



# Self-Medication In Children Under 5 With Fever In Cameroon

For Children's Good Health:  
Avoid Uncontrolled Consumption of Medicines

Data Brief



## Summary

Self-medication for fever in children under 5 is a widespread practice in Cameroon. The results of the Cameroon Malaria Indicator Survey (CMIS) showed that in 2022, nearly 65% of children suffering from fever received treatment without prior medical consultation. Several factors contribute to the use of self-medication in the event of fever in children under 5, notably the low purchasing power of the population, and easy access to street and pharmacy medicines without a prescription. To reduce recourse to this practice, we can improve access to healthcare by reducing the cost of consultations and medicines in pharmacies through the introduction of universal health coverage. We can also wage a relentless battle against the sale of street medicines or medicines without a prescription, by forcing pharmacies to sell medicines only on prescription, closing all outlets selling street medicines, and raising awareness and educating people about the risks of self-medication.

### According to the 2022 Cameroon Malaria Indicator Survey (CMIS):

- The drugs most frequently used for self medication are analgesics (84.7%)
- When it comes to patients' therapeutic itineraries, self-medication is the primary intention for medical recourse in the event of illness. It accounts for 51.9% of intentions to seek medical treatment, compared with 42.1% for biomedicine. However, recourse to healthcare, and biomedicine in particular, is the first medical recourse intention when the level of illness is deemed serious.
- Self-medication is slightly more common among men (53.9%) than women (50.4%).

## I. Introduction

Self-medication is defined as taking medication without having been prescribed by a doctor or nurse, and without having first sought advice from a doctor or nurse. It is an "act of consuming medication on one's own" without seeking medical advice (Fainzang, Sylvie, 2010; Lecomte, 1999). Laure (1998), Molina (1998) and Van der Gesst et al. (1996) view self-medication as the repetition of a previous prescription or the prescription of a drug based on the patient's preference or adherence.

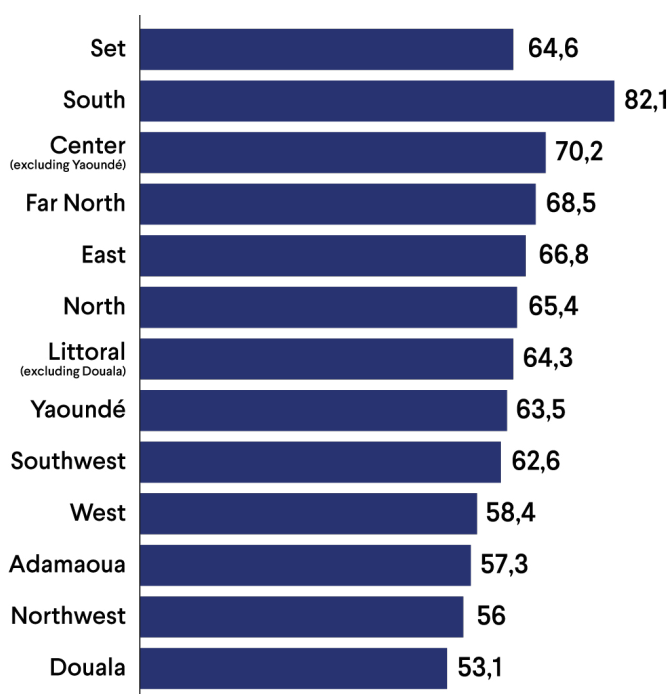
Children under the age of 5 generally take the medication under the influence of adults. In Cameroon, self-medication to treat fever, particularly common among children under 5, is widespread. It is more prevalent in regions with the highest reported fever rates during consultations, such as the North (44%), Far North (41%), Adamawa (37%), and South (36%), according to data from the Cameroon Malaria Indicator Survey (CMIS, 2022).. A significant proportion of parents surveyed (around 64.6%) admitted to using this practice. Furthermore, the 2022 EIPC showed that fever was one of the most common symptoms (71.4% of cases) for which self-medication was practiced, and nearly 65% of children with fever received treatment without prior medical consultation. Self-medication in Cameroon is therefore an obstacle to achieving the objectives of reducing the burden of the main causes of fever, such as malaria, which accounts for around 69% of fever cases in the country, according to INS data. Self-medication leads to delays in the diagnosis and appropriate treatment of malaria, increasing the risk of serious complications and even death. In addition to the health risks, self-medication also causes economic disruption in the health sector and perpetuates harmful social behaviors.

Several factors are fueling this trend among children under 5 in Cameroon. In remote areas, inaccessibility to health services restricts access to care and essential medicines. According to the EIPC 2022, one person in eight is more than half an hour away from the nearest health center (excluding socialization time).

In addition, the low purchasing power of families encourages self-medication in view of the high cost of formal medical care. Additional household expenditure is more likely to increase self-medication. The financial burden can be particularly hard to bear for low-income families. This situation thus exacerbates economic insecurity and poverty, and increases recourse to self-medication (Fainzang S.; 2010; Etame Loe & al., 2017; Mboni Heny & al.; 2023).

