DOCUMENTATION AND QUALITY EVALUATION OF ANTI-DIABETIC INDIGENOUS HERBAL MEDICINES USED IN JALANDHAR DISTRICT AND NEARBY AREAS

Dissertation 1 Report

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CERTIFICATE

This is to certify that **Dimple** (Registration No. 11715192) has personally completed M.Sc. dissertation 1 entitled "DOCUMENTATION AND QUALITY EVALUATION OF ANTI-DIABETIC INDIGENOUS HERBAL MEDICINES USED IN JALANDHAR DISTRICT AND NEARBY AREAS" under my guidance and supervision. To the best of my knowledge, the present work is the result of her original investigation and study. No part of dissertation has ever been submitted for any other purpose at any University.

The project report is appropriate for the submission and the partial fulfilment of the conditions for the evaluation leading to the award of Master of Nutrition and Dietetics.

Date: 12 May, 2018

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DECLARATION

I hearby declare that the work presented in the pre-dissertation report entitled "DOCUMENTATION AND QUALITY EVALUATION OF ANTI-DIABETIC INDIGENOUS HERBAL MEDICINES USED IN JALANDHAR DISTRICT AND NEARBY AREAS" is my own and original. I have carried out the work at School of Agriculture, Lovely Professional University, Phagwara, Punjab, India under the guidance of **Dr. Ashwani Kumar**, Assistant Professor (Food Technology), School of Agriculture, Lovely Professional University, Phagwara, Punjab, India, for the award of the degree of Master of Science in Food Technology.

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I certified that the above statement made by the student is correct to the best of my knowledge and belief.

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1. Introduction

World health organization (WHO) has defined diabetes mellitus (DM) as a chronic disease caused by inherited and/or acquired deficiency in production of insulin by the pancreas, or by the ineffectiveness of the insulin produced (WHO, 1999; ADA, 2015; Li et al. 2004). It is a metabolic disorder of endocrine system which is characterized by hyperglycemia or hypoglycemia. Diabetes is categorized into two types i.e. insulin dependent)type 1(and insulin independent)type 2(. Type 1 diabetes (insulin dependent) is caused due to the failure of pancreas to produce insulin. This form develops most frequently in children and adolescents. On the other hand, Type 2 diabetes (insulin independent) results from impaired action of insulin in body. This type is more prevalent in adults in comparison to type 1 diabetes (Nagalakshmi et al. 2017) and contributes to about 90 percent of the adult cases worldwide. Presently, about 300 million people are reported to be suffering from diabetes worldwide (Tasabang et al. 2016). According to WHO 1999, in entire globe an estimated 3.4 million deaths occurs per annum due to high blood sugar levels.In India, the number of diabetic patients has been increased from 31.7 million in 2000 to 69.1 million in 2016 (Khavane et al. 2017). A record increase of 117% has been noticed in diabetic patients in last 16 years and India has now been declared as "Diabetic Capital" of the world (Times of India, 2017). Diabetes also increases the incidents of hypertension and approximately 70% of diabetic patients suffer from this side effect. Hypertension is related to increased risk of cardiovascular diseases (CVD) in diabetic patients (Dhaliwali et al. 2015). Diabetes has no permanent cure but can be controlled or suppressed with the help of chemical or natural ways. Various chemical drugs like miglitol, acarbose, metformin etc. are used in the management of diabetes (FDA, 2018) whereas traditional medicinal systems rely on herbs to suppress diabetes. Researchers are still trying to find a medicine or product which can eradicate the disease from the roots (Li et al. 2004). Due to the lack of any solid claimant for the treatment of diabetes till date, many people continue to trust the indigenous medicinal systems. Hence, it is important to review the various traditional medicinal systems, important herbs, their bioactive compounds and mechanism of treatment to generate useful information to carry future studies and develop drugs for the treatment of DM. Every civilization has developed indigenous medicinal systems to treat or cure diseases with the help of locally available materials. The ageold experience of thousand years in medical therapy has made these systems more reliable.

