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**Philological and Anthropological Analysis With Annotated
Translation**

By

Wosenseged Kidane Sahile

**Dissertation Submitted to Addis Ababa University, Department of Linguistics
and Philology, Philology Program Unit, in partial fulfillment of the
requirement for the Degree of Doctor of Philosophy (PhD)**

**Supervisors Mersha Alehegne (PhD)
Fekadu Fullas (RPh, PhD)**

**Addis Ababa University
Addis Ababa, Ethiopia
September 2020**



ADDIS ABABA UNIVERSITY

**COLLEGE OF HUMANITIES, LANGUAGE STUDIES, JOURNALISM AND
COMMUNICATION**

DEPARTMENT OF LIGUSTICS AND PHILOLOGY

’Eṣä Däbdabbe

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Translation**

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September, 2020

Addis Ababa, Ethiopia

Addis Ababa University

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Dedication

To my beloved mother *Fäleqäč Gəzaw* (፫፲፭፻፶፻) and to my Father *Kidanne Šahəle* (፫፲፭፻፶፻)

Declaration

I hereby declare that the thesis entitled '*Ḥṣā Dābdabbe*: Philological and anthropological analysis with annotated translation' has been carried out in the Department of Linguistic and Philology, Addis Ababa University under the supervision of Mersha Alehegne (PhD) and Fekadu Fullas (RPh, PhD). This work is original and has not been submitted in part or full by me for any degree at any other university. I further declare that the material obtained from other sources has been duly acknowledged in the dissertation.

Date: September, 2020

Place: Addis Ababa University, Ethiopia

Signature -----

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List of Acronyms

AAU	Addis Ababa University
AIDS	Acquired Immune Deficiency Syndrome
ARCCH	Authority for Research and Conservation of Cultural Heritage
CAM	Complementary and Alternative Medicine
CSMC	Center for the Study of Manuscript Culture
DACA	Drug Administration and Control Authority
EAE	Encyclopedia <i>Aethiopica</i>
EHNRI	Ethiopia Health and Nutrition Research Institute
EPHI	Ethiopian Public Health Institute
EMML	Ethiopian Manuscript Microfilm Library
EMMss	Ethiopian Medicinal Manuscripts
EOTC	Ethiopian Orthodox <i>Täwähädo</i> Church
EPLF	Eritrean People Liberation Front
ETMPA	Ethiopian Traditional Medicine Practitioners' Association
FDRE	Federal Democratic Republic of Ethiopia
f.	folio
ff.	folios
FGD	Focus Group Discussion.

FMHACA Food, Medicine and Health Care Administration and Control Authority

IDRC International Development Research Centre

NALA National Archive and Library Agency

PRA Participatory Rural Appraisal

TM Traditional Medicine

TMK Traditional Medical Knowledge

TMPs Traditional Medicine Practitioners

TPLF Tigray People's Liberation Front

WHO World Health Organization

WM Western Medicine

R Recto

V Verso

Transliteration

The system which the researcher chose to transcribe /transliterate both the **Ethiopic script** ("**Fidel**") throughout the research project is the one that has been adapted by the editorial team of **Encyclopedia Aethiopica**¹. For more details see **Tables 1, 2 and 3**.

Language based on the Ethiopic script ("**Fidel**")

The basic correspondences used in the EAE system used as the standard or guiding for the thesis and presented in the following table (Table: 1):

Table 1. Symbol Replacement

a) The consonants											
ሀ	h	ሰ	s	ቸ	č	ኸ	k̲	ደ	d	ጸ	ṣ
ለ	l	ሸ	š	ገ	ḡ	ወ	w	ጀ	ǰ	ቦ	ṣ̣
ሐ	ḥ	ተ	q	ነ	n	ዐ	ᵒ	ገ	g	ፈ	f
መ	m	ቸ	q̲	ኘ	ñ	ዘ	z	ጠ	ṭ	ፐ	p
ሠ	ś	ቡ	b	ኣ	ᵒ	ዠ	ž	ጪ	č	ቂ	q̲ʷ
ረ	r	ተ	t	ከ	k	የ	y	ጸ	p̣	ጒ	ḡʷ
b) The vowels											
1.	2.	3.	4.	5.	6.	7.					
ä	u	i	a	e	ə or no vowel	o					
ḁ = ḅä	ḁ = bu	ḁ = bi	ḁ = ba	ḁ = be	ḁ = b, bə	ḁ = bo					

In exceptional cases (e.g. plain text e-mail transmission) the author used the following (Table 2) “symbol replacement table” (use right-hand symbols for the left-hand ones).

¹ It is an Encyclopedia on Ethiopian Studies S. Uhlig, ed., *Encyclopedia Aethiopica*, I: AC; II: D-G; III: He-N; in cooperation with A. Bausi, eds., IV: O-X (Wiesbaden: Harrassowitz, 2010); A. Bausi in cooperation with S. Uhlig, eds., V: Y-Z, Supplementa, Addenda et Corrigenda, Maps, Index (Wiesbaden: Harrassowitz, 2003, 2005, 2007, 2010, 2014).

Table 2. Symbol Replacement

°	'	d̲	d_	ğ	g^	ī	i_	ñ	n~	ş	s.'
°	'	đ	d.	ġ	g.	ķ	k.	þ	p.	š	s^
ā	a_	đ	d,	ħ	h.	ķ	k_	q̲	q_	ţ	t.
ḃ	b'	đ	d'	ḥ	h~	ļ	l'	ŗ	r'	ū	u_
č	c^	ə	e'	ḥ	h_	ñ	n.	ş	s.	ž	z.
č	c.^	g	g'	fi	h'	ŋ	n,	ś	s'	ž	z^

Table 3. Numerals

1	2	3	4	5	6	7	8	9	10
ḏ	ḡ	ī	ō	ē	ž	ž	ḡ	ū	ī
20	30	40	50	60	70	80	90	100	1000
ḡ	ū	ū	ī	ḡ	ē	ū	ī	ē	īē

Key Terms

Annotated translation A translation with rich comments on the content of the text from different perspectives; usually in the form of footnotes.

Catalogue A compilation that contains list of books, description of a published or unpublished manuscripts along with their contents, folios, year of publication or copying, marginalia notes and other information.

Cosmopolitan A place where people of many ethnicities, religions and cultures live in close propinquity.

Ethno-pharmacopoeia Traditional book describing drugs and their uses: an official compendium of quality standards for pharmacologically active substances and drug products.

Herbal medicines Finished labeled, medicinal products that contain as active ingredient/s aerial or underground part/s of plant or other materials or combination thereof, whether in the crude state or as plant preparations.

Herbal drug A drug or preparation made from a plant or plants and used for healing purposes.

Marginalia Marginalia are marginal notes of all kind that are written outside the main text area in a given manuscript. Marginal notes are usually added after the production or the copying process of the manuscript is completed. Marginalia are not a one-time event in the history of Ethiopian medicinal texts; they are recurring phenomena. Long before the production of the first medicinal manuscript, medicinal prescriptions and magical prayers for various diseases had been

written in the form of marginalia. Even after the production of the first medicinal text, medicinal prescriptions were kept on the margins of wide range of non-medicinal manuscripts.

Medicinal plants The medicinal plants in this project study cover the useful plants for primary health care and as therapy for diseases and injury, and plants used traditionally as food and drinks and believed to be good for health; medicinal plants include foods, drinks, herbs and spices.

Medical pluralism Is the adoption of more than one medical system, or the simultaneous integration of both western medicines with complementary and alternative medicine (CAM).

Medical anthropology Medical anthropology is concerned with the bio- cultural understanding of man and his works in relation to health and medicine. It encompasses the study of medical phenomena as they are influenced by social and cultural features and cultural phenomena as they are illuminated by medical aspect.

Traditional and alternative health care The sum total of knowledge, skills and practices on health care, other than those personified in biomedicine, used in the prevention, diagnosis and elimination of physical or mental disorder.

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Abstract

The research explores philological and anthropological aspects of herbal medicine. As an interdisciplinary project, the research employed philological and anthropological methods. It aims at elucidating the Ethiopian medicinal system of knowledge based on the Ethiopian medicinal manuscript of *'Āṣā Dābdabbe*. It gives annotated translation of the selected text (NALA 489) and anthropological analysis on the five selected herbs (*Qäbäräččo ቀበርኝ* Echinops, *Dädäho ደደሆ* Eucleaschimperi, *Katkata ከትከታ* Dodonae aviscose, *Məsəračə ምስርኝ* Clerodendrum myricoides and *härägəresa ሐረግሬሳ* Zehneriascabra). It also gives the history of medicinal manuscripts and distribution in and outside of Ethiopia. The study also tries to forward ways to keep medicinal manuscripts of the country towards their revival and assessed Ethiopian policy towards traditional medicine. Comparative and critical investigation were conducted on manuscripts such as *Mäṣḥafä Fäws*, *'Āṣā Mādəhanit* and notes on medicinal prescriptions in varia / marginalia folios of other medicinal manuscripts. The study explored Ethiopian manuscripts and manuscript microfilm collections in Ethiopia, Germany and the United States of America. In addition, it surveyed printed and online catalogues of Ethiopian manuscripts worldwide; and conducted key informant interview with traditional medicine practitioners. The research was conducted in two regions (*Maychew* and *Assosa*) and ten practitioners had participated in focus group discussion (FGD). The findings of the research have shown the similarity between the uses laid out in the studied base manuscript and the information obtained from the oral sources.

Key words: *'Āṣā Dābdabbe*, *medical anthropology*, *herbal medicine*, *Maychew* and *Assosa*.

CHAPTER ONE

Introduction

1.1 Background

Ethiopia is the oldest nation which has developed a system of graphic representation of its own traditional wisdom and philosophical thoughts. The country is one of the few exceptional countries in using writing tradition since long time ago. There are four types of materials on which events and practices are recorded: inscriptions, coins, manuscripts² and paper. “In Ethiopia, many languages are spoken, most of them belonging to the Semitic³ or to the Cushitic⁴ (including Omotic) families. Sources from inscriptions indicate that *Gə’əz* a native denomination connected with the ethnic *’ägə’azi* (pl. *’ägə’aziyan*), appeared during the Aksumite age and is still employed today; there are two root of *Gə’əz* in Ethiopic, of which the first means "to migrate", and the other “to be free” (Marrassini, 2009:1)⁵.

² Handwritten book: a book or other text written by hand, especially one written before the invention of printing.

³The Semitic language family is one of the branches of the Afro-Asiatic (also known as Hamito-Semitic) phylum. As a linguistic designation, ‘Semitic’ is first attested at the end of the 18thcent. (Voigt 2001: 1314). Several minor subdivisions within S. are certain: Akkadian; Canaanite (Hebrew, Phoenician, possibly Ugaritic); Aramaic; Arabic; Epigraphic South Arabian (ESA: Sabaic, Maniac, Qatabanic, Hadramitic); Ethio-Semitic (ES); Modern South Arabian (MSA: Mehri, Harsusi, Jibbali, Soqotri). The arrangement of this group into higher taxonomic units is still open to discussion.’ (Kogan L. (2014). Semitic.*EAE*,5:616)

⁴The name Cushitic has its source in the Bible, where Cush is presented as the son of Ham, the son of Noah (Gen 10:6), and where the river Gihon flowing out of Eden is described as surrounding “the whole land of Cush” (Gen 2:13). As an ethnic designation the term continues throughout the Old Testament. It subsequently appears much later (and usually with the spelling “Kushitic” in English) in Western scholarly writing where it denotes the Egypto-African kingdom (2656–2325 B.C.) and culture centered on Meroe. This use of the name in relation to Meroe continues the biblical tradition...In modern linguistic usage Cushitic is employed primarily to refer to some 40 to 50 languages and dialects belonging to a particular stock of the Afro-Asiatic phylum (Greenberg 1950), though by extension it has often been employed for referring to ethnic groups who speak these languages.’ (Heward R. (2014). Cushitic. *EAE*, 5:830).

⁵ Marrassini P. (2009). Problems in Critical Edition and the State of Ethiopian Philology, *Journal of Ethiopian Studies*, Vol. XLII, Nos. 1-2, ICES GOLDEN JUBILEE (1959-2009), Institute of Ethiopian Studies, Addis Ababa University.

Gə'əz is the oldest documented Semitic language of Ethiopia. The first document is a short unvocalized inscription written on a kind of boomerang in bronze found in 1953 or 1954, about 55 cm. long, by a king *Gdr*⁶ met in some of the Sabaic inscriptions from South Arabia at the beginning of the third century 'AD. After the introduction of Christianity, the Gə'əz literature begins with the translation of the Bible. Gə'əz ceased to be spoken in an indeterminate period towards the end of the Aksumite age (about 8th-10th c. A. D.), but continued to be the only literary and official language of Ethiopia until the 19th century. Today it is the language of the Church and of groups of learned people, but of course it has to be taught, and it is not the native language of anybody' (Marrassini, 2008:1).

Along with the old tradition, the country is also endowed with both tangible and intangible heritages. The tangible heritages⁷ of the country include moveable⁸ and immoveable⁹ heritages.

⁶ King Gdr was a king of the kingdom of Aksum (c. 200); known for being the first king to involve Axum in the affairs of what is now Yemen. He is known primarily from inscriptions in South Arabia that mention him and his son BYGT (also vocalized as 'Beyga' or 'Beygat'). GDRT is thought to be the same person as GDR, the name inscribed on a bronze wand or scepter that was found in an area near Atsbi and Dar'a/Addi-Galamo in northern Ethiopia. (Identification with the king of Mometum Adulitanum: Alexander Sima, "GDR (T)", in Siegbert Uhlig, ed., *Encyclopedia Aethiopica: D-Ha* (Wiesbaden: Harrassowitz Verlag, 2005:719).

⁷ Are heritages which can be seen, touched and feel unlike the heritages that are intangible heritages, heritages are solid Examples include Monuments, buildings, stele etc. (Wosenseged k. inventorying Arabic and Ethiopic manuscripts in the case of ARCCH, 2014, unpublished).

⁸ Means cultural heritage not attached to the foundation and that can be moved from place to place easily and which are handed down from the past generation. Moveable cultural heritage: parchment manuscripts, stone paintings and implements, sculptures and statues made of gold, silver, bronze, iron, copper or of any other mineral or wood, stone, inscriptions of skin, ivory, horn, archaeological and bone or earth or of any other material, and also Paleontological remains, written and graphic documents or cinematographic and photographic documents or sound and video recordings, coins made of gold, silver, bronze, copper or of any other materials, ethnographic implement, ornament or any other cultural object of nations, nationalities and peoples (Wosenseged k. inventorying Arabic and Ethiopic manuscripts in the case of ARCCH, 2014, unpublished).

⁹ Is the legacy of physical artifacts and intangible attributes of a group or society that are inherited from past generations, maintained in the present and bestowed for the benefit of future generation which Includes buildings and historic places, monuments, artifacts, etc., which are considered worthy of preservation for the future. These include objects significant to the archaeology, architecture, science or technology of a specific culture (Wosenseged k. inventorying Arabic and Ethiopic manuscripts in the case of ARCCH, 2014, unpublished).

Manuscripts are incorporated under moveable heritage. In Ethiopia people can find more than twenty thousand manuscripts “the exact number of manuscript in Ethio-Eritrea region is not known. The estimate indicated that there should be ca.200, 000...” (EAE, 2003:738).

Manuscripts are rich in traditional knowledge though not fully discovered yet. In line with this, the knowledge about herbal medicine is part and parcel of Ethiopian manuscript tradition. Writing medical recipes to treat disease is common in Ethiopian manuscript writing practice. Most common medical recipes include *’Eṣä Däbdabbe*, *’Ebənä ’ä’əbanə* and other *Mäṣḥafä Mädaḥanit*¹⁰.

Medical literature is an important part of traditional medicine in Ethiopia. Most manuscripts are written in *Gə’əz* and one has to know the language to analyze the manuscripts and translate them in to either Amharic or English language. Manuscripts needs to be registered, catalogued, inventoried and digitized for further study and use by future generation.

1.2 Statement of the problem

Medicinal plants have been used to prevent and treat various health problems. Medicinal plants form the bases of traditional health care systems are used by eighty percent of most developing nations today (WHO, 2001:7). Indigenous medicines are relatively economical, locally existing and readily accepted by local populations. Ethiopia has an enormous resource of plant species that are used in traditional medicine. Both herbal and modern medical treatments have been practiced for a long period of time. Before the introduction of modern concept of medicine, the

¹⁰Etymologically, the word is derived from the *Gə’əz* word; and the meaning incorporates any force which has a power of saving from spiritual (psychological), material (physical), visible and invisible enemies, bodily disease, and depressions (Alemayehu, 1984: 115).

society depended only on traditional medicines. The role of herbal medicine appears to be diminishing as modern medicine expands. Cultural beliefs and the complexity of diseases encourage communities to turn to traditional medicine. For this reason, traditional medicine should be integrated with modern medicine to provide a holistic health care approach. The problem faced by the cosmopolitan personnel to incorporate those traditional medicines is related to dosage, types of plants used and their efficacy. There is still a gap in scientific knowledge as to what plants are used for particular diseases, the dosages and their effectiveness of the herb. Analysis of herbal manuscript both anthropologically (medical anthropology)¹¹ and philologically can potentially narrow the knowledge gap. Philologically, the goal of this dissertation is to translate the medicinal text book of *ʿIṣä Däbdabbe* and to focus on its features, contents and languages. The manuscript contains old or archaic Amharic words which is not common in our day to day communication. The archaic words are very important in partly to partially reveal what type of plant is used for a particular disease, dosage and effectiveness of the herb. The scribe made mistake while writing the manuscript (orthographic, repetition etc.), the philological analysis clearly revealed the mistake committed by the writer.

1.3 Objectives

1.3.1 General objective

The general objective of the study is to analyze Ethiopic herbal manuscript *ʿIṣä Däbdabbe* philologically and anthropologically (medical anthropology).

¹¹ Medical anthropology is a branch of anthropology, which studies the biological and cultural (including historical) aspect of man from the point of understanding medical, medico-historical, medico-legal, medico- social and public health problems of human being. Interested in the study of human health problems and healing system in their broad social context (Hasan and Parasad, a note on the contribution of anthropology to medical science, 1959:4).

1.3.2 Specific objectives

In line with the general objectives, this study has also addressed the following specific objectives:

- ✓ Make inventory of the manuscript '*ʾĪṣä Däbdabbe* from individuals, libraries, church and monasteries.
- ✓ Give a comprehensive annotated translation of the manuscript of '*ʾĪṣä Däbdabbe* in to English.
- ✓ Analyze the contents of the manuscripts from philological and medico-anthropological perspectives.
- ✓ Discuss the history and distribution of herbal manuscripts in Ethiopia.
- ✓ Discuss Ethiopian policy towards traditional medicine.

1.4 Significance of the study

Ethiopia is the home to diversified flora¹² from which have been extensively used as traditional medicine. However, only a few of them are scientifically studied as sources of drugs. Preparations from plants formed the basis of the original curative medicine which was used to control diseases. Traditional medicine is culturally preferred by large sections of the population. Therefore, the study of folk medicine by examining documented manuscripts is important.

The future development of traditional medicine along modern scientific lines is desirable. As a starting point, a solid foundation should be laid by recording an inventory of medicinal plants,

¹² Is the plant life occurring in a particular region or time, generally the natural occurring or it means plant life of a historic era as in fossil flora. Floras may require specialist botanical knowledge to use with any effectiveness, the name Flora in this meaning, a book covering the plant world of region (<http://archive.org/stream/b223/3588/b22313588-djvu.txt>, dictionary of Botanical terms, accessed 9 may 2017).

seek useful treatment, promote national self-esteem and self-reliance, and develop local inventiveness, commerce generating rural wealth and to provide access to medicines accepted by the rural communities. This study was useful to know the lost types, parts and dosage as gap easily observed in the prior studies applying anthropological and philological methods on manuscripts and its copies.

It also serves as a basis for further scientific research in the field of medical anthropology. According to Pankhurst, Research on traditional Ethiopian medicine is a matter of exigency for two main reasons. First, indigenous knowledge is losing ground to modern development. Second, medicinal plants are quickly disappearing because of deforestation (Pankhurst, 1990).

1.5 Organization of the thesis

This dissertation consists of four parts and five major chapters. Chapter one deals with general background of the study. Chapter two is about background research which reviews related empirical literatures, key concepts and theories. Chapter three is about survey of Ethiopian manuscripts. The fourth chapter is annotation and translation of *’Aṣä Däbdabbe* with analysis and interpretation. The final chapter deals with conclusions and recommendations.

1.6 Scope of the study

This study was conducted in *Tigray* (southern part around *Maychew*¹³) and *Benishangul Gumuz*¹⁴ for the anthropological part. The manuscripts were mainly collected from NALA and British

¹³Is a zone town in the Tigray region of Ethiopia? It is located at 665 km north of Addis Ababa along Ethiopian highway which runs to *Mekelle* (the capital city of Tigray region) with an altitude of 2479 m. According to Ethiopia’s agro-ecological setting, *Maichew* and its environs are classified under the *Weina Dega* (semi-temperate zone). *Maichew* is zone in the southern part

museum library. The study may also be limited to anthropological and philological analysis with annotated translation. The study focused only on one medicinal manuscript which were written in Amharic and or *Gə'əz*; and which contains medicinal prescriptions for bodily diseases; particularly of those manuscripts which contains list of medicines based on plants, animal parts and minerals¹⁵ along with the kind of diseases claimed to cure.

The researcher methodologically selected the text of *ʿĪṣā Dābdabbe*, Addis Ababa, NALA (NO. 492) as a base manuscript used medical anthropology for complementary analysis with historical description of herbal manuscripts in Ethiopia.

1.7 Research Methodology

1.7.1 Study area

The project traversed from medical anthropology and philology respectively. The researcher chooses two major areas for the anthropological study of herbal medicine. The areas were selected based on the rich knowledge of the people about herbal medicine and the practice for long time. The selected areas were *Tigray [Maychew]* and *Benishangul Gumuz [Assosa]*.

of Tigray region having rich tradition in herbal medicine (Population and Housing Census Report (2007). *Central Statistical Agency*).

¹⁴ One of the three Zones in Benishangul-Gumuz region. This Zone was named after the *Assosa Sultanate*, which had approximately the same boundaries. Assosa is bordered on the south by the *Mao-Komo* special *woreda*, on the west by Sudan, and on the northeast by the *Kamashi*. The largest town in this zone is Assosa. Its highest point is Mount *Bambasi*, located in the *woreda* of the same name. (Benishangul Gumuz, area food security strategy. (2004), Assosa).

¹⁵ It is an instance of Ethiopian books of medicine makes minerals as an important source of medicines. There is a separate Ethiopic book of minerals known as ጥበረ አዕን ሕፃፀራ ገጳ'əban which gives the list the names of important minerals, their characteristics, place of origin and their claimed medicinal or magical powers.

1.7.2 Design of the study

In order to conduct this research, the researcher employed qualitative method. The qualitative method was used to describe data from anthropology. Philological method was also used to deal with the manuscripts collected as the primary sources of the research.

1.7.3 Data collection instruments

With regard to the qualitative method, philological and anthropological methods were used. For the anthropological method, the researcher has employed qualitative data collection methods. These include observation, interview and focused group discussion.

1.7.3.1 Observation

Observation is an important method employed for data collection. As the subject of the study also includes material or tangible aspects of culture i.e. plant herbs, it is inevitable to observe techniques of producing different medicine from herbs, and the day to day activities of herbalists had been observed.

1.7.3.2 Interview

It is also an important aspect of data collection method. Whereas, the tangible aspects of their culture and setting have been observed, interview is important to understand opinions and belief systems of the herbalists in general. Since the issue of herbal medicine in the church is not accepted and those who practice it are stigmatized, there is a tradition of transferring knowledge from one generation to the next orally which as a result makes the manuscript partial. Therefore, there was a need to interview elders so as to make the discussion complete. Ten practitioners were interviewed for the project. Two interview methods were used;

- ✓ Free list interview: In a free list interview, an informant simply lists things in an emic¹⁶ category in whatever order they come to mind.
- ✓ Semi-structured Interview: The objective of this interview is to confirm the information obtained in the first interview. In this case, catalog and photographic images of each plant mentioned in the first interview was used.

The field was conducted for two months. A total of ten traditional medicine practitioners (four women and six men) were interviewed. The ages of the informants in range were from 20-80 years, with the average age being 50 years. The data was collected through Participatory Rural Appraisal (PRA), which is based on interactions with indigenous people and direct observations by being in the field. The selection of the individual informant interviewed would be fundamentally important to ensure credibility of the information collected. The informants were practitioners who are considered as professionals because they treat patients outside the circle of their own family and friends and used medicinal plants in all or part of the therapeutic activity. These informants were aware of their rights to refuse to answer any question, to stop the interview at any time, or simply refuse to correspond completely.

1.7.3.3 Focus Group Discussion (FGD)

This method is important to know herbalists common attitude towards the practice of herbal medicine. Practitioners differ in many instances in using herbs for a particular disease. Focus group discussion elicited information in line with the herbal manuscript.

¹⁶A research strategy that seeks the native view point; relies on informants to say what is and is not significant; actor oriented (some technical terms used by anthropologists: compiled by Alan Macfarlane www.alanmacfarlane.com/lectures).

1.8 Philological method

According to (Mersha, 2011:28), to select a base manuscript from the entire list, age, relative degree of corruption, completeness, legibility, containing full text and not marked by omission and paraphrase criteria's may be applied. For the philological method, the researcher has employed base text method, which is selecting one manuscript from the whole copies based on criteria like age, completeness, coherence, wider time coverage and access to the full manuscript. The rest manuscripts were used for comparison to the already selected best/base manuscript. Best-text editing is appropriate to use if the manuscript exists in a single copy, or if there are MSS whose contents vary but have some similarities, a chosen "base" manuscript is one which has better readability and content details. Therefore, the best to use base text method is an appropriate methodology to analyze the text¹⁷.

The researcher methodically selected the text of *'Eṣä Däbdabbe*, Addis Ababa, NALA (No. 492) as a base manuscript and using medical anthropology as complementary analysis with historical description of herbal manuscripts in Ethiopia. The goal of my dissertation is to translate the medicinal text book of *'Eṣä Däbdabbe* and to focus on its features, contents and languages.

1.8.1 Data sources

In order to conduct this research, both primary and secondary sources were used. The main source of data for this study is the primary sources. Six manuscripts were identified as the main source of the study. These manuscripts include both the medicinal manuscripts of *'Eṣä Däbdabbe* and *Mäṣḥafä Mädaḥanit*.

¹⁷ This is as a result of discussion with professors in Hamburg, Germany. The researcher has participated in the training by Hiob Ludolf Center 'Summer school in Ethiopian and Eritrean manuscript studies: Methods and challenges' which was held from 25 September to 30 September, 2017 at Hamburg University Germany (September 26, 2017).

1.8.1.1 Primary Sources

The primary source is the manuscript *’Eṣä Däbdabbe*.

Manuscript (A): *’Eṣä Däbdabbe*, Addis Ababa, NALA (No. 6816)

This medicinal text **Ms. A.** is a manuscript written in vellum; having 19 folios; one columns; it is a written neatly in bold is a 20th century manuscript written in *Gə’əz*. It includes an introductory note in *Gə’əz* and Amharic: As his name appeared in the text in various places (ff. 127b, 166b), the manuscript belonged to Girma Elias. The manuscript is available in Addis Ababa, at NALA with a catalogue number (No. 6816).

Manuscript (B): *’Eṣä Däbdabbe*, Addis Ababa, NALA (No. 213)

This medicinal text **Ms. B.** is a manuscript written on paper with 223 folios and one columns; It is a written in bold. The manuscript is written in *Gə’əz* and Amharic. It includes an introductory note in *Gə’əz* and Amharic. The manuscript is available in Addis Ababa, at NALA with a catalogue number (No. 213).

Manuscript (C): *’Eṣä Däbdabbe*, Addis Ababa, NALA (No. 492)

This medicinal text **Ms. C.** is a manuscript written on paper; with 167 folios and one column; It is a written in bold. The manuscript is written in *Gə’əz* and Amharic. It includes an introductory note in *Gə’əz* and Amharic. The manuscript is available in Addis Ababa; at NALA with a catalogue number (No.492). It was written in 1975, recorded in the first page, the manuscript belonged to *Leuel Wolde Rufael* from *Gonder*.

Manuscript (D): *Mäṣḥafü Mädaḥanit*, London, British Museum (Orient. 828.)

This manuscript **Ms. D**, as described by Wright, Catalogue of Ethiopic Manuscripts in the British Museum: Acquired since the year 1847, 1877), is a manuscript written in vellum, about 12 inches (30.5 cent meter) by eight inches (22.2 Cent meter); with 192 folios; three columns; usually 32 lines. It is a large well written 19th century medicinal manuscript written in Amharic. It includes an introductory note in *Gə'əz* and Amharic “ዛቲ መጽሐፈ መድኃኒት ዘወጽሃ(አ)ት እም ኢየሩሳሌም ለበሽታም ሁሉ በፊት አዋቂዎች ሁሉ ያከማች ነች ለበሽታ ሁሉ እንድትፈጠስ አጠቃላይ፡፡”. From the recorded in various places (ff. 127b, 166b); the manuscript belonged to *Wäldägiyorgis Wäsänsäggäd*, king of Šäwa, who died in 1812. The manuscript is available in London, British Museum with a catalogue number (Orient. 828).

Manuscript (E): *Mäṣḥafü Mädaḥanit*, NALA, Addis Ababa (No. 1486)

The work **Ms. E** is a manuscript written on paper, having 84 folios; one column; usually 32 lines. It is a well written large 20th century medicinal manuscript written in Amharic and *Gə'əz*. It include an introductory note in *Gə'əz* and Amharic. The manuscript is available in Addis Ababa at NALA (No. 1486).

Manuscript (F): *Mäṣḥafü Mädaḥanit*, Addis Ababa, NALA (No. 7494)

This work **Ms. F** is a manuscript written on paper, about (16.8 cm) by (11.6 cm); having 339 folios and one column; it is a 19th c large and well written Amharic medicinal manuscript. It include an introductory note in *Gə'əz* and Amharic. The manuscript belonged to *Fitawrari*

Nebye Leuel, and the manuscript is available in Addis Ababa, at NALA with a catalogue number (No. 7494).

Table 3 Name of the manuscripts, location and selected letter (Sigla)

No.	Name of the Manuscript	Location of the Manuscript	Sigla (Selected Letter)
1	<i>’Eṣä Däbdabbe</i>	Addis Ababa, NALA	A
2	<i>’Eṣä Däbdabbe</i>	Addis Ababa, NALA	B
3	<i>’Eṣä Däbdabbe (Yəhägär Bahäl Mäḍəhanit)</i>	Addis Ababa, NALA	C
4	<i>Mäṣḥafä Mäḍəhanit</i>	London, British Museum (Orient. 828.)	D
5	<i>Mäṣḥafä Mäḍəhanit</i>	Addis Ababa, NALA	E
6	<i>Mäṣḥafä Mäḍəhanit</i>	Addis Ababa, NALA	F

1.8.2 Related Medicinal Manuscripts

Related medicinal manuscripts like *Eḅänä’ä’əbanə* and other *Mäṣḥafä Mäḍəhanit* were consulted as supplementary manuscripts. In addition to both anthropological and philological methods, the researcher also looked at the history of herbal medicine based on the herbal manuscripts written in different time’s periods. Few researchers undertook studies on the history of herbal medicine but they rarely or very little used herbal manuscripts as a base for their discussion which lacked depth and completeness.

1.8.1.2 Secondary Sources

The project intersects three major disciplines: philology, social anthropology (medical anthropology) and history. The most important works on Ethiopian medicinal plants and manuscripts the researcher has already identified includes: Assefa Balcha, 2008, Fekadu Fullas, (2001, 2003, 2006), Ermias Leulekal, Zemedeneh Asfaw, etal, 2011, Mohammed S., 2012, Wondwosen Teshome, 2006.

1.9 Description of the study area

1.9.1 Benishangul Gumuz

Figure 1: Map of Benishangul Gumuz



Source: Researcher: adapted from Google map (January, 2017)

Benishangul Gumuz regional state is situated in the western part of the country. The region is enclosed by the Amhara regional state in the north and north east, Oromia regional state in the east and south east, Gambella national regional state in the south, and the Republic of Sudan in the west. It lodges an estimated total area of 50,380 km² with an altitude range of 580 to 27 masl. The overall population, based on the central statistics agency census (CSA, 2007), is 784,345 out of which 105,926 lives in urban whereas the rest 678,419 people lives in the rural part. Based on

the (CSA, 1994) census report, the indigenous ethnic groups are Berta (26%), *Gumuz* (23.4%), *Shinasha* (6.9%), *Mao* (0.6%), and *Kunma* (0.2%). The *Amhara*, *Oromo*, *Agew*, *Tigraway*, *Hadya* and others are found in the region. The populations follow different faiths and include 44.1 % Christianity (34.8% Orthodox, 5.8% Protestantism, and 0.5 % Catholicism) 11.1% traditional belief system and 1.5 % others. Administratively, the region is divided in to three zones and two special woredas. The region is able with ample natural resources traditionally used and managed by local people.

1.9.2 Maychew

Figure 2: Map of Maychew



Source: Researcher: adapted from Google map (January, 2017)

Tigray region is the northern part of Ethiopia. Tigray is the home of the Tigray, *Irob* and *Kunama* people. Tigray is also identified as region one according to the Federal constitution with its capital Mekelle. Tigray is delimited by Eritrea to the north, Sudan to the west, the Afar region to the east, and Amhara region to the south and south west. Besides Mekelle, major cities include *Hawzen*, *Abbiy Addey*, *Alamata*, *Mekoni*, *Adigrat*, *Adwa*, *Axum*, *Humera*, *Korem*, *Maychew*,

Qwihiha, Shire (Inda Sellasie), *Wukro* and *Zalambasa*. Based on the 2007 census conducted by the Central Statistics Agency (CSA, 2007), the Tigray region has a population of 4,316,988, of whom 2,126,465 are men and 2,190,523 women; Urban residents number 844,040 or 19.55% of the population. With an area of 41,409.95 square kilometers, this region has a projected density of hundred people per square kilometer. Maychew is one of the towns in Tigray located at 665km north of Addis Ababa with an altitude of 2479 meter above sea level. According to Ethiopian agro-ecological setting, Maychew and its environs are classified under the *Weina Dega* (semi temperate zone). Based on the 2007 national (CSA, 2007) census conducted, this town has a total population of 23,419, of whom 11,024 are men and 12,395 women. 95.28% of the populations are orthodox Christians, and 4.24% are Muslims. The 1994 census reported it had a total population of 19,757 of whom 8,894 were men and 10,863 were women.

CHAPTER TWO

Literature Review and Conceptual Framework

2.1 Literature Review

The history of *Gə'əz* literature in Ethiopia is mentioned by different authors. For instance, according to Mersha (2011:2), “there is a general agreement among Ethiopianist as to the division of the history of *Gə'əz* literature in to four periods. The first period began in the fifth century and ended in seventh century, the second period began in the eightieth century and ended about 1250 A.D; the third period began with the restoration of the Solomonic line of kings about 1270, and lasted for one 150 years that is until about the middle of 19th century” (Mersha, 2011:2).

In Ethiopia the tradition of writing on parchment is deep-rooted. We could have a number of manuscripts written in different times having various themes. Among the various themes, manuscripts which deal with medicinal, historical and cultural features could be mentioned. This study primarily deals with the medicinal manuscripts of Ethiopia.

For a long period of time, human beings used various methods to manage disease. Before the introduction of modern concept of medicinal practice, TM has been effective in using herbal medicine for different kinds of diseases. The role of herbal medicinal practice has been diminishing with the growth of modern health practice. The role of herbal medicine is still significant.

