A NOTE ON ANCIENT INDIAN MEDICINE

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This paper entails a fresh look at three works on ancient Indian medicine: Ancient Indian Medicine, by P. Kutumbiah (Calcutta: Orient Longmans, Ltd., 1962); Hindu Medicine, by Henry R. Zimmer, edited with a foreword and preface by Ludwig Edelstein (Baltimore, The Johns Hopkins Press, 1948); and The Classical Doctrine of Indian Medicine: Its Origins and its Greek Parallels, by Jean Filliozat, translated into English from the French by Dev Raj Chanana (Delhi: Munshiram Manoharlal, 1964). These books represent perhaps the best known and the most recent works on the subject of ancient Indian medicine. They have been reviewed many times in many places; however, it may be valuable to examine them once again with a view towards new approaches to the study of medicine in ancient India.

Dr. Kutumbiah, a practising physician by profession, has presented a comprehensive and general introduction to ayurvedic medicine. He has divided his Ancient Indian Medicine into nine chapters, with a rather lengthy “General Introduction” covering some fifty-four pages. The major portion of the work is concerned with the doctrines of classical Indian medicine, i.e. the medical doctrines found in the Caraka- and Suśruta Saṃhitā- s. Dr. Kutumbiah’s greatest contribution is his clear presentation and summary of the doctrines of classical ayurveda. He allows the general reader to gain a good understanding of ayurvedic medicine without having to plow through the vast amount of technical data contained in these texts. Because the work is aimed at the general educated reader, it lacks the critical evaluation that a specialist requires. Kutumbiah bases his interpretation on only a handful of writers on ancient Indian medicine, most notably S. N. Dasgupta. Dasgupta, in his monumental work of five volumes entitled, A History of Indian Philosophy (Cambridge, 1932), has included in volume two a chapter on “Speculations in the Medical Schools” (pp. 278–486). This chapter contains, for the most part, an outline of the philosophical foundations of ayurveda. While Dasgupta, being primarily a historian of philosophical ideas, has illuminated many

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points of similarity between the philosophical systems of Sāmkhya-Yoga and Nyāya-Vaiśeṣika and that of āyurveda, he has been led astray in many of his interpretations, which attempt to find the philosophical basis of āyurveda in the texts of the Vedic saṃhitā-s. For instance, he states that the theory of the three doṣa-s or defilements is already found in the Atharvaveda: “My own conclusion therefore is that at least some Atharvanic people had thought of a threefold classification of all diseases, viz. those produced by wind, those by water, and those by fire or those which are dry and burning. This corresponds to the later classification of all diseases as being due to the three doṣas, wind (vāyu), phlegm (kapha or śleṣma) and bile (pitta)” (p. 300).

Dr. Kutumbiah accepts this without question (see pages xix, 74 and 78-79) and even accepts the notion propounded by Śaṇṭa and followed by some translators (i.e. Wilson, Langlois, Grassmann, etc.) that some of the germinal ideas of the doctrine of the tridoṣa may be found in the Rgveda (1.34.6) where the term tridhātu (“three elements”) is mentioned (p. 57). Both of these points have previously been successfully refuted by Jean Filliozat in The Classical Doctrine of Indian Medicine (pp. 170-172).

