



Letter to the Editor: TBS—A Call to Wake from an Orthopedic Nightmare (An Orthopedic Surgeons' Way Out)

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Abstract

Letter to the Editor.

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Letter to the Editor

Dear Editor,

Traditional bone setters (TBS) have been in practice for centuries in Africa, as they were the major point of call for fractures, dislocations and wide range of orthopedic conditions before the arrival of orthodox treatments. Unlike other orthodox care, the activities of TBS have stayed flourishing despite the presence of orthodox orthopedic treatment. It was noted that in Nigeria, about 85% of patients with fractures present to traditional bone setters first before presenting to the hospital, and traditional bone setters provide between 70% - 90% of fracture care [1]. Bone setting is available and accessible to both rural and urban patients and enjoys patronage from all levels of society: the poor, middle class and the rich, both the educated and the uneducated [2] [3]. Traditional bone setting practices have contributed immensely to a wide range of negative outcomes among patients that utilize them due to the routine occurrences of some daring complications, one of which is the eponymous traditional bone setters' gangrene (TBS-gangrene)

[4]-[7]. A study by Unuminya *et al.* on 100 lower limb amputations done over a 10-year period showed that 60 out of the 100 amputations were as a result of various complications of traditional bone setters [8]. Traditional bone setters' services for so long have been restricted to only non-operative procedures and techniques using pieces of cloth and straws, however recently some have delved into operative procedures using fabricated implants made from available metals obtained from mechanic shops and normal wood screws. These devastatingly risky adventures have led to various complications including destructions of bones, chronic osteomyelitis, sepsis and even death.

The orthopedic surgeons have been opened to a whole new dimension of traditional bone setters that are more daring in their resolve and destructive in their path.

Thus, now more than ever, is the need to bring a halt to this evolving disaster in order to salvage individual patients' limbs and life.

The utilization of media stations, both radio and television for awareness creation is very paramount, the orthopedic surgeons should create programs that will be aimed at enlightening people on the dangers of traditional bone setter practices. Such programs can also be open for people to ask questions and raise concerns and have those concerns handled.

Media has long been proven as a competent outlet for awareness creation [9] [10].

Secondly, social media has become a vital tool in awareness creation and rapid dissemination of information. Orthopedic surgeons should employ this tool for spreading vital information concerning harmful traditional bone setter practices and how to avoid them [11].

Thirdly, the orthopedic surgeons should also present these deleterious practices to the appropriate authorities and help create practicing laws and policies that will curtail the excesses of these bone setters and regulate their practices thereby saving patients from such harmful procedures and practices.

There should be advocacies for more orthopedic hospitals and trained personals to man them. This will reduce the waiting time for surgeries in these facilities and foster smooth handling of patients thereby discouraging them from seeking alternatives which might eventually lead them to the arms of traditional bone setters.

The orthopedic surgeons should also advocate for orthopedic procedures and implant fees to be reduced or incorporated for health insurances to cover for them. This will reduce the burden of payment for such procedures which is also a reason why some people patronize traditional bone setters.

Conflicts of Interest

The authors declare no conflicts of interest.

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