Traditional knowledge, inclusive of traditional medical knowledge (TMK), is reflection of age-old practices of a given society. Furthermore, the process of harnessing and regulating knowledge involves anthropological, economic, environmental and intellectual property interests. Traditional knowledge, as its name implies, is a knowledge linked to and derived from tradition, that is to say, it is a knowledge derived from the way of life in a given society. It, thus, carries an element of belongingness of the knowledge to the daily life of a group of people bonded in a sociological¹⁸ pattern. Any action, law, agreement, measure or commitment related to traditional knowledge, therefore, has to reflect the complex web of the life of the community at hand.

Moreover, traditional medicine (TM) use in Ethiopia takes no exception in its originality, anthropological foundation and widespread coverage as in other countries with rich traditional medicinal practices. Scientific records exist on traditional healing techniques for such ailments as diabetes, malaria, snakebite, sores, night blindness, anemia, and ascariasis. Furthermore, Ethiopian TMK has not been the subject of comprehensive study despite some efforts exerted in gathering basic information. With regard to use of CAM, it is used not only the developing countries but also widely used in the developed countries such as the United States of America (WHO, 2005).

“While relatively new in the U.S., complementary and alternative medicine (CAM) is a fully accepted and integrated form of health care in many areas of the world and has

¹⁸ Sociological perspectives, with their own differing contestations, seek in their own way to account for how the social is transformed or reproduced. For example, what are the processes that underpin major social breaks that brought about the ‘enlightenment’ and later ‘modernity’? It is useful to first note that sociology is a commentary on everyday living, from the mundane, those aspects that go unnoticed (much of the social is reproduced in these moments), to greater social upheavals. The sociologist is often attempting to link these two seemingly paradoxical observations – i.e. it is us that bring about any given social condition, yet at the same time, they can come back and constrain and condition our very own acts. What was produced by human will then take a life of its own. Sociological thinking provides insight into these often complex processes. (Introduction: What do we mean by thinking sociologically? September 30, 2007, Thomson Learning).

existed since antiquity. For Americans, CAM is one of the fastest growing fields in health care and is more widely used today than ever before. Millions of Americans are spending billions of out-of-pocket dollars on CAM therapies. Its widespread use has had impact on users, practitioners, researchers and policy makers. CAM's growing influence has been described as a "hidden mainstream in American medicine. 'This surge has resulted in the need to better understand the market, from a personal and public health perspective'" (Passarelli, 2008:7).

But the reasons for the use of herbal medicine in developed and developing countries is different. The reason behind is mostly cultural " Apart from reasons of accessibility and economics, the use of traditional health care is also part of the indigenous culture which has been sustained for hundreds of years" (Fekadu, 2006:19). Moreover, the interest in using herbal medicine in the developed countries is attributed to technological, economic, cultural and social drift according to Passarelli (Passarelli, 2008:85) "The recent increase in the interest and growth of CAM can be attributed to many reasons including technological, economic, cultural and social trends. Its growth is also fueled by the rising dissatisfaction with the traditional healthcare and delivery of medicine in the United States. Additionally, self-empowerment, personal savings accounts and the internet are enabling greater access to alternative medicine" (Passarelli, 2008:1).

According to Passarelli (2008), the growth in use of CAM is attributed to different factors "some attribute the growth in CAM to the view that the combination of CAM with conventional medicine is better than conventional medicine alone. Additionally, CAM treatments fill gaps, such as the treatment of chronic pain and other weakening conditions, in areas where conformist medical practices are not always successful. However, CAM is also being used with certain

medical conditions that are without a cure or with conditions that have a cure but have significant side effects such as cancer.

Furthermore, CAM users are choosing alternative treatments because they are more personal, less invasive and often have lower costs. Nowadays, there is a growing movement away from disease management to a more holistic approach to healthcare that includes a shift from the emphasis on technology for healing to a focus on the natural healing ability of the body. Very importantly, interest in CAM research continues to grow as more and more studies are funded to establish the evidence base required for CAM integration and acceptance into routine physical care. Despite its fast growth, there are still low levels of understanding regarding the complementary and alternative medicine market'' (Passarelli, 2008:1).

The estimated number of plant species in the world is in the range from 297,000 to 510,000. Out of this 53,000 about 6-9% have medicinal uses. About 45,500 plant species occur in Africa, out of which 15,000 are endemic and 4500 rare. In Ethiopia about 650 to 1500 medicinal plant species also exist (Fekadu, 2006:8).

In sum, in many developing countries, a large proportion of the population relies on traditional practitioners. Although modern medicine exist side-by-side with such traditional practice, herbal medicines have often maintained their popularity for historical and cultural reasons. However, compared to the developed countries, the use of herbal medicine in developing countries is very significant. For this, there are two reasons: scarcity of modern health facility and acceptance of herbal medicine by the large part of the society (this is may be the organic nature of the herbs and being free from significant side effects). As a result of the mentioned reasons, use of traditional medicine in Africa reached 85% “ ...according to the International development

Research Centre (IDRC), one estimate puts the number of Africans who routinely use these services for primary health care as high as 85% in Sub-Saharan Africa” (Samuel et al, 2014:50).

“Many traditional medicine practitioners (TMPs) in Africa are people without education, who have rather received knowledge of medicinal plants and their effects on the human body from their forebears. They have a deep and personal involvement in the healing process and protect the therapeutic knowledge by keeping it secret. In a manner similar to western medicinal practice, the practitioners of traditional medicine /TM/ specialize in particular areas of their profession. The importance of traditional medicine /TM/ for people in Africa in the past, now and in the future is enormous. The remedies made from indigenous plants play a crucial role in the health of millions of Africans” (Samuel et al, 2014:51).

Furthermore, in the African environment, the therapeutic potential of traditional medicine is enormous and requires further in-depth study to improve methods and training so as to form a more effective organization within the ranks of TMPs. The known maxim in traditional medical practice is; 'take this herb and do this exercise and change your diet', it is a multidimensional treatment. In most cases, the administration of TM is a debatable issue particularly in the areas of methods, diagnosis and doses which have made its integration to western medical model a heroic task (Samuel et al, 2014:51).

Cultural factors also influence judgments of the risks and benefits in herbal medicine research as culture has a great influence on traditional medicine. For instance, a cultural familiarity with many traditional herbal medicines may promote an acquaintance bias, accepting an extensive cultural assumption of safety, based on the historical use of herbal medicines. Therefore, it will be important to establish standards of proof for expression of safety devoid of cultural influence

before conducting large-scale clinical trials on which the efficacy of herbal medicines can be evaluated. Moreover, research activities in TM must also be formulated based on challenges as found in WM. Therefore, this will give a brighter future to this area of research and position TM research to play a critical role in global health (Samuel et al, 2014:51).

Similarly, herbal medicine in Ethiopia has also a major significance. As research clearly shows, in Ethiopia up to eighty percent of the population uses traditional medicine due to the cultural acceptability of healers and local pharmacopeias, the relatively low cost of traditional medicine and difficult access to modern health facilities. The vast majority of Ethiopia's populations who live in rural areas use herbal medicine extensively due to low modern health care and scarcity of public sector resources (Samuel et al, 2014:52).

The current Ethiopian health care system is primary health care focused. However, traditional healers continue to practice outside of the health services although they are the main health care providers for many Ethiopians. Nowadays, greater attention has been paid by governments of many developing countries to promote the widespread application of the practice in health care (Kebede et al, 2006:128).

In his book, *Interaction of Ethiopian Herbal Medicines and Spices with Conventional Drugs: A Practical Guide*, Fekadu (2006: xi) discusses the percentage of the population who currently use herbal medicine “It is estimated that 80% of the present Ethiopian population relies on traditional medicine for health care.”

The major problem encountered to incorporate traditional herbal medicine with the modern health systems are the issue of dosage, the botanical identification of plants and lack of awareness. There is a need to integrate in the educational system of the country by designing a

curriculum to create awareness for children about traditional medicine in Ethiopia. (Fekadu, 2006: 20). To prepare a curriculum in Ethiopian indigenous knowledge in general and herbal medicine in particular, the researcher believes that one has to go back to manuscripts which have been used for a long period of time as medical recipes for treatment by the practitioners. In addition, the other major difficulty is those manuscripts are written in Ethiopic and through time there is change by the copyist or intentional erasing of the parts of manuscript which in turn leads to incompleteness in the manuscript. Therefore, in order to solve such a problem, the researcher believes that philological and anthropological analysis of the herbal manuscripts are very important and it narrow the gap which is clearly observed in the use of herbal medicine manuscripts. The study mainly focused on the herbal manuscript '*ʿĪṣā Däbdabbe*' which was written in the 20th century with other similar manuscripts being used as supplements.

2.2 Conceptual Framework

Based on archaeological evidence (Solace¹⁹ 1975), use of traditional herbal medicine has a long history and it goes back to the Neanderthal era²⁰;

“Since ancient times, human being used plants for the purpose of disease control and prevention. Physical evidence gathered from burial sites of Neanderthal man discovered in Iraq revealed that the use of medicinal plants in the area goes back to some 6000 years” (Solace, 1975, cited in Sofowora, 1982).

¹⁹Solace, RS, (1975).Chamber IV, a Neanderthal flower burial of northern Iraq. Science, 190:880.

²⁰Were humans like us, but they were distinct species called *homo Neanderthalensis*, who lived before 500, 000 years (Who are The Neanderthals? Hendry L. (2018). The trustees of the Natural History Museum, London, Accessed may 21 2019.

In ancient Chinese traditional health treatment, being healthy is not only considered to be physically fit but it is also meant mentally well and stable. In addition, being healthy is also mean living in harmony with both internally (which is mainly mind stability) and fit in physically (which is ability to protect ourselves from any danger).

“According to Ayurvedic²¹ philosophy, ‘Health is dependent upon one’s ability to live in harmony with one’s self and with the external universe’. Traditionally, attention was given to illnesses of the mind as to the illnesses of the body. Life is a combination of the senses, mind, body and soul. This system believes that human beings and nature should be in perfect synchronization and that diseases occur when there is an imbalance between body’s three humors” (Cavite, 2008:9).

As research shows, plants have been indispensable sources of both preventive and curative medicinal preparations for human beings. Historical accounts of traditionally used medicinal plants depict that different medicinal plants were in use as early as 5000 to 4000 BC in China, and 1600 BC by Syrians, Babylonians, Hebrews and Egyptians (Dery *et al.* 1999:2)

According to Cavite (2008:10), the use of plants for medicinal purpose goes back to ancient Chinese and Egyptian period which is attested by papyrus writing. Use of plants was also common in Africa and native America since time immemorial. Scientists’ also proved the use of

²¹ Ayurvedic evolved in the meditative minds of seers of truth. For thousands of years their teachings were transmitted orally from teacher to disciple, and later they were set down in melodious Sanskrit poetry. Though many of these texts have been lost over time, an abundant body of Ayurvedic knowledge survives. They perceived that consciousness was energy manifested into the five basic principles, or elements: Ether (space), Air, Fire, Water and Earth. This concept of the five elements lies at the heart of Ayurvedic science (Elizabeth Palermo (Staff Writer), accession date January 06, 2016.).

similar plant species in different places for the same purpose in the 19th century over a period of time modern pharmaceuticals replaced the use of raw herbs.

At present, traditional medicinal plants are source of are the therapeutic resource used by the population of the African continent specifically for health care, which may also serve as starting materials for drugs (Sofowora, 1993). According to (Iwu et al., 1999) infectious diseases account for one-half of all deaths in the tropical countries. As a result, people of all continents have long applied poultices²² and imbibed Infusions of indigenous plants dating back to prehistory (Cowan, 1999). Moreover, therapeutic traditional medical practices in existed for hundreds of years before the development of modern scientific medicine.

Scholars describe the emergence of epidemic in Ethiopia by taking various periods. For instance, according to (Pankhurst,1990), the first recorded epidemic that occurred in Ethiopia dates back to eight hundred forty nine years (849) and linked with a person named Abba Yohannes who was at the time the head (Bishop) of the Ethiopian church.

The recorded medical history of the country is dates back to 849 AD. There was a plague and famine which was attached with God's punishment. Abba Yohhanes expulsion from Ethiopian church was considered as the main cause. The emperor wrote 'great tribulations have come up on our land, and all our men are dying of the plague and all our beasts and cattle have perished' (Pankhurst, 1990). Endashaw (2007) argue that the period was during Queen Sheba. As he clearly put in his paper, the use of plant species in Ethiopia was common and the country became

²² Is the direct application of the crude, fresh herb to the skin. (science direct topic, <https://www.sciencedirect.com/topics/nursing-and-health-professionals/poultice>).

center of diversity in the use and types of plant species and also compared the age in comparison with the age of the crops.

“The cultivation and use of spices, herbs, medicinal and other essential oil bearing plants is not new to Ethiopia. It is as old as the crop themselves, and its history can be traced back to the reign of Queen Sheba²³ (ca.992 BC). Ethiopia is the origin and/or center of diversity for many of these plant species” (Endashaw, 2007:1).

Ethiopia is a multi-lingual and multi-cultural nation and not colonized by outsiders. The country kept her identity. It is inhabited by more than 80 ethnic groups with more than 100 languages and dialects spoken. Therefore, different treatment of the indigenous knowledge²⁴ is so crucial. The knowledge about herbal medicine in the different part of the country is very rich. As a result, to arrive at safe conclusion the researcher believes that incorporating the rich knowledge through anthropological method is timely.

“The number of different languages spoken in Ethiopia approaches 90 (Maffi, 1999) and each corresponds to its unique socio cultural population thus amounting to the high human cultural diversity. Each of these cultural domains has its own set of written and/or oral pharmacopoeias with the medicinal use of some species being restricted to that given culture” (Endashaw, 2007:21).

²³The story of the Queen of Sheba, based on the biblical account of the queens visit to king Solomon, has undergone extensive Arabian, Ethiopian, Jewish and other elaborations and has become the subject of one of the most ubiquitous and fertile cycles of legends (Ullendorf , The Queen of Sheba, Public lecture).

²⁴The term is used to describe the knowledge systems developed by a community as opposed to the scientific knowledge that is generally referred to as 'modern' knowledge (Ajibade, 2003). Indigenous knowledge is the basis for local-level decision-making in many rural communities.

According to Pankhurst (1990: 113-120), in the 19th century people in central Ethiopia place more reliance on the efficacy of the charms, spells and amulet and the incorporation of WM is a recent happening and that took roots during the reign of Menelik (1865-1913). During this period, WM became significantly more incorporated into the Ethiopian medical system. A number of medical envoys from abroad, starting with the Italians and Russians, were influential in building hospitals, providing medical training and participating in vaccination campaigns. Most medical establishments primarily served the urban elites and foreign missionaries and were concentrated in the major cities. In spite of WM becoming more widespread in Ethiopia, Ethiopians tended to rely more on traditional medicine. In addition, conventional medical services remained widespread in urban areas and failed to keep pace with the growing population, keeping health care access out of reach for most Ethiopians living in Ethiopia (Pankhurst, 1990). On the other hand, Pankhurst argues that the need to focus on the curative practice forced people to rely only on the traditional medicine due to access, affordability and cultural issues related to the traditional medicinal practice.

In sum, the use of herbal drug both in developing and developed country is increasing; the factors are different for both developing and developed countries. The demand for herbal medicine differs in developing and developed countries. In developed countries, it is not shortage or need driven. It is to search for ‘other’ option. In developing countries lack of infrastructure, shortage of skilled medical personnel and poverty has leads to use herbal medicine. (Endashaw, 2007:1)

As it is stated in a WHO document (1977), ‘a medicinal plant’ is any plant which in one or more of its organ contains substances that can be used for the therapeutic purposes or which are precursors for the synthesis of useful drugs. This definition distinguishes those plants whose

therapeutic properties and constituents have been established scientifically and plants that are regarded as medicinal but which have not yet been subjected to thorough investigation.

The term “herbal drug” refers to part/parts of a plant used for preparing medicines (for example: leaves, flowers, seeds, roots, barks, stems, etc.) (Anon 2007a). Furthermore, WHO (2001) defines medicinal plants as herbal preparations produced by subjecting plant materials to extraction²⁵, fractionation²⁶, purification²⁷, concentration²⁸ or other physical or biological processes. They may be produced for immediate consumption or as a basis for formulating herbal products. Integrating herbal medicine with the modern medical system requires in-depth study of the culture and written documents of the practitioners in particular or the society at large in general, to avoid untoward reactions and unintended consequences

“Whenever a culture attempts to assimilate alien ideas, social stresses are bound to occur, especially when such ideas threaten the dominion of major economic and political interests. Mistakes are likely to arise while attempting to implement these ideas. In the case of Chinese herbal knowledge, its use by people unfamiliar with its rules and protocols invariably leads to mishaps; either the herbs or formulas fail to work as

²⁵Extractions are a way to separate a desired substance when it is mixed with others. The mixture is brought into contact with a solvent in which the substance of interest is soluble, but the other substances present are insoluble. ScienceDirect.com (<https://www.sciencedirect.com/topics/chemical-engineering/extraction>).

²⁶Is a separation process in which a certain quantity of a mixture (gas, solid, liquid, suspension or isotope) is divided during a phase transition, into a number of smaller quantities (fractions) in which the composition varies according to a gradient. Fractions are collected based on differences in a specific property of the individual components. Fractionation makes it possible to isolate more than two components in a mixture in a single run. This property sets it apart from other separation techniques. ScienceDirect.com (<https://www.sciencedirect.com/topics/chemical-engineering/extraction>).

²⁷To make pure; free from anything that debases, pollutes, adulterates; or contaminate (<https://www.sciencedirect.com/topics/chemical-engineering/extraction>)

²⁸Is the amount of a substance per defined space, concentration usually is expressed in terms of mass per unit volume. ScienceDirect.com (<https://www.sciencedirect.com/topics/chemical-engineering/extraction>).

expected, or worse, side effects may result whenever herbs are used in contraindicated conditions. In the political and economic realms, government regulators unfamiliar with the unique characteristics of traditional Chinese medicine may impose restrictions upon Chinese herbal practice that inhibit its effective application and suffocate its future development within our culture'' (Cavite, 2008:10).

Moreover, Endashaw (2007), study, "Study on Actual Situation of Medicinal Plants in Ethiopia," shows the high acceptance of medicinal plant treatment in Ethiopia is related to culturally linked tradition and trust in medicinal value of the traditional medicine. He describes that in addition to scientific research approach to the medicinal plants, more research should also be undertaken to know the attachment with the religious and cultural issues;

In late 1970s, the WHO has recommended that practitioners of 'so called' "traditional medicine" be integrated into primary health care systems in Africa and elsewhere. Numerous studies examined the integration efforts that followed this recommendation, and by the 1980s, it had become evident that integration faced significant challenges. Anthropologists working in a number of countries highlighted the functional and conceptual barriers to integration though few best practices occurred. For instance, the absorption of midwives into the formal health care system occurred with little problem because their technical knowledge of childbirth and maternal and childcare was understandable to western medical practitioners'' (Assefa, 2008:1). One of the most difficult issues in translating traditional herbal practices in to conventional 'western' medicine is the individualization of prescriptions which contains multiple herbal and other ingredients. Each recipe has its own prescription which needs a research to develop conventional rules on how to use the herbal medicine with philological method. The method is helpful to compare each variant to reach a conventional rule. Moreover, (WHO, 1992), gathered experts at

its regional office about the regulation, importance and control of herbal medicine stated that the knowledge from herbal manuscripts is time tested, recognized the importance of herbal medicine for our health finally announced few herbal medicine already studied while most herbal medicine need further investigation.

With regard to the historical development of herbal medicine, scholar's researches on the topic have tried to show some aspects of the historical development. For instance, (Assefa, 2008) discusses the issue in his but most of the time researchers rarely used the rich manuscript resources in herbal medicine. Assefa (2008), in his dissertation explain the history of 'church based' healers which traced back to the 16th century. He has also described healer's training to master the knowledge about the Ethiopian Orthodox Church healing. The works of Simon Messing, Allan Yong, Mekonnen Bihsaw and Dan Bauer also mentioned as being ethnographic neither 'history and nor professionalization' of traditional healing system mentioned. (Assefa, 2008:4)

In sum, there is a visible gap of knowledge in the integration of herbal medicine with the modern health system. There is an obvious need to examine herbal manuscripts from philological and anthropological standpoint to pave the way for integration to remedy the deficit in knowledge.

2.3 Medico - Anthropological Background

2.3.1 Medical Anthropology

Medical anthropology is a branch of anthropology that studies of human health and disease, health care system and bio cultural adaptation. Scholars define medical anthropology in different

ways for instance, Hasan (Hasan and Parasad, 1959), medical anthropology is a branch of anthropology, which studies the biological and cultural (including historical) aspect of humans from the point of view of understanding medical, medico-historical, medico-legal, medico-social and public health problems of human being. Medical anthropology is also interested in the study of human health problems and healing system in a broad social context. Lieban (1973) defines medical anthropology in its bio-cultural dimension;

“It encompasses the study of medical phenomena as they are influenced by social and cultural features and cultural phenomena as they are illuminated by medical aspect” (Lieban, 1973:12).

As the definition clearly shows, it bridges the two major distinct sub-disciplines of anthropology that is physical and social anthropology, as it deals with both the biological and social aspects of human activities in medical issues. On the other hand, for Hochstrasser and Tapp (1970), medical anthropology deals with the biological and cultural aspect, “medical anthropology is concerned with the bio- cultural understanding of man and his works in relation to health and medicine” (Tapp, 1970:245). Moreover, Medicine, health and illness are partly cultural categories and different cultures have their own logic and alternative means to deal with them.

Medical anthropology is also deals with human life and wellness. It is the comparative and holistic study of culture and its influence on disease and health care. It stresses the importance of social and cultural factors in governing the type and frequency of disease in a population, the way people explain and treat disease, the way people adapt to changing environments, and the manner in which persons respond and relate to the delivery of modern medicine.

In other words, medical anthropology has both biological and socio- cultural aspects. In the biological aspect, the interest is dominantly on human growth and development, the role of disease in human evolution, pale pathology²⁹. In the socio- cultural- pole, anthropologists focus on traditional medical systems (ethno-medicine), medical personnel and their professional preparation, illness behavior, doctor patient relationship and the dynamics of the introduction of Western medical service in to traditional societies.

The major premise in medical anthropology is two: On one hand, illness and healing are fundamental to the human experience and are best understood holistically in the context of biology and cultural diversity. Thus, one should inquire about the social organization, belief system, and other cultural traits to understand medical aspect of human experience. Issues to be analyzed include the theory of etiology (causation of illness), the study of cultural knowledge about illness and social interaction of healers and their patients in a cultural and economic context. For instance, in a small scale society (traditional societies) principal healers can be the *Shamans*³⁰, thus illness and healing is integrated with the religious belief of the community.

It is usually stated that disease represents an aspect of environment that is influenced by both human behavior and bio- cultural adaptation. This premise focuses on how cultural and behavioral patterns shape the complex interactions of pathogen, environment, and human host to produce disease. Disease patterns as reflected by practices such as diet, activity patterns, and sexuality (which should be analyzed cross culturally and based on social organization with in a

²⁹ It is the medical *term* for the way a disease works. A tumor is removed by a doctor trained in surgery, but you need a doctor trained in *pathology* to tell (Dictionary Definition: Vocabulary.com).

³⁰ (especially among certain tribal peoples) a person who acts as intermediary between the natural and supernatural worlds, using magic to cure illness, foretell the future, control spiritual forces, etc. (Dictionary.com, accessed 18 August 2018).

culture, relation of disease and group cultural practice). The cultural aspects of health systems have important practical consequences for accessibility, effectiveness and improvement of health care, particularly in multi-cultural society. Therefore, the applied aspect of medical anthropology has two dimensions that are clinical and public health patterns.

2.4 Basic Concepts in Medical Anthropology

2.4.1 Illness and Disease

The distinction between disease and illness has central importance in medical anthropology. On one hand illness refers to a person's perception and lived experience of sickness or being 'diseased'. Disease is the 'objective' clinical manifestation of abnormality of physical function or infection by pathogen in an individual of host or its biological phenomena. There are people with diagnosable disease such as, hypertension, who don't know or think they are ill. Correspondingly, significant percentages of patients visiting physicians are ill but don't have an identifiable disease. Illnesses of a patient with symptoms but no diagnosable disease are also called psychosomatic³¹.

According to WHO (2014), health is defined as "... not simply the absence of disease, but the state of physical, social and psychological wellbeing". Therefore, the conception of health and illness depends up on the cultural construction of 'normality'. Moreover, this concept of being 'normal' has relative meaning, which varies among different culture. For instance, among the

³¹ Descriptive terms for the relationship between the mind and body and Psychosomatic disorders have definite physical symptoms but are thought to be caused by emotional or psychological factors. Anorexia nervosa is an example of a *psychosomatic* illness. (Dictionary.com, accessed 18 August 2018)

*Tuareg*³² in Mali freckles, old age, immaturity, illegitimate birth, ugliness and small buttocks are counted as serious impediment.

2.4.2 Healing Sickness and Disease

Sickness is a process for socialization of disease and illness and it is also a process through which troublesome behavioral and biological signs, particularly ones originating in disease, are given socially recognizable meaning and they are made in to symptoms and socially significant outcomes (WHO, 2006: 70).

2.5 Medical System

Medical system comprises of both the cognitive and behavioral components which are found in all cultures and are studied as part of the medical anthropology. The cognitive component centers up on theories of ethnology or causation of illness and usually involves taxonomy of disease categories grouped by causal agent. As part of the cognitive component ethno medicine is the study of cultural knowledge about illness, its linkage to differential diagnosis and curative action (Foster and Barbara, 1978: 302).

The behavioral component of medical systems is concerned with the social interaction of healers and their patients in cultural and economic context. The other important aspects of this component are: the social mechanism through which healers are trained, the division of labor among healers, organization of institutions through which medical service are delivered.

³² A Berber or Hamitic speaking member of the Muslim nomads of the Sahara. The average *Tuareg* is perfectly indifferent as to which he *does*. (Dictionary.com, accessed 18 August 2018)

On one hand, in small scale societies or technologically simple society's people usually have employed *shamans* as principal healers and the medical system is incorporated into religion. On the other hand, in complex societies, it is more likely to be secular and characterized by multiple medical systems.

2.6 Epidemic

Epidemic is a rate of disease that reaches unexpectedly high level, affecting the large number of people in a relatively short time. A small absolute number of cases of diseases are considered epidemic if the disease incidence is usually very low. In contrast, a disease (such as malaria), is considered endemic if it is continuously present in a population but at low moderate level WHO (2002). Pandemic refers to diseases such as HIV/AIDS, which are spread over a country of throughout the world.

Epidemic disease is relevant to anthropology because human behavior shapes both the cause and consequence of epidemics. For this purpose, two basic approaches in analyzing epidemic give either the cause or the consequence of an epidemic. On one hand, anthropologists interested in the cause of epidemics generally take an ecological approach. They deal with how cultural, physical, political, economic and environmental issues shape the distribution of disease morbidity³³ and mortality³⁴. For instance group irrigation may cause the ecological balance in favor of malaria. Investigations of the consequence of epidemic may examine either demographic impact or influences on social processes such as stigmas associated with certain

³³ Is a term used in statistical analyses to indicate sickness or poor health, the rate of sickness and ill health, or the prevalence of a disease in a particular (Medical dictionary, accessed 18 August 2018).

³⁴ Is a measure of the number of deaths (in general, or due to a specific cause) in a particular population, scaled to the size of that population, per unit of time (Medical dictionary, accessed 18 August 2018).

diseases. The interaction between human hosts, environment and pathogen define the course of a disease. Therefore, consideration of human behavior, culture and ecology is crucial to understand the distribution and severity of the disease.

From evolutionary perspective, infectious disease has been a primary agent of natural selection during the course of human evolution. Black (1990) argued that genetic susceptibility prevented indigenous new world population from mounting effective immune responses to old world pathogens such as measles leading to disproportionally high mortality rate in these populations.

For instance, the field of paleopathology³⁵ has reconstructed patterns of disease transmission and distribution among the pre-historic population. It suggested that the agricultural revolution may have contributed ecological assistance that fosters the epidemic disease. Transition from nomadic to sedentary life associated with agriculture posed problems of waste disposal and exposure to disease transmitting insects. Population growth associated with agricultural intensification provided reservoir of human host that allowed disease to become epidemic.

Historically, examples of severe epidemics include the Black Death³⁶, at the mid-14th century, which killed more than one quarter of the population of Europe and the Middle East. This example shows an epidemic requires particular ecological condition. Regarding the epidemic of the 14th century, a year of economic growth followed by famine and depression created crowded and putrid living condition in urban centers, bringing human hosts in frequent contact with rat borne fleas that spread the disease.

³⁵ The study of diseases of ancient man and fossil animal's 2.The study of diseases of ancient man and fossil animals. The study of diseases from former times as found in fossils and mummified remains (Free Dictionary, accessed 14 July 2018).

³⁶ Cohn S.R. (2002). The Black Death: End of a Paradigm, in American Historical Review, 107.

Furthermore, the role of anthropologists in the social consequences of epidemic disease is also important. For instance, Neel (1958:59) suggested that high mortality rate during epidemics was not purely caused by the pathology, but rather was a result of social collapse which includes sense of helplessness, poor medical care and insufficient nutritional intake. Social reaction such as fleeing the epicenter of the disease outbreak may worsen the spread of the disease.

2.7 Recent Development in the History of Epidemics

Over the past 150 years, birth and death rate have dropped in most parts of the developed world. It is accompanied by epidemiological transition in rates and cause of disease. The traditional agents of epidemic disease, plague, small pox, typhus are replaced by chronic ‘disease of civilization’, such as obesity and heart disease (Omran, 2005:733).

The fall in birth and death rates is associated with the introduction of improved sanitary conditions, vaccination programs, and antibiotic. Thus, chronic disease becomes the epidemic of ‘longer living’ population. However, the emergence of HIV/AIDS, tuberculosis and other anti-biotic resistant diseases reminds us epidemics of infectious are not a thing of past. So, studying human behavior is important to both cause and consequence of epidemic that medical anthropology contributes a lot for the understanding, control and preventing of the future epidemic disease.

2.8 Theories in Medical Anthropology

2.8.1 Theories of Health and Illness Causations

Theories about health and illness deal with the ideas people use to explain how to maintain a health state and why they become ill. All societies have “disease theory system” to identify, classify and explain illness. Moreover, ideas about illness causation may include such ideas as; breach of taboo, soul loss, germs, upset in the hot-cold balance of body, weakening of body immune system. Basically, such theories of illness causation derive from cognitive orientation of cultural group, and the therapeutic practice usually follows the same cultural logic. In terms of ideas about illness and healing, views differ from one culture to the other, but there are some generalizations to be made about the ways of thinking about illness and healing. According to Foster and Anderson (1978), there exist three basic theories about the cause of illness: personalistic, naturalistic and emotionalistic.

2.8.1.1 Personalistic

Personalistic disease theories blame illness on agents (often malicious), such as sorcerers, witches, or ancestral spirit. Illness is caused by the intervention of such agents as deity or dead ancestor (supernatural beings) or witches and sorcerers (human beings with special power). Most traditional cultures affirm that the world is alive; that most, if not all objects and beings have a will and personality. It follows that the causation is understood in personal terms. Things happen because someone something wants will them to happen, usually for personal reasons.

Nevertheless, in the course of daily life people interact with each other and with the countless of other beings, visible and invisible ,during which the whole range of emotions and feelings are aroused; gratitude, affection, trust, jealousy, hatred, fear, and so on. Therefore, deities, spirits, ghosts and ancestors can be pleased or displeased by any number of actions, thoughts, or sentiment and moved to act up on them, wittingly or unwittingly. Daily human life in most traditional societies is understood to take place within a web of relationship, human and non-

human. Thus, sickness is a result of fallout of a disharmonious relationship between the sick person and some being or a disharmony often resulting from the patient having willfully or accidentally offended other person or spiritual being. This includes a broken taboo, a rude gesture or remark, or variety of other actions may anger other person or being to the point where he or she will seek to injure the offender.

In many cases, this way of thinking frames illness within the moral context. Sickness is understood as a result of immoral, reckless and offensive behavior on the part of the patient. The major personalized agents which are important cross culturally are the following.

Deities of one supreme Deity - In many cultures it is affirmed that a god instituted human culture and laid down rules and regulations. Violations of this code are punished by gods often in the form of misfortune, sickness and death.

Ancestor - In many societies ancestors are believed to exist in bodiless form and to retain a deep interest in human affairs, especially those of their descendants. Getting out of harmony with your ancestors by treating your relatives or spouse badly or by ignoring respectful behavior towards the ancestors themselves can result in sickness and bad luck.

Ghosts - Are often unhappy spirit of dead, who envy the living and take out their frustration on them. In such cases, sickness may be interpreted primarily as bad luck of the patient.

2.8.1.2 Naturalistic

Naturalistic explains illness in personal terms and one example to mention is the western medicine or bio-medicine, which aims to link illness to scientifically demonstrated agents that

bear no personal malice towards their victims. Thus, western medicine³⁷ attributes illness to organisms (example: bacteria, viruses, fungi, and parasites), accidents or toxic materials. In contrary, other naturalistic ethno medical systems blame poor health on unbalanced body fluids (Benedict, 2014:52).

2.8.1.3 Emotionalistic

Emotionalist disease theories assume that emotional experience causes illness. For example, Latin Americans may develop *susto* or soul loss, an illness caused by anxiety or fright. The symptoms may include lethargy, vagueness and distraction, loss of appetite and trouble sleeping. Of course, modern psychoanalysis also focuses on the role of emotions in physical and psychological wellbeing.

Susto (soul loss)³⁸ has been extensively studied in its ethno medical, social and psychological context by Rubel, et al (1984). The socio-epidemiological distribution of the illness is higher in women than men, in women with children than childless and in people subjected to significant levels of social stress. A case in point, seven years after the original study of comparing people who had suffered from *susto* with a control group method for age, gender and ethnicity, seventeen percent of the *susto* sufferers had died, whereas there was no mortality in the control group. This proves that the biological consequence of a folk illness can be severe.

³⁷ Today's western medicine is undertaking research based on DNA of an individual to order tablet. This is result of finding that every single person is different in his/her DNA formation that tablet ordered for x should be different from y by working on individual DNA "introduced advances being made in gene based treatment and personalized medicine and their promise to treat every patient individually and effectively, advancing the effectiveness of drugs in the years to come." (This information is from Professor Tsge Gebremariam presentation organized by Ethiopian Academy of sciences titled 'Drug development: past, present and future, January 05, 2017).

³⁸ A Syndrome and its Meaning: On Technological Catastrophe: *Susto*, A Folk Illness), Arthur J. Ruble's research while affiliated with University of California.

2.9 Theoretical Orientations in Medical Anthropology

2.9.1 Environmental (Ecological) Theory

The ecological approach in medical anthropology focuses on how human cultural and behavioral patterns shape the complex interaction of the pathogen, the environment, and the human host. It produces both infectious and non-infectious disease. Anthropologists use an ecological perspective as biological as well as cultural entities. Culture is seen as one resource responding to environmental problems, and genetic and physiological processes carry equal weight. The evolution, demography and epidemiology of humans are subject to ecological forces, as are other species.

An anthropologist interested in ecological approach is concerned on how factors of biology, culture and environmental pressure influence the process or distribution of disease. Basically, the root source of ecological orientation was essentially a ‘ scientific revolution’ in the evolutionary biology that erupted along a broad front of biological disciplines during the 1940s and laid the necessary theoretical foundations of dealing with human evolution and adaptation as a complex interaction of cultural and biological factors under given environmental conditions.

A key concept in medical ecology is adaptation³⁹ and the changes, modifications and variations that increase the chance of survival, reproductive success and general wellbeing. Furthermore, humans are seen as evolutionarily unique, utilizing and transmitting culture as a prime and highly efficient instrument for adapting and controlling their environment. Human adaptation,

³⁹ Is the ability of an individual to conform his interest in line with the outside condition taking in to consideration one’s ability as survival strategy.

always with the reference to given environmental parameter is mutually interactive cultural and biological process. Alland (1970:3) states

“...man changes his environment, often drastically, through the adaptive mechanisms of culture, and this changed environment then acts as a selective agent on man’s physical structure as well as behavior.”

