Though, I have been studying for nearly 4 decades, the collected or single works of European travellers, together their impressions on health and diseases in the Orient and collecting medical works of the early European physicians and Surgeons, that travelled or lived and practised in the East and published their accounts and observations on the health, conditions, diseases, herbs and drugs, Medical practitioners or modes of treatment in the East (i.e., in India and East Indies) during the 16th, 17th and 18th centuries and also preparing many articles relating to these travellers, physicians their works and relevant descriptions, it was only recently, after I read a very learned and timely article, by Robert W. Carrubba and John Z. Bowers on “Ten Rhijne’s De Acupunctura” in Journal of History of Medicine and Allied Sciences’ that my interest was aroused in the Life, Scientific activities and Writings of Ten Rhijne, a Medical Graduate from the University of Leyden, who had spent many decades of service in the employment of Dutch East India Company, and made valuable contributions to our knowledge of tropical medicine and tropical Botany.

Of Late, there has been increasing interest in “Acupuncture” as a mode of relief from pain as well as an effective method of Anesthesia for operative Surgery. Besides, during the last few decades more Europeans and American Educationists physicians and surgeons and medical historians have visited and taken considerable interest in the study of Chinese Sciences and Chinese Medicine and especially, its unique contributions to the Art and Science of Medicine, namely “Acupuncture”.

The knowledge and practice of this skilful procedure had spread and established itself in Japan many centuries before the European sailed to the Far East and came in contact with the Japanese in the 16th and 17th centuries, first, mainly through trade channels and trade settlements where, along with exchange of goods, some mutual exchanges of information and knowledge, on religion, philosophy, medicine and allied sciences, were inevitable and even beneficial, for both parties, and later, through scholars and scientists.

Carrubba and Bowers, in their article, narrate how when Japan was closed to the world in 1641, it was decided to maintain a minimal contact with the West through the Dutch who had established in 1609, a Trading Port on Hirado Island, northwest of Nagasaki where a handful of Hollanders lived under prison-like guard by the Japanese. The Hollanders included usually a Doctor, the majority of whom were Barbar Surgeons while a few, beginn-
ing with Ten Rhijne were scholars. It was customary every year for the local chief accom-
panied by the Doctors and a few Hollanders, to go from Nagasaki to the Imperial Court,
with Gifts. Sometimes, some Nagasaki interpreters and Japanese Doctors, who reached
the Dutch settlements often disguised as servants also came to learn Western Medicine and
in exchange for this, they told the Dutch Doctors about the culture of Japan. Ten Rhijne,
is said to have used both of these sources of information to document the practice of acu-
puncture. Soon after Ten Rhijne arrived in Nagasaki, he wrote to a colleague that he
intended to learn about Acupuncture and Moxibustion and also mentioned that the circula-
tory system was the basis for Acupuncture. A Japanese Doctor, Iwanga Sokaa and an
Interpretor arrived and asked Ten Rhijne many questions about Dutch Medicine and the
answers of the Dutch physician were also recorded and published in 1680, in a Japanese
book. As an example of the protean interests of Ten Rhijne, Carrubba and Bowers men-
tioned that the Dutch Scientist sent an essay on tea plant, as a sample of the flora of Japan
to Jacobus Breynius, a Botanist in Danzig soon after his arrival in Nagasaki. These authors
have rendered a great service both to Medical history as well as to medical practice today,
by printing an English translation of this 17th century work on Acupuncture by a learned
Medical Graduate of Leyden with an insatiable curiosity of an investigator who had a chance
of residing in Japan for about two years and diligently learning a new branch or procedure
of medicine unknown to the rest of the world, for the relief of pain and as an aid to surgery.

The article cited above prompted me to explore the “Biographical lexicon” for details
about the life and medical career and writings of this Dutch physician, and also to scrutinise,
one again, the magnificent publication “Opuscula Selecta Neerlandicorum De Arte
Medica” in 14 volumes, which I had purchased years ago after prolonged enquiries and
at considerable expense for the Library of the Upgraded Department of History of Medicine,
Osmania Medical College, when I was collecting European source materials for the history
of tropical medicine in the East. I had read it many times and written on Life and Work
of Bontius but I had not given much attention to William Ten Rhijne, included in Vol. XIV
of this collection.

