Patterns of anemia during malaria
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Letter to the editor

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Dear Editor,

We read with interest the article by Rehman et al. on post-artesunate hemolysis (PADH). Hemolysis is indeed commonly associated with the class of artemisinin drugs when used for the treatment of severe malaria. Their review confirmed the high incidence of this adverse event related to the mode of action of artemisinins and the physiological role of the spleen. As the authors wisely pointed out, delayed hemolysis should not jeopardize the deployment of artesunate as the first-line treatment of severe malaria worldwide. While PADH is indeed rarely (if ever) fatal, artesunate significantly reduces mortality as compared to quinine, markedly so in patients with parasitemia greater than 10% on admission. Importantly, PADH has been further characterized by a pathophysiological study in travelers treated with artesunate for severe malaria. Early peak concentrations of circulating once-infected erythrocytes are predictive for the occurrence of PADH and may therefore serve as a future candidate marker for PADH. Rehman et al. referred to different anemia patterns in their analysis of published reports. This definition was based on initial descriptions by Zoller et al. and on a more refined definition proposed in a closed meeting organized by the Medicine for Malaria Venture (MMV) in March 2013 in Vienna (http://www.mmv.org/sites/default/files/uploads/docs/events/2013/InjectableArtesunateExpertGroupMeeting.pdf) and later published in the above mentioned pathophysiological paper. Whereas initial reports were acknowledged in the article by Rehman et al., the optimized nosological classification was not referenced in the manuscript. This omission is likely due to the disclosure in the MMV report (which became publicly available in 2013) of the then unpublished, optimized case definition proposed by our group, without precise referencing of the source of that particular set of information. Sharing unpublished results or concepts during subject-specific meetings, like the one efficiently organized by MMV in Vienna, is important as it allows the malaria community to adapt rapidly and efficiently to new problems with a public health impact. When reports of such meetings carefully acknowledge all respective contributions, this ultimately contributes to maintaining rich exchanges between attendees.

References


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