



Ethno-veterinary practice for the treatment of cattle diseases in the Eastern highlands of Nigeria

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Research

Abstract

Background: Cattle rearing is the main means of livelihood for the Fulani people in the highlands of Gashaka Gumti National Park in Nigeria, however the remote location and inaccessible terrain prevent access to modern veterinary care. This puts both livestock and their keepers at risk. To survive, the inhabitants of this area rely on traditional methods to heal their animals. Regrettably, the Ethno-veterinary Medicine (EVM) knowledge in this region is jeopardized by the locals changing their preferences due to rapid socio-economic, environmental and technological changes taking place all over the world. Therefore, documenting the therapeutic knowledge of the medicinal plant is imperative to prevent it from being lost.

Materials and Methods: We conducted repeated field surveys and data were collected from sixty community members using semi-structured questionnaires through participatory rural appraisal (PRA) and rapid rural appraisal (RRA) approach.

Results: A total of eighty-eight (88) plant species belonging to 73 genera and 37 families, were recorded for the treatment of 24 cattle diseases. The most represented families were Fabaceae (17 species), and Asteraceae (7 species). Trees were the dominant plants recorded (49 species). *Pterocarpus erinaceous* was the most widely used therapeutic plant species. Leaves (27%) were the most widely used plant parts, followed by the whole plant (22%), stem bark (14%), and others. The most frequent route of medicinal administration was oral, followed by topical application. Out of the 24 ailments recorded, Bovine tuberculosis was the most reported ailments followed by Pneumonia.

Conclusion: Together, these data show that the Fulani people in the study area have a vast knowledge of medicinal plants useful for effective treatment of cattle illness where traditional veterinary care is unavailable. It is pertinent to say that our study has made an important contribution towards the preservation of EVM knowledge of the study area. Therefore, subjecting the most utilized species to a phytochemical and pharmacological investigation is imperative for possible novel discovery and the production of cheap drugs.

Keywords: Gashaka Gumti National Park, Chabbal Hendu, Afromontane, Fulani, Tuberculosis

Background

Montane regions are eco-geographic zones in mountain systems that are largely determined by bioclimatic criteria and altitude up to 1650 m (Sommer and Ross 2011; Grab and Knight 2018). Vegetation found in these regions is highly unique and widespread across the African highland (Abiem *et al.* 2020). In Nigeria, true montane vegetation is located at the Gotel peak of the mountainous Northeastern corner in Gashaka Gumti National Park (GGNP) (Akinsoji 2003 and 1996; Chapman and Chapman 2001; Chapman *et al.* 2014; Sommer and Gumnior 2011). The montane ecoregion is important because it contains high proportions of Afromontane endemic biodiversity and many threatened types of fauna and flora (Chapman and Chapman 2001; Chapman *et al.* 2004; Le'zine *et al.* 2013). The terrain is rocky and accessible mainly through footpath, although motorbike access has recently been introduced in some parts. Most of the area was covered by dense montane forest until the mid-1980s, when it was cleared for subsistence farming and grazing (Chapman *et al.* 2004). The remaining vegetation is characterized by an elevated montane grassland and a typical montane forest along the valleys. Most streams in the montane forest maintain a constant supply of water throughout the year, and the area is free of tsetse flies, similar to other African highlands reported in Cecchi *et al.* 2008; Grady *et al.* 2011; and de Gier *et al.* 2020. This makes it attractive to pastoralists for grazing.

There are very limited livelihood opportunities available for the people of this highland, with cattle rearing and subsistence farming as the primary occupation of most inhabitants. However, the remoteness of the area coupled with the inaccessible terrain severely limits access to modern veterinary information and healthcare services. Therefore, people rely on ancient traditional methods to heal their animals (Wazala *et al.* 2005). This inherent, centuries'-old knowledge has withstood the test of time in all aspects of human evolutionary life (McCorkle and Mathias-Mundy 1992) and is now referred to as ethnoveterinary medicine (EVM). The precise period for the practice of EVM is unknown, but it is believed to have started during the Neolithic periods when animals were first domesticated (Neils *et al.* 2008). Knowledge of EVM is usually maintained between lineages by verbal transfer from generation to generation with great secrecy (Khuroo *et al.* 2007; Tamiru *et al.* 2013; Eshetu *et al.* 2015). The knowledge of EVM in this region is now fast disappearing because inhabitants are changing their practices due to rapid socio-economic, environmental and technological changes (Tabuti *et al.* 2003) combined with lack of interest by younger generations, religious practices and lack of documentation (Nodza *et al.* 2020).

Specifically in Nigeria, there remains a dearth of information on EVM studies from the highlands of GGNP. Although there have been attempts at documentation of medicinal flora of this highland (Akinsoji 1996; Sommer and Ross 2011). These previous studies did not focus on the cattle of the study area (Chapman *et al.* 2004). Today this highland region is threatened by an influx of pastoralists due to civil unrest in most parts of Nigeria and the neighboring Cameroon Republic (Goyei 2018). With this influx, more anthropogenic activities are expected and could subsequently lead to further habitat fragmentation and loss of biodiversity. Therefore, documenting the knowledge of EVM is imperative to prevent it from being lost.

Materials and Methods

Study area

The study was conducted in the highland enclaves of the southern sector of Gashaka Gumti National Park namely Nyumti, Tale, Shirgu, Hendu and Delam (1220 - 2000 m asl.) as well as sub-montane enclaves of Sabere and Filinga (900 - 1200 m asl.) in Northeastern Nigeria. This area lies between latitude 06° 55' N and longitude 11° 13' E (Fig. 1). The humidity level is high, and the area sees high rainfall up to 2500 mm (Dunn 1993). Average temperature ranges between 20.9 °C and 32.2 °C with the coolest day being 12 °C and the hottest day 42 °C throughout the year (Dunn, 1993, Sommer and Ross 2012).

The vegetation is characterized by elevated montane grassland and a typical montane forest along the valleys and escarpment. The trees here are usually shorter than those of the forest at lower altitudes and rarely form a canopy; this allows sufficient light to reach the ground level to support lush low vegetation rich in herbs and shrubs. They are generally covered by many climbers and epiphytes. Grasses in this area are characterized by many herbaceous species which rarely grow tall. Most streams in the area maintain water throughout the year. Grasses here are burnt during the dry season and sprout new greens to be grazed by cattle thereafter. Cattle grazing occurs across Chabbal Hendu and results in most of the vegetation being trampled thus reducing the rate of regeneration (Chapman and Chapman 2001).

The major ethnic group on the highlands are the Fulanis, a few Hausa-speaking traders, followed by Gbaya, Mambilla, Chamba (living at Chabbal Nyumti), Kaka, and Ndola who are predominantly farmers. There is no social

amenities in this area; of all the villages or settlements visited, only Selbe has a non-functional community primary school and a dilapidated health post. There are few petty trading stores at Selbe and Filinga, which are mostly serviceable only on a market day (Friday). The average household size is twenty. Fulfulde is the predominant language in the study area, and a few individuals speak pidgin French due to their interactions with northern Cameroon. Approximately 90% of residents are illiterate.

