Harnessing the Potential of Indigenous African Plants in HIV Management: A Comprehensive Review Integrating Traditional Knowledge with Evidence-Based Medicine

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ABSTRACT

Besides the fact that Africa is the cradle of humanity, the continent has got numerous indigenous plants that are utilized in traditional medicine, especially in the containment and management of the spread of HIV. This study provides an in-depth discussion on plants phytochemicals and their nutrients in African Indigenous along with the possible disease mitigation for persons with HIV. Specifying evidence-based medicine, this review analyses the impediments and possibilities of paying traditional knowledge a tribute with contemporary healthcare. It also emphasizes the vitality of community involvement, knowledge exchange as well as the future research that aims to definitely advance the understanding of the validity and ability of the indigenous African plants in the fight against HIV/AIDS.

Keywords: Indigenous African plants, Phytochemicals, Nutrients, Traditional medicine, HIV/AIDS management

INTRODUCTION

Africa, the motherland of humankind, is best known not only for cultural diversity and unique landscapes but also for outstanding plant biodiversity [1-4]. It has got an assortment of local plants which are imbued with cultural, medicinal and nutritional significance to the Africans [6-8]. Centuries ago, these herbs stitched themselves into the traditional medicine systems and became indispensable parts of the healing practices that were inherited from generation to generation. In the field of management of HIV/AIDS, there is an increasing trend in the use of indigenous African plants as a complementary measure of the currently used antiretroviral therapy (ART) [10-15]. Investigation of African indigenous plants in the context of HIV/Aids treatment implies a complex research [14-15]. First, it encompasses the identification of the plethora of phytochemicals and nutrients that possess medical relevance, serving as the foundation of their medicinal properties [16-18]. Among these bioactive components from indigenous African plants are polyphenols with antioxidant properties, alkaloids with a broad range of pharmacological functions and other plant substances [19-25]. Also, the use of these plants in treating AIDS/HIV and related symptoms is based on the indigenous knowledge passed down through generations, which has the ability to clearly show the relationship between humans and their surrounding environment [26-28]. Although the fusion of traditional knowledge with empirical-based medicine becomes both challenging and promising [29-32]. However, the lack of scientific evidence regarding the safety and efficacy of remedies derived from African indigenous plants is the main hindrance to the recognition of traditional systems of medicine in modern healthcare settings [33-35]. Furthermore, it is important to be aware of any possible drug interactions between traditional drugs and modern ART regimes to guarantee safety of the patients. Despite this, the combination of traditional and evidence-based treatment can be a great way to further improve HIV/AIDS management strategies. The gap between traditional and modern healthcare practices can be bridged through the creation of collaborative partnerships between traditional healers, scientists, healthcare providers, and the community. The validation of the effectiveness and safety of indigenous African plants...
in HIV/AIDS care through community outreach, knowledge sharing, and research projects is a necessary step towards achieving this goal. In this comprehensive review, we will focus on discussing the phytochemistry of indigenous African plants, their traditional uses in HIV/AIDS management, the challenges and opportunities of integrating traditional knowledge with evidence-based medicine and future research priorities in improving our understanding of the use of indigenous African plants in the treatment of HIV/AIDS [48-51]. By carrying out this exploration, we intend to take a part in the discourse around the capability of indigenous African plants in achieving better health outcomes for the people that are living with HIV/AIDS.

**METHODOLOGY**

Different reputable databases like PubMed/MEDLINE, Embase, Web of Science, Scopus, and the Cochrane Library were utilized in writing this paper considering Indigenous African plants, Phytochemicals, Nutrients, Traditional medicine, HIV/AIDS management as keywords for the literature searches.

