

Ethnobotanical study on traditional medicinal plants used by Oromo ethnic people of Goro district, Bale zone of Oromia region, Ethiopia

Kedir Adem Usman, Meseret C. Egigu and J.M. Sasikumar

Correspondence

Kedir Adem Usman, Meseret C. Egigu* and J.M. Sasikumar

School of Biological Sciences and Biotechnology, College of Natural and Computational Sciences, Haramaya University, Haramaya, P.O. Box 138, Ethiopia.

*Corresponding Author: marakye311@gmail.com

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Research

Abstract

Background: An ethnobotanical study was conducted among Oromo people in Goro district, Oromia region, Ethiopia to document ethnomedicinal uses of plants.

Methods: Semi-structured interviews, focus group discussion and field walks were used to collect data on medicinal plants and demography during October 2017- September 2018 from 369 non-traditional and 24 traditional medicine practitioners. Descriptive statistics and quantitative indices viz. Independent t-test, Analysis of Variance (ANOVA), multiple regression analysis, Informant Consensus Factor (ICF), Fidelity Level (FL), Preference Ranking (PR) and Direct Matrix Ranking (DMR) were performed to analyze the data.

Results: A total of 84 medicinal plants belonging to 45 families were documented. The family Asteraceae was represented by six species. Most of the plants were herbs (30). The most frequently used plant parts were leaves (39.36%) followed by roots (19.18%). Oral route was frequently (62.26%) cited way of remedy application. Gastrointestinal and Dermatological illnesses had the highest ICF value (0.80), whereas the least ICF value was for Parasitic infections (0.47). The highest FL (100%) was recorded for *Aloe ruspoliana* and *Nicotiana tabacum* for Wound and Leech repulsion, respectively. *Achyranthes aspera* was top-ranked plant to treat stomachache. The analysis of DMR revealed *Cordia africana* as top-ranked multipurpose plant. Gender, age and educational status significantly (p<0.05) affected the traditional medicinal knowledge. Results of multiple linear regression showed that age and educational status predicted traditional medicinal knowledge.

Conclusion. Our study explored the profound indigenous knowledge of the Oromo people of the study area. Their traditional knowledge on the medicinal plants must be validated with phytochemical and pharmacological studies and the knowledge needs to be preserved.

Keywords. Direct matrix ranking, Fidelity level, Goro district, Informant consensus factor, Preference ranking, Traditional medicine

Background

The indigenous people across the world have established their own local knowledge on plant utility, management and conservation since time immemorial (Cotton 1996). These people possess exclusive knowledge on plant

resources of their surroundings and depend on them for various purposes including food and medicine (Samar *et al.* 2015). Among the continents, Africa depend on plant-based traditional medicine for their health care requirements. Traditional medicine is the principal and in some cases the only source of healthcare system for many rural communities of Africa (Antiwi-Baffour *et al.* 2014).

Among African countries, a large number of Ethiopian populace has still been relying on traditional remedies of plant origin to treat humans' and livestock's ailments (Birhanu *et al.* 2015, Fassil 2005). Their dependence on traditional medicine is due to cultural acceptability, less accessibility to allopathic medication and due to dearth of primary healthcare centers in rural and remote hamlets. The indigenous knowledge on medicinal plants still exists in the nation because of its diverse ethnicity, socio-economic status and agro-ecologies. Nevertheless, many of the ethnic communities residing in different agro-ecologies are hitherto to be explored for their knowledge on traditional medicinal plants.

This indigenous knowledge, which is well-preserved by Ethiopian indigenous population can vanish owing to immigration of communities to urban areas for employment purpose, industrialization, rapid loss of natural habitats and drastic alteration of local ecology. Further, some previously reported ethnobotanical studies envisaged the signs of erosion of indigenous medicinal plant knowledge among the ethnic communities of Ethiopia (Andarghe et al. 2015, Araya et al. 2015, Kidane et al. 2014, Mesfin et al. 2009). Above all, a profound gap between the generations and a lackadaisical mindset of younger generation have caused waning in indigenous knowledge on plant utilization (Bekalo et al. 2009, Jima & Megersa 2018). 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. 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. Albeit some ethnobotanical study reports (e.g., Assefa et al. 2021, Bussmann et al. 2011, Gelgelu et al. 2020, Jima & Megersa 2018, Tegene 2018) from Bale zone exist, no ethnobotanical study was conducted in Goro district of this zone to tap indigenous knowledge relating to the utilization of medicinal plants. This study was, therefore, conducted with the objective of documenting traditional medicinal plants used by ethnic Oromo community of Goro district to treat humans' and livestock's ailments together with the associated indigenous knowledge. Therefore, in this study, we attempted to record ethnobotanical practices for using traditional medicinal plants for the treatment of various humans' and livestock's ailments and associated indigenous knowledge among the ethnic Oromo community living in Goro district, Bale zone, Oromia region, Ethiopia.

Materials and Methods

Study area

The study was conducted in Goro district found in Bale Zone of the Oromia Region, Ethiopia at 490 km to southeast from Addis Ababa (Ethiopia's capital) and 60 km from the Zonal capital, Bale Robe (Figure 1.).



Continent of Africa

Figure 1. Location of the study site

The study area lies between 6° 0'29"&7°15" N latitude and 40°10"& 40 °45" E longitude and it covers a total area of 451,009 ha. The altitude of the district ranges from 500-2610 masl (Zenebe 2013). The mid-altitude areas (1600-2300 m above sea level) constitute 20% of the district and high altitude (>2300 m above sea level) areas cover 16% of the district. The remaining are low-lying areas. According to national census (CSA 2015), total population of the district was 86,106 of which 43,501 are men and 42,605 are women. About 8,531 are urban dwellers, whereas 77,575 are rural dwellers. Afaan Oromo is the main (89.45%) language of the study area, whereas Amharic (9.8%) and other languages (0.75%) are also spoken. Religion wise, 81.23 and 18.43% are followers of Islam and Christian, respectively. This district has 24 rural and 2 urban kebeles, totally 26 kebeles (kebele is the lowest administrative unit).

The average annual temperature of lowland areas ranges from 25 to 30°C, whereas that of highland areas ranges from 16 to 20°C. The mean annual rainfall is 1700 mm (Zenebe 2013). People of the district cultivate crops such as maize (*Zea mays*), tef (*Eragrostis tef*), Barley (*Hordeum vulgare*), wheat (*Triticum aestivum*), field peas (*Pisum sativum*) and broad beans (*Vicia faba*). They also rear livestock.

