

Key amulets:a cultural clinical sign of epistaxis

Les amulettes en forme de cle: un signe culturel de l'epitaxis

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ABSTRACT

An association between key amulets/ talismans worn by Black South African patients and epistaxis was observed by the researchers.

Objective

To explore the link between epistaxis and wearing a key amulet around the neck.

Methodology

The possible association between wearing a key amulet was explored using a literature search as well as informal unstructured interviews to determine whether there was any link between wearing a key amulet and epistaxis.

Results

Four patients who were noted to be wearing a small key as an amulet were included in a case series. All patients had clinically significant epistaxis; two had immune thrombocytopenic purpura and two had uraemic platelet dysfunction. All patients informed us that they had been advised by their 'elders' to wear a key amulet as a measure to treat epistaxis. A traditional practitioner confirmed that wearing a small key is the local traditional treatment of epistaxis. Wearing of a key amulet as treatment or prevention of epistaxis has not been noted in medical literature, however the researchers were able to find a single reference to this on the social media.

Conclusion

All patients whom we noted to be wearing a key amulet had clinically significant causes of epistaxis. We believe that a patient noted to be wearing a key amulet should prompt medical practioners to enquire specifically about epistaxis and initiate further investigations of the cause if present. Early identification of the cause of epistaxis may reduce long term morbidity and reduce need for transfusion at later stage.

RÉSUMÉ

Une association entre les amulettes / talismans en forme de clé portés par les patients sud-africains noirs et l'épistaxis a été observée par les chercheurs.

Objectif

Explorer le lien entre l'épistaxis et le port d'une amulette autour du cou.

Méthodologie

L'association possible entre le port d'une amulette a été explorée en utilisant une recherche documentaire ainsi que des entrevues informelles non structurées pour déterminer s'il y avait un lien entre le port d'une amulette et l'épistaxis.

Résultats

Quatre patients qui portaient une petite clé en guise d'amulette ont été inclus dans une série de cas. Tous les patients avaient une épistaxis cliniquement significative; deux avaient un purpura thrombocytopénique immunitaire et deux avaient un dysfonctionnement plaquettaire urémique. Tous les patients nous ont informés que leurs «aînés» leur avaient conseillé de porter une amulette pour traiter l'épistaxis. Un pratiquant traditionnel a confirmé que le port d'une petite clé est le traitement traditionnel local de l'épistaxis. Le port d'une amulette en tant que traitement ou prévention de l'épistaxis n'a pas été noté dans la littérature médicale, cependant les chercheurs ont pu trouver une référence unique sur les médias sociaux.

Conclusion

Tous les patients portant une amulette avaient des causes cliniquement significatives de l'épistaxis. Nous croyons qu'un patient portant une amulette devrait inciter les praticiens médicaux à s'enquérir spécifiquement de l'épistaxis et à entreprendre d'autres investigations sur la cause si elle est présente. L'identification précoce de la cause de l'épistaxis peut réduire la morbidité à long terme et réduire le besoin de transfusion à un stade ultérieur.

INTRODUCTION

The researchers observed an association key amulet/talisman worn by Black South African patients and epistaxis. According to our knowledge the relationship between wearing a key amulet/talisman and epistaxis has not been described in formal literature before. Cold keys placed on the back of the neck has been described in Western cultures as a folk remedy for epistaxis. This practice has been said to cause vasoconstriction of nasal blood vessels, however this is

not supported by evidence.² Pinching the nose to halt epistaxis, is a practice that was first described by Hippocrates, and is still in use today. Other ancient methods have been described to control epistaxis. These include the use of the patient's blood to write magical words on the forehead and encouraging the patient to sniff their fried blood up the nostril.³ Wearing a preferably red-tinted amulet has also been described as an old remedy for epistaxis.³

OBJECTIVES

To explore the link between epistaxis and wearing a key amulet around the neck.

