



Ayurveda During The A.D. 1200-1800 - A Glance

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Abstract: *“Ayurveda is an ancient traditional system of medicine. It is considered to be the oldest system of health care, with literature going back to about 5000 years or pre-Historic times and an oral traditional that is much older. This healing system has been practiced in daily life in India since the pre-Historic times.”*

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The term *Ayur* means span of life; *veda* means ‘science’. Thus the mean of *Ayurveda* is ‘science of life’. In *Ayurveda* health is a state of spiritual and attainment. It is a medical, metaphysical healing life science-the mother of all healing arts. The practice of *Ayurveda* is designed to promote happiness, health and creative growth. It is the science of daily living and this system of knowledge evolved from the sage’s practical, philosophical and religious illumination which was rooted in their understanding of the creation. *Ayurveda* helps the healthy person to maintain health and the diseased person to regain health. The origin of the *Ayurveda* cannot be credited to any particular age, place and person, despite many legends to the contrary. Such legends describing both divine origin and corresponding antiquity of the *Ayurveda* are found in the introductory passages of many *Ayurveda* texts e.g. Caraka, the *Susruta* and the *Samhitas*. It is recorded that Brahma was the divine source of this science.

The body is made up of Tridoshas ‘Tri’ means Three and ‘Doshas’ means ‘Humours’. Vata is Air, Pitta is Fire and Kapha is Water. Good health means a normally in the Tridoshas, balance of metabolic, systemic and excretory functions, all five senses and in the mind and spirit. Vata is predominant in old age, Pitta in the middle age and Kapha in the childhood. According to the season Kapha is predominant early morning, Pitta in the afternoon and Vata late at night. For good health, each person has to maintain the balance of their doshas and not to aggravate it and imbalance in them is the cause of illness. It is thus essential to identify one’s body type and follow dietary regimes, according to the seasonal regimes to maintain optimum health. *Ayurvedic* treatment helps to restore this imbalance without any side effects. This helps in several conditions including liver disorders, strokes, mental and muscular dystrophy, rheumatic and chronic conditions.

Static Period of *Ayurveda*

In 13th century A.D. it is generally taken to mark the end of the ancient period of Indian Culture. In this time it is also significant in the history of Indian medical science because it



marked the end of an era of growth and standardization and the classical treatise of Caraka and Susruta had already become hoary with age; it had been necessary to revise the archaic matter and restore parts which had been lost. The later works of Vagbhata, Madhava and Cakarapani also held high places in professional esteem but, due to the highly conservative cultural traditions of India, the older classics had not been pushed aside in favour of the more concise and better written later treatises. Besides these, many other commentaries, specialized works on the eight branches of Ayurvedic knowledge, anthologies and lexicons held the field and served the needs of medical men throughout the political and cultural sphere of Indian influence. Apart from the emergence of some new remedies in the Tantric works and the *Rasacikitsa* school, nothing challenged to dominance of Ayurveda. Its prestige was not confined to India. Through missionaries, visiting scholars, emigrant doctors, and by the written word, it had penetrated to the far corners of the known world, from Mongolia in the north to Ceylon in the south and from Eastern Mediterranean countries in the west to the Indies in the east. Adoption of Indian drugs, methods, and theories in these lands and the translation of Indian medical works in many languages testify to the fact that *Ayurveda* was one of the foremost medical systems prevalent in the world at that period.

In 12th century A.D. then, *Ayurveda* had long reached its peak, but the intellectual energy and creative research which had contributed to its growth and vigour were definitely things of the past; so also were dispensaries, hospitals and medical services maintained at State expense by past Buddhist and Hindu monarchs. The new generations of medical students had to depend upon largely on their personal teachers for practical and theoretical training, augmented no doubt by the great treatises. The main prerequisite of sustained intellectual development-prestige and security of the intellectual and professional classes in a politically stable and progressive society-was gone; for India was constantly overrun by powerful foreign hordes. The martial classes not only ruled the land; they had replaced the intellectuals as the dominant class in the social hierarchy.

