

**USE OF ETHNO-MEDICINAL PLANTS FOR TREATMENT OF
GYNAECOLOGICAL DISORDERS BY TRIBAL WOMEN****Jaya Singh¹, Rajeshwari Rana and Saurabh Gupta*²**¹Women's Studies & Research Centre, Rani Durgawati University Jabalpur (M.P.).²Biodiversity Conservation and Rural Biotechnology Centre, Jabalpur (M.P.).Article Received on
05 Feb 2016,Revised on 26 Feb 2016,
Accepted on 17 March 2016

DOI: 10.20959/wjpr20164-5940

Correspondence for*Author****Saurabh Gupta**Biodiversity Conservation
and Rural Biotechnology
Centre, Jabalpur (M.P.)**ABSTRACT**

Medicinal plant resources of forest origin are extensively used in India for various systems of medicine like Ayurveda, Unani, Homoeopathy, Allopathy, Siddha and Ethnic etc. The present paper enumerates the use of several medicinal plants from in the treatment of gynaecological disorders by the tribal women's of Jabalpur, Madhya Pradesh. Further studies were suggested to validate the claims and herbal drug development for treatment of such disorder.

KEYWORDS: Gynaecological disorder, medicinal plant, tribal women's, indigenous knowledge.

INTRODUCTION

India is one of the world's 12 mega diversity, centres having rich vegetation with 47,000 plant species and a wide variety of medicinal plant along with tradition of plant based knowledge distributed among the vast number of ethnic group (Islam and Masoodi, 2007). There are many medicinal important species which are used to produce various types of drug and medicines to treat many ailments in India since the time of the Rig Veda (approximately 2000 BC). India represents one of the great emporia of ethno-medicinal to wealth and has enormously diversified living ethnic group of rich biological resources (Pal, 2000). An appropriate dosage to prepare drug from different parts of plant body like root, stem, leaves, flowers, fruit, barks, seed, rhizomes, bulbs, tubers are prescribed as a remedy to treat different kind of diseases and disorders.

Medicinal plant resources of forest origin are extensively used in India for various systems of medicine like Ayurveda, Unani, Homoeopathy, Allopathy, Siddha and Ethnic etc. Such

traditional use of plants as medicine has not been documented properly, rather remain secret and passed from one generation to another through word of mouth. Naturally, due to non-recording properly, this traditional knowledge is gradually vanishing as a result of modernization. Ethno-medicine is the mother of all modern drugs and recently the importance of these traditional knowledge based medicines are being utilized throughout the world. People of modern age are gradually more dependent on herbal medicine. In ancient India, nearly all medicines were derived from biological resources. Even in modern India, as much as 67-70% medicines are derived from natural resources (Anon., 2001). Nearly 80% of the world's population depends on traditional medicines for primary health care, most of which involve plant extracts (Sandhya et al., 2006). In India almost 95% of the prescriptions are plant based in traditional systems of Unani, Ayurveda, Homoeopathy and Siddha (Satyavati et al., 1987).

India represents one of the great emporia of ethno-medicinal wealth and has enormously diversified living ethnic groups and rich biological resources. An appropriate dosage to prepare drug from different parts of plant body like root, stem, leaves, flowers, fruits, barks, seed, rhizomes, bulbs, tubers are prescribed as a remedy to treat different kinds of diseases and disorders. Agrawal(1983). Kaul (2010) the tribal's women prefer their indigenous traditional knowledge for cure of different ailments rather than use modern medicine, although their knowledge dosages are not always scientific. Although the tribal people traditionally use many ethno-medicinal plants to cure many gynaecological disorders, yet no such documentation has been done earlier. Keeping this in view, the present study has been planned with an aim to identify medicinal plant resources and traditional knowledge of tribal women of Jabalpur.

MATERIAL AND METHOD

The present paper is outcome of extensive field survey of different tribal villages of Jabalpur (M.P.) state to collect information on medicinal uses of different plant species for gynaecological disorders. During field work, interviews were conducted with local knowledgeable villagers. The gynaecological medicinal value of each plant was enumerated in the following patterns; local name, part used, method of administration, doses and botanical name.

RESULTS

The data on medicinal plants for treatment of various gynaecological disorders was collected from tribal women's of Jabalpur were analyzed. The enumeration and utilization of these are described in Table 1.

