

# A Change in the Body Understanding and in the Identity of Physician

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## *Introduction*

Ever since the publication of Michel Foucault's works (1976, 1979, 1980) titled, *The Birth of the Clinic, Discipline and Punish: The Birth of the Prison, Power/Knowledge, Selected Interviews and Other Writings*, studies on body and medical history have become the focus of research. The English writer, David Arnold has contributed substantially for the development of this subject through his writings. (Arnold David: 1979, 1983, 1986, 1987, 1988, 1989) The topic has many sub-themes like Ayurvedic medicine, the political economy of health, the birth of clinic, discipline and punish, medical colonisation, sanitary history, cholera therapy and western medicine in village India. Among all the writings, D.P. Chattopadhyaya's edited work *History of Science, Philosophy and Culture in Indian Civilization* (2001) remains a path-breaking work on Indian medical history. Medical Anthropology is a field being explored by many persons. My interest is inspired by anthropologists who have contributed many insights on ethnographic methodology by way of the study of ethno medicine. They include Rivers (1924), Evans – Pritchard (1976), Turner (1961, 1968) and Comaroff (1981, 1982, 1985) who have characterised that it is in the medical domain that fundamental conceptualisation of body subjectivity, social structure and epistemology are visible.

The main objective of this paper is to bring out the conceptualisation of the body which had been constructed by Indian medical system. The analysis is related not only about the medical system, born in India, but also about the medical system which entered India. The second objective is to identify the role of the physician in the changing conceptualisation of the body understanding in medical terms.

This study tries to understand the above problem by a historical analysis. Hence this study has used the historical sources like the seals, sealings, structural remains, literary sources like *Rigveda*, *Susruta Samhita*, *Vinayapitaka* of Pali canon, the edicts of Asoka, the foreign notices of Yuanchwang, Fahien, Al Baruni, Tamil inscriptions, literatures of Unani physicians, Siddha's song, and Gazetteers of Madras Presidency. Further the report of the Indian Plague Commission 1898-99 and research articles report published in *The National Medical Journal of India* have been taken into account.

#### *Pre-Historic Times*

Without knowing the constituents of the body, the process of healing had been started from the beginning of pre-historic period. Observing the activities of animals for their curing, for example, mangoose searching for plants after snake-bite gave instruction to the man to search for plants' treatment for curing of diseases. (C. Dwara Kanath, 1970)

#### *Indus Valley Civilisation*

In course of time, the human beings began to construct a concept in which 'hygiene and the purification of body by water', occupied an important feature in the process of healing. This is very much known by the presence of the remains of the houses in Indus Valley Civilisation (2750-1900 B.C.) where each house had a separate bathroom and toilet provided with covered drains which were connected to the street drains and soak pits. A conjuncture with the remains of the Great Bath structure, and with a traditional Yogic *asana*, perhaps *utkati asana*, the sitting posture in which the soles and heels of the feet are brought together, and the legs from right angles (Marshall: 1931) in one of the sealings unearthed at Harappa and Mohenjodaro will lead to infer that healing of the body was done by the ascetic, by using the sacred water of the Great Bath. Some of the plants portrayed found in the sealings indicate that the ascetics used many plants for the healing of the bodies. The yoga postures also indicate that some yogic practices were also emphasised as physio-psychotherapy for the ailments of the bodies. Kenneth G. Zysk considers these Indus ascetics as *Shamans* or medicine men, and described that these *Shamans* heal the ailments of body by means of magical rituals, including such elements as ecstatic dance, magical

flight, the use of potent herbs and amulets, the recitations of incantations and exorcism. (Kenneth G. Zysk, 1991) Although, what is the symbiotic meaning of this *Shamans'* healing is unknown from the available evidences, the study of Laurel Kendall indicates that it was a reconciliation process happening between the individual and God via the ancestors, for the healing of an individual. (Laurel Kendall, 2001) A note of D.P. Chattopadhyaya induces to infer that the healing process might have happened by making holes through the skull bone for evil spirits to escape; since the presence of two skulls found at Harappa have one hole each made in the temporoparietal region and the skull of a child at Kalibangan has three small holes on the right side of the skull through the squamous temporal bone above the right a constic mealus, which is called by the name trepanation. (D.P. Chattopadhyaya, 2001)