**Indigenous African Plants**

Apart from being the birthplace of mankind, Africa is a continent that is mostly celebrated for its diverse cultures and landscapes including rich biodiversity mostly in its flora. It is rich in indigenous plants like many others that have serious cultural and medicinal significance in different African communities [10-15]. In this excursion, we delve into the wide world of traditional African plants, discovering their many uses in everyday life, especially in the medical field. Africa’s plants exhibit an impressive diversity spread from the tallest trees to the tiniest wildflowers, each occupying a specific ecological niche. The continent contains a wide variety of ecosystems including the tropical rainforests, the savannahs, deserts, and the coastal regions that are rich in plant life. Baobabs, the iconic savannah trees, and the vibrant aloes of arid regions are just a few examples of the brand of African flora diversity and tenacity. For centuries, African ethnic groups have created a very intimate link with their natural environment, using the medical properties of native plants to cure different diseases and strengthen health. Traditional healers referred to as herbalists or medicine men/women are key to the transmission and preservation of the ancient knowledge from one generation to another. African heritage plants have made an important contribution to the traditional medicine systems throughout the continent by furnishing solutions for various diseases. From treating fevers and infections, to promoting fertility and making childbirth more comfortable, these plants are crucial in medicine for their therapeutic properties. Examples are rooibos (Aspalathus linearis) and future research priorities in improving our understanding of the use of indigenous African plants in the treatment of HIV/AIDS [48-51]. By carrying out this exploration, we intend to take a part in the discourse around the capability of indigenous African plants in achieving better health outcomes for the people that are living with HIV/AIDS.

**Phytochemicals and Nutrients in Indigenous African Plants**

Investigating the wide spectrum of phytochemicals and nutrients found in traditional African remedies offers a most interesting inside look on the health-giving properties of these natural resources. African biodiversity is diverse, containing thousands of plant types which have been used by several generations of indigenous people for medicinal, culinary and cultural purposes. Many of these plants are rich in phytochemicals, i.e. bioactive compounds that have been investigated for their probable positive effect

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Polyphenols have been found in various African indigenous plants and are known for the potent antioxidant properties they have which prevent the free radicals from damaging cells in the body. Selections include flavonoids (tea, citrus fruits, and berries), phenolic acids (fruits, vegetables, and whole grains), and lignans (seeds, whole grains, and legumes). Polyphenols have been linked to the prevention of chronic diseases, which include heart disease, cancer, and neurodegenerative diseases [1-4]. Alkaloids are nitrogen-containing compounds which are characterized by complex pharmacological actions. Most plants of indigenous African species contain alkaloids that have therapeutic properties. To put this into perspective, the alkaloids found in African herb Catharanthus roseus (Madagascar periwinkle) are actually used in the treatment of cancer and those alkaloids found in Scelletium tortuosum (Kanna), an African plant, have been traditionally used for their mood-enhancing effects [1-6]. Terpenoids (also referred to as terpenes) are a large category of different compounds that can be found in many plants belonging to indigenous African species. These substances have been researched for their anti-inflammatory, antimicrobial, and anticancer effects. For instance, artemisinin, a terpenoid compound from Artemisia annua plant (sweet wormwood) is used as a treatment of malaria.

HIV Management and Traditional Medicine

Since the beginning of the century, HIV management progress has been evident mainly by the emergence and widespread use of antiretroviral therapy (ART) [40-45]. ART has brought about a tremendous transformation in the treatment of HIV through effective counteraction of viral replication, viral load suppression and helping people with HIV live longer and happier lives [45-51]. Nevertheless, ART has proved to be effective; however, the challenges associated with attaining the best outcomes for every HIV patient include access, adherence, drug resistance, and side effects. Antiretroviral therapy (ART) is the basis of the HIV management strategy. It involves the employment of antiretroviral drugs combinations in order to suppress HIV replication, thus decreasing the viral load in the body and preserving immune function. Through the use of ART, HIV infection has evolved from a potentially fatal disease to a controllable chronic condition.

Key components of ART include

Generally Initial Therapy approach employs three or more drugs belonging to two or more drug classes. Common drug classes comprise nucleoside reverse transcriptase inhibitors (NRTIs), non-nucleoside reverse transcriptase inhibitors (NNRTIs), protease inhibitors (PIs), integrase strand transfer inhibitors (INSTIs) as well as entry inhibitors [30-35]. A critical component of the success of ART is strict compliance with ART. Skipping doses or missing on medications as directed can cause treatment failure, drug resistance, and disease progression [35-40]. Monitoring: Continuous measurement of the viral load and CD4 cell count is necessary to understand the treatment response and the course of the disease. ART suppression of viral loads to undetectable levels is the main objective [35]. The most common ART side effects include nausea, diarrhea, fatigue, and metabolic changes. The management of these side effects is essential to increase compliance as well as the quality of life [46]. Prevention: Besides treating HIV, ART also serves as the cornerstone for HIV prevention interventions like pre-exposure prophylaxis (PrEP) for high-risk individuals [46].

