Environment and Ecology 37 (3B) : 1032—1036, July—September 2019 Website: environmentandecology.com ISSN 0970-0420

Ethnobotanical Explorations on Anti-Diabetic Plants Used by Tribal Inhabitants of Mizoram, India

Jerry Laldingngheta, Lalnundanga, Awadhesh Kumar

Received 26 March 2019; Accepted 30 April 2019; Published on 17 May 2019

Abstract In this study, ethnobotanical survey was conducted to collect information about medicinal plants used for the treatments of diabetes by tribal people in Mizoram, India. The indigenous knowledge of local traditional healers were consulted about the native plants used for the treatment of diabetes, its area of availability and documentations were done through questionnaire and personal interviews with the local people. This study revealed that, the tribal people and the traditional healers use around 29 species of plants belonging to 23 families to treat diabetes, many of which remains indigenous to different areas of Mizoram. The anti-diabetic medicinal plants used by the tribal inhabitants have been noted along with parts used and its mode of applications. This paper shows the medicinal plants from different families which have high anti-diabetic potential.

Keywords Anti-diabetic plants, Ethnobotanical, Mizoram, Tribal inhabitants.

Jerry Laldingngheta¹, Lalnundanga¹, Awadhesh Kumar*²

Mizoram University, Aizawl, Mizoram 796004, India

e-mail: jerryralte07@yahoo.com kumarawadhesh9@gmail.com lalnundanga@rediffmail.com

*Corresponding author

Introduction

Diabetes mellitus is a metabolic diseases in which a person has high blood sugar, it is due to the pancreas not producing enough insulin or because of cells of the body do not respond to the insulin that is produced. Diabetes mellitus is caused by the abnormality of carbohydrate metabolism which is linked to low blood insulin level or insensitivity of target organs to insulin (Maiti et al. 2004). There are two types of diabetes mellitus, viz. Type 1 and Type II. Type II diabetes is the more common form of diabetes constituting over 90% of the diabetic population (Warjeet 2011). Over the past two decades, the number of people suffering from diabetes is believed to have been rising steadily with high mortality rate in India. The frequency of this disorder is on the rise globally, is likely to hit 300 million by 2025 with India projected to have the largest number of diabetic cases (Mohan 2004).

Though medical heritage is centuries old, millions of people in the rural areas still rely on traditional medicine to congregate their healthcare needs (Ved and Goraya 2008). For the tribal people, herbal medicines have always been favored instead of synthetic drugs as they have no side effects or adverse reactions and are readily available to collect. This has led to the belief that natural products are safe because they are more harmonious with biological systems (Atal 1983). Herbal remedies act as an important source of new oral hypoglycemic compounds for development as pharmaceutical entities for diabetes, or to existing traditional therapies. Ethnobotanical studies of

¹Department of Forestry, ² Department of Horticulture, Medicinal & Aromatic plants (HAMP),

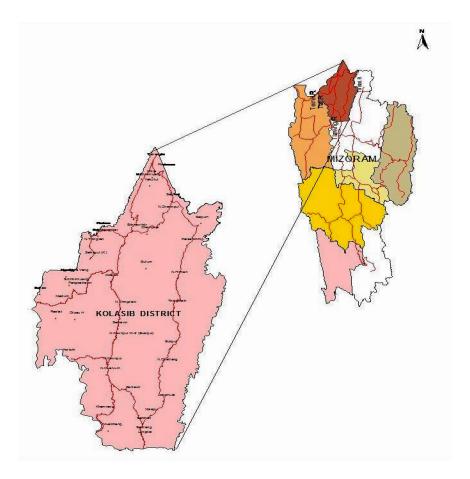


Fig. 1. Map showing Kolasib district.

traditional herbal remedies used for diabetes around the world have identified more than 1,200 species of plants with hypoglycemic activity (Babu et al. 2006).

Mizoram has a rich diversity of medicinal plants; however, they received very little attention with relation to their intrinsic values to human kind especially for managing diabetes. The main priority of this study was to obtain information on the use of plants in the treatment of diabetes by the tribal inhabitants, the plant organs used, method of preparing herbal remedies, with a view to contribute to the search of new natural medicines and for further enhancement of its pharmaceutical uses. Collection of information and documentation of traditional knowledge plays an important role in scientific research on drug development (Ragupathy et al. 2008).

Meterials and Methods

Description of study area: Kolasib district

The geographical location of the Kolasib district is in between longitudes 92°40′ 48″ East and latitudes 24°13′ 48″ North (Fig. 1). The district is bounded on the North and Northwest by Hailakandi district of Assam state, on the West by the Mamit district, on the South and East by Aizawl district and on the Northeast by Caschar district of Assam state. Most of the hill ranges traverse in North-South direction. The area is hilly and undulating with the altitude varying from 722m above sea level. Most of the area is with precipitous slope from deep gorges culminating into several streams and rivers. It is a warm and humid, temperature ranges from 10-35°C, the climate is

tropical to sub-tropical. The geographical area of the district is 1382.51 (sq.km. The field work was conducted in between September 2014-October 2015.

