

**SURVEY OF ETHNOMEDICAL PRACTICES AMONG KATTU NAICKAN TRIBE IN
SIRUMALAI HILLS, DINDIGUL DISTRICT, TAMIL NADU, INDIA**

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ABSTRACT

Ethnomedicine plays a decisive role in major healthcare among native populations. The Kattu Naickan tribe residing in Sirumalai Hills of Dindigul district, Tamil nadu, India possesses rich traditional knowledge in the management of snake bites, scorpion stings and other toxicological conditions. A qualitative ethnographic study was conducted among four elderly tribal practitioners. A total of 145 medicinal plant species were documented. Most of the plants were collected from forest areas, while other raw drugs have been obtained from local surroundings and from markets. The study highlights the importance of preserving indigenous knowledge and emphasizes the need for scientific validation.

KEYWORDS: Ethnomedicine, Kattu Naickan, Sirumalai Hills, Snake bite, Traditional medicine.

INTRODUCTION

Traditional medicine forms the backbone of healthcare in many rural and tribal communities in India.^[1] Ethnomedicine refers to the study and documentation of traditional medical practices practiced by specific ethnic groups. The Kattu Naickan tribe is one of the primitive tribal communities residing in forest regions of Tamil Nadu, India. Sirumalai Hills provides rich biodiversity supporting their medicinal practices. Documentation of such knowledge is essential to prevent its disappearance due to modernization.^[2] The best source of herbal medications may be traditional, beneficial medicinal plants. Thus, it is necessary to study the active ingredients, safety, and effectiveness of such plants.^[3] Assessing the pharmacological potential of indigenous plants for health and nutrition also requires recording their usefulness.^[3]

MATERIALS AND METHODS

Study Area

The term Flora refers to the collective terminology for all plant species found in a specific area.^[4] In Siddha System of medicine, the term *Palangudi maruthuvam* refers to the usage of Traditional Tribal medical practices using locally available common and rare plants to treat a wide range of human ailments.^[5] The study area concentrated in and around the Sirumalai hills, Dindigul District of Tamil Nadu located in Tamil Nadu South India. The area of investigation approximately lies between 10.1942°N and 77.9967° E. More than 15 families and nearly 60 members of Kattu naicken tribals are found in the study area. There were 4 informants (2 females and 2 males) between the ages of 50 to 70 in the study.

Study design: Qualitative Ethnographic study. The term Ethnographic research is a method of conducting inquiry of the practices by studying individuals, artefacts or documents in their natural setting.^[6] It includes both anthropology and historical forms of research.

Informants: Four elderly tribal practitioners were selected through purposive sampling.

Data Collection: Direct interviews, participant observation, and field documentation were employed.

Ethical Consideration: The study has been approved by the Institutional Ethical Committee of Government Siddha Medical College, Palayamkottai (IEC No: GSMC-XV-IEC-Br II/04/15.04.2025). Prior informed consent was obtained from all informants

RESULTS

A total of 145 medicinal plant species were documented. Among them, 87 species were frequently used. Decoction was the most common method of preparation followed by chooranam. Most medicinal plants were collected from forest sources.

DISCUSSION

The study demonstrates that the Kattu Naickan tribe retains extensive ethnomedical knowledge, particularly

in toxicology. The predominance of decoction suggests empirical understanding of extraction efficiency.

The use of alkaloid-rich plants such as *Rauvolfia serpentina* and *Strychnos nux-vomica* indicates a sophisticated traditional pharmacological awareness. However, some plants like *Gloriosa superba* and *Strychnos nux-vomica* are known to possess toxic constituents, emphasizing the need for dosage standardization and scientific validation. Indian materia Medica also mentions the scientific information on the above medicinal plants.^[7]

The ecological dependency (55% forest-based collection) underscores the importance of forest conservation. Loss of biodiversity directly threatens indigenous healthcare systems.

Comparative studies from the Western Ghats and other tribal communities show similar patterns of reliance on forest flora and decoction-based preparations.

Table 1: Demographic Details of Informants.

S. No	Gender	Age Group (Years)	Role in Community	Source of Knowledge
1	Male	65	Traditional Healer	Family lineage
2	Female	60	Herbal Practitioner	Ancestral learning
3	Male	70	Senior Tribal Elder	Generational transfer
4	Female	55	Medicinal Plant Collector	Family tradition

Table 2: Distribution of Medicinal Plants Based on Source.

S. No	Source of Collection	Number of Species	Percentage (%)
1	Forest Area	47	55%
2	Local Surroundings	34	40%
3	Market Purchase	4	5%
4	Total	85	100%

Table 3: Common Ailments and Corresponding Herbal Remedies.

S. No	Ailment	Local Name	Botanical Name	Mode of Administration
1	Fracture	Elumbotti	<i>Ormocarpum sennoides</i>	Internal (Powder with milk)
2	Diabetes Mellitus	Sirukurinjan	<i>Gymnema sylvestre</i>	Internal (Leaf powder)
3	Skin Diseases	Sivanarvembu	<i>Indigofera aspalathoides</i>	Decoction
4	Viral Fever	Perunthumbai	<i>Anisomeles malabarica</i>	Decoction
5	Renal Calculi	Poonai Meesai	<i>Orthosiphon stamineus</i>	Powder
6	Wound Healing	Unni	<i>Lantana camara</i>	External application

Table 4: Sixteen Herbs Used in Poison Management.

