

Ethnobotanical inventory and medicinal applications of plants used by the local people of Cholistan desert, Pakistan

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Databases and Inventories

Abstract

Background: The Cholistan desert has been inhabited by people who have a long tradition of utilizing medicinal plants to heal human diseases. The current study includes a detailed ethnobotanical inventory and the traditional therapeutic applications of medicinal plants in the Cholistan desert.

Methods: The primary data was obtained through field observations, interviews, and questionnaires between December 2021 and March 2022. Informant Consensus Factor (ICF), Relative frequency citation (RFCs), and fidelity level (FL) were used to access the relevance of medicinal plants. Pearson's chi-square test, One-way ANOVA and multiple logistic regression were performed to compare indigenous knowledge among respondents of various socio-demographic groups.

Results: 93 plants from 31 families were recorded. The Fic was calculated for sixteen different disease categories value range (0.82 to 0.50). *Heliotropium strigosum, Grewia villosa,* and *Capparis decidua* exhibited high RFCs value (0.49). The FL of *Chenopodium album* and *Farsetia hamiltonii* were 92.9 and 91.4%. Gender, age, educational status, and source of livelihood showed a significant positive impact (p-value < 0.001) on the respondents' indigenous knowledge about medicinal plants. Multiple logistic regression analysis confirmed that gender and education significantly affect (p-value < 0.001) the level of respondents' indigenous knowledge followed by age and source of livelihood.

Conclusion: This investigation revealed that traditional medicine based on ancient indigenous knowledge is still practiced as the first line of health care in the study area. Women are having vast ethnobotanical knowledge as compared to men and there is a significant gap in transmission of information from elder to younger generations.

Keywords: Medicinal plants, Indigenous Knowledge, Ethnobotanical indices, Socio-demographic factors, Regression analysis

Background

Plants have long been used to treat illnesses and afflictions, and this tradition dates back to the dawn of human existence (Hussain *et al.* 2018). Plant resources not only supply survival supplies, and medicinal, and forage benefits, but they also hold and maintain cultural heritages, and indigenous knowledge (Hameed *et al.* 2011). Traditional medicine is defined by the World Health Organization (WHO) as "the total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement, or treatment of physical and mental illness" (WHO 2013). According to the WHO, 75% of herbal pharmaceuticals are traditional medical herbal drugs, while 25% of contemporary medicines are derived from historically utilized plant sources (Wang *et al.* 2002). The medical applications of more than 21,000 plant species have been documented globally (WHO 2002). Around 80% of people worldwide still rely on medicinal plants for their day-to-day medical needs (WHO 2002; Bandaranayake 2006). The World Health Organization estimates that 4 billion people in developing nations continuously rely on and believe in the advantages of herbal treatments (Khan *et al.* 2021).

Ethnomedicine, which is a collection of empirical regional practices based on local and indigenous knowledge systems, is a subfield of ethnobotany (Bussmann & Sharon 2006). To comprehend the social, cultural, and economic factors that impact health problems and resolve them, it is typically transmitted orally from generation to generation (Kunwar & Bussmann 2008). One of the possible solutions that can help and treat a variety of human health issues is medicinal flora (Hassan Ara Begum *et al.* 2022). The documentation of folk knowledge, particularly the remedial properties of plant species, has resulted in many important modern-day medications (Cox 2000; Umair *et al.* 2017). To build medicinal plant management and conservation initiatives, documentation of traditional knowledge and practices is also essential (Njoroge *et al.* 2004). Unfortunately, ethnobotanical elements of plants have received little study, as only hakims are related to therapeutic herbs (Ahmed *et al.* 2012).

Pakistan has more than 6,000 species of higher plants, of which 12 percent are employed as sources of medications (Bano *et al.* 2014) for a variety of human ailments (Ozkan *et al.* 2016; Jima & Megersa 2018). Most of the time, specific plant species are thought to be exceptional for treating a specific condition, although occasionally species have many purposes (Hamayun *et al.* 2005). Pakistan is one of the top eight nations exporting medicinal plants globally, according to the Export Promotion Agency (EPA) (Umair *et al.* 2017). Most herb collectors are uneducated or illiterate, and women and children are frequently the primary herb collectors (Sodhi *et al.* 2004).

Cholistan desert support diversified flora and the local inhabitants of an area's livelihood mostly depend upon rangeland vegetation. The wild plants of an area are used as fodder, food, medicine, fuel wood etc. by local communities (Ali et al. 2009; Azhar 2014). The majority of residents is poor, often illiterate, and deprived of modern facilities including education and healthcare. The local people mostly rely on plants and plant-based drugs for their daily life. The local dwellers possess great indigenous knowledge of medicinal plants for centuries (Azhar et al. 2018). The inhabitants of Cholistan desert are relying on indigenous vegetation for numerous ethnobotanical uses including human and veterinary medic treatments in specific traditional recipes (Azhar et al. 2015). However, indigenous plants and their use knowledge are threatened by habitat loss due to urbanization, industrialization, urban migration for livelihood by cultural changes with time. Due to overuse and land conversion, wild plants, particularly those with medicinal properties, are in decline (Azhar et al. 2022). Agricultural development, the production of charcoal, and the harvesting of firewood were regarded as major threats to the survival of medicinal plants in developing countries (Abebe et al. 2021). Ethnobotanical studies envisaged the signs of erosion of indigenous medicinal plant knowledge among the ethnic communities of Pakistan. A profound gap between the generations and a lack of a discal mindset of younger generation have caused waning in indigenous knowledge on plant utilization. Furthermore, modernization has started diminishing the interest on traditional practices of medicinal plants. To revamp the vanishing indigenous knowledge on various uses of the plants, ethnobotanical studies are of paramount importance. Ethnobotanical research can serve as a preferred and dependable route to drug discovery, as well as play an important role in biodiversity conservation (Shah & Hussain 2021). It demonstrates the urgent need for an extensive ethnobotanical survey to understand the judicious utilization of raw materials while also preparing an inventory for it, given that indigenous peoples of a given geographical area are associated with nature and rely on plants as a primary source of remedy for various ailments (Idm'hand et al. 2020). Traditional medicinal knowledge requires novel approaches for its preservation and for its sustainability among indigenous communities (Yaseen et al. 2018). The folk wisdom, if subjected to scientific scrutiny, could benefit humankind in many ways (Katewa 2009). The ethnobotanical studies will pave way to preserve the dwindling indigenous knowledge on medicinal plants. Among others, knowledge on traditional medicine varies with geographical location. Only a few studies are available about medicinal plants of the Cholistan rangeland (Azhar et al. 2018; Rehaman *et al.* 2015; Sadia *et al.* 2015; Azhar 2014; Hameed *et al.* 2011). Detail ethnobotanical inventories of different rangelands of Pakistan done by researchers like Nara rangeland (Qureshi and Bhatti 2008), Thal rangeland (Shaheen *et al.* 2012), Thar rangeland (Yaseen *et al.* 2015) but the detail ethnobotanical inventory of Cholistan rangeland is still not available. Therefore, the current study includes a detailed ethnobotanical inventory and the traditional therapeutic applications of medicinal plants of the Cholistan desert, Southern Punjab, Pakistan.

Material and Methods

Study Area

The Cholistan rangeland is settled within the southern part of the geographic region Punjab province of the Islamic Republic of Pakistan having an area of 26,000 km². Geographically the study area lies between 27° 42′ and 29° 45′ North latitude and 69° 52′ and 75°24′ East longitude (Fig. 1) (Warris *et al.* 2013). The average annual rainfall is recorded between 100 to 250 millimeters while the average lowest temperature in winter is 6.5 °C and the mean maximum temperature in summer is 46.5 °C. The maximum temperature was recorded at around 51 °C (Azhar *et al.* 2014).

Data Collection associated with the field and household surveys

A combination of participatory observation and ethnobotanical tools associated with sample and data collection were utilized in this ethnobotanical research. Using the Participatory Rapid Appraisal Approach (PRA), a total of 120 local individuals, including traditional healers, were selected (Martin 1995). PRA provided a helpful perspective on the many aspects and experiences of local people with traditional plant remedies.

We were able to develop concerns that were relevant to the community but unknown to the investigators because of the informal gatherings and open-ended talks (Miles & Huberman 1994). First, the field survey was done during which cultural and botanical diversity were documented along with various livelihood sources and various ethnobotanical aspects. For this purpose, different research methods were used like well-designed semi-structured questionnaires, group discussions with local inhabitants, household interviews, interviews with local herbal experts, participatory observation, and market visits. Information was collected on different parts of wild vegetation which are used for different purposes by local peoples. A thought-through questionnaire was organized in English but also translated into local languages to document folk knowledge. After the collection of data, it was put into the excel sheet to develop a separate list of medicative species found in a study area with their ethnomedicinal uses.

Collection, Preservation, and Identification of Native Plant Species

Important medicinal plants and their parts were collected from the field surveys. These samples were tagged with their local names within the field. The mystifying plant species were confirmed with the help of local experts by showing plant materials and/or their pictures. The scientific names and families of documented plant species were confirmed by Taxonomists (Dr. Farooq Azhar, Dr. Muhammad Zubair, Dr. Ehsan Qadir) of Bahauddin Zakariya University, Multan Pakistan, and with the assistance of available literature on medicinal plants of Cholistan (Azhar 2014, Sadia *et al.* 2015, Hameed *et al.* 2011).

Ethno-botanical data analysis

To calculate the significance of the documented medicinal plant species the collected data was analyzed by using the following ethnobotanical indices:

Informant Consensus Factor (ICF)

The given formula for calculating the ICF is used as followed (Trotter and Logan 2019).

