

Research Article

Utilization of Quackery instead of Specialized Doctors for Orthopaedic Care in District Hafizabad

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ABSTRACT

Objectives: To evaluate the factors for preferring the traditional bonesetters by people.

Study Design: Observational descriptive study.

Setting: Orthopaedic department, Trauma Centre DHQ, Hafizabad.

Period: July 2017 to December 2017.

Materials and Methods: One eighty patients who presented at orthopaedic outpatient clinic after attending Traditional Bone Setting Centers were recruited for the study. Information about the patients' bio data, mechanism of injury, level of their education and affordability, either they are myths believers about bonesetters or not, the factor which motivate them towards bonesetters, are they phobic to surgery and their satisfaction about hospital settings and doctors. The data obtained was recorded and analyzed on SPSS version 25.

Results: The mean age was 35 years. 65 were females and 115 were males. One thirty- five (75%) were uneducated and 45 (25%) were educated. One seventy-five (97.2%) were strong believer of the myths about bone setters' treatment and only 5 (2.7%) were non believer. One fifty (83.3%) were non-affording and thirty (16.6%) were affording for medical treatment. One sixty-five (91.6%) were motivated by hear-say towards quacks, five (2.7%) were motivated due to local marketing of quacks, five (2.7%) were motivated due to convenient to them and five (2.7%) motivated due their cheap remedies. Ninety (50%) said that they are phobic to surgical procedures and ninety (50%) said they are not so. 20 (11.1%) said that due to lack of medical facilities in hospitals they prefer quacks while 160 (88.8%) didn't agree with it. 30 (16.6%) said that there was lack of doctor patient relationship while 150 (83.3%) don't said this. 10 (5.5%) said that they were desperate from medical treatment and 170 (94.4%) said there was no such reason.

Conclusion: Despite all the complications associated with bonesetters treatment, majority of people still have a strong belief in their capability. Low literacy rate and lower socio economic status also made them to consult bonesetters first.

Keywords: Traditional Bonesetter (TBS), Myths, Beliefs, Complications, utilization of services in Fractures, reasons for non-utilization of government facility.

INTRODUCTION:

Every year thousands of people suffered by Quackery taking serious threats to their lives or ending up in morbidities in all over Pakistan. Same problem the doctors are facing in Hafizabad by orthopedic department. As people try quack remedies instead of medical specialized help so their illness progress, sometimes beyond treatable stage. They can steal health away or even take lives. Quacks may lure the seriously and often desperately ill,

such as people suffering from arthritis and cancer, into buying a bogus cure. As it's an old saying: "A robber demands your money or your life but a quack demands your money and your life" Quackery is defined as "the promotion of fraudulent or ignorant medical practices".^{1,2} Quackery is one of the leading causes of increasing mortality and morbidity in Pakistan.² Most of the victims are poor with little access or awareness to high quality health care.²

The other most basic and generic emotional source of vulnerability to quackery is some form fear either it related to surgical approaches or inconvenient process of hospital settings. Much has been written about quackery and medical malpractice in Pakistan.² Among those some articles are related to medical while others are about surgical quackery issues. This research will be made to highlight orthopedic malpractice by people preference to these traditional bone-setters in district Hafizabad, as they manipulate fractures and apply wooden bar around the fractures and also apply different types herbs others materials around fracture site for healing. Infact they are unqualified practitioners in allopathic medicine that has taken up the experience of fracture treatment from their forefathers who have no formal training in modern orthopedics.³