The part of Kutumbiah’s work which is of the greatest interest is the lengthy introduction, for it is in this section that we find the author’s presentation of the evolution of āyurveda. Kutumbiah spends merely twenty-two pages in this effort, covering the traditional accounts of the origin of āyurveda, the pre-Vedic medicine and the post-Vedic medicine. The rest of the introduction is devoted to a comparison of āyurveda with other systems of Indian philosophy (this, by the way, is entirely based on Dasgupta), a summary of the basic texts with their commentaries, a discussion of the relationships with Greek medicine and a general account of the physician and the ethics of the medical profession based on the classical texts. These pages of the introduction are much too concise. They merely touch upon the major notions concerning the traditional accounts, the archaeological evidence from the Indus Valley, the magico-religious medicine in the Veda and the possible medical references in the Brāhmaṇas and Upaniṣads. It lacks not only critical evaluation, but also an attempt to place the pre-classical medicine in the cultural milieu of the day. Therefore, the book is of little use to the student who is interested in the role of medicine in the pre-Vedic and Vedic periods of Indian history. It is, however, quite useful to the student who is interested in gaining a general introduction to ancient Indian medicine.
Henry Zimmer's work, *Hindu Medicine*, is also a general presentation of āyurvedic medicine. The work is based on a series of lectures founded by the Hideyo Noguchi lecture series and delivered at the Johns Hopkins Institute of History of Medicine in November of 1940. Zimmer was in the process of rewriting these lectures for the present volume, when he met with an untimely death. He completed the first and a greater part of the second lecture, but the third lecture was only in note form. Ludwig Edelstein undertook the task of editing the first two lectures and publishing them as Zimmer's *Hindu Medicine*. The work is divided into two main chapters, corresponding to the first two lectures, entitled: "Medical Tradition and the Hindu Physician" and "The Human Body: Its Forces and Resources." The editor has included a lengthy preface which recounts his friendship with Zimmer as well as other aspects of Zimmer's academic life. Noteworthy in this preface is the discussion of Zimmer's friendship with the famous German psychotherapist Carl Jung and Jung's influence on him. This influence helps to explain why Zimmer so strongly stresses the view that a "suggestive element" is part of the healing process in ancient India. This element is part of the "psycho-somatic approach to the task of healing" (p. 2). The first part of the first chapter is concerned with demonstrating how Vedic medicine, being magically based, used charms, amulets, medicines, philters and other devices of magic in order to bring about a cure. Zimmer has selected his material very carefully, making sure that the hymns (AV. I. 22 and VII. 7 and RV. X. 97) reflect his particular interpretation. It is quite possible that the sympathetic aspect of magic, which associates like to like, helped the patient psychologically to feel that his jaundice, for instance, was being carried away by birds with yellow tails (AV. I. 22 and pp. 6-7). The fact remains, however, that we have no way of knowing whether this was in fact the position that the patient held. It is merely the view held by Zimmer, using as his basis only three hymns from the Vedic samhitā-s.

Although Zimmer's overall concern seems to be with the psychological attitudes of patients and physicians, he has, nevertheless, posited some interesting theories concerning the character of the physician during the Vedic period. He suggests that the healer was a magician-physician who possessed a secret knowledge (p. 29). This secret knowledge encompassed both charms and the correct use of herbs. Therefore, the healer may well be called a "herbalist-magician" (p. 19). It is quite unfortunate that Zimmer did not include much more material concerning Vedic medicine. One would wish that he had supported his theories with much more concrete data. It is not possible to totally discount Zimmer's theories con-
cerning Vedic medicine, yet is difficult to totally accept them. For the student who is concerned with the role of medicine in the Vedic culture, Zimmer’s work is much too limited and uncritical. He presents interesting starting points, but often does not fully substantiate his theories and much more critical work is needed.

The remainder of the first chapter is concerned with classical Indian medicine. Zimmer outlines the traditional stories of the evolution of āyurveda as well as the textual material available on classical Indian medicine and later āyurvedic medicine.

The second chapter is concerned with the human body and the ways that Indians attempted to prolong life. Zimmer attempts to show that there is a basic micro-macrocosmic correspondence between the nature of man and that of the universe. The key to this theory of correspondence is the theory of the breaths, i.e. the correspondence between the macrocosmic wind (vāyu) and the microcosmic wind (prāna). He begins by mentioning the Vedic references to wind and traces the development of the theory to the āyurvedic theory of the breaths. In the course of this discussion, Zimmer brings in the notion of breath held by the ancient yogins and the various later schools of Yoga. He quite rightly shows how the yogic notion of breath is in no way related to the āyurvedic notion of breath. The yogic notion is concerned with the control of the breath in the lungs, while the āyurvedic notion is concerned with the physiological aspects of five breaths which circulate throughout the entire body. It is, however, important to note that both are concerned with the prolongation of life. The chapter also contains a discussion of the three defilements (doṣa-s) and ends with a brief comparison of Indian and Greek scientific thought.

