LAMPIRAN 1

Zawani (2005) : *Indonesia Citation Network 1*

OBSERVASI TUMBUHAN OBAT TRADISIONAL UNTUK PENYEMBUHAN HEPATITIS DI NUSA TENGGARA BARAT: STUDI KASUS DI KECAMATAN PEMENANG

Karwati Zawani *

Abstrak: Kecamatan Pemenang Barat, Kabupaten Lombok Barat merupakan bagian dari Kawasan Hutan Pusuk di Nusa Tenggara Barat yang memiliki keanekaragaman flora yang cukup tinggi dan sangat potensial sebagai sumber bahan obat-obatan terutama sebagai bahan obat tradisional bagi masyarakat di sekitar hutan, termasuk sebagai bahan obat hepatitis. Observasi tumbuhan yang bisa dimanfaatkan untuk pengobatan penyakit hepatitis telah dilakukan pada bulan November 2003 sampai dengan Januari 2005. Tujuan penelitian ini adalah untuk mempelajari jenis-jenis tumbuhan yang bisa dimanfaatkan untuk pengobatan hepatitis, cara pengolahan, penggunaan, populasi dan sifat-sifat agronomi dari masing-masing tumbuhan tersebut. Pengumpulan data dilakukan secara *survey*. Dari hasil pengamatan diperoleh 25 jenis tumbuhan yang bisa dimanfaatkan sebagai bahan obat tradisional untuk pengobatan hepatitis. Karakter agronomis dari tumbuhan obat yang ditemukan cukup beragam yaitu berupa tumbuhan herba, semak sampai bentuk pohon. Populasi tertinggi yang ditemukan adalah *Oxalis curniculata*. Teknik pengolahannya dilakukan secara tradisional yaitu dengan cara merebus atau digunakan dalam bentuk segar berupa campuran dari beberapa jenis simplisia tumbuhan atau satu jenis simplisia saja.

Kata-kata kunci: Pemenang , tumbuhan obat, hepatitis

Abstract: Pemenang, West Lombok is a part of Pusuk Forest in West Nusa Tenggara. It has a high biodiversity, particularly plants which are potential as sources of agrochemical and traditional medicines such as hepatitis treatment. Observation of medicinal plants for hepatitis recovery was carried out from November 2003 to January 2005. The objective of the research was to explore the plants which can be used for hepatitis recovery, their processing, usage, also population and agronomical characteristics. Data were collected by survey. The observation results showed that there were 25 species of plants which can be used for hepatitis treatment. The agronomical characteristic of the plants observed was varied. The highest population was *Oxalis curniculata*. Their processing was traditionally such as by boiling. Some of them were used freshly as a mixture part of a medicine.

Key words: Pemenang, medicinal plant, hepatitis

PENDAHULUAN

Tumbuhan berkhasiat obat merupakan salah satu bahan obat tradisional yang paling banyak digunakan oleh masyarakat untuk menanggulangi masalah-masalah kesehatan yang dihadapi, baik untuk tujuan pemeliharaan, pengobatan maupun untuk pemulihan kesehatan. Berbagai jenis ramuan tradisional dari tumbuh-tumbuhan ternyata cukup ampuh dalam mencegah serta mengobati berbagai jenis penyakit, termasuk untuk pengobatan penyakit hepatitis (Wijayakusuma, 2000).

Penyakit hepatitis banyak ditemukan di kawasan Asia Pasifik terutama di wilayah Asia Tenggara.

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Sumber =

LAMPIRAN 2

Hadi Sutarno (2002) : *Indonesia Citation Network 2*

Prosiding Simposium Nasional II Tumbuhan Obat dan Aromatik, 2002

TUMPANGSARI TUMBUHAN OBAT DALAM MENINGKATKAN PRODUKTIVITAS LAHAN PADA KURUN WAKTU SATU TAHUN

Hadi Sutarno

PROSEA Indonesia, Bidang Botani, Puslitbang Biologi-LIPI, Bogor
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ABSTRACT

The effort to increase productivity of cropping land, 23 medicinal plant species were evaluated as the component of multiple cropping. Altitude and planting time were the main factors in carrying out multiple cropping in order to obtain high productivity. According to the results of study it was recommended that between 500-700 m above sea level as optimum altitude for multiple cropping of those 23 species. Five models of multiple cropping were introduced. The highest productivity was found in the Model Dry Season Multiple Cropping with component of kecipir (*Psophocarpus tetragonolobus* (L.) DC.), jinten putih (*Cuminum cyminum* L.) and mentha (*Mentha arvensis* L.).