Most of the patients have high confidence in traditional bone-setters and that is why they prefer them in their communities.⁴ The reason for high confidence are multiple. Patients have cultural belief in traditional bone-setters, it is economical, easily accessible to the patients, its services are quick, and friends and families pressurize patients for traditional bone-setters.⁵ Some people who have fractures, from far flung areas has a belief that referring a patient to a teaching hospital means that amputation of the limb is mandatory.⁶ Ogunlusi and his colleagues has identified other factors preferring traditional bone-setters. These factors are fear of metal work inside or outside of limb; Convenience and flexibility of them; Familiarity with them and unfamiliarity with Orthodox center and patient recognize them as specialists for bone and joint disease.⁷ In this research article, the emphasis will be on the problem among masses which is becoming source of disabilities having history of trauma and got treated by quacks /pehlwans/bone-setters as a result after weeks of their remedies when they present it to a specialized doctor they have to end up in major or complicated surgeries sometimes in amputation causing disabilities for future life times. It has been proposed instituting programs to raise awareness among educated and uneducated people and implementing the laws related to quackery and malpractice.² This

research will also be followed by useful suggestions and practical recommendations to eliminate this alarming problem in this District Hafizabad as well as all over the Country which is adversely affecting the health and ability of victims of quacks/bone-setters.

OBJECTIVES:

- > To find out the factors for preferring the traditional bone setters than specialized doctors by masses in district Hafizabad.
- > To give awareness to people and saving them from future morbidities.
- > To make it noticeable to health officials & law enforcement agencies to control this malpractice on ground realities in Hafizabad dist.

METHODOLOGY:

Study design: The research will be observational descriptive study in order to reach a workable factor.

Study setting: The research will be held in orthopaedic Out door patients in Trauma Center Hospital Hafizabad.

Sample: The study will comprise of an amount of approximately 180 individuals.

Sampling Technique: Non probability convenient sampling

Inclusion Criteria: All the patients presenting in orthopaedic OPD in Trauma Centre, Hafizabad.

Exclusion Criteria:

- > Patients not disclosing detail of previous treatment of illness.
- > unwilling patients
- > Patients having previous surgery by medical specialized doctors.
- > Cases from outside district Hafizabad will not be included.

Tool of measurement

The tool will be an open and closed ended questionnaire to get reviews n inner perspective of masses for quackery and specialized health care.

Data Collection Procedure:

After approval from local ethical review board, patients meeting inclusion criteria of study will be enrolled from orthopaedic OPD in Trauma Centre Hospital, Hafizabad. A history will be taken and examination of the patient's disability will be done along with a radiological

evidence against the quack treatment. Those patients will be excluded who fall into exclusion criteria. The patient will be given a questionnaire to fill it or will be asked the questions given over to that perform so that to determine the strong factor effecting the masses going to quacks instead of specialized health care takers. The questionnaire will include different variables which are most common among people of Hafizabad district like education status, economic status, myths believers or others which make them resistant for hospital care.

DATA ANALYSIS:

All data will be analyzed by computer using software SPSS version 25. The factors enhancing people towards quackery will be highlighted by getting their reviews about their morbidity and its future. In order to insight their conscious level about their health.

RESULTS:

There were total 180 individuals, out of which 85 between age 15 to 50 years, 55 above age 50 years and 40 below 15 year thus the mean age was 35 years with minimum age 5

years and maximum age 70. In these 65 were females and 115 were males. 130 (72.2%) cases were due to Road Traffic Accident (RTA) and 50 (27.7%) cases were due to falls. One thirty-five (75%) were uneducated and 45 (25%) were educated. One seventy-five (75.2%) were strong believer of the myths about bone setters treatment and only 5 (2.7%) were non believer. One fifty (83.3%) were non-affording and thirty (16.6%) were affording for medical treatment. One sixty-five (91.6%) were motivated by hear-say towards quacks, five (2.7%) were motivated due to local marketing of quacks, five (2.7%) were motivated due to convenient to them and five (2.7%) motivated due their cheap remedies. Ninety (50%) said that they are phobic to surgical procedures and ninety (50%) said they are not so. 20 (11.1%) said that due to lack of medical facilities in hospitals they prefer quacks while 160 (88.8%) didn't agree with it. 30 (16.6%) said that there was lack of doctor patient relationship while 150 (83.3%) don't said this. 10 (5.5%) said that they were desperated from medical treatment and 170 (94.4%) said there was no such reason.

