



Newsletter n°3 - CUREMA

Second quarter 2024

Radical CURE for MAlaria Among Highly Mobile and Hard-to-reach Populations in the Guyanese Shield (CUREMA)

Inclusions

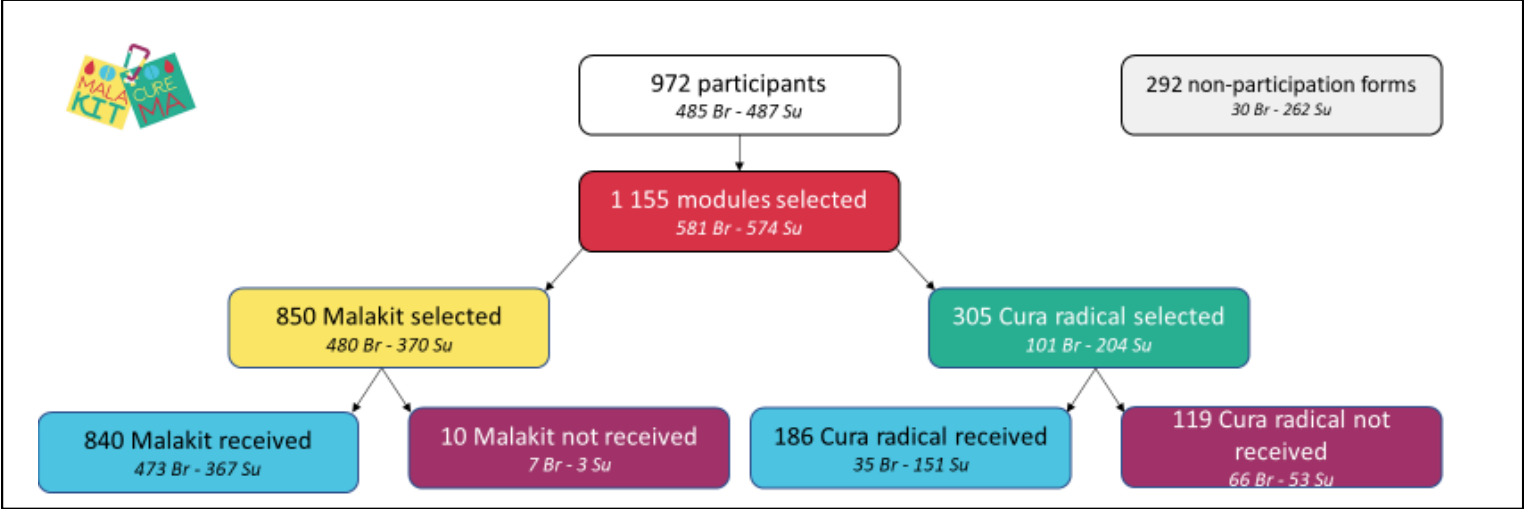
Since the beginning of 2024, with the re-start of Malakit distribution in Suriname and the successful launch of the study in Brazil, the number of inclusions increased, both along the Maroni and Oyapock borders! It's a clear motivating time for our teams, as we are moving forward with determination towards our objectives, despite the pitfalls encountered at the beginning of the study.

It allowed to triple the number of participants in three months. Up to date, **972 participants** have been included in the study. As a reminder, the project allows participants to choose between two modules: Malakit and/or Cura radical. An algorithm, available on tablets devices, determines if criteria are reached to deliver module(s) choosen.

Among all participants enrolled in the project, **840 Malakit** were distributed (**473** in Brazil and **367** in Suriname) and **186** persons received Cura radical module against *Plasmodium vivax* (**35** in Brazil and **151** in Suriname).

The smartphone application, allowing participants follow-up and share of videos and information about the study, has been installed on **643 phones** of participants and **153** persons used this tool for their follow-up session after receiving Cura radical module.

Following, the eligibility diagram of the project (Br = Brazil / Su = Suriname):



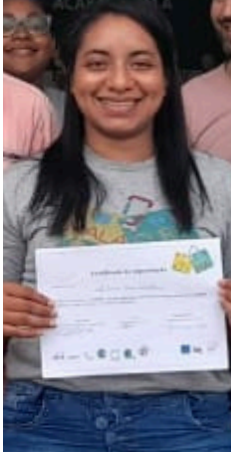
Training

Training of new facilitators

The field team, especially in Brazil, have been strengthened during the past months to meet the heavy demand of participation to the study, and following as well the departure of two facilitators. Indeed, **four new team members** have been recruited in Brazil.