Unfortunately, this final chapter suffers from a lack of fully developed ideas. The reader is led from one idea to the other without being allowed to fully understand the connection. Had Zimmer lived to see this chapter to its completion, it might have been much more coherent.

In general, Zimmer’s work suffers from a too general and undeveloped presentation. It could possibly serve as a beginning point for further research; however, in order to undertake research on the lines envisaged by Zimmer, one would have to be well trained in Jungian psychology as well as Indology.

Jean Filliozat’s The Classical Doctrine of Indian Medicine is perhaps the best work on ancient Indian medicine to date. It is Filliozat’s Ph.D. thesis submitted
in 1946 at Sorbonne. It entails a detailed and scholarly examination of the historical evolution of the major doctrines of classical āyurvedic medicine as well as a comparison of these doctrines with ones in the ancient Greek medical tradition.

Filliozat begins his examination by outlining the traditional accounts of the origin of āyurveda. He then proceeds to discuss the major classical āyurvedic texts, the historical evidence for the personalities Caraka and Suśruta, and their essential doctrines. After having given this information, he proceeds to search for evidence of the basic āyurvedic doctrines in earlier texts. He begins his search with the Indo-Iranian material, essentially the Avesta, Rgveda and Atharvaveda. He presents a good general outline of the basic similarities and differences between the medical data contained in the Avesta and those contained in the Vedic samhita-s. He concludes that in the Indo-Iranian period, i.e. the period before the Aryan tribes split, one group going into Iran, the other into India, there was no medical system brought into India by the Vedic Aryans. By “system”, Filliozat means something that approaches the modern conception of a science, as is found in the āyurveda. There were, of course, means for curing disease and restoring health, but they were not “scientifically” based. He goes on to conclude that there were general notions concerning the cosmic role of the natural elements, such as the waters, the fire and the wind. He says that during this Indo-Iranian period “an idea of the correspondence between these elements and the constituent principles of the body had been developed and this must have prepared the (way for the) latter-day development of the two parallel physiologies and cosmologies” (p. 79).

Filliozat then proceeds to examine the Vedic samhita-s (i.e. Rgveda, Yajurveda, Sāmaveda, and Atharvaveda) for data relating to pathology, anatomy and physiology. He makes the very worthwhile observation that disease in the early Vedic period was essentially due to transgressions against the natural order (ṛta), i.e. diseases were caused by sin (p. 94). In many cases however, the actual symptoms of disease were brought on by demons or even gods, such as Varuṇa or Rudra. Towards the end of his discussion on pathology in the Vedic samhita-s, he includes a short discussion on therapeutics. He states that the therapeutic measures mentioned in the Vedic Samhita-s consisted essentially of incantations, magical practices and prayers. “As such,” he goes on to say, “it could have only a slight echo in classical medicine, based on the knowledge of disease and the determination of their causes.” He makes the observation that the plants used in many of these therapeutic measures assumed the role of magical ingredients rather than that of
veritable drugs (p. 131 and 136). These views about Vedic therapeutics are not totally based upon the samhita texts themselves. In fact, Filliozat has based much of his interpretation upon a much later text: the Kauśika Sūtra, which explains and elaborates upon the rites in the Atharvaveda. It may also be pointed out that the plants may have indeed been added to concoctions merely as a part of the magical ceremony. This, however, does not preclude the fact that they helped in the cure of a particular malady. In fact, it could have been the case that different plants were used at different times, and by a process of trial and error the plants that produced the best results were retained to be used in the magically based therapeutic measures, while the others were discarded.

