

## On the Problem of the Contribution of Ascetics and Buddhist Monks to the Development of Indian Medicine'

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The purpose of this study is, according to the author's own statement ('Conclusion', p.117), 'the investigation of Indian medicine in the crucial but neglected period from about 800 to 100' (i.e. from the time of the 'compilation of the R̥gveda in its final form' (p.14) up to the period of 'the classical treatises of Caraka, Bhela, and Suśruta' (p.3), and these dates are 'B.C.E.',<sup>1</sup> the aim of the study being to 'obtain a more comprehensive and more plausible picture of ancient Indian medical history ...'. Hence this book is clearly a continuation, and a logical one at that, of Zysk's doctoral dissertation;<sup>2</sup> and it is logical that the main results of the dissertation are summarised at the outset (pp.11ff.). What Zysk is looking for, and claims to have discovered, is the missing link, so to say, between what he time and again calls the 'magico-religious' Vedic medicine and the 'empirico-rational' (= *yuktivyapāśraya*) medicine in the earliest works of Āyurveda literature, or, in his own words, 'the transition from Vedic medicine, anchored in a magico-religious ideology, to *āyurveda*, dominated by an empirico-rational epistemology' (p.117); this transition is conceived of as 'a paradigm shift', though not exactly in the sense of Kuhn's theory. 'From the early Vedic period, medicine and healers were excluded from the core of the orthodox brāhmanic social and religious hierarchy', that is to say, from the group of Brahmins who were the vehicle of the "*trayt-vidyā*-culture", 'and found acceptance among heterodox traditions of

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<sup>1</sup> 'Politically correct' American for 'B.C.', since the 'Common Era' is in the West of course the Christian one.

<sup>2</sup> *Religious Healing in the Veda, with Translations and Annotations from the R̥gveda and the Atharvaveda and Renderings from the Corresponding Ritual Texts*. (Transactions of the American Philosophical Society 75.5.) Philadelphia 1985.

mendicant ascetics, or *śramanas*, who became the repository of a vast storehouse of medical knowledge. Unaffected by brāhmanic strictures and taboos, these śramanic physicians developed an empirically based medical epistemology and accumulated medical lore from different healing traditions in ancient India. Ideally suited to the Buddha's key teaching of the Middle Way, this medical information was codified in the early Buddhist monastic rules, which stressed the practical rather than the theoretical virtues of healing and gave rise to a tradition of Buddhist monastic medicine ...'. 'Hinduism assimilated the ascetic medical repository into its socioreligious and intellectual tradition beginning probably during the Gupta period and by application of a brāhmanic veneer made it an orthodox Hindu science' (p.118).

The gist of Zysk's new vistas of the early history of medicine in India is hence clear — as is his indebtedness to Debiprasad Chattopadhyaya,<sup>3</sup> to whose views he does not however subscribe uncritically. In fact Zysk's main argument is either as such or in its essential parts repeated so often in the body of the book, in particular at the beginning and end of its — altogether — 6 chapters, that one may doubt whether Zysk on his part has succeeded in finding a "middle path" between a welcome explicitness, even though implying a certain degree of repetitiveness, on the one hand, and a rather problematic drumming of his views into his readers — who may just for this reason grow suspicious that he is perhaps himself not fully confident of the strength of his arguments themselves. 'The Evolution of Classical Indian Medicine' thus forms the subject of the first part (pp.11-73), divided into four chapters, namely 'The Beginnings of Indian Medicine: Magico-religious Healing' (pp.11-20), 'Heterodox Asceticism and the Rise of Empirico-rational Medicine' (pp.21-37) and 'Medicine and Buddhist Monasticism' (pp.38-49), followed by a kind of extra, viz. 'Indian Medicine in Buddhism Beyond India', which pursues a particular aspect of the later development, or reception, of Indian medicine, i.e. 'the spread of Indian medical ideas to Tibet and parts of Central, East and Southeast Asia' (p. 50), but has no direct bearing on the central argument of the book. The second part is devoted to 'The Content of Early Buddhist Monastic Medicine' (pp.73-116), i.e. an analysis of the section on medicines in the

<sup>3</sup> *Science and Society in Ancient India*. Calcutta 1977, and, *History of Science and Technology in Ancient India: The Beginnings*. Calcutta 1986.

