

Research Article

# Perception of Patients with High Blood Pressure in Haitian Hospital Regarding Traditional Medicine

Donnet Ervilus\* 

Faculty of Humanities and Social Sciences, Franco-Haitian University of Cap-Haitian, Cap-Haitian, Haiti

## Abstract

In Haiti, high blood pressure (HBP) is a major public health problem. Many patients have uncontrolled blood pressure due to poor adherence to care, which in their case requires. In the North Department, particularly in the city of Cap-Haitian, this pathology continues to increase. The World Health Organization (WHO) recommends behavioral measures such as a healthy lifestyle, a balanced diet, and compliance with treatment in order to reduce this scourge. For sociocultural and economic reasons, some patients resort to traditional medicine/natural medicine. However, the effectiveness of the management of HBP by the latter remains to be proven. In the Haitian hospital environment, professionals are committed to a merciless fight to control this pathology. Irregular control of HBP, neglect, poverty, lack of psychological assistance both in hospital and at home favor the choice of traditional/natural medicine as a first resort to modify their blood pressure figure. The objective of this article is to understand the factors that influence the psychological care of hypertensive patients in the health zone of Cap-Haitian in order to improve psychological care. It also intends to review the prevalence of hypertensive patients using traditional medicine as a curative method to lower their HBP.

## Keywords

Psychological Care, High Blood Pressure, Traditional Medicine

## 1. Introduction

Over the years, we have been dismayed by the increase in the number of hypertensive patients seen for medical consultation. Some of them already had serious complications such as cardiovascular accidents (CVA), heart failure, kidney failure, to name a few. The Ministry of Public Health and Population (MSPP) in Haiti emphasizes that HBP is not only an individual challenge, but also a family affair and a global public health problem [11].

The World Health Organization (WHO) estimates that 1.13 billion people worldwide have high blood pressure. Two thirds of them live in low-income countries [12]. It is in this

context that our study was initiated, seeking to understand the impact of “psychological care of hypertensive patients in Haitian hospitals, mainly in the commune of Cap-Haitian and the perception of traditional/natural medicine as a first resort to lower their high blood pressure, an area often neglected in the medical world [4].

The psychological care of hypertensive patients in Haitian hospitals is an important subject, particularly with regard to the interaction between traditional/natural medicine and conventional medicine. The biological disruption of man by the disease is reflected in his relationships with his loved ones.

\*Corresponding author: [donnetervilus@ufch.org](mailto:donnetervilus@ufch.org) (Donnet Ervilus)

**Received:** 12 August 2024; **Accepted:** 6 September 2024; **Published:** 23 September 2024



It thus begins with health personal, the family circle, an aspect often neglected in medical practice [6].

In most Haitian communities, particularly in the commune of Cap-Haitien where access to hospitals and clinics is difficult, traditional/natural medicine remains the only option for the population [1]. This situation is identical to the reality in sub-Saharan Africa, which, according to the WHO, generally resorts to traditional medicine to deal with their health problems. However, this choice is made independently of their will. It is the consequence of the economic situation, poverty and the considerable costs of obtaining medicines [8].

Across the world, traditional/natural medicine is either the main mode of healthcare delivery or a complement to it. In some countries, traditional or non-conventional medicine is called complementary medicine. These are the words of Dr. Margaret Chan, Director-General (2007–2017) of the World Health Organization (WHO), who published a strategy for traditional medicine 2014–2023 in 2013. In India, for example, for more than 60% of the population, traditional medicine is the only available source of healthcare. In the United States, 40% of patients are regular users of traditional medicine. In Haiti, studies have already shown that traditional/natural medicine is the first resort for patients. In most regions, it is the only accessible one; the number of human resources available in this sector far exceeds that of doctors and nurses. This care is provided from birth. [5]

This work intends to address an original aspect of the psychological care of patients with high blood pressure in a hospital setting. Its originality stems from the fact that in Haiti, the psychological side is often neglected, whether at a purely medical or psychological level. It should be noted that the hypertensive patient, like any other, is an element in a system, always interacting with those around him. [9] This systemic approach will lead us to explore the roles, tensions and supports within the health system that play a determining role in the psychological care of hypertensive patients in a Haitian setting. [14]

In this research work, we try to answer the following question: What is the contribution of psychological care of hypertensive patients in a Haitian hospital setting? Its objective is to understand the importance of psychological care of hypertensive patients in a hospital setting in a Haitian context.

## 2. Methodology

To collect data on the “Psychological care of hypertensive patients in a Haitian hospital setting,” we chose the Justinien University Hospital, the second-largest university hospital center (CHU) of the Ministry of Public Health of the Republic of Haiti, located in Cap-Haitien, Haiti. It is a public institution comprising various specialties, with a notable presence 24 hours a day.