Drawing on the systematic theory of evolution, Alland presented a general statement of interrelatedness of culture, biology, environment and disease and adaptive process.

“In general, the incidence of disease is related to genetic and non-genetic factors. Any change in the behavioral system is likely to have medical consequence, some of which will produce changes in genetic system. On the other hand, disease induced changes in the genetic structure can affect the behavioral system. Such effects may be results of population restructuring or the emergence of new immunological pattern which alter the possibilities for niche exploration. Indeed, induced or natural alterations in the environmental field provide new selective pressures relating to health and disease which must be met through a combination of somatic and non-somatic adaptation” (Alland, 1970).

The ecological model conceptualizes health and disease as measures of effectiveness with which human groups combining biological and cultural resources, adapt to their environment. Humans adapt through genetic change or physiological responses, cultural knowledge and practices and individual coping mechanisms. The premises are: health is an indication of environmental adaptation and disease indicates disequilibrium and the evolution of disease parallels human biological evolution.

The risk of foraging people differs from those agricultural groups and industrial societies; the epidemiological profile of each subsistence type is a function of human relations with the environment and with other species in the ecosystem, especially food source, domesticated animals and pathogen. Scholars agreed that after food production began 10,000 years ago (Burlinam and Dermini, 2010) infectious disease posed a mounting risk and eventually became the foremost cause of human mortality. This happened since cultivation sustains large and denser population and a more sedentary life style than does hunting and gathering. Furthermore, people live closer to each other and to their own wastes, making it easier microbes to survive and find hosts and also domesticated animals transmit disease to people.

Unlike the other models, the ecological approach considers biological variables, viewing health and disease as expressions of dynamic relation between population, and their environment. The ecological approach also used the socio-cultural approach adopted in other models such as ethno medicine.

2.9.2 Ethno-Medical Approach

All societies have medical systems that provide a theory for disease etiology, methods for diagnosis of illness and prescription and curative therapies. First, the initial development of medical anthropology derived from anthropological interest in different illness beliefs and healing practices. That is why; the earliest ethno-medical research was confined to the study of non- western societies and exotic cultures and was generally subsumed under the comparative study of religion. Later, ideas about sickness and therapeutic rituals were analyzed as a window in to underlying cosmological beliefs and cultural values (WHO, 2005:xi).

As the intimate relationship between the concepts of illness and social organization were recognized, ethno-medicine becomes a common focus of ethnographic research. Fabriga (1975) defines this approach as “the study of how members of different cultures think about disease and organize themselves towards medical treatment and the social organization of treatment itself.”

Later, anthropologists began to extend the concept of primitive medicine, among which Ackerknecht, was very important. He has tried to analyze primitive medicine as culturally patterned and functionally interrelated eminent within a configuration. His generalization in the study was; the significant study of medical anthropology is not the single trait but the total cultural configuration of the society and the place that the ‘medical pattern’ occupies within the totality. The part of the medical patterns, like those of entire culture, is functionally interrelated, although the degree of elements at both levels varies from one society to the other. TM must be understood in terms of cultural beliefs and definitions, that is without consideration of epidemiological, environmental or for that matter, material culture factor.

2.9.3 The Political Economic Model

The model emphasizes the Marxist approaches to understanding how macro sociological, political and economic forces influence health and structure health systems. Moreover, it views health issues in light of the larger political and economic forces that pattern human relationship, shape social behavior and condition collective experience. The proponents view culture as the outcome of political and economic circumstances. Furthermore, health or the lack of it and the quality of health care are largely determined by the social competition between groups of people (classes) and the unequal distribution of scarce resource.

Macro level processes such as world capitalism are seen as the dominant forces that shape clinical practice and influence the distribution of disease. Elling (1981) stated that problems in the field of health and health care in developing countries are often linked to the penetration of capitalist economy. He added;

“...the common topic study in the politico-economic perspective is the sale of pharmaceuticals in developing countries. Pharmaceuticals are typically commodities repressing a capitalist mode of production. The primary objective of their distribution is the accumulation of capital rather than the prevention or alleviation of the disease. It is this profit motive which explains why some essential drugs are extremely scarce in particular society while other useless and perhaps even harmful medicines may be dumped there in abundance” (Elling, 1981:93).

Furthermore, recognition of the centrality of political economic dimensions of both sickness and healing, and also the unequal social relationship between healers and patients is the hallmark of this approach.

2.10 Applied Medical Anthropology

Interest in the applied aspect of medical anthropology has been observed since the initiation of the discipline. Theories of cultural patterning of health behavior can be applied in any arena. For instance, anthropologists have working in clinics serving multi-cultural population, especially in maternal and child health programs; on surveys of community responses to environmental hazards, on programs of planning and evaluation in psychiatric hospitals, AIDS prevention projects, and on the re-integration of people with traumatic brain injury. Moreover, the

populations served are often people on the margins of the mainstreaming society; refugee, native people, rural elderly, drug addicts, people with disability, ethnic minorities (Moore et al, 2015).

The difference between basic and applied research is that applied medical anthropology deliberately become advocates for the community, attentively do research that is useful and ethical. Here, the two major branches of work for applied medical anthropology are clinical and public health. On one hand, clinically applied medical anthropology is best known for use of explanatory models to explore conceptual differences between physicians' and the patients' perception of disease and illness. Furthermore, clinically applied anthropologists work in the biomedical settings with health practitioners and the delivery of health care service. Moreover, they are also involved in the training of the future professionals. In sum, without single theoretical proposition, it can be interpreted as anthropological theory and methods devoted to the topics of health, illness and the health care.

Clinical medical anthropological research has a very wide range including the micro level studies of health care choice, illness beliefs, life course events like child birth, or menopause; the examination of cultural influences on health seeking behavior, disease distribution, the experience of the illness, interaction of patient and healers. Point in time, at macro level research on health care systems and their political and context taken in to account. For instance, some clinically applied anthropologists are employed with in hospitals and clinics as cultural mediators and interpreters.

On the public health arena, medical anthropologists are working in the international health project, particularly because of the programmatic emphasis on primary health care and the intervention in nutrition and oral rehydration therapy that require community participation.

Though influenced by Marxist theory and dependency theoretical approach, they try to analyze the impact of global economic system, particularly capitalism on the aspects of local and national health.

Many medical anthropologists interested in public health, analyzed the tension between traditional values and that define national identity and forces of modernization and globalization. For example, Pigg, in her study on HIV education hot line in Nepal, discussed that “While AIDS prevention is welcomed by the state, when in the form of warning about disease that reinforce “proper” conduct within the traditional social hierarchies, it nevertheless become threat to the state’s moral identity when sexual health is addressed broadly and openly”

2.11 Medical Pluralism

Every society has to one degree or another experience multiplicity of medical systems, a situation which may term medical pluralism. It is usually related to the presence of different cultural or ethnic groups within one society, each sticking its own medical tradition. But medical pluralism can also be the result of introduction and acceptance of a foreign tradition in a culture. The presence of bio-medical tradition in societies outside the ‘western’ world is a case in point. Moreover, medical pluralism increases the range of therapeutic choices and thus complicates health seeking behavior (Islam, 2005:9).

When various systems come in to contact they generally exert an influence on each other. For instance, in recent years, traditional healers in some parts of the world incorporated western pharmaceuticals in to their healing practices. Alternatively, in Western Europe some bio-medical doctors have started using an acupuncture technique. (Bodeker, 1997)In addition, there

is nearly always a hierarchical order between the various systems of imposing themselves on weaker ones or repressing them. In many countries, the bio-medical health system has been the official system with other indigenous medical traditions being dismissed as mere quackery. Here, principal healers among the small scale or 'tribal' societies are *shamans*, and their medical system is indistinguishable from their own respective religion.

Medical anthropologists use the term bio-medicine to refer the tradition of scientific biologically oriented method of diagnosis and cure; biomedicine is a relatively recent tradition that is technologically sophisticated and often extremely successful in curing (WHO, 2001:3).

Historically known as allopathic medicine⁴⁰, the knowledge and technology of bio-medicine has grown extremely fast, and with its prestige and professionalization of medical practitioners. One argues that the scientific medical system is international, cosmopolitan and hegemonic but it is not however culture free. The cultural and epistemological assumptions of bio-medical have been studied by medical anthropologists (Rhodes, 1996:235), as have a significant and fascinating national and regional differences in the practice of bio-medicine, especially between European countries and Americans. For instance, documented differences include the interpretation of schizophrenia, or what constitute low blood pressure as well as the rate of styles of surgery practice (Magnussen, 2006).

In behavioral sense, the medical system can be seen as analogy to the socio-economic order. One or more medical traditions are used to produce and distribute medical services and outcomes in a particular community or region but medical practitioners must be trained, patients must seek out

⁴⁰ A system of medical practice that aims to combat disease by use of remedies (as drugs or surgery) producing effects different from or incompatible with those produced by the disease being treated—compare homeopathy |Medical Definition | Merriam-Webster Medical Dictionary|.

their services, healing behavior must be performed in particular fashion and healers must be compensated for their work.

Furthermore, socio-political policies and philosophies vary between contemporary nation states and this undoubtedly influence the practice medicine and access to medical care. When viewed as a cultural system, bio-medicine becomes one ethno-medicine among many others; that is rooted in cultural presupposition and values associated with rules of conduct embedded in larger context. Here, there is little doubt that the ‘belief’ of patients and family in the healer and the power of the medicine play a fundamental role in the process of healing. All medical systems manipulate symbols to invoke and enhance belief in this regard; all medical systems involve symbolic healing process (sometimes labeled as placebo effect- a type of treatment with no biological effect, rather psychological) (Srinivasani, 2008).

A placebo is an inert substance (often a sugar pill), having no pharmacological property; it is given by a doctor to a patient to help often please the patient (hence the term *placebo*, ‘I shall please’ from Latin). Furthermore, the placebo is not a substance at all. It may be surgery, or a regime of behavior, including diet and physical exercise, or elaborate (and expensive) diagnostic procedure that the patient insists upon having (the patient considers them therapy). In short, a placebo is anything prescribed by a doctor or a healer that the doctor or healer believes has no medical effect on the condition from which the patient suffers (or complains). Here, the placebo effect is the resulting improvement in the patient. Furthermore, conditions for which placebo can often mimic the relief include ‘cough, mood changes, headache, sea sickness, anxiety, hypertension, depression and common cold’.

A well-known example of the placebo effect is the treatment of warts. For instance, when a doctor paints warts with colored dye and tells the patient that the wart will disappear as the dye fades, the therapy is as effective as any other procedure including surgical removal. This shows us that the modern medical procedures (like procedures in other medical cultures) have ritualistic and symbolic aspects that contribute their efficiency (Srinivasani, 2008: 19).

Medical anthropologists have attempted to typologize medical systems cross-culturally. Foster (1976) distinguishes between 'personalistic' and 'naturalistic' medical systems based on the predominant theory of disease causation. In personalistic system, illness results from individual situations resulting from sorcery or retribution by spirit. In naturalistic system, illness is the result of some imbalance in normal physiological process, as in humoral system, when the surfeit of bodily fluids causes disease symptoms.

A medical system can be understood as a social system consisting of organizational roles in institutional structure embedded within a larger social system. Here, the two most important roles are the healer and the patient. As healers, the *shamans* are usually independent and idiosyncratic⁴¹; typically they use trances to communicate with the spirit world to arrive at diagnosis.

On the other hand, in more complex societies medical roles are usually specialized. Furthermore, bi-medical systems are characterized by high levels of specialization and a hierarchy or prestige between specialists. For example, the socio-political process of professionalization has been studied by medical anthropologists. Last (1996) identified three levels of professionalization

⁴¹ Means something unique to an individual. Albert Einstein famously had lots of *idiosyncratic* habits. For example, he rarely wore socks, and he talked to his cat. (Dictionary Definition: Vocabulary.com, accession date 12-2-2018)

conventional bio-medical profession privileged by every contemporary state, professions of alternative medicine (e.g. homeopathy, cowpuncher, chiropractic) which are often recognized by governments and maintain a formal system of therapy taught at special college, the emerging process of professionalization of traditional medicine by amalgamating the diverse group of local practitioners for obtaining government recognition, which has been occurring in the third world. In addition, the relationship between the diverse professions in the medically pluralistic society is important, but it is the health seeking behavior of patients (the hierarchy of curative resort) that drives the overall medical system.

The professionalization and utilization of traditional medical practitioners is an important topic because of the serious health personnel shortage faced by many nations. The patient's role in the medical system involves the sick role, a concept developed by Parson (1951). The idea is a person taking sick role is temporarily exempt from normative behavior and instead expected to enact certain patient roles; to obey the doctor, gradually decrease the dependence on doctor's care and get well, there by resuming normative roles and behavior.

2.12 Health Seeking Behavior

Health seeking behavior is probably the topic most studied in medical anthropology. For instance, in every contemporary society a wide variety of health care options exist, a situation we earlier referred as medical pluralism. Moreover, on the major issues of health seeking behavior is the strategies people employ to decide which option to use at which stage of illness, which specifically called as pattern of resort.

Policy makers and health workers have often been puzzled by people's seemingly "irrational" decisions in their search for therapy. In the past, people in non-western societies were often as passive followers of traditional cultural practices in health care and other behaviors. These cultural beliefs and practices were seen as constraints on the utilization of western style health services.

In contrast, contemporary medical anthropologists use the concept of adaptation to focus attention on people as active, rational decision makers who select from a range of alternatives behaviors, depending on their knowledge, resource and other factors. As (Foster and Anderson, 1978:103) pointed out, under use of existing medical services is often not the result of indigenous beliefs of resistance to western medicine, but is rather explained by a cost and availability of those services. Here, people are remarkably hardheaded in testing and evaluating health care alternatives. The outcome of individual decision making process is to a large extent the result of cost-benefit analysis; not only economic but also in social terms. For the same reason, curative medical services are often embraced more readily than preventive services. Furthermore, people are also very flexible in reconciling indigenous beliefs with modern western beliefs with modern western treatment option such as pharmaceuticals. The idea is western and traditional medicines are often seen not as competitive, but complementary.

Anthropologists in this field have developed several models to study the health seeking behavior. There is a wide range in theoretical perspectives along the continuum between; materialist/economist orientation and cultural beliefs/symbolic patterns view of behavioral causality. On one hand, some authors take accessibility of service as a main criterion for people's choice. Here, accessibility has to be understood in its geographical, economic, and socio-cultural sense. On the other hand, others try to correlate choice with quality of patients (example age,

gender, education, ethnicity, access to new information), of the practitioners (example type of specialization) and illness itself (example natural or super natural cause; explanatory models).

Kleinman (1981) sees therapeutic choice as the outcome of a sequence of transition. For instance, his study in Taiwan disclosed two major patterns in health seeking behavior. Almost all episodes of illness were at first self-treated often with the family network. If this didn't produce symptomatic relief, recourse was made to family members, neighbors, pharmacist or other professional or folk practitioners. Simultaneous resort occurred when several treatments options were used at the same time, usually in the case of serious childhood sickness. According to Kleinman, the type and severity of the symptoms the course of illness, the labels of etiology attached to it (explanatory models) play an important role in determine health care seeking behavior, as do other factors such as- socio-economic status, age, sex, educational level, family role, urban rural setting, availability of service. Furthermore, the importance of explanatory model and the disease etiologies in therapy choice has been demonstrated in many studies. Folk illness of the sunken fontanelle⁴² often not labeled as serious complication of diarrhea, but is seen as a specific childhood disorder that requires traditional therapy. Consequently, children suffering from this condition are not brought to a medical doctor but to a traditional birth attendant.

In sum, the main anthropological contribution to the study of health seeking behavior lies in ethnography. Here, anthropologists focus on the micro-level factors that affect household decision making has led to the consideration of intra-cultural and intra-community factors.

⁴² A folk illness described in Latino infants-mollera (head, crown), caida (fallen)-who are fussy, do not feed well or have diarrhea, which corresponds to sunken fontanelles, a sign of dehydration. (Definition of sunken fontanelle by Medical dictionary).

Furthermore, these factors made behavior intelligible by describing both the context in which people reach their decision and by clarifying the rationality of these decisions. Anthropologists are reluctant to predict people's health seeking behavior as health planners sometimes wish them to. Moreover, their description of the context of emic⁴³ rationality of people's therapeutic choices may encourage health workers to adopt more positive appreciation of the low utilization of health service. Having more respect to patients' view undoubtedly also improves the quality of their service.

2.13 Characterization of the Distribution of Disease

Epidemiology is a branch of medical anthropology concerned with the factors that determine the frequency, distribution and control of disease in societies. On a worldwide basis, the leading categories of that people die from are cardiovascular (disease connected with heart and blood vessels), respiratory, infectious and parasitic, and cancerous types. If we compare more developed western societies with the poorer third world societies, we find significant difference in the relative frequencies of these types of diseases.

In developed western societies, cardiovascular diseases remain the number one killers; the number two spot is held by cancer, with communicable disease being relatively insignificant. By contrast, communicable diseases are of considerable significance in third world countries (WHO 2010).

⁴³ Pertaining to expressions, perceptions, beliefs, and practices that are specific to a given cultural system; an emic view of a cultural system is a description from the perspective of the participant in the system, rather than that of the observer. (Medical Anthropology Dictionary).

But even among developed societies, there are marked differences. For instance, Scotland and Finland have a highest mortality rates from heart disease (over 700 and 600 deaths respectively per 100,000 populations per year), the figure for France is just over 150 and for Japan only around 50. Smoking, high blood pressure and high cholesterol level are often cited as major causes of heart disease. Thus, epidemiologists compared the smoking and dietary habits of populations and measured the extent to which they are related to differing levels of heart disease which they found it and extremely important factor. They also need to study the complex set of cultural, psychological variables to be able to interpret the different rates of death from heart disease (Statistics Finland⁴⁴, 2014).

Epidemiological patterns also are related to gender and age. For example, looking at mortality from heart disease, in the United States and Canada, while the rate of men is excess of 300 deaths per 100,000 populations a year, for women is only 100. In terms of age, heart disease is primarily a killer of adults. The epidemiological picture for children is different. Diarrhea is the leading cause of death among children worldwide (some 5 million a year), while it is responsible for few adult deaths (World Bank, 2006).

Many of disease related deaths in the third world⁴⁵ can be linked to poverty and poor sanitary conditions. There are also some pathological conditions which are based on unanticipated consequences of implementation of development schemes. Huges and Hunter (1972) coined the term “diseases of development” for such pathogens. Such diseases can be divided in to two broad categories. 1. Diseases that result from integration into large scale industrial societies such

⁴⁴ https://www.stat.fi/til/vaerak/2014/vaerak_2014_2015-03-27_tie_001_en.html.

⁴⁵ Was originally defined those states that didn't involve themselves in the cold war conflict of ideologies. This loose conglomeration of countries included most of Africa, almost all of Central and South America, most of the Baltic States and the Middle East, most of the southern Asian countries from Afghanistan to Thailand as well as most of the island nations between Australia and southern Asia. These varied states included rich and poor nations and also communist and capitalist nations. (study.com, accessed 16 October 2015).

as diabetes, obesity, and hypertension and 2. Consumption of imported food with less nutritional values and characterized by high in sugar and salt content which causes obesity which is precipitating factor in adult for diabetes. If neglected, diabetes can result in complications as a reparatory problem, blindness and gangrene and the second category includes the disease that result from poverty, under nourishment, and poor sanitation reflecting failure of developmental programs to integrate people in to large scale societies in a satisfactory manner.

2.14 Mental Illness

All people recognize illnesses that take the form of mental states perceived as abnormal. Moreover, mental illness includes disorders caused by physiological conditions as well as those caused by unsatisfactory adaptation to socio-cultural conditions at an individual level. In the latter case, mental illness is associated with stress in coping with the environment. Stress is a feature of life in all societies. It may result from such natural events as earth quack or volcanic eruption, or it may be induced intentionally, as a torture. It may also be a “normal” part of the life cycle, such as stresses caused by birth, death, marriage and the like. Beyond this, there are stresses that arise from the nature of our society. Those caused by commuting, unemployment and over work, which all are somehow universal.

There are also stresses that are unique to a specific culture and society. They result from a particular environment and cultural tradition. Among which Arctic hysteria is common among the Eskimo. Arctic hysteria⁴⁶ is marked by a period of silence followed by seizure, in which the

⁴⁶ Arctic explorers and adventurers returned from expeditions with many romanticized versions of native life which often included tales of how Eskimos behaved when they became upset. Their descriptions of Eskimos having bizarre tantrums reminded many of the hysterical fits so commonly observed among psychiatric patients studied by Freud and his

individual typically tears off his/her clothing, takes flight and run about the snow. Many believe it is associated with the weather condition of the area. The other is 'Koro' common among the Chinese that the fear that the penis or breast and valve will withdraw in to the body (Geertz, 1973).

In many part of the world, rapid social change is found to be a primary source of stress. Often such a stress is temporarily, but it may be sufficient to cause severe mental disorder. For instance, migration commonly results in considerable stress. In early study, Mead (1947:295) pointed that migrants are frequently culturally disoriented as subject to special strains; at the same time they are without the accustomed means of reducing tensions.

Migration and other forms of rapid social change can result in a state of *anomie*, a disorganization of personality and a feeling of alienation. Durkheim, in his famous study of "Suicide" described anomie as a resulting from the abandonment of community goals of the social rules of reaching them. In small scale closely knit rural community, people's lives are tending to be highly organized and closely regulated. There are constraints, but there is also a sense of security. Movement to the city may liberate a person from many of the constraints of rural life, but suddenly the individual is faced with living in a very unfamiliar environment, with no sure way of finding happiness in this new setting. So, the psychological consequences often are great including suicide.

colleagues at the turn of the century. Foulks E.F. (1985). The Transformation of *Arctic Hysteria*. In: Simons R.C., Hughes C.C. (Eds.) the Culture-Bound Syndromes. Culture, Illness, and Healing (Studies in Comparative Cross-Cultural Research), vol. 7. Springer, Dordrecht

CHAPTER THREE

Survey of Ethiopian Medicinal Manuscripts

3.1 History and Distribution of Medicinal Manuscripts in Ethiopia

3.1.1 Brief History of Ethiopic Manuscripts

Ethiopia is one of the few countries with rich sources of written documents. According to Bausi, the practice of writing was adopted by the Semites who settled in the area between the Northern highlands of the Horn of Africa and the Red Sea, corresponding to the present day Eritrea and Ethiopia. At that time, inscriptions were written in non- vocalized Ethiopic script and there is similarity between Ethiopic⁴⁷ language in fourth century and language and scripts used later. Bausi (2015:367) claims that Abba *Gärima*’s four gospels⁴⁸ are the earliest manuscripts. *Ge’ez* assumed to have an ancestry in the old south Arabian Semitic language which was further developed in the northern Tigray of modern Ethiopia. It later developed to be the official language of the kingdom of Aksum and the Ethiopian imperial court (Munro-Hay, 2002).

Two parchment codices, the manuscript Abba *Gärima* Four Gospels, recently dated to 6thc CE at the latest by radiocarbon dating, are believed to be the earliest surviving Ethiopic manuscripts. (Bausi, 2015:48)

⁴⁷ It is unclear that from where the alternative name has been introduced. May be it was given by western explorers who first introduced it and its writings to their western world as ‘Ethiopic’ after having come across it in Ethiopia.

⁴⁸ Abba *Gärima* Gospel I (530-660), Abba *Gärima* Gospel II and Abba *Gärima* Gospel III (390-570).

The second oldest manuscript was discovered by Erho⁴⁹ who was a researcher at Durham University; he has identified an Old Testament book from Hill Museum and library (EMML 6977).

According to Bausi (2015), taking into consideration factors; such as lack of systematic inventory of monastic libraries and location of manuscripts (most housed in rural parts of the country), it is difficult to know the exact number of manuscripts in Ethiopia. He put a rough estimate of 200,000, excluding scrolls.

The rough estimate of 200,000 extant manuscripts in codex form is based on the assumption that the minimum number of manuscripts necessary for every church for religious services amount to a few dozen (Bausi, 2015:48).

This researcher argues that the number of manuscripts is higher than the number estimated by Bausi. As a senior heritage inventory expert at ARCCH, the researcher had witnessed the number of manuscripts in a single church or monastery to be above 150⁵⁰. When the keeper of the library *Iqabet* was willing, the probability to register more manuscript was even higher. This shows the number Bausi put is very small compared to what actually may be available.

⁴⁹ A postgraduate student in the Department of Theology and Religion made the find while examining microfilms of classical Ethiopic (Ge'ez) manuscripts. The microfilms are stored at the Hill Museum and Manuscript Library (HMML) in the USA. The original document is still stored in Ethiopia. The identified manuscript, called EMML 6977, contains the books of Job and Daniel, as well as two homilies and a monastic inventory list, and dates back more than seven hundred fifty years before the Solomonic period in Ethiopia, which began in 1270 AD (Durham University News, March 2, 2011, accession date 7/28/2017).

⁵⁰ Wosenseged Kidane (2014). Inventorying Arabic and Ethiopic manuscripts: In the case of ARCCH, Addis Ababa.

With regard to dating, the majority of the manuscripts do not antedate the 17th century. In the mid-16th century, Muslim occupation has inflicted damage on Ethiopic manuscripts (Bausi 2105:48). During the Italo-Ethiopian war (1935-41), approximately 2000 churches were destroyed. The old practices of manuscript production still exist in Ethiopia. The researcher had witnessed the production of manuscripts in North Gonder at a place called *Ḥste*⁵¹ which shows the continuity of the practice.

It is believed that thousands of manuscripts have been produced in Ethiopia. The productions of manuscripts have been confined to the church and monasteries. In addition to natural disasters, manuscripts have been targeted during wars in the country. The wars in 9th⁵² and 16th⁵³ centuries were the most destructive of all. Manuscripts were also looted, stolen and sold. According to Pankhurst, there are about 5000 Ethiopian manuscripts currently owned outside of Ethiopia (Pankhurst, 2013).

3.1.2 Ethiopic Medicinal Manuscripts

Ethiopian written documents have different genre such as medical, historical, religious, musical, literature. Compared to other manuscripts, medicinal manuscripts are very few in number and not well studied. Traditional pharmacopoeias or magico-religious manuscripts, according to estimates of historians, date back to the fifteenth century. The manuscripts were written either in *Gə'əz* or Amharic or both. A substantial body of the knowledge on indigenous health care

⁵¹ Is found in Amhara regional state in Gonder, particularly in North Gonder.

⁵² Queen Judith (849-897 BC) led the country for fourteen years and destroyed what has been built for four centuries.

⁵³ Invasion of Ahmed Ibin Ibrahim Al Ghazi (Ahmed Gragne) period was the most destructive period in the history of the Ethiopian Christian kingdom.

delivery system in Ethiopia is largely of an oral nature; and a closed secret; mostly to be communicated to the initiated disciple after a period of apprenticeship (Dawit, et al, 2003).

Traditional medical practitioners of Ethiopia are categorized into four groups. The first is herbalists (*Qəṭal bāṭašə*); who use various plant species for treatment of different diseases. They are further classified in to five categories; Herbal medicine gatherer (*Mädəhanit qorač*) who gives medicine to their clients with no definite dosage and most of the time shared or crumble their botanicals before giving them so that the client would be unable to recognize them when coming across the plant in the field. Herbal medicine preparer (*Mädəhanit 'Aṭäč*) give the client fully processed medicaments, generally in the form of an infusion together with the necessary information for administering them. The expert herbalist (*Mädəhanit 'Awaqi*) performs all pharmaceuticals preparations and supervises the application of remedies and follows the treatment. Makers of amulets (*Kətab kättabi*) prepare amulets containing different herbs. The amulets are prepared with the knowledge that they protect the client against infectious agents or against a relapse. The medicine applier (*Mädəhanit qäbbi*) applies lotions and ointments to people suffering from skin diseases. The second group called Chirurgeons who are bone settlers, uvula and tonsil cutters, tooth extractors, etc. The third group named spiritual healers are of two types those who use supernatural power or spirit of the divine (religious institutions) and those who get the power of healing from privileged access to demons. The last category includes mid wives, cuppers and tattooists (Dawit, 1996:5).

Ethiopian traditional system of medicine for the most part was based on oral tradition but later documented. The titles of most Ethiopian manuscripts contain the words “*Mädəhanit*”

(medicine) and “*Ἱፃፅ*” (plant). Etymologically, the word “*Mädəhanit*” is derived from the *Gə’əz* word; and the meaning incorporates any force which has a power of saving from spiritual (psychological), material (physical), visible and invisible enemies, bodily disease, and mental depressions (Alemayehu, 1984). The word *እፅ* “*Ἱፃፅ*” or *እፅዋት* “*Ἱፃፅwat*” get its root from the *Gə’əz* word and this means any plant which has a form of grass, bush or tree (Ethiopian Languages Research Institute, 1993).

Ethiopian medicinal manuscripts are not adequately studied. Only few scholars from Ethiopia and abroad have contributed to the research area. Plant medicine was the only available resource for the health of the society. The appearance of a structured system of knowledge involves pre-service training, experiment and apprenticeship.

From the scientific perspective, several works have been published on Ethiopian medicinal manuscripts and medicinal plants. Dawit and Ahadu recorded the pharmacological attributes of Ethiopian medicinal plants. The authors give a partial list of prescriptions with remarks on their pharmacological activities and active ingredients of the herbs of medicinal importance. They also state that there are enigmatic (mystical) practices and procedures documented in the Ethiopian manuscripts which do not seem to have an influence on the potency of some of the remedies prescribed for certain disorders. However, they argued that “the physiological action of a plant is closely related not only in the way it is prepared or administered, nor indeed the plant alone. But it is also attributed to the way it is first procured from nature” (Dawit & Ahadu, 1993:4).

Fasil and Getachew (1996) describe in depth the potential of Ethiopian flora in the health care delivery system of Ethiopia in particular, and the world in general. They recommend exploration and survey of medicinal plants which should include: survey of the existing information on medicinal plants and the associated indigenous knowledge, exploration and collection of medicinal plants in areas affected by genetic erosion and in areas with rich genetic diversity by involving traditional healers, elders, taxonomists, ethno botanists, ethno pharmacologists, ecologists and sociologists, documentation of indigenous knowledge in collaboration with local healers, elders etc. At this juncture one thing they fail to incorporate is the discipline philology, which is crucial for the study of medicinal manuscripts in Ethiopia (Fasil, 1996:49).

Among important works on medicinal plants and medico-magic manuscripts are included *Zämänfäs Qədus 'äbərhä* (1952) እጽ ደብዳቤ ('*Īṣä Däbdabbe*), '*äbäbä Garäd* (1966) Book of medicine from *Bägemädär çlga, Gərazmačə Gäbräwäld 'Arägahəñə Zä Däga Damot* (Tshai, 1971), እጽ ደብዳቤ ('*Īṣä Däbdabbe*) (*Gälahun*, 1976), መጽሐፈ ፈጣሪ (*Mäṣḥafä Fäws*) (መሪራስ አማን፣ 2007) ፣ Traditional Ethiopian Medicine (አለማሁ፣ 1984).

The first official Amharic textbook of medicine was written by in 1896 Peter Schusev, a Russian medical student; who was attached to the Russian Red Cross Mission. It is the first modern textbook in Amharic, which paved the way for further publication in the area. In its twenty two pages, it discussed the main types of diseases (scabies, trachoma, wounds, and tape worm, complaints of stomach, malaria, syphilis, dislocation and gonorrhea), their causes; and possible cures (Pankhurst & Pethic, 1990). Scholars attempted to analyze and edit Ethiopian manuscripts from philological, pharmacologic and pharmacognostic perspectives. A recent completed

doctoral dissertation titled ‘Ethiopian Abannät manuscripts: Organizational Structure, Language use, and Orality’ under the graduate school of CSMC. Professor Dan Leven’s project of the Southampton University centered on the connection between Ethiopian and Jewish culture of magic texts. No works are available so far on the Ethiopian text of *’Āṣä Däbddabe* from medico-anthropological and philological perspectives.

3.1.3 Ethiopic medicinal manuscripts codicology

Codicology⁵⁴ is the study of the codex in its structural aspects, from the material components up to the production techniques. It can be called also ‘archaeology of manuscript’. It deals with the main differences between the structure and the material of ‘codex’ (*codex*) and ‘scroll’ (*volumen*), parchment and paper. The size and the dimensions of the codex (in Ethiopia from 10-12 cm up to 40-45 cm of height), the structure of the folders, binding and number of columns.

Except extensive use of papyrus, all codicological features are visible in Ethiopian manuscripts tradition. According to Bausi (2015), in Ethiopia manuscript tradition papyrus is rarely used as shown in *’Abba Gärima* Gospel books (Bausi 2015:154). As far as manuscript production in Ethiopia is concerned, goat skin is widely used instead of sheep skin. The reason for the preference of goat skin is for its solidity and thickness. Skins from cows, horses and antelopes have also been used as materials for writing, although considered as impure. The amount of goat skins used to prepare manuscripts varies depending on the type, size and number of columns of the book, size of the book. The most typical book-type of the Mazmure Dawit ‘Psalms of David’ required 20 to 30 goat skins, a gospel 30 to 50 (Bausi, 2015:154).

⁵⁴ Class Lecture given by Gianfrancisco Lusini at Addis Ababa University (30 January 2018)

According to Bausi, at the end of the 19th century, there was a tradition of arranging the number of animals for copy of a book “...the scribes of the imperial scriptorium newly established by Menelik II...received the number of animals needed for the copy of a given book, sharing the meat with the neighbors who helped them to make the parchment” (Bausi, 2015:159). But nowadays the scribes themselves prepare the parchment.

In Ethiopic manuscript tradition, use of paper was very rare “with the exception of Islamic manuscripts, this (paper) material was not used to any extent in Ethiopia before the twentieth century” (Bausi, 2015:155). The case for medicinal manuscripts varies because in addition to parchment, medicinal manuscripts were written on paper which shows its unique character.

3.1.4 Pigment and dyes

Use of inks in medicinal manuscripts is basically the same in terms of quality and color use as mentioned by Bausi. In terms of quality, inks and colors used for writing, drawing, and painting magical scrolls are treated as magical and healing remedies, their inks are mixed with several additional substances that are determined in the meeting between the customer and the talisman maker (Bausi, 2015:157).

He also mentioned the so called ‘the seven colors’ which contains the juices of the medicinal plants and other sources. Red ink is widely used in the making of medicinal manuscripts in Ethiopian tradition. White symbolizes light, black cursing and enchantment; red symbolizes fire, flames, the sun, the trinity and also the blood of Christ (Mercier, 1992:150).

Medicinal manuscripts are usually written in one column with frequent interruption by talismanic pictures “an important category, as yet insufficiently surveyed is represented by older hymnology manuscript, which sometimes also include portion of liturgy and daily office prayer or poetic composition. Codices with ‘protective’ texts were frequently laid out in one column (in some of them for example *Mäftəhe Səray*, the writing is frequently interrupted by numerous talismanic pictures)” (Bausi, 2015:164).

Unlike other manuscripts, medicinal manuscripts were written on demand (especially magic scrolls). The practitioners sold medicinal manuscripts to support themselves and their families. The society categorized the practitioners as belong to low social class along with blacksmith, tailors and carpenters (Bausi, 2015:169).

3.1.5 Ethiopic Medicinal Manuscripts Paleography

Paleography⁵⁵ (from Greek *παλαιός* «old» and *γράφω* «to write») is the study of the features and of the diachronic⁵⁶ development of the writing aimed to establish a correlation between the shape of the characters and the age of the manuscripts.

As far as the earliest evidence of the Ethiopic language is concerned, there exist a few inscriptions dating to the second or third centuries (Bausi, 2015:287). According to Bausi, the vocalization system was probably adopted following an Indian syllabic script.

