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Complementary and alternative medicines for diabetes mellitus management in ASEAN countries



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Summary

Aim: The aim of this study was to explore complementary or alternative practices used to promote health and reduce complications of patients with diabetes mellitus (DM).

Design: This qualitative, interpretative study recruited 30 adults including practitioners ($n = 15$) and DM patients ($n = 15$). The participants reside in the northeast of Thailand and in Vientiane of Lao People's Democratic Republic, and they have undergone treatment with at least a kind of complementary and alternative medicines (CAMs) for the care and management of DM. They were interviewed about their experiences, and the data were analyzed thematically. The study methodology was informed by hermeneutic phenomenology.

Result: After several years of ineffective treatments, practitioners looked for an alternative to conventional health care to treat patients on long-term antidiabetic drugs, yet the patients suffered from progressive complications. They sought out health care that would more effectively meet their self-perceived needs in treatment particularly of a chronic disease such as DM. The result suggested that CAMs such as acupuncture, massage, exercise, and herbalism were able to meet their requirement in terms of health-care effectiveness obtained from experiences, additional cheap cost and availability in their community, and in accordance with the culture and lifestyles in the context of the ASEAN (Association of Southeast Asian Nations) community.

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Conclusion: The study explored and revealed the social perceptions of practitioners and patients using Chinese acupuncture, Thai massage, stretching exercise, and herbalism, as CAMs for DM management. The perceptions attributed to patient–practitioner consensus can hold a key to a more comprehensive health care, as a means to expand the boundaries for contemporary health-care provision. However, more study is needed in the future clinical trial research.

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Introduction

Diabetes mellitus (DM) is a metabolic syndrome causing cardiovascular complications, which is also a leading cause of blindness, amputation, and kidney failure. In 2012, the International Diabetes Federation (IDF) updated that >371 million people were diabetic. The number of people with diabetes has been increasing in every country. Half of people with diabetes were undiagnosed. In 2012, 4.8 million people died due to diabetes, and >471 billion USD were spent on health care for diabetes.¹ While much of this increase is expected to occur in developing countries, the reasons behind the increase are not country specific but the consequence of population aging, increasing urbanization, unhealthy diets, obesity, and sedentary lifestyles. These account for much of the social and financial burden of the disease.^{2,3}

In Thailand, the number of diabetic patients was dramatically increased up to 5.4 million in 2012. The number also included patients who were undiagnosed and untreated.¹ Apparently, long-term treatment with conventional medicine could not help the DM patients to live healthy and delay progressive complications. This requires that individuals and organizations keep abreast of changing health-care needs and continually look for ways to provide appropriate care. The use of complementary and alternative medicines (CAMs) was offered to be the selected issue and potential strategy toward meeting chronic disease management needs.⁴

“CAMs” are defined as diverse therapeutic practices and alternative health-care approaches that fall outside the boundaries of conventional, allopathic medicine.⁵ Moreover, CAM may include forms of treatment, diagnosis, and/or prevention that complement mainstream medicine by satisfying a demand not met by conventional approaches, or by diversifying the conceptual framework of medicine.⁶ Chronically ill people are reported to use CAM two to five times more often than non-chronically ill people.⁷ The demand for CAM services is expected to rise particularly as a result of population aging and a subsequent likely increase among people who will experience one or more chronic health problems.^{7–10}

Diabetes care involves more than glycemic control, and it is important to manage other cardiovascular risk factors including obesity, hypertension, and dyslipidemia; therefore, the key elements of diabetes management need more than drug consumption. Along with dietary and pharmacological interventions, Chinese acupuncture, Thai massage, stretching exercise, and herbalism are employed by patients in Thailand. In addition, Chinese traditional medicine, particularly acupuncture, is a very popular treatment in Vientiane of Laos for management of diabetes and rehabilitation.

Acupuncture originated in China about 2500 years ago, and it remains an integral component of traditional Chinese medicine today. Acupuncture is believed to restore and balance energy flow or “qi.” Qi energy flows along channels in the human body called meridians. There are about 400 acupuncture points and 20 meridians connecting most of the points.^{11,12} Acupoints may be stimulated by manually inserting needles and twirling them, or by applying a small electric current (electro-acupuncture). In addition, it may be used together with moxibustion (moxa) made from dried mugwort, which is processed into a cigar-shaped stick. Practitioners use moxa to warm regions and acupuncture points with the intention of stimulating circulation through the points and inducing a smoother flow of blood and qi. The review conducted by the World Health Organization suggested that acupuncture may help treat >20 medical conditions, including cardiovascular disease.^{13,14}

An important element of Eastern medicine is the concept of life force or energy, which flows along specific channels. In Chinese, it is called qi, whereas in Thai it is called “loom.” Traditional Thai massage provides benefits by stimulating pressure points to open the body’s energy pathways, allowing energy to flow freely and the body to heal itself. The combination of pressure on specific points and yoga-like stretches in traditional Thai massage relieves areas of muscular stress and tension. Additionally, the studies suggested that it helps to improve the cardiovascular system by dilating the blood vessels, so that circulation is enhanced. It improves the responses of the central nervous system. Several scientific studies support that it can improve the immune system by invigorating the nervous system and releasing toxins through improved circulation; it is especially effective in releasing mental and emotional stress.^{15–17} Some recent studies suggested that massage is a proven, effective complement to traditional diabetes management,^{18,19} including a study which revealed that connective tissue massage improved blood circulation in the lower limbs of patients with type 2 diabetes and may be useful to slow the progression of peripheral arterial disease.²⁰

Patients living in Thailand, including Laos, have been familiar with traditional herbalism for a long time. A great diversity of medicinal plants in this region are used in several herbal remedies to treat diabetes, and this knowledge is passed down from generation to generation. Some of these remedies have been proven for centuries to control glycemia. In Thailand, and in Laos, practitioners who recommend herbalism to the patients are mostly folk practitioners living in the patients’ community. These are examples of natural products that have long been used worldwide in traditional systems of medicine to treat diabetes, such as nopal (prickly pear cactus), fenugreek, karela (bitter melon),

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