THE USE AND SAFETY OF HERBAL MEDICINE WITHIN THE CONTEXT OF GHANA: A QUALITATIVE EXPLORATION

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OUTLINE

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INTRODUCTION

• Herbal medicine is the oldest and still the most widely used system of medicine in the world today (Gardiner et al., 2007).
• Many individuals remain skeptical about the safety and use of herbal medicine.
• The use of herbal medicine in health care is gaining a lot of popularity in contemporary health systems (Gollschewski et al., 2008).
• Herbal medicine may be initiated through the recommendation of health professionals & other lay people.
• Globally, about 80 % of the populace use one form of herbal medicine or the other (Ekor, 2013).
INTRODUCTION contd.

• Certain medicinal plant species are becoming extinct because of over harvesting, which depletes natural habitats (Yao et al., 2013).

• Forest degradation and effect of bush fires - negatively impact availability of raw materials.

• Specific geographic or climatic conditions, changes in rainfall patterns and vegetation can threaten survival of plants.

• Contamination caused by the use of unhygienic water for irrigation during cultivation (Zhang et al., 2012).
Traditional Medicine – Ghanaian context

• Ghana Psychic and Traditional Healers Association in 1961
• Centre for Scientific Research into Plant Medicine in 1975.
• Unit for the coordination of Traditional Medicine (which is now Traditional and Alternative Medicine Directorate) - 1991
• Food and Drugs Board in 1992 - certify the sale of Traditional Medicine products to the public.
• 2000 - TMPC Act, Act 575 for the establishment of Traditional Medicine Council - registration of all Traditional Medical Practitioners

(TMPC - Traditional Medicine Practice Council)

(MOH, 2005)
Ghana’s national policy on TM.

- i) All TMPs shall be **required to register** an association and the TM Council with the view to enhancing the practice and eliminating quacks in the system.
- ii) To assist the genuine practitioners, the umbrella association of TM shall be encouraged to **organize training** and educational programmes on good manufacturing practices.
- iii) TMPs shall keep **accurate records** of all their practices.
- iv) TM practitioners shall be encouraged to **use modern facilities** to diagnose and monitor management of patients.
- v) TM shall be provided **in all public health institutions**. The purpose is to offer patients/clients options of health service from which to choose.
- vi) Appropriate **standards of practice** shall be set as and when facilities improve to make it easier for enforcement of legislation.

*(MOH, 2005)*
OBJECTIVES OF THE STUDY

• To investigate the facilitators and barriers of herbal medicine among Ghanaian adults who use one form of herbal medicine
• To provide an in-depth description of the safety and clinical use of herbal medicine in Ghana
Methods

• Design: Descriptive and Inductive exploratory qualitative design

• Settings: Public and Private hospitals
  – National Research Centre (Center for scientific research into plant medicine, Mampong, located in the eastern region) and Top herbal clinic respectively

• Sampling: purposive
  – 16 Clients
  – 13 key informants: 6 patients, 3 herbal medicine practitioners, 2 herbal scientists and 2 herbal sales representatives.
Methods contd.

- Data collection: multiple data collection method face-to-face individual interview (Twi and English)
- Duration: 20 to 35 minutes per participants
- Ethical considerations
Rigor and Analysis

• Prolonged engagements
• Detailed audit trail
• Concurrent data analysis
• Content analysis procedures
• Verbatim transcription of interviews
• Use of NVivo software version 11
Key findings

• Facilitators of herbal medicine use
  – Recommendation from other people/advert
  – Effectiveness of herbal medicine
  – Personal preference for herbal medicine
  – Perceived ineffectiveness of western medicine

• Barriers to herbal medicine use
  – Negative perceptions and attitudes about herbal medicine
  – Inappropriate vending environment
  – Ignorant and deceitful vendors
  – Variable effectiveness of herbal medicine
  – High cost of herbal medicine
‘Oh herbal medicine is good. What I know is that herbal medicine is able to cure the diseases whereas western medicine only manages the diseases but does not cure it. I have experienced that’ (HMF7).

‘As for the herbal medicine, there is nothing like side effects. That is why I like using herbal medicine’ (HMF3).
Ignorant and deceitful vendors

‘The uneducated vendors can give you one herbal medicine that cures many diseases like Malaria, Typhoid, Syphilis Gonorrhoea and many more. If you hear such a thing, know that it is a lie. They are discrediting herbal medicine in this country’ (HMF1).

‘The sellers do not have an idea about the use of the herbal medicine and they will give you the wrong information. After taking the medicine, you may end up dying’ (HMF3).
Negative perceptions and attitudes about herbal medicine

• ‘Some people say herbal medicine is dangerous so they don’t take it’ (HMF1).

• ‘when you are staying with somebody and you boil herbal medicine, the person will think that you are coming to do something evil that can affect him/her’ (HMM1).
Safety of Herbal Medicine

- Production and processing of herbal medicine
  - Production of herbs and herbal medicine
  - Analysis of herbal products
  - Training of herbalist

- Role of regulatory

- Challenges of herbal medicine production

- Clinical use of herbal medicine

- Client assessment

- Herbal medicine treatment decisions
‘Herbal medicine is not like the orthodox one which we can just do some chemical formation and just reproduce on a large scale; . . . our problem is getting the raw materials; We are not planting more trees and the existing trees or the parts of trees that are being used is quite difficult to get; there are some medicines that destroy the tree slowly; . . . we have to really go into cultivating the plants that we use’ (TMKII3).
Analysis of herbal products

- Other people bring their herbal medicines that they want to sell either in the form of decoctions and ointments and balms. All products with herbal bases are brought here and we carry out tests on them to find the active ingredient in the drug, the microbial load and contaminants. That is the preliminary test we carry out on every medicine to see that it is safe to be used by humans. We also do the chronic or the long-term effect evaluation’ (TMKI3).
Trained herbal medicine practitioners

• ‘Now, we have herbalists who have no formal education but they employ people that are knowledgeable in herbal medicine such as those trained in herbal medicine at the tertiary level from KNUST 64 (Kwame Nkrumah University of Science and Technology) to enhance the current demand of herbal medicine production and usage’ (TMKI3).
Implication and Recommendation

- Critical analysis of herbal products
- Continuing education and training for:
  - herbalist
  - Patients
  - Health Practioners
- Client assessment before treatment
- Inclusion in herbal medicine into the traditional health system.
Conclusion

• Give clients options for care that includes herbal medicine.
• Interventions for quality herbal products should be implemented.
• Researchers should continue to explore various dimension of herbal medicine to add to the existing knowledge.
Some References