### *Vedic Civilisation*

The Vedic texts indicate that people during that period tried to find out the causes of ailments in human body. The *Rigveda* text mentions that diseases were believed to be produced by demonic or malevolent forces when they attracted and entered the bodies of their victims causing the manifestations of morbid bodily conditions. (Rigveda, 1963) The Vedas emphasised that these assaults were occasioned by the breach of certain taboos, by imprecation against the gods or by witchcraft and sorcery. The medicine man of the Vedas used to be engaged in a ritual battle by chanting some mantras. They were experts in the manipulation of spirits, acquired extensive knowledge of the local flora, necessary for their particular healing craft and integrated elements of the sacrificial tradition into their sacred knowledge preserved in *Atharva Veda*. Here the physician transcends himself and spoke through the spirit. Strangely this process, existent in 1500 B.C., is found in the early Tamil culture of 300 B.C.–300 A.D. There it is described as *Velan Veriyadal*; *Velan* means the God Muruga, and *Veriyadal* means the transcendental dance. (K. Kanagasabai, 1904) Many authors characterised this healing practices as magico-religious medical tradition. But the Samhitas and early Brahmanas (Arthur B. Keith, 1967, 1971) indicate that those physicians and medicines were denigrated with the reason that these men were impure as Confucian worldview disdained *Shamans* as practitioners of unclean. According to the priestly class of Vedas, everything becomes pure by the usage of fire (*agni*), nay the water.

*Caraka Samhita* states, 'For it is stated that the sacred knowledge of the fire priests is medical science, because it encompasses giving gifts, invoking blessings, sacrifice to deities, offering oblations, auspicious observances giving burnt offerings, restraint of the mind and recitation of magico-religious utterances and so on, and medical science is taught for the benefit of long life.' (*Caraka Samhita*, 1949) Chattopadhyaya considers that the root-cause for priestly contempt of physicians derived from a clash of philosophical perspectives between medicines' fundamental empiricism and the priestly ideology that emphasised esoteric knowledge. (Chattopadhyaya, 1977)

Thus shunning the early of medical knowledge, the Brahmanarishis-poets approached the problem in the following way as mentioned in *Caraka Samhita*: 'Health is the supreme foundation of dharma, artha, kama and moksa. Diseases are destroyers of health and of good life itself. Now the great impediment to the progress of humanity has arisen in the form of diseases what shall be the measures to remedy the situation and initiate their enquiry.' (*Caraka Samhita*, 1949)

These Rishis, from their meditation, heightened powers of Yogic observation and learned to heal and preserve their own and others' bodies. According to their perception the concept of medicine was not curing the diseases as that of Indus Valley *Shamans*, but that of preserving the health. So they had analysed the body and arrived for a theory about the body. They considered the body as that of China, not by means of borrowing from China, but by an independent thinking as a microcosm corresponding to the whole cosmological order. Their concern was not in thinking of the body as a separate entity. They said that human body is made up of five elements—earth, air, water, fire and sky. They called the cosmic force as *purusha*, and called the body as *karma purusha*. Due to residual deeds (*karma*) in previous birth, the *karma purusha* appears in the various plains of divine, human and animal existence from the moment of conception. So the Vedic understanding of the body was highly complex and philosophical one. According to that philosophy, the vitality of the body is decided by the presence of the mind in it. They delineated, three types of mind in the body. They are *sattivaka*, *rajasika* and *tamsika*. The *sattivaka* mind endures all the pains, and it needs no medicine, *rajasika* mind takes medical treatment after persuasion and the *tamasika* is badly in need of medicine. The system they evolved is called *Ayurveda* (P. Ray, 1993).