Preliminary survey for sampling in the study area

For the sampling purpose, visits were made to the study site for a reconnaissance survey from September 2017 to October 2017 to select three potential kebeles viz. Gobu, W/mana and Chefa based on the availability of medicinal plants and traditional medicine practitioners. Prior to ethnobotanical data collection, informants were selected from the selected kebeles. The total population size of the three selected kebeles was 9322. Therefore, the required sample size to represent the selected kebeles was determined by using the formula of Yemane (1967) as follows:

$$n = \frac{N}{1 + N(e)^2}$$

Where n=sample size for research; *N*=total number of population in the three kebeles (=9322); *e*=maximum variability or margin of error 5% (0.05); and 1= the probability of event occurring.

Thus, the required sample size was:

A total of 393 informants (aged >25) were selected from the three Kebeles. Out of this, 369 informants were nontraditional medicine practitioners who were selected randomly from the three Kebeles. In order to meet the minimum sample size required, all available, i.e., 24 traditional medicine practitioners were included as keyinformants (Tongco 2007) as they are proficient in traditional medicinal knowledge.

Ethnobotanical and socio-demographic data

Procedures of ethnopharmacological data collection (Martin 1995, Weckerle *et al.* 2017) were employed to gather information on ethnobotany of medicinal plants and socio-demographic features from October 2017 to December 2018. The techniques were semi-structured interviews, focus group discussions and direct guided field walks. Each respondent was interviewed separately to give the data on socio-demography (gender, age, and educational level), local names of the plants, diseases treated, habit, habitat, part(s) of plants used and their nature at preparation, approaches of preparation and modes of administration, dosages of remedies and additives used (if any). The informants were interviewed in Afaan Oromo though interview questions were initially prepared in English. Due to conservative culture among the male informants, permission was sought from them to interview the women informants after the purpose of the survey was explained. Accordingly, female informants were interviewed in their ambient vegetation. Based on prepared checklist, group discussion was made with the key-informants and guided field walks were performed with them for field observation and plant specimen collection.

Analysis of data

A descriptive statistical method was employed to summarize the ethnobotanical data. Independent T-test, oneway ANOVA and multiple regression were analyzed using SPSS (version 20) to compare knowledge on traditional medicinal plants between various socio-demographic groups. For this, respondents were grouped by gender (male vs female), grouped into three age categories (20-40, 41-60, >60), and 4 educational status categories (no formal

education, basic writing and reading, Grade 8-12, >Grade 12). Differences were considered as statistically significant at p<0.05.

Quantitative ethnobotanical indexes viz., Informant consensus factor (ICF), fidelity level (FL), preference ranking (PR) and direct matrix ranking (DMR) were also computed.

Informant consensus factor (ICF) was calculated for eight categories of human ailments to identify the agreements of the informants on the reported cures using the formula used by Teklehaymanot and Giday (2007). The ICF was calculated as follows:

$$\text{ICF} = \frac{n_{ur} - n_t}{n_{ur} - 1}$$

The ICF values range from 0 to 1, with high values (i.e. close to 1) indicating a high consensus, i.e., more informants use the same species and value close to zero indicates a high variation in the use of plant species to treat a category of ailments.

Fidelity Level: The relative healing potential of each reported medicinal plant used against human and livestock ailments were evaluated using the fidelity level (FL) index. The fidelity level (FL), the percentage of informants claiming the use of a certain plant for the same major purpose was calculated for the most frequently reported ailments using the following equation (Alexiades 1996).

$$FL(\%) = \frac{NP}{N} x100$$

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

Preference ranking was computed following Martin (1995). The PR was conducted for six plant species more frequently mentioned to treat stomachache. In ranking exercise, 10 key informants were randomly selected and asked to rank plants based on their perceived effectiveness to cure the disease by assigning the highest value (6) for the most efficacious plant and lowest value (1) for the least efficacious plant.

Direct matrix ranking was conducted in order to compare multipurpose medicinal plants commonly reported by informants by following the method of Cotton (1996). Based on the relative benefits obtained from each plant, six multipurpose species were selected out of the total medicinal plants and six use diversities (use for medicine, fodder, firewood, construction, charcoal and furniture making). Ten key informants were selected and asked to assign use values (5 = best, 4 = very good, 3 = good, 2 = less used, 1 = least used and <math>0 = not used) for each purpose. The values given by 10 key informants for each species corresponding to each use purpose were averaged, and later summed up and ranked.

Results and Discussion

Medicinal plants documented and their diversity

From the three surveyed kebeles of the study area, a total of 84 medicinal plant species grouped under 75 genera and 45 families were reported for the treatment of 58 different health problems (Table 1). Sixty-three of these plants were reported for treating human ailments only, whereas 17 and 4 species were used to treat livestock only, and both livestock and human ailments, respectively (Table 1). Analysis of species diversity by family showed that Asteraceae is represented by 6 species followed by Fabaceae (5 species), Euphorbiaceae, Solanaceae and Anacardiaceae (4 species each), Rutaceae, Myrsinaceae, Myrtaceae and Moraceae (3 species each) (Table 2). The dominance of the Asteraceae family owes to its cosmopolitan distribution (Andenberg *et al.* 2007). Previous reports show high usage of this family for medicinal purpose in Ethiopia (e.g., Birhanu *et al.* 2015, Mesfin *et al.* 2009, Mogosse 2016) and in other countries (da Costa *et al.* 2021, Hosseini *et al.* 2021, Jafarirad & Rasoulpour 2019). Reports on the presence of diverse secondary compounds such as sesquiterpene lactones (Chadwick *et al.* 2013) and phenolic compounds (Jaiswal *et al.* 2011, Petropoulos *et al.* 2019) and bioactive investigations like anticancer activity (Tesfaye *et al.* 2021), antidiabetic activity (Gyang *et al.* 2004) and antimicrobial activity (Sasikumar *et al.* 2005, Teka *et al.* 2015) support the popularity of this family in traditional medicine use.

