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## TRADITIONAL MEDICINE AND ITS PSYCHOLOGICAL EFFECTIVENESS IN THE MANAGEMENT OF TERMINAL DISEASES IN IGBO LAND NIGERIA

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**ABSTRACT:** This study on traditional medicine and psychological effectiveness in the treatment of terminal diseases was carried out among women in Igboland, South-Eastern, Nigeria. The objective of the study was to determine the relationship between traditional healing and treatment of hemorrhoids as well as the relationship between traditional healing and the treatment of diabetes among women. Two hypotheses were formulated to determine the outcome of the study. In-depth interviews were conducted to observe the procedures in the traditional treatment of diabetes and piles. 40 respondents participated in the study and data collected using a 10-item structured questionnaire. Instruments of data analysis were the simple Chi Square and the Pearson Product Moment Correlation coefficient. Study found that there was no significant relationship between traditional healing and treatment of hemorrhoids as well as a perfect negative correlation between traditional healing and treatment of diabetes mellitus among women in Igboland. The study concluded that the treatment of hemorrhoids and diabetes in the traditional healing system was simply to eliminate pains and eradicate the symptoms, and that complete cure of diabetes involves other factors such as nutrition, physical activities, etc.

**Keywords:** Traditional medicine, psychological effectiveness, management and terminal diseases

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### INTRODUCTION

Igboland in southern Nigeria is made up five states which include Abia, Anambra, Ebonyi, Enugu and Imo states. Due to cost, distance, poor funding and other factors militating against efficiency in the orthodox healthcare delivery system in the region, majority of people from this area rely heavily on traditional medicine for their healthcare needs. Traditional medicine involves the deployment of indigenous resources and technology in the promotion, prevention and alleviation of pains and discomforts as well as the rehabilitation of the healed for effective reintegration into society for optimum social functioning. Due to the non-use of orthodox or allopathic theories in its procedures, traditional medicine is believed to be shrouded in mysticism. This is because of its potency in the treatment of spiritual and idiopathic illnesses, diseased conditions that are seen to be untreatable in allopathic therapeutic

system. More so, the traditional healing system is seen to be shrouded in relative mysticism due to its esoteric methodology; a situation where only the traditional healers understand the language, herbs used and methods applied to achieve results.

The use of phytotherapy or herbalism sits at the core of traditional medicine. The use of indigenous medications involves herbs and knowledge. The knowledge and skills involved in the application of these herbs for treatment of diseases and infirmities is usually transferred from one generation to other along family line. This explains why the knowledge of traditional medicine cannot be easily subjected to scientific procedures or reliability, because the entire process is done in secrecy and rituals performed, especially during knowledge transfer ceremonies. There are different types of traditional healers known in Africa. According to Ekeokpara and Ugoha (2017), traditional healers include the traditional herbalists, traditional surgeons, traditional medicinal ingredient dealers, traditional psychiatrists and the practitioners of therapeutic spiritism. These classes of traditional healers demonstrate various healing skills using cultural elements in the alleviation of pains and discomforts. Prominent among the traditional healers in Igboland are the practitioners of therapeutic spiritism, variously referred to as healing pastors, alfas or priest; diviners, fortune tellers, seers, etc. These healers are skilled in treatment of illnesses and diseases, including terminal diseases such as cancer, HIV/Aids, acute respiratory infection, etc. Terminal diseases are believed to account for half of the deaths in Africa, among which Nigeria is said to have the highest number (Sofowora 1993; Iwu, 1999).