It would be, however, an unjustified oversimplification to ascribe this static condition and the later stagnation and decay of *Ayurveda* solely to political reasons. The seeds of decay lay inherent in Indian thinking, religious beliefs and social system, and these profoundly affected the Indian sciences themselves; and medical science was no exception. The intellectual curiosity and passion for experimental research, which were associated with the Tantric and *Rasesvara* faiths, also petered out due to the same inherited factors.

But, during the broad period of Indian history (A.D. 1200-1800), the residual impulse of the vigorous medical systems of the earlier ages produced an impressive array of valuable secondary works before reaching almost complete inertia. This inertia was helped by the adoption of *Unani* medicine as the system recognized by the ruling power along with the passive



neglect of *Ayurveda*. This loss of prestige was followed, as we shall see, by a loss of popularity as well, during the last centuries of this period.

Ayurvedic Works in the Middle Age

Many scholarly works on *Ayurveda* proper were written during these six centuries. One of the earliest was the *Samhita* of *Sarngadhara* (13th century), which, for the first time in the history of Ayurvedic works, includes opium in the *materia medica*, possibly following Chinese or Arabic practice; mercurial and other metallic compounds are also freely used in the text. A voluminous and possibly later treatise is by *Vangasena*, with the title *Cikitsasamgraha*. This work, which is not to be confused with an earlier work of the same name by Cakrapanidatta, has always been known as *Vangasena*, possibly to avoid this confusion. It has been a popular hand book in Bengal for many centuries and is available in all respectable collections. But, though it contains many prescriptions from this school, its language and presentation prove its later date of composition. The *Yogaratanakara*, another comprehensive and monumental treatise on *Ayurveda* by an unknown author, has been popular in South India for many centuries; its chemical methods for preparing drugs are extremely valuable. Possibly the most renowned work during this period is that of Bhavamisra (15th-16th century). This work, *Bhavaprakasa*, contains an exhaustive list of diseases and their symptoms and a complete list of drugs current in his time.

Another class of medical works, which had existed from earlier times but which became increasingly important as handbooks in medical practice during this period, were the *nighantus*, which contained long or short monographs on different medical substances and terms. The works of this period were by Madanapala, Narahari, Bhimapala and Rajavallabha, which supplemented or supplanted earlier works by Dhanvantari, Halauyda, Visvadeva, Amara, Sesaraja, Sodhala, Madhava and Cakrapanidatta. None of these works claim any originality in matter or presentation of theoretical knowledge. Among specialized treatises of this period may be named *Arkaprakasa* by Ravana, of unknown age, dealing with aqueous and tinctorial extracts; *Cikitsakalika* by Trisata (14th century), a manual on diagnosis; *Cintamani* by Ballabhendra (15th-16th century), another comprehensive work on aetiology and diagnosis of diseases and clinical examination of the bodily eliminations; *Vaidyamrta* by Moresvara (early 16th century), dealing with treatment of diseases only; and *Vaidya-Jivana* by Lolimbaraja, dealing with the clinical and therapeutical aspects of marital relations. Most of the works mentioned above are available only in manuscript form.

The works of the *Rasacikitsa* school of this period compare favourably, in material and presentation, with earlier works of this branch of medical and chemical knowledge. *Rasaratanakara*, the monumental work by Siddha Nityanatha was the earliest work of this period though it might have been composed in the last years of the ancient period. It is a compendium of medical knowledge pertaining to this non-Ayurvedic school and deals with non-mercurial



metallic compounds, mercurial preparations, therapeutic actions and rejuvenating effects of such preparation and the religious faith of the *Rasacikitsa* school. *Rasasara* and *Rasahrdayatantra*, two important works on alchemy and mercurial preparations, are widely believed to have been written by Gobinda Bhagavata Padacarya, the preceptor of Sankaracarya, but they are very possibly the works of another later Govinda Bhagavata (c.13th cen.) of Gujarat.

