

ETHNO VETERINARY "FLOWERING HOPE"

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In the changing global scenario the concept of ethnoveterinary medicine is gaining acceptance with growing demand among the elite society for organic products particularly organic animal product and by-products. The awareness regarding adverse effect on humane body on consuming animal product and byproduct derived from animals treated with antibiotics and other drugs has made the people sit and think. The indiscriminate use of antibiotics by quacks and to a lesser extent by modern practitioners, is a cause of concern. The diclofenac effect on vultures is still fresh in our minds, all this necessitate an inclination towards an holistic approach in general and an ethnoveterinary practice in particular to bring a paradigm shift.

EVM and its practice has far fetched importance, many instance of animal slaughtered and consumed during the course of treatment goes unnoticed, throwing the drug withdrawal period and safe meat consumption into thin air. This demand a judicious selection of modern drugs and EVM.

Ethnoveterinary medicine means an indigenous traditional knowledge pertaining to animal health and production. Scientific community no longer can afford to overlook our ancient literature, old generation knowledge, They have maintained their identity even today as a source of valuable information.

EVM has been in practice since time immemorial in Kerala, ancient traditional knowledge of medicinal plants transferred through indigenous communication, percolating from generation to generation is very much standardised and practiced. Kerala which can rightly claim as the birth place of Ayurveda. The generic idea of EVM is not new, Ottamuli chikitsa/ Nattuvaidyam is actively practiced either by a traditional healer or by an older member of a family to treat minor ailments. Ayurveda may be an advanced ethno medicine and its efficacy needs no introduction. However just like any other system of treatments EVM has its limitation and strength. The positive point is regarding little or no side effect. The limitation is lack of repeatability in result and ambiguous patient disease selections.

The therapeutic effect of ginger, garlic, turmeric, black pepper, neem, etc needs no introduction its time tested and stood the pressure of change. Years back when a person /farmer applied turmeric powder on a wound, we thought its superstitious, today multinational

pharma companies are running to get its antiseptic properties patented. Neem, tulsi, garlic etc all still have an untold and an unexplored story to be told in future. However its not a beginning or an end to all ailments, diagnosis plays a role this is the area where the limitation of EVM practice by a lay man apparently resides.

Even though EVM is time tested with proven efficacy and testified by its decades of use, still it needs a stamp of scientific approval and that is through formal validation for acceptance. Now what is validation? According to Pearsall and Trumble (1995) validation means something valid that is sound or defensible and well grounded in terms of logic and predictable cause and effect involving systematized observation of and experiment with phenomenon. Therefore it is timely that a systematized observation and experimentation be carried out to determine the future of EVM. If you look EVM against the background of high cost of modern medicine and potentially severe problem of organism resistance etc. It gives reasons to apply EVM.

The Animal Husbandry scenario in Kerala is noticeably different from other states or other developing countries. On one hand we have 80 % of our total cattle population as cross-bred with moderate or high milk yield and livelihood of many families rest on the income generated through their animals. On the other hand the state have one veterinary dispensary in each panchayat. Therefore experimentation with EVM \ Holistic medicine or novice practice will not go well among the farmers. Moreover EVM practiced by traditional healers having bare minimum knowledge about infectious / contagious disease which can lead to wrong diagnosis, wrong selection of EVM., culminating into undesirable result, thus bringing EVM into poor light. Obviously this very reason necessitate the importance of validation, Thus can be applied scientifically by modern practitioners.

It could be argued that EVM should be validated at the same levels of intensity as modern medicine, although its a distant possibility. Hamood, Fielding and Bishop 1997 have outlined

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