As per the new medical knowledge (*Ayurveda*), the identity of

physician also underwent a considerable change. The physician of the Vedic period was a co-partner of the priest. The physician deals not only with medical science but also with other sciences. He got respect from others, only if he possessed knowledge of other sciences also. He accompanied the king when he went for war. At the palace, the Ayurvedic physician was directly responsible for the preparation of food and in fact controlled whole of the kitchen, including the superintendent of kitchen. He was very careful about the food of the king and among other things he also used to ensure that it was poison free. The physician was simply a member of whole Vedic philosophical system. He proceeded to examine the patient, when there were no omen signs appearing to him. Further he examined the patient, if he could recover from illness. (P. Ray, 1993)

The Ayurvedic physician was not an early ascetic and magician, but a pandit, reader of the medical treatise, a careful observer of the patient, and a man of erudite knowledge on medicine. Susruta, the great physician of Ayurveda states that a 'person who knows only theoretical concepts devoid of practical training and vice-versa will faint no sooner, he comes across a true patient, will not be respected by scholars and deserves to be punished by the king'. (Su. Sutra III, 48-50)

These Ayurvedic physicians made experiments with the mixture of animals and plants and prepared powders and smoke. They tested how the powders and smoke cause diseases. According to *Arthasastra*, smoke caused by burning the mixture of Kṛ a kal ā s a, and g ṛ ha god hikā causes leprosy. These physicians had done a detailed analysis of poison.

However, the medicine had always a connection with Varuna system. There is an episode in the text of *Divyavadana* (200 A.D.). Once emperor Ashoka suffered from a severe disease. Odour used to come out from his mouth and the disease seemed to be incurable. His queen, Tisvaraksita attempted to cure this disease, and she asked for such kind of patient for examination. Accordingly, a cowherd was caught. He was made unconscious, and she opened his abdomen and found that a long worm was lying in the intestine. So she gave many mixtures of powder but it had no results. Finally she gave onion juice, which killed that worm. So, gladly the queen asked the king to take onion juice. But Ashoka declined it saying that he was Kshtriya and Kshtriyas should not take onion juice. But after a lot of persuasion, Asoka took it. This illustrates the connection between the treatment and the varuna.

### *Buddha's Contribution*

While Ayurvedic treatise made elaborate understanding about the body with the surgical operations, the body understanding attained another dimension due to the entry of Buddha. Buddha who was called by Mahayanam as the great doctor (*Mahabhisak*), interpreted that the diseases were formed not by the previous karma, as suggested by Vedics, but by several factors. Actually Buddha propagated his four noble truth based on the Ayurvedic medical paradigm. Buddhists enlarged the understanding of the body through the discoveries of anatomical features. Mittra mentions that in *Visuddhi magga* of Bhuddhaghosa in fourth century A.D., 'An advanced anatomy is referred to ... and the description of ten kinds of dead bodies, thirty-two aspects of the body including viscera. Osteology is very vividly described in the above work of Buddhist yoga not known, so far to the scholars of the history of medicine (Mittra, 1985) since the famous Buddhist classics like the *Tripitaka*, *Mahavagga*, *Dhammapada*, and *Divyavadana* is full of medical knowledge. It is clearly known that Buddhists made lot of attempts for discovering body understanding.' (I.B. Horner, 1938-52)

Since Buddha gave importance to medical knowledge, the monks became the physicians. Buddha had already instructed that every Buddhist monk should act as a physician. Hence the monks carried five products as medicine: clarified butter, fresh butter, oil, honey and molasses. Initially the Blessed one (Buddha) prohibited the practice of medicine outside the monastic order, specifically prohibiting the monks from earning livelihood as healers. *Vinayapitaka* of Pali canon says that Buddhism incorporated the medical knowledge in their monasteries. Thus the monasteries became the places for the discussion of not only Buddhist philosophy but also about medical science. Buddhism influenced the medical science prominently with two features like compassion and non-violence.