ICF = $\frac{(Number of use citations in each category - Number of medicinal plant species used)}{(Number of use citations in each category - 1)}$

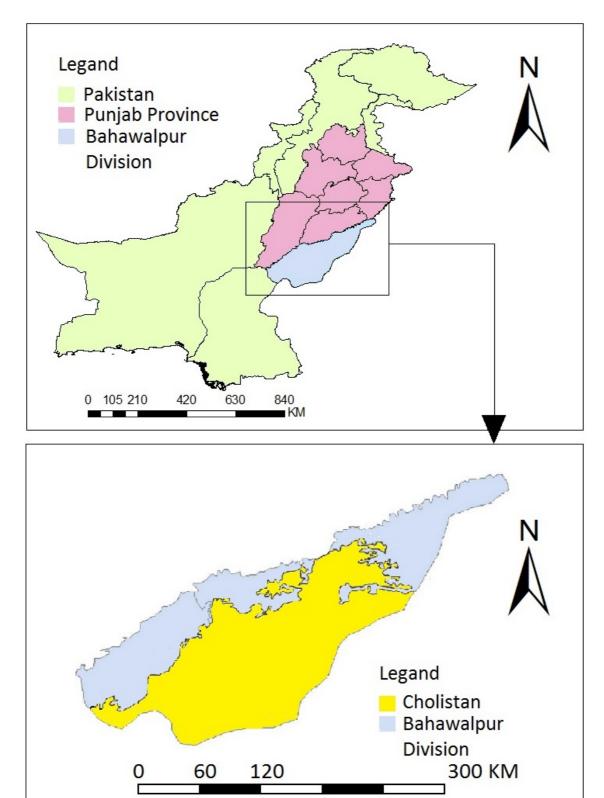
Relative frequency citation (RFCs)

The FC value was calculated by using the below formula as used by (Tardío and Pardo-de-Santayana 2008).

 $\mathsf{RFCs} = \frac{(\text{Number of informants who mentioned the use of a plant species})}{(\text{Total number of informants})}$

Fidelity level (FL)

The FL of the species was calculated by using the below formula used by (Alexiades and Sheldon 1996; Friedman 1986).



 $\mathsf{FL} = \frac{(\text{Number of respondents reported utilization of medicinal plant for a specific disease)}}{(\text{Total number of respondents mentioned the same plant for any ailment}} \times 100$

Figure 1. Map of the study area

Statistical Analysis

Pearson's chi-square test, One-way ANOVA and multiple logistic regression models were performed to evaluate the possessing indigenous knowledge among respondents of various socio-demographic groups by using SPSS (version 20.0). We have categorized respondents on the basis of gender (Male/ Female), age (young/ middle/ old age), educational level (Illiterate/ primary/ secondary/ higher secondary/ graduation) and source of livelihood (Farmers/ graziers/ healers/ jobholders).

Results

Socio-demographic characteristics of the respondents

A total of 120 local respondents, including local medicinal experts, were questioned, including 81.66% of men and 18.33% of women, to collect data on medicinal applications of plant species from 10 villages without regard to gender (Table 1). Islamic commandments, communal constraints, and a secluded environment, females typically avoid participating and sharing information. The informants were divided into three age groups: 20-40 years old, 40-60 years old, and above 60 years old. In terms of education, the majority of the respondents (58.33%) were illiterate, although 41.65% were literate, having primary to master-level schooling. Locals in the region rely on a variety of resources to survive. Farmers, herders, Traditional healers, and job seekers make up the majority of them. It was fascinating to learn that local healers provide free treatment to locals and share their traditional healing skills with others. The inhabitants of Cholistan are well-versed in the usage of local plants for medical purposes. Rapid industrialization and easy access to allopathic medications may be the primary factors eroding residents' traditional knowledge.

Characteristics	Distribution of Answer	Frequency	Percentage
Gender	Male	98	81.66
	Female	22	18.33
Age	20 and 40 years	23	19.16
	40 and 60 years	63	52.5
	> 60 years	34	28.33
Education	Uneducated	70	58.33
	Primary	22	18.33
	Secondary/ High Secondary	20	16.66
	Graduate	08	6.66
Source of livelihoods	Farmers	37	30.83
	Graziers	67	55.83
	Healers	07	5.83
	Job Holders	09	7.5

Table 1. Socioeconomic characteristics of the respondents

Indigenous Knowledge among Different demographic characters

The indigenous knowledge possessed by women and men has a significant difference (p-< 0.001). Women have more indigenous knowledge as compared to men. Domestic work is often performed by women in rural areas. They spend more time at home gathering resources like wood, local vegetables, and herbs. These maybe the reasons why women have significant indigenous knowledge of medicinal plants. (Middle-aged persons (40-60 years old) possessed higher indigenous knowledge as compared to other aged groups. This might be owing to a lack of interest in traditional medicines among children as well as memory loss due to aging in old people.

	Gende	r	Age			
Respondents indigenous	Men	Women	20 to 40 yr	40 to 60 yr	> 60	Statistical
Knowledge					years	Value
Having strong indigenous	18	12	5	20	12	X ² = 13.079
knowledge						
Having weak indigenous	44	7	7	31	18	p-value <
knowledge						0.001
Having no indigenous	36	3	11	12	4	
knowledge						
Total	98	22	23	63	34	

We also observed a significant difference (p = 0.001) between the levels of education and source of livelihood regarding the indigenous knowledge about medicinal plants. The mean value of the number of plants known to respondents appeared to decrease with increasing levels of education. The reason behind that may be the respondents of old age (> 60 yrs) and middle age (40 to 60 yrs) mostly fall in illiterate and primary levels of education. The young age (20 to 40 yrs) respondents fell in secondary/Higher secondary and graduation level of education did not take interest in traditional practices and had little knowledge about medicinal plants. The healers are having vast indigenous knowledge and cited the highest number of medicinal plants followed by graziers, farmers, and job holders.

Educational Level	Number of Informants	Percentage (%)	Mean value of the number of Plants known	Statistical Value
Illiterate	70	58.3	5.6	
Primary	22	18.3	4.3	p-value of
Secondary/Higher Sec.	20	16.7	3.5	Anova 0.001
Graduation	08	6.7	2.6	
Source of Livelihood	Livelihood Number of Percentage Mean value of the numl Informants (%) Plants known		Mean value of the number of Plants known	Statistical Value
Farmers	37	30.8	4.5	
Graziers	67	55.8	4.8	p-value of
Healers	07	5.8	5.3	Anova 0.001
Job Holders	09	7.5	2.2	

Table 3. The impact of educational level & Source of Livelihood on the traditional knowledge

Multiple logistic regressions showed that gender, age, education, and source of livelihood had a significantly positive impact on the level of possessing indigenous knowledge among respondents as shown in (Table 4). Gender and education are the two main demographic factors that significantly affect the level of respondents' indigenous knowledge followed by age and source of livelihood.

Independent Variables	В	SE	Wald	df	Sig	Exp (B)
Gender	.649	.592	1.173	1	0.00*	1.978
Age	.524	.399	1.696	1	0.02*	1.507
Education	.572	.392	1.764	1	0.007*	1.809
Source of livelihood	.437	.477	.987	1	0.024*	1.624

Table 4. Socio-demographic factors affecting the traditional knowledge of medicinal plants

Note: Dependent Variable = Medicinal traditional Knowledge, Number of respondents = 120, Exp (B) = an odds ratio (probability of success/probability of failure), SE = standard estimate error = statistically non-significant at 0.05 level of significance, Sig = significance, B = regression coefficients, Wald statistics = $b/(SE)^2$, df = degree of freedom. *Statistically significant at 0.05 level of significance.

Medicinal plants reported, availability and habit

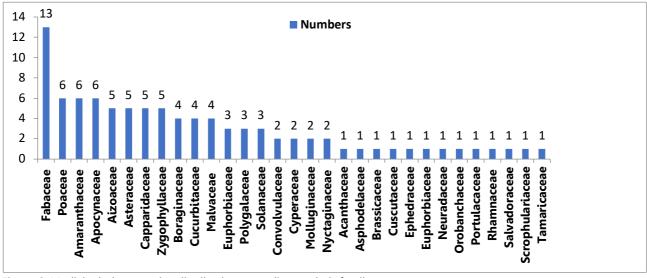
A total of 93 plant species belonging to 31 families have been recorded as shown in (fig. 2), and the native inhabitants of the Cholistan desert utilize them in a variety of ways. The medicinal uses include parts used, methods of preparation, and administration wherever available. (Table 5) showed the detailed inventory of all recorded species found in the study area.

Fabaceae led the way, followed by Poaceae, Amaranthaceae, and Apocynaceae, each with 6 species. The therapeutic relevance of the first eight families may be related to the common distribution of species from these families in the research region.

Herbs were dominant with a 61.30% contribution (Fig. 3c), followed by shrubs, trees, grasses, sedges, and climbers (18.30, 8.60, 7.50, 2.20, and 2.20%) respectively.

Medicinal plants and their Part(s) used, preparation methods, and administration

Based on their kinds and numbers, the portions of plant species utilized were classified into eighteen (18) categories, including Whole plant, Roots, Leaves, Bark, Fruit, Seeds, Flowers, Green Twigs, Root Bark, Deela, Pods, Latex, Flower buds, Gums, Nuts and Thorns. The whole plant was the most frequently used plant part (64 species), followed by roots (19), leaves (17), bark (12), and Fruits (11). (Fig. 3a) shows the features of the plant parts used to cure various ailments.