Table 1. List of medicinal plants used to treat human and livestock ailments

Scientific Name, Voucher No and Habit	Local name	Families	HB	Disease treated	СР	Route of administration	Part used, Preparation and application
<i>Acacia albida</i> Del. (KA11) Tree	Garbii	Fabaceae	Fl	Diarrhea	F	Oral	Bark . The internal part of the bark is crushed, mixed with water, filtered and drunk
				Dandruff	D	Dermal	Pods. The pods are pounded and used as a shampoo
<i>Acacia etbaica</i> Schweinf. (KA02) Tree	Doddotii	Fabaceae	W	Abdominal pain	F	Oral	Root. Fresh root is chewed and swallowed
Achyranthes aspera L. ** (KA08) Herb	Derguu	Amaranthaceae	W	Stomachache	F	Oral	Root. The root is chewed and swallowed
				Wound	F	Dermal	Leaf. The leaf is crushed with <i>Allium sativum</i> bulb then creamed on wounded part.
				Blood clot	F	Dermal	Root. Crushed root is tied on bleeding part of animals.
				Tonsillitis	F	Dermal	Leaf. Crushed leaf is mixed with coffee powder and then tied on neck with clean cloth
<i>Acokanthera schimperi</i> (A. DC.) Schweinf. (KA04) Tree	Qaraaru	Apocynaceae	W	Scabies & spider poison	F	Dermal	Leaf. The leaves are chopped, mixed with butter and applied on the infected part of the body
<i>Allium cepa</i> L. (KA05) Herb	Shunkurti diima	Alliaceae	Fl	Asthma	FD	Oral	Bulb. The bulb is boiled with leaf of <i>Zingiber officinale</i> and the filtrate is drunk
<i>Allium sativum</i> L. (KA03) Herb	Qullubi	Alliaceae	Fl	Malaria	FD	Oral	Bulb. The mixture of crushed bulb and honey (two spoons) is consumed every morning until recovery
				Cough	F	Oral	Bulb. Peeled bulb is consumed
<i>Aloe ruspoliana</i> Baker. (KA06) Herb	Hargiisaa	Aloaceae	W	Wound	F	Dermal	Sap. The sap is creamed on wound
				Snake bite	F	Oral	Sap. The sap/jelly of the fresh leaf is mixed with honey and drunk.
<i>Bidens pilosa</i> L. (KA01) Herb	Cogee	Asteraceae	W	Ear problem	F	Ear	Leaf. The leaves are powdered and mixed with butter and then dropped in to the ear

<i>Cadia purpurea</i> (G. Piccioli) Aiton.* (KA10) Shrub	Hinjirree	Fabaceae	W	Coughing & Sneezing of	F	Nasal	Leaf. So is poure the apin
Calpurnia aurea (Ait.) Benth.* (KA12) Shrub	Ceekata	Fabaceae	W	Ectoparasite (louse)	F	Dermal	Leaf. Mi and kero skin of c
<i>Carica papaya.</i> (KA18) Tree	Papaye	Caricaceae	Fl	Amebiasis	F	Oral	Seed. M
<i>Carissa spinarum</i> L. (KA13) Shrub	Hagamsa	Apocynaceae	W	Diarrhea	F	Oral	Leaf. Th boiled w
				Evil eye	F	Oral	Root. Re
<i>Citrus sinensis</i> L. (KA14) Shrub	Burtukana	Rutaceae	Fl	Wound	F	Dermal	Fruit. The with late and <i>Citr</i>
<i>Coffea arabica</i> L. (KA16) Shrub	Buna	Rubiaceae	Fl	Common cold	D	Oral	Seed. Pe boiled a lemon a drunk
				Fire burn	D	Dermal	Seed. The powdere wound
<i>Cordia africana</i> L. (KA15) Tree	Waddessa	Boraginaceae	W	Smell of foot & Dental problem	D	Dermal	Bark . Dr and app used as relief fro
<i>Croton macrostachyus</i> Hochst. ex Delile ** (KA07) Tree	Bakkanisaa	Euphorbiaceae	W	Ringworm	F	Dermal	Sap. The the infe
				Anthrax	F	Nasal	Root. R macrost spinarui and mix Lagenia filtrate is nostrils
				Arthritis	F	Oral	Leaf. Le <i>macrost</i>

olution of chopped leaves ed through the nostril of mal lixture of crushed leaves rosene is applied on the cattle and calves until the removed Aixture of powdered ind honey is consumed he leaf is chopped and with Coffea arabica and ate is drunk Roots are burned and The fruits juice is mixed ex of *Euphorbia tirucalli* trus lemon juice and ed on wounded part Powder of roasted seeds is and mixed with juice of and ginger and then he seeds is roasted, red and applied on Pried bark is powdered plied on the legs and also tooth powder to get om dental problems ne fresh sap is applied on ected part Root of *Croton* stachyus and Carissa *im* are chopped together xed with crushed fruits of aria siceraria and the is applied through the of cattle and goat. eaves of Croton *stachyus* and bulb of Allium sativum are crushed

				Blood clot	F	Dermal
				Malaria	D	Dermal
<i>Cucumis dipsaceus</i> Ehrenb. ex Spach. ** (KA09) Climber	Dabaaqula	Cucurbitaceae	W	Retained placenta	F	Oral
				Ear pain	F	Ear
				Eye disease	F	Eye
Cucurbita pepo L. (KA17) Climber	Hiddi hoolotaa	Cucurbitaceae	Hg	Stomachache	FD	Oral
<i>Cynodon dactylon</i> L. (KA36) Herb <i>Datura stramonium</i> Mill. (KA19) Herb	Saardo Banjii	Poaceae Solanaceae	W Fl	Snake poison Scabies and ear wound	F F	Oral Dermal
Dodonaea angustifoliaL. f. **(KA35) Shrub	Dhittacha	Sapindaceae	W	Scabies	F	Dermal
				Bone fracture	D	Dermal
Dombeya schimperiana	Dannisa	Sterculiaceae	W	Abdominal pain	D	Oral
<i>Dovyalis abyssinica</i> (A.Rich.) Warb. (KA34) Shrub	Koshimoo	Flacourtiaceae	Hg	Taeniasis	D	Oral
<i>Ehretia cymosa</i> Thon. (KA20) Tree	Ulaaga	Boraginaceae	W	Rheumatism	F	Oral
<i>Elaeagnus commutate</i> Bernh. ex Rydb.*(KA79) Herb	Hiddi waraabessa	Elaeagnaceae	W	Coughing	F	Nasal
<i>Eleusine jaegeri</i> Pilger. (KA33) Herb	Coqorsa	Poaceae	W	Snake bite poison	F	Derma

