Int. J. Mendel, Vol. 30 (1-4), 71-77, 2013 ETHNOBOTANY ISSN 0970-9649

ETHNO-BOTANICAL PLANTS USED BY THE TRADITIONAL HEALERS OF BUXAR DISTRICT, BIHAR, INDIA

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Key words : Ethnobotany, Medicinal Plants, Buxar.

An ethnobotanical survey was undertaken to collect information from traditional healers on the use of medicinal plants in Buxar district of Bihar during June 2011 to December 2012. The plants, which were used by the local traditional healers for medicinal purpose, were collected through questionnaire and personal interviews during field survey.

In the present paper 51 plant species belonging to different families used in folk medicine have been documented. Due to poor condition of modern healthcare facilities and poverty, indigenous people of the district fully or partially depend on local medicinal plants. This survey showed that most people of Buxar district still depend on medicinal plants at least for the treatment of primary healthcare. The traditional healers are on the decline because the younger members of the tribe have started moving towards the towns and cities and not are willing to practice this form of medicine.

INTRODUCTION

Ethnobotany is the discipline that has so often given the lead to new medicines. It is a changing science and it is appropriate to consider where we are today. Traditionally ethnobotanists have direct relationship between the man and plants. Many drugs that are on the market have come to us from folk use and use of plants by indigenous cultures. These drugs are being used in some way in modem medicine, but not necessarily for the same purpose as they were used by the native cultures. Various definitions and concepts have been assigned to the word Ethnobotany, but it is now almost universally taken as the total direct relationship between humans and plants. This relationship is usually advantageous to both humans and plants, but there are relationship beneficial to only one or even harmful to one (Maheshwari, 1962; Jain 1965).

The first known written record of the use of herbs and herbal combinations for curing ailments in this part of the world is in the Rigveda, believed to have been written between 3500 to 1800 BC. The history of herbal drugs is too old. A more comprehensive account on the collection and use of plant based drugs in medicament and commerce is found in a later ancient Indian scripture called the Atharva Veda. The period between 1000 and 600 BC witnessed the publication of two important compendia on Indian Medicinal Plants. The first was Charak Samhita and the second, Sushruta Samhita. In about 400 BC the Unani system of medicine came to India. Its origin was in Greece and was largely herbal based. The Siddha system of medicine is believed to have originated directly from Lord Shiva, and passed on from him through his wife Parvati to a number of teachers. It is stated to have some recorded history from 2000 BC, during the Sangam period.

Many plants were common in these three systems, whereas the literature on Ayurveda, Unani-Tibb or the Siddha systems dealt with plants used only in their system.

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India has an old tradition of use of herbal medicines. Most of the drugs are obtained from plants collected in nature. The use of different parts of several medicinal plants to cure specific ailments has been in vogue from ancient times. However, our knowledge of medicinal plants has mostly been inherited traditionally. The traditional healers are dwindling in number and there is a grave danger of traditional knowledge disappearing soon since the younger generation is not interested to carry on this tradition (Tomar, 2008).

MATERIAL AND METHOD

Study Area

In 1992 Buxar became a seperate district of Bihar. The district occupies an area of 1624 km^2 and has a population of 1,403,462 (2001 census). It is located at a longitude of 83°98′ East and latitude is 25°58′ North. The Buxar district comprises two sub-divisions (Buxar and Dumraon) and 11 Blocks. Its literacy rate is 57.49%. It is a floristically very rich belt.

Data Collection and area of the study

The data were collected at Buxar during June 2011 and December 2012. Ten areas were selected for present study and these are Buxar, Dumraon, Rajpur, Nawanagar, Chausa, Chakki, Simri, Brahmpur, Itarhi and Chaugai.

Interview with traditional healers

Field research was conducted by collecting ethnobotanical plants information during interviews with 141 knowledgeable persons (101 women and 40 men) native of the District. During field trips informations were collected on the basis of personal interviews with traditional healers, village head, knowledgeable persons and old women of the society.

Plant Identification

Plants said to be useful in managing various diseases during the interviews were visually identified in the field by the respondents. Voucher specimens were collected in triplicate. Each specimen included vital parts such as leaves,

stem, flowers and fruits . The specimens were dried in the herbarium and then mounted on sheets. The collected plant specimens were identified with the help of taxonomic literature and floras (Duthie, 1903-1929; Hooker; 1872-1897). Voucher specimens were deposited in the Herbarium of Dept. of Botany, Patna University.

