



ISSN Print: 2394-7500  
ISSN Online: 2394-5869  
IJAR 2015; 1(5): 190-192  
www.allresearchjournal.com  
Received: 26-03-2015  
Accepted: 15-04-2015

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## Significance of herbal medicines and their usage

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### Abstract

Herbal medicines have become integral part of health care industry. In herbal industry, herbal medicines are prepared from the extracts of plants. From the ancient times, plants have been used for the medicine purposes. In Ayurveda, there is description of many useful plants which can be used to cure harmful diseases.

The main advantage of herbal medicines is that they have no side-effects on human body. On the other hand, non-herbal medicines create some side-effects in human body. The growth in the herbal industry is observed from the last decade as more and more people have started using herbal medicines for the effective treatment. The current article highlights the significance of herbal medicines and their usage.

**Keywords:** Herbal, Medicine, Plant, Disease.

### Introduction

According to a report generated by World Health Organization (WHO), about 80 percent of people use herbal medicines in the world. Hence, the market of herbal medicines has grown enormously. It is also reported that about 21000 species of plants are used for the preparation of herbal medicines. It also implies that more than 30 percent of total species of plants are used for the preparation of herbal medicines. The mostly used medicinal plants are Tulsi, Aloe, Ginger and Turmeric. These plants play a vital role for the treatment of several diseases.

It is observed that herbal medicines remove a disease with its root and it may take few days for the treatment of a disease. Most of the plants used in the preparation of herbal medicines are obtained from Himachal and Utrakhand state of India. India is supposed to be enriched with herbal plants to make herbal medicines.

Few years back, people don't use herbal medicines and only non-herbal medicines were used mostly for the treatment of diseases. But, as the time passed, the trend of using herbal medicines came into existence and it became popular in India to use herbal medicines due to their no side-effects. Besides Indians, these days foreigners have also started believing in herbal medicines and use these medicines for the treatment.

Due to high life style, people are going away from the nature. But, the reality is that no one can live without nature for a long time as we are an integral part of this nature. God has provided nature with all the components required for basic life needs. From the food and vegetables to health treatment, nature has all the ingredients for the human. These herbal products are supposed to be safer than that of the synthetic drugs.

There are many herbal drugs used for the treatment. For example, Aspirin is an herbal medicine used to reduce the pain and inflammations. The plant source of Aspirin is *Filipendula ulmaria*. Similarly, Ephedrine is also an herbal medicine used to minimize the nasal congestion. Its plant source is *Ephedra sinica*.

Theophyllin is used to open the bronchial passage and its plant source is *Catharanthus roseus*. Reserpine is used to lower the blood pressure and its plant source is *Rauvolfia serpentina*. Quinine is used to combat malaria and its plant source is *Cinchona pubescens*.

Pilocarpine is used to reduce pressure in eyes and its plant source is *Pilocarpus jaborandi*. Scopolamine is used to ease motion sickness and its plant source is *Datura stramonium*.

The following table shows few herbal medicines with their usage and their plant source.

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**Table 1:** Modern drugs developed from traditionally known drugs

Modern drug	Traditional medicinal use	Plant source
Aspirin	Reduces pain and inflammations	<i>Filipendula ulmaria</i>
Codeine	Eases pain, suppresses cough	<i>Papaver somniferum</i>
Ipecac	Controls vomiting	<i>Psychotria ipecacuanha</i>
Pilocarpine	Reduces pressure in the eyes	<i>Pilocarpus jaborandi</i>
Ephedrine	Reduces nasal congestion	<i>Ephedra sinica</i>
Quinine	Combats malaria	<i>Cinchona pubescens</i>
Reserpine	Lowers blood pressure	<i>Rauwolfia serpentina</i>
Scopolamine	Eases motion sickness	<i>Datura stramonium</i>
Theophyllin	Opens bronchial passage	<i>Catharanthus roseus</i>
Diosgenin	Contraceptive	<i>Dioscorea floribunda</i>
Digitoxin	Dropsy, relieves heart congestion	<i>Digitalis purpurea</i>

### Role of Herbal Medicines

As health, disease and medicine are dynamic in nature and cultural constructs, it is worth interesting and fascinating to explore the ethno medical practices of tribal communities. Health is a common theme in all cultures and every society has devised a mechanism to cope up with the life threats in the form of ill health, disease, and death, which is embedded in their bio-socio-cultural and ecological diversity and level of technology.

Indigenous medicine is another term which might be used for non-western, traditional medicine. Tribal communities are also being termed as indigenous communities and their health practices and traditions may be termed as indigenous medicine. Official term for medical systems other than allopath as used by the Central Government and respective State Governments is indigenous systems of medicine which includes AYUSH i.e. Ayurveda, Yoga, Unani, Siddha and Homeopathy.

Ethno medical studies are conducted to evaluate the efficacy of traditional health care practices; the prevalence of illnesses and the distribution of knowledge about illness attributes; the negotiations and instantiation of illness identities; the power of discourse to produce as well as cure affliction; discourse as moral commentary; linkages between medico religious institutions, models of self, power and the state.

The acculturation process has great influence on their health. Due to the close association with the members of other societies they are exposed to new, unknown diseases. Now days many of the tribes are consuming food items available from ration shops and hotels. This new diet is very poor in quality when compared with the traditional food procured from the forest. So these changes in food items and dietary patterns seem to be detrimental to their nutrition and health.

