

**CASE SERIES ANALYSIS OF CEREBRAL AND  
SEVERE MALARIA PATIENTS ADMITTED TO  
HLEGU TOWNSHIP HOSPITAL (2007)**

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## **Abstract**

This study is a case series analysis of cerebral and severe malaria patients admitted to Hlegu Township Hospital during the period of January to December, 2007. The objective of this study is to study the diagnosis and treatment given to cerebral and severe malaria patients admitted to Hlegu Township Hospital from January to December, 2007. Medical records of study patients were reviewed. Thirty cerebral malaria and 14 severe malaria cases totaling 44 cases included in the study. The mean age of cerebral and severe malaria cases was 22 years; the median age was 20 years with standard deviation of 10.8 years. Fifty nine percent were in the age group of 15-44 years. Sex distribution was 29 male and 15 female. Thirty seven cases are more than 5 kilometers away from the hospital and 7 cases are less than 5 kilometers. Microscopic examination of malaria parasite was done in 41 cases and malaria parasite was found positive in 37 cases (36 p.f positive and 1 p.v positive). Malaria parasite rechecks were done on 11 cases and three cases were malaria parasite positive on rechecks. Twenty-eight cases of cerebral and severe malaria excluding expired and referred cases received complete course of malaria treatment. Fifteen out of 28 cases were given treatment according to national guideline. The first line antimalaria drugs used in Hlegu Hospital were Quinine and Tetracycline. The outcomes of cerebral and severe malaria were twenty seven recoveries, five expired, five transferred out, four signed and gone and three discharges on request. Among five expired cases of cerebral and severe malaria, there were five, ten and eleven year's children. Case fatality rate among total malaria cases was 2.4% and among cerebral and severe malaria cases was 11.4% for Hlegu Hospital. Average duration of hospital stay for cerebral and severe malaria was 5 days. It was recommended that the diagnosis of all malaria cases should be confirmed by microscope or rapid diagnostic test (Parachek). All cerebral and severe malaria should be treated according to national guidelines. Cross checking for quality assurance of malaria diagnosis should be carried out. Malaria parasite rechecks should be done on day 1, 2 and 3. Particulars of the patients, clinical presentations and patients' conditions should be noted completely.