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Role of Traditional Medicine

Traditional medicine consists of techniques, practices, knowledge and beliefs pertaining to plant, animal and mineral-based medicine, spiritual therapies, manual techniques, and physical exercises, being applied either alone or in combination for the purpose of preserving health and aiding with diagnosis and treatment of illness. In some communities, alternative medicine works together with modern treatment methods like antiretroviral drugs which may cause them to be less effective or result in adverse effects. Healthcare providers should be conscious of possible interactions and monitor patients so as to avoid complications  

Potential roles of traditional medicine in HIV management include:

Symptom Management: Along with the conventional medicine nausea, weakness and pain can be treated with traditional medicine remedies [39]. Certain traditional treatments can strengthen immune system, therefore, a better health and response in HIV infected people [34]. Most traditional healing methods have the cultural and spiritual elements which helps to provide psychosocial support to individuals who are living with HIV, thereby resulting in improved well-being and coping mechanisms [35]. Traditional healers may be vital sources of health education and information in their communities; where it will be their responsibility to educate people on HIV prevention, treatment, and care. In certain circumstances, traditional medicine is found to improve HIV care and is used in addition to conventional treatments. Both are employed, and there is no conflict between them [37]. Traditional medicine can be very effective when it comes to managing the HIV infection. However, there are a number of factors that need to be taken into account: There are some classic remedies whose safety and efficiency have not been established scientifically and the usage of them may lead to risks if they are not evaluated and monitored carefully [32]. There can be interactions of herbal remedies with antiretroviral drugs which may cause them to be less effective or result in adverse effects. Healthcare providers should be conscious of possible interactions and monitor patients so as to avoid complications  

Efficacy of Indigenous African Plants in the Battle of HIV

HIV symptom management, immune boosting and general wellbeing improvement research in African indigenous plants makes the science very complex and it combines scientific studies with traditional knowledge [32-36]. Contrary to the widespread interest in this kind of plants, one should bear in mind that such entities should be tested through proper scientific studies and clinical trials. Numerous African indigenous plants have been assessed with regard to their possibility of positive impact in HIV management [34]. Nevertheless, it must be considered with due care and using scientific data. Some plants have proven to be helpful in the laboratory studies or in the small clinical trials, but it is necessary to carry out large, well-designed studies to confirm their effectiveness and safety. One type of indigenous African plant that has got a lot of attention for its contribution to HIV management is Sutherlandia frutescens, locally referred to as "cancer bush" or "kankerbos". It has been found that this plant contains active ingredients that act as immunomodulators and can therefore boost the immune system in HIV/AIDS patients. Nevertheless, more studies are required for a thorough understanding of its effects and proper dosage. Aloe vera (Aloe vera) is another plant that scientists have examined in the context of HIV/AIDS [36]. Aloe vera is not only African but is a preserved plant in many African traditional medicine systems. Some studies have investigated its immunomodulatory and antiviral effects, which could be extensive for HIV control. Nonetheless, there is a need for more research to confirm these findings and establish the best way of using Aloe vera in AIDS/HIV therapy. Besides that, African potato (Hypoxis hemerocallidea) is investigated for its possible immunomodulatory effects. Certain investigations show that extracts from African potato possess anti-inflammatory and immunomodulatory properties that could potentially be advantageous for
HIV/AIDS patients. Nonetheless, more investigation is needed to determine its safety and performance in such a situation. It is imperative for researchers to appreciate that traditional knowledge acts as a compass in the exploration of indigenous plants from the African continent. Traditional healers and communities have been using the medicinal plants in various health-related purposes, for example managing symptoms of HIV/AIDS [37]. Collaborative efforts amongst traditional healers, scientists, and healthcare providers can help fill in the gap between traditional knowledge and modern scientific research hence leading to the accurate understanding of the benefits and risks associated with the use of indigenous African plants in the management of HIV. Though indigenous plants of African region have been gaining popularity for managing HIV symptoms and providing immunity, more studies are required to support their effectiveness and safety. Inter-professional relationships among traditional healers and scientists are paramount to the development of the knowledge of the medicinal plants and their significance to the HIV/AIDS management.

