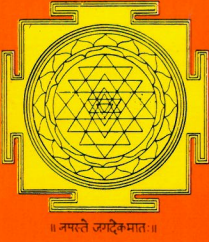


A PROJECT ON BHARATIYA-SAMSKRITI-SARVASVA-KOSHA



Kalpatharu Research Academy Publication

Chief Editor : DAIVAJNA K.N. SOMAYAJI

AYURVEDA - PARICHAYA



By

S.K. RAMACHANDRA RAO

KALPATHARU RESEARCH ACADEMY

(A DIVISION OF SRI SRINGERI SHARADA PEETHAM)

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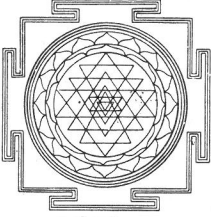
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AYURVEDA – PARICHAYA by Vidyalkara Sastra-Chudamani, Sangita Kalaratna, Vachaspati Prof. Dr. S.K.Ramachandra Rao, and Published by Daivajna K.N. Somayaji, Chief Editor & Director, Kalpatharu Research Academy, No.1, Shankarmutt, Shankarapuram, Bangalore – 560 004, Phone : 26507464, Fax : 26514078, e-mail : kalpatharu@vsnl.com

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PREFACE

Kalpatharu Research Academy, Bangalore, proudly presents an introductory volume on Ayurveda, the Indian medical system which has now become subject of worldwide interest. Ayurveda is not only a curative system; it has preventive aspects also which are of great relevance to healthy people as well as sick people. It is this aspect of Ayurveda that is dealt with in this volume. There is no doubt this will be of interest to health oriented populace, besides being of value to disease oriented practitioners.

The academy acknowledged the immense contribution being made by Vidyalankara, Sastra-chudamani, vachaspati Prof. Dr. S.K. Ramachandra Rao who was for long years president of the Ayurveda Academy.

The Academy records its gratitude to the blessings of Jagadguru His Holiness Sri Sri Sri Bharati Tirtha Mahaswamiji, of Sringeri Sharada Peetham, chief patron of the Academy and to the keen interest evinced by Shri V.R. Gowrishankar, Administrator of the Sringeri Sharada Peetham and Chairman of the Academy.

We also acknowledge the generous Financial Assistance from the Ministry of Human Resources Development, Department of Education, Govt. of India, New Delhi and Dept. of Education, Govt. of Karnataka, Bangalore.

The Academy thanks the staff of the Omkar Offset Printers for neat production of this volume.

Bangalore
Sri Tarana Nama Samvat
Mahasivaratri
Date : 08 March 2005

Daivajna K.N. Somayaji
Chief Editor and Director
Kalpatharu Research Academy

KALPATHARU RESEARCH ACADEMY
INSTITUTION FOR

- * Promotion of Research Oriented Studies in Veda, Vedanga, Agama, Jyoutisha, Vedanta, Yoga and Ayurveda.
- * Study of Sanskrit language in particular and other related languages.
- * Propagation of Vedic Phonetics
- * Establishment of Veda Patashalas in Guru Kula system
- * Running of Oriental Libraries (Prachya Granthalaya)
- * Collection, Preservation and Publication of Old Manuscripts.

INTRODUCTION

Among the medical systems of the world, Ayurveda is probably the only system that focuses attention on the whole health, bodily, mental, moral and spiritual. It is in every sense of the word holistic. The principles of svastha-vrtta, sad-vrtta and rtu-charya are unique aspects of this system. The present volume included in the Bharatiya-Sanskriti-Sarvasva-Kosha, deals with fundamental issues tackled in this system.

I am indebted to Sri Daivajna K.N. Somayaji, Director and Chief Editor of Kalpatharu Research Academy for including this compilation in the Bharatiya-Sanskriti-Sarvasva-Kosha series of the Academy's publications.

I am also indebted to Jagadguru His Holiness Sri Sri Sri Bharathi Theertha Mahaswamiji of Sri Sringeri Sharada Peetham and the chief patron of the Academy, the Administrator of the Peetham Sri V.R. Gowrishankar the Chairman of the Academy.

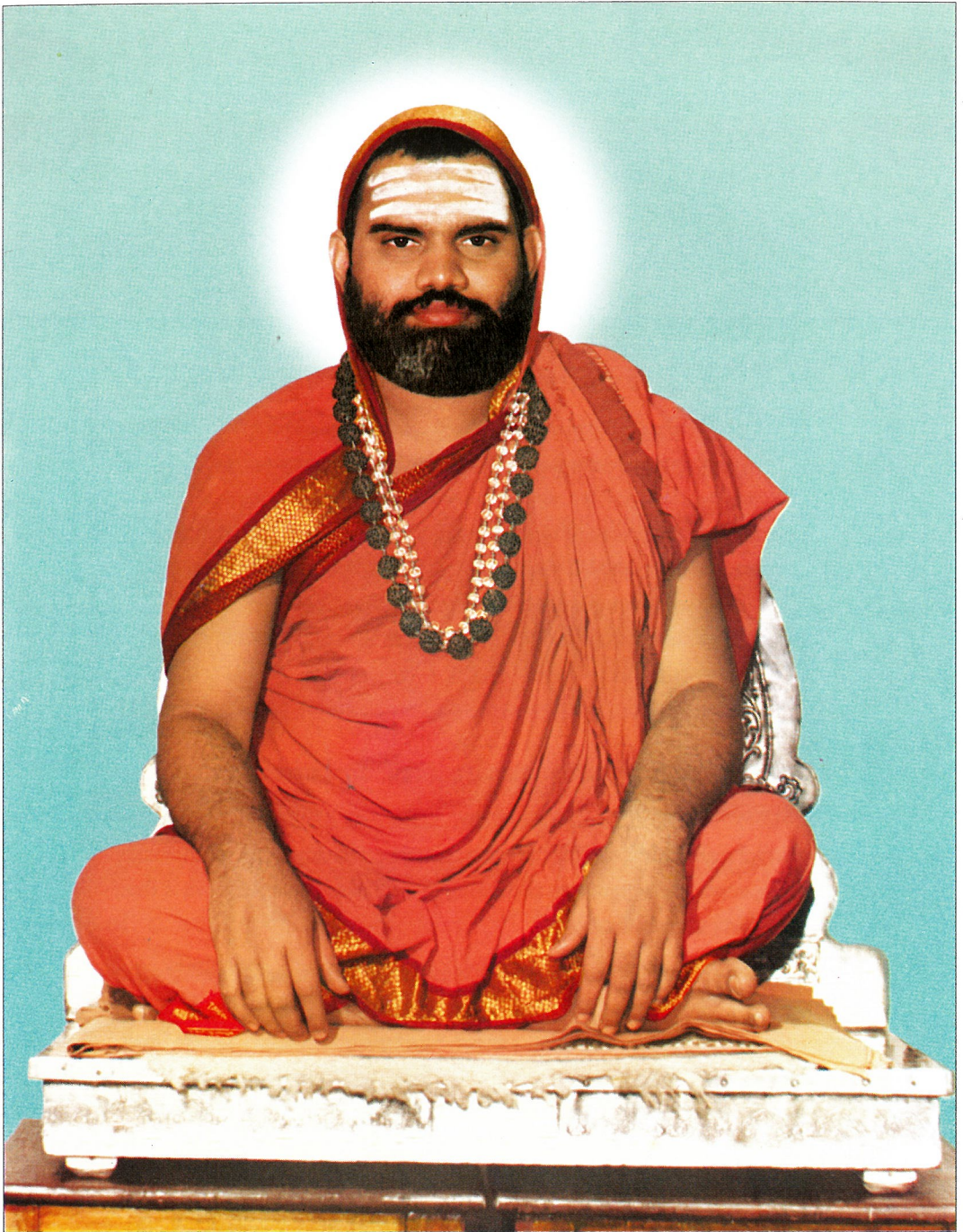
Also I am indebted to my young friend and student Shri Shankar for having kindly helped me with correction of proofs.

The printers have done a good job in producing this volume, and I thank them.

S.K. RAMACHANDRA RAO



नमस्ते जगदेक मातः
 मालासुधाकुम्भविबोधमुद्रा
 विद्याविराजत्करवारिजाताम्।
 अपारकारुण्यसुधाम्बुराशिं
 श्रीरागगाम्बां पणतोस्मि नित्यम्।



H.H. Sri Sri BHARATI THEERTA MAHASWAMIJI

HUMBLE DEDICATION TO OUR CHIEF PATRON

भारतीकरुणापात्रं
भारतीपदभूषणम् ।
भारतीपदमारूढं
भारतीतीर्थाश्रमम् ॥



॥ श्री शृङ्गेरी श्रीजगद्गुरुमहासंस्थानम् ॥

श्रीमत्परमहंसपरिव्राजकाचार्यवर्य पदवाक्यप्रमाणपारावारपारीण
यमनियमासनप्रणायामप्रत्याहारधारणाध्यानसमाध्यष्टायोगानुष्ठाननिष्ठ
तपश्चक्रवर्त्यनाद्यविच्छिन्न श्रीशङ्कराचार्यगुरुपरम्पराप्राप्त षड्दर्शनस्थापनाचार्य
व्याख्यानसिंहासनाधीश्वर सकलनिगमागमसारहृदय सांख्यत्रयप्रतिपादक वैदिकमार्गप्रवर्तक
सर्वतन्त्रस्वतन्त्रादिराजधानी विद्यानगरमहाराजधानी कर्णाटकसिंहासनप्रतिष्ठापनाचार्य
श्रीमद्राजाधिराजगुरुभूमण्डलाचार्य ऋष्यशृङ्गपुरवराधीश्वर तुङ्गभद्रातीरवासि
श्रीमद्विद्याशङ्करपादपद्माराधक श्रीजगद्गुरु श्रीमदभिनवविद्यातीर्थस्वामिगुरुकरकमलसञ्जात

॥ श्री जगद्गुरु शृङ्गेरी श्रीमद्भारतीतीर्थमहास्वामिभिः ॥

अस्मदत्यन्तप्रियशिष्य श्री नरसिंह सोमयाजि विषये नारायणस्मरणपूर्वकं विरचितं
आशिषस्समुल्लसन्तु ।

वैदिकान्ववाये लब्धजनिर्भवान् ज्योतिर्विद्यामभ्यस्य तद्द्वारा बहून् जनान् उपकुर्वन्नास्ते । वेदागमशास्त्रेषु
भूयसीं श्रद्धामावहन् तत्प्रचाराय कल्पतरु संशोधनप्रतिष्ठानं नाम्नीं संस्थां प्रत्यस्थापयत् । सा च संस्था
विशिष्टान् ग्रन्थान् प्रकाशयन्ती वरीवर्ति ।

शृंगगिरि जगद्गुरु महासंस्थाने पारम्परिकीं भक्तिमास्थितवतो भवतो मनसि संस्थामेनां शृंगगिरि मठीयां
विधातुं सङ्कल्पः उदभूदिति विज्ञाय मोदामहे । अत एव अदसीयानि प्रकाशनानि इतः परं मठीयत्वेनैव
प्रकाशयिष्यन्त इत्यपि भवान् निरचिनोत् । दुर्लभाः भारतीयसंस्कृतिप्रबोधकाः विशिष्टाः ग्रन्थाः
संस्थायानया प्रकाशयन्तां तेन च भवदीयो मनोरथः फलेग्रहिर्भूयात् श्रीशारदाचन्द्रमौलीश्वरयोरनुकम्पया
भवान् इतोधिकं श्रेयः परम्पराभिः समभिवर्धतामिति चाशास्महे ।

शृङ्गगिरिः

ईश्वर भाद्रपदशुद्धदशमी भार्गववासरः

12.9.1997

इति नारायणस्मरणम्

THE CONCEPTION OF NADI AND ITS EXAMINATION

Meaning tubular stalk or flute (from naḍa, hollow reed which grows in the rainy season). the word nāḍī, is as old as the Vedic literature (e.g. RV 10, 135,7; AV. 6, 138, 4) used in the sense of a conduit, duct, vein or artery in the human body. It is often used synonymously with dhamanī (RV 2, 11, 8 ; AV 1,17,3 and 4), sirā (or hirā, although a distinction is sometimes made, as e.g. AV 7,35,2 hundred dhamanīs and a thousand hirās') and snāva ('tendons', AV 9,8,11 and 12;12,5,69). The diminutive form, nāḍika, is also used (e.g. AV 5,18,8).

In the Vedic context, the nāḍī means conduits in the sense of spermatic ducts and cordons (AV, 6, 138,4). One of the Upanishads (Katha, 6,16) speaks of a hundred and one nāḍīs of heart, and another (Prasna, 3,6) of the hundred nāḍīs of the heart with their thousand branches. This idea developed in due course into an elaborate doctrine of nāḍī organization in the human body (nāḍīchakra). There are references to this in several purāṇas, (e.g. Padma, Brahma-vaivarta, Kalia), Upanishads (Prašnopanishad, Kshurikopanishad, etc.) and tantras (Kuṇḍalinī-tantra, Rudra-yamala etc). There seem to have been other texts by authors like Agneya, Yājñavalka, Dattātreyā and Gautama dealing with this doctrine, for Kṛpāla-misra's Nāḍīprabodhana cites from them; Kanāda's Nāḍī-vijñāna mentions Gautameya and Vasishṭa.

However, the present meaning of pulse, amenable to examination and helpful in diagnosis and prognosis, is absent from the Vedic and early religious literature. The concept of *nāḍi-parīksā* (pulse examination) is likewise absent from the classical texts of Indian medicine (CS, SS, KS, BS, AS. AHr, MN), although there are references in CS (*indriya-sthāna*, 3, ‘*satatam spanda-mānānām śarīra-deśānām stambhah*’) SS (*Śārīra-sthāna*, 28,32), AHr, (*Śārīra-sthāna*, 5, “*hrasvam cha yat prasirsihi vyāviddham spandatau bhr̥śam*”) which suggest that these authors were acquainted with the doctrine of *nāḍi*. Its first occurrence appears to be in SaS (*pūrva-khaṇḍa*, 3, 1-11), about the thirteenth century. It is also mentioned in BP, (1,7,11-22), BYT, YR, Dhanvantari’s *Sarva-roga-nidāna*. and *Gada-samjivinī*. There are about 50 works dealing exclusively with this topic (e.g. Kanāda’s *Nāḍivijñāna*, Rāvana’s *Nāḍi-vijñāda*, Śankara-sena’s *Nāḍi-prakāśa*, Raghunatha-prasāda’s *Nāḍi-jñāna-taraṅginī*, and several anonymous works like *Nāḍi-jñāna-tantra*. *Nāḍi-darpana*, *Nāḍi-nidāna* and *Nāḍi-parikṣtha*. In the course of time, pulse-examination became very popular not only as a variety of examination by touch (*sparsa-parīkṣha*) but as a valuable aid for discovering the errant condition of *doṣas*.

Pulse examination was regarded as an indispensable aid for the physician to ascertain the nature and severity of diseases, “Like the study of scriptures without understanding, like food without salt, like a woman who has been widowed, the physician would be without a knowledge of pulse - examination” (ND, 3.3):

बोधहीनं यथा शास्त्रं भोजनं लवणं विना ।

पतिना यथा नारी तथा नाडीं विनाभिषक् ॥

“The physician who attempts to practice without a knowledge of pulse examination would not be prosperous, would not do the right thing, and could not obtain celebrity” (NP, 2, 41):

नाडीज्ञानं विना यो चिकित्सां कुरुते भिषक् ।
स नैव लभते लक्ष्मीं न च धर्मं नैव यशः ॥

Pulse examination was given primacy among diagnostic aids in all diseases: the pulse, tongue, eyes, urine and blood were sought to be examined in that order (ND.3,3):

आदौ सर्वेषु रोगेषु नाडी जिह्वाग्रनेत्रकम् ।
मूत्रार्तवं परीक्षेत पश्चाद्रोगं चिकित्सयेत् ॥

Even as the strings of a lute articulate all the melody-moulds, the nāḍī of the hands can reveal all the diseases (ibid).

यथा वीणागता तन्त्री सर्वान् रागान्प्रभासते
तथा हस्तगता नाडी सर्वान् रोगान्प्रकाशते ॥

There are said to be three and a half-crores of nāḍīs, gross and subtle, in the human body, all rooted in the region of the umbilicus and spreading upward, downward, and across. Among them 72,000 are gross, and carry the properties of the five sense-functions. The subtle ones (called sirā, in SS, Śārīra. 7,3) are 700 in number, and they carry uninterruptedly the ‘food-juice’ (anna-rasa). Prompted by the bodily wind to spread in all parts, and satiate the entire body, ‘like a hundred rivers that flow into the sea’: they pervade the body from head to foot, and are covered by the skin even as the mṛdaṅga (a percussion instrument) is. Not all of them, however,

are visible; only 24 are, and among them one alone (which extends to hands and feet) can be examined (cf. SKD Toḍala-tantra, 8). It is directly related to the heart and therefore the condition of the entire body is reflected in it. In men, this nāḍī is to the right, and in women to the left. Its condition is perceptible on the wrist of the right hand of men, and of the left hand of women. It is also perceptible in the foot; but in practice the wrist is to be preferred.

The pulse for examination is to be found in the wrist immediately below the thumb. This pulse (nāḍī, dhamani) is described as the witness of the life-process in the body (jīvasākshiṇī), and as the evidence of happiness or misery within the body. When the physician presses against this pulse with his three fingers of the right hand (the fore-finger, the middle finger and the ringfinger), he can feel by the first finger, movement that is diagonal in the part of the pulse that resembles a barley - seed. This portion of the nāḍī indicates the condition of vāta. He can feel by the second finger the movement that is quick and constant but in one point. This portion of the pulse indicates the condition of pitta ('fire' in the body). He can feel by his third finger movement that is oblique (horizontal) but slow and almost non-existent. This indicates the condition of kapha. The physician must press the pulse three times with his three fingers and release it, before he begins to feel exactly the condition of the three dosas. During examination, however, he must first discern pitta (with his middle finger), then vāta (with his fore-finger) and finally kapha (with his ring-finger) (GOML, Madras, vol 23, No. 13086).

The three doṣas are perceived in the pulse as transverse movement (vāta, like the movement of wind), unsteady (pitta, like the flames of the

fire), and steady (kapha, like the settling water). When vāta is aggravated, the pulse at the point appropriate to this dosa, is perceived like the moving serpent or crawling leech. When pitta is aggravated, movement in the pulse appears like the flight of a crow or sparrow, or like the hopping of a frog. When kapha is aggravated, movement in the pulse is similar to the measured strutting of a peacock or the floating of a swan on water. When two dosas are together aggravated, the movement in the pulse is sometimes slow, sometimes fast. When all three dosas are troubled (sāmnipāta), the movement in the pulse is extremely erratic, sometimes very slow, sometimes very fast, resembling the flight of a quail (lāvaka) or a partridge (tittirī). The physician will understand by pulse-examination whether the disease is hard to cure (kṛcchrasādhya) or impossible to cure (asādhya). The doṣa that strays from its position on the pulse (sthāna-vicyuta), the pulse that stops every now and then, the pulse that is extremely sluggish, and the pulse that is cold to touch indicate approaching death (Nāḍīprakāśa, SKD).

The examination of the pulse was introduced into Greek medicine as early as 320 B.C. by Pnaxagoras of Cos. Herophilus is said to have evolved a system of counting the pulse by a water-clock. Pneumatists evolved an elaborate pulse lore. And it entered the field of Arabic medicine, and thence into the Yunāni system. Chinese medicine had an ancient literature concerning pulse-examination. It cannot be ascertained with any degree of certainty when or how pulse-examination was introduced into Indian medicine. But its popularity during the middle ages and in the recent past is beyond doubt. It is likely that the 'Nāḍī-chakra' doctrine of the Yoga-Tantra complex provided the back-drop for the 'nāḍī-pariksha' method.

Examination of the pulse (nāḍī, principally the radial artery) is included in the eight-fold examination (aṣṭa-sthāna parikṣa) which gained currency

during the middle ages. However it is different from the pulse examination in European medical practice, where the pulse (usually the radial artery running superficially at the wrist, and rarely also the carotid artery behind the knee and the posterior tibial artery at the ankle) is felt for rate, rhythm, volume and character, and give an idea about the condition of the circulatory system, especially the condition of the heart. Pulse in this practice is little more than the change of pressure within the artery that occurs with each heart-beat. The pulse indicates its rate or rhythm, the size and condition of the arterial wall or the volume of blood that flows through the artery, or the force with which the blood flows. But pulse in Indian medical practice is the “witness of the living processes” (Jiva-sākṣiṇī), and its examination helps the physician ascertain not only the totality of all the vital functions of the patient’s body (including mind) at the time of examination but also its trends in future.

The assumption is that the nāḍī pulsates characteristically differently under the influence one, two or all three of the doshas (vāta, pitta and kapha). The ascertainment of these differences is of great value in diagnosis as well as prognosis. The sum total of whole impression that the physician acquires, through the degrees of abnormality that exists in the vitiation of vāta, pitta and kapha helps the physician to estimate the prognosis. The investigation is used chiefly to ascertain the deranged doṣa or doṣas to the extent to which they are respectively deranged, and also to forebode any complications or impending death.

When the pulse is examined, it involves the physical examination of the artery; but it is not merely a mechanical counting of the pulse rate. It

is an art as well as a science. “Even as the strings of a lute illumines all the melody modes, the radial artery (hastagatā nāḍī) shows up all the diseases (in the body)” (Nāḍī-darpaṇa). To become proficient in pulse examination, incessant practice is important; but more important is the trance-like concentration (samādhi) which the physician is capable of while examining the patient, for it is only by such concentration he can enter, with the aid of the lamp of wisdom (‘jnana-buddhi-pradipena’), into the very inside of the patient (‘viśati āturasya antar ātmānam’) (CS, vimāna, 5,12). The expertise is obtained by the grace of a competent teacher.

The examination as it was standardized in India involved the ascertainment of the size or volume of the pulse (determined by the condition of kapha), frequency or rapidity of the pulse (indicated by the condition of pitta), and the rhythm or regularity of the pulse (determined by the condition of vāta). The purpose is to know the prevalence of a particular doṣa or a combination of two or all three doṣas. The articulations of the pulse under the influence of such prevalence are likened to the creeping movement of a leech or a snake (in vāta prevalence), to the leaping movement of a frog, crow or a sparrow (in pitta prevalence), and to the steady movement of a swan, a peacock, or a pigeon (in kapha prevalence) (SaS, 1, 3, 1). The movements may be characteristically isolated (when doṣas vitiated are severally responsible for the diseases) or may occur in combinations of two (like vāta-pitta, vāta-kapha and pitta-kapha) or of all three (saṁnipāta).

When the pulse articulates now emulating the movement of the snake, and then that of the frog, the indication is that both vāta and pitta have been

vitiated. When, however, the articulations of the pulse resemble the movements of a snake as well as a peacock then vata and kapha are vitiated. If the pulse is felt as jumping like a frog alternately with the gait of peacock, then pitta and kapha are vitiated. When all three doṣas are vitiated (the condition known as saṁnipāta), this is indicated by the alternative slowness of the pulse (manda), intermittence (śithila), crookedness (vyākula) and fickleness (chañchala). The pulsation appears, disappears and reappears frequently. At times it is very subtle and hard to be perceived, it varies time and again. The pulsation in this condition is likened to the unpredictable flutter, flight and immobility of a partridge (tittiri) or a quail (lāvaka) (SaS. 1, 3, 3), or to the movements of a rodent caught in a heap of fire-wood (*Lolimbaraja*).

The examination of the pulse is done for the length of time the pulse takes to beat thirty times, or longer, if required. Usually it is repeated twice (viz., three counts in all). But in between the counts, the physician withdraws completely his hand from the patient's wrist.

Both the patient and the physician must be comfortably seated while the pulse is being examined, and must be free from worry, fear, stress, and bodily urges. The patient's hand must be free, not too far nor too near the physician, slightly flexed at the forearm. The physician with his left hand massages the hand of the patient slightly and holds it lightly; and then places gently the three fingers of his right hand; the fore-finger is placed nearest the thumb, and the other two fingers next to it in order.

The best time for pulse-examination is said to be early in the morning. The articulations of the pulse characteristically differ during the course of

the day, for in the early hours of the morning kapha prevails, around noon time pitta. and in the evening vata; and in the early parts of night kapha, around midnight pitta, and last part of the night vata. Seasons also play an important role in altering the pulse-examination. The pulse articulations also vary in accordance with the patient's bodily condition (hunger, thirst, sleep, exertion, food in the body and stage of digestion, posture etc), mental state (excitement, anger, sorrow, joy, etc) and environmental conditions (exposure to sun, heat, cold breeze, strong smells etc).

Pulse examination is not indicated in certain conditions of the physician inebriation, suppression of natural urges and extreme distraction; or if the physician is greedy or sexually excited (NP, 2,41):

पीतमद्य चञ्चलात्मा मलमूत्रादि वेगयुक् ।

नाडीज्ञानेऽसमर्थः स्याल्लोभाक्रान्तश्च कामुकः ॥

Pulse examination is a difficult art, and presupposes not only long, and assiduous practice but insight into the normal human constitution as well as pathogenesis. Scriptural study alone would not be sufficient; guidance of an expert teacher is indispensable. Likewise constant practice is of paramount importance; and one must indeed be lucky to become adept in it:

परीक्षणीया सततं नाडीनां गतयः पृथक् ।

न चाध्ययन मात्रेण नाडीज्ञानं भवेदिह ॥

न शास्त्र विज्ञानादपि न बहुश्रुतकारणात् ।

नाडीज्ञाने मनुष्याणां अभ्यासकारणं परम् ॥

सद्गुरूपदेशाच्च देवतानां प्रसादतः ।

नाडीपरिचयः सम्यक् प्रायः पुण्येन जायते ॥

The physician who is wise and disciplined in personal life, must examine the pulse only when he is in a state of perfect composure ('ekachittah praśāntātmā') for otherwise, the pulse will not reveal the details:

नाडीगतिं मिमां ज्ञातुं योगाभ्यासवदेकतः ।

शक्यते नान्यथा वैद्य उपायैः कोटिशैरपि ॥

Its especial value consists in helping diagnose the disease of patients who cannot communicate (dumb folk, patients with paralysed speech, patients who have lost consciousness, patients who are 'possessed' and talk irrelevantly, etc). Amidst the welter of confusing symptoms, the pulse can provide an accurate picture of the diseased condition of the body 'like objects being illumined by a lamp'. It tells the physician the condition of the three doṣas (vāta, pitta and kapha), severally (vyasta), in pairs (dvandva or yugalīkṛta) and collectively (samasta, or saṁnipāta). It also suggests to him the ease or difficulty with which treatment could be effected, or whether the disease is altogether incurable ('sādhyāsādhyā - viveka').

Abbreviations Used

AHr	:	Ashtāṅga	-	hṛdaya
AS	:	Ashtāṅga	-	Samgraha
AV	:	Atharva	-	veda
BP	:	Bhāva	-	prakāśa
BS	:	Bhela	-	Samhitā
ByT	:	Bṛhad	-	yoga - tarāṅgiṇī

CS	:	Charaka	-	samhitā
GOML	:	Govt. Oriental Manuscripts Library		
KS	:	Kāśyapa	-	samhitā
MN	:	Mādhava	-	nidāna
ND	:	Nāḍi	-	darpaṇa
NP	:	Nāḍi	-	prakāśa
SaS	:	Sārṅgadhara	-	samhitā
SKD	:	Śabda	-	kalapa - druma
SS	:	Suśruta	-	samhitā
YR	:	Yoga	-	ratnākara

TIBETAN MEDICINE

Indianization of Tibet began around 620 A.D., when the Tibetan emperor Srongbehan sgam Po(620-649) sent the Tibetan scholar Thon-mi Sam - bhota to Kashmir to evolve a suitable script for the Tibetan language. Even before this time, an earlier emperor (gNah-Khri-behan-Po) had invited two physicians from India to visit Tibet. Both of them stayed in Tibet for over ten years, during which time Indian medicine (viz Āyurveda) took root in the Himalayan region. One of the Indian physicians married a Tibetan woman, and their son became a famous physician. Medical wisdom was being orally transmitted until Sam-bhota developed the art of writing in Tibet.

The next great event in Tibet was the arrival of Śānta - rakshita and Padma-sambhava (both paṇḍits of Nālandā), invited by the celebrated emperor Khri-gehang-Ide-byan(755-780). It was under their influence that Indian Buddhism took firm root in Tibet and the adjoining areas. They founded the monastery at bSam-yas on the model of the Indian Odantapuri-vihāra and combining three styles of architecture, Indian, Tibetan and Chinese. The monastery, founded some time between 763 and 767 A.D. (according to the Blue Annals) served as the focal point of Tibetan culture for centuries to come.

It should be mentioned that Buddhism and medicine were closely associated all along. The Pāli text *Itivuttaka* describes the Buddha as the physician (*bhīṣak*) and as the surgeon (*salla-kattā*). The epic poem *Buddha-charita* of Aśvaghoṣha calls the master Mahā-bhīṣak. There is a form of

the Buddha in later Buddhism, known as 'Bhaiṣajya guru', which became popular in China, Japan and Central Asia. The Śākyan ascetic appeared as the 'sovereign-healer' in his sambhoga-kaya, holding a fruit of the myrobolan in his right hand, to offer protection from all ailments, and holding in his left hand a bowl containing three kinds of ambrosia (amṛta), to cure diseases, to counteract ageing and to facilitate meditation and enlightenment. There were also many deities within the context of folk Buddhism, which were specially associated with healing. *Simha-nāda Avalokiteśvara*, for instance, was the sovereign healer of all ailments. *Arya-Tārā* was the healer of leprosy; *Parṇa-śabarī* was worshipped to counteract fever and to ward off small pox and other epidemics; *Jāṅgulī* provided the antidote for all poisons, especially of snakes and scorpions.

The association between Buddhism and medicine is not unwarranted. The gospel of the Buddha recognizes the phenomenon of suffering and seeks to unravel the aetiology thereof, to understand the state of utter elimination of all suffering, and to prescribe the methodology favourable to such elimination. This procedure involving four steps (which also is to be found in the Sāṃkhya-Yoga schools of thought) is compared to the four-fold approach of the physician: recognition of the ailment, diagnosis, visualization of health and prescription of therapy. In the general context of phenomenal suffering, bodily and mental diseases naturally got included and in texts like *Bhaiṣajya-vastu*, the Buddha is made not only to speak in medical terminology but to suggest actually curative procedures.

It is well-known that the celebrated physician Jīvaka who was the personal physician to the King Bimbisāra of Rājagṛha and who became celebrated for his operations like craniotomy and laparotomy and was skilled in curing diseases like jaundice and fistula in-ano was also a friend and

physician to the Buddha. A contemporary of his, Ākāsa-gotra was reputed as a surgeon. During the early centuries of the Christian era, the name of Nāgārjuna, the great Buddhist saint, scholar and mystic is also associated with medicine, especially with the system which makes use of minerals and precious stones for therapeutic ends.

The influence of Buddhism even on Āyurveda is not in considerable. It is possible to find numerous references in Charaka-samhita to Buddhist ideas and principles. The redaction of *Suśruta-samhitā* is ascribed to Nāgārjuna himself. Recipes like 'Śirhanāda-guggulu', 'Tārā-mañḍūra', 'Nāgārjuna-bhasma' and so on have unmistakable Buddhist associations. The Buddhist mendicants who travelled extensively in the Himalayan regions and in Central Asia were responsible for the spread of Indian medicine in those regions (as is evident from the famous Bowers Mss).

Vāgbhaṭa (latter half of 4th cent.), the greatest name in Indian medicine after Charaka and Suśruta, was himself a Buddhist. Belonging to the Sindhu country, he was the son of Simha-gupta and student of Avalokita. His two works, *Aṣṭāṅga-hṛdaya* contain many references to the Buddha and the Buddhist deities (like Avalokiteśvara, Tārā, Mañibhadra, and Jinasuta). His acquaintance with Mahāyāna folk cults was intimate, and probably that is how his celebrity spread in the Himālayan regions. Tibetan medicine was greatly influenced by Vāgbhaṭa's works, especially as interpreted by the Buddhist savant Chandranandana (author of *Vaidyāṣṭāṅga-hṛdaya-vṛtti*). Vāgbhaṭa is known to Tibetans as Pha-Gol, and his works are included in the bsTan-hGyur division of the Canon. Besides Chandranandana's *Vivṛti* on Vāgbhaṭa's *Aṣṭāṅga-hṛdaya* (*Padārtha-candrikā?*). Vāgbhaṭa's own commentary on *Aṣṭāṅga-hṛdaya*, known as

Vaidūryaka-bhāṣya(which is not available in the original Sanskrit) has been preserved in the Tibetan translation.

The steady stream of Indian scholars and teachers into Tibet, and of Tibetan scholars and students into India, since the days of the emperor Srong-Ide-bTsan (755-780) made it possible for the Indian concepts of health, diseases, cures and methods of treatment to become a part of Tibetan culture. It was during this emperor's reign, and it was by his persistent efforts, that the great Indian saint Vimāla-mitra visited Tibet and trained a number of translators (Lo-tsa-ba) who rendered Sanskrit works into Tibetan. One of his trainees was the Tibetan youth Vairochana-rakshita (reputed to be a student of Padmasambhava himself) who was prolific in his translation work, and included many medical texts its scope. He visited India to study the famous text of Vāgbhaṭa under the Buddhist medical authority Chandranandana of Kashmīr, mentioned above.

In the Court of this emperor (Khri-Srong-Ide-bTsan) was a Tibetan physician who achieved great celebrity by his wisdom and competence. Naned gYu-THog-pa Yon-Tan-mGon-po rÑing-Ma, He visited India three times to study the medical theory and practice here, and he wrote many medical works, including a book on diagnosis by pulse. This physician convened a medical conference in bSam-Yas monastery in the year 794 A.D., and eminent physicians from Tibet, India, Nepal, Persia, Afghanistan, Sikiang and China participated in the deliberations, discussing theoretical issues and practical problems concerning health and disease. This fact made Tibetan medicine broad-based and open to other influences, although its core continued to be Ayurveda.

2

The official translators working at the great bSam-Yas monastery rendered many medical texts, long and short, from Sanskrit into Tibetan; about twenty of them have been included in the bsTan-gyur collection of the Canon. And in many cases, the Sanskrit originals have been lost in India, but their Tibetan versions have been preserved. One such was a work known in Sanskrit as '*Amṛta-aṣṭāṅga-guhyopadeśa-tantra*' ("The treatise containing secret instructions regarding the eight branches of essential immortality viz. health"), translated by Vairochana-rakshita himself, 'the prince of translators'. This work, familiar by its short title rGyud-bzi (Chatush-tantra in Sanskrit, 'Four Treatises') has all along been held in great and universal regard by the Tibetan physicians; and has been regarded as the sourcebook of Tibetan medicine. Of the seventy odd medical texts that the Tibetan physicians generally consult, this is the most authoritative and fundamental. There are numerous annotations and notes on this work in Tibetan, like *Bai-Dūrya-sñon-Po* by Saṅgs-rGyas-mTse (composed earlier than 1700 A.D.), and lHan-Thabs (annotating only the third part of rGyud-bzi) by the same author. These two annotations together with the main text of rGyud-bzi are held as three most important texts by Tibetan physicians.

It is usual for the Tibetan physicians to carry this book with them when they are itinerant, and get oral explanations from competent masters. The formal training of a physician in Tibet takes as many as ten years, and often more, during which period the main book for study is rGyud-bzi.

While the contents of rGyud-bzi leave no doubt that it is based entirely on the Saṁhitās of Charaka, Suśruta and Vāgbhaṭa, the form in which the

Tibetan text is composed is rather unique. It is divided into four parts, each part being called a 'tantra' or treatise: the first is rTsa-bahi-rGyud (in Skt, mūla-tantra 'root treatise') in six chapters, the second bSad-pahi-rGyud (in skt. ākhyātā-tantra, 'explanatory treatise') in 31 chapters; the third Man-Ñag-gi-rGyud (in Skt. upadeśa-tantra, 'treatise of instructions') in 92 chapters, and finally PHyi - Mahi - rGyud (uttara - tantra, 'final treatise') in 27 chapters. The first part mentions the eight branches of medicine, corresponding exactly to the ashtāṅga-āyurveda, except for the branch dealing with diseases of women, which in the Tibetan text is substituted for minor surgery (śālākya) in Āyurveda (which is included under treatment of wounds or śalya in Tibetan).

It is difficult to ascertain which was the original text in Sanskrit of which this rGyud-bzi is a Tibetan version. It bears little resemblance to any of the texts that are now in vogue in the country. But it is recorded, as has already been mentioned, that the Tibetan translator Vairochana-rakṣita visited India in order to study Vāgbhata's Ashtāṅga-hṛdaya-saṁhitā tradition under the celebrated authority Chandranandana-panḍita of Kashmir who had also written a gloss (Vṛtti) on this text known as Chandrika or Padārtha-candrika. It is known that Vāgbhata, who belonged to the Sind region, had become popular in the North Western regions of the country and the adjoining Himālayan tracts before the seventh century A.D. I-tsing, the Chinese traveller, makes an obvious reference to his celebrity. But rGyued-bzi does not conform to the scheme adopted either in the Hṛdaya or in Saṁgraha. And there is a distinct work entitled in Sanskrit *Vaidyāshṭāṅga-hṛdaya-vṛtti*, which is an exact rendering in Tibetan of Vāgbhata's *Ashtāṅga-hṛdaya-Saṁhitā*, included in bsTan-hGyur, this translation has been done by Rin-chen bZang-po (between 1013-1055 A.D.)

