

Plasmodium Malaria Infection in a 4 Month Old Infant

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Dear Editor

This letter is written to draw the attention of your readers to the possibility of acquiring malaria through blood transfusion in the endemic areas and the necessity of testing the blood donors for malaria. In this connection we would like to report a 4 month old baby boy, who was born in Hacettepe University Maternity Clinic on January 4th, 1976, and required two exchange transfusions with fresh blood for ABO incompatibility. He was admitted to the Hacettepe Children's Hospital 4 months later because of prolonged fever and splenohepatomegaly of two months duration.

Conventional laboratory investigations failed to determine the etiology of the fever. Liver needle biopsy revealed hyperplasia of Kupffer cells, some of which contained dark brown granular pigment which gave negative Prussian blue reaction. Plasmodium malaria was detected on thick blood smear. The patient responded to pyrimethamine therapy. His temperature returned to normal and his splenohepatomegaly was reduced in size. Unfortunately he died following a severe attack of gastroenteritis and dehydration. No autopsy permission could be obtained.

Neither suspected malaria cases nor any vector Anopheles mosquitoes were found in the area where his family lived. The patient's mother had never had malaria. Only one of the blood donors could be tested for malaria and the test was negative.

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Although malaria is usually acquired through the bites of female *Anopheles* mosquitoes, 1956 cases of malaria due to blood transfusion have been reported in the literature between 1950 and 1972,^{1,2} Also more than 150 cases of congenital malaria have been documented, however, the placental passage is still disputed.³

REFERENCES

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