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### Introduction

- The term "herbal medicines" refers to all plant-derived products that contain either raw or processed compounds from one or more plants and are used to prevent or treat disease which excludes items that contain one or more nutritional elements such as vitamin, mineral, or amino acid in combination with herbal substances<sup>1</sup>.
- Herbal or traditional remedies are popular worldwide despite lacking scientific evidence and unknown safety profile.
- However, nationwide studies on herbal or traditional remedy uptake among those with chronic diseases is still lacking.

### Objective

- This study aims to investigate the prevalence of herbal or traditional remedy uptake among pre-elderly and elderly with chronic diseases.

### Methods

- This study used data from the National Health and Morbidity Survey (NHMS) 2018, a cross-sectional survey utilised a stratified cluster sampling design to ensure national representativeness of the population aged 50 years and above.
- 3900 respondents aged 50-59 years (pre-elderly) and 60 years and above (elderly) were assessed through face-to-face interviews for sociodemographic profiles and any history of chronic diseases.
- In this study, only respondents' data with at least one history of chronic disease either diabetes, hypertension, or hypercholesterolemia were extracted and analysed.
- A descriptive complex sample survey analysis was conducted including the Rao-Scott correction for the weighted chi-square test.
- A p-value of <0.05 was considered statistically significant for categorical data comparison.

### Results

- The overall prevalence of herbal or traditional remedy uptake among those who have at least one chronic disease was 21.8% (95% CI: 20.0, 23.8).
- Diabetic respondents (28.3%; 95% CI: 25.3, 32.0) had the highest uptake, surpassing hypertensive respondents (21.8%; 95% CI: 20.0, 24.1).
- By sociodemographic profile, the prevalence of herbal or traditional remedy uptake was significantly higher among rural respondents (p <0.028) and Malay ethnicity (p <0.001).
- The prevalence was highest among those who have all three diseases (p <0.001) compared to those with at least one disease or two diseases.

**Table 1:** Prevalence of herbs user based on sociodemographic characteristics among those with chronic disease.

Variables	Prevalence %	Lower CI %	Upper CI %	p-value
<b>Overall</b>	<b>21.8</b>	<b>20.0</b>	<b>23.8</b>	
<b>Age groups</b>				
50-59	22.2	19.2	25.5	
60 and above	21.6	19.2	24.1	0.757
<b>Strata</b>				
Urban	20.9	18.6	23.3	
rural	24.9	22.3	27.8	0.028
<b>Gender</b>				
Male	20.9	18.4	23.7	
Female	22.7	20.2	25.3	0.309
<b>Ethnicity</b>				
Malays	24.8	22.3	27.5	
Non-Malays	17.9	15.3	20.8	<0.001
<b>Marital status</b>				
Currently not married	22.5	19.4	26.0	
Currently married	21.6	19.5	23.9	0.641
<b>Level of education</b>				
Lower	22.1	19.6	25.0	
Higher	21.6	19.0	24.4	0.766
<b>Number of diseases</b>				
One disease	16.1	14.0	18.6	
Two diseases	23.4	20.5	26.6	
All three diseases	30.0	26.0	34.2	<0.001

### Discussion

- This study found that the prevalence of herb users was higher among Malay ethnicity however other study found that other races such as Chinese and other than major ethnicity had the highest prevalence of herb users.<sup>1,2</sup>
- Furthermore, these finding shows that those living in rural area has high usage of herbs because due to a lack of accessibility to health facilities.<sup>3</sup>
- A study by Aziz et al stated that those with health problems had a higher prevalence of herb users.<sup>1</sup>

### Conclusion

- Herbal or traditional remedy uptake is prevalent among pre-elderly and elderly with chronic diseases with some sociodemographic variation.
- Hence, the awareness of the safety profile and concurrent usage of herbal or traditional remedies should be clearly explained to the patients in order to achieve a good control status of the management of their chronic diseases.

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