Traditional Medicine Knowledge in the ULU Manuscripts of Bengkulu

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Abstract

This study aims to describe the codex, text, and social aspects of the ulu manuscripts of traditional medicine preserved in the State Museum of Bengkulu. This research is based on philology, which methodologically utilizes the principles of codicology and paleography for analysis purposes. The research results are as follows: First, there are 13 manuscripts of traditional medicine in the State Museum of Bengkulu that belong to the Serawai and Pasemah ethnic groups based on the characteristics of the codex. These texts generally contain information about (a) various diseases, (b) characteristics or symptoms of a disease, (c) medicinal plants, (d) the method of mixing medicinal ingredients, (e) treatment methods, and (f) post-treatment activities, usually in the form of *sedekah* (offering). Second, the ulu writing tradition plays a role in documenting and preserving cultural knowledge, including knowledge of traditional medicine. The writing of the ULU manuscripts was meant as a practice guide both for the writer and for the readers of texts, assumed to have the same cultural background.

Keywords: Bengkulu, traditional medicine texts, ulu manuscript

DOI: 10.7176/RHSS/13-19-01

Publication date: December 31st 2023

1. Introduction

The attention to the Ulu manuscripts in Bengkulu began more than 200 years ago. Starting with Marsden in the book *The History of Sumatra* (first published in 1783), he was followed by other European scholars such as de Sturler (1843; 1855), van Hasselt (1881), Holle (1882), Helfrich (1897; 1904), Lekerkerker (1916), and Wink (1926). These ethnographic writings provide information about the distribution of written traditions in the ulu script, manuscript materials and writing tools, and script tables as well.

Studies with the orientation of presenting text editing began with Westenenk (1919) on the Lembak ethnic ulu manuscript, Jaspan (1964) on the Rejang ethnic ulu manuscript, and Voorhoeve (1970) on the South Sumatran ulu manuscript. The study of ulu manuscripts is based on philology with an orientation towards linguistic studies and text structure (Maas, 1967; McGann, 1991; West, 1973; Reynolds and Wilson, 1991), pioneered by Braginski (1988), followed by Sarwono (1993; 2001; 2002; 2006).

Preliminary data shows that the contents of the Bengkulu ulu manuscripts are varied, one of which concerns traditional medicinal knowledge (Sarwono, Rahayu, and Astuti, 2003). Studies regarding medical knowledge in various manuscripts have been carried out for a long time. Some examples are those carried out by Sudardi (2002), Widharto (2011), Mulyani *et al.* (2016), and Mulyani *et al.* (2017). Those studies in question focus on manuscripts in Javanese or Jawi (Malay Arabic) script.

This article is intended to fill the gap in information regarding medical knowledge, especially based on Ulu manuscript sources. In this context, the focus of this paper is on the description of the codex, including the material of the manuscript (bark, bamboo, paper, or rattan, etc.), the size and condition of the manuscript, as well as aspects of the text that include information on various types of plant medicine, how to mix it, and how to treat the disease. For this purpose, the principles of philology, as well as codicology and paleography (Mass, 1967; McGann, 1985; Reynolds and Wilson, 1991; West, 1973; Robson, 1988; Engelhart and Klein, 1988; Gaskell, 1972), are used to obtain identification codecs as well as their content.

The research materials are the Ulu manuscripts preserved in the Bengkulu State Museum, a total of 13 manuscripts. The manuscripts in question do not have colophons containing information about the time and place of writing, nor do they contain information about the author. It is strongly suspected that these texts were written at the end of the nineteenth or early twentieth century (Sarwono, Rahayu, and Astuti, 2003; Sarwono and Astuti, 2007).

The analysis was carried out based on the principles of philology, codicology, and paleography (Mass, 1967; McGann, 1985; Reynolds and Wilson, 1991; West, 1973; Robson, 1988; Engelhart and Klein, 1988; Gaskell, 1972). The analysis steps are carried out as follows: First, identify the aspects of the codex, such as the material of the manuscript, the size and condition of the manuscript, the shape of the letters, and the font, to determine the scriptorium from which the manuscript was written or produced. Second, identify aspects of the text, which includes the following steps: Third, a review of social data related to traditional medicine based on the origin of the manuscript.

