

Doxycycline

Adult dose 100 mgs, 1 capsule daily

Doxycycline should be taken 1 to 2 days before you arrive in a malarious area, continue whilst you are there and for 4 weeks after you leave as recommended by the UK Advisory Committee on Malaria Prevention for UK travellers and <https://bnf.nice.org.uk/>

Doxycycline is **unsuitable** if you:

- Are pregnant (occasionally offered if travel is unavoidable and no other alternative available and the entire course can be completed before 15 weeks' gestation)
- Breast feeding
- Are under the age of 12 years
- Are allergic to Tetracycline antibiotics
- Have Systemic Lupus Erythematosis (SLE), Myasthenia Gravis or Porphyria
- Have liver or kidney problems: caution is advised
- Have achlorhydria (a lack of stomach acid).

Drug interactions include warfarin, ciclosporin, bismuth, antacids, iron and zinc, rifampicin, retinoids, methotrexate, methoxyflurane, malarone (atovaquone), quinapril, paracetamol, phenobarbital, phenindione, phenytoin, lithium, carbamazepine, ergotamine, methysergide, statins, sulphonylureas, and the oral typhoid vaccine - this list is not exhaustive: please check

<https://bnf.nice.org.uk/interaction/>

- **Effectiveness:** For effective prevention you must take the full course of capsules. It can be taken continuously for up to 2 years. There is no evidence of harm in long term use.
- **Side effects:** Approximately 3% develop a skin rash due to sun exposure – usually mild and transient (use a sunscreen minimum SPF 30, UVA 4-5 stars) Doxycycline may cause some indigestion. You are advised to take the capsule with food, swallowing it with a large glass of water whilst sitting up/standing. Doxycycline is an antibiotic and can predispose those who are susceptible to vaginal thrush - consider travelling with treatment for thrush. Should headaches associated with eye-sight problems start while taking Doxycycline, seek medical advice urgently.