According to Tella (1986), the use of plants substances in the healing of terminal diseases is not a recent development, but a practice that has been with man as old as the hills of Nigeria. The usage of herbal plants has served diverse domestic purposes. There are over 6400 plants being use in tropical Africa today for healing purposes. Many of these plants are reported to be used in the treatment and management of disease conditions and prevention (Okunola, 2007). Most importantly is the fact that the usage of these plants is almost of great concern to the western world (Nigeria Natural Medicine Development Agency, 2008). Currently in Nigeria attention is given to plants, as a large number of species are being screened for pharmacological use especially those that are being used by the traditional folk medicine (Okunlola 2007)



In Igboland, there has been an increase in the demand for traditional medicine among the indigenes in the treatment of terminal ailments (diabetes, hypertension, epilepsy, cancer, venereal disease) with the belief that these ailments do not just come from the moon. The management of these diseases usually involves a lot of cautions in other not to damage the vital organs of the body. Whenever a case concerning patients with terminal disease is presented to the traditional healers, the first approach is to examine the type of ailment the patient is suffering from, the period of disease accumulation in the body, the environment from which the patients is coming from and family history of the patient, which are very vital for the treatment of the patients. The plants to be used are gathered according to the condition of the disease involved in the life of the patient (Askumpon, 2014).

### **Objective of the study**

The main objective of this study was to examine the impact of traditional medicine in the treatment of terminal diseases and the psychological effectiveness of the patients. The paper however, has the following specific objectives:

- i. To examine the relationship traditional healing and treatment of hemorrhoid disease among women in Igboland, Nigeria
- ii. To determine the relationship between traditional healing and treatment of diabetes mellitus among women in Igboland, Nigeria

### **Hypotheses**

The following hypotheses were formulated to determine the findings of the study. They were stated in null form:

- i. There is no significant relationship between traditional healing and treatment of hemorrhoid disease among women in Igboland, Nigeria.
- ii. There is no relationship between traditional healing and treatment of diabetes mellitus among women in Igboland, Nigeria.

### **Interviews with Traditional Healers in Igboland**

In a series of interviews with Traditional healers (doctors) in Igboland reveal that:

In Igboland, a number of plants are used in the treatment of the terminal disease such as, *Kigelia africana* (sausage plant), *Moringa suceda* (Brine stone tree), fruits of *Xylopiya acthiopia* (Ethiopian pepper), leaves, stem, and bark of *Uradirachta india* (Neem tree) used for breast cancer and HIV. *Catharanthus*

*roseus* (Peri winkle), *Annonce muricata* (sour sop) leaves, *Momordica charantia* (bulsam pear), aerial parts, ginger and *Xylopi aethiopica*, *Beta vulgans* (Beet root), *aloe barbadensis* leaves (Aloe Vera which is at least ten years of age (Nigeria Natural Medicine Agency, Federal Ministry of Science and technology, 2008). Virtually all nature plants are of vital importance to man for medicinal purpose and it implies that every native plant species has potential medicinal properties. Cases like cancer; the decoction of *Kigelia Africana* sausage plant together with fruits bark and roots of *Morinda sucida* Brime stone tree, Ethiopian pepper and others are extracted and administered to patient for a period of two months uninterrupted. The juice is given to the patient with a teaspoonful three times daily until the condition is finally regularized.

Diabetes is managed using a combination of plants like *Momordica charantia* (balsum pear) and *Ocimum gratissimum* (scent leaf) are squeezed and taking in 250ml twice daily for over a period of 3 months. It is used for the treatment of diabetes mellitus. Where as in the case of type 2 diabetes, *Catharanthus rouses* (periwinkle) dried leaves and flower is infused in hot water and is taking 3times daily for a period of 4months; (Okunlola 2007). Hither to, in the treatment of Epilepsy and Hypertension plants such as *Senna occidertalis* aerial parts and *rauwolfia vormitoria* roots *Tetra pleura* fruits are extracted together and are administered to patient under very strict condition reason be that the decoction has side effects that should be avoided such as nasal congestion which can be very devastating to the patient. The dosage is administered 3 times daily for a period of six months until a positive result is obtainable. Hypertensive patients sometimes the infusion of *Momordica Charantia* lowers the B.P. A teaspoon of dried leaves of *Momordica Charantia* (balsm pear) is infused in 250ml of water and taking 2 times daily the plant is highly effective in the treatment of hypertension and other related ailments.