Ethnobotanical survey

Field investigations were conducted in Kolasib district, Mizoram. During the study, daily activities of the local inhabitants were closely observed and interpersonal contacts were established by participating in their functions. Interaction with a total of 20 informants within the age group of 30 to 60 was done. Among which there was 1 local practitioner. Ethnobotanical data were collected according to the methodology suggested by Jain and Goel (1995) .

The ethnobotanical data were collected through semi structured questionnaires, interviews, field observation and discussion with the local practitioners and informants. Data were documented in the order of local (vernacular) names of anti-diabetic medicinal plants, parts used, methods of remedial preparations.

Results and Discussion

Current investigation indicates that Kolasib district is blessed with splendid diversity of ethnomedicinal plants used for treating diabetes. Table 1, enumerates the data obtained during the investigation.

A total of 29 plant species belonging to 23

Table 1. Anti-diabetic medicinal plants used by the Mizo ethnic groups in Kolasib, Mizoram.

Sl. No.	Botanical name	Family	Local name	Plant parts used	Mode of application
1	Bauhinia variegata	Caesalpiniaceae	Vau-be	Bark	Powdered bark infusion is used
2	Benincasa hispida	Cucurbitaceae	Maipawl	Fruit	Fruit juice is used
3	Callicarpa arborea	Verbenaceae	Hnahkiah	Bark	Bark is grinded and taken
4	Catharanthus roseus (L.)	Apocyaceae	Kumtluang par	Whole plant	Decoction of root, stem, leaves is taken thrice a day for a period of one month
5	Centella asiatica	Apiaceae	Lambak	Leaf/whole plant	Whole plant juice is taken in empty stomach
6	Cinamomum verum	Lauraceae	Thakthing	Bark	Bark powder made infusion
7	Citrus grandis	Rutaceae	Sertrawk	Seeds	Seeds are peeled and eaten twice a day
8	Clerodendrum colebrookianum	Verbenaceae	Phuihnam	Leaf	Leaf paste is taken orally
9	Colocasiae sculenta	Araceae	Dawl	Leaf	Leaf boiled with water and taken
10	Costus speciosus	Costaceae	Sumbul	Tuberous root	Mixed with water or root juice is used
11	Cucurmis sativa	Cucurbitaceae	Fang-hma	Leaf	Decoction of leaf is taken orally
12	Emblica officinalis	Euphorbiaceae	Sunhlu	Bark	Bark grinded into powder and used
13	Glinusop positifolia	Aizoaceae	Bakhate	Leaf and stem	Boil extract of the plant is used
14	Ipomea batata	Convolvulaceae	Kawl-ba-hra	Leaves	Leaf boiled and juice is taken orally
15	Jasminum laurifolium	Oleaceae	Maufimhlo	Stem and leaf	Decoction of stem and leafis taken twice a day
16	Logerstroemia speciosa	Lythraceae	Chawnpui	Bark	Infusion of bark is used
17	Lepionurus sylvestris	Olacaceae	Anpangthuam	Leaf	The leaves are boiled, extracted and taken
18	Mallotus roxburghianus	Euphorbiaceae	Zawngte-nawh-lung	Leaf and bark	The leaves and bark are used for diabetes
19	Mangifera indica	Anacardiaceae	Theihai	Young shoots	Decoction of young shoots taken twice a day

Table 1. Continued.

Sl. No,	Botanical name	Family	Local name	Plant parts used	Mode of application
20	Mirabilis jalapa	Nyctaginaceae	Artukhuan	Tuber	Tuberous roots are boiled and taken
21	Momordica charantia	Cucurbitaceae	Changkha-rek	Fruits	The fruits are boiled and taken with food
22	Musa acuminate	Musaceae	Vai-bal-hla	Unripe fruits	Unripe fruit juice is laken orally
23	Musa glauca	Musaceae	Saisu	Water inside the bark	The water inside the bark is taken twice a day
24	Phaseolus vulgaris	Fabaceae	Bean	Fruits	Cooked fruits is taken
25	Phyllanthus fraternus	Euphorbiaceae	Mitthisunhlu	Leaves or whole plant	Boiled extract is used orally
26	Plantago major	Plantaginaceae	Kel-ba-an	Whole plant	Decoction of the whole plant is taken orally
27	Scurrula parasitica	Loranthaceae	Thlik-thli-ek-bawm	Leaf	Decoction of leave is taken twice a day
28	Syzyguim cumini	Myrtaceae	Lenhmui	Seed	Seed is grinded into pow- der and taken for diabetes
29	Tinospora sinensis	Meninspermaceae	Vankaihrui	Stem	The stem is made into decoction and taken orally

