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Neonatal malaria due to *Plasmodium vivax*.

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Abstract : A baby, aged 7 weeks, had done well in the early newborn period but malaria, suspected by the mother from the age of 2 weeks, became apparent by about 4 weeks, and, on admission to hospital in Minnesota, *Plasmodium vivax* was seen on blood films. The parents had lived in New Guinea for 2 years and had taken chloroquine weekly, until their departure but discontinued this during their 2-month stay at home through non-endemic areas. They arrived in Minnesota 6 months before the baby's birth, and the mother had an attack of confirmed malaria, treated with chloroquine.

month after arrival. She had another attack of chills and fever 2 months later treated herself with chloroquine. Blood films from both parents were negative for parasites. Indirect fluorescent antibody tests showed titres to *P. vivax* antigen in the baby, 1 in 1024 in the mother, and 1 in 256 in the father. Both mother and father showed titres of 1 in 64 to *P. falciparum*, but were negative to *P. malariae*. At initial examination the baby was slightly jaundiced and had an enlarged liver, enlarged spleen and a haemoglobin level of 5.4 g/100 ml, among other clinical and laboratory findings which are given. He responded well to treatment with chloroquine doses over 4 days (5 mg/kg/dose). 5 days after admission the haemoglobin was 8.6, and 1 month later it was 11.4 g/100 ml.

F. I. C. Apted.

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