

Use Of *Tamarix Gallica* In Traditional Saharan Pharmacopoeia (Region Of Adrar, Algeria)

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Abstract

Tamarix gallica L. plays a major ecological role in arid and Saharan ecosystems. It is characterized by its high tolerance to salinity, its ability to thrive in poor soils, and its contribution to the stabilization of dunes and wadi banks. This study aims to investigate the traditional therapeutic uses of *Tamarix gallica* in arid environments (the region of Adrar). To achieve this, around twenty ethnobotanical surveys were conducted in the study area, collecting both socio-demographic data and information on local medicinal practices. The results reveal the significant role of women in traditional Saharan medicine. Furthermore, the oldest members of the community possess the most extensive knowledge of *Tamarix gallica* phytotherapeutic properties. Ethnobotanical analysis revealed clear relationships between the plant parts used and the methods of remedy preparation. The main categories of diseases treated include respiratory, digestive, ophthalmological, sensory, and musculoskeletal disorders. In conclusion, the ethnobotanical knowledge preserved within traditional Saharan medicine constitutes a valuable cultural and scientific heritage. It deserves particular attention for the sustainable promotion and valorization of Saharan bioresources within an integrated development framework.

Key words: Ethnobotany, traditional medicine, Sahara, traditional knowledge, *Tamarix gallica*.

1. INTRODUCTION

Since ancient times, medicinal plants have been used to prevent and treat a wide range of health disorders, and they continue to play a fundamental role in traditional medicine. Indeed, plants remain a major source of active compounds in the modern pharmacopoeia and represent an inexhaustible reservoir of bioactive molecules for contemporary pharmaceutical research (Awaad et al., 2014; Ekor, 2014). Numerous studies have confirmed that medicinal plants contain a diverse array of secondary metabolites, including flavonoids, tannins, and alkaloids, which can be exploited for the treatment of both chronic and infectious diseases (Roy et al., 2022; Chaachouay & Zidane, 2024).

Beyond their ecological importance, species of the genus *Tamarix* are also well known for their numerous traditional applications. Since antiquity, they have been valued for their therapeutic and medicinal properties, particularly in the Maghreb, where they are among the plants reputed to possess anticancer potential in folk medicine. Various parts of the plant (leaves, galls, roots, and fruits) are traditionally used for their astringent, aperitif, diuretic, and sudorific properties (Ateeq & Firdose, 2024; Li et al., 2024). Phytochemical analyses have revealed that *Tamarix* species are rich in polyphenolic compounds such as flavonoids, phenolic acids, tannins, and coumarins, which confer significant antioxidant and antimicrobial activities (Lefahal et al., 2010). These secondary metabolites account for the plant's therapeutic efficacy in treating disorders such as rheumatism, eye diseases, digestive troubles, and spleen dysfunctions (Chehma & Djebbar, 2008; Lakhdari et al., 2016; Adli et al., 2021; Oulad Hadj Youcef et al., 2025; Souddi et al., 2025).

From a socio-economic perspective, *Tamarix gallica* constitutes a plant resource of major importance for populations inhabiting arid and Saharan regions. *Tamarix* species are used as ornamental plants and as a source of forage, especially during dry seasons (Souddi & Ghezlaoui, 2020a). They also play a role in combating desertification and are widely employed in traditional medicine (Villar et al., 2014). Indeed, several parts of the plant, including the leaves, bark, and twigs, are traditionally used to treat a wide range of diseases (Souddi et al., 2022; Souddi et al., 2024). These empirical practices reflect ancestral knowledge transmitted orally from generation to generation, which remains poorly documented scientifically despite its cultural and therapeutic relevance. In Algeria, the genus *Tamarix* occupies an important place and is represented by ten species adapted to diverse and often extreme environments, including *Tamarix aphylla* and *Tamarix gallica*, both characteristic of arid ecosystems (Quézel & Santa, 1962-1963).

In this context, the present ethnobotanical study aims to investigate the traditional therapeutic uses of *Tamarix gallica* among local populations in the region of Adrar (southwestern Algeria).

