

OCCURRENCE OF PERICONIA LEAF BLIGHT DISEASE ON *HEVEA BRASILIENSIS* IN NORTH-EAST INDIA

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The incidence and severity of leaf blight disease of *Hevea brasiliensis* Muell. Arg. caused by *Periconia heveae* Stevenson & Imle were studied over a period of four consecutive years from 1990 in three locations (two in Assam and one in Meghalaya). High incidence and severity of the disease was noticed in January-February which decreased abruptly thereafter in all the three locations. Temperature ranging 15-25°C, cool nights, dew and relative humidity around 90 per cent favoured development of the disease. The optimum temperature for the growth of the fungal pathogen was 25°C and the pathogen exhibited very little growth at 10°C and 30°C. *In vitro* studies revealed carbendazim (0.1% ai) to be superior to mancozeb (0.2% ai) in checking the growth of the pathogen. These fungicides proved to be effective underfield conditions also.

Key words: *Hevea brasiliensis*, Leaf disease, North-East India, *Periconia heveae*.

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INTRODUCTION

Periconia leaf blight disease is known to cause severe damage to the leaves of rubber in Brazil, China and Thailand (Ellis, 1971; IRRDB, 1989; Shufen *et al.*, 1992). In the North-East India where plantations of natural rubber (*Hevea brasiliensis*) were started about four decades ago, the incidence of leaf blight disease caused by *Periconia heveae* Stevenson & Imle was reported for the first time by Mehrotra (1988) in rubber seedling nurseries at Rani, Meghalaya. This disease was also observed a year later in a nursery of the Rubber Research Institute of India research farm at Sorutari, Assam. The incidence of this

disease is at present confined only to North-East India, where the climatic factors are very congenial for growth of the pathogen. The pathogen may quickly build up inoculum potential as it sporulates abundantly on *Hevea* and also on *Sterculia versicolor*, a widely distributed forest tree species in the region (Mehrotra *et al.*, 1985) and thus may pose a serious threat to the rubber nurseries in this region. As no detailed scientific reports are available on this disease in India, the present investigation was taken up to elucidate the disease incidence and severity, epidemiology and control measures.