

TIBB MEDICATION COMPARES FAVOURABLY WITH CONVENTIONAL IN HIV AND AIDS

Evaluation report: prepared by Dr Rashid Bhikha and Dr John Glynn on a Pilot Research Project undertaken by Unani-Tibb diploma student M.A. Thokan in 2004 titled: "Role of Unani-Tibb Protocol and medication in the Treatment of HIV and AIDS".

A study conducted at the Hillbrow Community Healthcare Centre in Johannesburg has shown that Unani-Tibb medication combined with lifestyle advice is effective in treating people living with HIV and Aids who previously responded poorly to conventional medication.

Many people living with Aids find conventional medication, either anti-retroviral drugs or the drugs used to treat opportunistic infections, difficult to tolerate long-term because of side effects. Others fail to continue therapy due to a perceived lack of clinical efficacy, or because of cost factors.

In this pilot study, a small number of patients, both male and female, with confirmed HIV and Aids who were responding poorly to conventional medication were allocated to treatment for a period of two to four months according to Unani-Tibb principles. These included a range of herbal medications with immune boosting, general stimulant and relaxant properties, supplemented by lifestyle advice regarding the so-called governing factors - specifically, improving the diet, and undertaking certain physical exercises and stress reduction techniques. The advice offered was tailored according to the patients' temperament, which was determined beforehand by a standard questionnaire.

The patients' haematological, liver function and biometric parameters were measured, and a quality of life assessment of personal well-being conducted before and after Unani-Tibb therapy.

A rise in the patients' CD4 levels (between 25 and 177 cells/ml.) was noted, indicating an improvement in immune function. In addition, there was an increase in body mass (varying from 1.5 to 2.1 kg), a reduction in the incidence of anaemia, and a decrease in the severity of oral thrush, a common opportunistic infection, suggesting a general improvement in well-being. The patients' quality of life assessment revealed a total preference for Unani-Tibb therapy, which was generally well accepted. No drop-outs due to Unani-Tibb therapy were reported.

The author concludes that the positive results obtained in this pilot study indicate the need for further investigations into the application of Unani-Tibb therapy to Aids patients, especially in the emerging, so-called Third World context, where the risk of contracting HIV infection remains high, and a situation of inadequate resources prevail.