⁵⁵ Class lecture by Gianfrancisco Lusini at Addis Ababa University (January 30, 2018)

⁵⁶ The study of linguistic development through time (Evans B. (2008). Synchronic and diachronic explanation, PhD workshop, 13 March 2008).

...is tangible evidence of South – Asian influences in the area in ancient times. It is the only syllaby used by a Semitic language (Bausi, 2015:287).

In the Aksumite period, the use of Greek alphabet and language is shown as evidence by a series of royal inscriptions and legends on coins (Bausi, 2015).

The Greek script might be responsible for the left- to right writing direction of the Ethiopic script, and Greek capital letter were used since then to write the numerals (Bausi, 2015:287).

The Ethiopic script belongs to south Semitic branch (Bausi, 2015). Compared to the Sabeian language, Ethiopic scripts are more rounded whereas Sabeian scripts are more monumental. Ethiopic scripts with its periods and general features classified into seven Uhlig, 1988⁵⁷; Uhlig (1990). The first period is called monumental script. The period is characterized by inscriptions with very regular shape. The portions are tall and slender, with some strictness and rigidity. Examples are two *'Abba Gärima* Gospel (4th- 6th c) and Aksumite collections. The second period lies between second half of the 14th century to mid-14th century. In this period, the script shows more variability and appears less monumental and somehow irregular in size. The other basic feature is departure from monumentality and became wider and more rounded (Bausi, 2015:289). The third period is that of round script; which lies the period between mid-15th c to mid-16th c. there was a deliberate a deliberate standardization and regularity. The letters became rounded

⁵⁷ Uhlig, S. 1988. Äthiopische Paläographie, Äth For, 22 (Stuttgart: F. Steiner, 1988).

and wider. The fourth period was that of compressed slender scripts. The letters became smaller and taller and broadly spaced. The lines were even and dense. The fifth was that of *gulḥə* script between mid-17th c to second half of 18th c; the period was characterized by the most elegant script which is evenly shaped and clear. A good example of this period is the Gonderine kingdom manuscripts (1632-1769), sometimes known as the script of Kings. The sixth script period of *räqiq* occurred during mid-17th c to mid-19th c and is characterized by smaller size and less regularity without punctuation. The seventh script period called bulky and cursive script; comprises 19th c and 20th c manuscripts. During this period, characters of different periods gradually disappeared.

3.1.6 Description of used medicinal manuscripts

The primary sources are the manuscripts *’Īṣä Däbdabbe* and *Mäṣḥafä Mädaḥanit*. In this section physical and content descriptions of the manuscripts are presented. The following manuscripts were used for the study.

Manuscript (A): *’Īṣä Däbdabbe* – Traditional Medicine, Addis Ababa, NALA (No. 6816)

Number: 6816

Pages: 165

Page Folium Number: (ff. 367 – 523)

Size in cm: 15x30

Writing support: Microfilm

Ruling and Pricking: Ruling and pricking very visible

Hand: the same hand throughout

Rubrication: No

Date: 20th century

State of preservation: Microfilm

Peculiarities: In some pages there exist drawings; which look like a cross and a man with horn.

Property: Belongs to Girma Elias

Column: 1

Folios: 19

Material: Paper

Province: Addis Ababa

Language: *Ge'ez* and Amharic

Writings: Bold and neat, the readings are rubricated

ḥaräg or decoration: No

Manuscript (B): 'Eṣä Däbdabbe, Addis Ababa, NALA (NO. 713)

Number: 713

Pages: 50

Page Folium Number: (ff. 223)

Size in cm: 15x 7.5

Writing support: Hard cover

Ruling and Pricking: Ruling and pricking very visible

Hand: The same hand throughout

Rubrication: No

Date: 1975

State of preservation: Well preserved at NALA.

Peculiarities: In some pages there exist drawing; which looks like a cross, a man with horn.

Property: Fikade Selassie Tefera

Column: 1

Folios: 223

Material: Paper

Province: Addis Ababa

Language: *Ge'ez* and Amharic

Writings: Bold and neat, the readings are rubricated

ḥaräg or decoration: No

Belongs to: NALA

Manuscript (C): 'Eṣä Däbdabbe, Addis Ababa, NALA (No. 492)

Number: NALA 492

Pages: 153

Page Folium Number: (ff. 167)

Size in cm: 15x7.5

Writing support: Hard cover

Ruling and Pricking: No

Hand: the same hand throughout the text

Rubrication: No

Date: 1975

State of preservation: Well preserved in NALA.

Peculiarities: In some pages there exist drawings; which look like a cross, a man with horn.

Property: Belongs to Leul Wolde Rufael

Column: 2

Folios: 167

Material: Paper

Province: Gonder

Language: *Ge'ez* and Amharic

Writings: Large and well written

ḥaräg or decoration: No

Stamps: Stamps of King Solomon of Israel.

Pictures: Pictures of different kind like cross, men etc.

Manuscript (D): *Mäṣḥafü Mäḍəhanit*, London, British Museum (Orient. 828.)

Number: Orient 828

Pages: 50

Page Folium Number: (ff. 192)

Size in cm: 30.5x22.2 cm

Writing support: Wood cemented with hide

Ruling and Pricking: Ruling and pricking very visible

Hand: the same hand throughout

Rubrication: No

Date: 19th century

State of preservation: Microfilm

Peculiarities: In some pages there exist drawings; which look like a cross, a man with horn.

Property: Belongs to Wäldä-Giyorgis Wäsän-Sägäd

Column: 3

Folios: 19

Material: Parchment

Province: British, London

Language: *Ge'ez* and Amharic

Writings: Written in vellum, bold and neat and the readings are rubricated.

ḥaräg or decoration: No

Manuscript (E): *Mäṣḥafü Mädaḥanit*, NALA, Addis Ababa (No. 1486)

Number: 1486

Pages: 84

Page Folium Number: (ff. 84)

Size in cm: 33x20cm

Writing support: Microfilm

Ruling and Pricking: Ruling and pricking very visible

Hand: the same hand throughout

Rubrication: No

Date: 20th century

State of preservation: Microfilm

Stamps: 19,849

Peculiarities: In some pages there exist drawings; which looks like a cross, a man with horn.

Property: IES, HSIU

Column: 1

Folios: 19

Material: Paper

Province: Addis Ababa

District: Entoto

Language: Ge'ez

Writings: Bold and neat, the readings are rubricated

ḥaräg or decoration: No

Manuscript (F): *Mäṣḥafü Määdəhanit*, Addis Ababa, NALA (No. 7494)

Number: 7494

Pages: 732, then after translated text from 'French Doctor'

Page Folium Number: (ff. 339)

Size in cm: 16.8x11.6

Writing support: Microfilm

Ruling and Pricking: Ruling and pricking very visible

Hand: the same hand throughout

Rubrication: No

Date: 19th century

State of preservation: Microfilm

Peculiarities: In some pages there exist drawing; which looks like a cross, a man with horn.

Property: Fitawerari Nebeye Leul

Ordered by: Ras Kassa

Column: 2

Material: Paper

Province: Addis Ababa

Language: *Ge'ez* and Amharic

Writings: Small and neat

ḥaräg or decoration: No

Marginal Note: 333a

3.1.7 Geography

The diffusion of Ethiopian medicinal manuscripts in terms of their production, origin and ownership of manuscripts is far-reaching both inside and outside the country. *Gondär* and *Goğam*, from the north and some regions of *Šäwa* such as *Mänz*, from the center were among the prominent places for the training of traditional medicine practitioners and the writing and copying of Ethiopic medicinal manuscripts in *Gə'əz* and Amharic languages. The texts have reached far-reaching places after they were written in these centers through cultural diffusion. In Addis Ababa, for instance, the medicinal texts and medicinal practitioners are those that came

from all over the country. As Pili noted, it is easy to find healers, in Addis Ababa, whose training, methods and background are different: Muslim sheiks, herbalists, traditional bone settlers (Pili, 2009:338).

Ethiopian medicinal manuscripts become available in a number of museums, libraries and universities of the world. The dispersion of the manuscripts is associated with numerous political, diplomatic, historical and socio-economic reasons. Some of the earlier manuscripts available in Europe were a result of diplomatic relationship between the Ethiopian government and the countries. It was common for Ethiopian former political leaders to present animals and manuscripts as a gift. For instance, Emperor Menelik sent gifts to President Theodore Roosevelt through Skinner. The gifts included two lion cubs, a hyena, and two elephants' tusks⁵⁸. Although Ethiopian manuscripts in Ethiopia and abroad are several thousands, the number of Ethiopian medicinal texts is insignificant. Compared to the category of medicinal or medico-magic manuscripts; magic texts are available in a relatively large number.

Medicinal manuscripts in Ethiopia are dispersed all over Ethiopia and outside due to political, diplomatic, historical and socio-economic reasons. For instance, during the reign of King Tewodros II (1855-1868), scholars claim that, he had a vision of collecting Ethiopian manuscripts to establish a manuscript museum at a place called *Mäqdäla*. To realize his vision, he had collected manuscripts from all over the country and stored them in a house at *Mäqdäla*. When dispute erupted with the British 1868⁵⁹, the British came to Ethiopia with an archivist and

⁵⁸ Emperor Menelik sent gifts to President Theodore Roosevelt through Skinner. The gifts included two lion cubs, a hyena, and two elephants' tusks (Getachew, 2009)

⁵⁹The Magedela expedition (1867-68) led by General Robert (Cornelius) Dundas Napier (1810-90) on behalf of the British government against emperor Tewodros (Theodore) II (1818-68) of Ethiopia was the most curious of expedition, curious in its origin, curious in its execution and curious in its aftermath (Matthies V. (2012). The siege of Magedela : the British Empire against the Emperor of Ethiopia, the Princeton press: Markus Wiener Publishers)

looted was here a number of manuscripts which still exist at the British Library⁶⁰ in London which made the British Museum richest in Europe. For instance Pankhurst (IES, 1984), described the content of the *Mäqdäla* collection “...of the many aspects of the collection which are of interest to scholars, perhaps the most significant is its comprehensiveness, for it contains copies of all the major church and secular Ethiopic texts”, this could be taken as an example for Tewodros vision to establish ‘national archive’ at *Mäqdäla*. In Ethiopian church or monastery tradition, it is not common to find comprehensive collection in one locality rather having peculiar manuscript in one church or monastery is taken as a pride and usually belonged to single churches. The British perhaps had prior information prompting them to come along an archivist. According to Pankhurst, the British led by General Robert Napier looted the treasures from *Mäqdäla* and auction was carried out for three days.

The loot from *Mäqdäla*, which included several hundred valuable Ethiopian manuscripts and many other Ethiopian artifacts, both religious and secular, was taken on 15 elephants and nearly 200 mules, from the fortress of *Mäqdäla* to the Dalanta plain (Google, link Ethiopia Website, accessed January 18 2018)

3.1.8 Statistics

The researcher has identified seven medicinal manuscripts mainly from NALA and British library. The manuscripts are categorized into two medicinal manuscripts⁶¹ and ‘*bənät*’⁶² manuscripts.

⁶⁰Is the national library of the United Kingdom and the second largest library in the world by number of items catalogued. It holds over 100 million items from many countries. Is a major research library with items in many languages and in many formats, both print and digital: books manuscripts, journals, newspaper, magazine, sound and music recording, video, play scripts, patents, stamps, database, maps and stamps. The library collection include around 14 million books(British Library website)

3.1.9 Dating of medicinal manuscripts

Dating of Ethiopian medicinal manuscripts has been challenging and hesitant task of philologists and historians who have been researching old texts. Philologists try to determine the date of the manuscripts based on paleographical criteria. However, use of paleography alone does not often provide conclusive answer. The dating of the manuscripts described in several catalogues must, therefore, be considered as being approximate (Strelcyn, 1978: xiii).

We can classify the history of medicinal manuscripts of Ethiopia in to four periods. The first is from 100 BC to 7th century (the Axumite Period (2-4 AD)) where great works of inscriptions and translation from Greek and Arabic were produced. The second period is occurred between 11th to 13th century (period of *'Amdä Šəyon* (1314 – 1344) where religious texts extensively available. The third period is 14th to 15th C (the period of *Zär'ä Ya'qob* (1334 – 1368), at this period translation and original works produced having their theme religion and philosophy. The last period lies 16th to 19th century, the Gondäriäne Period (1632 – 1855) where philosophical, doctrinal and magical writings of both translation and original works has extensively produced (Tadesse, 1972).

⁶¹ By medicinal manuscripts, I mean those manuscripts which entirely discuss about different plant types and the associated disease for cure.

⁶² *'Abənät* manuscripts are those manuscripts which primarily discuss about the magico-medicinal approach. Is attached to pray and herbs are not their main focus of discussion.

3.1.10 Authorship Issues in Ethiopian Manuscripts

The author of a text is not necessary the person who composed that text. There are different kinds of authorship, precursory authorship, executive's authorship, declarative authorship, executive and revisionary authorship. (Fluderik, 2009: 15). The executive author is responsible for the creation of the text. Declarative author is a person who features as author on the title page (nothing to do with producing the text). A precursory authorship is the author of a source that has a decisive influence on a text.

As Ethiopian medico-magic manuscripts are the product of the evolutionary accumulation, collection and compilation of medicinal knowledge that has orally transferred over generations. it includes several authors, practitioners, translators and editors. Only a few of the extant medico-magic manuscripts tell us about their copyists; nevertheless, none of them represents the author of the text. On some recent texts⁶³, we might find names of the author; but it doesn't mean they are the sole author; because part of the text may be reproduced (without acknowledgement) from earlier texts, usually magic scrolls written by somebody else; or the mentioned person may be the author of only a particular part of the whole text.

In some shorter medicinal manuscripts⁶⁴ only one author may be mentioned. However, in longer texts a great number of authors of different collections of magical prayers and medical prescriptions may be named. In the eighteenth century manuscript⁶⁵ for example, *Abba Bantihun*

⁶³ *Ḥṣä Däbdabbe*, Addis Ababa, NALA (No. 492)

⁶⁴ *Abäbbä Garred* was mentioned as the author of a medicinal manuscript edited by Stefan Strelcyn (Strelcyn S. , *Les Medicines du Begamder et du Tchelga* (Ethiopen) d'Abbaba Garr d, 1966)

⁶⁵ *Mäṣḥafä Mädaḥanit* (Orient. 11390)

[F. 9rb], *Bässo* [F.12rc], *Abyud* [F. 14vb], *Loga Näco* [F. 17va], and *Abba Säbhat Lä-Ab* [F. 30rd] are indicated as the co-author (Strelcyn S. , 1978, p. 155).

Another controversy in authorship issues in Ethiopian medicinal manuscripts is on whether these corpus of medico-magic texts have been entirely translated from a foreign language (such as Greek, Hebrew, Arabic and Coptic), or they are the product of indigenous knowledge and skills developed across centuries. In fact, the vast majority of our literary heritage is a work of translation. Based on clues that appearing in the incipit or colophons of some of the medicinal manuscripts, one may assert that Ethiopian medico-magic texts are entirely the translation of foreign works. For instance, the incipit of *Mäṣḥafä Mädəhanit*⁶⁶ tells us: “ዛቲ መጽሐፈ መድኃኒት ዘወጽአት እም ኢየሩሳሌም...” This book of medicine emanates from Jerusalem.... Likewise the nineteenth century manuscript of *Mäṣḥafä Mädəhanit*⁶⁷ gives a clue “መጽሐፈ መድኃኒት ዘአስተጋብዕዎ ጠቢባን ቀደምት ዘወጽአ እም ግብጽ ለህይወት ወለመድኃኒት” This book of medicine compiled by our forefathers, emanates from Egypt for life and medicine (Strelcyn, 1954). In this context, it seems that the texts are translated from Jerusalem or Egypt.

However, this alone cannot be a sufficient reason to make a sound conclusion on the assertion that Ethiopian medicinal manuscripts are entirely works of translation. The nature and textual history of Ethiopian medicinal manuscripts, which is completely different from other genres of Ethiopian literature, signifies the peculiarity of the work. The plants, animals and minerals which are mentioned in Ethiopian medicinal texts are all common to the flora and fauna of Ethiopia. There is a wide variation between the contents and writing style of Ethiopian medicinal

⁶⁶ Orient 828, F.5a

⁶⁷ Cat. No. 114, F. 6vb

manuscripts and foreign medicinal manuscripts. Ethiopian writers had the tradition to attribute their intellectual endeavor to historically great nations⁶⁸ (Greece, Jerusalem,).

Despite this, the presence of foreign (particularly Greek, Syriaic, Hebrew and Coptic) influence, to a lesser or greater extent, in Ethiopic texts is indubitable. Whenever there is cultural interaction, there is always cultural diffusion. Ethiopian medicinal texts may not also be free from this diffusion. The secret names (Asmat) abundantly found in Ethiopic magic texts, for instance, suggest the influence of Greek, Hebrew and Arabic influences (Tsehai, 1971:95).

Ethiopians never translate a text literally; but they add, subtract and adapt the text to fit to their local context (Sumner, 1976). Thus, Ethiopian medicinal manuscripts are not a direct translation of foreign works. But they are basically peculiar; they adapt and assimilate the knowledge acquired from other cultures and texts to fit to their local context.

With regard to the issue of authorship of medicinal manuscripts, many of them have been attributed to communal authorship. Few were documented as belonging to particular practitioners. Yet, some are attributed to Biblical and historical giant figures. Few manuscripts were a result of systematic and adaptive translations of foreign works.

3.1.11 Manuscripts Abroad

According to Bausi (2015) the four largest collections of Ethiopian manuscripts in Europe as far are found in Bibliotheca Apostolica Vaticana, the bibliothèqued'Etat de France, the British Library and the staatsbibliothekpreuBischerkulturbvesity, Orientabteilung, in Berlin. The largest

⁶⁸When describing this tradition, Tamirat put it as “ይህም ከወገን ለጊዜው የበለጠ መስሎ የታየውን እየመረጡ ወገኔ ነው ማለት፤ የዛሬ ሳሆን የጥንት፤ የኛ ብቻ ሳሆን በሁሉም የደረሰና ታሪክ ተመርምሮ ወሬው ትክክለኛ አለመሆኑ ሲታይ የሚቀር ነው” The tradition of making a great nation of the time as one’s ancestor is not only today’s fashion but of yesterday; not only ours but also every culture; but will be dismissed when disproved the claim (Tamrat, 1997).

collection of Ethiopian scrolls in catalogued and printed forms is found in the Vatican with 1,052 Mss. Bibliothekenationale de France, British Library, Staatsbibliothek in Berlin each has 1000, 624 and 328 Mss. Ethiopian manuscripts respectively (Bausi, 2015:48).

3.1.12 Europe and North America

In Europe and North America institutions also there are Ethiopian collections. The manuscripts are found in cities: Manchester, Oxford, Frankfurt, Munich, Moscow, Uppsala, Oslo, Milan and Roma to name a few. In Jerusalem, there are more than 800 Mss. at monasteries of Debre Gannat and Dayr al Sultan. The EMLL at Hill Museum and Manuscript library at Collegeville, Minnesota has the largest printed collection of Ethiopian manuscripts (Bausi, 2015:49).

In addition, the University of Toronto has been working on EMIP (The Ethiopian Manuscript Imaging Project) since 2005. Last but not least the University of Hamburg through a project called Ethio-SPaRe has acquired digital image of 2000 Ethiopic manuscripts.

Ethiopian manuscripts were scattered in Europe, Middle East and North America (USA) and Canada. various projects are underway to catalogue, digitize and research these scattered manuscripts either by individual initiatives or through projects related to universities.

3.1.13 Overview of Ethiopian policy towards traditional medicine

The first proclamation on the legalization of traditional medicine practice and practitioners was ratified in 1942 under Proclamation Number 27. The main aim of this Proclamation was to

permit practitioners get listed. In the interim, Proclamation Number 100 of the 1948 was enacted reaffirm the 1942 principles but this later put the burden on practitioners not to use system of therapeutics that are dangerous to life (Asrat, 1990). The registration and granting of license to practitioners started in the 1950s, but the process was so complex for candidates were secretive and the medicines received were compounded. In the 1970s and 1980s, the *Dergue* gave official attention towards the promotion and development of traditional medicine. As a result, in November 1979, the Office for Traditional Medicine was established various researches were conducted and 6,000 practitioners were registered. a monograph of 260 medicinal plants was prepared (Derbe Kebede et al, 2006:160)

During EPRDF regime, it continues to license traditional medicine practitioners under their association. ETMPA⁶⁹ was reestablished in 1991, as the national healers' organization. The office was located in the compound of Ethiopian Bio-diversity Institute. The first ETMPA was established 1960, but dissolved because of its internal division. The second one, which was established in 1980, was short lived had too due to corruption and growing tensions between the Ministry of Health, and the then Ethiopian government (Biniam, 1998:37).

In 1993, the FDRE issued Ethiopian Health Sector Policies and Strategies. In this document the government demonstrated its willingness towards the promotion and development of traditional medicine practice by including the issue among its eight priorities. "Due attention shall be given to the development of the beneficial aspect of traditional medicine including related research and its gradual integration into modern medicine" (FMoH, 1993)

⁶⁹The Ethiopian Traditional Medicine Practitioners Association

In 2009, FDRE issued proclamation number 661⁷⁰ on Food, Medicine and Healthcare Administration and Control; and the FDRE Council of Ministers enacted Regulation Number 299⁷¹ of 2013 to implement the proclamation. The guidelines on the registration, licensing, and confidentiality of intellectual property are given in this document. Currently the section is merged with other departments and as a result there is no independent Department for Traditional medicine under the Ministry of Education. Instead; the Ethiopian Public Health Institute was formed by merging three former institutes: National Research Institute of Health, Ethiopian Nutrition Institute and the Department of Traditional Medicine. Even though much effort had been exerted by the former (EHNRI)⁷² and Drug Administration and Control Authority (DACA)⁷³, it seems the institutes reduced their attention; particularly since their re-establishment as Ethiopian Public Health Institute (EPHI) and Food, Medicine and Health Care Administration and Control Authority (FMHACA).

At present, the Ethiopian Public Health Institute (EPHI) approved road map⁷⁴ about herbal medicine. The road map aimed at giving due recognition for the significant contribution of traditional medicine for public and animal health. The road map is giving due emphasis for reserach (pre-clinical and clinical research). The road map is also envisioned strategies and direction to strengthen institutional capacities coordination and interdisciplinary and multisectoral partnership. Its main objective is to maximize the potential benefit of traditional

⁷⁰ Federal Negarit Gazette: Food, Medicine and Healthcare Administration and Control Proclamation; page 5157; Proclamation Number 661/2009.

⁷¹ Federal Negarit Gazette: Food, Medicine and Healthcare Administration and Control Council of Ministers Regulation; Page 7183; Regulation Number 299/2013.

⁷² Ethiopian Health and Nutrition Research Institute

⁷³ Federal Negarit Gazette: Drug Administration and Control Authority. Proclamation Number 176/1999

⁷⁴ Road Map for Research and Development and Improving the Health System of Traditional Medicine in Ethiopia, EPHI, December 2019.

medicine in health care besides the opportunity for commercialization of the products and export promotion.

CHAPTER FOUR

The Text *’Eṣä Däbdabbe*

4.1 እፀ ደብዳቤ

(f.1v) የመድኃኒት ማውጫ ቁጥር። መድኃኒቱን ከዚህ በሚከተሉት ተራ አውጣ።

፩. በተለመደው ምግብ ማከሚያ (ዘስንዴ ባሕርይ)

፪. ዘገብስ

፫. ዘገሮ

፬. ገሮው ለደነቆረ

፭. ገሮው ላበጠ

፮. አፍንጫውን ሊታመመ

፯. አፍንጫው ቀይ ለሆነ

፰. የጥርስ ቁርጥማት

፱. ለከንፈር በሽታ

፲. ዘድድ በሽታ

፲፩. ዘትናግ በሽታ

፲፪. ጥርሱ ቢጫ ለሚመስል

፲፫. የትፋት

፲፬. ለጉሮሮ

፲፭. አንቀጽ ለአንገት በሽታ

፲፮. አንቀጽ ዘህንቅርት I

፲፯. አንቀጽ ዘህንቅርት II

፲፰. አንቀጽ ለደረት በሽታ

፲፱. አንቀጽ ለጡት በሽታ

፳. አንቀጽ ሆዱ ላበጠ ሰው

(f. 2r) በተለመደው ምግብ ማከማቻ

[፩] ዘሰንዴ ባሕርይ

፩. ስንዴ ትኩሱን በንጥር ቅቤ ፈትፍቶ ቢበሉት ለእጅ ጤና ይበጃል፡፡

፪. ዓዲ ስንዴ ለሚበላው ሁሉ ጌታቸው ነው፡፡ ስንዴውንና አብሽን ባንድ ፈጭቶ ቢበሉት ለወግአት ይበጃል መድሃኒት ነው፡፡

፫. ዓዲ ስንዴና ሸንኮራ ገርድፎ ቢበሉት ለራስ ለዓይን ይበጃል፡፡

፬. ዓዲ ለኮሶም ያድናል ቂጣው ለሆድ ክፉ ነው፡፡ በሽታ ያመጣል ጉልበቱም ድንጋይ ይሆናል፡፡

፭. ዓዲ ስንዴ ትኩስም እርጥብም ነው፡፡ ክፋቱ ከማበጀቱ ይቀራል ያበጁት እንደሆን ጠባዩ ይገጥማል የቦካው ጠባዩ እኩል ነው ለሆድም የተሻለ ነው፡፡ ያልቦካው ግን ለሆድ ይከብዳል ቶሎም አይጠፋም በጎ መሆኑ

አቡሱዳ እንስላል ቢጨምሩበት ነዉ። በን(ዐ)ጥር ቅቤ ቢበሉት ይበጃል። ዱቄቱን ካብሽ ዱቄት ጋር ቢበጡብጡት ያበጠን ይበትናል።

[፪] ዘገብስ

፩. ዓዲ የቀረጥ ስር ተ ፯ ቅርፊት ምስርቾ ከ ፯ ክትክታ ከ ፯ ቀንበጥ ፯ ቁቀር ነጭ እጣን ጨዉ ሎሚ በ ፯ ዉሃ አንፍረህ ዐዋ ዉሃ ሲቀር በዐሃል ቅቤ ባልነካዉ አንተክትከና አብርደህ ቀባ እስኪድን ሁዋላ ግን ጥቂት በሞተ አጓት ይታጠብ።

፪. ዓዲ ተልባ በፀሐይ አድርቀህ ደቁስህ ለውስህ ቅቤ ባለው ወተት በእጅህ አትንካ ተጣሓይና ተብርድ ተጠበቅ።

፫. ዓዲ የምስርቾ የጥጥ ቅጠላቸውን ቀጥቅጠህ ተሰናፍጭ ጋር ጸፍጽፍበት ያድናል።

(f.3r.) ፬. ዓዲ የጋንቶ ቅመሙ ፪ ወቄት አደይ አበባ ፪ ወርቃወርቆ ፪ ወቄት የጥጥ ፍሬ አላድ የሱፍ አበባ ወቄት የቀጠጥና አበባ አላድ የቀጋ አበባ ፪ ወቄት አንዝዠ ማር ድሪም ሰናፍጭ የቱልት ስር ፪ ድሪም ጎመንዘር ፪ ድሪም ባዜቃ ድሪም ሳሞና ፪ ወቄት ዛጎል ወቄት ከርቤ ፪ ድሪም ነጭ ዐጣን ወቄት የቁራ ዉሽሽላ አላድ የተጠመቀ ማር ፪ ድሪም ላዞና ድሪም እርድ ድሪም መቅመቆ ይህን አከማችቶ በእንቁላል አስካል በሎሚ ዉሃ ይለዉሳል። የፊት መለወጫ ቅጠሉን የምስርቾ የጎቸት የድግዐ የሀረግ ሬሳ ቅዐላቸውን ዘርጭ እምባይ ፍሬውን የጥጥ ቅጠሉን ጎመንዘር ሰናፍጭ ዱቄቱን ከርቤ የሎሚ ዉሃ ጨምሮ ይለደዋል። ባዜቃ አልቴት ሎሚ ፫ በእፍኝ ለት አሸቶ አገናኝተህ በዶሮ ላባ ቀባና በ፬ቀን እጠብ የቀለጥ ስር ቅርፍት የላዩን ይፈግፍጉትና በ፯ ዐዋ ዉሃ በአዲስ ዐቃ ያንፍሩት ጥቂት እስኪቀር ዐጣን ከርቤ ደቁስህ ጥቂት ቅቤ ጨምረህ ጠዋት ማታ ቀርፈህ እሾህን ያወጣል በዐሃ ተጠጅ ጋር አድርግ እታመመ ዘንድ በፊቱም በራሱም እስር።

(f. 3v) ፭. ዓዲ እንጣሪያ ደቁስህ ፊቱን ቅባ የወይን ቅጸል ቀበጡንም ቀጥቅጠህ ፊቱንም እራሱንም ቀባ።

፮. ዓዲ የምድር እባይ ፍሬውን በእሳት አሙቀህ አረፋውን ቀባ።

፯. ዓዲ የርግብ ደም ለማድያት ይበጃል።

፰. ነጭ ሽንኩርት ቅጠሉን ደቁስህ ተማር ጋር ቀባ ይበጃል።

፱. ዓዲ ቀበርኝ ዘፍዝፈህ ቀባ ያድናል፡፡

፲. ዓዲ የምድር እምባይ እርጥቡን ይደፈድፏል፡፡

፲፩. ዓዲ የምድር አብሽ ለማድያት ይበጃል፡፡

፲፪. ዓዲ አሚራ ደረቁን ደቁሶ ቢቀቡት ይድናል፡፡

፲፫. ዓዲ ጦስኝ ስሩንም ቅጠሉንም በጸጅ አፍልቶ ይቀባል፡፡

(f. 4.r) ፲፬. ዓዲ የብርብራ ፍሬ የተነጠረ ድኝ ፪ ቱን አገናኝተህ ሰልቀህ በቅቤ ለውሰህ ቀባ፡፡

፲፭. ዓዲ ለማድያት ወርስየምድር እምባይ ስር ደቁሶ በማምሳይ ወተት ለውሶህቀባ፡፡

፲፮. ዓዲ የናና ቅጠል ነጭ ሽንኩርት ቀዩንም አመድ ተሶስት ጉልቻ ድጦ በማር ለወሶ እየደፈደፉ ጦዋት ጨወ በወሃ እያፈላህ እጡብ እስኪድን ድረስ ስንዴ በወተት እያማገ ይብላ፡፡

፲፯. ዓዲ ጥቁር አዝሙድ ስቡን ደቁሶ በቅቤ ለውሶ ይቀባ፡፡

፲፰. ዓዲ የሜዳ አህያ ሞራውን ቅልጥሙን ቀባ፡፡

(f. 4v.) ፲፱. ዓዲ የሱፍ ፍሬ አበባውን ባቄላ ደቁሶ በማር ለውሶ በቅቤ ይቀባ፡፡

፳. ሱፍ ወቅጦ በመረቁ ኸልኸል ጨምሮ ፊቱን ይቀባ ውሃውንም ይጠጣ፡፡

፳፩. ዓዲ የዝግባ ፍሬ ደቁሰህ በቅቤ ለውሰህ ተቀባ ጽላ ከሌለበት፡፡

፳፪. ዓዲ የብርብራ ፍሬ የተነጠረድኝ ሁለቱን አዘጋጅቶ በጣም አልሞ ሰልቆ በቅቤ ለውሰህ ቀባው፡፡

(f. 5r.) [፫] ዘገሮ

፩. ትል እገሮው የገባ እንደሆነ የሮማን ቅርፍት የሽነት ቅርፍት ጨምሮ በውሃ ጠምቆ ያወጣዋል ይገለዋል፡፡

፪. ዓዲ የኮከ የጠንበለል ቅጠላቸውን ኮሶ ሃሞት ከርቤ የወይራ ቅጠል ጨምረህ ወሃውን በዠሮው ጨምር ያወጣዋል ይገለጻል።

(f. 5v.) ፫. ዓዲ ሰናፍጭ የቁራ ወስፌ ቅጠል ያሞጭ ቅጠል የጭጐጐት ስር በፍየል ሽንት ዘፍዝፈህ በጥጥ ጨምር።

፬. ዓዲ የጥሙድ ሙጫ የአረቄ አተላ ባንድ ጨምር።

፭. ዓዲ የመጨኔ ቅጸል እንዲሁ አድርግ።

፮. ዓዲ አላባ ደቁስህ ጨምር ይገላል።

፯. ዓዲ የምድርእ (ም) ባይ ስር አጥበህ ወቅጠህ ውሃውን ብትጨምር ያድናል።

፰. ዓዲ የጦስኝ ቅጠሉን ፍሬውንም ፈጭተው ይጨምሩ።

፱. ዓዲ የአሞጭ ፍሬ ወቅጠህ እዠሮው ጨምር።

(f. 6r.) ፲. ዓዲ የእንቁላል ቅጥራን በዠሮው ጨምር የመገለውንም ያድናል።

፲፩. ዓዲ የባህር ጢፍደም ተሴት ወተት ጋር ጠብጠብ አድርግ በዠሮው ይድናል።

፲፪. ዓዲ ትል እዠሮው የባባ እንደሆነ ወይም እዠሮው ቢፈጠር የላም አሞት አንጣና የሬት ዉሃ ቕብአዐ ቅጥርን ተኮከህ ፍሬ የወጣውን ሞቄ ሳለ እዠሮው ጨምር።

(f. 6v.) ፲፫. ዓዲ የዉስጥ በሽታ ቢሆን ዘረቦ ዶሮ አብስልና አፍላው ልብ አቀላቅለህ በሃዲስ በፍታ አንጥረው። ላስታ ቅቤ የዶሮ ስብ ጨምር ሁዋላ ግን አፍላው ሁለት የእንቁላል አስኳል ጥቂት አፍራን ጨምረህ እዠሮው ላይ በጥጥ አስቀምጥ።

፲፬. ዓዲ የእንቁላል ቅጥርን ላስታ ቅቤ የሁለት ቁርካኦት ሥጋ ይበጃል።

፲፭. ዓዲ የሴት ልብ ስር ጥቂት ጠጅ ወደ ኋላ ግን አጥራው በሐዲስ ሸማ እዠሮው ጨምር።

፲፮. ዓዲ የፍየል ሃሞት የሴት ወተት ጥቂት ከርቤ የደቀቀውን ወለላውን ማር በዉሃ ለዉሶ ሞቆ ሳለ ይጨምር በዠሮዉ።

(f. 7r.) ፲፯. ዓዲ ጽጌረዳ ቅባኑግ ዉስጥ በጸሃይ ሶስት ቀን ያስቀምጥ ወይም አራት ቀን ተዘያዉ ቅባ ኑግ ጥቂት ንሳና የደቀቀ ቀረፋ ጥቂቱን ጨምርበት።

