

BOOK REVIEW

Indonesia-no-Ayurveda: Rakuen-no-Treatment JAMU

Translated from:

Susan-Jane Beers, *JAMU: The Ancient Indonesian Art of Herbal Healing*,
Takeshi ITOH (translator), Tokyo: Shuppansinsha, 2006*

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Jamu is known as traditional Indonesian medicine and has been perfected in the ancient Javanese *kraton* (palace). On a relief of the temple at Borobudur, it can be seen that someone is taking jamu from a bowl. *Jamu gendong* (jamu seller) prepares a fresh jamu drink by mixing the juice from several medicinal plants, as well as honey, milk, and eggs. Furthermore, many companies sell several types of manufactured jamu (e.g., drinks, powder, pills, and capsules) according to the secret recipes. Since jamu is common and much cheaper than modern drugs, many Indonesian people prefer to take jamu. Although traditional Japanese medicine, i.e., *Kampo* medicine, seems to be identical to jamu, this is not correct. So-called *jamu* covers not only drugs, but also cosmetics and massage. This book shed lights on jamu from several important aspects, such as its history, pharmacological effects, industry, and more. The effects of jamu are empirical rather than pharmacological, about which this book explains well. Therefore, this book is remarkable and has importance for understanding jamu as one of the scientific fields.

Susan-Jane Beers, the writer of the original book, lived and worked in England and then lived in Indonesia in the early 1990s. As described in the preface of this book, she became interested in jamu through her experience of chronic pain. She met a *jamu gendong* called *Ibu Sri* (Madame Sri) on a trip to Central Java. Ibu Sri diagnosed that Beers' pain came from *pegal linu* (stiffness caused by rheumatism) and gave her a jamu drink, which eliminated the chronic pain within days. This personal experience led to ten years of her intensive research about traditional Indonesian medicine by interviewing many people, resulting in this book.

The contents of the book are as follows:

Preface to the Japanese version by Dr. Tsutomu Hatai

Explanation by the translator Mr. Takeshi Itoh

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Preface: An Introduction of *Jamu*

Chapter 1: Indonesia Healing Through the Ages

Chapter 2: *Jamu* in Daily Life

Chapter 3: The Raw Ingredients of *Jamu*

Chapter 4: Massage: The Power of Touch

Chapter 5: Healers, Collectors and *Gendong*

Chapter 6: Beauty From Within

Chapter 7: The Industry

Chapter 8: The Way Ahead

Appendix: Simple Remedies to Try at Home and Plant Glossary

The supervisor Dr. Tsutomu Hatai (Professor, Toho University) wrote the preface and explained about jamu research in Japan. Before the publication of this book, scientific works in Japan were extremely limited, and most of them were solely undertaken by Dr. Sumiko Takahashi (Professor, Toho University). Dr. Hatai visited Bali and Yogyakarta to study jamu, and Mr. Itoh accompanied him and showed sound knowledge about jamu and *Ayurveda*. Thus, Dr. Hatai asked Mr. Itoh to translate this outstanding book about jamu into Japanese.

In the preface, the definition of jamu is simply explained. Beers introduces the above-mentioned episode with Ibu Sri and explains why she wrote this book.

In Chapter 1, the author describes that ‘The use of herbs in a curative or health-giving capacity is as old as Javanese civilization itself’. Reliable written records that were dated are very few. Two manuscripts in the Surakarta Palace library are the best references on traditional Indonesian medicine: *Serat Kawruh bab Jampi-jampi* (A Treatise on All manner of Cures) and *Serat Centhini* (Book of *Centhini*), which was written in the eighteenth century.

In Chapter 2, the Indonesian Department of Health defines jamu as ‘any curing mixture that is taken internally.’ The four basic functions of jamu are explained: to treat particular illnesses, to maintain continuing good health, to relieve pains, and to improve particular malfunctions in the body (part of which ensures harmonious marriage). The author mentioned that ‘The accusation that jamu is not scientifically proven is still often made by the medical profession’. On the other hand, clinical trials provide strong evidence to verify the pharmacological activity of drugs. Clinical trials of jamu are difficult to perform because many herbal constituents are included in jamu with a different content.

In Chapter 3, Beers explains: ‘Of the 40,000 species of tropical plants in the world, an estimated 30,000 grow in Indonesia’. Indeed, the biodiversity of Indonesia is the second highest. Despite the large number of the medicinal plants, no more than 20 medicinal plants are essential for the jamu industry. Interestingly, most of them belong to the ginger or Zingiberaceae family. The rhizomes (roots) of common ginger (*Zingiber officinale*) known as *jahe*, turmeric (*Curcuma domestica*) known as *kunyit* (standard Indonesian) or *kunir* (Javanese), and resurrection lily (*Kaempferia galanga*) known as *kencur* are the typical crude drugs used in jamu.

Chapter 4 deals with massage as a part of traditional Indonesian medicine. Massage is widely performed in Asia and is an approach to inner and outer health and beauty in Indonesia.

In Chapter 5, the author describes the strong network among healers, jamu collectors, and *jamu gendong*. This network indirectly connects the medicinal plants and patients. Nowadays, the jamu companies are intermediaries in this network.

In Chapter 6, Beers explains that ‘beauty care in Indonesia is a total beauty system for mind and

body'. Beauty products and cosmetics are partly included in traditional Indonesian medicine (i.e., *jamu* in a broad sense).

Chapter 7 deals with the *jamu* industry, which comprises about 500 companies. The top five major companies are improving the cleanliness and quality of the final *jamu* products, which has resulted in an increase in their sales at department stores or specific shops.

In Chapter 8, Beers discusses the future of *jamu*. Indonesian people use *jamu* from the aspect of its price. In contrast, westerners are concerned from the aspect of health and fitness and have an interest in Asian traditional medicine including *jamu*, even though *jamu* lacks scientific evidence. In conclusion, she hopes for a positive future for *jamu*.

In the Appendix, home-made *jamu* recipes are shown ('Simple Remedies to Try at Home'). They are prepared from common herbs and plants, such as ginger, turmeric, clove, and nutmeg. The Plant Glossary may be useful, although it should be noted that there are many languages in Indonesia. For example, *banana* (English) is named differently by region: *pisang* (standard Indonesian), *gedang* (Javanese in Central and East Java), and *cau* (Sundanese in West Java). Appendices of 'Reputable *Jamu* Producers in Indonesia' and 'Bibliography' in the original book which are helpful for *jamu* researchers are omitted in the translated book.

Beers finally concluded that 'if correctly chosen and sensibly used, *jamu* is effective'. This idea is correct with regard to modern pharmacology. The use of *jamu* is, however, empirical and has not been sufficiently verified, whereas *Kampo* medicines have been deeply investigated in Japan. Adverse effects, such as nephropathy, due to over-doses of *jamu* are often observed. The following points at least should be examined: Which constituent in *jamu* is major and/or principal; how to measure the content of marker constituents; and how to verify the pharmacological activity of *jamu*. The Indonesian government has already recognized the importance of pharmacologically investigating *jamu*, which is also described in this book. These scientific studies will lead to the appropriate use of *jamu* as a traditional medicine and develop new functional foods in the future.