

2015-05

An Assessment of the Effectiveness of Internal Audit Functions on Growth of Savings & Credit Cooperative Societies (SACCOS) IN Kenya: A case Study of SACCOS in Nairobi.

Adan, Ahmed Amin

Mount Kenya University

<http://erepository.mku.ac.ke/handle/123456789/4644>

Downloaded from Mount Kenya University, Institutional repository

**A STUDY OF THE OCCURRENCE AND MANAGEMENT OF
AMOEBIASIS BY USE OF HERBAL MEDICINE IN
KAMIRITHU HERBAL CLINIC, THIKA TOWN.**

BY:

Agufa Juliet Lihemo

BPH/09/03922

**A research project submitted to Mount Kenya university school of pharmacy
in partial fulfillment of the requirement for the award of the degree of
Bachelor in Pharmacy of Mount Kenya University.**

**School of Pharmacy
MOUNT KENYA UNIVERSITY.**

2013

ABSTRACT

Amoebiasis is a protozoa infection caused by a parasite called *E. histolytica*. It is caused by ingestion of infective cysts in food or water contaminated with sewage and mostly is due to improper personal hygiene. This research was on study of the occurrence and management of amoebiasis by use of herbal medicine in Kamirithu Herbal clinic. The objectives of the study were to determine the occurrence and management of amoebiasis by use of herbal Medicine in Kamirithu Herbal Clinic; to find out which age group and gender is mostly affected by amoebiasis; to determine factors contributing to the spread of amoebiasis. The research design used was retrospective and cross section, where questionnaires were used. The study area was in Kamirithu Herbal Clinic in Thika town whereby patients with amoebiasis were involved in the study and where simple random sampling was done and data related to the study objectives were incorporated in the questionnaires. Data was analyzed by use of Microsoft word and Excel then presented by use of bar graph, pie chart and tables. The study showed that female patients visited the herbal clinic in large numbers 58% compared to male patients who visited the clinic by 42% of total number of patients. The children below the age of 10 years were highly infected compared to other age group. Improper disposal of kitchen waste and drinking of untreated water contributed to spread of amoebiasis. It was shown that most patients who used herbal medicines were from villages compared to patients from town. People who had low standards of living due to unemployment or little earning, low education and illiterate were mostly infected with amoebiasis compared to those who had high earnings and educated. The actual herbs used in the management of amoebiasis included *Aloe vera*, *Azandirachta indica* and *colon special detoxifier*. It was recommended that further investigation should be carried out on these herbs to determine their efficacy, efficiency and their anti-amoebic activities should be determined. Proper documentation about herbal medicine should be done and dosing of medicine should be well defined. Toxicity testing should be done to determine safe oral dose.