

Ethnopharmacological survey of medicinal plants used by patients with gastrointestinal tract disorders in the northern region of Palestine

Nuha Shawarb^{1*}, Hassan Abu Qaoud² & Fatima Hussein³

¹Department of Chemistry, Faculty of Science, An-Najah National University Nablus, State of Palestine; ²Department of Plant Production and Protection, Faculty of Agriculture and Veterinary Medicine, An-Najah National University Tulkarem, State of Palestine; ³Department of Pharmacy, Faculty of Medicine and Health Sciences, An-Najah National University Nablus, State of Palestine

*Corresponding author: nuhashawarb@najah.edu

Received: (19/1/2021), Accepted: (1/7/2021). DOI: <https://doi.org/10.59049/2790-0231.1072>

Abstract

There are many medicinal applications of natural plant remedies. Several illnesses are still being treated by Palestinian people using medicinal plants. This research was intended to study the use of natural plants to treat different types of gastrointestinal tract disorders (GITD). In the Northern part of Palestine (Jenin, Tulkarm, Qalqilia, and Nablus), an ethno-pharmacological study of medicinal plants used to treat GITD has been carried out. A questionnaire was circulated to 120 informants. The details gathered included the names of the plants, the parts used, the diseases for which the products were used, as well as the method of preparation. To evaluate results: UV (used value), Fic (factor of informant consensus), and FL (fidelity level) was calculated. This study showed that 40 plant species of 16 families were used for GITD. Labiatae (10 species) and Umbelliferae (8 species) were the most prevalent plant families. The pieces used most commonly were leaves and seeds. Decoction was the technique of preparation and was taken as a hot drink. Abdominal flatulence (0.88) was the highest Fic value, followed by constipation (0.80). The maximum FLS were reported for *Cucumissativus* (100) and *Prunusamygdalus* (100) for heart burn, *Solanum tuberosum* (100) for vomiting and diarrhea, *Ficus carica* (100) as laxatives. The information provided on medicinal plants, with maximum UV & FL values can serve as basic data for further research to identify the active biological ingredients in these plants, and thereafter, to develop new drug preparations for the treatment of disorders of the digestive system.

Keywords: Ethnopharmacology, Herbal plant, decoction, gastrointestinal disorders.

INTRODUCTION

The main cause of morbidity in developing countries is gastrointestinal disorders “A new classification of functional gastrointestinal disorders (FGID) became available recently, based on consensus in expert committees (‘Rome III process’)” [1].

A study conducted in the US found that at least 1 FGID qualified for 23.1 % of children and adolescents in the US [2]. These findings indicate that gastrointestinal diseases rely on the community's social climate, access to water and food protection, malnutrition [3], type of food eaten, and disjunctively of the food constitution [4], Bacterial, fungal and parasitic agents causing Diarrhoea, stomach ache and gastric atrophy, depends on: rotavirus, *Helicobacter pylori*, Shi-

gella, *Escherichia coli* and *Salmonella*. [4] *Vibrio cholerae*, *Aeromonas*, [5]. Stress also directly provokes intestinal dysmotility and heightens hypersensitivity [6].

Although the pathophysiology of these disorders remains not fully understood, they result from a complex interaction between biological, psychological, and social factors that can be predisposing, precipitating, and/or perpetuating [7].

Using medicinal plants for the treatment of (GITD) is a common practice among indigenous communities. It is estimated that about 34 % of medicinal plants are used to treat GITD [8]. Medicinal products isolated from medicinal plants or artificially modified forms of natural products are healthy, environmentally friendly, and regularly recommended by doctors [9].

It has been recognized for the past 20 years that in some developing countries, plants are the main medicinal sources used for the treatment of infectious diseases, such as Asia [8] and Africa [10]. Ethnobotanical surveys and literature reviews have shown that Guatemala uses 385 plants from 95 families to treat gastrointestinal disorders, the crude extracts of 26 medicinal plants exhibited antibacterial activity [11].

The effectiveness of many medicinal plants for treating gastrointestinal disorders has been verified by clinical studies [12, 13], even though their consumption habits vary from culture to culture.

Palestine, as a holy land characterized by great ethnic variability, thus creates great biological multiversity. Such variability, particularly in tradition, herbal foods and medicine, has enriched its culture [14].

More than 2600 plant species cover the hills and mountains of Palestine and the Golan Heights, of which more than 700 are known to be used as medicinal herbs or as botanical pesticides [15-17]. Furthermore, about 30% of the flora in Palestine are considered rare and many of them are endangered. A recent ethnopharmacological survey of 120 informants living in Palestine found that at least 63 reliable plant species are still in use for the treatment of skin, urinary system, gastric system, prostate disease, cancer and other diseases [18].

The present study aimed at documenting the traditional uses of medicinal plants used to treat different gastrointestinal tract disorders in Palestine and to evaluate the efficacy of plant species based on the review of literature.

METHODS

The present study was performed at outpatient clinics in the northern regions of Palestine (Jenin, Tulkarm, Qalqilia, and Nablus) in a cross-sectional observational design during the period from August to November 2018. (Fig 1)



Figure (1): Map of west bank / Palestine (Taken from Internet ARIJ).

The research was conducted in an interview with herbalists, traditional healers, and herbal medicine practitioners. The inclusion criteria were Palestinian adults residing in the northern part of Palestine and agreed to join the study without any informed consent, the random participants were given complete information about the aim of the study, the participation was completely voluntary without any monetary or nonmonetary incentives, and their identity was kept anonymous. The collected data was used only in this study.

Structure, interview and validation of the questionnaire

The questionnaire was developed based on through literature review pertaining to herbal use in digestive tract diseases from different communities, in addition the studies that reported medicinal plants used among Palestinians were also reviewed.

The new design questionnaire consisted of two parts; a copy was attached. The first part provides information about patients: educational status, marital status, age, monthly household income, accommodation, form of treatment. These are listed in Table (1). In the second section, patients answered open-ended questions regarding the name of the medicinal plants used, the explanations for

the usage of these medicinal plants, and the infographics, preparation methods, and sources of these plants. The random sample procedure was used to recruit 120 participants using Cochran's (1963) equation for prevalence studies. Sample size = $n = (Z \alpha/2)^2 p (1 - p) / \Delta^2$, Δ Assumed to be 10 %. Considering the 10% drop out, the required sample size was 115 participants, then the number was rounded to 120 participants.