Majority of population trusts the traditional medicinal systems over allopathic system due to its lesser known health implications. Among the traditional medicinal systems; Indian Ayurveda system, Chinese traditional medicinal system, Arab traditional medicinal system and African traditional medicinal system are world renowned and a crisp review of these medicinal systems has been presented here. A variety of herbal plants and trees used for the treatment of DM, their bioactive components, mode of action and related animal studies have been discussed here.

2. Problem background

Diabetes is a chronic metabolic disorder with no permanent cure. In diabetic patients, a regular medication is required to keep the blood glucose level under control. The branded products are more expensive than their indigenous counter parts and hence put a huge burden on diabetic patients. At the same there is no assurance regarding the quality of indigenous medicines as the quality varies significantly. Hence, there is a need of documentation and quality evaluation of indigenous medicines.

3. Review of Literature

3.1 Diabetes Mellitus

Diabetes mellitus is a chronic disease caused by inherited and/or acquired deficiency in production of insulin by the pancreas, or by the ineffectiveness of the insulin produced (WHO, 1999).

3.2 Different traditional medicinal systems for the treatment of diabetes mellitus

Every civilization has developed indigenous medicinal systems to treat or cure diseases with the help of locally available materials. The age-old experience of thousand years in medical therapy has made these systems more reliable. Majority of population trusts the traditional medicinal systems over allopathic system due to its lesser known health implications. Among the traditional medicinal systems; Indian Ayurveda system, Chinese traditional medicinal system, Unani traditional medicinal system and African traditional medicinal system are world renowned and a crisp review of these medicinal systems has been presented here. A variety of herbal plants and trees used for the treatment of DM, their bioactive components, mode of action and related animal studies have been discussed here.

3.2.1 Traditional medicinal system prevalent in India

Ayurveda is the major traditional system practiced in India. It is primarily based on plants and herbs. A list of indigenous flora i.e. Neem)Azadirachta indica), Babul)Acacia arabica(, Kawar)Aloe barbadensis(, Peepal)Ficus religiosa(, Jamun)Eugenia jambolana), Karela)Momordica chartantia(, Lahsun)Allium sativum) etc. are used to treat DM (Modak et al. 2007). These herbs are rich in antioxidants and phytochemicals. Phytochemicals increase antioxidant enzymes like catalase and glutathione, which supress the high glucose levels and hence increases the insulin production in the body (Rizvi and Mishra, 2013). Many ayurvedic medicines comprising of these herbs or their active components are commercially available in India. A separate ministry Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy (AYUSH) has been constituted under government of India with a purpose to develop education and research in indigenous medicinal system. By seeing the popularity of indigenous medicinal systems, All

India Institute of Ayurveda has been established in national capital Delhi by government of India (Zee News India, 2017).

Table 3.1: Popular Indian herbs used for treatment of diabetes mellitus

Plant name	Parts	Bioactive compounds	Related animal studies	References
(Botanical	used			
name/Family)				
Peepal	Leaves,	Flavonoids,	Aqueous extracts of bark	(Makhija et al.
(Ficus	bark,	glycosides, alkaloids,	of peepal (50 and 100	2010)
religiosa/Morac	fruits,	steroids, saponins,	mg/kg body weight)	(Pandit at al.
eae)	roots,	vitamin C in non-	showed hypoglycemic	2010)
	seeds	enzymatic, enzymatic	effect in streptozotocin	
		constituents are	induced diabetic rats.	
		catalase, peroxidase		
		etc.		
Blackberry	Leaves,	Alkanoids, flavonoids,	Aqueous extract of seeds	(Prince et al.
(Syzygium	roots,	tannins, saponins,	of Syzygium cumini (2.5	1998)
cumini or	bark,	sterols, carbohydrates,	g and 5 g/kg body	
Eugenia	stem,	polyphenols, ellagic	weight) showed	
jambolana	seeds	acid, salicyclic acid,	hypoglycemic effect in	
/Myrtaceae)		fibre	alloxan induced diabetic	
			rats.	(Sharma et al.
			Ethanoilc extract of seeds	2003)
			of Eugenia jambolana	
			(100 mg/kg body weight)	
			showed hypoglycemic	
			activity in alloxan	
			induced diabetic rats.	
Bitter melon	Pulp,	Triterpene, proteid,	Aqueous extract of bitter	(Alam et al.
(Momordica	seeds	steroid, alkaloid,	melon lowered the	2015)
charantia/Cucu	and	inorganic, lipids and	glycemic response to	(Joseph and

