

THE

Hindu Message

A Weekly Review of Indian and World-Problems
from the Hindu Standpoint.

Medical Supplement

‘चिकित्सितात्पुण्यतमं न किञ्चिदपि शुश्रुमः’ । ‘विभेद्यल्पश्रुताद्रेदो मामयं प्रहरिष्यति’

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NOTES AND COMMENTS.

Mr. Vaidya Bhupati S. Krishna Rao of the Ayurveda Siddhasramam, Mysapore, deserves to be thanked by all Ayurvedic practitioners in the Tamil Districts for his able and masterly work on *Madhuwarga* or a treatise on the preparation of medicated wines. This was a long felt want in the Tamil literature which the author has taken pains to remove by translating from the original Sanskrits. The work though a small one is worth having by all Ayurvedic practitioners. The author's endeavour is a beginning in the right direction. It is hoped that he will bring out at an early date his other works, which he has said in the preface, are in preparation. The price also has been fixed at 12 annas a copy, with a view to place it within the easy reach of all.

Mr. E. T. Grasser, M. D., has in the course of an article in the "*New Albany Medical Journal*" said thus:—As to the medicinal treatment of constipation, the stronger purgatives only make matters worse, for, although they empty the bowels once, they leave the whole tract paralysed to a greater or less degree, and some time must elapse before it regains even its former tone. The milder laxatives are much better, especially those which exert a tonic rather than a purely stimulant effect, and it is a well known rule of medicine that small doses of several Synergistic drugs are better than a large dose of a single one. In severe chronic cases I insist upon a hygienic and dietetic regime, (which I have outlined elsewhere) and in addition I prescribe one to two Prunoid tablets night and morning. Where the patient is obedient and persistent in his efforts this course has never failed to effect a complete cure. This preparation does not lead to the drug taking habit, its dose can be reduced gradually until within a month or so it will be stopped entirely. The habit of bowel action will by that time have been formed and the muscles and glands of the intestines put into good condition, so that with reasonable care the patient will have no more trouble.

Mr. Mandaliker Venkateswara Rao finds fault with the Committee for the investigations into the recognition and encouragement of the indigenous systems of medicine.

He wants the inclusion of an Andhra, a Kerala and an Utkala (Uriya) Vaidya in the personnel of the Committee as essential. I wonder why he has omitted the Karnataka? Is Ayurveda divided in a linguistic basis? Is there any such thing as the Andhra Ayurveda, Utkala Ayurveda, Kerala Ayurveda or Karnataka Ayurveda? We fail to appreciate the principle on which our friend suggests this.

Let him first analyse the personnel of the Committee. He will find the equity of the representation there. The indigenous systems are given only 3 representatives, Ayurveda one, Unani one and Agasthya system one. If Dr. Lakshminpathi is to be considered an Ayurvedin then Sanskrit Ayurveda will be represented by two. What else does he want? Let this not be construed into a justification of the Government's nominations? But what we wish to say is this. Our friend had clear two months before him from the date on which the announcement of the appointment of a Chairman and a Secretary was made in the papers. He must have also been aware that the appointment of such a committee was in the contemplation of the Government of Madras as early as March of this year. It is strange now that he should gird up his loins to agitate for the inclusion of members on a language basis and that at this late hour. Ayurveda is not based on language but it is a universal and practical Science. It is therefore unholy to divide it as Andhra Ayurveda, Kerala Ayurveda and Utkala Ayurveda and the like.

We quite agree with the remark made by Kaviraj Jaminí Bhushan Roy M. A., M. B., of Calcutta regarding the revaluation of answer papers of the Vidyapitha Examinations. The present practice must altogether be abandoned as it casts a slur upon the examiners, not to speak of the inconvenience and trouble caused to them. In view of the honorary and patriotic work these people render to the Vidyapitha it is necessary that they should not be overtaxed. This kind of revaluation at present obtaining, is quite undesirable and the regulations ought to be so revised as to prevent repetition of this practice in future.

What Constitutes Ayurveda.

Few will there be who do not know what is meant by Ayurveda. We have heard it referred to, of late, very often, on various occasions. But we fear that a very serious misconception overhangs the word Ayurveda and it is wrongly understood by many. We have seen it misrepresented, on several occasions, by men posing as having been well acquainted with it, or well informed of it, and held up to ridicule. It therefore becomes incumbent upon everybody that, before he endeavours to make any pronouncement either in favour of or against it, he should be well acquainted with, and well informed of the same. The time has now come, such men should realise, that any utterance in an unguarded, offhand and irresponsible manner, by them, will be utilised against it which in course of time will necessarily prove dangerous and detrimental to its progress. Hence we shall first try to understand what is conveyed by the word Ayurveda and what it treats about and how?

