A Temporizing Solution to "Artemisinin Resistance"

THE AUTHORS REPLY: We do not advocate oral monotherapy with artemisinins. Instead, we encourage the appropriate use of ACTs and fully support global efforts to eliminate malaria. Recent data show that regionally applied treatment and control measures have been highly effective in the Greater Mekong Subregion.[1]

Therapy with dihydroartemisinin–piperaquine fails because of resistance to piperaquine[2] and also perhaps because dihydroartemisinin is more prone to decomposition than artesunate.[3] More recent studies of pyronaridine–artesunate, including a study from Vietnam, confirm that cure rates are higher than 95% and reassure us that effective treatments are available.[4] Thus, artemisinins remain the only available drug class that can manage and eliminate *P. falciparum* if ACTs are appropriately adjusted, as we elaborated in our Perspective article.

Furthermore, our global community should acknowledge a shared future in which no country is neglected. Urgent actions to control malaria should be focused on areas where the highest disease burdens are present, such as in Africa, where, for example, Nigeria bears 25% of the world's malaria burden.[5]

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