Table 1: Ethno-Medicinal Plants used to treat Gynaecological disorder

S.No	Botanical Name	Local name	Parts used	Method of preparation
1.	<i>Achyranthes aspera</i> L. (H)	Chir-chira	Root, leaf	2-3 ml of decoction of fresh leaves is given twice a day orally as cure to stop excessive haemorrhage during early pregnancy and post portal haemorrhage. 2-3 ml fresh root extract given orally twice a day as cure for post abortion abdominal pain. 3 ml fresh leaf decoction given orally for 7-15 days once or twice a day to cure amenorrhoea and dysmenorrhoea. Inflorescence paste used externally to induce abortion.
2.	<i>Annona squamosa</i> L. (T)	Sitafal	Dried root powder	In the morning 5 gm dried root powder in water is given to woman for 7 days in empty stomach for abortion up to 3-4 months regnancy.
3.	<i>Aloe barbadensis</i> Mill. (H)	Ghritakumari	Fleshy leaf	10 ml leaf juice mixed in water given to women in empty stomach for 10 days to treat uterine disorders, suppression of menses, facilitate abortion and act as a tonic after pregnancy.
4.	<i>Smilex zeylanica</i>	Ramdatoon	Root	A decoction is made with water and taken orally after completion of menstrual discharge.
5.	<i>Annona reticulate</i> L. (H)	Ramphal	Seed powder	A mixture of seed powder (3 gm) with Black pepper (<i>Piper nigrum</i> -3gm) in cow milk for 15 days continuously is used for spoiling pregnancy up to 3-4 months.
6.	<i>Hemidesmus indicus</i>	Anantmool	Root	Paste of fresh root is prepared and taken orally in morning and evening.
7.	<i>Azadirachta indica</i> A.Juss (T)	Neem	Stem, bark, fruit	Decoction of stem bark (2 spoonfuls) mixed with honey is given women continuously for 15 days after menstruation cycle as a contraceptive. Fruit dust or paste (1 teaspoonful) mixed with water applied to control menstrual cycle.
8.	<i>Butea monosperma</i>	Palas	Root and Bark	Half spoon of Powder of dried flower is mixed with Honey and taken orally.
9.	<i>Saraca asoca</i>	Ashoka	Bark	Powder of dried Ashoka bark, Kachnar

				(Bauhinia veriegata) bark and Rahiman bark in 1:1:1. One spoon powder is mixed with one glass gruel of rice is taken orally.
10.	<i>Dioscorea bulbifera</i> Linn. (C)	Ratalu	Tuber	Root paste used to treat birth control. 2 spoonful root paste mixed with cow milk and administered to both men and women early in the morning for continuous 15 days to increase sexual desires.
11.	<i>Emblica officinalis</i> Gaertn.	Amlaki	Fruit, seed	Fruit and seed dust (5 gm) mixed with honey administered for 7-10 days in empty stomach early in the morning to cure menorrhagia and gonorrhoea.
12.	<i>Peucedanum nagpurens</i>	Tejrai	Whole Plant	Powder of Tejrai, Bhojrai (seed), Tejpatra (leaf) and Mishri (recrystallised cane sugar) is prepared. One spoon of powder is taken with one cup milk at night.
13.	<i>Ficus bengalensis</i> L. (T)	Bat	Root, bark	1 tea spoonful paste mixed with honey is given once a day for 15 days to cure leucorrhoea and menorrhagia.
14.	<i>Hibiscus rosa sinensis</i> L. (S)	Gudhal	Stem, bark, flower	Paste of stem bark (15 ml) is given to women continuously for 7 days for abortion. Paste of flower bud (3 gm) with country liquor (2 ml) is given to women at 3 days of menstruation as a contraceptive. Paste of flowers (3 gm) along with cow milk cures menorrhagia, amenorrhoea, menstrual diseases and uterine discharges when given 15 days continuously early in the morning. It is also used as aphrodisiac.
15.	<i>Ficus hispida</i> L.f. (T)	Dumur	Fruit	Boiled green fruits are given to mother in the morning for continuous 21 days to stop abdominal pain before child birth.

The use of herbal medicines is wide spread in this region with higher percentage of the tribal as well as non tribal population relying on it. This is because of lack of awareness; shyness and lack of modern medical facilities available in their region and the high cost of medical system for treatment are unaffordable by tribal women's.

CONCLUSION

Ethno-medicine means the medical practices for the treatment of ethnic or aborigine people for their health care needs. Present study focuses on the utilization of plants available with the tribal women's of Jabalpur (M.P). They are using the traditional knowledge for the treatment of gynaecological disorders.

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