**Bioactive Compounds from Indigenous African Plants**

The review of successful bioactive small molecules from African indigenous plants with potent antiviral, immunomodulatory, and anti-inflammatory activities relevant to management of HIV entails selecting those plants and their major compounds where prior scientific studies had shown success [36-38]. It needs to be emphasized that although some compounds have exhibited promising outcomes in a laboratory environment, the further laboratory research as well as clinical trials is needed to verify their efficacy and safety for management of HIV [38-39].

<table>
<thead>
<tr>
<th>S/N</th>
<th>PLANTS</th>
<th>BIOACTIVE COMPOUNDS</th>
<th>PROPERTIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aloe vera</td>
<td>Aloe emodin, aloin, polysaccharides</td>
<td>Antiviral (against HIV),</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>immunomodulatory, anti-inflammatory</td>
</tr>
<tr>
<td>2</td>
<td>Sutherlandia frutescens</td>
<td>L-canavanine, pinitol, GABA (gamma-aminobutyric acid), sutherlandiosides</td>
<td>Immunomodulatory, anti-inflammatory</td>
</tr>
<tr>
<td>3</td>
<td>Sceletium tortuosum</td>
<td>Mesembrine, mesembrenone, mesembrenol</td>
<td>Immunomodulatory, anti-inflammatory</td>
</tr>
<tr>
<td>4</td>
<td>Pelargonium sidoides</td>
<td>Umckalin, catechin, epicatechin</td>
<td>Immunomodulatory, anti-inflammatory</td>
</tr>
<tr>
<td>5</td>
<td>Artemisia afra</td>
<td>Artemisinin, flavonoids (e.g., casticin)</td>
<td>Antiviral (including HIV), immunomodulatory, anti-inflammatory</td>
</tr>
<tr>
<td>6</td>
<td>Harungana madagascariensis</td>
<td>Harunganol A, harunganol B, harungin</td>
<td>Antiviral, immunomodulatory, anti-inflammatory</td>
</tr>
<tr>
<td>7</td>
<td>Cissus quadrangularis</td>
<td>Resveratrol, ketosterones, triterpenoids</td>
<td>Immunomodulatory, anti-inflammatory</td>
</tr>
<tr>
<td>8</td>
<td>Vernonia amygdalina</td>
<td>Vernodalin, vernolepin, saponins</td>
<td>Immunomodulatory, anti-inflammatory</td>
</tr>
</tbody>
</table>

They have been researched for their antiviral activity against the virus, modulation of immune response or reduction of inflammation, all which are related to HIV infection [31]. Nonetheless, in-depth studies regarding their modes of action and applicability in HIV management are still required. It is important to take a balanced approach when it comes to herbal remedies, and advice should be sought from healthcare professionals, especially for people with HIV who wish to use complementary and alternative medicine [32].
Traditional African healing methods are of great cultural importance and have their core in the use of local herbs. These are practices which form a part of traditions that date many decades or centuries back, and have been handed down from generation to generation; these are central to the cultural and spiritual beliefs of many African communities. Traditional African medicines are mainly derived from the variety of indigenous plants that are believed to have healing properties capable of treating a wide range of diseases. There are many different plants that are used for various purposes, and their uses are often guarded, and orally transmitted within the community. Rituals and ceremonies play key roles in traditional healing rituals \[33\]. The rituals are not only meant to cure the physical illnesses but also the spiritual and mental well-being of the individuals. Likewise, in some cultures, the gathering of herbs, their preparation and consumption are accompanied by prayers and ceremonies to tap into the plant's healing power and connect with ancestors. Healing and illness are very deeply culture and spirit oriented \[40\]. Often, illness is thought of not only as a physical sickness but as a symptom of disturbed spirituality or social order. Traditional healers, which are usually referred to as medicine men or women, not only diagnose and treat diseases, but they also give spiritual support and counseling to their patients. Taking part of the community plays a vital role in the traditional healing techniques. The traditional healers are known and honored members of their communities who are frequently seen as the bridge between the material and spiritual worlds. Communities band together to assist these people who need healing not only practically and also spiritually. On the other hand, traditional healing techniques are very different from one culture to another in Africa and in different regions. As some practices gained wide recognition and were incorporated into mainstream health systems, others may be suspect or even suppressed because of the colonial influences and the rise of Western medicine \[39\]. Nowadays there is an increasing awareness of the value of traditional healing methods in relation to the holistic healthcare. Steps are being taken to integrate indigenous medicine into the national healthcare systems and encourage cooperation between traditional healers and medical doctors. Among other things, the role of indigenous plants in traditional medicine goes beyond their medicinal abilities. The relationship between these plants and the cultural identity, religious beliefs, and togetherness of African society is so strong that traditional healing is an essential part of the cultural heritage of the continent \[41\].

