Indians Medical Thought on the Eve of Colonialism

By Dominik Wujastyk

In recent years my research has focused on the Sanskrit texts of classical Indian medicine (Sanskrit: śāṅkara, the science of longevity). Systematic medical ideas, embodied in śāṅkara, began to be formulated at the time of the Buddha (c. 480 BCE). The Buddhist monks and nuns had the expertise to diagnose disease from an imbalance of three humoral substances (wind, bile, and phlegm), an idea that would become a cornerstone of Indian medical theory. After a lacuna of several hundred years, medical encyclopaedias were compiled, edited, and re-edited. Two of these compendia are relatively well known today as the Sūtakā and Caraka. A third work, named Heart of Medicine (Aśtuśākhrīdya-sūtra) and composed by the Vedic sage Vāgīśvara and Haritṛiṣi’s Yogadigamini. A current examination of any manuscript library in India reveals hundreds of copies of these works, which were energetically copied, distributed, and studied throughout the subcontinent. Printed editions of some of these works are in wide circulation and use in India even today, in traditional medicine colleges and clinics.

The seventeenth century continued the rich production of medical texts, including those of Trimalabhatta, and several works commissioned by Mahārāja Anuttama of Bikaner. Other authors worthy of study include Bharatamallika, who wrote on the genealogy of the medical families of Bengal, and Praharaṇa, who wrote a medical text in the novel form of a dramatized dialogue between husband and wife. Several medical works were also produced under the patronage of the Maratha dynasty of Thanjavur in South India.

The eighteenth century witnessed, apparently for the first time, the emergence of a linguistic situation in which medical authors began to develop literary discourses spanning languages. In this, so far as we can tell, medical writing seems to differ from other disciplines of Sanskrit intellectual life. For example, Diler Jang composed in both Sanskrit and Persian, while Mahādeva-deva wrote two works, which contain Perso-Arabic terms and introduced Islamic medicine to a Sanskrit-reading audience. Vāyūvṛkṣāvāma composed a bilingual Gujarati-Sanskrit medical glossary, which referred to Persian medicine, and Mahārāja Pratapāsina of Jaipur wrote in Marwari, and then translated his own work into Sanskrit verse and Hindi prose (occasionally distinguishing five new types of insanity).

In Thanjavur the Mahārājas themselves began composing medical texts. This period is marked by a growing awareness of foreign medical traditions in India. Ratnajyotivindu mentions English operations for piles, and refers to several contemporary foreign physicians. Gomindadisa introduces various foreign medical innovations, while referring to the views of contemporary physicians.

The second major influence on my research has been the recent work of Sheldon Pollock, professor of Sanskrit at Chicago, and the invitation to participate in the ‘Indian Knowledge Systems on the Eve of Colonialism’ project which has brought together a research group interested in social and intellectual issues in disciplines as diverse as astronomy (jyotisa), logic (nyāya), poetic theory (sāhityāra), liturgical hermeneutics (mnāma) and, of course, medicine.

Pollock’s recent research, published in articles such as ‘Indian knowledge systems on the eve of colonialism’, (Intellectual History Newsletter, 2000), ‘The death of Sanskrit’ (Comparative Studies in History and Society, 2001), and ‘New intellectuals in seventeenth-century India’ (The Indian Economic and Social History Review, 2001), explores and develops ideas from his earlier work, for instance the meaning in the Indian context of such crucial concepts as modernity and novelty. Based on close readings of an unusually wide range of texts from Sanskrit and other languages, Pollock offers a grand narrative of social, literary, and linguistic change. In his more recent writings he identifies novel genres of literary production and the growth of certain types of potentially anti-traditionalist questioning that seem to have become acceptable, even fashionable, in more than one intellectual discipline.

While some of Pollock’s arguments and evidence have been challenged by scholars such as Jürgen Hambrecht, nobody has plausibly replaced or disclaimed Pollock’s overall argument about the forces at work within language and thought in second-millennium India.

Sanskrit systems of thought

An intriguing feature of Pollock’s work is the status it grants to the intellectual history of Sanskrit South Asia as a formation of great, possibly uniquely great, importance in the global history of human thought. Pollock encourages us to adopt an approach to understanding Sanskrit systems of thought that place them on the world stage, as well as the application to India of sophisticated ideas and tools that have developed in studying pre-modern European thought. Additionally, the ideas and contributions of Sanskrit authors and scholars are discussed in a social as well as purely intellectual milieu. This is only possible when a reasonable amount of biographical information survives, as is the case with intellectuals from the last millennium, especially from the centuries preceding colonialism.

The medical authors of the sixteenth to eighteenth centuries illustrate the possibilities for integrating the history of ideas with that of the social processes that shaped their production and transmission throughout this period of Indian intellectual history. Data on relations systems connecting families and on lines of academic tutelage can be retrieved, and it now appears possible to begin exploring the social basis of ‘knowledge making and knowledge holding’ (Steve Shapin) and the social and intellectual links among thinkers whose ideas have been passed down to later generations.

References

1. See: http://dsal.uchicago.edu/sanskrit

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