

Indigenous Knowledge on the Utilization of Medicinal Plant Diversity in the Siwalik Region of Garhwal Himalaya, Uttarakhand

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ABSTRACT : Ever since the dawn of civilization, the ambient vegetation and the resources constituted major source of human existence for various substantial requirements. Our present knowledge on plant resources emerged from the traditional heritable knowledge descended from generation to generation. However, traditional knowledge pertaining to several aspects remained untapped from various remote localities or populations. Furthermore, with the present trends of excessive exploitation of natural resources and degradation of habitats, conservation and ecological management require coherence of traditional skills and modern approaches. Therefore, the present study is to record traditional plant based knowledge among the inhabitants of Siwalik region of Uttarakhand Himalaya. Extensive field survey was made for the collection of data on the medicinal aspects of plant species in the study area covering the parts of districts Pauri, Dehradun and Haridwar. During the course of study 130 plant species belonging to 65 families are reported, used as traditional medicine by the local inhabitants of this region.

Keywords : Ethnomedicine, Indigenous knowledge, Garhwal Himalaya, Uttarakhand

INTRODUCTION

The Himalaya has a great reservoir of biodiversity and a large number of ethnic communities with their own traditional knowledge system. The rich biodiversity shows variations in species composition from east to west as well as from low to high elevation, with secondary influence of geology and soil (Champion and Seth, 1968). The Uttarakhand Himalaya is characterized by a rich diversity of ethnomedicinal plants and occupies an important position in Vedic treatises. The Garhwal and Kumaon Himalaya of Uttarakhand state covers 5.5 per cent of the total western Himalayan region and a numbers of workers carried out studies on the plants of economic values in this part of Himalaya (Arya et al., 1999; Bhatt and Gaur, 1992; Gaur, 2008; Gaur and Nautiyal, 1993; Gaur et al., 1997; Joshi and Pandey, 2000; Mehta and Bhatt, 2007; Negi and Gaur, 1991; Negi and Gaur, 1994; Shah and Joshi, 1990; Sharma, 2010; Tiwari and Pandey, 2010). During the last few decades there has been an increasing

interest in the study of medicinal plants and their traditional use in different parts of the state either by tribal people or the indigenous communities (Gangwar et al., 2010; Gaur, 1999; Gaur et al., 2010; Negi et al., 2002; Nazir et al., 2010; Pandey and Pandey, 2010; Sharma et al., 2010, 2011).

Forests are the principal source of raw material for plant based medicine. Medicinal plants have been used as a major source of therapeutic agents by man for thousands of years. The herbal drugs obtained from the plants are believed to be more effective in the treatment of different ailment (Shiddiqui et al., 1995). More than 90% of raw matter required in the field of pharmaceutical is obtained from the wild resources (Kehimker, 2000). Collection of information and documentation of traditional knowledge plays an important role in scientific research on drug development (Ragupathy et al., 2008). The local communities and the indigenous people residing in the remote localities have good knowledge about utilization of herbal resources and natural reserves. They mainly rely directly on the

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endemic vegetation for their illness and treatment of various types of ailments. The tradition based knowledge system becomes an opportunity for successful conservation and sustainable development. For the proper scientific transformation of traditional knowledge a sound rapport to local communities, understanding of their language, folk knowledge of plant species and pattern of utilization system is essential. Throughout the world there has been a great concern to restore the available old traditional practices among different ethnic societies. But unfortunately much of this prosperity of knowledge is today becoming lost as traditional culture becomes ended. So there is a great need of ethnobotanical operations for the documentation of this knowledge an important component of traditional wisdom as soon as possible.

The present study is carried out in Siwalik ranges of Himalaya, starting from 400 m upto 2000 m asl. In this region there are distinct local inhabitants as well as some tribal pockets of Tharus, Bhoxas, Gujjars, Jaunsaris, Raji who are accustomed to use natural resources in sustainable manner for the long past. Majority of population dwell in small villages surrounded by crop fields and forests. Their livelihood is greatly dependent on the traditionally maintained ecosystems. Their beliefs and actions are related with the conservation of nature, in the terms of resource utilization.