2. The Codexes

The thirteen ulu manuscripts identified as having medicinal content are 12 made from bamboo logs (one or two segments) and 1 made from rattan slats (*gelumpai*). Based on the characteristics of the letter form and the shape of diacritic signs, as well as the word writing system (*see* Sarwono and Astuti 2007; Sarwono, 2020a), the ulu medic manuscripts in question can be grouped into the Serawai and Pasemah scriptorium manuscripts (**Table 1**). **Table 1: List of Ulu Medicine Manuscripts**

Manuscript code number	Materials	Scriptorium
MNB 07.01	bamboo log	Serawai
MNB 07.09	bamboo log	Serawai
MNB 07.15	bamboo log	Serawai
MNB 07.19	rattan slats	Serawai
MNB 07.45	bamboo log	Serawai
MNB 07.56	bamboo log	Serawai
MNB 07.71	bamboo log	Serawai
MNB 07.83	bamboo log	Serawai
MNB 07.123	bamboo log	Serawai
MNB 07.12	bamboo log	Pasemah
MNB 07.27	bamboo log	Pasemah
MNB 07.81	bamboo log	Pasemah
MNB 07.89	bamboo log	Pasemah

The following is a description of the codex of the Ulu medicinal manuscripts, which are strongly suspected to have come from the Serawai scriptorium. **MNB 07.01** is a single bamboo log, measuring 53 cm long and 9 cm in diameter. A manuscript entitled *Usuran Sunup* There is no information about the origin of the manuscript or when it was obtained by the museum. **MNB 07.09** is in the form of one bamboo log, measuring 51.4 cm long and 8 cm in diameter. The manuscript entitled *ubat-ubatan* (the medicine) is written at the beginning of the text. The manuscript comes from Muara Dua Village, South Bengkulu, and was obtained by the Bengkulu State Museum on September 19, 1997. **MNB 07.15** is in the form of a single bamboo log, measuring 42.5 cm long and 6.7 cm in diameter. A manuscript entitled Tangas Sunup The manuscript comes from Sibak Village, Ipuh, North Bengkulu, and was obtained on December 23rd, 1997. The condition of the manuscript is intact. The first line in the manuscript is the title, which is *Tangas Sunup*.

Fig 1: MNB 07.15 (Photo: courtesy of the State Museum of Bengkulu)



MNB 07.19 consists of 7 slats of *manau* rattan, each measuring 37 x 3 cm. This manuscript is entitled *Ubat* or *Tangas*. The manuscript comes from Jambat Akar village, Talo, South Bengkulu, and was obtained by the Bengkulu State Museum on January 12, 1997. The condition of the manuscript is still intact, and the writing is clearly legible. **MNB 07.45** is in the form of one bamboo log measuring 52.4 cm long and 6 cm in diameter. This manuscript is untitled but contains information about traditional medicine. The manuscript comes from the village of Sukarami, Manna, South Bengkulu, and was obtained by the Bengkulu State Museum on April 18, 1999. The condition of the manuscript is still intact, and the writing can be read clearly. **MNB 07.56** is in the form of one bamboo log measuring 57.5 cm long and 7 cm in diameter. The manuscript comes from Rawa Indah Village, South Bengkulu, and was obtained by the Bengkulu State Museum on September 28th, 1998. The condition of the manuscript is still intact, and the writing can be read clearly.

Fig. 2: MNB 07.56 (Photo: courtesy of the State Museum of Bengkulu)



MNB 07.71 is in the form of one bamboo log, 46.5 cm long and 7 cm in diameter. The manuscript comes from Pengantungan Subdistrict, Bengkulu City, and was obtained by the Bengkulu State Museum on January 11, 1999. The manuscript is mostly in good condition, but in some parts it has been eaten by termites. **MNB 07.83** is

in the form of one bamboo log measuring 56.4 cm long and 7 cm in diameter. There is no information about the origin of the manuscript or when it was obtained by the museum. The condition of the manuscript is still good. The writing is legible. The first line is the title of the manuscript; this is a kind of summary. **MNB 07.123** consists of two bamboo log segments measuring 100.2 cm long and 9.7 cm in diameter. There is no information about the origin of the manuscript or when it was obtained by the museum. The condition of the manuscript is no information about the origin of the manuscript or when it was obtained by the museum. The condition of the manuscript is intact, and the writing is clearly legible.

Fig. 3: MNB 07.123 (Photo: courtesy of the State Museum of Bengkulu)



Below, we present a description of the codex from the Ulu manuscripts in the collection of the Bengkulu State Museum regarding medical treatment, which is strongly suspected to have come from the Pasemah scriptorium, based on the characteristics of the shape of the letters and the material used to write the text in the manuscript. So far, it is known that four (four) of the thirteen (thirteen) Ulu medicine manuscripts are included in the Pasemah scriptorium manuscripts, as below.