3

Before I proceed to give a brief description of rGyubzi, let me remind you that Tibetan medicine is entirely Ayurveda in its origination, approach, assumptions, diagnostic methods, prognosis, pharmacy, treatment procedures, and materia medica. The theory that all substances, all physical and mental constitutions, all ailments and all curative processes, are pāñcha-bhautika in character (viz. composed of earth, water, fire, air and ākāśa elements), the assumption that the patient's constitution, health and disease are determined by the tri-doṣa (vāta, pitta and kapha) are common to Āyurveda and Tibetan medicine. The Indian tradition that the science of medicine was handed down from Brahma to Prajāpati, from Prajāpati to the Aśvins and from the Aśvins to Indra has been accepted in Tibet, with a slight amendment that it was Buddha-Kāśyapa who taught Brahma this art and science. Vāgbhaṭa's Ashtāṅga-saṁgraha mentions merely that Brahmā learnt this immortal art along with the import 'Āyurvedāmṛtam Sārtham Brahma Buddhvā Sanātanam' not however spelling out from whom. Tibetan tradition fills this gap.

It recognizes the father of Indian medicine, Ātreya, as the teacher of Dhanvantari (Thang-la bar), and the lineage continues with Dka-'gnis Spryod, Mu-khyud'dzin, gshol-'gro skyed, Me-bzin-jug(Agniveśa), Lug-rig(Kṛṣṇa-mesha?), and rGya-sKegs-sna. These are Tibetan names of Indian medical authorities, but it is difficult to identify them except for Dhanvantari and Agniveśa. The medical works of all these authorities are clubbed together under the title *Rtsa-ra-kasde* (viz. Charaka aṣṭa-varga). The Samhitās of Charaka, Suśruta and Vāgbhaṭa (the so-called 'Vṛddha-trayi') have been rendered into Tibetan and accorded a prestigious position in the canonical literature, *bsTan-hGyur*.

Likewise, several other useful and authentic works in Sankrit have entered into this collection, like Nāgārjuna's *Yogaśataka*, and *Vaidya-Jīva-sūtra*. Thus the framework of Classical Āyurveda has been entirely adopted. Working concepts of Ayurveda like pañca-bhūta, tri-dosha, sapta-dhātu, malatraya, śodhana, śamana, pañca-karma, nidāna, dina-charyā, ṛtu-charyā and svastha-vṛtta have constituted the main features of Tibetan medicine also.

But, as mentioned earlier, the bSam-yas Medical conference (around 974 A.D.) represented a confluence of several medical traditions, and the Tibetan leader of the conference had visited India thrice to learn about Āyurveda. Among the many medical books that he wrote, however, one dealt with diagnosis of diseases by reading the pulse (*mÑNon-Śes-gNad kyi hPhrul hK Har*). It is uncertain if he could have picked up this diagnostic and prognostic aid in India; probably he did not. We do not find references to this detail in any of the classical texts of Āyurveda; the mention of nāḍi-parīkṣā occurs for the first time in *Śārṅgadhara-samhitā*, a work of the 14th Century. Tibetans were acquainted with this art, and had perfected it long before this time. It is likely that the Chinese medical tradition provided them with the preliminary motivation; and pulse-reading constitutes an important detail in Tibetan medicine right from the days of the bSam-Yas Conference. In fact, it forms a major section in *rGyud-bzi*, which had become celebrated even by the time the Conference at bSam-Yas was convened.

The *rGyud-bzi*, or the 'four-fold Tantra' in 156 chapters and 5900 stanzas, is in the form of a dialogue between two sages; Yid-las-SKyes seeks to be enlightened about the art of medicine and Rig-pahi Ye-Śes explains it as he had heard it from the Buddha himself appearing as sMan-

pahi-rGyal-po (Bhaiṣajya-guru). The Tantra begins with a description of the charming 'realm of medicinal treasures', which cure 404 diseases of man. It goes on to enumerate eight branches of medicine, all of which are discussed both concisely and comprehensively in the four treatises of the Tantra.

The eight branches are: (1) treatment of diseases of the adult body (Lus); (2) diseases of children (bYis-pa); (3) diseases of women (Mo Nad); (4) diseases caused by evil spirits, occult influences etc. (gDon) viz. nervous and mental ailments; (5) diseases caused by spears etc. (inchon). viz. wounds and other bodily afflictions needing surgical intervention; (6) diseases caused by poisons (Dug); (7) diseases caused by senile degeneration or ageing (rGas); and (8) diseases needing rejuvenation and sexual invigoration (Ro-Cha-Pa). One can see that these eight branches correspond exactly with our kāya-chikitsā, Kaumāra-bhṛtya. Strī-roga(not, however, enumerated separately in the aṣṭāṅga; instead we have śālākya or ūrdhva - jatru - roga-chikitsā here), bhūta - vidya, śalya, agada-tantra, rasāyana and vājīkarana.

Then the text goes on to describe health and define disease. We find here the usual Āyurveda ideas of foetal formation, foetal development, anatomical structure, physiological processes, differential diagnostics, prescription and preparation of medicines, methods of treatment, behavioural therapy and the physician's moral responsibilities (which are all dealt with in the second or 'explanatory' treatise); specific diseases coming under each of the eight branches, and their treatment (which form the bulk of the third or 'instructional' treatise); the forms of medicament (decoctions, powders, pills, ashes, butter, syrup etc.) and various methods of treatment (internal, like purgatives, emetics, elixirs, clysters etc. and external, like blood - letting, bath, ointment and surgery).

The arrangement of topics in the book is excellent: it is at once clear, orderly and meaningful. For instance, in the second treatise, after discussing treatment of diseases that are due to vāta, pitta and kapha severally and conjointly, fever is taken up; ordinary fever, high fever, rising fever, latent fever, hidden fever, persistent fever, spreading fever, fluctuating fever and infectious fever. In the next division of the treatise, diseases that afflict the head and the several sense-organs are dealt with in an orderly fashion. Following this, the diseases of the organs which are hollow (the two intestines, stomach, urinary bladder, uterus, seminal vesicle) and solid (heart, lungs, liver, spleen and kidney) are discussed; and then the diseases of the urogenital system in men and in women. The discussion concludes with 'minor diseases' (like loss of appetite, abnormal thirst, hiccough, colic, constipation, nausea, diarrhoea and skin diseases).

The unique feature of Tibetan medicine is its ideological structure of medical theory and practice in the image of a tree. There is a section devoted to it (Treatise I, 6) and there are oral explanations and charts based on this account, while the details of this picture are to be found also in the Āyurvedic texts, the picture itself appears to be unique to the tibetan text. We have references to the 'medicine in three divisions' (tri-skandha-āyurveda) in classical works such as Aṣṭāṅga-saṁgraha (the three aspects being cause (hetu), symptoms (līṅga), and therapy (auśadha), which undoubtedly suggest the imagery of a tree (skandha, meaning 'stem', 'trunk'). But the idea did not develop here as it did in Tibet.

If medical theory and practice together can be likened to a tree, it would have three Roots (rTsa-ba), nine trunks (sDong-po), forty-seven branches (yal-ga), and two hundred and twenty four leaves (Lo-ma). The three roots constitute the major divisions of medical theory and practice,

viz.(1) psychophysical constitution of the individual (gNas Lugs) in health and in disease; (2) diagnosis or clinical examination (Nos-hjin); and (3) therapeutics (gSo-ba). The roots are arranged in terms of primacy and importance; Root (1) is fundamental and foundational, the other two being entirely dependent upon it; Root (2) is dependent upon Root (1) but fundamental to Root (3); and Root (3) is immediately dependent upon Root (2) but ultimately supported by Root (1).

1. The most fundamental Root has two Trunks. The first of them is relevant to all individuals at all times, and is especially involved to achieve a healthy condition of body and mind ('undisturbed' Ma-hGyur, skt. avikṛta). Constituting this Trunk are three branches, the doṣas (five forms of each of the three: vāta or rLung, pitta or mKHris-pa, and kapha or Bad-kan), the dhātus (the seven body-constituents, Lus-Zungs) and the malas (Dri-ma, three: urine, faeces and sweat), having twenty five leaves in all.

The second Trunk refers to the diseased condition of the individual ('disturbed' rNam-hGyur, Skt. vikṛta). This has nine branches, and has sixty three leaves in all. Of interest and of unique significance is the Tibetan reckoning of the three phenomenological processes: 'attachment' (hDod-Chags Skt. rāga), 'aversion'(Ze-sDang, Skt. dveṣa) and 'delusion' (gTi-Mug, Skt. moha) as the three primary poisons (Dug-gSum) which are responsible for 42 and 33 diseases respectively. They together constitute the first branch of the pathological trunk, signifying the main or primary cause (rGyu) of diseases.

It may be noted here that in Tibetan culture, medicine is more intimately related to religion than in any other culture. The Tibetan physician is not merely a healer of body and mind; he is responsible for the spiritual

welfare of his patient. His office combines the normal functions of diagnosis, management and treatment of diseases, with teaching scriptural texts and performance of magical rites for the patient. Medicine and religion are thus interwoven with each other.

The job of a physician is really to help maintain the first Trunk of the first Root (viz. to maintain a balanced or undisturbed condition of health) by counteracting the second Trunk (viz. disturbed condition or disease) with the help of the other Trunks of two other Roots (viz.. diagnosis and therapy). The first Trunk is important in as much as its fruits are health and longevity, which are necessary for the three goals of life (virtue, wealth and happiness) to be accomplished.

While 'attachment', 'aversion' and 'delusions' are the primary causes of any disease, four conditions which co-operate with them to aggravate the disease are also recognized: (1) time (Dus), viz. time of the year, time of the day, age of the patient; (2) evil influences (gDon), (3) food (Zas) and (4) conduct (Spyod-pa). These are called secondary or supporting causes (rKyen) constituting the second branch.

The third branch relates to the manners in which the disease enters into the body viz. how it percolates into the body (Pags-pa) through the skin, spreads through the flesh (Sa), moves about the body along the veins (rTsa), gets established in the bones (Rus-pa), descends into the 'solid organs' (Don, heart, liver, lungs, spleen and kidneys), and finally accumulates in the 'hollow organs' (sNod, intestines, stomach, gall and urinary bladders, uterus, and seminal vesicle). These constitute the entrances of diseases (hJug sGo, Skt roga-praveśa-dvāra), which are six in number.

The fourth branch relates to how the disease gets localized and stays within the body-constitution. They are 'spheres', 'abodes', 'dwelling places', 'places of residence', 'sites' (gNas) so far as the disease is concerned. The body for this purpose is broadly divided into three parts: upper part (Stod), where the disease that originate from disorders of kapha (Bad-Kan) are localized; middle part (Bar), where the diseases that originate from disorders of pitta (mKHris-pa) are localized; and lower part (Smad), where the diseases that originate from disorders of vāta (rLuṅg) are localized.

The fifth branch comprises of the channels (Lam, Skt. srotas) or the bodily organs through which the three dhātus travel and communicate disease. They are fifteen in number in three groups of five each: sense-organs (dBang-po), 'solid' organs (Don) and 'hollow' organs (SNod).

The sixth branch refers to the three factors, each in three variations, that are attendant upon the occurrence of diseases: age of the person (Na-so, kapha in early age, pitta in middle age, and vāta in old age being mainly responsible for diseases, place of his residence (Yul, windy and cold, dry and hot, damp and sticky), and the time of the year, and the period of the day or night (Dus, summer, autumn, spring; early hours, middle hours, and late hours of day or night). These are regarded as the nine leaves of this branch.

The seventh branch relates to the impact of the diseases (severity amenability, impossibility, malignity etc.) which is felt as nine-fold. It is called 'consequence' or 'effect' (hBras-bu).

The eighth branch, called 'the factors that oppose each other (IDog) and thus become causes (rGyu) of diseases', relate to the antagonistic

positions in which each of the three doṣas arrange themselves in the diseased body. There are twelve such positions possible, and therefore they are described as the twelve leaves of this branch.

The ninth branch consists of two leaves, called 'cool' (Grang-ba, Skt. śīta or soma) and 'warm' (Tsa-ba, Skt. usṇa or āgneya), which are fundamental conditions of diseases.

Thus the second Trunk of the first Root has in all nine branches and sixty-three leaves, representing the causes, conditions, courses, varieties and effects of the pathological element in the human constitution.

2. The second Root (Diagnosis or clinical examination) refers to how the diseases are understood by the physician so as to enable him to decide on the proper line of treatment. The Trunks here are three in number: examination by sight, examination by touch, and questioning the patient.

(1) The Trunk of visual examination of the patient's condition (blTa-ba, 'to see' 'to view', Skt. darśana), involves two branches and six leaves: examining the tongue's colour, moisture and texture (three leaves), and examining the urine's colour, density and bubbles (three leaves);

(2) The examination by touch (Reg-pa, Skt. sparśana) is mainly the reading of the condition of health or ill-health by feeling the pulse or distal artery (nāḍi) at the wrist. The pulse - reading involves the understanding of the individual conditions of the three doṣas. Thus the Trunk is said to have three branches and three leaves.

(3) Questioning the patient (Dri-ba) involves the eliciting of information regarding three causative factors (Slong-rKyen), regarding the symptoms or

disease conditions (Na-Lugs), which are 23 in number, and the habits and conduct of the patient (Goms-pa) in three areas (food, drink, surrounding), thus providing this Trunk with twenty-nine leaves.

3. The third Root pertains to the lines of treatment, which are principally four-fold (thus described as having four Trunks): food (nutrition), conduct, regimen, internal medicine, and external treatment.

(1) The importance of proper food (Zas, Skt. āhāra has been recognized not only in maintaining normal health but in correcting the ailments. Prescriptions of corrective articles of food (Zas) and drink (sKom) constitute the first Trunk, and their variations in disorders of each of the three doṣas give us six branches and thirty-five leaves in all. Tibetan medicine believes that in case of any disease, the initial line of treatment must be to correct food-habits.

(2) The importance of hygienic conduct (sPyod-pa, Skt. ācāra) is likewise underlined. The prescriptions of correct conduct is relative to the state of the doṣa prevalent in the disease. Thus this Trunk has three branches, each of them having two leaves.

(3) Internal medicine (sMan) comprehends the remedial tastes (Ro, Skt. rasa) and the active properties (Nus-pa, Skt. vīrya) of the drugs to be used in the diseases caused by the three doṣas, thus contributing six branches (taste and active properties in the three doshas) and eighteen leaves (nine tastes and nine active properties); the alleviative medicines (Zi-Byed, Skt. śamana) for each of the three disorders (including three kinds of liquid drinks, five kinds of medicinal butter, four kinds of decoctions, four kinds

of powders, two kinds of pills and five kinds of paste, altogether twenty-three leaves); eliminative medicines (sByong-byed, Skt. śodhana), for the errant doṣas viz. cleansing by enema, by purgation and by vomiting. Thus there are three branches; three varieties for vāta, four for pitta and two for kapha, and thus nine leaves. Altogether this Trunk of internal medicine has fifteen branches and fifty leaves.

(4) External treatment including surgery (dPyad-pa, lit. use of instruments) appropriate to each of the three doṣas, two for vāta, three for pitta and two for kapha, thus giving us three branches and seven leaves.

While the foregoing analysis of the Tibetan classic clearly illustrates its indebtedness to the nucleus of ideas incorporated in the texts of Charaka, Suśruta and Vāgbhāta, we find in it many ideas that appear alien to the Indian texts at any rate in the form in which they appear now, as e.g. the primary causation of all diseases by the three phenomenal errors (attachment, aversion and delusion), persistent relating of all theoretical constructs, diagnostic tools and therapeutic prescriptions to the tridoṣa theory, the great importance attached to pulse-examination as a diagnostic as well as a prognostic aid, the use of urine examination, the distinction in order to arrive at the case-history of the patient, the doṣa-oriented grouping of various forms of medicine, and the theoretical constructs of śamana and śodhana. It may also be mentioned here that the simplicity of terminology, the orderliness of the arrangement of topics, and the homely metaphors that are frequently used to drive home medical constructs are the characteristic features of this work, which we miss in the Sanskrit texts that are available now.

One of the details found in this text is reading of pulse for diagnosis and prognosis, which detail, as was said earlier, is conspicuous by its absence in the early Āyurvedic texts. How the Tibetan physicians acquired it, and how it came to be so elaborately developed are uncertain. The text *rGyud-bzi*, which deals with it, was celebrated even during the bSam-yas medical conference (794 A.D.). The principal influences that stemmed from this conference were Indian, Tibetan and Chinese. If *rGud-bzi*, mentioned the value of pulse-reading, Indians must already have been conversant with the diagnostic tool. And we know for certain that the Chinese had developed it much earlier, and had made it an important equipment for a physician. The Tibetan leader who organized this medical convnrtion, gYu-Thog-pa Yon-Tan was himself an authority on pulse-reading; he has written a book on it which has become well known. The pulse-reading as developed in Greek medicine had reached Persia during the early centuries of the Christian era; and a Persian physician, Gelanos, participated in the bSam-Yas conference. It is to be expected, therefore, that the conference highlighted the diagnostic value of pulse-reading. And, during the rule of the emperor Khri-gTsang-Ide-bTsan (815-838 A.D.), the Chinese influence on Tibet was marked. This may be how this aspect of medicine assumed an enormous importance in Tibet.

Whatever the circumstances, it is a fact that Tibetan medicine holds this examination by touch as most valuable in understanding the relative conditions of the three doṣas as well as the state of each of the ten organs (five 'solid' and five 'hollow') inside the body. It provides for the physician a vivid picture of the health of the individual or the diseased condition of the body. It also enables him to foresee the course the doṣas are likely

to take in the patient's body. The method of pulse-reading that the Tibetan physicians have evolved is very elaborate, and the Tibetan physician spends as much as three years learning to master its details. This method is characteristically different both from the Chinese and the Indian methods, although the impact of both on it can readily be seen. In Tibet, it can operate like a complete, self-sufficient diagnostic method.

Although pulse can be read at different parts of the body, it is read satisfactorily only at the distal artery at the wrists of the two hands ("shouting, in summer, across an open field"), for near the vital organs, the pulse is too close to the scene of activity ("talking near a waterfall"), and at the extremities it is too far removed ("message from a distant merchant"). Pulse is best read after the night's rest, and before one gets busy with the day; "when the sun has arisen but his rays have not reached the hill-top yet". Preferably the body and mind of the patient are prepared for pulse-reading a day earlier by avoiding excess of food, physical or emotional stress, loss of sleep etc. The energies would then be sufficiently well settled to enable the *doṣas* to be articulated distinctly through the pulse. The physician who reads the pulse must likewise prepare himself. Pulse-reading is thus a transaction between the energy-dynamics of the patient and the energy-dynamics of the physician.

Three fingers (forefinger, middle finger and ring-finger) of each hand are used by the physician to read the pulses at both wrists of the patient. And the pressures of the fingers on the artery are regulated so that the forefinger 'feels the skin', the middle finger 'feels the flesh', and the ring finger 'feels the bone'. Each finger is conceptually divided into two units, the upper and the lower, and thus there are six units of the fingers in

each hand. The twelve units on both the hands are meant to provide the physician information concerning the twelve organs ('solid' and 'hollow') in the body which are relevant to all diseases.

Three are the pulses that the physician looks for to ascertain the patient's constitution: expressions 'male' and 'female' have no reference to the sex of the person. All individuals have all three pulses. The 'male' pulse appears "strong and thick", the 'female' pulse "subtle and quick", and the bodhisattva pulse "continual and smooth". These pulses not only distinguish personality characteristics but also help the physician to foresee the life-span, general state of health, strength of resistance to diseases, the nature of progeny, and transactional level of the patient. The 'bodhisattva' pulse is so named because it indicates the most desirable constitution, where all the bodily constituents are perfectly balanced, health is maximized, and mind is ready for higher attainments. It is the superior pulse, not frequently found; but it is by no means impossible for normal folk to have it. The name of the pulse does not mean that it is confined to or peculiar to the superhuman bodhisattvas.

There are other details of pulse-reading, such as 'hot' or 'cold' pulses (in accordance with the 'hot' and 'cold' diseases that the body had succumbed to), general and specific pulses (indicating disorders of all, two, or one of the doṣas), relation of the pulses to the 'hollow' and 'solid' organs inside the body, the nature of pulse when death is imminent (extreme irregularity, periodical cessation, unequal lengths, quick changes etc.) and 'collective pulse' (like 'guest', 'enemy', 'friend' etc.).

While Tibetan medicine follows in general the rational line adopted in the Indian medical texts like the Samhitās of Charaka, Suśruta and Vāgbhaṭa, it does not confine itself to the yuktivyapāśraya mode of treatment. It recognizes, more effectively than Indian medicine does, the value of supernatural influences in the curative process (daiva-vyapāśraya).

The man who falls ill is also the man who is intellectual (hence the expression Gaṅg-jag, Skt. pud-gala). There is an aspect of him that is not exhausted by the psychophysical details, and which in fact lords over the latter. There are practices in Tibetan medicine which seek to influence this aspect by such devices as prayers, incantations, rituals and contemplative practices. The use of amulets, talismans, magical pills (Ril-bu) 'wondrous medicines' (rDzas) and queer potions (Nang-mCHod) is also resorted to.

While the role of evil spirits (hDre) in the causation of diseases is accepted by the folk, the value of the pacification of the mind-body complex of the patient in all such cases is recognized by the Tibetan physician. The real 'nectar' (bDud-rTsi) is tranquillity (Zi-ba, Skt.siva, in the sense of śamana). The body should not be subjected to undue or improper exertions, and the mind should be free from excitements and anxieties. It is only then that the balance of the basic principles of the body-mind complex is restored. In order to effect this pacification in the patient, the physician attempts to transmit his own cultivated calm to him during diagnosis as well as administration of drugs. The presence and proximity of the physician (who is most often also a saintly person) have by themselves a salutary effect on the patient.

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ĀYURVEDA HAS ITS ROOTS IN THE VEDAS

The indigenous system of medicine in India known as Āyurveda has had a remarkable continuity, stretching over several thousands of years. But it has not come down to us as a monolithic structure; indeed it never was one, although the expression Āyurveda has always been in the singular.

Medicinal practices of different schools have co-existed from the earliest of times, and have developed almost independently. However, it is possible to identify collective characteristics which distinguish Indian medicine.

Tradition affiliates it to the hoary Vedic complex. Sometimes it is regarded as the fifth Veda. But it is more usual to consider it as a supplementary Veda (upaveda). According to *Mahabharata* (2, 11, 33 spelt out by the commentator Nilakanṭha) it is one of the four upavedas, others being archery (dhanurveda), musicology (gandharva) and political science (arthashāstra). Ancient authors of Āyurveda take it as an appendage (upāṅga) of Atharva-veda, and there is an agreement about this.

Suśruta, the most ancient of the medical authors, (who lived contemporaneously with the composition of *Satapatha Brahmana* around the sixth century B.C.), calls Āyurveda an appendage of *Atharva-veda*, but mentions that the original extent of this appendage was 1,00,000 verses in 1,000 sections (while *Atharva-veda* itself consists of a little more than 6,000 verses!)

He, however, explains that in consideration of the brevity of human life and poverty of our wisdom, this immense mass got in course of time attenuated to just eight divisions, the extant *ashtanga-Ayurveda*.

Charaka, another authority (who lived around 78 A.D.) regards Ayurveda as an independent Veda, although he insists that a practising physician must affiliate himself to Atharva-veda. Vagbhata, (the elder, who lived around the sixth century A.D.) regards Ayurveda as an upaveda, and not a mere upanga, of *Atharva-veda*. Thus the traditional association of Ayurveda with *Atharva-veda* has been persistent.

Two Traditions : It is well-known that Atharva-veda is outside the classical Vedic complex, which originally was only three-fold (trayi) - Rik, Yajus and Sāma. Although Atharva came to acquire the Vedic status at a later date, the content is clearly more ancient than the Riks themselves. It has been shown that the Atharva really goes back to the Indus age. Indeed the outlook of magical spells, amulets, charms, incantations, curative abracadabra, witchcraft and sorcery that we find predominant in this Veda reflects a 'primitive' mentality.

Atharvāṅgiras, the old name for *Atharva-veda*, suggests a two-fold approach: pacificatory curative practices (śānta) and black-magic and witchcraft practices (ghora). Both practices were equally in the hands of the priestly magicians and medicine-men (atharvans), who dominated the scene before and during the Rigvedic period.

The situation has continued to our own day, after nearly seven thousand years, in the rural parts of our country and among the tribal folk.

Kulluka-bhatta, Manu's commentator, was right when he said that there are in this country two distinct traditions : Vedic and Tantrik. This statement holds good for all periods of our cultural history.

The Vedic tradition is generally, but not necessarily, associated with the Aryan achievement of an abstract-other-worldly, sacrificial-symbolic, intellectual-philosophical outlook; and the Tantrik tradition is identified with the numerous pre-Aryan folk cults with a ritualistic involvement, especially related to the mother-goddess and strongly oriented to worldly life here and now.

There is little doubt that *Atharva-veda* emerged out of this mass of popular beliefs and practices, in an attempt to accommodate them within the Vedic tradition.

Of the nine classical recensions (śākhās) of the *Atharva-veda*, recognised by Sayana, only two (Paippalāda and Śaunakīya) are available now. The ninth recension, called *Charanavaidya* contained presumably the lore of the wandering medical practitioners, and also curatives (*bheshajani*).

We have no doubt lost this recension, but it is probable that the medical lore it contained survived in the early schools of Āyurveda such as the Ātreya-Charaka school. Surendranath Dasgupta suggests that Charaka, the name of the celebrated medical authority, signifies a wandering physician (lit. wanderer).

It is interesting in this connection to note that Charaka-saṁhita argues that there was no time when medical knowledge or practice was not current among the people. Āyurveda, according to this view, has a beginningless

continuity. It is argued that it is not only a distinct Veda but in fact superior to the other Vedas, for it deals with life which is the foundation for all enjoyments and benefits.

Charaka perhaps is here referring to the independence and primacy of what Kulluka-bhatta calls the *Tantrik* tradition. The identification of Ayurveda with *Atharva-veda* is to be considered in this context. Charaka's commentator Chakrapani-datta boldly suggests that Atharva-veda became Ayurveda by focussing its attention on the curative aspect.

Tantrik Background: It is well-known that Āyurveda, curiously enough, has a strong involvement in the Sāṃkhya systems; a system which was regarded as non-Vedic, if not blatantly anti-Vedic, by the protagonists of the Vedic tradition, especially by the author of Brahmasutras and the great commentator Śāṅkara.

Of course, a later theistic modification of Śāṃkhya was conceded the orthodox status in the *Mahabhārata* and the Bhagavad-gīta. But the original Śāṃkhya was uncompromisingly atheistic and materialistic. It no doubt belonged to the Tantrik tradition.

Śāṅkara calls Śāṃkhya a 'tantra' in so many words, and an old Śāṃkhya work was indeed a Tantra, *Shashtitantra*. Primacy of the feminine principle (prakṛiti), importance of the body-constitution (dehatattva), and the instrumentality of the material outfit for the highest good (kayasadhana) are common to both the Śāṃkhya system and the Tāntrik ideology.

Charaka, who was loyal to the old school of travelling doctors, espoused the original atheistic semi-dualistic Śāṃkhya as outlined by

Pancasikha. In fact, Charaka is an important source for reconstructing the preclassical Sāmkhya.

Suśruta, who belonged to a different medical school, also bases his treatise on Sāmkhya, but his Sāmkhya is Īśvarakrishna's classical Sāmkhya where atheism is rather toned down and dualism is sharp.

It is not accidental that both Charaka-saṁhita and Suśruta-saṁhita were described as 'tantras'. The work that inspired Charaka's treatise was *Agniveśa-tantra*. Of the 1,500 medical tracts listed in *Aufrecht's Catalogue* a good many call themselves 'tantras': *Jivaka-tantra*, *Kapila-tantra*, *Satyaki-tantra*, *Karala-tantra*, *Nimi-tantra*, etc., Each of Suśruta's eight-fold divisions of the Ayurvedic mass came to be regarded as a 'tantra': *Śalya-tantra*, *Śalakya-tantra*, *Rasāyana-tantra*, etc.

It is clear that the origins of Āyurveda are to be traced in the pre-Vedic Tantra-Sāmkhya complex. The belongingness of Āyurveda to the Tantric tradition has been consistent.

AYURVEDA INSISTS ON WHOLESOME, INTEGRATED LIFE

It is customary to recognise two major lines of development in Āyurveda; one headed by Charaka and the other by Suśruta. Suśruta's school is called *Dhanvantara*, after his teacher, the semi-mythical Dhanvantari who came later to be regarded as an incarnation of Vishnu.

Charaka's school is styled Ātreya, after Atri or Ātreya-Punarvasu, a descendent of Brahma. To accommodate the third divinity of the Triad, Siva, the Southern Siddha school of medicine is called *Saiva*.

Suśruta, son of Viśvāmitra, is said to have gone to Dhanvantari-Divodasa, king of Kāsi along with others like Aupadhenava, Vaitaraṇa, Aurabhra and Paushkalavata, and learnt from him medicine and surgery. The lower limit of Susruta's death is fixed in the sixth century B.C.

According to some Puranas (Brahmavaivarta and Vishnu), Dhanvantari learnt Āyurveda from Sūrya, while according to others (Skanda, Garuda, and Markandeya). Aśvini gods were his teachers. It is hard to say whether this Dhanvantari was at all a historical figure, although he is spoken of as the son of sage Galava, and as the king of Banaras. His identification with Vishnu was, of course, a late attempt, and an imperfect one at that. In Suśruta-Saṁhita he is mentioned only as a 'great sage' (maharṣi) and probably he was a real person.

Alchemy : Suśruta's treatise is no longer available in its original form. We have only a revision of it by Nagārjuna, not the celebrated Buddhist philosopher but a Siddha-chemist who lived in the sixth century A.D. The Sāmhita even says that it was prepared (grathita grantharupatah) by Nagārjuna himself (Nagārjunenaiva). But the commentator Dalhana (12th Century) explains that Nagārjuna was an editor, a redactor (pratisamskarta).

A nephew of the Jain sage Puṇyapada, Nagarjuna is said to have become a Buddhist monk, specialising in medicine and alchemy. He is described as a Tāntrik adept of Siddha, and several works are ascribed to him. One of them is Rasaratnākara, an alchemy manual; another is Nagārjuna-tantra, a medical treatise dealing with the eight-fold divisions, of Āyurveda.

The association of Āyurveda with alchemy may again date back to the Tantrik complex; but foreign influence in the field of Indian alchemy is indubitable. In the Tamil country, the Siddhas (*Sittars* in Tamil) who have played an important role in the development of medicine and alchemy were essentially Tāntrik adepts. They were outside the mainstream of Vedic tradition.

Two of these Siddhas were Chinese, completely Tamilised, Bogar and Pulipani. They came to India about the third century, travelled in the North and settled down in the South. They were initiated into the Saiva-Siddha cult; and they wrote books in Tamil on medicine and alchemy. The Siddha system of medicine which is peculiar to the Tamil country has to be studied in this context. Till now it has remained a closed book.

Charaka (about 78 A.D.) prepared his medical treatise on the basis of an earlier work, *Agniveśa-tantra*, which is surmised to have been available till about the eleventh century. And Agniveśa, whoever he was, relied in his turn on Atri's teachings. This Atri is identified with Ātreya-Punarvasu (about third cent. B.C.) whose disciples included besides Agniveśa Bheda, Parāśara, Harita, and Ksharaprāna. Each of these were medical authors, although Agniveśa became the most celebrated.

Mahabharata mentions a 'Krishna-Atreya' as the founder of the curative system (chikitsa); Charaka-saṁhita also makes a reference to him. It is uncertain if he was the same as Agniveśa's teacher; Chakrapani suggests they were different. In any case, Ātreya-Punarvasu is credited with the formulation of the tri-doṣa theory, the preparation of a herbal materia medica, and the systematisation of kaya-chikitsa.

Charaka's work was unfinished: it stopped when seventeen sections had yet to be written to complete the Sixth Book (*Cikitsa-Sthana*). It was in the ninth century that Driḍhabala of the city of Panchanada (in Punjab or Kashmir) wrote these seventeen sections and also the remaining two books planned by Charaka, *Siddhi-sthana* and *Kalpa-sthana*.

Of the several commentaries on this work, the most valuable is Chakrapani's *Āyurveda-dīpika* (*Charaka-tātparya-tīka*) which was composed around 1060.

Science of Life : For Charaka, Āyurveda, was just a 'science of life', that which 'instructs us about life'. And he goes about it in a truly scientific spirit. Suśruta on the other hand, emphasises the practical orientation when he suggests that Āyurveda is that by which 'life' is obtained or examined.

Life, in both definitions, stands for health; the theoretical appreciation of the effective balance (samyagyoga) of the sense-functions (kala), sense-objects (artha), and the three-fold behaviour (karma - bodily, vocal and mental) which makes for health or diseaselessness (ārogya) is as important as the three-fold treatment of diseases when they do occur. Treatment (chikitsa) becomes necessary when the effective balance gets weakened (hīna) or distorted (mithyayoga).

From very early times it was recognised that health could be disturbed by physical reasons such as unwholesome diet or by supernatural causes like sins and transgressions.

One of the early commentators on the *Kausika-sutra* belonging to the Saunakiya recension of *Atharva-veda*, Darila-bhatta, states that Āyurveda treats the diseases of the former kind while *Atharva-veda* deals with those of the latter.

Curative procedures in the *Atharva-veda* include magical spells (mantra), amulets (manidhārana), expiation (prāyaschitta), magical potions (aushadha), sacrifices (bali and homa), pacificatory rites (mangala and svastyayana), fasting (upavāsa), and travel to places of supernatural power (yatra).

Diseases caused by unnatural conditions and beyond easy or clear diagnosis were generally ascribed to the wrath of spirits, divine intervention, effect of black magic or to transgressions of moral laws. The treatment of such ailments naturally involved the employment of supernatural powers to ones own advantage.

Rational Approach: While Āyurveda concedes the value of these Atharvanic practices (daiva-vyapasraya), emphasis is almost exclusively laid on the treatment procedures based on man's reason (yukti-vyapasraya), like medicine (aushadha), diet (āhāra) and habits (vihāra).

It is only Āyurveda that recognises reasoning (yukti) as a separate and important instrument of knowledge (pramāṇa). This naturally marks a point of departure from the primitive magical mentality and signifies the dawn of the scientific spirit. Observation (pratyaksha), examination (parīksha), inference based on reason (anumāna), discussion with colleagues (sambhāsha), formulation of hypotheses (pratijñā), diagnosis (nidāna) become important methods in Āyurveda.

Charaka argues that most of our troubles are due to folly or errors of judgement (prajñāparādha): and to avoid or eliminate the troubles, one must live correctly (sadvritta). Correct living, according to Charaka, does not involve supernatural sanctions or Vedic authority. It is wholesome, integrated living which satisfies the three basic motivations: urge for self-preservation, desire for material provisions which make life comfortable, and the longing for better states of existence, here and hereafter. Ethics in āyurveda is judiciously subordinated to pragmatic considerations.

It is understandable that Āyurveda retained the flavour of the Tantrik tradition even in its later phases of orthodox affiliation, for it was an eminently practical discipline dealing with health and its disturbances.

A NOTE ON THE HINDU APPROACH TO DEATH

One of the popular scriptural texts of high antiquity and great literary charm deals directly with death : it is a dialogue between the living man condemned by nature to die and the already dead, who was the first one to die and therefore rules over the realm of the dead. *Kaṭha Upanishad* takes the young and mature Nachiketas to the wise Yama and discusses after-life problems. Death, which was somewhat frightening to the Vedic poet he begs that he may be allowed his full tenure and not die young, he longs for deathlessness and practises rites to prolong life, his gods are undying and he must be like them here takes a more realistic shape : it is the inescapable end of all existence and is no longer evil or sinister. Nay, it has its own charms, its own advantages-provided one knows how to die properly. A fire that takes the dead surely and securely across the waters of suspense, ignorance and delusion is named after the boy Nachiketas himself, because he dared to reject the bonds and pleasures of life to look beyond them all.

Indian thought, from this point onwards, has not been scared of death; but it continues to be preoccupied with the problem of suddenly ceasing to exist. The *Bhagavad Gīta*, again, is a text that directly deals with death. Arjuna, whose profession as a Kshatriya is to kill, unexpectedly withdraws from dealing death in the course of a battle. The first section paints death

in lurid colours and randomly talks about social obligations and domestic affections; the commentators suggest that behind this camouflage of compassion was Arjuna's fear of death. The Upanishadic Nachiketas was cool-headed, collected, and severely practical, while Arjuna of the later age was scared of death although his business was battle. Krishna had to pull him out of dejection by providing for him an insight into the meaning of death. The arguments of karma, dharma, sannyasa and viveka are all directed at making him composed and reality-oriented.