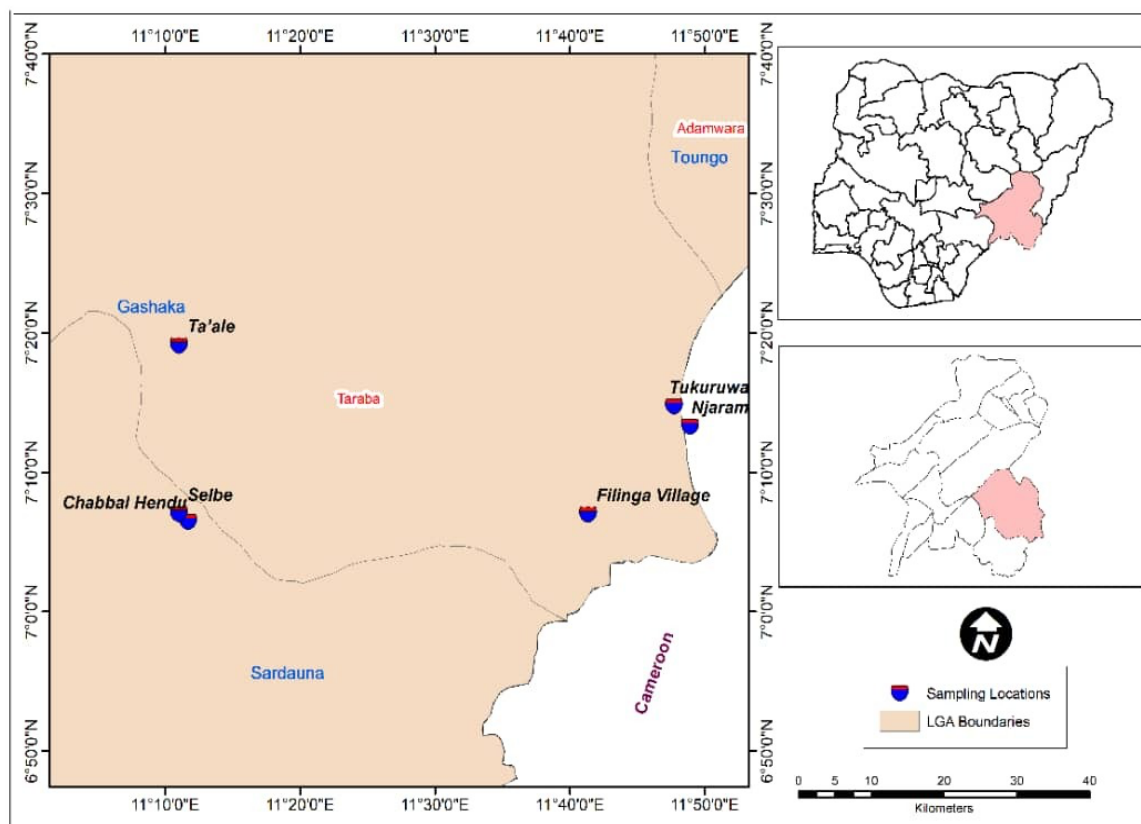


Figure 1. Location map of the study area

Data collection

This study is based on an extensive field survey and published literature on medicinal plants of Gashaka Gumti National Park (Akinsoji 1996; Sommer and Ross, 2012). Remote villages of GGNP enclaves were surveyed in 2019 in different seasons. The population of this highland is approximate 27090 (NPC 2007) scattered around the surrounding hills.

Participatory rural appraisal (PRA) approaches were adopted during fieldwork and prior informed consent was obtained before conducting interviews. We interviewed 60 persons, and information regarding ethnoveterinary practices was collected through semi-structured interviews and guided field trips with the help of traditional healers and experienced pastoralists. The interviews were conducted at various places and in the local language called "*Fulfulde and Hausa*". We focused on the highland enclaves of GGNP and most ethnoveterinary information came from the huge Fulani community, the predominant settlement of the study area.

We had challenges with interviewing women because their husband did not grant permission for their wives to be interviewed probably due to religion or cultural beliefs.

Plant Identification and authentication

Plant samples collected were identified using keys from Flora of Nigeria and other regional flora reports such as Hutchinson and Dalziel (1954); Keay (1989); Chapman and Chapman (2001). The vernacular names of the plants were verified using Akinsoji (1996 and 2015) and the authentication of samples was carried out by comparison with appropriate voucher specimens at the herbaria in the Department of Botany, University of Lagos (Lagos University Herbarium, LUH). Correct names of the identified species follow the plant list (<http://www.theplantlist.org>).

Data Analysis

Data obtained were analyzed using Microsoft Excel package 2010 and presented as frequency tables, charts, graphs, and percentage composition of data.

Results and Discussion

Socio-demographic information

The study gathered information from both sexes: 45 (75%) male and 15 (25%) female, primarily from the livestock owners and farmers who are predominantly Fulani in age from 19 to 80 years. All informants belonged to the Fulani ethnic group who are the cattle owners in the study area. A detailed demographic profile is shown in Table 1. The respondents were mostly illiterate in formal education but had acquired verbal fluency in Islamic or Arabic. Information regarding the vernacular plant names, part(s) used, methods of preparation, mode/route of application and diseases treated was documented during each interview. It is likely that native people, although illiterate, have superior knowledge on the usage of medicinal plants because they use the plants daily and have a vested interest in their applications (Farooq *et al.* 2019). It was noted that the younger generation had relatively little knowledge of medicinal plants compared to older generations. This may be attributed to the prolonged or accumulated knowledge of plant use throughout their lives and/or to the oral transfer of medicinal plant knowledge to the selected senior family member from ancestors. Such information is typically passed from generation to generation with great secrecy (Nodza *et al.* 2020).

Table 1: Respondents profile

	Category	No of respondents	Percent (%)
Gender	Male	45	75
	Female	15	25
Age	Young	10	17
	Elder	50	83

The respondent profile indicates that men have more knowledge on livestock treatment than do women, as do older informants compared to younger. The former could be due to more involvement of men in mobile pastoralism, whereas the latter could be a result of accumulated experience practicing traditional treatments. This trend has been documented by other studies around the world such as Aziz *et al.* 2018; Sinmez *et al.* 2018; Tadesse *et al.* 2018 and Tefera and Kim 2019. Additional reasons could be the tradition of transfer of medicinal plant knowledge from fathers to their first son or the eldest male child that could keep the secret within the family (Yigezu *et al.* 2014).

