Chapter 7

Conclusion

Tulunadu is not only bio-culturally diverse but also rich in plants which are utilized as medicine. This small geographical area accounted for a total of 1001 medicinal plants of which 103 were endemic and 119 belonging to RET categories, indicating the importance of conservation. Each and every part of Tulunadu has characteristic medicinal flora and uses. Even though western medicine is widely used throughout, the rural people highly depend on traditional therapies for a number of chronic health issues like gastro intestinal tract problems, jaundice, skin diseases, antenatal care, postnatal care, poisonous bites and many more. From present study it is evident that each plant on an average used for 9.89 medicinal formulations. 59% of the formulations were single drug remedies and 105 plants were used to treat any one disease. In this context, loss of a single species might result in the loss of 10 medical formulations and even treatment for a disease. 74.5% of the formulations need destructive harvesting due to the utilization of root, whole plant, fruit, seed and bark, which makes cultivation, identification of alternative sources and sustainable utilization of natural resources the need of the hour. Among informants 85% were aged above 50 and maximum in the age group 70 – 79. Only one healer was below 40 and these clearly indicates the highly vulnerable status of traditional knowledge and makes the traditional healers a threatened category. As 32.5% healers are from the oral tradition due to lack of written manuscripts, documentation of their traditional knowledge is sine qua non.

Future requirements

a) Proper documentation of our indigenous knowledge lying with the rural people, its recognition and scientific assessment.

b) Conducting researches to identify the properties of various plants, so that the active principles present may be isolated to study the phytochemistry.

c) Effective and suitable substitutes for endangered and threatened medicinal plants need to be identified.
d) Herbal gardens must be maintained at different geographical regions to conserve medicinal plant germplasm.

e) Development and utilization of latest biotechnological approaches, particularly in the field of micro propagation, reproductive biology and documentation of selected species.

f) Enforcement of regulatory acts to protect our natural forest resources.

g) The traditional practitioners have to be identified and honored.

h) A team work amongst taxonomists, ethnobotanists, ethnopharmacologists, physicians and phytochemists is must for the fruitful outcome on medicinal plant research.

i) Information on inventory methods, safe harvest limits, regeneration status and management prescriptions for important medicinal plants need to be studied and published.

j) The local communities who are well known for their knowledge of the medicinal properties of various plants needs to be involved in conservation and management of medicinal plants.

Suggestions

a) Collection of endangered and rare species from forests needs to be stopped.

b) Endangered and rare species needs to be multiplied under in situ or ex situ conditions. Service from latest biotechnological methods can be utilized.

c) Destructive methods of collection of medicinal plants need to be abandoned.

d) In situ conservation needs to be emphasized by managing “Medicinal plant conservation areas” (MPCA).

e) Ex situ conservation needs to be promoted by establishing the germ plasm and gene banks of commercially important medicinal plants.