

THE

# Hindu Message

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

## Medical Supplement

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

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### NOTES AND COMMENTS.

The *Antiseptic* has been in its two last issues strenuously tackling the question of the Reform of the Medical Service and pointing out probable ways of retrenchment. In the year 1920, the total expenditure under Civil Hospitals and dispensaries in the Madras Presidency was a little over Rs. 52½ lakhs. This is not excessive, for the total expenditure of the provincial administration for the year 1919-20 was nearly Rs. 1039 lakhs and the civil administration proper cost a little over Rs. 515 lakhs. But when one notes that this sum of Rs. 52½ lakhs was distributed over only 633 institutions and that 46 of these were of service only to certain special employees of Government, one can only enter a pretty strong protest against such lavish expenditure, as our contemporary with just wrath styles it. After giving details of this vast expenditure our contemporary makes certain very pertinent suggestions.

There is no reason at all why the province should be saddled with I. M. S. officer's departmental M. O's with military ranks and military assistant surgeons, when they can with profit to the exchequer be replaced by others equally competent and efficient. Of the 53 appointments reserved for I. M. S. officers, 8 require expert knowledge: and it is rightly contended that, in filling up these eight posts, the best available members of the profession should be chosen irrespective of nationality or race. Of the other 45 posts, it cannot be denied that those duties may well be carried on by any Indian Medical graduates. Considering that the I. M. S. officers and the assistant surgeons of military rank or denomination draw among them more than 80 p.c. of the amount expended on the salaries of medical officers, it is high time that the system should be forthwith revised, if not discontinued. The same remark applies to the body of nurses now maintained. "We are also inclined to believe that the manner in which money is now being spent under the heads of miscellaneous charges and building is something unconscionable. We would also urge the adoption of the system prevailing in England of appointing honorary physicians and surgeons for service in hospitals." "The extremely unsatisfactory conditions" prevailing in the Medical College are also adverted to and the

transfer of the College to the Educational department like other professional colleges is advocated.

Another method of retrenchment is also advocated by our contemporary, who says:—We note again that a disproportionate amount is spent upon European medicines. We have already indicated the ways in which many such preparations can be made and manufactured in India itself, so that much of this expenditure can be reduced. Of the institutions that are at present at work we find there are 54 private non-aided institutions and 29 aided private institutions. It may not be possible to extend the operations of these institutions or to multiply them. But we believe it is possible to encourage by state subsidies by creating and developing of indigenous institutions to provide medical relief for the people of the country. By the employment of properly chosen Ayurvedic and Unani physicians we believe that the rural population can easily be approached and supplied with the required medical relief. We believe also Government ought to take a more sympathetic attitude towards the establishment of Ayurvedic and Unani dispensaries in the rural parts.

A medical man states that the saying that "diabetics must not expect a varied diet" is not necessarily true. There is a vast store of experience on record in the garden literature of the world which diabetics have a special motive in searching for suggestions as to vegetables of value to them and as to methods of cooking to give added variety. The diabetic needs a hobby to take his mind from his hunger troubles and give him an interest in life. The culture of rare or uncommon vegetables fills his need admirably. The physician can assist in creating the demand by interesting the patients in the possibility of enlarging and varying their diet and then putting them in touch with some nearby gardener who will be found willing to produce the vegetables and supply them as needed. In many cases the physicians will be justified in encouraging patients to move to the country or to the suburbs, to do their own gardening, particularly when they have had previous farm or garden experience and are benefited by exercise. With few exceptions regular outdoor activity increases the carbohydrate tolerance and improves the general health to a remarkable degree.



## Ayurveda—Past and Present.

धर्मार्थकाममोक्षणामारोग्यं मूलमुत्तमम् ।

रोगास्तस्यापहतारः.....(चरक)

(Concluded)

The above extract from the administrative report of the Gazateer will conclusively prove the recognition the Ayurvedic system enjoyed in the past and show how it became the mother of all the other systems, which are no other than its own offspring, that had existed and still exists in the land. With the regeneration of the system it will in no time become once more the most useful and invaluable one as it had been in the past and satisfactorily prove to be the only system that can effect a radical cure for all diseases both chronic and acute that prey upon the helpless souls with all its severity and sacrifice innumerable lives, at their own free will, at the altar of their own whims and fancies, at all times in season and out of season, thus ravaging a whole town, city or country.

Irresponsible men and men of vested interests would not condescend to give this system its legitimate share in the development of the medical science in the world. Following on them, their staunch followers in our country find it too big a thing to swallow and would decry it to their hearts content. But there are few impartial students everywhere and we feel there will be some, if not in this country, elsewhere, who may appreciate it and its teaching. It is in the interest of those few that we propose to say something of the past and present of Ayurveda. And we trust that our attempt in this direction will not be a failure.

The above quotation from the Imperial Gazateer was reproduced here to show, to our never-to-be convinced countrymen who pride themselves by echoing the various charges of quackery, empiricism, antiquity unscientificism, stagnancy and the like, laid against the indigenous systems, by those biased and prejudiced minds of the alien system with whom the question of vested interests reign paramount. Over all other considerations, how is even an official agency has studied and understood Ayurveda. The report therein gives only an outline of its past success which we will discuss hereafter in various aspects giving copious illustrations from the original text books, now we have in vogue. Of course, it may not be of interest to indifferent critics, but we believe that it will throw some light on the lines in which it was developed and perfected in the past and will therefore be felt useful by students of and interested in Ayurveda, as being helpful in its revival.

