

LETTERS TO THE EDITOR

Subcutaneous Lipomata in Sokoto, Nigeria: A 4-Year Review

Lipomas have been variously described as “universal tumors” or “ubiquitous”.¹ They could occur virtually in every part of the human body where cells are found. These slow-growing benign tumors of fatty tissue have been described in all age groups. Mostly reported are those lipomas involving internal body organs and cavities, which usually present with variable clinical manifestations.^{2,3} Subcutaneous lipomas, on the other hand, are usually asymptomatic, being superficial. Their hospital presentation is mainly for cosmetic reasons. The diagnosis of this group of lesions is usually clinical. Histopathological studies are however important in order to identify the variants of this growth, as well as exclude other relevant differential diagnosis. Various modalities of therapy exist.^{4,5} The gold standard and commonest form of treatment remains total surgical excision. This brief communication was predicated on the need to draw attention once more to this group of common benign tumors, highlight their epidemiological and clinical peculiarities, as well as share an experience in their surgical management in our local environment.

This is a 4-year retrospective review of 52 patients with clinically diagnosed and histologically confirmed subcutaneous lipoma. Fifty-two patients were studied in whom there were 59 subcutaneous lipomas. Twenty-two patients were males and 30 females, aged between 2 and 65 years. The mean age was 39 years. However, the peak age at diagnosis was the 5th decade of life. In 47 (90.4%) individuals, the subcutaneous lipomas were single. It was multiple in the remainder. The highest number of these benign tumors, 32.2%, occurred in the upper limbs, while only 1 case (1.7%) was seen in the vulva (Table 1). Most (94.9%) were painless. All had complete excision for treatment. The commoner form of anaesthesia was local xylocaine infiltration (63.5%). The rest were removed under ketamine sedation. Twenty eight (53.8%) patients were treated on day-case basis. The commonest post operative complication was wound infection in 4 patients. No tumor recurrence or mortality was recorded in this series.

Table 1: Anatomical distribution of subcutaneous lipomas in Sokoto, Nigeria

Anatomical region	No. (%)
Upper limbs	19 (32.2)
Posterior trunk	15 (25.4)
Head and neck	10 (16.9)
Anterior trunk	6 (10.2)
Lower limbs	5 (8.5)
Buttocks	3 (5.1)
Vulva	1 (1.7)
Total	59 (100)

Subcutaneous lipomas represent a common group of benign soft-tissue tumors in our environment. The outcome of treatment is very favorable. With the recent interest in, and the added advantages of day-care surgeries, a greater majority of these tumors would be suitable for day-case treatment.

N. Mbah and U. Abubakar

Department of Surgery, Usmanu Danfodiyo
University Teaching Hospital, P. M. B. 2370. Sokoto,
Nigeria

E-mail: mbanonso@yahoo.co.uk

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Awareness, Beliefs and Practice of Traditional Medicine in a Nigerian Community in the 21st Century

Traditional medicine (TM) is a part of the tradition or culture of each country where it is practiced. Western or scientific medicine, actually developed from TM, for example, William Withering, a keen botanist in 1785 identified digitalis as the potent agent in foxglove.

In Nigeria, the practice of TM has been informal and the health care is controlled by Orthodox medicine. The authors through this study embarked on the scientific evaluation of TM in the 21st century, among Nigerians by assessing their awareness, beliefs and practice.

Agege Local Government Area of Lagos State was selected as study location. The study sample was randomly selected to cover males and females, young and old of ages 12 and above. Three hundred and twenty, well - structured, fixed-alternative, and self-administered questionnaire that investigated awareness, beliefs and practice of TM were randomly distributed among respondents. Comparisons between

groups were made using chi-squared test. Values of $p < 0.01$ were considered significant.

Out of the 320 copies of questionnaire distributed, only 300 could be retrieved. This rendered a

compliance rate of 93.8%. The mean and modal ages were 38.6 (S.D \pm 9.72) and 40.5 years respectively, while 163 (54.3%) were males. The result is summarized in table 1.

Table 1: Awareness, beliefs and practice of traditional medicine among 320 Agege residents

Question	Response	No. (%)
What is Traditional medicine?		
i. use of incantations, juju and spiritism to prevent and cure diseases	yes	36 (12.1)
ii. use of medical procedures outside western medicine and occultism	Yes	178 (59.2)
iii. combination of (i) and (ii) above	Yes	64 (21.4)
iv. use of herbs only	Yes	22 (7.3)
Do respondents regulate their intake of local medicaments?	Yes	204 (68.0)
	No	62 (20.7)
	No response	34 (11.3)
Do respondents always find TM effective when employed?	Yes	17 (5.7)
	No	249 (83.0)
	No response	34 (11.3)
Are they aware of the side effects of medicaments?	Yes	161 (53.7)
	No	105 (35.0)
	No response	34 (11.3)
Which of the two health care systems would they always prefer?	Western	292 (97.3)
	TM	8 (2.7)
Would they advocate a total replacement of western by TM?	Yes	25 (8.3)
	No	275 (91.7)

The study showed that several indigenes are not well informed about TM and the system is being employed by indigenes; mostly unaided or unguided by practitioners, therefore most users are ignorant of how to adequately employ TM for its optimal benefits, possibly because of the secrecy of practitioners. It was also observed that users are still very ignorant of the side-effects and contra-indication of the medicaments. This might have to do with the fact that it is more difficult to recognize adverse effects that develop over time e.g. hypokalaemia from anthraquinone laxatives¹ or those that are readily ascribed to an underlying disease e.g. hepatitis from the bile duct remedy celandine.² It must also be emphasized that herbs which are apparently safe under normal conditions may be more hazardous in specific patients under special circumstances e.g. during perioperative period³ or when combined with conventional drugs e.g. hyperforin, a potent P450 inducer found in the herbal medicine St. John's wort.⁴

There is a need to allay the fears of TM practitioners who feel threatened and insecure. The government should launch an awareness programme that will promote effective uses of local medicaments.

E. O. Agbaje and E. O. Babatunde

Department of Pharmacology, College of Medicine, University of Lagos, P. M. B. 12003, Idi- Araba, Lagos- Nigeria

E-mail: agbajegoriite@yahoo.com

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Improvisation in Lower Urinary Tract Endoscopy in a Nigerian Tertiary Hospital

Various forms of improvisation and innovations have been done in different aspects of surgery.^{1,2} Pare' improvised egg yolk to dress wound when hot oil ran out.¹ In developing countries, improvisation has made surgical practice possible in many hospitals including the teaching hospitals.³⁻⁵ Awojobi¹ in Oyo State, Nigeria use the gear system of a car to improvise for operation table and he also used the rear wheel of a