INTRODUCTION

Traditional herbal practitioners play an important role in the health care in developing countries. Global estimates indicate that over 3/4th of the 5 billion population of the world cannot afford the products of western pharmaceutical industry and they have to depend upon the use of traditional medicines, which are mainly obtained from plants (Sharma, 2010). This fact is well complied by the WHO in a written list of medicinal plants list of over twenty thousand species. As a part of the planning to reduce financial crises on developing countries which spend some 40-50% of their total health budget on drugs, WHO currently supports, recommends and helps the inclusion of herbal drugs in national health-care program because such drugs are commonly available within the reach of a common man and as considered to be much safer than the present synthetic drugs (WHO, 2002).

Ethnobotanists and ethnopharmacologists are documenting traditional medical practices and the influence of local remedies in many regions of the world (Mudasir et al., 2009). The central goal of many of these initiatives is to revalidate and promote some old ways of curing and to make people conscious that frequent access to herbal medicines is dependent on the existence of these plants and the ecosystems in which they survive. Validating the efficacy of remedies and returning the results of studies to the people who use them directly is essential.

MATERIAL AND METHODS

The present ethnomedicinal study has been conducted in several localities of Shopian district of Jammu and Kashmir. It is situated in the south-west of Kashmir division (Raza et al., 1978). The study has been carried out in some villages and far-flung areas of Shopian district. The far-flung areas are inhabited by different ethnic tribes such as Gujjars, Bakerwals, and Paharis which are rich in traditional knowledge (Bhat et al., 2012).

Several field trips were undertaken during the spring and summer seasons of the year 2015-2016, with a view to collect plant of medicinal value and to document the indigenous knowledge (Jain, 1967; Croom, 1983). Information regarding the use of medicinal plants was collected from the local people, hakims and tribal people (Gujjer and Bakerwals). Informants were asked questions in their local language. The information about the use of...
plants as medicine and folklore were recorded by personal interviews with tribals (Gujjar and Bakerwals), Paharis, shepherds (chopans), and old experienced villagers under study.

RESULTS AND DISCUSSION

During the ethnomedicinal survey of different inaccessible areas, in Shopian (Jammu and Kashmir), the author found that the local knowledge on medicinal plants abounds and their use is an important link between the dwelling communities and the biodiversity of the district. The use of effective medicinal plant species is, thus strength within this link. However, these plants cannot meet all the health needs but have been confidently used as home remedies. In the present review, 25 species of plants from 21 families have been recorded which are being potentially exploited by the people of Shopian (Jammu and Kashmir) for various skin diseases. The study shows that among the skin diseases, boil, hair fall, allergy, and dermatitis are the major diseases in the villages and far-flung areas of district Shopian of Jammu and Kashmir. The present paper is a brief account of the value of different ethnomedicinal plants used against the diseases by the villagers and tribals of Shopian district of Jammu and Kashmir.

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REFERENCES


