



## Healing practices of traditional healers of Phalelung Rural Municipality, Panchthar District Koshi Province, Nepal

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### ABSTRACT

**Context:** The data collection site Phalelung, Panchthar of Koshi province Nepal has large climatic biodiversity. Traditional healing practice is very old culture and traditions of all communities living inside Nepal. **Objectives:** The main objective of this study was to assess the traditional healing practices in Limbu community of Phalalung, Panchthar Nepal. **Methods:** A descriptive, cross sectional research design was adopted to study the traditional healing practice of healers of Phalelung, Panchthar of Koshi province, Nepal. A data collection form was used with open ended questionnaires and face to face interview was used to collect the data from the healers. **Results:** Plants were major source of healing agents. Most of the traditional healers were above age 60. Male dominated. Healers diagnosed an illness based on general observation, pulse feeling and symptoms described by the patient. Unavailability of herbs to treat the illness was the major barrier to provide the healing service. **Conclusion:** Traditional healer's knowledge might be disappeared due to lack of proper documentation and the government should promote an integrated approach with modern medicines.

**Keywords:** plant resources, Limbu community, Phalelung Rural Municipality, traditional healing

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## INTRODUCTION

From the ancient time, illness, diseases and death have been an intimate part of the life in every community. In their attempts to understand and intervene in the nature of suffering different culture and societies throughout the time developed fundamental principles and paradigms to explain and describe health and illness creating framework to help the afflicted people and achieve healing (Lichtenstein A H et al, 2017). The indigenous healing is practiced widely around the different country mainly for primary healthcare. People health seeking behavior shows that traditional healing occupies 70% in Uganda, Rwanda and India, whereas this percentage in Pakistan and Nepal is 80%, and in Ethiopia 90% (Richter M, 2003 and Baniya, R, 2014). There is a great diversity of healing practice around the world. Sickness to wellness is the major driving concept of any healing culture. Physical intervention often involves in all healing practice that is use of herbs and/or other healing agents and/or Mantra chanting. ॐ त्र्यम्बकं यजामहे सुगन्धिं पुष्टिवर्धनम् । उर्वारुकमिव बन्धनान्मृत्योर्मुक्षीय मामृतात् ॥English translation: We worship the three-eyed One, who is fragrant and who nourishes all. Like the fruit falls off from the bondage of the stem, may we be liberated from death, from mortality (Dudeja JP, 2018). Mantra meditation is also widely practice as healing approach (Tseng AA, 2022). People in Nepal strongly believe on traditional medicine and about 80% of population depends upon the traditional medicines for primary healthcare (World Health Organization, 2014).

The healing method practiced in Nepal are scholarly medical system using modern medicines, folk medicine system and shamanistic system (Raut, B, 2011 and Aryal, KK, 2017). Other healing system practiced in Nepal are Ayurveda, Tibetan medicine, Faith healing, Sowa-Rigpa healers and allopathic (Tashi Stobgais et al-2023). Sowa-Rigpa (Amchi) system is mostly practiced in the high hill Tibetan boarder of Nepal. These Amchis rely on medicinal plants found in the Himalayan regions which are collected from the wild and processed and then given to the patients (Tenzing Bista et al. 2008) Nepal is a land full of legends, myths, magic and mysteries. The juxtaposition of millions of gods and goddesses and the most powerful demons at different points gives a significant perspective to this magic and mystery. (Nepal Tourism Board, 2024) Nepali religious healers can be divided into a) dhami-jhankri (धामी-झाङ्करी) b) pandit-lama-gubhaju-pujaris (पण्डित-लामा-गुभाजु-पुजारी) and c) jyotishis (ज्योतिषी). Dhami-jhankri are shamans, pandit-lama-gubhaju-pujaris are various ethnic and religious priests groups in Nepal, while astrologers are explaining the good and bad of different planets in patient. Dhami-jhankris act as mediators between the spiritual world and the material world of everyday life. (Giri B et. al. 2006). One study was conducted in Magar community of Nepal (Khanal et. al. 2020). The Magars are one of the oldest known tribes in Nepal; however, their origin is unclear. They are probably of Tibetan origin because their language and dance are similar to the Tibetan tradition. Magar community is the inhabitant of high mountain regions and lower hilly regions of Nepal. But with the urbanization, they migrated to the plan area of Nepal also. Magars have two main factions (East and West) and are divided into several clans. The belief of Magar community about the cause of diseases were vayu-batas (खराब हावा - bad air), masan (मसान - disease caused from burial place), bhut-pret (भूत र दुष्ट आत्मा - ghosts and evil spirits) Grahadasha (ग्रहदशा - planets position), Bokshi (बोक्सी - witch), pitri risako (पित्री

