

Bayero Journal of Pure and Applied Sciences, 13(1): 46 - 52 ISSN 2006 – 6996 ETHNOBOTANICAL SURVEY OF MEDICINAL PLANTS USED IN THE MANAGEMENT OF GASTROINTESTINAL INFECTION IN UNGOGO, KANO STATE

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ABSTRACT

Gastrointestinal infections are major health problem in developing countries, leading to morbidity and mortality especially in rural communities. Drug resistance to human pathogenic bacteria has been commonly reported all over the world. This study was aimed at providing inventory for the plant species used in management of gastrointestinal infections among the indigenous people of Ungogo, Kano State-Nigeria. A semi-structured questionnaire was administered to individuals with history of gastrointestinal infections, local people with traditional medicinal knowledge and traditional medicine practitioners across eleven (11) wards of Ungogo local government area. A total of 118 respondents were obtained, 100 with history of gastrointestinal infections and 18 are traditional medicine practitioners from 33 communities of Ungogo, Kano. Socio-demographic information of respondents was evaluated. Responses indicated that, twenty six (26) plant species, belonging to sixteen (16) families were often used for the treatment of gastrointestinal infections. Majority of plant species are of family fabaceae. Anogeissus leiocarpus, Boswellia dalzielli and Vitex doniana were the most frequently plant species mentioned. Method of preparation and mode of administration are maceration and oral respectively. Majority of plant species were wild and usually used for treatment of diarrhea and pile. The study revealed 26 plant species were used for management of gastrointestinal infections and Boswellia dalzielli, Anogeissus leiocarpus and Vitex doniana were frequently used plant species. Conservation and sustainable use of plant species should be embraced in order to ensure they don `t extinct due to excessive use, Key words: Survey, Plant, Gastrointestinal, Infection, Management

INTRODUCTION

Plant diversity plays a vital role in serving the ecosystems and in maintaining and preserving ecological balance and stability in the whole world. Different plant species have been used in ethnomedicine since ancient times (Polat et al., 2015; Akgül et al., 2016). Medicines of the Egyptians (3000 BC; pharaohs), the Greeks (400 BC; Hippocrates), and the Romans (37 BC; Dioscorides) have a longstanding history. Plants have been used as the richest and valuable sources for traditional as well as modern medicines in Asia and Africa. The medicinal plants are good sources of drugs in traditional system for the cure of diseases (Kaleeswaran et al., 2019). Various societies that make up the Nigerian State have for long relied on the indigenous health system which was developed as a response to their prevailing environmental conditions and it involves the use of locally available resources to prevent and cure diseases. It is a natural health care system which many generations of Nigerians The practice transcends the have used. maintenance of good health of the people as it also protects them from the menace of wild animals, evil spirits, accidents, provide bountiful harvest, good luck and other human activities (Roan, 1999; Toyin 2011). Medical practice in Hausa locality is dominated by herbal practitioners that includes several hundred plant species available in the immediate environments, as well as a smaller number of plants imported from other parts of Nigeria and abroad. Elements of animal and mineral origin are also part of the practice. Another very imperative method of therapy is traditional Islamic treatments, invocations of Allah through prayer (Stock, 1985; Wall, 1988). The major concerns of human life throughout the

globe is health care and there is a continuous and urgent need to discover new antimicrobial compounds with diverse chemical structures, cheap, easily available with novel mechanisms of action, because of emergence of new infectious diseases in the world. Another concern is the development of resistance by pathogens to the antibiotics in current clinical use (Parekh and Chanda, 2008). In developing countries, gastrointestinal tract diseases become a major health problem leading to morbidity and mortality in rural communities. Over 500 million cases of diarrhea in children and adults are being reported annually in Asia, Africa and Latin America (Hunt and Ballard, 2013). At least 5 million children died due to such disorder (WHO, 1996).Researches (Anh et al., 2001; Dinitrious and Russeli, 2002; Priska et al., 2003) have demonstrated that pathogens causing gastrointestinal disorder are showing resistance to western drugs and therefore, the search for more safe and effective antimicrobial compounds is important. A lot of traditional medicines have been utilized in the treatment of several diseases including gastrointestinal tract infections. It was estimated that relatively 50% synthetic drugs have constituents originated from plant materials (Rodders et al., 1996). Role of natural products, herbal medicine and tribal and traditional medicine is increasingly appreciated for prevention and cure of human ailments (Janardhanan and George,

2006). This study was conducted to document the occurrence of medicinal plants used in the treatment of gastrointestinal infection in Ungogo, Kano State.