As vaguely understood as it is now-a-days, Ayurveda forms part of one of the main systems of medicine, comprised in a general term, the Indigenous systems of medicine, as opposed to the western or alien systems, the other one being called the Unani. Though all the systems comprised under that general term, Indigenous medicine, bear striking resemblances to one another so much so that they will have eventually to be brought under one system, they have begun to be considered from a long time, for various reasons and under peculiar circumstances, as distinct ones, and have been adopted as such. Taking it as it is, we shall first confine ourselves to the particular system, Ayurveda, and see what it has to say about itself.

The word has been misunderstood or misrepresented, we said, by men who ought to have been in the know so much so that this wrong representation has, of late, been found to be used for various purposes by interested individuals to meet their own ends. As an illustration of this kind we have painfully to point out the classification, imaginary and unreal, made out by them in this branch of science.

They divide Ayurveda as Northern and Southern Sanskrit and Tamil, and even more Brahmin and non-Brahmin. One member, during the debate on the resolution of Dr. Gilbert Slater on the Registration of indigenous medical practitioners in the September Session of the Legislative Council, was found to declare that the Agasthya system has been left out in the resolution and not been included therein, showing thereby how the distinction, made unconsciously and knowingly, is being perpetuated by their indiseerect and irresponsible handling of the question. There is also another section among us who consider that Ayurveda contains only a few drugs and medicines and that it has no system of its own.

We can not quite appreciate the soundness of such a classification and fail to comprehend how a system of medicine like Ayurveda could be northern or southern or Brahmin or Non-Brahmin. There is one great feature among such men; "that to say Ayurveda" would invariably mean the northern or the Sanskrit, which has been rendered practically a synonym for the Brahmins who follow this profession. It becomes therefore the duty of everyone to dispell that illusion and show to them that what they have understood of it, as above, is unwarranted and unjustifiable and that by such wrong conception they will be doing it serious harm rather than helping in its course of progress.

The word Ayurveda, only means the science of life. Says Susruta आयुरस्मिन् विद्यते ज्ञेयं वा आयुर्विन्दतीत्यायुर्वेदः
"In commenting this passage Dalhana interprets

thus in various ways. आयुः शरीरेन्द्रियसत्त्वामयोगः तदस्मिन्नायुर्वेदे विद्यते अस्तीत्यायुर्वेदः । अथवा आयुर्विद्यते ज्ञानेते अनेनेत्यायुर्वेदः । अथवा आयुर्विद्यते विचार्यते अनेनेत्यायुर्वेदः । आयुरनेन विन्दति प्राप्नोति इति आयुर्वेदः (The science in which life depends or the science by which life is known, or the science by which life is discussed or the science through which life is obtained or protected is Ayurveda.) How a science which treats about life and the best way to preserve it can, we quite fail to understand, be sectional as northern or southern or for the matter of that Brahmin or Non Brahmin. It is uncharitable that a purely practical science should be thus misinterpreted, classified and used for satisfying one's own fancies.

In truth, we have to repudiate all these classifications as unjustifiable, unwarranted and unfounded. To attain the objects in view (mentioned above), Ayurveda enunciates certain principles which form the fundamental basis for this huge structure of a science. These principles are universal and common to all systems of medicine, be it Ayurveda or something else. But so far as the Agasthya system is concerned it is as much the system of the Sanskritists as it is of the Tamilians or of the northern as of the southern, or even of the Brahmins as of the non-Brahmins.

In both these systems the main basis is the principles of the humours Vata, Pitta and Kapha which in terms of the Ayurvedins are called the Doshas. If this basis is accepted what else is there to call the two as distinctly different systems. Further both the two schools, having accepted these principles, have explained every phenomena in the organism as being produced by these principles and enunciated them in terms of them. They have also similarly reduced, and analysed the properties of the innumerable drugs used by them in terms of these principles. How then could the two schools be called distinct and separate schools? In the eyes of the impartial students of both the schools they are one and one alone; and to make a distinction of among them is unholy.

Why then came they to be considered distinctly separate schools? The reason for this is very simple. The exponents of these schools—belonging as they did to both the schools—found it convenient and felt necessary to write their treatises in the respective spoken languages of the country so much so that some wrote their knowledge in Tamil and the rest in Sanskrit, keeping in mind of course the general principles enunciated in their system. Of these exponents there are some who have written treatises in both the languages, of whom Agasthya is the foremost. It is how the two schools came into existence and we have the evidence of ardent students of the Tamil school to support our statement. The authors while thus writing their treatises adapted and adjusted themselves, in expounding the principles of the system, to the circumstances, surroundings and climate of their respective localities. This may account for those, so-called, slips in one school from that of the other which of course is not of any serious consequence.

