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Documentation of ethnobotanical data in curing various ailments in Chikodi taluk, Karnataka

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SUMMARY

Ayurvedic medicine plays an important role in the rural areas in curing some of the common diseases. The current investigation carried out to collect the information from the medicinal practitioners and other people of Chikodi taluk, Belgaum district, Karnataka. WE-JO questionnaires were supplied to the selected area people and information was collected from them. Among the selected areas of Chikodi taluk gathered information was recorded and documented systematically. The people are in use of 125 plants belonging to 106 genera of 56 families. The plant parts are used in curing the various diseases. The use of medicines and preparation of the drugs are also different. All the practitioners administered medicinal plants internally or externally in the form of powders, pastes, churnas, thailurn, juices and decoctions which are discussed in this paper.

Key words : Medicine plant, Ayurveda, Churna, Diseases, Medicinal practitioners.

Dates back to (1200 AD) Charaka Samhita and Sushruta Samhita showed the importance of Ayurveda in India. The knowledge of Ayurveda treasure is being transformed from one generation to the another generation orally. During this transformation some of the information may be diluted since, there is no systematic scientific documentation of this traditional knowledge in the Ayurveda medicine. Nature has provided a number of natural solutions in solving all the problems in all the fields. Among them wild flora play a major role in human welfare *i.e.*, preparation of the Ayurvedic medicines in curing the common diseases in the rural and tribal community.

Globally about 85% of traditional medicines used for primary health care are derived from plants. The majority of medicinal plants are higher flowering plants representing about 158 families. India is tenth among the plant rich countries of the world and fourth among the Asian countries.

MATERIALS AND METHODS

The Chikodi taluk lies between latitude 16°26' and 17°03 'and longitude 74°35' and 75°92'. Height from sea level is 609.60mtrs. The rain fall varies from year to year. Some ethno medicinal research work from various parts of the country has been reported (Kirtikar and Basu, 1995). Documentation of people's knowledge and perceptions about biodiversity and conservation through People's Biodiversity Register in various taluks of Karnataka have been done.

The surveys of folk medicinal practice of medicinal plants were carried out by selecting four important areas

during June 2006-2007. Study area are Sadalaga, Bedakihal and Malikawad villages in east region; Kerur and Nandikurali villages in west region; Kabbur, Nagaramunnoli and Umarani villages in south region; Soundatti and Manjari villages in north region. The overall interviews were held in villages and information was documented according to the WHO questionnaire model. This included all information's like, plants which are used for different ailments and their parts used, methods of drug preparation, application and time. Seventy-five questionnaires were supplied to people in the evening to fill up and they were collected on the next day. Discussions were made with them about the preparation of drugs in curing the diseases. Later, the collected plant species were identified in B.K College, Chikodi and Department of Applied Botany, Kuvempu University by referring the "Flora of Bombay" and "Flora of Madras".

RESULTS AND DISCUSSION

The people depend of some villages totally on herbal medicines of the surroundings, as there are no health clinics in the villages. The Chikodi taluk people use nearly about 125 plant species of 56 families as folk medicines, among them the plants of Amarantaceae, Apiaceae, Arecaceae, Liliaceae, Mimoceae and Myrtaceae are highly used. The plants like *Murraya koenigii* Spr., *Mesua ferrea* L., *Santalum album* L., are used in curing many diseases in different places.

The study revealed that only the eldest son of the family is eligible to receive the Ayurveda information by his father at last stage. During the study, out of 75 people only 52 people co-operate for our work and provided

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