At this stage, the qualitative approach was chosen because of its relevance in collecting subjective data such as experi-

ences in psychological care. Observation and interview methods were chosen as the main tools. Semi-structured interviews are preferred because they allow for the collection of in-depth information without influencing the participants’ responses.

Two specific tools were used for this study: an observation grid and a semi-directive interview guide. The observation grid is formed around the objectives of the study to ensure systematic data collection. The interview guide is composed of three main parts designed to guide interviews with health personnel and the psychologist.

## 3. Results

This clinical study examines two cases of hypertensive patients in Haiti, revealing cultural, familial and socioeconomic challenges in the hospital setting. The cases present financial barriers, cultural, familial tensions and logistical difficulties, highlighting the importance of a holistic approach taking into account family dynamics in the psychological care of hypertensive patients in the Haitian hospital setting. We will present them in the following section.

## 4. Case Study

### 4.1. First Case

In terms of understanding, this first case presents Claudette’s general state on the emotional, vital, semiological and psychological levels which are the basic concepts of the research. To achieve this, these paragraphs below will take us to the complete scene.

Claudette resides in Petit-Anse, a section of the commune of Cap-Haitien, North. She presents symptoms such as chest pain, cramps in the upper limbs, muscle tension; fatigue; various pains (e.g.: stomach aches, headaches, insomnia); heart palpitations; irritability; depressive state and finally, high blood pressure (HTA).

When her blood pressure is measured, it rises to PA: 200/100 mmHg and a pulse of 109 min. Claudette admits to having had high blood pressure for over three years: “I have had high blood pressure for over three years, and this is following the tragic death of my husband and the kidnapping of a daughter in Port-au-Prince last year.” Fearing that it would get worse, her relatives decided to take her to the hospital immediately to avoid any complications. Despite the intense pain, she came alone, she explains to us that she has been to the hospital too often.

Claudette has regularly followed the medical prescriptions, but in vain. She explains that only her grandmother’s remedies (natural remedies, teas, herbal teas) can give her an improvement. In addition, she does not have the means to obtain medications that are very expensive. In addition, she sometimes feels unable to get up to take the medications and

she forgets at times. These situations make her sad, and sometimes she cries.

## 4.2. Second Case

Marie Lourde, aged 63, lives in Cit édu Peuple, a district of the commune of Cap-Haitian. She complains of chest pain, ringing in the oriels, dizziness, cramps in the upper limbs and headaches. When her blood pressure is taken, it rises to PA: 185/95 mmHg and a pulse of 100/min. After three days of hospitalization, the blood pressure figures fail to decrease with antihypertensive medication, she is now worried about her health. Marie Lourde asks the doctor if she can go home: The doctor asks the nurse to find Marie Lourde's file and take all her vital signs to assess whether all the conditions are met for her to return home. After the doctor has analyzed her file and his tests, he finds that the conditions are not met for her to leave. Marie Lourde sometimes accuses that pharmaceutical drugs are not good for lowering her blood pressure numbers, sometimes it is the doctors who are not up to their tasks. When her grandmother offers her a natural tea, her situation seems to improve. And her grandmother adds that this is what our great-grandparents and ancestors used to cure their sick.

The line nurse is aware of the situation and informs the attending physician that Marie-Lourde wants to leave the hospital to go home and continue treatment with traditional/natural medicine. Well informed of the decision, the attending physician opposes it, fearing that Marie-Lourde will not recover sufficiently to return home. Marie-Lourde becomes angry; she accuses the physician of wanting to keep her in the hospital against her will.

The nurse Anne, whom she spoke to, advises her to speak directly to the doctor, who is still present in the department. She meets the attending physician in the corridor and Marie-Lourde's son reiterates his fears about his mother's discharge.

Faced with these arguments, the attending physician agrees to reexamine the file to determine whether or not to grant discharge. The file is retrieved from the nurse, then the doctor and the two nurses discuss for a moment the pros and cons of discharge. Finally, the attending physician warns Marie Lourde that he prefers to keep her in the hospital for a few more days to be sure of her good recovery.

Considering that the physician should not impose or force Marie Lourde, outside of her will, to take a treatment that she believes does not work; the physician calls upon a clinical psychologist to evaluate, observe and test the patient. Because, adds the physician, after several work sessions with the patient, she is convinced that her treatment depends rather on the leaves, husks or anti-hypertension plants depending on what her case deserves.

Finally, the psychologist orders that the physician let her go in the hope of seeing her again in 15 days. At the end of this date; her blood pressure is more stable than before by drinking natural antihypertensive teas. The joy of seeing that her blood

pressure is completely under control increases her confidence in natural medicine.