The main objective of the project is to carry out detailed investigations on plant utilization from the Siwalik region

of Garhwal Himalaya. The most important aspect of the study is to translate local version of usage pattern into the scientific or botanical terms, for the wider understanding. Usually local names of plants vary from place to place, therefore, the correct determination of the plants is only based on the botanical names, and subsequently the information is considered as authentic. Thus the primary aim of the study is to tap the information in systematic manner. Secondly, during the course of development, the local usage pattern is dwindling fast, evidently, it is essential to tap the information before it is likely to be vanished from the inhabitants system.

MATERIALS AND METHODS

The study was conducted in different villages of the Shiwalik Himalaya in districts Pauri (29°45' to 30°15' N-78°24' to 79°23' E), Dehradun (30°19' N-78°04' E) and Haridwar (29°96' N-78°16' E) (Fig. 1). Extensive field survey and plant collection were made during the course of study. Interviews with folk priest, women folk, graziers, vaidyas and elderly populace were conducted to receive reliable information. The questionnaires were used to obtain information on medicinal plants with their local names, parts used, ailment treated, mode of preparation and administration. Information on various utilization of medicinal plants has been recorded through personal interviews and group discussions with the people of different age group.



Fig. 1. Map of Study Area.

In absence of medicimen the medicinal plants collected from the forest area were shown to them and other knowledgeable persons for necessary information. The data on medicinal properties of the plant used for curing ailments were cross checked at least from the 4-8 informants. All age classes were interviewed for the collection of information, but preference was given mostly to older age class having much knowledge about use of medicine. The information was cross-checked by consulting important works done on medicinal plants (Nair and Mohanan, 1998; Jain, 1968, 1991; Gaur, 1999). The collected plant specimens are identified with the help of relevant floras (Babu, 1977; Gaur, 1999) and deposited in the Herbarium, Botany Department, HNB Garhwal University Srinagar (GUH) following the usual methods of Herbarium (Jain and Rao, 1977; Rao and Sharma, 1990; Singh and Subramaniam, 2008; Gaur, 2009).

RESULTS AND DISCUSSION

It is evident from the present findings that the Shiwalik region is endowed with large number of medicinal plants and represents their multiple traditional uses. This study reveals that the local communities of study area still depend on medicinal plants for primary healthcare. The families are arranged in alphabetical order with their plant species, following usual citation, available vernacular names, habit, distribution, altitudinal range and with ethnomedicinal uses, including diseases treated with specific plant part (Table 1). The most of the reported plant species are common to the locality while some other are rare and uncommon in their occurrence due to natural disturbance or over exploitation reasons, indicates the need of proper conservation.

Table 1. General details, uses, parts used and preparation of the medicinal plants