፲፰. ዓዲ የንቁላል ቅጥራን ወለላ አላውስና በሸማ ሸፍነው እንደሚሰፋ ሸማ በኋላ ግን በዠሮዉ ይጨምር።

፲፱. ዓዲ ጭር የሚሉትን ዱዱ የሚሉት ቅቤ ጠብጠብ አድርግ ተኮል ጋር ያድናል።

፳. ዓዲ የጽድ ፍሬ ደቁሰህ ጨምር የሰኔ።

፳፩. ዓዲ ስንቀን እንዘረዘይ ጨምር በዠሮዉ።

(f. 7v.) ፳፪. ዓዲ የመጭ ቅጽል አሸተህ ጥቂት ውሃ ጨምረህ በበፍታ አድርቀህ በዠሮዉ ጨምር።

፳፫. ዓዲ የአስተናግርት ቅጽል አሸተህ በዠሮዉ ጨምር።

፳፬. ዓዲ እዠሮዉ ትል ቢገባ የሮማን ቅርፊት ሽንትደሚ ውሀቸውን ዱል ይገለዋል ያወጣውማል።

፳፭. ዓዲ ኮክ ጠበለል ሐሞት ከርቤ ቈጽለ ወይራ ውሃውን ጨምር ይገለዋል።

፳፮. ዓዲ ለዠሮ ትል ሮማን ሽንት ቀርፍተህ ውሃውን ጨምር ይገለዋል።

(f. 8r.) ፳፯. ዓዲ የኮክስ የጠበለል ቅጽላቸውን ኮሶ ሐሞት አሜራ ቅጠሉን ጨምር እዠሮዉ ያለው ይወጻ (ጣ) ል።

፳፰. ዓዲ ለግንደ ቆርቆር የወይራ ቅጠልን ኸል ማለት የኖረ ጠጅ ነዉ ጥቂት ጨዉ በዠሮዉ ጨምር እጣይ ሁን እስቲወጣ።

፳፱. ዓዲ እዠሮዉ ትል የገባበት የገበር እምባይ ቅባ ኑግ አዉጥ በዠሮዉ።

(f. 8v.) ፴. ዓዲ ለዠሮዉ በሽታ የገበር አወምባይ ፍሬ በጣም አጥቦ አድርቆ ቅባኑግ አዉጥቶ በፊተው እስቲለምዱት በቁብ እንቁላል ለክቶ ተወተት ጋር ይጠጣል።

[፬] ገዢው ለደንቅረ

፩. ወለላ ማር አንጣና ዩናይትድ ወቅጠህ አብጃህ ፊትን ቀባ።

፪. ዓዲ የጭጭት እንቁላል አንጣና የሰሌጥ ቅቤ ጨምርበት እፀሐይ አራት ቀን አስቀምጥ ወይም አምስት ቀን ጽሩውን (ሞቆ) ሞቆ ሳለ በገዢው ጨምር ተአንስላል ውሃ ጋር አፍላና ውሃውን ጠጣ።

(f. 9r.) ፫. ዓዲ የባህር ቀይ ሽንኩርት አንጣና ተወደላይ ብሳና እዉስጡ ምላበት፤ ቅባኑግ ጨምር በላዩ ፍም አስቀምጥ እስኪበስል ውሃውን እገዢው ጨምር።

፬. ዓዲ ሽምበቄ አንጣና ፭ ከንድ ሙሉ መቅጠኑ በገዢው ልክ ከጨወ ባሩድ ጋር አንጣና በእሳት አጠሰወ ጠሉንም በገዢው ጨምር።

፭. ዓዲ ጨውና ማር በገዢው ጨምር።

፮. ዓዲ ሰናፍጭ ይጠጣ።

፯. ዓዲ የዘንባባ ፍሬ ሰልቀህ በሰሌጥ ቅቤ በትንሽ ምሆ አጥራና እፀሐይ አውጣና በገዢው ጨምር።

(f. 9v.) ፰. ዓዲ ለደንቅረ ገዢው የሰሌጥ ቅቤ የፍየል ቄቤ ቅብኦ ቅዱስ አቱች ቅጽሉን ከስሩ ጋር ባንድ ዉቀጥና አንፍረህ በገዢው ጨምር።

፱. ዓዲ ገዢው ለደንቅረ ትልም ለሰራ የሮማን ሽነት ቀርፍተህ ውሃውን ጨምር ይገለዋል።

፲. ዓዲ የኮከህ ቅጽል የጠበለል ቅርፍት ሐምት ከርቤ የአሚራ ቅጠል ውሃውን በገዢው ዱል (ጨምር) ይወጣል።

፲፩. ዓዲ እምባይ ረምጠህ በእሳት ጠምቀህ በገዢው ዱል ይድናል።

(f. 10r.) ፲፪. ዓዲ ገዢው ለሚመጣል የበለስ ቅጠል ጠምቀህ ጨምር።

፲፫. ዓዲ ገዢውን ሊታመመ ወይም አንገቱንም የእንቁላል ቅጥራን እውስጡ ጨምር።

፲፬. ዓዲ ለገሮ ደግፍ ተልባ በአመድ ውሃ አላቁጠህ ቀባ።

፲፭. ዓዲ አውጥ ከጨው ጋር ደቁሰህ ደፍድፍ እንዲሁም ቀባ።

፲፮. ዓዲ የምድር እምባይ ቀጠጥና ፌጦ ጨምር በእርያን ደቁሰህ በቅባኑ ለዉሰህ በሸማ አጥርተህ ብዙ ቀን ጨምር።

(f.10v.) ፲፯. ዓዲ የገሮ መድሃኒት የሰሊጥ ቅቤ ላይ ደቁሰ ፤ ሽንኩሪት ቁንዶ በርበሬ ሳይደቁስ በፍም ላስ አድርጎ በገሮ ያደርጓል። ንፋስ እንዳይገባበት ይወትፎአል በለሊት ያድርግ።

፲፰. ዓዲ አሜራ ተቂቤ ጋር ቀላቅሎ በፈትል አንስቶ እገሮ ቢጨምሩ ይፈወሳል።

፲፱. ዓዲ እምባይ እረምጠህ ጠምቀህ በገሮው ዱል ይሰማል።

፳. ዓዲ ዘሮዉ ለደነቆረ ዘጽጽና (ቀጠጠና) ፍሬ ደቁሰህ በሰሊጥ ቅቤ አጥርተህ በትንሽ ጽዋ እገሮዉ ዱል 7 ቀን ፈጥኖ ይሰማል።

፳፩. ዓዲ አመራሮ ለገሮ ቁርጥማት ይበጃል።

(f. 11r.) ፳፪. ዓዲ አዲ ጀሮዉ ለደነቆረ ያበጀኸኝ ፍሬ ቅጠሉን ደቁሰህ በማር ለዉሰህ ጥቂት ጥቂት ጨምረህ ጠምቀህ እገሮዉ ወትፍ።

፳፫. ዓዲ የምድር እምባይ ቅጠሉን ስሩን አሸተህ በገሮው ጨምር ውሃውን።

፳፬. ዓዲ የጥጥ [ጓ] ቅጠሉን በእሳት አሙቆ አሸቶ ውሃውን ጨምር።

፳፭. ዓዲ ቁንዶ በርበሬ በማር ለውሰህ በእሳት አንተክትከህ በጥጥ ለውሰህ ወትፍ።

(f. 11v.) ፳፮. ዓዲ አንኮርሳ ፌጦ አሸተህ ዉሃዉን ጨምር የምድር እምባይ ስሩን አጽቦ ወቅጦ በገሮዉ ቅንቅንም ትልም ላለበት ጨምር።

[፭] ገሮው ላበጠ

፩. ለቆሰለም ጽጌረዳ ደረቁን በውሃ አፍልተህ እገሮው ጨምር።

፪. ዓዲ የሮማን የፈላውን በጥጥ አርሰህ ጨምር።

፫. ዓዲ የእርያ ስብ በገሮ ውጫምር።

(f. 12r.) ፬. ዓዲ የመራራ ቅል ውሃ ተቅባ ኑግ ጋራ እገሮው ጨምር።

፭. ዓዲ የ፮ (ጠ) ና አዳም ውሃ አፍላና በሮማን ቅርፍት እገሮው ጨምር።

፮. ዓዲ ገሮው ለሚመግል የፍየል ፍግ ወይም የሚዳቋ ወይም የፌቆ ቢሆን ተጸ (ጠ) ጅ ጋራ በጥብጦ ገሮው ጨምር።

፯. የደቀቀ ተልባ በገሮው ጨምር።

፰. ዓዲ የአማር ቅጠል ውሃ በገሮው ጨምር።

፱. ዓዲ የከርቤ ቅጥራን አውጥተህ ጨምር።

፲. ዓዲ የሴት ወተት ተበሬ ሐምት በገሮው ጨምር።

(f. 12v.) ፲፩. ዓዲ የአምጭ ፍሬ ወቅጠህ ጠምቀህ ጨምር።

፲፪. ዓዲ ለገሮ ደግፍ በሽታ የጥቃቅን አተር ቅጠል አንጣና የልት ቅጠል በመረቅ አብስል በስጋ ዉሃ ለዉሰዉ ታበጀህ በሆላ በዚያ ዉሃ የእንጀራ ልብ ጨምር የባቄላ ዱቄት የገብስ ዱቄት ጨምረህ አፍላ ሁዋላ ግን ቅባኑግ ጨምር ላስታ ቅቤ የዶሮስብ አወፍራን ዱልና ጥቂት አፍላው ተሳት ታወጣኸዉ በሁዋላ የሁለት እንቁላል አስኳል ዱልና አበጠዉ ላይ አስቀምጥ በጥጥ ሸፍነህ በሸማ እሰር።

(f. 13r.) ፲፫. ዓዲ የአበርባራ ፍሬ ደቁሰህ በማር ለውሰህ በቀባኸው ጊዜ ገሮው ይድናል ይበተናል።

፲፬. ዓዲ የእንቁላል ነጩን ብትቀባ።

፲፭. ዓዲ ከስከሶ አሸተህ ብታንጠበጥብበት ይበጃል [ው] ይበተናል።

፲፮. ዓዲ የኩከህ ቅጠል እንዲሁ ብታደርግ ይበጃል፡፡

፲፯. ዓዲ ዕጣን ተማር ጋር ቀባ አንገቱን በራፊ ይሸፍነው፡፡

፲፰. ዓዲ አሽክት ጨፍልቀህ ጠምቀህ በዠሮው ጨምር ይድናል፡፡

፲፱. ዓዲ የነጭላ ቅጠል የበለሰ ቅጠል አንፍረህ ጠምቀህ በዠሮው ብትጨምርበት ይበጃል ትፈወሳለህ፡፡

(f. 13v.) ፳. ዓዲ የሮማን የሽነት ቅርፊታቸውን ቀጥቅጠህ እስኪገነፍል ድረስ አንፍረህ ኋላ ግን አንጣና አዠሮው ዱል ለዠሮ በሽታ ይበጃል፡፡

፳፩. ዓዲ የዠሮ ደግፍ የቱልት ቅጠል በደጅ ያንፍሩት አበጠው ላይ ይደፍድፉ ይድናል፡፡

፳፪. ዓዲ ያውጥ ቅጠል ተጨው ጋር ይደፍድፈው፡፡

፳፫. ዓዲ ያቱች ሥር ቀጥቅጠህ አበጠው ላይ ደፍድፍ፡፡

፳፬. ዓዲ የዠሮ ደግፍ እራሱን በለይወ አይኑን በታመመ ጊዜ ቢያለቅስ ያውጥ ቅጠል ወቅጠህ ደፍድፈህ እፊቱ ላይ እሚመታው ላይ፡፡

(f. 14r.)

፳፭. ዓዲ ልት ቅጠል እንዲሁ አድርግ ይድናል፡፡

፳፮. ዓዲ ዠሮው ለሚመጣል መድሃኒት ደግ ቅጽሉን ደቁቦ በቅቤ ለወሶ በአፍንጫው በዠሮው ይጨምር ዳግመኛም ለዠሮ እምቢ ያለ እንደሆነ ብላቃ ነቅሎ አንጽቶ በአሳት ለብ አድርጎ አሸቶ ወሃውን ጠብ ያደርገዋል፡፡

፳፯. ዓዲ ለዠሮ ለታመመ ያመጃ ፍሬ ጨፍልቀህ በውሃ በጽብጻህ አጥርተህ ዱል፡፡

(f.14v.) ፳፰. ዓዲ ዠሮው ለሚመግል የዕጸ መናሄ ስር ካንድ ስፍራ የወርቅ በሜዳ ስር ከአንድ ስፍራ አንቀጥቅጦህ አድርቀህ በቅቤ ለወሰህ በስተወስጡም እጁን አግብቶ ይቀጧል ፤ እንደ በርበሬ ይበላዋል ለዠሮውም በቅቤ ለወሶ አቅልጦ የጨምሯል ይድናል።

፳፱. ዓዲ ዠሮውን ለአመመው የአሞጭ ፍሬውን ወቅጦ ጨምቆ ቢጨምሩ ይፈወሳል።

(f. 15r.) ፴. ዓዲ በዠሮው ውስጥ ቁስል ያለበት ለሚመግል የአሞጭን ውሃ በአፍንጫው ይጨምር።

፴፩. ዓዲ ዠሮው ቢመግል የብሳና ቅጠል እኒህን አሸቶ ያደርጓል የዝብ ሽንኩርት ስር አድርቆ ዉሃ ባልነካዉ ቅቤ ተቀባ።

[፮] አፍንጫውን ሊታመመ

፩. ጼና አዳም አድቅቀህ በአፍንጫው ጨምር።

(f. 15v.) ፪. ዓዲ የፈረስ ፋንድያ የበቅሎም ቢሆን ጠምቀህ አፍንጫው ጨምር።

፫. ዓዲ የጫጩት ከንፍ በአመድ በማቃጠል በአፍንጫው ጨምር።

፬. ዓዲ የሰልያ ቅጸል ጨፍልቀህ ውሃውን በአፍንጫው ጨምር ይበጀዋል።

(f. 16r.) ፫. ዓዲ ቢነስረው ቀዝቃዛ ውሃ በራሱ አፍስበት ባያቆም አይብና ቅቤ በራሱ ጸፍጽፍ።

፬. ዓዲ የውሻ ጭግግት አሸተህ ጨምር።

፭. ዓዲ የፍየል ቅቤ አቅልጠህ ጨምር ይበጃል።

፮. ዓዲ አፍንጫው ለሚመግል አሞጭ ውሃውን ጠምቆ በጥጥ ይጨምሯል።

፯. ዓዲ አፍንጫው መጥፎ ጠረን ላመጣ ከርቤና ሰሌጥ ደቁሶ በቅቤ ለውሶ ባፍንጫው ጨምር።

፲. ዓዲ ቁንዶ በርበሬ ዕፍራን ደቁሶ በቅቤ ለውሶ ይጨምር።

፲፩. ዓዲ ሽታ ለከለከለው አፍንጫውን ጥቁር አዝሙድ በሰው ወተት በህል አፍንጫው ጨምር።

(f. 16v.) [፯] አፍንጫው ቀይ ለሆነ

፩. የልት ቅጠል የተፈተነ ገብስ ዘቢብ እሊህን አፍላና እስኪበስል ኋላ ግን አድቅቀው፤ በአንድ ጨምረህ በዉሃዉ ላሰታ ቅቤ የተልባ ቅቤ እጅግ አፍላውና ባወጣኸዉ ግዜ ሁለት አስኳል እንቁላል ጨምረህ ለዉሰህ አበጠዉ ላይ አድርግና በሸማ እሰር።

፪. ዓዲ አፍንጫው መጥፎ ጠረን ለፈጠረ ቆሰለም ፩ ስርቢ የሰሌጥ ቅቤ ጨምር ያድናል።

(f. 17r.) ፫. ዓዲ የአሞጭ ፍሬ ወቅጠህ ጠ (ጨ)ምቀህ አፍንጫው ጨምር።

፬. ቡርደሊግ በድንጋይ ፋቅና ተዉሃ ጋራ ጨምር በአፍንጫው።

፭. ዓዲ የፍየል ቅቤ አቅልጠህ ጨምር በአፍንጫው ይበጀዋል።

፮. ዓዲ አፍንጫው ሊታመመ የፍየል ቅቤ አቅልጠው አፍንጫው ይጨምሩበት።

፯. ዓዲ አፍንጫዉ ሊታመመ ደግሞ ቅጠሉን ደቁሶ በቅቤ ለዉሶ በአፍንጫዉ በዝግግር ይጨምር ዳግመኛ እምቢ ያለ እንደሆነ ብስቃ ነቅሎ አምጥቶ በእሳት ለብ አድርጎ አሸቶ ጠብ ያደርጓል ዉሃዉን።

(f. 17v.)

፰. ዓዲ አፍንጫዉ ለሚመጣል የእጸ መናሄ ስር ካንድ ስፍራ የወርቅ በሜዳ ስር ካንድ ስፍራ ይህን ቀጥቅጠህ አድርቀህ ሰልቀህ በቅቤ ለውሰህ በስተዉስጥም እጅ አግብቶ ይቀባል ባላይም ይቀባዋል እንደ በርበሬ ይበላዋል የተለወሰዉን አቅልጦ ይጨምር በአፍንጫዉ ይድናል።

[፱] የጥርስቁርጥማት

(f. 18 r.) ፩. ለጥርስ ቁርጥማት በርበሬ አልቴት ደቁሰህ በጥርስህ ያዝ አትዋጥ በሽታው ይወጣልህል።

፪. ዓዲ ጤና አዳም አኝህ።

፫. ዓዲ የጥርስ ቁርጥማት የጽጌረዳ ፍሬ ከል በጥርስህ ጸፍጽፍ።

፬. ዓዲ ቀረጥ በስሩ ጥርስህን ፋቅ።

፭. ዓዲ ለህማመ ቁርጥማት ለጥርስ የጉመሮ ስር የዝንጅብል ፍሬ ያመንኸህ ይድናል።

፮. ዓዲ የአሚራ ስር ቅርፊቱን በመጠጫ ቢጠጡት ለጥርስ ቁርጥማት ለሆድም በሽታ ለደዌ ሁሉ ይበጃል።

፯. ዓዲ የደጋ አሽቃሞ ደቤበሻ የሚሉት ለጥርስ ቁርጥማት ይበጃል።

(f. 18 v.) ፰. ዓዲ ችንካር ለጥርስ ቁርጥማት ይበጃል።

፱. ዓዲ ለጥርስ ቁርጥማት ሲነቅል የምስርቸ የሽል ስራቸውን በኮምጣጣ ጠጅ ፵ ቀን ነክረህ ስሮቹን አዉጥተህ በስሮቹ ጥርስህን እንቅ አድርገህ ያዝ።

፲. ዓዲ የሮማን አበባ አንጥተህ አድርቀህ ደቁስህ ለጥርስ ለተነቃነቀ ለአመመው ሁሉ ይበጃል።

፲፩. ዓዲ ለጥርስ ቁርጥማት ለመንጋጋው የማር ወለላ በጉንጭህ ያዝ።

(f. 19r.) ፲፪. ዓዲ የጠንበለል እንጨት ተ፫ ዛፍ አንጥተህ በወጭት ፍም አድርገህ ጢሱን ታጠን በቀዳዳ ወስከንባይ አፍህን ወትፈህ ታጠን።

፲፫. ዓዲ የሸላ ሞራውን ለጥርስ ቁርጥማት ድዱን ቢፈገፍጉበት ይበጃል።

፲፬. ዓዲ የጥርስ ቁርጥማት የወይራ ቅጠል ቀጥቅጠህ በጥርስህ ያዝ።

፲፭. ዓዲ መንጋጋውን ለሚያመዉ ነጭ ሽንኩርት ዉሃዉን ጠምቀህ በዦሮዉ ጨምር ግራም ቢሆን በግራ ቀኝም ቢሆን በቀኝ።

(f. 19v.) [፲፮] ለከንፈር በሽታ

፩. ጤና አዳም ያላምጥ።

፪. ዓዲ የጥድ ፍሬ ያላምጥ ውሃው እስኪያልቅ፡፡

፫. ዓዲ ጐርጂኛት ተደረቅ ጽጌረዳ ጋር አፍላው፡፡ እውስጥ ወይን ዱልና መጥምጥ፡፡

(f. 20r.) ፬. ዓዲ እንስላል የሚጣፍጥን በጨው ያፍላ በአፍንጫው ላይ አስቀምጠው፡፡

፭. ዓዲ የአማር ቅጽል ውሃ አፉ ይጨምር፡፡

፮. ዓዲ ብልጨት ተማር ጋራ አፍህ ጨምር፡፡

፯. ዓዲ በእሳት የተጠበሰ ጨው ተገብስ ዱቄት ጋራ በአፉ (ይ)ያዝ ባንድ አድርጎ፡፡

፰. ዓዲ የእንጣሪያ ቅጠል ይብላ በየቀኑ እህል ሳይበላ ተዚያ ወዲህ እህል ይብላ በየቀኑ፡፡

፱. ዓዲ አልቴት ይብላ፡፡

፲. ዓዲ ለአፍ በሽታ እርጥቡን የዋለውን ቀንድ ቆርጠህ ቀንዱን በብዙ ጠጅ ቀቅለህ ጥቂት እስኪቀር ድረስ ተዚያ በኋላ ቀንዱን አዉጥተህ ጣል፡፡ በዚያች በተረፈች ጠጅ ጥቂት ቅቤ ጨምረህ ዕጣን ከርቤ አልቴት እኒህን ደቁሰህ በጠናክዳም ለዉሰህ በኒያው ጠማማ አፉን ቀባው ይድናል፡፡

(f. 20v.)

፲፩. ዓዲ የምድር እምባይ የጊዜዋ የቀረጥ ስራቸውን አጠጣው ታፉ መግል ይወጣል ይድናል፡፡

፲፪. ዓዲ ከርቤ ፈጭተህ ዶቄቱን አፉ ውስጥ ጨምር እንደ ሻሜታ፡፡

፲፫. ዓዲ ለማዝ በሽታ አፉን ላመመው ሰው ሽብ በአፉ ይያዝ ውሃውን ይትፋ ይድናል፡፡

(f. 21r.) ፲፬. ዓዲ ማር የአረቄ አተላ ባንድ አድርገህ ስፍሩን ትክክል አድርገህ ባዲስ ምንቸት አፍልተህ አፍህን ታጽብበት እጅግ ይበጃል፡፡

፲፭. ዓዲ ለአየር ለብርድ የጣቆማ የጌንዶሽ የአንፋር የጉመሮ ቅጠላቸውን አስተካክለህ ጨፍልቀህ ካራቱ ትተህ ፫ አንዱን እጅ ጨምር አፉንም ምረገዉ በጽኑ ምድር ምስህ እስከ ፴ አለት ቅበር በላዩ እሳት አንድደህ ሳታበዛ

አንጥተህ በብረት ማንደጃ አፍላው ሁሉ እስኪያልቅ ከቅባኑ በቀር አይቅር የእርያሱብ ጨምርበት የበግ ስብ ቀስም ጋር ለዉሰህ አስቀምጥ፡፡

(f. 21v.)

፲፮. ዓዲ ካትህዴ ደቁሰህ ቀባ፡፡

፲፯. ዓዲ አፉ (መጥፎ ሽታ ላመጣ) እንገሪ ቅጠል አንፍረህ በአፍህ ወሃውን አዘግይተህ ትፋው ይበጃል፡፡

፲፰. ዓዲ አጫራ አፉ ለጠመመ ይበጃል፡፡

፲፱. ዓዲ የቆላ ጭጉጐት አሸተህ ስንቀን አድርግ፡፡

፳. ዓዲ የምስርች ስር ደቁሰህ አጥርተህ አልቴት ከርቤ ጨምረህ ስንቀን አድርግ፡፡

፳፩. ዓዲ የደንጋይ ሙጫ በሸል አቡከተህ አፉ ቢለቀልቁት ይበጃል፡፡

(f.22r.) ፳፪. ዓዲ አፉ ለታመመ ዶግ ቅጸሉን ደቁሶ በቅቤ ለዉሶ በአፍንጫው በዠፎው ይጨምር ዳግመኛ እምቢ ያለእንደሆን ብስቃ ነቅሎ አምጽቶ በእሳት ለብ አድርጎ አሸቶ ዉሃውን ጠብ ያደርጓል፡፡

[፲] ዘድድ በሽታ

፩. ተጨው ጋር ወይም ተበግ ስጋ ጋር ስጋውን ትተህ እዉሃው ፪ ተምር ጥርኝ ዘቢብ ፍትግ ገብስ የስንዴ ፍትግ አሰሩን የዶግ ስር አፍላውና ባንድ በስጋው ዉሃ ሶስተኛው እስቲቀር ሁዋላ ግን አበጅተህ በሸማ፤ ሶከረ ነቢያት ጨምር ጥቂት አፍላው ሞቆ ሳለ በጉንጭ ያዘው ብዙግዜ ኋላ ግን በጥጥ ባዘቶ አርሰህ እድድህ ላይ አስቀምጥ በዚያ ያልዳነ እንደሆነ ማር አንጣና ወለላውን በጥጥ አርሰህ ቀይ ሙርጃን በላዩ ጨምርና እድዱ ጸፍጽፍ፡፡

(f.22v.)

፪. ዓዲ ጽጌረዳ ዉሃ አፍላና በዚያው ዉሃ ፊትግ ገብስ ያዉጥ ቅጠል ቀበጥ የንገሪ ቅጠል የበለስ ፪ ሮማን ቅርፊቱ ጋራ ሸብ አድርገህ ሁሉንም አድቀህ አፍላው ሁለት እጅ እስኪቀር ከ፫ እጁ በኋላ በሃዲስ ሸማ ጥመቀው ሞቆ ሳለ በጉንጭ ያዘው ብዙ ግዜ ተጉመጥመጥ፡፡

(f. 23r.)

፫. ዓዲ የአቱች ቅጾል በዉሃ አንፍረህ እጅግ ሲበርድ በአፍህ ተጎንጭተህ አዘግይ እየተጉመጠመጥህ ብዙ ቀን ትፈወሳለህ።

፬. ዓዲ ደረቁን የእንገሪ ቅጠል አንፍረህ ብትጠጣ ትፈወሳለህ።

(f.23v.) ፭. ዓዲ የስንዴ ፍትግ እስር የዶግ ስር ሁሉንም በአንድ ያፍሉት ሶስት እጁ እስኪቀር የስሩን ዉሃ ኋላ አበጅተዉ በሃዲስ ሸማ ያጽሩት ሸኮረ ነቢያት ይዱሉበት ጥቂት ያፍሉት የሞቀዉን በጥቂቱ በጉንጭ ብዙ ጊዜ ይያዙት ኋላ በባዘቶ ጥጥ ያርሱት እድዱ ላይ ያድርጉት ለዚህም የደረቀ እንደሆነ መግል እየሆነ እየነጣ ወለላማር ያንጡና በጥጥ ያርሱት እላዬ ድርጉት ቀይ ሙርጃን ደቁሰህ ነስንስ በድዱ።

(f.24r.) ፮. ዓዲ ድዱን ላመመዉ የእምባይ ቅጠል ነጭላ ቅጠሉን አንፍሮ ዉሃዉን በአፉ ይዞ ሳይውጥ ይጉመጥመጥበት ብዙ አዘግይቶ ይትፋ ብዙ ጊዜ ቢያደርግ ይበጃል ይፈወሳል።

[፲፩] ዘትናግ በሽታ

፩. ዓዲ ጽጌረዳ በዉሃ አፍልተህ በዚያዉ ዉሃ ፍትግ ገብስ ጨምር ያዉጥ ቅጠል የንገሪ የቀበጡን ቅጠል የበለስ ሮማን ሸብ ተቅርፊቱ ጋር ሁሉንም አድቅቀህ አፍላዉ ሁለት እጅ እስኪቀር ተሶስት እጁ ኋላ ግን በሃዲስ ሸማ ጥመቀዉ የሞቀዉን በጉንጭህ ያዝ ብዙ ጊዜ እየተጉመጠመጥክ ትፋዉ።

፪. ዓዲ ላበጠ ለድዱ ማበጡ የትናግ የሆነ እንደሆነ ጽጌረዳ በዉሃ አፍልተህ ገብስ ፍትግ ዱል የወይራ ቅጾል ቀበጡን የንገሪ ቅጾል የበለስ ሮማን ተቅርፊቱ ጋር ሸብ ሁሉን የደቀቀዉን ሁለት እጅ እስኪቀር ተ፫ ኋላ ግን የጥመቁት በሃዲስ ሸማ ሞቆ ሳለ በጉንጭ ያዘዉ ብዙ ጊዜ ተጉመጥመጠዉ።

[፲፪] ጥርሱ ቢጫ ለሚመስል

፩. ዓዲ ለጥርስ ማንጣት ጨው ተውሃ ተማር ጋራ ተጥላሸት ጋር ባንድ ቀላቅለህ ፋቅበት ይነጣል።

፪. ዓዲ ለጥርስ በሽታ (የ) ጉመሮ ስር ተዝንጅብል ጋራ ይቆርጥም።

(f. 25r.)

፫. ዓዲ በጥርስ ደም ለሚፈሰው ለሚሰብረውም ለሚሰናድውም የጽጌረዳ ፍሬ የጽድ ፍሬ ደቁሰህ ደፍድፍ ይጸናል

፬. ዓዲ የጽጌረዳ ፍሬ የግድግ ፍሬ ደቁሰህ ለውሰህ ደፍድፍ፡፡

፭. ዓዲ ጥርሱ ደም ለሚፈሰው ወይም የሚሰብረው የጽጌረዳ ፍሬ እፍኝ ሙሉ አንጣና የጽድ ፍሬ ደቁሰህ በእንኮይ ለውሰህ ብትደፈድፍበት ይድናል፡፡

(f. 25v.) ፮. ዓዲ የሰንዴ ሊጥ ጨው ባንድ አብሰለው ሞቆ ሳለ ደፍድፍ የደቀቀውን እመልኩ ላይ አድርግ፡፡

፯. ዓዲ ያጋዘን ቀንድ ፩ ሎሚ አንጥተህ የበሰለውን በወይን ጠጅ በአንድ አፍላው ካልሆነም በጥሩ ጠጅ አፍላው ግማሹ እስቲቀር ከዚያም በህመምተኛው አድርግ፡፡

፰. ዓዲ ጨው በሽረሪት ፈትል ጠቅለህ እታመመበት ዘንድ አስቀምጥ በዚህ አልተፈወሰ እንደሆነ አስቀድመ የበኩረ ሎሚ ወሃ አንጣ በሰንዴ ዱቄት ለውሰህ እታመመው ጥርሱ ላይ አስቀምጥ ኢታስነካ ሌላ ገላውን፡፡

(f. 26r.)

፱. ዓዲ ጽጌረዳ ሮማን አፍላና እጥርሱ ጨምር ይበጀዋል፡፡

፲. ዓዲየምድር እምባይ ስር ምስህ አጥበህ ተበርበሬ ጋር አንፍረህ ባፍህ ይዘህ አዘግይ ደስ ይልሐል፡፡

፲፩. ዓዲ ከርቤ ደፍድፍ፡፡

፲፪. ዓዲ ሰናፍጭ ይቆርጥም ጣረቄና ተጨው ጋር ኋላ ይለቀዋል፡፡

(f. 26v.) ፲፫. ዓዲ ችንካር ጠብሰህ ፈግፍግ በኩረሎሚ ወተት የሰንዴ ዱቄት ባንድ ጥርስ ያወጣል፡፡

፲፬. ዓዲ የጥድ መጫ እስከንድያስ እንደሁ ይተዉሃል በሽታህ፡፡

፲፭. ዓዲ የደደሆ ስር በ፯ ጽዋ ውሃ አንፍረህ ፩ ጽዋ ውሃ ይቅር ዳግመኛም አፍላው በጸህል ያን ግዜ አዉጣና
እብርድ አሳድረው በዚያው ከርቤ ጨምርና ይነቀስ ጥርሱ ይጠናል የሚነቃነቀው።

፲፮. የአቱች ቀጸል አንፍረህ በውሃ እጅግ ሲበርድ ልቀቅና ታዘዝህ በኋላ ትፋው ብዙቀን ያደረግህ እንደሆን
ትድናለህ።

(f. 27r.)

፲፯. ዓዲ የዋሊያ ቀንድ ፈጭተው አሳርረው በውሃ ቢጠጡ ይፈወሰል።

፲፰. ዓዲ በርበሬና አልቲት ጨምረህ ደቁስህ እጥርሱ ላይ ጨምር።

፲፱. የጽጌረዳ ፍሬ ደቁስህ ተኩል ጋር እጥርሱ ላይ ደፍድፍ።

፳. ዓዲ ጥርሱ የታመመ እንደሁ የቁልቋል ደም አንጣና በመርፌ ነቅስህ ጨምረው እውስጡ ይድናል።

(f. 27v.) ፳፩. ዓዲ የዠብ ራስ ተዝንጅብል ጋራ ያኝህ ይድናል።

፳፪. ዓዲ ይፋት ቅጠል ደቁስህ እቅባኑግ ጨምረህተ[ጉ] መጥመጥበት ትድናለህ።

፳፫. ዓዲ ጥርስህን ቢቆረጥምህ ቢነቃነቅም ቢአምህም ድድህም ቢያብጥብህም ድሪም ከፈርላህይድ ድሪም ለባንጃ
ድሪም ሄራቅሊስ የቀረፋ ፍሬ ድሪም ከሙን ድሪም ስንዴ ድሪም እንስላል ፍሬ ይህንን ሁሉ ጨምረህ ወቅጠህ
ባንድ በሻሽ ቁዋጥረህ ንክስ በጥርስህ።

(f. 28r.)