I was delighted to find bilingual version first of an introduction by D. Schoute (an
authority of Dutch Medicine in the East) covering a little more than 5 pages and followed
by an introduction by Ten Rhijne himself, extending over 5 pages and the actual text, “The
Treatise on Asiatic Leprosy: Chapter-I, “On the Kinds of this Disease and the difference
between them” and Chapter-II “On Signs and Symptoms”. The text in original Dutch,
language is on the left side, and the translation in English is on the right side. In Schoute’s
introduction, there are foot notes and annotations which are very illuminating and helpful,
for further research.

The treatise on Leprosy is by its very nature, not of much interest to advanced nations
in Europe or America as the disease has ceased to be the wide-spread horror it was, in the
middle ages in the cities and country side of Europe and has been practically eradicated, by
the vigorous efforts of the National Governments along with the better-housing, better
sanitation, greater attention to personal hygiene, increasing stress on preventive medicine and introduction of socio-economic measures, supported by enlightened co-operation of the public.

But, in India or in the East as a whole and in many undeveloped countries or regions, Leprosy is still a formidable and tragic Endemic pestilence, with serious social and economic consequences, with health and medical tentacles, affecting not only the unfortunate individuals but also his family, his relations, and his progeny with a stigma or a sin, that cannot be washed off, unless one is in a commanding position. It is a public health problem of great magnitude, confronting the people and the Government of India today, demanding urgent attention and a series of measures that have to be enforced as in emergency to win the war against Leprosy.

Compared to other European writers, in the East in the 16th, 17th and 18th centuries, Ten Rhijne, is a Master of ancient, medieval and Post-renaissance Medical Literature on the subject of Leprosy and also a physician of the Hippocrates tradition loving mankind and trying to relieve suffering, wherever it exists, and endowed with a clinical sense of the highest order, with a capacity to express himself, very clearly and forcibly, his views, his observations as well as criticism, without any hesitation or fear.

The only European writer, on diseases of Asia to whom he refers, with respect is Bontius. But Bontius was a Vasco de Gama of Tropical medicine in the East, and wrote extensively on Tropical health and Tropical diseases (also on Flora, Fauna) which were new or unfamiliar to European physicians; on diseases like Beriberi, Cholera, Dysentery, Liver diseases etc. and which were rampant and fatal, in Dutch East Indies in the first half of the 17th century. Half a century later, the Dutch Medical officers would have gained some knowledge or experience and better control of these diseases. Moreover, when Ten Rhijne came to serve in Java, he was appointed Director of Leprosy Hospitals and could devote his undivided attention, and concentrate on the study of the public health, medical, epidemiological aspects of this serious disease, which towards the end of the 17th century seems to have been widely spread, even among the Dutch Nationals in the colony, and was causing considerable havoc on account of the suffering, and social boycott of the victims and their families.

Later writers, on tropical medicine or on Leprosy, towards the end of 17th or the beginning of 18th century, do not seem to have referred to or cited the treatise of Ten Rhijne or his views, observations and suggestions in their writings. This may lend support, to the suggestion that his book was not available in medical circle in Europe or atleast in English language. It is possibly that Dutch physicians in the East Indies were more familiar with this book and its contents. It is here that the Dutch medical historians, particularly those who have studied Dutch Medicine in colonies, in the 17th and 18th centuries etc. may be able to trace the influence of this author, on subsequent writers and practitioners, atleast in Dutch East Indies, if not in Holland or in Europe. There is also a need for a close study and examination of bibliographies on Leprosy, to evaluate the popularity or the authoritative position of this publication, as far as the Medical aid and Public health of the Dutch East
Indies was concerned. It is possible that Ten Rhijne was better known, in Europe than in
Britain or English speaking Nations as can be seen from the extracts, in the biographical
lexicon, and from absence of reference to his name and his treatise on Leprosy in most of
the British and American publications.