together and the filtrate is drunk with camel milk Sap. Exudates are put on the cut skin to stop or reduce bleeding Bark is put on fire and the smoke is used to protect from mosquito bite **Root.** Fresh root is pounded and mixed with water and then drunk. Fruit. Fruits are cut and its sap is added to ear canal. Leaf. Leaf is crushed and its juice is dropped in the eye Seed. Seeds are boiled in water, then the filtrate is drunk **Stem.** The stem is chewed Leaf. Leaves are crushed and mixed with salt then creamed on wounded area Leaf. Leaves are crushed and mixed with butter and then creamed Leaf. Paste of leaf powder is tied on fractured bone with bark of Dombeya schimperiana **Leaf.** Mixture of pounded leaf and honey is consumed Seed. Dried seed is roasted and mixed with honey and given to eat Leaf. The fresh leaf is boiled together with roots of *Rumex nepalensis* and the filtrate is drunk for three days. **Leaf.** The juice of the leaf collected after squeezing is given through the nose to cattle Stem. The stem is pounded and rubbed on the affected skin for three days.

Embelia schimperi Vatke. (KA22) Shrub	Haanquu	Myrsinaceae	Hg	Tape worm	D	Oral
<i>Ensete ventricossum</i> (Welw.) <i>Cheesman</i>]. (KA23) Herb	Warqee	Musaceae	Fl	Abdominal pain	F	Oral
				Diarrhea	D	Oral
<i>Eucalyptus camaldulensis</i> Dehnh. (KA32) Tree	Bargamoo	Myrtaceae	Hg	Stomachache	F	Oral
<i>Eucalyptus globules</i> Labill. (KA24) Tree	Bargamoo adii	Myrtaceae	Hg	Common cold	F	Nasal
<i>Euclea racemosa</i> Murr. Subsp. s <i>chimperi</i> (A. DC.) White. (KA31) Shrub	Mi'essa	Ebenaceae	W	Gonorrhea	DF	Oral
				Toothache	F	Oral
<i>Euphorbia candelabrum</i> Trémaux ex Kotschy*(KA25) Tree	Hadamma	Euphorbiaceae	W	Wound and Tumors (" <i>nyaqarsa</i> ")	F	Dermal
<i>Euphorbia tirucalli</i> L.(KA30) Shrub	Aannoo	Euphorbiaceae	W	Skin infection/ <i>kintarot</i>	F	Dermal
<i>Ficus capensis</i> L. (KA26) Tree	Odaa	Moraceae	W	Toothache	DF	Dermal
Ficus sycomorus L. (KA29) Tree	Qilxu	Moraceae	W	Wound	F	Dermal
Ficus thonningii Blume. (KA27) Tree	Dambii	Moraceae	W	Vomiting	F	Oral
				Loss of appetite	F	Oral
<i>Galium hametum</i> Hochst. (KA28) Herb	Maxxanne	Rubiaceae	W	Snake venom	F	Oral
<i>Grewia ferruginea</i> Hochst. ex A. Rich.(KA55) Shrub	Dhoqonuu	Tiliaceae	W	Dandruff	F	Dermal

Fruit. Fruit is pounded, dissolved in water, and the decoction is drunk early morning before meal **Leaf.** The base of the leaves are chopped and fermented for 10-12 days and then consumed **Root.** Dried root decoction with sugar and salt is given. **Leaf** is chewed and swallowed Leaf is crushed roughly and boiled in water and its smoke is inhaled until the patient sweats and sneezes. **Roots** of *Euclea racemosa* and *Cucumis ficifolius* are crushed and mixed with sparrow's meat and honey and then swallowed **Root** is chewed and kept in the teeth **Sap.** The sap is mixed with kerosene and urine then creamed on affected part until recovery Sap. The fresh latex of Euphorbia *tirucalli* is creamed on the affected part Bark. The bark is kept on the affected teeth **Sap.** The latex is creamed on the wounded part Bark. The inner bark is chewed and swallowed **Root.** The root is chewed and swallowed Leaf and Root. The leaves and roots are chopped together and mixed with honey and then consumed one cup at morning for three days Leaf is crushed and used as

shampoo to wash hair

<i>Guizotia scabra</i> (via) Chiov. (KA37) Herb	Hadaa	Asteraceae	Fl	Liver disease	F	Oral
<i>Guizotiaabyssinica</i> (L. f.) Cass.) *(KA54) Herb	Nuugi	Asteraceae	Fl	Swelling (<i>Mada</i>	F	Dermal
<i>Heteromorphatrifoliata</i> (H.L. <i>Wendl.</i>) <i>Eckl.</i> & Zeyh *(KA38) Shrub	Al-haanqaa	Apiaceae	W	Urine mixed with blood	D	Oral
<i>Justicia schimperiana</i> T. Anderson. (KA52) Shrub	Dhummuga	Acanthaceae	W	Rabies	F	Oral
Kalanchoe petitiana. A.Rich. (KA40) Herb	Kontoma	Crassulaceae	W	Swelling	F	Dermal
<i>Lantana camara</i> L. (KA53) Shrub	Qorsoo sinbira	Verbenaceae	W	Diarrhea	D	Oral
<i>Lepidium sativum</i> L. (KA39) Herb	Shunfaa	Brassicaceae	Fl	Leprosy	D	Oral
<i>Linum usitatissimum</i> L. * (KA51) Herb	Telbaa	Linaceae	Fl	Constipation	F	Oral
				Placenta retention	D	Oral
Lycopersicon esculentum Mill.(KA50) Herb	Timatima	Solanaceae	Fl	Hypertension	F	Oral
Maesa lanceolata Forrsk.* (KA41) Shrub	Abbayyi	Myrsinaceae	W	Leech infection	F	Nasal
Mangifera indica L. (KA50) Tree	Maangoo	Anacardiaceae	Fl	Vomiting	F	Oral
<i>Myrsine africana</i> L. (KA49) Shrub	Qacamoo	Myrsinaceae	W	Endoparasite (Tape Worm)	F	Oral
Nicotiana tabacum L.*(KA48) Herb	Tambo	Solanaceae	Hg	Leech infection	D	Oral