Death, for the Indian, is not therefore the negation of life, nor the end of all existence, nor dissolution of all values that sustain normal life. It is not connected with evil in any way, although in the Buddhist legends the Prince of Desire is sometimes Death. It is very necessary, if also inevitable, for the scheme of things that everything should change, renew; phenomenal existence is by its nature transient, and we are all aspects of it, we are committed to it. It is not only unwise but unnecessary to battle with this need to empty and replenish periodically. It is not a helpless surrender to the inevitable, but a carefully considered compromise which is at once realistic and advantageous. The fear of death, unmitigated and constant, often exaggerated and distorted, which marks the primitive religious consciousness no longer dogs the Upanishadic man : he has learnt to treat death almost in a casual manner, brushing it aside as incidental to living. He sometimes speaks of death as a fulfilment, as a reward, as the final stage of rest for the fevered life. He is in other words happy that man can die and start his life all over again : just as one throws away the old and worn out shirt and wears a new one, as the *Bhagavad Gita* puts it. Death is not a rejection of life, but an opportunity for a better

life, for greater life: unless one can die, he cannot be immortal. The Upanishads speak of 'reaching immortality having crossed death' (*mrityum tirtva amritam asnute*). Death in this context is not frightful or depressing ; it is on the other hand welcome and promising.

The *Bhagavad Gīta* emphasises this view-point. It is all the same whether one lives or dies, and no sensible man will mourn for the dead any more than he does for the living. Krishna boldly holds this seemingly callous view; but underlying it is the advocacy for a reality oriented, practical philosophy of life. Death, whether natural or inflicted by the prevailing social values, is not something that should upset and throw out of gear the living, and disturb the patterns of community activity. Krishna fights Arjuna's reservations about death and social obligations that are connected with it, by pointing out that one is no more responsible for death than for life. He assumes that responsibility himself. Life and death are not man's problems; they are given to him without his asking or knowing, and they follow a law that is altogether beyond him. The wise man knows that he is a tenant in this world for the brief span between birth and death, and behaves as such. He does not belong to the world any more than the world belongs to him : it is idle infatuation to own the world and endeavour to stick to life. 'Do your job well' says Krishna, 'and leave the rest to me'.

This outlook has coloured the Hindu thought ever since. But the *Gita* doctrine should not be construed as a gospel of indifference and inactivity. Although life and death do not belong to man, the opportunity to live is his and it does matter. Having come to life, how one lives is important ; having lived, how one dies is equally important. The *Gīta* emphasises that life is given to man so that he may make the best of

it; if he learns to live well, he would not be scared of death. For man that is born, living is more important than life or death; that is his business, his charge, his responsibility. Quit without regret when the time for it comes, but live till then without having to regret for the way you have chosen to live. Krishna thus directs Arjuna - and all of us - to the need to live fully and properly while here; all else is idle talk - *anya vaco vimuncatha*, as the Upanishad says.

The *Gīta* became an important text for a Hindu because it marked a change in the habit of thinking : from thoughts of death attention was turned to thoughts of living ; the fear of death gave way to an eagerness to die well or in other words to live well. The major concern of Indian thought was *dharma* in all of its involvements ; and *dharma* is a positive, action-oriented and attitude-determining concept. *Karma*, which is often considered a pessimistic and fatalistic concept, is but an explanation ; it is not a doctrine, unlike *dharma*. It does not, contrary to popular belief, influence the Hindu habits of mind ; nor does it seriously affect the dispositions and goal-directed behaviour. It is *dharma* that has all along ruled the Hindu thought, including the Jaina and Buddhist ways of thinking. And *dharma* is what pertains to this life, here and now, to the span of living that commences with birth and is wound up at death.

The Hindu rituals connected with death illustrate this outlook. The two phases of the 'final rite' (*antyeshti*), viz., stabilisation of the individual spirit in the disembodied state (*ekoddishtha*) and the resolution of the spirit into the ancestral form (*sapindikarana*) are actually treatments done to eliminate defilements to wrong living so as to enable it to march onward

in its career. These rites - which are no doubt complicated and made gruesome and expensive by the priestcraft - become necessary only by the supposition that proper living is normally impossible because of exigencies of survival. 'People do not know how to die properly, and therefore the funerary rites become necessary', says a Purana. The first phase of the 'final rite' is curiously concerned with making the already dead person 'die' again in good style ! The proper aim of living, according to a popular adage, is to die well. This involves living well - living in accordance with *dharma*.

FOUNDATIONS OF INDIAN LOGIC*

1. Logic in the West is essentially nominalistic; its greatest preoccupation all along has been the language-habit of man. Whatley's view that logic is the art of reasoning with reference to modes of statements to ensure the cogency of an argument has held the field in spite of protesting voices from certain quarters. Hamilton's suggestion that logic should concern itself with formal laws of thought (the simplest of elements of which is the concept) and the plea of Bain and Mill that the proper theme of logic is the meaning of propositions has not been potent enough to institute marked changes in the outlook of traditional Aristotelian logic. Much attention has been devoted to the lingual vesture of mental processes. As a good instance might be cited the division of propositions into categorical and hypothetical in the first instance, and the hypothetical into copulative, disjunctive, conditional, exclusive, exceptive and reduplicative. If the thinking process is referred to in this system of division, then it points to a prime fallacy - that of deducing forms of thought from the forms of language. The sport that has widely interested logicians, known as opposition of propositions (or the Modi possibilities diligently worked out on the ponendo and tollendo bases) strongly suggests the unwarranted emphasis placed on the language factor. Even the Aristotelian categories have their *raison d'être* in different parts of speech, like substantia noun, quantitas adjective, ubi or place adverb, actio verb and so on; in fact, the precise significance of 'kategoria' was assertion or predication - evidently lingual.

This fallacy appears to have arisen from the fact that the starting point of Western logic is arbitrarily fixed on the human mind; and the perceptible, tangible and manageable aspect of the human mind is largely determined by the structure of verbal symbols. Indian logic is free from this fallacy because its starting point has been the fundamental principles of existence, like the *padārtha* : the human mind comes on the scene much later, under the head of *dravyas*. Besides, unlike in the West, attention here is not exclusively devoted to the mental contents; mind is but one of the nine substances. In view of the larger structure of the world - the immeasurable immensity and inscrutable mystery of which has only too emphatically been demonstrated by modern science - it is improper to bank solely on the factor of mind for logical analysis. And any system of thought that is entirely based on it appears to be on very unsafe grounds, partly because the major modes of mind are still enveloped in obscurity and partly because it occupies an altogether insignificant place in the order of things in the cosmos. An unwarranted importance on this factor has been responsible for much that is paltry and fallacious in Western logic. It is not, however, suggested that Indian logic discounts the importance of mind; only the value attached to it is in due proportion to its legitimate claim.

2. Indian logic starts with an inquiry as to what existence means at all. *Padārtha* has various implications. The author of *Tarkadīpikā* suggests that *padārtha* is characterised by nameability¹. Lest we err in over-rating the lingual factor, the author of *Siddhānta-candrodaya* adds that knowability (*jñeyatva*) is in reality its only characteristic; *Śivāditya* in his classic treatise,

1. "Abhidheyatvam padārtha-Sānāya lakṣaṇam".

Saptapadārthī, defines *padārtha* as the object of knowledge (*pramitivīṣayatva*). That is to say, existence is whatever human mind can possibly know or rather whatever could be known by mind. Anything that passes beyond the scope thus defined would obviously lead us nowhere. However insignificant the mind, we can not transcend it; it is the only available avenue for furnishing us with information about existence. But Indian logic rightly makes the latter independent of the former, at any rate in theory, although it grants that prior importance should be placed on mental cognisance. There are seven kinds of categories or existential principles (*padārtha*), substance (*dravya*), quality (*guṇa*), generality (*sāmānya*), particularity (*viśeṣa*), coinherence (*samavāya*) and negation (*abhāva*). Substance is whatever possesses quality (*guṇavattvaṃ*) and there are nine substances: earth, water, fire, air, ether, time, space, soul and mind. (It is interesting to note that space and time have been identified as substances). Each of these has a differentia and could consequently be defined. Each substance thus could be fixed with precision in the system of our knowledge. Definition (*lakṣaṇa*) means: 'differentiating the definitum by an attribute from all things different from itself.'² Quality resides in a substance: it is said to possess generality but distinct both from substance and action.³ There is a particular quality (*viśeṣa*) for each substance and there are general qualities (*sāmānya*) for two or more substances. Altogether there are twenty-four qualities: form, taste, smell, touch, number, size, separateness, unison, division, priority or proximity (in time and in space), posteriority or distance (in time and in space), weight, fluidity, viscosity, sound, intellect, pleasure, pain, desire, aversion, effort, *dharma*, *adharma*, and *samskāra*. The author of *Bhāṣāpariccheda* classifies these qualities under three broad groups:

2. "Udviṣṭasyātattvavivecakadharmā", Vātsyāyana on Gotamasūtra, 1.1.2

3. "Dravyakarmavibhinnatve sati Sāmānyāyān", (Dīpikā)

material (*mūrta*) comprehending form, taste, etc., which by necessity refer to a concrete object; immaterial (*amūrta*) like pleasure and desire; and the rest such as number, separateness, etc., which are abstract enough, but do refer to some concrete object or objects.

The human mind, as one of the nine substances (*dravya*), possesses certain characteristics that distinguish it from other substances. It is common knowledge that in the Indian system of thought five substances earth, water, fire, air and ether enter into the composition of the body of an organism, and each substance specialised results in a sense organ. To conceive of mind as such a substance and as responsible for that factor called 'mind' is indeed interesting. Indian logic, besides, looks upon *sāmānya*, *viśeṣa* and so on as not dependent on mental processes at all but on the nature of things at large. Even here the limitations of mind are readily recognised and no attempt is made to impose the mental on the physical. The scope of Indian logic extends beyond mind: it is phenomenological in its approach.

It is also noteworthy that logic in India is not merely a science of reasoning but a science of accurately knowing things. The assumption, probably, is that right knowledge inherently necessitates right reasoning; accurate knowledge leads to valid reasoning. The extraneous factors - purely human - that enter to vitiate correct reasoning do not strictly form a part of logic in India. Of course, there is an elaborate discussion on '*hetvābhāsa*', commonly translated as fallacious reasoning; but it is described as a factor interfering with correct judgement, "that which is the subject of a right knowledge which prevents a judgement".⁴ Even here the emphasis is on the process of thinking with its necessary counterpart, the nature of things.

4. 'anumiti-pratibandhaka-yāthārthajñāna-viṇayah'.

3. Buddhi (mind in function) is defined as the cause of all interaction in which man is a party,⁵ and also as knowledge (*jñāna*). It is with the help of this principle that we are engaged in the diversity of human behaviour; it is the factor that links man with the world. Without it man would indeed be a helpless captive in a dark cage and the world a long night of dense obscurity. Buddhi is responsible for all our decisions, desires and acts. It is also a principle of cognition, the subject of consciousness in the form of 'I know'.⁶ Its operation is two-fold: it apprehends or experiences (*anubhava*); and it stores and remembers previous experience (*smṛti*). Between these two comes in an intra-mental activity of arousing the mnemes, termed as *bhāvanāsamskāra*. The difference between recognition (*pratyabhijñā*) or memory in the presence of an appropriate object and remembrance (*smṛti*) or memory even in the absence of the relevant object, is recognised in Indian logic. Regarding apprehension, the *Naiyāyika* thinkers describe three stages: contact between the sense organ and the object in question (*indriyārthasamnikarṣa*); the consequent knowledge (*jñāna*); and the resultant awareness of having cognised (*anuvyavasāya*). No cognition is complete until the cogniser is in a position to 'feel' that he has cognised. In the presence of a jar my eye catching the form of the jar is the first stage; the mental grasping of the jar is the second; and the awareness that "I see a jar" is the final stage.

Apprehension (*anubhava*) is either true or false. The true apprehension such as cognising silver as silver is termed '*pramā*' and is defined as 'apprehending a thing as X when it really is X' (*tadvati*

5. Sarva vyarahārahetuh.

6. 'jñāni', ity anuvyavarāyagamyā.

*tatprakāra*ko'nubhavaḥ); while the false apprehension is '*bhramā*' or illusion, such as seeing silver in a mother-o'pearl, i.e., apprehending a thing as X when it is really not X but Y. The difference is caused by the superimposition of one '*prakāra*' on another; *prakara* is the feature that distinguishes the object from all others. In a jar, for instance, the jar-ness is the *prakāra*. *Prakāra*, however, is not a quality such as black; blackness is a '*viśeṣaṇa*'. The *prakāra* is psychological, it is a property of knowledge: jar-ness is really not in the jar but in my mind. With reservations, it could be termed the 'idea' of the jar. If my 'idea' of silver is projected on the object silver, that is '*pramā*'; if, on the other hand, that idea is projected on the object mother-o'-pearl it is '*bhrama*'. We find here an instance of how Indian logic leaves equal emphasis on the physical and the psychological factors.

Apprehension is of four sorts: (1) perceptual (*pratyakṣa*) or observation; (2) inferential (*anumāna*), deduced from items of the above; (3) analogical (*upamāna*), deduced on the basis of similarity; and (4) testimony (*śabda* or *āgama*), i.e. knowledge based on word of authority. These are otherwise known as instruments of apprehension (*karaṇa*). Indian logic treats each of them with great care, because the guiding principle herein has been that "the knowledge of a thing to be measured depends on the knowledge of the measure."⁷ These four instruments have widely been designated as '*pramāṇas*', the principles that lead to valid knowledge.⁸ The *Mīmāṃsakas* define a *pramāṇa* as "that which causes us to cognise an object not known till that moment of cognition".⁹ *Annambhaṭṭa* defines

7. 'Mānādhīnā meyasiddhiḥ'

8. *Pramākaraṇam*

9. *Anadhigatārthagantṛ*

it as a 'peculiar cause' (*asādhāraṇa-kāraṇa*); *Keśavamiśra* as an 'operative cause' (*sādhakatamaṃ kāraṇam*); *Nīlakaṇṭha* describes it as that without which the present effect would not have arisen.¹⁰ It is the means by which the cause turns into an effect. The cause is that which compels the effect, it is characterised by temporal priority (*Kāryaniyatapūrvavṛtti*). The effect (*kārya*) is the opposite of antecedent negation (*prāgabhāvapratiyogi*): that is, something that was not before existent, in that form at any rate. For something can never come out of nothing, and the change from cause into effect is but a change in condition. If a piece of cloth (*paṭa*) is looked upon as an effect, the absence of it (*paṭābhāva*) was the prior condition; there were, however, the threads and there was the tailor. The particular arrangement of threads which results in the piece of cloth is termed the '*asamavāyi*' (non-intimate) cause. And the tailor who is responsible for that particular arrangement of threads so as to result in the piece of cloth, is the '*nimitta*' or efficient cause. This is how things come into being and become the objects of knowledge. Even so knowledge comes into being, the prior state of obscurity changes into apprehension, consequent on the operation of a *pramāṇa*.

The first variety of *pramāṇa*, Observation, is described as knowledge obtained by the contact of sense organ with the object.¹¹ It is of two sorts: primary (*nirvikalpaka*) characterised by the absence of any *prakāra*; and secondary (*savikalpaka*) qualified by some *prakāra*. When we vaguely cognise some entity without knowing any of its details, we are in a position to say nothing more than 'This is something'. Only on closer scrutiny can

10. Yad vilambāt prakṛta kāryānutpādah tat Karaṇatvam.

11. 'Indriyārtha-Saṃnikars%Ya-janya-jñāna.

we say 'This is a pot' and in this latter observation, the potness is the *prakāra*. From obscurity we pass on to a mere awareness sort of observation and from that stage we come to the stage of mature observation wherein details are singled out. From the pot's point of view, from the bosom of dark non-existence, something arises and from that something a pot. Full-fledged observation, thus, is the 'scrutiny of a phenomenon',¹² in the real sense of the term. This view of observation suggests important psychological operations that are involved. The immediate reaction on physically seeing a pot is for the organism to somehow become aware of the existence of some entity; if the eye were not there to establish this contact, the form of the pot would naturally be inscrutable and unknown, and for our purpose, there is not much to choose between such an existence and non-existence. The sense-organ, so to say, picks out of this dark obscurity something and equips it with 'presentability', makes it '*vyavahāraṣama*'. Indian view does not make the object the source of knowledge, for it recognises non-perception (*anupalabdhi*) also; non-perception is described as the cognition of non-entity (*abhāva*); for instance, we perceive the absence of pot on the ground. That does not, however, become manifest until we reason back; "If there were a pot on the ground, then I ought to have seen it, even as I see the ground". It is only after such an '*āropa*' that we become aware of the fact that until we cognise an object, we will be cognising its absence. The psychological import of such a view is very great, indeed. To continue, when the object is thus 'presented' by the sense-organ, mind receives the impressions, builds up the form and stamps it with a name-fixed by convention. Without this signification, the present pot would remain a dark *suppositio*.

12. Clarke: Art of straight thinking.

3. The most popular instance of inference is

All men are mortal

Socrates is a man

Socrates is mortal.

The third proposition is termed a judgement (*anumiti*), a hitherto unknown or unrecognised fact deduced from known or observed facts. Inference, says *Vātsyāyana*, is the showing of relation that subsists between the attribute in question and the possessor of that attribute (*lingalinginossambandhadarśana*). The attribute in question distinguishes that object from all other objects of the same category; it is termed the '*pakṣatā*' (the manhood of Socrates). *Pakṣa* is said to lack the ascertainment of a thing (*siddhyabhāvavān*); in this particular instance, the proposition 'Socrates is a man' does not by itself say anything about the mortality of Socrates; his mortality has got to be proved (*Sādhya*). The minor premise is thus termed *pakṣadharmatā*. The proposition "All men are mortal", entailing as it does invariability of concomitance (*sāhacaryaniyama*), is termed *vyāpti*: its scope is wider than the other two. In the illustration, "wherever manhood is found, there mortality is also found", mortality is the *vyāpaka* of manhood but *vyāpti* belongs to mortality and is projected on manhood. It cannot be otherwise. It is tantamount to saying All men are some mortals, as there are a large variety of other entities that also die; or a section of mortality comprehends all manhood; that is, no man is not mortal. Thus *vyāpti* is a universal proposition; the S is entirely involved in it. Two sorts of *vyāpti* are recognised: positive (*anvaya*) where the *sādhya* (probatum) is invariably affirmed of the *hetu* (reason); 'Mortality is invariably concomitant with manhood'. Negative (*vyatireka*) *vyāpti* is its converse: here the absence

of the *hetu* is *vyāpaka* and the absence of *sādhya vyāpya*: e.g., 'wherever mortality is not found, manhood also is not found'. In Western logic we speak of this as excluding P from the comprehension of S, and S from the extension of P. The *Vyatireka-vyāpti* (E proposition) is negative to both dictum and mode, whereas *anvayavyāpti* (A proposition) is affirmative to both of them.

In the proposition 'Socrates is a man', Socrates is S, man is P and the two ideas are supposed to be linked by the copula 'is'. The precise function of the copula is to affirm P of S. In a proposition like 'Socrates is not a cat', the function of the copula is not so definite: is it to deny the P (cat) of S (Socrates) or to affirm the Not-P (not-cat) of S? According to Hobbes the business of the copula is always to affirm: denial actually means 'affirming a negative name'. But Mill contends that the distinction between the affirmative and the negative is not only verbal but real. For Indian Logic, however, the problem does not occur. To divide the proposition into S, P and so on is psychologically invalid: when we make a proposition (psychologically) like 'Socrates is a man', it is not that we get at the idea of man first, and of Socrates then and only later get to link the two, welding them into one sense; it is a single simple sense. The *śābdabodha* or the lingual phrase of the psychological act, meaning of the proposition, that is to say, is defined as the 'power which the words acquire when they are arranged in a sensible order' (*padānām anvayaviśiṣṭe śaktiḥ*) or better still as 'the power which is tantamount to a sensible order of words' (*padānām anvaya eva śaktiḥ*). No single word or expression means anything; independent of the situation of the proposition in which it occurs, the word is impotent to express any significance either latent or patent.

Indian Logic emphasises that a *vakyārtha* (proposition) should contain words which are able to completely express the intended sense (*ākāṅkṣā*), which do not suggest conflicting meanings (*yogyatā*) and which exhibit coherence (*saṁnidhi*). The author of *Bhāṣāpariccheda* insists on a fourth requisite, capacity to convey the intention of the speaker to others (*tātparyajñāna*). A proposition should be all these, so that the relevant meaning might easily be evoked. Meaning thus is a gestalt, it is not contained either in entirety or in part, in any of the words: it is not got by artificially cementing two ideas by a 'copula'. The concept of copula is an invention without justification; it is consequent on the associationistic fallacy. Mind grasps the significance of a proposition in a single indivisible act. Indian psychology, following this line of thought, seems to be on surer grounds.

Syllogism in Western Logic consists of three propositions: major premise (*vyāpti*), minor premise (*pakṣadharmatā*) and judgement (*anumiti*). Indian Logic looks upon such a syllogism as incomplete. From two concepts 'All men are mortal' and 'Socrates is a man', the suggested judgement cannot legitimately spring up. The most important step, however, is consideration (*parāmarśa*): inference is, in fact, defined as 'knowledge arising from consideration'. And consideration is defined as 'knowledge of the *pakṣadharmatā* as qualified by *vyāpti*'. To explain, the manhood of Socrates is the *pakṣadharmatā*, and the invariable concomitance of mortality and manhood is the *vyāpti*. The consideration, thus, would be of the following form: Socrates is a man qualified by mortality (*martyatvaviśiṣṭamanuṣyaḥ*). This, however, is a mental operation, necessarily involved in all inference, although not a stage in the formal syllogism. Western Logic has lost sight of this psychological factor and hence its syllogism is essentially defective. As long back as 200 A.D. Sextus Empiricus declared syllogism to be guilty

of 'petitio principii': if we were ignorant of the mortality of Socrates, he asked, how could we make a statement like 'All men are mortal'? What, in fact, we are warranted to say is 'All men except Socrates are mortal', but from that major premise the intended conclusion first contributes its quota to the major premise and then takes it back again. If all the facts in the major premise, said Mill, have been examined, then the conclusion is superfluous; if not, fallacious - either way syllogism is defective. Now this is a serious charge. The business of inference is to supply us with information hitherto unknown. Of course an entirely new information is never got; knowledge creeps, it never jumps. The best that an inference can do is to don an old information with a new significance, to pick out an information from obscurity and emphasise it, or to draw out new implications.

Indian Logic looks upon inference as two-fold: *Svārtha*, meant purely for the personal information of the inquirer, and *parārtha*, syllogistic or formal. The former is declared by the author of *Nyāyabindu*, to be knowledge in form (*jñānātmakam eva*), intended to remove one's doubt, while the latter depends on verbal expression (*śabdātmakam eva*) and is intended to convince another. The *svārtha* inference is purely a psychological process: observation gives us the knowledge that Socrates is a man, and our recollection of a wider truth such as "All men are mortal" is projected on it; this results in the consideration (*parāmarśa*) - "Socrates' manhood is characterised by mortality." This information for one's own benefit is purely mental and an actual inference such as 'Socrates is mortal' is not necessary at all. It becomes, however, necessary in a *parārtha* inference where we have to express our belief to another who might apparently be skeptical about its validity. In the experiential aspect of inference, *parāmarśa*

is of major importance: our previous knowledge or conviction (*vyāpti*) is linked with the present observational information (*vyāpya*) as a result of which the latter acquires a new significance with reference to the former, that is to say, becomes *vyāptiviśiṣṭa*. It is after this preliminary mental apprehension that we are in a position to formally express the new belief in the form of a syllogism. Indian syllogism, however, has five limbs: the hypothetical proposition (*pratijñā*) or a formulation of the probatum (*sādhyanirdeśa*) such as 'Socrates is mortal'; Reason (*hetu*), 'because of his manhood'; Illustration (*udāharaṇa*), 'Plato, Aristotle, Zeno and others were men and they were mortal'; Application (*upanaya*), 'even so Socrates'; and finally conclusion (*nigamana*), 'It is so', i.e., Socrates is mortal. This is not merely more elaborate than the Aristotelian syllogism, but more methodical: the application of a wider truth to a more limited scope by way of citing, convincing instances is inevitable in all inference. Indian Logic is free from the charges of Sextus, Bain and Mill because of its consideration to psychological processes involved. It does not bother about the reduction of propositions, because its emphasis on the verbal expression is limited; so long as the mental operations are the same, reducing propositions to different forms, is according to Indian Logicians as well as to Thomson, Ueberweg and Lambert, 'both unnecessary and unnatural'.

A word about consideration. What is it the consideration of? It is technically defined as '*liṅga-parāmarśa*'. Liṅga is a sign or mark. Sometimes it is translated as 'middle term', but it does not strictly conform to the significance attached to it in the Western Logic. Middle term, in the Aristotelian syllogism, occurs in both the major and minor propositions and serves as a link between them, a sort of bridge over which inference might

travel. *Liṅga* is not so much a term as a concept. In an inferential act, three *liṅgas* are supposed to be present: our wider observation of the mortality of numerous men of our knowledge: our limited observation of the manhood of Socrates; and a highly subtle understanding of that manhood as inherently associated with mortality. *Parāmarśa* is the consideration of this third sign (*tṛtīyaliṅga*) or understanding.

Indian Logic does not consider the above 'limbs' of a syllogism as always enough to warrant a legitimate inference: it pays due regard for other preliminary and consequent psychological operations that accompany an inferential act. Curiosity (*jijñāsā*) or desire to get at a new knowledge is the fundamental attitude that prepares us for an inference. Lest curiosity lapse into dull passivity, Doubt (*saṁśaya*) is instituted so as to keep up the tension or mental set. The third aid to inference is *śakyaprāpti* or the convincing nature of the evidences employed; unless we are sure of the means we employ to get over the doubt and to arrive at a knowledge, the inference will lack the force it ought to possess. Doubt, being more negative in form, might not be of much assistance; a definite purpose (*prayojana*) should clearly be had in view. Without this regulating factor, we are likely to go astray in our inquiry. When the inference is at hand, we experience a mental satisfaction consequent on the removal of doubt (*saṁśayavyudāsa*).

Analogy (*upamāna*) in some quarters of Indian Logic (such as the *Vaiśeṣika* and the *Sāṃkhya*) is classed under inference, inference from one particular to another, as Western Logic would have it. But *Gotama* and *Annambhaṭṭa* regard it as an independent mode of knowledge. *Udayanācārya*

asserts that the type of knowledge obtained by analogy is peculiar and not to be got either by perception or verbal authority (*Kusumāñjali III*); it is the relation between the sign and the possessor of that sign (*saṃjñā-saṃjñī-saṃbandha*). An instance. A man does not know what a gayal (*gavaya*) is, and he learns from a forester that it resembles a cow (*go*). When he chances to go to a forest and see before him an animal just like a cow but not a cow, realisation dawns on him that it must be a gayal, based on the recollection of what the forester had told him. We can obviously see that the mental operations involved in such a case, are altogether different from those in an inference. The inference does not move from a *vyāpti* to *pakṣadharmatā* but from a *saṃjñā* to *saṃjñī*. We do not have a general notion of what a gayal is; it is hardly more than a name (*saṃjñā*). But the name is equipped with the potential capacity to evoke the recollection of an authoritative information (*atideśavākyaārtha-smaraṇa*) on seeing similarity. The apprehension of resemblance between the strange object present and a well-known object, together with the memory of a reliable man signifying the former by a particular name leads to a knowledge, hitherto non-existent. Thus the importance of the role played by memory in various cognitions is recognised by Indian Logicians.

The fourth mode of obtaining knowledge is Testimony (*śabda*), i.e., information by a reliable source (*āpta*). A reliable source, says the author of *Vākyavṛtti*, expresses the true import of a verbal knowledge (his complicated statement runs: *Prakṛtavākyaārthaviṣayakayāthārthaśābdabodhaviṣayakatātparyavān*). Recognition of this mode of knowledge in view of the inadequacy of the other modes is significant; a close scrutiny of the present stock of our knowledge can easily convince us of the important part testimony plays in acquisition of information.

4. What goes above pertains to right apprehension. Indian Logic recognises the possibility of wrong apprehension also. Unlike in the Western Logic, where fallacies are those of reasoning only, here the fallacy pertains more to apprehension or knowledge. As was said above, the major theme of Indian Logic is not thought but experience; in fact *apramā* is defined as 'ayathārthānubhava' - experiencing things falsely. Three major varieties are recognised: (i) Doubt. Apprehension of a variety of characteristics in one and the same universe of discourse is Doubt (*ekasmin dharmaṇi viruddhanānādharma-vaiśiṣṭyāvagāhi-jñānaṁ saṁśayaḥ*): the object cannot of course be all the alternatives (*koṭiś*). An object in semidarkness might appear as a stick or a standing man; its alternatives are four (*catuṣkoṭika*) - it is a stick, it is a man, it is not a stick, it is not a man. Out of these, one is its real nature and the three false. In a doubt, the real nature also is apprehended but along with other false natures which prevent right knowledge. (ii) Error (*Viparyāya*). This has but one *koṭi* and that is the false one; it is an apprehension, no doubt, but an untrue one. The apprehension of silver in the mother-of-pearl is a famous instance of this. This might with limitations be termed Illusion; perceiving something as something else. (iii) Fallacious reasoning (*Tarka*). The proper course of inference is to go from a wider truth (*vyāpaka*); to a limited truth, which belongs to that wider truth (*vyāpya*); when the order is reversed, fallacious reasoning results. E.g., Socrates is a man and he is mortal; therefore all men are mortal. This is a very common fallacy in our daily life: we form an impression about a group, judging only an individual thereof; we meet a man once and form an idea of his entire personality. This unwarranted generalization is, strictly speaking, an erroneous thought-process; it leads us to a knowledge, no doubt, but which is far from the true. Under this

head come all the fallacies recognised by Western Logic, like ignoratio elinchi (*ātmāśraya*), dilemma (*anyonyāśraya*), reductio ad absurdum (*pramāṇabādhītārtha-prasaṅga*) arguing in a vicious circle (*cakra*) and so on.

5. Indian Logic does not recognise the distinction between Induction and Deduction: actually they do not involve two different mental processes. There might be conspicuous difference as regards the verbal expression of the two modes of reasoning; but Indian Logic, concerned as it is with psychological processes, does not feel justified in making such a division. Even in Western Logic there has been a series of changes against such a division: Bradley, for instance, declared that there was nothing like induction at all, all inference resting on some implied universal. Indian Logic takes much the same stand; all inference starts with *vyapti* and no inference leads to it, and for arriving at a *vyāpti* we have to do some induction but that induction is deduced from some other *vyāpti*. Thus it is absurd to speak of either in isolation; together they are responsible for an inferential act.

TANTRA APPROACH

The purpose this chapter is to focus attention on a little known aspect of Yoga - tantra, viz., the aspect that was developed by the mystic Siddhas in the early centuries of the Christian era. The contribution of the 84 siddhas, among whom *Nāgārjuna* is counted, has become obscure, owing to the large scale destruction of the Yoga-tantra literature stored and taught in the *Nālandā* University, when it was attacked and burnt down by the Turushka raiders around 1205 A.D. The continuity of the Yoga-tantra literary tradition in India has been broken for a couple of centuries. But Tibet has preserved this phase, the traces of which are no longer extant in India. The Tibetan translations of the writings of the Siddhas help reconstruct the missing links in Indian Yoga-tantra tradition.

The Tantra Theory

1. One of the Siddhas who was intimately associated with the Yoga-tantra theory and practice in *Nālandā* was *Mahāpaṇḍita Nāḍapāda* (or *Nāropā*), whose death occurred in 1039 A.D. Student of another Siddha, *Tilopā*, he passed on the mantle of tradition to his Tibetan student, *Mārpā*, whose disciple was the famous Tibetan poet-saint *Milarepa*. *Nāropā* wrote as many as 25 works in Sanskrit, 23 of which are available in Tibetan translations. Only one of his works is extant in its original Sanskrit: a constructive commentary on the *Kālachakra-tantra* entitled *Sekoddesa-Tikā*. There are many glosses and annotations on this work in Tibetan; and the

lamas of the Kargut-pa sect have preserved oral explanations pertaining to this manual.

Nāropā's text is valuable for the insights it provides on the Yoga-tantra outlook on the actual and potential dimensions of human consciousness, as also on the technique of actualisation of Being-Awareness which forms the main theme of the *Kālachakra* system. In *Nāropā's* words, 'Ka' refers to the physical equipment of man (*kāya*), 'la' to the energy system (*prāṇa*), 'cha' to the mental processes (*chala-chitta*) and 'kra' to the orderly restraint of these ordinary and outward extensions (*Krama-bandha*). He also involves the condition of wakefulness with the physical body, deep sleep with the energy system, and dream with the mental processes. Their restraint is calculated to bring about the 'natural' condition of tranquil bliss (*sahaja-sukha*). Further, there is an identification of the psychic centres corresponding to the above: head with wakefulness, throat with dream, heart with deep sleep and navel with the 'natural bliss'.

2. Tantra has many meanings, and this is conceded by the Tantrik texts themselves. Excluding the meaning of 'expository manual', all the other meanings operate within the framework of the Titatan version of Tantra, viz. rGyud-bzi, interpretation of Tantra as "reality defined by consciousness" (*Prabandham tantram ākhyānam*): it comprehends three dimensions of reality viz: the inalienable awareness which is none other than Being (*prakṛtiḥ asamhāryaphalam*), the ground for constructions of the transactional world (*ādhāra*), and the actual modes of constructions (*Upāya*).

Tantra as an expository manual informs us about this continuity of consciousness (*Chitta-srota*, in Tibetan *Sems-rgyud*). Tantra as practice helps us actualize this continuity in one's own being.

Basic to Tantra of the Siddha or Vajrayana tradition is the idea of 'bodhichitta' which originally signified 'intention for enlightenment', but the meaning of which was later crystallized as 'consciousness inclining spontaneously to its own inalienable nature' (i.e., content-less flow, in Tibetan *gtsosems*), symbolized by the mystic seed-syllable 'Hum'. *Bodhichitta* abides in every one of us in its twin aspects: (1) ordinary consciousness, soiled by actions and agitated by thoughts, and (2) the aspect that is hidden and beyond phenomenal involvements, utterly tranquil and unaffected, "ever washed bright". The former aspect is identified in *Guhyasamāja* with *manas* (Tibetan-yid), or mind, and the latter with *chitta* (Tibetan *Sems*), or consciousness.

The purpose of Tantra as a practical discipline is to transform the former into the latter, for the former is characterized by stress (*kleśa*) while the latter is experienced as bliss (*sukha*). The agitated waters of the mind need to be stilled before the jewel of consciousness that lies hidden beneath it can be perceived. The waters cannot be stilled by being beaten or stirred violently. The art of letting mind alone so that it can naturally settle in silence and stability forms the core of the Sadhana advocated by the Siddhas.

3. The perception of contentless but energetic consciousness as a result of the natural stilling of the constructional mind is referred to as *Vipaśyana* or clear vision (Tibetan *rig-pa*). The mystical model for the enduring vision of this stable and creative consciousness (*Chittavajra*, Tibetan *bdorje-sems-dpa*) is technically known as 'Mahāmudrā'. It is the great seal of discernment impressed upon the ordinary transactional dimension of consciousness. The Tibetan word for 'Mahamudra' is '*Phyag-rgya*', which brings out the detail of 'grasping' (*phyag*) before an impression (*rgya*) can take place.

Consciousness is 'grasped' as stable, beyond the possibility of agitation by sensations or thoughts. And impression refers to the creativity of consciousness. It is beyond the scope of thoughts which tend to become stereo-typed, and can affect a breakthrough by its inherent energy.

'*Mahāmudrā*' is defined as the essential and unagitated consciousness (*nishpandagati*) which both *is* and *has* effects. Herbert V Guenther following the *Guhya-Samāja* text distinguishes between the static and dynamic aspects. The former is consciousness as mere existence, the source of our being, our inalienable awareness. The latter seals man's existence in the world, in the sense that he is no longer 'a cog in the machine'. *Mahāmudrā*, thus, enables one to operate in the world from the deepest layers of one's being, and thus steer clear through the illusions and stresses incidental to transaction from superficial levels. When our being is impressed by the stable and inalienable awareness, our transactions acquire extraordinary energy, which is referred to as *Vajra-sattva*. When the energy suffuses the three dimensions of being (body, speech and mind), the resultant integration is hidden in the sense that it is deep down ones own being. This is actually what '*Guhya-samāja*' signifies.

The core instruction of '*Mahāmudrā*' adepts is: "Cast aside all clinging, and the Essence will at once emerge." (Lama Kong Ka). The first part of the message has a three fold involvement - equilibrium, relaxation and naturalness. Equilibrium (*sāmya*) is the balance of the three dimensions of transactional consciousness: body, speech and mind. The physical equipment must be loosened (*kaya*); verbal expressiveness must be solved down by regulated breathing (*prana*); and mind is trained not to rely on any object or thought.

Relaxation (*viśrāma*) is refusal to be distracted by sensations or thoughts. It is described as letting the sense-organs and mind to function unloaded and therefore unagitated. Naturalness (*sahaja*) is to make no effort; not to grasp at anything, nor to reject anything; it is to be spontaneous. 'Non-effort' has an important role in the '*Mahāmudrā*' practice; it also presupposes refraining from the tendency to correct the wandering thoughts. The great handicap for the practitioners is said to be constant anxiety about distractions, obstacles and progress in practice. The '*Mahāmudrā*' manuals suggest methods by means of which daily activities can be pressed for meditational ends.

The three (equilibrium, relaxation and spontaneity) together are meant to facilitate the encounter with the 'void' (*śūnyatā*) which is not the negation of existence but empty of discriminating thoughts.