Filliozat's discussion of the data in the Vedic samhita-s concerning anatomy begins by saying that “the Vedic hymns contain no anatomical description, it is only accidentally that the different parts of the body are mentioned....” (p. 140). He then undertakes a very useful and critical examination of A. F. Rudolf Hoernle's Studies in the Medicine of Ancient India, Part I. Osteology or the Bones of the Human Body (Oxford, 1907). He concludes this section with an enumeration and discussion of the most important parts of anatomy mentioned in the Vedic samhita-s. In this discussion, he draws attention to certain parts such as rasa ("organic juice"), ojas ("force") and pitta ("bile") which have been carried over into classical ayurveda.

The section on the data of the Vedic samhita-s on physiology contains a very detailed examination of the evolution of the theory of the winds or breaths (prāṇa). Filliozat concludes this section by stating that Vedic samhita-s do not contain a systematic explanation of the theory of the breaths; however, they do contain a rich technical vocabulary which was utilized by the writers on classical āyurveda (p. 184)

Filliozat presents a summary of the previous material in his chapter on Veda and Āyurveda. He states, "Āyurveda has chiefly inherited from the physiological speculation and from the anatomical notion of the Veda. It has preserved a part of nosological nomenclature, but has almost entirely abandoned ancient therapeutics" (p. 187). In order to make the final evolutionary link with the classical system of Indian medicine, Filliozat discusses the theory of the breaths presented in the Upaniṣads, the first mention of śleṣman (phlegm) which occurs in the Śatapatha Brāhmaṇa and the very important reference to the three doṣa-s found in the Vārttika of Kātyāyana which dates from about 818 B.C.
This reference to the three doṣa-s is the earliest reference where we find the three doṣa-s mentioned together. He concludes, therefore, that the general doctrine of the theoretical cornerstone of āyurvedic medicine, reached its definite form between the time of the Śatapatha Brāhmaṇa and the Vārttika of Kātyāyana (pp. 192-193). This places the initial formulation before the time of Greek science, and its final elaboration contemporaneous with the flowering of Greek science (pp. 194-195).

The next part of the work presents a comparison of the Indian medical system with that of the Greek. The first comparison is that of the āyurvedic theory of wind with the ancient Greek manual On Breaths. Filliozat shows that there is a "profound analogy" between the systems "but not a close correlation"; thus, it seems to exclude textual borrowing. It does not, however, exclude the possibility of the exchange of ideas through cultural relations (pp. 225-226). The second comparison is between the Timaeus of Plato and the āyurvedic theory of the three doṣa-s. Filliozat notices that there is quite a striking correlation between these two theories and the time at which both developed is roughly the same, i.e. the fourth century B.C. This is before the expedition of Alexander into India, an expedition which is generally considered to have brought about the first close contact between India and Greece (p. 237).

Filliozat tries to explain the reasons for these correlations in his next chapter "Communication between Greece and India before Alexander". He suggests that it was very probable that information concerning India could have reached the Greeks by the intermediary of Iran before the time of Alexander (p. 248).

The final part of the English translation is an appendix entitled, "Accadian Greek and Indian medical Prognostics". This is a translation by Dev RajChanana of an article by Filliozat found in Journal Asiatique (Vol. 240, 1952, pp. 299-321), and it does not form part of the original French work. This article is basically a comparison of the Accadian notions on prognostics with that of āyurveda. Utilizing Rene Labat's presentation on Accadian diagnostics and prognostics (i.e. Traité akkadien de diagnostics et pronostics médicaux, Leiden: E. J. Brill, 1951), Filliozat makes a comparison with the āyurvedic notions. He notices many striking similarities between the two and concludes that it is not by mere coincidence that these have occurred. He thus suggests that an influence of the Accadian manual was exerted upon the classical āyurvedic system in the centuries of its development (p. 279).
Thus, we see that Jean Filliozat’s work is indeed a significant contribution to the study of ancient Indian medicine. It is, in fact, the first well known and systematic presentation of the evolution of āyurvedic medicine and the historian of ancient Indian medicine can certainly profit from Filliozat’s observations. Being a pioneering work, Filliozat’s treatise leaves the door open for certain improvements. There are two main points of criticism that may be leveled against this treatise: 1. Filliozat’s approach is very narrow. He searches in the Vedic samhitā-s only for that material which has been found to be present in classical āyurveda. Likewise, he is uninterested in examining the Vedic material for what it may tell us about medicine in the Vedic period of Indian history. 2. His scope is too limited. He examines only the Vedic samhitā material for its medical data.