MATERIALS AND METHODS Study Area

The survey study was conducted at Ungogo local Government Area, one of the eight (8) metropolitan local governments of Kano State. Ungogo is located between latitudes 12° 05" 26' and 12° 09" 06' N, longitudes 8°29"48' and 8° 49"67' E. It has a total land area of 204 km² and a human population of 369,657 as at the 2006 human census (NPC, 2006). It has eleven wards which settles the population and among them are; Kadawa, Karo, Fanisau, Zango, Rijiyar Zaki, Rangaza, Yadakunya, Ungogo, Gayawa, Bachirawa and Tudun Fulani. Borders with Dawakin Tofa to the North, Dala to the west and Miniibir to the South and East of Ungogo local government fall within the Sudan Savanna Agro-ecological Zone which is characterized by two seasons (dry and wet season). The dry season comprises of hamattan period (low temperature, dry, windy, dust and sometimes with low visibility), sunny and hot, usually between November to April while wet season is usually warm, humid and variable rainfall pattern and is between May to October of everv year.



Figure 1: Map of Ungogo local government Area



Special Conference Edition, April, 2022 Data Collection

A semi-structured questionnaire was administered to herbal traditional medicinal practitioners and local people with traditional medicinal knowledge to the eleven (11) wards of Ungogo Local Government Area (LGA). At first stage, Ungogo LGA was purposively selected from the 44 LGAs of Kano State because of its multiple traditional settlements and preponderance of renowned traditional healers within its locality (NPC, 2006). At the second stage, three communities each from the 11 wards of Ungogo LGA were randomly selected and surveyed.

RESULTS AND DISCUSSION

In this study, the use of medicinal plants and their potential applications in the treatment of gastrointestinal disorders reflect the practice of ethnomedicinal knowledge within Ungogo, Kano. Traditional medicine remains the major resource of phytotherapy to the people of Ungogo, due to reasons related to improvement of health after treatment, low cost of drug, non-availability of synthetic drugs in some area and people have become more accustomed to and comfortable with traditional healing (Audu, 1995). The losses of valuable medicinal plants due to population pressure, agricultural expansion and deforestation have been widely reported (Abebe, 2001; Berhan and Dessie, 2002). Therefore, documenting indigenous knowledge becomes essential so as to preserve the traditional knowledge and valuable information passed verbally from generation to generation which can be lost whenever a traditional medical practitioner passes awav conveying the said knowledge to the upcoming generations. Eighteen (18) traditional medicinal practitioners were interviewed, out of which 10 were herbalists, 5 hunters and 3 farmers. A total of 26 plant species, belonging to 16 families were identified. Local names of plant species were ascertained by respondents, while family and

