

EDITORIAL

The subject of this editorial is self-medication. Sometimes in the mid 1960's when I was an undergraduate in an overseas University, I was invited for dinner by a family. The after dinner chat revolved around self-medication. A few years earlier, Dr. D.C. Jarvis, a medical practitioner in the state of Vermont had published a book, *Folk Medicine*. This book reached the top of the bestseller list for non-fiction, published weekly by *Time magazine* and stayed there for a year. In this book the author had documented how animals treat themselves when they are sick. Apparently, the subject had not been documented before. The author's intention was to jolt human conscience. If the animals are capable of taking care of minor ailments, human beings should be able to do better. This reasoning found good resonance with general public, who despite their respect for the orthodox doctor always believed in self-medication. Some of the ideas expressed by Dr. Jarvis and subsequent authors border on fiction but this does not detract from the central theme, namely, that we do not have to see a doctor every time we have flu, stomachache, insomnia etc. Many of us have made pertinent observations on animal self-medication. For example, a dog will eat grass when it wants to vomit. Animals never eat poisonous plants even in time of food shortage. Seasoned game wardens will attest to the fact that it is almost unknown for a wild animal (elephants, rhinos, buffalo etc) to die while giving birth. This is in great contrast to the comical scene of 10 or more people clowning around the family cow giving birth, ready to extend their meddling hands, at the earliest possible opportunity. It matters little that the same cow may have given birth several times, unattended, usually at night.

In 1980, I was the principal author of a researched article on self-medication (*E. Afr. Med. J.* 58 593 – 600, 1980). More recently I logged on the internet for details on this subject. As of December 2002, there were 877,000 articles posted on the internet on this subject (www.Google.com-self-medication). Surprisingly, the first article was on animal self-medication. Self-medication among humans is fascinating because it exemplifies an important survival instinct, which we share with animals. From the very early stage of development, commonly referred to as hunter-gatherer stage, man learnt to treat himself using natural resources at his disposal.

There was a common belief that whenever there was a disease, the cure was somewhere in the vicinity. It was argued that the benevolent creator would never allow disease in a locality where there was no cure. One wishes the same was true of HIV/AIDS. It was as a result of this belief that the Willow bark (*Salix alba*), the source of salicylate was discovered more than 2,000 years ago, in the marshy places where fever (ague) was common. In the search for cures, man was guided by the *Doctrine of signatures*. This is how the Rauwolfian root, found favour in the treatment of snakebite since it is shaped like a snake.

Today, despite the advances in medical profession, self-medication is widely practiced in some communities. Even where reliable medical care is available, a significant percentage of the population resorts to self-medication, out of choice. This may involve use of traditional herbal remedies or modern drugs. Self-medication is a logical consequence of self-diagnosis and the two are closely intertwined. Several articles on self-medication have appeared on past issues of this journal thus prompting me to write an editorial on the subject.

Many pharmacists will have come across patients who seek advice on suitable medication for their real or perceived ailments. After the pharmacist has given the necessary professional advice, the patient then volunteer unsolicited suggestions on what other medicines he/she thinks can be used. Such patients will refer to information given by friends or neighbours who had used a certain remedy with satisfactory results when they had similar symptoms. At times, it may appear as if the patient is casting doubt on the pharmacist's professional knowledge. In reality the patient is subconsciously expressing a belief in self-medication. Needless to say several pharmacists find it difficult to deal with such rude and ungrateful patients and often wonder loudly why the patient sought advice in the first place if he/she had a ready

answer. In turn the patient may dismiss the pharmacist as stubborn and arrogant. We may be mistaken in believing that the health professional (doctors, pharmacist etc) are the sole custodians of knowledge regarding diagnosis and treatment of diseases.

In his book, *The Doctors Dilemma*, the British play writer George Bernard Shaw poked fun on the health profession by declaring, "All professions are conspiracies against the laity". The writer sought to counteract the public blind faith in the efficiency as well as the integrity of the medical profession. Health professionals should facilitate, rather than hinder, the public understanding of how they can take care of their health through self-medication and certainly go beyond the mere clichés such as, "when pain persist see a doctor".

Editor-in-Chief