2. MATERIALS AND METHODS

2.1. Study area

The study was carried out in three localities of the Adrar region, situated in the Algerian Sahara: the municipality of Tamentit (27°46'00" N, 0°16'00" W), Fenoughil (27°40'00" N, 0°18'00" E), and Reggane (26°43'12" N, 0°10'16" E). This region is characterized by a hyper-arid climate, with extremely high summer temperatures that can exceed 45°C and very low annual rainfall, often below 20 mm. The diurnal and seasonal temperature variations are considerable, reflecting an environment subject to intense abiotic stress. These sites were selected due to the natural occurrence and abundance of *Tamarix gallica* in various local ecosystems across the study area.

2.2. Biological material

Tamarix gallica L., belonging to the Tamaricaceae family, is a species widely distributed across arid and semi-arid regions of the Mediterranean basin (Quézel & Santa, 1962; Ozenda, 2004). It is a shrub or small tree usually reaching 2-5 m in height and occasionally up to 8 m (Villar et al., 2019). The plant exhibits a bushy habit with slender branches that range in color from reddish-brown to greyish, depending on age. The leaves are alternate, imbricate, and small (1-2 mm long), sessile, scale-like and partially cover the branches. They possess salt-excreting glands, a typical adaptation to saline environments (Flowers & Colmer, 2008).

This flowers are small, hermaphroditic, and grouped in elongated spikes measuring 2-5 cm, borne at the ends of the branches. Each flower has five pale pink to rosy petals. Flowering occurs from April to August, depending on local climatic conditions (Akhani et al., 2019). The fruit is a small, trilocular ovoid capsule (2-3 mm), which opens at maturity to release minute seeds equipped with a tuft of silky hairs, facilitating their anemochorous (by wind) and occasionally hydrochorous (by water) dispersal (Villar García, 2016).

T. gallica develops a deep taproot system that allows access to groundwater, while its extensive lateral roots promote effective colonization of alluvial habitats. These morphological and physiological traits explain its high drought tolerance and capacity for regeneration in disturbed ecosystems, particularly along wadi banks and in sandy areas (Khabtane & Rahmoune, 2012; Souddi & Ghezlaoui, 2020b).

2.3. Ethnobotanical surveys

The ethnobotanical survey was conducted in three localities in the wilaya of Adrar (Tamentit, Fenoughil and Reggane), where local populations remain highly dependent on plant resources for primary healthcare. The study followed the standardized ethnobotanical data collection protocols proposed by Martin (2004) and Albuquerque et al. (2014), emphasizing methodological rigor and respect for local knowledge. This approach is part of a participatory perspective, where the transmission of indigenous knowledge is an essential element in preserving and promoting ethnobotanical heritage.

The selection of informants was based on specific criteria, including experience, community recognition, and active practice of traditional herbal medicine. A total of twenty knowledgeable informants, including traditional healers with extensive experience in the use of medicinal plants, were interviewed.

The survey was carried out during 2020 using a semi-structured questionnaire, administered through direct individual interviews. The questionnaire consisted of two main sections:

- i) **Sociodemographic data** of the informant (sex, age, education level, and family status);
- ii) **Ethnobotanical data** concerning the medicinal uses of plants, including plant parts used, therapeutic indications, preparation methods, routes of administration, and diseases treated.

2.4. Data analysis

The collected ethnobotanical data were compiled and processed using Microsoft Excel 2016, which provided an efficient interface for data entry, organization, and structuring. The data were then summarized and analyzed through tables and graphical representations to highlight the frequency of use of *Tamarix gallica*, the therapeutic categories cited, and the methods of preparation reported by the informants.

3. RESULTS AND DISCUSSION

3.1. Sociodemographic profile of informants

Table 1 presents the sociodemographic characteristics of the respondents, including gender, age, educational level, and family situation.

