IMPACT OF INDIGENOUS MEDICINE ON WOMEN DISEASES WITH SPECIAL REFERENCE TO A VILLAGE OF DIBRUGARH DISTRICT

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Abstract-

Anything including different materials, things, skills that help in cure of diseases may be termed as medicine. Indigenous medicines are those medicine which are used different communities traditionally from a long time. Different herbs, montro's etc are uses in cure of diseases through indigenous medicine. In this research paper a study is made on women related diseases, women patient, indigenous women medicine provider of a selected village. We will discuss about women diseases and medicine after women medicine provider of the selected village. We are divide the diseases in to two category on the basis of medicine. These are Medicine of Common diseases and Medicine of Women related diseases.

Keywords-
Indigenous Medicine, Indigenous Medicine according of different communities , Traditional belief of Indigenous Medicine among communities, Impact and Changes of Indigenous Medicine on communities etc.

1.0 INTRODUCTION

Anything including different materials, things, skills that help in cure of diseases may be termed as medicine. There are different types of medicine such as Indigenous medicine, Allopathic medicine, Homeopathic medicine, Ayurvedic medicine etc. Indigenous medicines are those medicine which are used different communities traditionally from a long time. Different herbs, montro's etc are uses in cure of diseases through indigenous medicine. Allopathic medicines are discovered by modern medical science from time to time to cure of different diseases. Homoeopathic are discovered by Homoeopathic research and the ayurvedic medicines are discovered by ayurvedic research. But while treatment or cure of diseases people use different medicine as ayurvedic, allopathic depending on their traditional family belief, economic condition of family as well as impact of social belief also. In this research paper a study is made on women related diseases, women patient, indigenous women medicine provider of a selected village. The selected village is 1 no Mohmari of Duliajan legislative assembly, Dibrugarh district, where Merbil majuli village in East, Pashuti village in West, Pavojan in North and river Burhidihing is situated in South side. In the village there are total 411 no of family where 3 communities are observed i.e. Kolita, Tea tribe, Nepali. Among them in Kolita community 7 no of women medicine provider, among tea tribes 4 no. In Nepali community there are only men medicine provider who only provide medicine of common diseases so they are not included in the research paper. The name of women medicine provider along with the medicine of the respective communities are mentioned below-

<table>
<thead>
<tr>
<th>ETHNIC GROUP</th>
<th>NAME</th>
<th>AGE</th>
<th>DISEASES</th>
</tr>
</thead>
<tbody>
<tr>
<td>KOLITA</td>
<td>MRS.RENU TAMULI</td>
<td>51</td>
<td>DAAT PUKE KHUWA</td>
</tr>
<tr>
<td></td>
<td>MRS.NIRU KAKOTI</td>
<td>56</td>
<td>KASUMURIYA (PILES), MUKH LOGA.</td>
</tr>
<tr>
<td></td>
<td>MRS.DEHESWORI TAMULI</td>
<td>74</td>
<td>KAANH (COUGH), SAAHONIYA.</td>
</tr>
<tr>
<td></td>
<td>MRS.MAKONI TAMULI</td>
<td>59</td>
<td>KAAN GELA</td>
</tr>
<tr>
<td></td>
<td>MRS.JEUTI DUTTA</td>
<td>70</td>
<td>MAHEKIYA PAT BIKH (MENSTRUATION PAIN)</td>
</tr>
<tr>
<td></td>
<td>MRS.MALOTI DEKA</td>
<td>56</td>
<td>MAHEKIYA PAT BIKH (MENSURATION PAIN)</td>
</tr>
<tr>
<td></td>
<td>MRS. KOMOLA PATHOK</td>
<td>51</td>
<td>AAL JIVA VAL KORA, JUIYA PURA, PNEUMONIA.</td>
</tr>
</tbody>
</table>
In the village there are 3 types of sub communities in tea tribe community i.e. Murari, Gondo, Khariya. There are 13 nos of Khariyas who took vow of the Christianity in the year 2000 and after that they gave up the habit of using indigenous medicine. They go to the Church only and pray lord Jesus. They believed that there is nothing beyond and behind Jesus. But till now few old people believed indigenous medicine and some time they used it in cure of their diseases.

