

ABSTRACT

Background:

Malaria is a life-threatening disease. In Uganda, the Ministry of Health adopted the artemisinin combination therapy (ACT) artemether/lumefantrine (AL) 20mg/120mg as the first-line treatment for uncomplicated malaria in 2004(MoH, 2012). Further, Uganda also adopted the WHO (2012) guidelines of testing all suspected cases of malaria prior to treatment (MoH, 2012). It's unclear whether health care providers in these districts adhere to the Ministry of Health (2012) guidelines for malaria management.

Objectives of the study:

The objective of this study was to assess level of adherence and associated factors to national malaria management guidelines by health providers in lake shore areas in Uganda.

Methods:

A cross sectional study design used and data was collected from patients and providers from selected health facilities. A total of 286 patients were screened and 197 were eligible and consented to participate in the study. A total of 26 health care providers were interviewed.

Results:

Appropriate medical history taking and physical examination was only reported by 8.1% of the patients, 65.5% were tested either using Rapid Diagnostic Testing kits (RDTs) or microscopy. Only 6.1% reported adherence to appropriate medical history & appropriate physical examination and testing for malaria. Regarding adherence to prescription guidelines, 18.6% of those who tested negative received an ACT drug/prescription, and 10.1% tested positive but did not receive an ACT drug or prescription. Overall adherence to all guidelines (medical history, physical examination, testing, and prescription) was a mere 3.1% and health care provider training on the guidelines was the only factor associated with adherence.

Conclusion and recommendations:

The overall level of adherence to the national malaria management guidelines was very low with only 3.1% of the patients managed in strict adherence to the national malaria management guidelines by the health care providers. This calls for health care provider trainings on malaria management to improve adherence.