botanical names were validated at the Herbarium of Plant Biology Department, Bayero University Kano and family fabaceae was the most frequently mentioned. Boswellia dalzielli, Anogeissus *leiocarpus* and *Vitex doniana* with frequency index of 15.49%, 8.45% and 8.45% respectively are the most frequently plant species used. Sclerocarya birrea and Mangifera indica are another two plants species often used by the practitioners with 7.04 % frequency each. However, Moringa oleifera and seven plant species were observed to be less used with 1.41% frequency index each. Studies of Awoyemi et al. (2012) and Abubakar et al. (2017) revealed 82% of the plants are used for treatment of various ailments which includes; stomach ache, diarrhea, measles, malaria, fever, nose bleeding, jaundice and pile were sourced from wild, while 18% were cultivated. These findings are in accordance with this study, 73.1% were sourced wild while 26.9% cultivated. In addition, Olajuyigbe and Afolayan (2012) reported the family fabaceae had the highest number of species being used for treating gastrointestinal disorders. Stem bark of Boswellia dalzielli, Anogeissus leiocarpus and Vitex doniana were the most frequently plant species used for the treatment of gastrointestinal infection. Sani and Aliyu (2011), Mudansiru et al. (2016) and Abubakar et al. (2017) reported B. dalzelii leaves, B. odorata and A. leiocarpus stem bark were used for the treatment of yellow fever, diarrhea and pile. This finding suggests the use of the plant species for management of gastrointestinal infection. Although, the plant parts and species used might not be the same as in case of *B. dalzelii* leaves and B. odorata but their efficacy was recorded in treatment of gastrointestinal infection. Majority of the traditional medicinal practitioners are within the age group of 30-40 and 41-50 with 27.78% each and mostly males (94.44%) with non-formal education (66.66%).

Bio-data	Frequency				
Sex					
Male	91				
Female	9				
Age group					
0-10	7				
11-20	26				
21-30	37				
31-40	17				
41-50	6				
51-60	2				
61-70	5				
Educational Status					
Tertiary	20				
Secondary	61				
Primary	4				
No Formal Education	15				
Occupation					
Administrative Officers	8				
Teachers	10				
Traders	13				
Tailors	2				
Laborers	5				
Drivers	4				
Pharmacist	2				
Farmers	20				
Carpenters	4				
Housewives	4				
Students	22				
Children	6				

 Table 1: Socio-Demographic Information of Patients with Gastrointestinal Infection in

 Ungogo LGA, 2019

Table 2: Socio-Demographic Information of Traditional Medicinal Practitioners in Ungogo LGA, 2019

Bio-data	Frequency	Percentage (%)
Sex		
Male	17	94.44
Female	1	5.56
Age group		
30-40	5	27.78
41-50	5	27.78
51-60	4	22.21
61-70	3	16.67
71-80	1	5.56
Educational Status		
Tertiary	-	-
Secondary	5	16.67
Primary	1	5.56
Non formal education	12	66.66
Practitioners		
Herbalists	10	55.56
Farmers	5	27.77
Hunters	3	16.67

Botanical names	Frequency	Frequency index (%)	Source	Medicinal Use
Sclerocarya birrea	5	7.04	Wild	Pile and Diarrhea
Erythrina senegalensis	2	2.82	Wild	Diarrhea and Pile
Chrozophora senegalensis	2	2.82	Wild	Diarrhea
Piliostigma reticulatum	2	2.82	Wild	Diarrhea
Parkia biglobosa	4	5.63	Wild	Diarrhea
Cochlospermum tinctorium	2	2.82	Wild	Fever
Boswellia dalzielli	11	15.49	Wild	Pile, Diarrhea
Citrus aurantifolia	2	2.82	Cultivated	Pile
Mangifera indica	5	7.04	Cultivated	Stomach ache
Vitex doniana	6	8.45	Wild	Pile and Diarrhea
Anogeissus leiocarpus	6	8.45	Wild	Dysentery and Diarrhea
Jatropha curcas	2	2.82	Cultivated	Fever
Moringa oleifera	1	1.41	Cultivated	Diarrhea
Azadirachta indica	2	2.82	Cultivated	Diarrhea
Khaya senegalensis	1	1.41	Wild	Stomach ache and
				Diarrhea
Prosopis Africana	2	2.82	Wild	Pile
Tamarindus indica	1	1.41	Wild	Abdominal pain
Ficus thonningii	2	2.82	Wild	Diarrhea
Detarium microcarpum	1	1.41	Wild	Pile
Ziziphus abyssinica	1	1.41	Wild	Diarrhea
Guiera senegalensis	4	5.63	Wild	Diarrhea
Hyphaene thebaica	2	2.82	Wild	Diarrhea
Commiphora kerstingi	1	1.41	Cultivated	Diarrhea
Faidherbia albida	2	2.82	Wild	Diarrhea
Ceiba pentandra	1	1.41	Wild	Abdominal pain
Adansonia digitata	1	1.41	Wild	Diarrhea