*Mahāvagga*; this part is conveniently divided into a chapter on 'Materia Medica' (pp.73-83) and another one on 'Stories of Treatment based on Cases of Diseases' (pp.84-116). The 'Introduction' (pp.3-8), which contains among other things an outline of the 'structure of the study' (p.7), is counterbalanced, as it were, by a 'Conclusion' (pp.117-119), from which I have already quoted above. Appendix I, 'Jivaka's Cures' (pp.120-127), announced already in n.35 to p.43, is, as frankly stated by the author himself, a revised and improved version of an earlier article of his,<sup>4</sup> Appendix II (pp.128-132) is a 'Glossary of Pāli and Sanskrit Plant Names', with regard to which the readers are rightly told that 'a note of caution ... applies' to it, but unfortunately not given the information on which source(s) precisely Zysk himself has drawn here. Thereupon follow the 'Notes' (pp.133-167) to all the chapters of the book, their numbering starting with '1.' in the case of each single chapter. Most of the references to primary and secondary literature are found here, as also quotations from texts, and discussions of minor, generally philological, problems. The book concludes with what is called a 'Bibliography' (pp.168-182), but is in reality (as usual) a list of 'Primary' and 'Other Sources', an 'Index of Sanskrit and Pāli Words' (pp.183-189 and pp.189-193, respectively), and finally a 'General Index' (pp.195-200). For an *index locorum*, however, one looks in vain.

The book is apparently meant not only for fellow scholars or Indologists in general, but also for a wider public,<sup>5</sup> a noble and laudable — albeit a rather ambitious — aim which may be the reason, or one of the reasons, for the undeniable clarity of the exposition.

Zysk indeed draws 'on a wide range of textual, archaeological, and secondary sources' and indeed 'examines primary literature from the Pāli Buddhist Canon and from the Sanskrit treatises of Bhela, Caraka and Suśruta', as we are told in the blurb (but cf. p.7). Hence 'an important book, which offers groundbreaking new vistas', as stated by F. Zimmermann in his review?<sup>6</sup> No doubt a stimulating book, and a step

<sup>4</sup> 'Studies in Traditional Indian Medicine in the Pāli Canon: Jivaka and Āyurveda', *Journal of the International Association of Buddhist Studies* 5.1.1982, pp.70-86.

<sup>5</sup> Or, rather, an Indian public, for it is such a public which nowadays expects, or is taken to expect, that every historical study should start with a chapter on Harappa (see pp.11f.: 'Speculations on Harappan Medicine').

<sup>6</sup> *Journal of the American Oriental Society* 113.1993, pp.321-323.

forward in the right direction. But the final judgment of course depends on a number of questions, the main ones being: Of what kind are the individual pieces of evidence? How does the author treat them, especially the textual evidence? What kind of conclusions does he draw? How convincing are the conclusions he draws? How does he argue? That is to say: Does the evidence presented by him support his main thesis, and its various constituent parts? Zysk himself expects his 'presentation of Indian medical history ... to stimulate controversy, particularly among those who ascribe the origins of *āyurveda* to traditional brāhmanic orthodoxy' ('Preface'; cf. also p.117f.). If he is right in this regard, it is not a *praudhokti* to predict that this critique will ultimately be ideological and not academic. There can indeed hardly be any doubt that the contributions of the *trayi-vidyā*-Brahmins to the beginnings of Āyurveda were at best marginal. And there are not only, as pointed out by Zysk at several places, clear cases of "brāhmanisations" in the Āyurvedic Samhitās, but his central thesis also cannot be denied a certain degree of — already — general plausibility, viz. that ascetics, various types of ascetics, played an important — in Zysk's view: a decisive — role in the development of Indian medicine. It is rather other features of his book and statements in it which provoke thought, arouse doubts, cause comment or are simply to be rejected as untenable.

The stark contrast between the 'magico-religious healing' of the Veda and the later 'empirico-rational medicine', emphasised by Zysk time and again, may be acceptable as rhetorical exaggeration. The sources available for our knowledge of medicine in the early Vedic period, however, are such that it would be advisable to modify the expression and speak of a '(most probably) predominantly magico-religious healing'; but when one turns to the medicine attested in the earliest Āyurvedic texts, one immediately hesitates and wonders whether the — in any case only rough — statistical ratio implied by the word 'predominantly', which suggests itself equally in the case of the 'empirico-rational medicine', should refer to the texts or rather to the actual medical practice (of which very little is known, at least so far); I do not think we are in a position to decide that magical spells, e.g. against snakebites, were at that time markedly less frequent than 'empirico-rational' methods. Another description also possible, and in my view even closer to reality, would be that the 'empirico-rational' aspect, already present in Vedic medicine (cf. p.15), became

conspicuously stronger and predominant in later medical theory/literature. We would then have to address the problem as to what caused this development, rather than by whom it was brought about, and why 'empirico-rational' thought expressed itself precisely in the various, and heterogeneous, theories taught in the Āyurvedic Samhitās.