Nextly we will discuss about women diseases and medicine after women medicine provider of the selected village. We are devide the diseases in to two category on the basis of medicine. These are

1) Medicine of Common diseases
2) Medicine of Women related diseases

The term Common diseases referred to the diseases which is common among both men and women. For example – cough, tonsil etc. The medicine which help in cure of common diseases are called as common medicine diseases. The diseases which are observed among only women are called as women related diseases and the medicine which are uses for cure of such diseases are called as medicine of women related diseases. Some of the women related diseases are For – Mensuration pain, white discharge etc.

1.1 Aims and Objective
(1) In Assam, there are different communities and ethnic groups observed in every village. The traditional belief, concept, custom etc. among the different groups are vary from each groups. So to study about their belief etc on indigenous medicine is one of the aim of this paper.
(2) Another aim of this paper is to study the changes in uses of Indigenous Medicine.
(3) To see the role of Indigenous Medicine in cure of men and women related diseases.
(4) Another aim of this paper is to collect Indigenous Medicine scientifically.

1.2 Importance
(1) Indigenous Medicines are collected from the respective communities, Which can help in drawing out the scientific values. So , we can’t deny the importance of this medicine.
(2) Another importance is that it helps in increasing the social value of the medicine. Because the social aspects such as social beliefs, tradition, customs etc. are related with different indigenous medicine.

1.3 Scope of Study
A selective study in made on indigenous medicines of both men and women diseases. Along with this, the belief related to men and women diseases are also included in the subject of study.

1.4 Research Method
In this paper the sociological method is applied. To collect the medicine investigation method is used and to give description about the villages historical method is applied. All the data s are collected through field study method with the help of a questionary. After that all the collected data s are explained through descriptive method.

2.0 Indigenous medicine of different communities
2.1 Indigenous medicine of Kolita community
In our study 7 women medicine provider were observed. They provide two types of Indigenous medicine. These are

a) Medicine of common diseases
b) Medicine of women diseases.

They provide medicine of such common diseases are kaah, kesumuriya, sahoniya, kaan gela, juye pura, mukh loga, daat puke khuwa, aal jiva vaal kora etc

For the above mentioned diseases two kinds of medicine are provided. These are

1. Herbal medicine
2. Montro related medicine

The medicine which are collected from herbs are known as herbal medicine. The herbal medicine provided for kaah, kesumuriya, sahoniya, kaan gela, juye pura, pneumonia.

These medicines are-
Kaah : A paste of the ingredients as Leta guti (seed of a wild tree), jaluk (black pepper),keya bon r xipa (root of keya grass) and gave it for regular three days only in morning ( Mrs. Deheswori Tamuli)
Kesumuriya : Kaas kol (curry banana), Amita (papaya) boil togetherly and provide the juice to drink only Saturday and Tuesday. ( Mrs. Niru kakoti)
Kaan gela: Three drops of kunduli (ivy gourd) leaf gives regularly for 7 days inside the ear (Mrs. Makoni Tamuli)
Sahonia: A mixture paste of 1 Leta guti and 5 jaluk to take one day.
Juye pura: A bandage pononuwa (Tar vine) leaf paste in the injured spot. (Mrs. Komola Pathak)
Pneumonia: A mixture juice of jaluk, aada (ginger) and Taj muri leaf to drink for three days. (Mrs. Komola Pathak)