I hope some Medical Historian or Leprologist of Indonesia will take the trouble to
trace new materials and throw fresh light on the life of this author and the immediate impact
of his book on the Medical profession and the lay public in East Indies and the final or remote
results on the understanding of the etiology, treatment and control of the disease in Asia.

There are some books and articles that gave an account of Ten Rhijne but few of them
are in English. So, I am culling some information from the two sources available to me in
English, which have utilised the original sources. I am depending on D. Schoute’s introduc-
tion to Asiatic Leprosy in the collection of Medical classics of Netherland, Vol. XIV, and the
recent article by Currubba and Bowers in Journal of History of Medicine and Allied
Sciences.*

I particularly feel disappointed that I am not able to know the details of his journey
to East Indies and about his adventures there narrated by Dr. Pop and Dr. Van Dorssen.

Wilhem Ten Rhyne (Rhijne) may be regarded as one of the most scholarly medical
men of Holland, who came out to the East in the second half of the 17th century, when that
country had succeeded Italy as the great seat of medical learning in Europe attracting stu-
dents from all over the continent, on account of the eminence and fame, of its Professors
and Writers in Medicine, Chemistry and Botany.

Ten Rhijne was born in Deventor on January, 2nd 1649, according to later researches
of D. Schoute, though Dorssen, in the earlier work, gave the birth date, as 1647. His father,
Isreal Ten Rhijne, was a glazier by trade (a small citizen) but successful in life and could

* There is another important and to me, the most interesting as well as exciting bit of in-
formation, referred to, in the article by Carrubba and Bowers, namely, Ten Rhyne’s
correspondence with Van Rheede and his contributions to the voluminous work of Hortus
Indicus Malabaricus, about which I had written, nearly a quarter of a century ago (1951)
in the Journal of History of Medicine and Allied Sciences and about which, I have been
collecting additional material for a more detailed article. Still more interesting and intrigu-
ing is a new reference and information cited by the authors, mentioning James Petiver’s
correspondence with Mr. Samuel Brown, Surgeon at Fort St. George, contained in Philoso-
phical Transactions of the Royal Society of London. I have written about this XVII
century Surgeon of East Indie Company in the Journal of Madras University in 1941 and
in my book “The Beginnings of Modern Medicine in Madras,” (Calcutta, 1947) and subse-
quently, secured more manuscript material from British Museum. I am curious to know
to what extent Samuel Brown was influenced or helped by these lists, sent by James Petiver
to Madras or by Ten Rhyne’s contributions to Hortus Malabaricus, in the search and selec-
tion of Botanical specimens, despatched to London by Samuel Brown and now housed in
the British Museum. These and other matters about academic links of Ten Rhyne with
India, will form the subject of another article.
afford to send his son, to study medicine. With regard to the boy’s college education, it is known that he was registered in Album Studiosorum of the Athenaeum, in his native town on August 14, 1665. Since there was no Professor of Medicine at that period in that Institution, he could not have attended any lectures on medicine. In the following year, on 18th August 1666, the youth entered, as a student of Medicine at the University of Franeker. He remained there, for nearly two years and in March, 1668, he went to Leyden where he registered as a student of Medicine.

At Franeker, Ten Rhijne studied under two eminent medical Professors, both of German origin and both attracting students from far and wide. The first was a classical scholar who taught anatomy and was a popular consultant among the aristocracy. The second was famous for his erudition, devoted his energy to the study of Botany and taught Medicine as Hippocrates and Galen had written. Later, at Leyden, Ten Rhijne made the acquaintance of Boe Sylvius and his iatrochemical doctrines, whose influence is said to be found in the later writings of Ten Rhijne. As Schoute writes “But the Franeker influence was not lost; Ten Rhijne (Rhyne) always showed a great interest in the knowledge of herbs and plants, and remained an admirer of the Hippocratic writings.” It was also believed, till recently, that he took his Doctor’s degree, in the same year, but more recent writers have secured evidence, which indicates that Ten Rhijne took his degree of M.D., in July 14, 1670 at Andegavum (Angers). According to the latest writers on the subject, Carrubba and Bowers, Ten Rhijne was awarded the Doctorate in Medicine, based on his dissertation “De dolore Intestinorume flatu”. There is no information available, about the life or studies or medical activities of Ten Rhyne from 1670 to 1673, when he joined as an employee of the Dutch East India Company and sailed to East Indies in the Ship, Tarnate.

