1. INTRODUCTION
Various medicinal plants have been used for years in daily life to treat disease all over the world. They have been used as a source of medicine. The widespread use of herbal remedies and healthcare preparations, such as those described in ancient texts like the Vedas and the Bible, has been traced to the occurrence of natural products with medicinal properties. In fact, plants produce a diverse range of bioactive molecules, making them a rich source of different types of medicines (Kala et. al. 2006). Higher plants, as sources of medicinal compounds, have continued to play a dominant role in the maintenance of human health since ancient times (Farombi 2003). Over 50% of all modern clinical drugs are of natural product origin (Stuffness and Douros 1982) and natural products play an important role in drug development programs in the pharmaceutical industry (Baker et. al. 1995). There has been a revival of interest in herbal medicines. This is due to increased awareness of the limited ability of synthetic pharmaceutical products to control major diseases and the need to discover new molecular structures as lead compounds from the plant kingdom. Plants are the basic source of knowledge of modern medicine. The basic molecular and active structures for synthetic fields are provided by rich natural sources. This burgeoning worldwide interest in medicinal plants reflects recognition of the validity of many traditional claims regarding the value of natural products in health care (Dulger and Gonuz 2004).

Medicinal plants, herbs and herbal remedies are known to Ayurveda in India since long times. The value of medicinal plants and herbs as herbal remedies is being lost due to lack of awareness and deforestation. The result is many valuable medicinal herbs are becoming rare and precious information is lost. Preserve the knowledge of medicinal plants, herbs, spices and herbal remedies, which human kind has received from the past generations, for posterity. History of herbal remedies is very old. Since old times before modern medicine, people became ill and suffered from various ailments. There are many medicinal herbs and spices, which find place in day-to-day uses, many of these, are used as herbal remedies. Many cooked foods contain spices. Some minor ailments like common cold, cough, etc. may be cured by herbal remedies with use of medicinal
properties of spices. Herbal remedies can be taken in many forms. Infusions are steeping herbs or spices, with parts like leaves and flowers with boiling water for some time. Filtered or unfiltered use this water extracts of spices as herbal remedies. Decoction is boiling roots, bark and hard parts of herbs and spices with water for a long time. Infusion and decoction both are known as herbal teas. Sometimes essential oil of herbs and spices are also used as herbal remedies. Action of herbal remedies may vary from human to human and care should be observed in using it.

Millions of people in many developing countries do not have enough food to meet their daily requirements and many more are deficient in one or more micronutrients (FAO 2004). In many cases rural communities depend on wild resources, including wild edible plants, to meet their food needs in periods of food shortage. The diversity in wild species offers variety in the diet and contributes to household food security. India holds rich genetic diversity in tropical root and tuber crops, particularly aroids, yams and several minor tuber crops.

Wild edible tuber species are an important source of food in India and have a significant place in the dietary habits of small and marginal farm families and forest-dwelling communities during periods of food scarcity (Roy et al. 1988; Arora et al. 1996). Edible tubers not only enrich the diet of the people but also possess medicinal properties. Many tropical tuber species are used in the preparation of stimulants, tonics, carminatives and expectorants. These properties need to be documented to validate, quantify and spread this valuable knowledge (Edison et al. 2006). Indigenous knowledge on wild tubers is an integral part of the traditional and socio-cultural lives of people in India. Historically, tribal and rural people identified and collected wild tubers from the forests and developed a range of processing methods in accordance to their needs. Now, however, this knowledge is being lost as a result of the spread of modern technologies in rural and tribal areas. A harmonious blend of indigenous knowledge with modern science is essential to promote sustainable development and utilization of wild edible tubers.

In India, we often wake up to our own therapeutic wisdom only after recognition comes from the west. This was the fate of many plant based leads and the state of affairs continues to be the same. It was in 1931 *Rauwolfia serpentina* and see for themselves it
were into a drug of rare merit. It has been also known that plants have a medicinal property. Some β-carotene containing plants are present that scavenging of free radical which are involved in the protection of various diseases, such compounds can also show promise against ischaemic damage to heart, brain and other tissues. Picrorhiza kurroa and Arogyawardhani are show to have hepatoprotective effect in animals models and clinically useful in viral hepatitis. The active principle of the plant viz. picrocides I and II inhibited the lipid peroxidation caused by CCl$_4$.

There are several plants which when coupled with the healthy life styles can be preventive and therapeutic use. The antioxidants also supplied from natural sources like plant extract. Some herb like Rose mary, Rosmarinus officinalis having antioxidant property. These herbs having some compounds such as carnosic acid and rosmarimic acid were reported to be antioxidant property (Tripathy et. al. 1996). Here we studied the antioxidant and hepatoprotective activity of Girardinia heterophylla and Colocasia esculenta against alcoholic liver and kidney injury.

**Antioxidant phytochemicals and human health**

In recent years, many studies have shown that diets containing high content of phytochemicals can provide protection against various diseases. Approximately 90% of all cancer cases correlate with environmental factors, including one’s dietary habits and one- third of all cancer deaths in the United States are avoidable by changing dietary habits only (Milner 1994; Willett 1995). The protective effects of fruits, vegetables and spices and herbs were found not only for cancer (Toniolo et. al. 2001), but also other chronic diseases such as cardiovascular diseases (CVD) (Acheson et. al. 1983; Ames et. al. 1993; Armstrong et. al. 1975; Verlangieri et. al. 1985; Willett 1994; Phillips et. al. 1978; Burr and Sweetnam 1982; Ascherio et. al. 1992; Sacks and Kass 1988).

Among the causes of the major chronic health problems, harmful free radicals and reactive oxygen species (ROS) have been found to play an important role (German and Dillard 1988; Keher 1993). Radicals and ROS as the superoxide anion (O$_2^-$), hydroxyl radical (OH) and peroxyl radical (ROO$^\cdot$) have been implicated as mediators of degenerative and chronic deteriorative, inflammatory, and autoimmune diseases (Heliovaara et. al. 1994), diabetes, vascular disease and hypertension (Harris 1992),
cancer and hyperplastic (Ames 1993; Ferguson 1994), cataract formation (Ames 1993; Gershoff 1993), emphysema (Rice-Evans and Diplock 1993), arthritis, malaria, multiple sclerosis, myocardial ischemia- reperfusion injury, immune system decline and brain dysfunction as well as the ageing process (Ames 1993).

Antioxidants such as vitamins C and E are essential for the protection against ROS. However, the majority of the antioxidant activity of a fruit or vegetable may be from compounds such as phenolic acids and flavonoids, rather than from vitamin C, E or β-Carotene (Bors et al. 1990; Guo et al. 1997). Intake of controlled diets rich in fruits and vegetables increased significantly the antioxidant capacity of plasma.

Antioxidant phytochemicals such as flavonoids are therefore the focus of many recent studies. The antioxidant activity of these compounds is predominantly determined by their structures, in particular the electron delocalization over an aromatic nucleus, in those based on a phenolic structure. When these compounds react with a free radical, it is the delocalization of the gained electron over the phenolic antioxidant, and the stabilization by the resonance effect of the aromatic nucleus, that prevents the continuation of the free radical chain reaction. This is often called radical scavenging, but polyphenolic compounds inhibit oxidation through a variety of mechanisms (Steinmetz and Potter 1991; Stich and Rosin 1984). Synthetic antioxidants such as butylated hydroxyanisole (BHA) and butylated hydroxyl toluene (BHT) only tend to have one mode of action, i.e. via free radical scavenging and are not able to sequester metal ions through the metal catalyzed route. The anticancer activity of flavonoids has been attributed to a large variety of different mechanisms (Ho et al. 1992).