



CaTHA

Cambodian Traditional Healers Association

Semi-Annual Newsletter Issue 1

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The First Association for Traditional Medicine by “ Kru khmer ”

Traditional medicine is a collection of the knowledge about the nature which examines, observes and considers the elements, ages, time, seasons, countries and flavors. All of these are experimented, written down and compiled as traditional medicines with many natural resources, namely plants, animal organs, mines or rocks (as a substance) naturally processed as medicines for disease treatments. Khmer traditional medicine has played an important role in caring people’s health in the past time since a modern medical science was not available. Pragmatically,

a text ‘The last powerful King during Angkor Empire Jayavarman VII (1181-1218)’ in the book titled ‘To learn more about Angkor’ by [French author] George Geddes describes 102 hospitals nationwide in which one hospital saw 98 staffs, including health workers and the ones pounding medicines. Moreover, Prasat (temple) Neak Poan serves as a prima facie evidence, where traditional medicine in Angkor period was on a remarkable rise. Therefore, the tradition of illness treatment by the traditional medicine has so far deeply rooted in the past history and

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almost every Cambodian's mind-set. Almost all the works of traditional medicine have extremely lost in repeated wars, especially during the three-year regime (Pol Pot time). The history book itself even more hasn't clearly written down [such traditional medicine]. Currently, World Health Organization (WHO) encourages to research [on the traditional medicine], leading to establishment of the traditional medicine faculties in such countries as Thailand, Vietnam and Myanmar. Fortunately, The Cambodian Traditional Medicine Organization (CaTMO) funded by The Nippon Foundation has so far launched four short training courses since 2009 in which 246 trainees have com

pleted the course and have been training. The CaTMO initiated to form Cambodia Traditional Healers Association (CaTHA) in which to accept the trainees who have completed their traditional medicine healers trainings. The training is aimed to strengthen and prevent the traditional medicine which is a traditional and ancient heritage and culture from being lost, exchange experiences and mutually share hardship so as to provide and receive various pieces of information. The CaTHA was established on August 22th, 2011, It is on Dey Lo 4th, St.108, Sangkat Metapheap, Khan 7Makara, Phnom Penh, at second floor of the building of the National Center of Traditional Medicine.



By Ky Bouhang

Activity of CaTHA

CaTHA will conduct bellow activity following with article and internal regulations of Association.

To collect data on Cambodian traditional medicine such as culture, history, literature, therapy or natural resource, and disseminate those correct information to the people through mass-media such as publications, newsletters, radio or TV program

To promote traditional medicine to the people through conducting regular training or workshop and regional activities.

Abiding for national regulation and moral of health worker then raise the social credibility of traditional medicine and healers.

To promote the integration of safe and effective traditional medicine into public health system.



The Mystery of Amata (Immortal) Flower

Khmer name: Anh Choan
 English name: Butterfly Pea
 Latin name: Clitoria ternatea Linn



Over the past period, it is widely believed that Amata flower can cure several kinds of diseases, including high blood pressure, diabetes, arthritis, fat reduction and pounding heart. Also, such flower is grown for commercial purpose. Magazines, newspapers, and TV have so far published and televised a series of news about Amata flower; however, it hasn't been able to unleash its mystery and effectiveness which readers and watchers should follow and understand. So, what is the original name of this flower? Refer to a document compiled by the National Center of Traditional Medicine name it Anh Choan in Khmer and its scientific name is *Clitoria ternatea* Linn, falling in Fabaceae family. This plant has flowers with various colors, including white, dark blue and pink. In Cambodia it is seen Anh Choan's flower with white and dark blue and one membrane. Currently, Anh Choan's flower the seen with many membranes and pink, which probably imported from overseas. The document by the National Center of Traditional Medicine outlines the consumption of this flower as follows:
 -Flower¹⁾: medicine for long life;
 -Grains: used for constipation;