METHODOLOGY

The possible association between wearing a key amulet/talisman from a string, chain or leather thong fastened around the neck and epistaxis was explored. A literature search, as well as unstructured,

informal interviews was conducted to determine if there is a link, as well as establish the significance, if any, of wearing a key and its association with epistaxis. Permission to present this case series was granted by the Ethics Committee of the University of the Free State.

RESULTS

Four patients who were included in the case series were treated by the researchers in two of the training hospitals in Bloemfontein, in the central Free State, South Africa. The patients were incidentally found to be wearing key amulet necklaces when they presented to the hospital with clinically significant epistaxis, amongst other problems. Two of the patients had epistaxis due to immune thrombocytopaenic purpura and the other two patients had epistaxis due to uraemic platelet dysfunction associated with renal failure. The keys were all small, but otherwise not similar (Figure 1).

Figure 1: Key amulets worn by patients with epistaxis.









The researchers asked the patients in this case series whether there is any cultural-medical significance of this practice, and all the patients confirmed that they had been advised by their elders to wear a key around their necks to prevent further nose bleeds. The patients did not all agree that this practice improved their epistaxis.

According to Sesotho-speaker informants, the practice of wearing a key amulet/talisman treats epistaxis. Although there is no literature in the medical and other academic sources that this is a treatment of epistaxis, the researchers identified a case in the social media (Twitter), where two people were sharing medical advice (in Sesotho) regarding nose bleeds, where one advised the other to wear a key around his neck.⁴

A traditional practitioner from the Bloemfontein area was asked about the practice, and she confirmed that a key amulet might be used to treat epistaxis. She also stated that it is not necessary that the key should be prescribed by a traditional practitioner, and that a patient could simply buy a small padlock, and wear the key around their neck. The padlock, should then be put away and not used. According to her, the key should be small, for no reason other than it is more comfortable to wear a small key than a larger one.

The most complete explanation that was obtained was that if a person suffering from epistaxis obtained a padlock and its respective key, and that the padlock were locked and not unlocked again, that the epistaxis would not recur. In a sense the locking of the padlock "locked away" the bleeding. The key is then worn about the neck to ensure that it is not able to unlock the padlock, and thus prevent further bleeding. The patients were not averse to us removing the amulet to inspect it – as it was not the fact that the amulet was around their neck, but rather that the padlock was still locked that was seen to prevent the bleeding. It was interesting to note that some of the patients had simply been told to wear a key around their neck to stop the epistaxis, while others had been instructed to lock a padlock and prevent it from being unlocked by wearing the key about their neck.

DISCUSSION

As all the patients in this case series had clinically significant causes of epistaxis, the researchers believe that this is an important socio-medical relationship in patients who are treated in our district. Subsequent to obtaining ethical approval for this case series, we have noted that many patients who present at our hospital with epistaxis wear a key amulet/talisman.

With regard to variety in response, this should not be considered as one refuting the other. Instead, we may consider the idea of dominant and alternative narratives about key wearing and their connection to nose bleeds. Neither should be viewed in absolutistic and static terms. Rather, that key wearing narratives are constantly in a state of development/becoming.

A recommendation is to further explore the phraseology batho ba baholo (directly translated as elders). It may be a general reference to elders, the wise ones in communities. It may be a reference to ancestors (badimo) who in essence are the ultimate 'elders'. In some cosmological conceptions ancestors may instruct descendants to follow certain treatment regimens, and wearing a key may be just such a regimen. Distinguishing ancestors and guardian angels (baholo ba hao) as two categories of elders (baholo) may be a fruitful avenue of investigation. A further possibility is that in a country where patients are all too familiar with the dictate that traditional health practices should not simultaneously be pursued with biomedicical treatment, patients may use this vague reference to elders to avoid chastisement from the consulting medical practitioners.

CONCLUSION

We believe that this cultural clinical sign should alert medical practitioners to specifically ask patients about the presence of nose bleeds, when a patient is noted to be wearing a key amulet/talisman around his/her neck. This may suggest quantitative or qualitative platelet pathology, which should be investigated and treated if necessary.

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