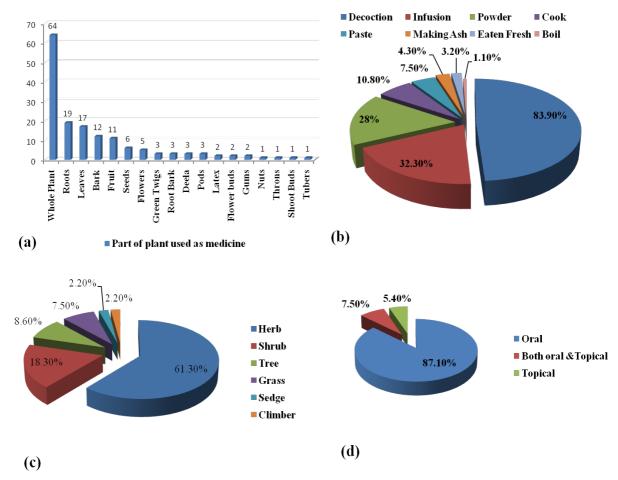


Figure 3. (a) Plant parts used in various disease treatments, (b) Modes of drug formulation, (c) Life forms of medicinal plant, (d) Mode of Administration

To cure various disorders, the people of the study area employ eight types of medicine formulations, as shown in (Fig. 3b). Among these, the decoction was dominant (78 medications), followed by infusion (30 medications), powder (26 medications), cook (10 medications) and paste (7 medications).

Three groups of medication administration methods were identified (Fig. 3d). Approximately 87.10% of the recipes were consumed orally, 5.40% were administered topically, and 7.50% were both oral and topical.

Local therapeutic categories

The lives of rural people, especially those who live in dry areas, are extremely difficult. These people are sensitive to a variety of illnesses as a result of their constant endeavor to survive in social hierarchies. Medicinal plant species are used by the people of the Cholistan rangeland to heal a variety of diseases. The emic categorization approach was used to categorize these disorders into sixteen groups given in (Fig. 4).

Gastrointestinal (GIT) diseases (hyperacidity, ulcer, abdominal pain, piles), skin diseases (skin redness and irritation, gangrene Scabies, psoriasis, patchy skin, acne, pimples), respiratory tract infections (bronchial asthma, pneumonia, pulmonary tuberculosis, cough, chest tightness) and bones/muscles/joint ailments (arthritis, bone fractures), hepatic disorders (hepatitis, jaundice), cardiovascular disorders (Hypotension, Hypertension, heartburn) were the common health problems. Domestic sanitary circumstances and food habits may be to blame for GIT diseases. GIT infections may also be caused by the frequent consumption of teas, red chilies, and low-fiber foods. Similarly, the incidence of dermatological disorders might be attributed to high levels of (Ultraviolet) UV light and poorly managed public cleanliness. Furthermore, residents are susceptible to respiratory diseases due to extended exposure to harsh and unfriendly weather and allergens. The tough topography and strenuous lifestyle may be linked to bone and joint problems. Our data give us a clear picture of the frequency and distribution of public illnesses. In this context, the current study proposes an important concept for framing long-term health policies that communicate health risks, precautions, and effective treatment through integrated illness management.

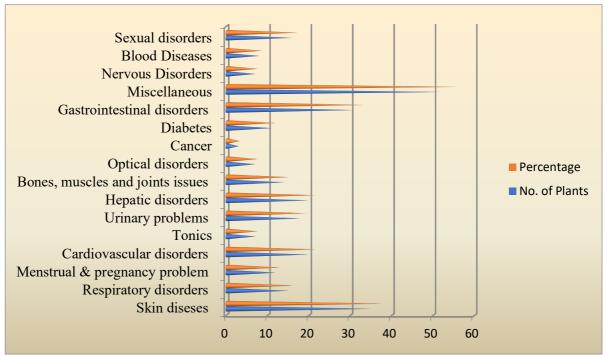
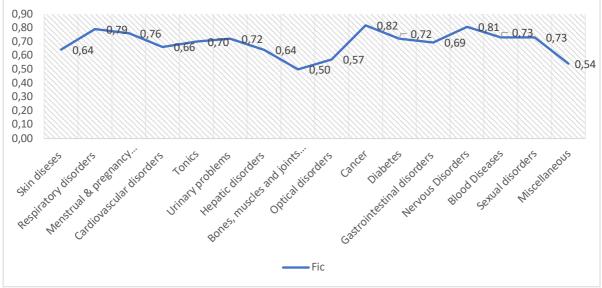


Figure 4. Number of plants and percentage against different diseases

Ethnobotanical data assessment by using different indices

The ethnobotanical quantitative indicators ICF, RFCs, and FL were used to assess homogeneity in the traditional knowledge of medicinal plants utilized by the people of the Cholistan rangeland. The reported diseases were initially divided into 16 kinds of aliments based on their use reports to compute ICF. The ICF was calculated for sixteen different disease categories (0.82 to 0.50) given in (fig. 5). The RFCs of the reported species ranged (0.49 to 0.07). The RFCs value of the top twenty plant species is given in (fig. 6). *Heliotropium strigosum* Willd., *Grewia villosa* Willd. And *Capparis decidua* (Forssk.) exhibited a high RFCs value (0.49) followed by *Rhynchosia capitata* (B. Heyne ex Roth) DC., *Seetzenia lanata* (Willd.) Bullock, and *Acacia nilotica* (L.) Willd. ex Delile (0.48) whereas the lowest RFCs

value (0.07) was calculated for *Tribulus longipetalus Viv.* The reported species' FL varied from 23.1 to 92.9%. The FL of the top twenty plant species is given in (fig.7). The FL of *Chenopodium album* L. and *Farsetia hamiltonii* Royle. were 92.9 and 91.4%, respectively, while *Dipterygium glaucum* Decne. had the lowest FL (23.1%). *Cleome brachycarpa* M. Vahl ex Triana and Planchon, *Withania somnifera* (L.), *Indigofera argentea* Burm. f., *Tamarix aphylla* (L.) Lanza, *Euphorbia granulate* Forssk, *Alhagi maurorum* Medik., and *Chrozophora plicata* (Vahl) A. Juss. ex Spreng. were also the most popular species, with FL over 85%.



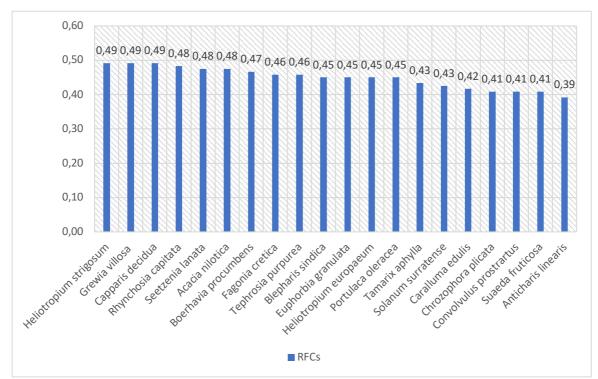


Figure 5. Informant Consensus Factor (ICF) values of most important medicinal plant species

Figure 6. (Relative Frequency Citations) RFCs values of top twenty medicinal plants

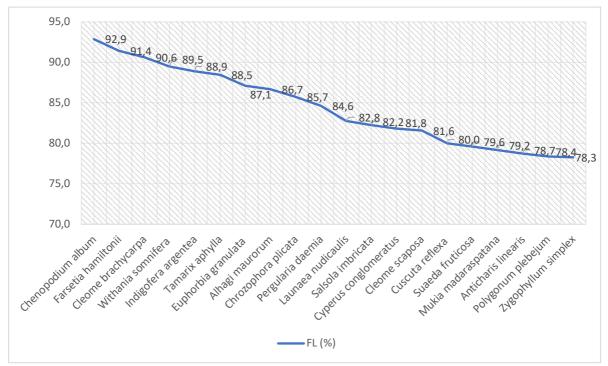


Figure 7. Fidelity Level (FL %) value of the top twenty medicinal plants reported against a particular disease

Discussion

Different demographic factors (i.e., Gender, age, educational status, and source of livelihood) showed a significant positive impact (p< 0.001) on the respondent's indigenous knowledge about medicinal plants. Gender and education are the two main demographic factors that significantly affect the level of respondents' indigenous knowledge followed by age and source of livelihood. Dulal *et al.* (2022) also confirmed that gender, age, and educational status significantly affected traditional medicinal knowledge. We observed a significant difference (p< 0.001) between the men and women regarding indigenous knowledge about medicinal plants. Dulal *et al.* (2022) also reported the same result. Women are having strong indigenous knowledge as compared to men in the study area. (Middle-aged persons (40–60 years old) possessed higher indigenous knowledge as compared to other aged groups similar to the result reported by Abbas *et al.* (2017) while studying the ethnobotany of the Shigar valley Himalayan region. Bhaila *et al.* (2022) also observed that teenage people are not taking an interest due to a lack of indigenous knowledge. The mean value of the number of plants known to respondents appeared to decrease with increasing levels of education. Similar results were reported by different researchers in their studies (Gebru *et al.* 2021; Kassa *et al.* 2020). The healers are having vast indigenous knowledge and cited the highest number of medicinal plants followed by graziers, farmers, and job holders (Abbas *et al.* 2017; Dulal *et al.* 2022; Bhaila *et al.* 2022).

During the present study a total of 93 medicinally important plant species belonging to 31 families were reported. Documented richness of species was similar to various other studies from different rangeland areas of Pakistan e.g., 87 plant species reported from Thar rangeland by Yaseen *et al.* (2015), 51 plant species reported from Nara rangeland by Qureshi *et al.* (2008) 54 plant species from Thal rangeland reported by Shaheen *et al.* (2012) while 110 plant species reported by Jain et al. (2009) from Rajasthan rangeland India, 76 plant species reported by Ding et al. (2022) from Alpine Desert, China and 48 plant species reported by Shrestha *et al.* (2016) from eastern Nepal. Fabaceae was recorded to be the dominant plant family in the area and leaves were the most commonly utilized plant part with decoction as the major mode of herbal recipe preparation. Similar results have found in the previous studies conducted in Cholistan rangeland (Sadia *et al.* 2015; Hameed *et al.* 2011; Ahmed *et al.* 2014) and other rangeland areas of Pakistan (Yaseen *et al.* 2015; Qureshi and Bhatti 2008; Shaheen *et al.* 2012). The whole plant was the most frequently used plant part (64 species), followed by roots (19), leaves (17), bark (12), and Fruits (11). Similarly, some other ethnomedicinal studies (Tali *et al.* 2019, Hu *et al.* 2020; Jan *et al.* 2021) reported whole plant as the most exploited plant part to treat various diseases.

