

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



Effectiveness 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



Production: Difficulties accessing raw materials

- *'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' (TMKI3).*



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 Practitioners
- 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

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