Table 1. Sociodemographic characteristics of respondents

Categories	Sub-categories	Proportion (%)
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Gender	Men	15 %
	Women	85 %
Age groups	[40-50 years[30 %
	[51-60 years[25 %
	> 61 years	45 %
Educational level	Illiterate	75 %
	Primary	25 %
Family situation	Married	95 %
	Single	5 %

Overall, women are significantly more represented than men (85% versus 15%). This finding reflects a socio-cultural pattern commonly observed in Saharan and rural societies of Algeria, where women are the main custodians and transmitters of ethnobotanical knowledge (Boudjelal et al., 2013; Benarba, 2016). Women with a rich heritage of traditional knowledge passed down orally from generation to generation play a central role in the preparation and use of medicinal plants within households (Lahsissene et al., 2009). Their daily responsibilities in family health care, especially concerning children and pregnant women, contribute to the development of empirical expertise in natural remedies and local healing practices. This observation is consistent with previous studies from the Algerian Sahara and other arid regions of the Maghreb, which emphasize the predominant role of women in the preservation and transmission of phytotherapeutic knowledge (Benkhnigue et al., 2012).

The use of *Tamarix gallica* is particularly common among older respondents, notably those aged over 61 years (45%), followed by 40-50 (30%) and 51-60 (25%) age groups. This distribution highlights the central role of older generations in preserving and transmitting traditional ethnobotanical knowledge. Several ethnobotanical studies in Algeria confirm that older individuals possess deeper and more comprehensive knowledge of the medicinal properties of local flora, being the principal custodians of traditional phytotherapy practices (Benarba et al., 2015; Kadri et al., 2018; Miara et al., 2019). This tendency is likely linked to the fact that older generations grew up in contexts where traditional medicine represented the main form of healthcare, especially in rural and Saharan regions where access to modern medical services remains limited (Ouelbani et al., 2016). Conversely, younger generations, more exposed to conventional medicine, tend to show declining interest in traditional practices, which could threaten the intergenerational transmission of this valuable cultural and therapeutic heritage (Hammiche & Maiza, 2006; Boudjelal et al., 2013).

Regarding educational level, 75% of the informants are illiterate, and 25% had only primary education. This result illustrates that ethnobotanical knowledge is predominantly transmitted orally and independently of formal education (Benarba, 2016; Bouasla & Bouasla, 2017). Nevertheless, the generally low literacy rate may limit exposure to modern scientific knowledge and consequently hinder the integration of traditional medicine into complementary and sustainable public health strategies (Teklehaymanot & Giday, 2007; Giday et al., 2009).

3.2. Traditional medicinal uses of *Tamarix gallica*

The analysis of ethnobotanical data highlights clear relationships between the plant parts of *Tamarix gallica* used by local populations and the traditional preparation methods employed (Figure 1). Leaves occupy a dominant position, cited by the majority of informants, confirming their central role in Saharan traditional pharmacopoeia. This predominance is consistent with previous ethnobotanical studies conducted in the Algerian Sahara (Chehma & Djebar, 2008; Kemassi et al., 2014; Ould El Hadj et al., 2014; Bouallala et al., 2014; Meddour et al., 2022). The preferential use of leaves may be attributed to their richness in bioactive secondary metabolites, particularly flavonoids, tannins, and polyphenols compounds recognized for their antioxidant, anti-inflammatory, and antimicrobial properties (Younos et al., 2005; Ksouri et al., 2009). Their accessibility, year-round availability, and non-destructive harvesting further reinforce their use within a logic of sustainable ethnopharmacological practices (Yaseen et al., 2015).