MNB 07.12 is in the form of two bamboo log segments, measuring 103 cm long and 5 cm in diameter. The manuscript does not have a title, but based on its contents, it can be ascertained that it is about or related to medicine. The manuscript was obtained by the Bengkulu State Museum on December 16th, 1997. The condition of the manuscript is good, even though some of it has been eaten by termites. **MNB 07.27** is in the form of a single bamboo log measuring 44 cm long and 4.7 cm in diameter. A manuscript entitled *Ubat Segugut* The manuscript comes from Sebilo, South Bengkulu, and was obtained by the Bengkulu State Museum on June 2, 1980. The condition of the manuscript is generally good; it has not been eaten by termites. However, there are cracks on the left and right sides. When compared to other similar manuscripts, the writing in this manuscript is larger and clearer.

Fog. 4: MNB 07.27 (Photo: courtesy of the State Museum of Bengkulu)

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MNB 07.81 is in the form of one bamboo log measuring 23.5 cm long and 4 cm in diameter. There is no information about the origin of the manuscript or when it was obtained by the museum. There is no information about the origin of the manuscript or when it was obtained by the museum. The condition of the manuscript is quite good. The manuscript contains descriptions of various types of diseases, such as *sunup*, medicinal ingredients, how to mix ingredients, and how to treat them. **MNB 07.89** is in the form of one bamboo log with a length of 30 cm and a diameter of 7 cm. There is no information about the origin of the manuscript or when it was obtained by the museum. The manuscript or when it manuscript from the Pasemah scriptorium based on the characteristics of the letter forms and their bearings.

3. Texts Description

In general, traditional medicine texts present information regarding (a) various diseases in local names, (b) characteristics or symptoms of a disease, (c) medicinal plants, (d) concocting methods, (e) how to treat the diseases, and (f) post-treatment activities. It should be noted here that not all manuscripts described above contain these six categories of information. However, diseases, medical plants, and how to treat a disease are the main information in the medical manuscripts we are referring to.

The first is information about various types of diseases. The illnesses or illnesses contained in the manuscripts are general, such as fever, or what in the local name is called *idapan* or *bidapan*. The names of specific diseases are also mentioned in these manuscripts, such as *beghasi tukuak sakit, beghasi aghi malam, benaluwa, perabula gunting, perabula kumbang, perabula gantung, perabula ngimbang, perabula bijan, perabula rupanya tinjak burung di pelipisan, perabula tanjung, perabula tampun panaw belarik di kening, <i>idapan angat, idapan abang, demam jagha, demam, demam kugha, palak sakit, sunup kelinguwan, sunup bepasung, sakit badan, keting untuk,* and *bengkak* (swollen). The names of other diseases mentioned in the manuscript include *ntaluy lughus, ntaluy kuning, ntaluy pucat, ntaluy ngancal, ntaluy susang, ntaluy tangas seribu, ntaluy kelinguwan badu, ntaluy meghukal, ntaluy ganu, ntaluy bulan, and ntaluy duwa belas.*

Apart from that, there is also information about herbal medicine to increase appetite. There are names of diseases mentioned in the manuscript whose common or scientific names cannot yet be identified, such as *perabula* (with its various types) and *beghasi*. The disease called fever is one that we are familiar with. Likewise with *idapan*, *bidap*, or *bidapan*, which can be interpreted as being feverish, unwell, or feverish. Medicinal ingredients are generally leaves, bark, roots, flowers, fruit, oils, and animals. The following are various medical plants recorded in the ULU manuscripts:.