S.No.	Family/Botanical name	Common name	Habit	Dist	Altitude (m asl)	Plant part used	Ailment treated
Acanthaceae							
1.	<i>Adhatoda vasica</i> Nees	<i>Basinga, Bansa</i>	S	Ab	600-1000	Lv Flb, Rt	Rheumatism, Cough, Anthelmintic
Amaranthaceae							
2.	<i>Achyranthes aspera</i> L.	<i>Lichkura</i>	H	C	600-800	Sd WP	Skin diseases Colic
Anacardiaceae							
3.	<i>Rhus parviflora</i> Roxb.	<i>Tungla</i>	S	C	300-1000	St	Suppressed urination
Annonaceae							
4.	<i>Annona squamosa</i> L.	<i>Sitaphal</i>	S	C	up to 1000	Lv Sd	Wounds Kill lice
Apiaceae							
5.	<i>Bupleurum falcatum</i> L.	<i>Jangli Jeera</i>	H	UC	800-2500	Rt	Liver troubles
6.	<i>Centella asiatica</i> (L.) Urban	<i>Brahmi</i>	H	C	500-100	Lv	Headache
Apocynaceae							
7.	<i>Carissa opaca</i> Stapf.	<i>Karonda</i>	S	Ab	600-1000	Rt brk	Fever
8.	<i>Quirivelia frutescens</i> (L.)M.R. & S.M. Almeida	<i>Kali dudhi,</i> <i>Dudhi bel</i>	Cl	C	up to 1500	Rt St	Skin disease and Fever Toothache
Araceae							
9.	<i>Acorus calamus</i> L.	<i>Bauj</i>	H	UC	800-2000	Rh	Diarrhoea, Dysentery, Liver tonic
Araliaceae							
10.	<i>Hedera nepalensis</i> K. Koch.	<i>Banda, Bandu</i>	Cl	C	up to 2500	Lv	Ulcers, Asthma & Bronchitis, Anthelmintic
Asteraceae							
11.	<i>Circium wallichii</i> DC.	<i>Kandelya</i>	H	UC	up to 2000	Rt	Refreshing cold drink
12.	<i>Eupatorium adenophorum</i> Spreng.	<i>Basiya</i>	H	C	up to 2200	Lv	Blood clotting
13.	<i>Gerbera gossypina</i> (Royle)	<i>Beauv. Kabasi</i>	H	C	up to 2600	Rt	Laxative and in Blood pressure
14.	<i>Inula cappa</i> DC.	<i>Tangiri</i>	S	UC	up to 1500	Rt	Suppression of urination
Bignoniaceae							
15.	<i>Oroxylum indicum</i> (L.)Vent.	<i>Tantiya</i>	T	C	up to 1500	Rt Sd St	Stomachache and Diarrhoea Piles Wounds

