be documented. All patients will be routinely asked about old symptoms and new symptoms emerging since previous visit

Completion date

31/12/2007

Eligibility

Key inclusion criteria

- 1. Children and adults from 6 months to 60 years of age, both genders
- 2. For children: body weight greater than 5 kg
- 3. Uncomplicated falciparum malaria
- 4. Axillary temperature greater than 37.5°C
- 5. P. falciparum parasitaemia 1000 100,000 asexual forms/µL
- 6. Ability to swallow oral medication
- 7. Ability and willingness to comply with the study protocol for the duration of the study and to comply with the study visit schedule
- 8. Written informed consent (participant or parent/guardian)

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Other

Sex

All

Key exclusion criteria

- 1. Presence of general danger signs among the children less than 5 years old or other signs of severe and complicated falciparum malaria according to current World Health Organization (WHO) definitions
- 2. Mixed or mono-infection with another Plasmodium species
- 3. Presence of severe malnutrition

- 4. Presence of febrile conditions due to diseases other than malaria (measles, acute lower tract respiratory infection, severe diarrhoea with dehydration, etc.) or other known underlying chronic or severe disease (e.g. cardiac, renal, hepatic diseases, human immunodeficiency virus [HIV] /acquired immune deficiency syndrome [AIDS])
- 5. History of hypersensitivity reactions to any of the drug(s) being tested or used as alternative treatment
- 6. Positive pregnancy test or lactating
- 7. H/O antimalarial treatment in past 15 days

Date of first enrolment

01/02/2007

Date of final enrolment

31/12/2007

Locations

Countries of recruitment

India

Study participating centre
National Institute of Malaria Research
New Delhi
India
110029

Sponsor information

Organisation

Drugs for Neglected Diseases initiative (DNDi) (Switzerland)

ROR

https://ror.org/022mz6y25

Funder(s)

Funder type

Research organisation

Funder Name

Medecins Sans Frontieres (MSF) (International)

Funder Name

Ministerie van Buitenlandse Zaken

Alternative Name(s)

Dutch Ministry of Foreign Affairs, Ministry of Foreign Affairs, Ministry of Foreign Affairs of the Kingdom of the Netherlands

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Netherlands

Funder Name

Department for International Development

Alternative Name(s)

Department for International Development, UK, DFID

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

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	d Peer reviewed	? Patient-facing?
Results article	results	30/03/2012	Yes	No

Participant information sheet Participant information sheet 11/11/2025 No Yes