Papers

Beliefs and practices related to common skin diseases in a rural community

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Introduction

Studies of knowledge, attitudes and beliefs at the community level are an essential pre-requisite, especially, in planning stratergies to deliver messages of prevention as well as to get good compliance in the management of diseases. This is specially so with skin diseases, for, people have their own interpretations of the variety of lesions they see. In addition, the traditional systems of medicine which are still in practice in the country, seem to influence peoples beliefs greatly. This study was undertaken with the view to determining the extent to which the traditional systems of medicine have an influence on the present day rural people, and whether these practices adversely affect a persons' health.

Methods

The study was conducted in the university project area - Piliyandela, which consists of five midwife areas and a population of 35,000.

Data were collected using one of the rapid appraisal methods – namely focus group discussion[1]. This is a method of eliciting information rapidly. Here, a group of people with similar ages, educational background and social status sit together for discussion. They are encouraged to express their views by a facilitator who has a set of guidelines prepared before hand. Three groups of people were selected to participate in the discussions.

Group 1

Mothers of nuclear families who are decision makers at the household level.

Group 2

Elder women considered to be knowledgable in the community and decision makers at the community level.

Group 3

Authorities on traditional systems of medicine recognized as key informants.

Contact with the women was made through public health midwives and a convenient sample was selected. Discussions were held at the health centres. Each group consisted of 8-10 participants.

Ten common skin diseases namely, Vitilgo, Ringworm, Acne, Scabies, Tinea versicolor, Leprosy, Warts, Impetigo, Sweat rashes and Eczema were the foci for discussion. This was done under the guidance of one investigator who actively set up questions and showed photographs of each disease, while another investigator recorded the views of the participants. Each discussion lasted about an hour and was continued until the facilitator felt that the whole group had expressed their opinions. Six such group discussions were held in the community. The key informants were met by appointment at their places of work for individual discussions.

Results

Table 1. Profile of informants

Young mothers (20-30 years)	82%
Older Women (50-73 years)	18%
Occupation	– housewives
Occcupation of spouse	– 65% labourers/skilled workers
Education	– 50% studied upto O/L
	– 25% secondary education
	– 25% primary education

Key informants

1. Director, Bandaranayake Memorial Ayurvedic Research Institute, Nawinna.
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Table 2. The common names used by the people

Vitiligo	–	සුදු කබර
Acne	–	කුරුලු
Childhood eczema	–	රතගාය
Adult eczema	–	රක්තය
Scabies	–	පණු හොරී
Sweat rash	–	දඩිය බිබිලි
Ringworm	–	දද/කුෂ්ඨ/පණු කැවිලි
Tinea versicolor	–	අළුහම්
Warts	–	ඉත්තො
Leprosy	–	ලාදුරු
Impetigo	–	ඇස්වහ කටවහ බිබිලි

Table 3. Beliefs and practices common to all skin diseases

Beliefs	* Heaty body * Blood poisoning * Heaty food * Familial * Use of other's clothes and towels
Practices	* Purgation * Blood Purification * Diet Therapy * Local applications

Accumilation of toxic byproducts at different sites such as intestines or the blood vessels due to the disturbance of body humors is thought to be the root cause of all diseases. Hence the first line of management is to give purgatives as well as decoctions to purify blood.

Table 4. Vitiligo

Causes	* Rat bite * Snake bite * Consumption of food nibbled by rats
Therapy	* Exposure to early morning sun after taking Ayurvedic Medicine
Prevention	* Burning the site of bite with a red hot gold ring

Rat bite is believed by the majority to be the main cause of vitiligo. Although there is no scientific basis for this belief, male rat is known to lick his genitalia after copulation. It is thought that if a rat bites a human soon after, the semen that is transferred to the bite wound will trigger off a reaction resulting in vitiligo. With regard to therapy, in traditional medicine, the seeds of the herb Bakuchi (Psoralea corylifolia) is extensively used for treating Vitiligo.[2]

Table 5. Acne

Causes	* Excessive use of cosmetics * Hormonal imbalance * Oily foods * Increased interaction between carbohydrate and fat in the body
Therapy	* Local herbal applications
Prevention	* Avoid excess use of creams * Local applications

Majority did not know a cause and considered acne an age related physiological condition.

Table 6. Eczema

Causes	* Irritants/foods * Strong medicines * Asthma if cured * Worms * Micro organisms
Therapy	* Washes * Local applications * Diet Therapy * "Kem" (rituals)
Prevention	* "Rathakalka" in infancy

All participants preferred Ayurvedic treatment for eczema. They claimed that, eventhough it takes nearly 5 months for the eczema to heal, the recurrences were fewer.

Table 7. Scabies

Causes	* Dust * Yeast * Small worm * Contamination with discharges of affected persons
Therapy	* Cleansing lotions Creams from health centre
Prevention	* Avoid infected people

Scabies is rarely seen in this community now most people had faith in the creams distributed by the health centre.

Table 8. Sweat rash

Causes	* Too early weaning * Heaty foods * Dust * Nylon/Silk * Hot weather
Therapy	* Frequent washing * Local applications * Ratakalka
Prevention	* Advice feeding mothers to avoid heaty foods

Most people correctly associated hot weather with sweat rashes and the use of nylon and silk which aggravate the condition. Early introduction of solid food to an infant was also thought to cause sweat rashes.

Table 9. Impetigo

Causes	* Evil mouth * Evil eye
Therapy	* Washing with "chanted water"
Prevention	* Wearing black "pottu" on the forehead * Wearing waist bands, necklaces made out of black and white beads

None of the groups gave the correct reason for Impetigo. All attributed it to the effect of the evil eye or evil mouth. As a first line management everyone said that they bathe the child in chanted water on five occasions. Failing this, they would seek western medical treatment.