## 5. Case Synthesis

These cases highlight the urgent need for a holistic approach in the management of hypertensive patients in Haitian hospitals, particularly in the city of Cap-Haitian, taking into account psychological dynamics. Claudette, faced with chest pain and financial constraints, reveals difficulties in regularly complying with medical prescriptions due to her isolation. Marie Lourde reveals family tensions impacting her care, with disagreements between them about her hospitalization.

These two situations reveal the complexity of interactions between healthcare staff and the patient, which influences the management of high blood pressure. Marie Lourde's family tensions highlight conflicts of opinion about hospital discharge. They illustrate the difficulties in accessing medications that can reduce blood pressure figures. By integrating traditional/natural medicines, comprehensive psychological care could improve the management of hypertension at Marie Lourde, thereby optimizing clinical outcomes and meeting the specific needs of the hypertensive population in this context.

## 6. Discussion

For a significant portion of the Haitian population, the occurrence of certain diseases, particularly with spectacular manifestations of high blood pressure, is attributed to supernatural etiologies, blamed on a known or unknown enemy. To better cope, most patients generally resort to self-medication, a belief inherent in the reality of this pathology, sometimes linked to limited access to healthcare facilities, is an important factor in the increase in mortality from high blood pressure in the northern department, spatially Cap-Haitian.

Alongside modern medicine, there is a very active traditional medicine/natural medicine. Also called "Medsin fèy" or "Medsin Ginen," it represents in 70% of cases the first recourse of the population in the event of a health problem. "Medsin Fey" is based on plants and is the subject of a knowledge transmission that is very often family-based; it is immediately accessible to the population through self-medication or intervention by the family circle. "Medsin Ginen" calls upon a person with a gift, for example, bone-setters or traditional midwives [13].

Data have highlighted the importance of traditional/natural home medicine to manage certain pathologies, and have highlighted the properties of the listed species. Possible complementarities between traditional medicine and conventional medicine have been considered for the management of certain pains. The absence of family support exposes the difficulties that patients may face when faced with serious health problems. This can lead to additional psychological

challenges, which affect the management of hypertension [2].

Regarding the management of hypertensive patients in Haitian hospitals, it is important to recognize the importance of traditional medicine in the local culture, while seeking ways to complement this approach with conventional medical practices to ensure comprehensive and effective care. Studies have shown that collective management of hypertensive patients by the family significantly improves therapeutic adherence [3]. The first case offers an opportunity for further exploration of the crucial role of psychological support in the psychological management of hypertensive patients in Haitian hospitals, particularly Cap-Haitien. Hypertension, a chronic condition requiring attentive management, requires a holistic approach where psychological support plays a central role, hence traditional/natural medicine is essential. It is important to note that scientific advances indicate that family relationships can significantly influence treatment choices and medication adherence of hypertensive patients [7]. Unfortunately, other sources do not provide specific information on the psychological care of hypertensive patients in Haitian hospitals.

## 7. Conclusion

Patients' understanding of their illness is clearly significantly influenced by their family interactions. It is therefore necessary to design targeted interventions and specific educational programs to raise patients' awareness of their health status. Given this observation, involving psychology in the Haitian healthcare system would build an asset aimed at correcting the system's shortcomings in a comprehensive and inclusive approach that would define and create the framework for strengthening the roles and responsible participation of everyone [15]. On the other hand, Haitian culture, with its traditions, cuisine, religious beliefs, and ancestral medical practices, exerts a significant influence on the treatment of individuals with high blood pressure in Haiti, particularly in the Cap-Haitien health zone.

In light of the main conclusions drawn from the data acquired through this research, it should be noted that traditional/natural medicine exerts a significant influence on the psychological care of hypertensive patients in Haitian hospitals [10]. It has greatly influenced medical practices, religious beliefs, music, cuisine, and traditions such as voodoo, and Haitian traditions and customs play an important role in daily life and can influence individuals' treatment choices. For example, traditional family medicine is often used for certain conditions, and medical practices are heavily influenced by local culture.

## Abbreviations

AVC	Cerebrovascular Accident
CHED	Ervilus Donnet Hospital Center

HTA	Hypertension (Arterial Hypertension)
MSPP	Ministry of Public Health and Population
PA	Blood Pressure
WHO	World Health Organization

## Author Contributions

Donnet Ervilus is the sole author. The author read and approved the final manuscript.

## Conflicts of Interest

The author declares no conflicts of interest.