 Table 3: Frequency index of plant species used, source and medicinal uses for the treatments of gastrointestinal infections in Ungogo, 2019

Table 4: Names, parts,	preparation and	administration	of medicinal	plant species	used for	treatment of	gastrointestinal
infections in U	Jngogo, 2019						

Botanical name	Family	Common	Local name	Parts used	Method of	Mode of
	Name	name	(Hausa)		preparation	administration
Sclerocarya birrea	Anacardiaceae	Nut/plum	´´Danya`´	Root	Maceration	Oral
Erythrina senegalensis	Fabaceae	Coral tree	´´Minjirya`´	Bark	Maceration	Oral
Chrozophora senegalensis	Euphorbiaceae	Arabic (Senegal)	´´Damagi`´	Whole plant	Maceration	Oral
Piliostigma reticulatum	Fabaceae	camel's foot	´´Kalgo`´	Bark	Decoction	Oral
Parkia biglobosa	Fabaceae	African locust bean	´´Dorawa`´	Seed pod	Decoction	Oral/bath
Cochlospermum tinctorium	Cochlospermaceae		´´Rawaya`´	Bark	Maceration	Oral
Boswellia dalzielli	Burceraceae	Frankincense/ olibanum-tree	´´Ararrabi/ Hannu`´	Bark	Maceration	Oral
Citrus aurantifolia	Rutaceae	Lime	´´Lemon tsami`´	Fruit	Maceration	Oral
Mangifera indica	Anacardiaceae	Mango	´´Mangwaro`´	Leaves	Maceration	Oral
Vitex doniana	Verbanaceae	black plum	´´Dinya`´	Bark	Maceration	Oral
Anogeissus leiocarpus	Combretaceae	African birch/Axle	´´Marke`´	Bark	Maceration	Oral
Jatropha curcas	Euphorbiaceae	physic nut	´´Raidoree/	Root	Decoction	Oral
			Binida zugu`´			
Moringa oleifera	Moringaceae	Moringa	´´Zogale`´	Leaves	Decoction	Oral
Azadirachta indica	Meliaceae	Neem	´´Dogonyaro`´	Leaves	Maceration	Oral
Khaya senegalensis	Meliaceae	African Mahogany	´´Madaci`´	Bark	Decoction	Oral
Prosopis Africana	Fabaceae	African mesquite	´´Kirya`´	Bark	Maceration	Oral
Tamarindus indica	Fabaceae	Tamarind tree	´´Tsamiya`´	Bark	Maceration	Oral
Ficus thonningii	Moraceae	Wild fig	´´Chediya`´	Bark	Decoction	Oral
Detarium microcarpum	Fabaceae	Sweet detar	´´Taura`´	Bark	Maceration	Oral
Ziziphus abyssinica	Rhamnaceae	Large jujube	´´Magarya`´	Leaves	Maceration	Oral
Guiera senegalensis	Combretaceae	Moshi medicine	´´Sabara`´	Bark	Maceration	Oral
Hyphaene thebaica	Aracaceae	Doum palm	´´Goruba`´	seed	Maceration	Oral
Commiphora kerstingi	Burseraceae	Myrrh	´´Dashi`´	Bark	Maceration	Oral
Faidherbia albida	Fabaceae	Apple ring	´´Gawo`´	Bark	Maceration	Oral
Ceiba pentandra	Malvaceae	Cottonn tree	´´Rimi`´	Bark	Maceration	Oral
Adansonia digitata	Malvaceae	African baobab	´´Kuka`´	Bark	Maceration	Oral

CONCLUSION

The study revealed 26 plant species were used for the management of gastrointestinal infections in Ungogo and the most frequently used plant species are *Boswellia dalzielli, Anogeissus leiocarpus* and *Vitex doniana.* The study also indicates that the traditional medical practice by Hausa populace is dominated by males and most of the traditional medicine practitioners as well as patients with history of gastrointestinal infections are males who are mostly from rural areas.

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