

## **Incorporating Traditional Medicine Into Modern Health System**



**By: Semir Seid**

Anthropologists believe that using traditional medicine as a way of protecting or healing a person began when human beings started living on earth. Traditional Medicine (TM) is a way of treating people based on cultural beliefs. It is done to treat people from diseases and the practitioners adopt the treatment procedures based on experience and observation of past generations. Traditional medicine has been practiced in Eritrea for centuries.

Even though access to modern medicine is spreading gradually, TM is still widely accepted and practiced in Eritrea. According to Dr. Tekeste, Fikadu, an Associate Professor at Orotta Medical School, the reason for the acceptance of TM is its accessibility, affordability, cultural beliefs and trust in it.

The Medicinal Plants and Drug Discovery Research Center (MPDDRC) in its initial survey discovered 16 different ailments treated by TM practices. Some of the diseases for which the Eritrean population relies on TM treatments include bone setting, cupping, herbal therapy, hydrotherapy, female and male circumcision, massage, skin scarification, treatment of snake bite (also other animal bites), spiritual healing, uvulectomy, thermal therapy, traditional midwifery, tooth extraction and others. The survey

revealed that nationally there are around 4000 traditional medicine practitioners.

TM practices or treatments may or may not work for patients, since no accurate measurements of the products/doses are given. Dr. Tekeste said that TM comprises three components: the practice, the practitioners, and the products/doses. For the last forty years the World Health Organization (WHO) has been enforcing laws to take the good and terminate ill parts of the traditional way of healing people. The organization has been pushing member countries to work on the positive aspects of the methodology and medicine. The Eritrean Ministry of Health (MoH), in collaboration with WHO representative office in Eritrea, is designing policies to regulate TM. The Ministry recognizes and advocates for the use of TM and supports the idea of incorporating it into the national health system with the objective of ensuring that TM treatment is done scientifically, rationally and with proper safety protocols. Mr. Eyasu Bahta, Director of the National Medicine and Food Administration (NMFA) in MoH, said that the Ministry has drafted clear health and medicine policies to adopt and develop the useful practices and eradicate the unsafe ones. To implement this, in 2012, a special TM unit was established under the NMFA with the responsibilities of registering TM practitioners, monitoring safety of the practice, giving public education, conducting research and formulating policy guidelines on the practice of TM. In August last year, the Eritrean National TM policy was completed and has been implemented. The policy will assist the MoH in its efforts to recognize and guide TM practices in Eritrea by conforming to the global, continental, regional and national policy commitments for the development and promotion of TM. The policy is believed to optimize benefits of TM practices, its cultivation, harvest, production and marketing to the people of Eritrea.

For a sound implementation of the policy another national committee has been formed composed of 22 internal stakeholders. These members are experts in different fields and are expected to contribute to the development of the traditional treatment methods. A legal document that will guide in the policy implementation, delineate the healing methods, and the doses to be taken as well as monitor the practitioners is also underway. Moreover, practitioners had not been following procedural ethics as there were no training given to them. Mr. Eyasu said that the Ministry is working on that for better solutions and results. It is also collaborating with educational institutions to provide research platforms to conduct research related to traditional medicine production. However, the director indicated that there is a huge ideological gap between medical doctors and traditional medicine practitioners. Mr. Eyasu suggested that regular training to both parties could narrow the gap. Medical doctors should be introduced to all places and societal awareness should spread to avoid misconceptions about modern health care. Dr. Tekeste pointed out that the gap between the two parties gets personal and biased, and this

makes it difficult for their mutual interaction to be able to work together. The national policy, however, states that there shall be established harmonious and inter-professional partnership between the conventional health workers and TM practitioners through appropriate education, training, research and better communication.

Dr. Tekeste said that the difference between traditional and modern way of curing people is on how to comprehend the particular disease. In modern health care WHO considers the physical, mental and environmental health aspects and traditional medicine equally works on these aspects. The ultimate difference arises in trying to understand the disease, its causes, and treatment procedures. In traditional medicine, patients who suffer from the same disease may get different treatments, but when it comes to modern medicine, patients who suffer from the same ailment receive the same treatment. This is because modern health care is universal and traditional medicine always depends on individuals' or communities' experience and/or beliefs.

Nowadays, traditional medicine, is well documented and codified especially in Far East countries. Countries such as China and India are the best examples for well organized and developed traditional medicine. Europe and western countries use traditional medicine as an alternative to the modern health care and people get treated as they wish. According to WHO reports, 80% of the people in Africa, Latin America and South Asia use traditional medicine. This does not mean people of these continents are so far away from using modern health care. The big number is explained by the unavailability and uneven distribution of health institutions in those countries and lack of people's awareness of the advantages and disadvantages of using traditional medicine.

To structure and develop a national TM, Mr. Eyasu said that natural resources should be identified and reserved. As TM uses natural resources in the preparation of medicine, environmental control should be emphasized in order to sustain indigenous plants. The Department of Environment of the Ministry of Land, Water and Environment and the Ministry of Agriculture are responsible to conserve medicinal plants and promote their proper use. As mentioned in the TM policy the Ministry of Fisheries, in cooperation with academic institutions, such as the Marine College, is called upon to invest in and promote research on the rich pool of medicinal wealth in Eritrea's marine resources.

More research projects on TM are planned for 2018. The establishment of research centers will help in distinguishing between malpractices and safe practices. This make possible local production of TM that meets meets the minimum standards of pharmaceutical manufacturing and in accordance with the WHO Good Manufacturing Practices (GMP).

The Ministry of Health intends to expand TM service monitoring with the provision of legal documents. Training and capacity building for conventional and traditional medicine practitioners should be regular to make TM more scientific and of good use. To ensure sustainability, Mr. Eyasu advised, TM concepts should be introduced into health institutions, Medical schools and the Science College. For the improvement of TM, stakeholders and the WHO representative office are ready to assist the Ministry financially and technically.

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