Table 1. Continued

S.No.	Family/Botanical name	Common name	Habit	Dist	Altitude (m asl)	Plant part used	Ailment treated
Bombacaceae							
16.	<i>Bombax ceiba</i> L.	<i>Semal</i>	T	C	up to 1000	Gu Rt	Aphrodisiac Stimulant and tonic
Boraginaceae							
17.	<i>Ehretia laevis</i> Roxb.	<i>Chamrore</i>	T	C	up to 1000	Rt	Joints pain and Wounds
Brassicaceae							
18.	<i>Capsella bursa-pastoris</i> (L.)Medik.	<i>Chainya</i>	H	C	500-3500	Sd	Astringent
Caesalpiniaceae							
19.	<i>Bauhinia variegata</i> L.	<i>Guiral</i>	T	C	up to 1200	Lv	Cough
20.	<i>Cassia floribunda</i> Cavan	<i>Chakunda, Taror</i>	S	C	600-1200	Sd	Digestive and Respiratory troubles.
21.	<i>Cassia occidentalis</i> L.	<i>Chakunda</i>	S	C	up to 1500	Fl Fr	Wounds Eczema
Caryophyllaceae							
22.	<i>Stellaria media</i> (L.) Vill.	<i>Badiyallu</i>	H	Ab	up to 1000	Lv Rt	Burns Boils and Blisters
Celastraceae							
23.	<i>Celastrus paniculatus</i> Willd.	<i>Malkuni, Umjan</i>	S	UC	up to 1000	Sd Fr	Rheumatism Dysentery
Combretaceae							
24.	<i>Terminalia bellirica</i> Roxb.	<i>Bahera</i>	T	C	up to 1200	Fr	Digestion, Asthma & Bronchitis, Eye troubles
25.	<i>Terminelia alata</i> Wight. & Arn.	<i>Asian, Asin</i>	T	C	up to 800	Brk	Leucorrhoea and Cuts
Commelinaceae							
26.	<i>Commelina benghalensis</i> L.	<i>Kansura</i>	H	C	up to 1200	Rt	Liver disease
Convulvulaceae							
27.	<i>Ipomoea pes-trigridis</i> L.	<i>Gheebati</i>	Cl	C	up to 1500	Rt	Fever
Cucurbitaceae							
28.	<i>Trichosanthos tricuspidata</i> Lour.	<i>Indrian</i>	Cl	C	500-2000	Fr, Sd	Diabetic diseases
Dioscoreaceae							
29.	<i>Dioscorea belophylla</i> Prain	<i>Tairu</i>	Cl	C	up to 1200	Tu	Aphrodisiac
30.	<i>Dioscorea bulbifera</i> L.	<i>Genth</i>	Cl	C	up to 1500	Tu	Colic, Piles and Jaundice
Dipsacaceae							
31.	<i>Dipsacus inermis</i> Wall.	<i>Phulee</i>	H	C	1200-3000	Rt	Leucoderma
Dipterocarpaceae							
32.	<i>Shorea robusta</i> Gaertn.	<i>Saal</i>	T	C	500-1000	GR	Skin diseases and Leucoderma.
Ericaceae							
33.	<i>Lyonia ovalifolia</i> (Wall.) Drude	<i>Anyar</i>	T	C	up to 2000	Lv	Skin diseases
34.	<i>Rhododendron arboreum</i> Smith.	<i>Burans</i>	S	C	1200-2500	Fl Lv	Fever Headache
35.	<i>Drypetes roxburghii</i> (Wall.) Hurus	<i>Jiyapota, Juti</i>	T	UC	up to 800	Fr Lv	Psychomedicine Fever, Skin disease
36.	<i>Mallotus philippensis</i> Muell.-Arg.	<i>Ruina</i>	T	C	600-1000	Lv	Itching
Fabaceae							
37.	<i>Mucuna pruriens</i> (L.) DC.	<i>Dankuli, Gaunchi</i>	Cl	UC	up to 1000	Sd	Laxative, Diabetes
38.	<i>Erythrina arborescens</i> Roxb.	<i>Mandiro</i>	T	UC	up to 1500	Lv	Anthelmintic
39.	<i>Abrus precatorius</i> L.	<i>Ratigiri, Ratti</i>	Cl	C	up to 1500	Rt	Syphilis
						Sd	Abortifacient
40.	<i>Butea monospema</i> (Lamb.)Taub.	<i>Dhaak</i>	T	C	up to 800	Gu Sd	Diarrhoea and Dysentery Vermifuge and Anthelmintic
41.	<i>Crotalaria burhia</i> Buch.-Ham.	<i>Sisai</i>	H	Ra	1000-2500	Rt	Skin diseases
42.	<i>Crotalaria juncea</i> L.	<i>Sunn</i>	H	UC	up to 1200	Sd	Blood purifier and Skin diseases.
43.	<i>Dalbergia latifolia</i> Roxb.	<i>Kala Shisham</i>	T	UC	up to 800	Sd	Digestive disorders
44.	<i>Dalbergia sissoo</i> Roxb.	<i>Shisham</i>	T	C	up to 700	Re Lf	Skin diseases Leucorrhoea Fl
							Menstrual disorders
45.	<i>Desmodium elegans</i> DC.	<i>Chamlai</i>	S	UC	up to 2500	Rt	Epilepsy
46.	<i>Desmodium gangeticum</i> (L.) DC.	<i>Sarivan, Salpalnu</i>	H	C	up to 1500	Rt	Astringent and Tonic, Febrifuge, Expectorant
47.	<i>Desmodium microphyllum</i> (Thunb.) Sansuri DC.		H	C	600-1000	Rt	Tonic