This ship stopped at the Cape of Good Hope, for about 3 weeks from middle of October to November, to get fresh supplies of goods and to replace the sick members of the crew. Even during that short period, Ten Rhijne with his curiosity and diverse interests noted down all he could gather about the settlement, its inhabitants and compiled an essay in Latin entitled “Schediasma”. As pointed out by Schoute, that was a century, when descriptions or books were written, on countries and peoples by writers who never left their homeland and who simply copied what other travellers collected. But Rhijne was taking considerable risks of travel on long sea voyages, and under going, dangers to investigate and make observations.

Unfortunately, we are not in possession of the details of his long journey or his descriptions of the health and medical conditions, in the sea voyage, whether his ship stopped at the ports in Ceylon or West Coast or East Coast of India, where there were flourishing Dutch settlements as halfway houses to distant East Indies. We only know that he reached Java towards the end of 1673 and was for about 6 months an Instructor in Anatomy to the Surgeons at Djakarta. Then on 20th June, 1674, he sailed for Nagasaki in Japan and landed on the Island of Dejima in Nagasaki Bay, where a handful of Hollanders, lived on under prison like guard by the Japanese.
Portrait of Wilhem Ten Rhyne (Rhijne) (1649-1700)
Dutch Physician and Writer in East Indies in XVII century.
TREATISE
ON THE
ASIATIC LEPROSY
AFTER AN ACCURATE INVESTIGATION, UNDERTAKEN IN THE SERVICE OF THE PUBLIC
BY
WILHEM TEN RHYNE, M.D.
IN BATAVIA

Amsterdam by ABRAHAM VAN SOMEREN, book seller in the Kalverstreet, in Perkins, 1687.

To the
very Honourable and Revered Lord and Master PIETER VAN DAM, Doctor of both Laws, Lawyer and Adviser of the EAST INDIA COMPANY at Amsterdam, his very honoured chief is this Treatise dedicated by his Honourable's most indebted and obedient Servant
WILHEM TEN RHYNE, M.D.
Ten Rhijne left Nagasaki on 27th October, 1676, and returned to Java where he spent the remaining part of his life in Medical Service. It was there, after his return to Java that he published a book “Dissertatio de arthritis in 1683” which contains the “Essay on acupuncture and moxibustion” translated and published, recently, by Carrubba and Bowers, in the Journal of History of Medicine. Ten Rhijne died at Batavia on 1st June 1700.

On his return to Java, he was appointed Director of the Leprosarium and after extensive experience, in dealing with various forms of disease under many names and examining numerous patients under a variety of conditions he published in 1687, a book “Verhandeling Van de Asiatische Melasthsheil” (Treatise on Asiatic Leprosy). This is probably the first monograph of great originality as well as of profound scholarship, on the subject of Leprosy, in the East and even today remains a classic worth reading, not only by all Leprologists but by all medical practitioners, and teachers in the Orient.

We do not yet know what other books he wrote, and what other communications, he sent to various parts of the world. Schoute quotes Van Dorssen as saying in his biography of Ten Rhijne, that some of his writings were translated into English and appeared in English journals and that the biographer was not able to confirm in 1929 about the existence of the translation of the book on Leprosy, by a reference to the offices of the Lancet or Royal Society of Medicine or British Museum or Royal Society in London. It is worthwhile searching and collecting his contributions, and also tracing any translation into English, to get a proper estimate of the influence of his writings on subsequent writers and practice of the medicine in the East.

To understand the background to compulsions in Batavia that forced the authority and the people to give some attention to Leprosy, Schoute writes “that as early as 1666, the council of East Indies decided to build a separate leper house for lepers in the vicinity of the capital and that decision was implemented next year indicating the urgency of the problem. We do not know what happened in the next decade. But it is worth noting that ten years, after the hospital was built, Ten Rhijne was appointed external regent, that is, for controlling doctor of this Leprosy Hospital.” It is stated that the number of leprosy patients went on increasing especially among the Europeans in Batavia and opposition to a forced seclusion of the diseased became more and more serious.