rbitaceae)	leaves	phenolic compounds,	both oral and	Jinni, 2013)
		saponins, charantin,	intraperitoneal glucose	
		resins	load in normal mice	
			without altering the	
			insulin response.	
			Aqueous extract powder	
			of fresh unripe whole	
			fruits at a dose of 20	
			mg/kg body weight	
			reduced fasting blood	
			glucose by 48%.	
Aloe vera	Leaves	Anthraquinones,	Anthraquinone extract of	(Youssef and
(Barbadensis	extract	glycosides, vitamins	leaf pulp of aloe vera	Messiha, 2013)
mill/Asphodelac)A, C, E(, lipids,	(300 mg/kg body weight)	
eae)		sterols, gibberlins,	showed hypoglycaemic	
		pseudoprototinosaponi	effect in streptozotocin	
		n AIII and	induced adult male	
		prototinosaponins	albino rats.	
		AIII		
Garlic	Whole	Alkaloids, saponins,	Minerals and vitamin	(Divya et al.
(Allium sativun		steroids,	extract of garlic juice (1	2017)
/Amaryllidaceae		carbohydrates,	ml/100 g body weight)	(Demerdash et
)		tannins, flavonoids,	showed hypoglycemic	al. 2005)
		terpenoids, phenolics	effects in alloxan induced	
			diabetic rats.	
			Garlic oil (50 mg/kgbody	
			weight) showed	(Ohaeri, 2001)
			hypoglycaemic effect in	
			streptozotocin induced	
			white male albino rats.	

3.2.2 Traditional medicinal system prevalent in China

In traditional Chinese medicinal system, diabetes is categorised as *Xiaokezheng* and *Xiaodanzheng*. Predominance of *yin* deficiency explains the syndrome differentiation of the disease. According to the religion of China, *yin* deficiency means negative forces which are present in the food and the universe. There should be a positive balance between *yin*) negative forces (and *yang*) positive forces (. According to Chinese theory these forces regulate the life of their people. Even if one of these forces is lacking, it results in the symptoms of DM. Inflammation in the stomach, deficiency of kidney *yin*, deficiency of *qi* and *yin* or *yin* and *yang* has been described as the symptoms of DM. The *yin*-deficiency may be due to emotional disorders, overstrain, improper diet and excessive sexual activities. Chinese doctor suggests the use of integrated treatment for diabetes. The treatment includes nourishing *yin*, moistening of dryness and increasing fluid production. They usually mix two or more herbs together to make one formula which shows hypoglycaemic activity as well as suppress the symptoms caused by the DM (Xie et al. 2011). Chinese herbs are reported to be most effective for type 2 DM, when they are consumed in mixture form.