As to be expected in an Indological publication in which professedly 'a historical-philological methodology is used' (p.7), the evidence is for the most part textual, and only to a much smaller extent archaeological. With regard to the latter it suffices to give just one example (in accordance with the *sthālipulākanyāya*). The inscription *śrī ārogyavihāre bhikṣusaṅghasya*, found in the lower half of 'a sealing [sic] from a building discovered during the excavations at Kumrahār, Pātaliputra, 'dating from around 300 to 450 C.E.', is taken by Zysk to mean 'in the auspicious health house of the monastic community' (p.45) — and thus as corroborating the existence of health houses as a part of Buddhist monasteries. Zysk would have to adduce very strong reasons indeed to convince us that *ārogya* was not just the name of this monastery (cf. also K.K. Thaplyal, *Studies in Ancient Indian Seals*, Lucknow 1972). He tends to be equally "generous", and not to fritter away his time, when dealing with non-inscriptional passages.

To say of *R̥gvedasaṃhitā* 9,112.1 only that in it the 'masters of healing' appear 'in the middle of a threefold list of skilled professionals that included carpenters (*takṣān*), healers (*bhiṣāj*), and priests (*brahmān*)' (p.21) is, to put it mildly, slightly misleading; it is rather the difference between people in general which is underscored in this verse (*nānānām vā u no dhīyo ví vratāni jānānām*), the common feature of the three "professionals" mentioned being that all of them look for somebody who might need their service. On p.22, in the translation of a passage from the *Taittirīyasaṃhitā* (6,4,9,1ff.), the phrase *āpūtau vā imāu manuṣyā-carāu bhiṣājāv (iti)* is rendered 'Impure are they', i.e. the Aśvins,<sup>7</sup> 'wandering men and<sup>8</sup> physicians'. The analysis of the whole passage leaves much to be desired: The Aśvins' impurity is clearly due to their contact with men as a different species of mortal living beings below the gods; but are the physicians therefore in their turn impure because of

<sup>7</sup> Who, by the way, can hardly be called 'horsemen' (p.14).

<sup>8</sup> Bolding mine.

their contact with different and hierarchically lower classes of people? Or does the analogy rather simply consist in the "profession" of a physician as such, a reason for his impurity being given only in the case of the Aśvins, the divine "prototypes"? Or, why is the Brahmin not polluted to whose right sits 'one who practices medicine'? Is Zysk's conclusion — that this 'mythical event produced ... the establishment of a rite of purification for physicians' — really justified in view of the fact that in the parallel passage *Kāthakasamhitā* 27,4 it is the/a *brāhmaṇa* who is stated to perform the rite?

At p.25 the interpretation of *Carakasamhitā*, Sūtrasthāna 30,21<sup>9</sup> likewise poses a number of problems only some of which can be discussed here. Instead of 'by a physician who has inquired about' a correct rendering of the first words would be 'by a physician who has been asked in this manner (i.e. that described in 30,20<sup>10</sup>)'. The meaning *ādeśyā* has here is hardly captured by 'is ordered'; much more likely is 'is taught/recommended'. The most important *ātmano* — to be connected with the subsequent *'tharvavede* — should not by any means be left out in the translation. Zysk's rendering of the long compound *dāna°...°parigrahāc* equally contains mistakes and omissions, and to translate *vedo hy ātharvano ... cikitsām prāha* by 'for it is stated that the sacred knowledge of the fire priests [*atharvans*] is medical science', is again not just inappropriate or inexact — so that Zysk could retreat to the line of defence of giving only a "free translation" —, but simply wrong: 'for the sacred knowledge ... [itself!] proclaims/authoritatively teaches medical science'.