Key words: multiple cropping, productivity medicinal, aromatic plants

PENDAHULUAN

Kebutuhan bahan dasar obat tradisional semakin meningkat yang disebabkan ada kecenderungan semakin banyak masyarakat yang mengobati berbagai penyakit dengan bahan dari alam. Perkembangan industri obat tradisional pun menuntut kebutuhan bahan dasar yang setiap saat tersedia serta berkesinambungan. Pengembangan budidaya tanaman obat, pada umumnya masih dilakukan secara tumpangsari daripada monokultur. Kelebihan tumpangsari adalah mengurangi risiko kegagalan total. Dengan bermacam-macam jenis yang ditanam, keuntungan dan kerugian yang dialami satu jenis akan saling menutupi dengan jenis yang lain. Masalahnya adalah perbedaan kebutuhan tinggi tempat tumbuh, cahaya, air, tanah dan iklim tidak mungkin dipenuhi bersama di satu lokasi penanaman. Pemecahan masalah tersebut perlu diteliti tinggi tempat tumbuh yang ideal untuk penanaman tumbuhan obat secara tumpangsari.

Ketinggian tempat berpengaruh terhadap pertumbuhan tanaman karena menimbulkan perbedaan suhu dan radiasi matahari. Sudah menjadi kenyataan suhu udara harian berperanan dalam proses pembungaan dan fertilitas sel kelamin bunga. *Machaerina rubiginosa*, *Eleocharis dulcis*, dan *Scirpus juncoides* yang dijumpai tumbuh dan mampu berbiji secara alami di dataran rendah di Jawa, ternyata yang tumbuh di dataran tinggi tersebut bunganya steril. Kebalikannya adalah *Albizia lophantha* tumbuh normal pada ketinggian 1700-3100 m dpl., tetapi yang tumbuh di 1100 m dpl. bunganya steril (Backer dan Brink, 1965).

Dalam sistem tumpangsari, selain ketinggian tempat, pergiliran jenis yang ditanam perlu mendapatkan perhatian. Siklus hidup yang lebih pendek setelah pemanenan perlu digilir dengan jenis yang lain atau jenis yang dipanen ditanam kembali. Pergiliran penanaman tunduk pada fenomena 'suksesi' yang pada aplikasinya antara lain waktu tanam hendaknya tidak di luar musim pertumbuhan secara alami. Guna meningkatkan produktivitas lahan dalam system tumpangsari, perlu dicarikan ketinggian tempat dan waktu tanam yang sesuai dengan jenis tumbuhan yang ditanam.

Penelitian ini bermaksud mencari model tumpangsari dimana jenis tumbuhan obat sebagai komponen tumpangsari yang digunakan sebagai bahan intervensi ke lahan yang sudah ditumbuhi pohon-pohon atau jenis yang lain. Sehingga hasil usaha penambahan penanaman tersebut diperhitungkan sebagai peningkatan produktivitas lahan.

BAHAN DAN METODE

Kriteria komponen tumpangsari bahan intervensi adalah jenis tumbuhan obat yang sudah diketahui teknik budidaya dan hasilnya. Upaya penentuan jenis-jenis bahan intervensi dilakukan