፳፬. ዓዲ የዘናዋ ሽንት ነው ስሩን የጎቤል ስር የእፀ ዘዌ ስር የእምይ ደርስ ስር የድፍሬና ስር የሶመግ ስር ቀርፈክ
ወቅጠህ ታጠን።።።

፳፭. ዓዲ ለጥርስ ውቅጠት መራራ ቅል አሳርሮ ቅባ ኑግ ፈጭቶ ደፍቆ በተገናኘ ጥላቱን ይወቀጣል።

፳፮. ዓዲ ለድድ ወዝ በላም ወተት በድንጋይ ፍቆ በመላሱ ይልሰዋል ለህጻን በመላሱ ያስነኳል ጥርሱን።

(f.28v.) ፳፯. ዓዲ ጥርሱን ላመመዉ የእምባይ ቅጠል ነጭላ ቅጠሉን አንፍሮ ዉሃዉን በአፉ ይዞ ሳይዉጥ ይጉመጥመጥበት ብዙ አዘግይቶ ይትፋ ብዙ ግዜ ቢያደርጉ ይፈዉሳል የጥርስ ቁርጥማት ሽነት በእሳት ጠብሰህ አኘህ ጉመሮ ስር ዝንጅብል አኝህ።

[፲፫] የትፋት

፩. ጦስኝ በጠጅ አፍልተህ ብትጠጣ ትድናለህ።

፪. ዓዲ የአረግ ሬሳ ስር የምድር እምባይ ስር ነጩን ፍቀህ አጥበህ ባጓት ዘፍዝፈህ ወይም በዉሃ አሳድረህ አጥርተህ ብትጠጣ ይበጃል ተተፋህም በኋላ ዳግመኛ ትድናለህ።

(f. 29r.) ፫. ዓዲ እንኮይ ተማር ጋራ ብትጠጣ ትድናለህ ከዚያም ወዲያ ሮማን ብላ መጣጣውን።

፬. ዓዲ በርበሬ ከሙን ቅርንፉድ ዝንጅብል አዝሙድ እኒህን ደቁሰህ በአንድ እህል ስትበላዉ ይበጃል ተቀመስህ በኋላ ስንዴ እንጀራ በዶሮ ብላ።

፭. ዓዲ የነጮሎ ስር በጠጅ አንፍረህ ብትጠጣ ይበጃል ደም ለሚአስተፋውም ያድናል።

፮. ዓዲ የጭቁኝ ስር ወቅጠህ በውሀ ብትጠጣ ትድናለህ ትፋቱም ይቆማል።

(f. 29v.) ፯. ዓዲ እንደ ደረቅ ጉበት የዶሮ አድርቀህ ደቁሰህ በጠጅ ብትጠጣው ትድናለህ ይበጅሃል።

፰. ዓዲ በአረቄ አተላ ባቄላ ቀቅለህ ብትበላ ትድናለህ።

፱. ዓዲ የዝብ ሽንኩርት አድርቀህ ፈጭተህ ብትጠጣ ትድናለህ።

፲. ዓዲ የዶሮ ደረቅ ጉበት የሚያስቆም ፈረሰኛውንም በውሀ በጽብጽ ጠምቆ ሳይለዩ ያጠጧል።

፲፩. ዓዲ ትፋት ለበዛበት ሰው እኽል ቀቅለህ በውሃ ፪ እጁ እስቲያልቅ ፩ እስቲቀር አሰሩን ለይተህ ጠጣ።

(f. 30r.) ፲፪. ዓዲ የትፋት አቱች ስሩን ብላ።

፲፫. ዓዲ ለትፋት ጦስኝ መቅመቆ አሰረት አረግ እሬሳ ስራቸውን በጠጅ ቀቅለህ ጠጣ።

፲፬. ዓዲ ለትፋት ያይበደሙ ስር በጨዋ መደቆሻ ቀጥቅጦ በጠጅም ቢሆን በጠላም ቢሆን በጥብጦ ደግሞ ቢሆን
ያፍሻት እኩል አሽከር ቢሆን ታናሽ ጻት አድርቆ ለከቶ ያጠጣዋል ጽላ አይወድም በሳምንት ይጠጣ።
ማርከሻው ግን ተልባ ነው ምጥኑን እንደዚያው ነው ይበጃል።

(f. 30v.) ፲፭. ዓዲ ጦስኝ ዘወትር ለሜያስተፋው ስሩንም ቅጸሉንም ለሚስአው በውሃ አፍልተህ ስጠው።

[፲፬] ለጉሮሮ

ጉሮሮው ላበጠ እጸ መናሂ ስር ካንድ ስፍራ የወርቅ ሜዳ ስር ካንድ ስፍራ ቀጥቅጦህ ሰልቀህ በቅቤ ለዉሰህ ላዩንም
ዉስጡንም ቀባዉ እጅህን አስገብተህ እንደ በርበሬ ይበላዋል ይስማማዋል።

፩. የጥጥ ፍሬ ደቁሰህ በማር ደቁሰህ ለውሰህ ቅባው።

(f.31r.) ፪. ዓዲ ለጉሮሮ ዝግሃት ጥሬ ቅቤ ሸንኮረ ነቢያት ፯ ጊዜያዋ በቂጣ በቂቤ ይብላ በርበሬ ነጭ ሸንኩርት እንቁላል
አፍርንጅ በቅቤ አገንፍቶ ይዋጥ።

፫. ዓዲ ከርቤ አንጥተህ ፬ ስንዴ የሚያህል ጥቂት ማር ጨምርና የአረቄ አተላ ያድርግ የጠጣዉ ኮሶ ጉሮሮ ጉሮሮዎ
እንዲታጠብ ሳይዉጥ ኋላ ይትፋዕ።

፬. ዓዲ ያናአዳም ቀጥቅጦህ እንስላል ባንድ አድርገህ እንደ ሹሮ በአረቄ አተላ ጠጣ እንደ ሙቅ ያድነዋል።

(f. 31v.) ፭. ዓዲ የአቱች ቅጸል በውሀ አንፍረህ ሲበርድ ጉሮሮውን ይለቅልቅ ተገንጭቶ ይገመገመጥ አዘግይቶ ይትፋ።

፮. ዓዲ የአቱች ቀጸል በውሃ አንፍረህ ሲበርድ ጉሮሮውን ይለቅልቅ ተገንጭቶ ይገመገመጥ አዘግይቶ ይትፋ።

፯. ዓዲ የጥጥ ፍሬ ደቁሰህ በማር አብላው።

፰. ዓዲ እጅ ሙሉ እቱች ተነስሩ ነቅለህ አጥበህ በ፫ ጽዋ ውሀ አንፍረህ እንጨቱን ጣልና ውሀውን ጠጣ።

(f. 32r.)

፱. ዓዲ ጉሮሮው ሊታመመ የአሞጭ ፍሬ ጨፍልቀህ ጠምቀህ ይበጃል፡፡

፲. ዓዲ የጽድ ፍሬ አሳርረህ ደቁሰህ በማር ለውሰህ ብትበላ ትድናለህ፡፡

፲፩. ዓዲ ጉሮሮው ላበጠ የበግ አሞት ለውሰህ በቦሶ ቀባው፡፡

፲፪. ዓዲ ዕፍራን የሎሚ ፍሬ የዘቢብ ፍሬ የሰሌን ፍሬ ነጭ እጣን በፍየል ስብ ለውሰህ ቀባ ፊትህን ባራት ማዘን፡፡

፲፫. ዓዲ የሰልብልያ ቅጾል ተደረቅ እንስላል ጋር ያረቁ አተላ ባንድ አድርገህ የሞቀውን ብትጠጣ ይበጃል ጉሮሮውን ሊታመመ ላበጠውም እቀደመው ይመልሰዋል፡፡

(f. 32v.)

፲፬. ዓዲ ጉሮሮው ሊታመመ የጥጥ ፍሬ ወቅጠህ ውሃውን በማር ብላ፡፡

፲፭. ዓዲ ጉሮሮውን ሊታመመ የምድር ስር በረዥም ጣትህ ሰፍረህ አስተካክለህ ከሰባት ቅባ ኑግ ጋር አንፍረህ ቅበር በወዘት፡፡

፲፮. ዓዲ ዉስጡ ላበጠ አለጩዉ የበሰለ ዶሮ መረቅ የደረቀ የበለስ ፍሬ ፲ ወ ፪ ተምር ዘቢብ የልት ስር የገብስ ፍረትግ ገለባዉ በዚያዉ መረቁ ሁሉንም ባንድ ያብስሉት ተሰስት አንድ እስኪቀር ድረስ ተዚያ ወዲያ እንደ ጠራ ስም በሽማ ይጥመቁት ጥሩ ጥሩ ማር ይዱሉበት ሰኮረ ነቢያት ጨምረህ በጥቂት ያፍሉት ሙቁን በጉንጨፍ ይያዝበት በጥቂቱ አይዋጠዉ ካበጠዉ እስኪደርስ አርኸዉያዉ ያበጠዉ ወደዉስጥ ቢሆን እሮሮዉ የሆነ እንደሆን ምራቁን ለመዋጥ ያቃተዉ እንደሁ ባይቻለዉ በፈረንጅ ልሳን ኤስክንዮንስ ያባላል፡፡ ፈጥነዉ ያልተረዱት እንደሁ ይገለዋል ያዉጡለት ደሙን ቶሎ ብለዉ በእጃቸዉ ተግራዉ ተቀኙም በዋግምት ዳግመኛ ደም ያዉጡለት ተመላሱ በታች ተዉስጥ እጽህሙ አጠገብ ብጡት ቢወዱም ደም ያዉጡለት በጎ ይሆናል፡፡

(f. 33r.)

፲፯. ዓዲ ጉሮሮዉን ለዘጋዉ የእምባይ ቅጾል ነጭላ ቅጾሉን አንፍሮ ዉሃዉን ባፍህ ያዝ ሳይዉጥ ይጉመጥመጥበት ብዙ አዘግይቶ ይትፋ ብዙ ጊዜ ቢአደርጉ ይፈወሳል፡፡

[፲፭] ለአንገት በሽታ

(f.33v.)

፩. ምራቁን ይወጥ ዘንድ ለማይመቸው እስክንድያስ የሚባል ፈጥነው ያላደረጉለት እንደሁ ይገለጻል ደሙ ይወጣል ታንገቱ ተግራም ተቀኙም በዋግምት ተምላሱ በታች ደም ተወስጥ ያወጣል እጽሙ ላይ ሳትበጣው ደም ታወጣለት ዘንድ ተወደድህ በጎ ነገር ይሆናል። ነገርግን ስር ካለበት ስጋው ቢወጣ ስሩ እንዳይበጠስ እሸው ተጉልበቱ እስኮናው ድረስ እጁ ክርን አንስቶ እጣቱ ወሰን ድረስ አቁልቁለህ እሸው ጉልበቱን አቀላቅለህ በመስቀቅ እሰረው።

(f. 34r.)

፪. ዓዲ ጽጌረዳ ናትራን በርበሬ የሰንዶ ፍትግ ሃሰር በጠጅ አፍላው ከወሃ ጋር እስኪጠፋ ፩ እጅ ተሰሰቱ እጅ በሞቀው እጁን ይታጸብ ወስጡን ይጠቡት እንዳልሁ ፍትግ ገብስ በዚያው ወሃ የበሰለውን የሮማን ወሃ ጨምርበት አረቄ ያወጣለትም ጥቁሩን ይሄም ቤሳንህ ጽጌረዳ ቅጠል ዘቢብ አፍላው ሁሉንም በአንድ ጨምረህ ሁልት እጁ እስቲቀር ተሰሰት እጁ ኋላ ግን ጥመቀው አበጅተህ ሶከረነቢያት ጨምርበት የተነሳ እንደሆነ ወለላ ማር አፍላና በጥቂቱ የሞቀውን ባፍ በጉሮሮህ አፍለቅልቀው አትዋጥ ይህንን ደጋግመህ አድርግ።

(f. 34v.)

፫. ዓዲ ወስጡ የነጣ እንደሆነ የገብስ ፍትግ የደረቀ የበለስ ቅጠል ዘቢብ በአንድ በወሃ አፍላ እኩሌታው እስቲቀር በሸማ ጥመቀው ፪ ጊዜ የጠራ ወለላ ማር ዱልን ጥቂት አፍላው ሞቆ ሳለ ተጉንጭና በጉንጭህ ይዘህ አፍለቅልቀው።

(f. 35r.)

፬. ዓዲ ወስጡ ያልነጣ እንደሆነ የያዘ ቢመስል ጼናኦዳም አንጣና የእንኮይ ውሃ አንጣና ስንዴ ዱቄት ጋር አፍላና ሞቆ ሳለ በየጥቂቱ ናትራን ጨምረህ የሞቀውን ናትራን አንሳና ጠጣ ይነጣል ተነጣ በኋላ በላዩ አድርግ ያልሆነውን ተዚያ ገብስ ዱቄቱ እስኪድን።

(f. 35v.) ፭. ዓዲ ተሰክረነቢያት የፈላውን ውሀ ጠጣ።

፮. ዓዲ አንገቱን በቆረጠመው ጊዜ።

፯. ዓዲ የተረርንሳ ፍሬ ተአማራ ጋራ ለዉሰህ ቀባዉ ወንድ የሆነ እንደሆነ በወንድ ፍየል ሃሞት የሴት የሆነ እንደዉ በሴት ፍየል አሞት ለዉሰህ ቀባ።

፰. ዓዲ የሐምለ ገላ ስሩን ቅጠሉንም አሸተህ ብትቀባው ይበጅሃል ለአንገት ማበጥ።

(f. 36r.) ፱. ዓዲ ለሀማመ አንገት የዶሮስብ አንጣና የጋጋኖ ስብም ጨምረህ ተቅባ ኑግ ጋር በአንድ አፍላዉ በጥጥ እሰረዉ እዚያዉ አበጠዉ ላይ።

፲. ዓዲ ልት የምድር በርበሬ ጨዉ ባልነካዉ የዶሮ መረቅ አብስለዉ ፪ እስኪቀር ኋላ ግን ጥመቀዉና ስሩን ጣለዉ በሀብስት ልብ ፈትፍተዉ በቅባ ኑግ በላስታ ቅቤ አፍላዉ ሊጥ እስኪሆን ባወጣኸዉ ጊዜ ተእሳት የእንቁላል አስኳል ዱልበት ጠፍተህ ፫ ጊዜ ጨምርበት አበጠዉ ላይ ሞቆ ሳለ በዚህም ያልተበተነ መግል ያድርግ በጥተህ ማር ጨምርበት።

(f. 36v.)

፲፩. ዓዲ ጥቂት የስንዴ ዱቄት ወይም የገብስ ዱቄት ጥቂቱን አፍራን አርሰህ ባለቀ አሮጌ ሸማ እቁስሉ ላይ አድርግ መግሉም ታለቀ በኋላ ሃዲስ ስጋ እንዲመላ።

፲፪. ዓዲ ወለላ ማር አንጣና ጥቂት አፍላዉ የደቀቀ እጣን ከርቤ የእፍራን ህብር የገብስ ዱቄት ጥቃቅን አተር እዚያዉ በሸማ እሸዉ ሁሉንም አርሰዉና እቁስሉ ላይ አስቀምጥ በራሰዉ ሸማ በቅባ ኑግ በእንዲባለ መድሃኒት ቁስል ይደርቅ ዘንድ ይቻላል።

(f. 37r.)

፲፫. ዓዲ ልት ስር ተነቅጸሉ ፍሬውንም አንጥተህ የደረቀ ተምር ሁሉን አፍላው ተወቀጥከው በኋላ አበጅተህ የተልባ ዱቄት የጥቃቅን አተር ዱቄት የጉበስ ዱቄት ስንዴ ዱቄት ላስታ ቅቤ የዶሮ ስብና የጋጋኖ ስብ ቅባኑግ አፍራን ጥቂት አፍላው። ተሳትም በምታወጣው ገዜ ፪ የእንቁላል አስኳል ጨምርበት ጠፍተህ የሞቀውን ባንገቱ ላይ አስቀምጠው በሸማ አሰረው ፍቱን ነው።

(f. 37v.)

፲፬. ዓዲ ዘይት ተጨው ጋራ ቀባው።

፲፭. ዓዲ የብረት አርም ተኮይ ጋር ጨምረህ ቀባው የሮማን ቅርፊት አብሽ ሽንኩርት ነች እጣን ደቁስህ ተኮይ ጋር ቀባው ስሩንም ቢቆረጥ ይበጀዋል።

(f. 38r.) [፲፮] ዘህንቅርት

፩. ባንገቱ እንቅርት ለወጣበት የዝግባ ፍሬ ዘርጭ እምቧይ ደቁስህ ለውሰህ ቀባው ፯ ቀን ይድናል።

፪. ዓዲ የእንቅርት የዝግባ ፍሬ አልቴት የዘርጭ እምቧይ ፍሬ ባረጠች ሴት አስደቁስህ እስር ባንገትህ።

፫. ዓዲ ህንቅርት ላመመው የዝግባ ፍሬ የእኹይ ፍሬ ደቁስህ ለውሰህ ባንገቱ ቀባውና እስር በሸማ።

፬. ዓዲ ለሐንቅርት በእፉኝት ቁርበት እሸው።

፭. ዓዲ የእንቅርት የጭጫት እንቁላል የባብ አር በሰጎን እንቁላል አስኳል ለዉሶ እርጥቡን እንዲያው ይቀባዋል አድርቆ ያኖረዋል የቀባዋል ያሟሟል።

(f. 38v.)

፮. ዓዲ የእንቅርት የትለም የእለም ቅጾል የዝሆን ፋንድያ ባንድ ደቁሶ በማር ለዉሶ አንገቱን ቀብቶ በጨርቅ ያስሯል ይሟሟል።

፯. ዓዲ የእንቅርት የጉበና ሐሞት ቀባው ወይም በጥተህ እውስጡ ዱል ባዲስ ቅዳጅ አሰረው።

(f. 39r.) ፳. ዓዲ ዘእንቅርትም መድኃኒቱን በማር ለውሶ በጨርቅ ኢድርጐ እስኪድን ድረስ በ፫ በ፫ ቀን ያስረዋል ይሟሟል።

፱. ዓዲ የእንቅርት ሽንኩርት አሰርረህ ሰልቀህ ዉሀ ባልነካው ቅቤ ለውሰህ ቀባው።

፲. ዓዲ ለእንቅርት የተኳን ጽላ ቅጻል አሳርረህ በቅቤ ለውሰህ ቀባው።

[፲፯] ለኅንገት

፩. የዝግባ ፍሬ የእምባይ ፍሬ የእንኮይ ፍሬ ደቁሰህ በአልቴት ለውሰህ በጥተህ ጨምር በአንገቱ እሰር ፳ ዕለት።

(f. 39v.)

፪. ዓዲ የዝግባ ፍሬ የዘርጭ ዕምቧይ ፍሬ ተአልቴት ጋራ ቀባው።

፫. ዓዲ ብጣና የዶሮ ፍትወት ጨምሮ ይሰሩት በሸማ።

(f. 40r.) ፬. ዓዲ የገበር እምቧይ ቅጠል የእንዳሁላ ቅጠል ወቂት ጨዉ አገናኝተህ ቁላ ዉሃ ባልነካዉ ወጭት ፫ ቀን

በጨርቅ ያስሯል ያንበሳ ፋንዲያ የፍየል በጠጥ አገናኝተህ የጦጵያ ደሙን የቅምቦ ደሙን ዉሃ ባልነካዉ ቅቤ አገናኝተህ ለዉሰህ ፯ ቀናት ቀባ።

፭. ዓዲ የምድር እምባይ የጉንድይ የመቅመቆ ጥጥፍሬ የኒሕን ስር ፫ ወይም ፫ ሎሚ እኒህን ወቅጠህ በቅቤ ለዉሰህ ፫፯ ቀን ቀባዉ።

(f. 40v.) [፩፰] ለደረት በሽታ

፮. ዓዲ የዛታ ቅቤ አንጣና የጠናዉን ሁሉንም አስተካክለህ አፍላው እኩልታው እስኪቀር ግን ባረጀዉ ጥጥ አርሰህዉ እታመመዉ ላይ አስቀምጠዉ ሞቆ ሳለ።

፯. ዓዲ የርግብ ኩስ አድቀህ በጠና ጠጅ አፍላው አሙቀው ሞቆ ሳለ በላዩ ጥጥ አድርግበት።

፫. ዓዲ ዌና አዳም ቅባ ኑግ ባንድ ያፍሉት ታበጁት በኋላ ይሹትና እታመመ ይቀቡት።

(f. 41r.) ፬. ዓዲ የኢጋዘን ቀንድ በሞረድ ሞርደህ በጠጅ አጠጣው ፫ ቀን እህል ሳይቀምስ ሰውን ሁሉ ያድነዋል ታለበት በሽታው።

፭. ዓዲ የባርስነት ውሀ አጠጣ።

፮. ዓዲ አመድማዶ ተጠጅ ጋራ አፍልተህ ባንድ አጠጣ።

፯. ዓዲ ቤና አዳም ተበዳ እንስላል ጋራ አፍልተህ ጠጣው።

፰. ዓዲ ለደለት በሽታ ለሆድም እፍኝ ማር እፍኝ ቅቤ የበግ ወተት ጨምር ቀይ ሽንኩርት ወቄት በርበሬ ፭ ድሪም ጼናአዳም ደቁስህ ጨምረህ ሁሉንም መርገህ እሳት አጠገብ፩ ቀን ከዚያ ወዲያ ብለለት፤ ቀን ከዚያዉ አከታትለህ ትፈወሳለህ።

(f. 41v.)

፱. ዓዲ ለደረት በሽታ ለመግልም የድንጋይ ሙጫ ሽንኩር ተወትተ ጋር አንፍራቸው ማታ ማታ ጠጣቸው በደለትህ ያልን ሁሉ ያወጣል። ፭ ቀን አድርግ ወይም ፯ ቀን ይረባል።

(f. 42r.)

፲. ዓዲ ደረቱን ለሚጨንቀው ወዝ በድንጋይ ደፍቆ ይቀባዋል።

፲፩. ዓዲ ደረቱን ለሚጨንቀው የፍየል የድብራ ፍሬ ደቁስህ በጠጅ ጠጣ።

፲፪. ዓዲ ደረቱን ለሚጨንቀው የፍየል ጨው አማር ቅጠል ሎሚ ወቅጠህ አጠጣው።

፲፫. ዓዲ ደረቱን ለታመመ የዶግ ስር የብሳና ስር አንዘርዘይ የወሻ እምቧይ ወርቅ በሜዳ እኒህን በባቄላ ገንፎ አብላው።

(f. 42v.) ፲፬. ዓዲ የጥንተት እንስላል አንፍረህ አጠጣው።

፲፭. ዓዲ የህቃታ መድሃኒት ዝንጅብል ካራት ቁርጠህ ደቁስህ ብትጠጣው ይበጃል።

፲፮. ዓዲ ወይን ብትበላዉ ደረትህን ለሚጨንቅህ ይበጃል፡፡

፲፯. ዓዲ በልቀም ለደረትም የፈታል ቃና ይበጃል በጐ ነው፡፡

፲፰. ዓዲ ወይን ቢበሉ ለደረት በሽታ ይበጃል፡፡

፲፱. ዓዲ የሱፍ ውሀ ለደረት ይበጃል፡፡

(f. 43r.) ፳. ዓዲ ደረቱን ለታመመ ከርቤ ፌጦ ቁንዶ በርበሬ ደቁሰህ ቅቤ አሙቀህ አንሰርስረህ ጠጣ የተረፈህን ገላ ቀባ ትድናለህ፡፡

፳፩. ዓዲ ለደረት በሽታ የሱፍ ዉሃውን በማር በወተት ቀላቅሎ ቢጠጡት ይበጃል ለአካላትም ሁሉ ይፈዉሳል ቃልም ያሳምራል፡፡

፳፪. ዓዲ በሶብላ እህል ሳይቀምስ ቢጠጣ ለደረት ውጋት በሽታ ይበጃል ለደረት ቃታም፡፡

፳፫. ዓዲ አብሽ ለቃታተ ቅቤ ጋራ ቀቅሎ ቢጠጡት ይበጃል መብላቱን ብታበዛው ገላ ላይ መጥፎ ሽታ ይፈጥራል፡፡

፳፬. ዓዲ የሀቃታ መድሃኒት የርቦ እኩል ተልባ ውሀ ነክሮ ያሳድረዋል ዉሀውን አፍሶ በላስታ ቅቤ ያጠጡዋል፡፡

(f. 43v.) [፲፱] ለጡት በሽታ

፩. ያራስ ወይም ለሌላ ሴት ነጮላ አብላ ፊት አበጠበት ዘንድ በጨርቅ እሰር ትድናለህ፡፡

፪. ዓዲ ጅማቱ ለተሰቀቀ እንዲህ አድርግ፡፡

፫. ዓዲ ልት አንፍረህ እንሰላል ብትበላ ብትጠጣ ትድናለህ፡፡

፬. ዓዲ የጉመሮ ስር የምስርቸ ስር ያረግሬሳ ስሩን ቅጠሉንም ያሞራ ምሳ ቅጸሉን ሸነት ስሩን ችፍርግ ስሩን ቅጸሉን ሰንሰል ቅጸሉን የሎሚሸት ስሩን ቀጸሉን አዛምር ጭቁኝ ቀጸሉን ጥንዥት ስሩን ቅጸሉን ጋራም ጥንዥት ስሩን

ቅጽሉን እንጎችት ቀጸሉን የሸኮኮ ጎመን ስሩን ቀጸሉን የምድር እምባይ ስሩን ጅብራ ግንዱን ዝግባ ቀጸሉን
ቅርፊቱን ሊምጭ ስሩን አሚራ ስሩን ጉሎ ቅጽሉን የሴት ቀስት እንጨቱን ስሩን ቅጽሉን ::

(f.44r.)

[፳] ሆዱ ላበጠ ሰው

ሆዱ ላሳበጠው የሰው ወተት የአህያ ወተት የፍየል ወተት ተስኮረነቢያት ጋራ ይጠጣ የጥጥ ፍሬ ሙቅ እየበላ፡፡

፩. ዓዲ የጌዜዋ ስር ቅርፍቱን ቀጥቅጦህ ጠምቀህ በዉሃ በትንሽ ዋንጫ ለራሱህ ጠጣ ለሰውም በጥርኝ አጠጣዉ
ለሆድ ቁርጸት ይበጃል፡፡

፪. ዓዲ ጥቁር አዞ ቅጠሉን ቀጥቅጦህ በዉሃ ጠምቀህ ለሰው በጥርኝ ዉሃዉን አጠጣ ለፈረስ በትንሽ ዋንጫ አጠጣ
ፍቱን ነዉ፡፡

፫. ዓዲ የብሳና ቅጠሉን ቀጥቅጦህ በዉሀ ጠምቀህ ዉሀዉን በትንሽ ዋንጫ ለክተህ አጠጣ ለፈረስ ፍቱን ነዉ፡፡

(f. 44v.) ፬. ዓዲ የመሬዝ ተቀጽላ ሰልቀህ በጥብጠህ ጠጣ ለሆድ ቁርጸት ይበጃል፡፡

፭. ዓዲ እግረ ጠጅ የሚባል ደግሞ አለዉ እምድር ይለጠፋል አበባዉ ቀይ ነዉ የስሩን ቅርፊት ቀጥቅጦ በጥብጦ
በዉሃ ያጠጡዋል ቅርፊቱንም ይቆረጥማል ለሆድ ቁርጠት ፍቱን ነዉ፡፡

CHAPTER FIVE

Annotated Translation and Philological Inquiries

5.1 Introduction

The subsequent annotated translation is based on two main sources; namely, NALA 492, collected manuscripts and field study⁷⁵. The first is the selected manuscripts (NALA 492⁷⁶ and collected manuscripts) and the second is from my field studies (*Maychew*⁷⁷ and *Assosa*⁷⁸, where the data was collected in June, 2017 and December, 2016 respectively). This annotated translation includes scientific description of herbs, archaic Amharic's words (which is repeatedly raised by 'modern' practitioners⁷⁹ as a drawback for not showing dose⁸⁰, quality and

⁷⁵ FGD composed of a homogenous group of professional healers was organized. Willingness on the side of the participants was orally obtained. Digital voice recorder and short hand notes were used to document the content of the discussion. Both one to one interview and semi structured questionnaire applied. Herbalists were selected based on their earlier license and public acceptance. They were selected based on the recommendation of elders and local authorities of the two cities (Maychew and Assosa). A total of ten Informants were identified. The qualitative data was important in assessing the trend and recent development as well to find the lost readings of the base manuscript.

⁷⁶ Only selected parts which deal with herbs.

⁷⁷ The purpose of this study was to encourage people to plant indigenous plants, promote and study the knowledge as well transfer to the next generation. In addition, to give the necessary recognition to those practitioners or herbalists who keep their indigenous knowledge from forefathers? Ultimately, use this rich knowledge for people day to day life and protect them from disease. It will also help to create awareness for the community at Maichew to plant plants of medicinal importance in their garden and sustain the knowledge to the next generation.

⁷⁸ This research was done in Assosa, which is six hundred kilometer far from Addis Ababa. The area where the interview took place called *Kidame Gebeya*, which is a mosaic of people from the five ethnic groups (*Mao, Komo, Shenasha, Berta and Gumuz*). The market is found in front of the bus station.

⁷⁹ For the question are you working with 'modern' medical practitioners? Do you have answer for the repeatedly questions of efficacy, dosage and effectiveness? (Interviewee II) I believe we can work together (herbalists and 'modern' practitioners). In order to work together, we need to discuss closely and monitor our works. I believe the source of all knowledge is God. For the issue of dosage, I have parameters based on the manuscripts and orally transferred knowledge from our forefathers which includes spoon, my fingers and cup. For the issue of efficacy and effectiveness, I believe we had a number of witnesses who got rid of their pain with our assistance (at this time he had showed me a list of names who are treated and healed).

efficacy of herbs and FGD⁸¹ with herbalists⁸² specially on the five selected herbs (*Qäbärčo ቀበርኞ* sci. Echinops, *Dädäho ደደሆ* sci. Euclea schimperi *Kətkəta ከትከታ* Sci. Dodonaea viscose, *Məsrač ሞስርች* Clerodendrum myricoides and *harägresä ሃረግ ሬሳ* Zehneria scabra).

⁸⁰ For the question do you have any measurement to know the dosage? If so, list (Interviewee II) Yes. I usually use spoon to order the medicine for the diseased.

⁸¹ Focus group discussion.

⁸² Interview II (November 2016, Assosa) the herbalist uses Ge'ez text to refer to the written knowledge. The other main means of knowing the medicine is 'his night dream'. The way of administering the medicine is: by mixing, through interacting with people orally, and finally delivering to the patient. The herbs can be classified based on the color as red, blue and *gesho*. The market is found besides *kidame gebeya*, there is no shop rather the herbalists use the traditionally made mall called *gullit* (where items displayed in the ground).

(f.1v.) Number refers to herbs (Numbers used as list of herbs)

1. Characteristics of wheat
2. Barley
3. Ear illness
4. Hard of hearing
5. For swelling Ear
6. Nose illness
7. Nose inflammation
8. Tooth ache
9. Disease of the Lip
10. Disease of the Gum
11. Disease of Palate
12. Tooth decay
13. Spit
14. Throat illness
15. Disease of the Neck
16. Goiter
17. For Neck
18. Chest disease
19. Breast disease
20. The one with swollen stomach

(f. 2r.)Treatment with ordinary food⁸³

[1] Characteristics of wheat

1. Eating hot wheat (bread or porridge) with distilled butter strengthens a hand.
2. Again⁸⁴, wheat is lord for all who eat it; it is a medicine for a pain when eating its flour mixing with grounded fenugreek⁸⁵.
3. Again, eating wheat and chopped sugarcane is good to head and eye.
4. Again, builds the weak. Its bread with unfermented dough is bad, results in disease.
5. Also, wheat is hot and wet. Its wickedness is covered with its good deeds. If prepared properly its property will be pleasant; the fermented is an even one, is better for the stomach; the unfermented one is hard for the stomach; will not be digested quickly, its loveliness is when mixed with black caraway and fennel. Is good if eaten mixed with distilled butter, and will scatter swelling if put on with fenugreek.

[2] Barley

1. (f. 2v.) Again, (take) seven root of *qārät*⁸⁶, of seven barks of *məsrəč*, of seven shoots of *kətkəta*⁸⁷, of seven *q^weqər* white incense, myrrh⁸⁸, salt, lemon, and boil it

⁸³(Interviewee III) the most common diseases treated includes: Stomach ache, headache, for kidney, typhoid, for swelling of stomach.

⁸⁴ካዲ is a Gə'əz word, and translated as still, still more, again, once more, besides, moreover, further, furthermore, rather, but also (Leslahu, 1991) The term is used as a paragraph or section separator in Ethiopic commentary tradition and medicinal manuscripts.

⁸⁵ኣብ the aromatic seeds of a leguminous plant. Use: in medicine, food flavoring; native to: Europe, Asia | *sci. Trigonella foenum-graecum* L. In Ethiopia as a curminative, tonic for gastric troubles, for rheumatism, leprosy, and for wound dressing (Interaction of Ethiopian herbal medicines and spices with conventional Drugs : A practical Guide, Fekadu Fullas, 2006, 69)

⁸⁶Qārät ቀረጥ Sci. Osyris abyssinica.

with a dish that is not spoiled with butter seven (cup of) water, when left a cup of water (put) on; when boiled cool it and apply upon it; but later it should be washed with a dead 'ag^wat⁸⁹ until it is healed⁹⁰.

2. Again, let the linseed dry with the sun, mix it with creamy milk but do not touch with your hand and be cautious from sun light and cold.
3. Again, crush or grind the leaves of *məsrəč* and cotton. Then, mix it with mustard and apply on it heavily; it heals.
4. (f. 3r.) Again, collect spices of *gotot*, 2 *wäqet'adäy'abäba*, 2 *wärqawärəqo*, 2 *wäqet*⁹¹ cotton seed, 'alad⁹² sunflower, *wäqet* flower of *qätätəna*, 'alad flower of *qäga*⁹³, 2 *wäqet'anzəmar*, dirm mustard⁹⁴, root of *tulət*, two drim cabbage seed, 2 drimbazzeqa, a drimwhite incense, *wäqetyeqqura-wəšəš*, 'alad processed honey, 2 drimlazona, a drim 'ərd, and *mäqəmmäqo*; and mix them with yolk of egg, lemon and water; the leafe of *yäfitmäläwäčə*, the leaves of *məsrəč*, *gotot*, *dəggəsa*, *harəgresə*; the seed of *zärč 'əmbu^wy*.
5. (f. 3v.) Again, grind 'antariya and rub on his face, grind the leaf and shoot of vine and rub on his face and head.
6. Again, warm the seeds of *yämədr'əmbway*, and polish with its foam.

⁸⁷ *Kətkəta* ከትከታ *Sci. Dodonae aviscosa* is a kind of tree of the hot lowlands the wood of which is used for making staves or cudgels. ከትከታ በቆላና በወይና ደጋ የሚበቅል ቁጥቁጦ ነው። ጥቅሙ ሲታይ ሲሞሽ፣ የከትከታ የአኪማ የበከበካ ቅርፊትና ቅጠል ተወቅጦ ይታጠነታል። ለአቆሽታ ህመም ቅጠሉን ወቅጦ መጠጣት ነው። ለድድህ ህመም እንጨቱን አከሰሎ መጠቆር ነው። ለቁስል ለምንሽሮ የከትከታና የጥፍርንዶ ቅጠላቸውን ወቅጦ በቁስሉ ላይ መደምደም ነው። ከበትም ይሁን ሰው ለተሰበረ ቅጠሉን ወቅጦ ከስብራቱ ላይ ደፍድፎ ማሰርና ማጀል ነው። እስከሚሻለው ድረስ ይጠገናል። ለመጥፎ ሳል ቅጠሉን ከድንጋይ ልብስ ጋር ማለት ከድንጋይ ላይ የተሰጠፈ አለና ማጨስ። (መሪራስ አማን በላይ ፣ መፀሃፈ አድህኖ፣ 2006፣249፣አርቲስቲክ ማተሚያ ቤት፡፡)

⁸⁸ Myrrh ከርቢ *Scicomiforaabissinica*

⁹⁰ Interviewee II (November 2016, Assosa) herbal medicine is taken as the only option for diseases that are believed to be totally not treatable with modern medicine. The most common diseases mentioned includes: malaria, stomach ache, headache, typhoid, heart failure to mention some.

⁹¹ *Wäqet* ወቂት unit of weight, ounce (28grams), 484 grams for ivory (supp.) Ar. Wiqiya; ንጥር ወቂት gold measured by the ንጥር measure; አንድ ወቂት ቡና a hand full of coffee beans;

⁹² *Galad* is a unit of measurement which is equals to one –half a silver dollar, half-an-ounce (*Wäqet*), equals to five drim; half an ounce of silver (Matthew 22:19)

⁹³ *Qäga* wild thorny rose *sci. Rosa abyssinica*,

⁹⁴ Mustard ሰናፍጭ *sci. brassicanigra*; rape or colaza seeds

7. Again, the blood of dove is good for *madyat*⁹⁵.
8. Grind garlic and mix it with honey, it is good.
9. Again, soak *qäbäräčo*⁹⁶ and apply, it heals.
10. Again, put densely the wet *yämadr'ambway*.
11. Again, *yämdr'äbäš* is good to cure *madyat*.
12. Again, it will be cured if smeared with ground *'amira*.
13. Again, boil the root and leaves of thyme⁹⁷ with *täg*⁹⁸ and smear upon.
14. Again, get seed of *bäräbbäre*⁹⁹, distilled den (sulfur) mix this two well with butter and smear.
15. Again, for *madyat* grind *yämadr'mbay* mix with milk, and smear.
16. Again, the leaf of *na (na)*, garlic, red onion, ash from three fire place; mix it with honey and smear heavily and cleanse every morning with hot water. He should eat wheat bread with milk until he gets healed.
17. Again, grind the fat of black cumin¹⁰⁰ and smear mixing it with butter.
18. Again, smear the fat and marrow of zebra.
19. (f. 4v.) Again, sunflower, beans; mix with honey and smear with butter.
20. Grind the seed of sunflower add anklet in the juice and smear in his face.
21. Grind the seeds of *zägba*¹⁰¹, mix it with butter and smear where there is no shadow.

⁹⁵ *madyat* ማድያት is a kind of dermatological disorder that darkens particularly of the facial skin. Its cause is associated with disorders in liver and female reproductive organs.