Medicinal plants used to treat livestock ailments in the montane region

A total of 88 EVM plant species representing 73 genera and 37 families were recorded as being used to treat livestock diseases in this study (Fig. 2). The highest numbers of species were recorded for the family Fabaceae (17 species), followed by Asteraceae and Rubiaceae (7 species) and Euphorbiaceae (6 species). Three families (Guttiferae, Melastomataceae, and Moraceae) had four species each, seven families had two species each, while the remaining 21 families had a single species represented. The details of the species encountered are presented in Table 2. The predominance of Fabaceae agrees with several other global studies (Rahmatullah *et al.* 2010; Verma 2014; Eshetu *et al.* 2015; Adeniran *et al.* 2020) and a study from the Plateau state (Offiah *et al.* 2011), which is regarded as one of the submontane regions of Nigeria (Sanford 1969).

The prevalence of Fabaceae and Asteraceae could result from their abundance as the second and third largest plants families (Govaerts *et al.* 2021). This may also be explained by high bioactivity in the Asteraceae (Tariq *et al.* 2014). This observation is consistent with Monteiro *et al.* 2011 and Yigezu *et al.* 2014. Some of the picture for the species recorded are presented in plate 1.

Table 2. Information of medicinal plants recorded from the study

Scientific Name	Family	Local Name	Habit	Diseases	Parts	Routes	Voucher No.
<i>Abrus precatorius</i> L.	Fabaceae	cicibodel	C	Ephemeral fever	Lf, Sd	Oral	LUH6850
<i>Azelia africana</i> Sm	Fabaceae	ngaayoohi(F)	T	Pneumonia, Fever, bovine, pasteurellosis, Colic, diarrhea	St- Bk	Oral	LUH5600
<i>Albizia gummifera</i> (J.F.Gmel.) C.A.Sm.	Fabaceae	doruwa leinde(F)	T	Eye inflammation	St-Bk	Topical	LUH7380
<i>Allophylus africanus</i> P.	Sapindaceae	Itààcén baka(H)	H	Joint dislocation	Lf	Topical	LUH5443
<i>Aneilema beninense</i> (P.Beauv.) Kunth	Commelinaceae	Ha'ako(H)	H	Liver disease	Wp	Oral	LUH7308
<i>Anthonotha macrophylla</i> P.	Fabaceae	Furmu(F)	T	Pneumonia	St- Bk	Oral	LUH6559
<i>Anthonotha noldeae</i> (Rossberg) Exell & Hillc.	Fabaceae	Furmu(F)	T	Pneumonia	St-bk	Oral	LUH5318
<i>Aspilia africana</i> (Pers.) C. D. Adams.	Asteraceae	nyarki(F)	H	Pneumonia	Wp	Oral	LUH2030
<i>Aubrevillea kerstingii</i> (Harms) Pellegr.	Fabaceae	kongoli(F)	T	Eye inflammation	St	Steaming	LUH3213
<i>Beilschmedia mannii</i> (Meisn.) Benth. & Hook. f.	Lauraceae	konkoli(H)	T	sickness Gall	St-bk, Lf	Oral	LUH1691
<i>Borreria verticellata</i> L.	Rubiaceae	Googamasu(H)	H	Wound	Wp	Topical	LUH161
<i>Bridelia montana</i> (Roxb.) Willd.	Euphorbiaceae	Mburburumhi(F)	S	Pneumonia	Lf	Oral	LUH7330
<i>Bridelia speciosa</i> Müll.Arg.	Euphorbiaceae	Mburburumhi(F)	T	Internal parasites	St-bk	Oral	LUH6681
<i>Bridelia micrantha</i> (Hochst.) Baill.	Euphorbiaceae	Burumburum(F)	S	dysentery/diarrhea	St	Oral	LUH7445
<i>Brillantaisia nitens</i> Lindau.	Acanthaceae	Ha'ako(F)	H	Diarrhea	Wp	Oral	LUH7069
<i>Calopogonium mucunoides</i> Desv.	Fabaceae	Nyanyare(F)	H	Vomiting	Lf	Oral	LUH2012
<i>Carapa procera</i> DC.	Meliaceae	Carapaje(F)	T	Eye inflammation	St-bk, Lf	Steaming	LUH7069
<i>Cephaelis peduncularis</i> Salisb.	Rubiaceae	Ciwo ladde(F)	S	Wound	Lf	Topical	LUH1956
<i>Citrullus colocynthis</i> L. Schrader	Cucurbitaceae	kwartowa(H)	T	Enteritis	Fr	Oral	LUH1642
<i>Clerodendrum capitatum</i> (Willd.) Schumach. & Thonn.	Verbenaceae	Korlejigaahi(F)	H	Pneumonia	Wp	Oral	LUH1387
<i>Clausena anisata</i> (Willd.) Hook. f. ex Benth.	Rutaceae	Ledde daneji(F)	S	Wound	Lf	Topical	LUH212
<i>Clematis hirsuta</i> Guill. & Perr.	Ranunculaceae	Yamanza(F)	S	Constipation	Lf	Oral	LUH5334
<i>Cochlospermum planchonii</i> Hook. f.	Cochlospermaceae	Ambulooloji gaaduru(F)	S	Liver disease	Lf	Oral	LUH7152
<i>Cola gigantea</i> A Chev.	Sterculiaceae	Goro leinde(F)	T	Rabies	St-bk	Oral	LUH5075
<i>Cordia millenii</i> Baker	Boraginaceae	Bokoko(H)	T	Rabies	Lf	Topical	LUH4678
<i>Coreopsis barberi</i> Oliv. & Hiern.	Asteraceae	Ha'ako(F)	H	Pneumonia	Wp	Oral	LUH4223
<i>Croton macrostachyus</i> Hochst.	Euphorbiaceae	Ledde daneji(F)	T	Ring worm, wound Rabies, Internal parasites	Lf	Oral, topical	LUH5362
<i>Cussonia barberi</i> Seem.	Aracaceae	Bummalee-hi(F)	T	Pneumonia	Bk, St-bk	Oral	LUH7680
<i>Cuviera nigrescens</i> (Elliott ex Oliv.) Wernham	Rubiaceae	Ha'ako(F)	S	Wound	St	Topical	LUH3988
<i>Cyperus denudatus</i> L.f.	Cyperaceae	Ka'aye(F)	G	Constipation	Wp	Oral	LUH2099