HIV infection can be managed using *Spondias mombin* (hog plum), which is scientifically proven to be effective. The decoction of these plants is taking in 250ml dose thrice daily for six months until symptoms disappears. Studies have shown that the plant is an immune boaster; the leaves too can be used as antiviral agent (Sofowora 1993). *Azadiractita indica* (neem) leaves and stems bark are good for HIV treatment. Neem (Igbo) tree is called nature pharmacy in India or dogoyero; it is used for total body detoxification. Whenever *neem*



is administered to rats through scientific experiments, it is said to cause kidney damage, therefore, over dose should be avoided.

The effectiveness of these treatments is embedded in the people's psychology about traditional medicinal plants. Akwa (2007) observed that human factors are added advantage to the treatment. South eastern Nigerians are people with high regards to customs and traditions. The indigenes experiences in the high cost of orthodox treatment and also fake drugs have given the indigenes enormous reason to prefer the use of herbs. There is also this psychology that the medicinal plants are very safe and effective to the body and the belief that they are even use as food and other domestic purposes Ige (2011) has stirred up the indigenous people's interest in the use of traditional medicine. In addition, plants medicine can easily be bought over the counter, by the road side and even in plant medicine shops unlike orthodox medicine that need prescription from the pharmacy.

In Igboland, the use of plants as medicine is known to transcend all aspects of social, economic, religion and other barriers created by man, with about 80 percent of the rural population depending entirely on it as a source of primary health care for reasons of affordability and accessibility. Igboland is blessed with a variety of herbs, seeds, roots, ointments and other substances needed to effectively carry out treatment of diseases in traditional medicine (Shah, 2006). Although herbalists usually handle several kinds of illnesses, it is also important to note that most of the herbs act on the whole-body system making the body to cure itself. Some of the herbs are oxioytic. That is, they calm the brain and produce a feeling of wellbeing to the entire system. Also, some of the roots serve to stimulate blood flow to different parts of the body, such as the *Senna vormotira*, while other roots may act as purgative or laxative, such as the *Neem tree*. It is of utmost importance to note that as much as many indigenous people have taken to the use of herbal medicine there is the need to be aware of the various limitations that may come with it.

## CASES

### Treatment of Hemorrhoids (Piles) in Igboland

Hemorrhoid, also known as piles, is an inflamed and protruded collection of tissues from the rectum, which constitutes severe discomfort and itching to the sufferer, including sitting, stooling or carrying out any other normal social activity. The treatment of piles in Igboland involves the use of simple and

easily found herbs with noncomplex procedures for effective result. Although there are several home remedies known, most traditional healers in Igboland have specific herbs and procedures for the treatment of this disease. As observed in Eziama, Amaorji, Mgbede Ala and Ama Ayi communities of Isiala Ngwa province of Abia state, in Igboland, the treatment of hemorrhoid involves the collection of a few cocoyam stems, palm kernel oil, ashes, role (extracted from the back of plantain stem), some wraps of tissue or swipes and one plantain leaf. The collection of these items is the same in these communities, which explains the uniformity in the treatment procedures among the traditional healers in Igboland.

Upon collection of these items, the palm kernel oil is evenly spread on the plantain leaf and then taken to the edge of some flames to soften it against unintended breaks. Thereafter, the cocoyam stem is peeled completely to prevent itches to the user and then chopped into small pieces and placed on the softened plantain leaf. The palm kernel oil is added to the already chopped cocoyam stems before the mixture is wrapped up tied with the rope extracted from a plantain stem. Once the mixture is wrapped and properly fastened, it is then buried under some amount of ashes from the fire that was previously used in softening the plantain leaf. The mixture is allowed to remain under the hot ashes for not less than 30 minutes. When it is brought out of the ashes and loosened, the plantain stem is seen to have become very soft and almost melting in to the palm kernel oil. The content is then blended in a grinding stone to form a paste which is used in treating the hemorrhoid. To start the treatment process, a big mirror is placed in a convenient position such that the sufferer can have a good view of the protrusion when squatting. A wrap of the tissue or swipe is then dipped into the paste and taken very close to the piles (but not touching it). The fragrance from the mixture is believed to irritate the piles; therefore, the closeness of the concentration to the anus sends the piles moving inwards in oscillatory motion. The traditional healer continues to move the concentration closer to the pile as it moves inwards and upwards until it completely goes inside the rectum. When the protrusion is completely not seen again, the traditional healer then uses the paste in the swipe or tissue to swipe through the anus as observed after defecation. With these stages and procedures, the hemorrhoid disease is cured and the sufferer is healed to resume normal social functions.



