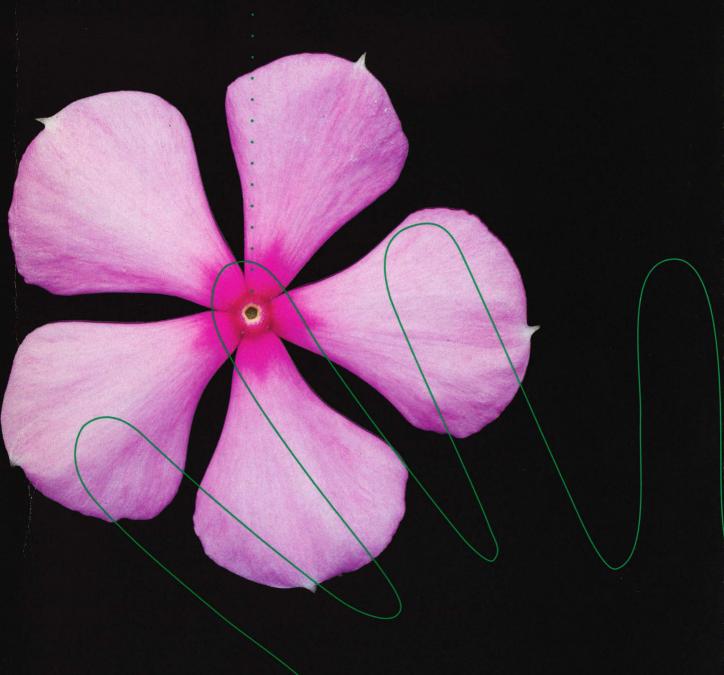
QV 766 93Gu c.l

Guidelines on

The Conservation of
Medicinal Plants



Catharanthus roseus

Rosy Periwinckle from Madagascan

saves live

# GUIDELINES ON THE CONSERVATION OF MEDICINAL PLANTS

THE WORLD HEALTH ORGANIZATION (WHO)

IUCN - THE WORLD CONSERVATION UNION

WWF - WORLD WIDE FUND FOR NATURE









# Published by THE INTERNATIONAL UNION FOR CONSERVATION OF NATURE AND NATURAL RESOURCES (IUCN) GLAND, SWITZERLAND

in partnership with

THE WORLD HEALTH ORGANIZATION (WHO)

GENEVA, SWITZERLAND

and

WWF - WORLD WIDE FUND FOR NATURE
(formerly World Wildlife Fund)
GLAND, SWITZERLAND

1993

© WHO, IUCN & WWF

All requests for reproduction rights should be made to
the Publications Officer, IUCN, Rue Mauverney 28,
CH-1196 Gland, Switzerland

Designed & Produced by MEDIA NATURA



with the support of

AKEL MINOTT ELIA, LONDON

CREATIVE TECHNOLOGY ASSOCIATES, HORNBLOTTON, UK

LP & TS, SOMERTON, UK

CASTLE CARY PRESS, SOMERSET, UK

Printed on recycled paper

©1986 WWF symbol copyright

## Guidelines on the Conservation of Medicinal Plants

The World Health Organization (WHO)

IUCN -The World Conservation Union

WWF- World Wide Fund for Nature

#### ISBN 2-8317-0136-8

Published by The International Union for Conservation of Nature and Natural Resources (IUCN), Gland, Switzerland, in partnership with The World Health Organization (WHO), Geneva, Switzerland, and WWF – World Wide Fund for Nature, Gland, Switzerland, 1993.

© WHO, IUCN & WWF. All requests for reproduction should be made to the Publications Officer, IUCN, Rue Mauverney 28, CH-1196 Gland, Switzerland.

With the support of Akell Minott Elia, London, Creative Technology Associates, Hornblotton, UK

LP and TS, Somerton, UK Castel Cary Press, Somerset, UK

Cover photograph
© The Trustees, Royal Botanic Gardens, Kew

Printed on recycled paper

© 1986 WWF symbol copyright

### **CONTENTS**

Introduction

Objectives	
Developin	g a Strategy
The Role	of International Organizations
1. T	Sasic Studies To study traditional knowledge on the use of plants in health care. To identify the medicinal plants, outline their distributions and assess their abundance.
3. V 4. T	Utilization Wherever possible, to cultivate the medicinal plants as the source of supply. To ensure that any collecting from the wild is sustainable. To improve techniques for harvesting, storage and production.
6. T	Conservation To conserve populations of medicinal plant species in natural habitats. To conserve populations of medicinal plant species <i>ex situ</i> .
D. <u>C</u>	Communication and Cooperation
	To build public support for the conservation of medicinal plants through communication and cooperation.
Annex 1:	The Chiang Mai Declaration
Annex 2:	List of participants at the WHO/IUCN/WWF International Consultation on the Conservation of Medicinal Plants (Chiang Mai, Thailand, 1988)

#### Introduction

All cultures from ancient times to the present day have used plants as a source of medicines. Today, according to the World Health Organization (WHO), as many as 80% of the world's people depend on traditional medicine for their primary health care needs. The greater part of traditional therapy involves the use of plant extracts or their active principles.

