

# Identifying Indigenous Health Technologies Used by Women in a Rural Community in Nigeria on the Cord Stumps of Newborns: A Decrease in Cord Infections and Neonatal Tetanus?

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## Abstract

About two-thirds of births in developing countries take place outside health facilities and almost half of the women are delivered by untrained traditional birth attendants (TBAs), family members or deliver on their own. A wide variety of traditional practices and beliefs are associated with care of the umbilical cord. This paper attempts to identify indigenous health technologies used by women in a rural community – Oregbeni - in Edo State, Nigeria on the cord stumps of newborns, to describe their preparations and applications and also to link these traditional practices with the relevant scientific information to determine the validity of such practices. It also tries to ascertain whether these practices have led to a decrease in cord infections and neonatal tetanus amongst newborns in the locality. About 300 women aged between 29 and 70 years of age of whom 280 (93.3%) had used traditional substances on the cord stumps of their newborns were used as respondents. These substances included white native chalk (calcium carbonate) with salt – 46.7%; leaves of *Bryophyllum pinnatum* – 66.7%; clean hot sand – 20%; leaves of *Occimum gratissimum* - 6.7%; expressed breast milk (colostrum) – 6.7% and palm oil with hen's feather – 6.7%. These substances were either applied directly on the cord stump – 73.3%; put on fire and water squeezed out from leaves before application – 60%; mixed with other substances (salt) and warmed in local pots – 53.4% and applied with hen's feather – 6.7%. The cord stumps fell within 3 – 4 days when these traditional substances were applied, while for those who used conventional (Western) methods it took between 7 – 14 days for the cord stumps to fall off. There were very many positive views on the use of these traditional substances in the treatment of cord stumps, to conventional methods. These included very effective – 86.7%; stump fell within 3 – 4 days of application of substance – 73.3%; quick relief – 73.3%. There are a wide variety of practices for cord care at birth and until the separation of the stump. Some are clearly harmful (use of sand and herbs and unclean tools) and should be eliminated or replaced with safer alternatives, others are beneficial (use of expressed breast milk and passing knives through the flame) and should be encouraged. Teaching traditional birth attendants (TBAs) and families about clean cord care and the risks of cord infections, neonatal tetanus and the provision of disposable delivery kits should be complemented by increased coverage of women of childbearing age with tetanus toxoid immunization. This study strongly recommends that the efficacy and safety of these medicinal plants be evaluated, and the correct dosage used established. Traditional practices are de facto sources of primary healthcare in Africa. Complementary work between traditional practice and modern science is essential for the progress of medical sciences.

**Key Words:** *Traditional practices, cord stumps newborns, infections, neonatal, tetanus, rural women, community, Nigeria*

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