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Scientific Name	Family	Local Name	Habit	Diseases	Parts	Routes	Voucher No.
<i>Datura metel</i> L.	Solanaceae	Zakamihí(F)	H	Cold	Sd	Oral	LUH7521
<i>Desmodium gangeticum</i> (L.) DC.	Fabaceae	Takamahí(F)	H	Vomiting	St-bk, Lf	Oral	LUH4467
<i>Desmodium repandum</i> (Vahl) Poir	Fabaceae	Takamahí(F)	H	Vomiting	Lf	Steaming	LUH1237
<i>Dissotis bamenda</i> Brenan & Keay.	Melastomataceae	Kil'lare(F)	H	Dysentery/diarrhea	Lf	Oral	LUH5332
<i>Dissotis decumbens</i> (P. Beauv.) Triana	Melastomataceae	Gba chí(F)	H	Wound	Wp	Topical	LUH1921
<i>Dissotis rotundifolia</i> (Sm.) Triana.	Melastomataceae	Kil'lare(F)	H	Wound	Wp	Topical	LUH4933
<i>Dissotis theifolia</i> (G. Don) Hook. f.	Melastomataceae	Kil'lare(F)	H	Eye inflammation	Wp	Topical	LUH5607
<i>Echinops giganteus</i> A. Rich.	Asteraceae	Ha'ako(F)	H	Pneumonia	Wp	Oral	LUH338
<i>Emilia coccinea</i> (Sims) G.Don.	Asteraceae	Ha'ako mayo(F)	H	Pneumonia	Wp	Oral	LUH5373
<i>Euphorbia abyssinica</i> J.F.Gmel.	Euphorbiaceae	Ha'ako(F)	H	Swelling	St-bk	Topical	LUH4710
<i>Faurea speciosa</i> Welw.	Proteaceae	Wútsíyǎ́ bírí(H)	T	Constipation	St-bk	Oral	LUH3720
<i>Ficus polita</i> Vahl	Moraceae	Durumi(H)	T	Horn fracture	St-bk	Topical	LUH1040
<i>Ficus sur</i> Forssk.	Moraceae	Rima bechehi(F)	T	Horn fracture	St-bk	Topical	LUH5077
<i>Ficus vallis-choudae</i> Delile	Moraceae	Kâmasagi(F)	T	Horn fracture	St-bk, Lf	Steaming	LUH6290
<i>Ficus vogelii</i> (Miq.) Miq.	Moraceae	Nòònòn gwánkíí(F)	T	Horn fracture	Lf	Oral	LUH5077
<i>Garcinia acuminata</i> Planch. & Triana	Guttiferae	Goro leinde(F)	T	Swelling	St-bk	Topical	LUH6791
<i>Garcinia smeathmannii</i> (Planch. & Triana) Oliv.	Guttiferae	Bura lainde(F)	T	Cold/Coughing/Cold	St-bk, Lf	Nasal	LUH7251
<i>Harungana madagascariensis</i> Lam.	Guttiferae	Alíllibár rààfíí(H)	S	Cold/Coughing	Lf	Oral	LUH6112
<i>Hibiscus suratensis</i> Linn.	Malvaceae	Baskoji ladde(F)	H	Tongue disease	Lf	Oral	LUH3097
<i>Indigofera pulchra</i> Willd.	Fabaceae	Bákín búúnúú(H)	H	Vomiting	Wp	Oral	LUH6644
<i>Kigelia africana</i> (Lam.) Benth.	Bignoniaceae	Killaare(F)	T	Poisonous bite	St-bk	Topical, Oral	LUH4143
<i>Lecaniodiscus cupanioides</i> Planch.	Sapindaceae	Kaa-fi-naamaa- zaakíí(H)	T	Joint dislocation	St-bk	Topical	LUH4314
<i>Mimosa pudica</i> L.	Fabaceae	Ge'nee(F)	H	Wound	Lf, Fl	Oral	LUH5834
<i>Mimusops kummel</i> Bruce ex A. DC.Bruce.	Sapotaceae	Ha'ako na'i(F)	T	Joint dislocation	St-bk	Topical	LUH4990
<i>Monodora myristica</i> (Gaertn.) Dunal.	Annonaceae	Gújíyǎ́ dan miya(H)	T	Pneumonia	Sd, Rt	Oral	LUH4751
<i>Mucuna pruriens</i> (L.) DC	Fabaceae	Nyanyare kaduuru(F)	C	Wounds	Sd	Oral	LUH6660
<i>Musa paradisiaca</i> L	Musaceae	kondongjí(H)	T	Food and mouth disease, Constipation	Fr	Oral	LUH7362
<i>Newtonia aubrevillei</i> (Pellegr.)Keay.	Fabaceae	Ledde manga(F)	T	Eye inflammation	Lp	Steaming	LUH7359
<i>Nuxia congesta</i> R.Br. ex Fresen.	Rubiaceae	Kongal ladde(F)	T	Pneumonia	St-bk	Oral	LUH5408
<i>Olax subscorpioidea</i> Oliv	Olacaceae	Gwààónòn rààfíí(H)	T	Vomiting/Constipation	St-bk, Lf	Oral	LUH4750
<i>Panicum maximum</i> Jacq.	Poaceae	Buurdí(F)	G	Constipation	Wp	Oral	LUH2658
<i>Pennisetum purpureum</i> Schum.	Poaceae	Tolore(F)	G	Constipation	Lf	Oral	LUH2124
<i>Ptilostigma thonningii</i> (Schum.) Milne-Redh.	Fabaceae	Barkeeje(F)	S	Conjunctivitis	Lf	Steaming	LUH7548
<i>Polyscias fulva</i> (Hiern) Harms	Rubiaceae	Cíwo(F)	T	Bleeding, Pneumonia	Bk, Lf	Oral, topical	LUH7505
<i>Prunus africana</i> Hook.f.	Rosaceae	Dan kamaru(H)	T	Pneumonia	Lf	Topical	LUH3718