⁹⁶ ቀበርኹ- *Qäbäräčo* is a woody plant the bark of which is used as medicine for human and animal's *sci*. *Echinops* እሾህማ ቅጠል ያለውና እንደ ካርት ስር ያለው ነው። ጥቅሙ ለሳል ቁመ ለከሳ ሰው ስሩን ከአሚራ ከእንጭብር ከሙት አንሳ ስር ጋር ደቁሶ በማር ማዋጥ። ሊቃር የቀበርኹ ፍሬ ማለመጥ። (መሪራስ አማን በላይ ፣ መጽሃፈ አድህኖ፣ 2006፣249፣አርቲስቲክ ማተሚያ ቤት።)

⁹⁷ Thyme ሎስኝ *sci*. *Micromeria ovate*, *Thymus serrulatus*, *T. schimper*, *saturejaparadoxa*, *S. punctata*

⁹⁸ *täg* ጠጅ made of a mixture of honey and water which is flavored with *gešo* plant twigs and leaves and allowed to ferment.

⁹⁹ *Bäräbbära* ብርብራ-*sci*. *Milletia ferruginea*

¹⁰⁰ Black cumin ጥቁር አዝሙድ-*sci*. *Nigella*

¹⁰¹ *zägba* ዝግባ *sci*. *podocarpis gracilior* a large tree resembling cedar

22. Again, seed of *bärəbbäre*, distilled (sulfur) mix this two well with butter and smear it.

(f. 5r.)(3] Ear

1. If a worm is entered in the ear, soak the bark of pomegranate¹⁰² and the bark of *šənät*¹⁰³, drop it inside, will eject and kill it.
2. Again, take the extracts of the leaves of *kok* and *ṭänəbäläl*¹⁰⁴, *koso*¹⁰⁵, bile, myrrh, leaf of olive¹⁰⁶ tree and put it in the ear; will eject and kill it.
3. (f. 5v.) Again, find mustard, the leaf of *yäqurawäsfte*, the leaf of *’ämoč*¹⁰⁷, the root of, *čəgogot* soak with theurine of goat and put with cotton.
4. Again, put the gum of juniper tree and the residue of local whisky together.
5. Again, do the same with the leaf of *mäčäne*¹⁰⁸.
6. Again, grind *’alaba* (mix) with water, it kills.
7. Again, it gets cured if you wash, grind and put the liquid of *yämədr* *’əmb^way*¹⁰⁹
8. Again, drop the extract of the leaf and seed of thyme¹¹⁰
9. Again, drop the extract of the seed of *’ämoč*.
10. (f. 6r.) Again, drop mixed egg in the ear, it cures the puss.
11. Again, drop the solution of woman’s milk and *yäbahr tefə* in the ear, it cures.
12. Again, if a worm is entered in the ear or created in the ear, take cow’s milk, juice of *’əret*, juice of *kok*¹¹¹; and smear the mix; and drop into the ear when gets warmed.

¹⁰²Pomegranate ሮግጎsci. Punicagranatum

¹⁰³*šənät* ሸነት sci. MyricasalisifaoliaHochst

¹⁰⁴*ṭänəbäläl* ጠንበለልsci. JasminiumfloribundumFresen

¹⁰⁵Kosso ኮሶsci. Hagenia abyssinica (Bruce) Gmel

¹⁰⁶Olive ወይራsci. oleacuropaea

¹⁰⁷*’ämoč* አሞቅ sci. Sauramatum sp. Amorphopahlus sp.

¹⁰⁸*mäčäne* ሙቅ some people call it *mäč* ሙቅsci. Guizotiaschimperisch

¹⁰⁹*yämədr* ዓ (ጠ) ባይ የምድር አባይsci. CucumisprophetarunJual

¹¹⁰Thyme ጦስኝ sci. Thymus Serrulatus Hochst. Ex. Benth.

13. (f. 6v.) Again, if it is an internal disease, cook and boil a middle aged chicken with its heart, cleanse with a new cotton bandage; add chicken's fat and fine butter; boil it adding two yolks of egg; and put in the ear with cotton balls.
14. Again, a mixture of egg, fresh butter and the meat of *qurnānat* is good.
15. Again, drop into the ear extract from the root of *yāset lāb*¹¹² and little *ṭāḡ*, but distilled with a new bandage.
16. Again, gall of a goat, milk from a woman, few finely ground myrrh then, mix distilled honey with water and drop into the ear when gets warmed.
17. (f. 7r.) Again, put in rose¹¹³ into linseed oil¹¹⁴ and expose to the sun light for three or four days; then take some linseed oil, mix it with cinnamon
18. Again, stir the yolk and the white jellies mass of the egg, and cover it with gauze; then get it into the ear.
19. Again, if the person feels the noise, *ḡar* and dudu drop butter mixing with *koll*¹¹⁵.
20. Again, put in the powder of yesəne juniper's¹¹⁶ seed.
21. Again, put *sənqān*¹¹⁷ *ənzārəzay* into his ear.
22. (f.7v.) Again, extract the leaf of *māḡ*; mix it with water and insert into the ear with gauze.
23. If a worm is entered in the ear, the bark of pomegranate¹¹⁸ and the blood of *šənät*, drop their water inside; will eject and kill it.
24. Again, drop the extracts of *kokə*, *ṭābālāl*, bile, myrrh and the leaf of olive, it kills it.

¹¹¹*Kokəh* ኮከህ also *Kokhsci*. *prunuspersica*

¹¹²*Yāset lāb* የሴት ልብ *scien*. *Rhamphycarpaheuglinii*

¹¹³Rose ጽጌረዳ *scien*. *Rosaceae*

¹¹⁴Linseed oil ቅባት *scien*. *Guizotiaabyssinicaso*

¹¹⁵*Kol* ኮል *kolo* ኮሎ *kāwāillo* ከወሎ *sci*. *Echinopsellenbeckii*

¹¹⁶Juniper ጽጉድ *scien*. *Juniperus Procera* Endl.

¹¹⁷*sənqān* ስንቀን (snuff) *ənzārəzäy* እንዘረዘደ *scien*. *Gladiouls Pisttacinus* Hook

¹¹⁸Pomegranate ሮግን *sci*. *Punicagranatum*

25. Again, for a worm in the ear, drop the water from the bark of pomegranate and šənät¹¹⁹.

26. (F. 8r.) Again, drop the leaves of *kok*, *ṭäbäläl*, kosso, bile and 'amira¹²⁰ sent what is in his ear away.

27. Again, for *gəndä qorqqur*, pour the leaf of olive tree, *kəl* meaning old *ṭäḡ*, little salt, into his ear; and stay open in the sun until it is expelled.

28. Again, if a worm entered into the ear, *yägäbär* 'amb^way, linseed oil, into the ear; it expels it. Again, for an ear disease, wash the seed of *yägäbär* 'amb^way very carefully and dry it out, and let him drink the linseed oil of which, measuring first with young chick egg and milk.

(f. 8v.) [4] Hard of Hearing

1. Take a distilled honey, grind *ṭenna* 'Adam¹²¹, 'äbäḡäh¹²² and spread on his face.
2. Again, take an egg from an immature hen add sesame¹²³ seed oil; exposed it to the sun for four or five days, drop into the ear when gets warmed; boil it with fennel and drink the solution.

¹¹⁹ šənät ሸነት *sci.* Myricasalisifaolia Hochst

¹²⁰ ammera አሞራ *scien.* Plumbago zeylanicum

¹²¹ Tenna 'adam ቤ (ሰላ) ና አዳም *scien.* Ruta Chalapensis L. Known by the common local name tena Aadam, *Ruta chalepensis* is a shrubby plant that is cultivated in the highlands of Ethiopia. It also grows in the Mediterranean region, the Middle East and the Canary Islands. Descriptive of the smell and taste of the plant, "Ruta" is an old Latin name for rue, which literally means bitterness or unpleasantness. This bitterness arises from the rutin constituent of the plant. The specific epithet "chalepensis" is derived from name of the Syrian town of Chalep, which today is called Haleb or Aleppo. Herb of Grace and Garden Rue are the common English names for tena'adam. *R. chalepensis* is usually confused with a closely related species, *Ruta graveolens*. The latter is not known to grow in Ethiopia. It originated in Europe, and is cultivated in many parts of the world. However, the two species share many similar chemical constituents and morphological features. In folk medicine, they also have many intersecting uses. (Fekadu Fullas, A Short Review on Tena 'adam (Ruta chalepensis L.)—Herb of Grace)

¹²² 'äbäḡäh አበጃህ also 'äbäḡäḳəñ አበጃኸ'a variety of greens which do not wither during the dry season (Kane, 1990)

¹²³ Sesame ሰሊጥ *sci.* Sesamum indicum

3. (f. 9r.) Again, take *yābahər šənkurt* , drill it a top and fill it with fat; take it out and refill it with linseed oil; put a charcoal flame upon it until it gets cooked; then drop the warmed liquid in the ear.
4. Again, take an arm long and an ear size wide bamboo stick; fill it with saltpeter¹²⁴; smoke it with fire and send the smoke into your ear.
5. Again, drop salt and honey into the ear.
6. Again, let him drink fenugreek.
7. Again, grind a seed of palm tree, distilled with butter of sesame seed in a small mƏho¹²⁵, exposed to the sun and drop in to the ear.
8. (f. 9v.) Again, for the deaf, take sesame butter, butter from goat, extreme unction, the leaf and root of 'atuc¹²⁶, grind them together and boil and drop into the ear.
9. Again, for a complete hard of hearing and presence of a worm get the barks of pomegranate and šənät; soak them in water and drop; it kills.
10. Again, drop the extracts of *koka*, *ṭäbäläl*, bile, myrrh and the leaf of 'amira; it expels it out.
11. Again, grind the 'əmbway warm it with a fire and drop it; he heals.
12. (f. 10r.) Again, for the one whose ear gets leaching, extracts the leaf of fig¹²⁷ tree and plunge it
13. Again, for a person who gets an ear and neck illness drop in a mixture of yolk and white jelly mass of an egg.

¹²⁴ ጨው ባሩድ a form of sodium nitrate that occurs naturally in dry regions, especially in Chile and Peru. Formula: NaNO₃ (Microsoft Encarta Dictionaries, 2009).

¹²⁵ Məho ምሆ also Mo ም green glass or tumbler

¹²⁶ ቲሮ ኦቲሻ *scien*. *Verbena officinalis*

¹²⁷ Fig tree በለከ *scien*. *Ficus palmate*

14. Again, for mumps mix linseed, fireplace ash with water and smear.
15. Again, let him eat 'äwəṭə mixed with grind salt and smear thickly.
16. Again, for the one who feels irritation and itching inside his ear, drop in *yämədr* 'əmbway, *qäṭəṭəna*¹²⁸ and cress¹²⁹ and grind with 'əṛəyan¹³⁰, mix it with linseed oil. Then, distil with cotton cloth and drop it for several days.
17. (f. 10v.) Again, the medicine for the ear is sesame butter uncrushed, onions, uncrushed Indian pepper, take these, entire warm with charcoal flame and drop into the ear during night; insert cotton ball to protect from wind.
18. Again, it heals if you mix 'amira with butter; and put into the ear with cotton ball.
19. Again, grind the 'əmbway, and drop into the ear with a cotton ball; he hears.
20. Again for a complete hard of hearing, grind the seed of *qäṭəṭəna*; distil with butter in a small vase and drop it into the ear for seven days; he hears quickly¹³¹.
21. Again, 'ämärraro¹³² is good for ear pain.
22. (f. 11r.) Again, for a complete hard of hearing grind the seed and leaf of 'abä *ḡäkāñ*, mix it with honey, add some [some]; and insert into the ear with a cotton ball.
23. Again, squeeze *yämədr* 'əmbway [the red one] the leaf and root between your palms; and drop the liquid into the ear.

¹²⁸ *qäṭəṭəna* ቀጠጥኛ *sci.* Verbascum sinaiticum

¹²⁹ Cress ፈጦ *sci.* lapidum sativum; sheperd's purse; capsella bursapastoralis

¹³⁰ 'əṛəyan ዕርያን 'Ərihan አራሐን 'əriyan ራያን is a kind of scent or perfume

¹³¹ (Interview I, II and III) I believe the first step I always tell to my patients is believe in the power of (the cure of) herbal medicine. Once they become confident in the treatment, is easy for them to get rid of their illness. This kind of advice is common as the data from the interview clearly shows.

¹³² 'ämärräro አመራሮ *sci.* Discopodium penninervum

24. Again, warm with fire and press between your palms the leaf of cotton [*g^wa*] and drop the water
25. Again, get Indian pepper, mix it with honey; boil it and insert it with cotton ball.
26. (f. 11v.) Again, press *'ankorəsa* cress between palms; drop the water; again, wash, crush and drop *yämədr'*əmbway into the ear with chicken louse and worm too.

[5] For Swelling Ear

1. For a wounded ear boil the dried rose with water and drop¹³³ into the ear.
2. Again, insert a boiled pomegranate into the ear with cotton ball.
3. Again, drop a fat from a pig into the ear.
4. Again, drop the water of *mārara qəl* mixed with linseed oil into the ear.
5. Again, boil *ṭena'* Adam with water mixed with the bark of pomegranate and drop into the ear.
6. (f. 12r.) Again, for the ear with pus, get the dung of a goat or antelope or *feqqo*; mix it with *ṭäğ* and insert in the ear with a cotton ball.
7. Insert the powder of linseed into the ear.
8. Again, drop the extract of the leaf of *'ämar*¹³⁴ into the ear.
9. Insert the mixture of myrrh
10. Again, drop a milk of woman mixed with bile of an ox.
11. (f. 12v.) Again, grind the leaf of *'ämoç*, immerse and insert.

¹³³ (Interview II) It is in different forms. Some are orally taken, topically (dermal).

¹³⁴ *'ämär* አማር it probably mean ṣamaro

12. Again, for mump¹³⁵ stake the leaf of tiny seed pea; cook the leaf of *lät*¹³⁶ with broth; mix them with gravy; then add *yä'ənjära ləb*, the powder of beans, the powder of barely and boil it; after this add linseed oil fresh butter chicken fat and saffron¹³⁷; and boil it for few minutes. At the end mix it with the yolk of two eggs and smear thickly upon the swelling part; cover it with cotton; and dress it with bandage.
13. (f. 13r.) Again, grind the seeds of 'abārbara, mix it with honey and smear it; his ear cures and the swelling diminishes
14. Again, smear the white jelly mass of an egg.
15. Again drop the extracts of *käskäso*¹³⁸; it is good to disperse the swelling.
16. Again, it is good if you do the same with the leaf of *kok*.
17. Again, smear mixing incents with honey; should cover his neck with a cloth.
18. Again, extract 'ašəkät¹³⁹; immerse and drop into the ear; it cures.
19. Again, boil the leaf of näcla and the leaf of fig tree, immerse it in cotton ball and insert into the ear; it is good, it heals you.
20. (f. 13v.) Again, grind the leaves of pomegranate and *šənät*; boil it with the highest temperature; and then insert into the ear; it is good for ear disease.
21. Again, for mumps boil the leaf of *tulät*¹⁴⁰ outside, smear thickly on the swelling part; it gets cured.

¹³⁵ Mumps ፪ሮ ደግፍ is a contagious disease: an acute contagious disease, usually affecting children, that causes a fever with swelling of the salivary glands and sometimes also affects the pancreas and ovaries or testes. It is caused by a virus and can be prevented through vaccination. It may cause sterility if contracted by a man (Microsoft Encarta Dictionaries, 2012).

¹³⁶ *Lät* ልት *sci.* *Malva parviflora* L.

¹³⁷ Saffron *ጃፍራን* ስፍራን also አፍራን *ጃፍራን sci.* *Crocus sativus* is the deep orange-colored stigmas of a type of crocus, sometimes ground to a powder. Use: food colorant, flavoring.

¹³⁸ *Käskäso* ከከከሶ also *käskkäse* ከከከሶ *sci.* *Laggera tomentosa*

¹³⁹ *äšəkät* አሽከት *sci.* *Galium aparinoides*

22. Again, mix the leaf of 'awəṭ¹⁴¹ with salt and smear on the swelling part thickly.
23. Again, grind the root of 'attuč; and smear on the swelling part thickly.
24. Again, when mumps results in migraine and eye illness and the patient cries, grind the leaf of 'awəṭ and smear thickly on his face where it hits.
25. Again, smear *lət*, it heals.
26. (f. 14r.) Again, for a person with pus in the ear grind the leaf of dog¹⁴², mix it with butter; and drop in his nose and ear. Again, if he has a serious hard of hearing, take *bəssana*¹⁴³, warm it with fire, extract the juice and drop it.
27. Again, for the person with ear disorder, grind the seed of 'ämäğä¹⁴⁴, mix it with water, distil and drop.
28. (f. 14v.) Again, for a person with pus in the ear, collect the root of 'Ḥṣä *mänahe*¹⁴⁵ from one place, the root of *wärbämeda*¹⁴⁶ from one place; grind, dry, mix it with butter; and smear it from inside and outside; it burns like red pepper and dissolves it; for his ear, melt butter and drop inside; it gets cured.
29. Again, for the person with ear disorder, grind the seed of 'ämoč, extract the juice and drop.

¹⁴⁰ *Tuləṭ* ተሊት *sarsaparilla sci. rumex steudelii*

¹⁴¹ *wəṭ* አውጥ *scien. Solanum Nigrum*

¹⁴² *Dog* ዶግ *sci. Ferula communis*

¹⁴³ *Bəssana* ብሣና *sci. Croton macrostachys*

¹⁴⁴ *ämäğä* አመጃ አምጃ *sci. Hypericum revolutum*

¹⁴⁵ *Ḥṣä mänahe* ስጸ መናሄ *scien. Securidaca longependunculata*

¹⁴⁶ *wärbämeda* ወርቅ በሜዳ *scien. Coccinia sp.*

30. (f. 15r.) Again, for the one with wound inside his ear, with pus and smelling bad, drop the juicy water of 'ämoç into his nose.

31. Again, if the ear gets pus, grind the leaves of bæssanna and drop; dry and grind the *yäğəb šənkurət*¹⁴⁷; mix with butter and smear.

[6] Nose Illness

1. Insert *tena* 'Adam into his nostrils.
2. (f. 15v.) Again, immerse (cotton ball) in the dung of a horse or a mule and insert into thenostrils.
3. Again, burn wing of a chicken to the ash and insert into the nostrils.
4. Again, grind the leaf of *säləya*¹⁴⁸ and drop the extract into the nostrils; it is first-rate.
5. (f. 16r.) If one gets nosebleed (epistaxis) pour cold water upon his head; if the bleeding doesn't stop blotch local cheese and butter thickly on his head
6. Again, extract the juicy water and insert.
7. Again, melt the butter from goat and drop inside; it is good for healthy¹⁴⁹ nose.
8. Again, for the one with pus in the nose, immerse a cotton ball in the extract of 'ämoç and insert.

¹⁴⁷ *Yäğəb Šənkurət* የጅብ ሸንክርት *scien*. *Kniphofia isoetifolia*

¹⁴⁹ „...not simply absence of disease, but the state of physical, social and psychological wellbeing ... the conception of health and illness therefore depends upon the cultural construction of 'abnormality'. This concept of being 'normal' has relative meanings, which vary among different culture. For instance, among the Tuareg in Mali freckles, old age, immaturity, illegitimate birth, ugliness and small buttock are counted as serious impediments. (WHO, 1997)

9. Again for the one, who experience terrible smell in the nose, grind myrrh and sesame; mix with butter and insert into the nose.
10. Again, grind Indian pepper and 'əfran; mix with butter and put inside.
11. Again, for the one who fails to smell at all, insert the mixture of black cumin¹⁵⁰, *kəl*¹⁵¹ and human milk into the nose.

(f. 16v.) [7] Nose Inflammation

1. Boil cleaned barely and raisin making the leaf of lət in all sides so as to cover the two until it gets cooked; but later you will also grind it together; boil it further to a high temperature adding linseed butter; when ready add well stirred yolk of two eggs; mix it, put thickly on the swelling part; and dress it with gauze.
2. Again, for the one who got wound and very bad smell in the nose, add one *sərəbi*¹⁵² sesame butter; it heals.
3. (f. 17r.) Again, pound the seed of 'āmoč; immerse and insert into his nose.
4. Scrap *burədālig*¹⁵³ with stone; mix with water; and insert into his nose.
5. Again, melt the butter from goat and drop into his nose, it works.
6. Again, for the one who got very bad smell in his nose, melt the butter from goat and drop into his nose.
7. Again, for the one who experience terrible smell in his nose grind the leaf of *bisqa*, mix with butter; and drop into his nose and ear; again, if it does not work, take *bəsəq*; warm it with fire, extract the liquid and drop it.

¹⁵⁰ *təqur* ጳጳሞድ *sci. Nigella Sativa*

¹⁵¹ *Kəl* ካል *Kol* ካል *kolo* ካሎ *käwāllō* ካወሎ *sci. Echinops ellenbeckii*

¹⁵² (ስርቢ) ስራቢ. means water soaked or blood soaked (Kane, 1990)

¹⁵³ *Burədālig* ቡርደሊግ (unidentified object)

8. (f. 17v.) Again, for a person with pus in the nose, collect the root of *ʔIṣā mānahe*¹⁵⁴ from one place, the root of *wārḡ bāmeda*¹⁵⁵ from one place; grind, dry, mix it with butter; and smear it from inside and outside; it burns like red pepper; melt and drop the mixture into his nose; it gets cured.

[8] Tooth Pain

1. (f. 18r.) For a tooth pain, pound *bärbärre*, *ʔaltit* and hold between your teeth;
your disease will be eliminated.
2. Again, masticate *ʔena* 'Adam'¹⁵⁶.
3. Again, for a tooth pain stick the seed of rose and *käl*.
4. Again, brush your teeth with the root of *qäräʔ*.
5. Again, for the illness of a tooth pain, chew the root of *gumäro*¹⁵⁷ and the seed of
ginger.
6. Again, if the bark of root of *ʔamira*¹⁵⁸ is drunk, it is good to tooth pain, stomach
ache and all other disease.
7. Again, *yädäga ʔašəqamo* which is also called *däbeḃäša* is good for tooth pain.
8. (f. 18v.) Again, *čənkar* is good for tooth pain.

¹⁵⁴, *əṣä mānahe* ሕጻ ምርሃ *scien*.*Securidaca longependunculata*

¹⁵⁵ *Wärg bameda* ወርቅ በሜዳ *scien.Coccinia sp.*

¹⁵⁶ According to Interview I and III (June 2017), medicinal plants are collected in specific seasons and places. The months following the rainy season are very conducive to collect most of the medicinal plants. This is because herbalists prefer to collect during their optimum time of growth. And well ripened and developed plants give a potent medicine when it is matured enough. There is also specific time to cut the plant in accordance with the type of diseases. My informant describes ‘...usually at night, because I always communicate with God how to deal with the herb and he has mentioned some examples for azurite(is chronic headache), it is on Monday at 1 AM, for *kurtimat* (is related to muscle ache) on Tuesday at 1 AM, for stomach ache, on Wednesday from 4- 5 AM, Thursday is for preparation of utensils like *mākoferya* (used to dig the ground), on Friday, washing the hide which is used as storage and Saturday is for selling since it is a market day. The last day, Sunday is used for cleaning and personal hygiene.

¹⁵⁷ *Gumäro* ገመሮ also *qämäro* ገመሮ *sci.* a variety of capparid.

¹⁵⁸, ammera ಹ಼ಱ್ಱು. 2amma hḥḷḷu. scien. Plumbago zeylanicum

9. Again, for tooth pain, when extracts, soak the roots of *məsərač* and *šəl* in sour *täğ* for days; take out the roots; and hold them firmly between your teeth.
10. Again, take the flower of pomegranate; dry and grind it; it is good for all pain including unstable tooth.
11. Again, for tooth pain at the jaws, hold distilled honey in between your jaws and internal cheeks.
12. (f. 19r.) Again, take the wood of *tä (n) əbäläl* from three trees; smoke the wood with charcoal flame on the clay bowel; take the smoke in your mouth via the hole of *wəsəkābay*¹⁵⁹.
13. Again, it is good for tooth pain, if any one may rub his gums with the fat of *šäla*¹⁶⁰.
14. Again, pound the leaf of olive tree and hold it between your teeth.
15. Again, for the one with jaw pain, extract the juicy water of garlic and drop in the ear; drop to the left if the pain is in the left; and right if it is right.

(f. 19v.)[9] Disease of the Lip

1. Masticate *tena 'Adam* .
2. Again, chew the seed of juniper until it gets dried.
3. Again, boil *gorğäğät*¹⁶¹ with dry rose; put in grape and suck it.
4. (f. 20r) Again, boil sweet *'ənəsälal*¹⁶² with salt; put on his nose
5. Again, insert the juice water from the leaf of *'amar* into his mouth.
6. Again, mix *bälčät*¹⁶³ with honey and insert into your mouth.

¹⁵⁹ *Wəsəkābay* ወሰከባይ, it may mean *wəsəkāmt* ወሰከግጥጥ trap or snare usually a log with holes in it for a person's legs (Kane, 1990)

¹⁶⁰ *Šäla* ሸሊ, marten also genet ሸሊግጥጥ *Sci. genetia*

¹⁶¹ *Gorğäğät* ጎርጎጎጎጎጎ also *gurğäğät* ጎርጎጎጎጎጎ *Impatiens abyssinica*

¹⁶² *'ənəsälal* ኦንኦላል fennel *sci. foeniculumvulgare* or *pimpinellaanisum*

7. Again, let him hold desiccated salt and the flour of barely in his mouth together.
8. Again, let him eat the leaf of *'ənətariya* every day before meal; then he eats food.
9. Again, let him eat *'älətit*.
10. Again, for a disease of mouse; a deformer wind cut the horn of Walia before it gets dried and boil with plenty of *ṭäḡ* until only little *ṭäḡ* is remaining. Then, throw away the horn; add some butter in the remaining *ṭäḡ*; pound incense, myrrh, *'älətit* and *ṭena* 'Adam; mix them all together and smear the deformed jaw.
11. (f. 20v.) Again, let him drink the roots of *yämədr'* əmbway, gizewa and *qärät*; he vomits pus and healed.
12. Again, pound myrrh and put it in his mouse just like *šameta*.
13. Again, for the disease of maz; for whom he got his mouth sick; get him hold *šəb* in his mouth and spit the water; he will be healed.
14. (f. 21r.) Again, boil honey, the residue of local whisky, with appropriate proportion in a new clay bowl; and wash your mouth; it is excellent.
15. Again, for air and cold, pound the leaves of *taqəma*, *gendoš*, *'änfar*, *gumäro* with the right proportion; leave three fourth; and take one fourth; seal the cover and burry deep in the ground for 30 days; fire on the surface above the ground; take it out and boil it with metal cooker until it all evaporates except the linseed oil; add the fat of pig, the fat of sheep; stir with bamboo straw and keep it.
16. (f. 21v.) Pound and smear *käthəde* .
17. Again, for the one with mouth smelling terrible, boil the leaf of strawberry tree; spit the water out after holding a little bit longer in your mouth.
18. Again *ṭamera* is good for the one with deformed mouth.

¹⁶³ *Bäləčät* ብልጽጽት probably it may mean *bərəčəq* ብርጽቅ which means watermelon

19. Again, pound *yäqqola čgogot* and snuffle it.
20. Again, pound the root of *məsərəč*; distil; add *'altit*, myrrh; and snuff it.
21. Again, it is good if you mix *yädənəgay muča* with *šäl* and smear on his mouth.
22. (f. 22r.) Again, for the one whose mouth smells terrible, pound the leaf of dog; mix with butter; and insert in his nose and ear.
23. Again, if it fails to heal, take the root of *bəsqa*, warm it with fire; extract the water and drop it.

[10] Disease of the Gum

1. With salt or the flesh of sheep, leaving the flesh and only taking the broth, boil two palms, *tərəñ*, raisin, cleaned barely, the roughage of cleaned wheat, the root of dog with the broth of the meat until only one third is left; then filter with cotton cloth and add *sokäränäbyat*; boil for a while; and hold it in your mouth a little longer while warm; later immerse the cotton ball in it and put on your gum; if it doesn't heal you, but became pale; take the distilled honey; mix it with *murəğan*, pound and smear it thickly on the gum.
2. (f. 22v.) Again, boil rose with water and add cleaned barely, grind the shoot of *'awəṭ's* leaf, the leaf of strawberry, the leaf of fig tree, two pomegranate with its bark, *šäb*; boil it until it lefts two third; then, immerse it with new gauze and hold in your mouth; cleanse your mouse several times.

3. (f. 23r.) Again, boil the leaf of ' *atuč* with water; when cooled, hold the liquid in your mouth; cleanse your mouth for several days; you will get cured.
4. Again, you will be cured if you boil the dried leaf of strawberry and drink.
5. Again, for swelling gum and teeth, cook chicken with little salt; or the flesh of sheep; and put it in the water containing raisin *təṛəñ*, cleaned barely, cleaned wheat, ten roots of dog; boil all together until left only three fourth of it; then distil the remaining water with new gauze; add *šānkorānābiyatə*¹⁶⁴; boil further for a few minutes; hold the warmed solution in your mouth towards your cheeks; then immerse cotton ball and hold on the gum; if it is getting dried, pus becoming pale take distilled honey and immerse cotton ball in it; hold onto the gum; pound disperse *qäymurğān*¹⁶⁵ and disperse the powder onto the gum.
6. (f. 23v.)(f. 24r.) Again, for the one with gum illness, boil the leaf of 'əmbway, the leaf of *nācəla*; and hold the water in the mouth and spit it frequently for several minutes; it is good and he will get cured.

[11] Disease of Palate

1. (f. 24v.) Boil rose with water and add cleaned barely, the leaf of 'awəṭ, the shoot of strawberry's leaf and fig, two pomegranate, *šəb* with its bark; pound all together and boil until it left two third, then distill it in a new cotton cloth and hold the warmed liquid in your mouth; cleanse with and spit it several times.

¹⁶⁴ *šānkorä* ሸንኮራ *sci. steganotaeniaaraliacea*

¹⁶⁵ *Qäy murğān* ቀይ ሙርጃን *sci. Ilex mitis*

2. Again, for the swelling of Palate and gum, if it is palate that swells, boil rose with water and add cleaned barely, the shoot of olive tree's leaf, the leaf of strawberry, the leaf of fig tree, pomegranate with its bark, *šəb* with its bark; pound all together and boil until it left two third, then distill it in a new cotton cloth and hold the warmed liquid¹⁶⁶ in your mouth; cleanse with and spit it several times.

(f. 25r.)[12] Tooth Decay

1. Again, for whitening teeth, mix salt, honey, and soot with water and brush with it; it will be whitened.
2. Again, for teeth disease let him chew the root of *gumäro* and gingerroot.
3. Again, for bleeding, cracking and unstable teeth, the seeds of rose, pound the seeds of juniper; smear on thickly; it heals.
4. Again, pound the seeds of rose and *dəggəta*¹⁶⁷; and smear it thickly.
5. Again, for bleeding, cracking and unstable teeth; take a handful of rose's seed, seed of juniper; mix them with 'ənəkoy ; and daub thickly.
6. (f. 25v.) Again, cook salt and the dough of wheat; smear it thickly when warmed; make the powder over it.
7. Again, take the horn of deer, one ripe lemon; boil them with wine; if not with good *ṭäḡ* until left half of it; then put by the sick.
8. Again, wrap salt with the web of spider and put by the patient; if it doesn't cure him, take the juice of *bäkurälomi*; mix it with wheat flour and put it on the affected teeth; don not contact it with other body parts.

¹⁶⁶ It is an instance of Ethiopian books of medicine makes minerals as an important source of medicines. For more information you need to find a separate Ethiopic book of minerals known as ጎብረ አዕባኑ ስጦታ ገጽጽ which gives the list the names of important minerals, their characteristics, place of origin and their claimed medicinal or magical powers.

¹⁶⁷ *Dagəta* ደግባ *sci. calpurnia aurea*

22. Again, hammer the leaf of *yəfat*; add linseed oil; and cleansed your mouth; you get cured.
23. (f. 28r.) Again, if your get teeth pain, shakiness, illness; or if your gum swells; take drim *käfarlahəy*, drim *läbanğa*¹⁷⁰, drim heraklis, the seed of *qäräfa*¹⁷¹, drim *kämun*, drim wheat, the seed of *ʿənəsəlal*; pound them all together; wrap it with cloth; and hold between your teeth
24. Again, pound, smoke and inhale the root of *yäzanawa šənət*; the root of gubel, the root of ʿĪṣä *zäwe*, the root of *ʿməyədär*, the root of *səfare*, and the root of somäg.
25. Again, for a severe tooth pain, burn *märaraqəl*, mix it with linseed oil in a clay pan; and tattooed with the mixed sooth
26. Again, for moisturizing gum, scratch it with stone and cow's milk, then taste it with your tongue; if for kids, let him touch his teeth with his tongue.
27. (f. 28v.) Again, for the one with tooth illness, boil the leaf of *ʿəmbway*, , the leaf of *näcəla*; and wash his mouth with the solution without swallowing it; it heals him if he spit the solution out after holding it longer in his mouth; and frequently; for tooth pain, parch *šənät* with fire and chew; chew the root of gumäro with gingerroot.

[14] Spits

1. You will get cured if you boil thyme with *ṭäğ* and drink.
2. Again, if you find the root of *ḥarägresä*, the root of *yämədr-əmbay*, scratch the white and washed; soak the whole night with water or *ṭag^wat*; distil and drink; after you spit out, you will be healed again.

¹⁷⁰ *Lubanğa* ሉባንጃ also *läbanğa* ሉባንጃ *sci. styrax* L.

¹⁷¹ *Qäräfa* ቀረፋ-cinnamon *sci. Gunnerapersonsa* var. *Kilimanjarica*

3. (f. 29r.) Again, you will get cured if you drink *ənko*y with honey; then eat sour pomegranate
4. Again, pound all pepper, *kāmun*, clove¹⁷², *tewānā*, ginger root and *ʾazāmud*¹⁷³ together; and it is good to eat with some kind of food; once you tasted it eat it with wheat *ʾanəḡāra* and chicken.
5. Again, it is good and healing for spits if you boil the root of *nācəlo* with *ṭäḡ* and drink.
6. Again, you will be healed and the spits will be stopped if you pound the root of *čəquñ* and drink with water.
7. (f. 29v.) Again, it is good and healing if you dry one chicken liver, pound, mixes it with *ṭäḡ* and drink.
8. Again, you will be healed if you boil and eat beans with residue of local whisky drink.
9. Again, you will be healed if you dry, pound and drink *yäḡəb šənkurət*¹⁷⁴.
10. Again, get *färäsāña*¹⁷⁵ which can hold dried chicken liver; soak with water and drink them without showing them.
11. Again, for the person with excessive spits, boil cereals with water until two third of it evaporates or left only one third; avoid the residue and drink the water.
12. (f. 30r.) For spits, eat the root of *ʾatuč*.

¹⁷² Clove *qəranəfud* ቅርንፉድ *qəranəful* ቅርንፉል

¹⁷³ *ʾazāmud* አዝሙድ it is not clear whether it refers to ነጭ አዝሙድ *nāč ʾazāmud* (bishop's weed) *sci.ammiviznaga* or *trachyspermumcopticum* or ጥቁር አዝሙድ *təkur ʾazāmud* (cumin) *sci.Niggela sativa*

¹⁷⁴ *Yäž(ḡ) b Šnkurt* የሻርብ (የጅብ) ሸንኩርት *sci. kniphofiaisoetifolia*

¹⁷⁵ *Färäsāña* ፈረሰኛ means chicken breast (the breast bone and the adhering flesh on both sides , the breast is not cut in the European or American fashion)

13. Again, for spits, boil the roots of thyme, *māqmāqo*, *ʿasārāt* and *ʿarägʿəresa* with *ṭäğ* and drink it.
14. Again, for spits, pound the root of *yayəbädämu* with salt grinder; mix it with *täla* or *ṭäğ*; measure it either with *yafšat* *ʿəkul* *ʿäšəkär*, or with small hand finger and drink him; the medicine does not like shadow; let him drink once in a week ; the antithesis is linseed oil; the dosage is like that; it is good.
15. (f. 30v.) Again, for the person with frequent spits; boil the root and leaves of thyme with water; and let him drink.