The *svabhāvavāda*, mentioned on p.29 as explication of the concept of 'proper understanding of nature', is one of the — I always thought: well-known — "theories/teachings" in early Indian philosophy according to which *svabhāva* is the ultimate cause of the world and all phenomena. Pāli *gahetum* (p.95) is not the infinitive of the causative, but equivalent to, and derived from, Skt. *grahitum*. And the Pāli compound *gharadinnakābādha* does not mean an 'affliction resulting from being given fabricated (artificial) poison' (p.104), but an 'affliction due to

<sup>9</sup> *tatra bhiṣajā prṣṭenaivam cutumām iksāmayajuratharvavedānām ātmano 'tharvavede bhaktir ādeśyā, vedo hy ātharvano dānasvastayayanabalimaṅgalahomaniyamaprāyaścītopavāsamanvādiparigrahāc cikitsām prāha ...*

<sup>10</sup> *tava cet praśārah syuh — canumām iksāmayajuratharvavedānām kaṃ vedam upadiśanty āyurvedavidah ...*

something that has been given and is poison(ous)'. Etc., etc.

I do not of course want to intimate that all the translations given by Zysk, or implied by what he writes, are of this rather poor quality: but certainly too many are. And what is even more important, they are most telling in that they testify to a laxness which can be observed in other regards too, especially with regard to conclusions drawn and arguments presented. What should one think e.g. of the following statement: 'They', i.e. physicians existing 'outside the mainstream of society', 'earned their livelihood by administering cures and increased their knowledge by keen observations and by exchanging medical data with other healers whom they encountered along the way, for the āyurvedic medical tradition strongly encouraged discussions and debates with other physicians' (p. 24)? Granted that *Carakasamhitā*, *Vimānasthāna* 8,13 and 20 indeed 'strongly encourage' such an 'exchange of experience and knowledge', are these statements, even taken together with the examples of debates found in the *Samhitās*, sufficient evidence to assume that the picture drawn by Zysk of the later Vedic period is more than a figment of his own imagination? *Rückschlüsse* of this type, i.e. conclusions drawn from younger textual evidence with regard to (an) earlier period(s) of time, or the contention that a particular phenomenon attested in a younger source did still exist at that particular point of time, i.e. continues an earlier tradition the existence of which it is thus supposed to confirm, are not rare (see e.g. pp.74ff.)

Or take the beginning of the second paragraph on p.40: 'The inclusion of a form of medicine', i.e. 'putrid urine (of cattle) as medicine (*pūtimuttabhesajja*)', one of the 'four resources (*nissaya*)' with which a new Buddhist monk was provided according to the *Vinaya*) 'among the essential life resources points to knowledge of techniques of healing among the wandering ascetics', i.e. (most probably) non-Buddhist and Buddhist. The possession of medicine by an individual does not, of course, imply that he/she has any medical knowledge. In addition, it is hard to believe, not that animal urine, 'because neither human donations nor injury to living beings was required to obtain it', was easily accessible to wanderers, but that it was for this reason permitted to Buddhist monks — which solves the riddle of Zysk's repeated reference to the 'Middle Way'. Urine was — and still is — in South Asia one of the most common "household remedies": not, however, just any 'animal urine', but cow urine, although it is used for many other purposes too. In passing only I should like to add that I wonder whether *pūtimuttabhe-*

*sajja* really, at least right from the beginning, meant 'putrid [cow] urine as medicine', and not rather '[cow] urine which forms a means of purification ...'. Similarly, certain other medicines, viz. 'the five basic medicines' of 'the materia medica of the Buddhist monastery', i.e. ghee, fresh butter, oil, honey and molasses (p.72), are to be suspected of being basically "household remedies". A final example of a Zyskian argument: 'Professional medical practioners also rendered medical aid to the ill in the *saṅgha*, indicating the close connection between medicine and Buddhist monasticism' (p. 84). Replace '*saṅgha*' by 'jail' or 'brothel' or 'chicken-farm', and accordingly 'medical practioners' by 'veterinarians', and try to maintain your composure!

Again, these are only examples, and more could be given. They are not meant to intimate that the whole book is nothing but a series of such arguments. But neither can they be simply played down as occasional slip-ups; rather they indicate another central weakness of this study, the lack of continuously consistent reflection.