रिसाको - angry forefathers), and kul deuta risako (क्रोधित पैतृक देवताहरू - angry ancestral deities). The method of diagnosis of diseases were based on observation of eye, nadi (pulse) and akcheta herne (counting the rice grain). They are using mainly herbs for the treatment. Another study conducted among the satar and Rajbangsi communities of Jhapa, Koshi Province, Nepal. Rajbangsi community is migrated from North East India to the plain Indian boarder area of Nepal. The story of the Rajbangsi ethnicity is one of deep-rooted traditions, vibrant festivals, and an unwavering commitment to preserving their unique heritage. This exploration unravels the tapestry of Rajbangsi culture, delving into their rich traditions, artistic brilliance, and the resilient spirit that defines their existence. The Satars live in the most eastern part of the Terai of Nepal in Morang and Jhapa districts. They migrated from Santhal Pargana and Choot-Nagpur in Bihar, India to Nepal. Satar and Santals may share a common origin. In India they are called Santal and in Nepal they are called Satari (Ghimire P, 1980). These communities are using five healing techniques like Phukphak (chanting the mantra), Tantric Puja (connected with worship of a particular movement of disease causing demons in Buddhism and Hinduism), Bali (sacrifice of animal or fruits), Jantar-manta (offering amulet with chanting mantra) and Kul bigreko (unhappy ancestors) (Raut, B et al, 2018). The ethnomedical practice among the Limbu community of eastern Nepal found that they are using the wide range of herbal resources (Limbu DK, 2013). The Newah Community of Chitlang, Makawanpur District, Central Nepal is using thirteen plant species for the treatment of cough and cold, eight species for the treatment of blood pressure and diarrhea and dysentery, seven species each for fever and toothache (Joshi N. et al, 2010). Another research study conducted in the Rasuwa district of Central Nepal reported the use of 56 plants and 60 herbal formulations (Uprety, Y et al, 2010). A research conducted in Sikkim among the Lepcha, Bhutia and Nepalis reported that they strongly belief on supernatural forces and deities (Panda AK & Mishra S, 2012). There are many herbal remedies for the treatment of fever. Feverfew (*Tanacetum parthenium* L.) it has significant analgesic, anti-inflammatory and antipyretic effects, which confirmed the popular use of the leaf herb for migraine headaches, fever, flu and. and arthritis (Pareek A et. al 2011).

## METHODS

Questionnaires for data collection were prepared for face to face interview. A written consent was taken from all 30 healers (respondents) of Phalalung Rural Municipality, Panchtar District, Eastern Nepal representing all eight wards (divided parts of the municipality- administrative units). The collected herbariums were identified in the National Herbarium Center, Godavari, Department of plant resources, Government of Nepal by Senior scientific officer Mr. Binod Basnet and Central department of Botany, Tribhuvan University, Kirtipur, Kathmandu by Research scholar Ms Pramila Kumari Gachhadar.

## RESULTS AND DISCUSSION

According to the (fig 1) maximum traditional healers were between age group 51-60 i.e n=9 and dominated by male healers(99%). This finding was similar with that of Khanal DP et. al.2020, Baniya, R et al. 2014. The main method of diagnosis was

interpreted with general symptoms. i.e n=26 and this finding was similar with that of Khanal DP et al (2020), Baniya R. (2014) and Aryal, KK et al (2017) (Table 1).

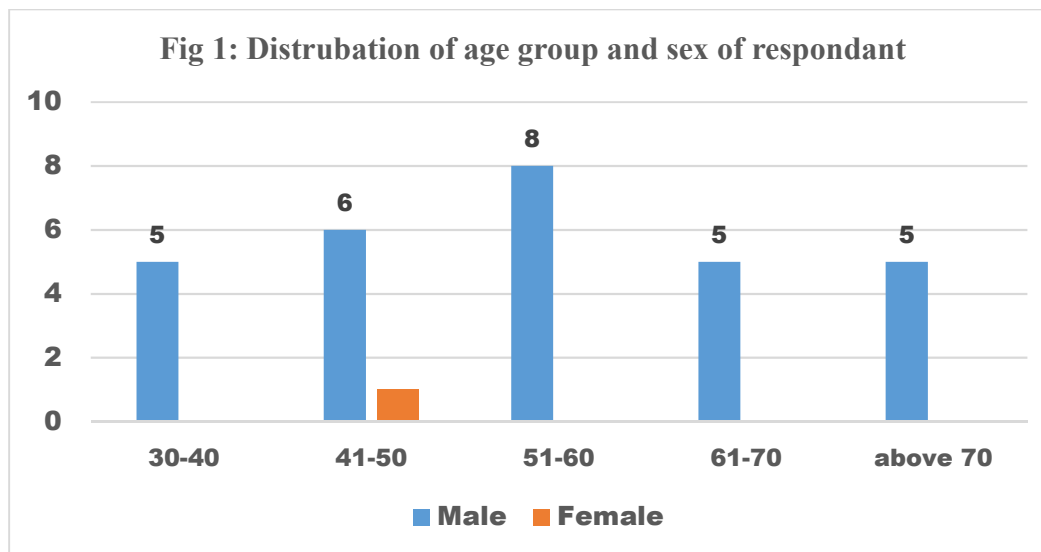


Table 1: Method of disease diagnosis by traditional healers

	Method of disease diagnosis	Frequency	Percent
1	Observation and interpretation of general symptoms	26	86.7%
2	Sent to the physicians and call back to TH	2	6.7%
3	Nadi parikshyan (feeling of pulse)	1	3.3%
4	Akshita herney (counting rice grain)*	1	3.3%
	Total	30	100%

