

Ethno-gynecological practices among tribes of Bhiloda Taluka, Aravalli, (Gujarat), India

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Abstract

Ethnomedicine concerns with indigenous practices of curing various diseases. Medicinal plants have been utilized for hundreds of years to treat illnesses and epidemics as well as for human well beings. The information of plants healing properties has been transmitted through human to human in ethnic groups for decades including gynecological troubles. Among various disciplines of ethnobotany, ethnogynecology is an emerging new branch that offers promising role for the treatment of various gynecological ailments such as menstrual troubles, menorrhagia, oligomenorrhoea, leucorrhoea, amenorrhoea, infertility, birth control, abortion, postdelivery pain. So, to document such plants with medicinal values and properties, survey by field visits and interviews with local ethnic healers have been conducted. The survey shows that people still relays on plant base medicines. India has a rich traditional system of medicine. Awareness of herbal medicines increasing and becoming more popular. India is very rich in Medicinal plant flora. More than 1315 medicinal plant species are reported from Gujarat alone¹⁰.

Key words : Ethnomedicinal, Ethnogynecological, Tribals, Dungari garasiya tribes, Bhiloda, Aravalli.

Ethnobotany can be studied only where there tribals living their traditional life in the forests. The “Aravalli Hill Ranges”, which passing through the northern fringes of Gujarat state mainly covers Banaskantha, Sabarkantha, and Aravalli districts. The area under study *i.e.*, Bhiloda is in Aravalli district as a part of Aravalli ranges. The study area of Bhiloda Range is situated in the north-eastern part of Gujarat State between 23° 03' -24° 37'

N latitudes, and 72° 15' -73° 39' E longitude, and it is one of the dense forests of the Gujarat state. The forest is mainly of Dry Mixed Deciduous type with rich floristic diversity. The predominant scheduled tribe in the area is Dungari garasiya tribe. In the most of the tribal villages, there are usually one/two local practitioners of the folk medicine, known as a ‘Bhagat’ and Bhuva. They have acquired the knowledge from their Gurus or elders of the family.

Study Area :