Table 3.2: Important Chinese herbs for treatment of Diabetes mellitus

Chinese	Botanical	Parts	Bioactive	Related animal	Reference
name/Engli	name/Fa	used	compounds	studies	
sh name	mily				
Shu di	Rehmanni	Roots	Catalpol, phenethyl	Oligosaccharide in	(Zhang et al.
huang/Reh	a		alcohol,	rehamanniae (100	2004)
mania root	glutinosa/		leucosceptoside,	mg/kg body	
	Scrophula		glycosides,	weight) showed	
	riaceae		monocyclic	hypoglycemic	
			sesquiterpenes,	effects in alloxan	
			pinellic acid,	induced diabetic	
			mannitol, ajugol,	rats.	
			uracil, raffinose,		

			terpenoids		
Guang fang	Stephania	Roots	Alkaloids,	Alkaloids present	(Semwal et al.
<i>ji</i> /Hang	tetrandra		tetrandrine,	in Stephania	2010)
fang ji	moore/Me		protoberbrine,	tetrandra S.	(Jung et al.
	niperm		morphinane,	Moorehas been	2006)
	aceae		phenanthrene,	reported to cause	
			steroids, terpenoids,	anti-hyperglycemic	
			lignans, coumarins	effects in	
				streptozotocindiabe	
				tic mice at a dosage	
				of 1 mg/kg body	
				weight.	
Huang	Rhizoma	Roots,	Isoquinoline,	Berberine extract	(Tang et al.
lian/Coptis	coptidis/R	stem,	alkaloids, berbrine,	of coptis (200	2006)
goldthread	anuncula	seeds,	palmatine,	mg/kg body	(Wang et al.
		leaves	jateorrhizine,	weight) showed the	2004)
			epiberbrine,	hypoglycemic	
			coptisine	activity in alloxan	
				diabetic rats.	
Huang	Radix	Roots	Isoflavones,	Ethanolic extracts	(Xiao et al.
<i>Qi</i> /Milk	astragali/		isoflavonoids,	(2 g/kg body	2008)
vetch root	Fabaceae		saponins, galoside 2,	weight) showed	(Hoo et al.
			astragaloside,	hypoglycemic	2010)
			polysaccharides	activity in db/db	
				induced diabetic	
				mice.	
Bai	Ginkgo	Leave	Flavonoid	Gingko protein	(Rudge et al.
guo/Maiden	biloba/Gin	s	glycosides, terpene	extracts (200	2017)
hair tree	kgoaceae		lactones, ginkgolic	mg/kg body	
			acids	weight) showed	
				hypoglycaemic	

	activity in pregnant	
	rats and effect on	
	their reproductive	
	outcome.	

3.2.3 Unani medicinal system

Unani system of medicine deals with various conditions of health and provides promotive, preventive and curative health care. Scientific principles and holistic concepts of health and healing are the basis of Unani treatment system (Subbarayappa, 2001). This system is practiced in India, Bangladesh, Pakistan, Srilanka, Nepal, China, Iran, Iraq, Malaysia, Indonesia, Central Asia, Middle Eastern countries, some African and European countries (Rahman et al. 2013). Arabs developed the Unani medicinal system into elaborate medical sciences and its teaching was started in Greece. So, Unani medicinal system is also known as Greco-Arab medicinal system (Husain et al. 2010). Unani medicinal system is based on four humors. These are 4 fluids of body i.e. blood, phlegm, yellow bile, and black bile which are related to mental, emotional, spiritual and physical causes of any disease. The humors are assigned temperament such as blood is hot and moist, phlegm is cold and moist, yellow bile is hot and dry, and black bile is cold and dry (Rahman et al. 2008). Procedure of diagnosis of any disease in Unani medicinal system includes body heat, urine and stool examination, observation and palpitation.

Table 3.3: Herbs used for the treatment of Diabetes mellitus in Unani system

Herb	Botanical	Parts	Bioactive	Related animal	References
name	name/ Family	used	compounds	studies	
Bitter	Citrullus	Fruits,	Glycosides,	Saponin extracts of	(Abdel-Hassan et
apple	colocynthus/Cuc	leaves,	alkaloids,	rind of bitter apple	al. 2000)
	urbitaceae	roots and	flavonoids,	(50 mg/kg body	(Hussain et al.
		stem	carbohydrates,	weight) showed	2014)
			phenolic acids,	hypoglycemic	
			tocopherols,	effect in alloxan	
			carotenoids	diabetic rats and	

