Ayurveda and Modern Concepts

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istorians of Modern Cosmopolitan Medicine consider Hippocrates (460-370 BC) as the founder of medicine as we know it today. Hippocrates gave medicine its scientific spirit, replaced superstition by rational observation and inference, gave a rational diagnosis, prognosis and treatment, and gave medicine its ethical ideas. The Hippocratic oath is taken even today and the Hippocratic aphorisms are admired as gems of human clinical wisdom even by the student of medicine in the 20th Century. Take for instance, the

following aphorism: 'In case of jaundice, hardening of the liver is a bad sign'.

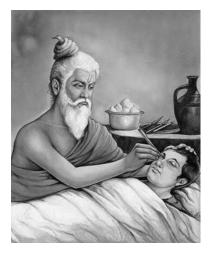
Without detracting a bit from the tributes rightly paid by medical historians to Hippocrates, it can be affirmed that Charaka and Sushruta deserve the same primacy and the same place of honour as Hippocrates. Indian historians claim that Charaka and Sushruta came before the time of Hippocrates, while some western historians put the time of Sushruta much later (1st Century A.D.). The controversy and dispute

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about the determination of the exact time of Charaka and Sushruta are irrelevant to the proposition that Charaka and Sushruta deserve the same preeminence as Hippocrates, as founders of Medicine. Despite the great contributions made by the western Indologists in the last 100 years, in establishing the greatness of ancient Indian medicine, ignorance and/or prejudice of western medical historians continue even today as evidenced by the fact that a Life magazine publication on the history of medicine does not even mention Charaka and Sushruta.

The term Ayurveda means 'knowledge' (Veda) concerning maintenance of 'life' (ayus). The origins of this knowledge are already evident in the Atharvaveda (the contents of which can be dated between circa 1500-1000 BC). The treatment of disease (Chikitsa) in the Atharvaveda is largely religious and ritualistic, emphasising such practices as the sacred utterances (mantra), penances (niyama), amulets (mani), sacred oblations (mangala homa), fasting (upavasa), and purificatory rites (prayaschitta), but the Atharvaveda also contains

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material about human anatomy, herbal medicines (bhaisajya), and the classification of diseases (lingi vyadhi). Reference is made to 'wandering medical practitioners' (charan-vidya) and those who are 'trained in medical science' (Vaidya). Mythologically the first exponent of the medical science was none other than the creator Brahma himself. Brahma shared this knowledge with Prajapati, who in turn passed on the tradition to the Ashwini Kumars and Indra. Surgery (Shalya) was revealed by Indra to Divodasa, the King of Kasi who was also an incarnation of the divine Dhanvantari, culminating finally in the classical Sushruta tradition of Ayurvedic surgery and medicine.

Internal medicine (*Kaya-Chikitsa*) was revealed by Indra primarily to Atreya Punarvasu, culminating finally in the classical *Charaka* tradition of Ayurvedic general medicine. Ayurveda is considered as a supplement (*upanga*) or as an *upaveda* (supplementary veda) of *Atharvaveda*, or even as a 'fifth veda' (the four vedas being *Rig*, *Sama*, *Yajur* and *Atharva*).

Numerous other texts of medicine, other than Charaka Samhita and Sushruta Samhita were regularly composed through the centuries, such as the Bhela Samhita, Kashyap Samhita, and Agnivesha tantra (which were even earlier than Charaka Samhita). Other notable contributions were Ashtanga Hridaya of Vagbhata (600 AD) and Madhav Nidana (700 AD). The Ayurvedic tradition continued as a vigorous and expanding scientific tradition down into the 16th Century. Its medical literature is oriented practically and operationally, although apparently it had an 'elective affinity' for and an ongoing exchange with the classical Indian philosophies. The dominant intellectual influences on Ayurveda are those of the Samkhya and Vaisheshika Indian

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philosophies, although one also finds terms and notions from the Vedanta, Nyaya, Yoga and early Buddhist and Jain reflections.

Ayurvedic texts were translated into Greek (by Cnidos in 300 BC), Tibetan and Chinese (300 AD), Persian (700 AD) and Arabic (800 AD).

Charaka Samhita (literally, treatise compiled by Charaka) is a Sanskrit work of great antiquity. It is an exposition of Ayurveda, the science of life, defined as the Science of the causes and symptoms of disease, of their treatment and of the maintenance of health (Sutra 1, 23). It also deals with the origin of medical science, the fundamental causes of conception and birth and of physical deformities. The treatise contains a detailed classification and nomenclature of diseasestheir Vyakhya (definition), Vyutpatti (etymology), Nidana (etiology),

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Poorva Roop (prodromata) and Roop (clinical picture), Samprapti (pathophysiology), Sadhya Sadhatva (prognosis), Chikitsa Sutra (line of treatment), Aushadha (drugs), Anna (diet) and Vihara (practices), etc. This conceptual framework and approach appear strikingly similar to contemporary medicine.