Data analysis

The Statistical Package for Social Sciences (SPSS version 17.0) was used to perform

Statistical analyses. The factor of informant's consensus (Fic) was employed to indicate the homogeneity of the information. In fact, its main use is to select the disease categories where there is consensus on the use of plants among the informants. The Fic value is close to 0 if plants are randomly chosen or if informants do not exchange information about their use. High values of fic (close to 1) occur when there is a well-defined selection criterion in the community and/or if information is frequently exchanged between informants [19]. The Fic is calculated as in the following equation:

$$\text{Fic} = \frac{\text{Nur} - \text{Nt}}{\text{Nur} - 1}$$

Where Nur is the number of citations in each category and Nt is the number of taxa used.

Fidelity level (FL) was defined as the ratio between the number of informants who independently suggested the use of a species for the same major purpose and the total number of informants who mentioned the plant for any use. FL is of equal importance to Fic and it can be calculated according to the following equation: [20, 21]

$$\text{FL \%} = \frac{\text{Np}}{\text{N}} \times 100$$

Where Np is the number of informants that reported the use of a plant species to treat a particular disease and N is the number of informants that used the plant as a medicine to treat any given disease.

The use value (UV) is a quantitative method that can be used to prove the relative importance of species known locally. It can be calculated according to the following equation: [20]

$$\text{UV} = \frac{\sum U}{N}$$

Where UV is the use value of a species; U is the number of citations per species; N is the number of informants. Results of calculated UV, FL, and Fic are shown in Tables 2, 3, 4.

RESULTS

Table 1 summarises the socio-demographic characteristics of our sample of 120 people included in the study. Respondents from all age groups but mostly (30.8%) were 16 – 29 years of age. They are from various educational backgrounds with most (64.2%) being from university-educated backgrounds, While the minority (3.3%), were from an elementary level of education or illiterate. We also sampled across income (64.2% were of medium income) and marital status (68.3% married, 30% single, and 1.7% were divorced or widowed). Place of residence: (63.3%) in a village while (2.5%) in a refugee camp. (37.5%) of the sample was housewives. Knowledge of natural products was also investigated; most of them obtained their information from relatives and friends (47.5%), herbalists (11.7%), and the internet (13.3%). Most (54.2%) obtained the natural products they used from herbalists ("At-tarine"), and 21.7% from the wild.

Table (1): socio-demographic characteristics of the study population (N= 120).

Variable	N (%)
Age (year)	
16 – 20	37 (30.8)
30 – 39	16 (13.3)
40 – 49	31 (25.8)
50 – 59	28 (23.3)

Variable	N (%)
≥ 60	8 (6.7)
Education	
Illiterate level	4 (3.3)
Elementary or preparatory level	13 (10.8)
Secondary level	26 (21.7)
University level	77 (64.2)
Income	
Low	31 (25.8)
Medium	77 (64.2)
High	10 (8.3)
Material status	
Single	36 (30)
Married	82 (68.3)
Others (divorced or widow)	2 (1.7)
Place of residence	
City	41 (34.2)
Village	76 (63.3)
Refugee camp	3 (2.5)
Job	
House wife	54 (37.5)
Employee	39 (32.5)
Worker	6 (5)
Dealer	4 (3.3)
Unemployed	26 (21.7)
Knowledge of natural products	
Media (TV, radio, journal, etc)	23 (19.2)
Relatives & friends	57 (47.5)
Herbalists	14 (11.7)
Pharmacy	1 (8)
Internet	16 (13.3)
Other sources	5 (4.2)
How can you have herbals	
Herbalists	65 (54.2)
Pharmacy	23 (19.2)
Friends	6 (5)
Wild	26 (21.7)

Phytodiversity of plants

The main reasons for the existence of rich traditional medicines are the cultural diversity and rich flora [22].

The present study reported 40 plants belonging to 16 families commonly used to cure various digestive diseases by the local community. Fig 2 shows that the largest families of gastrointestinal plants were Labiatae

and Umbelliferae (10 species and 8 species respectively), with three species of Compositae, Zingiberaceae and Leguminaceae. Only 1–2 species were reported for the 11 remaining families. However, the calculated UV values for the *Salvia officinalis* plant that belongs to the Labiateae family are the highest with 0.275, *Cucumissativus* plants belonging to the Cucurbitaceae family have the second highest UV value of 0.233 for treating heart

burns, *Cuminumcyminum* belong to Umbelliferae has the same UV value for abdominal

flatulence.

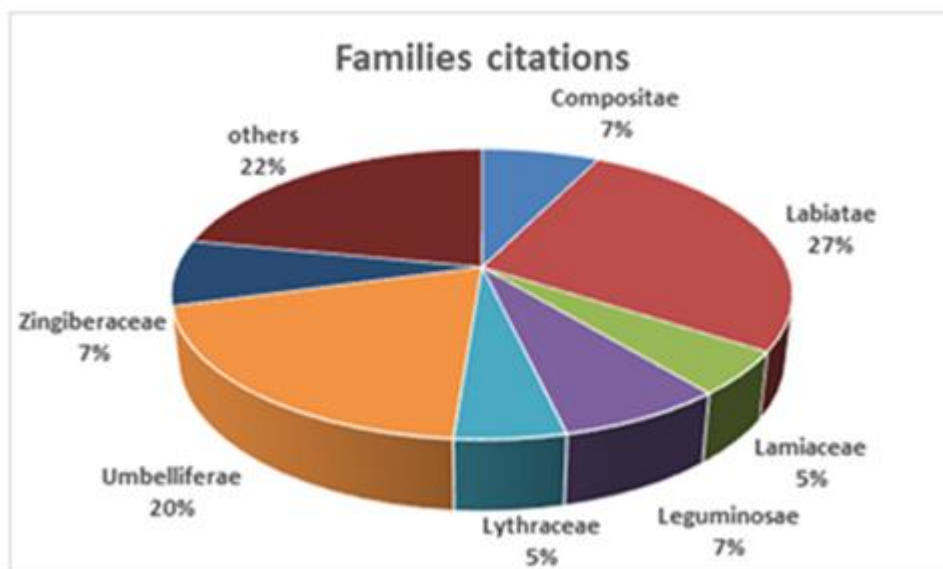


Figure (2): families citations of GI disorders.

All parts of different plants are used in the traditional remedies for various gastrointestinal disorders. However, the most frequently used parts are leaves with 41% fol-

lowed by seeds with 36% percent. (Fig 3) shows the result of analysis on medicinal plant parts used to treat gastrointestinal disorders.