## Treatment of Diabetes Mellitus in Igboland

Unlike in the treatment of hemorrhoid, the traditional treatment of diabetes mellitus in Igboland is not uniform. While some herbal doctors utilize the wild cola nuts, onion, balsum pear, scent leaf and garlic as the main ingredients, others use monkey sugar cane, onion and garlic and moringa seeds among other substances in the healing process. As observed in Okwuzu community in Anambra State and Izzi community in Ebonyi State, both in Igboland, the combination of these ingredients produces best result in the treatment of diabetes mellitus. In separate observations, the traditional healers or preferably called herbal doctors presented few lumps of wild colanuts and strokes of monkey sugar canes. The wild cola nuts were cooked in a clay pot while the monkey sugar canes were peeled and eaten raw. After about 30 minutes, due to intensive fire level, the cooking clay pot was brought down from the fire and the cola nuts taken out into a wooden tray. The patient is to be drinking the wild colanut juice after chewing the monkey sugar cane twice daily (first thing in the morning and last thing before bed) for two weeks. The patients were told to recheck their sugar level after 10 days of religious adherence to this therapy.

Similarly, in Izzi community in Ebonyi State, 2 of the 3 diabetic patients suffering from type 2 diabetes, who took the treatment were later diagnosed to be free from diabetes after a week of consistent and appropriate medications while the other suffering from diabetes 1 was not diagnosed free from diabetes but most of the symptoms such as blurred vision, phallic itches, persistent thirst, tiredness among others were no longer manifesting. A similar situation was observed in Okwuzu community in Anambra State, where eight (8) patients who volunteered to participate in the exercise were all healed after ten (10) days of taking the medications. According to the herbal doctors, the potency of these simple substances is almost 100 percent. Contrary to assumptions in orthodox medicine that certain disease conditions such as diabetes mellitus, is a disease condition without a known cure, traditional medicine believes that all illnesses and unwanted health conditions have their therapies embedded in leaves, stems, flowers, fruits, roots, tree backs, seeds, animal furs, bones, stones, etc.

## METHOD

Forty four (44) respondents participated in this study aged 18 years old and above. This comprises four (4) male herbal doctors or traditional healers and

forty (40) women suffering from diabetes mellitus and hemorrhoid (piles). These respondents were selected using purposive and volunteer sampling techniques. The reason for the purposive sampling technique was to select respondents (patients) who were responding to treatment for diabetes and piles while the volunteer sampling techniques was adopted to ensure that only respondents suffering from these illnesses were included in the study. The respondents were administered a 10-item close-ended questionnaire structured in statements requiring respondents to choose from the options: **A** = *agree*; **D** = *disagree* or **NR** = *No Response*. The questionnaire sought responses to measure the relationship between traditional healing and treatment of hemorrhoid as well as relationship between traditional healing and treatment of diabetes mellitus among women in Igboland, South-Eastern, Nigeria. The instrument of data analysis was the Pearson product moment correlation coefficient and the simple Chi Square at 0.05 level of significance.