(2) Montro related medicine:

i) Aal jiva vaal kora montro: In this case with the help of kosu tree (taro tree) the medicine provider memorise the following montros-

```
Jom jom jom jom jaathi jaru
Omukar (patient name) jaathi komi poru
```

ii) Daat puke khua niramoiyor montro: In this diseases a paste of banana roots and garlic are prepared and put it on the outside of mouth and memorises the following montro-

```
Nomo gonopoti nombonopoti
Daat pak jarisu moni
Aadi odovut kun toi
Omukar (patient name) datot bokhoti tur
Nomo gonopoti nombonopoti
Mur boson gurur daak
Moi jinote koisu
Hei mote ulai aah
Nomo gonopoti nombonopoti
```

iii) Mukh loga vonga montro:

```
Om sivai nomo
Praboti ye bule, jana moha dev krisi koribo lage
Vikhar saawle pet novore
Tumi krisi juwa
Kuberor taale juwa, kathiya aana
Bolovodro guhaair taale juwa
Haal, nagol, jawoli dibo
Indro r tale juwa maati dibo
Jom rojar taale juwa
Mohikh eti dibo
Tumar brikhov tir haal kora
Tumi krisi loj juwa
Ei buli kuwat kuberor ghorole goisil
Kuberok dekhi ye bistic hol
Kot poduli murot dhaan saawel pori aase
Butoli furies
Provu kiyo aahile aamar ghorole
Parboti ye bule krisi koribo lage
Tumar ghor le kathiya bisari aahilu
Teneke bulilot kathiya esugi dile
Moha deve he khini olop taakor pale
Provu taakor nedekhibo,
Sunga ti homuli uburiyai nebakibo
Jiman krisi koru bulile kathiya ulaa thakibo
Teneke bulilot kathiya sungi ghorot tholehi
Parboti ye bule jana moha dev
Krisi paala ne
Kothiya esungi paisu
Paas dina krisi le gol
Ei porbotor pora hi porbot le uvoi mur korile
Khakol baam korile
Baamok khal korile
Krisi aarji bole dhorile
Khenu joha, khenu bora, khenu khuti jun, maai gutiya
Onek kheti koribole dhorile
dhan ulaise, pokise
krisi te hodasivor mon bohil
khabo laage, bobo lage, ghor le aahibo lage
vu vong nuhuwa hol
```
In a glass of water 3/7 small bamboo stick puts and memorise the above mentioned montro

### b) Medicine of women related diseases

While studying among the Kolita community of women related diseases we observed only medicine of menstruation pain. Two women provide medicine for some diseases. They are-

- Mrs. Jeuti Dutta: The root of *Satamul* with milk are boiled and gave it to drink on the second day of menstruation.
- Mrs. Maloti Deka: She prepared juice of the bamboo leaves and gave it to drink when pain starts.

### 2.2 Indigenous medicine of Tea tribe community:

While studying among the tea tribe community we observed only 4 women medicine provider. They provide the medicines as –

1. **Herbal medicine** (There are two kinds of herbal medicine i.e. common and women related diseases)
2. **Montro related medicine** (There are two kinds of montro related medicine i.e. common and women related diseases)
The diseases of herbal medicines are *daat bikh, prokhobot polom, gaa bikh* etc. Medicines of such diseases are mentioned below-

i) **Daat bikh**: A mixture of raw turmeric is prepared and gave it on the pained teeth.

ii) **Prokhobot polom**: They believed that brinjal flowers should be put on the ear of the patient at the time of pain.

iii) **Gaa bikh**: They believed that regular massage of pure mustard oil removes the body pain diseases.

The diseases of montro related medicines are *grovopat rudh* (control miscarriage), *Opo devote lomva, mukh loga niramoi*.

1. **Grovopat rudh r montro**: In a glass of water a knife put in to the water and memorise the following monstro and gave it to drink to the patient.
   
   *Biswo bosonta ja din ki korta*
   *Sweto dhari dudh dhari tin dhari*
   *Seer he, mokut nehi, mukut he seer nehi*
   *Sow nari, paar uteri*
   *Kobir ki jon jeera montra*
   *Sowa laakh bikhla maati kor be daai.*

2. **Opo dawota lomva niramoi montro**: In a glass of water a knife put in to the water and memorise the monstro and gave it to drink to the patient. They usually provide it specially in case of small children.
   
