

A Note on Drug Discovery Approach for Malaria

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Abstract

It is important to develop new antimalarial drugs. Such drugs can target the blood stage of the disease to ease the symptoms, the liver stage to stop deteriorations, and the transmission stage to defend other humans. The tube for the blood stage is flattering healthy, but this should not be a source of satisfaction, as the current treatments set a high standard. Drug discovery labors directed close the liver and transmission phases are in their beginning but are getting increasing care as directing these stages could be contributory in eliminating malaria.

Keywords: Malaria • Drug • Antimalarial

Introduction

Malaria remains one of the most prevalent and deadly infectious diseases across worldwide. According to WHO 154-289 million malaria cases in the year of 2010, with 660,000 subordinate deaths. Numerous species of Plasmodium cause malaria in humans: *Plasmodium vivax*, *Plasmodium ovale*, *Plasmodium falciparum*, *Plasmodium malariae* and the simian *Plasmodium knowlesi*. The most lethal species is *P. falciparum*, originate mainly in Africa. *Plasmodium falciparum* reasons organ disappointments (severe malaria) and accrues in the brain capillaries (cerebral malaria), foremost to coma and eventually death. Furthermore, there is growing evidence that the lethality of *Plasmodium vivax* has remained undervalued. The parasite has a multifaceted life cycle and in instruction to eliminate the disease, every stage should be careful for treatment those are Liver stage, Mosquito stage, Blood stage, Transmission stage.

Anti-Malarial Strategies

Anti-malarial strategies are preferably a balanced use of anti-Plasmodium treatments, mosquito control, and an overall development of hygiene and awareness. This is how malaria was eliminated from industrialized countries. Vaccines would also be extremely useful. Nonetheless, there is an urgent need for emerging new anti-malarial drugs. The new drugs can target the blood stage of the disease to ease the symptoms, the liver stage to prevent deteriorations, and the transmission stage to protect additional humans.

The pipeline for the blood stage is debatably the best in history, but immobile supplies to be prolonged. The last few years have seen an explosion of potent new chemotypes, and the new challenge is to measure the potential of these chemotypes. Preferably, the new drug should: (i) speak to drug-resistance issues, (ii) be safe, (iii) have a rapid onset of action, especially in children and pregnant women, (iv) scure malaria in a single dose. The challenge is to find a drug that addresses all of these

topographies. It is our confidence that with the rich diversity of new chemical entities, such a drug will be exposed. Nevertheless, drug discovery labors should endure, as the artemisinins customary a high standard of safety and efficacy.

Conclusion

Drugs that board the liver and transmission phases have the possible to be transformational, but research labors have been disadvantaged by the absence of high-throughput shades. New imaging techniques are commencement to solve this problem and open up novel avenues, with an advanced clinical compound consuming liver stage movement. The arena of transmission-blocking mediators is in its beginning, but may be most transformative of all in attaining the final goal of eliminating malaria.

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How to cite this article: Nonyelum Stella, Nwankwo and Neda Shaghghi. "A Note on Drug Discovery Approach for Malaria." *Virol Curr Res* (2021) 5: 137.

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Received: September 03, 2021; **Accepted:** September 17, 2021; **Published:** September 24, 2021