Local Names		Plants Parts ¹						
		1	2	3	4	5	6	7
pelawi (pulai)	alstonia scholaris	V	-	-	-	-	-	-
mesabi (kesambi)	schleichera oleosa, Merr	V	-	-	-	-	-	-
limaw	citrus Hystrix	V	-	-	-	-	-	-
kecubung	datura metel	V	-	-	-	-	-	-
agha ghumpat		V	-	-	-	-	-	-
beranay		V	-	-	-	-	-	-
keniday (kenderi)	bridelia tomentosa	V	-	-	-	-	-	-
paku ghesam (paku andam)	dicranopteris linearis syn. gleichenia linearis	V	-	-	-	-	-	-
benang puti		V	-	-	-	-	-	-
sumbung (sembung)	blumea balsamifera	V	-	-	-	-	-	-
pisang udang		V	-	-	-	-	-	-
asi abang	m.acuminata colla genom	V	-	-	-	-	-	-
sumbugh		V	-	-	-	-	-	-
simpugh	dillenia	V	-	-	-	-	-	-
nilai bincal		V	-	-	-	-	-	-
mumpado capo	blumea balsamifera	V	-	-	-	-	-	-
naghuwingan		V	-	-	-	-	-	-
balik angin	mallotus paniculatus	V	-	-	-	-	-	-
kudu utan	morinda citrifolia L.	V	-	-	-	-	-	-
semampat		V	-	-	-	-	-	-
ghukam	flacourtia rukam	V	-	-	-	-	-	-
kekelam		V	-	-	-	-	-	-
pedas	cinnamomum verum	V	-	-	-	-	-	-
kabu		V	-	-	-	-	-	-
dadap	erythrina variegata	V	-	-	-	-	-	-
terung	solanum melongena	V	-	-	-	-	-	-
memayo		V	-	-	-	-	-	-
sepat		V	-	-	-	-	-	-
lingar galing		V	-	-	-	-	-	-
kunyit	curcuma longa	-	-	V	-	-	-	-
saghikan		-	-	V	-	-	-	-
pinang	areca catechu	-	-	V	-	-	-	-
temagaw		-	-	-	V	-	-	-
pisang lungka		- 1	-	-	V	-	-	-
puwagh timbang		-	-	-	V	-	-	-
remunggay	moringa oleifera	-	-	-	-	V	-	-
kandis	garcinia xanthochymus	-	-	-	-	V	-	-
sapungul		-	-	-	-	V	-	-
deghiyan	durio zibethinus murr	-	-	-	-	V	-	-
dedughuak	-	-	-	-	-	-	V	-
lasi abang	-	-	-	-	-	-	V	-
sekabung		-	-	-	-	-	V	-
kuning	-	-	-	-	-	-	-	V
abang	-	_	_	_	-	-	_	V
pacar ayik	impatiens balsamina	-	-	-	-	-	-	V

Table 2: Various medical plants recorded in the ulu manuscripts

 $^{^{1}}$ 1 = leaf; 2 = shoots; 3 = old and dry leaves; 4 = *umbut*, shoots; 5 = tree bark/rind; 6 = root; 7 = flower

Local Names			Plants Parts ¹							
			1	2	3	4	5	6	7	
lainnya										
umbi kambas	-		In the manuscript it is not explained							
puwagh kambas	-		which part of this plant is used as a medicinal ingredient							
beras pulut	-									
ibus ilalang	imperata cylindrica									
ibus belidang	-									
paku kunyit	-		7							
uji abang/honje	etlingera elatior		1							
lengkabang abang	-									
paku abang	-									
paku lawa abang	-									
jarak abang	jatropha curcas L									

As for how to mix medicinal ingredients or how to prepare medicinal ingredients so they can be used, as mentioned in the manuscript, it includes several methods. Some are boiled, some are *diabuarangka* (made into ash or charcoal), some are *diasa* (mashed), and some are dissolved or mixed with water or coconut oil. In the manuscript, it is mentioned with the term *pengayik*, which can be interpreted as a mixture of a solvent for medicinal ingredients with water, rice water, or oil (usually green coconut oil). Meanwhile, the methods of treatment or how to use medicinal ingredients that have been mixed or prepared are mentioned in these manuscripts, such as drinking, *uras* (scrub), *tapal* (poultice), and *tangas* (steaming, taking a steam bath of boiled medicinal ingredients).

4. Social Aspect of Traditional Medicine in the Manuscripts

Although its intensity has begun to decline with the passage of time, traditional healing practices as stated in the manuscripts are still practiced today, led by shamans. In the event that the treatment of someone who is sick is carried out by a shaman (*batra*, traditional healer), it is common to carry out a small post-treatment rite, which is called *rukun*.

Several manuscripts explain *rukun*. *Rukun* can be interpreted as additional conditions that need to be fulfilled by the patient's family if the illness has healed and their health has recovered. In manuscripts, it is usually stated with the sentence "*amo badu sedeka bubugh belantan belemang sepuluwa betara sebuwa*." The meaning is that if the sick person has recovered and recovered his health, then the sick person's family needs to carry out a small rite in the form of alms in the form of offerings or *jambagh* that is of *bubugh* (porridge) and *lemang* and is equipped with a *betara* (a vessel made of woven bamboo containing various ancient objects, red chilies, and salt).

This phenomenon shows non-medical aspects of a disease in traditional medicine. From our recent observations of traditional healing practices, we have found indications that disease, from an ethnic perspective, also has a spiritual dimension. Sickness and disease from an ethnic perspective can arise due to spiritual factors, apart from natural factors (water, air, and food). The concept of *tesapo* or *kesapo*, for example, shows evidence of the ethnic view that illness or disease can arise due to spiritual factors.