Obstacles and possibilities of integrating traditional medicine into standard HIV treatment

The incorporation of traditional medicine, especially from the local African plants, with conventional HIV treatment harbors both challenges and opportunities. Lack of Scientific Evidence: Traditional medicine lacks a strong scientific evidence in support of its safety and efficacy which is a hurdle to its integration into mainstream HIV management strategies. Hence, there is a necessity for a strong scientific research that validates the efficacy and safety of traditional medicines \[30\]. Limited Regulation and Standardization: Traditional medicine is usually lawless and uncontrolled occasioning variations in quality, effectiveness, and safety. The non-existence of regulation will definitely present a challenge in the integration of traditional medicine to the mainstream HIV treatment where standardized and regulated treatments are highly preferred \[32\]. Stigma and Skepticism: There is usually a stigma and prejudice surrounding traditional medicine, especially in a Western medical framework. This may become a barrier to its implementation as a standard HIV care approach \[45\]. Drug Interactions: Indigenous African plants could be a source of traditional medicines that may interact with the conventional treatments of HIV; such interactions may cause adverse effects or may reduce the effectiveness of the general regimen for the management of HIV can be a
cost cutting measure for patients and health facilities [48]. Holistic Approach to Healthcare: Conventional medicine is more likely to look at healthcare in a holistic way that encompasses not physical but also emotional, social and spiritual aspects of health. By integrating traditional medicine within modern HIV treatment, there will be an all-encompassing and holistic approach to patient care [49]. Biodiversity Conservation and Sustainable Practices: The integration of the traditional medicine drawn from indigenous African plants into the conventional HIV treatment approaches can maintain biodiversity and sustainability practices. The promotion of sustainable harvesting and cultivation of medicinal plants is therefore necessary so that human health can be enhanced and environmental conservation efforts can be supported as well. In spite of the fact that it is difficult to marry indigenous African plants which are the foundation of traditional medicine with the mainstream cancer management approaches, there are opportunities related to diverse therapeutic options, cultural relevance, cost-effectiveness, holistic healthcare approaches, and promoting biodiversity conservation. The problems should be addressed and the opportunities utilized for the traditional medicine to be safely integrated into the HIV treatment. Community involvement and exchange of knowledge to strengthen effective HIV management. Indigenous knowledge mobilization is a complex process that involves community engagement and knowledge sharing. Such partnerships between the healers, scientists and health care providers can serve the community through a holistic approach to healthcare that integrates both the traditional and the modern medical practices [51]. Understanding Indigenous Knowledge: Community-based strategies begin by recognizing and exploring the indigenous knowledge related to HIV management which are specific to the communities. This entails interacting with the traditional healers and the community leaders so as to get information about their practices, beliefs and experiences in dealing with health issues, such as HIV/AIDS [46]. Building Partnerships: Collaboration between the traditional healers, scientists and healthcare providers is a critical requirement. This can be made possible through discussions, workshops and joint projects that are designed to bridge the gap between the traditional and the modern healthcare systems. Mutual respect and understanding are keystones to the success of these partnerships. Mutual Learning and Exchange: Support cross learning and the exchange of ideas between traditional healers, scientists, and healthcare providers. This may include passing on information, expertise, and good practices relating to HIV management. The knowledge of traditional healers can be used for holistic treatment of health and wellness while scientists and healthcare providers can provide science-based interventions and therapy. Capacity Building: Provide community capacity building programs to equip traditional healers, scientists, and healthcare providers with requisite skills and knowledge in order to work effectively together. This may encompass training programs, workshops, and learning materials designed specifically to solve the problems each group may have [49]. Promoting Cultural Sensitivity: Cultural sensitivity and respect for different beliefs and practices should be at the core of community engagement and knowledge exchange processes. It implies creating secure and open spaces for interactions, where all participants are appreciated and respected. Advocacy and Policy Development: Promote policies and practices that respect the knowledge of the indigens in healthcare and encourage collaboration in HIV treatment. This could be in the form of collaborations with policymakers, healthcare institutions, and community organizations to advocate for appropriate and culturally acceptable healthcare policies. Monitoring and Evaluation: Continuously monitor and assess the community engagement and knowledge exchange initiatives for their impact and efficacy. This involves getting feedback from the community members, tracking significant indicators that will help in the management of the HIV and responding with needed strategies to ensure meaningful outcomes [45]. With the adoption of community-based ways of indigenous knowledge application, the development of partnerships and the promotion of mutual learning, the community can proactively manage HIV/AIDS and also protect and respect their culture.