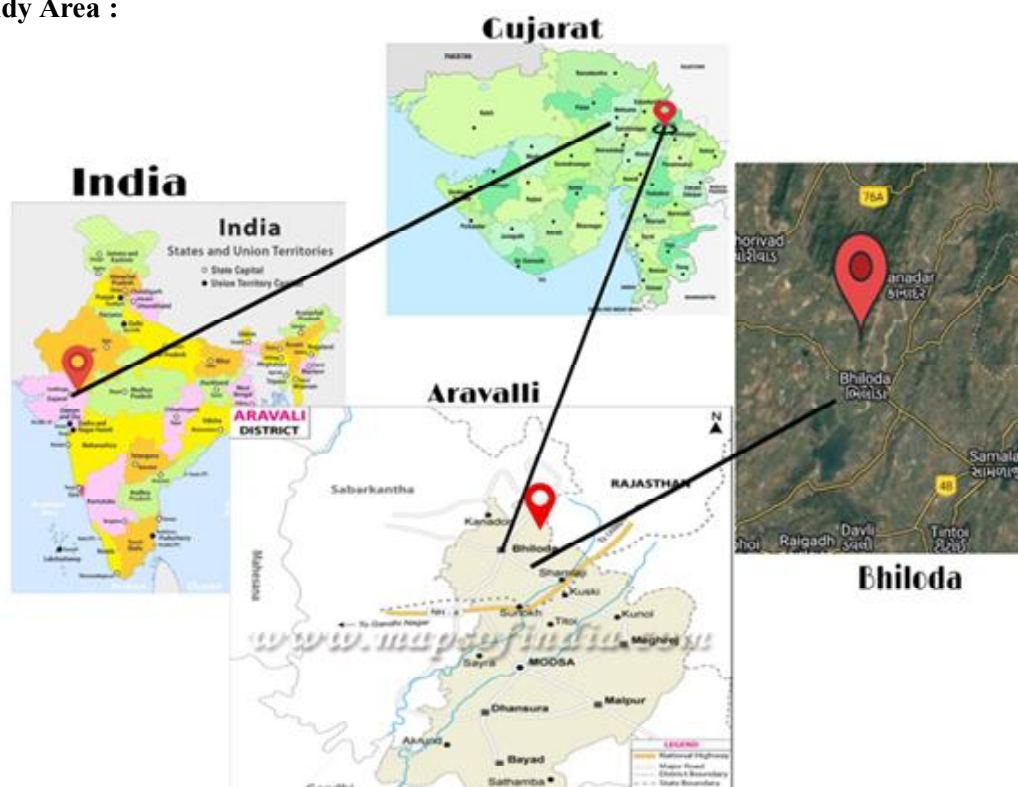


Fig.1 — Location map of study area

Extensive field trips were organized in different villages of Bhiloda Taluka, Aravalli District during 2020 to 2021 to collect indigenous knowledge of medicinal plants. The ethno-gynecological information was gathered through interviews and discussion with experienced local informants 'Vaidya', 'Bhagat', 'Bhuva' and elderly villagers of the area. Data were recorded on the plants part used, local name(s), process of preparation and mode of administration and dosage. Before starting the field work, information about medicine men were gathered through the help of local references. Information collected during field work, were compared among different informants and with the available literature. The data

considered worth mentioning only when at least 2 to 3 local healers gave similar answers for the same plant. Information regarding the herbal knowledge was collected through discussions using a semi structured questionnaire. The collected plant specimens were identified and arranged according to Bentham and Hooker's system of angiosperm classification using 'Flora of Gujarat State'¹¹.

Indigenous medicinal uses in India were recorded by Kirtikar and Basu (1995), the uses of ethnomedicinal by Jain (1991)³ and those in North Gujarat by Bhatt and Sabnis (1987) and Punjani (1997, 2006)⁹.

Enumeration : Enumeration of plant species is arranged Alphabetically.

Table Table showing number of plants and its cure for various diseases.

Sr no	Plant name	Family	Local name	Plant part	Disease cured
1	<i>Abelmoschus manihot</i> (L.) Medik	Malvaceae	Jangli bhindo	Root	Leucorrhea
2	<i>Annona squamosa</i> L.	Annonaceae	Sitafali	Leaves	After delivery pain
3	<i>Asparagus racemosus</i> Willd.	Liliaceae	Shatavari	Root	Leucorrhea
4	<i>Azanza lampus</i> (Cav.) Alef	Malvaceae	Jangli kapas	Root	Womb waste
5	<i>Boerhavia diffusa</i> L.	Nyctaginaceae	Bhoykhatadi	Root	Tetanus
6	<i>Bombax ceiba</i> L.	Bombacaceae	Shimlo	Stem bark	Leucorrhea
7	<i>Caesalpinia crista</i> L.	Caesalpiniaceae	Kargesh	Leaves	Leucorrhea
8	<i>Carissa congesta</i> Wight	Apocynaceae	Karamdi	Root	Leucorrhea
9	<i>Carica papaya</i> L.	Caricaceae	Kakadi (papaya)	Fruit	Oligomenorrhea
10	<i>Cassia auriculata</i> L.	Caesalpiniaceae	Aval	Leaves, Root	Tetanus, Menorrhagia
11	<i>Cassia occidentalis</i> L.	Caesalpiniaceae	Malvi puvad	Root	Oligomenorrhagia, Menorrhagia
12	<i>Celosia argentic</i> L.	Amaranthaceae	Garko	Kernel	Urinary retention
13	<i>Dioscorea belophylla</i> Voigt. (prain) ex. Haines	Dioscoreaceae	Godvel	Tuber	Miscarriage
14	<i>Ficus religiosa</i> L.	Moraceae	Piplo	Stem bark	Menorrhagia
15	<i>Grewa flavescens</i> Juss.	Tiliaceae	Kishki	Root	Leucorrhea
16	<i>Hibiscus rosasinensis</i> L.	Malvaceae	Jashud	Flower	Leucorrhea
17	<i>Holarrhena pubescens</i> Wall. Ex. G. Don.	Apocynaceae	Kadayo (indrajav)	Gum	Leucorrhea
18	<i>Limonia acidissima</i> Groff.	Rutaceae	Kothi	Leaves, Root	Leucorrhea
19	<i>Morus alba</i> L.	Moraceae	Shetur	Leaves	Leucorrhea
20	<i>Mucuna pruriens</i> (L.) DC.	Fabaceae	Kaucha	Kernel, Root	Leucorrhea
21	<i>Piper nigrum</i> L.	Piperaceae	Kalimari	Kernal	Oligomenorrhagia
22	<i>Tectona grandis</i> L. f.	Verbenaceae	Sag	Kernal	Urinary retention
23	<i>Tinospora cordifolia</i> (Willd.) Miers.	Menispermaceae	Galo	Stem, Root	Leucorrhea

Out of 23 plants species presented in the paper belonging to 17 families of Angiosperms used in the cure of various Gynecological issues.

