

Knowledge, attitudes and practices of Abidjan traditional healers on uncomplicated and complicated malaria (Cote d'Ivoire)

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Introduction: An estimated 300 to 500 million clinical cases of malaria occur each year worldwide, 90% in Africa, mostly among young children. In Cote d'Ivoire, malaria is 46.03% of disease states and 62.44% of hospital admissions. In children under 5 years, it is 42.67% of the reasons for consultation and 59.68% of hospital admissions. In pregnant women, it represents 22.91% of disease states and 36.07% of hospital admissions. In Africa, traditional medicine is the first resort for the vast majority of people, because of its accessibility both geographically, economically and culturally. However, some modern practitioners show an attitude of distrust of traditional medicine and its players, calling them irrational. This work had been set out to assess knowledge, attitudes and practices of traditional healers on uncomplicated and complicated malaria in the context of collaboration between traditional and modern medicine for the optimal management of critical cases.

Materials and Method: The study focused on traditional healers practicing in the city of Abidjan. The study was conducted using individual interviews over a period of 30 days. The interviews were conducted in local languages, with the assistance, if necessary, translators. For data collection, we used a questionnaire containing four items: the socio-demographic characteristics of traditional healers, their knowledge on malaria, diagnostic practices and traditional therapies.

Results: Of the 60 healers included in the study, only six were women (10%), a sex-ratio of a woman to 9 men. 66.7% of respondents traditional healers are herbalists and 25% of naturopaths. Only 8.3% were spiritualists. The etiology of malaria most commonly cited by the traditional healers were mosquito bites (16.7%), food (1.7%), solar (1.7%) and fatigue (1.7%). 25% of traditional healers are associated with mosquitoes, sun and fatigue. The most cited symptomatology were fever (100%), dark urine (86%), the yellow or pale conjunctiva (80%), vomiting (71.7%), nausea (58.3%) and abdominal pain (48.3%). Traditional healers recognized three types of malaria: the white form, yellow/red form and the black form. Traditional healers were receiving malarious patients both in first (58.3%) and second intentions (41.7%). 78.3% of them practiced an interview and physical examination of their patients before the diagnosis. In 13.3% of cases, there was divinatory consultation. Medications used to treat malaria were herbal in 95% of cases. The main sign of healing was the lack of fever (58.3%). 90% of interviewed traditional healers were referring cases of black malaria (severe form). This reference is mostly made to modern health facilities (90.2%). 68.3% of traditional healers practiced prophylaxis of malaria in pregnant women and children under 5 years.

Conclusion: A description of clinical malaria by traditional practitioners in health is not very far from that of modern medicine. Nevertheless, the logics of our respondents are etiological more complex and linked to their cultural context. The management of cases is made from medicinal plants in treatment failure patients are usually referred to modern health facilities. The involvement of traditional healers in the detection and quick reference risk cases can contribute to reducing child mortality due to severe malaria.

Keywords: Knowledge, attitudes, practices, traditional practitioners' health, malaria

Biography

Diaby Badara is on his way to complete a certificate of specialized studies in Public Health at the Felix Houphouet-Boigny University of Cocody, Côte d'Ivoire. He received his M.D. in 2007 from the Gamal Abdel Nasser University of Conakry, Guinea. He is highly interested in Traditional Medicine and is staff at the National Programme for Traditional Medicine Promotion in Abidjan, Côte d'Ivoire. He has authored 4 articles and serves as a review member of the French medical journal "Revue Santé Publique".

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