[15] Throat Illness

For the one with swelling throat, find the root of *ʿIšä mänahi* from one place, the root of *wärəqbämeda* from another place; pound, mix with butter and smear both from inside and outside using your hand; it burns like pepper and dissolves it. For the one with throat illness;

1. Pound the cottonseed, mix with butter and smear it.
2. (f. 31r.) Again, for throat blockage let him swallow butter and *šānkorä näbəyat* seven times; eat pan-broiled bread with butter; mix pepper, garlic, egg, three *ʿafərənğ* and swallow.
3. Again, take myrrh, add honey as small as four seeds of wheat; add residue of local whisky; and let him drink; kosso just for cleansing his throat; he should not swallow, but spit it out.
4. Again, pound *ṭena* *ʿAdam*, mix it with *ənəsəläl*; and *šuro*, and drink it with the residue of local whisky; it washes like muq; and enables him to speak.

5. (f. 31v.) Again, boil the leaf of *'atuč* with water; when cooled, let him cleanse his throat with it; wash his mouth; he should spit it out after holding it a little longer.
6. Again, let him get cupped to the right and left just below his ears, without bleeding; melt woman's milk, with egg fat, fresh butter, barley flour, parch it with egg's yolk, daub and dress with a piece of cloth.
7. Again, pound cottonseed, mix it with honey and let him eat.
8. Again, find a handful of *'atuč* with its root, wash, boil it with three cup of water, trash the wood and drink the water.
9. (f. 32r.) Again, for the one with throat illness, it is good to clobber and extract *'amoc*.
10. Again, you will be healed if you burn the seed of juniper, mix it with honey and eat.
11. Again, for swelling throat, mix bile with roasted and grounded barely; and smear it.
12. Again, take *'əfran*, lemon seed, raisin seed, palm seed, white incense; mix with a goat's fat; and daubs four sides of your face.
13. Again, it is good if you mix, warm and drink the leaf of *sālbəlaya*, dry *'ənəsəlal*, the residue of local beer; it will normalize the illness of throat, swelling and voice disorder.
14. Again, for throat illness pound cottonseed, mix it with honey and eat.
15. (f. 32v.) Again, for the one with throat illness, measure *yāmədr sər* with your longest finger; mix properly with seven linseed; boil and burry with *wāzāt*.
16. Again, for the one with internal swelling, get cooked and unsalted chicken gumbo, the seed of fig tree, twelve palm fruit, raisin, the root of *lət*, the straw barely; cook all together with the same broth until it remains one third; then filter it with gauze

just like filtered wax; add good honey; warm by adding *sokārānābāyat*; hold some of it in his mouth while warm; he should not swallow it; let the liquid cleanse until it reach the swelling part; if the swelling is from the inside, and he became unable to swallow his saliva, which is called '*ekasānyenāsaya* in the language of *fārānāğ*, it will kill him unless he gets extra medicinal support. Thus, they should draw his blood as quickly as possible through *wagəmt* holding with their hands to the left and right side. They should draw his blood; they have to cut just below his tongue inside near to his beard; if they like it will be good if they let him bleed.

17. (f. 33r.) Again, for the one with blocked throat, boil the leaf of '*əmbway*, the leaf of *nāčəla* ; and let him hold the water with his mouth a little bit longer; cleanse it well, and spit out; he will be healed if he repeats this procedure.

[16] Disease of the Neck

1. (f. 33v.) For the one with saliva swallowing difficulties, it may kill him if they fail to assist him with what is called '*əsknədāyas* immediately. Cup him on the left and right side of his neck, and let him bleed. Cup him on his beard just below his tongue; if you like to let him bleed, which sounds good. But cup and bleed him on the flesh where muscles do not exist; in order to protect his muscles from getting cut, massage him from his knee to his heel; and from his elbow to the bottom his fingers downwards; tie up his legs together with draw string.
2. (f. 34r.) Again, boil rose, *natran*, *yāmadr bārəbäre* , wheat straw, with *tāğ* and water until it remains two third of the total volume. Let him wash his hands with the warmed water; let them wash him from within. Insert cleaned barely, broth of pomegranate, the black waste product of local whisky, *benāsah*, the leaf of rose, raisin in the liquid; and boil all

together until it remains two third of the total volume. Then, filter it, add *sokārānābəyat*; when you feel the pain, boil it with distilled honey and cleanse your throat; do not swallow it. Repeat this procedure again and again. Do not quit doing other things.

3. (f. 34v.) Again, if it becomes pale from within, boil straw of barely, dried fig leaf, raisin with water until it remains half of the total volume; then distil it twice with cloth. Then add distilled honey and boil for few minutes. When warm sip it, hold it in your mouth and cleanse with it.
4. (f. 35r.) Again, if it does not look pale, but seems something from within, take *tena'adam*, the extract of *'ənkoy*, wheat flour; and boil them together. When hot add few natran and drink; it gets pale. After it becomes pale, put the aforementioned barely flour over it.
5. (f. 35v.) Again, boil *sokārānābəyat* and drink the water.
6. Again, when he gets neck pain.
7. Again, mix the fruit of *tārārənsa* with *'amera*; and smear with the fat of male goat, if the patient is a man; and with a female goat if the patient is a woman.
8. Again, for swelling neck, it is good to pound the leaf and root of *hamələ* and smear.
9. (f. 36r.) Again, for neck illness, take the fat of chicken, mix and boil it with the fat of gagano.
10. Again, cook lət and *yāmədr bārəbäre* with unsalted chicken fat until it remains two third; filter it and trash the root; then add fresh butter with linseed; and boil until it seems dough; when done add yolk of egg; stir it and put the mixture three times on the swelling part; if it fails to disperse the swelling, it must get pus; you will then cut it away and put honey.

11. (f. 36v.) Again, mix few wheat or barley flour with few *'əḫəran* with old piece of cloth and put on the wound, in order to let the part get refilled with new flesh, after the pus is cleared.
12. Again, take distilled honey and boil for few minutes; add finely ground incense, myrrh, mixed *'əḫran*, barley flour and tiny peas; tie them all with cloth and press it; then wet the cloth and put on the wound with linseed oil; it is possible to cure a wound with applying such kind of medicine.
13. (f. 37r.) Again, boil the root, fruit and leaf of *lət*, dried palm together; pound it and when ready add linseed powder, the flour of tiny peas, barley flour, wheat flour, fresh butter, fat of chicken, fat of *gagano*, *'əḫran*; and boil for few minutes until it seems dough; when done; add yolk of two eggs and stir it well; then put it on his neck, when warm, and dress it with cloth; it heals.
14. (f. 37v.) Again, smear oil with salt.
15. Again, mix iron rest with extract of *'ənkoy* and smear it; smear the bark of pomegranate, fenugreek, onion, white incense with *'ənkoy*; it is good if cut from the root.

[17] Goiter¹⁷⁶

1. (f. 38r.) For the one with goiter on the neck, pound the fruit of *zəgba*, *zärəṣ'əmbu^way*, mix it and smear for seven days; it heals.
2. Again, for goiter, the fruit of *zəgba*, the seed of *zärəṣ'əmbu^way*, pound by menopause woman and dress your neck.
3. Again, for the one with goiter illness, pound the fruit of *zəgba*, the fruit of *'ənkoy*; mix it with water and smear on the neck; dress your neck.

¹⁷⁶ Goiter, in this place, is translated from the Gə'əz word ጎንጎት *hanəgāt* which is already mentioned in Amharic as ኦንብርት *'ənəq art*. The existence of this section in different places may be due to the compiled nature of the manuscript.

4. Again, for goiter, rub with the skin of viper.
5. Again, for goiter, the egg of small ants¹⁷⁷, mix the droppings of snake, with the yolk of ostrich's egg; and smear when wet; dry and preserve, and smear it; it dissolves.
6. (f. 38v.) Again, for goiter, pound the leaf of *tälām*, 'älām the dung of elephant together; mix it with honey; and smear on the neck; dress with cloth; it dissolves.
7. Again, for goiter, smear the bile of *gubānā*; or immerse cotton ball and insert into it; dress it with cloth; it dissolves.
8. (f. 39r.) For goiter, mix the medicine with honey and dress it with cloth until it gets cured; change it every three days; it dissolves.
9. Again, for goiter, parch and pound onion; mix it with butter that does not have contact with water; and smear it.
10. Again, for goiter, parch the leaf of *tāk^wanṭāla*; mix it with butter; and smear.

[18] For Neck

1. Pound the seeds of *zāgāba*, 'āmbway and 'alətet; immerse a cotton ball in the solution; cut the swelling and insert it; dress upon the neck for eight days.
2. (f.39v.) Again, mix the seed of *zāgāba*, *zārāč'embay* with 'aletet; and smear it.
3. Again, cut, insert *yāдоро fātəwāt* and dress it with new cotton cloth.
4. (f. 40r.) Again, parch the leaf of *yāgābār'āmbway* and the leaf of 'əndahulla with one *wāqet* salt; wrap it with a cloth in a new dry clay pan for three days; mix it

¹⁷⁷ Small ants' *ጸጽጸጽ* means either swarm of ants or bugs; or a kind of small ants (Kane, 1990). However, the researcher chose to translate here as small ants.

with the dung of lion, the dung of goat, the blood of *topəya*, the blood of qəmbo;
mix it with butter which is not in contact with water; and smear it for seven (days)

5. Again, pound *yägäbär`əmbway*, the seeds of *gundəy*, *mäqəmāqo*, and cotton,
three grape, and three lemons; mix it with butter; and smear for three to seven
days.

[19] Chest Disease

1. (f. 40v.) Take the butter of *zatta* and boil it all until it left half of the total volume; then,
immerses ärəf, old cotton in it; and put upon the chest of the sick when warmed
Again, pound the droppings of dove and boil with old *täg*; when warm pound cotton over it.
2. Again, boil *tena`Adam*, linseed; extract the liquid and smear on the ill.
3. (f. 41r.) Again, scratch the horn of deer with file; mix it with *täg*; and drink him before meal
for three days; it cures anyone with the disease.
4. Again, drink him the juice of *barsənet*.
5. Again, boil *`amādmado* with *täg* and let him drink
6. Again, boil *tena`Adam* with summer *`ənəsəlal* and drink it
7. Again, for disease of the chest, stomach, the head, and all other diseases, take f. 41v.) handful
of honey, handful of butter, milk from sheep, onions, garlic, *wäqet* pepper, 5 drims *tena`Adam*;
pound them together; seal and put it near to fire for one day; and eat it for three
consecutive days; you will be healed.
8. For chest disease, of developing pus, boil *yädənəgay muça* with sugarcane and milk; drink it
every night; it expels everything; for pus drink for five days, or better seven days.
9. (f. 42r.) Again, for chest pain, immerse stone in oil and smear it.
10. Again, for chest pain, pound the seed of goat, the seed of deبرا; mix it with *täg* and drink.

11. Again, for chest pain, pound *yäḥyäl čäw*, the leaf of 'amar and lemon; and let him drink.
12. Again, for the one with chest illness, let him eat the root of dog, the root of bäsanna, the root of *ənəzäräzy*, *yäwəša'* ambway, (*yämədr'* ambu^way), and *wärəqbämeda* with bean porridge.
13. (f. 42v.) Again, boil and let him drink *yäcənət 'ənəsəlal*.
14. Again, the medicine of hiccup: cut a ginger root into four parts; pound and let him drink; it is good.
15. Again, it is good if you eat grape for your chest pain.
16. Again, *bäləqām* is good for chest; it makes the taste of fatal.
17. Again, it is good if they eat grape for chest disease.
18. Again, the extract of sunflower seed is good for chest.
19. Again, for the one with chest illness, pound myrrh, cress, Indian pepper; mix it with melted butter; drink; and smear your body with the remaining
20. Again, for chest disease, extract sunflower; mix it with honey and milk; and drink; it is good; it heals all body parts, and improves voice.
21. Again, for chest pain, it is good if he drinks the extract of *basobəlla* before meal.
22. Again, for *qatta*, mix fenugreek with butter; cook and drink it; it is good, but it makes you smell nasty if you eat too much of it.
23. Again, for *ḥəqatta*, soak half of *ərbo* linseed in water; distil the water; mix it with fine butter; and let him drink.

[20] Breast Disease

1. (f. 43r.) Let her eat *nəcəla* for breast feeding or any other woman, wrap it on the swelling part, it heals.
2. Again, do the same thing for the one with muscle contraction.

3. Again, boil it with *'ənsəlal*; and eat and drink; you will get cured.
4. Again, the root of gumäro, the root of *məsəṛəč*,¹⁷⁸, the root and leaf of *'arägressa*, the leaf of *yäamora* *'mesa*, the root of *sənät*, the root and leaf of *čəfərg*, the leaf of *sänsäl*, the root and leaf of *lomisät*, the leaf of *'azamərčəquñ*, the root and leaf of *tuə* (*tənut*), the leaf of *'angočət*, the root and leaf of *yäšəkoko gomän*, the root of *'əməbay*, the stem of *ğəbəra*, the leaf and bark of *zəğəba*, the root of *ləməč*, the root of *'ämira*, the leaf of *gulo*, the stem and root of *yäset qäsət*.

[21] The one with Swollen Stomach

1. (f. 44r.) Again, pound the bark of *giz* (*ra*) *ewa*'s root, mix it with water; and drink it with small cup for yourself; and let others to drink it with *ṭəṛəñ*;¹⁷⁹; it is good for stomach ache.
2. Again, pound the leaf of *ṭəqur* *'azzo*; mix it with water; let a human being drink with half-handful; and with a small cup for a horse
3. Again, pound the leaf of *bəsanna*; mix it with water; measure it with small cup, and drink it for a horse; it really heals.
4. (f. 44v.) Again, pound the leaf of *märez təqäşəla*; mix with water; and drink; it is good for stomach pain.
5. Again, there is what is called *'əğərä təğ*, it crawls on the ground, has a red flower; pound the bark of its root; mix it with water and let him drink; and chew the bark; it heals stomach ache.

¹⁷⁸ ምስርቶ ወይና ደጋና ቆላ የሚበቅል ቁጥቁጦ ነዉ። ጥቅሙም አይኑ ለሚቀላ ቅጠሉን ቀቅለህ አጠጣ፤ እጁን ለሚቆረጥመዉ የምስርቶ የስሙግ የእንዳሁላ ስራቸዉን ደቁሰህ በቅቤ አንጠረህ ቀባዉ። የስሩን ቅርፊትና አበባዉን ከሌሎች እጽዋቶች ጋር ቀላቅሎ ለነቀርሳ በሽታ ማጠጣት ነዉ። (መሪራስ አማን በላይ ፤ መዐሃፈ አድህኖ፤ 2006፤249፤ አርቲስቲክ ማተሚያ ቤት።)

¹⁷⁹ ፓሬጽ ጥርኝ unit of measurement, half-handful (amount held in one hand with the figures curled slightly inward towards the body).

5.2 Philological Inquiries

5.2.1 Description of Manuscript Used for the Study

Number: NALA 492

Pages: 153

Page Folium Number: (ff. 167)

Size in cm: 15x7.5

Writing support: Hard cover

Ruling and Pricking: No

Hand: the same hand throughout the text

Rubrication: No

Date: 1975

State of preservation: Well preserved in NALA.

Peculiarities: In some pages there exist drawings; which look like a cross, a man with horn.

Property: Belongs to *Leul Wolde Rufael*

Column: 2

Folios: 167

Material: Paper

Province: Gonder

Language: *Ge'ez* and Amharic

Writings: Large and well written

ḥaräg or decoration: No

Stamps: Stamps of King Solomon of Israel.

Pictures: Pictures of different kind like cross, men etc.

5.2.2 Archaic Amharic Words

Folio No.	Archaic Amharic Words	Gloss
f.2r	ገርድፎ	Chopped
f.2r	ጠባዩ ይገጥማል	Pleasant
f.2r	በሞተ አጓት	Dead Yoghurt
f.2v	አጓት	Residual in the process of traditional cheese making.
f.2r	ጸፍጽፍበት	Apply Heavily
f.3v	ይደፈድፏል	Put Densely
f.4r	ደቁሶ	Mix With
f.4r	እያማገ	Eat With Milk
f.6v	በሃዲስ በፍታ	With a new cotton bandage
f.7r	ንሳና	Take them

f.7r	ጠብጠብ አድርግ	Drop
f.7v	በበፍታ አድርቀህ	Dry with gauze
f.7v	ዱል	Drop
f.7v	ቀርፍተህ	Bark of
f.8r	ከል	Old <i>täğ</i>
f.8v	በቁብ እንቁላል ለከቶ	Measuring with young chicken egg
f.9r	ሰልቀህ	Grind
f.9r	ምሆ አጥራና	Utensil Used
f.9v	ረምጠህ	Grind
f.10r	አላቁጠህ	Mix
f.10v	አጥርተህ	Distil

f.12v	አንጣና	Stake
f.13r	በራፊ	Cloth
f.13r	ጨፍልቀህ ጠምቀህ	Immerse and Drop
f.13r	አንፍረህ	Boil
f.13v	ይደፍድፉ	Smear
f.14v	አንቀጥቅጠህ	Grind
f.16r	ጸፍጸፍ	Blotch
f.18r	ያመንኸህ	Chew
f.18v	አንቅ አድርገህ ያዝ	Hold them firmly
f.19r	ወስከንባይ	Waskembay
f.19v	ዱልና መጥምጥ	Suck it
f.21v	አዘግይተህ ትፋው	After holding a little bit longer in your mouth
f.22v	ተጉመጥመጥ	Cleanse your mouth

f.25v	በሽረሪት ፈትል	With web of spider
f.26r	ጨምር ይበጀዋል	It is good
f.26r	ደስ ይልሐል	You will be pleased
f.28r	ደፍቆ	Socked
f.29r	መጣጣውን	Sour
f.29v	ትፋት	Spits
f.30v	እኩል አሸከር	Ekul Asheker
f.31r	ዝግሃት	Blokage
f.32r	ጨፍልቀህ ጠምቀህ	Clobber
f.32v	በረኽም ጣትህ ሰፍረህ	Measure with your longer finger
f.34r	አፍለቅልቀዉ	Cleanse your throat
f.37r	አበጅተህ	Made Well

f.39r	በጥተህ	Cut
f.42	ህቃታ	Hiccup
f.42v	ቃታም	Hiccup

5.2.3 Punctuation Mark

Punctuation marks in this corpus include: two dots (·) and four dots (∴). The two dots are used to separate words, and four dots are used at the end of a sentence. The scribe of MS NALA 492 didn't give due attention to proper use of the two dots to separate one word from the other. The scribe sometimes even used the two dots inside a single word, splitting it into meaningless morphological units. Such instances are very common throughout the corpus. At times he combined two words together forgetting the two dots. In addition he used the four dots not at the end of the sentence but at phrase level in many cases. Let us look some instances of improper uses of the two dots.

Folio No.	Wrong One	Correct form
f.8v	ዓና፡አዳም	ጤና አዳም
f.16v	እስኪ፡በስል	እስኪ በስል
f.43r	ቁንዶ፡በርበሬ	ቁንዶበርበሬ

f.44r	ሰኮረ:ነቢያት	ሰኮረነቢያት
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CHAPTER SIX

Concluding Remark

Ethiopia is home of many ethnic groups, cultures and beliefs. So, there are high diversity of traditional or indigenous health care knowledge and practices which include medico-religious practices, curative Practices, preventive Practices and surgical practices. In Ethiopian traditional medicine, the issue of health is seen holistically and not separated into physical health and mental health. Spiritual wellbeing is also important. Health is seen as a 'gift of Supernatural' or 'the will of supernatural' and many Ethiopians generally believe that their religion/beliefs help keep them healthy. For Example, while the devil is considered to be the cause of a number of illnesses, God/Allah is believed to provide the healing.

In curative practice, traditional Ethiopian medicine is commonly used to treat a variety of diseases employing substances as recommended by professional traditional medical practitioners. The conditions that claim to be treated include: gastrointestinal disturbances, respiratory disorders, tuberculosis, sexually transmitted infections, impotence, hemorrhoids, rabies, intestinal parasites, skin problems, liver diseases, mental disorders, hypertension, diabetes, and gynecological conditions rheumatism, malaria and others. Surgical practice includes traditional practices related to surgery include bone-setting (*wägeša*) and circumcisions. The setting of bones is regarded as an important surgical procedure which requires a certain degree of skill and experience on the part of the healer. The text in the dissertation is named *Ṣä Däbdabbe* (NALA 489) which is a recipe comprising fifteen diseases with detail description of contents. It starts from treatment with ordinary food (which describes the characteristics of wheat), barley, ear diseases, hard of hearing, for swelling of ear, nose illness, nose inflammation, tooth pain, disease

of the lip, disease of the gum, disease of palate, tooth decay, spit, throat illness, disease of the neck, goiter, for neck, chest disease, breast disease, the one with swollen stomach and stomach disease. In addition to listing of names of herbs, the dose, efficacy and effectiveness of the mentioned herbs are also described in detail.

Traditional healers of Maychew in Tigray and Assosa in Benishangul Gumuz were found to be rich in their traditional knowledge to cure human and animal diseases. Traditional knowledge is restrictive and family based. As a result, the healers transfer their knowledge to their son or the one who is very loyal to the practitioner. Moreover as traditional medicinal knowledge pass from generation to generation, some specific knowledge is lost in between age groups. The recommendation is for three bodies: the government, universities and research centers and knowledge owners¹⁸⁰. The philological inquiry demonstrates archaic Amharic words in the manuscript. The scribe of MS NALA 489 did not give due attention to proper use of the two dots to separate one word from the other. As limitation, there were uncooperative monks and/or priests and refusals of permission to photograph the MSS in the catalogued manuscripts at NALA.

6.1 For the Government

The government should give due attention for herbalists which includes;

- Building of shops both for preparation and for sell.

¹⁸⁰According to WIPO (world intellectual property organization), traditional knowledge holders are all persons who create, originate, develop and practice traditional knowledge in a traditional setting and context. Indigenous communities, peoples and nations are traditional knowledge holders, but not all traditional knowledge holders are traditional.

- Organizing the herbalists into unions.
- Attention for the herbalists and the forest from where these herbs are produced
- Encourage afforestation through various awareness creation programs rather than cutting trees.
- Practitioners should have say on both government and non-government institutions along with their category.
- Traditional medical policy, regulations and working guidelines must be approved.
- Organize opportunities to resolve difference between traditional herbalists and modern medical practitioners.
- Must be directed to benefit the knowledge owners while using the resources at the national as well as international level.

6.2 For Universities and Research Centers

- Herbal manuscripts are the most marginalized manuscripts in Ethiopia and these manuscripts should be studied by universities, research centers and other stake holders so as to supplement the modern medicine.
- Awareness creation programs should be implemented so as to facilitate communication between the traditional healers and researchers on one hand and modern medical practitioners and herbalists on the other.
- Systematic cultivation of medicinal plants can be introduced in order to conserve biodiversity and protect threatened species.
- The institutions should document medicinal uses of plants.

- Institutions like NALA and ARCCH should open their service and manuscripts to researchers in the field of manuscript research especially herbal manuscript.
- Research centers like Ethiopian nutrition research - National research center and Ethiopian public health research should look in to manuscripts and integrate the rich knowledge in their research priority so as to benefit from the rich knowledge of herbal manuscripts found in and outside of the country.
- Departments like social anthropology and folklore should also work in documenting the knowledge so as to prevent from damage and hand over for the next generation for study and use.
- Since the language used to write this herbal manuscript is old Amharic, it can be used for further study in the department of Amharic to benefit from these pregnant manuscripts.
- Institutions should work in ways where ‘modern’ and traditional health care systems have much to learn from each other.
- Institutions (from elementary to higher education) should update their curricula by including lessons about on the use and conservation of traditional medicine.
- Institutions should conduct proper awareness creation programs about the use of herbal medicine.
- Traditional medicinal plants must be documented and preserved for future generation.
- Ethiopian Orthodox Church has great resources in traditional medicinal pharmacopeias based on the photocopy of manuscripts written in different times.
- The study has clearly shows that the same plants were being used for the same purpose across the same borders of both Maichew and Assosa. It also revealed that the same names of diseases and treatment are used in Maichew and Assosa. So, institutions should

work comparative analysis taking the rich experience of herbalists found in different parts of the country.

- Research institutes should consider inviting the respective government officials, policy makers and mass media in view of channeling the findings to the wider public.
- The availability of funds and research institutes that are interested in Ethiopian traditional cultural values and knowledge systems so as to awake the wider public should turn their attention to cultural studies.

6.3 For knowledge owners (Herbalists, Those with the knowledge but not practitioners)

- Should appreciate transfer of knowledge beyond their son and daughter or immediate ancestors.
- Should Show motivation to collaborate with modern medicine experts.
- Should change the oral transfer of knowledge in to books or in any other written forms so as to benefit the future generation.

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ኪዳነወልድ ክፍሌ፡፡(፲፱፻፳፯ ሦስተኛ እትም ፲፱፻፶፮)፡፡ መዝገበ ፊደል ፡፡አርቲስቲክ ማተሚያቤት፡፡

በላይ መኮንን (ሊቀ ጊ.) ፡፡(፳፻፩)፡፡ ትንሣኤ፣ አማርኛ - ግእዝ መዝገበ ቃላት። አዲስ አበባ፣ ማተሚያ ቤት የለውም፡፡

List of Key Informants for Tigray - Maichew 2009 E.C

S.N	Name	Position	Date of Interview	Place of interview	Remark
1	Mr. Zeray Gebre Egziabher	Process Owner Tigray culture and tourism bureau	08/10/09 – 12/10/09	Mekelle	The communication takes five days
2	W/r Tshaynesh Neguse	Head, Culture and Tourism Bureau, Maichew	14/10/09 – 16/10/09	Maichew	
3	Mr. Kahsay Umer	Hearbalist	17/10/09	Mehen	
4	Mr. Hayelom Macha	Hearbalist	18/10/09-20/10/09	Maichew	
5	Mr. Edega Beeray	Hearbalist	21/10/09	Gebeya	
6	Mr. Terefe	Hearbalist	22/10/09	Shekomayo	
7	Meregata Getu	Herbalist	23/10/09	Maichew	
8	Abba Tigabu	Herbalist	24/10/09	Maichew	
9	Emahoy Medhin Gebre Hiwot	Herbalist	25/10/09 -27/10/09	Adega Seluse	
10	W/r Kebedech Hailu Maru	Herbalist	28/10/09 – 01/11/09	Kambi – Wotader Kamb	
11	Teacher Kibrom	Teacher	4/11/09 – 06/11/09		Organize a club to plant medicinal plants at Tilahun Yegezew High school
12	Ermias Gebre Tsdaik	Student	5/11/09	Maichew	
13	Melat	Student	6/11/09	Maichew	

List of Key Informants for Benishangul Gumuz – Assosa 2008 E.C

S.N	Name	Position	Date of Interview	Place of interview	Remark
1	Suliman	Heritage Expert	01/10/10 – 05/10/10	Assosa	He supported me throughout the field work. He recommends me the known herbalists.
1	Mr. Tewokel Tebala	Herbalist	08-10-08	Asossa	Almost all are from Shenasha ethnic group.
2	Mr. Nasir Sendeke	Herbalist	13-10-908	Asossa	
3	Mr. Kahsay Umer	Hearbalist	15-10-08	Asossa	
4	Mr. Ejigu Ayalew	Hearbalist	17-10-08	Asossa	
5	Mr. Worku Tegegne	Hearbalist	19-10-08	Asossa	
6	Mrs. Yodiet Shawul	Hearbalist	22-10-08	Assosa	
7	Mr. Yosef Aleyu	Herbalist	26-10-08	Assosa	
8	Merigeta Tibebe Habtie	Herbalist	30-10-08	Assosa	
9	Merigeta Hadise Tikuneh	Herbalist	2-11-08	Assosa	
10	Merigeta Awazie	Herbalist	6-11-08	Assosa	
11	Suleiman Mohammed	Teacher	8-11-08	Assosa	Organize a club to plant medicinal plants at Assosa Secondary school

Introduction

I am currently pursuing PhD study at Addis Ababa University in the department of philology. The study is titled ‘*Ἐῥᾱ Däbdabbe: Anthropological and philological analysis of Ethiopic herbal medicine with annotated translation*’. I believe the results will not only be value of individual but will also help the institution where I am working in particular and the country at large in general. Your attitudes and opinions are critical to the success of my study. I recognize the value of your time, and sincerely appreciate your efforts on my behalf. Individual responses are anonymous and will be held in confidence.

Thank you for your time.

Sincerely

Personal Information

1. In what age group are you?

19 and under 20 ☐ 20-29 ☐ 30-39 ☐ 40-49 ☐ 50-50 ☐ 60+ ☐

2. Gender

Male ☐ Female ☐

3. In terms of your current occupation, how would you characterize yourself?

Writer ☐ Administrative Assistant ☐ Journalist ☐ Secretary ☐

☐ Academic Professional ☐

4. Education status: Read and write

5. What are the main human health problems/disease at your locality

6. How do you diagnose each disease/health problem?

7. Which part(s) do you use for treating that particular health problem/disease?
8. Local name(s) of the plant(s)?
9. Botanical name(s) to be filled in by researcher?
10. Growth form: Tree/shrub/herb/liana/epiphyte/semi-parasite/parasite/aquatic
11. Brief description of the plant (by investigator/ enumerator), including height, flower color, mature fruit color, mature seed color and other unique features)
12. How widespread is /are the medicinal plants? Easily obtained from home garden/surrounding areas /faraway places (how far? / purchased [if purchased from individual at household /market (indicate name of individual/market place].
13. What were the most significant changes that the intervention has brought in the life of the identified cases (an individual, a family, a community, a school)?
14. Plant parts used in medicine: Root/stem/root bark/stem bark/leaves/small twigs with leaves/ flowers/fruit/seed /whole (Underline). Others
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15. Used alone, mixed with water or other materials...
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16. How plants parts used: Fresh only/dried only/fresh or dried (underline). Other

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17. Preparation for medicinal use: crushed / crushed and powdered/ extracted with cold water
/ boiled (juice /latex) (underline). Other

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18. Dose or amount

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19. Does the dose differ among males, females, children, elders, pregnant women?

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20. Any noticeable adverse /side effect(s)

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21. Any antidotes for adverse/ side effects

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22. How do you preserve traditional medicine?

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23. Any restriction or taboo in collecting medicinal plants?

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24. For what other purpose do you use traditional medicinal plants?

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25. Are medicinal plants marketed/ marketable?

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26. For what other purpose do you use traditional medicinal plants?

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27. Are there any threats to the medicinal plants? List out the main threats, starting with the most serious threats?

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28. How do you conserve traditional medicinal plants?

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29. How is the knowledge on traditional medicine passed to a family member /younger generation?

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30. How does modernization interfere with traditional medicinal knowledge?

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Identification: Name of survey area / Woreda.....peasant association or
Kebele..... Community/ village

interviewer/ facilitator..... date /month/year.....Time
..... from A.M/P.M.....



Photo 1 Qədame Gəbəya - Local market where peoples from different Ethnic group met

(Taken by the researcher, 2016)



Photo 2 Garden for planting of herbal medicine, Maichew

(Taken by the researcher, August 2017)



Photo 3 Garden in Maichew where herbal plants planted in the field.

(Taken by the researcher, August 2017)

የጣራይ ክልላዊ መንግስት ትግራይ The National Regional State of Tigray

ቢሮ ባህልን ቆራጭን Culture and Tourism Bureau

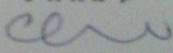
ቁጥር 192/17 Date 09/10/17

ናብ ቤት ልሕፈት ርክብ ህዝብን መንግስትን ከተማ ማይሰላጽ ግልሰሰ፡

ጥያቄ የትሕብርት ምርመራ ይጻፍበት

እብ የኢየሱስ ልዩል ልብ እብ ክፍል ትምህርት ስነ-ልቦን ሰላሳይ ዲግሪትም እብ ምስራሕ ዝርከቡ እይተ መገሰነር ኢሳኢ " Issa Debdabe Philosophical and Anthropological Analysis With Annotated Translation " ብዘባል ርኢል መብርሖት ልሕሩ እገዳዳለሙ ከምዘኾንን እብ ከባቢ ከተማ ማይሰላጽ ዝኮረከሮም መብርሖት መረጻኢ ትምህርት ምእንታ ከኸለል እድላዩ ምትሕብባር ዝከፍረሎም ባሕላት 24 ነገሮት 2009 ብዘቆራ ስል/2009/468/12B/36 ብዘተገሕፈ ደብዳቤ ተገልፅልና ልሕሩ ስሕዝቡ እዚ መብርሖት ዘልም ረብሓ ግብዩ ስለዘኾን እድላዩ ምትሕብባር ዝከፍረሎም እንብሓተትና ዝከፍረሎም ደገፍ ክል እዋሊምና ነመስግንዎ

ምስ ሰላምታ


 ደርእይ ገ/ደር
 ወናኒ ክይሪ ስፊሕ
 Zersay G/ther
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Letter from Tigray culture and tourism Bereau (Taken by the researcher, August 2017)



Photo 4 *Bäläs* – It is widely used in Maichew as fruit, this fruit is also used as herb to treat different disease in the locality

(Photo by the researcher, August 2017)



Photo 5 *Sänsälə*, among widely used herbal medicine at Maichew

(Taken by the researcher, August 2017)



Photo 6 Tilahun Yigezaw secondary and preparatory school, Environment Club

(Taken by the researcher, August 2017)



Photo 7 Tilahun Yigezaw secondary and preparatory school, ጤና አዳም ቴና 'Adam, planted by student Senait Helufe

(Taken by the researcher, August 2017)



Photo 8 Tilahun Yigezaw highschool environment club, where High School students plant herbal Medicine , at Maichew, Tigray – With my Assistant resarcher Micheal tesfaye

(Take by the researcher, August 2017)



Photo 9 Tilahun Yigezaw Highschool Environment Club, Maichew

(Taken by the researcher, August 2017)



Photo 10 Tilahun Yigezaw Highschool Environment Club, Maichew

(Taken by the researcher)





Photo 11 Tilahun Yigezaw Highschool Environment Club, Maichew

(Taken by the researcher, August 2017)





Photo 12 *ṭāḡesar* and '*azemārino*', herbalist Garden at Maichew

(Taken by the researcher, August 2017)



Photo 13 A garden and House for the preparation of Herbal medicine at Maichew

(Taken by the researcher, August 2017)



Photo 14 Tilahun Yigezaw Hightschool Environment Club, Maichew
(Taken by the researcher, August, 2017)



Photo 15 Tilahun Yigezaw Hightschool Environment Club, discussion with club
leaders, Maichew
(Taken by the researcher, August 2017)



Photo 16 W/r Kebedech is a herbalist from Maichew, she is showing the dosage to take the herbal medicine by simply using her finger and a cup used to drink coffee in Ethiopia
(Taken by the researcher, August 2017)



Photo 17 W/r Kebedech Hailu is a herbalist from maichew, she is showing the dosage to take the herbal medicine by simply using her finger and a cup ስጊ used to drink coffee in Ethiopia
(Taken by the researcher, August 2017)



Photo 18 *hərəgəresa* and *'azəmārino*, Planted in the garden

(Taken by the researcher, August 2017)



Photo 19 Assosa – Preparation of maize, to mix with herbal medicine

(Taken by the researcher, January, 2016)



Photo 20 Utensils used for the preparation of medicine (Taken by the researcher, January 2016)



Photo 21 Interview with Kebedech Hailu at Maichew, Southern Tigray

(Taken by the researcher, August, 2017)



Photo 22 Interview with Tshayenesh Niguse at Maichew, Southern Tigray

(Taken by the researcher, August 2017)



Photo 23 Interview with W/r Kebedech Hailu at Maichew, Southern Tigray

(Taken by the researcher, August 2017)



Photo 24 Interview with W/r Kebedech Hailu at Maichew, she is showing the researcher how to deal with the issue of dose in Southern Tigray (Taken by the researcher, August 2017)