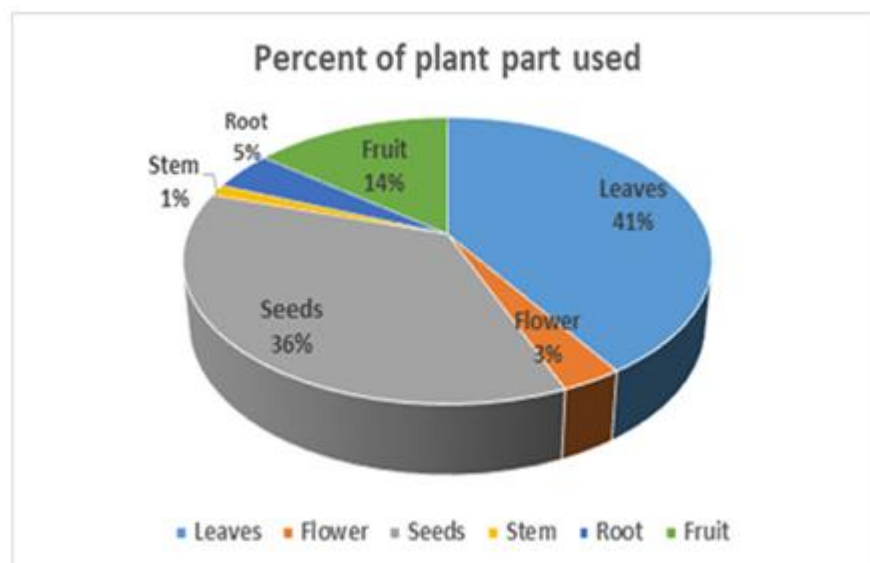


Figure (3): Percent of plant part used for GI disorders.

In this study, most herbal remedies were found to be prepared by decoction and administered mainly orally, which agreed with other studies concerning neighbouring areas, where it was seen that decoction is the method mostly used for the preparation of folk medicine [23, 24]. In most cases, people use other ingredients such as sugar and honey to prepare remedies. Some plants are also used

as food-vegetable plants (such as *Cucumis sativus*, *Prunus amygdalus*, *Petroselinum crispum*, *Ficus arica*, and *Punica granatum*) that are eaten raw.

Traditional treatment of gastrointestinal disorders using plant extracts

Finally, it was seen that gastrointestinal system ailments, for which the folk medicinal

plants were mostly used, were as follows: heart burn, indigestion, vomiting and diarrhoea, constipation, abdominal flatulence and irritable bowel syndrome. Informant consensus of medicinal plant usage resulted in informant consensus factor (Fic) values between 0.71 and 0.88 per gastrointestinal disorder category. The category that had the highest Fic value was abdominal flatulence

(0.88) followed by constipation (0.80). The lowest was indigestion (0.71) (Table 4).

It could be concluded that the plants with high fic values will be transferred more and therefore could be utilised much better in the treatment of certain illnesses [25]. The average fic value for all gastrointestinal disorder categories was 0.77, indicating a fairly high level of informant consensus compared with similar studies [26].

Table (2): Plants used in the treatment of gastrointestinal disorders in Palestine.

Scientific name	Family	GIT Problems	Parts used and mode of preparation	Method of preparation	# of informants 120	UV
<i>Teucrium capitatum</i>	Lamiaceae	Acidness	Leaves/ boil a cup of water then dunk the leaves in boiled water for 5 min, cool then drink a cup after meal	Decoction	2	.017
<i>Cucumis sativus</i>	Cucurbitaceae	Acidness	Fruit/ eat raw	Eat raw	28	0.233
<i>Punica granatum</i>	Lythraceae	Acidness	Fruit/ eat raw	Eat raw	2	.017
<i>Ocimum basilicum</i>	Lamiaceae	Acidness	Leaves/ boil a cup of water then dunk the leaves in boiled water for 5 min, cool then drink a cup after meal	Decoction	3	.025
<i>Thymus vulgaris</i>	Labiatae	Acidness	Leaves/ boil a cup of water then dunk the leaves in boiled water for 5 min, cool then drink a cup after meal	Decoction	3	.025
<i>Sesamum indicum</i>	Pedaliaceae	Acidness	Seeds/ eat raw	Eat raw	4	.033
<i>Mentha piperita</i>	Labiatae	Acidness	Leaves/ boil a cup of water then dunk the leaves in boiled water	Decoction	3	.025

Scientific name	Family	GIT Problems	Parts used and mode of preparation	Method of preparation	# of informants 120	UV
			for 5 min, cool then drink a cup after meal			
<i>Linum usitatissimum</i>	Linaceae	Acidness	Seeds/ eat raw	Eat raw	2	.017
<i>Prunus amygdalus</i>	Rosaceae	Acidness	Seeds/ eat raw	Eat raw	25	.208
<i>Salvia officinalis</i>	Labiatae	Acidness	Leaves/ boil a cup of water then dunk the leaves in boiled water for 5 min, cool then drink a cup after meal	Decoction	3	.025
<i>Rosmarinus officinalis</i>	Labiatae	Indigestion	Leaves/ boil a cup of water then dunk the leaves in boiled water for 5 min, then drink hot after meal	Decoction	3	.025
<i>Matricaria chamomilla</i>	Compositae	Indigestion	Flower /boil about 100 ml of plant in 100 ml water, given orally	Decoction	5	.042
<i>Petroselinum crispum</i>	Umbelliferae	Indigestion	Leaves/ eat raw	Eaten raw	2	.017
<i>Zingiber officinalis</i>	Zingiberaceae	Indigestion	roots /boil about 100 ml of plant in 100 ml water, given orally	Decoction	3	.025
<i>Cuminum cyminum</i>	Umbelliferae	Indigestion	Seeds/ boil a spoon of seeds in a cup of water, drink it hot	Decoction	3	.025
<i>Salvia officinalis</i>	Labiatae	Indigestion	Leaves/ boil a cup of water then dunk the leaves in boiled water	Decoction	8	.067