## FINDINGS

### Data Presentation

**Table 7.I: Demographic data of respondents**

S/N	Variables	Indicators	No's of Resp.	%
1	<b>Age</b>	18 – 27	21	5.25
		28 – 37	74	18.5
		38 – 47	128	32.0
		48 – 57	127	31.75
		58 - 67	38	9.5
		68- Above	12	3
		No response	0	0
2	<b>Educational qualification</b>	FSLC	34	8.5
		SSCE	261	65.25
		Graduate	89	22.25
		Informal education	5	1.25
		No response	11	2.75
3	<b>Income level (Monthly)</b>	<10,000	0	0.0
		10,000 – N50, 000	44	11.00
		50,000 - N100, 000	299	74.75
		>100,000	57	14.25
		No response	0	0.0
4	<b>Religious belief</b>	Christianity	394	98.50
		Islam	2	0.50
		African (ATR)	0	0.0
		Others	4	1.0
		No response	0	0.0





Source: Researcher's compilation, 2019

Table 7.1 shows the demographic data of respondents. On the ages of the respondents, those between 18 to 27 years old were 21 (5.25%); those between 28 to 37 years were 74 (18.5%); 38 to 47 years were 128 (32%); 48 to 57 years were 127 (31.75%) while those between 58 to 67 years were 127 (31.75%). Women between 68 years and above were 12 representing 3 percent. The mean age distribution for the study was  $51 \pm (69-18\text{yrs})$  while the modal age distribution for the study was 42 consisting of women between ages of 38 to 47 years old (32%). On the distribution of respondents by educational qualification, the table shows that respondents with First School Leaving Certificate (FSLC) were 34 (8.5%); those with Senior School Certificate Examination (SSCE) were 261 (65.25%) while graduates or those with equivalent certification and qualification were 89 (22.25%). Respondents with information education background were 5 (1.25%). Only 11 respondents, representing 2.75 percent did not indicate their educational qualification.

On the income level of the respondents, the table shows that those who earn from N10, 000 to N50, 000 monthly were 44 (11%); those who earn between N50, 000 to N100, 000 monthly were 299 (74.75%) and were recorded as the modal frequency, while those earning above N100, 000 monthly were 57 (14.25%). No respondent reported was identified to be earning below N10, 000 monthly. On the religious beliefs, the table shows that 394 respondents, (98.50%) were Christians; 2 (0.50%) were Muslims while 4 respondents (1.0%) say they were neither Christians nor Muslims nor worshippers of African Traditional Religion (ATR).

**Table 7.2: Responses on traditional healing and treatment of hemorrhoid disease**

S/N	Statements	A	D	NR
5	Traditional healing is more effective in the treatment of piles than going to the hospital	29 (72.5)	10 (25)	1 (2.5)
6	Piles are prevalent where traditional healing is in short supply	20 (50)	18 (45)	2 (5)
7	Services of traditional healers for the treatment of piles can be accessed without money	27 (67.5)	12 (30)	1 (2.5)
8	Utilization of traditional medicine in the treatment of piles is less expensive	24 (60)	13 (32.5)	3 (7.5)
9	Women are most vulnerable to hemorrhoid disease	26 (65)	13 (32.5)	1 (2.5)

Source: Researcher's compilation, 2019

Table 7.2 shows the distribution of responses measuring the relationship between traditional healing and treatment of piles among women in Igboland, South-East, Nigeria. The table showed that 19 respondents (72.5%) agreed that traditional healing is more effective in the treatment of hemorrhoid (piles) than the orthodox healing system while 10 respondents (25%) disagreed with the statement. Only 1 respondent (2.5%) did not respond to this statement. In statement 6, which measures whether cases of piles were more prevalent in communities where there are little of traditional healing services, 20 respondents (50%) agreed while 18 respondents (45%) disagreed with the statement. 2 Respondents, representing 5 percent did not provide any response to this statement. Responding to the statement "services of traditional healers for the treatment of piles requires no money, 27 respondents (67.5%) agreed while 12 respondents (30%) disagreed. Only one respondent, representing 2.5 percent did not provide any response to this statement.

