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ASEAN CITATION INDEX (<http://aci.noip.in.th>)



ISSN 0857-4421 (Printed Version)

E-ISSN 2586-940X (Online Version)

Focus and Scope

The Journal of Health Research (J Health Res) is a peer-reviewed, open-access journal published by the College of Public Health Sciences, Chulalongkorn University, Bangkok, Thailand.

J Health Res is dedicated to publishing valid research from different areas of public health, such as determinants of illness, benefits of health-related interventions, quality of life, health systems and services development, and environmental health. We especially welcome manuscripts focusing mainly, but not limited to, Asian themes. e.g., culture-based public health interventions, diseases that impose heavy burdens in populations, and traditional medicine. A valid and accepted scientific methodology must be applied.

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J HEALTH RES

ISSN 0857-4421 (Printed)

eISSN 2586-940X (Online)

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COMPLEMENTARY PRACTICES OF HERBALISTS IN THE KINGDOM OF BAHRAIN

Tariq A. Alalwan*, Qaher A. Mandeel, Abdul Ameer A. Al-Laith,
Jameel A. Alkhuzai

Department of Biology, College of Science, University of Bahrain, Sakhir Campus, P.O. Box 32038, Bahrain

ABSTRACT:

Background: The aim of the present study was to assess the general knowledge and practice of local herbalists regarding the use of medicinal plants for the treatment of various ailments.

Methods: The study utilized a pre-structured questionnaire to collect data. The sample consisted of 41 well-known, established and active herbalists in Bahrain.

Results: The majority of herbalists were male (95.1%) with a high school education. Almost half the respondents obtained their knowledge and training from parents and grandparents. The herbalists combine heritage, religious and cultural values in their profession. The majority (95.1%) of herbalists deal with manageable diseases despite the high confidence of patients in herbal medicine. The main ailments treated are diabetes, gastrointestinal problems, and hypertension.

Conclusions: Study findings indicate that most herbalists (95.1%) perceive their role to be one of providing complementary health care. The herbal profession in Bahrain needs to be preserved and developed based on a scientific methodology among the younger generations.

Keywords: Bahrain herbalists; Folk medicine; Medicinal plants

DOI: 10.14456/jhr.2017.60

Received: February 2017; Accepted: June 2017

INTRODUCTION

Plants have been used in traditional medicine since the origins of humanity by indigenous cultures for the treatment, control and management of many diseases [1]. The use of herbal remedies has dramatically increased worldwide during the past three decades. Simultaneously the need for ethno-botanical investigations has become ever more relevant for facilitating better and effective treatment. According to the World Health Organization (WHO), approximately 80% of the world's populations in developing countries depend on medicinal plants for their primary health care needs [2]. The widespread use of herbal medicine is mainly due to its cultural acceptability, availability and economic affordability.

The Kingdom of Bahrain is an archipelago composed of 33 islands located between Saudi Arabia

and Qatar in the southwestern Arabian Gulf with a total area of 710 km². Throughout history, Bahrain due to its strategic location in the region has been a vital transit route connecting the Arabian Peninsula with Mesopotamia, Persia and the Indian subcontinent. Despite its small geographic area, Bahrain has a comparatively rich cultural and ethnic diversity; and it is known for its plant diversity with about 323 plant species [3]. From these plants, approximately 25% have been used in folk medicine to treat various human ailments. In fact, Bahrain is known for a long time as a main distribution center for herbal medicine among neighboring countries in the Arab Gulf region. Traditional medicine in Bahrain is based on herbal remedies; and it is faith-based, governed by the Islamic principles of Sharia. It is widely practiced by the local Hawaj (Bahraini herbalist) in herbal remedy shops scattered throughout the country [4]. Historically, traditional herbalists have operated in close proximity and association with the community members to treat

* Correspondence to: Tariq A. Alalwan
E-mail: talalwan@uob.edu.bh

Cite this article as:

Alalwan TA, Mandeel QA, Al-Laith AA, Alkhuzai JA. Complementary practices of herbalists in the Kingdom of Bahrain. J Health Res. 2017; 31(6): 487-99. DOI: 10.14456/jhr.2017.60

VALIDATION OF THE THAI VERSION OF THE 14- ITEM ORAL HEALTH IMPACT PROFILE (THAI OHIP-14) AMONGST THE GENERAL THAI ADULT POPULATION IN A COMMUNITY SETTING

Orawan Nammontri

Department of Dental Public Health, Sirinhorn College of Public Health, Khon Kaen 40000, Thailand

ABSTRACT:

Background: Oral health related quality of life has been widely used to evaluate oral health outcomes over the past two decades. The Oral Health Impact Profile (OHIP) has been mostly used to measure the impact of oral disorders or problems regarding daily function and ability. However, the original 14- item short version has not been validated in Thailand.

Methods: The study was carried out to test the validity and reliability of the Thai version of the 14- Item Oral Health Impact Profile (Thai OHIP-14) evaluating oral health related quality of life in Thai adults in a community setting. This cross-sectional study was conducted in the samples of 685 adults with the mean age of 56.80 ± 11.65 years old who lived in KhonKaen province, Thailand. Data included demographic and oral clinical data. Oral health related quality of life (OHRQoL) was measured using the Thai-Oral Health Impact Profile (Thai OHIP-14). Overall quality of life and general oral health ratings were also obtained. Descriptive statistics and spearman rank correlation coefficients were used for data analyses.

Results: The reliability of the Thai OHIP-14 was excellent ($\alpha = 0.88$). Face, content, and construct validity of the questionnaires were examined and showed acceptable properties. The total scores of Thai OHIP-14 were associated with overall quality of life ($r_{\text{rho}} = 0.60$; $p < 0.001$) and general oral health rating ($r_{\text{rho}} = 0.47$; $p < 0.001$), supporting the criterion and construct validity.

Conclusion: The Thai version of 14- Item Oral Health Impact Profile (OHIP-14) has been successfully validated following the psychometric properties of the questionnaire. It offers a valid and reliable instrument for the measures of social impact of oral diseases or disorders on individuals in community settings.

Keywords: Oral Health Impact Profile; Oral health related quality of life; Reliability; Validity

DOI: 10.14456/jhr.2017.59

Received: Mar 2017; Accepted: May 2017

INTRODUCTION

Oral health related quality of life is an essential oral health outcome that has been increasingly used to evaluate the impact of oral health/disorders on functional status and daily life of individuals over the past two decades. Oral health related quality of life (OHRQoL) is defined as “the impact of oral disease and disorders on aspects of everyday life that a patients or person values, that are of sufficient

magnitude, in terms of frequency, severity or duration to affect their experience and perception of their life overall” [1]. It has been employed to supplement clinical indicators to evaluate oral health. Wilson and Cleary proposed the model that links clinical status and quality of life. The classifications consist of difference measures of health and are divided into five levels: biological and physiological variables, symptoms, functional status, general health perception and overall quality of life. Individual and environmental factors are considered to be the important factors that improve

* Correspondence to: Orawan Nammontri
E-mail: orawan@scphkk.ac.th

Cite this article as:

Nammontri O. Validation of the Thai version of the 14- item oral health impact profile (Thai OHIP-14) amongst the general Thai adult population in a community setting. J Health Res. 2017; 31(6): 481-6.
DOI: 10.14456/jhr.2017.59