				rabbits.	
Virgin'	Fagonia indica	Whole	Glycosides,	Methanolic extracts	(Anil et al. 2012)
S	brum orFagonia	plant	saponins,	of juice of virgin's	(Kamran et al.
mantle	cretica/Zygophyl		tannins,	mantle (500 mg/kg	2017)
	laceae		alkaloids,	body weight)	
			flavonoids,	showed	
			anthraquinones,	hypoglycemic	
			coumarins,	effects in alloxan	
			phenols	induced diabetic	
				rabbits.	
Cape	Melia	Fruits,	Flavonoids,	Methanolic leaf	(Munir et al. 2012)
lilac	azedarach/Melia	leaves,	phenolic,	extract showed	(Sultana et al.
	ceae	stem,	linoleic acid,	increase in wound	2014)
		bark	saponins,	healing capacity in	(Vijaya et al. 2012)
			terpenoids,	alloxan diabetic	
			glycosides,	rats.	
			rutins, alkaloids		
Spiny	Mimordica	Fruits,	Phytic acid,	Methanol extracts	(Talukdar et al.
gourd	dioca/Cucurbits	seeds	alkaloids,	of spiny gourd (300	2014)
			flavonoids,	mg/kg body	(Gupta et al. 2011)
			steroids,	weight) showed	
			saponins,	anti-diabetic	
			triterpenoids,	activities in	
			lectin	streptozotocin	
				induced diabetic	
				rats.	
Hisawa	Rhazya stricta	Fruits,	Alkaloids,	Rhazya (2-4 g/kg	(Ali et al. 2018)
rg	decne/Apocynac	seeds,	flavonoids, b-	body weight)	(Ali, 1997)
	eae	flowers,	carboline	showed anti-	
		leaves		diabetic properties	
				in alloxan induced	

		diabetic rats	s.	(Wasfi et al. 1994)
		Lyophilized	d	
		extracts (2.	.36 g/kg	
		body	weight)	
		showed	anti-	
		diabetic ef	fects in	
		streptozoto	cin	
		induced	diabetic	
		rats.		

3.2.4 Traditional medicinal system prevalent in Africa

In Africa, traditional medicinal system is ritually followed in Guinea (Balde et al. 2006) and nearly 45000 species of medicinal plants are used in treatment of various diseases (Mahomoodally, 2013). Herbal medicines used in Africa are very effective and most of them have been approved chemically. According to 2005 data, about 80% of the people in Africa followed herbal treatments and had positive results (Elujoba et al. 2006). Many surveys have been conducted in Africa which proved the effectiveness of traditional medicines. Tsabang et al. conducted a survey on 116 diabetic patients in Cameroon, Africa in 2016 and reported that Allium cepa, Momordica charantia, Persea americana and Phyllanthus amarus were the principal plants used for the treatment of DM. Authors concluded that herbal medicine played an important role in the management of diabetes in Cameroon (Tsabang et al. 2016).

Table 3.4: Important herbs used in African medicinal system for the treatment of Diabetes Mellitus

Name of the herb	Parts	Bioactive	Related animal studies	Reference
(Botanical	used	compounds		
name/Family)				
Roiboss tea plant	Leaves,	Aspalathin,	Alkaline extracts of	(Marnewick et
(Aspalathus	stem,	dihydrochalco	rooibos tea (500 mg/kg	al. 2009)
linearis/Fabaceae)	seeds	ne, orientin,	body weight) showed	(Ulicna et al.

