

## EDITORIAL

# Changing an old therapy of a historic human infection: Malaria

Malaria is endemic in more than 90 countries and is one of the major causes of death by infectious diseases worldwide [1,2]. A recent study on global malaria mortality between 1980 and 2010 found that malaria mortality burden is larger than previously estimated [3]. Episodes of severe malaria were documented to adversely affect the cognitive development of children [4]. The disease has been known throughout recorded history [5], and quinine was used for medication since the 19th century [6].

In April 2011, and based on new scientific evidence, the World Health Organization (WHO) released new guidelines recommending injectable artesunate as the first-line treatment for severe malaria in both children and adults. Injectable artesunate, when compared to parenteral quinine, has been shown to reduce mortality by 35% in adults and 22% in children. To highlight this, the present issue of the Sudanese Journal of Paediatrics (SJP) starts with the section "Current Opinion" entitled "Time to switch from quinine", followed by a cutting edge review on drug-resistant malaria in Sudan. The review highlights the fact that one of the early randomized controlled trials conducted in Africa to compare an artemisinin with quinine was reported from Sudan in 2002 [7]. Actually this study was based on one of the 10 theses devoted to malaria, during the period 1983-2004, submitted as a pre-requisite requirement to qualify to sit the final part of the examination for the Master in Paediatrics and Child Health (MPCH, later renamed Clinical MD in Paediatrics and Child

Health) at the University of Khartoum [8]. Another similar study was later published in the SJP in 2009 [9]. It's noteworthy that one "Original Article from Thesis" in the current issue of SJP is on "Etiology and clinical pattern of cervical lymphadenopathy in Sudanese children". The other is based on an Msc in Clinical Pharmacology, The University of Gezira.

"The Sudan figures prominently in the history of tropical medicine", a statement written by Harry Hoogstraal in his introduction to the book "A monograph on Biochemical Research" written by the Late Professor Mansour Ali Haseeb [10]. Harry Hoogstraal was an American entomologist and parasitologist, who had been described as "the greatest authority on ticks and tickborn diseases who ever lived" [11]. Historical Perspectives in the present issue of SJP is based on a book review describing the life and work of the Late Dr. Mohammed Hamad Satti (1913-2005), one of the founders of tropical medicine in Sudan [12]. Dr. Satti succeeded Haseeb as the Director of Stack Medical Research Laboratories in Khartoum. In collaboration with many other doctors and scientists, including Professor Haseeb, he carried out extensive field and laboratory studies on the major killing diseases of children in Sudan, including leishmaniasis, malaria and cerebrospinal meningitis. The reviewed book [12] is one of "Pioneers of Sudanese Medicine" series launched by Prof. Ahmad Al Safi to commemorate the achievements of those who dedicated their lives in Sudan to the wellbeing of children and adults.

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One of the features of the current issue of the SJP is its enrichment with articles from pediatricians, of different background training and experience, in Sudan as well from the Gulf Region. The Reviews, Original Articles and Case Reports covered a wide array of disciplines including neonatology, nutrition, infectious diseases, hematology/oncology, endocrinology, respiratory medicine, cardiology,

immunology and neurology.

We would like at the end to extend our thanks to the Executive Committee of the Sudan Association of Paediatricians (November 2011 – October 2013), Dr. Amani Nuri, and Members of the National and International Boards for the efforts and support that kept the SJP leaping forward.

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