ADVICE FOR NHS GENERAL PRACTITIONERS ON MILITARY VETERANS ATTENDING WITH CONCERNS ON USE OF MEFLOQUINE

Dear Dr,

                Over the past 20 years, UK military personnel have had to operate or train in various locations in Sub-Saharan Africa where Mefloquine had been advised to be the appropriate anti-malarial at that time.  Please note that, with a few exceptions, veterans who deployed to Iraq or Afghanistan were not given Mefloquine; as either for many months of the year malaria is not endemic or other antimalarial medication was used (such as chloroquine).  Similarly service personnel who only deployed to Former Yugoslavia are not at risk as Former Yugoslavia is not a malaria endemic area.

 With increasing awareness of the side-effects of Mefloquine, there has been media discussion on some of the more serious side-effects, in particular the neuropsychiatric ones.  Many of the Service personnel will have left the military since their use of Mefloquine and some may be patients in your practice.  Following a recent report by the House of Commons Defence Committee (HCDC) on the use and effects of Mefloquine with military personnel, the MoD has been directed to provide a Single Point of Contact (SPOC) to help any current serving military or veterans who have concerns if they previously have been prescribed Mefloquine on military operations or exercises.  Consequently, on 5 September 2016, MOD launches the Mefloquine SPOC to provide an information and signposting service.

 Individuals who may have taken Mefloquine prescribed by MoD are being offered support from the SPOC. This signposts them to appropriate advice through existing resources and patient pathways.  A summary of the signposting algorithm is attached, which provides advice to individuals seeking information,  those with health concerns, those who wish to make a complaint or those pursuing a legal claim’.  Veterans will be encouraged to register with a NHS GP (Read Code XaX3) should they not previously have done so, to enable a pathway to existing resources in the NHS should they have concerns about their health.  If a Veteran attends your Practice with a history that they have (or may have) used Mefloquine in the past, this letter serves 3 uses:

1.       Information for you on what advice your patient has already been given.

2.       Information on how to obtain copies of their military medical records should your records not hold a sufficient summary to assess the patient’s concerns.

3.       Some guidance on what options may be available to you in addition to your routine management.

The information that your patient has been given is included in the leaflet attached and includes the contact details for obtaining a copy of their military medical records.  Since much of the focus has been the on mental health issues surrounding the use of Mefloquine, a link is provided to the Veterans and Reservists Mental Health Programme (VRMHP).  If your records confirm that your patient took Mefloquine while in the military (or you have reason to believe this is the case) and they have mental health issues that you would wish to refer for further assessment or treatment, the VRMHP can provide an assessment and , if appropriate, enable further follow-up and treatment through local NHS resources.  You may find that you can provide information, reassurance or treatment within your routine patient pathways and may choose to support the veteran locally.  Further information and education on veterans’ health is available on the free to access e Learning for Health and can be accessed at  <http://www.e-lfh.org.uk/programmes/nhs-healthcare-for-the-armed-forces/>