The treatise is said to have been written between 1682 and 1686, and was printed in Amsterdam in 1687. It is evident from the general tenor of the book that it was written when there was a growing fear of increasing spread of Leprosy in the Island of Java.

With regard to the treatise on Asiatic Leprosy, Schoute states that “its value is relative to the place and time it was written.” But, I am inclined to give it a higher place as a classic in Tropical Diseases both on account of its erudition and its scientific tone and clinical descriptions, when such merits were rare in the Medical writings, from the colonial settlements.
An English translation of Dutch authors, published in the series of Medical classics of Holland are therefore very valuable to readers knowing only English. In this collection, only Introduction and first two chapters of “Asiatic Leprosy” are included. The part dealing with treatment, was considered less worthy of printing. Ten Rhijne only collected from literature from all over the world, the names of plants and animals products which were praised as possessing healing qualities against disease, without giving his own personal experiences, about the value of the methods of treatment, or of the application of medicines advocated.

On the other hand, his introduction, is a masterpiece as a medical essay of the period and the first chapter on the kinds of disease and the differences between them and second chapter on “Signs and Symptoms” are full of practical observations, critical discussions, of the earlier medical authors and offer very intelligent and accurate observations, sound conclusions, based on wide clinical experience and knowledge of patients and concern for Human welfare.

AUTHOR’S INTRODUCTION

Importance of Leprosy in East Indies:

Ten Rhijne in his introduction to the treatise, first explains the importance of the disease in East Indies at that time, second half of the 17th century.

“If ever there has been a disease in these provinces and especially in this town, which because of its hideousness and serious nature, its frequency and its continual spread deserved diligent investigation, careful observation, profound knowledge and careful treatment, then it is the leprosy of this country. This disease spreads its seed everywhere, infecting whole families, having in a few years’ time, spread to such a degree that one would fear that this evil, growing ever more and more serious because of its continual spread, would attack a large proportion of the inhabitants, making them while living as dead, had not the far-seeing precautions of our praiseworthy authorities, who have shown the greatest possible determination in the matter, decreed that the infected should be secluded in a separate place, first outside the town, and then, after a still further spread of this horrible disease, should be sent even beyond the harbour, far out of sight of the uninfected. This was done in order to protect and as far as possible, to save the healthy and it is the duty of every subject to cooperate as far as he possibly can, according to the measure of his knowledge, in the care of his own health and that of his neighbour, whilst those whose calling and office it is to do so, have a very special call in this respect, to do this with doubled diligence. It is not enough for one who has never seen the disease, to send a description of it, consisting of a few hypotheses formed from guesswork rather than from experience, (and then even, often copied from others), embellished, according to present day, dash custom, with much true-seeming choplogic; making the nature and particularities of the disease like the paintings which have been made of it more from imagination than from real life”.
At this stage, he pays a well deserved tribute to J. Bontius "In this country, no one has done anything more worthy of mention in this respect but J. Bontius. Some have wanted to do something, but have not been able to do so etc."

He adds a few words about the responsibilities of the lay citizens in the arrest of the spread of the disease. "And those outside the profession ought willingly to obey the decree of the authorities: to separate the infected from the uninfected, and, after careful examinations, the clean from the unclean; so that this town and all its surroundings may be gradually disburdened and freed from such a serious evil".

These, he says, are the reasons "Which have led me to take up my pen and put down my thoughts and observations on paper, hoping thereby to stimulate others to add their thoughts and experience to this short rough sketch, since they will render special service thereby to the general weal; so that we may at last reach the true knowledge of the disease."

How the Physician became interested in the disease:

The author states how he became personally interested in this subject "Since the authorities were pleased to appoint me regent of the Leprosy house a few years ago, and now to entrust me with the inspection of these unfortunates, I have been specially interested in the Matter".