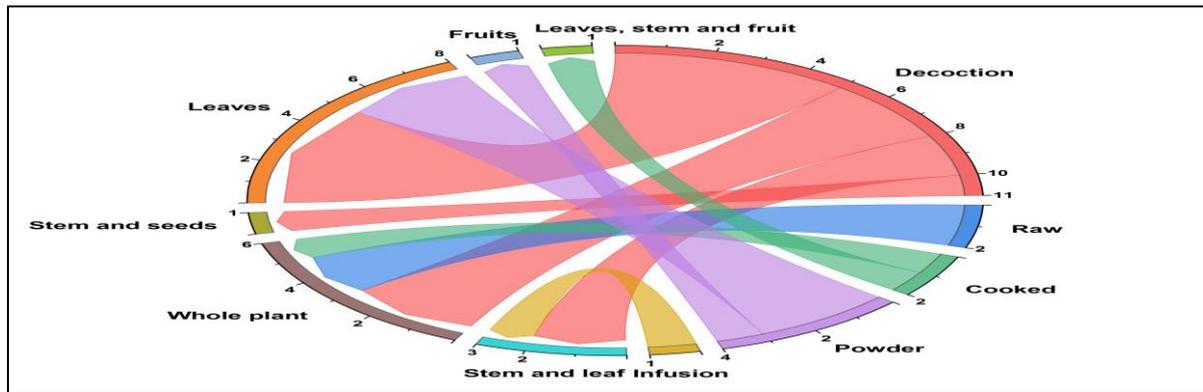


Figure 1. Chord diagram illustrating the relationships between the parts of *Tamarix gallica* used and the preparation methods

Decoction is the predominant preparation method and is mainly associated with leaves, but also with whole plants and stems. This method allows efficient extraction of water-soluble compounds such as tannins and flavonoids, which are often responsible for the species' astringent and anti-inflammatory properties (Chaturvedi et al., 2012). The common use of decoction also reflects a search for synergistic therapeutic effects among the various compounds present in different plant parts (Elamin, 2020). Stems and branches are occasionally used for their astringent and healing properties, attributed to their high tannin and mineral content (Li et al., 2024).

Other preparation methods, such as raw consumption and infusion, are present but less common. Raw use is mostly associated with leaves or the whole plant, often applied externally (poultices, compresses) for rapid relief. Infusion used for more tender parts, such as young stems and leaves, suggests a gentler preparation method intended for internal treatments, particularly for respiratory or digestive diseases. Powdered or cooked forms remain marginal, probably corresponding to specific therapeutic needs or the combination of *Tamarix* with other medicinal plants.

Combinations of plant parts, such as "leaf, stem, and fruit" or "stem-seeds," though infrequent, reveal a nuanced empirical understanding of complementary therapeutic properties. These mixtures reflect local strategies aimed at enhancing treatment efficacy or addressing several symptoms simultaneously.

The analysis of plant parts used relative to the types of diseases treated (Figure 2) shows a marked predominance of respiratory disorders, followed by digestive, dermatological, and ophthalmological disorders. This distribution of uses reflects the main health problems encountered in Saharan environments, where extreme environmental conditions directly influence the nature of common pathologies.

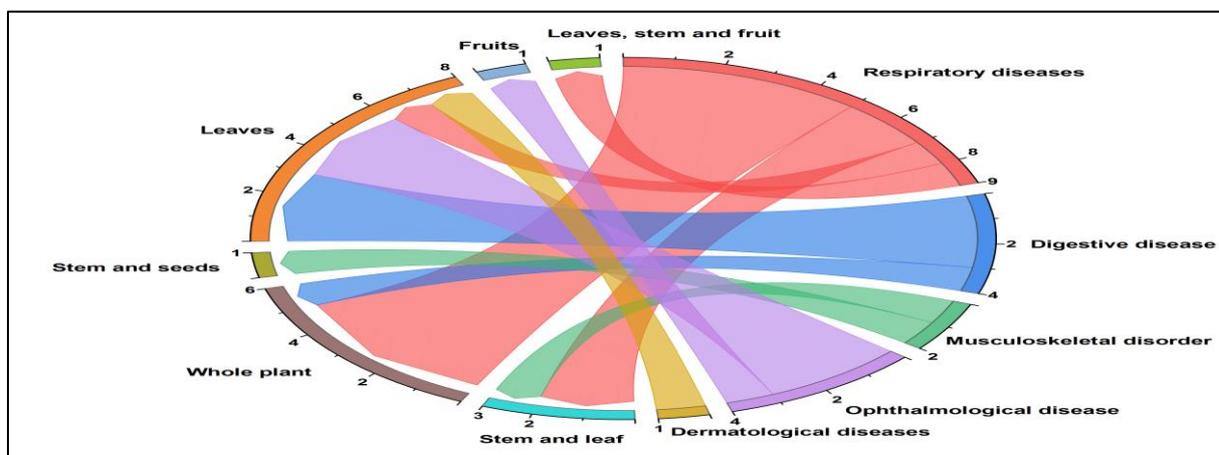


Figure 2. Chord diagram illustrating the relationships between the plant parts of *Tamarix gallica* and the categories of diseases treated.

