Abstract

Introduction:

Self-medication for malaria is a common practice and is a problem of public health concern especially in areas of malaria endemicity. Its prevalence in Sub-Saharan Africa ranges from 16.8% to 44.2%. Bugesera district, which has the second most high prevalence rate of malaria, is not spared by this common practice.

Main Objective:

To investigate the prevalence of, and risk factors influencing self-medication for fevers assumed to be malaria in Bugesera district.

Methods:

A cross-sectional survey was conducted on 400 heads of households from different 40 villages of 10 sectors in Bugesera district, Rwanda. Data were analyzed using SPSS 20. The prevalence of self-medication for malaria was determined and analysis of factors influencing self-medication for malaria were performed.

Results:

The prevalence of self-medication practice for malaria fever among respondents was 29.5%. From the family members, the practice of self-medication was higher compared to the prevalence from participants where 59.5% of respondents reported that in their respective families, at least one family member had self-medicated for malaria fever. The knowledge of malaria symptoms in this study was excellent at 70%. The majority of participants (66%) had satisfactory knowledge on antimalarial drugs. Coartem was reported to be used by 139 participants (58.4%). Quinine use was reported by 4.2%. Paracetamol was used by 38 participants (15.9%) as the only treatment of malaria fever.

Fifty three times the herbs were mentioned as treatment of malaria either alone or combined with other drugs. Of the observed 76.5% participants who accepted to consult health workers, malaria tests were positive in 138 cases (45.1%). At logistic regression level of analysis the relationship between centers for self-medication with practice of self-medication for malaria was found to be significant (p value 0.032). Believing in malaria self-medication as being wrong (problems associated with malaria self-medication) also influenced the practice of self-medication

Conclusions:

We found a high prevalence of self-medication in this study. Risk factors influencing self medication for malaria were identified at bivariate analysis. The multivariate level of analysis found an influence of source of drugs and the believing of self-medication as wrong to influence significantly the practice of self/medication for malaria. The main recommendations are campaigns for rising awareness, adherence to community health insurance, regulation to rational use of antimalarial drugs and researches on pharmacological effects of herbs