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WS

INDUSTRY STANDARD OF THE PEOPLE'S REPUBLIC OF CHINA

WS 259-2006

Replacing WS 259-2006

Diagnosis of malaria

(English Translation)

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Foreword

This standard except Chapter 6 is the recommended terms, the rest is mandatory.

This standard was drafted in accordance with the rules given in GB/T 1.1-2009.

This standard replaces WS 259-2006 "diagnostic criteria for malaria." Compared with WS 259-2006, the main changes are as follows.

--- Standard name was changed to "diagnosis of malaria";

--- Modify the definitions of "malaria" and "severe malaria" in terms and definitions (see 2.1 and 2.2, 2006 edition 2.1 and 2.2);

--- Removed "worms" in terms and definitions (see version 2.3 of 2006);

--- Added "asymptomatic infection" definition (see 2.3);

--- Modify the diagnosis based on the epidemiological description of the history (see 3.1);

--- Increased "critical clinical manifestations" (see 3.2.3);

--- Removed "hypothetical treatment" in diagnostic evidence (see version 2006 3.3);

--- Increase the "laboratory test" in the diagnosis of "positive test for nucleic acid of Plasmodium" (see 3.3.3);

--- Increasing the "asymptomatic infection" diagnostic criteria (see 5.1);

--- Modify the diagnostic criteria for "clinical diagnosis cases" and "confirmed cases" (see 5.2 and 5.3, 2006 edition 5.3 and 5.4);

--- Increased the "severe cases" diagnostic criteria (see 5.4);

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--- Modify the differential diagnosis (see Chapter 6, 2006 edition Chapter 6);

--- Modify the description of sources of infection (see A.1.1, 2006 edition A.1.1);

--- Modify the description of susceptible people (see A.1.3, 2006 edition A.1.3);

--- Modify the description of the geographical distribution (see A.1.4, 2006 edition A.1.4);

--- Modify the description of the seasonal distribution (see A.1.5, 2006 edition A.1.5);

--- Modify the description of the incubation period (see A.2.1, 2006 edition A.2.1);

--- Modify the description of the attack period (see A.2.3, 2006 edition A.2.3);

--- Removed "cerebral malaria" and "complications" (see 2006 edition A.2.5 and A.2.6);

--- Added "Severe Malaria" (see A.2.5);

--- Removed "presumptive treatment" (see the 2006 edition of Appendix B);

--- Removed the "dye configuration" chapter (see 2006 edition C.2);

--- Modify Appendix C (see Appendix C, 2006 edition of Appendix D);

--- Added Appendix D (see Appendix D);

--- Added Appendix E (see Appendix E).

This standard was drafted. Chinese Center for Disease Control and Prevention Institute of Parasitic Diseases, Institute of Parasitic Diseases in Jiangsu Province, Zhongshan Zhongshan Medical College.

1 Scope

This standard specifies the basis for diagnosis of malaria, diagnostic principles, diagnostic criteria and differential diagnosis.

This standard applies to all levels of disease prevention and control agencies and medical institutions for the diagnosis of malaria.

2 Terms and definitions

The following terms and definitions apply to this document.

Malaria

Plasmodium parasitic diseases caused by the human body, there are vivax malaria, falciparum malaria, day, oval malaria and so on.

Severe malaria Cases of malaria diagnosed, coma, severe anemia, acute renal failure, pulmonary edema or acute respiratory distress syndrome, hypoglycemia, circulatory Ring failure or shock, metabolic acidosis, one or more clinical manifestations.

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Asymptomaticcase for asymptomatic infections Plasmodium in the blood without clinical symptoms.

3.1 Epidemiological history (see Appendix A)

The malaria transmission season has a nighttime history of malaria endemic or blood transfusions in the recent 2 weeks.

3.2 Clinical manifestations (see Appendix A)

3.2.1
Typical clinical manifestations. periodic attack, every day or every other day or two episodes. Attacks chills, fever, sweating embolism shape. Episodes may occur after splenomegaly and anemia.

3.2.2
atypical clinical manifestations. with chills, fever, sweating and other symptoms, but the heat-type and episodes of irregular.

3.2.3
Severe clinical manifestations. severe patients may be coma, severe anemia, acute renal failure, pulmonary edema or acute respiratory distress syndrome Signs, hypoglycemia, circulatory failure or shock, metabolic acidosis and so on.

3.3 Laboratory test

3.3.1
microscopic examination of blood smears check malaria parasite (see Appendix B).

3.3.2
Plasmodium antigen test positive (see Appendix C).

3.3.3
Plasmodium nucleic acid test positive (see Appendix D).

4 Diagnostic principles

According to epidemiological history, clinical manifestations and laboratory tests, etc., to be diagnosed.

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