Scientific name	Family	GIT Problems	Parts used and mode of preparation	Method of preparation	# of informants 120	UV
			for 5 min, drink hot			
<i>Mentha piperita</i>	Labiatae	Indigestion	Leaves/ boil a cup of water, then dunk the leaves in boiled water for 5 min, drink hot	Decoction	25	.208
<i>Pimpinella anisum</i>	Umbelliferae	Indigestion	Seeds/ boil a spoon of seeds in a cup of water, drink it hot	Decoction	14	.117
<i>Oryza sativa</i>	Graminae	Vomiting & diarrhea	Seeds/ boil a cup of seeds in two cups of water, eat cooked	Eat cooked	2	.017
<i>Solanum tuberosum</i>	Solanaceae	Vomiting & diarrhea	Root/ eat cooked	Eat cooked	10	.083
<i>Punica granatum</i>	Lythraceae	Vomiting & diarrhea	Fruit/eat raw	Eat raw	8	.067
<i>Allium sativum</i>	Alliaceae	Vomiting & diarrhea	Root/ eat raw	Eat raw	3	.025
<i>Zingiber officinalis</i>	Zingiberaceae	Vomiting & diarrhea	roots /boil about 100 ml of plant in 100 ml water, given orally	Decoction	5	.042
<i>Salvia officinalis</i>	Labiatae	Vomiting & diarrhea	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	33	.275
<i>Elettaria cardamomum</i>	Zingiberaceae	Vomiting & diarrhea	seeds /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	2	.017
<i>Matricaria chamomilla</i>	Compositae	Constipation	flowers /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	4	.033

Scientific name	Family	GIT Problems	Parts used and mode of preparation	Method of preparation	# of informants 120	UV
<i>Ficus carica</i>	Ficeae	Constipation	Fruit	Eat raw	5	.042
<i>Trigonellafoenum graecum</i>	Leguminosae	Constipation	seeds /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	9	.075
<i>Ricinus communis</i>	Acalyphoidae	Constipation	Fruit/squeeze the fruit and extract the oil/ drink one spoon of oil before meal	Drink cold	11	.092
<i>Cassia angustifolia</i>	Leguminosae	Constipation	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	12	.010
<i>Cassia acutifolia</i>	Leguminosae	Constipation	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	3	.025
<i>Pimpinella anisum</i>	Umbelliferae	Constipation	seeds /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	20	.167
<i>Rosmarinus officinalis</i>	Labiatae	Constipation	Leaves/ boil a cup of water then dunk the leaves in boiled water for 5 min, then drink hot after meal	Decoction	16	.133
<i>Petroselinum crispum</i>	Umbelliferae	Constipation	Whole plant	Eat raw	3	.025
<i>Rosmarinus officinalis</i>	Labiatae	Abdominal flatulence	Leaves/ boil a cup of water and then dunk the leaves in boiled water for 5 min, then drink hot after meal	Decoction	4	.033
<i>Matricaria</i>	Compositae	Ab-	Flower /boil	Decoction	3	.025

Scientific name	Family	GIT Problems	Parts used and mode of preparation	Method of preparation	# of informants 120	UV
<i>chamomilla</i>		dominal flatulence	about 100 ml of plant in 100 ml water, given orally			
<i>Cassia angustifolia</i>	Leguminosae	Ab-dominal flatulence	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	1	.008
<i>Trigonella foenumgraecum</i>	Leguminosae	Ab-dominal flatulence	seeds /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	2	.0166
<i>Crocus sativus</i>	Iridaceae	Ab-dominal flatulence	Flower /boil about 100 ml of plant in 100 ml water, given orally	Decoction	1	.008
<i>Zingiber officinalis</i>	Zingiberaceae	Ab-dominal flatulence	roots /boil about 100 ml of plant in 100 ml water, given orally	Decoction	4	.033
<i>Foeniculum vulgare</i>	Umbelliferae	Ab-dominal flatulence	Roots	Eat raw	5	.042
<i>Cuminum cyminum</i>	Umbelliferae	Ab-dominal flatulence	Seeds/ boil a spoon of seeds in a cup of water, drink it hot	Decoction	28	.233
<i>Citrus lemon</i>	Rutaceae	Ab-dominal flatulence	Fruit	Juice	1	.008
<i>Salvia officinalis</i>	Labiatae	Ab-dominal flatulence	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	13	.108
<i>Mentha piperita</i>	Labiatae	Ab-dominal flatulence	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	23	.19
<i>Pimpinella anisum</i>	Umbelliferae	Ab-dominal	Seeds/ boil a spoon of	Decoction	19	.158

Scientific name	Family	GIT Problems	Parts used and mode of preparation	Method of preparation	# of informants 120	UV
		flatulence	seeds in a cup of water, drink it hot			
<i>Matricaria chamomilla</i>	Compositae	Irritable bowel syndrome	flowers /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	4	.033
<i>Foeniculum vulgare</i>	Umbelliferae	Irritable bowel syndrome	Roots	Eat raw	4	.033
<i>Carum carvi</i>	Umbelliferae	Irritable bowel syndrome	seeds /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	3	.025
<i>Cuminum cyminum</i>	Umbelliferae	Irritable bowel syndrome	seeds /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	6	.05
<i>Salvia officinalis</i>	Labiatae	Irritable bowel syndrome	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	4	.033
<i>Mentha piperita</i>	Labiatae	Irritable bowel syndrome	leaves /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	16	.133
<i>Pimpinella anisum</i>	Umbelliferae	Irritable bowel syndrome	seeds /boil about 100 ml of plant in 100 ml water, drink hot	Decoction	9	.075

Table (3): Plants used as home remedies for the treatment of gastrointestinal disorders in Palestine.

Plant name	Acidity	Indigestion	Vomiting & diarrhea	constipation	Abdominal flatulence	Irritable bowel syndrome
Chamomile بابونج FL	1 5.88	5 29.4	-	4 23.5	3 17.6	4 23.5
Ginger زنجبيل FL	1 6.25	3 18.75	5 31.25	1 6.25	4 25	2 12.5
Sesame سمسم FL	4 80	-	-	-	-	1 20
Schumer شمر FL	1 9.09	-	-	1 9.09	5 45.45	4 36.4