"Like a cloudless sky, the sphere is broad
and free from obstruction,

"Like a waveless ocean, consciousness is
steady, without discriminating thoughts

Like a bright lamp on a windless night
the consciousness is clear, bright and stable."

Lama Kong Ka suggests: "Let the ordinary mind remain in its own natural state. If mind adds or subtracts anything to this, then it is not ordinary mind, but is mind-object (*yul*). The practice correctly make not the slightest intention and effort to practice; and yet not be distracted for a single moment."

4. *Nāropā's* text insists that for effective '*Mahāmudrā*' practice, it is necessary to understand by actual experience how the energy (*prāṇa*), the web of veins through which the energy flows (*nāḍī*), and the psychical collocations (*bindu*) function. Towards this end the yoga of six limbs (*Ṣaḍāṅga-yoga*) is prescribed as the only means of this transcendental attainment (*lokattarasiddher asādhāraṇa-kāraṇam*).

Six-fold Yoga

In the Tantra crystallised by the Siddhas, three yogas are recognised as successive stages: (1) *kriyā-yoga-tantra*, where reliance is almost exclusively on external rituals; the purpose is to cleanse the physical body; (2) *chārya-yoga-tantra* where reliance is equally on external rituals and internal meditations; the purpose is to cleanse the inner constitution dominated by verbalizations; and (3) *Yoga-tantra* - where the reliance is almost exclusively on internal meditations; the purpose is to cleanse the inner constitution dominated by thoughts. The third stage has two phases, the first being penultimate (where meditative stabilisation still depends on external modes) and the second being ultimate (*anuttara-yoga-tantra*), where meditative stabilization is spontaneous and blissful. This stage involves the complete cleansing of body, speech and mind altogether.

The 'six-fold yoga' finds its relevance and fulfilment in the third of the above stages. The six limbs mentioned in *Guhyasamāja tantra* and explained in *Sekoddeśa-tīkā* are named: *pratyāhāra*, *dhyāna*, *prāṇāyāma*, *dhāraṇā*, *anusmṛti* and *samādhi*, in order. The names as well some of the involvements bear correspondence with some of the eight limbs of classical yoga (omitting *yama*, *niyama* and *asana*, and adding *anusmṛti*). But the

correspondence is more superficial than fundamental; the sequence of the limbs is also significantly variant.

(1) *Pratyāhāra* means withdrawal of the sense-functions from their respective spheres both within the body and outside the individual. Concomitantly, it is the turning of thoughts to one's own essential and inalienable nature (*śūnyatā*). It involves the effective suppression of intentionality from transactional consciousness and elimination of subject-object polarity.

(2) *Dhyāna* is intense contemplation on the reflexive image (*bimba*) of the essential and inalienable nature (*śūnyata*). It takes the forms of (a) discussive thinking (*vitarka*) in order to comprehend the true nature of each of body, speech and mind (*guhya-traya*); (b) exploratory thinking (*vichāra*) in order to ascertain the exact nature of all three; (c) mounting pleasurable interest on the cognitive content generated in the previous phase (*prīti* or *rati*); (d) deeping of the pleasurable interest (*sukha*), and (e) one-pointed or unitary consciousness (*eka-chitta*), which results from the entire absence of object-subject coordinates (*grāhya-grāhaka-sūnya-lakshya*).

(3) *Prāṇāyama* is the regulation of breathing in order to integrate the vital energies (*prāṇa*) with the individualised consciousness. It implies the recognition that breath is constituted by the five primary elements (earth, water, fire, air and *ākāśa*). And the practitioner at this stage rejects the right-left polarity of the breathing process (*iḍā-pīṅgalā*, *vāma-dakṣiṇa*, *lalanā-rasanā*, male-female) and allows the vital breath to course right in the variously called *sushumnā*, *avadhūti* and *chāṇḍālī*. The practice of *Vajra-japa* ('Om' while breathing in, 'Hūm' while retaining the breath and 'Āh' while breathing out) is recommended in this context.

(4) *Dhāraṇā* is the stabilization of the energy-loaded consciousness (*niruddham ratnam dhārayet*) in the navel region which is regarded as the centre of individuality, or alternately, in the middle of forehead, which is the centre of cognitive awareness. It is at this stage that *vajra-sattva* enters into the individual, rendering his being stable and irradiant.

(5) *Anusmṛti* is mindfulness concerning the visions or reflex images that flash forth in the region of consciousness (*nimittodgraha*). This is supposed to generate the true understanding of the nature of phenomenal existence (*samvṛti-darśana*).

(6) The final phase of *Samādhi* is actually profound contemplation, from which the liberating knowledge arises. The consummation of this knowledge is the final and irreversible destruction of all veils (*āvaraṇa*) that make the individual ignorant of, and involved in, phenomenal transactions. The individual's consciousness here is no longer discrete states of awareness bound by relationships and harassed by stresses. It is no longer automatic, stereotyped and relational. It is identical with one's own being, and is described as unperishable bliss (*akshara-sukha*).

This is not only the highest object of human existence, but it is the inalienable essence of consciousness. Hence its relevance for the Tantra.

AN ANALYSIS OF SUFFERING

The Indian Tradition describes the Buddha as an advocate of the analytical method (*vaibhajyavādin*), and this description is amply justified by the discourses preserved in the *Pāli* canon. His very first discourse, which was delivered in Banaras, is an excellent specimen of his consummate analytical skill. It is remarkable that this short speech, uttered 2,549 years ago, involves the fundamental principles of axiomatics so familiar to the scientific mind in the contemporary world. Shorn of the ethical and metaphysical ideas that were later read into the simple statements, the discourse formulates certain postulates, derived from observation and experience, and seeks to construct a theoretical structure explaining the interrelationship among the postulates.

It is also remarkable that the Buddha did not stop at mere intellectual edification : his interest was essentially pragmatic. He was moved by compassion for suffering humanity, and was in fact showing a method, a way, for the eradication of suffering. Thus the postulates that he enunciated have an operational aspect: the postulate is not merely a statement of facts but it indicates a necessary operation. The commentators have compared the Buddha's method to the physician's programme; they emphasize that diagnosis of a disease on the basis of symptoms is invariably attended by a prescription for the removal of symptoms. A postulate is thus both factual and functional.

Further, the Buddha carefully avoids impersonal abstraction in the postulates. A postulate, to be significant, must carry conviction concerning the possibility of effective application. The Buddha draws on his own personal experience and introduces a demonstrational aspect in the postulates: had he not himself, by his own effort, experienced the validity of the postulates? He not only understood the truth of the postulates and appreciated the necessity of particular operations with regard to them, but also put to the test in his own life those operations and obtained their fulfilment. He could thus speak with absolute authority about the postulates he had formulated.

In the discourse, he enunciates four postulates: (1) Suffering in life is a fact; (2) it originates under certain conditions; (3) it is eliminated under certain other conditions; and (4) there obtains a method by which it is eliminated. Basing himself on these postulates, the Buddha set out to teach this method for the benefit of mankind. Illustrating the Buddha's design, the second-century author of *Vimuttimaggā* (Upatissa) writes:-

'Just as a skilful physician first sees the symptoms of a disease, then hears the cause of it, and then seeing the necessity of the cure of the disease prescribes a suitable medicine; so the four Truths may be known as coming in the same order.'

It is not surprising that the Buddha is described in the ancient texts not as a philosopher but as a physician: his heart was troubled with the ills that mankind was heir to, and he did not care to theorize about them except insofar as the method of cure required a rational foundation. The

1. Cited in P.V. Bapat : *Vimuttimaggā and Visuddhimaggā* (poona, 1937, p.110)

importance of the Buddha to mankind is exquisitely illustrated by a venerable monk of Thailand:-

‘... the Lord Buddha is like a physician who removes the arrow of doubt. It is as though we have suffered from a disease for many years and have tried many remedies, without success. Then we meet an able physician who tells us that he also used to suffer from the same disease, but by the taking of certain medicines he was cured, and further that he has given the same remedy to many others who suffered from this disease, and they also were cured. He then suggests that we take this medicine...so that we may become completely cured. In such a case, should we not obey him?’²

Having analyzed the problem of suffering in terms of the four postulates, the Buddha subjected each postulate to a further analysis into its triple aspects - factual (*sacca*), functional (*kicca*) and demonstrational (*kata*) - mentioned above. He considered (in the ancient expression “turned over in his mind,” *parivaṭṭa* from the root *vṛt*, “to turn,” “to proceed”) the four postulates in their three aspects, thus obtaining twelve propositions (*ākāras*)³:

- I (1) Suffering in life is a fact.
- (2) Suffering in life as a fact must be understood.
- (3) Suffering in life as a fact was understood (by me).

2. CHAO KHUN UPALI GUNUPAMACARIYA SIRICANDO : “Meditation for calm and insight”, The Middle way, 1961, Vol. XXXV, No.4, pp.127-133.

3. ‘tiparivaṭṭan, dvādasākāraṇam’.

- II (4) Suffering originates under certain conditions,
- (5) The origination of Suffering must be overcome.
- (6) The origination of Suffering was overcome (by me).
- III (7) Suffering is eliminated under certain other conditions.
- (8) The elimination of Suffering must be realized.
- (9) The elimination of Suffering was realized (by me).
- IV (10) There obtains a method by which Suffering is eliminated.
- (11) The method for the elimination of Suffering must be cultivated.
- (12) The method for the elimination of Suffering was cultivated (by me).

It can be seen that each of the four postulates has three aspects, and each aspect, from application to four postulates, has four propositions. In terms of the three aspects, viz., (a) the factual (or the Fact), (b) the functional (or the Task) and (c) the demonstrational (or the Accomplishment), the propositions may be summarized thus :-

- I (a) Suffering (*dukhahm*).
- (b) Suffering to be understood (*pariññeyyam*).
- (c) Suffering understood (*pariññātam*).
- II (a) Origination of Suffering (*dukkhasamudayam*).
- (b) Origination of Suffering to be overcome (*pahātabbam*).
- (c) Origination of Suffering overcome (*pahīnam*).
- III (a) Elimination of Suffering (*dukkhanirodham*).
- (b) Elimination of Suffering to be realized (*sacchikātabbam*).
- (c) Elimination of Suffering realized (*Sacchikatam*).

- IV (a) The method of Elimination (*dukkanirodhagāminīpatipada*).
 (b) The method of Elimination to be cultivated (*bhāvitabbam*).
 (c) The method of Elimination cultivated (*bhāvitam*).

There is an alternate rearrangement of the propositions suggested by the scholiasts, in terms of the three “revolutions in the Master’s mind” (*parivarta*), the same as the aspects:-

- I. The First Revolution (The Facts) :
- (a) Suffering.
 - (b) Origination.
 - (c) Elimination.
 - (d) The Method of Elimination.
- II. The Second Revolution (The Tasks) :
- (a) To be understood.
 - (b) To be overcome.
 - (c) To be realized.
 - (d) To be cultivated.
- III. The Third Revolution (The Accomplishments) :
- (a) Understood.
 - (b) Overcome.
 - (c) Realized.
 - (d) Cultivated.

The Buddha claimed competence to teach this gospel because he had understood what was to be understood, overcome what had to be overcome, realized what was to be realized and cultivated what was to be cultivated - and thus was a Buddha.⁴

1. “Abhiññeyyam abhiññātam, bhāvitabban ca bhāvitam Pahātabbam Pahīnam me, tasmā buddho’smi, brāhmaṇa

Suffering, or rather the removal of Suffering, forms the *leit-motif* of the Buddha's gospel; and it is certainly significant that the very first of his utterances was so thoroughly preoccupied with Suffering. He had no doubt been absolutely emancipated from all Suffering when he obtained the Enlightenment in Gaya; but he was made alive to the phenomenon of Suffering in the world, and he expected every one of his disciples to turn out to be, like himself, an "ender of Suffering."⁵

It was thus but natural that Buddhist thought, at least during its early phases, was concerned primarily with Suffering and its analysis, analysis as preliminary to its removal. The ancient collection of thirty treatises, known as "The Path to Analysis" ("*Paṭisambhīdhāmagga*"), included in *Suttapiṭaka*, takes up the topic (*paṭiniddesa*) of Suffering for definition, description and analysis, closely following the enumeration in the First Discourse.⁶ Each of the four postulates in this account is explained as having four characteristics, thus making sixteen descriptive definitions:-

I. Suffering :

- (a) has the characteristic of being oppressive (*pīḷana*);
- (b) has the characteristic of being generated by a set of conditions (*saṅkhata*);
- (c) has the characteristic of burning up (*santāpa*);
- (d) has the characteristic of incessantly changing (*vipariṇāma*).

II. Origination of Suffering :

- (a) has the characteristic of organizing the predisposing factors (*āyūhaṇa*);

5. Hence his exhortation : Dukkhaṃ antakaro bhava

6. for an exposition of this account, cf. Ledi Sayadaw : Catusaccadīpani, Eng. tr. The Light of the Dhamma (Burma), Vol.5, No.4 and Vol.6, No.1.

- (b) has the characteristic of continuous loading (*nidāṇa*);
- (c) has the characteristic of engendering association with Suffering (*samyoga*);
- (d) has the characteristic of obstructing freedom from Suffering (*palibodha*).

III. Elimination of Suffering:

- (a) has the characteristic of freeing one from Suffering (*nissarṇa*).
- (b) has the characteristic of freeing one from disturbances (*paviveka*);
- (c) has the characteristic of a condition which no longer dissolves or disintegrates (*amata*);
- (d) has the characteristic of not being generated by a set of conditions (*asamkhata*).

IV. The Method of Eliminating Suffering :

- (a) has the characteristic of tending towards freedom from Suffering (*niyyāna*);
- (b) has the characteristic of bringing about the state of *Arahattā* (*hetu*);
- (c) has the characteristic of affording insight into the reality (*dassana*);
- (d) has the characteristic of mastering oneself (*ādhipateyya*).

We see from the above table that Postulate I and Postulate III refer to exactly opposite phenomena; and Postulate II and Postulate IV refer to exactly opposite processes. Postulates I and II pertain to the actual world of common human beings; whereas Postulates III and IV envisage a possibility, an ideal state. Postulate I is necessarily implied in the rationale

of every Indian religious system or philosophical discipline; and Postulate III is the goal of all religious life in India; at any rate it is the ideal held out by the *Upaniṣads* and in the Jaina system. These two postulates in fact belong to the pre-Buddhist tradition, and the Master had already absorbed them during his *pre-bodhi* days. Postulates II and IV represent the Buddha's original contribution to Indian culture, the former being his philosophical standpoint and the latter his religious system.

It is significant that in this ancient axiomatics, happiness (*sukha*) is not mentioned as an opposite of Suffering or as an ideal state for aspiration. In the Buddha's scheme of analysis, happiness is not a reality at all: Suffering is the reality, but when it is eliminated we find quiet, wisdom and freedom as positive gains - and not happiness. Postulate III, which refers to the precise opposite of Suffering, is said to be equivalent to *Nibbāṇa*, and its characteristic is described as "Quiet" (*santi*).⁷ The Buddha's ideology recognizes only the elimination of Suffering, and not the generation of happiness here or hereafter.

What, now, is Suffering? It is a phenomenon which is universal in its occurrence (*sabbasattasādharaṇa*), and is readily identifiable (*suviññeyya*) by its characteristic of causing discomfort, trouble (*bādhana*). It is felt as "burning heat" (*santāpana*) and it excites the organism to activity (*pavatti*). The mediaeval scholiast, Buddhaghosa, derives the Indian word for Suffering, *dukkha*, from two concepts: bad (*kucchita*) and vulgar (*tuccha*). The ancient expositions liken Suffering to "burden," to "disease." The First Discourse itself offers illustrations: the process of being born, getting old and worn

7. Buddhaghosa : Visuddhimagga (Ed. D. Kosambi), 16, 66 (P. 355)

out, decay and death, illness, association with the undesirable, dissociation from the desired, failure to obtain the aspired object. These are included in the category of "Objective Suffering" (*vatthudukkha*), while the category of "Subjective Suffering" (*sabhāvadukkha*) includes feelings of misery, agitation, moods of depression and so on.⁸ In any case, Suffering is natural to beings as well as thoroughly undesirable.

Origination is defined by the eminent Burmese scholar-monk, Ledi Sayadaw, as "the cause of ever continuing this psychophysical process of experience"⁹; and it is equated with craving (*taṇhā*), which is recurrent. Craving is the deep-seated organismic urge expressing itself as predisposing tendencies and instincts. Its essential characteristic is "production" (*pabhava*) of conditions and states, which tend to form unbroken series (*anupaccheda*). It is unitary as "egoity" (*abhimāna*) but assumes a threefold form as attachment-aversion-ignorance. The ancient expositions liken origination to "the taking up of a burden" or "the cause of a disease."

Elimination of Suffering has the character of "quiet" (*santi*) and is tantamount to *Nibbāna*. The word for elimination (*nirodha*) is explained by Buddhaghosa as "the absence of the flood (*rodha*) of Suffering"; it is cessation (*atthagama*), detachment (*virāga*), freedom from craving (*mutti*) and getting uprooted from the normal world of craving and Suffering (*anālayo*). This state is likened to "putting down the burden" or to "the cure of the disease." But is this merely a happy dream of a desolate soul? Is it unreal like the horns of a hare? It is of course not a reality for the

8. cf. Upatissa : *Vimuttimaggā*, 6.2 (Bapat, Op. cit)

9. Op. cit.

worldlings; but it becomes a reality when one undertakes to shake off the Suffering, understand the Origination, appreciate the Elimination and apply oneself to the Method. The Method is what leads to an expected end (*niyyāna*); and it is likened to “the technique of putting down the burden” or to “the therapeutics.”

MENTAL HEALTH IN AYURVEDA

INTRODUCTION

The treatises (known as *Samhitas*) ascribed to Charaka and Sushruta, are of great antiquity. They were, in their original form, composed centuries prior to the Christian era, although they have since been redacted and revised. They contain a wealth of information pertaining practically to all aspects of health and medicare; and their relevance has not diminished during the passage of time. A study of these texts will help reconstruct the traditional Indian approach to the problems of health and disease.

The outlook encouraged by these texts is truly holistic. Man is regarded here as a total, indivisible organism, interacting totally with the environment, which is also an organization of impacts and inputs so far as the organism is concerned. The encounter results in the functional and emergent phenomenon known as "Life" ('ayus' in Sanskrit), a holistic expression signifying an ongoing process. Indian medicine focusses its attention on maintaining this "life" enhancing its quality and effectiveness, and preserving it from forces that seek to disturb it. It is therefore called 'Ayurveda'.

It is important to recognize that ayurveda is not merely a medical system: it deals with the entirety of 'life' with health and disease as aspects of 'life'. It, therefore, seeks to study health primarily, and to deliberate on the techniques of maintaining it, preventing its disturbance and enhancing its quality; disease is looked upon as something that interferes with the normal (normal to the individual) fulfilment of the four-fold values of 'life' viz., satisfactory familiar and corporate living (dharma), happiness of all sorts which is permissible and acceptable (karma), material possessions

(wealth) to contribute to reasonable ease and comfort (artha) and individual urge towards meaningful living (apavarga).

Disease is looked upon as one, regardless of where it manifests itself and how. It is recognized as what the fulfilment of the "values of life" difficult or impossible. The body and mind are equally involved in it. Ayurveda not only takes into account the mental involvement in everyone of the diseases it deals with, but emphasises the correct attitudes of the mind as responsible for complete and quick cure of any disease. Consider, for instance, counsels like 'there can be no medicine more effective than courage, in one who is afflicted with disease' (*vyādhī-grastasya na dhairyad rte param aushadham asti*).

This outlook of Ayurveda makes it extremely significant in the modern context. Ayurveda can proffer interesting insights into the problems of total health and the disturbing character of disease. It must be noted that Ayurveda even as a system of medicare did not develop haphazardly out of stray laboratory findings, occasional drug discoveries and sporadic technological improvements. It had a coherent and comprehensive philosophy (viz., *Sāṃkhya*) in its background, and every procedure and thought-complex in Ayurveda stems directly from this world-view, which is at once wholesome and humanistic. Ayurveda fell on evil days when its growth lost this belongingness to systemic thinking, instead of the original holistic approach that fragmented and drug-oriented therapeutics began to dominate. This was how the problem of mental health was lost sight of in the Ayurvedic field.

It is being increasingly realized that modern medicine which is essentially a creature of the Cartesian dichotomy of body and mind needs

to alter its approach and look upon man as a total individual in health or in sickness. To help modern medicine break-through the impasse that now confronts it, Ayurveda may shed valuable light and provide insights of far-reaching importance.

It is with this hope that we planned to produce and bring out a source book of passages in English translation relevant to mental health and hygiene and selected from the two classical texts *Charaka-Samhita* and *Susruta-Samhita*. In order to facilitate ready edification by the workers in the area of mental health, the scheme of selecting the relevant passages was adopted from the model of present day textbooks (which model, it must be conceded, is rather alien to classical Ayurvedic writings). We confess this is a limitation, and the book would be in the nature of an artificial and truncated presentation of Ayurvedic ideas of mental health, giving an undue significance occasionally to diseases and drugs. But this had to be so, to serve the purpose for which it was meant; to help medicare personnel trained along modern lines to acquaint themselves briefly with Ayurvedic parallels and observations.

It was originally intended to give the original passages in Sanskrit, followed by translations in English. This idea, however, was later given up, for those to whom the Sanskrit originals, would have an advantage were few, and for the large majority of the prospective readers and users of this source book English translations alone would be meaningful. It has been planned to bring out a companion volume shortly containing the original passages with commentarial notes from the two treatises. The present publication, however, includes references (chapter and verse) to the textual passages in every case.

The selection of the passages and the translations have been done keeping the modern medical student in view. The source book confines its attention to those passages which have a direct bearing on the problems of mental health and hygiene. For the same reason, an account of the philosophical background and an account of the prevailing holistic approach have been avoided, although they would have made explicit the context in which health is general and mental health in particular has been viewed in Ayurveda. It is hoped that the present publication would generate sufficient interest among the open-minded specialists in mental health, to occasion and justify further publications which would deal with the subject matter in greater depth and elaboration.

It was the sustained interest of Dr. G.N. Narayana Reddy, the then Director of NIMHANS, that made this work and publication possible; although a super-specialist, he has wisdom to appreciate the holistic import and to recognize dimensions other than the purely empirical and transactional. Of the many valuable academic programmes that he sponsored during his tenure as Director, the project of producing a source-book which would illustrate the traditional Indian viewpoint was one. I congratulate him on the successful completion of the project, and the publication which has made possible.

I am indebted to the senior Ayurvedic physician and scholar of repute, Dr. M. Mahadeva Sastry for having readily responded to my request to help us in the project. My son, Dr. S.R. Sudarshan, who is also an Ayurvedic physician has rendered assistance in the finalization of the manuscript for the press. I must acknowledge the cooperation that Mr. N. Gopalakrishna, Assistant Editor, NIMHANS gave me during the course of this publication.

- S.K. Ramachandra Rao

MENTAL HEALTH IN AYURVEDA

Health is the basis of virtue (*Dharma*), wealth (*Artha*), desires (*Kama*) and emancipation (*Moksha*).

(Cha. Su. 1-15, 17)

Diseases, on the other hand, are obstacles to health and virtuous life. The sages, desirous of removing the obstacles to man's welfare, meditated for long and found solace in **Lord Indra**.

Dharma is that which supports man. *Dharma* which is associated with the soul can be inferred from the perception of actions. *Artha* is the attainment of wealth like gold etc. *Kāma* is the fulfilment of desires such as embracing women etc. *Moksha* is the liberation from the fetters of this world. Health is nothing other than a balanced condition of dhatus (the sustaining components of the body) represented by the absence of diseases. Health is the main requirement for fulfilment of these four objectives of human life. A diseased person is incapable of fulfilling any of these four objectives of life is something which is positive. In all beings, there is present an innate desire to live. Even loss of happiness and presence of distress cannot extinguish this desire. The attempts to commit suicide by some persons in distress, in an ultimate analysis amounts to getting rid of the unfavourable condition of life rather than of life itself.

Indira bestowed upon them the knowledge of etiology, symptomatology and therapeutics, the tripartite knowledge essential to both the healthy and the ailing.

(Cha. Su. 1-24)

The verse presents in a nutshell the scope of Ayurveda. Etiology here refers to the immediate and distant causes of diseases. The symptomatology includes all the characteristics of diseases and health. The therapeutics include wholesome diet and regimen.

Ayurveda is that branch of knowledge wherein are described:

1. The characteristics of desirable and undesirable life, happy and unhappy life.
2. Those factors which provide furtherance or hindrance to these four kinds of life and
3. Life itself.

(Cha. Su. 1-41)

Life is of four types viz. *Hita* (useful), *Ahita* (harmful), *Sukha* (happy) and *Dukha* (misery). Ayurveda deals with all these four kinds of life, its wholesome and unwholesome habits, or its span and the description of life itself.

Thus, broadly speaking, Ayurveda is nothing other than knowledge of life.

The configuration of body, the senses, the mind and the consciousness is spoken of as *Ayus* or the life span which has the synonyms nourisher, animation, the transient and the link (between the past and present and the future lives).

(Cha. Su. 1-42)

The body is made up of the five *Mahabhutas* and serves as an abode for the enjoyment and suffering of the soul. The senses are the visual sense

etc. The *satwa* is the mind and the *Atma* is the bearer of knowledge. All these are combined in a meaningful way. Although this combination is transient because of the body being momentary, still this is taken as a single continuum. The synonyms have been given here in order to explain two important aspects of life viz., its permanency in spite of the body being momentary and its transmigratory faculty.

According to another definition, life is a continuity of consciousness. But in essence, life is nothing except the combination of the body, the sense organs, the mind and the soul. The continuity of consciousness follows this combination. As soon as this combination is lost, life ceases to exist.

Mind, Soul and the Body - these three constitute a tripod, upon the meaningful combination of which the world is sustained. They constitute the substratum for everything which is endowed with life. This (combination of the above three) is *Purusha* who is sentient and who is the subject matter for this science. It is for this, that Ayurveda has been brought to light.

(Cha. Su. 1-46 47)

In the above verses, the subject matter for this science is being enunciated. The entire worldly life depends on the proper combination of body, mind and soul. This combination is likened to a tripod. A tripod can sustain itself as long as none of its three constituents is disturbed. This is common to every sentient being.

The sense faculties along with their objects are included under Body; *Buddhi* and *Ahamkara* are included under soul. The mind occupies a primary position as all the activities relating to the body are controlled by it.

The totality of substance is composed of *mahabhutas*, soul, mind, time and space. Animate substances possess same faculties, whereas inanimate substances are devoid of them.

(Cha. Su. 1-4-8)

Although it is the soul and not the mind or body which is endowed with that which we call life, consciousness manifests only when combined with mind and body. This view can be illustrated with the example of hot water. The truth it is not water that is hot, but the principle of fire which is in combination with water that is hot.

Under the heading of the living matter is found the vegetable kingdom also. The movement of the plants towards the sun etc. shows that even the plants are endowed with the sense faculties, but in a less manifest form.

The body and the mind are the abodes of diseases as well as health. Proper body-mind interaction is the cause for happiness.

(Cha. Su. 1-55)

The mind and body are the abodes of diseases and health both singly and jointly. Thus leprosy is mainly physical, passion is mainly mental and insanity is both physical and mental malady. In several contexts, health is referred to as happiness.

(Cha. Su. 1-56)

Paramatma is immutable, and is the source of consciousness only when united with the mind, sense-objects and sense-faculties. It is eternal and is the witnesser of all our actions.

(Cha. Su. 1-56)

In the preceding verse, mind and body are described as being the abodes of health and disease. The soul is however not subject to pathogenesis. It is only when the soul is associated with the body or mind, it can be diseased or healthy. The soul causes consciousness (life) through the agency of the mind, the specific qualities of the five elements (*Mahabhutas*) and sense organs. When this agency is not present, life (consciousness) is not manifested.

The soul is eternal, but it does not necessarily follow that the consciousness caused by it is also eternal. The soul observes all activities. So it is simply an observer. The soul is detached from whatever happiness or misery is found in the mind and body.

Activity and delusion are the pathogenic causes in the mind. *Vata*, *Pitta* and *Kapha* are the pathogenic factors in the body.

(Cha. Su. 1-57)

Of the three attributes of mind viz., *satwa*, *rajas* and *tamas*, it is only the latter two that cause diseases in it *satwa* being nonpathogenic. *Rajas* has been mentioned first because, *tamas* cannot manifest its character without *rajas* (which is the cause of all activities).

Mental afflictions are to be treated with (tact) knowledge about self, knowledge about the sciences, fortitude, memory and concentration (*samadhi*).

(Cha. Su. 1-58)

Fortitude is non-yielding of mind. Memory is recollection of experiences earlier had. Concentration is the regulation of the mind in the self after withdrawing it from the sense object.

In the interests of one's present and future welfare, urges and impulses which lead to rash and unwholesome actions of mind, speech and body should be forcibly suppressed.

(Cha. Su. 7-26)

There are some urges which have to be restrained or suppressed. These include the urge for rash action (such as running towards a wild elephant) and the urge for doing evil deeds.

The wise man should restrain his impulses or greed, grief, fear, anger, vanity, shamelessness, jealousy, lust and malice.

(Cha. Su. 7-27)

The evil impulses relating to the mind have been enumerated. By greed is meant an abnormal or excess desire for any object. Grief is that emotion felt at the death of a son etc. Fear is that emotion felt when one sees a danger to life. Anger is the intense hatred by which a man feels as if burning. Vanity is a feeling of superiority born out of imputing to oneself good qualities which one does not possess. The desire to conceal bad qualities is shame. Absence of that is shamelessness. Jealousy is the desire to prevent another person from obtaining excess of something which is common to both. Lust is an excess desire to indulge in an object even if it is proper. Malice is the desire to do harm to others.

Harsh, biting, untimely and excess speech, and falsehood should be avoided.

(Cha. Su. 7-28)

Here the evil impulses relating to speech have been enumerated.

Impulses which cause physical activities injurious to others such as adultery, theft, violence, etc. should be checked.

(Cha. Su. 7-29)

The evil bodily impulses or urges have been enumerated in the above verse.

The man who is free from misconduct of mind, speech and body, enjoys the fruits of righteousness, wealth, sensual desires and acquires the spiritual merit.

(Cha. Su. 7-30)

Jealousy, grief, anger, vanity, hatred, etc. are mental disorders resulting from errors of judgement. Avoiding errors of judgement, restricting sense faculties, recollection (of good advice), knowledge of place, time and one's capacity, good conduct, knowledge of authoritative instruction and its proper application are necessary for prevention and cure of diseases.

The restraint of sense organs implies abstinence from indulgence in their objects. Good memory includes memory relating to morality of one's kith and kin, as well as other human beings. It is also said that one can rid oneself of mental ailments by recollecting the exact nature of objects. Thus restraint of sense organs and a good memory go a long way in preventing mental diseases.

(Cha. Su. 7-52, 53, 55)

Authoritative sages are those enlightened human beings who are free from attachment and prejudices. Diseases can be best prevented by avoiding the causative factors. Diseases already manifested can be cured by following the prescribed regimen and diet.

The mind which is beyond the reach of the sense-faculties is referred to as *satva*; some others call it *chetas*. The action of mind is determined by its contact with its action and soul. The mind controls the functions of sense-faculties.

(Cha. Su. 8-4)

Mind transcends all the sense faculties which are responsible for the perception of external objects. Although mind is to be regarded as a sense faculty as it experiences happiness etc., still it is beyond the other sense faculties. It is therefore to be regarded as the controller of all the five sense faculties and the mind is much more subtle than them.

The synonyms of mind have been mentioned for facilitating better understanding. Mind is called *satwa* because it perceives objects. Some people call it *chetas*. It is the soul which is mainly responsible for the experience of happiness. To be explicit it is only when the objects etc. are present and the soul is active, that the mind motivates the sense faculties to cognise successfully.

In one and the same individual the mind appears to be multiple in character due to variations relating to the experience of its objects, perceptions of the sense faculties, its disposition and also its contact with *rajas*, *tamas* and *satwa*. But strictly speaking, there is no multiplicity of mind. It is one and only one. So it does not motivate more than one sense faculty at a time and that is why all the sense organs are not active simultaneously.

(Cha. Su. 8-5)

The mind acts in many ways. It experiences happiness sometimes and at other times it experiences misery. It motivates the sense-faculties in

various ways. It takes various forms due to its contact with *satwa*, *rajas* and *tamas*. Thus if the mind is dominated by *rajas* it experiences the feeling of anger. If by *tamas* it experiences the feeling of ignorance and if by *satwa*, it inclines towards cleanliness and truth. Do not all these facts show the multiplicity of mind. They do not. The mind only appears to be multiple. In truth it is one and only one in number and infinitesimal in size.

One may argue that very often sense faculties are seen to be active simultaneously. But the truth is that all the sense faculties are only apparently active at the same time. In reality they are active in a consecutive order. This order is much too subtle to perceive. An illustrative analogy can be given. A needle appears to simultaneously pierce a hundred lotus leaves placed one over the other. This is obviously an impossible feat. The simultaneous piercing is only apparent.

Man is said to be of that mentality depending upon the predominant traits which are frequently seen in him.

(Cha. Su. 8-6)

How can an individual be known as *satwika*, *rajasa* or *tamasa*, since the mental traits shown by a man are all too diverse. The rejoinder to such a query is that every man possesses a quality which is predominant. The predominancy can be judged by the frequency of the manifestation of the quality. Thus if a man frequently displays the quality of *satwa* in his actions, he will be known to be a man of *satwika* nature in whom the *rajas* and the *tamas* are subdued.

Sense-faculties can perceive their respective objects only when prompted by the mind.

(Cha. Su. 8-7)

Sight, hearing, smell, taste and touch are the five sense faculties.

(Cha. Su. 8-8)

The sense materials are the material constituents which are predominantly responsible for the creation of the respective sense faculties. The sense materials are five namely space, air, light, water and earth.

(Cha. Su. 8-9)

The sense organs are five namely eyes, ears, nose, tongue and skin.

(Cha. Su. 8-10)

The sense organs serve as receptacles for the sense faculties. Thus the eyes serve as a receptacle for the sense faculty namely, vision.

The sense objects are sound, touch, shape, taste and smell.

(Cha. Su. 8-11)

Perception of a tactile object is a series of changes that are occasioned by the contact of skin and the object which is tactile. This is so with regard to the other sense perceptions.

Perception results due to the coordination of sense faculties, its objects, mind and soul. Such a perception is momentary and decisive.

(Cha. Su. 8-12)

The sense awareness is caused by a distinctive sense activity. By the distinctive activity of the visual apparatus, the visual awareness is acquired. The same is the case with all other sense awareness. Of all other sense awareness the visual one occupies the prime position on account of its widest distribution.

A question may now be asked - how is sense awareness produced? They are produced by the conjunction between the sense faculties, their objects, the mind and soul . The conjunction may be mere contact or inseparable concomitance (cohesion). Thus in the auditory awareness, the auditory faculty and the sound have a connection of an inseparable cohesion.

These awareness are momentary but not in the sense of momentariness propounded by the Buddhists.

The mind and its objects, awareness and the soul constitute the intra personal elements. Their aggregate is the source for activities which may be good or bad (auspicious or inauspicious).

(Cha. Su. 8-13)

The mind has the main function of reflection (on the good and bad of things). By awareness is meant the awareness of the mind and not sense awareness. The intrapersonal elements are those which are intimately concerned with the person. The blending of these elements in a fit manner causes happiness, on the contrary, improper blending is the cause for distress. Improper activity is the result of disuse, overuse or misuse of these elements.

The five sense organs which are only to be inferred are composed of the five basic elements, with each elements predominant in each organ. The sense faculties perceive only such of the object as are dominated by the basic element constituting the faculties. This is because the very nature of sense faculties is determined by the particular element it is specially made up of.

(Cha. Su. 8-14)

All the sense organs are made up of all the five basic elements. But each sense faculty is dominated by one basic element. For e.g.. The visual sense faculty is dominated by *tejas* and as such it is known as *taijaseya*. Such is the case with other sense faculties also.

The sense faculties can perceive only such of the objects as have the same qualities. For instance the visual sense faculty which is dominated by *tejas* can apprehend only an object which is also dominated by *tejas*.

The sense faculties along with the mind get vitiated by excess utilization, non-utilization, and wrong utilization of the objects concerned and result in the impairment of awareness of the objects in the respective objects areas. On the other hand, correct contact conduces to the enhancement of correct awareness.

(Cha. Su. 8-15)

The causes for successful or unsuccessful activity of the sense faculty have been explained in the above verse. The sense faculties get vitiated by the excess, non or wrong utilisation of the respective and thus in turn disturb the normal activity of the mind. Thus the awareness to the respective objects is impaired. The awareness is properly regulated by the normal utilisation of the object of the sense faculties.

The object of mind is deliberation. Right perception of the object causes correct awareness, whereas excessive, deficient and erroneous perceptions cause the disorder of the mind and wrong awareness.

(Cha. Su. 8-16)

The deliberation of mind is altogether independent of the sense faculties. The mind gets vitiated by non-deliberation, excessive deliberation

or wrong deliberation about its objects. Because of this the mental awareness is also disturbed.

Normalcy of the body and sense faculties can be achieved and maintained by the application of the following methods.