The ethical aspect of Buddhism brought another identity to the physician. The physician was now no more a priest, or pandit, but a common man easily accessible to every body. The physician was now an ordinary member who examined the diseases of destitute, crippled, and prescribed food, drink and medicine, if we believe the remarks of Fahien who came to India, during 399 A.D. at Pataliputra. (James Legg trans, 1981) There happened an additional new identity to the physicians. These physicians had now become the teachers of

medical subject. They developed Ayurveda in Buddhist way. Yuan Chwang, who visited India from 629-644 A.D. mentions about the famous Nalanda university, where medicine was taught as a separate subject. He mentions that the physicians differed in medical skills and prognostician. (Watter' Thomas, 1973) Itsing, another Chinese visitor to India (673-695 A.D.), mentions that the physicians were well versed in the medical book, and they practised according to that book. (J. Takakusu) These physicians moved from one place to another and some physicians moved to Baghdad and served in the court of Abbasid dynasty of Kalifa-Harun-ul Rashid. (7th and 8th century A.D.) Al-Baruni who accompanied Mahamud Ghazni from 1017 to 1048 A.D., mentions that there were two types of physicians—pandits and *vaidyas*—present at that time. Pandit might have been an Ayurvedic influenced physician, and *vaidya* might have been the Buddhist influenced physician (Sachan, Edward, 1983). Among these physicians, a separate category emerged as physicians, which is known through a Tamil inscription. The Chola epigraphs contain the term *vaidya* generally meaning a physician, and Calliya Kiriya Ceyvan, which means surgeon. (S. Gurumurthy, 1970)

### *Unani Understanding*

The understanding of the bodies in India got additional information due to the arrival of Graeco-Arabic medical system known as Unani. Hippocrates was its founder. This system had its basis on physical laws and not on dogmas. It worked as a complete science of integrated theory and practice. It mentioned that the body is the manifestation of whole universe. It consists of hot, cold, wet and dry holistic attitudes. It emphasised that health and diseases are but states of human body and not malicious influences inflicted by some outside agency. It has a basis by the studies of human body. The purpose of the medicine is to assist natural recuperative power and to disperse, or eradicate disease from the human body.

The Unani physicians were called by the name *Hakim* and the first one was Ziauddin Ahmad Rafe-Haravi from Heart. (Siddiqui, 1971) They gave great importance to diet and digestion, both in health and in disease. These physicians got ample support from the Muslim Sultans. They possessed skills in their treatment. The famous historian Ziauddin Barni says: 'Atibba (physicians) of Sultan Allaudin period had a complete skill in medicine and there can be no

comparison between them, Hippocrates and Galen in the treatment of diseases. They judge the disease just by feeling the pulse of the patient and predict whether he is curable.' (Burni Diyauddin, 1862)

They were specialist in analysing urine. About their proficiency, the author of a work titled *Nazhat al-Khawatir* acknowledges the extraordinary knowledge and skill of Maluana Damishqi in these words, 'He was an unequalled physician of his time in skill counselling, pulse feeling and examination of urine. It is said that once a sample of urine mixed with the urine of different animals was brought to him. As soon as he looked at it, he smiled and said that the urine had been brought to him after mixing urines of a few animals. (Altaf Ahmed Azmi: 2001)

Two types of Unani physicians lived. The first were the court physicians. They got support from Delhi Sultans to Mughal Emperor Aurangazeb. Especially, Ghiyasudin Tughlaq, Mohammed bin Tughlaq were themselves good Unani physicians. Another type were local in nature. They carried out researches and wrote books. Although Unani physicians were sound in theory, it is said that during those times, the people were under the dominations of demons, and fairies. But the Unani physicians did not consider this and gave medicines to them. They proceeded on the basis of the words of the patient.