Cholistan people's folk cures were compared to the previous study undertaken in Cholistan, other parts of the country, and on a global scale. In adjacent countries, notably India, which shares ecosystems comparable to the

Cholistan desert, much work has been done on medicinal characteristics and folk applications of medicinal plants (Ayyanar and Ignacimuthu 2005; Jain et al. 2009; Nirmala et al. 2022; Lal et al. 2022; Taleuzzaman et al. 2022). Unfortunately, while many plants native to the Cholistan desert are widely utilized by locals, their therapeutic use has yet to be established. Neurada procumbens L. is one of the most remarkable examples, and the overexploitation of this valuable plant has put its local status in jeopardy. This plant is widely used for debility and sexual dysfunction, as a cooling agent, a powerful tonic, and a strong stimulant (Sadia et al. 2015; Hameed et al. 2011; Oureshi et al. 2010). There are several other native plants whose functions and chemical ingredients have yet to be discovered. Aerva javanica (Burm. f.) Juss., C. decidua, C. brachycarpa, Crotalaria burhia Buch.-Ham. ex Benth, D. glaucum, Gisekia pharnacioides L., and Suaeda fruticosa Forssk. ex J. F. Gmel. are among the species used for antiparasitic properties against intestinal worms (Sadia et al. 2015; Hameed et al. 2011). A. javanica, A. maurorum, Calotropis procera (Aiton) W. T. Aiton, and C. decidua are medicinal plants used for stomach and intestinal symptoms such as diarrhea, indigestion, discomfort, flatulence, and loss of appetite (Yaseen et al. 2015; Sadia et al. 2015; Hameed et al. 2011; Qureshi et al. 2010). Blood purifiers include Mollugo cerviana (L.) Ser. ex DC. and B. procumbens (Sadia et al. 2015; Hameed et al. 2011), while tonics include A. nilotica, C. procera, and Cressa cretica L. (Sadia et al. 2015; Hameed et al. 2011). C. decidua, Capparis spinosa L., C. burhia, and Euphorbia prostrate Aiton are among the plants with wound-healing and pain-relieving characteristics (Sadia et al. 2015; Hameed et al. 2011). Some plants are well-known for their ability to effectively cure chronic illnesses: Antihepatotoxic Trianthema triquetrum Willd., hepatoprotective Haloxylon salicornicum (Mog.) Bunge ex Boiss, and cancer-fighting Cleome scaposa DC. (Sadia et al. 2015; Hameed et al. 2011). Many plant species are used as traditional cures by residents of the Cholistan desert. For respiratory tract disorders such common cough, bronchitis, and asthma, they usually utilise G. pharnacioides and C. cretica (Sadia et al. 2015; Hameed et al. 2011). Constipation, stomach distress, and gastrointestinal discomforts are treated with Leptadenia pyrotechnica (Forssk.) Decne., Cyperus conglomerates Rottb., and W. somnifera. Blood purification and cardio-vascular disorders such as heartburn and cardiac difficulties are treated using B. procumbens, M. cerviana, and Prosopis cineraria (L.) Druce (Sadia et al. 2015; Hameed et al. 2011). High blood pressure and eczema can be treated with G. pharnacioides, Salsola imbricate Forssk. And C. cretica (Sadia et al. 2015; Hameed et al. 2011). Citrullus colocynthis (L.) Schrad., A. javanica, and Haloxylon stocksii (Boiss.) Benth. and Hook. f. are all excellent remedies for urinary problems, particularly renal and bladder stones (Sadia et al. 2015; Hameed et al. 2011). A variety of medicinal plants are used to treat aches and pains, as well as cuts and wounds. L. pyrotechnica, A. javanica and Mukia maderaspatana (L.) M. Roem. are among the most important medicinal plants (Sadia et al. 2015; Hameed et al. 2011; Qureshi et al. 2010). W. somnifera is good for aching eyes, S. fruticosa is good for eye infections, and M. cerviana is good for enhancing eyesight (Sadia et al. 2015; Hameed et al. 2011). A. maurorum may help with liver inflammation, C. spinosa can help with cancer and tumors, and C. conglomeratus can help with hair loss and baldness (Sadia et al. 2015; Hameed et al. 2011).

The ICF within a community and between cultural groups reveals which plants are commonly utilized, assisting in the selection of plants for pharmacological and phytochemical research (Giday *et al.* 2007). When a single or few plants are recorded to be used by a significant number of respondents to cure a specific ailment, ICF values are always higher, whereas low ICF values indicate that informants disagree about which plant to employ (Heinrich *et al.* 1998; Canales *et al.* 2005). The FL reflects which species are most frequently referenced by locals while treating a specific disease. According to Lozada *et al.* (2006), information on a species' FL is of more importance than other plant-based statistics. The high FL of these species is due to their widespread availability, distribution, and detailed knowledge of medicinal applications, doses, and recipes. It is considered that medicinal plants that are utilized for the same disease category regularly are more likely to be physiologically active (Trotter and Logan 2019).

Conclusions

According to the findings of this study, the Cholistan desert is abundant in indigenous medicinal plants. This investigation revealed that traditional medicine based on ancient indigenous knowledge is still practiced mostly in the Cholistan desert. A total of 93 plant species belonging to 31 families were identified. Fabaceae was the leading family (n = 13). The ICF was calculated for sixteen different disease categories value range (0.82 to 0.50). H. strigosum, G. villosa, and C. decidua exhibited high RFCs value 0.49. The FL of C. album and F. hamiltonii were 92.9 and 91.4%. Different demographic factors (i.e. Gender, age, educational status, and source of livelihood) showed a significant positive impact (p < 0.001) on the respondent's indigenous knowledge about medicinal plants. Gender and education are the two main demographic factors that significantly affect the level of respondents' indigenous knowledge about medicinal plants between the Gender, age, educational status, and source of livelihood of the respondents. It is also concluded that women are having vast ethnobotanical knowledge as compared to men and there is a huge gap in knowledge transmission from the older to the younger generation.

Table 5. Detail list of medicinal plant species of the Cholistan desert, Southern Punjab, Pakistan

Scientific Name/Common Name/Voucher No.	Family Name	Habit	Part (S) Used	Formulation	Application	Aliment (S) Cured
Abutilon muticum (Delile) Sweet /Kanghi-buti/FRW-88-BZU	Malvaceae	Shrub	leaves, Roots	Decoction	Oral	Kidney disorders, gas trouble, kidney stones and heartburn
<i>Acacia jacquemontii</i> Benth. /Banwli or Pahadi kikar/Frw-19-BZU	Fabaceae	Tree	Bark, Leaves, Throns, Pods	Decoction	Oral	Pyrexia, coughing, viral infections
<i>Acacia nilotica</i> (L.) Willd. ex Delile /Babul or Kikar/Frw-18-BZU	Fabaceae	Tree	Leaves, Bark, Flowers, Fruit, Gums, Pods	Powder	Oral	leucorrhoea, male sexual dysfunction, dysentery and diabetes
<i>Aerva javanica</i> (Burm. f.) Juss. /Bui/FRW- 89-BZU	Amaranthaceae	Shrub	Whole Plant, Roots, Root Bark, Leaves	Infusion, Decoction	Oral	Gall stones, Kidney stone and upper respiratory tract infection, Constipation and antiparasitic drug
Alhagi maurorum Medik. /Jawansa/FRW- 87-BZU	Fabaceae	Shrub	Whole Plant, Roots	Infusion, Decoction	Oral	Detoxify blood, Hepatitis-C and respiratory disorders
<i>Anticharis linearis</i> (Benth.) Hochst. ex Aschers./Assmani butti /FRW-29-BZU	Scrophulariaceae	Herb	Leaves	Infusion, Paste	Both oral & Topical	Tiredness, head pain, inflammation in eye, and Hypotension
<i>Arnebia hispidissima</i> (Lehm.) A. DC. /Sorkhi butti/FRW-30-BZU	Boraginaceae	Herb	Whole Plant	Infusion, Decoction	Oral	Mental disorder, uterine contraction, epilepsy and dementia
Asphodelus tenuifolius Cav. /Piazi/FRW- 31-BZU	Asphodelaceae	Herb	Whole Plant	Powder	Topical	Blood purifier, Patchy skin, Bronchial asthma and allergy
Blepharis sindica Stocks ex T. Anderson /Gandi-Buti/FRW-32-BZU	Acanthaceae	Herb	Whole Plant	Decoction	Oral	Hypotension, anemia, General weakness and pain
<i>Boerhavia diffusa</i> L. /Biskhipra/FRW-33- BZU	Nyctaginaceae	Herb	Whole Plant, Roots	Decoction	Oral	Renal failure, Blood in urine and Painful urination
<i>Boerhavia procumbens</i> Banks ex Roxb. /Biskhipra/FRW-34-BZU	Nyctaginaceae	Herb	Whole Plant	Infusion, Decoction	Oral	Renal failure, Blood in urine, blood purifier, Chest infections and dysmenorrhea
<i>Calligonum polygonoides</i> Pall. /Phog/FRW-90-BZU	Polygonaceae	Shrub	Flowers, Green Twigs, Floral Buds	Cook, Paste, Eaten Fresh	Both oral & Topical	Pink eye, heart burn, pain in eyes, severe thirst and Indigestion
<i>Calotropis procera</i> (Aiton) W.T. Aiton /Ak/FRW-91-BZU	Asclepiadaceae	Shrub	Latex, Leaves, Flower Buds, Root Bark, Shoot Buds	Paste, Eaten Fresh, Decoction	Both oral & Topical	Epilepsy, Painful menstruation, uterus problems, Snake bite, sexually transmitted diseases
<i>Capparis decidua</i> (Forssk.) Pax /Karir/FRW-17-BZU	Capparidaceae	Tree	Leaves, Fruit, Stem, Roots		Oral	Hemorrhoids, obesity, bone fractures, fevers, painful menstruation and indigestion