In a number of cases Zysk convincingly demonstrates that he is able to use secondary literature critically (see e.g. p.30f.). But when one reads on p.39 that 'in the early *saṅgha*, membership was quite unrestricted, and wanderers joined and left at will' — and 'these comings and goings', of course, 'increased the quantity of new information exchanged among the various *śramaṇas* who happened to sojourn during the monsoon rains with the *bhikkhus* ...' —, one looks desperately for a note giving a/the reference, i.e. some kind of support for this statement which flatly contradicts all that is said in the *Vinaya*.<sup>11</sup>

As has already been mentioned above, Zysk cannot be accused of lacking imagination. But certainly he does not always make good and reasonable use of it. At places he lets himself be carried away by it, colourfully filling in large blank spots in the picture emerging from the sources (e.g. p.27). In other cases, and I am afraid their number is much too large, imagination seems to have abandoned him totally, which has the sad effect that he does not see other possibilities of interpreting statements in or correspondences between texts, and does not therefore recognise (the) problems involved. E.g. it does not occur to him that re-

ports of foreign visitors to India, or descriptions of aspects of life in Ancient India ultimately based on such reports, like that of Megasthenes and Strabo (pp.28ff.) or Hsüan-tsang (p.36) or Al-Bīrūnī (also p.36), cannot be relied upon, without any historical criticism, as "authenticated information", as the truth. Thus Hsüan-tsang's statement that 'the body is thrown into deep flowing water and abandoned',<sup>12</sup> one of three methods of disposal of the dead, may well refer to what is called (I don't know since when) *jalasamādhi*, reserved for *homines religiosi*, or persons who are regarded as such; this method, however, a more adequate description of which would be that the body is sent to the bottom of the river, has nothing at all to do with the acquisition of anatomical knowledge, nor does it as a rule give 'opportunity for observing decomposing corpses', because precautions are taken precisely in order to prevent the body from rising to the surface of the water.

Or take another case. The only explanation Zysk can think of for the similarity of classifications of foods in the Buddhist *saṅgha* and 'the early āyurvedic treatises' is 'a common origin' (p.41) — and most of the arguments of the last two chapters of the book are based on this model. Or can we be sure that 'the treatment of split-open feet by means of a foot massage and ... derive from the tradition of wandering ascetics' (p.98), i.e. can we entirely ignore e.g. the peasants, the herdsmen, etc., that is all the people who can even nowadays be seen to suffer from deep cracks in their feet? Should we not take into consideration the possibility that *jvara* might be used metaphorically in the inscription from Nāgārjunikoṇḍa, quoted on p.44? *Jvara* is after all one of the synonyms of *kleśa* (e.g. according to the *Yogācārabhūmi*), and if *vigata-jvarālaye* would really mean '[in] the abode of feverless' (*sic*), it would refer not to a health house, but to a "house for the convalescents".

That is to say, throughout the study what the author regards as pieces of evidence are presented as such and nicely garnished, so to say, but hardly ever are they carefully checked as to their actual character and relative significance. Therefore the reader gets the impression of being expected to yield rather to persuasion than to arguments convincing him in so far as they are the result of a comprehensive critical discussion addressing all the problems. Small wonder that one becomes

<sup>11</sup> Cf. H. Härtel, *Karmavācānā. Formulare für den Gebrauch im buddhistischen Gemeindeleben aus ostturkestanischen Handschriften* (Sanskrittexte aus den Turfanfunden III), Berlin 1956.

<sup>12</sup> Surely this bare statement of Hsüan-tsang does not justify one assuming that he had in mind the scarcity of firewood as we know it today.

a little suspicious of the author, and reckons with the possibility that he saw his main task in just assembling assiduously all the "data" which *prima facie* can be passed off as confirmation of his original "idea".

In fact, in the end one cannot but wonder what remains of the multistoreyed building erected by Zysk once it has been stripped of those parts, some of them clearly weight-bearing, which

- are due to misinterpretations of text passages,
- are first recognised as possibilities, but a little later treated as facts,
- are but one out of a number of equally possible interpretations,

or

- represent "conclusions" not really deserving to be styled as such.

A skeleton of steel girders, tightly joined to each other, or just the ruins of a collapsed structure?

Ironically Zysk may nevertheless ultimately be right. What I have in mind is first of all material not drawn upon by him, like e.g. the many, though stray, references to medicine in other parts of the Vinaya, or statements like e.g. that of *Carakasamhitā* Cikitsāsthāna 1,54(ff.) according to which *tapodhanas* like the Vaikhānasas and Vālahilyas became people whose lifespan is unlimited by taking the *rasāyana* called *brāhma*, or a verse like *Suśrutasamhitā*, Sūtrasthāna 37,8:

*gopālās tāpasā vyādhā ye cānye vanacāriṇaḥ*

*mūlāhārās ca ye tebhyo bheṣajavyaktir īsyate,*

in which the group of people to be consulted about — effective — medication is, however, significantly larger than that envisaged by Zysk.