For in finding suitable medicines possessing particular therapeutical properties one has to adapt himself and adjust to the respective climates and surroundings. As an illustration, one in the Arabian deserts cannot find such beautiful herbs as those that could be found round about the Himalayas and he will then have to find substitutes possessing equal therapeutical properties in his own land. This to a very large extent justifies the introduction of numerous mineral drugs in the Agasthya school side by side with many a vegetable drug as against the so-called Sanskrit school which treats purely of the

latter alone. This cannot therefore be used as the ground for such classifications and distinctions as are now being made.

On the other hand it is the principles that are enunciated in them that makes all the difference. An impartial student will never find much difference in the treatment of the principles in these schools. The object of the exponents ought have been that the every day practitioner would supplement his knowledge from this or that school, whenever such a thing is felt necessary by him, as he goes on with his study or practice. This is the only correct explanation that could be given for the seeming variation and difference in these schools. Now as to the third school—the Unani—we are not students of that system and our knowledge must therefore be limited and at second hand. So far as we have been informed we are able to say—apart from the drugs and medicines they use—that, in respect of the principles treated therein, it is identical with the other two schools with but little difference. Namely they have, we are told, included the action of the blood as one of the doshas, making altogether four. A Unani student alone is an authority in his science and we therefore do not make bold to say aught one way or the other. We refrain therefore from making any observation on this system and our readers will be given a chance to know this system in due course from the pen of a student of that school and which therefore will be an authoritative one.

Apart from these schools, we don't see any other distinct school deserving any special treatment. To say a Maharashtra, Guzarati or Bengali school is absolutely absurd. In the same way is Andhra, a Karnataka or a Malayalam School. For no such schools actually exist. If at all there exists one such, it will be based on the original Sanskrit, and will be more in the nature of a vernacular translation. They are in the relation of a commentary to an original text and therefore cannot be split from each other. They form therefore one common system, the Sanskrit, and are not consequently different.

Lastly as regards the conception that the Ayurveda contains only certain useful drugs and medicines, having no system of its own, we wonder at the logic of the brain that holds such a theory. In the first place drugs are not the monopoly of any one system; secondly they are productions of nature and therefore common to all. Thirdly they are scattered all over the world and therefore not the property of a particular section. To say therefore that Ayurveda contains only some useful drugs would be tantamount to saying that no other systems deal with or treat of such drugs or that Ayurveda has monopolised the whole of the drug world and of them only a certain number are useful and beneficial. This seems absurd on the face of it.

How could some medicines exist in Ayurveda without a system of its own and how could they have been found useful in the absence of a system at all? The very fact that Ayurveda contains some useful drugs and medicines presupposes that it had a system and these drugs have been tested and found useful by experience based on the principles of that system. That system still survives and it is but ignorance to say that it has no system of its own. To such of those of our countrymen who entertain this kind of notion we would give a timely warning that such knowledge is based upon ignorance which will neither excuse them from having undetermined for the system of Ayurveda nor will it redeem them from their responsibility. They will be only betraying their own incapacity and prejudice to understand the principles laid down in Ayurveda which is sure to do immense harm to the system itself. Already the "prejudice

among the allopaths is so deep-seated that one member of the present Madras Legislative Council who promised and swore to his electors" during the election campaign that "he would put heart and soul and turn heaven and earth for the cause of Ayurveda", had the hardihood, when he came out successful in that campaign, "to declare in the open Council that the indigenous systems have no system and that the word system should be deleted from the resolution"; such men will have no mind to know what Ayurveda is, but will go on denouncing it to their heart's content. As Fate would have it, this gentleman is now on the Committee for the investigation into the indigenous systems. We are not concerned with these men. But our concern is for those laymen who pose themselves as sympathisers and champions of Ayurveda and to them we would once more emphasise the necessity for knowing much about the system or for being well acquainted with and well informed of the system before they begin to give any utterance upon the same.

It is not the mention of certain drugs, as some people think, that constitute Ayurveda, which drugs are, as has already been pointed out, products of nature and distributed all over the globe and which form no monopoly of any one system. "It is the why and wherefore of these drugs" that are legitimately considered the achievements of Ayurveda, which they would not admit and which they will not know until and unless they take to the study of Ayurveda in right earnest.

Ayurveda had withstood many hard times and survived for over thousands of years and will go on to live in spite of their decriing it as being no system. It will be as it was and as it is and would not change with the times ever. The principles laid down in Ayurveda are universal though the science itself is a progressive one. But this progress is altogether different from what it is understood to be by the west. Our progress is not in principle but in medicine, which is to be investigated and understood in terms of the principles that are enunciated in it.

What we therefore emphasise to our readers and sympathisers is that they should not be deluded by such misrepresentations of the system as are done by interested opponents and that to say that Ayurveda constitutes nothing more than a few drugs and medicines is absurd on the face of it. In truth, it is the principles that are enunciated in it and the system that is explained therein that make it what it is and it is its scientific basis that has enabled it to withstand the test of critical experience and onslaughts time and again.