On the first point, Filliozat has approached his study with the distinct purpose of finding the theoretical foundations of āyurveda in the Vedic period. He has, indeed, illuminated many aspects of āyurveda which may be traced back to that period. He has not, however, given us much insight into how Vedic medicine functioned within the Vedic culture. Hinting at the fact that this is not his primary concern, he states that he does not wish to record all that is available on the subject of the medical divinities in the samhitā-s “as the divinities do not have much of an importance in classical medicine, whose formation we are studying” (p. 86). This is a valid position; however, for one who is interested in the historical evolution of Indian medicine, it is important to examine each stage of its development in its entirety so that the changes and continuities may be fully recognized and appreciated.

The second point is most crucial. Filliozat, in searching for the foundations of āyurveda over a period of 1800 years of literary history, has limited himself to the examination of only the Avesta and Vedic and Greek literature. He examines in detail the early strata of Vedic literature but spends comparatively very little time in the examination of the next strata, the Brāhmaṇas and Upaniṣads, and completely neglects the medical material contained in the Kalpa Sūtras (except perhaps the Kauśika Sūtra), the Śāstra, Epic and Buddhist Pāli texts. All these bodies of literature pre-date the Caraka- and Suśruta Saṃhitā-s and contain much material relating to medicine in ancient India.

Thus in the three works mentioned above, we notice certain shortcomings. The first two works tend to be much too general for scholarly use, while the last work, though scholarly, is much too narrow in its scope and approach. All these
works suffer from the failure to place medicine in the social and cultural milieu of the time. It is very important to know exactly what role medicine played in a society at any given time. In order to gain this information, we need to know how the people of a particular time conceived of health and conversely how they conceived of disease. Knowing this, we would be better able to explain the means by which the restoration of health was implemented. A good understanding of the role of medicine in the society and culture at any particular time would allow us to evaluate to a much greater degree the evolution of the medical art. For example, by understanding the role that medicine played in the Vedic culture we would be able to evaluate not only the actual components of the medical art that have been either retained or abandoned, but also the reasons why. Thus at all stages in the evolution of āyurvedic medicine, we would know the elements which make up the medical system as well as the reasons for the new and different developments within that system.

Finally, another point should be mentioned with regard to source material. The three authors reviewed above have limited themselves to the examination of literary material. It may also be of value to examine, where possible, the art historical as well as the archaeological data. A case in point is the recent archaeological discovery that the surgical technique of trepanation was practised in many parts of ancient India. As similar technique has also been recorded in the literary data, most notably in the story of the physician Jīvaka Komarabhaćca found in the Mahāvagga (Chapter 8) of the Pāli Canon. This surgical technique, incidently, is not recorded in the classical manuals of āyurveda. A possible explanation for this may be that the orthodox Hindu and āyurvedic view concerning purity and pollution and the sacredness assigned to the head forbade any operation upon the head or skull.

**SUMMARY**

The article examines the following three books on ancient Indian medicine.

1. *Ancient Indian Medicine* by P. Kutumbiah

2. *Hindu Medicine* by Henry R. Zimmer


The book by Kutumbiah presents a comprehensive and general introduction to āyurveda. It is aimed at general educated reader and lacks critical evaluation.
Zimmer’s work is also a general presentation in two main chapters. First chapter demonstrates how Vedic medicine used charms etc to bring about a cure and that the healer was a magician-physician. In the Second chapter attempt is made to show a basic micro-macrocosmic relation between man and universe and the three defilements (doṣa-s) are also discussed. The work lacks fully developed ideas.

The work of Filliozat is the best work. It examines the historical evolution of the major doctrines of classical āyurvedic medicine as well as a comparison of these doctrines with one, in ancient Greek medical tradition.