Scientific Name	Family	Local Name	Habit	Diseases	Parts	Routes	Voucher No.
<i>Pseudarthria hookeri</i> Wight & Arn.	Fabaceae	Wada wurohi(H)	S	Constipation	Lf	Oral	LUH2045
<i>Psorospermum febrifugum</i> Spach.	Guttiferae	Sawalki(F)	T	gall sickness	St,bk	Oral	LUH4502
<i>Pterocarpus erinaceus</i> Poir	Fabaceae	Madobiiya	T	FMD, Gastrointestinal, pasteurellosis ,Wound, Trypanosomiasis, dysentery	Bk, lf	Oral/Topical	LUH1548
<i>Rauvolfia vomitoria</i> Afzel.	Apocynaceae	Nyakamji(F)	H	food and mouth disease	Lf, Fr	Topical	LUH4040
<i>Ricinus communis</i> L.	Euphorbiaceae	Zurmaje(F)	S	Retained Placenta, Hematuria	Rt	Oral	LUH5896
<i>Rothmannia urcelliformis</i> (Hiern) Bullock	Rubiaceae	Ledde burkalihi(F)	T	Pneumonia	St, bk	Oral	LUH1551
<i>Solanum giganteum</i> Jacq.	Solanaceae	Ngite na'i(F)	H	Rabies	Lf, Fr	Oral	LUH7271
<i>Solanum incanum</i> L.	Solanaceae	Huytaare fowru(F)	H	Pasteurellosis	Lf, Fr	Oral	LUH1547
<i>Sterculia tragacantha</i> L.	Sterculiaceae	Kùkkúúkìn rààfií(F)	T	Pneumonia	St-bk	Body bath	LUH7390
<i>Stereospermum kunthianum</i> Cham	Bignoniaceae	Golombi(F)	T	Pneumonia	Lf	Topical	LUH6623
<i>Symphonia globulifera</i>	Clusiaceae	Chabbole lainderi(F)	T	Vomiting	St-bk	Oral	LUH6110
<i>Syzygium guineense</i> Wall.	Myrtaceae	Sumsum(F)	T	Vomiting	St-bk	Oral	LUH2000
<i>Tabernaemontana pachysiphon</i> Stapf.	Apocynaceae	Asurahi(F)	T	FMD	Rt	Topical	LUH2076
<i>Tagetes erecta</i> L.	Asteraceae	Aduuwa(H)	H	Pneumonia	Wp	Body bath	LUH7147
<i>Tephrosia purpurea</i> L.	Fabaceae	Báábáá móórèè(F)	H	Pneumonia	Lf, Sd	Oral	LUH2538
<i>Tephrosia vogelii</i> Hook.f.	Fabaceae	Tokke lidfi(F)	T	Constipation	Lf	Oral	LUH2542
<i>Terminalia glaucescens</i> Planch.	Combretaceae	Kuulahi(F)	T	Liver disease	St-bk	Oral	LUH3507
<i>Terminalia laxiflora</i> Engl.	Combretaceae	Fárin báushèè(F)	T	Liver disease	St-bk	Oral	LUH5602
<i>Trema orientalis</i> L.	Ulmaceae	Ajenana(F)	T	Pneumonia	Bk	Oral	LUH7301
<i>Tridax procumbens</i> L	Asteraceae	Ciiyawa zomo(F)	H	Wound	Wp	Topical	LUH1817
<i>Vernonia guineensis</i> Benth.	Asteraceae	Gene naira(F)	H	Pneumonia	Lf	Body bath	LUH4649
<i>Vitex doniana</i> Sweet.	Verbenaceae	Ngalbije (F)	T	Retained Placenta, Hematuria	Bk	Oral	LUH3295
<i>Woodfordia fruticosa</i> (L.) Kurz.	Lythraceae	kafaffi(F)	T	Fractures	St-bk	Topical	LUH7369

Key: F= Fulani, H=Hausa, T=tree, C=climber, G=grass, H=herb, S=shrub, T=tree, F=fruit, Lf=leaf, St-bk, stem-bark, Sd=seed, Wp= whole plant