Table 1. Continued

S.No.	Family/Botanical name	Common name	Habit	Dist	Altitude (m asl)	Plant part used	Ailment treated
48.	<i>Dolichos tenuicaulis</i> (Baker) Craib	<i>Barchur</i>	S	Ra	up to 2000	Sd Rt	Febrifuge Tonic.
49.	<i>Flemingia paniculata</i> Wall.	<i>Saalpani</i>	S	C	up to 1000	Rt	Colic
50.	<i>Flemingia vestita</i> Benth.	<i>Jungli Bhatya</i>	H	C	500-1500	Rt	Blood dysentery
51.	<i>Indigofera heterantha</i> Wall.	<i>Saakina</i>	S	C	up to 1500	Flb	Digestive disorder
52.	<i>Lathyrus apahaca</i> L.	<i>Kurphali</i>	H	Ab	up to 1000	Rt	Febrifuge
53.	<i>Melilotus indica</i> (L.)	<i>Ban-methula</i>	H	Ab	up to 1000	Sd Lv	Body swelling Dysentery
54.	<i>Milletia extensa</i> (Benth.) Baker	<i>Gauj</i>	Cl	UC	600-1500	Rt	To prevent conception
55.	<i>Ougeinia oojeinensis</i> (Roxb.) Hoechr.	<i>Sandan</i>	T	C	500-1500	Gu	Digestive troubles
56.	<i>Pueraria tuberosa</i> DC.	<i>Sirwala, Siralu</i>	Cl	C	600-1500	Tu	Debility
57.	<i>Rhynchosia rothii</i> Benth.	<i>Ban-tor</i>	Cl	Ra	500-1000	Rt	Tonic
58.	<i>Zornia gibbosa</i> Span	<i>Kuri, Dwipati</i>	H	C	up to 800	Sd Rt	Nerve tonic induce sleep in infants.
Fagaceae							
59.	<i>Quercus leucotrichophora</i> A. Camus	<i>Banj</i>	T	C	1000-2400	GR Brk	Digestive troubles Dysentery
Flacourtiaceae							
60.	<i>Flacourtie indica</i> (Burm. f.) Merr.	<i>Kandai</i>	T	C	up to 1000	St brk Fr	Eye disease Liver troubles
Geraniaceae							
61.	<i>Geranium nepalense</i> Sw.	<i>Ratanjot</i>	H	C	up to 1500	Rt	Stomach complaint
Hypericaceae							
62.	<i>Hypericum oblongifolium</i> Choisy	<i>Chaya</i>	S	Ra	up to 2200	Lv	Cuts and Wounds
Lamiaceae							
63.	<i>Elsholtzia fruticosa</i> (D.Don) Rehder	<i>Bhangria</i>	H	UC	up to 2000	Sd	Carminative
64.	<i>Mentha longifolia</i> (L.) Huds.	<i>Pudina</i>	H	C	up to 1200	Lv, Rt	Indigestion
65.	<i>Micromeria biflora</i> (Buch.- Ham.) ex D.Don	<i>K a h p u , Van-Ajwain</i>	H	C	up to 2500	Lv	Fever, Colic, Pimples
66.	<i>Roylea cinerea</i> (D.Don) Baill.	<i>Kadwi, Tiuna</i>	S	C	400-1500	Lv YT	Fever, Malaria Diabetes.
67.	<i>Scutellaria scandena</i> Buch.-Ham.	<i>Kappu, Kaphu</i>	H	C	500-1500	Lv, Rt	Digestive disorders
Lamiaceae							
68.	<i>Coleus forskohlii</i> (Poir) Briq.	<i>Pilwari</i>	H	UC	600-2000	Rt WP	Wormicide Cough and Cold
Lathyraceae							
69.	<i>Woodfordia fruticosa</i> (L.) Kurtz	<i>Dhaura, Dhau</i>	S	C	500-1400	Flb	Dysentery and Fever
Lauraceae							
70.	<i>Litsea glutinosa</i> (Lour.) Robin.	<i>Singrau</i>	T	UC	up to 2000	Brk Fr	Diarrhoea and Dysentery Rheumatism
Liliaceae							
71.	<i>Polygonatum cirrhifolium</i> (Wall.) Royle	<i>Meda</i>	H	Ra	1000-3000	Rt	Febrifuge, Aphrodisiac.
72.	<i>Polygonatum verticillatum</i> (L.) All.	<i>Meda</i>	H	UC	1000-3000	Sh	Indigestion
Linaceae							
73.	<i>Reinwardtia indica</i> Dumort.	<i>Pheunli</i>	S	Ab	up to 800	Fl	Tongue infection
Malvaceae							
74.	<i>Urena lobata</i> L.	<i>Bala, Unga</i>	H	C	up to 2000	Brk Lv	Urinary troubles Wounds
Menispermaceae							
75.	<i>Cissampelos pariera</i> L.	<i>Paari</i>	Cl	UC	up to 2000	Rt	Colic, Cough, Malaria, Indigestion and Urinary complaints
76.	<i>Stephania glabra</i> Miers	<i>Gindaru</i>	Cl	C	up to 1500	Tu	Psychomedicine
77.	<i>Tinospora cordifolia</i> (Willd.) Miers	<i>Giloei</i>	Cl	Ra	up to 1000	St Rt	Diabetes Leprosy