On whether utilization of traditional medicine for the treatment of pile is less expensive, 24 respondents (60%) agreed while 13 respondents (32.5%) disagreed. Only 3 respondents, representing 7.5 percent did not provide any response to this statement. The table also showed that 26 respondents (65%) agreed that women were most vulnerable to hemorrhoid disease than men while 13 respondents (32.5%) disagree. Only 1 respondent, representing 2.5 percent did not respond to this statement.

**Table 7.3: Responses on traditional healing and treatment of diabetes mellitus**

S/N	Statements	A.	D.	NR
10	There is no side effects to the treatment of diabetes using traditional healing	21 (52.5)	18 (45)	1 (2.75)
11	Diabetes cannot be cured	22 (55)	14 (35)	4 (10)
12	Treatment of diabetes is simply the management of symptoms	21 (52.5)	17 (42.5)	2 (5)
13	Traditional healers do not treat diabetic patients based on level of income and social status	24 (63.5)	14 (35)	2 (5)
14	Diabetic patients rely solely on the services of traditional healers	29 (72.5)	11 (27.5)	0 (0)

Source: Researcher's compilation, 2019

Table 7.3 shows the distribution of responses measuring the relationship traditional healing and treatment of diabetes mellitus among women in Igboland, South-East, Nigeria. The table showed that 21 respondents (52.5%)



agreed that there are no side effects to the treatment of diabetes in traditional healing while 18 respondents (45%) disagreed with the statement. Only 1 respondent (2.5%) did not respond to this statement. The responses to the statement whether diabetes cannot be cured, 22 respondents (55%) agreed while 14 respondents (35%) disagreed with the statement. 4 Respondents, representing 10 percent did not provide any response to this statement. On whether the treatment of diabetes was simply management of the symptoms, 21 respondents (52.5%) agreed while 17 respondents (42.5%) disagreed. 2 respondents, representing 5 percent did not provide any response to this statement. On whether traditional healers do not treat diabetes patients based on their level of income, 24 respondents (60%) agreed while 14 respondents (35%) disagreed. Only 2 respondents, representing 5 percent did not provide any response to this statement. The table also showed that 29 respondents (72.5%) agreed that diabetic patients rely solely on the services of traditional healers while 11 respondents (27.5%) disagree.

## DISCUSSION OF FINDINGS

To test for the relationship between traditional healing and treatment of hemorrhoid among women in Igboland, South-East, Nigeria, the simple Chi Square is used at 0.05 level of significance.

### Hypothesis one

*Null ( $H_0$ ):* There is no relationship between traditional healing and treatment of pile among women in Igboland, Nigeria.

*Alternate ( $H_1$ ):* There is a relationship between electronic media and political participation among residents in Uyo Senatorial District, Akwa Ibom State, Nigeria.

### Decision rule:

Accept  $H_0$  if  $X^2$ Cal value is  $\leq 9.488$  at 4 degrees of freedom and 0.05 level of significance. Otherwise, reject  $H_0$  and accept  $H_1$

### Degrees of freedom:

$$\begin{aligned} DF &= (R-1) (C-1) \\ &= (5-1) (2-1) \\ &= 4 \times 1 \\ &= 4 \end{aligned}$$

This hypothesis was tested using Chi Square at 0.05 level of significance, in order to ascertain whether there is a relationship between traditional healing

and treatment of piles among women in Igboland, Nigeria. This hypothesis was tested using responses from statements numbered 5, 6, 7, 8 & 9 plotted in table 7.2. The table measured traditional healing and treatment of hemorrhoid (piles) infection. The result of this hypothesis is presented in table 7.4.