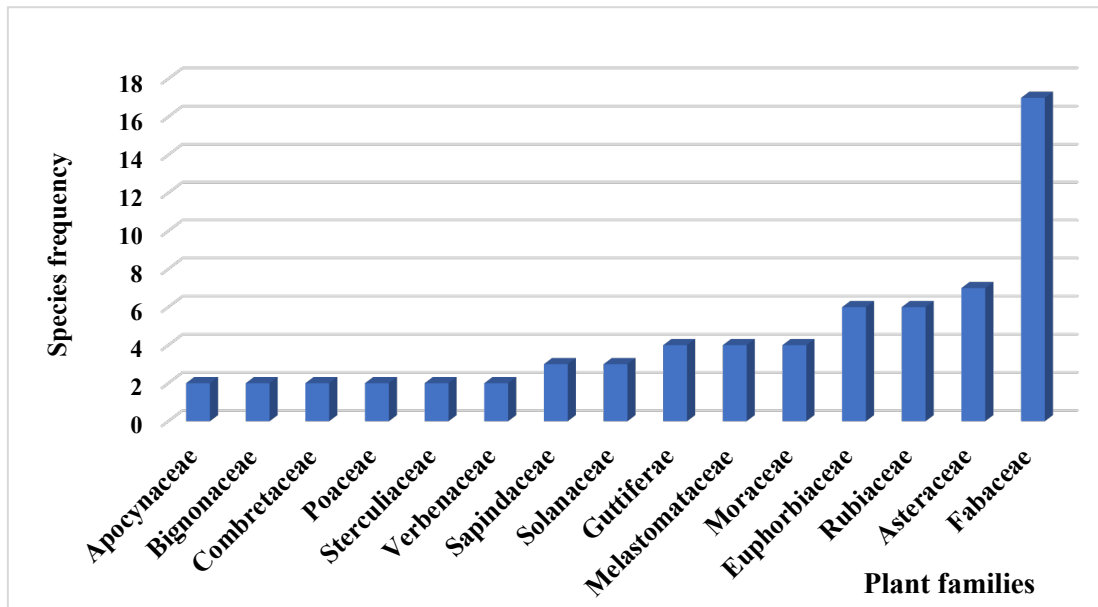


Figure 2. Plant families with more than one species recorded in the study

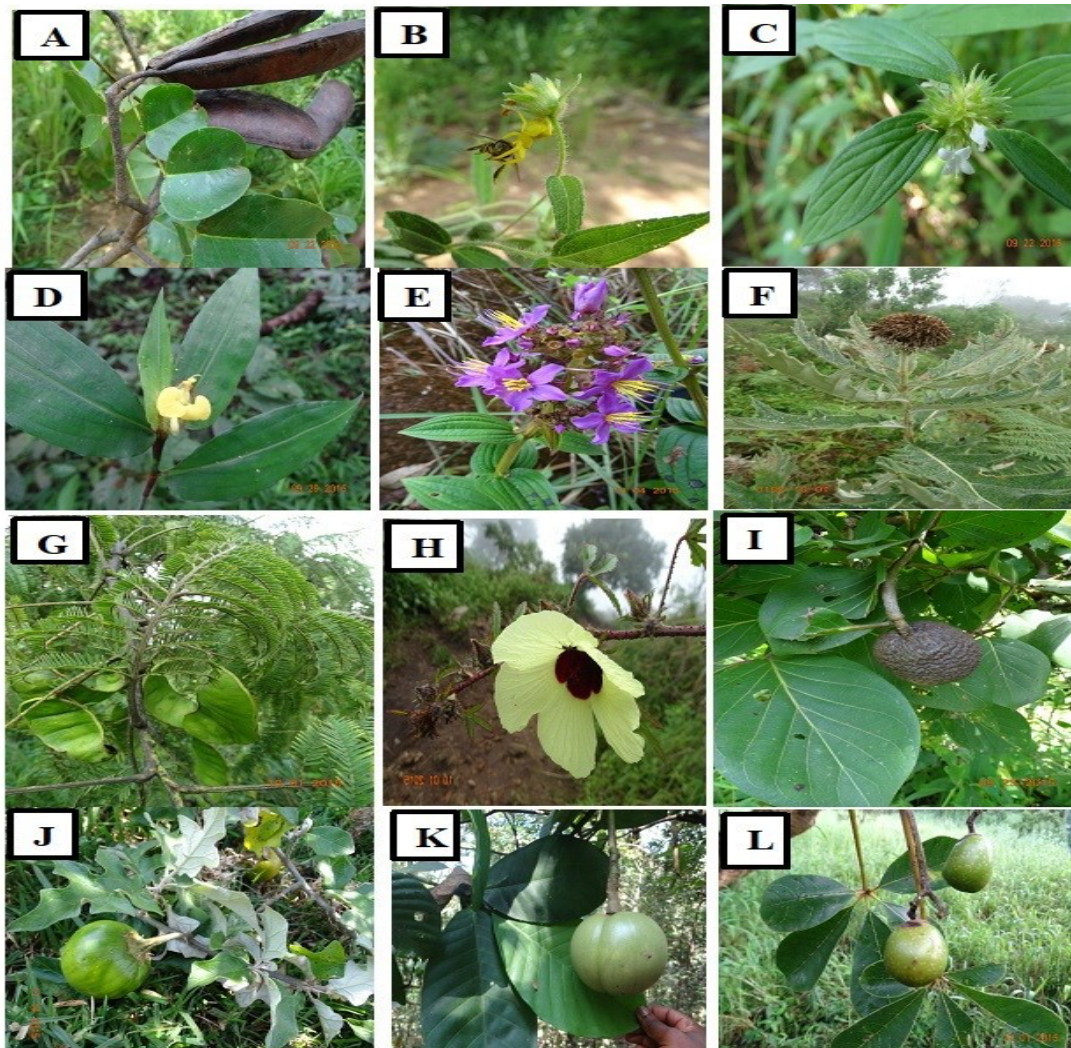


Plate 1. Picture of some species recorded from the study (A) *Afzelia africana* (B) *Aspidia africana* (C) *Borreria verticillata* (D) *Commelina africana* (E) *Dissotis rotundifolia* (F) *Echinops giganteus* (G) *Entanda africana* (H) *Hibiscus surratensis* (I) *Sarcocephalus latifolius* (J) *Solanum giganteum* (K) *Tabernaemontana pachysiphon* (L) *Vitex doniana*

Habits of growth and plant parts used

The data collected show that the primary medicinal plants used to treat livestock ailments were trees 43(49 %), herbs 28 (32 %), and shrubs 11(13 %), while grasses and climbers were represented with three species each (Fig. 3). This corroborates Jernigan (2009) and Tekle (2015), yet conflicts with other studies (Eshetu *et al.* 2015; Farooq *et al.* 2019; Khan *et al.* 2019) that reported the dominance of herbaceous species elsewhere. The predominance of tree species in our utilization data could be attributed to increased availability of the trees in almost all season (de Albuquerque 2006).

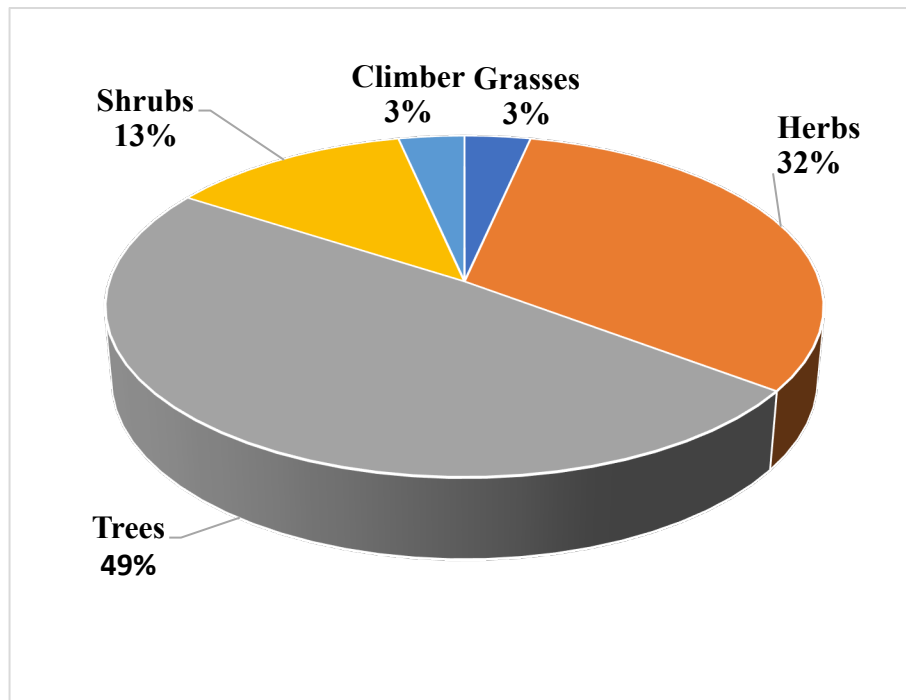


Figure 3. Growth forms (or habits) of the plants encountered in the study

Plant parts utilized

This study identified several plant parts used to prepare EVM recipes. The most commonly used parts were leaves (22 species), followed by whole plants (16 species) as indicated in Figure 4. This result is consistent with the findings of Tariq *et al.* 2014; Eshetu *et al.* 2015; and Nyahangare *et al.* 2015. The plants identified in the whole plant usage category included herbaceous species, grasses, and climbers, all of which are usually uprooted. Also, leaf utilization might be associated with the animal feeding behavior where leaves, stems, and seeds are most plant parts being foraged (Xiong and Long 2020). The prevalence of the use of leaves could be due to ease of collection (Tariq *et al.*, 2014) and/or the several metabolites produced in the leaves during the process of photosynthesis (Tariq *et al.*, 2014). The least used plant part in recipes was the root, possibly because of its underground location, where harvesting could be labour intensive and may permanently damage the plant (Yirgu *et al.* 2019). This observation corroborates the findings of Xiong and Long 2020. Finally, in some instances, two or more plant parts of the same plant species were used in preparations of EVM recipes for different or similar ailments. This finding is consistent with previous studies from Ethiopia and Nigeria (Tilahun *et al.* 2019; Niels *et al.* 2008; Offiah *et al.* 2011). The use of two or more plant parts could be a strategy to combine different chemical constituents to achieve a highly concentrated mixture. However, it is also believed that one plant species/part can treat various types of disease due to its diverse chemical constituents.