Plant name	Acidity	Indigestion	Vomit- ing & diarrhea	constipa- tion	Ab- dominal flatulence	Irritable bowel syn- drome
Latency كمون FL	1 2.56	3 7.7	-	1 2.56	28 71.8	6 15.38
Sage ميرمية FL	3 4.8	8 12.9	33 53.2	1 1.61	13 20.9	4 6.45
Mint نعن FL	3 4.1	25 34.24	4 5.47	2 2.74	23 31.5	16 21.9
Rosemary اكليل الجبل FL	-	3 10.34	-	14 48.27	3 10.34	9 31.03
Anise يانسون FL	-	14 21.53	4 6.15	20 30.77	18 27.7	9 13.85
Spherical كراوية FL	-	1 25	-	-	-	3 75
Lentil عدس FL	1 100	-	-	-	-	-
Carrots جزر FL	1 100	-	-	-	-	-
Crumple جعدة FL	2 40	1 20	2 40	-	-	-
Lettuce خس FL	1 33.3	1 33.3	-	1 33.3	-	-
Cucumber خيار FL	28 100	-	-	-	-	-
Pomegranate رمان FL	3 25	-	9 75	-	-	-
Basil ريحان FL	3 100	-	-	-	-	-
Thyme زعتر FL	3 100	-	-	-	-	-
Olive زيتون FL	4 80	-	-	1 20	-	-
Liquorice عرقسوس FL	1 100	-	-	-	-	-
Pistachio فستق FL	1 100	-	-	-	-	-
Linen كتان FL	2 100	-	-	-	-	-
Roselle كر كديه FL	1 100	-	-	-	-	-
Almond لوز FL	25 100	-	-	-	-	-
Cabbage ملفوف FL	1 50	1 50	-	-	-	-
Cactus صبار FL	-	1 50	-	-	-	1 50

Plant name	Acidity	Indigestion	Vomit- ing & diarrhea	constipa- tion	Ab- dominal flatulence	Irritable bowel syn- drome
Marjoram برقوقش FL	-	1 50	-	-	1 50	-
Parsley بقونس FL	-	2 40	-	3 60	-	-
Apple تفاح FL	-	2 66.6	-	1 33.3	-	-
Dates تمر FL	-	1 50	-	1 50	-	-
Fenugreek pills حلبة FL	-	1 7.7	1 7.7	9 69.2	1 7.7	1 7.7
Castor خروع FL	-	1 8.3	-	11 91.6	-	-
Rashad beans حبوب الرشاد FL	-	1 100	-	-	-	-
Tea شاي FL	-	2 33.3	3 50	-	1 16.6	-
Senna عشرق (سنامكي) FL	-	1 5	-	16 80	-	3 15
Saussureacostus قسط هندي FL	-	1 50	-	-	-	1 50
Curcumin كركم FL	-	1 100	-	-	-	-
Rice أرز FL	-	-	2 66.6	1 33.3	-	-
Black bean الحبة السوداء FL	-	-	1 100	-	-	-
Potato بطاطا FL	-	-	11 100	-	-	-
Garlic ثوم FL	-	1 33.3	2 66.6	-	-	-
Seedling grain شتيلة FL	-	-	1 100	-	-	-
Cinnamon قرفة FL	-	-	2 66.6	-	-	1 33.3
Coffee قهوة FL	-	-	1 100	-	-	-
Lemon ليمون FL	-	-	4 100	-	-	-
Banana موز FL	-	-	1 100	-	-	-

Plant name	Acidity	Indigestion	Vomit- ing & diarrhea	constipa- tion	Ab- dominal flatulence	Irritable bowel syn- drome
Fig تين FL	-	-	-	5 100	-	-
Saffron زعفران FL	-	-	-	1 100	-	-
Ginseng جنسنگ FL	-	-	-	-	-	1 100

Table (4): Factors of informant's consensus (Fic) for herbals, categorized by the types of gastric treatment.

Problem	Total	Plant no	FIC
Acidness	91	24	0.74
Indigestion	81	24	0.71
Vomiting & diar- rhea	86	20	0.78
Constipation	94	20	0.8
Abdominal flatu- lence	100	13	0.88
Irritable bowel syndrome	66	18	0.74

DISCUSSION

Several studies have shown that in developing countries, about 80% of rural communities consider herbal remedies to be relevant and important [27, 28].

According to Table 1, most informants are of the highest education with most of them (64.2 %) graduating from university, with the same percentage for medium-sized income. The table also showed that respondents (54.2%) typically get their natural products from "Attarines". Unlike (19.2 %) only from pharmacists, who are believed to be the community of experts with the requisite expertise and educational history on the protection and effectiveness of these products and are thus the most deserving to be trusted, this outcome indicates that these natural herbals and their products are considered healthy because of their long-standing use.

In Palestine, cosmetic products and natural nutrients are marketed and sold in herbal stores most of the time and to a lesser extent in pharmacies, and they are often prepared locally. Table 2 shows the natural herbal remedies used to treat gastrointestinal disorders, preparation method, and use. According to our findings, as stated in Table 2, the plants most frequently used were members of the Labiatae and Umbelliferae families, Labiatae family was also effective for the treatment of FGITD in Urmia, Iran[29] and it is known for its anti – inflammatory effect which could be helpful in some gastrointestinal infectious disease [30]. Leaves were the part used in Labiatae herbal products, while the seeds were the part of the plant used in the family Umbelliferae. It was concluded from similar studies on plants used for medicinal purposes that the most used parts of the plants are leaves with 54% in China and Thailand [31], 44% leaves and 29% root in Ethiopia [32]. Leaves are the main photosynthetic organ in plants and are considered the most effective component for the synthesis of many pharmacologically active preparations against certain diseases [33].

Decoction was the method of preparation, it means heating the herbs all or a specific part of it in water to boiling for a few minutes and taken orally as a hot drink. Sometimes a mixture of more than one plant species of a family or more may be used to insure a better efficacy, it may be sweetened by the addition of sugar or honey.

As can be seen in (Fig 4), The most prevalent gastrointestinal condition treated with natural products was abdominal flatulence, followed by constipation, heart burn, vomiting, and diarrhoea, indigestion and irritable bowel syndrome was the least common disorder.

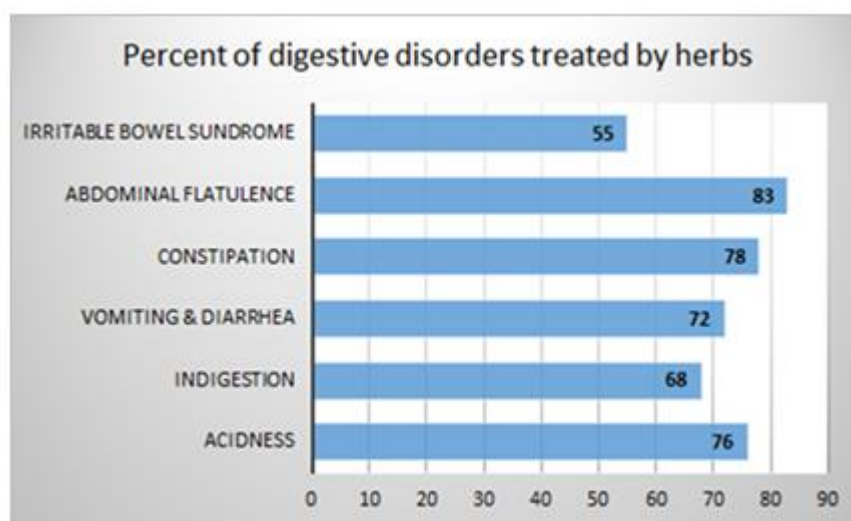


Figure (4): Percent of digestive disorders treated by herbs.

