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Evaluations and scientific articles
concerning the worldwide work of anamed, 1.5.2015

1. Foreword and thanks: I apologize if I only mention a limited number of studies; the presentation of all studies would explode the scope of this article!

2. Queen Margaret University, England: Evaluation of anamed; Wilma Krützen has evaluated the work of anamed in Uganda in September 2007 (English, 63 pages, Master Thesis: “An evaluation of Anamed’s training on natural medicine in Uganda”). Recommendations on how to improve our work have been discussed and considered in further trainings. Citation: “Anamed helps African people to value what they know and to relearn what they knew before.” Page 31 (0)

3. anamed: evaluations of the starter kit: In summer 2011 we have sent questionnaires to all starter kit beneficiaries covering the period 1996 – 2009. 83 questionnaires have been returned:
   • Responsible of the programs were farmers (10), teachers (11), health staff (18), no indication (8).
   • The average period of the program was 5 years; the longest one was 12 years.
   • Most of the questionnaires came from Cameroon (24), Kenya (11) and Uganda (8).
   • Cultivation: no success (7%), limited success (7%), full success (81%), and no indication (5%).
   • At the moment of the survey 33,504 plants were being cultivated which corresponds to a surface of 3 ha.
   • All in all the 83 partners produced 31 tons of dry Artemisia leaves; enough to treat 88,500 malaria patients.
   • Treatment of malaria with Artemisia tea: 34,447 patients have been followed and 32,293 of them have been healed, this corresponds to a success rate of 94%.
   • In 6 projects in Kenya 140 children who are less than 5 years old have been treated with Artemisia tea. The success rate was 100%.
   • In Cameroon 123 HIV patients have been treated with Artemisia tea and for 100% of them an improvement of their situation has been achieved.
   • The question if Artemisia tea becomes less effective during long term treatments was answered as follows: “No” (52%), “Yes” (1%) and “No experience” (47%).

4. University of Dchang/Kamerun: In 2011 we received the dissertation: “Physical and chemical characterization of Artemisia annua” from Rosine Desirée. In her poster she explains that the 7-day treatment with Artemisia tea has the same success as the ACT treatment (Artesunate + Amodiaquin). Furthermore she writes that a treatment of only 3 days would be enough to make disappear all the clinical symptoms (fever, headache, muscle pains, shivering fits, nausea, loss of appetite, sweating) but that the treatment has to be maintained during 7 days. The results have been presented at the 5th Pan. African Malaria Conference in November 2009 in Nairobi with the following summary: “Based on the results, Artemisia tea is a good treatment against malaria. In order to ensure the impact, Artemisia tea has to be taken over a period of 7 days; otherwise it has to be combined with conventional medication”. (1)

5. Free University of Berlin: Caroline Meier zu Biesen has visited our anamed projects in Tanzania. Her dissertation “Transformation of medical knowledge: the introduction of the medicinal plant Artemisia annua in Tanzania” (431 pages) can be considered as an evaluation of our work. (2) Citation page 362, translated: “Anamed confess firmly to standards of natural science…. a social movement has started through anamed and the plant Artemisia; this provides a possibility to the people in becoming independent.

6. University of Oxford: Dr. Merlin Willcox has visited anamed groups in Kenya in November 2009 and wrote a report (3). Citation: “AA is a valuable alternative when Coartem is out of stock/patients cannot afford Coartem/inadequate doses of Coartem are being prescribed because of shortages/patients (especially adults) prefer to take tea rather than tablets”

7. Study of the health ministry of Uganda (Patrick Engeu, NCRI, Ministry of Health, Kampala) in 191 workers of the flower company Wagagai who have been using Artemisia tea: Citation: “Artemisia annua tea taken once a week is protective against malaria attacks…. One year Artemisia tea reduced malaria episodes by 36%….severe malaria cases were generally fewer in the Artemisia tea group…overall no serious adverse event was recorded…Artemisia tea is a very cheap way of preventing malaria.(4) The Brit. Journal of pharm. Research reported on it (5).

