



Hyper-Reactive Malarial Splenomegaly: A Neglected Disease by the Contemporary World

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Malaria could progress to a chronic form in individuals with partial immunity. Chronic malaria is often characterized by the lack of acute malaria symptoms. Thus, this disorder was considered as asymptomatic carrier state. Hyper-reactive malarial splenomegaly (HMS) is likely the most severe chronic form of malaria. HMS-earlier known as tropical splenomegaly syndrome - has classic manifestations. The manifestations of HMS include, massive splenomegaly, elevated titers of anti-malarial antibodies and polyclonal immunoglobulin M hypergammaglobulinemia [1,2].

HMS diagnosis is challenging as there are various disease which could mimic HMS including visceral leishmaniasis, lymphoproliferative disorders and myeloproliferative disorders. The diagnosis requires exclusion of such other causes and presence of huge splenomegaly usually greater than 10 cm and raised immunoglobulin M.

Data on HMS prevalence is scarce; however reports show its prevalence ranges from 1 - 2% in Nigeria to 80% in some societies in the Papua New Guinea. Though individuals having HMS respond for anti-malarial medications, the syndrome is not correctable. Thus, HMS could relapse after treatment that manifests with re-enlargement of the spleen and deterioration of the immunological functions [3,4].

Due to the occurrence of drug resistance, medicines that were effective in the past might not work anymore. Regrettably, no trustworthy records are available and clinical trials are lacking. The response to HMS therapy is assessed by measuring the splenic size, serum IgM titers, hematologic profiles, and by looking at the overall well-being of the patient.

With regards to HMS treatment outcome various studies have shown different outcomes. There are different anti-malarial medications that can be used in the treatment of this disease. Chloroquine, mefloquine, proguanil, pyrimethamine, and the artemisinin

derivatives are few of the medications used in the treatment of HMS. The treatment outcome ranged from no change to improvement in almost all the patients. However, these studies have used different regimens and duration of treatment. The response rate ranged from nil to 100 percent [5-8].

HMS has remained a disease with challenging diagnosis, unclear treatment regimen and duration. The World should pay due attention in devising a simple diagnostic technique and formulating an effective treatment modality in tackling this deadly condition.

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