

Traditional and modern health

Plants have been used as primary sources of medicine for thousands of years and were our very first medicines. Over 4,000 years ago the Red Emperor of China published a list of 4,000 medicinal plants. The ancient Egyptians placed medicinal plants in the pyramids to treat their pharaohs



Sale of well controlled herbal medicine in Peru

after death, who were mummified using plants, herbs, spices, and minerals. Today traditional healers are still the main providers of primary health care in many regions of the world, identifying, experimenting and using natural substances to treat humans and animals. Often these practices include spiritual elements, such as invoking the gods, sacrificing or chasing away bad spirits.

Diverse health systems

Traditional systems of health care include the highly developed and well documented classical systems of China, Tibet and India, as well as the less studied systems in Africa and Latin America and the omnipresent folk systems that are passed

on orally. In the western world as well, until only a hundred years ago, the sciences of botany and medicine were largely one and the same. It was only at the beginning of the twentieth century that pharmacology started to focus on identifying, synthesising, and patenting bioactive compounds, and to move away from using herbal treatments.

In many traditional cultures, illness among humans and animals is attributed to natural or supernatural forces, which can be caused by improper human action. Both disease and medicine can also be categorised as hot or cold. This does not simply refer to the temperature of the illness or the medicine, but also to other characteristics. The category hot often refers to contagious diseases, while more chronic conditions, such as parasitism or nutritional deficiencies, fall into the cold category.

According to the cause, there are also different options for treatment. Common diseases often fall within the domain of local health practitioners for humans and animals, who may use herbal preparations and/ or western medicine, often combined with strict instructions about food or habits. On the other hand, in the case of a supernatural cause of disease, a spirit medium or spiritual healer can be sought to restore the balance between good and evil through a ceremony or ritual.

Combining traditional and modern

Nowadays, in many non-western countries both traditional and modern health care systems function side by side. There is no clear demarcation line between the traditional healers and

domestic medication. Access to modern healthcare is often very limited and unaffordable. In Tanzania, for example, there is only one western trained medical doctor for every 33,000 residents, while there is one healer for every 343 residents of Tanga town, and one for every 146 residents in the rural areas. As a result far more people receive health care from healers than from conventional health workers.

In this issue, Asaah (p.43) describes the various reasons for rural people in Cameroon to choose for one or the other system under specific circumstances. Though rural people themselves use both health care systems in various ways, there are many controversial aspects

Traditional health practices, which are often implemented with a range of limitations are under ideological pressure. Often traditional health practices, which depend on oral culture and lack a homogeneous theory, are considered inferior and superstitious. The traditional health knowledge base is eroding, due to the increased influence of westernised health practices and lifestyle, and the traditional limitations imposed on the transition of knowledge to the next generation.

Moreover, traditional practices and beliefs can be detrimental, while controversies related to patents and property rights of plants with medicinal properties abound.

Come-back

The debate over the lack of scientific evidence to prove the efficacy of traditional systems of medicine has been going on for years. In India, for example, while practitioners of both modern and traditional health systems have locked their horns over this issue, traditional medicines, have been patented abroad. But there is evidence of change. Apart from numerous private initiatives, the Indian government has decided to include the different traditional systems of medicine, such as ayurveda, unani, siddha and homeopathy, in the regular medical curriculum. Many international organisations are seeking collaboration with India for ayurveda training. In Africa, various research programmes on AIDS and malaria are based on a collaboration between traditional healers and biomedical researchers. The interest

in ethnoveterinary medicine in animals is increasing. This recent come-back partly stems from the lack of affordability of the modern health system, part-

ly from a general revival of traditional culture, and partly from the recognition of its qualities. Nevertheless, often there is only limited recognition of the importance of the traditional health systems, which have been built up over thousands of years. Further research and work in this area is required. In this issue, Asaah (p.43) provides an example of such an initiative in Cameroon.

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