## References

- [1] Atibila F, Ten Hoor G, Donkoh ET, Kok G. Challenges experienced by patients with hypertension in Ghana: A qualitative inquiry. *PLoS One*. 2021 May 6; 16(5): e0250355. <https://doi.org/10.1371/journal.pone.0250355>
- [2] Dalal JJ, Kerkar P, Guha S, Dasbiswas A, Sawhney JPS, Natarajan S, Maddury SR, Kumar AS, Chandra N, Suryaprakash G, Thomas JM, Juvale NI, Sathe S, Khan A, Bansal S, Kumar V, Reddi R. Therapeutic adherence in hypertension: Current evidence and expert opinion from India. *Indian Heart J*. 2021 Nov-Dec; 73(6): 667-673. <https://doi.org/10.1016/j.ihj.2021.09.003> Epub 2021 Sep 15.
- [3] Ervilus, D. (2024). Importance of the Family Environment in the Psychological Support of Hypertensive Patients. *World Journal of Public Health*, 9(2), 194-198. <https://doi.org/10.11648/j.wjph.20240902.19>
- [4] Gage AD, Leslie HH, Bitton A, Jerome JG, Thermidor R, Joseph JP, Kruk ME. Assessing the quality of primary care in Haiti. *Bull World Health Organ*. 2017 Mar 1; 95(3): 182-190. <https://doi.org/10.2471/BLT.16.179846> Epub 2017 Feb 8.
- [5] Golics CJ, Basra MK, Finlay AY, Salek S. The impact of disease on family members: a critical aspect of medical care. *J R Soc Med*. 2013 Oct; 106(10): 399-407. <https://doi.org/10.1177/0141076812472616> Epub 2013 May 10.
- [6] Hamrahian SM, Maarouf OH, Fülöp T. A Critical Review of Medication Adherence in Hypertension: Barriers and Facilitators Clinicians Should Consider. *Patient Prefer Adherence*. 2022 Oct 7; 16: 2749-2757. <https://doi.org/10.2147/PPA.S368784>
- [7] ALMA, In Haiti, access to health care has become a privilege. News and Press Release. 2024 Feb 8. <https://reliefweb.int/report/haiti/haiti-access-health-care-has-become-privilege>
- [8] UPE/MSPP, Humanitarian situation and health sector in Haiti. 2024 April. <https://www.mspp.gouv.ht/wp-content/uploads/Item-13.2-AOB-Situation-sanitaire-en-Haiti-english.pdf>

- [9] World Health Organization, Traditional medicine. 2023 August 9. <https://www.who.int/fr/news-room/questions-and-answers/item/traditional-medicine>
- [10] World Health Organization, Hypertension, 2023 March 16 <https://www.who.int/news-room/fact-sheets/detail/hypertension#:~:text=Hypertension%20in%20low%2D%20and%20middle%2Dincome%20countries&text=The%20number%20of%20adults%20with,risk%20factors%20in%20those%20populations>
- [11] James PB, Wardle J, Steel A., Adams J. Traditional, complementary and alternative medicine use in Sub-Saharan Africa: a systematic review. *BMJ Glob Health*. 2018 Oct 31; 3(5): e000895. <https://doi.org/10.1136/bmjgh-2018-000895>
- [12] Landry Balas, Louise, éditeur. *L'approche systématique en santé mentale* [The systemic approach in mental health] Presses de l'Université de Montréal, 2008, <https://doi.org/10.4000/books.pum.9876>
- [13] Sanon MA, Mohammed SA, McCullagh MC. Definition and management of hypertension among Haitian immigrants: a qualitative study. *J Health Care Poor Underserved*. 2014 Aug; 25(3): 1067-78. <https://doi.org/10.1353/hpu.2014.0147>
- [14] Yan LD, Dévieux JG, Pierre JL, Dade E, Sufra R, St Preux S, Tymejczyk O, Nash D, Metz M, Lee MH, Fitzgerald DW, Deschamps M, Pape JW, McNairy ML, Rouzier V. The relationship between perceived stress and support with blood pressure in urban Haiti: A cross-sectional analysis. *PLOS Glob Public Health*. 2022; 2(5): e0000263. <https://doi.org/10.1371/journal.pgph.0000263> Epub 2022 May 2.
- [15] Zubieta C, Lichtl A, Trautman K, Mentor S, Cagliero D, Mensa-Kwao A, Paige O, McCarthy S, Walmer DK, Kaiser BN. Perceived Feasibility, Acceptability, and Cultural Adaptation for a Mental Health Intervention in Rural Haiti. *Cult Med Psychiatry*. 2020 Mar; 44(1): 110-134. <https://doi.org/10.1007/s11013-019-09640-x>

## Research Fields

**Donnet Ervilus:** Medicine, Psychology, Naturopathy / Médecine Traditionnelle, Nutrition, Iridologie, Physiothérapies