(Cha. Su. 8-17)

(1) Proper contact of sense faculties and their respective objects and the proper performance of actions after intelligent and repeated scrutiny, and (2) resorting to the use of factors which can counteract the prevailing conditions of region, season (time) and one's own constitution.

Therefore, all persons who desire health and happiness should follow with dedication the rules of good conduct.

The normal condition of the sense faculties and the mind can be maintained by certain therapeutic devices. The proper performance of actions can be done by following such procedures that are beneficial to oneself and by avoiding those that are harmful. By such actions, which check the violational transgression, normality is assured. The use of factors which can counteract the prevailing conditions of region, season (time) and one's own constitution can cure the diseased condition which has already been created. Positive health can, therefore, be maintained by due performance of acts as prescribed in the texts of Ayurveda.

By following these rules one achieves both good health and mastery over the senses.

(Cha. Su. 8-18)

The rules of good conduct which every person desirous of health and mastery over the senses should endeavour to follow are described below: One should cultivate a smiling face and a modest, tolerant, enthusiastic, truthful, friendly and noble disposition; one should have recourse to measured, timely, pleasant and beneficial speech; one should be courageous, self-controlled and well mannered; one should be hospitable, respectful towards teachers and elders, sympathetic towards the frightened, merciful towards the poor, and compassionate towards animals; one should also be free from anger and passion.

(Cha. Su. 8-18)

One should never speak falsehood, covet the belongings of others, rejoice in vengeance, be vicious towards the wicked, betray the secrets of others and mingle with persons who are arrogant, impious, mean, wicked and deprived.

(Cha. Su. 8-19)

Telling a lie is forbidden only when it involves causing danger to living beings. If one can save a life by telling a lie, it is not to be treated as a sinful act.

No man should succumb to the temptations of the mind and senses. One should also refrain from placing too heavy a burden on the senses or intellect.

(Cha. Su. 8-27)

A person should avoid gazing long at stars, undesirable and unbearable sights; and treading on sacred or unclean objects. One should not treat with disrespect a dead body.

(Cha. Su. 8-19)

One must not give room to excess of joy or sorrow, arrogance and depression. One should not be faint-hearted but should maintain tranquility even in misfortune.

(Cha.Su.8-27)

One should be devoted to bramacharya, knowledge, charity, friendliness, kindness, joy, impartiality and peace.

(Cha. Su. 8-29)

Harmony of the sustaining elements of the body is health, while disharmony is disease. Health is also known as happiness, while desire is distress.

(Cha. Su.9-4)

The supporting elements include *vata*, *pitta* and *kapha*. Any deficiency or excess in the elements serves as the causes for diseases. Disease is the cause for misery. Misery alone is not disease. There are certain diseases (eg. a mole) which do not cause bodily distress. But they are regarded as diseases since they cause mental distress.

A person who possesses unimpaired intelligence, understanding, energy and enterprise, and who wishes to secure good in this world and the hereafter should follow three pursuits, viz. pursuit of life, pursuit of wealth and pursuit of the transcendental values.

(Cha. Su. 11-3)

Strength is of three kinds-constitutional, periodic and acquired. Constitutional strength is inherited and it is the natural strength of body and mind. Periodic strength is according to seasonal condition and age. Acquired one is the strength got from food and physical culture.

(Cha. Su. 11-36)

The strength of mind includes enthusiasm also.

There are three causative factors for disease. They are overuse, misuse and disuse of : (1) Sense objects (2) Activity and (3) Season.

(Cha.Su.11-37)

Sight:

- * Over use - gazing inordinately at very bright objects
- * disuse - not using the eye at all.
- * misuse - to look at objects either too close or too remote; sights which are frightful, terrible, prodigious, hateful, unusual and alarming sights.

Hearing :

- Overuse - loud thunder, noise or beating drums etc.
- Disuse - not to hear at all
- Misuse
- Misuse - Putrid, hateful, dirty, rotting, poisonous and cadaverous odours.

Tasting :

- * Overuse - indulging inordinately in any taste.
- * Disuse - not tasting anything.
- * Misuse - wrong diet regimen.

Sensing touch :

- * Overuse - indulging in extreme cold and heat, too much bathing, oil-massage, rubbing, etc.
- * Misuse - Application of cold and hot application without correct sequence; contact of the skin to pressure on uneven surfaces, trauma, uncleaning things and evil spirits.

The wholesome and unwholesome stimulations of the senses have their effect on the mind and its faculties both directly and indirectly. Environmental pollution of air, water, land and time affect the community as a whole. (See Viman/ch. III). Pollution of each must be eradicated to prevent disease. So far as the sense stimulation is concerned each stimulus affects the minimum or maximum ability of the corresponding sense organ to sustain it. The stimuli may be below the minimum or above the maximum limits of the particular sense faculty. Abstinence from using any sense-faculty for long leads to the degeneration of that faculty. All these are errors of judgement adversely affecting normal health of the individual. The examples given above are only general. They can be interpreted in accordance with the living conditions of all places for all times. Looking at the electric welding arc, directly gazing at the sun loud noises etc. are injurious to the sense faculties. Such hazards may cause temporary or permanent disability to use the faculty of the individual.

Action here stands for the activities of body, mind and speech. Season stands for winter, rainy and summer. Very bright objects are those like the sun and the fire which cannot be seen with ease. There will be no overuse if one gazes at a picture etc. which are not too dazzling. Looking at tiny objects does not come under disuse.

The objects that terrify human beings need not necessarily be the direct objects of visual sensation.

The sharp smell is the one that causes lacrimation. Tastes are included in the substances containing them.

The tactile sense faculty pervades all the other sense faculties and is inseparably united with the mind. Thus the unwholesome contact of any sense faculty with its object is primarily dependent on the sense of touch.

(Cha. Su. 11-38)

Even though there are five sense organs with the corresponding objects of theirs, there is only one sense faculty viz. the tactile faculty which pervades all the sense organs. No sensation can occur without the sense of touch and this in turn is experienced only in the presence of mind.

So a wise person, if he finds himself afflicted with mental diseases, should carefully examine the things which are beneficial and non-beneficial to himself. He should restrain from following a course of conduct which is not beneficial for the attainment of virtue, wealth and desire and follow a course of conduct which assists him in the attainment of these three basic objectives. This is because no happiness or distress can occur in this world without the three elements of virtue, wealth and desire. Hence, one should serve persons who are well-versed in the knowledge of good and the bad. One should also strive to attain knowledge pertaining to the self, the place, family, time, strength and capacity.

(Cha. Su. 11-46)

The treatment for mental diseases has been explained in brief. The above line of conduct is indicated even for those persons who are suffering from somatic diseases.

The knowledge of the self can be acquired by the afflicted person posing a few questions to himself such as - 'who am I' and what is conducive to my health' and so on. Similarly the knowledge about the place implies

the knowledge of the locality and the propriety of regimen prescribed for the local conditions.

The remedy for psychic disorder consists in achieving the three objectives of life, serving the learned, acquisition of knowledge of one's self etc.

(Cha. Su. 11-47)

The three objectives of life are *dharma* (virtue), *artha* (wealth) and *kama* (desire) as already explained.

Vata restrains and impels the mind. It coordinates all the faculties and helps in enjoyment of their objects. It prompts speech. It is the source of auditory and active senses, the origin of all excitement and enthusiasm. Aggravation of *vayu* depresses the mind and impairs all the senses. Aggravation of *vayu* also gives rise to fear, grief, stupefaction, depression of sprits, delirium and obstruction to vital function.

(Cha. Su. 12-8)

Most of the qualities attributed to *vata* in the above verse can be inferred. *Vata* restrains the mind from unwholesome objects and impels it towards wholesome ones.

Pitta is the representative of *agni* in the human body. Its normal and abnormal states give rise to digestion or indigestion. Normal or abnormal vision, normal or abnormal complexion, valour, fear, anger, elation, clarity, delusion etc.

(Cha. Su. 12-11)

The emotions of fear and valour are caused by *sadhaka pitta*, the seat of which is the heart.

Sleshma in its normal and abnormal condition causes stability or stability or weakness, growth or emaciation, vigour or lethargy, virility or impotency, knowledge or ignorance, intelligence or delusion etc.

(Cha. Su. 12-12)

If oleation therapy is administrated during the day time in summer or to patients suffering from diseases dominated by vitiated vata or pitta, it may cause fainting, thirst, jaundice or mental disturbances.

(Cha. Su. 13-20)

If oleation therapy is administrated to a patient suffering from a disease dominated by vitiated *kapha*, even then diseases will be caused.

Clarity of understanding, clearness of sense organs and mind... are the signs of right purgation.

(Cha. Su. 16-5-6)

'Head' within which all the sense faculties are situated is truly the most important of all the organs.

(Cha. Su. 17-21)

When the mind is overcome by fatigue, and when the cognitive sense organs withdraw from their objects an individual is said to sleep.

(Cha. Su. 21-35)

When the word mind is used, it is taken for granted that it is in contact with the soul. Thus when the mind (along with the soul) gets exhausted

and the sense faculties become inactive, then the person is said to be sleeping. The withdrawal of the sense faculties from their organs implies that the sense organs are inactive. Sleep is nothing but the location of the mind in a place which is unconnected with the sense faculties. The action of individuals is dependent on that of the mind, so when mind dissociates itself from its objects, individuals also dissociate themselves from their objects.

Happiness and sorrow, growth and emaciation, strength and weakness, virility and impotence, knowledge and ignorance, life and its cessation depend on sleep. Untimely sleep, oversleep or loss of sleep take away one's life and happiness like the night of destruction.

(*Cha. Su. 21-36-37*)

Weakness of the auditory function, insanity, delirium, chest pain etc. are caused by over depletion of nutrients.

(*Cha. Su. 23-28*)

Lethargy, irritability, delusion and such other disorders are caused by vitiation of blood.

(*Cha. Su. 24-24*)

The *doshas* provoked by improper diet, of a person whose mind is enveloped by ignorance and passion, afflict the channels of blood, nutrient fluid and sensation, and cause various disorders such as intoxication, fainting and coma. From the point of view of aetiology, symptomatology and treatment, intoxication is less serious than fainting, and fainting is less serious than coma.

(*Cha. Su. 24, 25-29*)

The provoked *vata* afflicts the mind that has become weakened, and causes *vataja* kind of intoxication.

(Cha. Su. 24-30)

The person whose speech is wrathful and harsh, who likes fighting and picking up quarrels and who is of red, yellow or of dark complexion, is to be regarded as affected by intoxication of the *pitta* type.

Similarly, *pitta* or *kapha* also distracts a man's mind causing excitement. Their special characteristics will now be explained.

(Cha. Su. 24-32)

The person whose speech is indistinct, excessive and fast, who makes unstable and incoordinated movement and whose appearance is dry, dusky or red should be known as suffering from intoxication of the *vata* type.

(Cha. Su. 24-33)

A person whose speech is scanty, incoherent or irrelevant, who is lethargic and indolent and who is pale of complexion and is unoccupied must be known as suffering from intoxication of *kapha* type. All these symptoms appear together in the condition of intoxication caused by all three *doshas*.

(Cha. Su. 24-34)

The characteristic of the intoxication is that it rises and abates quickly and resembles the intoxication due to alcohol. The condition of intoxication which are produced from alcohol as well as those resulting from poison and toxic condition of the blood do not occur without the preceding disharmony of *vata*, *pitta* and *kapha*.

He whose fainting is brought about by *vayu*, sees space as being blue or black or red (aura) before fainting and awakens from it quickly. He suffers from tremors, pain in the limbs and severe pain in the cardiac region and is emaciated and is of dusky or red complexion.

(Cha. Su. 24-36)

In fainting caused by *pitta*, the patient perceives an aura of red, green or yellow colour. There is copious perspiration after the patient regains consciousness. The patient also experiences thirst, burning sensation all over the body, and anxiety. His eyes are bloodshot, the stools and complexion are yellow in colour.

(Cha. Su. 24, 37-38)

In fainting caused by *kapha*, the patient experiences an aura which is dark and cloudy. The patient regains consciousness after a long time. Symptoms such as heaviness of the body, clamminess of the skin and hyper salivation may also be present.

(Cha. Su. 24-39, 40)

In the *sannipata* type of fainting there are all the symptoms of the three vitiated *doshas* thus resembling epileptic fit without the fearful convulsions.

(Cha. Su. 24-41)

Intoxication and fainting subside after the vigour of *doshas* is spent. But that is not the case in *sanyasa* coma, which is cured only if treated with medicines.

(Cha. Su. 24-42)

The *doshas* if severely provoked afflict the heart of the weakened individual, affecting the actions of speech, mind and body, and later bringing about total loss of consciousness.

(Cha. Su. 24-43, 53)

Purusha is considered as an aggregate of the soul, sense faculties, mind and the sense objects.

(Cha. Su. 25-9)

The soul alone collects and enjoys the actions and their results respectively. Happiness and misery cannot occur without the soul.

(Cha. Su. 25-9)

Mind which is enveloped by passion and ignorance is the proximate cause for diseases.

(Cha. Su. 25-11)

There are five kinds of insanity namely *vata*, *pitta*, *kapha*, *sannipata* and exogenous.

(Cha. Ni. 7-3)

The four kinds of insanity caused by the vitiation of the *doshas* manifest themselves rapidly in the following circumstances:

1. When an individual is timid.
2. When he is mentally agitated.
3. When the *doshas* in his body are aggravated and vitiated.
4. When he partakes food consisting of unwholesome and unclean ingredients, possessing mutually contradictory properties, or

which is touched by the unclean hands of person suffering from diseases or when he neglects the prescribed dietic rules.

5. When he resorts to such regimens which are not conducive to health.
6. When his body is greatly emaciated.
7. When he is suffering from any other diseases.
8. When his mind is constantly afflicted by passion, hatred, anger, greed, excitement, fear, attachment, exertion, anxiety and grief and when he is subject to excessive physical assault.

(Cha. Ni. 7-4)

In these circumstances, the mind gets seriously affected and awareness is impaired. The *doshas* get vitiated and enter the *hrudaya* and obstruct the channels of mind causing insanity.

An individual is mentally agitated when his intellect is overpowered by *rajas* and *tamas*. Such rules of behaviour are called "*Sadvrutta*" which protect the health of the person. Diseases are caused by neglecting these rules of behaviour.

Insanity is to be known as the agitated or unsettled state of mind, awareness, perception, knowledge, memory, involvement, virtue, behaviour and conduct.

(Cha. Ni. 7-5)

The above are the characteristic symptoms of this disease. The agitation or disturbance is found in each one of the functions mentioned. In the agitation of the mind, the patient reflects on undesirable things and

does not reflect on the things which are to be reflected upon. Due to the perversion of the awareness, the individual considers eternal things as ephemeral and desirable things as undersirable things. Due to the derangement of perception and knowledge, the individual is unable to sense the burning caused by fire. In other words, perception is knowledge. Due to the disturbance in memory, the person is unable to remember anything and if at all he does so it will be incorrect. Due to perversion of the involvement the patient feels an indifference to things that had earlier been craved for. Because of disordered behaviour, the patient indulges in undesirable activities. Conduct is the name given to activities.

A feeling of voidness in the head, restlessness of look, tinnitus, hard breathing, ptyalism (dribbling of saliva) disinclination for food, loss of taste, indigestion, catch in the chest, apathy, fatigue, disorientation to surroundings, excitement, constant horripulation, frequent fever, flight of ideas, pain in the upper portion of the body, simulation of palsy (facial paralysis). Frequent appearance of the following in dreams:

1. Inauspicious objects that are wondering, moving and unstable.
2. Riding over the wheels of an oil press.
3. Being churned by whirl winds.
4. Sinking in fearful whirl pools and
5. Retraction of eyes.

Apathy is not merely thinking about nothing but also thinking about undesirable things. Flight of ideas stands for wondering of thoughts. Simulation of palsy is that disease which produces in the patient, movement in one half of the face etc.

In the insanity due to *vata* there is quick manifestation of the following symptoms after the prodromata; continuous restless moving about, sudden twitching of eyelids, eyebrows, lips, sudden jerking of shoulders, involuntary movement of jaws, forearms, feet and other parts of the body, incessant and incoherent speech, frothing in the mouth, smiling, laughing, dancing, singing and playing musical instruments without reason, mimicry of musical instruments, feeling of moving about on objects which are not vehicles, bizzare in dress and decoration, craving for things which cannot be obtained or used, disregard of things that are obtainable, excessive jealousy, aggravation of condition by regimen not indicated in *vata*. In the *pitta* type, the patient is intolerant and angry, needlessly excited, feels a desire to cause injury to oneself or others with weapons or hands, desire to runaway, desire for shade, cold water and food, constant anguish, ferocious eyes with coppery, greenish or yellowish tinge, aggravation of condition by regimen contraindicated in *pitta*. In *kapha* type of insanity the symptoms are disinclination for movement speech, walking, dribbling of saliva, discharge of nasal mucous, aversion of food, desire for solitude, aversion to cleanliness, dirty and timid appearance. Aggravation of condition by regimen contraindicated in *kapha*. In the sannipata type all the symptoms of morbid doshas are seen and its prognosis is unfavourable and incurable.

(Cha. Ni. 7-7)

In insanity, the manifestation of full fledged disease symptoms take place immediately after the premonitory symptoms. In this respect, insanity is different from other diseases in all of which the actual manifestation of the disease occurs a long time after the premonitory symptoms develop. The regimen that is indicated in *vata* like oleation, unctuous substances, etc. alleviate disease. Regimen, which increases *vata* such as dry substances etc. aggravate the condition.

The other three types which are within the limits of therapy have to be treated by oleation, sudation emesis, purgation, restorative and unctuous enemata, errhines, medicated smokings, fumigations, eye-salves, nasal instils, insufflations, oil baths external applications, intimidations such as death, chaining, lock-up, threatening, inducing surprise, and forgetfulness, depletion and venesection, wholesome dietary and medication according to the *doshas*, and antagonistic to the causative factors.

(Cha. Ni 7-8)

The type of insanity having etiology, premonitory symptoms, present symptoms, pain and homologation, (*upashaya*), different from the endogenous insanity (viz. that which are caused by the vitiation of *doshas*) is known as "exogenous insanity". Some scholars are of the view that this type of insanity is caused due to previously done unwholesome actions. Punaravasu Atreya considers that errors of judgement are the main causative factors for this disease. It is due to the errors of judgement, that the person disregards the gods, ascetics, ancestors, *gandharvas*, *yakshas*, *rakshasas*, preceptors, elders and other wiseman. Due to errors of judgement, the person resorts to undesirable activities and as such he brings upon himself an abnormal condition.

(Cha. Ni 71-10)

Errors of judgement are considered to be the sole causative factors for this type of insanity. The view however is not contradictory to that of the few scholars who opine that the previously committed evil actions cause this kind of insanity since even the evil actions are but the outcome of errors of judgement. Thus in this kind of insanity it is the patient who should hold himself responsible for causing the disease.

The premonitory symptoms of the exogenous type of insanity caused by the ill effects of anger of gods etc. are desire for inflicting injury upon pious and innocent beings, irritability, peevishness, apathy, impairment of ojas, complexion, lustre, strength and nightmares.

(Cha. Ni 7-11)

Different modes of inducement of insanity:

1. The gods by their look,
2. The preceptors, elders, adepts and great seers by a curse,
3. The manes by their appearance
4. Gandharvas by touch
5. The yakshas by seizure
6. The demon by making the victim perceive their odour.
7. The *pishachas* by riding on the victim.

(Cha. Ni 7-12)

Symptoms of exogenous insanity are - extraordinary strength, energy, ability, prowess, grasping power and retention of knowledge. The period of its manifestation is not definite.

(Cha. Ni 7-13)

The adjective extraordinary is to be applied for all the above listed functions.

The probable time for the manifestation of the malign influences of gods, sages, manes, *gandharvas*, *yakshas*, demons and *pishachas* or of the preceptors, elders and adepts is as follows:

1. In the beginning of the evil act or at the time of maturity of past sins.

2. While living alone in a deserted house, or at the junction of four roads.
3. During the act of intercourse on early morning and evenings, on full morning and evenings, on fullmoon and newmoon days and during menstruation.
4. While behaving improperly during vedic recitation, sacrificial offerings and rites.
5. At violation of celibacy and discipline.
6. At the battle field or during the destruction of the country.
7. During eclipse, child birth, exposure to unclean things such as vomiting, purging and haemorrhage.
8. While visiting holy places and temples in an improper way and spoiled dress on, during any other unworthy and condemnable act.

(Cha. Ni 7-14)

Insanity is caused by these agents with three objectives namely:

1. To inflict injury.
2. To play
3. To exort prayer, worship.

(Cha. Ni 7-15)

The motive is to be inferred from the victims behaviour and symptoms. A victim of insanity afflicted by the curse of gods etc. enters the fire or drowns in water, or falls from a height or inflicts injury on himself with weapons or flagellates himself etc. to end his life. This type of insanity is incurable. The remaining two i.e. sex-passion and desire for worship are curable.

The remedial measures for the two comprise the following - chanting of mantras, medicinal plants, precious stones, auspicious rites, oblations offerings, rituals, fasts, benedictions, worshipping gods and pilgrimages.

(Cha. Ni 7-16)

The five varieties of insanity fall into two kinds of classification viz. endogenous and, exogenous. Curable and incurable. Sometimes one variety may be mixed up with the others depending on the causative factors. The prodromata may also be mixed. The mixed variety of two curables is curable with the integrated measures as are required. The other variety is not curable.

When the *sannipata* type of endogenous insanity is found along with the exogenous insanity caused by agents having a desire to inflict injury, the patient is deemed to be beyond cure. The combination of endogenous insanity of any one *dosha* with the exogenous insanity caused by agent having desire to inflict injury is considered to be a combination of curable and incurable types. When two curable types of insanity are combined then it is curable.

Neither gods, nor *gandharvas*, neither *pishachas*, (goblins) nor demons can torment the man who is free from misdeeds. Sufferings are caused not on account of gods and others but due to one's own misdeeds. Therefore, external factors cannot be the causes for insanity.

(Cha. Ni 7-19)

It is only when invited by the misdeeds of the individual that the gods etc. produce insanity. If on the contrary, they could produce insanity irrespective of the deeds of the individual, then everybody would suffer

from this disease. But this is not the case. Things which are already manifested cannot again be manifested. So if insanity has already been produced in an individual by his own misdeeds it cannot be caused by gods etc. Therefore, gods, evil spirits etc. are not to be considered as causes for insanity.

The wise man should not blame gods, manes or demons for the afflictions arising out of errors of judgement. An individual should hold himself responsible for his pain or pleasure. As such he should find out what is the path for him to adopt and not let himself to be deterred by any circumstances. Reverence to gods and use of congenial things and avoidance of everything opposed to these two are within ones control.

(Cha. Ni 7-21,23)

The individual has the power to be happy or miserable. If he follows a wholesome and beneficial way of life he can be happy. If, on the contrary, he follows an unwholesome way of life, he brings misery upon himself. It is hence seen that the individual has within himself the capacity to prevent and cure insanity.

Persons of the following description are prone to epilepsy - those in whom excess passion and ignorance have overpowered the consciousness, in whom *doshas* change to other tracts, in an imbalanced state, those who have neglected the rules of dietary regimen and use unclean and wrongly prepared food, those who neglect the hygienic way of living, those who resort to wrong activities and those persons who are extremely emaciated. In such persons the *doshas* get aggravated and the vitiated *doshas* enter

the heart which is the supreme seat of life and the sense faculties in a person whose thoughts have been overcome by *rajas* and *tamas*.

(Cha. Ni. 8-4)

The dormant *doshas* aggravate with the stress of emotions like lust, anger, fear, greed, infatuation, elation, grief, worry, anxiety etc. and suddenly obstruct the passages of heart and sense faculties whence the person gets the seizure of epilepsy.

Some of the characteristics of the person susceptible to epilepsy are described even in the chapter on insanity (vid. Ni.8). The soul has many abodes in the body. But since the heart is the seat of consciousness, it is considered to be the abode par excellence of the soul.

The *doshas* stay in a latent state in the heart and sense faculties. They are aggravated by the forces of passion etc. and spread throughout the body, especially in the sense faculties and the heart resulting in the manifestation of epilepsy.

The epileptic stage is attended by the loss of consciousness and fearful paroxysmal movements of the body which are produced by the perversion of memory, understanding and other mental faculties.

(Cha. Ni. 8-5)

The characteristic symptoms of epilepsy have been enumerated in the above verse. Perversion implies disordered functioning. The fearful paroxysmal movements are those movements which are attended with frothy vomiting, abnormal posture, etc. As one cannot perceive anything in darkness, similarly a patient suffering from epilepsy loses his understanding.

The premonitory symptoms and signs are spasms of the eyebrow, continuous distortion of eyes, hearing of sounds not present, dribbling of saliva, nasal discharge, disinclination for food, indigestion, catch in the chest, distension of the abdomen, general weakness, cracking pain in the bones, pains in the body, delusion, feeling as if entering into darkness, swooning, giddiness and frequent dreams of scenes of intoxication, dancing, acting, murdering, trembling, falling and so on.

(Cha. Ni. 8-6, 7)

By distension of abdomen is meant the presence of rumbling sounds in the abdomen which is caused by *vata*.

The following are the characteristic features of different types of epilepsy.

(Cha. Ni. 8-8)

Vata Apasmara : Almost instantaneous loss and regaining of consciousness, bulging of eye balls, incoherent speech, frothy saliva, engorged neck due to affected breathing, twisting of head to one side, tightly clenched fingers, instability of upper and lower extremities, dark, red or dry colour finger nails, eyes, face and skin : perception of moving objects that appear shaky, hard and dry. Alleviation of the condition by regimen is the same as indicated in vitiated *vata*.

Apasmara caused by *pitta* : Almost instantaneous loss and regaining of consciousness, groaning, rolling and slipping on the ground; nails, eyes, face and skin appear greenish, yellowish, or coppery; perception of crimson, blazing and angry forms. Alleviation of the condition by the regimen is the same as indicated in vitiated *pitta*.

Apasmara caused by *kapha* : Long interval between the attacks, slow in regaining consciousness, falling on the ground, few convulsive movements, dribbling of saliva, nails, face, eyes and skin are pale, seeing of objects that are white, thick and unctous. Alleviation of the condition is effected by regimen which is indicated in *kapha*.

In the *sannipata* type, all the symptoms of the three *doshas* are manifested and this type is stated to be incurable.

The patient sees different kinds of objects before falling down. Thereafter he becomes unconscious. A reference to these symptoms can be seen even Wun *Sushruta Samhita* (Uttara Ch. 61). The duration of unconsciousness is seen to be shorter in *vatika Apasmara* because *vata* is quicker in action than *pitta*. In *Kaphaja Apasmara* the loss of consciousness is for a longer period of time.

Sometimes the epileptic types are mixed up with extraneous causes which will be described later on. The additional symptoms do not conform according to the *doshas*.

(Cha. Ni. 8-9)

In the type of epilepsy caused by extrinsic causative factors the symptoms caused by the vitiation of *doshas* manifest themselves in addition to those caused by extrinsic factors. Unlike insanity, there is no special type of exogenous epilepsy.

Epilepsy has to be treated with strong purificatory therapies and palliatives, in addition, chanting of *mantras* is required in epilepsy which is associated with extrinsic causes.

(Cha. Ni. 8-10)

A brief note on the treatment aspect has been given in the above verse.

The mind controls the body because of its association with *atma* (soul). Mental strength is of three types - superior, moderate and inferior. Accordingly, men are of high, moderate and low mental stamina. Among them, persons of superior mental strength are unaffected by the stress of great sufferings whether due to internal or external causes, even if they are physically weak. Those of moderate type withstand the suffering by self-consolation or when consoled by others. Those of inferior type do not get consoled either by themselves or by others. Even if their bodies are well built they are unable to bear even mild sufferings. With any impending fear, grief, temptation, delusion, insult or by listening to stories of anger, hate, horror or when they see the flesh and blood of animals or men, they become depressed in spirits, pale, insane or giddy. They fall down unconscious and may even die.

(Cha. VI. 8-119)

The mind controls the body by impelling actions and by supporting the body. Unlike individuals of superior mental qualities, those persons having mediocrity of mental strength are unable to tolerate pain or suffering on their own. If however, they see other people tolerating it well, they gain strength and determination and as a result they are able to tolerate pain.

According to another classification man is made of twenty-four principles namely: the mind, ten sense and motor organs, the five sense objects and the eight hold evolutes of *Prakriti*.

(Cha. Sha. 1-17)

It has earlier been stated that *Purusha* (Man) is composed of six elements namely, the five *Mahabhutas* and consciousness. Now another classification of *Purusha* (Man) is done, on the basis of the *sankhya* philosophy. But does not the *sankhya* system speak of twenty-five *tatwas*? To this query, the answer is that *Purusha* is here included under *Avyakta*, because the quality of unmanifestedness is common to both *prakriti* and *purusha*. The eight fold evolutes of *prakriti* are the five subtle *Mahabhutas*, *Ahamkara*, *Buddhi* and *Avykta*.

Mind is known to exist by the presence and absence of cognition. If the soul, sense faculties and sense object are aligned with one another, but the mind is occupied elsewhere, cognition does not take place. The presence of mind is essential for cognition to occur. Mind has two important attributes viz. atomicity and oneness.

(Cha. Sha. 1-18,19)

The mind has been mentioned first in the list of 24 *tatwas* (principles) and as the characteristic features of mind have been explained in this verse. One can know from personal experience that when the sense faculties are connected with their objects cognition will not be necessarily present. Sometimes it is present and sometimes not present. This clearly shows that there is a sixth sense namely, mind which determines cognition of the object.

Whatever is deliberated upon, inferred, meditated upon imagined and anything that can be cognised are all objects of the mind. Directing senses, controlling itself, inferring and consideration are the functions of the mind. Beyond these, is the action of awareness.

(Cha. Sha. 1-20,21)

Deliberation means deciding by the mind whether a thing should or should not be done. Consideration is reflecting upon an object with regard to its evidences. Inference is with regard to the possibility such as 'this will happen in this manner' etc. An object meditated upon is an object of conceptuation. Imagination is regarding the object possessing merit or demerit. Anything that can be cognised includes things like happiness, miseries etc. which are objects perceivable by the mind alone without any aid from other sense faculties.

After mentioning the objects of the mind, the functions of the mind are explained. Direction of sense faculties and self-restraint constitute two of the functions of mind. Even the restraint of the mind is possible only with the help of the mind. As it has been said - 'the mind, if associated with other qualities does dissociate itself from the objects of its indulgence'. It has further been stated that the mind being always directed towards its objects it cannot be taken away from the undesirable objects without patience. Patience alone is capable of controlling the mind. Hence patience is the instrument by means of which the mind controls itself.

The other functions of the mind are inference and consideration. Inference is nothing but indistinct knowledge. Consideration is knowledge distinct enough to direct the mind to accept or reject a thing. According to *sankhya* philosophy, there are four factors for distinct knowledge viz. the external factor of sense organs and the three internal factors of mind, ego and awareness. Of these factors, the sense faculties can have only indeterminate perception. It is the mind which guides as to what is acceptable or rejectable. The ego brings about attachment in the form of 'this is mine', 'I am authorised to do this' etc. The awareness directs action in the form

of 'I will shun that man due to his defects, I will welcome this man due to his good qualities', etc.

Ego and awareness always go together. Their domain lies beyond that of inference and consideration. The action of ego is, in fact, included in that of awareness of *Sankhya Karika* 36.

The sense faculty in contact with mind perceives its objects. The mind knowing the merits and demerits of the objects then refers it to the awareness for decision upon which one acts.

(*Cha. Sha. 1-2,28*)

The functions of awareness are described in a more explicit manner. The sense faculty merely gives indeterminate cognition. The awareness deliberates between the merits and demerits of the objects. The meritorious being considered acceptable and the demeritorious to be avoided. The determination involved in awareness is now explained. This is with reference to the object cognised up by the mind. Determinate cognition is determination of a firm nature.

Each sense faculty succeeding the previous one acquires an additional *mahabhuta*, Commencing from *akasa*. This can only be inferred from the sense functions.

(*Cha. Sha. 1-24*)

After explaining about the mind, the sense faculties come in for description. Each of the sense faculties possess the features of all the five *mahabhutas*, with any one of them predominating; for eg. the visual sense faculty comprises all the five *mahabhutas* with *tejas* dominating.

The sense faculties can only be inferred from the sense functions which are nothing other than the sense awareness.

Among the *mahabhutas*, the first one *Akasa* has one quality. The number of qualities goes on increasing successively. The succeeding ones possess all the qualities of its previous *mahabhutas*.

(Cha. Sha. 1-29)

The characteristic attributes of the five *Mahabhutas* are sound, touch, vision, taste and smell. For each one of them, *Akasa*, the first *Bhuta* has only one quality namely sound. *Vayu*, the next one has quality of its own, namely touch and also the quality of sound which is the natural quality of the preceding *Bhuta*. Similarly, *tejas* which comes next will have three qualities viz. vision, touch and sound. *Ap bhuta* will have four attributes viz. taste, vision, touch and mind *Pruthvi bhuta*, the last one will have five qualities viz. the use of the masculine gender for all the five *Mahabhutas* in the above verse is indicative of the fact that the author has *dhatu*s in view while describing *Mahabhutas*.

Prithvi, jala, tejas, vayu and *akasha* are characterised by roughness, liquidity, heat, mobility and unobstructability. The tactile sense perceives all these characteristic attributes and their absence except that of *akasa* which it is non-resistant.

(Cha. Sha. 1-30)

These characteristic attributes are with reference to the gross *mahabhutas* as well as to the subtle ones (*Tanmatras*).

A perception is named after the sense faculty with which awareness is got and perception arising from the mind is a mental perception.

(Cha. Sha. 1-32,34)

Awareness is one though there are many kinds of sense faculties causing its arousal. Each perception is due to the cooperation of mind with *atma*, sense and its objects.

In fact, passions are the causative factors of suffering in both mind and body. Renunciation of all passions removes the suffering.

(Cha. Sha. 1-95, 96, 97)

Just as the silk worm builds the destructable cocoon for its misery, so the man attached to sensual pleasures causes his own suffering.

The wise man, who considers sense objects to be as dangerous as fire and abstains from them does not suffer, since he is devoid of attachment.

Passions are the main causes for both bodily and mental sufferings. This is the implication of the verse. It is only when a man is impelled by passions, that he indulges in various articles and thus subjects himself to the good and bad results of his actions, the bad ones bringing misery. Once such desires are shunned, one does not have attachment or hatred.

The causes for suffering are:

- (1) Derangement of intelligence, will and memory.
- (2) Unwholesome climatic conditions.
- (3) Effects of previously committed evil actions and
- (4) Unwholesome contact of sense faculties with their objects.

(Cha. Sha. 1-98)

Intelligence, will and memory are forms of cognition. The temporary and causative factors of diseases (miseries) include not only such factors caused by natural variation in seasons but also those which, though caused by other factors manifest themselves at some given time (Eg. attacks of quotidian fever which recur every 3rd day).

Ailments arising out of effects of past actions are included under errors of judgement. They are considered there for contextual convenience.

In derangement of intelligence, the affected person confuses the ephemeral with the eternal and the unwholesome with the wholesome. A person of unaffected intelligence perceives things as they are.

(Cha. Sha. 1-99)

This verse describes the impairment of intelligence, correct cognitive awareness does not confuse the unwholesome things for the wholesome ones etc.

In derangement of will, the affected will not be able to restrain his mind from dwelling on undesirable objects. An unimpaired will can restrain the mind from such objects which are unwholesome.

(Cha. Sha. 1-100)

In this verse is explained the disturbance of the will. It is the will which can restrain the mind from its harmful objects. When it becomes incapable of doing this, the derangement of the will is said to take place.

In disorders of memory, the recollection of the exact knowledge of things is lost, due to the influence of passion and delusion. Normally memory contains everything memorable.

(Cha. Sha. 1-101)

The disturbance of memory are explained in this verse.

An error of judgement is that act which is performed by a person of deranged intelligence, will or memory. It is the main cause for aggravation of doshas.

(Cha. Sha. 1-102)

Errors of judgement cause derangement of *vata*, *pitta* and *kapha* and also *rajas* and *tamas*.

The following common errors of judgement are enumerated below :

- (1) Forcible inducement or suppression of natural urges.
- (2) Indulgence in rash acts and excessive sex.
- (3) Wrong, untimely or late treatment of diseases.
- (4) Disregard of good conduct and modesty.
- (5) Insulting persons who deserve to be respected.
- (6) Knowingly indulging in narcotics.
- (7) Travelling at untimely hours and in disreputable places.
- (8) Cultivating the friendship of evil persons.
- (9) Negligence in following the rules of good conduct.
- (10) Falling prey to passions and emotions such as envy, pride, fear, anger, greed, etc.
- (11) Committing actions which are influenced by the above listed emotions, and passion and delusion (ignorance).

These factors are responsible for causing disease.

The symptoms caused by the disturbance of intelligence, will and memory constitute "error of judgement, untimely or late treatment" is nothing other than negligence of the time of treatment. The wrong method of treatment is but initiation of action in improper time. The initiation of action may be totally lacking, or may be out of all proportions to the disease involved or may be unsuited to the disease.

Perverse cognition and improper conduct are to be considered as errors of judgement since they fall within the purview of mind.

(*Cha. Sha. 1-109*)

No pleasure or pain can be felt without the coordination of the self, the senses, the mind, awareness, sense objects and action.