The approach of Sushruta Samhita is similar to Charaka Samhita, but with special emphasis on surgery, which Sushruta describes as the first and foremost speciality. He has described various types of inflammation and various stages of inflammation, accidental wounds, burns, fractures. Sushruta describes many major abdominal operations for intestinal obstruction, bladder stones etc. and also plastic surgery like rhinoplasty, crushing and extracting the foetus, delivering the foetus through abdominal operation, amputation of limbs and extraction of foreign bodies. Sushruta described 'Shalya' or surgery as the highest in value among the therapies because of its ability of producing instantaneous relief by means of instruments and appliances.

Sushruta has described 101 kinds of blunt instruments and 21 kinds of sharp instruments.

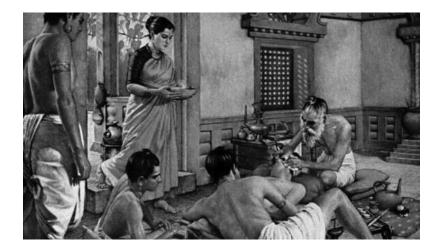
The very first of these, Simhamukha Swastika (lion-faced forceps) is the precursor of the modern lion's forceps.

The blunt instruments cover a wide range including forceps, pincers, trocars, speculums (nasal, aural, vaginal), finger guards, syringes, cannulae, dilators, catheters, clysters with eight kinds of bags and tubes, catheters, tubular appliances for inhalation, fumigation and disinfection of rooms, rods, probes of different shapes and sizes, foetus traction hooks, bone levers, directors and many others.

The accessories include thread (also caustic coated thread—'Kshara sutra' for the operation of fistula-in-ano), twine for ligature, bandages of 14 types, dressings, abdominal binders, various types of leather bags, bands and bandages, splints (made of bamboo and inner bark of trees), crutch, tendrils and creepers, cloth, spittle, suture material, caustic medicines and goat's guts.

The sharp instruments include knives and scalpels (many

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varieties), saws, ring scalpels, needles, scissors, *trikurcha* (tripleneedle trocar), axes, awls, toothscalers and sharp hooks.

Sushruta emphasises that 'the hand of the surgeon is the best, the most useful and the most important of all surgical instruments'.

Thirty-two surgical manoeuvres are described by Sushruta. Some examples: Nirghatana (extraction by moving to and fro); Vyuhana (raising up and incising a part bringing together the lips of the wound); Vartana (contracting or curling up); Chalana (moving a foreign body); Vivartana (turning round); Peedana (pressing out); Vikarsana (loosening); Aharna (pulling up); Unnamana (elevating depressed cranial bones); Darana (splitting); Chhedana (excision); Bhedana (incision); Unmathana (probing); Achusana (suction); Lekhana (dissection); Vyadhana (puncturing); Visravana (draining) and Sivana (suturing).

One is impressed by the vast conceptual canvas and framework of Ayurveda. It is important to realise that Ayurveda is not confined to medicine only, it tackles the whole subject of life in its various ramifications. This can be seen by the variety of topics discussed therein, such as re-birth, renunciation, salvation (*Moksha*), soul (*Atma*), etc.

The purpose of life is four-fold, to achieve *dharma* (virtue), *artha* (wealth), *kama* (enjoyment) and

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moksha (salvation). In order to attain success in this four-fold purpose of life, it is essential to maintain life not only in a diseasefree state but also in a positively healthy state of body, mind and spirit.

The emphasis on the maintenance of positive health or Swastha Vrutta, is a distinguishing feature of Ayurveda. In order to maintain positive health, Ayurveda prescribes specific daily routine 'dinacharya', and also a seasonal regime 'ritucharya'. In 'dinacharya' great importance is given to diet which is to be taken in a proper way with regard to quality, quantity as well as frequency. Emphasis is given to physical exercise and personal hygiene. The daily regime advocates not to suppress certain natural physical urges like micturition, defecation, hunger, thirst, sleep etc. On the other hand suppression of harmful psychic urges is advocated—like greed, fear, anger, vanity, jealousy, malice and excessive attachment to anything.

Equal importance is given to mental health, for which a regime of *Sadvrutta* (ethical life) is prescibed. Strict mental discipline and strict adherence to moral

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values is considered a prerequisite for mental health.

'That is named the Science of Life wherein is laid down the good and bad life, the happy and the unhappy life, and what is wholesome and what is unwholesome in relation to life, and also the *measure* of life.' (*Charaka Samhita, Sutra Sthana*, 1, 41).

An interesting concept worth emphasising here is that of Vyadhi-Kshamatwa, that is resistance to disease (or immunity in modern parlance). The aim of Ayurveda is to promote health — 'Swasthasya Swasthya rakshanam', increase immunity and resistance — 'Vyadhi Kshamatva' and to cure disease — 'Aturasya Vyadhi parimokshah'.

In spite of the fact that Ayurveda has laid great stress on 'Bhiyo Darshana' (repeated observation) and acceptance of data as reliable only on the basis of 'Anvaya' (uniform consistency), unmarred by any 'Vyatireka' (contradiction), intuition has played a major role in the development of Ayurvedic concepts. But it is remarkable, from a clinician's viewpoint that the clinical approach of the Ayurvedic physician seems strikingly similar to that of the modern physician.