<i>Capparis spinosa</i> L. /Kubber/FRW-92- BZU	Capparidaceae	Shrub	Leaves, Flowers, Fruit	Cook, Infusion, Decoction	Oral	Arthritis, asthma, enlarged spleen, muscle pain and liver disorders
<i>Caralluma edulis</i> (Edgew.) Benth. ex Hook. f. /Seetoo/FRW-35-BZU	Asclepiadaceae	Herb	Whole Plant	Cook, Eaten Fresh	Oral	Diuretic and increases sexual pleasure or performance
<i>Cassia italica</i> (Mill.) Spreng. /Ghoray wall or sana/FRW-93-BZU	Fabaceae	Shrub	Whole Plant	Decoction	Oral	joint pain, fever, constipation, pain and indigestion
<i>Cenchrus biflorus</i> Roxb. /Mohabat Boti/FRW-08-BZU	Poaceae	Grass	Whole Plant	Infusion, Decoction	Oral	Antiparasitic drug
<i>Cenchrus ciliaris</i> L. /Dhaman/FRW-07- BZU	Poaceae	Grass	Whole Plant	Infusion	Oral	Kidney infection, cancer, wound healing and antiparasitic drug
<i>Cenchrus setiger</i> Vahl /Choti- Dhaman/FRW-16-BZU	Poaceae	Grass	Whole Plant	Infusion	Oral	Allergy, antiparasitic drug, fever and common cold
<i>Chenopodium album</i> L. /Bathu/FRW-36- BZU	Chenopodiaceae	Herb	Whole Plant	Cook, Decoction	Oral	Antiparasitic drug, diuretic, increases sexual pleasure or performance, Tonics, abdominal pain, eye disorders, throat problems
<i>Chrozophora plicata</i> (Vahl) A. Juss. ex Spreng. /Nilkari/FRW-37-BZU	Euphorbiaceae	Herb	Whole Plant	Decoction	Oral	Cuts & Wounds, peptic ulcer, coughing, Lower respiratory tract infection and Pulmonary tuberculosis (TB)
<i>Cistanche tubulosa</i> Wight /Phaphorr/FRW-38-BZU	Orobanchaceae	Herb	Whole Plant	Infusion, Decoction	Oral	Erectile-dysfunction, cough, Peptic ulcer, vomiting and diarrhea
<i>Citrullus colocynthis</i> (L.) Schrad. /Tumma or Kor tumma /FRW-39-BZU	Cucurbitaceae	Herb	Roots, Fruit, Seeds, Gums	Decoction	Oral	Radiculopathy, High blood sugar, painful menstruation and digestive disorders
<i>Cleome brachycarpa</i> M. Vahl ex Triana & Planchon /Noli or Harnoli/FRW-40-BZU	Capparidaceae	Herb	Whole Plant	Decoction	Oral	Antiparasitic drug, Liver disorders and high blood sugar
<i>Cleome scaposa</i> DC. /Kastoori Buti/FRW- 41-BZU	Capparidaceae	Herb	Whole Plant	Infusion, Decoction	Oral	Pyrexia due to malarial attack, peptic ulcer, Hotness, Itchiness and high blood sugar
<i>Convolvulus prostrates</i> Forssk. /Hiran Buti/FRW-42-BZU	Convolvulaceae	Herb	Leaves, Green Twigs	Decoction	Oral	High blood sugar, constipation, fever and heartburning
<i>Corchorus depressus</i> Stocks /Bhao- phali/FRW-43-BZU	Tiliaceae	Herb	Whole Plant	Infusion, Decoction, Powder	Oral	Increases sexual pleasure or performance and Male sexual disorders
<i>Corchorus trilacularis</i> auct. Non-L. /Bari Buo-phali/FRW-53-BZU	Tiliaceae	Herb	Leaves	Infusion	Oral	Painful urination and kidney infection
<i>Cressa cretica</i> L. /Oin or Ooini/FRW-44- BZU	Convolvulaceae	Herb	Whole Plant	Paste, Decoction	Both oral & Topical	Bronchial asthma, blood purifier, Chest tightness, skin diseases,

						anorexia, as tonic and sexual stimulant
<i>Crotalaria burhia</i> Buch.–Ham. ex Benth /Chag/FRW-94-BZU	Fabaceae	Shrub	Whole Plant	Boil, Decoction	Oral	Skin diseases, reduces fever, joint pain, stomachache, Relieves pain in the body
<i>Cucumis melo</i> L. /Chibbar/FRW-45-BZU	Cucurbitaceae	Herb	Fruit	Cook, Powder, Decoction	Oral	Hyperacidity, increase appetite, bad eating habits and constipation
<i>Cuscuta reflexa</i> Roxb. /Akashbail/FRW- 80-BZU	Cuscutaceae	Herb	Whole Plant	Powder, Decoction	Oral	Lice and dandruff, unhealthy skin and itching.
<i>Cymbopogon jwarancusa</i> Schult. /Khawi/FRW-05-BZU	Poaceae	Grass	Whole Plant, Roots		Oral	Disease of heart muscles, hysteria, Diarrhea, vomiting, joint and muscle pain and as diuretic
<i>Cynodon dactylon</i> (L.) Pers. /Khabal or Talla/FRW-10-BZU	Poaceae	Grass	Whole Plant		Oral	Bleeding of all types, Skin problems, brain and heart tonic
<i>Cyperus conglomeratus</i> Rottb. /Deela/FRW-04-BZU	Cyperaceae	Sedges	Whole Plant		Oral	Indigestion, hyperacidity and constipation
<i>Cyperus rotundus</i> L. /Deela or Murki/FRW-03-BZU	Cyperaceae	Sedges	Roots, Deela, Tubers		Oral	High sugar in blood, pain or burning with urination, excessive urination and Loss of appetite
<i>Dipterygium glaucum</i> Decne. /Phel/FRW-95-BZU	Capparidaceae	Shrub	Whole Plant	Infusion, Decoction	Oral	Jaundice, blood purifier, Skin redness and irritation
<i>Echinops echinatus</i> Roxb. /Unt Katara/FRW-46-BZU	Asteraceae	Herb	Whole Plant, Roots	Powder, Decoction	Oral	Hepatitis, icterus, loss of appetite, Bad eating habits and indigestion
<i>Ephedra ciliata</i> Fisch. & C. A. Mey. /Choti Phog/FRW-28-BZU	Ephedraceae	Shrub	Green Twigs, Floral Buds	Decoction	Oral	Asthma, bronchitis, pain in head and cough
<i>Euphorbia granulata</i> Forssk. /Dudheli/FRW-81-BZU	Euphorbiaceae	Herb	Whole Plant	Powder, Decoction	Oral	Skin diseases, high blood sugar, Antiparasitic drug and constipation
<i>Euphorbia granulata</i> Forssk. /Hazar Dani/FRW-47-BZU	Euphorbiaceae	Herb	Whole plant	Paste, Decoction	Both oral & Topical	Blood purifier, dermal diseases, pain, diabetes and Antiparasitic drug
<i>Euphorbia prostrata</i> Aiton /Hazar Dani/FRW-48-BZU	Euphorbiaceae	Herb	Whole plant	Paste, Decoction	Both oral & Topical	Hemorrhoids, eczema, gangrene Scabies and psoriasis, sexual weakness, skin redness and irritation
<i>Fagonia cretica</i> auct. Non Linn. Parker /Dhamasa/FRW-49-BZU	Zygophyllaceae	Herb	Whole Plant, Roots	Infusion, Decoction	Oral	Blood purifier, wounds, cancer, chronic fever, Liver diseases, Anameia, fever, pain

<i>Farsetia hamiltonii</i> Royle. /Fareed buti or Lathia/FRW-50-BZU	Brassicaceae	Herb	Whole Plant	Powder, Decoction	Oral	Excessive urination and Inflammations, as stimulant, Gastrointestinal disorders, muscle pain and High blood sugar
<i>Gisekia pharnaceoides</i> L. /Buloka Sag/FRW-51-BZU	Aizoaceae	Herb	Whole Plant	Decoction	Oral	Hepatitis, Liver disorders, ulcer, Loss of appetite, constipation, bad eating habits, fever and pain, Antiparasitic drug and skin infections
<i>Glinus lotoides</i> L. /Phatokar or Gandi- Booti/FRW-52-BZU	Molluginaceae	Herb	Whole plant	Decoction	Oral	Ulcer, Wound healer and antiseptic, Diarrhea, liver problems, externally to cure boils and wounds
<i>Grewia villosa</i> Willd. /Jalidar/FRW-20- BZU	Tiliaceae	Shrub	Whole Plant	Decoction, Powder	Oral	Kidney disorders, eye pain, venereal diseases
<i>Haloxylon salicornicum</i> (Moq.) Bunge ex Boiss /Lana/FRW-26-BZU	Chenopodiaceae	Shrub	Whole Plant	Making Ash	Topical	Bleeding gums, Indigestion, insect stings and liver disorders
<i>Haloxylon stocksii</i> (Boiss.) Benth. & Hook. f. /Khar or Sajji/FRW-27-BZU	Chenopodiaceae	Shrub	Whole Plant	Making Ash	Topical	peptic ulcer and Kidney stone
<i>Heliotropium crispum</i> Desf. /Hathi Sundi/FRW-54-BZU	Boraginaceae	Herb	Whole plant	Decoction	Oral	Renal stone, Erectile- dysfunction, weakness and indigestion
<i>Heliotropium europaeum</i> L. /Hathi Sundi/FRW-55-BZU	Boraginaceae	Herb	Whole plant	Decoction	Oral	Increases sexual pleasure or performance and High Blood Pressure
<i>Heliotropium strigosum</i> Willd. /Gorakh Pan/FRW-56-BZU	Boraginaceae	Herb	Whole plant	Infusion	Oral	Jaundice, hepatitis, blood purifier, Joint pain, inflammation in eye, open wounds and sore nipples of breasts
<i>Indigofera argentea</i> Burm. f. /Neel/FRW- 58-BZU	Fabaceae	Herb	Whole plant	Infusion, Decoction	Oral	Malarial fever, jaundice, head pain, stomachache disorder, Antiparasitic drug and patchy skin
<i>Indigofera sessiliflora</i> DC. /Jantri/FRW- 57-BZU	Fabaceae	Herb	Whole plant	Infusion, Decoction	Oral	Liver disorders, Skin rash and blood purifier
<i>Launaea nudicaulis</i> (L.) Hook. f. /Bhattal/FRW-59-BZU	Asteraceae	Herb	Whole plant	Decoction	Oral	Chronic constipation and Indigestion
<i>Launaea resedifolia</i> (L.) Kuntze. /Dhudhkal/FRW-60-BZU	Asteraceae	Herb	Whole plant	Decoction	Oral	Hepatitis, Loss of appetite and fever