In a welfare state like India, the administrative policies have direct bearing on the people's economic aspects ultimately leading to several issues in health related sector. In contrast to traditional health care system, the official health care system is based on Western science and technology separating it from broader social and cultural concerns and influences. It is evident that the state-supported western medical system does not generally recognize the traditional medical systems.

The medical system in a society is related to all other spheres of social life, and therefore medicine can be considered as a

sub-system, regulated and influenced by the world view and material development of the wider social system. Social anthropologists have been very keen in exploring the patterns of interaction between the sub-system of medicine and the major system of society, which ultimately paved the way to medical anthropology.

This science deals with the complex connections between a folk therapeutic system and the culture within which it operates. According to them neither concepts, and methods nor aims are critical, but rather the content of the work that is performed. Thus, medical anthropologist's major areas of concern are society's beliefs, concepts and curative measures of illness and to explain how the people cope up with a disease and what solution they offer to overcome this situation in the general background of their culture.

### Discussion

One cannot examine the medical system of a society in isolation, since the beliefs and practices related to disease, its causation and cure, are very much incorporated with so many other activities of a society. For understanding the medical beliefs and practices, one has to deal with almost all facets of social life like the religious beliefs, rituals, values, norms, world view, and interrelationship with other societies, material progress and the ecosystem in which the society is embedded.

The ethnographic studies of primitive communities done by social anthropologists have shown great concern in studying their social organization, kinship, marriage, family, religion economy etc while their medical beliefs and practices have been neglected. So the earlier monographs of many of the primitive communities often contain little narration in connection with disease and medicine. "It is true that all through the history of mankind attempts have been made to explain different aspects of medicine in terms of social variables. But it is only in the past fifty years or so that serious attempts have been made to study systematically the relation between the sub-culture of medicine and the wider society of which it is a part.

Medical sociology or the sociology of health and illness has primarily been concerned with systematic empiricism using the measurement of objective variables deemed quantifiable. Early in its development, in order to be accepted as a quasi-scientific discipline applied to a scientific discipline of

medicine, medical sociology adopted largely positivist values. As a result, often medical sociology could best have been described as a derivative of social medicine rather than as a sub-discipline of critical sociology.

Over the past decade the projects of medical anthropology and medical sociology/ sociology of health and illness have come close together to the extent that it is difficult to identify the boundaries separating them. Anthropological research aids a cross-cultural understanding of orientations to health care which may differ from the traditional bio medical model, including the lay health beliefs of ethnic minorities living in a western culture.

The sample was collected from people of both the sexes, age group of 15-90 yrs, rural and urban, of different religious background; of different educational backgrounds, different income levels. It was found that there was no significant relation between these socio-economic variables and use of the practice of herbal medicine.

The test used for exploring the relationship between the practice of herbal medicine and socio-economic variables such as gender, age, education, income was chi-square test. All the variables were measured at nominal level, only age was measured at ordinal level of measurement. The level of significance was 0.05 and as each observed value was counted less than pvalue of 0.05; it can be inferred that there is no significant relation between these socio-economic variables and the use of the practice of herbal medicine.

**Table 2:** Relation between socio-economic variables and the use of the practice of herbal medicine:

Independent variable	Dependent variable	N=270			Chi-square value $\chi^2$ level of significance at .05
		The use of the practice of Herbal Medicine			
		Yes	No		
Gender	Male	72	70	142	.613 (Not Significant) t-value 3.84
	Female	71 (143)	57 (127)	128	
Age	Below 30 Age	56	53	109	.200 (Not Significant) t-value 5.99
	30-60 Age	45	39	84	
	Above 60 Age	42 (143)	35 (127)	77	
Religion	Sarna	70	57	127	.568 (Not Significant) t-value 5.99
	Christian	52	48	100	
	Hindu	21 (143)	22 (127)	43	
Education	Illiterate	71	65	136	4.675 (Not Significant) t-value 11.07
	Up to primary level	20	18	38	
	Non-matric	15	21	36	
	Matric	5	2	7	
	Higher education Vocational/ technical	26 6	15 6	41 12	
Income	No regular income	41	51	92	4.575 (Not Significant) t-value 7.82
	Up to 1000/- per month	29	18	47	
	Up to 5000/- per month	50	38	88	
	Above 5000/- per month	23	20	43	
Residential pattern	Rural	87	77	164	.001 (Not Significant) t-value 3.84
	Urban	56	50	106	

**Conclusion**

The Government should impart education regarding the identification of various medicinal plants and their usage for

the treatment of common diseases. There is need to explore the medicinal properties of plants, which are readily available, and extracts of animal and mineral substances used in traditional medicine, through careful observation and validation for application. The government should provide financial support to promote the potential role of traditional medicine in primary health care.

Inventory and documentation of various medicinal plants and herbs, which are used to treat common diseases, should be developed. For the preservation of medicinal plants, establishment of community gardens and kitchen gardens is necessary. This will ensure sustainable supply of safe, effective and affordable medicinal herbs. Steps taken by various government departments and NGOs in this direction in recent years would definitely strengthen the traditional healthcare systems. This type of initiative will enable the developing countries to look inward rather than continuing to rely on expensive, imported medicines having side effects.

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