Traditional and Complementary Medicine in Pregnancy and Postpartum: Insights from a Qualitative Study

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Introduction

Traditional and complementary medicine (T&CM) has gained popularity among Malaysians despite conventional medicines strengthening day by day with a new generation of medications. As of today, Malaysia has integrated both conventional and T&CM into the healthcare system.¹ Face to face interviews conducted among Malaysian patients with chronic diseases found that 63.9% of respondents used T&CM as new alternative treatments without leaving their conventional treatments and more than half (78.0%) of them claimed to have improved health conditions.²

Generally, an international percentage of T&CM use has been reported in ranges of between 9.8% and 76.0%.³ A comparison study in United States which was done by using the National Health Interview Survey (NHIS) data indicates that adults with chronic disease-related functional limitations were found to have a significantly higher prevalence of T&CM use between 2002 (31.1%) and 2007 (35.0%).⁴

Furthermore, women are more likely to use T&CM than men.⁵⁻⁷ In United States, women were more likely to use T&CM for disease prevention and being healthy,⁸ whereas in Malaysia, many women observed T&CM as a supplement to their conventional therapy, mainly for disease treatments.⁹ However, women also use herbal medicines during pregnancy¹⁰ and a recent study has found some similarities in T&CM practices among women of different ethnicities during the postpartum period.¹¹ Additionally, a lot of current practices related to T&CM use in obstetrics is not evidence-based and the awareness of the true benefits as well as risks of these practices are needed to better serve the obstetric patients because they are being exposed to biologically active compounds during an extremely vulnerable time.¹²

In direct response to these survey gaps, this study aims to determine the use of T&CM among Malaysian women during pregnancy and postpartum period.

Methods

Study design

In-depth qualitative interviews were carried out in Kuala Muda District, Kedah, Malaysia among pregnant and postpartum women between April 2016 and April 2017 to explore their perspectives, experiences and to expand the knowledge and information on T&CM.¹³

Ethical approval was obtained from the Medical Research and Ethical Committee (MREC), Ministry of Health Malaysia.

Study participants

A purposive sampling method was used to identify participants among the three major races in Malaysia: Malay, Chinese and Indian. Participants were recruited to join this study by verbal invitation and informed consent forms were given together with the patient information sheets to those who agreed and were willing to participate. The forms must be completed with the interviewee’s signature and dated, then returned to the interviewer after the interview. Interviews were conducted in Malay or English language. Women who cannot speak or understand the both languages were excluded in this study. The interviews were carried out until the saturation of the study objectives were achieved and when there were no more additional themes appearing.¹⁴ A total of 14 participants were interviewed in this study.
Data collection
Data was collected using semi-structured interviews where the participants’ interview guide was adopted and modified among authors as well as tested before the interview sessions started. The interviews which lasted for 30 to 40 minutes were done at participants’ workplaces or in the two main clinics of mother and child health clinic (MCHC), Sungai Petani District, Kedah, Malaysia and all of the same topics were covered among participants. Most of the interviews were audio-recorded but few were also done via email and phone communication.

Each interview was transcribed verbatim by the researcher. The transcripts were then verified by the researcher’s supervisors and sent to each participant for approval. Participants must then sign and return the participant’s validation form to the researcher as approval.

Data analysis
The interviews data were analysed thematically using framework analysis. “The data were coded for both anticipated themes (those arising from the literature, considered in advance and prompted for by the researcher) and emergent themes (those arising spontaneously from participants during interviews)”. The analysis observed three themes in this study: women’s perspectives towards T&CM, patterns of T&CM use during pregnancy and postpartum and perceptions on T&CM use.

Results
Women’s perspectives towards T&CM
Nearly all of the participants in this study were T&CM users. A majority of the participants were thinking that T&CM is a treatment by using pure sources or plants without chemicals or drugs.

“Naturally made from nature, not thoroughly processed and still preserves the use since the olden times”. (P6)

Some considered T&CM as referring to home folk medicines or sometimes generally called as home remedies because it may or may not have medicinal properties that treat or cure diseases and normally used as food ingredients.

“A lot of this traditional treatment is also used in cooking such as herbs and spices that have its goodness for women’s internal health. Some also make soup such as ‘kampung chicken’, eating ‘kampung chicken’ eggs and so on.” (P12)

Interviewees also mentioned that T&CM is just a supplement for a healthy lifestyle. Nowadays, Malaysians are becoming more aggressive when it comes to trying to maintain one’s health.

“This T&CM is just one of the additional treatments, which is why it uses natural sources as treatment material. It is to make us feel healthier.” (P11)

A few other participants gave some responses about T&CM as any treatment that does not require going to hospitals and can help to overcome bad health conditions. A participant expressed her thinking by saying:

“Traditional methods with medicine or practices but without using conventional treatments or no need for hospitals. It includes the use of herbs available in the market”. (P4)

However, a majority of participants categorized traditional healers as only a belief in a multi-cultural country like Malaysia, not one of the T&CM modalities.

“But a traditional healer may just be a belief. So, it is not categorised as part of T&CM because it does not involve any medicine. T&CM is medicine, hence traditional healers are not a part of T&CM”. (P3)

Patterns of T&CM use during pregnancy and postpartum
Almost all interviewees emphasised on pure herbs and its compounding in many commercial herbal products available in market. A part of the participants were informed about using pure herbs or products from natural sources by self-preparation like boiling or making juices, where they used some types of leaves, or root or many others from plants.

“I ate fenugreek that was boiled in water, then drank the water when it is warm, not cold, from the beginning till the end of my pregnancy. I drank it in the mornings approximately 4 times a week.” (P13)

In other views, interviewees also referred T&CM to food restrictions as one of the practices that women need to adhere to after delivery.