Future Directions and Research Areas

The investigation of indigenous African plants for the management of HIV is one of the areas in which more studies are needed

Clinical Trials

It is necessary to conduct randomized controlled trials (RCTs) to prove the safety and effectiveness of specific indigenous African plants or traditional preparations in HIV management. Investigate the possible interactions between conventional ART and traditional herbal remedies to maintain safety and efficacy. Investigate the possibility of using indigenous plants as complementary therapies along with the standard ART regimens with a view of enhancing treatment outcomes and reducing side effects [44].

Phytochemical Analysis

Perform complex phytochemical analysis in order to identify and characterize bioactive compounds within
African plants that may have anti-HIV activity. Know how these bioactive substances act in stopping HIV replication and altering the immune response. Investigate synergistic interactions between phytochemicals from different plants or plant extracts for improved anti-HIV outcomes [35].

Ethnobotanical Studies
Collecting traditional knowledge and practices associated with treatment of HIV with indigenous African plants among different ethnic groups. Pinpoint contribution candidates from ethnobotanical studies and recommendations of traditional healers. Investigate the cultural meaning and rituals behind the medicinal plants application in HIV/AIDS support [36].

Community-Based Participatory Research
Engage communities, traditional healers, and other stakeholders in research design, implementation, and dissemination to ensure that culturally appropriate and community-based methods are used. Work hand-in-hand with the community organizations and other non-governmental entities (NGOs) to provide the platform through which indigenous plant-based interventions can be accessed by the people living with HIV. Engage in participatory research to ascertain the suitability, feasibility, and sustainability of the incorporation of indigenous plant-based therapies in the current health care systems [36].

Pharmacokinetic and Pharmacodynamic Studies
Study the pharmacokinetics of the bioactive compounds from the indigenous African plants to develop optimal dosing regimens in order to achieve therapeutic plasma levels. Evaluate the pharmacodynamic effects of herbal remedies on viral load, CD4 count, immune activation, and other related markers in people with HIV. Evaluate the long-term safety and effectiveness of autochthonous plant-based interventions through drug vigilance and post-marketing surveillance. Generally, the multi-disciplinary teamwork with researchers, medical practitioners, indigenous healers, community members, and policymakers is fundamental to the progress of research on indigenous African plants for the HIV management. The merger of scientific thoroughness with respect for traditional knowledge and cultural beliefs will enable us to discover fresh insights and therapeutic methods that will enhance the current HIV/AIDS treatment strategies [38].

CONCLUSION
The combination of indigenous plants from Africa in the management of the HIV pandemic shows promise to increase drug choices, maintain cultural relevance and optimize cost-effectiveness. Although scientific evidence is required besides drug interaction may arise, this integration of traditional way of life with health practices offers a whole approach. By promoting cooperative partnerships, preserving cultural particulars, and moving toward evidence based medicine, we are going to be able to fill the gap between traditional and evidence based medicine. Therefore, it is not only improving the tactics of HIV management but also making room for cultural preservation in Africa.

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