(*Cha. Sha. 1-132*)

The mind, the self, the sense, the principle of awareness, the sense faculties and the unseen factor known as *Adrusta* are associated in characteristic ways to produce happiness or misery. There can be no experience of pleasure or pain unless there be the self. It is clear how the sense faculties and the objects become responsible for pleasure and pain. Of *karma* viz. *adrusta*, the auspicious ones cause happiness, while the inauspicious unhappiness. In the clinical context, the suitable or unsuitable adaptation of the sense and the organs are regarded as productive of pleasure and pain.

The tactile sense and the corresponding faculty of the mind are the two conditions required to engender pleasure or pain.

(*Cha. Sha. 1-133*)

In all contacts where sense faculties are involved, it is the actual contact which is most important. Unless there is an actual contact there can be no contact whatsoever. That is to say, visual, auditory, gustatory or olfactory contact can be effective only where there is actual contact. It is for this reason that the sense faculties cannot perceive things placed beyond the actual range.

In the case of mental perception, the contact with the considered object is subtle for the mind reflects on some aspect and not on all. Therefore, whatever comes into contact with the mind is said to be cognised by it.

Desire acquires the necessary conditions of sensation without which there cannot be any contact. No experience of sensation is effected if there is no contact.

(Cha. Sha. 1-135)

Mind, body and sense faculties are the necessary sites of manifestation of sensations. Hair on the head and the body, tips of nails, ingested food, faecal matter and fluids are excluded.

(Cha. Sha. 1-136)

The use of the word sensation in the first line automatically excludes insentient things such as nails, hairs etc. However, they are specifically mentioned as not being the sites of perception for the sake of clarity. The fact that hairs etc. are excluded from the purview of consciousness, can be ascertained from direct experience. Such sensations such as pain during menstruation and sensation during defecation are in fact caused in the body, at the sites of expulsion of these waste products.

Recurrence of all sensations can be checked through yoga and *moksha*. The absolute eradication of sensation is achieved through *moksha* and yoga is a means of attaining *moksha*.

(Cha. Sha. 1-137)

Here yoga implies absence of conjunction between the self, mind, sense faculties and their objects. *Moksha* implies absolute detachment of the self from all mental and physical sensations. The lack of sensation of pleasure and pain attained by yoga is temporary. Sensation recur as soon as the state of yoga is disturbed.

Pleasure and pain arise with the contact of the self, the senses, the mind and the sense objects. But when the mind is immersed in self alone, two sensations do not originate.

(Cha. Sha. 1-138, 139)

In this state yogic powers are attained. The yoga which eliminates pain is referred to here. The non-origination of pleasure and pain indicates that the mind does not start its activity in order to obtain its object.

The concentration of the mind in the self indicates the elimination of the object and the consequent knowledge of the self alone. Psychic powers refer to the 8-fold attainments to be explained in the next verse.

Entering into bodies, telepathy, acting on one's own will, clairvoyance, clair-audience, omniscience, radiance, disappearances at will are the eight yogic mastery of powers accrued by the concentration of the pure mind.

(Cha. Sha. 1-140, 141)

The attainment of *moksha* or emancipation is possible in the absence of passion and ignorance by weaning away of the indomitable *karma* (accretion of past actions), and by detaching oneself from one's relationships and commitments.

(Cha. Sha. 143-146)

Association with pious persons and dissociation from the wicked, austerity and each kind of regulated life, always remembering the righteous codes, conceptual knowledge, solitary type of living, disinterest in sexual pleasure, indulgence in emancipation, special interest in the fortification of mind, not starting any fresh action gradually getting rid of the action which is already on hand, evading the desire for early gains, and haughtiness, fear of attachment, tranquillity of the mind and intellect, examining the principles of perceptions and introspecting the reality are all the means to emancipate oneself from one's bodily commitments.

By recapitulating the means stated above ending with the fortification of mind and remembering the exact nature of events, one will get over all miseries.

(Cha. Sha. 147, 148)

The eight causes which promote memory are - (1) on seeing the cause the effect is recapitulated e.g. by seeing a *gavaya* (cow's category) immediately calling one's cow to memory (2) thinking of father after seeing a person of similar features (3) even by seeing a person who has opposite features one may remember his father (4) when the mind is concentrating to think of a particular thing suddenly it comes to the memory (5) by constant practice to remember (6) by a secondary thought to the original thing also the later come to memory (7) on hearing another man's saying also one

may get it to one's memory which was initially forgotten (8) anything nearer to the direct perception which was experienced, may also recall to memory.

Recollection is said to be the ability of the mind to reproduce what was seen, heard or experienced in the past.

(Cha. Sha. 1-149)

In the absence of knowledge, the mind gets enveloped by passion and ignorance and thus serves as the causative factor for various diseases.

(Cha. Sha. 2-38)

The mind is always associated with *rajas* and *tamas*. The cause for this is nothing but absence of knowledge (of the truth or essential principles). It thus follows that when there is knowledge, the mind is free from these two defects (*viz rajas and tamas*). These defects cause morbidities which cause an inclination to do virtuous and vicious acts. In short the association of an impure mind makes the self enter into worldly bondage.

Righteous acts cause pleasure whereas unrighteous ones create sorrow. The body and mind are the seats of diseases. By not involving the body and mind, diseases do not appear again. The non-involvement of body and mind means, an interruption in the body-mind continuity. Salvation is the elimination of both body and mind.

(Cha. Sha. 2-4)

The combination of body and mind has no beginning and is continuous. Its cessation can be achieved by will, contemplation of scripture and transcendental knowledge (intelligence).

A man who has controlled his senses and practises the preventive measures against disease which have been described earlier, will not be affected by disease, unless he is affected during that period due to the results of his past actions.

(Cha. Sha. 2-44)

The effect of what was done in the previous life is called *daiva*. The effect of what is done during the present life is known as *purushakara*. The righteous deeds of the past life induces diseases. If, however, the deeds are righteous, the individual remains free from diseases.

Those aspects of the individual derived from the *atma* are longevity, self awareness, mind, senses, respiration, excretory processes, stimulation and sustaining powers of the parts, shape, voice and colour of the body; pleasure and pain, desire and aversion, consciousness, will, intellect, recollection, ego and effort.

(Cha. Sha. 3-10)

These are the aspects of the foetus which have been derived from the *atma*. The stimulation and sustenance are with reference to the senses only. Righteous and unrighteous acts are responsible for birth in the womb of various species of beings. Soul is at the root of these righteous and unrighteous acts. Hence soul is said to be ultimately responsible for taking birth in different wombs. Self awareness etc. are eventually the functions of the mind, but the soul is intimately related with such activities.

Mind acts as the connecting link between the soul and the physical body. So, on the eve of death, there occurs a change in the normal behaviour and inclinations, the sense faculties are disturbed, strength diminishes and

living beings are stricken with diseases. Living beings devoid of mind, breathe their last, because the sense organs derive their inspiration from nothing other than the mind. The objects of the senses are of three types viz. *satvika*, *rajasa* and *tamasa*. The mind dominated by any one of the above mentioned attributes in one life, follows in the subsequent life as well. When the individual is endowed with the *satvika* type of mind from his previous life, then he can recall events of his past life. Because of the continuity of the same mind, he can remember things of the past incarnation. Being endowed with this power, he is called *Jatismara*.

(*Cha. Sha. 3-13*)

Now shall be described those aspects of the individual which are derived from mind and which are manifested because of the existence of the mind. They are : likings, conduct, purity, aversion, memory, attachment, jealousy, valour, fear, anger, lethargy, enthusiasm, sharpness (of mind), mildness (of nature), seriousness, instability and others. All these aspects occur in the same man, but cannot be manifested at the same time. An individual is said to belong to that particular type of mind by which he is dominated.

The mind is responsible for uniting the *jeevatma* with the subtle body (*ativahika*). This subtle body is compared of four *bhutas* in their subtle form the mind also helps in the union of the *jeevatma* with the physical body. *Atma* (soul) is omnipresent. If this comes in contact with the body directly, there would be universality in the feelings of the individual. Because of the union of the *Atma* and the body through the mind, which is limited to the individual's body alone, there are limitations to the feelings of the individual.

The term '*sprk*' (i.e. having tactile sensation) has been used as an epithet of the body in order to indicate that the *Atman* does not come in contact with hair, urine, nails etc. which are inaccessible to mind. If the individual is in possession of *sattvika*, *rajasa* or *tamasa* type of mind, then he is likely to possess the same type of mind in the next incarnation also.

(*Cha. Sha. 3-16*)

The same man will have *sattvika* type of mind when he is indulging in righteous activities, *rajasa* type of mind when he is afflicted by passion, and *tamasa* type of mind when he is under any delusion. These different types of mind may occur consecutively, and not at the same time. Even if the same individual is likely to have all the types of mind, he will still be considered as *sattvika*, *rajasa* or *tamasa* depending upon the predominance of one or the other of the attributes of the mind.

(*Cha. Sha. 4-36*)

Mind is of three types namely, *satwik*, *rajasik* and *thamasik*. *Satwik* mind is pure and this is beneficial (to man) since *satva* is free from defects. *Rajasik* mind is passion oriented because of its violent quality. *Thamasik* mind is defective since it is tinted with ignorance and delusion. Due to the relative degree of their qualities an infinite number of combinations arise and concomitantly present themselves in the body and mind. In this way the particular type of body contains the particular type of mind and particular mind for a particular body. Psychic types can be exemplified as follows:

The mind which is free from defects is considered auspicious. The mind which is contaminated by passion or delusion is inauspicious and faulty. The body follows the mind e.g. if the mind is pure, one possess a healthy

body. Similarly the mind also follows the body, eg. the mind in animals, men and gods is respectively *tamasa*, *rajasa* and *sattvika*.

(Cha. Sha. 4-37)

* *Brahma* type comprises purity, truth, self control, proper discrimination and knowledge, good understanding, power of exposition and repartee, possessing good memory, and lack of desire, anger, greed, conceit, delusion, envy (jealousy), and intolerance. The person treats others with equality.

* *Rishi* type comprises devotion to rituals, studies of scriptures, sacrificial offerings, celibacy, hospitality, ingenuity, eloquence, understanding, and good memory. Such a person is devoid of vanity, conceit, attachment, hatred, delusion, greed and anger.

* *Indra* type - The person with this type of mind commands power, speech, and conducts sacrifice. He is brave and energetic, valiant, blameless, and farsighted. He is always in pursuit of virtue, wealth and sense pleasures.

* *Yama* type - Such a person is a man of propriety who does the right thing and is blameless, conscientious and possesses good memory. He is free from attachment to passion, hatred and delusion.

* *Varuna* type of person is valiant, courageous, clean and despises untidiness. He is devoted to sacrifices, is interested in aquatic games and uncomplicated work. He is given to the right way of anger and favour.

* *Kubera* type of person commands status, respect, luxury and plenty of associates. He is after virtues, wealth and desires, is clean and enjoys recreations. Both his anger and favour are reasonable.

* *Gangharva* type of person is fond of dance, music, flattery, and is adept in poetry, history and epics; he is addicted to perfumes, cosmetics, garlands, fine garments, women and recreation and is free from envy.

The seven types described above are *satwik* and beneficial. Among them the *brahma* type is the purest.

(*Cha. Sha. 4-37*)

* *Asura* type of person has qualities of obstinacy, valour, jealousy, authority, obscurantism, terror, harshness, and self aggrandisement.

* *Rakshasa* type of person is intolerant, always angry, cruel, gluttonous, fond of mutton, excessively sleepy, lazy and jealous of others.

* *Pisacha* type of person is a voracious eater, easily controlled by women, secretly keeps company with women, is dirty, dislikes cleanliness, cowardly, threatens others and is given to unusual recreations and food.

* *Sarpa* type of person is one who is brave when excited, otherwise timid, is sharp, indolent, arouses fear in others and is fond of food and recreation.

* *Preta Satwa* type of person is fond of food, miserable in character, jealous, avaricious and lazy.

* *Sakuna* type of person is passionate, fond of good food, fickle minded, intolerant and generous.

(Proper discrimination is the ability of a person to correctly analyse the effects of every action).

The six types of *Rajasa* are tinged with passion.

(*Cha. Sha. 4-38*)

* *Pashava* type of person is critical, unintelligent, disgusting in behaviour and eating, sensual and fond of sleep.

* *Matsya* type of person is timid, unintelligent, gluttonous, passionate, irritable, fond of travelling, unsteady and fond of water.

* *Vanaspatya* type of person is lazy, gluttonous and dull.

These three types of *tamasa* are tinged with inertness of mind.

Man is the epitome of the universe, since the material and mental phenomena found in the world are present in man, and all these present in the man are found in the world. Innumerable are the specific parts of the universe, and just as innumerable are the parts of the individual, the 'Purusha' is the assemblage of *prithvi*, *ap*, *tejas*, *vayu* and *akasa* and the unmanifest *Brahma*.

The specific phenomena of the universe such as trees, grass, animals etc., are just as innumerable as the specific phenomena of the individual such as tendons, ligaments, arteries etc. It is difficult to enumerate all of them.

(*Cha. Sha. 4-39*)

Prithvi gives form, *ap* the fluid, *tejas* the heat, *vayu* life, *akasa* the interstices and *Brahmah* the inner soul. As Brahman rules the world so the soul rules the body.

(*Cha. Sha. 4-39*) (*Cha. Sha. 5-5*)

Universal Phenomena Corresponding Phenomena in Man

<i>Indira</i> corresponds to	ego
<i>Sun</i> corresponds to	power of absorption
<i>Rudra</i> corresponds to	anger
<i>Moon</i> corresponds to	beneficance
<i>Venus</i> corresponds to	pleasure or happiness
<i>Ashwins</i> corresponds to	Lustre
<i>Maruts</i> corresponds to	enthusiasm
<i>Viswadeva</i> corresponds to	sense organs and sense objects
<i>Tama (darkness)</i> corresponds to	delusion, sleep
<i>Jyothi (light)</i> corresponds to	knowledge
<i>Creation</i> corresponds to	Impregnation
<i>Kritayuga</i> corresponds to	Childhood
<i>Treta</i> corresponds to	Youth
<i>Dwapara</i> corresponds to	Old Age
<i>Kali</i> corresponds to	Infirmity and death.

The above description has been given only by way of illustration. There are many other phenomena common both to the universe and man, which can be understood by inference.

The normal colour of the skin is classified as black, dark, dark-white and white. The other shades of the skin not stated here should be known as in vogue or decided by the specialists. These have to be distinguished by close observation and illustration of matching colour.

(Cha. In. 1-8)

The natural colour of the skin may change to an unnatural one. It is likely that the congenital colour may not match with any one of the four but later on it may change over to the matching colour.

The colours which are blue, dark-brown copper-red, green and pale white are pathological changes if they have appeared in the natural skin. These discolourations have also to be noted by a close observation if they have formed newly, whether in part or whole.

(Cha. In. 1-9)

It is possible that the congenital colour of the skin might change on account of medical treatment. *Rasayana* procedure is one such. A pale white may become bright white, but after a lapse of time when the procedure is discontinued the former colour may be restored. In the modern techniques also we come across such changes with irradiation, cauterisation etc. These changes are transient unless the original colour is restored. The changed colour must not be considered as a forerunner of death.

If the skin is seen on one half of the body with the natural colour and the other half covered with a different colour, or the two in alternate patches with a demarcating line either on the right side or on the left, on the front or back, upwards or downwards, inside or outside, they may indicate the portent of death.

(Cha. In. 1-10)

The world inside means the visible parts like the mouth, tongue, nostrils and the like. In the same manner the countenance must be examined for the depression or elevation, or dryness or unctuousness on the skin too.

Alternate features of opposite types also represent the unfavourable prognosis as in the case of colours.

Even abnormal discolouration of nails, eyes, face, urine, faeces, hands, feet, lips etc. in a patient who has lost strength, complexion and the ability to perceive sense objects, show reduction in his longevity.

(Cha. In. 1-12)

In a sinking patient, if any other discolouration is suddenly found it should be considered an ominous sign.

(Cha. In. 1-13)

The natural voices in normal man resemble any one of the sounds produced by the swan, crane, creaking sound of a wheel, kettle-drum, katavikanka bird, crow, dove and jarjara (a pot-like musical instrument). These voices have to be identified with the help of the specialists as in the case of colours.

(Cha. In. 1-14)

The pathological change in the voice may resemble the bleating of a sheep, low pitch or choked voice, indistinct, stammering, sinking voice, sorrowful or any unusual voice.

Any deviation found in the natural voice shows the deterioration taking place in the tissues concerning voice or the mind's control over them. Starvation emaciation due to longstanding ailments or temporary exhaustion and fear produce low voice of stammer. Hoarseness may remain as a symptom in inflammation or vocal chords. All these vanish with the removal of the cause. Such changes are not ominous. But irrecoverable changes of

voice are not favourable to the patient e.g. hoarse voice or shrill voice, or low pitch of voice in a patient of consumption is bad prognosis.

If the pathological changes of voice are sudden or such conditions change among them from one type to another the patient may die soon.

(See *Shu. Su. 36*) - (*Cha. In. 1-15*)

A man will meet his death within a year if his breath resembles, all day and night, the odour akin to emission of smell from different trees and creepers blossoming in the forest, either it is pleasant or unpleasant.

(*Cha. In. 2-8, 16*)

Even if a man's body gives out one or many unpleasant odours they are fatal to his life.

He who exudes unpleasant smell from his body even after smearing fragrant articles like the sandal paste, costus, valarian, honey, and garland, or who gives out the offensive smell of faeces or urine, or putrified smell of a dead body without any reason, must be regarded as showing prognostic symptoms which are unfavourable. Such a person dies within a year.

Taste may change in the dying patient either to a morbid taste or sweet. Such a change must be understood only by inference. For the taste of man is a subjective sense, flies, lice, wasps and mosquitoes turn away from bad taste of the skin. For example if a lice is placed over the skin or the tongue it does not relish the exudation and falls back. If the body is sweet the creatures swarm him though he has bathed and applied a scent. The taste on the tongue of a dying man is morbid when sweets are complained as sour or pungent vice-versa.

(*Cha. In. 2-18, 23*)

The physician's hands must be normal so that he can make out the abnormal states in the patient by palpation. If his hands are not so, he should get the palpation done by any other physician. Some important observations available to the sense of touch are the presence or absence of pulsation, skin temperature, rigidity, roughness, the disappearance of parts which should normally exist; looseness of joints, dislocations (including joints and fracture of bones) flesh, blood, sweat and the like.

(*Cha. In. 3-3*)

The prognosis of death can be made either through the presence of certain symptoms or by a regular physical examination. The signs and symptoms are related to longevity, since body and mind are intricately connected with one another and perception is also very closely linked with mind. Usually, a single change or symptom is not enough to predict early death. For example, discolouration of the skin is seen in such diseases like leucoderma also where they do not predict death. Hence, a group of signs and symptoms are necessary in order to infer untimely death. *Sushruta* has given a comprehensive amount of such portents which when read along with *Indriyasthana* will be useful for further elucidation. Dreams also are required to be analysed in the same manner (see Appendix).

A detailed examination of all the sense faculties of a person must be made to know his longevity. It is only by inference that we can know about the faculty of each sense like vision etc. which is ultra sensual.

(*Cha. In. 4-3, 4*)

If a man sees the sky as being solid-like earth and the earth as hollow like the sky, it must be inferred that he dies very early.

(*Cha. In. 4-7*)

If a man perceives the invisible air, but is unable to see the brightness of glowing fire, he should be considered as being short-lived.

(Cha. In. 4-8)

The man who sees a net spread over clear water either still or flowing when there is no net must be regarded as one departing from life.

(Cha. In. 4-9)

On waking up from sleep if one should perceive the shades of demons or any strange things one does not live long.

(Cha. In. 4-10)

One who sees the normal colour of a blazing fire differently either as blue or lustreless, black or white will die in a week's time.

(Cha. In. 4-11)

One who sees the lightening in clouds when there are no clouds in the sky, or perceives lightening without the clouds dies shortly.

(Cha. In. 4-12)

He who sees the dazzling sun or the full moon as an earthen pot covered with a black cloth does not live long; a man whether healthy or not, if he should see the sun or moon as if eclipsed, in the absence of an eclipse, he is regarded as being near death.

(Cha. Chi. 4-13-18)

The patient who has the illusion of seeing the sun in the night times, or the bright moon during day time, or smoke without fire or fire without flames during the night, will not live long.

People about the time of death perceive objects perversely viz. dull things bright, bright ones dull and so on. Their appearances are quite contrary to the actual. If invisible things are seen by them while the existing ones are not seen they will die soon.

A man who hears voices which are not existing or does not hear what is existing, he must be considered as being dead (for practical purposes).

(Cha. In. 4-19)

If a patient while shutting his ears with fingers fails to hear the sound of burning fire he should be given up without treatment.

(Cha. In. 4-20)

He who cannot discriminate between the good and the bad odours or perceives contrarily or cannot perceive at all, should be regarded as one to meet death early.

(Cha. In. 4-21)

He who cannot perceive tastes with their true characteristic or does not feel taste at all should be regarded as one to die.

(Cha. In. 4-22)

A man who feels hot things as cold, rough as smooth, soft as hard, etc. is to be treated as near to death.

(Cha. In. 4-23)

A person who has the capacity to see ultra sensory objects without having practised either severe austerity or yoga is considered as being very close to death.

(Cha. In. 4-24)

A man who perceives sense objects without using his senses or if his perceptions appear to be perfect, as if from unvitiated senses, does not live long.

(Cha. In. 4-25)

If persons appear to be healthy but their perceptions are repeatedly distorted and illusory on account of impairment in understanding they will die soon.

(Cha. In. 4-27)

In all these disorders we have to infer that the mind and the intellect are not functioning properly even though the sense faculties are in good condition. The tactile sense pervades the entire body inside and outside, except in the body fluids, food, the waste, the tip of nails and hairs. If this sense is defunct all other senses cease to work.

Certain dreams appear before the patient as the premonitory symptoms of some diseases which terminate the life of the patient. Therefore the wise physician should tactfully elicit from the patient during interrogation, the kind of dreams, he is subject to have.

(Cha. In. 5-8, 16)

Dreams as of a person riding on a dog, a camel or an ass towards the south indicate that he will suffer from consumption.

A dream wherein the man is drinking wine in the company of ghosts or is being dragged by a dog will die after suffering from severe fever.

He who sees the sky as spread with a lac-coloured cloth dies of haemorrhage. He who dreams of wearing a red garland and body tinted

red and clad in red cloth, laughing and being dragged by a woman, dies of haemorrhage.

A dream in which a person feels as if a thorny creeper is growing on his chest, indicates that the person will die of gulma.

One who finds dreams of himself naked smeared with ghee and offering libation on a flameless fire, or lotuses growing up on the chest will die after suffering from skin diseases (*kushtha*).

A dream in which the man drinks various unctuous preparations in the company of chandalas indicates that he will die of urinary disease whether prodromal symptoms exist or not.

Pensive mood, inopportune excitement, delusion, indifference, loss of strength, etc. are the prodromal symptoms of insanity terminating in the death of the patient.

(*Cha. In. 5-18, 23*)

Aversion to food, loss of intelligence and eruption of urticarial rashes on the skin (*udarda*) indicate violent insanity and ultimate death.

Irritability, great terror, sudden laughter, fainting, great thirst are symptoms of insanity which is fatal.

A person, dancing in dreams with demons and drowning in water soon becomes insane and dies.

The man who though fully awake, sees darkness though it is not present and hears varied types of noises which are non-existent, dies after suffering from epilepsy (*apasmara*).

If in his dream, a man is intoxicated with wine, dances, and is carried upside down by a ghost, the man suffers from epilepsy and dies.

These and other fearful dreams are ominous to the patient. If such dreams are perceived by an apparently healthy man he will fall ill with such diseases from which only a few can escape.

When the path ways of mind are obstructed by the three highly vitiated *doshas*, many terrible dreams which portent death appear before the man.

(Cha. In. 5-41, 42)

When the man is in the somnolent stage of sleep, the *karmapursha* within the mind perceives many kinds of dreams, of which some prove fruitful and the rest not.

Dreams are classified into seven types, depending upon their contents. Dreams may deal with things

- (1) which have been seen
- (2) which have been heard
- (3) which have been experienced
- (4) which are earnestly desired
- (5) which are imaginary
- (6) which are premonitory and
- (7) which have been caused by the aggravation of the *doshas*.

Among these, the first five kinds of dreams, the dream of day sleep and those dreams that are too long or too short are without significance to the physician.

The dream appearing during the first quarter of the night has only a small degree of fulfilment. After a dream, if the man does not get sleep again, it will have much effect.

If, in the dream, the man sees some inauspicious things and later auspicious ones the effect of the dream will be favourable.

NOTES : From the above instances of the prodromal symptoms referred to the *doshās* they have to be interpreted as the changes in the structures in the structures (sense apparatus) and the receptors. Dreams applicable to the *doshās* indicate the prognosis of the disease. The perverse understanding of the perceptions is the result of the wrong functioning of the analysers. The hallucinations produced are due to the analysers which are vitiated by the psychic *doshās*, namely the *rajas* and *tamas*, which predominate at the time. For example, inopportune laughing, singing, dancing and such other behaviours of a person show the prevalence of hyperactivity (*rajas*) of the mind that could not be controlled by it. On the other hand, a depressive mood like not responding to the stimuli shows the hypoactivity of the mind. Indifference to personal hygiene, imminent consequences to personal hygiene, imminent consequences to external dangers etc. are all due to the hypoactivity of the analysers. Physical *doshās* also augment the malfunctioning of the analysers. Mere deafness and blindness are not ominous. They may be defective organically. But when the perceptions are not correctly interpreted by intellect in the man they indicate portents. (see appendix on *bhranti*). The higher faculties of the mind such as *dhee*, *smriti*, *medha*, *abhimana*, *iteha*, *dwesha*, *sukha*, *dukkha*, *samshara* are found in a well developed man. *Rasayana* or rejuvenation restores them only when the *doshas* are well balanced.

During the dream stage the mind is busy in the recapitulation of the past event and imaginations. These are included under the first five types of dreams which bear no value to the physician. The last two types are due to the psychic and physical *doshas*. They act on both the mind and the body and therefore the premonitory symptoms appear in the dream stage which the man can remember and repeat. Short dreams and long dreams are infructuous. It is the swiftness of *prana* which acts on the mind. Many dreams cannot be remembered at all. *Prana*'s action is paused now and then in long dreams and there is no continuity of the events. One can rely upon the dream when there is the tranquillity of mind.

The physician should not treat a patient in whose pupils the shadow image is distorted.

(*Cha. In. 7-3,7*)

The pupil of the eye has a wet glazy surface. On examining the patients eyes if the physician's image on the surface is not found such a patient should be rejected.

A man who cannot find his shadow in the moon's bright light or sunlight, or of a lamp or his image in water or a mirror or if his shadow is deformed will die very early.

If a person's shadow is broken, torn, unsteady, disproportionately short or long, invisible or thin, cut into two, deformed or without the head etc. without any cause for it, then such a person will die soon.

Distortion of images can be seen in mirrors of uneven surfaces, broken mirrors etc. Similarly are shadows fallen on uneven grounds, flowing water and agitated surface of water. There are reasons for such formations. But formation of the types mentioned are illusory and portent death.

Even if an apparently healthy man's image is different in shape, size, colour or lustre he must be considered to be approaching death.

The man in whom the vital heat is very much diminished, mind is distracted and weak, the aura is polluted, and no pleasure in life, such a man is going to die within a year.

(*Cha. In. 11-3*)

Aptitude, good conduct, memory, generosity, discretion and strength desert the man, without any reason, hence death befalls him within six months.

(*Cha. In. 11-7*)

Rasayana therapy prolongs life, improves memory, intelligence, health and youth, gives excellence of lustre, complexion and fine voice, provides strength to the body and senses, endows infallible speech, and causes a sort of radiance in the body. The aim of *rasayana* is to provide fine quality to the bodily constituents.

(*Cha. Chi. 1-7,8*)

The person must cast of all mental reservations and emotions. He must be intelligent, resolute, single minded and friendly to all living beings. He should subdue the defects of his mind (such as anger, lust etc.)

(*Cha. Chi. 1-22*)

Fever due to lust (passion for sex), grief, fear, anger and seizure by evil spirits is known as *abhishanga jwara*. This fever causes pain, swelling and discolouration of the skin.

(*Cha. Chi. 3-114,116*)

Vayu is aggravated due to lust, grief and fear, *pitta* due to anger, and all the three *doshas* due to seizure by evil spirits.

In fever due to desire or passion the patient is pining constantly to attain his objective and is given to much sighing. In fever due to grief, tears are seen trickling (down his cheeks), and in fever due to fear, there is continuous dread. Much exasperation is seen in fever caused due to anger and abnormal behaviour if possessed by evil spirit. In fever resulting from poison the patient faints now and then, suffers from stupefaction, toxic effects and depression. Usually in such fevers, the burning sensation is experienced before the manifestation of the characteristic symptoms. In a few other cases, fever follows the other symptoms while in other cases, both appear concurrently.

(Cha. Chi. 3-122,124)

When mind is afflicted in a disease strength is not excessively depleted as long as the body is not affected by the morbidity of *doshas*.

(Cha. Chi. 3-126,127)

If the mind is free from passion etc. then the fever caused by the vitiated *doshas* will not be very strong.

The fasting treatment is not advised in fevers caused by wasting of the body tissues, vitiation of *vayu*, fear, anger, desire (passion), grief and fatigue.

(Cha. Chi. 3-140)

Fevers which set in on account of passion, grief and fear are treated by comforting the patient, by fulfilling his desires, by treatment which subsides the aggravated *vata* and by making him happy.

(Cha. Chi. 3-310, 313)

Fever caused by anger must be treated by pleasing the patient with his desired objects, good advice and by such regimen and medicines which alleviate *pitta*.

Fever arising from anger is to be subsided by desire and that from desire subsided by anger, and by means of both the fevers due to fear and grief are to be treated. A patient who is always worried about his next attack of fever, must be weaned away from his obsession by diverting his attention to other interesting objects.

The tactile sensation caused by young and fair ladies who have perfumed their bodies with paste made of cherry and sandal and also by contact with wet lotus and blue lilies alleviate burning.

(*Cha. Chi. 8-179-181, 186-187*)

The cooling effect of river banks and ponds, caves of snowy mountains, moonlight, lotus-lakes, pleasant stories are beneficial to the patient of *Raktapitta*.

The suppression of the urges of flatus, urine and faeces by a person due to modesty, aversion or fear provokes the *vata*, which in turn aggravates the *pitta* and *kapha* and circulating throughout the body causes the onset of various diseases.

(*Cha. Chi. 8-20, 21*)

Jealousy, impatience, fear, terror, anger, grief, excess emaciation, excessive sexual intercourse, starvation, cause depletion of semen and *ojas*.

(*Cha. Chi. 8-24*)

In the prodromal stage of *rajayakshma*, there is the presence of symptoms such as catarrh, weakness, peevishness, feeling of horror, aversion while having food, depletion of strength and muscular tissues, craving for sex, wine and meat, desire to cover oneself, finding insects, ants, hair and grass in the food, rapid growth of hair and nails, and dreaming of

- (a) being hit by birds, butterflies, and beasts,
- (b) climbing on a heap of hair, bones or ash,
- (c) drying reservoirs of water, diminishing of forests, and hills and falling of stars and other heavenly bodies.

(*Cha. Chi. 8-33, 37*)

Anorexia may be caused by disgust in the faculties of mind.

Dislike for food or vomiting may also be the results of perceiving unpleasant scenes, or of fear.

(*Cha. Chi. 8-60,62*)

Pleasant wines, perfumes, delightful friends, looking at pleasant things and young women, soothing music, comforting words, constant service to preceptors, elders, brahmins and physicians, worshipping god, truthfulness, righteous conduct etc are useful measures in the treatment of *rajayakshma*.

(*Cha. Chi. 8-185,188*)

An incompatible diet, vitiated and unclean food, abusing god, preceptors and elders, perverted behaviour and mental shock due to excess of fear or joy may cause insanity.

(*Cha. Chi. 9-4*)

An illustration for incompatible diet is a combination of milk and fish etc. Excess of fear and joy implies an excess in anger and other emotions also.

These (causative factors) vitiate the three *doshas* which in turn upset the awareness in a weak minded person, and cause a disturbance in the functions of the heart which is the seat of awareness. The *dohas* also block the channels of the mind, and as a result cause mental confusion.

(*Cha. Chi. 39-5*)

Since the heart is the abode of awareness, any morbidity in it naturally causes a disturbance in the awareness. An injury to a substratum (seat) naturally has its influence on those factors which are dependent on it.

Confusion of intelligence, fickle mindedness, unsteady looks, incoherence of speech, a feeling of emptiness in the heart are the general symptoms of insanity. The imbecile does not know pain or pleasure, right or wrong and therefore has no tranquillity of mind. He is always restless since he is deprived of memory, awareness and cognition.

(*Cha. Chi. 9-6,7*)

Insanity can be both exogenous and endogenous in origin and is characterised by perverted awareness, deranged mind and faulty memory.

(*Cha. Chi. 9-8*)

The above verse gives a brief definition of insanity. A person who has his mind deranged manifests such abnormal functions such as constantly thinking about objects which should not be thought about, etc. The deprivation of memory, awareness, cognition etc. mentioned in the previous verse is to be included under the derangement of mind.

Dry, scanty and cold diet, excess purgation, emaciation, fasting etc. severely provoke *vata*, and *vata* in turn vitiates the heart which is already afflicted by worry etc. and disturbs the awareness and memory.

(*Cha. Chi. 9-9,10*)

In the insanity of *vata* type, the patient laughs, smiles, dances, sings, and talks without reason, jerks his body abruptly and weeps without cause, and is harsh, emaciated, and his skin is tinged with crimson. these symptoms get aggravated during the last phases of his digestion.

Due to indigestion and frequent intake of substances which are pungent, sour, irritants, and heat generating, the *pitta* gets aggravated and attacks the heart of a person causing the rapid onset of insanity.

(*Cha. Chi. 9-11,12*)

Intolerance, agitation, tendency to nudity, intimidation, restlessness, warmth of the body, anger, desire for the shady places, cold meals and drinks and a yellowish tinge of the body are symptoms of insanity due to *pitta*.

Due to heavy meals etc. the *kapha* gets aggravated in a person of sluggish habits, accumulates in the vital organs and along with the body heat, causes melancholia, accompanied by impairment of awareness and memory.

(*Cha. Chi. 9-13,14*)

Insanity on account of *kapha* comprises symptoms like lethargic talk and action, anorexia, desire for sex, solitude and sleep, vomiting, hyper salivation, pallor of nails etc. It aggravates after meals.

Insanity is shown to be caused by *kapha* whose nature is said to be associated with warmth. Alternatively, the word *Ushma* signifies potency or power, and hence the *kapha* that is associated with *Ushma* implies excessive potency of *kapha*.

When all the three aggravated *doshas* are combined, the condition is dreadful since all the causative factors are included in it. This type of insanity is to be discarded due to the antagonistic nature of its treatment.

(Cha. Chi. 9-15)

This verse deals with the *sannipata* type of insanity. All the causative factors for the vitiation of all the three *doshas* are responsible for this disease. As such this type of insanity can be treated only with the greatest difficulty. According to some authorities, only that insanity which manifests diverse symptoms, and which is caused by multitudinous factors has to be discarded for treatment, and not that insanity which has been caused by few factors and shows few symptoms.

Exogenous type of insanity is caused as a result of possession of the patient by gods, sages, *gandharvas*, evil spirits and departed souls. Other causes are failure to discharge one's duties in this birth or the previous one.

(Cha. Chi. 9-16)

The failure to discharge one's duties in this birth and the preceding births is responsible for the possession of the patient by gods etc.

That man who is insane due to the possession by spirits, evinces supernatural power of speech, valour, prowess, behaviour, knowledge and strength. There is no definite time for the manifestation of the symptoms.

(Cha. Chi. 9-17)

Due to their innate power, the swift entry and exit of gods and others in and out of the patient is akin to that of sunlight or image in a mirror or *suryakantha* crystal leaving no morbidity in his body.

(*Cha. Chi. 9-19*)

* The patient who is possessed by god has graceful looks, appears indefeatable, has no anger and no inclination to sleep and eat: the sweat, urine, stools and flatus are scanty; the body odour is good, and the face is replendant like a lotus flower in full bloom.

* One must understand those who are behaving like the preceptors, elders, the spiritual adepts and great sages in their behaviour to be possessed by them, owing to their being victim to sorcery at their hands, or owing to constant preoccupation with them.

* An insane person possessed by ancestral spirits has ferocious looks, is capable of looking steadily at a person, is always sleepy, has interrupted speech, apathy to food, distaste and indigestion.

* One possessed by *gandharva* is ferocious, foolhardy, intense, dignified, indomitable, disposed to vocal and instrumental music, dance, singing, food, drink, bath, garlands, incense and perfumes; likes to use red coloured garments, disposed to offerings to gods, gossiping and question of auspicious odour.

* One possessed by *yaksha* is frequently drowsy, weeps and laughs without cause, is fond of dancing, singing, instrumental music, recitation, gossip, food, drinks, baths, garlands, incense and perfumes His eyes are bloodshot; he speaks ill of the superiors and physicians; and is garrulous.

* Inability to sleep, aversion to food and drinks, excessive strength despite lack of food, desire for weapons, blood, flesh, red garlands, threatening gestures are seen in a person possessed by *Rakshasas*.