Table 10. Warts

Causes	* Bad period or planetary influence * Vitamin deficiencies
	* Contamination with blood of affected people
Therapy	* Rituals eg. "Kem" Physical measures

The usual belief was that the person who had warts will get cured it they were transferred to someone else. This was done by way of pricking the wart to extract a little blood which was then taken on to a coin of some value and left at a busy street junction in order to be picked up by someone to whom the warts will get transferred.

Table 11. Tinea versicolor

Causes	* Disease of intestines * Vitamin deficiencies * Increased sweating * Yeast/fungi * Failure to scrub while bathing
Therapy	* Purgatives * Local applications

People claimed that paste of Guava (Psidium guajava) leaves in saffron, or paste of Red sandlewood (Pterocarpus santalinus) in saffron were effective in treating Tinea versicolor.

Table 12. Ringworm

Causes	* Use of common toilets/clothes * Mosquito bites * Micro organisms * Worm infestations * Worm in skin
Therapy	* Purgatives * Local applications
Prevention	* Avoid exchange of clothes

People believed that it was essential to use purgatives in the treatment of Ringworm. They also said that they avoid acidic foods such as Tomato, Pineapple and those containing vinegar. Bathing and washing as often as possible was also thought to be necessary.

Discussion

The objective of the present study was to identify the beliefs and practices regarding common skin diseases among the rural people of Sri Lanka. Focus group discussion proved to be an effective tool in achieving the objective. Majority believed that the "heatiness" of body and "heaty" foods were responsible for skin diseases. This belief follows from the humoral theory of Ayurveda which claims that all disease is due to imbalance between 3 humors (Vayu, Pitham, Kapham) resulting in accumilation of toxic byproducts. One of the pathological manifestations of this imbalance is a "heaty" body[3]. Many people in Sri Lanka avoid various items of food too in the belief that they are "heaty". Even though this seems a nebulous concept to the modern scientific medicine it was shown by Uragoda and Kottegoda in the seventies that as far as certain fish (Balaya, Kelawalla, and Hurulla) are concerned, heatiness could be explained on the basis of high histamine content. They estimated and found that Bala fish traditionally thought to be "heaty" contained the highest histamine content of any food so far estimated in the world, thus lending support for this particular popular belief[4]. If proper research were to be conducted to seek the basis for these beliefs one might even discover some hitherto unknown aspects to modern medicine. It may be recalled that centuries before the discovery of the relationship of the enzyme g-6-P-D, favabean and haemolytic anaemia, Pythagoras forbade his followers to eat favabean or go near favabean fields[5].

All participants were able to recognise leprosy and identify it as either leprosy or a serious skin condition which necessitated hospital treatment without delay. This was a very satisfactory response and probably follow the effective social marketing program launched islandwide by the Anti-leprosy campaign.

Acne, which in the west and in urban Sri Lanka is known to cause much psychological trauma to the afflicted, was dismissed by nearly all women as a age related problem which was selflimiting. Possibly these participants were not aware of severe forms of Acne. They described a variety of herbal preparations such as Komarika (Aloe vera) extract, Ground Kohomba (Azadirachta indica) leaves, ripe Papaw (Carica papaya), White Sandlewood (Santalum album) paste to keep 'Acne' in control. Further research is necessary to identify the efficacy of these preparations. It is a firm belief among the people that illness could result from projection of another persons envy (evil eye/evil mouth). And in these cases, spiritual remedies are thought to be necessary to effect a cure. Even a key informant described how, certain valued plants of his withered away and died due to the effect of the envious words uttered by one of his visitors. Chanted water or lime has been used for hundreds of years to cure disease in the belief that, the effects of evil eye or evil mouth could be neutralised. Ayurveda also documents that some

important healing sounds (chanting of mantra) have a definite effect in curing disease, improving health and the capacity to work[6]. Eventhough these techniques seem to have no rational or pharmacological basis, people have recognized that there are psychological benefits to the sick, if a healer even appears to do something effectively. Perhaps the body is better able to cope with illness under these conditions. On the other hand, the lesions described could be responses to allergens or irritants which spontaneously disappear in a matter of 24-48 hours. This aspect needs further in depth prospective research. Association of eruption of sweat rashes at the time of weaning needs to be erased from the minds of people. In Sri Lanka, growth faltering in infants is seen to start at 5-6 months after birth. Delayed weaning, in order to observe auspicious time and the misconceptions about the type of weaning food is thought to be one of the major causes for growth faltering. It is necessary to plan and implement educational programmes in the community in order counteract these beliefs.

Where eczema is concerned, preventive measures are being widely practiced by participants in the form of giving 'Rata Kalka' in infancy. The authentic 'Rata Kalka' contains 3 components, namely rock salt (sodium chloride), Kollu (Dolichos biflorus) and sandlewood (Santalum album). These are known only to have mild diuretic, laxative and carminative effects[6].

In this study sample, which is from rural Sri Lanka, the bias was found to be towards traditional systems of medicine and the beliefs and practices identified were based mainly on the teachings of our ancient system of Medicine – Ayurveda, which was introduced from India in the 3rd century B.C. However, it is encouraging to note that people seek western medical treatment very early for leprosy which has serious consequences and also for others if traditional methods fail.

Conclusions

Traditional beliefs and practices based on the Ayurvedic system of medicine are still prevalent in Sri Lanka as regards skin diseases.

In most instances people prefer such remedies and seek western treatment only if they fail.

Ayurvedic treatment is prefered for chronic eczematous conditions.

Acne is not considered a disease by the majority of people. Positive attitudes are shown towards leprosy.

Recommendations

Further in depth study needs to be carried out to find out the reasons for peoples preferences.

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