

# The Use of Complementary and Alternative Medicine Therapy and Influencing Factors in Individuals with Diabetic Foot Ulcers: The Case of Turkey and Somalia

<sup>1</sup> Emine Sezgünsay, <sup>1</sup> Adile Savsar, <sup>2</sup> Kazım Kıratlı, <sup>1</sup> Filiz Ögce Aktaş, <sup>3</sup> Ahmed Mohamed Ali

<sup>1</sup> İzmir University of Economics Faculty of Health Sciences/Department of Nursing

<sup>2</sup> Katip Çelebi University Atatürk Training and Research Hospital Hatay Service Building Infection Clinic

<sup>3</sup> Mogadishu Somalia Turkey Recep Tayyip Erdoğan Training and Research Hospital, Department of Infectious Diseases and Clinical Microbiology, Mogadishu, Somalia

## Introduction

Diabetic foot ulcers (DFU) are a complication that is difficult to treat, costly, and can lead to significant morbidity.

Patients often turn to Complementary and Alternative Medicine (CAM) methods to control pain and accelerate wound healing.

Data on the use of CAM in DFU patients is limited; cultural and social factors influence this trend.

## Aim

To determine the use of CAM among DFU patients presenting to infectious disease clinics in Turkey and Somalia, the reasons for its use, and the factors influencing it.

**Keywords:** Complementary and alternative medicine, diabetic foot ulcers, wound care

## Methods

**Design:** Cross-sectional and descriptive study (September 2023 - June 2024).

**Sample:** A total of 124 patients in Turkey (n=55) and Somalia (n=69).

**Data collection:** A "Patient Information Form" prepared by reviewing the literature was used.

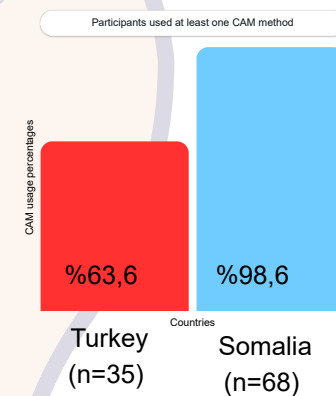
**Analysis:** Descriptive statistics, Pearson Chi-square test, Mann-Whitney U test and Yates' continuity correction were used.

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## Results

**Demographic differences:** Patients in Turkey were mostly primary school graduates (36.4%) and lived in city centers; while patients in Somalia were university graduates (20.3%) and predominantly lived in rural/district areas (p<0.05).

**Clinical differences:** Insulin use is widespread in Turkey, while oral antidiabetic drug use is more common in Somalia.



Turkey →  
Somalia →

**Primary reason for using CAM in both countries**  
Wound healing acceleration

## Most Commonly Used Methods

**Turkey:** Praying (25.5%)  
Vaseline (20%)  
Nutritional support (14.5%)



**Somalia:** Praying (94.2%)  
Nutritional support (68.1%)  
Acupuncture (8.7%)



## Local and Cultural Products

**Turkey:** St. John's wort oil, bleach, vaseline.



**Somalia:** Goat meat, camel milk, Diinsi tea, Dakar plant.



## Discussion

**High prevalence of use:** CAM use was high in both countries compared with rates reported in the general diabetic population in the literature. The markedly high prevalence observed in Somalia (98.6%) highlights the strong integration of cultural beliefs and traditional medicine into the treatment process.

**Cultural determinants:** In Turkey, herbal oils and chemical agents were commonly used, whereas patients in Somalia primarily relied on animal-based products and local medicinal plants. These differences reflect the influence of cultural and geographical factors on treatment preferences.

**Complementary role:** Most patients reported using CAM methods not as a replacement for medical treatment but as a complementary approach, primarily to accelerate wound healing and to provide spiritual support (e.g., prayer).

## Conclusions

Individuals with diabetic foot ulcers frequently use traditional and complementary therapies alongside medical treatment.

Differences between Somalia and Turkey highlight the need for culturally tailored care.

References