   *Hor gor gor*
   *Jenke vej le ten ke jai*
   *Jhor re orkaa jhor*
   *Jhor jhor buli ka.*
   *ar raan*
   *Nikol betiko kuti kuti raan*

3. **Mukh loga niramoi**: In a glass of water the below mentioned monstro are memorise and gave to patients to drink
   
   *Hai Maa Mohima Monsha*
   *Omkar(name of patient) asa Nojor Gujor*
   *Asa Jodi Asa*
   *Tui Ashek Owar Songe*
   *Hai Maa Mohima Monsha*
   *Hai Maa Mohima Monsha*
   *Hai Maa Mohima Monsha*
   *Nojor Gujor Aro Asa Jii*
   *Sarai Lai Jaa*
   *Hai Maa Mohima Monsha*

3.0 **Traditional belief of indigenous medicine among communities**

3.1 **Kolita**:

1. Kolitas believed that in case of Mukh loga the glass of water where montros were memorised should not drink while breathing and should drink at East direction. They also believed that while memorising the montros if the medicine provider yawning frequently that means the disease is in a serious condition.

2. Kolitas also believed that all the Indigenous medicine should use on Tuesday and Saturday. The patient should give a *Manoni*(Tamul, Paan, Toka etc) at the time of taking the medicine from the provider. If someone have a desire to learn any medicine they also should give a Manoni to the provider.

3. Another traditional belief among the Kolitas is that if over bleeding problem arise in menstruation time the tiger nails should wear in chest. This diseases arise among those women who touched the mud of Crab cave during menstruation period.

4. According to the Kolitas of the selected village if any bitter food item take at night then hearing problem may be arise.

3.2 **Tea Tribes**:

1. Tea tribes of the selected village believes that for cure of every diseases Maa Monosha is related. So the people should pray Maa Monosha

2. If the Opo dawota Lomva diseases arise among the elder people they show abnormal behaviour and in case of children their stomach expanses.

3. If the Graam Puja is not celebrate regularly in the villages, many unknown diseases may arise among the people

4. Khodona, a traditional tea tribe tattoo should draw in their body which may help in removing pain from their body.
Another belief among them is that at Kali Puja night the broom sticks should not keep out side from home. Because the witch may attack or harm to the people.

Among the tea tribe community the old men of Muraris never take fish. While asking the cause behind it they replied a historic story. They said it as, ‘Mash khale vorit kholu hoi. Abar Longkar roja Rawon a tewr makor logot torko lagi vorira guraisil. Maake diya ovihapor babai rawonor vorit bohur kholu hol. Tatia rawona maakok kakut korat maake ai ovihapor pora mukto hoboloi nodit vori dhuboloi kola. Eiar pasot Rawona nodir panit vori jubiar loga kholu bur maas hoi paniloi name gol.’’ So, for this story they not eat fish.

4.0 Impact and Changes of indigenous medicine on communities

4.1 Impact and Changes of indigenous medicine on the basis of 150 women respondent
(1) Among the Nepali community no women related medicine provider are available. So they uses that medicine which are available among the Kolita and Tea tribe community. There are few male medicine provider who provide medicine of common diseases and Nepali s also use that medicine.
(2) There are different medicine observed for the women related diseases. But due to lack of proper use only few believe it.
(3) Among 150 respondent 51 no. believe on modern medical science and indigenous medicine provider, 35 no. believe only indigenous medicine provider and 64 no. has comment.
(4) Among 150 respondent 81 people believe in indigenous medicine provider because of the economic problem. As we know that modern medical treatment is very expensive. The local indigenous medicine provider are easily available within a short distance. So , 21 women prefer it. Other 48 women go to indigenous medicine provider when modern medical science fails in cure of their diseases.
(5) Among the Tea tribe community one dhai (The women who helps in deliver of baby) also observed. But after getting free govt. Medical treatment and check up they need not to do that particular work. But in case of doing abortion of baby the believer and user of such indigenous medicine was observed.
(6) In between the Herbal indigenous medicine and Montros related indigenous the women believes more on herbal indigenous medicine.
(7) Among the 150 omen respondent majority believe on the medicine of common diseases. No. 113 s believed on mukh loga, 92 s believe on kaah and 88 believe on gaa bikh.