Route of administration of the EVM identified from the study area

The medicinal plant preparations were administered through different routes including oral, topical, steaming, body bath and nasal. Also, two or more methods of recipe preparations were observed from a single plant depending on the type of disease treated. Of all the methods, oral administration was the most frequently used route of administration (56%), whereas only a few (28%) are administered topically as shown in (Fig. 5). This result is consistent with the findings of Tariq *et al.* (2014) and Kebede *et al.* (2018), who reported that the oral route of administration was the most common means of administering EVM in livestock in Pakistan and Ethiopia. However, this is dependent on the type of ailment treated. Topical application was the second most widely practiced mode

of EVM administration. This corroborates Yigezu *et al.* 2014 who reported oral and topical routes of administration as the most popular mode of EVM administration in some districts in Ethiopia, while burning plant parts to create smoke around animals to repel insects were less common (1%).

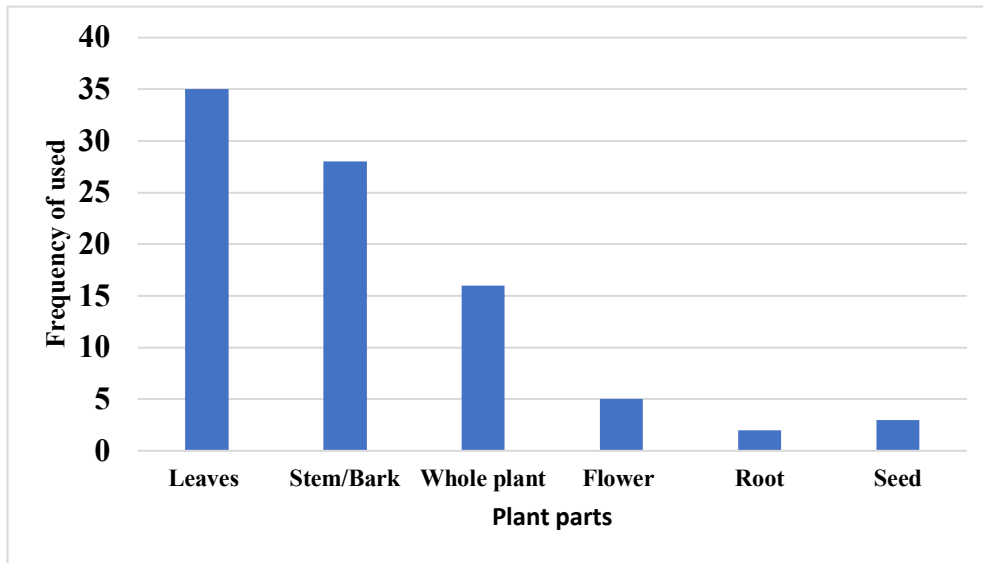


Figure 4. Plant parts used in preparation of EVM recipes

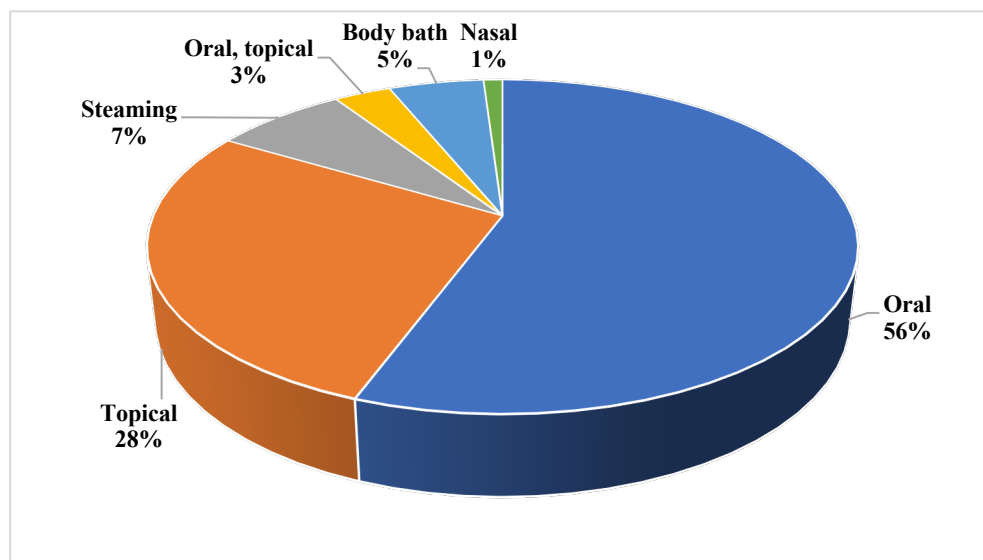


Figure 5. Mode of administration of EVM treatments

Categories of major cattle ailments and some medicinal plants

This study recorded 24 different ailments of cattle in the study area (Fig. 6). Several of these diseases have been reported to be common cattle diseases in many studies in Nigeria (Alawa and Aku 2002; Neils *et al.* 2008; Offiah *et al.* 2011; Alhaji and Babalobi 2015; Majekodunmi *et al.* 2018) and other parts of the world such as Ethiopia, Pieracci *et al.* (2016), India Eswaran *et al.* (2013); Verma 2014; Jayakumar *et al.* (2018). Of the diseases recorded, *Bovine Tuberculosis* was the most frequent ailment of cattle in the study area, followed by pneumonia. Importantly, Bovine tuberculosis (bTB) is caused by *Mycobacterium bovis*, which is reported to be endemic to Cameroon (Egbe *et al.* 2017). This observation may be explained by the proximity of the study area to Cameroon, and the fact that there have been transboundary cattle migrations between the two countries (Zieba *et al.* 2017). The high rate of pneumonia in this study corroborates the reports of Masiga *et al.* (1996); Mekibib *et al.* (2019); and Dzoyem *et al.* (2020) who reported pneumonia as one of the major livestock diseases restricting the development of animal production in the tropics. This prevalence could be associated with cold temperature and high altitude which increased occurrence of respiratory tract infections (Mäkinen *et al.* 2009; Caswell 2014). Of all the plant species recorded, *Pterocarpus erinaceus* Poir was reported to be the most used plant in the study area. The ailments

reported to be treated by *P. erinaceus* Poir in this study corroborates findings elsewhere in China for wound healing in cattle (China and Francis 2014), gastrointestinal pasteurellosis in Benin Republic (Ouachinou *et al.* 2019), trypanosomiasis, foot and mouth disease (Noudèkè *et al.* 2017), tooth and mouth troubles, and severe diarrhea or dysentery (Tuo *et al.* 2020). *Azelia africana* is reported to be the second most used plant species in this study. The species was reported to treat various ailments including *bovine pasteurellosis* and gastrointestinal disorder. This observation confirms the findings of Ouachinou *et al.* (2019) and Ogni *et al.* (2016) which reported *A. africana* to treat gastrointestinal disorder in Benin Republic. However, few of the plant species recorded in this study are Afromontane endemic (Chapman and Chapman 2001), such as *Anthonotha noldeae*, *Nuxia congesta*, *Prunus africana*, *Solanum giganteum* and *Polyscias fulva*. Of these, *Prunus africana* which is reported in this study to treat pneumonia, has also been reported in Ethiopia to treat similar ailment (Tadesse *et al.* 2014; Hassen *et al.* 2021). Also, *Nuxia congesta* reported to treat pneumonia has also been reported elsewhere (Minja 1994; Lulekal *et al.* 2014) to treat similar ailments. *Polyscias fulva* has been reported to treat minor bleeding in livestock (Lulekal *et al.* 2014).