<i>Leptadenia pyrotechnica</i> (Forssk.) Decne. /Khip/FRW-25-BZU	Asclepiadaceae	Shrub	leaves, Roots, Shoots	Decoction, Powder	Oral	Obesity, dysmenorrhea, Abdominal cramps and high blood sugar
<i>Limeum indicum</i> Stocks ex T. Anderson /Lonri/FRW-61-BZU	Aizoaceae	Herb	Whole plant	Infusion	Oral	Piles, High blood sugar and Indigestion
<i>Melilotus officinalis</i> (L.) Lam. /Sinji/FRW- 62-BZU	Fabaceae	Herb	Whole plant	Cook, Decoction	Oral	Pain in head, nausea and stimulate appetite
<i>Mollugo cerviana</i> (L.) Ser. ex DC. /Padi or Sarr/FRW-63-BZU	Molluginaceae	Herb	Roots, Whole Plant	Decoction	Oral	Gonorrhoea, painful urination, venereal disease, skin allergy and detoxify blood.
<i>Mukia madaraspatana</i> (L.) M. Roem. /Gawala-kakri/Frw-02-BZU	Cucurbitaceae	Climber	shoots, Roots, Seeds	Infusion, Decoction	Oral	Jaundice and muscular weakness
<i>Neurada procumbens</i> L. /Chhapri/FRW- 64-BZU	Neuradaceae	Herb	Whole plant	Cook, Decoction	Oral	Sexual tonic, sunstroke and Hypotension
<i>Oligochaeta ramosa</i> (Roxb.) Wegentiz /Birham Dandi/FRW-65-BZU	Asteraceae	Herb	Whole plant	Infusion, Decoction	Oral	Allergy, pain in joints, Irritation, liver diseases, and as brain tonic
<i>Oxystelma esculantum</i> (L. f.) Sm. /Dudhani/FRw-01-BZU	Asclepiadaceae	Climber	Whole plant	Infusion, Decoction	Oral	Painful urination, Gonorrhoea, blood purifier and sexually transmitted diseases
<i>Panicum antidotale</i> Retz. /Murrot or Bansi Ghaa/FRW-11-BZU	Poaceae	Grass	Whole Plant, Seeds	Decoction	Oral	Cough, throat infection, viral infection and problem in breathing
<i>Peganum harmala</i> L. /Harmal/FRW-83- BZU	Zygophyllaceae	Herb	Whole Plant	Powder, Decoction	Oral	Gynecological issues, convulsions, mental illness, patchy skin and Pain in abdomen
<i>Pentatropis spiralis</i> (Forssk.) Decne /Hiran Buti/FRW-66-BZU	Asclpiadaceae	Herb	Leaves, Stem, Latex	Paste, Decoction	Both oral & Topical	Bleeding diathesis, ulcer and wound
<i>Pergularia daemia</i> (Forssk.) Chiov. /Karial/FRW-82-BZU	Asclepiadaceae	Herb	Whole Plant	Powder, Decoction	Oral	Antiparasitic drug, gas trouble, difficulty in breathing, acidity and pregnancy issues
<i>Polygala erioptera</i> var. <i>vahliana</i> (DC.) Chodat /Asmani Buti/FRW-67-BZU	Polygalaceae	Herb	Whole Plant	Infusion, Decoction	Oral	Detoxify blood, liver disorders and skin disease
<i>Polygonum plebejum</i> R. Br., Prodr. /Charri Hatha/FRW-68-BZU	Polygonaceae	Herb	Roots, Whole plant	Powder, Decoction	Oral	Cough, bronchitis, Bronchial asthma, pneumonia, indigestion, vomiting and diarrhea
<i>Portulaca oleracea</i> L. /Lonak/FRW-71- BZU	Portulacaceae	Herb	Whole plant	Cook, Decoction	Oral	Cough, piles, constipation and weakness
<i>Praecitrullus fistulosus</i> (Stocks) Pangalo /Jangli Tindy/FRW-69-BZU	Cucurbitaceae	Herb	Fruit	Cook, Powder	Oral	Appetizer, indigestion and weakness
<i>Prosopis cineraria</i> (L.) Druce /Jandi or Kanda/FRW-16-BZU	Fabaceae	Tree	Leavers, Bark, Flowers, Pods, Fruit	Powder, Decoction	Oral	Anemia, contraceptive, Heal wounds, joint and muscle pain

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Prosopis juliflora (Sw.) DC. /Maskit/FRW- 15-BZU	Fabaceae	Tree	Leaves, Bark	Decoction	Oral	Dermatitis, bone fractures and cure gall stones
<i>Psoralea plicata</i> Delile /Makka Buti/FRW- 70-BZU	Fabaceae	Herb	Roots, Seeds	Powder, Decoction	Oral	Skin diseases and Blood purifier
<i>Rhynchosia capitata</i> (B. Heyne ex Roth) DC. /Choti Ghore Wall/FRW-72-BZU	Fabaceae	Herb	Whole plant	Decoction	Oral	Indigestion, constipation and vomiting
<i>Saccharum bengalense</i> Retz. /Sarkanda/FRW-09-BZU	Poaceae	Grass	Roots	Infusion, Decoction	Oral	Kidney stone and painful urination
<i>Salsola imbricata</i> Forssk. /Lani/FRW-23- BZU	Chenopodiaceae	Shrub	Whole Plant	Making Ash	Topical	Abdominal distension, antiparasitic drug, itching and sores
<i>Salvadora oleoides</i> Decne. /Pilu or Wan/FRW-14-BZU	Salvadoraceae	Tree	Fruit, Bark, Leaves, Stem	Cook, Decoction	Oral	Bone fractures, cure gall stones, bad eating habits and bleeding gums
<i>Seetzenia lanata</i> (Willd.) Bullock /Jeuli Buti/FRW-73-BZU	Zygophyllaceae	Herb	Whole plant	Decoction	Oral	stimulant, pyrexia and High blood pressure
<i>Sesuvium sesuvioides</i> (Fenzl) Verdc. /Barri Ulwaiti/FRW-75-BZU	Aizoaceae	Herb	Whole plant	Decoction	Oral	Joint pain and nosebleed
<i>Solanum surratense</i> Burm. f. /Kandiari/FRW-74-BZU	Solanaceae	Herb	Whole plant	Powder, Decoction	Oral	Bronchial asthma, Joint pain, severe headache, hair stimulant, and gastric problem
<i>Suaeda fruticosa</i> Forssk. ex J. F. Gmel. /Kali Lani/FRW-22-BZU	Chenopodiaceae	Shrub	Whole Plant	Making Ash	Topical	Constipation, dysmenorrhea, red eyes, indigestion and wound healing
<i>Tamarix aphylla</i> (L.) Lanza /Ukhan or Frash/FRW-13-BZU	Tamaracaceae	Tree	Leaves, Bark, Nuts	Powder, Decoction	Oral	Ulcer, sexual weakness and skin problems
<i>Tephrosia purpurea</i> (L.) Pers. /Jhilli/FRW- 21-BZU	Fabaceae	Shrub	Whole Plant	Decoction, Powder	Oral	Liver disorders, peptic ulcer, lower respiratory tract infection, Hemorrhoids, cancer/malignant tumor and skin allergy
<i>Trianthema triquetram</i> Willd. /Choti Ulwaiti/FRW-77-BZU	Aizoaceae	Herb	Whole Plant	Powder, Decoction, Infusion	Oral	Skin disease, diabetes and inflammation
<i>Tribulus longipetalus</i> Viv. /Tirkindi or Bakhara/FRW-76-BZU	Zygophyllaceae	Herb	Fruit, Seeds, Whole Plant	Powder, Decoction	Oral	Kidney stone, Erectile- dysfunction, male sexual problems and anemia
<i>Withania coagulens</i> Stocks /Paneer/FRW-85-BZU	Solanaceae	Herb	Whole Plant, Fruit	Powder, Decoction	Oral	hepatitis, jaundice, anorexia, skin problems, chronic fever, bad eating habits
<i>Withania somnifera</i> L. /Asgandh/FRW- 86-BZU	Solanaceae	Herb	Leaves, Root Bark, Roots	Powder, Decoction, Infusion	Oral	Erectile-dysfunction, premature ejaculation, diabetes, Peripheral

						neuropathy, arthritis and as sexual tonic
Zaleya pentandra (L.) C. Jeffrey /Itsit or	Aizoaceae	Herb	Roots	Powder,	Oral	Painful urination, kidney stone,
Wisah/FRW-79-BZU				Decoction		blood in urine
Zizyphus spina-christi (L.) Desf. /Beri/FRW-12-BZU	Rhamnaceae	Tree	Fruit, Bark, Leaves, Seeds	Powder, Decoction	Oral	Jaundice, hepatitis, indigestion, leucorrhoea, menstrual
						disorders, Skin diseases and hair roughness
<i>Zygophyllum simplex</i> L. /Lunak/FRW-78- BZU	Zygophyllaceae	Herb	Whole Plant	Powder, Decoction	Oral	Blood purifier, Patchy skin, wounds, acne and Bleeding

Declarations

Ethics approval: All participants provided oral prior informed consent.