His suggestions for gaining more knowledge of the Disease:

"I should propose (in all due reverence and open to correction) that our authorities should offer a prize, as has been done once before at my suggestion, viz., to anyone finding a sure cure of this disease, (which would soon bring in far more reward than the prize), so that after trying it with the desired results on many of those inflicted with various forms of the disease he would be enabled to carry on his experiments and restore such persons to their former health. This would remove many great burdens from this encumbered house and prevent or stop this awful plague".

The author then describes the common method of treatment followed at that time and expresses his dissatisfaction and mentions serious consequences. But he does not want to reject that method of treatment as long as there was no better and shorter way taking into account the difference of persons, times, and places and adds "But, something more is necessary than this usual method of treatment, some strongly efficacious remedy, which shall be the chief support of the healing process".

His method of composition:

Then, he indicates the method of the writing he follows. "The various paragraphs of this article are arranged according to the general head-lines of medical art, although I have not kept to the worthless school order very strictly in every respect; nor have I written down my opinions in a philosophical way, as in my judgement, it is of more use to the medical
profession, to give one's theses and arguments in a practical way, especially as outside the university, one writes for the benefit of a particular place".

**Reasons for his citing medical authorities:**

He then proceeds to give reasons for his quoting the various authors, ancient, medieval and modern, "In their own words; but not in the same language." It is "Not because one can learn from them the true character of this trouble but because many wrong ideas about this disease have crept in". He explains:—"for in following the example of noted medical practice, writers, imagined that they understood this particular disease, by comparing it with the Arabian Leprosy, and especially with Elephantiasis, there sometimes being a similarity between many of the symptoms, but seeing that the one has many symptoms which are seldom or never seen in the other form of the disease, they often hit wide off the mark in making their diagnosis."

Then, the author asserts the need for personal observation and speaks in the manner of Hippocrates and Sydenham, words which are as true today as when he wrote 300 years ago. "Therefore, one must consult one's own experience, and make a distinct distinction between cases, always keeping in view of the patients themselves. And if in some cases one wishes to seek advice from some of the authors on the subject, then one should distinguish between those who through practice, made descriptions according to what they imagined probable, not always in beautiful style. And then one should always add one's own experience, for else it would seem as if one borrowed the stuff with which to drape the body of the manikin, and the manikin, had this obtained a new master. Not that I wish to make out that such descriptions are confused, or wish to bring forward contradictions; no, I rather wish to strengthen my own hypotheses by theirs, so as to find out from the parts of their descriptions dealing with European (if there is such a special form), Arabic and Greek Leprosy, where these forms are similar to Leprosy cases in this country; for there is a remarkable misunderstanding arising from wrong teaching, that in Europe no examples of this disease occur; this is only true if one insists on the whole complex of symptoms in one case: since there are symptoms a good many even, which European Leprosy has in common with the Arabic Leprosy and others which differ from it, some symptoms being found in these patients, others in those, as well appear possibly here, or later perhaps more extensively:"

**The author apologises for deficiencies of the book:**

He apologises for the haste and incompleteness of his treatise due to want of time and the pressure of friends and hopes to improve on a later occasion the contents and the form of the treatise. "This I shall strive to do by degrees and in various ways; I shall try to examine and note down many things more accurately, so that this exposition may in time appear enriched and more finished, especially as I consider the help of the natives of use in many respects, not being ashamed to learn from the humblest, and ready to be taught by everyone, and have light thrown on my mistakes and short comings." It is to his credit that even in the 17th century, he deplores the absence of post-mortem reports, for this disease. "One could wish that this disease were not so dangerously infectious, because if
it were not in his, one could follow the example of THEOPH. BONETUS (Practical Anatomy) who often drawing from his own work but still often from that of others, threw much light on the knowledge of the causes of disease; one could then by means of the dissecting knife obtain more knowledge about the real character of the disease. BONETUS never, as far as I know, amongst the great number of observations he has made on all sorts of diseases, made any observations on Leprosy.”

He also regretted the absence of a good draughtsman, at Java. “I have also wished I had a good draughtsman who could have made drawings from life, of all the outward manifestations of the different forms of this disease, since those we have seen here lately do not give a true picture to the student.”