Socially and economically, self-medication perpetuates detrimental health norms within communities. Denis Raynaud (2008) has shown that self-medication depends on the demographic, economic, social and health status characteristics of individuals. As a result, increased reliance on over-the-counter medicines and distrust of healthcare professionals negatively affects the patient-physician relationship and quality of care. Level of education and cultural beliefs are also factors that favor self-medication to the detriment of medical follow-up. Additionally, the level of education significantly impacts self-medication, with heads of households with higher levels of education more likely to opt for the formal health system compared to those with secondary education. The above-mentioned factors hinder the official approach to seeking care by the authorities in charge of people's health.

Finally, in terms of health promotion, the lack of awareness of the importance of consulting a health professional for malaria treatment creates a vicious circle of self-medication. In 2022, only 40% of households in Cameroon had received adequate information on managing fever in children under 5.



**Figure 1 Percentage of children aged 6-59 months suffering from fever who were given medication or treatment without consulting a healthcare professional. (Source: ISN, EIPC 2022)**

## II. Existing Interventions

An examination of the existing interventions helps to identify the actions that have already been implemented to address the challenges associated with self-medication and to better understand the gaps that need to be addressed to strengthen access to quality care.

- **Awareness campaigns:** Organization of large-scale awareness campaigns to inform the population about the dangers of self-medication and the importance of consulting a healthcare professional. (July 2019 awareness campaign on the illicit sale of medicines)
- **Strengthening health infrastructures:** Investment in improving health infrastructures to ensure that the population has access to quality health services.
- **Training healthcare staff:** Setting up training programs for healthcare staff to enhance their skills in diagnosing and treating illnesses.



- **Regulating the sale of medicines:** Adoption of regulatory measures to control the sale of medicines and limit access to medicines without a prescription (Arrêté N°3827/MINSANTE du 05 Décembre 2018).
- **Promoting pharmacovigilance:** Encouraging pharmacovigilance to monitor adverse drug reactions and ensure safe use.
- **Collaboration with pharmacies:** Working with pharmacies to promote responsible dispensing and encourage pharmaceutical advice.
- **Communication campaigns:** Organization of regular communication campaigns through the media to raise awareness of the risks of self-medication and promote good health practices (CPN° D13-247/MINSANTE/CAB).

### III. Root Causes Of Self-Medication

Root causes of the high reliance on self-medication for malaria treatment in children under 5 may include:

- **Publicity and easy access to non-homologous treatments:** Consumers seeking medical treatment in Cameroon have a choice of four options: dispensing pharmacies, pro-pharmacies in health facilities, the parallel circuit of illicit outlets where the risk of obtaining an out-of-date or counterfeit product is high, and the traditional pharmacopoeia. Aggressive advertising for over-the-counter medicines and their easy availability in shops can encourage self-medication as a quick and convenient solution.
- **Low purchasing power:** Direct payment without cost-sharing (households) is the main method of financing healthcare in Cameroon, accounting for over 70% of total expenditure (MINSANTE, 2022). With nearly four out of ten of the population living below the poverty line, the cost of medical consultations and purchasing medicines can be prohibitive for many low-income families, prompting them to opt for self-medication as a more affordable solution.

- **Inaccessibility to healthcare services:** Populations living in remote areas or with poor access to healthcare infrastructures may have limited access to healthcare professionals and to the right drugs for treating malaria. Patients decide to treat themselves with what they have on hand.

### IV. What Strategic Options To Consider?

- **Option 1:** Regulating access to medicines will make it difficult for people to acquire them other than through the recommended/regulated channels. Closing illicit drug outlets and requiring pharmacies to dispense drugs only on presentation of a prescription from a doctor or nurse will influence the choices made by those who need access to the drug.
- **Option 2:** The continuous availability of essential medicines in pharmacies and the continuous and sufficient availability of care (availability of doctors, nurses, CHWs), will dispel concerns about meeting demand and reduce the propensity to want to treat oneself with what is at hand.
- **Option 3:** Reducing the cost of care (consultation, medication, etc.) will eliminate the financial barrier that sometimes justifies self-medication. Indeed, the belief that self-medication is cheaper than a consultation followed by a prescription will no longer be valid.

### V. Recommendations

1. **Eliminate unauthorized drug sales points:** Drastically reducing unauthorized drug sales outlets is essential to limit access to substandard and often dangerous pharmaceutical products that pose a significant public health risk.
2. **Strengthening regulations on drug advertising:** Implementing stricter regulations on pharmaceutical advertising is necessary to prevent the promotion of misleading, inappropriate, or non-compliant medications that may misguide the public.

**3. Raise awareness about the dangers of self-medication:** Conduct awareness campaigns, focusing particularly on disadvantaged groups and men, to educate them about the health risks associated with self-medication, such as medical complications and treatment failures.

**4. Reduce stock-outs of essential medicines:** Implementing stricter regulations on pharmaceutical advertising is necessary to prevent the promotion of misleading, inappropriate, or non-compliant medications that may misguide the public.

**5. Strengthen the implementation of Universal Health Coverage (UHC):** Support health facilities in effectively implementing UHC to provide equitable and affordable healthcare access. Sanctioning non-compliant facilities is also vital, as they may exacerbate patients' financial concerns, pushing them toward self-medication.

These coordinated actions will help mitigate the dangers of self-medication and promote reliance on formal, high-quality healthcare systems.

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