8. Leiden University, Holland: ”AIDS and Artemisia annua anamed”. Dr. Frank van der Kooy has analyzed for the first time anamed A3 samples. Main results are as follows:
• Stored correctly, A-3 tea has even after 10 years still a high content of artemisinin (i.e. A-3 from South Africa with 0,5% !)
• If the A-3 tea is correctly prepared, 95% of the artemisinin can be found in the tea.
• In vitro against AIDS A-3 tea was effective with IC-50 values even with only 2 microgram /ml, whereas pure artemisinin was still ineffective with 25 micrograms.
• Samples of anamed tea with different contents of artemisinin have been used. No correlation between the anti-HIV activity and the artemisinin content could be found !
• Artemisia afra, which contains no artemisinin at all, has an anti-HIV activity as well.
• About a quarter of the A-3 users in Kenya and Uganda take it for AIDS.
• A-3 is an example for "scientific natural medicine on the overtaking lane."
• Even with the highest concentration of A-3 tea, no cell toxic activity was measurable.
• Pure artemisinin has little effect on HIV, therefore the A-3 tea effect must be linked to other molecules.
• Citation: "We can describe the tea infusion...to be highly active". (6)

9. Institute Ganzimmun, Mainz (Dr. Sudowe in cooperation with Dr. Thomas Koch): Study on the improvement of immunity in tumor patients with A-3 (7)

10. Dr. med. F. Roelofsen:
   a.) Observation study on malaria prophylaxis with A-3 in orphanages.
   b.) Observation study on using A-3 with AIDS in India: after 6 months of A-3 treatment in AIDS patients the CD4 cells raised from an average of 396 to an average of 430, and no additional diseases appeared.


12. Julia Henry: Evaluation trip to anamed groups in Uganda on Sept/Oct 2011; citation translated: “I would like to summarize, that the spreading of the knowledge of natural medicine has found a fruitful basis in Uganda, even if there are still many knowledge deficiencies and an important need of training is needed.” (8)

13. Susanne Kathrin Hoff: “Research: Collaboration between traditional healers and the NGO anamed: How anamed builds upon and extends traditional healer’s knowledge of Natural Medicine” Johannes Gutenberg University Mainz, January 2012, 40 pages (9)

14. anamed: Evaluation of 120 questionnaires to the topic A-3 malaria prophylaxis
Updated: 1.7.2014. 120 questionnaires of people having spent some time in malaria regions have been evaluated. Those people stayed either up to 3 months (50 persons), or up to 6 months (9 persons) or between 6 months and several years (61 persons). 33 persons had proven or supposed malaria in spite of A-3 prophylaxis; during their whole stay 1 x (22 persons), 2 x (8 persons) or several times (3 persons). 87 persons had no malaria. Several times it is reported that their companions who took the chemical prophylaxis got malaria as well. To the question: “would you recommend the A-3 prophylaxis to people travelling in malaria regions?” 110 persons replied: 104 people answered with “yes” (95%), 6 with “no” (5%).

Anamed Bibliothek:
(0) (Hirt-CD nr. 39)
(1) (Hirt-Doku-ED-artemisiaveröf-PAN)
(2) (Hirt-Doku-ED-Malaria und A-3 Tee-Diss)
(3) (Hirt-Doku-ED-Malaria und A-3 Tee-Anamed trip report)
(4) (Hirt-Doku-ED-PP-feedback)
(5) (Hirt-Doku-ED-Malaria und A-3 Tee-Uganda)
(7) Vortrag am 22.9.12, Jahrestagung anamed international, Winnenden
(8) Heft, Hängeordner Ablage Uganda
(9) Email K.Hoff vom 21.5.2012, und Hängeordner Ablage Tansania
(Hirt-ED-Evaluation-Übersicht)