In this study, the highest level is indicated by fleidility values for *Cucumissativus* (100),, *Prunusamygdalus* (100) and *Sesamumindicum* (80) for heart burn; *Menthapiperita* (34.24) against indigestion; *Solanum tuberosum* (100), *Punicagranatum* (75) and *Salvia officinalis* (53.2) against vomiting and diarrhoea; *Ficuscarica* (100), *Ricinuscommunis* (91.6), *Cassia acutifolia* (80), *Rosmarinus officinalis* (48.24) and *PimpinellaAnisum* (30.7) as laxatives for constipation; *Cuminumcyminum* (71.8) and *Foeniculum vulgare* (45.5) for abdominal flatulence; *Carumcarvi*(75), *Foeniculum vulgare* (36.5) and *Rosmarinus officinalis* (31) against irritable bowel syndrome. These medicinal plants can be considered as an indication of their high healing potential against related diseases. Plants with high FL values and can achieve a cure, the bioactive components are identified and targeted in the future for phytochemical analysis...

Therefore the important medicinal plants for treating heart burn were *Curcumissativus* (UV = 0.233, FL = 100); for treating indigestion *Menthapiperita* (UV = 0.208, FL = 34.24); plant used for vomiting and diarrhoea is *Salvia officinalis* (UV = 0.275, FL = 53.2); for constipation *Pimpinellaanisum* (UV= 0.167, FL = 30.77); *Cuminumcyminum*(UV = 0.233 , FL = 71.8) for abdominal flatulence; finally *Menthapiperita* (UV = 0.13, FL = 21.9) against irritable bowel syndrome.

Table 5 summarises the published uses of these frequently used plants, the route of administration, and safe dose.

This research will help conserve and enhance the understanding of herbal plants in Palestine for gastrointestinal disorders. In the present study, *Prunusamygdalus*, *Matricariachamomilla*, *Ricinuscommunis*, *Zingiber officinalis*, *Salvia officinalis*, *Menthapiperita*, *Cuminumcyminum* and *Rosmarinus officinalis* were used mostly for treating digestive disorders at home.

CONCLUSIONS

This study successfully determined the prevalence of herbal medicine users in six gastrointestinal tract disorders, types of medicinal plants used in addition to the part of the plants used and the method of using among a representative sample of Palestinian adults and older adults. Up to our knowledge, this study is the first study in Palestine that explored the use of medicinal plants in GIT diseases.

It was found that the local population uses 40 plants from 16 separate families. Most of them grow in the wild, and some are cultivated from these medicinal plants. (i.e. *Menthapiperita*, and *Ficuscarica*). People use these plants for drying, decoction, or infusion during all seasons of the year. *Prunusamygdalus*, *Matricariachamomilla*, *Ricinuscommunis*, *Zingiber officinalis*, *Salvia officinalis*, *Cuminumcyminum*, *Menthapiperita* and

Rosmarinus officinalis are the most commonly used plants. The most commonly used sections of the plant were leaves and seeds. The quality of plant species fidelity and informant consensus factor values for plants have been developed. The Fic values were found to be fairly high (0.77). It may, therefore, be an indication that the data collected are accurate.

Table (5): Published medicinal uses of the most frequently used plants.

Plant species	Recorded literature sources defining similar usage
<i>Mentha piperita</i>	[34] [35]
<i>Salvia officinalis</i>	[36] [37] [38]
<i>Cuminum cyminum</i>	[39] [40]
<i>Matricaria chamomilla</i>	[41] [42] [43]
<i>Zingiber officinalis</i>	[44] [45] [46]
<i>Ricinus communis</i>	[47] [48] [49]
<i>Pimpinella anisum</i>	[50] [51] [52]
<i>Prunus amygdalus</i>	[54 ,53] [55]
<i>Rosmarinus officinalis</i>	[56] [57] [58] [59]

Ethical approval and consent to participate

The aims of this study, protocols and informed consent were approved by the Institutional Review Board (IRB) at An-Najah National University, as this study depends on a verbal questionnaire from adult participants (above 18 years old) so there is no need for written documented consent, and is approved by the ethics committee.

Competing interests

The authors declare that there are no financial competing interests.

FUNDING

Non

ACKNOWLEDGMENT

The authors acknowledge An-Najah National University for support.

REFERENCES

- 1) Drossman DA, Dumitrascu DL. Rome III: New standard for functional gastrointestinal disorders. Journal of Gastrointestinal and Liver Diseases. 2006; 15(3): 237-241.
- 2) Lewis ML, Palsson OS, Whitehead WE, van Tilburg MA. Prevalence of functional gastrointestinal disorders in children and adolescents. The Journal of Pediatrics. 2016; 177: 39-43. e33.
- 3) Tariq A, Mussarat S, Adnan M, Abd_Allah E, Hashem A, Alqarawi AA, et al. Ethnomedicinal evaluation of medicinal plants used against gastrointestinal complaints. BioMed Research International. 2015; 2015: 892947.
- 4) Khan S, Afzal M, Iqbal S, Mirza MS, Khan QM. Inoculum pretreatment affects bacterial survival, activity and catabolic gene expression during phytoremediation of diesel contaminated soil. Chemosphere. 2013; 91(5): 663-668.
- 5) Acharyya S, Patra A, Bag PK. Evaluation of the antimicrobial activity of some medicinal plants against enteric bacteria with particular reference to multi-drug resistant *Vibrio cholerae*. Tropical Journal of Pharmaceutical Research. 2009; 8(3): 231-237.
- 6) Mertz HR. Overview of functional gastrointestinal disorders: dysfunction of the brain-gut axis. Gastroenterology Clinics. 2003; 32(2): 463-476.
- 7) Whitehead WE, Palsson O, Jones KR. Systematic review of the comorbidity of irritable bowel syndrome with other disorders: what are the causes and implications? Gastroenterology. 2002; 122(4): 1140-1156.