Some Aspects of Orthodox Brahmin Life from Medical Point of View.

By DR. S. R. KIRLOSAR, M.B., B.S., DHARWAR.

Concluded.

When entering his house, a Brahmin never fails or forgets to take his shoes off at the door. It is needless to say that this is the best habit as shoes are sure to be foul and contaminated with all sorts of bacteria. By this wise step he ensures himself, his family and his food from contamination and infection. When taking food, he first washes his hands, feet, etc., and changes his cotton dhoti (for use outdoors), for a silken or woolen one. If we examine the fibre of cotton, with wool and silk under a microscope, we will notice marked difference between the three. The cotton fibre is full of shreds, the woolen has fewer and the silk fibre has practically none. If all these three fibres are hung in any septic ward and then examined, I think the silk fibre being smooth will have least number of bacteria attached to it. This experiment is worth trying in hospitals.

A Brahmin cook never enters the kitchen-house without taking a bath. He will never touch any person or article which is not clean. From this it will be seen what great care he takes to prevent the contamination of the food. In operation rooms where the life of single individual on the operating table, is concerned, a conscientious surgeon takes all sorts of antiseptic precautions, how much more then should the Brahmin cook be admired who takes so much precautions to prevent contamination of the food, upon which so many lives depend!

SEGREGATION AFTER DELIVERY.—Segregation of the delivered female is very strictly observed amongst Brahmins than in any other class of people. The significance of this system should be very clear to the medical man. The lady in confinement is to all practical purposes a surgical case and requires all necessary precautions for the prevention of sepsis. Even to this day with our advanced knowledge of sanitation, a good many poor females die due to mismanagement. Imagine how very horrible would have been the rate of female and child mortality if free excess was to be given to any person indiscriminately. This also applies to the female in monthly course. It is not only for the sake of the bleeding mother but for the tender child as well, that complete isolation is essential. Even a gardener protects his tender plants from the ravages of insects and animals by putting an hedge around them.

The ancients knew well that this bleeding in confinement usually stops on the 18th day. They rightly regarded the 11th day as a past danger day and therefore auspicious for rejoicing, etc.

Then there is performed a religious ceremony by the Brahmins, in which the child's hair are cut in a peculiar fashion. This is performed either before the sixth or after the 24th month from the birth of the child and though absurd it may seem, it deserves some consideration. If we refer to the dentition table of our text books we find that the period from the 6th month to the end of the 24th month is the dentition period of the child and Hindus invariably do not perform any ceremony during this period. It is common knowledge that even grown up persons often suffer from the effects of cold for untimely removal of nature's protection of the head. The child's hair is trimmed in such a way that the three tufts of hair left on the head serve to protect the anterior and two lateral fontanelles.

At about the 5th or 6th year these three tufts are removed leaving one on the centre of the head which is allowed to grow. This ludicrous looking central growth of hair, the conventional trade mark of the Brahmin seen so prominently on the heads of the people of Southern India especially, served a useful purpose in the no head-dress days. It is an excellent non-conductor of heat, to protect the vital parts of the brain at the nape of the neck without which the people in the tropics would have suffered from sunstrokes, etc.

Then there is performed at about the 9th year of the child a ceremony called thread ceremony. On this occasion a grass thread is girded round the loins of the boy, which to lay observers seems to be only useful for the support of the piece of cloth which covers the private parts. A second piece of thread of measured length is put round the neck in a peculiar manner. This multifunctioned ceremony can be explained with the help of surgery. The use of the thread round the loins seems to be a precautionary measure for the prevention of inguinal hernia. I remember the words of a famous surgeon in Government Medical College, Bombay who said that as a precautionary measure against hernia now-a-days a thread is tied round the loins of the white skinned boys in London Hospitals.

Thus from few of the many instances quoted from the social habits or religious customs of the Brahmin life, it will be seen that it is the Brahmin who leads a truly scientific and practical life.

I request the readers to study every action, social custom and religious function of the orthodox Brahmin with bacteriology in hand and I am sure that not only their doubts will be cleared but they will admire the wisdom of the ancient people who laid down such excellent rules for the safe conduct of life.

In short every one living in tropical countries, and wishing to live a long, healthy and intellectual life, should try to live a life like that of a Brahmin.

Practical Medicine.

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Prepared by Pandit C. T. ARUMUGAM PILLAY, Ayurvedic Doctor, and the member of the Committee on the indigenous systems of medicine (the Ayurvedic and Unani) and son of Ayurveda Bhaskara C. T. SUBRAMANIA PANDITHAN, the author of such rare works as 'Jeevarakshamirtham' and other Ayurvedic Shastras.

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