-Leaves: placed on where boils exist; and -Root: used as a medicine to reduce thirst, treat diarrhea for young children, asthma, chest pain, cough, eye pain, hemeralopia and toothache and make eyes see clearer and strong teeth. Refer to document by Dr. Kazuma Yoshizumi, Ph.D. of Nutrition, Senior researcher of FANCL Corporation, one of the famous Japanese cosmetic & healthy food company said *Clitoria ternatea* Linn doesn't have any toxicity and whole part of plant have been using traditionally in other country as well. Flower is used as dye of the blue in Thailand and Indonesia. Using for substitution for litmus paper and for blue coloring of rice in Molucca Island, Indonesia. Leaf and Immature Legume is edible (as vegetable), Root has been used for the treatment of potent laxative, and also root and leaf are used as a medicine for diuretic and an emetic In India. According to Scientific view of *Clitoria ternatea*. It contains four

kinds of kaempferol glycosides (Kaempferol 3-glucoside (I), 3-rutinoside (II), and 3-neohesperidoside (III) and kaempferol-3-O-rhamnosyl -(1→2)-O-[rhamnosyl 1-(1→6)]-glucoside (IV) namely, flavonoid compounds in the leaves. Therefore it can be expected healthy effects. Such as
 1) Anti-oxidation / Free radical scavenging activity
 2) Blood cholesterol-lowering effect
 3) Blood flow improvement action
 4) Relaxing effect By Ky Bouhang

1) Kam Sout, Book of formula for traditional healer, Formula 18, page17, 1974.
 2) www.fancl.co.jp



Human Story and Case Study: Way of the “Kru Boran” in Mondulkiri

Chran Dim – The Long Apprenticeship

“I would need to be aged 50 to be a Kru Boran” (a Traditional Health Practitioner in Khmer) such is the importance and reverence of age and experience for these essential first-line health providers among Mondulkiri’s remote Bunong Indigenous communities. Dim is aged just 29 but has been learning his craft from a small boy. He has accompanied his father to find health plants in the forests and observe healing ceremonies. Dim is the second child of 10 in his family. He and an older sister (who is disabled) were born in the forest when his parents were alone. Dim’s father attended to his wife’s birth of Dim. If fate had been different, Dim may have grown up knowing only such a life and little of the outside world. But then dramatic events before and after he was born have shaped his life. Today, he hopes to put those events behind him, as he attends a national six-month training course in traditional medicine in Phnom Penh. This, he hopes, will lead to a new family business with a shop and treatment facility. Dim’s parents came together and were married by the Khmer Rouge, although in their case they were happy to do so. They have had an enduring marriage despite so many hazards. His mother is Khmer. His father, Jiran, is Bunong and features in Nomad’s book about traditional medicine. Although the Khmer Rouge forces were defeated in 1979, resistance pockets remained in areas such as Mondulkiri until 1998. Dim’s earliest childhood memories are of the sounds of bombing and gunfire, with the family’s bags always



packed with their most important possessions, ready to run away at any time. Eventually like many Bunong, they made their way by foot, often at night, over the mountains to Anlong Veng near the Thai border in North-West Cambodia. The journey took at least one year, holed up sometimes for days, to hide from military. Dim remembers being constantly hungry and frightened. It was in Anlong Veng where his father resumed traditional health medicine. It was there that Dim, aged 12 or 13, first worked with his father. As the eldest son, it is his responsibility to assist the family to make a living. Anlong Veng did not last long, however, as again the family escaped danger and crossed the border to live in the Pan Noch refugee camp. Like most refugees, all the family wanted to do was to go home. In 1998, when the Khmer Rouge finally gave up its armed struggle, UNHCR offered to help them back to Mondulkiri, and they jumped at the chance. “New Hope” village became