Table 1. Continued

Table 1. Continued

S.No.	Family/Botanical name	Common name	Habit	Dist	Altitude (m asl)	Plant part used	Ailment treated
108	<i>Aegle marmelos</i> Corr.	<i>Belpatri</i>	T	C	up to 1200	Fr Rt Sd	Dysentery and Diarrhoea Fever and Cough Piles and Blood dysentery
109	<i>Glycosmis arborea</i> (Roxb.) DC.	<i>Ban Nimboo</i>	S	UC	up to 1000	Fr	Liver troubles
110	<i>Murraya koenigii</i> Spreng.	<i>Gandella, Gandel</i>	S	C	up to 1000	Lv	Dysentery, Anthelmintic
111	<i>Zanthoxylum armatum</i> DC.	<i>Temru</i>	S	UC	600-1200	Fr Sd	Stomachache Psychomedicine
Sapindaceae							
112	<i>Dodonaea viscosa</i> L.	<i>Aliar</i>	S	UC	up to 1200	Lv	Antiwormicide
113	<i>Schleichera oleosa</i> (Lour.) Oken	<i>Kusum</i>	T	C	up to 1000	Sd	Skin burning
Serophulariaceae							
114	<i>Linderbergia indica</i> (L.) Vatke	<i>Phiunl</i>	H	C	1500	Lv	Toothache
115	<i>Verbascum thapsus</i> L.	<i>Akalvir, Kutalenga</i>	H	C	500-2000	Rt	Colic pain and Fever, antidote to snake bite.
Smilacaceae							
116	<i>Smilax aspera</i> L.	<i>Kukurdar</i>	Cl	UC	up to 1200	Rt	Rheumatism.
Solanaceae							
117	<i>Datura stramonium</i> L.	<i>Dhatura</i>	H	C	500-2000	Sd	Intoxicant
118	<i>Solanum nigrum</i> L.	<i>Makoi</i>	H	C	up to 2000	WP Fr	Liver disorders, Piles and Dysentery, Diarrhoea Fever and Eye-ailments
119	<i>Solanum surattense</i> Andr.	<i>Berkateli, Konkaru, Uwain</i>	H	C	up to 1500	Fr Fl	Fever, Cough, Asthma and Gonorrhoea Diarrhoea
Sterculiaceae							
120	<i>Helicterus isora</i> L.	<i>Marorphali</i>	S	C	up to 800	Rt Fr	Diabetes Chronic colic and Dysentery
Tiliaceae							
121	<i>Grewia optiva</i> J.R. Drumm.	<i>Bhimal</i>	T	C	up to 1500	Fr	Fever
122	<i>Triumfetta rhomboidea</i> Jacq.	<i>Chiryri</i>	H	C	up to 1200	WP	Anthelmintic
Ulmaceae							
123	<i>Holoptelea integrifolia</i> Planch.	<i>Kanju</i>	T	UC	up to 800	Lv	Boils & Blisters
Urticaceae							
124	<i>Boehmeria rugulosa</i> Wedd.	<i>Gainthi</i>	T	C	up to 1000	St brk	Bone fracture
125	<i>Debregeasia salicifolia</i> (D.Don) Rendle	<i>Simroo, Syansru</i>	S	C	up to 1500	Brk	Bone fracture
126	<i>Urtica dioica</i> L.	<i>Kandali</i>	H	C	400-2000	WP	Rheumatic pain, Ear-ache
Valerianaceae							
127	<i>Valeriana hardwickii</i> Wall.	<i>Sumaya</i>	H	UC	1000-3500	Rt	Jaundice, Loss of appetite, Fits, headache, Diseases of blood and eyes
Verbenaceae							
128	<i>Gmelina arborea</i> Roxb.	<i>Kumhar</i>	T	UC	up to 1000	Lv	Fever and Gonorrhoea.
Violaceae							
129	<i>Viola canescens</i> Wall.	<i>Banaspa, Thangtu</i>	H	C	up to 3000	Fl Lv	Chronic cough and bronchitis Cuts and wounds
Zingiberaceae							
130	<i>Hedychium spicatum</i> Buch.- Ham.	<i>Kapoor-Kachri</i>	H	C	up to 1800	Rh	Dysentery