The preliminary results of a study on behalf of WHO has shown that the number of individuals using medicinal plants is large and on the increase, even among young people. It is not just in developing countries that medicinal plants are important. In the USA, for example, 25% of all prescriptions from community pharmacies between 1959 and 1980 contained materials from higher plants.

Over the last decade or so, the World Health Assembly has passed a number of resolutions in response to a resurgence of interest in the study and use of traditional medicine in health care, and in recognition of the importance of medicinal plants to the health systems of many developing countries. In answer to WHO's call, health authorities and administrators in developing countries have decided to take traditional forms of medicine more seriously and to explore the possibility of utilizing them in primary health care.

This great surge of public interest in the use of plants as medicines has been based on the assumption that the plants will be available on a continuing basis. However, no concerted effort has been made to ensure this, in the face of the threats posed by increasing demand, a vastly increasing human population and extensive destruction of plant-rich habitats such as the tropical forests, wetlands, Mediterranean ecosystems and parts of the arid zone.

Today many medicinal plants face extinction or severe genetic loss, but detailed information is lacking. For most of the endangered medicinal plant species no conservation action has been taken. For example, there is very little material of them in genebanks. Also, too much emphasis has been put on the potential for discovering new wonder drugs, and too little on the many problems involved in the use of traditional medicines by local populations.

For most countries, there is not even a complete inventory of medicinal plants. Much of the knowledge on their use is held by traditional societies, whose very existence is now under threat. Little of this information has been recorded in a systematic manner. Besides the identification and selection of medicinal plants for use in health services, there is the potential that plants hold as an

1 The study is being carried out by the World Federation of Proprietary Medicine Manufacturers (WFPMM) on behalf of WHO and the results will be published shortly.

2 Farnsworth, N.R. & Soejarto, D.D. (1985). Potential consequence of plant extinction in the United States on the current and future availability of prescription drugs. *Economic Botany* 39: 231-240. The figure quoted did not vary by more than about 1% in any of the 22 years surveyed.

inexhaustible reservoir for the identification and isolation of useful chemical compounds for syndromes such as AIDS, for which there is yet no known cure.<sup>3</sup>

In the light of this situation, WHO, IUCN, and WWF decided that it would be timely to collaborate in convening an International Consultation on the conservation of medicinal plants, bringing together leading experts in different fields to exchange views on the problems, determine priorities and make recommendations for action. The experts at the meeting included administrators and policy-makers in health and conservation, and covered the disciplines of ethnomedicine, botany, education, pharmacology, nature conservation and economics. For IUCN and WWF, this meeting was an important part of their Plant Conservation Programmes.

The consultation took place in Chiang Mai, Thailand, on 21-27 March 1988, with the Ministry of Public Health of the Royal Thai Government as host. A wide range of topics was covered, which included a review of medicinal plant policies (utilization and conservation) in individual countries; the need for information systems, including databases; and the part that botanic gardens can play in the cultivation and conservation of endangered medicinal species. The papers presented have been published.<sup>4</sup>

A lively and stimulating exchange of views took place between conservationists, scientists and health administrators, who were meeting for the first time in the same forum. The participants prepared and issued "The Chiang Mai Declaration – Saving Lives by Saving Plants" (page 47) – which affirms the importance of medicinal plants and calls on the United Nations, its agencies and Member States, as well as other international organizations, to take action for the conservation of medicinal plants.

The meeting divided for part of its time into several working groups to develop a set of guidelines, primarily for governments, outlining in concise form what needed to be done. These guidelines are presented here and will be disseminated widely to governments and relevant institutions throughout the world for adaptation to local situations. Professor Vernon Heywood, formerly of IUCN, prepared the outline, which was developed by the participants. Hugh Synge coordinated the completion of the guidelines after the Conference taking into consideration inputs from participants, and prepared the final text with Olayiwola Akerele, formerly of WHO, and Vernon Heywood.

The Forty-first World Health Assembly (1988) in its resolution WHA41.19 drew attention to the

预览已结束, 完整报告链接和二维码如下:

https://www.yunbaogao.cn/report/index/report?reportId=5 30722