Root and bark are crushed and mixed with honey and then consumed **Seed** is roasted, powdered and creamed on the affected part Leaf. The leaves are powdered with the leaves of *Croton macrostachyus*, and is made as solution and given one liter orally once in a day. Leaves of Justicia schimperiana and *Phytolacca dodecandra* are powdered and mixed well with coffee and white honey and drunk Leaf. The leaves are heated and tied on swelling part of livestock Seed. Seed decoction of dried seed is given with sugar and salt. Seed. The seed is crushed and soaked in water for two days, and then the filtered bitter juice is drunk **Seed.** The powdered seed is mixed with water, then the solution is given to animal **Seed.** The solution of powdered seed mixed with salt and given to animal Fruit. Heat processed tomatoes are given Leaf. Chopped leaves are mixed with water and applied through the nostril Fruit. juice is drunk Seed. Seeds are pulverized and mixed with honey and then consumed **Leaf.** Leaves of *Nicotiana* tabacum are crushed, mixed with water then given to cows to

drink

<i>Ocimum</i> sp. (KA42) Herb	Qoricha michii	Lamiaceae	W	Headache and fever	F	Oral
<i>Olea africana</i> L. (KA46) Tree	Ejersa	Oleaceae	W	Common cold	DF	Nasal
<i>Oncoba spinosa</i> Forsskal. (KA44) Tree	Akukuu	Flacourtiaceae	W	Sexual impotency	D	Oral
<i>Opuntia ficus-indica</i> (L.) <i>Mill</i> .(KA43) Shrub	Shoonka	Cactaceae	W	Jaundice	F	Oral
<i>Orobanche minor</i> Smith. * (KA45) Herb	Butte warabessa	Orobanchaceae	W	Urine retention	F	Oral
<i>Osyris quadripartite</i> Salzm. ex Decne. (KA47) Shrub	Waatoo	Santalaceae	W	Evil eye	D	Nasal
Pappea capensis Eckl. & Zeyh.(KA74) Tree	Biiqaa	Sapindaceae	W	Liver disease	F	Oral
<i>Persea americana</i> Mill. (KA56) Tree	Abukadoo	Lauraceae	Fl	Enteritis and Kidney Infection	F	Oral
<i>Phytolacca dodecandra</i> L'Hér.(KA81) Climber	Andode	Phytolacaceae	W	Itching	F	Dermal
Podocarpus falcatus (P.gracilior)(KA73) Tree	Birbirsa	Podocarpaceae	W	Fever and joint pain	F	Oral
Premna schimperi Engl. (KA57) Shrub	Urgessa	Verbenaceae	W	Gum bleeding	D/F	Dermal

Leaf. The leaves are crushed, mixed with white honey and consumed. Crushed leaves will also be sniffed Stem and leaf are put on fire and the vapor is inhaled during bedtime **Bark.** Dried stem bark powder is cooked with chicken and consumed once a day **Fruit.** The fruit is mixed with dry powdered leaf of *Phytolacca* dodecandra and Solanum marginatum and then mixed with milk and drunk. Whole plant. The whole part is pounded, mixed with Ruta *chalepensis* leaves, decocted and given to cattle to drink **Roots** are crushed and put on fire and then the smoke is sniffed **Bark.** The inner part of the bark is chopped and boiled, and after addition of milk or butter, it is drunk once a day for five days **Fruit**. The fresh fruit is mixed with egg and honey and then consumed. Leaf. The leaves of *Phytolacca* dodecandra and Ruta chalepensis are crushed together and used for washing during Itching **Leaf.** The filtrate of chopped leaf solution is drunk Root. Powdered root is mixed with water and rubbed on affected gum by using cotton dipped into the mixture.

<i>Psidium guajava</i> L. (KA67) Tree	Zeeyituna	Myrtaceae	Hg	Toothache	F	Oral
Raphanus sativus L.*(KA58) Herb	Zaroo	Brassicaceae	Fl	Bloating	D	Oral
<i>Rhamnus prinoides</i> L Hér. (KA72) Shrub	Geeshoo	Rhamnaceae	Fl	Tonsillitis	F	Oral
<i>Rhus glutinosa</i> Hochst. ex A.Rich. *(KA59) Shrub	Xaaxessaa	Anacardiaceae	W	Urine Retention	DF	Oral
<i>Rhus natalensis</i> Bernh. ex <i>Krauss</i> (KA66) Shrub	Daboobessaa	Anacardiaceae	W	Snake bite	F	Oral
<i>Ricinus communis</i> L. * (KA82) Shrub	Qobboo	Euphorbiaceae	W	Ascariasis	D	Oral
				Actinomycosis (<i>kurufsisa</i>)	F	Oral
				Ulcer	D	Oral
<i>Rosa abyssinica</i> R.Br. (KA70) Shrub	Gorsana	Rosaceae	W	Toothache	F	Dermal
Rumex abyssinicus Jacq. (KA60) Herb	Shabbe	Polygonaceae	W	Malaria	F	Oral
				Swelling	F	Dermal
Rumex nervosus Vahl. (KA69) Shrub	Dhangaggoo	Polygonaceae	W	Abdominal Pain	F	Oral
<i>Ruta chalepensis</i> L.(KA61) Herb	Sillixi (cilaaddama)	Rutaceae	Hg	Stomachache	F	Oral

Fruit. Piece of fresh fruit is mixed with salt held between teeth. Seed is powdered and , mixed with some sort of food and given to cattle to consume Root and leaves are crushed with Lepidium sativum seeds, bulbs of Allium sativum and honey, and consumed **Leaf.** Dried or fresh leaf is mixed with leaves of *Ruta chalepensis* and the decoction is given to cattle Leaf: Leaves are pounded and the extract is mixed with coffee and then drunk **Root.** The pounded root is mixed with salt and half a cup the solution is given to cattle Seed. Seeds are crushed and mixed with salt and given to cattle to consume **Seed.** The dried seeds are pounded and mixed with butter and creamed on the ulcerated skin of donkey **Root** is chewed and held on the teeth **Leaf.** The leaves of *Rumex abyssinica* are crushed with root of Hagenia abyssinica boiled with goat milk and consumed Leaf. Leaves are chewed and put on the swollen area Leaf. The leaves are chewed and swallowed directly Leaf. Fresh leaf is crushed with Allium sativum bulb then the solution is given for human and livestock.