* A person who is possessed by *brahma*, is characterised by light talk, dance postures contempt and hatred for gods, brahmins and physicians, is given to verses of praise, recitation of vedic hymns and scriptures, and self-flagellation.

* A person possessed by *pisacha* is of unsteady mind, restless, laughs and sings often, talks both sensibly and incoherently, interested in riding or sitting on a heap of debris, mountain top and dirty gutter water, rocks, clothes, grass, logs of wood, his voice is broken and harsh, he is naked and agitated and shows signs of distress and loss of memory.

(Cha. Chi. 9-20)

* *Devagrahs* or heavenly spirits generally enter the pious man of clean habits and pious conduct on the first or the thirteenth day of bright half of the month waiting for some precipitating cause in him.

* Likewise the *rishi* character of spirits enter the man who frequently bathes and keeps his body clean, remains solitary, confines himself to study of scriptures, code of conduct and maxims, usually on the sixth or the ninth day of the bright fortnight.

* *Manes* take possession of the man who is devoted to service of his mother, father, preceptor, elders, adepts and mentors on the tenth day (dark fortnight) or on the new moon.

* The *gandharvas* take possession of the man who is interested in laudatory hymns, music and instruments, fond of others' wives, perfumes,

garlands and clean habits, on the twelfth or the fourteenth day of the bright fortnight.

* *Yaksha* spirits enter the man who is intelligent, strong, fair, proud and valourous, fond of garlands, perfumes and humour, and who is talkative on the eleventh or the seventh day of the bright half of the month.

* *Bramharaksha* spirits attack on the fifth day or full moon day the man who dislikes the study of scriptures, observances of religious vows, fasts, celibacy, attendance on sages, preceptors, who is unclean and claims to be a valoron and who is interested in aquatic sports.

* *Rakshasas* and *pisachas* enter on the second, third or the eighth day (of dark half of the month), the man of weak mind who is malicious, cowardly, greedy and stupid (Su. U. 60).

There are innumerable varieties of spirits of which only eight varieties which are most frequently manifested, are explained here.

(Cha. Chi. 9-21)

Among these varieties, one who is enraged by the intensity of anger, raises his hand without any hesitation whatsoever to hit himself or others must be considered as an incurable patient. In the same way one from whose eyes are trickling profuse tears or who has bleeding from his penis, who bites his tongue, whose nostrils are dilated, skin fissured, talks unrestrained, mumbles continuously, has discolouration of body, has foul smell and insatiable thirst, must be abandoned as being incurable.

(Cha. Chi. 9-22)

The physician must examine carefully the intentions and behaviour of the patient and find out whether the insanity is an amount of desire for

sport or to enort worship and then treat the patient by suitable incantation, medicines propitiation and offerings.

(*Cha. Chi. 9-23*)

The line of treatment for the endogenous insanity caused by agents with the objectives of sport or exorting prayer is explained in brief.

In insanity of *vata* the adept physician must first administer an unctuous preparation to the patient. If the passages are obstructed, a mild purificatory procedure should be used before unction.

The main line of treatment for insanity caused by *vātā* is explained here in the above verse. It is said that passages of *vātā* are obstructed by fat and *kapha*, and thus pain, loss of sensation in some parts of the body, swelling etc. are caused. If unction is administered, the symptoms are aggravated. Hence mild purificatory procedures should be undertaken. The use of unctuous preparations must be limited in such a case.

(*Cha. Chi. 9-25*)

If the affliction is due to *kapha* and *pitta*, emetics or purgatives as the case may be, must be administered after oleation and sedation. Later dietetic procedure should be followed. *Nirocha*, *sneha*, *enemas* and *sirovirechana* have to be used as often as are necessary, till the *doshās* come to the normal stage.

(*Cha. Chi. 9-26, 32*)

After the cleansing processes the heart, the sense faculties, head and the elementary tract become clear and the mind gains strength the memory increases and perception is heightened.

Even after all these are done should the behaviour persist, strong medication to the nose and eyes, flogging, shock therapy are to be adopted to the patient.

If the patient still misbehaves, he should be bound, firmly with soft bandages and put in a dark room where metallic and wooden materials have been removed.

Threatening, terrorising, giving gifts, causing exhilaration, pacifying, frightening and astonishing serve to cause forgetfulness in the insane and restore normalcy.

Fermentations, massages, oil baths, fumigations (smoking) drinking of ghee (medicated) help to restore to the patient normalcy in mind, memory and cognition.

The exogenous type of insanity should be treated similarly and also with incantations.

Insanity can be cured either by the above listed methods or by administering old ghee and then restraining the patient either in the open air or within the house. Ten-year-old ghee is especially beneficial, as it alleviates the diseases caused by the vitiation of all the three *doshas*. It is also considered to be auspicious and curative of insanity caused by possession. It is pungent and bitter to taste, and is endowed with a strong odour.

(*Cha. Chi. 9-58, 60*)

Very old ghee is that which is more than ten years old. A hundred years old ghee cures all types of disorders. Even its sight, touch or smell

dispels all evil effects of spirits and it is specially beneficial in epilepsy and insanity caused by the possession of spirits.

(Cha. Chi. 9-62)

The diet should be cooling, sweet and soft. The physician skilled in blood letting, should remove blood from the vein near the margin of hairs in the temporal region in patients suffering from insanity and epilepsy.

(Cha. Chi. 9-77)

The patient has to be sufficiently fed with ghee or flesh and allowed into a comfortable room free from draught of air. By doing so he will rid himself of the disease by regaining his understanding.

(Cha. Chi. 9.78)

The patient will be benefitted by his friends who can tactfully soothe him with words of religious and moral import or cause a shock by announcing loss of something very dear to him or by showing him marvellous things so that he regain his senses.

(Cha. Chi. 9-79, 84)

The patient will have to be treated harshly by irritants, light burns and scalds, or whips, tied with ropes and confined to solitary room preventing him from running away. These measures restore his mind to the normal state.

Even worse treatment to restore him to his senses comprise of terrorising him with snakes which have their poison removed, or with trained lions and elephants, or with men disguised as thieves, enemies or policemen.

It is well known that threat to life is more fearful than injury to the body. Therefore threat to life restores the insane person to normalcy when all other measures fail.

The verse implies that when the mind is distracted, it must be cured by further distractions. It is readily seen that when something has moved because of a push, the object is brought back to position by another push. The same is to be understood here.

A man who is very much perturbed for having lost something so dear to him must be consoled by replacing another thing of the same kind and with words of compassion.

(Cha. Chi. 9-85, 86)

Desire, grief, fear, anger, exhilaration, jealousy or greed bringing about anguish must be treated with their opposites. These emotions antagonise one another.

While treating insanity whether due to spirit or morbid *doshas* the physician should consider the patient's place of living, age, homologation, nature of the morbidity, season and his relative strength and weakness.

(Cha. Chi. 9-87, 95)

Persons possessed by gods, rishis, *manes* and *gandharvas* must not be treated with drastic measures, pungent medicines such as collyrium etc. but with mild medicines and potions of ghee.

Worshipping god, offering sacrifices, libations, prayers and other procedures of the order as laid down in scriptures may be observed.

The fear of insanity will be removed if one worships Lord Shiva the commander of the spirits, with true devotion.

Likewise, by also worshipping *Pramathas* of *Rudra* who wander about the world, one will be freed from insanity. Telling truth, wearing potent drugs on the body, observing rites and austerities etc. remove the insanity arising from exogenous causes.

Whatever therapy and measure will be adopted to treat epilepsy may be applied to insanity also since the etiology and disordered tissues are same in both diseases.

Drastic measures including whipping, heating etc. worshipping god, sacrifices, libations all come under *daivavyapasraya* treatment. Epilepsy and insanity have many common causes and many common symptoms and in both these diseases, the heart is the main organ involved.

(Cha. Chi. 9-96)

One who abstains with a strong will from using flesh and wines and uses wholesome diet and is pure in mind will never be affected by either endogenous or exogenous types of insanity.

(Cha. Chi. 9-96)

Clarity of sense faculties and their perceptions, correct understanding of the unimpaired mind, intellect and spirit and the normalcy of *dhatus* are the signs of the man who has completely recovered from insanity. Clarity of perceptions by the sense faculties, tranquillity of awareness and mind, normality of the bodily elements are some of the symptoms of the man who has completely recovered from insanity.

(Cha. Chi. 9-97)

Epilepsy is defined as a disease caused due to derangement of intelligence and mind, characterised by loss of memory, unconsciousness and violent spasms of the body.

(Cha. Chi. 10-3)

Due to loss of consciousness and absence of knowledge, the patient develops violent spasms of the body along with vomiting of froth and agitation of limbs.

The *doshas*, being aggravated due to intake of unwholesome and contaminated food, obstruct the passages of the heart thus causing passion and ignorance. The mind is preoccupied with passion, fear, anger, grief and anxiety where after epilepsy exhibits itself. Although the blocking of passages have been mentioned in general, the channels pertaining to the heart are to be considered in particular. The main precipitating cause for both insanity and epilepsy are intake of unwholesome and contaminated food, incompatible diet.

(Cha. Chi. 10-4)

Since the passages are occluded by the morbid *doshas* the person is enveloped with stupor and anxiety. He sees things which do not exist and falls down with violent spasms. His tongue, eyes and eye brows become distorted, he secretes excess saliva, and throws his limbs about into awkward postures. As the passages clear he regains consciousness as if awakening from sleep.

(Cha. Chi. 10-6, 7, 8)

Epilepsy is of four types viz. epilepsy caused by *vata*, *pitta*, *kapha* and all combined. In the *vata* type, patient sees rough, crimson red or black

objects. He trembles, bites his teeth, issues foam from the mouth and breathes with difficulty.

(*Cha. Chi. 10-8, 13*)

In the *pitta* type the foam of saliva, limbs, mouth and eyes are tinged with yellow; the objects seen are yellow or red; the patient is thirsty and hot and visualises the world as if in flames.

During the fit of epilepsy due to *kapha*, the saliva, limbs, mouth and eyes are clear. Skin is cold, horripulated and body heavy. Patients see an aura of white objects, and awakens after a long time.

All the symptoms are mixed in the patient affected with three *doshas*. This type of epilepsy is not curable; and so also is the case of the weak and chronic patients.

Attacks of epileptic fit recur once a fortnight or twelve days or a month with brief paroxysms, as the morbid matter accumulates.

Drastic cleansing procedures of the morbid matter should be undertaken to clear the blockade of the passages of the heart.

(*Cha. Chi. 10-14*)

Usually medicinal enemata for the *vata* type, purgatives for the *pitta* type and emetics for *kapha* type epilepsy must be used. When the purification is complete the patient must be made comfortable and administered palliative medicines.

The person using contaminated food, suppressing the natural urges, and indulging in too much cold, hot, unctuous, and non-fatty diet, and who

is engrossed with passion and delusion will be affected by the provoked *doshas* which enter the heart and vitiate the subtle passages of mind and awareness.

(*Cha. Chi. 10-15*)

Diarrhoea arises on account of mental factors such as fear and grief. Their signs and symptoms are the same as diarrhoea on account of *vata dosha*.

(*Cha. Chi. 19-11*)

Fear and grief quickly provoke *vata* causing diarrhoea. Treatment of this type is the same as in *vatatisara* along with measures such as keeping the patient in good humour and comfort.

(*Cha. Chi. 19-12*)

Vomiting induced by hateful objects which are distasteful to the senses is attended with nausea.

(*Cha. Chi. 20-18*)

Vomiting induced on account of mental distress must be treated with words of comfort agreeable to mind and by distracting the patient by popular legends and stories, congenial friends who can divert his mind by telling him pleasant and romantic stories, and by sports. Pleasant odours, beautiful clay models, flowers, fruits, delicious preparations and various kinds of eatables of agreeable odour, colour and taste, also help subside vomiting. Even if certain likings of taste, touch, sound or sight may not be normally wholesome they will have to be allowed to the patient as any complication arising from them can be easily overcome.

(*Cha. Chi. 20-41,44*)

Pitta and *vata* aggravate on account of shock, fear, fatigue, grief, anger, starvation, alcoholism, alkaline, acidic, salty, pungent, hot, nonunctuous and dry foods emaciation due to longstanding disease, excess of purificatory processes, and excessive exposure to sun's heat, and dry up the watery contents of the tissues, and produce thirst.

(*Cha. Chi. 22-4,5*)

In the first stage of intoxication the mind is stimulated.

(*Cha. Chi. 24-37*)

The effect of alcohol on the heart is exhilaration, ardent desire, exultation, feeling of happiness and various changes according to the *rajas* and *tamas* prevailing in his psychic constitution. Excess of alcohol causes stupor and narcosis.

(*Cha. Chi. 24-39*)

Among the three stages of alcoholism the first stage is recognised by exhilaration, delight, discrimination of the qualities of food and drink. The person is inclined to instrumental music, songs, humorous stories. His awareness and memory are not disturbed and the perceptions are not impaired. He sleeps and wakes up on time.

(*Cha. Chi. 24-41, 48*)

In the second stage of intoxication recollection and forgetfulness alternate with one another. There is indiscriminate talk, muttering, unsteady gait, impropriety in all activities of sitting, drinking, eating and incoherent talk.

The alcoholic who passes beyond the 2nd stage does not know any impropriety which should not be committed by *rajasic* and *tamasic* natures.

In the third stage of intoxication he falls down like a log of wood, without movement in stupor and though alive he looks dead.

Alcohol causes delusion, fear, grief, anger and death. It also brings about insanity, toxicosis, fainting, epilepsy and convulsive attacks.

(*Cha. Chi. 24-56*)

The person behaves in a most improper and condemnable manner in the gap in between second and the third stages.

(*Cha. Chi. 24-61*)

Alcohol when used properly relaxes the man and removes his sufferings and sorrow.

(*Cha. Chi. 24-67*)

The alcoholics generally dream of being covered by grass, ash, creepers, leaves or mud and that animals and birds are threatening him and unpleasant and un auspicious events are happening.

(*Cha. Chi. 24-105*)

In the event of excess purgation, there will be loss of sensation, body ache, exhaustion, tremors and other symptoms of aggravated *vata*. Drowsiness, loss of strength, fainting and mental disturbance and hiccup result since *kapha*, *rakta* and *pitta* are much depleted.

(*Cha. Chi. 1-18,19*)

The disciples of Divodasa, with Sushruta as their spokesman approached their preceptor with reverence and requested him to impart to them the Ayurveda by which they could cure the mental and physical

ailments which afflict the human race. Full of compassion for the suffering persons, the disciples desired to remove the diseases so that they could discharge their legitimate duties and lead a happy life in this world and the next.

(Su. Su. 1-4)

Physical diseases arise with the vitiation of *vata*, *pitta*, and *kapha doshas* while they mental ones such as exhilaration of emotions or depression arise due to the predominance of *rajas* and *tamas*. They may be exogenous arising out of the fear of tigers, weapons, etc. Inevitable afflictions like the emaciation of body on account of old age and death are not regarded with much importance in this treatise. The body is only a vehicle to *atma* (soul) and therefore it is necessary to maintain the body, senses and mind in good condition. To the rishis mere treatment of the natural afflictions alone is enough since they are not affected by the endogenous and exogenous or mental aberrations. Whereas, even those who have all facilities like friends, relatives and money are also afflicted with diseases, and as a result feel deserted, and insecure. Their behaviour will be erratic. Hence without the knowledge of life, its uses, health and its maintenance, friends and other prerequisites come worthless.

The living body is the abode of *atma*. *Atma* is inseparable from the mind and it is through this mind that he enjoys all good events or suffers from miseries affecting both body and mind. In other words, the pure consciousness is changeless but when associated with the body it appears as the soul. For its emancipation the body as well as the mind have to be maintained well (see c-Sutra. Chap. 1-56). A few opine that the continuance of well being is in the interest of one's future progeny. All

the objectives relating to this life and the next one are achieved by following the tenets of Ayurveda.

Ayurveda is a branch of *Atharvaveda*. It comprises eight branches and *bhutavidya* (demonology) is one among them. This explains the behavioural personality of certain categories of people who exhibit abnormality. Such persons are seized by invisible objects which are usually called *grahas*. These are (1) *deva*, (2) *asura*, (3) *gandharva*, (4) *yaksha*, (5) *raksha*, (6) *pitru*, (7) *pisacha*, (8) *naga grahas*, and the like. The seizure lasts till they are appeased with offerings, incantations or exorcising evils (for example, *deva graha*). During the period of the attack, the victim acts and commands as if he is god. He will be pleased when he is worshipped and treated like god.

(Su. Su. 1-74)

Asuras are opposed to gods, *gandharvas* are musicians to gods. *Yakhas* deal in finance. *Rakshasas* are aggressive like Ravana. *Pitrus* are fond of libations. *Pisachas* are after eating flesh. *Nagas* act like cobras. All these spirits trouble human beings mentally and physically.

Ayurveda is intended to fulfil two objectives. They are:

- (1) To preserve the health of healthy persons and
- (2) To remove the sufferings of the diseased.

(Su. Su. 1-14)

Vyadhi means disease affecting man on account of the vitiation of *doshas* namely, *vata*, *pitta* and *kapha* and their complications such as fever, diarrhoea etc. These generally, pertain to the body. Attachment to the vagaries of emotions like passion, anger, fear, makes one continue in the wordly miseries. On the other hand, emotional detachment leads to

emanicipation. Apart from the two, longevity can be increased by the procedure of *rasayanas*. *Rasayana* who protects persons suffering from prolonged incurable ailments (*yapya rogas*) since it builds up the body forces which resist diseases.

Ayurveda is a branch of knowledge which elucidates life. It also enables a person to enjoy a meaningful and healthy life.

(Su. Su. 1-15)

The configuration of body, senses, mind and consciousness is *ayus* or life. An enquiry into *ayus* or the knowledge of this science is known as Ayurveda.

(Su. Su. 1-41)

Diseases are those which inflict suffering on the *Purusha*.

(Su. Su. 1-23)

Purusha is an entity comprising of the five *mahabhutas* and vitality. Any stress found in this psycho-physical entity is called suffering. Suffering may be either endogenous or exogenous.

Diseases may be somatic, psychological, exogenous or natural.

External causes such as injury etc. may produce diseases; such diseases are exogenous. Errors of judgement lead to unhealthy regimen, faulty diet etc. which provoke the three *doshas*; and these *doshas* cause various diseases which are called somatic.

(Su. Su. 1-24)

(1-2)

Extraneous cause such as a trauma causes deformity or disease while the bodily (physical) disease arises from faulty food and drinks which vitiate *vata*, *pitta*, *kapha*, and *shonita* (blood). Unwholesome food, contaminated food, water, their untimely consumption, seasonal changes changes or their incompatibility to the body etc. vitiate *doshas* and blood and thus upset health. (See C. Sutra 20)

(1-3)

Psychological disturbances such as anger, fear, grief, joy, depression, cruelty, jealousy, malice, lust, greed, etc are derived from two tendencies viz. desire and aversion.

Anger is characterised by the desire to injure others. Lust is excessive indulgence in the sensual pleasures. Arrogance, intoxication and hypocrisy are also psychological disturbances. Desire is the main cause for many different emotions such as joy, grief, meanness, lust, greed etc. Aversion too is the root cause for many varying emotions like anger, fear, depression, malice, cruelty etc.

(1-4)

Natural diseases are hunger, thirst, old age, death, sleep, etc.

Hunger, sleep, thirst and the rest can be either natural (or timely) or unnatural (untimely). When the *pitta* gets excessively aggravated, the patient suffers from excessive hunger; this hunger is unnatural, and has to be coneracted. Likewise premature ageing is to be regarded as an unnatural

disease which has to be treated. Natural diseases on the other hand are irremediable.

Diseases affect both mind and body.

(Su. Su. 1-26)

Anger, fear, etc are diseases which affect the mind; fever; diarrhoea etc. are diseases which affect the body; epilepsy, insanity etc. are diseases affecting both body and mind. While it is true that when the mind is affected, the body too is affected and vice-versa, psychological diseases first affect the mind and later the body. In the same way, diseases which are called somatic, primarily affect the body and later, the mind.

Exogenous diseases are of two types, one affecting the mind, and the other the body. Hence treatment is also different. Diseases of the mind are treated by appeasing the patient with regard to his sense objects viz. sound, touch, sights, taste and smell. Others include manipulations such as instilling, fortitude, recapulations of certain pleasing events, philosophical and moral instructions.

(Su. Su. 1-36,37)

Children are susceptible to certain *grahas* which are nine in number. Unlike the *grahas* described earlier (Chapters 1-7) these evil spirits do not simulate any particular personality. Each *graha* manifests a special group of psychosomatic symptoms personality. Each *graha* manifests a special group of psychosomatic symptoms. The nine *grahas* are - (1) *skanda*, (2) *skandapasmarā*, (3) *sakuni*, (4) *revathi*, (5) *pootana*, (6) *andhapootana*, (7) *sheetapootana*, (8) *mukhamandika*, (9) *naigama*.

(05-21 22 22)

(Su. Su. 3-35,36)

Some diseases are attributed to causative factors which are not human. Such causes many affect both mind and body. These and epilepsy and insanity are also included under *Butavidya*.

(Su. Su. 3-4)

The ability of a surgeon depends upon his qualities such as courage, quickness in action and handling sharp instruments, absence of perspiration, steadiness, and presence of mind.

(Su. Su. 5-10)

The good surgeon will have confidence in his work along with presence of mind.

A patient who has been operated upon should avoid physical exertion, sex, emotions such as anger, fear, etc and intake of indigestible food until the operated wound heals perfectly.

(Su. Su. 5-39)

The presence of distress-producing external objects in the body has an impact both on the body and mind. Surgical instruments are used to remove them from the body.

(Su. Su. 7-4)

By strength is meant an able physical constitution, absence of obstruction in any activity undertaken (physical or mental), unimpaired voice and complexion, and normal capacity of the external organs (ears, eyes, etc.) and the internal instruments (mind, consciousness etc.) to discharge their respective functions.

(Su. Su. 15-20)

According to some authorities, the extremities, tongue etc. are the external organs and sense organs are internal instruments. Some others are of the view that the sense organs such as eyes, ears, nose, tongue and skin are external organs while mind, consciousness, intellect, ego etc. are internal instruments. Strength therefore refers not only to bodily strength, but also to the strength of the mind and senses.

Emotion such as anger, fear and sorrow, fatigue, physical exertion, starvation etc. result in deficiency of *ojas*.

(Su. Su. 15-23)

Ojas is the essential lustre of the body elements (*dhatu*s). It is this *ojas* which is called strength (or resistance to disease).

Displacement, vitiation and deficiency are the three diseased conditions of *ojas*.

Displacement of *ojas* may occur due to a blow or any other trauma. Vitiation of *ojas* results due to the provocation of the three doshas. Deficiency of *ojas* may be caused by fear, anxiety, emotion, etc. For displacement of *ojas*, the patient experiences weakness of joints, fatigue and mal-functioning of the three *dhatu*s (*vata*, *pitta* and *kapha*), body and mind. In vitiation of *ojas* the patient has stiffness and heaviness of the body swelling, discolouration of skin, drowsiness, lethargy and excessive sleep. In deficiency of *ojas*, the patient suffers from fainting, emaciation, confusion of mind, delirium and eventually death.

Delirium is used in the sense of irrelevant, confused and unintelligible speech.

(Su. Su. 15-24)

Deficit of *ojas* gives rise to emaciation of muscles, drowsiness, sleep, vatic edema, fainting, irrelevant talk and loss of consciousness.

(Su. Su. 15-29)

A person is said to be healthy

- (1) When the doshas and bodily elements are balanced and harmonious.
- (2) When the digestion is normal.
- (3) When the excretion of waste products is unimpaired and
- (4) When he is endowed with tranquillity and clarity of soul, mind and senses.

(Su. Su. 15-48)

A person who resides in a clean, airy and spacious house will not fall a prey to somatic, psychological or exogenous diseases.

It is well known that the environment has a strong influence on man's mind, and that a tranquil and healthy mind is essential for bodily health.

(Su. Su. 19-4)

The *pitta* which is active in the heart of an individual is known as *sadhaka* (or effective energy). It is this *pitta* which makes it possible for a person to achieve his desired objectives.

A person can achieve the four fold objectives of dharma, artha, kama and moksha only through the activity of this *sādhaka pitta*. A person whose heart is filled with ignorance and lethargy born out of *tamas* is unable to fulfil these desired goals of life. It is only this *sādhaka pitta* which can dispel lethargy and ignorance.

(Su. Su. 21-10)

The unctuousness present in the head of an individual protects and strengthens the sense faculties, and is therefore known as santarpaka (the invigorating).

(Su. Su. 21-14)

The unctuousness is derived from *shlesma* (or *kapha*). Some authorities claim that the unctuousness mentioned in the above verse refers to the brain.

Emotions such as anger, grief and fear, starvation, fatigue etc. are responsible for causing the provocation of the *pitta*.

(Su. Su. 21-21)

Defects in the sperm and ovum engender diseases such as skin ailments, piles etc. which are hereditary. Such diseases may be transmitted from either the mother or the father. Wrong diet and regimen of the pregnant woman cause diseases in the progeny such as lameness, blindness, deafness, dumbness, nasal voice etc. which are congenital.

(Su. Su. 24-5)

The defects in the sperm and ovum are caused by the provocation of *vata*, *pitta* or *kapha*. In congenital diseases, the sperm and ovum will be healthy.

Prognosis of a disease whether good or bad can be inferred from the omens at the time when the informant of the patient presents himself before the physician.

(Su. Su. 29-53)

This is known as *dootapareeksha*. Omens are considered to have some bearing on the patients' condition. This would guide the physician as to what he could do in the circumstances. The phenomenon of cause and effect, and the converse are considered here. Some of the portents appear to be based on close observation and experiences and therefore *dootapareeksha* forms one of the psychic factors in the examination of the patient (see. C. Indriyasthana).

The dreams seen by the patient and his well wishers also provide a clue to the eventual outcome of the disease.

(Su. Su. 29-54, 66)

Dreaming of the body being anointed with oil, riding on a camel or a carnivorous beast or an ass, a boar, a buffalo, towards the south, or himself being dragged towards south by a dark woman in red attire and dishevelled hair, laughing and dancing, indicate the person's death in the near future.

If a patient dreams that he is dragged southward by a lowest caste person or that ghosts and hermits are embracing him, savage beasts or diabolical faces smelling him frequently, his death is nearing shortly. Likewise, if the patient in his dream drinks honey or oil or dives into mire or smears it on his body and with that he laughs or dances, will die soon.

If the patient dreams as if he is naked and wearing a red flower garland entwined on his head, or sees bamboo reeds or palm trees growing on his chest, he will face death early.

Similarly, if the dream is such as a fish is swallowing him or enters his womb, or falls from the peak of a mountain, feels enveloped in darkness

during the bright day, dreams that he is carried away by the current of a river, finds himself cleanly shaved his head, defeated or killed by crows etc., sees the meteors falling down, his own eyes being extracted or a burning lamp suddenly extinguished, dreams earthquake, sees deities; or as if vomits or purges, his teeth falling out, sees that he climbs shalmali or kinsuka, or bound to a sacrificial post, or blossomed kovidara tree, or placed on funeral pyre, or receives and eats cotton, or oilcake, oil seeds, salt, prepared rice and drinks wine will not live long. If a healthy man dreams so he will fall ill.

Dreams which do not conform to the constitution of the patient, dreams which are soon forgotten, unpleasant dreams which are soon erased by pleasant ones, dreams which are caused by anxiety and which are seen during the day are all of no importance whatsoever.

Usually, patients belonging to the *vata* constitution dream of travelling, activity etc.; patients of *pitta* constitution dream about fire, sun, lightning, etc. and patients of *kapha* constitution dream of lakes, surans, lotuses, etc.

(Su. Su. 29-67)

A fever patient making his friendship with a dog; a phthisis patient dreaming him friendship with a monkey; a mentally abnormal person dreaming friendship with a demon; an epileptic with a ghost; a patient of polyuria or diarrhoea, drinking water, a leprosy patient drinking oil (or a lipid), or a patient of abdominal tumor dreaming the growth of a tree in his elementary tract, and a person with migraine dreaming the growth of a tree on his head; likewise a patient of vomiting, eating flour coils; a patient with dyspnoea of thirst dreaming of walking; an anaemic patient eating rice tinged with turmeric and a haemocholic drinking blood will die soon.

To mitigate the evil effect of such a dream the patient should, on waking up in the morning, offer a gift of black gram, sesamum, metallic vessel and gold to yogic brahmins, and in addition meditate on Tripada Gayatri.

(Su. Su. 29-71.74)

To nullify the effect of a bad dream felt during the first quarter of the night one should meditate on veda or any deity and then sleep again. He must not relate such bad dreams to others. On the other hand he should spend three nights in a temple, worshipping the deity and holy persons.

Some auspicious dreams will be narrated herein which are favourable to the patient and indicate their speedy recovery. They are dreams seen of gods, brahmins, cows, bulls, living friends and relations, blazing fire, polite or disciplined persons or a patch of clear water and fruits.

(Su. Su. 29-75,81)

Dreams like going up a palatial building, climbing a tree, or a hill; riding an elephant; crossing rivers, sailing on turbid waters predict good events. Even bites and stings by snakes, leeches and bees are favourable dreams of the patients who can be treated confidently by the physician.

Perverted actions and reactions of the mind indicate the prognosis of diseases. Sudden changes in the cognitive faculties may indicate the untimely death of the patient. These symptoms are called *arishtalakshanas*.

(Su. Su. 30-3)

Before undertaking to treat his patient the wise physician should take note of the *arishtalakshnas*, to keep up his fame. The *lakshanas* (signs and

symptoms) related to the individual's body, mind and constitution (*Cyashtiprakriti*). *Sheela* is the behavioural aspect of the mind. *Prakriti* is the normal condition of the individual. Any irreversible change among the three forebodies death. *Charuka* describes *prakriti* of an individual in respect of genetic features, aptitude of the creed. Organic trend of speech, thinking within according to his nature; reaction of the body to the seasonal conditions, physical built and qualities such as resistance and tolerance to disease and congenital parts of the body and their functions like speech, thought and so on (see Charaka Indriya Ch. 1).

The above aspects pertain to each individual with regard to his body, speech and mind. In the event of an irreversible change in his five percepts it portends death.

A patient says that he is hearing varieties of sounds which are not present and cannot hear actually available sounds. He may tell that he hears the voice of celestial beings like songs of *siddhas* or *gandharvas*; or the moanings of a city, the uproar of a city, rumbling noise of rain while none of them are actually present. He may not hear the sounds of domestic animals, or of forests in his proximity, as others can catch up. He may even interpret such sounds to some other things, eg. the bark of a dog to the bleat of a sheep or any of the sort. He may be happy to listen to the plot of his enemy and become furious at the good advice from his friend. Such a sudden change in the sense of hearing in him indicates the days of death.

(Su. Su. 30-4, 6)

The man, who feels cold for hot or hot for cold or does not feel pain if beaten, or complains of burning sensation from a non inflamed boil,

or when the body temperature is very high, shivers with cold and covers himself warmly, dies shortly. Such controversies of tactile sense are signs of impending death of the individual.

(Su. Su. 30-9)

If the person cannot recognise the deposits of dust on his skin; or if a change in the colour of his skin has taken place he should be considered a dying man. (C. Indriya Ch. 4)

(Su. Su. 30-9)

The natural colour of the skin may change fully or partly to black or red. Such changes in colour in a short period of time is a portent of death.

If after a clean bath the body is perfumed but still is surrounded by a swarm of flies, the patient is destined to die in about a year.

(Su. Su. 30-10)

It is well known that flies swarm about sweet things and putrefying organic substances. Blue flies are born out of the faeces. In spite of bathing and applying perfumed powder and scent the flies trouble the person, it must be construed that his skin is turning sweet and death is approaching in a year. Even if his skin is not applied with any sort of perfume but yet emits fragrant smell, he should be considered to die soon.

Similarly, if a faulty perception by taste such as the sweet taste understood as sour, vice versa; and the ordinal use of food according to taste, aggravates the somatic *doshas* and diminishes his appetite for food, such a man dies in a month.

(Su. Su. 30-11, 12)

Contradicting sense of smell such as fragrant one appearing offensive, or an offensive smell pleasing, and the smell of smoke emitting out of an extinguished wick of a burning lamp are symptoms preceding one's death even if he looks healthy.

(Su. Su. 30-13)

Dual qualities like heat and cold etc., seasonal variations, the looks at the sky appear contrary to the natural state in a dying man. He is unable to distinguish between them or appreciate their real state.

(Su. Su. 30-14)

The person nearing death loses one or the other faculties of the mind. Heat does not appear to be hot. Smooth things appear rough, pleasure appears to be pain, weather conditions are not correctly perceived, inability to distinguish the directions, all indicate the death of a man in about three months time. Tactile sense is understood through the skin, or directly by the mind. Heat, cold etc. are perceptible to the skin whereas the directions can be understood straight away by the mind (See C. Sh. Ch. I).

The man who sees stars in the broad day light, or sees sun in the night and the moon by mid-day, or sees a rainbow, or lightning in the absence of rainy cloud when the sky is quite clear, will die in about two or three months. The man, who sees the sky covered by the images of chariots, palaces, and airships, or blazes of fire, idols of gods, or earth enveloped by smoke or mist, flooded with water, or whose eye cannot see the visible pole star or Arundhati star or the milky way in the sky will die very soon.

(Su. Su. 30-15)

The man who cannot see his own shadow in the moonlight, a mirror, or hot water or sees his image distorted like any or one organ missing, or like that of a dog, crow, vulture, ghost, yaksha, rakshasa, pishacha, or naga will soon meet his death. Likewise, one who sees his body full of the colours of a peacock's neck or cannot see the emanating smoke of fire dies early if he is suffering from any disease or if healthy he will soon fall ill.

Thus in this chapter on the senses, the symptoms and signs show the failure of the receptors and the mind to comprehend stimulations from the senses. The physician has to note the symptoms in the patient to know the prognosis before taking up the case for treatment. The predictable time of death in such cases is dealt in an elaborate way in the Indriyasthana of Charakasamhita. Apart from the failure of the senses and mind to act and react to the external stimulants, certain pathological changes in the tissues of the body take place and exhibit distorted features in the tissues of the body.

(Su. Su. 30-16-23)

These features also act as guidelines to the physician to determine the probable time of death.

Charaka has stated the distinction between *chaya* and *prabha*. The former is the shade complexion as seen closely and the latter as the normal glow of the complexion from a distance (*C. Indr. Ch. 7*).

If a man's natural colour of the skin quickly changes over to dark brown, reddish or bluish or yellowish colour, his death is said to be fast approaching.

(Su. Su. 31-3)

A man, in whom the sense of modesty is lost and his distant complexion, memory, fortitude and the liveliness are suddenly lost, must be considered to die very early. The liveliness of the patient is due to the *ojas* present in him. Some interpret *ojas* as the strength. Deterioration of functions in the tissues gives rise to loss of strength.

(Su. Su. 31-4)

A person who is sleeping constantly or does not sleep at all, is drowsy, and faints while attempting to speak will die shortly. Similarly, if the patient licks his upper lip, looks to be conversing with a departed soul, he must be considered to be nearing death.

(Su. Su. 31-15, 16)

Ghosts, evil spirits, *pischachas* and monsters of different types lead the men to death. To such men potent medicines are futile since the ghosts and others nullify their action.

(Su.Su. 31-32)

An insane person, who is extremely weak and also emaciated, and always sits up without sleep, gazes either upwards or downwards will soon die without any doubt. Loss of strength is interpreted for loss of enthusiasm.

(Su. Su. 33-25)

An epileptic being emaciated moving his eye brows involuntarily and attacked by too many seizures dies soon. Both in insanity and epilepsy the symptoms are due to the defective control of *praud* over the areas exhibiting exaggerations. Since the chief of *vayus* controls the other *vayus*, *doshas* and *dhatu*s, its extreme defect or incompetence produces signs and

symptoms of the sort stated about. The senses become perverse to stimuli like sound, touch, vision, taste and smell. Even concepts become defective. *Prana* has to regulate itself which is possible by its will and performance. Mind is subordinate to *prana* (*Bhela*). Mind is vagrant because of *prana*. In order to control this *prana* and its motivations, practice of yoga has found its importance. Medicines and food can act on the *doshas* and *dhatus* as far as their *panchabhautic* properties are concerned.

(Su. Su. 33-26)

An abuse of the food habits, addict to intoxicants and prolonged use of medicines, neglect of hygienic living and disciplined life cause disturbed state of *doshas*, *dhatus* and *malas* and these in turn upset the mental faculties (See C. Nid. 7 and 8).

A man attains his maximum strength when he is about twenty-five years old; and a woman exhibits her full strength after she reaches the age of sixteen.

The *saras* are now being described:

(Su. Su. 35-16)

A person who possesses good memory, devotion, wisdom, courage, cleanliness of body and mind and virtues is said to be having *satwa sara* (excellence of mind). A person who has a glossy and fair skin, compact body, well set bones, nails and teeth, and many children is said to possess *sukra sara* (excellence of reproductive elements). A person who is plump and strong, who has a deep and resonant voice and whose eyes are large and lustrous is said to be endowed with *majja sara* (excellence of marrow). A person who possesses a well-built body, broad shoulders, and firm teeth,

jaw, bones and nails is supposed to have *asthi s̄ara* (excellence of bones). A person endowed with unctousness in music, voice and sweat and a hefty body and who is unable to withstand strain has *medo s̄ara* (excellence of adipose tissue). A person whose nails, eyes, palate, tongue, lips, palms and soles are unctous and copious in colour has *rakta s̄ara* (excellence of blood). A person having *mamsa s̄ara* (excellence of flesh) is muscular, and has deep set bones and joints. A person who has a pleasant and soft skin and hair is said to possess *twak sara* (excellence of skin). Persons of each succeeding *sara* are judged to be inferior to those possessing the previous *saras* with regard to worldly prosperity and longevity.