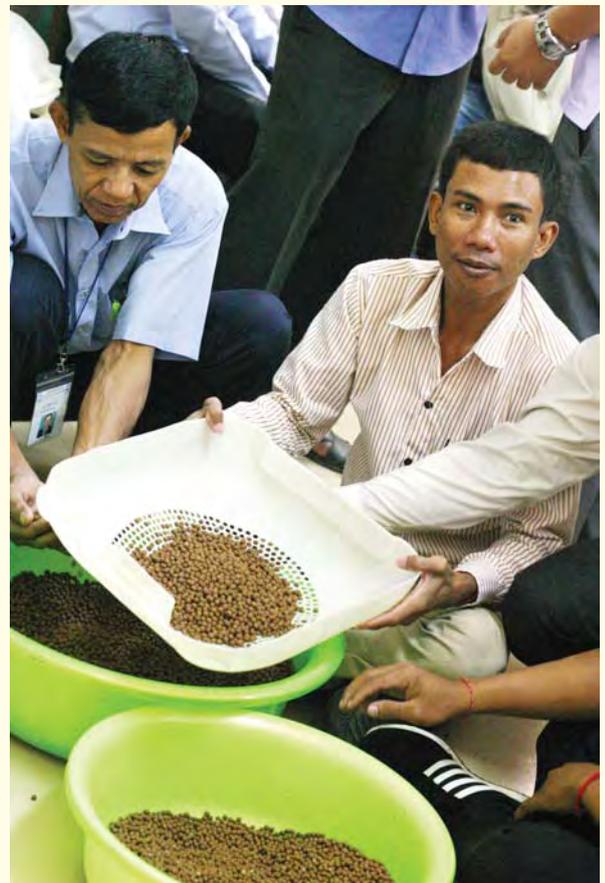
their new home. UNHCR provided them with some rice and salt, he remembers, and authorities gave them 4 hectares to farm that they still have today. In this sense, as Dim acknowledges they are lucky as many Bunong people have lost their land to economic concessions. His village is located inside the Phnom Prich Wildlife Sanctuary, a protected area by the Ministry of Environment supported by the World Wildlife Fund (WWF). The family still enjoys access to community forestry to search for medicinal plants. That task now usually falls on Dim as his father has difficulty in walking these days. Dim, with just two of the 10 siblings, has been able to attend school, in his case for less than two years. Thanks to his mother’s native language and being self-taught, he has good speaking and fair writing Khmer skills, as well as his Bunong spoken-only language. If he had not acquired this knowledge, he would not have been able to join the course in Phnom Penh. There he is one of just two Bunong in a class of

52, the first-ever students from Mondulkiri. Apart from their escape to Anlong Veng, it is his first trip away from Human Story and Case Study: Chran Dim from Mondulkiri, Cambodia, December 2011 home and to the big city of Phnom Penh! Almost all others on his course, including around 10 women, are much older. Originally the invitation was for his father but he asked for Dim to take his place due to his immobility. The course is significant as it will bestow on the Kru Boran, still often called “Bu Blao” in Bunong “one who knows”, official recognition by the Ministry of Health. Traditional Health Practitioners have struggled to be recognized until the National Centre for Traditional Health succeeded in being included in national health policies. That struggle was partly caused by widespread discredit through enforced methods of the Khmer Rouge by people “who did not know”. Dim’s father and many Kru Boran are acknowledged to be true and effective practitioners, a status that Dim hopes to accomplish. Dim’s father Jiran treating a patient who has come to his house. Jiran always initiates a ceremony to get the support from the spirits during the cure. The new policy, for Bunong People, accords closer to the World Health Organization definition of good health “A state of complete physical, mental and social wellbeing”, as well as the UN Declaration on the Rights of Indigenous Peoples Articles 24 and 31 on traditional medicines and plants, etc. Animism places great importance on metaphysical forces that influence health,

diagnosis and cure. These are explained in the book or by reference to Nomad’s website [http://nomadrsi.org /Medicinal-Plants.html](http://nomadrsi.org/Medicinal-Plants.html) Dim’s course is class-based and with practical study trips to two provinces, Kampong Speu and Kandal. He is very impressed by the knowledge of the teachers, and appreciates that his accommodation has been provided by Cambodia Corps, Inc. for Indigenous students. This has helped to make it possible for him to attend. [http://www.cambodiaco-rps.org/ University_Program/Current_Students.html](http://www.cambodiaco-rps.org/University_Program/Current_Students.html) Dim’s family is still very poor. They have a modest house, no electricity, TV etc. In fact if Dim could require the major sacrifice of one or both two buffaloes that they need for farming. Now patients come to the family house and are treated there, but Dim would like it to be organized better, with a shop to store and sell medicines. For now though, that is a dream. He hopes someday the money can be found for it. Dim’s father, like many Bunong Kru Boran, first learned of his vocation through a dream, a signal from ancestral or other spirits. Dim cannot be sure if he has had a similar dream. Such knowledge is often passed from parent to child. However he can personally vouch for his father’s ministrations. He once had serious knee troubles. It was suggested that he made his way to the hospital, but instead they tried his father’s treatment... and it worked! We wish Dim well during his course and for when he returns to join his father in their vital traditional health service to their community and to ensure it continues on to future generations. Dim with