Schinus molle L.* (KA63) Tree	Qondaberbere	Anacardiaceae	Hg	Bloating	F	Oral	Leaf. Leaves are pounded and mixed with hot water and cooled, and then salt is added and given to the animal during
<i>Schrebera alata</i> (Hochst.) Welw.(KA77) Tree	Dhama'ee	Oleaceae	W	Throat Pain	F	Oral	Bark. The inner stem bark is chewed and then its juice is swallowed
<i>Solanum incanum</i> L. (KA84) Herb	Hiddi	Solanaceae	Hg	Stomachache	F	Oral	Root The root tip is chewed and swallowed
<i>Tagetes minuta</i> L. (KA75) Herb	Ajo	Asteraceae	Fl	Ectoparasite	F	Dermal	Leaf and Stem. Both of them are cut and kept in a room to prevent arthropod infestation
<i>Teclea</i> nobilis Del. * (KA76) Tree	Hadheessaa	Rutaceae	W	Black leg (<i>Abagorba</i>)	F	Oral	Leaf. The leaves are pounded mixed with water and given to cattle to drink
<i>Trigonella foenum-graecum</i> L. (KA80) Herb	Shiqoo	Fabaceae	Fl	Stomach che	F	Oral	Seed. The powder of the seeds is mixed with water and kept overnight and then sugar is added and drunk before breakfast every morning for three days
<i>Urtica simensis</i> Hochst. (KA62) Herb	Dobbii	Urticaceae	W	Diabetes	D	Oral	Leaf. Dried leaf powder is boiled with tea and drupk
<i>Verbascum sinaiticum</i> Benth.* (KA68) Herb	Gurra harree	Scrophulariaceae	W	Coccidiosis	F	Oral	Leaf. Fresh leaf is squeezed and mixed with <i>Ruta chalepensis</i> leaf and <i>Allium sativum</i> bulb, and then given orally to chicken
<i>Vernonia amygdalina</i> Del.*(KA71) Shrub	Ebicha	Asteraceae	W	Placenta retention	F	Oral	Leaves . The leaves are crushed and mixed with remnants of local beer (<i>Tella</i>) and given orally for delayed placenta
Xanthium abyssinicum Wallr.(KA64) Herb	Qoree abdulakim	Asteraceae	Hg	Fungal disease on skin	F	Dermal	Sap. Sap from twigs will be smeared on the skin
<i>Zingiber officinale</i> Roscoe.(KA78) Herb	Zenjibila	Zingiberaceae	Hg	Abdominal pain	DF	Oral	Root. Roots are powdered and mixed with milk and consumed with bulbs of <i>Allium sativum</i>
Ziziphus spina-christi (L.) Desf. (KA65) Tree	Qurqura	Rhamnaceae	W	Involuntary urination on bed	D	Oral	Root . Dry root is pounded and mixed with yogurt and consumed

Key: Hb = Habitat (W =Wild, Hg= Home-garden, Fl=Farmland, Cp = Condition of preparation, F = Fresh, D = Dried, F/D = Fresh/Dried, *=used for livestock ailment, **=used for both, KA= is name of the collector and the number in parenthesis is collection number

Table 2. Diversity of the	e documented	medicinal plants
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Family	Number of	Percent (%)	Number of	Percent (%)
	genera		species	
Asteraceae	5	6.67	6	7.14
Fabaceae	4	5.33	5	5.95
Solanaceae	4	5.33	4	4.76
Euphorbiaceae	3	4	4	4.76
Anacardiaceae	3	4	4	4.76
Rutaceae	3	4	3	3.57
Myrsinaceae	3	4	3	3.57
Myrtaceae	2	2.67	3	3.57
Moraceae	1	1.33	3	3.57
Apocynaceae	2	2.67	2	2.38
Alliaceae	1	1.33	2	2.38
Rubiaceae	2	2.67	2	2.38
Boraginaceae	2	2.67	2	2.38
Cucurbitaceae	2	2.67	2	2.38
Poaceae	2	2.67	2	2.38
Sapindaceae	2	2.67	2	2.38
Flacourtiaceae	2	2.67	2	2.38
Verbenaceae	2	2.67	2	2.38
Oleaceae	2	2.67	2	2.38
Rhamnaceae	2	2.67	2	2.38
Polygonaceae	1	1.33	2	2.38
The remaining 25 species	1	33.33	1	29.76

Plant life-form, habitat of the medicinal plants and parts used

In terms of life-form, 30 medicinal plant species were herbs followed by shrubs (27 species), trees (24 species) and climbers (3 species). The dominance of herbs as medicinal plants could be attributed to rapid and profuse growth of herbaceous plants (Farooq *et al.* 2019). The same result was reported by similar previous works (e.g., Ahmed 2021, Gonfa *et al.* 2020, Meragiaw *et al.* 2016, Mukaila *et al.* 2021).

Most (53, 63.09%) of the medicinal plants were obtained from wild habitats including forest, around rivers, grass lands and roadsides while 31 (36.9%) of them were from farmland and/or home-garden. Those plants obtained from the latter habitats were cultivated for purposes other than medicine. For example, *Allium cepa, Allium sativum, Carica papaya, Citrus sinensis, Lepidium sativum* and *Ruta chalepensis* were cultivated as food or spices. Our result is in accord with results of earlier similar research conducted in different parts of the country (e.g., Constant & Tshisikhawe 2018, Gebre & Chinthapalli 2021, Mesfin *et al.* 2014, Tadesse *et al.* 2015). People of Goro district prepare remedies from various plant parts. As reported from indigenous people of other localities in Ethiopia (e.g., Bekele 2007, Ketema 2015, Weldearegay & Awas 2021), leaf was the predominantly cited plant part followed by root and seed for the preparation of remedies in this study (Figure 2).



Figure 2. Plant parts used for remedies

On the contrary, results of other studies showed that root is the first plant part followed by leaf (Abera 2003, Alemayehu *et al.* 2015, Regassa *et al.* 2017). Even from the same Bale Zone, but different district (Berbere district), Jima & Megersa (2018) reported root as the most cited plant part for remedy preparations. This suggests that people of different locality have different beliefs on the curative potential of plant parts that should be verified through pharmacological investigations. Unless excessively harvested, more dependence on leaves for remedy preparations may not be a threat to the mother plant. However, in this study, use of roots and seeds for remedy preparations appeared to be substantial and thus may threaten the regeneration and survival of plants (Jima & Megersa 2018).