- 8) Prasad AD, Shyma T, Raghavendra M. Plants used by the tribes for the treatment of digestive system disorders in Wayanad district, Kerala. *Journal of Applied Pharmaceutical Science*. 2013; 3(8): 171.
- 9) Wang M-W, Hao X, Chen K. Biological screening of natural products and drug innovation in China. *Philosophical Transactions of the Royal Society B: Biological Sciences*. 2007; 362(1482): 1093-1105.
- 10) Teklehaymanot T. Ethnobotanical study of knowledge and medicinal plants use by the people in Dek Island in Ethiopia. *Journal of Ethnopharmacology*. 2009; 124(1): 69-78.
- 11) Alanis A, Calzada F, Cervantes J, Torres J, Ceballos G. Antibacterial properties of some plants used in Mexican traditional medicine for the treatment of gastrointestinal disorders. *Journal of Ethnopharmacology*. 2005; 100(1-2): 153-157.
- 12) Kanner J, Lapidot T. The stomach as a bioreactor: dietary lipid peroxidation in the gastric fluid and the effects of plant-derived antioxidants. *Free Radical Biology and Medicine*. 2001; 31(11): 1388-1395.
- 13) Repetto M, Llesuy S. Antioxidant properties of natural compounds used in popular medicine for gastric ulcers. *Brazilian Journal of Medical and Biological Research*. 2002; 35(5): 523-534.
- 14) Jaradat NA, Al-Ramahi R, Zaid AN, Ayesh OI, Eid AM. Ethnopharmacological survey of herbal remedies used for treatment of various types of cancer and their methods of preparations in the West Bank-Palestine. *BMC Complementary and Alternative Medicine*. 2016; 16(1): 93.
- 15) Palevitch P, Yaniv Z. *Medicinal Plants of Hollyland*, vols. 1–2. Tammuz, Tel-Aviv. 1991.
- 16) Ali-Shtayeh M, Abu Ghdeib S. Antimycotic activity of twenty-two plants used in folkloric medicine in the Palestinian area for the treatment of skin diseases suggestive of dermatophyte infection. *Mycoses*. 1999; 42: 665-672.
- 17) Ali-Shtayeh M, Yaghmour RM-R, Faidi Y, Salem K, Al-Nuri M. Antimicrobial activity of 20 plants used in folkloric medicine in the Palestinian area. *Journal of Ethnopharmacology*. 1998; 60(3): 265-271.
- 18) Ali-Shtayeh MS, Yaniv Z, Mahajna J. Ethnobotanical survey in the Palestinian area: a classification of the healing potential of medicinal plants. *Journal of Ethnopharmacology*. 2000; 73(1-2): 221-232.
- 19) Gazzaneo LRS, De Lucena RFP, de Albuquerque UP. Knowledge and use of medicinal plants by local specialists in an region of Atlantic Forest in the state of Pernambuco (Northeastern Brazil). *Journal of Ethnobiology and Ethnomedicine*. 2005; 1(1): 9.
- 20) Alexiades MN. Collecting ethnobotanical data: an introduction to basic concepts and techniques. *Advances in Economic Botany*. 1996; 10: 53-94.
- 21) Kidane B, Van der Maesen L, van Andel T, Asfaw Z, Sosef M. Ethnobotany of wild and semi-wild edible fruit species used by Maale and Ari ethnic communities in southern Ethiopia. 2014.
- 22) Küpeli E, Koşar M, Yeşilada E, Başer KHC. A comparative study on the anti-inflammatory, antinociceptive and antipyretic effects of isoquinoline alkaloids from the roots of Turkish *Berberis* species. *Life Sciences*. 2002; 72(6): 645-657.
- 23) Tuzlacı E, Tolon E. Turkish folk medicinal plants, part III: Şile (İstanbul). *Fitoterapia*. 2000; 71(6): 673-685.
- 24) Kargıoğlu M, Cenkci S, Serteser A, Evliyaoğlu N, Konuk M, Kök MŞ, *et al.* An ethnobotanical survey of inner-West Anatolia, Turkey. *Human Ecology*. 2008; 36(5): 763-777.
- 25) Teklehaymanot T, Giday M. Ethnobotanical study of medicinal plants used by people in Zegie Peninsula,

- Northwestern Ethiopia. Journal of Ethnobiology and Ethnomedicine. 2007; 3(1): 12.
- 26) Heinrich M. Ethnobotany and its role in drug development. Phytotherapy Research. 2000; 14(7): 479-488.
 - 27) Li L, Zhou X, Li N, Sun M, Lv J, Xu Z. Herbal drugs against cardiovascular disease: traditional medicine and modern development. Drug Discovery Today. 2015; 20(9): 1074-1086.
 - 28) Lanzotti V. Drugs based on natural compounds: recent achievements and future perspectives. Springer; 2014.
 - 29) Bahmani M, Zargarani A, Rafieian-Kopaei M. Identification of medicinal plants of Urmia for treatment of gastrointestinal disorders. Revista Brasileira de Farmacognosia. 2014; 24(4): 468-480.
 - 30) Marco JL. Isolation, Reactivity, Pharmacological Activities and Total Synthesis of Hispanolone and Structurally Related Diterpenes from Labiatae Plants. Bioorganic & Medicinal Chemistry Letters. 2020; 30(21): 127498.
 - 31) Inta A, Shengji P, Balslev H, Wangpakapattanawong P, Trisonthi C. A comparative study on medicinal plants used in Akha's traditional medicine in China and Thailand, cultural coherence or ecological divergence? Journal of Ethnopharmacology. 2008; 116(3): 508-517.
 - 32) Wondimu T, Asfaw Z, Kelbessa E. Ethnobotanical study of medicinal plants around 'Dheeraa'town, Arsi Zone, Ethiopia. Journal of Ethnopharmacology. 2007; 112(1): 152-161.
 - 33) Passalacqua N, Guarrera P, De Fine G. Contribution to the knowledge of the folk plant medicine in Calabria region (Southern Italy). Fitoterapia. 2007; 78(1): 52-68.
 - 34) Nascimento J, Melo A, Lima e Silva T, Veras Filho J, Santos E, Albuquerque U, et al. Estudo fitoquímico e bioensaio toxicológico frente a larvas de *Artemia salina* Leach. de três espécies medicinais do gênero *Phyllanthus* (Phyllanthaceae). Revista de Ciências Farmacêuticas Básica e Aplicada. 2009; 29(2): 145-150.
 - 35) de Sousa Barros A, de Moraes SM, Ferreira PAT, Vieira ÍGP, Craveiro AA, dos Santos Fontenelle RO, et al. Chemical composition and functional properties of essential oils from *Mentha* species. Industrial Crops and Products. 2015; 76: 557-564.
 - 36) Miraj S, Kiani S. A review study of therapeutic effects of *Salvia officinalis* L. Der Pharmacia Lettre. 2016; 8(6).
 - 37) Carrasco FR, Schmidt G, Romero AL, Sartoretto JL, Caparroz-Assef SM, Bersani-Amado CA, et al. Immunomodulatory activity of *Zingiber officinale* Roscoe, *Salvia officinalis* L. and *Syzygium aromaticum* L. essential oils: evidence for humor- and cell-mediated responses. Journal of Pharmacy and Pharmacology. 2009; 61(7): 961-967.
 - 38) Hamidpour M, Hamidpour R, Hamidpour S, Shahlari M. Chemistry, pharmacology, and medicinal property of sage (*Salvia*) to prevent and cure illnesses such as obesity, diabetes, depression, dementia, lupus, autism, heart disease, and cancer. Journal of Traditional and Complementary Medicine. 2014; 4(2): 82-88.
 - 39) Johri R. *Cuminum cyminum* and *Carum carvi*: An update. Pharmacognosy reviews. 2011; 5(9): 63.
 - 40) Srinivasan K. Cumin (*Cuminum cyminum*) and black cumin (*Nigella sativa*) seeds: traditional uses, chemical constituents, and nutraceutical effects. Food Quality and Safety. 2018; 2(1): 1-16.
 - 41) Soualeh N, Soulimani R. Huiles essentielles et composés organiques volatils, rôles et intérêts. Phytothérapie. 2016; 14(1): 44-57.
 - 42) Sebai H, Jabri M-A, Souli A, Rtibi K, Selmi S, Tebourbi O, et al. Antidiarrheal and antioxidant activities of chamomile (*Matricaria recutita* L.) decoction extract