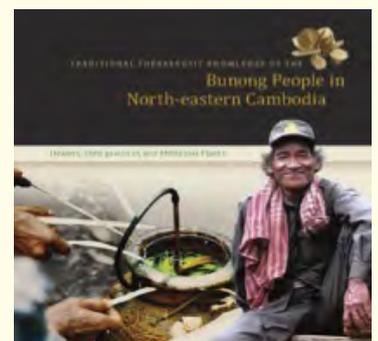
John and Vanny, Nomad colleagues and Bunong neighbours, who made a point of calling in to meet him to see how he is doing on his course. John and Vanny were travelling from Mondulkiri to Malaysia as guests of “Non-Timber Forestry Products (NTFP) for a SE Asian Regional Conference on Indigenous People and forestry resources.

By Mr.Nicolas Savajol



Traditional Therapeutic Knowledge of the Bunong People in North-eastern

English, 2010



Published by
Nomad.RSI

Ancient Tradition Concerning Traditional Medicines and Women as Mothers

Most of ancient Khmers' living conditions relied on the nature, processed it to satisfy basic and pragmatic needs in social health care or used it in war to protect the territory. Women as mothers became one of several traditions and customs in Khmer society using traditional medicines. With elders undergoing and having much experience in their life, they remind their kids from one generation to the next about benefits of traditional medicines. Women who have just delivered a baby, it will make women more healthy, rich in milk (from their breast), good skin, pretty for longer period, able to work in a enduring manner not falling ill easily, have long life and less bone pain when getting old. The medicines that Khmer women have consumed include medicines mixed with wine, ointment, decoction, and Chhpung (where a woman who just gave birth sat in a covered blanket with a container of a combination of traditional medicines which is boiling).

Regarding the consumption of the traditional medicines by women just giving birth, there is the existence of misunderstanding by some people who get the women to eat rice mixed with much salt in the aim to make them thirsty, and then they can take more medicines. As a matter of fact, medicines have their exact doses for daily use. It doesn't mean that taking much of medicines to get it effective. If over does of medicine, it causes symptoms as dizziness, feeling of having neck pain and vomit. Therefore, should personal, household and social happiness existing, good customs and practices should be maintained and misunderstanding of using should be removed as an ancient proverb says:

Good tasks should work harder.
 Incomplete knowledge should to fulfill.
 Existing bad deeds should to remove.
 Good business should make more effort.

By Ky Bouhang

Healthy Pregnant Traditional Medicine

Dosage

- | | |
|---------------------------|--------|
| 1. Cassytha filiformis | 20gram |
| 2. Gardenia obtusifolia | 30gram |
| 3. Cordia cochinchinensis | 30gram |



Clean raw material and put into a pot. Deep them into the water and boil 3 in 1 (1.5liter, take 0.5liter). Then divided for three drinks. Morning, noon, and evening. Use them only when women have pregnant 3 months old.

Formulated by Houn Chhom

Traditional Medicine for sickness after delivery

Dosage

- | | |
|-------------------------------|--------|
| 1. Dalbergia hancei | 15gram |
| 2. Eriosema chinense | 15gram |
| 3. Abutilon indicum | 20gram |
| 4. Aganosma marginata | 15gram |
| 5. Holarrhena antidysenterica | 15gram |
| 6. Tetracera scandens | 15gram |



Clean raw material and put into a pot. Deep them into the water and boil 3 in 1 (1.5liter, take 0.5liter). Then divided for three drinks. Morning, noon, and evening.

Formulated by Houn Chhom

Traditional Medicine for maintenance & improvement for women's health after delivery



Dosage

- | | |
|-----------------------------|--------|
| 1. Pristomeris tetrandra | 15gram |
| 2. Croton crassifolius | 7gram |
| 3. Willughbeia edulis | 15gram |
| 4. Mitragyna speciosa | 10gram |
| 5. Euonymus cochinchinensis | 15gram |
| 6. Tetracera scandens | 15gram |
| 7. Allophylus serrulatus | 15gram |
| 8. Dillenia hookeri | 15gram |
| 9. Eriosema chinense Vogel | 15gram |

Clean raw material and put into a pot. Deep them into the water and boil 3 in 1 (1.5liter, take 0.5liter). Then divided for three drinks. Morning, noon, and evening.

Formulated by Ky Bouhang

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