		flavones,	hypoglycemic activity and	2006)
		isovitexin,	reduced the oxidative	
		flavanones,	stress in streptozotocin	
		tannins,	induced diabetic rats.	
		flavanols		
Gotu kola	Leaves	Alkaloids,	Ethanolic and methanolic	(Devi et al.
(Centella		flavonoids,	extracts of leaves of this	2012)
asiatica/Apiaceae)		phenols,	plant (250 mg/kg body	(Chauhan et al.
		tannins,	weight) showed anti-	2010)
		glycosides,	diabetic effects in alloxan	
		steroids,	induced diabetic rats.	
		saponins		
Honey bush/	Leaves	Xenthone,	Hot water aqueous	(Muller et al.
kustee/ herbal tea		magniferin,	honeybush extract (5	2011)
(Cyclopia		flavone,	mg/kg body weight)	
intermedia/Fabace		glycoside,	showed anti-diabetic	
ae)		flavanones,	activities in streptozotocin	
		luteolin,	induced diabetic rats as	
		isomagniferin,	well as in diet induced	
		hesperetin,	diabetic rats.	
		eriocitrin		
Wood spider or	Leaves,	Flavonoids,	Secondary aqueous root	(Mncwangi et
devil's claw	roots	phytosterols,	extract of devil's claw	al.2012)
(Harpagophytum		glycosides,	plant (800 mg/kg body	(Mahomed et al.
procumbens/Pedali		acteoside,	weight) showed	2004)
aceae)		isoacteoside	hypoglycemic activity in	
			streptozotocin induced	
			diabetic rats.	
Umckalaabo	Leaves	Terpenoids,	Essential oil of leaves of	(Asgarpanah et
(Pelargonium		flavonoids,	Pelargonium graveolens	al. 2015)
graveolens/Gerani		phenolics,	(two doses of 75 mg/kg	(Boukhris et al.

aceae)	cinnamic	and 150 mg/kg body 2012)
	acids, tannins,	weight along with
	coumarins,	reference drug
	isomenthone	glibenclamide) showed
		hypoglycemic activity in
		alloxan induced diabetic
		rats.

3.3 Herbal formulations available in market, their dosage and health claims

The traditional herbal medicine system has entered a new era of nutraceuticals. Many formulations of these herbal plants are available in market in the form of pills, capsules, oils and syrups. These products may either be a preparation of single herb or formulation of two or more herbs. Health claims for many disorders like obesity, DM, CVD and sex irregularities has been reported for these products. These are known to control diabetes either by controlling glycemic index or enhancing the effectiveness of insulin.

Table 3.5: Herbal medicines available in Indian market, their dosage and their health claims

Medicines/ Dosage	Herb present	Health claims	References
Pitambri Karela	Bitter melon	Used in the treatment of	(Indiamart, 2017)
Tablets/2 in a day,		DM, kidney stones,	
Himalaya Karela		fever, reducing obesity,	(Indiamart, 2017)
Tablets/2 in a day,		hypertension, in cancer,	
Gluco Care Karela		improving immune	(Indiamart, 2017)
Medicine/2 in a day,		functions.	
Deemark Diaba			(Indiamart, 2017)
Amrit/50 mg in a			
day			
Durkee Garlic Oil/2-	Garlic	Helps to cure diabetes,	(Amazon, 2017)
5 mg,		CVD, hyperlipidemia,	(Bongiorno et al.

Patanjali Aloe vera Juice/10-20 ml daily, Triphala Aloe vera Juice/1 cap twice a	Aloe vera	hypertension, helps in cancer, fungal infections, have antimicrobial effects. Helps to treat diabetes, hypertension, skin problems, rashes, wounds and hyperlipidemia.	(Indiamart, 2017) (Indiamart, 2017) (Loots et al. 2007)
Planetary Herbals Rehmannia Endurance 150 Tabs/1 tablet 3 times a day	Rehmania root	Helps to cure DM, treat menopause, impotence, hair loss and other hormone deficiencies.	(Amazon, 2017)
Radiant Natural Whole Herb Berberine 900mg/2 capsules daily	Coptis goldthread	Helps to cure diabetes, maintain healthy cholesterol levels, manage triglycerides and support healthy lipid levels.	(Amazon, 2017)
Pure Mountain Botanicals Immuno Well RX Capsules/1 capsule twice daily	Milk vetch root, mushroom, garlic	Helps to cure diabetes, fight ageing signs, CVD and sometimes cancer.	(Amazon, 2017)
Shri ji Herbal Spenai Bitter Powder Anidiabetic Medicine/2-3	Spiny gourd	Helps to cure diabetes, reduces weakness, controls excessive hunger, excessive thirst,	(Indiamart, 2017)

maintains functions of	
organs, improves	
digestion and clears the	
bowel.	
	organs, improves digestion and clears the