While the court Unani physicians got support from the king, the other Unani physicians established their private clinics in big and small cities and prepared the compound medicines. The private clinics had become some sort of educational institutions also. During the Mughal period, many physicians got title and stipend. For example, Hakim Sadrudelin Sadr received the title of Masihuz Zaman from the Emperor Jahangir. The important point is that both Ayurvedic and Unani physicians worked in the same hospital founded by the Muslim kings.

While the understanding of the body in India had various dimensions as per the *Shaman* system, Ayurvedic system, Buddhist system, and Unani system, and while there was a complete change in the identity of physicians, it is peculiar to find a distinct type of body understanding that prevailed in Tamil Nadu. Without having any influence from the above medical systems, this system operated independently. This was called *Siddha*. The main understanding of the body according to *Siddha* is, *it is immortal one*. *Siddha* states that the activity, growth and sharpness of functions of senses and other organs are greater in early life than



in the later life. The *Siddhas* were common medicine man, and they never got support from the royalty, as Unanis got support from the Muslim courts. The physicians of this system were the ascetics who did yoga as a physio-psychotherapy. It is a point to be investigated whether a historical connection existed between the early yogic postures of Indus Valley system and the *Siddhas* of Tamil Nadu. Actually the *Siddhas*' understanding of body is highly complicated one which cannot be easily understood by the people other than them. It is arranged in the form of *Cakras*. It is not based on any observation but has an unquestionable faith in a tantrik body. It believes that human body in its physical and subtle states is composed of 72,000 veins and nerves, seven vital nerve centres as stated above, ten vital airs (prana) and ten vital pulses. The physicians of this were mainly yoga ascetics. There are no evidences to say that they did the *Siddha* medicine and distributed to the public.

#### *Allopathy Medical System*

Apart from the above body understanding, another body understanding came to prevail. This is called Allopathy. While Ayurvedic medicine thought that the body constitution was derived from the composition of mind and thereby considered the body and the mind to be the one and while Unani medicine which was drawn from *Koran* (body divorced from soul and mind was against the very spirit of *Koran*), the English science considered that the mind and body were divided. The English medicine based their knowledge upon microscopy and bacteriology and especially on William Harvey's work on the circulation of blood. They gave importance to dead bodies for understanding of living bodies for the purpose of dissection. Moreover, they were dependent on pathological anatomists who viewed disease as 'localised' in a particular organ or tissue (and as distinct entities) rather than as general distempers affecting the body as a whole. As the dissection work was done by the lowest class of pariah, Ayurvedic physicians considered western medicine as pariah medicine. Likewise, Unani medicine considered Allopathy as an off shoot of Unani system.

But the western medicine considered the Indian medicine and its physicians in belittling terms. To quote Dr. Delon, the French East India company's physician, 'The Pagan [i.e. Hindu] physicians whom they call pandites are a sort of people without learning or any

knowledge, or insight into anatomy. All their skill is confined to a certain number of receipts, which they apply promiscuously without making the least reflection upon the different age, sex, constitution or strength of their patients. They are very timorous, and rather will let a patient perish than run the hazards of a remedy which appears doubtful to them.' (Dr. Delon, 1698)

While some scholars like Jones and French naturalist like Dierre Sonnerat had a glorious view about Indian culture, the contempt against the Indian medicine continued due to the necessity of the establishment of power. It is very much echoed in the words of authors like William Ward. William Ward, the author of 'A View of the History, Literature and Mythology of the Hindoos' declared that the 'Hindoos, though they may have advanced farther than might have been expected in the science and practice of medicine, certainly came far short of the comparatively perfect system of modern times'. He felt that 'their ignorance of anatomy, of the true doctrine of the circulation of the blood etc., necessarily places their different remedies among the ingenious guesses of men very imperfectly acquainted with the business in which they are engaged. What are medicine and surgery without chemistry and anatomy'. (William Ward, 1815-18)