Respiratory diseases constitute the most represented category, with predominant use of leaves and the whole plant. This finding corroborates with ethnobotanical studies conducted in Algeria (Benarba, 2016; Bouredja et al., 2017; Benaiche et al., 2019; Chohra & Ferchichi, 2019). In these areas, the prevalence of respiratory diseases is closely linked to environmental conditions (dust, drought, sandstorms, and

temperature variations) that promote lung irritation, allergies, and respiratory infections. Studies conducted in other arid regions of North Africa and the Middle East confirm the use of *Tamarix gallica* to treat respiratory illnesses, conjunctivitis, and skin conditions (Hadjadj et al., 2015). These shared patterns suggest a common ethnomedicinal core centered on the recognized therapeutic efficacy of the species. Biochemically, *Tamarix gallica* is rich in polyphenols, flavonoids, and condensed tannins-compounds with potent antioxidant, anti-inflammatory, and antimicrobial activity, which explain its relevance in treating respiratory and skin disorders (Fellah et al., 2018).

Digestive diseases represent the second most frequent therapeutic category. Leaves, stems, and seeds are most commonly used, in agreement with previous studies in Saharan and Mediterranean traditional pharmacopoeias (Bellakhdar, 1997; Bouasla & Bouasla, 2017). The digestive benefits attributed to *Tamarix gallica* likely derive from tannins, which exert astringent effects capable of reducing intestinal inflammation and regulating gastrointestinal motility (Chaturvedi et al., 2012; Elamin, 2017).

Ophthalmological and sensory disorders, although less frequently cited, are specifically associated with aerial parts, particularly leaves. Their use mostly in the form of lukewarm infusions points to soothing, anti-inflammatory, and antiseptic properties, valuable for treating conjunctivitis or eye irritation caused by dust-laden winds (Ksouri et al., 2012).

Dermatological disorders represent another important category, especially for treating wounds, burns, ulcers, and eczema. Stems, leaves, or the whole plant are commonly prepared as poultices, macerations, or decoctions. These uses exploit the healing, antiseptic, and anti-inflammatory effects of polyphenol-rich extracts, whose antibacterial and antioxidant activities have been confirmed experimentally (Ksouri et al., 2012; Boulaaba et al., 2015).

Finally, the treatment of musculoskeletal disorders, such as joint pain and cramps illustrates the therapeutic versatility of *Tamarix gallica*. Similar uses are documented in the Algerian Sahara, where the plant is applied as a poultice or added to therapeutic baths to ease joint inflammation (Hadjadj et al., 2015). These effects are likely linked to polyphenolic compounds capable of inhibiting pro-inflammatory enzymes such as cyclooxygenases (Elamin, 2017).

4. CONCLUSION

In arid regions, preserving traditional medicinal knowledge represents a promising pathway toward sustainable development, as it reinforces the contribution of local medicinal plants to community health strategies while promoting their socio-economic value. In this context, our ethnobotanical investigation of the medicinal uses of *Tamarix gallica* reveals the central social and cultural role played by women, who act as key custodians and transmitters of traditional therapeutic practices. The study also shows that the oldest members of the community hold the most extensive knowledge concerning the phytotherapeutic applications of *T. gallica*, reflecting the intergenerational accumulation of empirical expertise. Ethnobotanical analysis highlights clear relationships between the plant parts used and the methods of remedy preparation. Overall, respiratory ailments represent the most frequently cited therapeutic category, most often treated with leaves or the whole plant. Digestive disorders rank second and involve a broader range of plant parts, including leaves, stems, and seeds. *Tamarix gallica* is also employed for ophthalmological and sensory conditions, as well as for musculoskeletal problems, demonstrating the wide pharmacological versatility attributed to this species by local populations. Given this diversity of uses and the growing pressure on natural resources in arid environments, the adoption of protection and conservation measures is essential to ensure the sustainable management of medicinal plant species such as *Tamarix gallica*.

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