Abbreviations: H= Herb; S= Shrub; T= Tree; Cl= Climber; E= Epiphyte; C= Common; UC= Uncommon; Ra= Rare; Ab= Abundant; Dist= Distribution; GR= Gum-resin; Lv= Leaves; Sd= Seeds; Tu= Tubers; Rh= Rhizomes; Ufr= Unripe fruits; Fi= Figs; Fl= Flowers; Fr= Fruits; WP= Whole plant; Brk= Bark; Rt= Roots; Flb= Flower buds; YT=Young twigs; Gu= Gum; Lt= Latex

In general the fresh plant parts are used for preparation of medicine and during its non-availability dried parts are also taken. The most privileged family used for the curing of disease was the Fabaceae (16%) followed by Polygonaceae (4.65%), Lamiaceae (3.8%), Moraceae (3.8%), Asteraceae (3.1%) etc (Fig. 2). Although all the parts are

in use to various remedies, however, interestingly use of roots is very frequent (27%) as compared to leaves (20%), seeds (12%), fruits (10%) and other parts (Fig. 3). The diseases treated commonly through the herbal preparations are fever (7.8%), digestive disorders (7.3%), dysentery (6.8%), skin disorders (6.3%), liver diseases (4.7%), cough

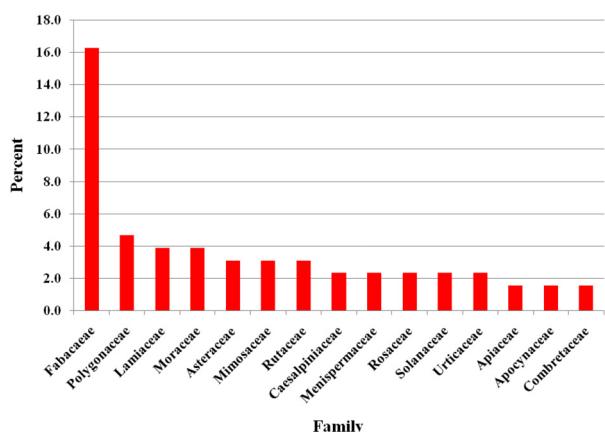


Fig. 2. Major families used for ethnobotanical purpose.

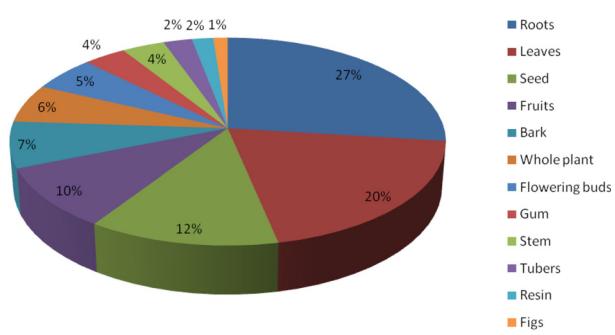


Fig. 3. Plant parts used in preparations.