Tesapo or *kesapo* literally means "greeted" or "reprimanded" by a supernatural force that usually waits for a place, such as a spring (*ulu tulung*), a big tree, a river, a swamp, or a cemetery. It is believed that these places have guards who, if someone in that place misbehaves and violates taboos, the "guard" will "greet" or "reprimand" so that the person becomes feverish or *sunken*. Treatment of illness from a traditional perspective needs to be complemented by *rukun*, conditions with social and spiritual dimensions, which in this context are represented through almsgiving and *betara Agung*.

As mentioned above, **MNB 07.71** was recorded as coming from Pengungangan Village, Bengkulu City, and MNB 07.15 was recorded as coming from Sibak village, Ipuh, North Bengkulu. These two manuscripts show manuscripts from the Serawai scriptorium, whose area covers South Bengkulu Regency and Seluma Regency. Pengantungan subdistrict and Sibak village are not Serawai ethnic areas. It is very possible that the two manuscripts were originally written in a village in the Serawai region in Seluma or South Bengkulu Regency, and then, for one reason or another, **MNB 07.71** was taken by its owner to the Pengantungan sub-district in Bengkulu City, as well as **MNB 07.15** was taken by its owner to Sibak village. in North Bengkulu Regency.

Similar cases regarding the travel of ULU manuscripts are quite common. For example, the Teni Wama binti Jendang Udin manuscript (in the form of one bamboo log measuring 50 x 8.5 cm). According to Teni Wama, the manuscript was written by her uncle in Muara Timput village in Seluma Regency in the 1950s. Around 1970, Teni Wama and her family left their village and moved to Pematang Gubernur, in the city of Bengkulu, with the manuscript. Likewise, the Reici Rezeki bin Robin bin H. Makmur bin Jekat manuscript (in

the form of folded tree bark). According to Reici, this manuscript was written by Jekat (Reici's great-grandfather) in Air Mayan Village, Pasemah Air Keruh, South Sumatra Province. Reici's parents then took this manuscript to Argamakmur village, North Bengkulu Regency, where the Reici family now lives (*cf.* Sarwono, 2020). Another example is a manuscript belonging to the Erlis family in Pasar Mulya Village, Manna, South Bengkulu Regency, which comes from Pino, about 35 km northwest of Manna. The manuscripts were family heirlooms of Erlis di Pino's relatives and were collected by the Erlis and brought to their current home in Manna with consideration for the preservation of these valuable cultural objects. There are 20 manuscripts, 17 of which are bamboo segments of various sizes, and the other three are from tree bark (*cf.* Andifani, Retno Purwanti, and Sarwit Sarwono, 2016).

The thirteen Ulu Obat manuscripts do not have a colophon that includes the time and place of writing and the identity of the author, as is common in Malay manuscripts. Based on our research, we found indications that the type of text is related to the social identity of the author. Someone who masters reading and writing first will only write texts according to their social position. A traditional leader, socially, must master the laws and customary norms of his community. For a layman, it is enough to master popular and everyday things, such as fairy tales, rhymes, and other language expressions. When a traditional leader "has to" write because he has mastered reading and writing, he will write traditional texts, whereas a layman will write animal stories or rhymes. (*cf.* Sarwono and Astuti, 2007; Sarwono and Rahayu, 2014; Sarwono, 2020b).

Thus, the healing texts in the ULU manuscript above were certainly written by healing shamans who socially had responsibility in this matter. In this regard, ULU medicine texts are a guide for him in the practice of medicine, apart from functioning as social documents about disease and treatment. This can be seen from the structure of the treatment texts in the Ulu manuscripts. In almost all medical manuscripts, the text is presented in the following structure: name of disease; characteristics of disease; name of medicinal plant; method of concoction; method of treatment; *rukun*.

5. Conclusion

From the study of traditional ulu medical manuscripts as above, several important things can be highlighted. First, the Ulu writing tradition plays a role in documenting and preserving cultural knowledge, including traditional medicinal knowledge. Second, traditional healing practices that still apply to society as stated in the Ulu manuscripts show that the process of producing and distributing texts is social in nature. Third, the writing of a medical ulu manuscript is intended by the author of the text as a guide to medical practice for those concerned, as well as for readers of the text who are assumed by the author of the text to have the same level of cultural knowledge and social position. Fourth, the study of Ulu manuscripts seems to need to be placed in a larger framework, with a broader approach that takes into account social aspects and ethnic cultural contexts.

Acknowledgement

This research is part of the research for the Dept. of Language and Arts Education, Faculty of Teacher Training and Education, Bengkulu University. We would like to thank the Dean of FKIP Bengkulu University for their support for this research. We would also like to express our thanks to the head of the Bengkulu State Museum for allowing us to read and study the Ulu manuscript collection.

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