4.2 Impact and Changes of indigenous medicine on the basis of 11 Medicine provider
1. People goes to take medicine from those medicine provider whom they believe most.
2. Due to the lack of user, medicine provider left the job of medicine providing.
3. Due to fraud medicine provider people are not interested to take medicine.
4. Due to deforestation problem many valuable herbs are not available in present days. So, medicine provider left their job.
5. The impact of modern science and technology helps in removing the habit of using indigenous medicine.

Above Mentioned list is prepared on the basis of 150 women respondent of three community who believes the indigenous medicines. The medicines are provide only by Kolita medicine provider.

<table>
<thead>
<tr>
<th>Diseases</th>
<th>Kolita</th>
<th>Tea Tribe</th>
<th>Nepali</th>
<th>Total (150)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mukh loga</td>
<td>47</td>
<td>31</td>
<td>35</td>
<td>113</td>
</tr>
<tr>
<td>Daat puke khuwa</td>
<td>15</td>
<td>27</td>
<td>11</td>
<td>53</td>
</tr>
<tr>
<td>Juye pura</td>
<td>32</td>
<td>22</td>
<td>17</td>
<td>71</td>
</tr>
<tr>
<td>Kesumuriya</td>
<td>09</td>
<td>05</td>
<td>11</td>
<td>25</td>
</tr>
<tr>
<td>kaah</td>
<td>42</td>
<td>31</td>
<td>19</td>
<td>92</td>
</tr>
<tr>
<td>Kaan gela</td>
<td>11</td>
<td>07</td>
<td>03</td>
<td>21</td>
</tr>
<tr>
<td>Pneumonia</td>
<td>17</td>
<td>14</td>
<td>06</td>
<td>37</td>
</tr>
<tr>
<td>Saahoniya</td>
<td>31</td>
<td>16</td>
<td>11</td>
<td>58</td>
</tr>
<tr>
<td>Mahekiya. Pet bikh</td>
<td>38</td>
<td>10</td>
<td>04</td>
<td>52</td>
</tr>
<tr>
<td>Mahekiya.Pet bikh</td>
<td>10</td>
<td>00</td>
<td>00</td>
<td>10</td>
</tr>
<tr>
<td>Aal jiva val kora</td>
<td>07</td>
<td>00</td>
<td>00</td>
<td>7</td>
</tr>
</tbody>
</table>

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Above Mentioned list is prepared on the basis of 150 women respondent of three community who believes the indigenous medicines. The medicines are provide only by Tea Tribe medicine provider.

5.0 Conclusion:
In conclusion it can be said that from the primitive there is a traditional belief of indigenous medicine among the people of India. In the great book ‘Athrworveda’ there is a very widely explained about the uses of indigenous medicine. In the present day, although modern science and technology has entered in many aspect of human life yet many people believe and use indigenous medicine in cure of their diseases till now also. After study in the selected village we attain the following conclusion -----
1) Although they get proper facility of modern medical science yet there are also some believer and user of indigenous medicine among the villagers.
2) Few women of new generation also use indigenous medicine because of family impact. But they are not interested to learn the indigenous medicine specifically the Montros.
3) The medicine provider had left the job of providing medicine due to the lack of patient. For example Tonsil diseases.
4) Among the ethnic group the uneducated tea tribe people are interested in it of the selected village.
There are community observed in every village of Assam. In our study 3 ethnic groups were observed. Sometime they use some indigenous medicine of other groups also which shows the cultural harmony of our society. Traditional beliefs also observed among the ethnic groups in case of indigenous medicine. On this topic more research can do in future.

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