The Difficulties of Western Medicine in Nepal

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INTRODUCTION

"Namaste and Hello" welcomes you to the city of Bhaktapur, littered with narrow alleyways and herringbone paved streets. It is an ancient city displaying magnificent multi-tiered pagoda roofs, rich blends of wood, copper and mud-brick all of which cast a silhouette across the orange Nepali skyline. In the distance, the unspoilt beauty of the Annapurna range and the great Mount Everest mingle with the clouds. It is nine o'clock in the evening and those who can afford candles light them as night approaches. Then nothing can be seen by the Nepalese, not even the fingers of their own hands before their weathered faces. Light and electricity, expensive privileges, are out of the question and within the hour the city sleeps in silence.

Just thirteen kilometres away from the capital city of Kathmandu, the medieval city of Bhaktapur lies in the eastern valley of Nepal. It is still very much unchanged from the original 18th century Nepali architecture. The absence of vehicles on the unpaved roads and the steep broken paths with large square watering wells contribute to the feeling of antiquity within the city. Bhaktapur has the ability to magically transport the visitor a few hundred years back to what Nepal was like before the arrival of the modern world. It was in this culturally intense place that a small group of Trinity medical students decided to embark on our summer elective in the Siddhi Memorial Hospital for Women and Children. It was a fantastic experience but while we were there, we noticed a vast difference between the healthcare standards of the western world and those in Nepal. This was not only due to inferior health conditions and medical technology, but also as a result of some of the Nepali customs and beliefs.

TRADITIONAL NEPALI MEDICINE

The main difficulty we came across with regard to practicing medicine in Nepal was persuading the locals to place their trust in western medicine. Most had been brought up in a culture of distrust for western medicine just as some people from the west are wary of traditional herbal medicines. The World Health Organization (WHO) estimates that up to 80 percent of the world’s population, which mostly lives in rural areas, rely on herbal medicine as their primary form of healthcare. In general, those Nepalis who actually came to seek our aid were either currently taking or had already taken some form of Traditional Nepali Medicine (TNM) prior to their visit. While some patients are treated successfully in this manner, many of these medicines have little effect and some even cause infection and are detrimental to a patient’s already ill health. People who do not opt for the more expensive western approach either self-medicate or, in more rural areas of Nepal, visit a traditional medicine healer or a shaman. The shamanistic approach is very different to what we are accustomed to in the West. For example, a mother and her sick child may go to the shaman who then creates a village herbal remedy from a selection of one thousand undocumented herbs found in Nepal. He then spreads this on the baby’s forehead in an attempt to rid the child of bad spirits. If the child dies in the following weeks it is believed by both the shaman and the mother that everything possible had been done for the child. Other methods of treatment in Nepal include Ayurvedic healing, a traditional form of Hindu healing popular among the locals, and various meditations, chants and prayers. In our paediatric unit, I observed that every baby wore a necklace and a series of strings around its waist. These are believed to protect the wearer against disease and evil spirits. In Nepal, there are many fears including a belief by some mothers that bottles and bananas cause a cough and should not be given to children.

While trying to keep an open mind about traditional herbs and unfamiliar techniques, we know that the pharmacokinetics and pharmacodynamics of many of these herbs are undocumented and quite poorly understood. Hence, it is difficult to predict the outcome for a patient who concurrently takes these herbs and western medication. Potential drug interactions and side effects are much more difficult to predict and pharmacological efficacy can be presumed to be suboptimal. Compliance becomes another obstacle when patients are instructed not to use their traditional remedies. Some patients return to their herbs, some discontinue their western medication and most of them combine the two. Perhaps this is due to a fundamental distrust in western medicine which tends to be seen as a more prophylactic and secretive method of treatment as tablets are small and no longer seen after swallowing. With traditional methods, herbs taped to the leg or a visually stimulating performance appears to actually heal the sickness. When people come for vaccinations or for