Modes of remedy preparation, dosage and route of application

In Goro district, remedies are prepared directly when plant materials are fresh or after drying. Use of fresh materials, however, was highly (71.4%) preferred as compared to dried form, which accounted only for 20.9%. For some ailments (7.7%), respondents reported the possibility of using in either fresh or dry form. The dominant use of fresh plant material may be attributed to its therapeutic potential because of its intact ingredients (Chaachouay et al. 2022). Similar results were reported previously by different researchers (eq. Alemneh 2021, Birhanu & Ayalew 2018, Gebre & Chinthapali 2021, Yineger et al. 2008) who have undertaken research in different parts of the country. Crushing for decoction and pounding to concoct were the two main remedy preparation methods in Goro district. These approaches are reported as major methods of preparation of remedies in many studies conducted in different parts of Ethiopia regardless of ethnicity (Ahmed 2021, Alemneh 2021, Birhanu & Ayalew 2018, Yineger et al. 2008). During our interview and discussion with key-informants, we noticed that dosage to be taken is determined based on the age, sex and physical appearance of patients. For example, to treat black leg disease of cattle, two glasses (ca. 600 ml) of Teclea nobilis leaf suspension is prescribed while half of it is recommended for calves. Lack of exact measurement may result in adverse conditions such as nausea and vomiting (Dawit & Ahadu 1993). Depending on the nature of disease and body parts under illness, the local people employ various routes of remedy application. Mostly remedies are taken orally though other routes such as dermal, nasal, auricular and ocular were also reported (Figure 3). Similar approach was reported by different researchers who studied traditional medicine in different parts of the country (e.g., Agisho et al. 2014, Assegid & Tesfaye 2014, Alemayehu et al. 2015, Gebre & Chinthapalli 2021, Ketema 2015, Kewessa et al. 2015).





Informant consensus factor (ICF)

The extent of closeness of traditional knowledge among the respondents on the use of traditional medicinal plants to treat ailments was done by computing ICF values using eight disease categories. The maximum ICF value, which shows complete agreement between respondents is 1 with agreement level decreasing as values decrease from 1 to 0, which is complete disagreement (Gazzaneo *et al.* 2005). In this study, ICF values ranged from 0.47 to 0.86. Highest agreement (0.86) was on gastrointestinal related diseases followed by dermatological related diseases (0.85) and degenerative diseases (0.8). The least agreement (0.47) was for treatment of parasitic infections such as insect ecto-parasites and helminthic parasites (taeniasis and ascariasis) (Table 3). Highest agreement on the

treatment of gastrointestinal related diseases may be attributed to its commons in the study area so that people exchange information on its remedy (Heinrich *et al.* 1998). Less agreement on the treatment of parasitic infections may be due to the rare occurrence of parasitic infections in the study area (Heinrich 2000).

Table	3.	Informant	consensus	factor	on m	ajor	categories	of	ailm	ent
						_				

Disease categories	Number of species used (n _t)	Use citation (Nuc)	ICF
Gastrointestinal related diseases (Bloating, Diarrhea, Stomachache, Loss of appetite, Constipation, Vomiting)	18	115	0.86
Dermatological related diseases (Wound, Fire burn, Ringworm, Scabies, Skin infection, Dandruff, Fungal infection)	17	111	0.85
Dental problem, Tonsillitis and Throat pain	9	40	0.79
Respiratory disorders (Asthma, Common cold and Cough)	7	27	0.76
Parasite infections (Ectoparasite (Louse), Endoparasite (Taeniasis and ascariasis)	10	18	0.47
Poison (Snake bite and Spider poison)	6	25	0.79
Febrile illness	9	36	0.77
Degenerative diseases (Diabetes, kidney and hepatic illnesses)	13	61	0.80

Note: nur=number of use citations for each disease category; nt=number of species

Fidelity level

Fidelity level (FL) index points out the most important medicinal plant that people use to effectively treat a given illness. If many people cite a given plant to treat the same ailment rather than citing it for many different ailments, the FL value will be the highest (Friedman *et al.* 1986). In this survey, we calculated the FL index for medicinal plants that were cited most to treat the frequently reported human ailments. Results of the FL index ranged from 64 to 100% (Table 4). *Aloe ruspoliana* (FL=100%) and *Nicotiana tabacum* (FL=100%) were reported independently by many respondents to treat wound and Leech repulsion, respectively. The highest FL index of these medicinal plants suggests their therapeutic efficiency against the respective diseases. Earlier report from Ethiopia (Belayneh *et al.* 2020) showed the use of *A. ruspoliana* for skin disease of cattle. The traditional use of *N. tabacum* for the treatment of leech repulsion has also been well vindicated (Amenu 2007). Hence, further investigations on pharmacology and phytochemical analysis of these two plant species should be given priority to effectively use them against the mentioned health problems. The least FL index (FL=64%) was reported on *Opuntia ficus-indica* for the treatment of Jaundice (Table 4). Plants with lower FL value shall also be given due attention regardless of their perceived low efficacy not to lose knowledge related to them in the future (Chaachouay *et al.* 2019).

Table 4. Fidelity level index of the most frequently reported medicinal plants

Botanical Names	Ailment treated	Np	Ν	FL	FL (%)
Aloe ruspoliana	Wound	42	42	1	100
Nicotiana tabaccum	Leech	13	13	1	100
Calpurnia aurea	Ectoparasite	34	37	0.92	92
Coffee arabica	Fire burn	44	48	0.92	92
Datura stramonium	Scabies and ear lesion	30	34	0.88	88
Eucalyptus globulus	Common cold	21	26	0.81	81
Croton macrostachyus	Malaria	12	17	0.71	71
Opuntia ficus-indica	Jaundice	9	14	0.64	64

Note: NP=No. of informants who independently indicate the use of species; N=Total No. of informants that used the plant to treat major aliments.

Preference ranking (PR)

Preference ranking made by ten key informants on six medicinal plants reported as remedy for stomachache showed that *Achyranthes aspera* was the most preferred plant followed by *Solanum incanum* (Table 5). Previously these plants have been cited as remedy for stomachache by other authors (e.g., Assefa *et al.* 2021, Bussmann *et al.* 2011, Moravec *et al.* 2014). Moreover, *Achyranthes aspera* was previously evaluated for antimicrobial activity (Gupta *et al.* 2010) and analgesic activity (Sutar *et al.* 2008). Anti-ulcerogenic activity of *Solanum incanum* was also reported by Belayneh *et al.* (2021). This preference may be related to their efficacy to treat stomach trouble so that further

pharmacological investigation is essential to authenticate the traditional medicinal claim by the people of the study area.