4. Proposed Research Objectives

- 1. To conduct survey to explore the indigenous medicines used for diabetes mellitus in Jalandhar district and nearby areas.
- 2. To collect and evaluate different herbal medicine samples.

5. Proposed Research Methodology

Experiment 1: Survey and documentation of indigenous medicines used for diabetes treatment in Jalandhar district and nearby areas

A survey will be conducted in different regions of district Jalandhar and nearby areas. Local *hakims/vaids* dealing with indigenous herbal medicines for diabetic treatment will be visited and information will be collected from them depending upon a pre-designed questionnaire. The questionnaire is provided in Appendix 1.

Experiment 2: Collection of samples and their quality evaluation:

• Collection of samples in areas of Jalandhar district and nearby areas:

Kapurthala, Maksuda, Ramamandi, Alavalpur, Adampur, Jalandhar

• Test to be performed:

a. Moisture content (Elezabeth and Subramanian, 2013)

b. Total Sugars and reducing sugars (AOAC 2000)

c. Proteins (Lowry et al. 2009)

d. Fats (AOAC 2000)

e. Crude fibre (AOAC 2000)

f. Ash content (Elezabeth and Subramanian, 2013)

g. Dietary fibre (AOAC 2000)

h. Phenols (Blainski et al. 2003)

i. Tannins (Durai et al. 2016)

j. Flavonoids (Majaw and Moirangthem, 2009)

FTIR analysis of collected sample.

6. Expected Research Outcome

The proposed research will help in the documentation of indigenous medicines used to cure diabetes mellitus in the Jalandhar district and nearby areas. Further quality evaluation of these indigenous herbs will help patients to select medicines on the bases of their composition and hence reliability on the traditional medicinal systems has been increased.

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Appendix 1

Questionnaire for the survey of indigenous anti-diabetic herbal medicines available in Jalandhar district and nearby areas: (sample)

DATE: PLACE:

1.	Name of the medicine:				
2.	Ingredients:	a.			
		b.			
		c.			
		d.			
		e.			
		f.			
3.	Procurement of ingredients		a.	Self-Grown ()	
			b.	Procured from	other
				sources, Name	
				-	
4.	If ingredients are easily available in local			o Yes	
	market			o No	
5.	Pre treatments	a.			
		b.			
		c.			
		d.			
		e.			
5.	Ratio of ingredients used	a.			
		b.			
		c.			
		d.			
		e.			
6.	Methods of preparation		a.	Traditional	

		b. Modern Details
7.	Doct two two two often proporations if any	
	Post treatments after preparations, if any	2 1
8.	Storage before consumption, if any	a. 2 days ()
		b. 3 days ()
		c. One week () d. Other ()
9.	Mathod of Storage	` '
9.	Method of Storage	a. Room temperature ()
		b. Cooling () c. Freezing ()
		c. Freezing () d. Dry ()
10.	Effectiveness of the medicine	a. Cures completely ()
		b. Just a preventive measure
		()
11.	Recommended consumption duration	10 days ()
		20 days ()
		30 days ()
		Others ()
12.	Possible Drug Food Interaction	<u>I</u>
	Inhibitors	a
		b
		c
		d
	Enhancers	a

		1
		b
		c
		d
13.	Side effects of the medicine	
	o Yes	
	o No	
	If yes, Name	a
		b
		c
14.	Precautions during consumption	a
		b
		c
15.	How many cases you solved till now?	