\*= The healers ask the rice grain with patient and divide into three parts with chanting Vedic Mantra and also he ask and pronounce the blessing of his ancestors. As the healer told that he cannot disclose everything but he is counting odd and even numbers of the grains in different parts to forecast the presence or absence of the disease. (Ref: photo no: 6 in the appendic section).

Table 2: Distribution of crude drugs based on their parts (n=96)

Parts of plant used	Frequency	Percentage
Leaves	18	18.75%
Rhizomes	17	17.70%
Fruits	17	17.70%
Roots	13	13.54%
Whole plant	13	13.54%
Seeds	6	6.25%
Barks	5	5.20%
Flowers	3	3.15%
Other parts	4	4.16%
Total	96	100%

The leaves were the most used part of particular plant as crude drugs i.e n=18 with rhizomes and fruits being at 17% followed by roots and whole plants at 13% and seeds 6.50 %, bark 5,20 %, flowers 3.15 % and other parts 4.16 %

respectively. Five remedies were identified for fever used by healers in the Phalalung and cross checked with secondary literature data (Table-3). Different healers were using different herbal preparations but the common for all was the *Swertia chirayata* L powder. For tremor fever, whole *S. chirayata* L plants small pieces were boiled in half liters of water until the volume is reduced to approximately 100 milliliters. The filtered water was stored in a glass bottle and half spoon given to children once a day for 2 days. For adult, 1 spoon once a day for 2 days and varies to three times a day until cured. Aconite tuber was used as antipyretic in western Nepal (Phoboo S. et al, 2010). The *Picrorhiza kurroa*, Royle ex Benth (Kumar V. et. al, 2016) was used as liver stimulant, treatment for chronic reoccurring fever and for other ailments. In Traditional medicine, such as Ayurveda, Unani, and Siddha, *Ocimum sanctum* L (Shyaula, S. 2012 and Almeleebia TM et al , 2022) was also widely used to treat fever. Table-3: Healing agents for fever.

Table 3: Traditional remedy used by healers for treatment of fever

Local name	Scientific name	Method used	Dose/ frequency
Chiraito लर/फोट्फ]	<i>Swertia chirayata</i> L	About 20 gm powder of aerial parts were boiled in 500 ml water until its concentrate to 200 ml. It was cooled and cloth filtered.	This filtrate was suggested to take once a day for a week
Seto bikhma सेतो बिखमा	<i>Aconitum ferox</i> Wall. ex Ser	A small piece of rhizome was crushed and boiled in about 200 ml water. It was cooled and filtered.	The filtrate was suggested to take once a day for 5 days.
Kutki (rhizome) कुटकी	<i>Picrorhiza kurroa</i> Royle ex Benth	Small piece of dried rhizome was kept in mouth or about 2-3 gm powder boiled and cloth filtered.	As healers showed to keep in mouth. The preparation was taken once a day for 4-5 days.
Tulasi (leaves) तुलसी	<i>Ocimum sanctum</i> L	Few leaves were chewed or boiled in water in about 200 ml and cloth filtered.	The filtrate was suggested to take once a day for 4-5 days.
Tite lahara (aakash beli) तिते लहरा (आकाश बेली)	<i>Cuscuta reflexa</i> L.	The whole plant was crush by adding small amount of water and expressed to get its juice.	2-3 teaspoonful of juice was taken twice a daily

## CONCLUSION

Traditional healers mostly diagnose the diseases by Observation and interpretation of general symptoms. Total 96 plant species were identified during the project work. Top five plant parts used were leaves, Rhizomes, Fruits, Areal parts and seeds respectively. The five herbal resources used as healing agents for fever by traditional healers are fully supported by secondary scientific data. As the traditional healer's knowledge is transfer verbally, there is risk of disappearance if not documented. So government has to put effort to integrate the healer's knowledge with the modern healing system. This present effort sensitizes the local authority about the healing practice around them and plan to integrate the knowledge of the healers with local primary health center's routine activities for the benefit of the public health in the area. Moreover, it can draw the attention of local authority for the cultivation and

preservation of medical plant resources especially endanger species of the study area.

#### **DECLARATION OF CONFLICT OF INTEREST**

No conflict of interest to declare.

#### **DECLARATION OF HONOUR**

We declare on our honour that our results are not fake and made up.

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## APPENDIX



Research assistant taking interview with healers



Traditional healers showing medicinal herbs



Traditional healer counting the rice grain to diagnose a disease



Traditional healer showing medicinal herbs