Consent to publish: The paper does not show any personal data. Availability of data and materials: The authors will provide the raw data on request without the names of informants.

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Authors' contribution: EA deliberated this work, conducted a field survey, performs statistical analysis, and wrote the manuscript. MFA read, corrected, and approved the manuscript.

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Literature Cited

Abbas Z, Khan SM, Alam J, Khan SW, Abbasi AM. 2017. Medicinal plants used by inhabitants of the Shigar Valley, Baltistan region of Karakorum range-Pakistan. Journal of Ethnobiology and Ethnomedicine 13(1):1-15.

Abbasi AM, Khan MA, Khan N, Shah MH. 2013. Ethnobotanical survey of medicinally important wild edible fruits species used by tribal communities of Lesser Himalayas-Pakistan. Journal of Ethnopharmacology 148(2):528-536.

Abebe BA, Chane Teferi S. 2021. Ethnobotanical study of medicinal plants used to treat human and livestock ailments in Hulet Eju Enese Woreda, east Gojjam zone of Amhara region, Ethiopia. Evidence-Based Complementary and Alternative Medicine.

Ahmad F. 2008. Runoff farming in reducing rural poverty in Cholistan desert. Journal of Sociedade & Natureza 20(1):177-188.

Ahmad KS, Kayani WK, Hameed M, Ahmad F, Nawaz T. 2012. Floristic diversity and ethnobotany of senhsa, district Kotli, Azad Jammu & Kashmir (Pakistan). Pakistan Journal of Botany 44(SI):195-201.

Ahmad S, Alam K, Wariss HM, Anjum S, Mukhtar M. 2014. Ethnobotanical studies of plant resources of Cholistan desert, Pakistan. International Journal of Science and Research 3(6):1782-8.

Akram M, Kahlown MA, Soomro ZA. 2008. Desertification control for sustainable land use in the Cholistan Desert, Pakistan. In The Future of Drylands. Springer: Dordrecht Netherlands pp. 483-492.

Albuquerque UP, de Oliveira RF. 2007. Is the use-impact on native caatinga species in Brazil reduced by the high species richness of medicinal plants? Journal of Ethnopharmacology 113(1): 156-170.

Ali I, Chaudhry MS, Farooq U. 2009. Camel rearing in the Cholistan desert of Pakistan. Pakistan Veterinary Journal 29(2).

Ali SI, Nasir E. 1970. Flora of Pakistan. Department of Botany, University of Karachi, Karachi, Pakistan 01-215.

Arshad M, Hassan A, Ashraf MY, Noureen S, Moazzam M. 2008. Edaphic factors and distribution of vegetation in the Cholistan desert, Pakistan. Pakistan Journal of Botany 40(5): 1923-1931.

Arshad M, Nisar MF, Majeed A, Ismail S, Ahmad, M. 2011. Ethnomedicinal flora in district Sialkot, Punjab, Pakistan. Middle-East Journal of Scientific Research 9(2):209-214.

Ayyanar M., Ignacimuthu S. 2005. Traditional knowledge of kani tribals in Kouthalai of Tirunelveli hills, Tamil Nadu, India. Journal of ethnopharmacology 102(2):246-255.

Azhar MF, Aziz A, Haider MS, Nawaz MF, Zulfiqar, MA. 2015. Exploring the ethnobotany of *Haloxylon recurvum* (Khar) and *Haloxylon salicornicum* (Lana) in Cholistan desert, Pakistan. Pakistan Journal of Agricultural Research 52(4):1085-1090.

Azhar MF, Aziz A, Siddiqui MT, Zafar S, Abdullah M, Ijaz M, Hussain M. 2018. Evaluation of chemical composition and ethno-botanical uses of *Calligonum polygonoides* L. in Cholistan Desert of Pakistan. Journal of Medicinal & Spice Plants 23(3):132-137.

Azhar MF. 2014. Ethnobotanical Potential of Medicinal Shrubs in Socioeconomic Uplift of Cholistan Rangeland Dwellers. Doctoral dissertation, University of Agriculture Faisalabad-Pakistan.

Azhar MF, Aziz A, Ali E. 2022. Assessment of medicinal folklores and chemical composition of Aerva javanica (Burm. f.) Juss. ex Schult. in Cholistan Desert of Pakistan. Ethnobotany Research and Applications 24:1-10.

Azhar MF, Aziz A, Haider MS, Nawaz MF, Zulfiqar MA. 2015. Exploring the ethnobotany of *Haloxylon recurvum* (Khar) and *Haloxylon salicornicum* (Lana) in Cholistan desert, Pakistan. Pakistan Journal of Agricultural Sciences 52:1085-1090.

Bandaranayake WM. 2006. Modern phytomedicine. Turning medicinal plants into drugs. WILEY-VCH, Weinheim 1:25-57.

Begum HA, Hamayun M, Khan A, Yaseem T, Bussmann RW, Murad W. 2022. Quantitative ethnobotanical appraisal of medicinal plants used by indigenous communities of District Malakand, Pakistan. Ethnobotany Research and Applications 24:1-14.

Bhaila A, Shakya S, Kunwar B, Baral B, Chaudhary S, Munankarmi N. 2022. Ethnomedicinal exploration of plants utilized by the people of Suryabinayak Municipality in Bhaktapur District, Nepal. Vegetos, 1-12.

Bibi S, Sultana J, Sultana H, Malik RN. 2014. Ethnobotanical uses of medicinal plants in the highlands of Soan Valley, Salt Range, Pakistan. Journal of Ethnopharmacology 155(1):352-361.

Bussmann RW, Sharon D. 2006. Traditional medicinal plant use in Northern Peru: tracking two thousand of healing cultures. Journal of Ethnobiology and Ethnomedicine 2:1-18.

Canales M, Hernández T, Caballero J, De Vivar AR, Avila G, Duran A, Lira R. 2005. Informant consensus factor and antibacterial activity of the medicinal plants used by the people of San Rafael Coxcatlán, Puebla, México. Journal of Ethnopharmacology 97(3):429-439.

Cox PA. 2000. Will tribal knowledge survive the millennium? Journal of Science 287(5450):44-45.

Diallo D, Hveem B, Mahmoud MA, Berge G, Paulsen BS, Maiga A. 1999. An ethnobotanical survey of herbal drugs of Gourma district, Mali. Pharmaceutical Biology 37(1):80-91.

Ding X, Guo C, Zhang X, Li J, Jiao Y, Feng H, Wang Y. 2022. Wild Plants Used by Tibetans in Burang Town, Characterized by Alpine Desert Meadow, in Southwestern Tibet, China. Agronomy 12(3):704.

Dulal K, Chaudhary S, Uprety Y, Shrestha N, Shakya S, Munankarmi N. 2022. Ethnomedicinal plants used by the local people of Changunarayan Municipality, central Nepal. Ethnobotany Research and Applications 23:1-27.

Farooq U, Ahmad M, Saeed I. 2009. Enhancing livestock productivity in the desert ecologies of Pakistan: setting the development priorities. The Pakistan Development Review 48(4):795- 820.

Ferreira FS, Albuquerque UP, Coutinho HMD, Almeida WO, Alves RRN. 2012. The trade in medicinal animals in northeastern Brazil. Evidence-Based Complementary and Alternative Medicine 126-938.

Friedman J, Yaniv Z, Dafni A, Palewitch D. 1986. A preliminary classification of the healing potential of medicinal plants, based on a rational analysis of an ethnopharmacological field survey among Bedouins in the Negev Desert, Israel. Journal of Ethnopharmacology 16(2-3):275-287.

Gebru MG, Lulekal E, Bekele T, Demissew S. 2021. Use and management practices of medicinal plants in and around mixed woodland vegetation, Tigray Regional State, Northern Ethiopia. Ethnobotany Research and Applications 21:1-26.

Giday M, Teklehaymanot T, Animut A, Mekonnen Y. 2007. Medicinal plants of the Shinasha, Agew-awi and Amhara peoples in northwest Ethiopia. Journal of Ethnopharmacology 110(3): 516-525.

Gulfraz M, Ahmad A, Asad MJ, Afzal U, Imran M, Anwar P, Qureshi RU. 2011. Antidiabetic activities of leaves and root extracts of *Justicia adhatoda* Linn against alloxan induced diabetes in rats. African Journal of Biotechnology 10(32):6101-6106.

Hamayun M. 2005. Ethnobotanical profile of Utror and Gabral Valleys, District Swat, Pakistan. Ethnobotanical Leaflets 2005:9.

Hameed M, Ashraf M, Al-Quriany F, Nawaz T, Ahmad MSA, Younis A, Naz N. 2011. Medicinal flora of the Cholistan desert: a review. Pakistan Journal of Botany 43(2):39-50.

Heinrich M, Ankli A, Frei B, Weimann C, Sticher O. 1998. Medicinal plants in Mexico: Healers' consensus and cultural importance. Social Science & Medicine 47(11):1859-1871.

Heinrich M, Barnes J, Gibbons S, Williamson EM. 2004. Ethnobotany and ethnopharmacology. Fundamentals of Pharmacognosy and Phytotherapy. London, Churchill Livingstone, 48-58.

Hu R, Lin C, Xu W, Liu Y, Long C. 2020. Ethnobotanical study on medicinal plants used by Mulam people in Guangxi, China. Journal of Ethnobiology and Ethnomedicine16:32.

Husain SZ, Malik RN, Javaid M, Bibi S. 2008. Ethnobotanical properties and uses of medicinal plants of Morgah biodiversity park, Rawalpindi. Pakistan Journal of Botany 40(5):1897-1911.

