Haiti is one of two countries in the Caribbean with endemic malaria, reporting about 32,000 cases every year. One of the major challenges of malaria control efforts in Haiti is the lack of data related to drug resistant malaria parasite infections. Efforts to obtain this information can be hindered by malaria patient non-compliance defined as non-adherence to antimalarial treatment regimen and/or needed treatment follow-up visits. Information on factors that contribute to non-compliance to antimalarial treatment is limited. The objectives of my internship project were to investigate the frequency and demographic characteristics of non-compliant malaria patients in an on-going malaria study in Haiti.

Eight-one patients were enrolled in the compliance study out of the larger malaria study conducted at two health centers in Haiti (Blanchard Clinic and Hospital St. Croix). The larger malaria study treatment protocol was as follows: 3-day chloroquine regimen and 6 weekly follow-up visits. Sometime after treatment and follow-up weeks, patients were contacted via telephone by a community health agent. In total, 67.9% of patients were compliant to treatment and follow-up visits. We found a marked difference in compliance across the two health centers (Blanchard = 48.6% and Hospital St. Croix = 84.1%). Further investigation showed that each health center site had a distinct demographic profile related to education, religious affiliation, and household composition. In addition, Hospital St. Croix staff reported patient retention practices (e.g., additional transportation support and appointment reminders) that may have contributed to a higher compliance frequency. Future studies in a larger patient sample should investigate the possible roles that site specific demographic characteristics and health center patient retention practices play in malaria patient compliance.