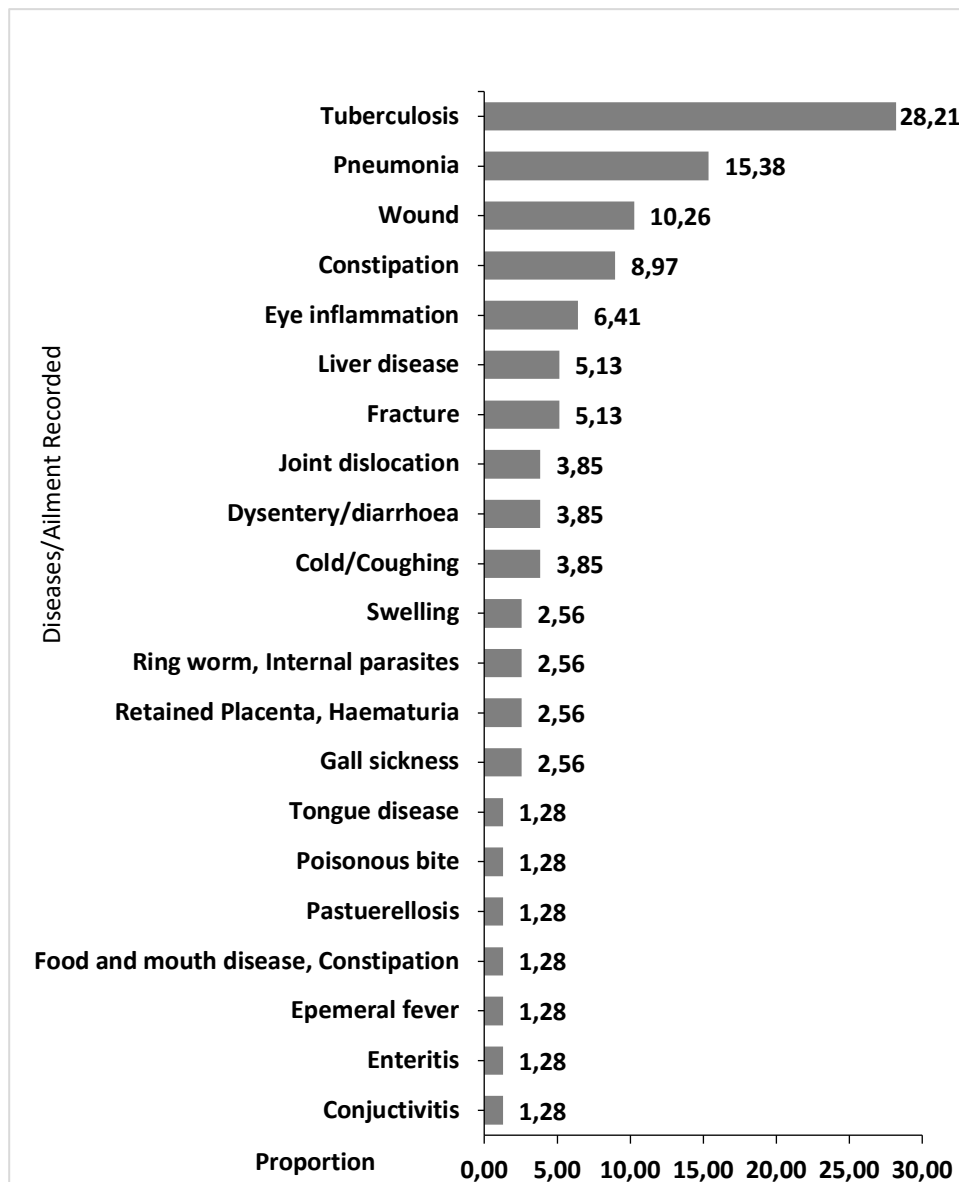


Figure 6. Ailment/ diseases recorded in the study area

Also, *Solanum giganteum* was reported by Berhanu *et al.* (2020) to treat cough in Ambo District of Oromia Regional State of Ethiopia, while *Croton macrostachyus* has been reported to treat ringworms in districts of Jimma zone, Ethiopia (Yigezu *et al.* 2014). *Ficus sycomorou*s, used in EVM in the study area, agrees with the study of Alawa and Aku (2002) and several others. The widespread use of some of these plant species could be related to the chemical

compounds they contain (such as sterols, carbohydrates, proteins, amino acids, alkaloids coumarins, saponins, tannins, flavonoids, phenols, and saponins) and/or their antimicrobial, digestive or laxative capacity. These chemicals are also known to have important anthelmintic activities or contribute to healing of the ailments mentioned above (Akinpelu *et al.* 2009; Aliyu and Chedi 2010; Noufou *et al.* 2016; Ouachinou *et al.* 2019).

Conclusion

With the number of species recorded and ailments treated, it is obvious that Fulani people in the study area have a vast knowledge of medicinal plants. The analysis of this study suggests that their ethnoveterinary knowledge is derived from daily practices of rearing their cattle for sustainability and the absence of adequate conventional animal health care systems in the rural communities. There is a critical need to isolate active compounds from the acclaimed medicinal plants and ascertain their clinical efficacy. Additionally, subjecting the identified plant species to a phytochemical and pharmacological screening tests is warranted to develop novel drugs for veterinary use.

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Declarations

Abbreviations: **EVM:** Ethnoveterinary medicine; **FMD:** Foot and mouth disease; **GGNP:** Gashaka Gumti National Park; **IAD:** Igbari, **Aramide Dolapo;** **LUH:** Lagos University Herbarium; **OOT:** Ogundipe, **Oluwatoyin Temitayo;** **OTO:** Onuminya, **Temitope Olabisi ;** **NGI:** Nodza George Isaac; **TETFUND:** Tertiary Education Trust Fund

Ethics statement: The Code of Ethics of the International Society of Ethnobiology (2008) was followed during data collection <http://ethnobiology.net/code-of-ethics>. Informants were briefed on the purpose of this research work and verbal consents were taken from all the localities where data was collected. As most of the informants were illiterate, it was not possible to obtain written consent.

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Declaration of competing interest: The authors declare that there is no conflict of interest.

Authors' contributions: **NGI** designed the study, conducted the field work, and wrote the original draft and the final manuscript. **IAD** carried out data analysis. **OTO** assisted with design, data analysis, and interpretation. While **OOT** source the fund for field data and provided logistics. All authors read and approved the final draft.

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