(4.3%), anthelmintic (3.4%) and so on (Fig. 4). During the present study it has been noticed that herbaceous plants are more commonly used (36.72%) as compared to shrubs (24.22%), trees (25.78%), climbers (13.28%) and epiphyte (0.78%) (Fig. 5). The medicinemen prepare herbal remedies in different forms, such as decoction, powder, paste, juice, infusion and pills, which are administered internally or externally. The dosage pattern varies with the drug preparation, age of the patient, severity of the diseases, and personal judgement of the practitioner. Psycho-medicinal aspects are also found common among the locales for the treatment of some ailments. It was observed during the survey period that the old folk have good knowledge about the medicinal preparations compared to the young generation, who generally knows only about the vernaculars.

This study shows that even though the convenience of western medicine for simple and complicated diseases is accessible, the people of the study area still continue

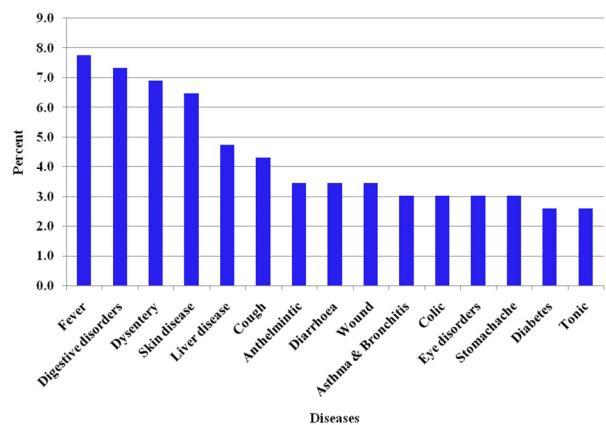


Fig. 4. Common diseases treated by tribal people.

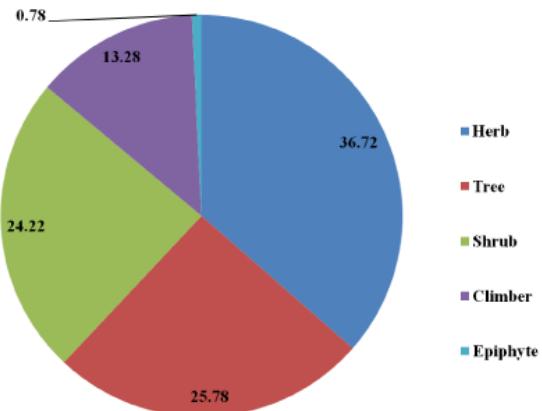


Fig. 5. Diversity of plant species.

practiced traditional medicine system and rely on them. The present investigation reveals that the local medicineman of the study area have good knowledge of medicinal property of various plant species of their surrounding atmosphere. The herbal drugs are very popular among the tribals as well as in non tribal rural population. The ethnomedicinal studies contributed a heap of knowledge on various indigenous traditional systems, which still exist in various societies, and are generated as result of long period of trials and experiences. In an estimate about 60-80% of the total population is still dependent on traditional medicines for their healthcare. Such indigenous knowledge prevailing in the rural and remote communities, warranted proper botanical transformation and retrieval before to be vanished with the present day modernization system. It is important to recognize the role of the traditional health care practices for future sustainable development.

The information on medicinal plants obtained from the tribal communities is useful for researches in field of pharmacology, in clinical and biological studies. Therefore rapid efforts should be made for the documentation of such valuable knowledge for future perspectives. However the over exploitation of herbal drugs for commercial purposes resulting in depletion of natural resources and as a result of this more of the species are becoming rare and endangered. It is necessary to develop strategies for conservation of nature and natural resources among the tribal tracts or in interior localities to protect the fast disappearing medicinal plants and indigenous knowledge system.

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