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Severe Falciparum Malaria

Severe, life-threatening malaria is nearly always caused by *P. falciparum*. The following conditions have been proposed as manifestations of severe falciparum malaria by a working group convened by the World Health Organization (WHO).

I. Cerebral malaria

- Coma
- Convulsions
- Severe anaemia (particularly in children)
- Muscle tone may be increased or decreased
- Fever
- Jaundice (adults)
- Enlarged liver and spleen
- Muscle tone may be increased, decreased or normal
- Retinal haemorrhage on ophthalmoscopy

Untreated cerebral malaria is probably uniformly fatal. Overall mortality in treated cerebral malaria in reported studies averages 15% in children and 20% in adults (but upto 50% in pregnancy).

II. Hypoglycaemia

- May be asymptomatic .
- May present as further deterioration in the level of coma.

III. Pulmonary oedema

- Hyperventilation (respiratory distress)

IV. Acute renal failure

- Common complication of malaria in adults living in areas of low or unstable transmission.
- Oliguria or polyuria
- Jaundice
- Bleeding tendency

V. Metabolic acidosis

- Hyperventilation with increased inspiratory effort
- Hypotension

Blackwater fever

Blackwater fever is a condition where:

- After several bouts of falciparum malaria, particularly if there has been inadequate treatment, there is occasionally an abrupt onset of massive intravascular hemolysis with fever, chills, and prostration.
- The hemoglobin escapes into the urine turning it black if the urine is acidic

Algid malaria

Algid malaria is a malarial condition where:

- There may be subnormal temperature, weakness, prostration, feeling of cold, vomiting, rapid

respiration and oliguria.

- Death may occur but the patient is conscious till the end.
- It could be due to adrenal crisis, absorption of endotoxin from the gut or cachectin-tumor necrosis factor from endotoxin activated macrophages.

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