- in rats. *Journal of Ethnopharmacology*. 2014;152(2):327-332.
- 43) Singh O, Khanam Z, Misra N, Srivastava MK. Chamomile (*Matricaria chamomilla* L.): an overview. *Pharmacognosy reviews*. 2011; 5(9): 82.
- 44) Pandikumar P, Chellappandian M, Mutheeswaran S, Ignacimuthu S. Consensus of local knowledge on medicinal plants among traditional healers in Mayiladumparai block of Theni District, Tamil Nadu, India. *Journal of Ethnopharmacology*. 2011; 134(2): 354-362.
- 45) Ghayur MN, Gilani AH. Pharmacological basis for the medicinal use of ginger in gastrointestinal disorders. *Digestive Diseases and Sciences*. 2005; 50(10): 1889-1897.
- 46) Ali BH, Blunden G, Tanira MO, Nemmar A. Some phytochemical, pharmacological and toxicological properties of ginger (*Zingiber officinale* Roscoe): a review of recent research. *Food and Chemical Toxicology*. 2008; 46(2): 409-420.
- 47) Ali-Shtayeh MS, Jamous RM, Jamous RM. Complementary and alternative medicine use amongst Palestinian diabetic patients. *Complementary Therapies in Clinical Practice*. 2012; 18(1): 16-21.
- 48) Ilavarasan R, Mallika M, Venkataraman S. Anti-inflammatory and free radical scavenging activity of *Ricinus communis* root extract. *Journal of Ethnopharmacology*. 2006; 103(3): 478-480.
- 49) Panghal M, Kaushal V, Yadav JP. In vitro antimicrobial activity of ten medicinal plants against clinical isolates of oral cancer cases. *Annals of Clinical Microbiology and Antimicrobials*. 2011; 10(1): 21.
- 50) Shahamat Z, Abbasi-Maleki S, Motamed SM. Evaluation of antidepressant-like effects of aqueous and ethanolic extracts of *Pimpinella anisum* fruit in mice. *Avicenna Journal of Phytomedicine*. 2016; 6(3): 322-328.
- 51) Jaradat N, Zaid AN, Vincieri FF, Asmaa M. Medicinal herbs and methodologies for their pharmaceutical compounding in the West Bank/Palestine. *Complementary Therapies in Clinical Practice*. 2014; 20(4): 280-284.
- 52) Ben-Arye E, Schiff E, Hassan E, Mutafoğlu K, Lev-Ari S, Steiner M, et al. Integrative oncology in the Middle East: from traditional herbal knowledge to contemporary cancer care. *Annals of Oncology*. 2012; 23(1): 211-221.
- 53) Güzel Y, Güzelşemme M, Miski M. Ethnobotany of medicinal plants used in Antakya: a multicultural district in Hatay Province of Turkey. *Journal of Ethnopharmacology*. 2015; 174: 118-152.
- 54) Sargin SA, Selvi S, Büyükcengiz M. Ethnomedicinal plants of Aydıncık district of Mersin, Turkey. *Journal of Ethnopharmacology*. 2015; 174: 200-216.
- 55) Ahmad M, Zafar M, Shahzadi N, Yaseen G, Murphey TM, Sultana S. Ethnobotanical importance of medicinal plants traded in Herbal markets of Rawalpindi-Pakistan. *Journal of Herbal Medicine*. 2018; 11: 78-89.
- 56) Benarba B, Belabid L, Righi K, amine Bekkar A, Elouissi M, Khaldi A, et al. Ethnobotanical study of medicinal plants used by traditional healers in Mascara (North West of Algeria). *Journal of Ethnopharmacology*. 2015; 175: 626-637.
- 57) Boudjelal A, Henchiri C, Sari M, Sarri D, Hendel N, Benkhalel A, et al. Herbalists and wild medicinal plants in M'Sila (North Algeria): An ethnopharmacology survey. *Journal of Ethnopharmacology*. 2013; 148(2): 395-402.
- 58) Jamila F, Mostafa E. Ethnobotanical survey of medicinal plants used by people in Oriental Morocco to manage various ailments. *Journal of Ethnopharmacology*. 2014; 154(1): 76-87.

- 59) Nejad AM, Kamkar A, Giri A, Pourmahmoudi AA. Ethnobotany and folk medicinal uses of major trees and shrubs in Northern Iran. Journal of Medicinal Plants Research. 2013; 7(7): 284-289.