LAMPIRAN 3

Jantan (1998) : Malaysia Citation Network 1

The Real Value of Medicinal Plants in Traditional Health Care

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Abstract
Medicinal plants have been used to treat various ailments since time immemorial especially in the tropics, where the tropical forest is endowed with diverse flora and is a great storehouse of medicinal genetic resources. The traditional methods of collection or harvesting, preparation of plant extracts, formulation of medicaments and dispensing of medicines are still practised to this day with little changes by a majority of traditional practitioners. Introduction of modern technology in the production of traditional medicines has resulted in the preparation of plant extracts in the form of fluid or solid extracts, powders or tinctures. Some of these are prepared as standardised processed products formulated into modern pharmaceutical forms, dressed up to look like modern drugs. However, the real value of herbal drugs as effective therapeutic agents has not yet been established due to insufficient scientific verification. The many traditional views such as that synergistic effect exists between the active components in herbal preparations to produce the desired effects need further investigation. Drug-receptor interaction study has suggested that interaction of a structurally specific drug to a receptor is an important criteria for biological response. Perhaps the mechanism of action of a herbal medicine which usually contain a mixture of several active ingredients involves multiple drug-receptor interactions to produce a cumulative response. It is necessary for the manufacturer and practitioner of plant medicines to provide experimental evidence of efficacy, safety and quality before their herbal medicines can be registered and sold to the general public. This paper attempts to examine the real value of medicinal plants as healing agents in herbal preparations. In so doing it will also determine the rationale of using medicinal plants in the traditional health care system in comparison to their usage as individual purified bioactive substances in modern medicine.