The modern medicine which came to be intricately linked with colonialism was popularly known as doctory in the Indian sub-continent. The British government began to establish medical colleges and the first intern was formed in Calcutta in 1812. Of course, the aim was very well echoed in the words of Robert Grant: 'To give to the people of western India, a practical and well trained body of medical practitioners who by the skilful and conscientious exercise of the art, would so recommend themselves to their countrymen as in time to take the place of *hakims* and *vaids* who for want of adequate education must necessarily be incompetent to exercise the healing art with safety and success.' (The Report of the Examiners, 1938)

The British medical institutions like hospitals, colleges got warm welcome by Indian philanthropists. The elite class of Indians pooled their resources for the construction of hospitals. The people began to follow British medicine, for as Ferozeuddin says that 'the doctory is the system of medicine of the ruling nation, and its practitioners receive all sort of help and support from the government'. (Ferozeuddin, 1915)

The Indian youth studied English medical subjects and served as doctors. Some of them got into the Indian Medical Service (IMS).

However, the medical knowledge understood by the Indian doctors made little impact on either the national movement or in the Indian Congress organisation. The one exception is Muthulakshmi Reddy of Tamil Nadu. She was a Tamilian and the first woman doctor of India. She became a nationalist and served in the municipal bodies, and raised her ideas as a doctor against the British.

But the person who contextualised the English medicine in a political text was no one else but Gandhi. Gandhi who wanted to become an English doctor in his youthful days was highly critical of the Allopathy medicine. He said, 'The result of modernity was colonisation at the site of body; the creation of a consumer body which would be a slave to ever increasing appetites which could only be met by industry. This would in turn, render the body unhealthy, and in need of constant repair by a state medical system which would strip individuals of their autonomy and divert attention away from the fact that many of their ailments were self-infected and fostered by state.' (Gandhi, 1938) However, the cry of Gandhi did not pierce too much into the ears of Indian doctors, except a few persons, who joined the freedom struggle later.

#### *Free Indian Doctors*

After getting independence, the identity of Indian doctors became more visible than the earlier ones. These doctors were now no more juniors to British doctors. Globalisation which meant the body understanding through technological improvement has given ample opportunities to do research in the medical field. In the changed situation of globalisation, the identity of doctor has changed considerably. Now the Indian doctors understand the health related problems being faced by the Indian population and the measures required to solve them.

In a study, 'Concurrent alcohol and tobacco use among middle-aged and elderly population in Mumbai', Prakesh C. Gupta and others have mentioned that the use of alcohol and tobacco would lead to the risk of oropharyngeal cancer. In another study, D. Prabhakaran (et.al.) have mentioned that the high prevalence of cardiovascular diseases (CVD) and its risk factor is found in the background of poor awareness and control among a comparatively young male population in the North Indian industrial setting.

Another author, Ambrish Mittal has written that typical urban (white collar) Indians have poor bone health and osteoporosis is

common in India. However, adequate calcium intake and regular physical exercise and exposure to sunlight can go a long way in improving the bone health of Indians and potentially reducing the risk of fracture. Rama Chandran S. Vasana has written that in blood pressure treatment, low dose generic diuretics is enough than that of other more expensive drug classes. Suresh K. Mohammed's article has revealed that India is supposed to have among the highest number of persons living with HIV. This type of Indian doctor's identity in a global context will be an adding factor for the fulfillment of the dream of President Abdul Kalam.

### CONCLUSION

This paper started with the analysis to find out the conceptualisation of body understanding that prevailed in India through the study of historical source materials. Further, it has attempted to identify the socio-economic-political situation of the physicians in the changing text of body understanding. The analysis has revealed the following points:

(1) The body understanding conceptualisation underwent constant changes throughout our analytic period.

(2) Body was conceptualised not as a matter but as a matter which had its interactions with nature and religion.

(3) In the changing text of body knowledge, the identity of the physician changed tremendously. The physician has exercised his knowledge as power among the masses as Foucault has constructed. There are however some exceptions. In the historical periods of Buddhism and in the contemporary period, the physician does not exercise power, as he has no source to do it. He is simply serving the masses.

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