He offers an apology or excuse, for not giving actual case reports of patients to illustrate, what he writes “I might also have added to this work, many special accounts of a fair number of patients, comparing the different forms of the illness, with their manifestations: but the hatefulness and horror of this sad affliction, and especially the compassion with many patients, forbid our doing so. For the same reason, we have abstained from giving any complete and detailed report of the character and form of cases (which are otherwise of the greatest importance both in medical and surgical respect), since such might be detrimental to many families. If one did wish to describe special cases, one would be obliged not only to inform the high magistrate about it, but also to ask his permission to do so. And what result could we expect from it? Simply that whole families would be suspected and shunned. And that, just to strengthen the force of my opinions by the giving of special instances! No! Yet the best writers on medical practice have adopted this method in order to win more faith in their views.”

Once again, he explains that he has written the preliminary discourse to stimulate others especially those appointed like himself, to inspect the leprosy hospitals “to start publishing their observations, opinions and ways of investigation in order to fight this terrible disease by combined efforts and devotion: not by criticisms and jealously, but with as much uprightness and communicativeness as we own to the public well-being, and to ourselves, our own consciousness pointing.”

While he regrets that he did not take the initiative to write a book some years earlier, he assures the readers that he will gladly publish his observations based on further experience or communicate them as special occasions arise.

Finally, he concludes his introduction to the treatise itself by giving a short summary of the contents of the treatise. “Let us therefore now continue with the treatise itself and leaving out quibbling (which is not in its place here and which has been sufficiently indulged in by several writers), let us consider the character of this illness, and further its indications and symptoms (which most writers deal with after the description of its cause or origin), both the preceding and accompanying causes as also the chief cause, and then shortly consider the prognosis, precautions to be taken, the prescription for the daily manner of living, and lastly the therapy.”
This treatise on Asiatic Leprosy has not attracted the attention it deserves from the Historians of Medicine in the West or East or even from writers on Tropical Medicine or from specialists in Leprosy. It is a short treatise full of learning, references and citations, from many writers and books, ancient, medieval and modern, with a refreshing critical discussion of the views, observations and interpretations, by a brilliant graduate of Leyden, the then most famous Centre of Medical learning in Europe, who was studying and investigating among the people of the East and recording and presenting, in a scientific manner, his observations and conclusions. The profound sympathy for the patients and the people, the humanitarian spirit in the best traditions or the medical practice of the West and the East that pervades the book and inspires the reader, entitles the author to be honoured both by Europe and Asia.

**SUMMARY**

Wilhem Ten Rhijne, was one of the most learned medical men of Holland, who came to the East in the service of the Dutch East India Company in the second half of the 17th century and wrote on the people and plants of Cape of Good Hope, Plants of Japan and contributed to the Botany of India through his correspondence with Van Rheede, author of Hortus Indicus Malabaricus. At the beginning of his career in the East during a short stay in Japan, he learnt, the Chinese Medicine as practised in Japan and later wrote on Acupuncture and Moxibustion. On his return to the Island of Java, he was appointed Inspector of Leprosy Hospital in the city and made a detailed study of the varieties of Leprosy, the terminology used in East Indies for different forms of disease, discussed the differential diagnosis on the basis of signs and symptoms and tried to impress on the people about the advantages of isolating the patients and suggested to the Government various methods to encourage study and investigation to discover more satisfactory methods of treating the disease, and preventing the spread of the disease. His book, “Treatise on Asiatic Leprosy,” published from Amsterdam in 1686, is one of the earliest and scholarly Scientific works on Leprosy in Asia by a European physician, learned in the medical literature of Europe, trained in the famous medical school of Leyden and written on the basis of extensive observations, by a great clinical investigator and a forcible writer. The treatise deserves reprinting as a classic in Tropical Medicine in the East by a European writer in the 17th century.

**REFERENCES**


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सारांश

विल्हेम तेनरिहज़ने और एशियाई कृष्ण पर उसकी कृति

-अर. वि. मुख्यारेर्डी