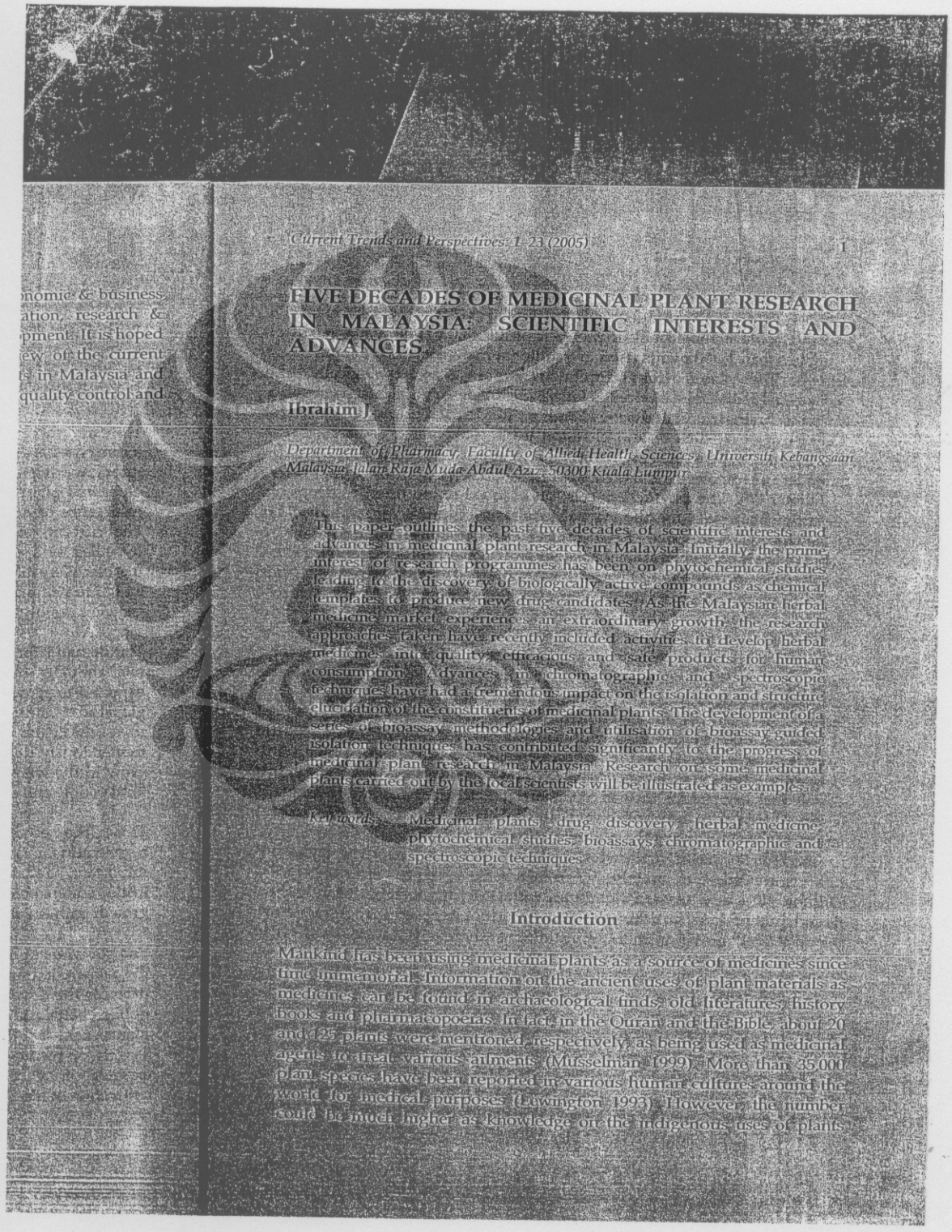
Introduction

Medicinal plants have been used as curing and healing agents since time immemorial. Knowledge of their medicinal values was mostly passed on orally from one generation to another, leaving us with a vast legacy of undocumented materials. The present practice of traditional medicine depend heavily on information obtained through ethnopharmacological experiences, with very little influence of modern science and technology. This is especially true in remote areas of underdeveloped countries in Africa, South America and Asia where traditional medicines are widely practised. Although there are documentation on the medicinal uses of some medicinal plants in old scriptures, pharmacopoeias and other publications, the information is just a tip of an iceberg. The traditional medicine practitioners are still amongst the poor rural folks who have informal education and least exposed to the knowledge of modern medicine. However, these traditional healers are experienced and skilful workers who can locate and identify the desired medicinal plants with ease from the forests. About 80% of the rural population in many tropical developing countries still depend on these traditional practioners for their health care, which also means that the people has to depend on medicinal plants for treatment (Farnsworth et al., 1985).

There are more than 35,000 plant species being used in various human cultures around the world for medicinal purposes (Lewington, 1993). The tropical forest which is endowed with rich and diverse flora is a great storehouse of these medicinal genetic resources. About 1,200 species of higher plants in Peninsular Malaysia and 2,000 species in Sabah and Sarawak

LAMPIRAN 4

Jantan (2005) : Malaysia Citation Network 2



Current Trends and Perspectives: 1–23 (2005) 1

FIVE DECADES OF MEDICINAL PLANT RESEARCH IN MALAYSIA: SCIENTIFIC INTERESTS AND ADVANCES

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This paper outlines the past five decades of scientific interests and advances in medicinal plant research in Malaysia. Initially, the prime interest of research programmes has been on phytochemical studies leading to the discovery of biologically active compounds as chemical templates to produce new drug candidates. As the Malaysian herbal medicine market experienced an extraordinary growth, the research approaches taken have recently included activities to develop herbal medicines into quality, efficacious and safe products for human consumption. Advances in chromatographic and spectroscopic techniques have had a tremendous impact on the isolation and structure elucidation of the constituents of medicinal plants. The development of a series of bioassay methodologies and utilisation of bioassay guided isolation techniques has contributed significantly to the progress of medicinal plant research in Malaysia. Research on some medicinal plants carried out by the local scientists will be illustrated as examples.

Key words: Medicinal plants, drug discovery, herbal medicine, phytochemical studies, bioassays, chromatographic and spectroscopic techniques.

Introduction

Mankind has been using medicinal plants as a source of medicines since time immemorial. Information on the ancient uses of plant materials as medicines can be found in archaeological finds, old literatures, history books and pharmacopoeias. In fact, in the Quran and the Bible, about 20 and 125 plants were mentioned respectively, as being used as medicinal agents to treat various ailments (Musselman, 1999). More than 35,000 plant species have been reported in various human cultures around the world for medical purposes (Lewington, 1993). However, the number could be much higher as knowledge on the indigenous uses of plants

LAMPIRAN 5

I.H Burkill (1966)
A Dictionary of the economic products of the Malay Peninsula Vol II

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BY
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by the MINISTRY OF AGRICULTURE AND
CO-OPERATIVES, KUALA LUMPUR, MALAYSIA.
1966

LAMPIRAN 6

Perry (1980)
Medicinal plants of east and southeast asia

MEDICINAL PLANTS

OF

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Attributed Properties

and

Uses

compiled by

Lily M. Perry

with

the assistance

of

Judith Metzger

The MIT Press
Cambridge, Massachusetts, and
London, England

LAMPIRAN 7

Dharma AP (1987)
Indonesian Medicinal Plants

Dr. A.P. Dharma

INDONESIAN MEDICINAL PLANTS

BALAI PUSTAKA
Jakarta, 1987

LAMPIRAN 8

Buletin Kebun Raya Bogor dikoleksi oleh Perpustakaan FRIM, Malaysia