families were documented. Among all the species *Mangifera indica, Jasminum laurifolium, Glinusop positifolia, Scurrula parasitica, Citrus grandis* are commonly used by the local people for the treatment of diabetes in Kolasib, Mizoram (4th Indian National Seminar 2015). The most dominating families were Cucurbitaceae (3), Euphorbiaceae (3) followed by Verbenaceae (2) and Musaceae (2). The usage of plant parts are Leaf – 8, Bark – 6, Whole plant – 4, Fruit – 4, Tuberous root – 2, Stem and leaf – 2, Seeds – 2, Stem – 1 are shown in Figure 2. Information gathered during this study are in agreement with the previous reports (Jain and Patole 2001, Ignacimuthu et al. 2006, Modak et al. 2007, Ramya et al. 2008).

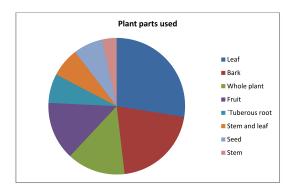


Fig. 2. Number of plant parts used as medicine.

From the data, the majority of parts used as remedics are fresh leaf materials (28%) followed by barks (21%) and fruits, whole plant (14%). However, plant parts like tuberous root, stem and leaf, seeds (7%) and stem (3%) were less frequently used by the people in the area.

Conclusion

From the survey, 29 plants belonging to 23 families for treatment of diabetes were reported and documented. The plant parts used such as leaf, root, stem, bark, fruit, seeds or the whole plant for herbal formulation was also recorded. It was reported that the mode of application of these plants were administered in the form of powder, paste of decoction. The tribal inhabitants of Kolasib district still largely depend on traditional herbal medicines due to their poor socio-economic status and also because of the high cost of modern medicines. These important medicinal plants are found growing and abundantly available for therapeutic use by the tribal inhabitants for treatment of diabetes. Thus, the loss of these potentially valuable genetic resources ultimately affects the whole society. Therefore documentation is important for conservation of anti-diabetic medicinal plants which are endemic to this area otherwise the knowledge might be lost forever.

Acknowledgement

The author would like to thank DST under SSTP Project for the said research work and all those people of Kolasib district who helped us in providing the information.

References

- Atal CK (1983) Potential newer medicinal plants: Report of the seminar on medicinal plants, phytochemical and bulk drugs. Chemexcil, Cooperage Road, Bombay, India, pp 34—36.
- Babu PA, Suneetha G, Boddepalli R, Lakshmi VV, Rani TS, Rambabu Y, Srinivas K (2006) A database of 389 medicinal plants for diabetes. Bioinformation 4: 130—171.
- Ignacimuthu S, Ayyanar M, Sankara Sivaraman K (2006) Ethnobotanical investigations among tribes in Madurai district of Tamil Nadu. J Ethnobiol Ethnomedicine 2: 25—30.
- Jain AK, Patole SN (2001) Less-known medicinal uses of plants among some tribal and rural communities of Pachmarchi forest (MP). Ethnobotany 13: 96—100.
- Jain SK, Goel AK (1995) A manual of Ethnobotany, Scientific Publishers, India, pp 141—153.

- Maiti R, Jana D, Das UK, Ghosh D (2004) Antidiabetic effect of aqueous extract of seed of *Tamarindus indica* in streptozotocin induced diabetic rats. J Ethnopharmacoly 92: 85—91.
- Modak M, Dixit P, Londhe J, Ghaskadbi S, Paul A, Devasagayam T (2007) Indian herbsand herbal drugs used for the treatment of diabetes. J Clin Biochem Nutr 40 (3): 163—173.
- Mohan V (2004) Why Are Indians More Prone to Diabetes? J of the Assoc of Physicians of India 52: 468.
- Ragupathy S, Newmaster SG, Maruthakkutti M, Velusamy B, Ul-Huda MM (2008) Consensus of the Malasars traditional aboriginal knowledge of medicinal plants in the Velliangiri holy hills, India. J Ethnobiol Ethnomed 27 (4): 8—15.
- Ramya Ś, Rajasekaran C, Sivaperumal R, Krishnan A, Jayakumararaj R (2008) Ethnomedicinal Perspectives of Botanicals used by Malayali Tribes in Vattal Hills of Dharmapuri (TN), India. Ethnobotanical Leaflets 12: 1054—1060.
- Ved DK, Goraya GS (2008) Demand and Supply of Medicinal Plants in India, Bishen Singh, Mahendra Pal Singh, Dehra Dun and FRLHT, Bangalore, India.
- Warjeet SL (2011) Traditional medicinal plants of Manipur as anti-diabetics. J Med Plants Res 5 (5): 677—687.
- 4th Indian National Seminar (2015) Asian Network of Research on Antidiabetic Plants: Plants in Diabetic: Prospects and Challenges at Dibrugarh University, Assam on 13th Mar 2015 and Nov 2015.