Dominant plant species are *Asparagus racemosus* Willd., *Tinospora cordifolia* (Willd.) Miers. And *Cassia auriculata* L. as well. Mode of administration in Gynecic problems is mostly internal as an extracts or solutions.

Highest percentages of plant part used is Root having 11 no. of applications, Leaves with 5 no. of applications. Rest are Kernels with 4 no. of applications and Stem Bark with 2 applications and Tuber, Fruit, Flower and Gum with 1 application.

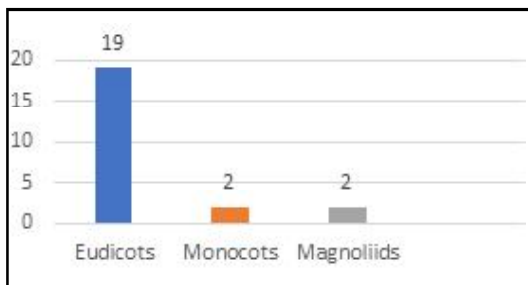


Fig. 2. Graph showing number of plants based on its class.

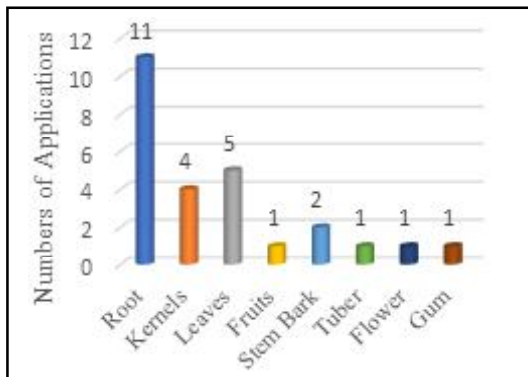


Fig. 3. Graph showing plant parts used for various diseases

Total 17 plant species are Dicotyledons and 6 species are Monocotyledons from 23 plant species and 20 Families.

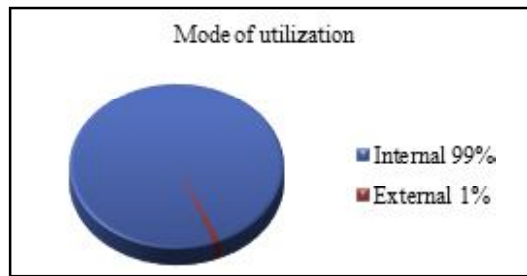


Fig. 4. Pie chart showing percentages Mode of utilization

Mode of administration in Gynecological issues is mostly internal as an extracts or solutions. Rarely it is as paste in some pain related issues.

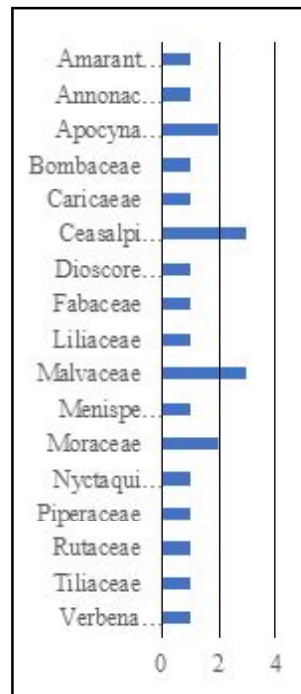


Fig. 5. Graph showing list of family of recorded plant spec

The tribal people traditionally use many Ethno-medicinal plants to cure many gynecological disorders, yet no such documentation has been done earlier specifically. Very little work has been done on the Ethno-gynecological use of plants in the treatment and health-care program of women as evidenced by the literature and reference.

The above reported ethno-gynecological plants also require a proper chemical, pharmacological experiments and clinical trials for the validation of the traditional claims. It was suggested to document such vital and valuable knowledge for the future generation as this knowledge found to be decline day-to-day. Hence more efforts for documentation of such knowledge are much needed.

A total of 23 ethnobotanically important plant species belonging to 20 families have been reported from the study area. Highly represented families were with 3 species, Caesalpiniceae, Malvaceae and Apocynaceae with 2 species each and rest with 1 species each. Data collected on the ethno-medicinal survey of study area has been summarized in Table-1.

During the present study, a less number of monocots (2) species compared to number of dicots species (19) were recorded (Fig. 1). Tribal people use different plant parts for various ethnomedicinal purposes (Fig. 2). Plant species are used as traditional medicine for various ailments. Sometimes paste is also prepared from plant parts and is applied to cure various skin diseases, inflammation, swellings, insect bites, snakebites, etc.

The local population was found to be very careful and sensitive about gynecological issues and had rich ethnomedicinal knowledge.

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