Hussain W, Ullah M, Dastagir G, Badshah L. 2018. Quantitative ethnobotanical appraisal of medicinal plants used by inhabitants of lower Kurram, Kurram agency, Pakistan. Avicenna Journal of Phytomedicine 8:313.

Idm'hand E, Msanda F, CherifiK. 2020. Ethnobotanical study and biodiversity of medicinal plants used in the Tarfaya Province, Morocco. Acta Ecologica Sinica40(2):134-144.

Jain SC, Jain R, Singh R. 2009. Ethnobotanical survey of Sariska and Siliserh regions from Alwar district of Rajasthan, India. Ethnobotanical leaflets (1):21.

Jan M, Mir TA, Ganie AH, Khare RK. 2021. Ethnomedicinal use of some plant species by Gujjar and Bakerwal community in Gulmarg Mountainous Region of Kashmir Himalaya. Ethnobotany Research and Applications 21:1-23.

Jima TT, Megersa M. 2018. Ethnobotanical study of medicinal plants used to treat human diseases in Berbere District, Bale Zone of Oromia Regional State, South-East Ethiopia. Evidence-Based Complementary and Alternative Medicine 8602945.

Kassa Z, Asfaw Z, Demissew S. 2020. An ethnobotanical study of medicinal plants in Sheka zone of Southern Nations Nationalities and Peoples Regional State, Ethiopia. Journal of Ethnobiology and Ethnomedicine 16:1-15.

Katewa, SS. 2009. Indigenous people and forests: Perspectives of an ethnobotanical study from Rajasthan (India). In Herbal drugs: Ethnomedicine to modern medicine (pp. 33-56). Springer, Berlin, Heidelberg.

Khan A, Ali S, Murad W, Hayat K, Siraj S, Jawad M, Khan A. 2021. Phytochemical and pharmacological uses of medicinal plants to treat cancer: A case study from Khyber Pakhtunkhwa, North Pakistan. Journal of Ethnopharmacology 281:114437.

Kültür Ş. 2007. Medicinal plants used in Kırklareli province (Turkey). Journal of Ethnopharmacology 111(2):341-364.

Kunwar RM, Bussmann RW. 2008. Ethnobotany in the Nepal Himalaya. Journal of Ethnobiology and Ethnomedicine 4:1-8.

Lal M, Chandraker SK, Shukla R. 2022. Quantitative ethnobotanical study of therapeutic plants of Amarkantak hills in Achanakmar-Amarkantak Biosphere Reserve, Central India. Acta Ecologica Sinica.

Lozada M, Ladio A, Weigandt M. 2006. Cultural transmission of ethnobotanical knowledge in a rural community of northwestern Patagonia, Argentina. Economic Botany 60(4):374-385.

Mahmood A, Mahmood A, Malik RN. 2012. Indigenous knowledge of medicinal plants from Leepa valley, Azad Jammu and Kashmir, Pakistan. Journal of Ethnopharmacology 143(1):338-346.

Mahmood A, Mahmood A, Shaheen H, Qureshi RA, Sangi Y, Gilani SA. 2011. Ethno medicinal survey of plants from district Bhimber Azad Jammu and Kashmir, Pakistan. Journal of Medicinal Plants Research 5(11):2348-2360.

Malik S, Ahmad, Sadiq S, Alam A, Wariss K, Ahmad HM, Mukhtar M. 2015. A comparative ethno-botanical study of Cholistan (an arid area) and Pothwar (a semi-arid area) of Pakistan for traditional medicines. Journal of Ethnobiology and Ethnomedicine 11(1):1-20.

Martin GJ. 1995. Ethnobotany: A methods manual. Chapman & Hall, London, U.K.

Miles MB, Huberman AM. 1994. Qualitative data analysis. The SAGE Handbook of Qualitative Research. Thousand Oaks: SAGE, 2011.

Nirmala C, Shahar B, Dolma N, Santosh O. 2022. Promising underutilized wild plants of cold desert Ladakh, India for nutritional security and health benefits. Applied Food Research, 100145.

Njoroge GN, Bussmann RW, Gemmill B, Newton LE, Ngumi VW. 2004. Utilization of weed species as source of traditional medicines in central Kenya. Lyonia 7:272-287.

Nolan JM, Turner NJ. 2011. Ethnobotany: The study of people-plant relationships. Journal of Ethnobiology 9:135-141.

Ozkan G, Kamiloglu S, Ozdal T, Boyacioglu D, Capanoglu E. 2016. Potential use of Turkish medicinal plants in the treatment of various diseases. Molecules 21:257.

Qureshi R, Bhatti GR. 2008. Ethnobotany of plants used by the Thari people of Nara Desert, Pakistan. Fitoterapia 79(6):468-473.

Qureshi R, Maqsood M, Arshad M, Chaudhry AK. 2011. Ethnomedicinal uses of plants by the people of Kadhi areas of Khushab, Punjab, Pakistan. Pakistan Journal of Botany 43(1):121-133.

Rafay M, Abdullah M, Hussain T, Nawaz F, Ruby T, Akram M. 2015. An assessment of edaphic factors and grass diversity in the Cholistan desert (Pakistan). Pakistan Journal of Agricultural Sciences 52:755-765.

Rafay M, Khan RA, Yaqoob S, Ahmad M. 2013. Floristic composition of grass species in the degrading rangelands of the Cholistan desert. Pakistan Journal of Agricultural Sciences 50(4): 599-603.

Rashid U, Khan MR, Jan S, Bokhari J, Shah NA. 2013. Assessment of phytochemicals, antimicrobial and cytotoxic activities of extract and fractions from *Fagonia olivieri* (Zygophyllaceae). BMC Complementary and Medicinal Therapies 13(1):1-7.

Rehman F, Hussain T, Abdullah M, Ashraf I, Rafay M, Bibi I. 2015. Ethnobotanical Survey, Common medicinal plants used by people of the Cholistan Desert. The Professional Medical Journal 22(10).

Shah SM, Hussain F. 2021. Weed diversity in Maize fields of Mastuj valley, Hindukush range, Pakistan. Pure and Applied Biology 5(4):1044-1050.

Shaheen H, Qureshi R, Akram A, Gulfraz M. 2012. Some important medicinal flora of Noorpur Thal, Khushab, Pakistan. Archives Des Sciences 65(2):57-73.

Shaheen H, Qureshi R, Akram A, Gulfraz M. 2014. Inventory of medicinal flora from Thal desert, Punjab, Pakistan. African Journal of Traditional, Complementary and Alternative Medicines 11(3):282-290.

Shinwari MI, Shinwari MI. 2010. Botanical diversity in Pakistan, past present and future. World Environment 1:85-104.

Shrestha N, Shrestha S, Koju L, Shrestha KK, Wang Z. 2016. Medicinal plant diversity and traditional healing practices in eastern Nepal. Journal of Ethnopharmacology 192:292-301.

Sial N, Arshad M. 2003. Biodiversity in the Surface-Dwelling Fauna from Cholistan Desert, Pakistan. Pakistan Journal of Biological Sciences 6(13):1195-1198.

Sodhi NS, Koh LP, Brook BW, Ng PK. 2004. Southeast Asian Biodiversity: n impending disaster. Trends in Ecology and Evolution 19:654-660.

Sonibare MA, Moody JO, Adesanya EO. 2009. Use of medicinal plants for the treatment of measles in Nigeria. Journal of Ethnopharmacology 122(2):268-272.

Taleuzzaman M, Ahmad A, Gilani SJ. 2022. Socio-Economic Importance of Some Promising Edible Medicinal Plants from Rajasthan, India. In Edible Plants in Health and Diseases (pp. 31-53). Springer, Singapore.

Tali BA, Khuroo AA, Ganie AH, Nawchoo A. 2019. Diversity, distribution and traditional uses of medicinal plants in Jammu and Kashmir (J&K) state of Indian Himalayas. Journal of Herbal Medicine 17-18.

Ticktin T. 2004. The ecological implications of harvesting non-timber forest products. Journal of Applied Ecology 41(1):11-21.

Trotter RT, Logan MH. 2019. Informant consensus: a new approach for identifying potentially effective medicinal plants. Plants and Indigenous Medicine & Diet- Routledge pp. 91-112.

Umair M, Altaf AM, Abbasi AM. 2017. An ethnobotanical survey of indigenous medicinal plants in Hafizabad District, Punjab Pakistan. PLoSONE 12:1-22.

Walker BH. 1992. Biodiversity and ecological redundancy. Conservation Biology 6(1):18-23.

Wang H, Chukwuma A, Comsa R, Dmytraczenko T, Gong E, Onofrei L. 2021. Generating political priority for Primary Health Care Reform in Romania. Health Systems and Reform 7:e1898187.

Wariss HM, Mukhtar M, Anjum S, Bhatti GR, Pirzada SA, Alam K. 2013. Floristic composition of the plants of the Cholistan Desert, Pakistan. American Journal of Plant Sciences 2013.

Wariss HM, Wang H, Yi TS, Anjum S, Ahmad S, Alam K. 2016. The taxonomic perspective of grasses, a potential resource of Cholistan desert, Pakistan. Journal of Biodiversity and Environmental Sciences 9:26-42.

World Health Organization. 2002. WHO Traditional Medicine Strategy. WHO, Geneva.

World Health Organization. 2013. WHO traditional medicine strategy: 2014-2023. World Health Organization.

Yaseen G, Ahmad M, Potter D, Zafar M., Sultana S, Mir S. 2018. Ethnobotany of medicinal plants for livelihood and community health in deserts of Sindh-Pakistan. In Plant and Human Health, Volume 1 (pp. 767-792). Springer, Cham.

Yaseen G, Mushtaq A, Shazia S, Ahmed SA, Javid H, Muhammad Z. 2015. Ethnobotany of medicinal plants in the Thar Desert (Sindh) of Pakistan. Journal of Ethnopharmacology 163:43-59.