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Plant species	Respondents' (R ₁ .R ₁₀) Scores					Total	Rank					
-	R1	R ₂	R3	R4	R5	R ₆	R 7	R ₈	R9	R10	_	
Achyranthes aspera	5	4	5	3	4	5	4	3	3	4	40	1 st
Solanum incanum	5	4	3	5	3	3	4	5	3	2	37	2 nd
Ruta chalepensis	2	5	3	4	5	2	3	4	4	3	35	3 rd
Trigonella foenum- graecum	4	2	1	3	5	4	4	5	1	1	30	4 th
Eucalyptus camaldulensis	2	4	3	5	4	3	1	3	3	1	29	5 th
Cucurbita pepo	3	4	2	1	1	2	4	5	3	1	26	6 th

Note: Scores given by the respondents (R_1 - R_{10}) are based on the effect of the plants to cure cough i.e. number 6 denotes highest efficacy and 1 denotes lowest efficacy.

Direct Matrix Ranking

Some medicinal plants were screened for their multipurpose use from the study area. In this study, direct matrix ranking was conducted using six use categories, and result revealed that *Cordia africana* was the most utilized plant by local people for various purposes (Table 6). The fact that *C. africana* is being highly exploited may endanger this species to local extinction in the future. Therefore, it deserves great attention not to lose it. Moreover, ecological investigation on its regeneration status in the study area should be investigated so as to understand its conservation status.

Table 6. Direct matrix ranking for six multipurpose plant species

Use Categories	Plant species							
	Calpurnia aurea	Cordia africana	Croton macrostachyus	Eucalyptus globulus	<i>Olea europeae</i>	Dodonaea angustifolia		
Firewood	5	4	2	4	5	4		
Medicinal	4	5	5	5	4	3		
Construction	3	4	3	5	4	2		
Fodder	2	5	2	3	3	4		
Charcoal	0	2	3	2	2	3		
Timber	0	5	4	5	2	2		
Grand Total	14	25	19	24	20	18		
Rank	6 th	1 st	5 th	2 nd	3 rd	4 th		

The impact of socio-demographic factors on traditional medicinal knowledge

Results of this study showed that male respondents cited significantly higher number of medicinal plants than females (p=0.007) (Table 7). Reporting of higher number of medicinal plants by men than women show the relatively better knowledge of men in traditional medicine. Teklehaymanot & Giday (2007) earlier reported that knowledge on traditional medicine is traditionally transferred to sons than daughters in many parts of Ethiopia through verbal communication. Thus, such biasness might have contributed to the observed difference. There was a significant difference (one-way ANOVA, p< 0.001) between age categories in reporting medicinal plants. Informants with >60 years of age reported higher number of medicinal plants than those of age \leq 60 (Table 7). High level medicinal knowledge of older people could be due to the accumulated knowledge of elderly people obtained through their long years of interaction with their environments (Brandt et al. 2013, Giday 2001). Previous studies (Abebe & Teferi 2021, Giday et al. 2009, Girmay et al. 2021, Kassa et al. 2020, Tefera & Kim 2019) support our results. The relatively lower medicinal knowledge of younger respondents suggests the possible dwindling of information flow that can be seen as one of the perils to indigenous knowledge. Thus, older generation should transfer their knowledge to the youngsters as early as possible. Traditional medicinal knowledge was also significantly varied between educational level of the respondents (p=0.002). The number of cited medicinal plants appeared to decrease with increasing level of education as it was reported previously from different parts of the country by different authors (e.g., Abebe & Teferi 2021, Gebre & Chinthapalli 2021, Giday et al. 2009, Girmay et al. 2021, Kassa et al. 2020). In this study, we surveyed three kebeles. Comparison of the medicinal knowledge of the people between kebeles showed no significant difference between them. Of course, the three kebeles have more or less similar agro-ecologies (for example, they are from mid-lands) that affects occurrence of similar vegetation. It is also possible that people of the three kebeles face the same illness types that they exchange information on the treatment of ailments. Results of multiple linear regression analysis showed that age (unstandardized

coefficient, β =2.218, p<0.001) and educational status (unstandardized coefficient, β =1.124, p=0.029) of respondents predicted traditional medicinal knowledge. This finding was supported by results of Yineger *et al.* (2008), Kidane *et al.* (2018) and Weldearegay and Awas (2021).

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Socio-demographic features	No. of informants	Percentage (%)	Mean value of number of plants known	
Gender				<i>P-</i> value of t-test
Male	265	69	4.75	0.007
Female	119	30.9	3.19	
Age				P-value of ANOVA
25-40	73	19	2.95	0.000
41-60	219	57	4.07	
≥60	92	23.9	5.75	
Educational level				<i>P-</i> value of ANOVA
No formal education	203	52.8	5.00	0.002
Elementary (grade 1-8)	92	23.9	4.04	
Grade 9-12	58	15	3.00	
Higher level education (>Grade 12)	31	8.07	2.50	

Table 7. The impact of Socio-demographic status on traditional medicinal knowledge

Conclusions

The findings of large number of medicinal plants infers the presence of rich traditional medicinal knowledge and people's dependence on traditional medicine apart from allopathic medication. Socio-demographic status such as age, gender and educational level were found to affect the knowledge of the indigenous people on traditional medicine. Since traditional knowledge is diminishing among the younger generations, knowledge transfer from elderly people should be encouraged. These medicinal plants, especially those with high preference ranking, ICF and FL should be subjected to pharmacological investigations to validate their efficacy and safety for extensive usage.

Declarations

List of abbreviations: Not applicable

Ethical considerations: No ethical committee letter was obtained as human intervention study was not our aim. In view of ethical consideration, approaching of the informants was systematic. Respondents were informed that the objective of the research was for education purpose, but not for commercial purpose and provided their oral prior informed consent.

Consent for publication: Oral permission was obtained from all authors

Availability of data and materials: The data generated for the present study is available upon request *Competing interests:* The authors have no conflict of interest.

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