AGE DISTRIBUTION:

Age	Frequency	Percent	Valid Percent	Commulative percent
5-15 Years	40	22	22	22.2
15-50 Years	85	47.2	47.2	69.4
50-70 Years	55	27.2	27.2	100
Total	180	100.0	100.0	

PRESENTED CASES:

Trauma	Frequency	Percent	Valid Percent	Commulative
Road traffic accident	130	72.2	72.2	72.2
Fall down	50	27.7	27.7	100
Total	180	100.0	100.0	

GENDER OF PATIENTS:

Gender	Frequency	Percent	Valid percent	Commulative
Female	65	36.1	36.1	36.1
Male	115	63.8	63.8	100
Total	180	100.0	100.0	

FACTORS INFLUENCING FOR QUACKS PREFERENCE:

Factors	Frequency	Percent	Vaild Percent
Educated	45/180	25	25
Myths believers	175/180	75.2	75.2
Affording	30/180	16.6	16.6
Surgery phobia	90/180	50	
Lack of medical facilities	20/180	11.1	11.1

MOTIVATIONAL FACTORS:

FACTORS	Frequency	Percent	Valid Percent	Commulative
Hear-say	165	91.6	91.6	91.6
Local marketing	5	2.7	2.7	94.4
Convinient	5	2.7	2.7	97.2
Cheap remedies	5	2.7	2.7	100
Total	180	100.0	100.0	

DISCUSSION:

Despite a large number of qualified orthopaedic surgeons and well-equipped hospitals in Pakistan at the moment, traditional bonesetters treat a large portion of our population. Instead of dreadful and life threatening complications, people still prefer bonesetters.³

In their study by Ola Olorun DA and his colleagues they found out that eighty-five percent of patients who presented with femoral fractures at an Orthopaedic hospital had been to traditional bonesetters prior to going to the hospitals.⁸

Traditional bonesetters are preferred by patients that they are more skillful for fracture treatment, readily and everywhere available and with their treatment fracture heal quickly than the Orthodox medical care.¹¹

The most important factor for preference of the traditional bonesetters was the beliefs of people. People feel better when treated by them than treated by orthodox medical personal. Studies also showed patients has the beliefs that their treatment is cheap to them.^{12,13}

This study shows that there is a large amount of patients who believes in myths towards quackery instead of specialised orthopaedic care. The considerable amount of myths believers is about 97.2% which is either influential by friends and family or low literacy rate among masses. This study is comparable to the study by **Khan I, Saeed M, Inam M, Arif M**, who pointed out that cultures and beliefs are possible influencing reasons for this alarming situation and also ignorance, third-party advice and over crowding of hospitals with trauma cases.³

The lower literacy rate and lower socio-economic status are also important factors which resist people to understand which is best for their health as most of them change their preference by hear-say from others.

CONCLUSION:

Quackery in orthopaedic care by traditional bonesetters is an ancient trade practiced in Pakistan as elsewhere in the developing countries, without government regulations and they lack guidance. Being an orthopaedic doctor in trauma centre hospital, Hafizabad its very alarming situation to observe the presented malpracticed cases by bonesetters. Many patients develop complications and loose their limbs due to inappropriate treatments. It is recommended that affordable and accessible hospital services should be provided to reduce bonesetters patronage. Despite all the complications associated with their treatment, majority of people still have a strong belief in their capability. Education of the public, bonesetters and the patients will go a long way in abolishing the preventable complications.

Quackery should be classed as crime. The perpetrators should be brought to justice and be held responsible for compensation to the losses incurred by quackery. The law enforcement agencies need to appreciate the gravity of quackery and its impact on people lives.

Health awareness programs and education by proper health care providers should be conducted on general public forums and educational centres to decrease this misery. Also by working on other factors like improving quality of life and educational status so that this malpractice can be eradicated.

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