These newcomers participated in a training based on a first **theoretical part** provided by the Cayenne Coordination team and reinforced by a practical part provided by the other facilitators using **a peer learning methodology**. It allowed to reinforce the knowledge of facilitators already involved in the project, and support and train the newcomers. This methodology, used during the general training of facilitators (*as highlighted in the article below*), was really efficient and facilitators developped friendship relations during this time.

So, welcome to Lorrana, Telma, Max and Marlina in the team. Our Oyapock team of facilitators is now composed of **seven people**, moving between the three places of inclusion: the fixed and mobile bases at **Oiapoque**, and the base at **Ilha Bela**, located on the Oyapock river.



Lorrana



Telma



Max



Marlina

Deployment of project evolutions

The supervisions, done by the Coordination at the inclusion sites, are opportunities to introduce **new tools** and **knowledge** to the facilitators. Indeed, we setted up the collection of the **blotting papers** containing two drops of blood for PCR and malaria serology studies among participants of the Curema project. This collection is managed only by trained facilitators, and always with consent of participants.

Storage of these papers is a real challenge in remote areas, requiring precise **humidity** control and rigorous **blood drop collection** protocols.



Tafenoquine

The launch of use of **tafenoquine** is a step awaited by all partners. In the Cura radical module, it will allow participants to replace a seven-day primaquine treatement by a **single dose** of tafenoquine.

Waiting for the availability of this treatment, we hope to be able to implement this new protocol during the coming months. Additional trainings for the teams of facilitators in the field will be organized accordingly.

Visibility of the project

🎒 Brasilia Scientific Meeting

The Curema project team visited the Brazilian federal capital, Brasilia, last March. The main objective of this mission was to organize an **international scientific seminar** bringing together scientific and institutional teams from France, Brazil and Suriname. International partners involved in the elimination of malaria in hard-to-reach populations attended as well this seminar.

To address research challenges, **working groups** were organized according to participants' first languages. **Participation** and **collective intelligence** methods such as collective brainstorming, Bono hats and 3C method (Conserve, Cease, Create) were used to bring out new perspectives for the research project.

The diversity of the participants involved during the seminar opened up new perspectives on evaluation and partnerships as well, and bring new ideas and energy for the project. Our warmest acknowledgement to all participants for their involvement and availability!



🎒 National malaria control program from Senegal to Cayenne

Few weeks later, a team from the **Senegal's national malaria control program (PNLP)** visited our project in Cayenne. They expressed their interest to consider the possibility to export Malakit project experience in their territory.

Dr. Serigne Amdy Thiam and Mr. Latsouk Diouf spent two weeks with us to explore the possibility to apply the Malakit/Curema methodology for Senegalese gold miners. The aim of their visit was to meet different stakeholders involved, both at institutional and field level, to identify potential challenges and discuss ways of anticipating possible obstacles to the implementation of Malakit project in Senegal.



🎒 Publications

Since the beginning of 2024, two scientific papers have been published by the Curema team. The first, published in the **Lancet Global Health**, with Dr. Alice Sanna as first author, highlights the importance of a regional cooperation for malaria control and eliminaton in the region. This article is available [here](#)!

Cooperation for malaria control and elimination in the Guiana Shield

Alice Sanna, Martha Suárez-Mutis, Yann Lambert, Luisiane Carvalho, Hedley Cairo, Horace Cox, Clara de Bort, Margarete Gomes do Socorro Mendonça, David A Forero-Peña, Juan Carlos Gabaldón-Figueira, Maria Eugenia Grillet, François Klein, Clément Lazarus, Yassamine Lazrek, Jaime Louzada, Dorinaldo Malaifa, Paola Marchesini, Lise Musset, Joseli Oliveira-Ferreira, Cassio Peterka, Cyril Rousseau, Emmanuel Roux, Leopoldo Villegas, Stephen Vreden, Solène Wiedner-Papin, Gabriel Zorello Laporta, Helene Hivat, Maylis Douvine

The second, published in the journal **Frontiers in Public Health**, was the Master 2 thesis of Dr. Carlotta Carboni. This paper focuses on a quality and effectiveness evaluation of trainings provided to facilitators in the Curema project. You can find it [here](#)!

Training-of-trainers program for community health workers involved in an innovative and community-based intervention against malaria among goldminers in the Guiana shield: a quality and effectiveness evaluation

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Alice Sanna¹

🎒 Website

The malakit-project.org website is available in the three languages of the project (French, English and Portuguese). You can access to find more information, news and details about the project. Feel free to share any improvements!



Our acknowledgement to all the teams working for this project: SWOS, Fiocruz, DPAC fronteira and Centre Hospitalier de Cayenne, as well as the malaria programs of the three territories, and the sponsors who allow us to carry out CUREMA together!