**Table 7.4: Chi Square table for hypothesis one, measuring relationship between traditional healing and treatment of hemorrhoid (piles) infection**

<u>Cells</u>	<u>O</u>	<u>E</u>	<u>O-E</u>	<u>(O-E)<sup>2</sup></u>	<u>(O-E)<sup>2</sup></u> <u>E</u>
1	29	25.59	3.41	11.62	0.45
2	10	13.40	3.40	11.56	0.86
3	20	24.93	4.93	24.30	0.97
4	18	13.06	4.94	24.40	1.86
5	27	25.59	1.41	1.98	0.07
6	12	13.40	1.40	1.96	0.14
7	24	24.28	0.28	0.07	0.28
8	13	12.71	0.29	0.08	0.30
9	26	25.59	0.41	0.16	0.62
10	13	13.40	0.40	0.16	0.11

$$\sum \frac{(O-E)^2}{E} = 5.66$$

### Decision

Since  $\chi^2_{Cal}$  value of 5.66 is less than the  $\chi^2_{tab}$  value of 9.488, the alternate hypothesis ( $H_1$ ) was duly rejected and the alternate hypothesis ( $H_0$ ) accepted. The accepted hypothesis states that there is no relationship between traditional healing and treatment of pile among women in Igboland, Nigeria.

### Hypothesis two

*Null:* There is no significant relationship between traditional healing and treatment of diabetes mellitus among women in Igboland, Nigeria.

*Alternate:* There is a significant relationship between traditional healing and treatment of diabetes mellitus among women in Igboland, Nigeria.

This hypothesis was tested using Pearson Product Moment Correlation (PPMC) at 0.05 level of significance, in order to determine the relationship between traditional healing and treatment of diabetes mellitus among women in Igboland, Nigeria. This hypothesis was tested using responses from questions 10, 11, 12, 13 & 14 plotted in table 7.3 which measures traditional healing and treatment of diabetes mellitus. The result of this hypothesis is presented in table 7.5.



**Table 7.5: Pearson Product Moment Correlation analysis for hypothesis two, measuring relationship between traditional healing and treatment of diabetes mellitus**

**N = 400**

Variables	$\sum X$	$\sum X^2$ 32.12	$\sum XY$	$\Gamma$
Treatment of diabetes mellitus (X)	117 <td><math>\sum Y^2</math> 45.47</td> <td></td> <td></td>	$\sum Y^2$ 45.47		
Traditional healing (Y)	74		63.2	0.94

**Significance: 0.05; DF -398; N= 400**

**Decision:**

At 0.05 level of significance and 38 degrees of freedom, the  $r$ -cal = 0.94 predicts that there is a perfect negative correlation between traditional healing and treatment of diabetes mellitus among women in Igboland, South-Eastern, Nigeria. With this outcome, the null hypothesis was accepted, while the alternate hypothesis was rejected. The null hypothesis states that there is no significant relationship between traditional healing and treatment of diabetes mellitus among women in Igboland, Nigeria.

This finding agrees with Nisar, Acheson and Neal (2004, cited in Hindustan, Chitta, Kishore, Kranthi, Krishna, Kali & Mahendra, 2010) that the treatment of hemorrhoids is in the management of the symptoms for relief of pains and not a complete healing. Hindustan, et al. (2010) noted that the relationship between constipation and piles has long been established; hence, ability to control the dietary intake is a recommended therapy towards reducing physical symptoms in a patient. The implication of this findings suggest that while surgery is seen to be the most appropriate therapy for treating hemorrhoids in the orthodox healthcare system, the traditional healing system depends on the use of herbs and indigenous knowledge in the alleviation of pains and eradication of symptoms. This study also found that there is no relationship between traditional healing and treatment of diabetes mellitus among women in Igboland. This finding did not tally with Patil, Nasrin, Nisha, Datta, Boratne and Lokeshmaran (2013) as well as Kasole, Martins and Kimiywe (2019) whose studies identified various indigenous vegetables, spices and herbs in East Africa that are useful in treating diabetes.

## CONCLUSION

This study examines the relationship between traditional healing and the treatment of terminal diseases such as diabetes mellitus and hemorrhoids (piles) among women in Igboland. The traditional healers in the selected communities rely solely on plants and herbal substances found within the communities. The women who participated in the study were utilizing the services of traditional healers in the area. Data collected in the study showed no relationship between traditional healing and the successful treatment of the diabetes or hemorrhoids among women in Igboland.

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