During the later part of the period under review a combination of adverse political, social and economic factors gradually undermined the reputation and usefulness of Sanskrit-based learning and the old cultural achievements fell into disrepute. There were also no hospitals, no medical colleges, no forums of discussions and, needless to say, no research in *Ayurveda*. The noble profession gradually passed from erudite scientists into the hands of semi-ignorant people with only hearsay knowledge or knowledge gathered from an imperfect comprehension of incomplete and incorrect texts. The members of families of long lines of Ayurvedic practitioners, often foremost in education and aptitude in their society due to centuries of family tradition in a scientific profession, quickly found other and more lucrative professions. Not knowing Sanskrit they considered the manuscripts of their forefathers as useless lumber.

The long and rigorous training in theory, medicine and surgery compulsory in classical times, gave place to a few years of apprenticeship as compounder-cum-assistant. The new entrants to the professions were very little interested except in methods of easy cure and were psychologically inclined to follow the path of least resistance. Actual dissections on cadavers, so necessary for surgical and anatomical knowledge, had been discontinued for many centuries due to changed ideas of caste purity, and surgery was avoided or relegated to barbers when absolutely unavoidable. Obstetric practice was shunned by the male physicians due to changed ideas of social intercourse and was relegated to untrained and illiterate midwives with horribly insanitary and often highly harmful methods.

The teachings of the classical works regarding detailed examination of bodily eliminations and applications of douches, enemas etc., were conveniently forgotten; for social and cast considerations, as well as prudery, dictated against such methods. The painstaking methods of diagnosis found in *Ayurveda* were replaced by diagnosis on the basis of case history and feeling the patients pulse; the equally painstaking methods of treatment often became limited to oral medication. In the later sphere, the metallic preparations alone were reliable, as the original pharmacognosy of plant drugs had long been forgotten and rubbish offered by traders was often past on as genuine; for genuine prescriptions were costly to collect, prepare and store. When results were disappointing, the science had to take the blame and people turned more and more to the newly imported Western science of medicines in hope of cure. That *Ayurveda* did not completely die out in these circumstances is a great tribute to its intrinsic merit and vitality.

Bibliography



Primary Sources

Ayurveda-dipika of Cakrapanidatta-Edited by J.T. Acarya, Bombay,1941.

Bhavaprakasa of Bhava misra-Edited with Hindi Commentary Vidyotini with illustrated botanical notes, 2 Vols., Kasi Sanskrit Series No.130, Banaras 1938.

Caraka Samhita-Edited with English, Hindi translations, Gulab Kunverba Ayurvedic Society, Jamnagar, Gujarat 1949.

Cikitsa Samgraha of Cakradatta-Edited by Jibananda Vidyasagara, Culcutta,1888.

Cikitsa-Sara-Samgraha of Vanigasena-Edited by Jibananda Vidyasagara , Culcutta 1893.

Rasahrdaya of Govind Bhagavat-Edited by Jadavji Tricumji Acarya, *Ayurveda Granthmala*, Bombay 1936.

Rasasara Govindacarya-Edited by Jadavji Tricumji Acarya, *Ayurveda Granthmala*, No.6 Bombay 1912.

Susruta Samhita-Translated into English by Kunjalal Bhisagratna, Culcutta, 1907-15.

Yogoratnakara-Edited by Annamoresvara Kunte, Anandasrama Sanskrit Series, No.4 Poona 1889.

Secondary Sources

- GUTHRIE,D.- *History of medicines, London, 1930.*

- HOERNLE, A.F.R.- *Studies in the medicine of Ancient India, Calrden Press, Oxford, 1907.*

- KEITH, A.B.-*A History of Sanskrit Literature, London, 1920.*

- RAY.P; and GUPTA,H.N.-*Caraka Samhita*-National Institute of Sciences of India, New Delhi, 1965.

- SEN, GANANATHA-*Ayurveda Paricaya(In Bengal)*, Visvabharati Granthalaya, Culcutta, 1944

- SIDDIQI,M.Z.-*Studies in Ar abic and Persian Medical Literature*, Culcutta University Culcutta, 1959.