S. No	Local Name	Botanical Name	Part Used
1	Siriyangai	<i>Andrographis paniculata</i>	Leaf
2	Periyangai	<i>Andrographis lineata</i>	Leaf
3	Kaatu Perungaya Ver	<i>Ferula asafoetida</i>	Root
4	Chinna Pambu Kalakkai	<i>Rauvolfia tetraphyla</i>	Root
5	Aagaya Garudan Kizhangu	<i>Corallocarpus epigaeus</i>	Tuber
6	Etti Pattai	<i>Strychnos nux-vomica</i>	Bark
7	Purasam Ver	<i>Butea monosperma</i>	Root
8	Suruli Vidhai	<i>Hedychium coronarium</i>	Seed
9	Eswaramooli	<i>Aristolochia indica</i>	Leaf
10	Azhinjil	<i>Alangium lamarckii</i>	Root
11	Navakonji Ver	<i>Rauvolfia serpentina</i>	Root

12	Nilappanai Kizhangu	<i>Curculigo orchioides</i>	Tuber
13	Boomi Sarkkarai	<i>Ipomoea batatas</i>	Root
14	Kan Vali Kizhangu	<i>Gloriosa superba</i>	Tuber
15	Chithiramoola Ver	<i>Plumbago zeylanica</i>	Root
16	Vellarugu Ver	<i>Enicostema axillare</i>	Root

Table 5: Forms of Preparation of Medicines.

S. No	Preparation Type	Description	Frequency of Use
1	Decoction (Kudineer)	Boiled herbal extract	Very Common
2	Chooranam (Powder)	Dried powdered herb	Very Common
3	Juice	Fresh plant extract	Common
4	Karkam	Paste preparation	Moderate
5	External Paste	Topical application	Common



Fig. 1 Seemai naayuruvi (*Stachytarpheta urticifolia*)

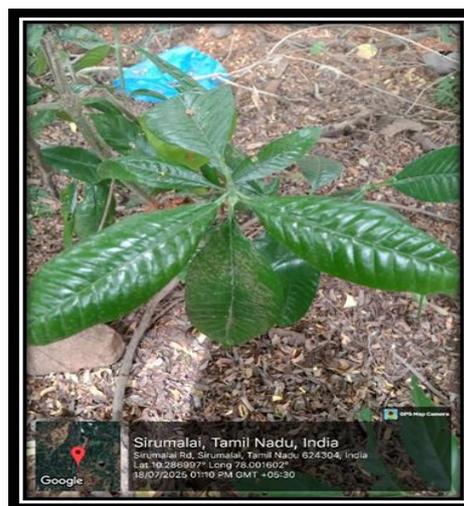


Fig. 2 Pavetta indica (*Paavattai*)



Fig. 3 Peiseenthil (*Corallocarpus epigaeus*).

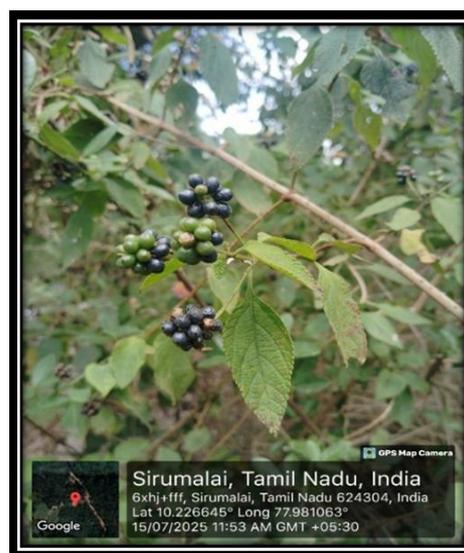


Fig 4. Unni (*Lantana camara*)



Fig. 5 *Ranakalli (Bryophyllum pinnatum)*.

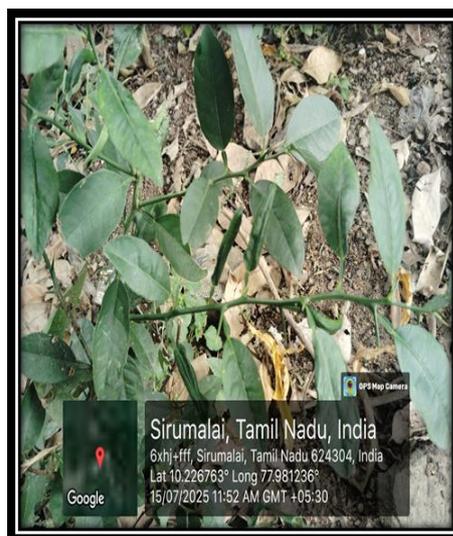


Fig.6 *Kaatu elumichai (Atlantia monophylla)*.

CONCLUSION

The Ethnomedical practices of the Kattu Naickan tribe represent a valuable repository of indigenous knowledge. With 145 documented medicinal plant species and specialized poison management expertise, the community contributes significantly to traditional healthcare heritage. Immediate steps toward documentation, conservation, and scientific validation are necessary to safeguard this knowledge for future generations and integrate it into evidence-based healthcare systems.

FUTURE SCOPE OF THE STUDY

This study provides an impulse to promote comprehensive documentation of medicinal flora used for treating different ailments, providing the medicinal data for further research and protection of traditional medicine. It highlights the need to document ethno medicinal practices of various countries, compiled together for implementing the tradition- based valuable treatment procedures.

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CONFLICT OF INTEREST

The author declares no conflict of interest.

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