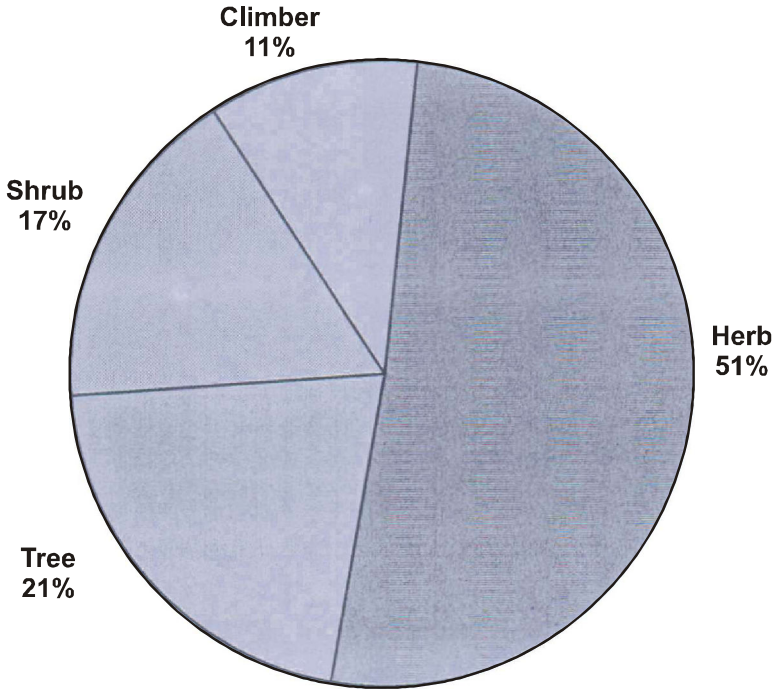

Fig.1 : Showing percentage habit of plants under text

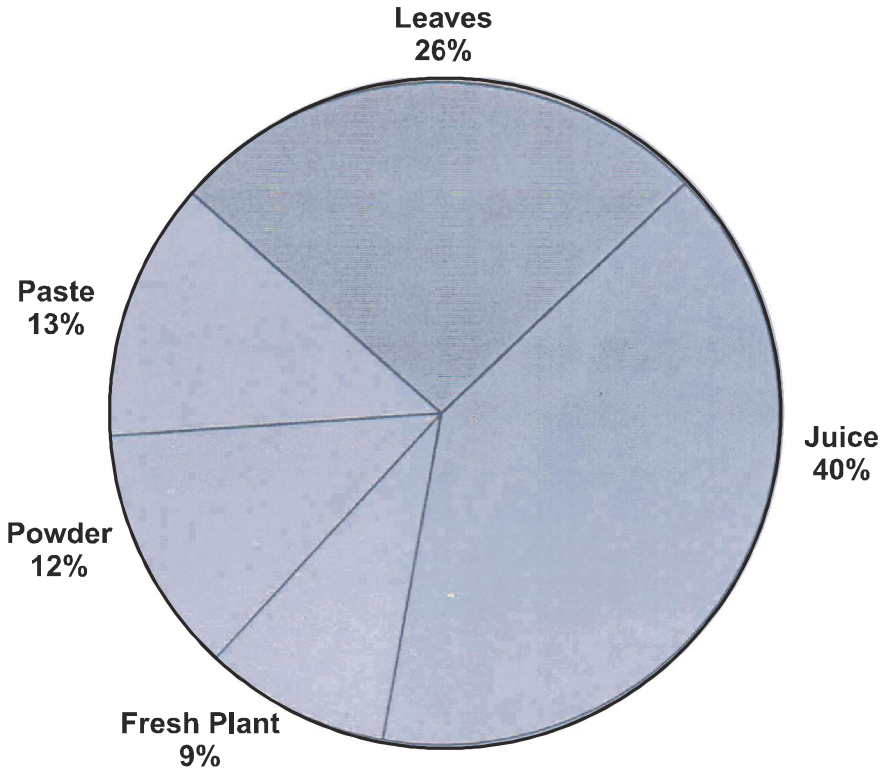

Fig.2 : Method of Preparation

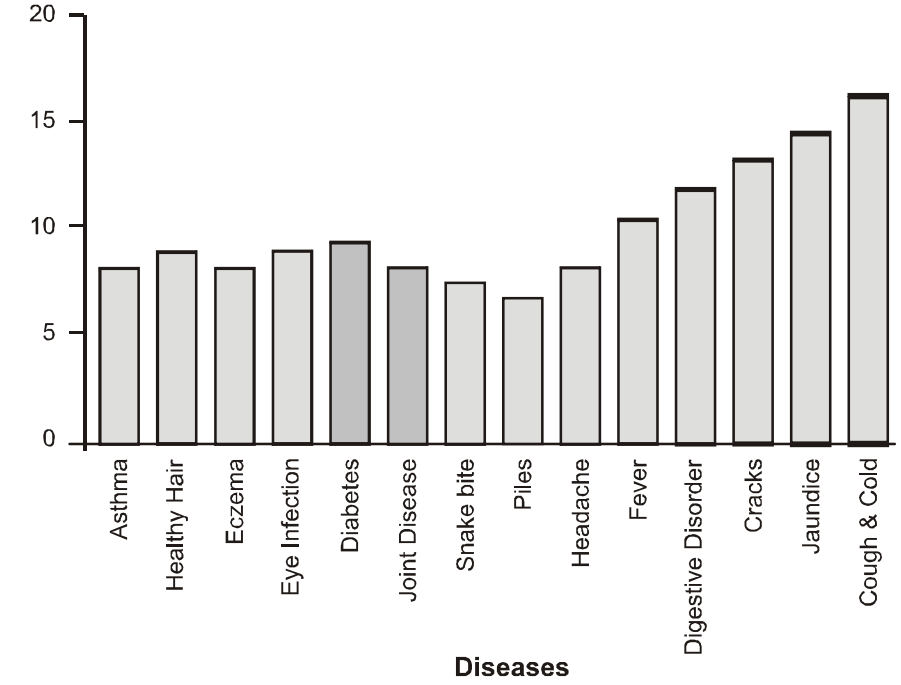

Fig. 3 : Number of remedies used by the Traditional healers for various ailments

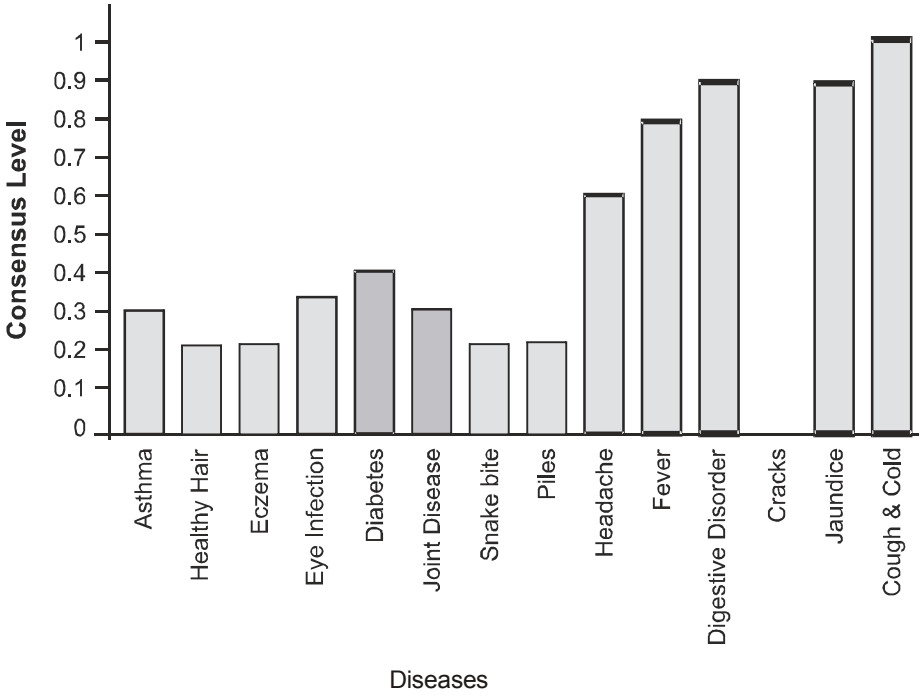

Fig. 4 : Treatment Scale

RESULTS AND DISCUSSION

The results have been presented in Table-1 and Figures 1-4. The present paper deals with 51 plant species of different genera belonging to different families. Different parts of plant particularly leaves, barks, inflorescence and fruits are taken into account for making drugs for the treatment of various ailments. The plants under present investigation were collected from different parts of Buxar district. During the course of the second author's Ph.D. work entitled "Ethno-Medico study of some Medicinal plants of Buxar District" all collected plants were furnished with medicinal uses. The habit of plants under present study are also given in Table-1. The histogram of remedies under indigenous medicine were also provided (Fig. 1-4).

India has a rich tradition of herbal medicines. From our survey it can be concluded that about 51 species represent the heritage of the folk medicine of Buxar, which has rich tradition of herbal medicine. The expectation of people from medicine has always been too high than what medicine can do. This study showed that may people in the studied parts of Buxar district still continue to depend on medicinal plants at least for the treatment of primary healthcare. Therefore, the relationship between both forms of medicine should be always of complementation and cooperation. Promotion of indigenous medicines will also help the people from whom the traditional knowledge was obtained. Hence it is necessary to document the indigenous knowledge of useful plants and their therapeutic use before they are lost for ever from the community (Tomar & Singh, 2005).

ACKNOWLEDGEMENT

The authors are grateful to Dr. M.P. Trivedi, Department of Botany, Patna University for his valuable discussions and suggestions and the local traditional healers in the Buxar district for sharing their knowledge on herbal medicine. This study would not have been completed without their cooperation.

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