“There are also dietary restrictions. Some vegetables cannot be eaten in fear of chills, seafood and other foods that causes itchiness are also forbidden because the labour wounds have yet to heal. In addition to that, during the 30-day confinement period, I had to consume ginger and black dates... Then, drink plenty of organic chicken ‘ayam kampung’ soup cooked in Chinese herbs...” (P11)

Several participants in these interviews admitted that they have used traditional products sold as ‘maternity set’ and that there are many different brands. When the product leaflets were thoroughly studied, it was found that it comprises a variety of T&CM modalities such as herbal baths, herbal intimate washes, medicated corset, warming mixtures for body (param), calming mixtures (pillis), herbal massage oils and others. The views on these particular practices came mostly from women with experiences of delivering...
babies. Almost all participants had gotten traditional massages, the most popular being the traditional Malay massage which was practiced by Malays, Chinese and Indians alike. The practice of getting massages is found to be used more frequently by women during the postpartum period rather than during pregnancy.

“I also used the Malay healing method which was done in the house of the healer. It included massages, heat therapies also known as ‘tungku’ and sauna. It was done for 3 consecutive days after my child had recovered from jaundice.” (P10)

Interviews demonstrated that many women go to professionals and non-professionals for advice and information on T&CM. Generally, they know the types of T&CM to be used from family members, friends, healthcare providers, midwives, mass media and others. The conversations between interviewer and interviewees are as below:

“The nurse who came for a home visit at the beginning of my confinement also suggested that I used natural herbs during my confinement period.” (P2)

“By searching for information on Google, about testimonies on the use of these products in blogs and also though the products’ agents.” (P5)

“Through my father. My friend also suggested a midwife for my first pregnancy. For this third child, I also plan to hire a midwife who is recommended by my neighbour.” (P8)

**Perceptions on T&CM used**

A majority of the participants are highly confident in T&CM use during pregnancy and postpartum.

“Yes, based on the testimonies of other users, I am confident in trying it. Other than that, based on the information gathered, all the products that I use are from natural sources. So I dare to use it... Hence, I will use it without having any doubts even though it has not undergone any clinical studies.” (P5)

Mass media became a main source of information, including the availability of new generations of T&CM products in the market. These products are promoted with a vast array of testimonies by people who claim to have used the product on web pages and blogs. So, during the interviews, many participants gave their opinions on T&CM being retailed online. A lot of them were against online retail especially on T&CM marketing available in Malaysia due to the lack of information to ensure the efficacy, efficiency and safety of products.

“It should be sold in a more appropriate place such as in a pharmacy or in facilities that have proper sources of reference and is managed by an appropriate professional.” (P1)

Hence, this qualitative study found that a majority of the participants agreed that pharmacists should be involved in T&CM consumption counselling, especially about the interaction that could happen between T&CM-drugs, T&CM-foods and T&CM-T&CM as well as to recognise the genuine registered T&CM products in the Malaysian market to ensure the quality of use and medication safety.

“Maybe the pharmacists can give consultations on modern medicines and T&CM practised more clearly on whether there will be side effects. It would be better to have authentic information on the effects of T&CM medicines which is used during pregnancy or after giving birth, taken with modern medicines. It would also be good if there was a clearer guideline on treatments in order to ensure the safety of users.” (P8)

A few women in this study suggested that the government or other agencies involved in policy making should tighten the rules on traditional medicines registration process in order to enhance the safety and to avoid it from being unlawfully adulterated.

“Registration of products should be improved upon from the aspect of the products’ actual ingredients as well as the quantity allowed in order to result in a more accurate use of the product. It should also be made more like the registration of conventional medicines.” (P5)

**Discussion**

This study has observed the views of pregnant and postpartum women towards T&CM meanings and its practices in Malaysia healthcare systems. Although this study has a small quantities of participants, the findings have huge information of T&CM use during pregnancy and postpartum period including the meaningful views on T&CM itself. However, this study found many participants were confused about the classification of traditional healers as one of T&CM practices. This happen due to no standard definition to describe the types of T&CM modalities worldwide while the meaning of traditional healer among Malaysian are also different with other countries or some assumed it as a religious belief.15

Apparently, similar with previous study, many women are practising T&CM although they are aware that there are insufficient evidences on its benefits.12 The T&CM usage and the benefits has passed down from generations to generation either among Malays, Chinese and Indians.11 It has become compulsory for women especially in the postpartum period. This study found herbs, nutritional taboos, massage, and heat therapies like ‘bertungku’ were dominant among all T&CM modalities used during pregnancy and postpartum.

Information technology play an important role besides family members and friends as the sources of T&CM information nowadays. Despite high prevalence of T&CM use, the disclosure rate between healthcare providers and T&CM users are low.9,18,15 Additionally, the T&CM interventions have less clinical evidence on its practices during pregnancy and postpartum which can be harmful to bother mother and baby.18
This present study has provided the perception among T&CM users about the impact of pharmacist involvement in counselling on T&CM use where most participants think that it will be helpful to ensure the quality and safety of T&CM use in Malaysia. The participants also suggested that T&CM online retail must have a specific regulation to become a good practice while the government should tighten the current regulations on traditional registration products. However, more studies are needed to evaluate the efficacy and effectiveness of current rules and regulations in Malaysian healthcare systems.

Conclusion

In conclusion, this study successfully revealed the interest on T&CM use among women during pregnancy and postpartum which has been passed down from one generation to another. The demand for T&CM causes commercial traditional products to flood the Malaysian market. Several women used these local products with conventional therapies without prior consultations with a healthcare professional. Thus, further research is required to evaluate the healthcare provider's perception towards women's use of T&CM especially during pregnancy and postpartum period.

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References