(Su. Su. 35-16)

The excellence of skin implies excellence of *rasa dhatu* (the nutrient fluid) also, since the skin (as every other element of the body) is nourished by it.

The digestive fire is known as the Lord since it is all powerful. It is extremely subtle and therefore cannot be seen, but it can be inferred from its actions (such as digestion etc.)

(Su. Su. 35-27)

This digestive fire is activated and maintained by the *prana vayu*, *apana vayu* and *samana vayu* in their normal condition.

The activating of the digestive fire is done by the *prana vayu* and *apana vayu*; while the maintenance or preservation is caused by the *samana vayu*.

(Su. Su. 35-28)

A person whose mind is dominated by *satva* is able to bear distress and joy without agitation, a person whose mind is strongly influenced by

satva can endure any amount of suffering on his own; while the person whose mind is dominated by *rajas* can endure suffering only when he is enthused by others. A person whose mind is dominated by *tamas* is unable to withstand suffering at all.

(Su. Su. 35-38)

The undisturbed *vata* maintains the body elements and the digestive fire in a state of normalcy, conduces to proper sense perception and impels the normal functioning of the body and mind.

(Su. Ni. 1-10)

That aspect of the *vata* which surges upwards in the body is termed the *udana*. It is this which provides the impetus necessary for speech, singing etc. Any disturbance in this aspect of the *vata* produces diseases of the region above the neck.

(Su. Ni. 1-14,15)

The *udana* *vayu* is active not only in the upper part of the body, but also in throat, chest and the umbilical region. Diseases of the region above the neck refers to the disorders of the eye, face, nose, ears and head. Occasionally, diseases such as jaundice are also caused by *udana* *vayu*.

The normal heat (temperature) of the body is increased by emotions such as anger, grief and fatigue, and transmitted to the head. This abnormal heat and the *pitta* then cause greying of the hair.

(Su. Ni. 13-35)

The cause for the origin of every object in the universe is the uncaused, unmanifest eightfold principle (*Avyakta*) which is composed of the three

attributes *satva*, *rajas* and *tamas*. This single, unmanifest principle is the foundation for every individual soul (*kshetrajna*) even as the ocean is for the waters.

(Su. Sha. 1-3)

Therefore the unmanifest principle bring into being the '*mahat*' which also is composed of the three attributes. This *mahat* then creates the '*Ahamkara*' which again is threefold viz. *vaikarika*, *taijara* and *bhutadi*. The *vaikarika ahamkara* aided by the *taijara* evolves into the eleven faculties, all of which are again having the three characteristics - *satva*, *rajas* and *tamas*. Of the eleven faculties, five are the sense faculties, five are the connative organs, while the remaining one is the mind which is both cognitive and connative. The *bhutadi* aided by the *raijara ahamkara* creates the five *tanmatras* which also have the qualities - *satva*, *rajas* and *tamas*. These *tanmatras* each corresponding to the sense objects such as sound, touch, form, taste and smell. These *tanmatras* which are subtle manifest as the five *mahabhutas*. Thus have the twenty-four principles been enumerated.

The corresponding connate functions are speech, receiving (working), sexual pleasure, excretion, and locomotion.

(Su. Sha. 1-5, 6, 7, 8)

Avyakta mahat, *ahamkara* and the five *tanmatras* are the eightfold *prakriti* and the remaining sixteen evolutes are formed from this unmanifest principle.

Avyakta and its evolutes are all insentient. *Purusha* alone is the sentient who animates. Hence *avyakta* is the *kshetra* or the field for action and *purusha* is the *kshetrajna* or the spirit, the knower of action.

According to the sankhya *moolaprakriti* is only one and *purusha* any number and both pervading everywhere.

Ayurveda differs from sankhya in certain respects. The sense organs and the sense objects are also *panchabhautik* since they respond to the *bhautik* properties. All the organs, though made of the five *bhutas* each possesses one *bhuta* in predominance. Thus the ear has the *akaasa* (space) in predominance and is able to perceive only sound, skin possesses *vayu* to convey tactile sense only and so on. *Kshetrajnas* are not all pervasive but eternal. They are limited in number to the living beings in the forms of animals, humans and superhumans. The form of bodies that they possess is in accordance to the *dharma* and *adharma* of the *karmas* evinced by *kshetrajna* in his previous birth. Those who had committed vices (wrongful acts) in the previous birth are said to have taken birth as lower creatures and animals; those who had a mixed action of vices and virtues are born as human beings and those with virtues alone are born as superhumans. These have to be accepted only by inference since the *kshetrajnas* entry into the embryo at the time of copulation cannot be perceived on account of his subtleness (vide C. Sh. 1, 3). Hence the term *Purusha* is stated to be the *kshetrajna* embodied by the five primordial *bhutas*. He is also known as *karmapurusha* as he enjoys the fruits of his actions. He is the subject to whom all treatment is intended.

(Su. Sha. 1-16)

The qualities of the embodied individual soul are happiness and sorrow, desire and aversion, effort, respiration, blinking, awareness, mind, thought, consideration, recollection, knowledge, perception and understanding.

(Su. Sha. 1-19)

Sukha is happiness or a feeling which is found to be convenient to the living being and its opposite feeling is *dukha* or misery. It is disliked by the subject and tendency is always to hate misery and seek happiness. This is common in all living beings.

Itcha is a desire born within oneself. There is a longing to fulfil the desire in a stipulated time. *Dwesha* is hatred which is opposed to *itcha*.

Prayatna is to try to get a work. This effort is also inborn but sequel to desire.

Prana indicates life. *Ana* is *vayu*. In the living body this *vayu* is the chief to conduct all actions and reactions. It controls all other *vayus* and co-ordinates their functions, one with the other. for example, *samana* incites appetite for food. *Prana* asses food into the stomach. *Samana* digests and absorbs the chyle and separates the waste. *Apana* removes the waste, under the directions of *prana*.

Sankalpa is one of the functions of *manas*. It is imagination of the mind. *Vicharana* is reviewing the perception. *Adhyavasaya* is the reaction to the action. As soon as awareness is produced in the intellect, this latter sets the mind to execute work with the co-ordination of the connate organs.

Persons whose minds are dominated by *satva* are kind, self-controlled, tolerant, truthful, righteous, pious, learned, wise, intelligent, and possess good memory, and are magnanimous.

Persons whose minds are influenced by *rajas* are unhappy, restless, unrestrained, arrogant, untruthful, unmerciful, wicked, self-seeking, lustful, sensuous and irascible.

Persons whose minds are controlled by *tamas* are depressed, atheistic, unrighteous, irreverent, ignorant, lethargic, evil minded and slothful.

(Su. Su. 1-20)

Certain code of conduct has been laid down on both the male and the female partners to procreate in an improved type of progeny. The male sperm is represented in the *sukra* or semen and counterpart ovum of the female in the *arthara*. These fertilisation factors must be free from blemishes before their union in the female. Apart from these physical entities the psychological factors in both the sexes are found to play a very important role, and particularly of the female.

The woman, from the first of her menstrual period must observe the following restrictions:- She must avoid coitus, avoid day sleep and application of collyrium to eyes, shedding tears, bathing, cosmetics, oil bath, pairing of nails, running, loudly laughing, too much talk, hearing of loud noise, combing her hairs, walking against high breeze (against wind) and all laborious or tiresome work. The reason given in each case is that by day sleep the child to be born will be sleepy; application of collyrium causes congenital blindness; weeping causes defective sight; bath and cosmetics give rise to sorrowful nature in the child; oil baths cause skin diseases, pairing nails causes deformity of nails, running during the period makes the progeny fickle-minded, laughing causes dark discolouration in mouth, teeth, lips, palate and tongue; too much talking makes the child very talkative, hearing loud noise causes deafness, combing of hair causes baldness, winds and tiredness give rise to mental defects and therefore all these have to be given up by the woman during her periods. Even her husband's sight must be avoided. Her food must contain enough ghee.

On the fourth day she must bathe and wear clean newly washed clothes, adorn herself and with a pleasant mind approach her husband.

(Su. Sha. 2-25, 26)

Prior to this, the husband must have remained a bachelor in the previous month and using ghee, milk, shali rice so that his body could be well nourished with sufficient fats. Likewise the woman also under celibacy in the previous month must have been using more til oil and preparations of black gram and til oil in her food.

On the fourth day in the night they could have coitus. The fourth, sixth, eighth, tenth and twelfth nights after menstruation are recommended to get a male child; whereas the fifth, seventh, ninth and eleventh nights are recommended to get a female child. However, coitus must be avoided after the twelfth night.

(Su. Sha. 2-27, 28, 29)

The mental state for both husband and wife must be quite elated, specially the female since it is she who bears the embryo and permits it to develop according to her wishes. The desire in the woman for the type of her future child decides its traits, nature, talents and personality. Charaka says that the mental state of the father and the mother during coitus, her mental state during pregnancy, her nutrition and the past reminances of action of *karmapurusha* contribute to the embryo for its future development.

The ovum is liberated from the female reproductive system by contact with the male partner during coitus even as ghee melts when in contact with the fire.

The ovum is released from the ovary as a result of the heat generated during intercourse. This ovum descends and comes in contact with the sperm, and conception takes place. The ovum is not expelled from the female body.

(Su. Sha. 2-36)

The parents emotion appears to influence the progeny. Hence sexual perversions are prohibited so that their child may be as natural as possible in their sex features.

The attitudes regarding food, behaviour and activity which the parents possess during coitus is transmitted to the child.

(Su. Sha. 2-46,47)

The behaviour of a man, during his life time determines the nature of his next life; the qualities of the next life depends on the habits of the man during this life. Thus a man who is extremely learned and erudite in this life will be endowed with *satva* in his next life.

(Su. Sha. 2-57, 58)

During intra-uterine life, the mind of the foetus is manifested during the fifth month, and awareness during the sixth month.

Sleep is divine obscuration, which envelops all living beings. When the pathways of cognition are obstructed by *tamas* in an individual, he suffers from sleep which precedes death. Such a sleep is called *tasmatic* sleep. On the other hand, when the mind of a person is influenced by *tamas*, that person sleeps for long duration of time, when it is dominated by *rajas*, he sleeps around midnight. Persons in whom *vata* is excited, and *kapha*

is reduced and who are both physically and mentally tired get disturbed sleep (*Vaikariki nidra*).

Here three kinds of sleep have been explained. The first kind, or *tamasic* sleep is experienced only on the death bed. The second kind is normal sleep which varies according to the disposition of the person. The third kind is abnormal or unnatural sleep which occurs in diseased persons.

(*Su. Sha. 4-33*)

Oh Sushruta! Know you that the heart is the abode of vitality; living beings sleep only when that is influenced by *tamas*. *Tamas* is responsible for sleep, and *satva* for awakening; while nature alone is responsible the predominance of one over the other.

(*Su. Sha. 4-34,35*)

When a person sleeps, his mind is impelled by the *rajas* to recapitulate the previous experiences, good or bad.

If the mind is by any chance enveloped by *tamas*, the person will tend not to have dreams, since *tamas* causes inertia.

(*Su. Sha. 4-36*)

Although the soul can never sleep, the envelopment of the ever-active sense faculties by *tamas* creates the illusion of sleep.

Along with the sense-faculties, the mind of the person is also so enveloped by *tamas* that it is unable to perform its natural functions.

(*Su. Sha. 4-37*)

Even if sleep during the day, and night watching are regarded as being harmful to health, they do not adversely affect those who make it a matter of daily routine.

(Su. Sha. 4-41)

Loss of sleep results from excited condition of *vata* and *pitta*, and from anxiety, emaciation and trauma. It is alleviated by measures which are contradictory to the causes, such as oil massage, application of oil to the head, rubbing the body mildly, smearing pastes on the skin, comfortable cots and chairs for sleeping and sitting, etc.

(Su. Sha. 4-42, 43, 46)

Drowsiness is a state resembling sleep where the sense perceptions are dulled, and where the person experiences heaviness of the body, yawning and lethargy.

There is yet another difference between sleep and drowsiness. When a person awakens from sleep, he is alert, whereas the drowsy person continues to be lethargic even after he is awakened.

(Su. Sha. 4-49)

Yawning is the state in which the person takes in a deep breath by opening his mouth, while stretching out his chest and sheds a little tear. This action predisposes fatigue to show disinterest in his engagement.

(Su. Sha. 4-50, 51, 52, 53, 54)

Fatigue is the condition in which the individual feels tired without any exertion and increase in respiration but experiences an aversion to the sense objects.

(Su. Sha. 4-51)

Laziness is that condition in which a person is addicted to a comfortable life, and averse to hardships. Due to absence of enthusiasm, the person does not engage himself in any work, even if he is strong enough for it.

(Su. Sha. 4-52)

Utclesha is nausea, a sensation which precedes vomiting. It starts with *ptyalism*. Psychosomatic causes induce *utclesha*.

(Su. Sha. 4-53)

Glaani or langour is a feeling accompanied by sweetness of the mouth, dosing, squeezing sensation in the cardiac region, giddiness and no liking for food.

(Su. Sha. 4-54)

Gourava is a condition in which the patient feels as if his entire body is covered with a wet leather sheet, and the head feels heavy.

(Su. Sha. 4-55)

All the seven technical terms mentioned above are psychosomatic. The physiological functions react to the mental state and the appropriate signs and symptoms are found e.g. a repulsive sight causing nausea. Likewise heavy food causing drowsiness etc.

Sneezing is a symptom caused by the interaction between *prana* and *udana* in the nasal passages. Their movement in opposite directions obstructs the passage and as the *prana* thrusts the *udana* there appears sneezing. On the other hand if *udana's* against *prana* is stronger there is frontal headache.

Pitta dosha and *tamas* together cause fainting, *pitta* with *rajas* causes giddiness, *vata* with *kapha* with *tamas* cause drowsiness and *kapha* with *tamas* induces sleep.

(Su. Sha. 4-56)

In this we find the preponderance of the physical *doshas* and the *mahagunas* acting on the mind. It has been explained that *satva* wakes up the man while *tamas* puts him to sleep.

PRAKRITI

Constitutional Traits

The *dosha* of both the partners which is predominating during coitus is responsible for the constitution (psycho-physical) of the child.

The psycho-physical constitution may be dominated by any one of the three *doshas*, by a combination of any two *doshas* or by all three *doshas*. The dominance of any one *dosha* can be either normal or abnormal. Thus normal dominance of any *dosha* / *doshas* influences the psycho-physical constitution of the child, while abnormal dominance results in diseases of the foetus.

VATA PRAKRITI

A man whose psycho-physical constitution is dominated by *vata* is wakeful, averse to bathing and cold things, unshapely, theivish, vain, dishonest, and fond of music; the soles of his feet and the palms of his hands are much fissured; he has a rough and grisly beard and moustache, finger nails and hairs; he is hot-tempered and is given to biting his finger nails and grinding his teeth (when asleep).

Morally, he is impulsive, unsteady in his friendships, ungrateful, lean and rough, his body is marked with a large number of prominent veins; he is incoherent in his habit and vacillating in his temper. He is a fast walker and dreams of scaling the skies in his sleep; the eyes are always moving. His mind is never steady. He makes few friends, is capable of accumulating very little money and talks incoherently.

The traits of his character etc seems to resemble those of a goat, jackal, hare, mouse, camel, dog, vulture, crow and of an ass.

PITTA PRAKRITI

A person whose psycho-physical constitution is dominated by *pitta* perspires copiously emitting a fetid smell. His limbs are loosely shaped and yellowish in colour. The finger nails, eyes, palate, tongue, lips, soles and palms of such a person is copper coloured. He looks ugly with wrinkles, baldness and grey hair; he eats much, is averse to warmth and irritable in temper, although he cools down very soon. He is a man of middling strength, and lives up to middle age. He is a man of intelligence, possesses a good memory and loves to monopolise the conversation. He is vigorous and volurous. He dreams in his sleep of such things as meteors, lightning flashes, fire, natasa plants etc. He is never overcome with fear, nor does he bend before a powerful antagonist; he protests the suppliant and is often afflicted with suppuration in the cavity of the mouth. The traits of his character resemble those of a serpent, an owl, a *gandharva*, *yaksha*, cat, monkey, tiger, bear and of a mongoose.

(Su. Sha 4-68, 71)

KAPHA PRAKRITI

The psycho-physical constitution which is dominated by *kapha* endowes a person with complexion resembling either the colour of a blade of grass, blue lotus, polished sword, wet aristha or that of stem of Sara grass. The person is comely in appearance, fond of sweet tastes, grateful, self-controlled, forbearing, unselfish and strong; he does not hastily form any opinion and is fast in his enmity. His eyes are white; his hair black and curly. He is prosperous in life. His voice resembles the rumblings of rain cloud, the roar of a lion, or the sound of a mridanga. His eyes are slightly red towards the corners, the limbs are proportionate and symmetrically developed with a cool effulgence radiating from them. He is possessed of the qualities of the *satva guna*, is capable of sustaining pain and fatigue and is respectful towards his superiors. He possesses faith in the *sastras* and is unflinching and unchanging in his friendships; he suffers no virritudes of fortune, makes large gifts after long deliberation, is true to his word and is always obedient to his preceptors. He dreams of lakes or ponds decked with myriads of lotus flowers, swans and *cakravakas*. The traits of his constitution resemble those of *Brahma*, *Rudra*, *Indra*, *Varuna*, a lion, horse, an elephant, cow, bull, an eagle and swan.

(Su. Sha. 1-72-76)

While studying the personality the psychic and *doshaic* traits have to be elicited. Its importance is in determining the nature of a person in health and changes due to disease. The temperament remains the same throughout one's life time. Any sudden change in this temperament indicates impending death of the person. *Dosha prakrti* does not harm the subject in the same

way as a poison does not kill the insect born out of it. In other words, we say that man's nature never changes.

Shareera (contd.)

The three *doshas* - *vata*, *pitta* and *kapha* and the three *gunas* - *satva*, *rajas* and *tamas* both of which together constitute the *bhutātma* have their seats in the vital areas (*marmas*). Therefore an injury to the vital areas results in death.

(Su. Sha. 6-35, 36)

Earlier a short description was made about the *grahas* or the super human bodies affecting the human mind. Nine other *grahas* are enumerated here which are different from them. They are *skanda graha*, *skandapasmara*, *shakuni*, *revathi*, *pootana*, *andhapootana*, *seethapootana*, *mukhamandika* and *naigamasha* or *pitrugraha*. These have a predilection to children and cause physical and psychic disorders in them. The last one among these is also called *pitrugraha* which is different from the *mane* of that category. This name is distinct from the rest that it is a *graha* protecting the child, even as a father.

(Su. Ut. 27-4, 5)

These *grahas* affect the child in cases where the directions laid down in respect of the conduct of the mother or the wet nurse are not followed, where proper benedictory rites are not performed and where the child is allowed to remain in a soiled, dirty condition, or where the child becoming somehow uneasy gets frightened, is rebuked or begins to cry. They make their appearance for the purpose of getting proper respect and worship.

(Su. Ut. 27-6)

Shandapasmara : Intermittent seizures of the unconsciousness and consciousness, like that of blood clot, putrid smell, aversion to mother's milk, distorted face, palsy of one eye while the other eye is active; exasperation, lids slightly clotted and less crying are symptoms due to the *skanda*.

(Su. Ut. 27-8)

Skandapasmara : Alternative fits of fainting and consciousness, convulsive movements of the limbs. During the attack, the child unconsciously voids faeces and urine, makes noise, bends the body with jerks. There is yawning or froth from the mouth.

(Su. Ut. 27-9)

Shakuni : Limbs are flabby, mind struck with fear, characteristic stink of birds and fish, purulent ulcers all over the body; close eruptions with inflammations indicate the affliction of *shakunigraha*.

(Su. Ut. 27-10, 11)

Revathi : Oral cavity inflamed, green stools, body highly anaemic or dark coloured, fever, mouth sored and painful, rubbing of ears, and nose.

Pootana : Extremities are wearied (drooped), lack of sleep either during the day or night, inconsistent stools, and the smell resembles from that of a crow, there may be vomiting, horripilation and much thirst.

(Su. Ut. 27-12, 13)

Andhapootana : Aversion to the breast milk, diarrhoea, cough, hiccup, vomiting and fever, unhealing ulcers; the child always lies in prone position and the body smell in acidic.

Seethapootana : Staring, intense shivering, bitter weeping, rumbling noise in the intestine, bad odour of the skin and large stools are symptoms due to the affliction of *seethapootana*.

(Su. Ut. 27-14)

Mukhamandika : The trunk portion of the body appears-emaciated. Though the upper and lower extremities are fair they are curved, there is ravenous appetite; and the affected veins are prominently seen on the abdomen. They are matty The child startles now and then. The skin stint resembles the odour of urine.

(Su-ut-27-15)

Naigamesha : The child emits frothy vomitus and cries out in terror and gazes upwards (eye balls fixed) all along. Fever persists; there is the loss of consciousness and the body odour resembles that of tallow.

(Su-ut-27-16, 17)

The prognosis is not good if the child hates the breast milk, frequently faints and presents all the symptoms ascribed to each case.

The symptoms mentioned against the *grahas* are mixed, mostly relating to the body. The sufferings cause psychic and neurological symptoms. Children are easily susceptible to threats, thrashes, insults, ghastly sights etc. Uncleanliness on the part of the mother or the nurse and the child give rise to infection. Deficiency disease symptoms are also mingled with the emotional ones. Hence treatment is also mingled with antagonistic emotions, medicines and diet. Offerings, benedictions, fumigations etc. change fear complex in mind of the child.

The learned, saints, preceptors and guests who transgress their righteous duties and indulge themselves in sinful acts, live on alms, eat food in broken bronze plates expose the children in such houses to the attack of *grahas*.

(Su-ut-37-18-20)

The legend is that Lord Shiva created the *grahas* to protect his child *kartikeya*. As the child grew up the servant *grahas* were assigned to attack children who are not clean and so on. This purports perfect cleanliness from all sides in bringing up the infants to an adult stage when they become conscientious to take care of themselves.

Skanda graha's attack is the most troublesome one among them. It cripples the child permanently or kills it. The prognosis is unfavourable with other *grahas* if all their respective symptoms are present.

(Su-ut-37-21, 22)

Mentally weak person with extremely vitiated *doshas* using incompatible food and suppressing the physical urges or even expose to trauma, suffers from fainting. Its pathogenesis is that the vitiated *doshas* as provoked block the passages of the internal and external sense organs. That is to say, both the sensory and motor organs are blocked by the morbid matter on account of which the person loses consciousness. Internal senses include awareness, mind, intellect and the ego.

The prodromal symptoms of fainting or syncope are discomfort in cardiac region, yawning, depression, loss of consciousness and strength.

Unconsciousness is induced by the vitiated *doshas* blocking the channels and the pervasive *tamas* or delusion due to which the subject does

not feel any pleasure or pain but falls down like a log of wood. This state is termed as *moha* or *moorcha*.

(Su-ut-46-6, 7, 8)

It is classified into six types - *vata*, *pitta*, *kapha*, *shonita*, *madya* and *visha* as separate causative of factors. In all the types *pitta* dominates resulting in syncope. *Madya* is alcoholic in content. Its strength and the tolerance by the victim vary. Likewise the poison also has its toxic effect on the mental faculties.

Prithwi and *ap* are *tasmsic*. Though blood exhibits the separate characteristics of the five *bhutas* it is predominantly made of *prithwi*, *ap* and *tamas*. People of poor mental stamina easily faint at the sight and smell of blood. The characteristic smell of blood is main cause for the loss of consciousness. Some of the epileptic symptoms may also be present.

The toxic properties are very strong in poison and wine so as to induce fainting in the victim.

(Su-ut-46-11)

In the syncope due to the smell of blood, the body and the eye balls are fixed; neither of them react with any movement. Breathing is subnormal. In the case of intoxication due to strong wine the person has hallucinations. The body and limbs are not fixed. He thrashes about on the ground till the alcohol completely digests.

(Su-ut-46-12, 13)

Acuteness of the poison is found along with the symptoms. Shivering, sleep, thirst and loss of movement or stiffness of the body are seen in

the case of fainting. The poison may be of vegetable or mineral origin or mixed and the symptoms depend upon the particular kind of poison.

In general, *graha* is the term used to signify some supernatural bodies. They are stated to infect the human beings who are exposed to cuts, wounds unwholesome food, contamination of food, water, air, unhygienic habits and so on. These causes are very common in children, men and women of all ages and conditions of seasons etc.

(Su-ut-60-3-5)

There are male and female bodies and named differently. They are more active during the nights in search of blood and foetid matter and therefore patients with cuts and wounds must be protected from them. These *grahas* behave just like *bhutas*. They tease the patient, smell the sweat, pus, filth, make the person to behave peculiarly such as to eat which must not be eaten, to enter forbidden places, to indulge in violence, in the same manner as the *bhutas* do. The patient likes to be worshipped as god; he may wander or interest himself in sexual act. *Grahas* are innumerable and grouped into eight according to the features in each.

These *grahas* by virtues of rising high above and pervading everywhere get the name “*Devagraha*” in general. *Daityas* are inimical to *devagrahas*; *gandharvas* are the divine musicians; *yakshas* are bankers, *pitruagrahas* are *manes*; *bhumagas* are reptiles; *rakshamsi* are those who eat human flesh (cannibals); *pisachas* are those who eat raw flesh.

The man shadowed by *devagraha* behaves as being satisfied, clean smeared with sandal paste, saffron and garlands of his liking, always awake;

speaks the truth, and refined language; appears bright with fixed eyes (without winking) and giving boons.

(Su-ut. 60-8)

The man afflicted by *daitya (asura)* graha speaks ill of brahman, preceptors and gods; eyes indicate fear while he himself is devoid of fear, and is atheistic in his behaviour. He is not content with food and drinks offered to him.

(Su-ut 60-9)

Gandharva graha victim is elated, walks on sand dunes and enjoys the beauty of woods and parks, wanders as he likes, interests himself singing, using perfumes and flowers and garlands; dances and laughs a little, talks less but his words are pleasing.

(Su-Ut. 60-10)

A victim to *yaksha graha* wears thin red cloth; his eyes are bloodshot; He is an astute with less talk and forbearing difficulties. He looks bright, offers anything to others and asks them what they want.

(Su-Ut. 60-11,12)

A man afflicted the *pitru graha (mane)* spreads *darbha* grass and rice balls on it and offers them to the *manes*. Not only that he offers quenching water and black til grains with his right hand in supinated position. He is eager to eat meat with til, jaggery, and rice prepared in milk after offering to the *manes*.

The man of *bhujanga graha* behaves like a snake by stretching himself on the ground, and sometimes licks his lips. He is sleepy. He consumes jaggery, honey, milk and rice cooked in milk and jaggery.

(Su-Ut. 60-13,14)

A man afflicted with *raksha graha* consumes meat, blood, different kinds of wine, wanders shamelessly, talks curtly. he is very valourous, angry, strong, moves about during night and hates to be clean.

A man troubled by *pisacha* appears perverted, weak, and harsh. He talks for a long time disgusting others. He is very restless or always after eating something. He prefers loneliness, uses cold water, wanders during nights and is much perturbed.

(Su-Ut. 60-15)

Bad prognosis is indicated when the patient is with protruded eye balls, walks fast, licks his own froth in the mouth, is sleepy, falls from great heights such as hills, elephants, trees, lakes and rivers. He does not feel the danger to his life by these acts. He may trouble others or kill himself.

(Su-Ut. 60-16)

Devagrahas are activated by full moon whereas the *asura graha* in the early mornings or the evenings i.e. the twilights. *Gandharvas* afflict in the evenings of the eight day from the new or full moon days. *Yakshas* attack on the first days. The *manes* attack by about or on new moon day, the *nagas* on the fifth day of the dark half of the month.

(Su-Ut. 60-17,18)

The entry and the exit of the *grahas* are not visible in the manner of gross bodies. They are in the same way as the sun rays are seen in the mirror, crystal, water and bright surfaces or how the cold, and the heat enter the living beings and upset them; the mode is compared to the soul entering the embryo which process cannot be perceived by the naked eyes. (see C.Chi. 9)

(Su-Ut. 60-19)

Strict austerities, gifts, righteous follow-up of rules, truthfulness and practice of yogic cult are recommended either singly or jointly as the case may be. Austerity includes fasting, meditation as enjoined in that branch of learning. The yogic cult in the context is the achievement of the eight qualities viz., atomicity, lightness, extension, heaviness, possession, attainment of the target, command over these and control on everything.

(Su. Ut. 60-20)

The *grahas* never enter the clean persons, nor they become one with them. Those *vaidyas* (medical men) who claim that the *grahas* enter the human body are totally ignorant of demonology.

(Su. Ut. 60-21)

There are innumerable number of servants of such *grahas* who possess the aforesaid characteristics who wander during the nights in search of blood, tallow, flesh etc. and afflict the man who violates clean habits.

(Su. Ut. 60-22, 23)

The wandering bodies become active in the night and therefore are named as "*nishacharas*". Their effect on children, man, woman are described for easy identification by the characteristic behaviour of the patient. The means to avoid their attack is cleanliness and following the code of conduct of *sadvriti*. The diagnosis was made according to symptoms manifested after the attack.

(Su. Ut. 60-24)

Since *devagrahas* are in contact with *devas* (superhuman bodies) and imitate the masters' conduct why should they eat flesh, blood and tallow?

The answer is that the breed between the *deva* and the *rakshas* was *nirutirakshasi*, the demoness, whose children and grand children *nairuties* also inherited the qualities possessed by her. Hence the *nairutigrahas* are indulging in violence and also representing both *rakshasi* and *deva* characters. Due to their mixed qualities they are known as *bhutas*.

(Su. Ut. 60-25, 26)

Bhutas or *grahas* are symbolic representations of disease manifestations which results in abnormally cruel or inexplicable behaviour. A study of these is called *Bhuta Vidya*.

(Su. Ut. 60-27)

The means usually employed to alleviate the disease are a recitation of incantation, offering oblation to the fire and following a regimen which soothes the mind.

(Su. Ut. 28-29)

The loss of self-identity (*smriti*) and contact with reality is called *Apasmara*, which is a defect in mindfulness. The patient runs the risk of ending his life because of the two aberrations mentioned above.

(Su. Ut. 61-3)

The *doshas* of the psycho-physical body viz. *vata*, *pitta*, *kapha*, *rajas* and *tamas* get excited and disturbed by the following causes :

- (1) Perverted and excess sensual and physical activities,
- (2) Intake of unhealthy, unclean and incompatible food,
- (3) Suppression of the natural urges,
- (4) Overloading of the mind with passion, ignorance, lust, fear, excitement, anger, grief, etc.

These excited and disturbed *doshas* affect the consciousness and cause *apasmara*.

(Su. Ut. 61-4-6)

Palpitation, feeling of emptiness in the heart, perspiration, unconsciousness, vacuity of mind, dullness, and sleeplessness are the premonitory symptoms of *Apasmara*.

(Su. Ut. 61-7)

The person whose channels of cognition are affected by the excited psycho-physical *doshas* and whose consciousness has been overclouded with passion and lethargy has convulsive movements of his hands and legs, and distortion of his eyes and eyebrows. The person also gnashes his teeth, and emits foam from his mouth. His eyeballs will be fixed and staring. Finally, the patient falls down unconscious, and revives after a short while. These are the general symptoms of *Apasmara*.

(Su. Ut. 61-8-10)

Epileptic attack due to *vata* presents the symptoms like shivering, biting teeth, dyspnoea, distorted appearance, and discharge of frothy saliva. The patient may sometimes say that he was chased by a black animal.

(Su. Ut. 61-11)

A patient having *pitta apasmara* complains of thirst, feverishness, perspiration, loss of consciousness, convulsions of limbs, and of being pursued by a yellow creature.

(Su. Ut. 61-13)

A patient of *kapha apasmara* experiences coldness, nausea, sleepiness, and a feeling as if he was being chased by a white animal. The patient falls down unconscious, emitting froth from his mouth.

(Su. Ut. 61-14)

In every type of epilepsy, incoherent speech, moaning and distress are found and these three are common signs.

(Su. Ut. 61-16, 17)

Since this disease sometimes manifests without any evident cause, and since it disappears often without any treatment, a few physicians opine that *Apasmara* is not caused by *doshas*.

This view is not correct. The disease manifests at the suitable time only just as seeds sown during rains sprout only in the proper season. Further, the *doshas* manifest their provocation gradually, are ephemeral in character and manifold in action. In view of all these, *Apasmara* is indeed caused by the *doshas*.

(Su. Ut. 61-18-21)

Treatment of epilepsy is the same as said to insanity. Old ghee of ten years standing or more is useful for internal and external purposes. Specially the medicinal ghee formulated to treat *graharogas* are beneficial here also.

(Su. Ut. 61-22)

Unmada is mental disease in which the vitiated *doshas* penetrate in various tracts and impel the person to behave in a way altogether different

from the normal. This is insanity which is caused by both *doshas* and mental stress. In the former instance, the vitiation may be on account of contaminated food, pollution of water, toxic factors such as alcohol, drugs etc. The stressors may be loss of wealth, disappointment, perverted behaviour, others cause acting the mind. (see C. Chi. 9).

(Su. Ut. 62-3)

Unmada may be caused by five factors viz. *vata*, *pitta*, *kapha*, all three *doshas* and mental distress. There is a sixth variety which is caused by poison, for which treatment is same as for the first five types. Mild type of *unmada* with mild symptoms is called *mada* (intoxication).

(Su. Ut. 62-4, 5)

The prodromal symptoms comprise mental disturbances, tinnitus, emaciation or loss of strength, too much enthusiasm, anorexia, dreaming like eating contaminated food or reminences left by other and giddines as if whirled on a wheel by the wind.

(Su. Ut. 62-6, 7)

A person suffering from *unmada* due to vitiated *vata* uses harsh words, his skin is rough with prominent veins, he has distress while breathing, is emaciated and suffers from creaking joints. He shouts wildly, sings, dances and cries loudly and without reason.

With aggravation of *pitta* the patient suffers from excess of thirst, sweat, burning sensation; eats much and cannot sleep; prefers shade, cold wind, and roams about lakes and bathes in cold water. He is angry, eyes bloodshot or yellowish; feels hot, is scared of fire and sees stars in the sky even during the day time.

(01-20-00-00)

(Su. Ut. 62-9)

In *kapha* type of insanity the person suffers from vomiting, loss of appetite, loss of enthusiasm, anorexia, cough, desire for coition in privacy, less contemplation and less talk, much sleep, he eats less and likes hot things. These increase during the nights.

(Su. Ut. 62-10)

With the concomitance of *vata*, *pitta* and *kapha* all the aforesaid symptoms are found in proportions to the prominence of the *doshas* and the type is incurable.

(Su. Ut. 62-11)

Mental causes resulting in insanity are fear of thieves, king's subordinates, enemies, beasts, loss of wealth, close relations and disappointment in lust. These impinge on the man's mind.

(Su. Ut. 62-12)

The patient mumbles about anything which strikes his fancy, and sings, laughs and cries without reason. The patient loses his strength, lustre, and his eyes will be bloodshot, and his face turns blackish and distorted.

(Su. Ut. 62-13)

The general line of treatment for insanity consists of unction, sedation, strong emesis and purgations. Various medicinal sniffs made out of mustard seeds and oils. Insufflations containing mustard and other unctuous medicines are preferred.

(Su. Ut. 62-14, 15)

The insane person must be exposed daily to fumigation. The smoke emitted out of the putrified flesh of a dog or a cow with mustard and oil is always beneficial.

(Su. Ut. 62-16)

Shock therapy is adopted to restore the mind to the normal. The patient must be shown something marvellous or the loss of a thing very dear to him. He may be threatened by gigantic men, non-venomous snakes, tamed tigers, tied up with rope and whipped or threatened by setting fire to hay stack or by dipping him in water. He may be bound or cuffed and branded with a red hot iron rod avoiding the vital areas (*marmas*) in all cases. He must be locked up in a room protected from fire and fire set to the house. He must be made to stay in a dry well.

(Su. Ut. 62-17-19)

In all the types of psychosis anything comforting the patient's mind must be attended to. Purificatory measures should be started from using mild ones. The cause of grief must be removed. Mental affliction due to poison must be treated by using antidotes.

(Su. Ut. 62-34-35)

ABBREVIATIONS

Cha.	=	Charaka Samhita
Cha. Su.	=	Charaka Samhita Sutrasthana
Cha. Ni.	=	Charaka Samhita Nidanasthana
Cha. Sha.	=	Charaka Samhita Shareerasthana
Cha. In.	=	Charaka Samhita Indriasthana
Cha. Chi.	=	Charaka Samhita Chikitsasthana
Su. Su.	=	Sushruta Samhita Sutrasthana
Su. Ni.	=	Sushruta Samhita Nidanasthana
Su. Sha.	=	Sushruta Samhita Shareerasthana
Su. Ut.	=	Sushruta Samhita Uttarantra.