The history of Ayurveda is intertwined with creation. The need for the preservation and protection of beings created, necessitated the promulgation of a system of medicine, which has since become to be termed as the Ayurveda or the knowledge of life. The Hindus therefore claim very legitimately high antiquity to their medical system, Ayurveda, as they are collectively called and it is considered to be a portion of Atharvaveda and consequently the revelation of God which was handed down to Brahma the Creator. Says Susruta "इह खलु आयुर्वेदमष्टाङ्गमुग्रहमथर्ववेदस्यानुयायैव प्रज्ञाः श्लोक शतसहस्रमध्याय सहस्र च कृतवान् स्वयम्भूः ततोऽप्ययुष्मन्मरुतेष्वस्व चालोक्य नराणां भूयोष्टधा प्रणीतवान् ॥" Thus it was used to be held in high veneration and handed down from teacher to student for a long time until it was reduced to writing in later days when it was found necessary. Thus one set of physicians trace their genealogy as follows:—from Brahma it was handed down to Prajapati, from him to Aśvinis, from them to Indra, from Indra to Dhanvan-

tari otherwise called Devaṭasa the king of Kasi. Dhanvantari taught his several disciples of whom Susruta was the foremost. It is his compilation that we now have in a skeleton, which is called the Susruta Samhita. The followers of Dhanvantari were called the surgeons as they specialised themselves in surgery in particular.

There is another set of physicians who specialised in medicine in particular and who also trace their line from Brahma. Up to Indra both of them trace in the same line where we find the divergence. Indra it is said communicated the science to several Rishis who waited upon him in deputation with Bharadvāja at their head. Sage Bharadvāja, in turn initiated various other Rishis of whom Atreya was one who instructed the science to six pupils—Āgnivesa, Bheda, Jatukama, Parasara, Harita, and Ksharapāni. Apart from these there came also various other authorities subsequent to these as Visvamitra, Kharanada, Kapila and Gautama etc.

Of two schools of physicians we have to remark that the six pupils of Atreya wrote separate and independent treatises or samhitas called after their names. These and similar great works—Visvamitra Samhita, Kharanada Samhita, Kapilatantra, Gautama tantra etc., also are almost lost to us now. Only one of them the Āgnivesa Samhita survives only in skeleton. This samhita seems to have been further supplemented, revised, enlarged and recast by various pupils of his, of whom Charaka was the foremost and the work thus recast is now known by his name—the famous Charaka Samhita.

We have to infer from this account that of the several Rishis that undertook to the study of Ayurveda, some devoted to the study of medicines, while others specialised themselves. With the practice of surgery alone for the physicians Charaka samhita is taken as the standard authority now existing. Of the school of surgeons headed by the Royal Master Dhanvantari whose University existed at Benares city almost all the mighty works by his pupils Susruta, Paushkātavata, Gupurarakshita, Bhoga, Bhalu, Karavira, Vaitarana etc., have passed into oblivion except in the numerous quotations in the old commentaries still available. Only one of them the Susruta samhita called after the name of its author Susruta the son of Visvamitra still survives to tell the tale of mutilation.

It is very difficult to form an idea of the exact date of these great works. But we can just point out that being the son of Sage Visvamitra, Susruta may be taken to be a contemporary of Sri Ramachandra. This in itself therefore is more than sufficient for the Hindus to claim an unquestionable antiquity to their system.

We are proud also, in this connection to say that the system of Charaka and Susruta have been so fully and thoroughly developed and standardised when all the other parts of the world were still rolling in barbarism and have withstood centuries of reaction and oppression and test and handed down to us in tact up to the present day. The development of this system was so perfect will be evident if we once pursue the various commentaries that are quoted for reference in the now available works of certain commentators that came subsequent to them who themselves had lived some 1000 years back.

Great and permanent was the loss suffered by Ayurveda during the evil times that befell India. Numerous original works of the master minds quoted in the extant works and commentaries are now not available. Great also was the progress made in Ayurveda that the eight different sections of this great science and art had at one time schools of different



specialists with massive Libraries of differentiated literature to back them, so much so, that the very surgical instruments, we may assert and many surgical operations which the western surgery boasts of were mostly devised by the Hindu surgeons.

### Medicine a Science and an Art.

Medicine is a science. It is not merely that. It is something else. It is a combination of two things. The knowledge of the science has to be put into practice. There it needs the knowledge of an Art. Thus it becomes both an art and a science. All physicians are expected therefore to be perfect in both the sections before they begin to practice. This is the injunction of the Rishis. एतच्चद्वयमव्ययमधीय कर्मापिबदसुभाषितव्य उभयो हि निष्कर्ष राजाहो भवति । Neither the one nor the other will qualify an individual for the profession. The science condemns the mere theorist without the art, and the mere artist without the theory.

The science only explains the principles and theories. The practical physician has to apply them in practice. As the science of medicine does not confine itself to the administration of internal medicine alone, the theory will not be enough nor will it serve the purpose for which the science engaged itself. In practical surgery one has to know many things before he can undertake to practice that branch. He shall have to know first to handle the instrument. He shall have to know how to operate, how to apply the instrument how to remove diseased parts and so on. Last of all but not the least he must know how to make those instruments or at least be able to give instruction in their making.

The western system preserves now both the science and the Art. It has in operation now the use and application of the instrument recommended by their science. The industrial section of it has been perfected by them. Just as there are experts specialised in particular section of science, so the art also has been specialised, so much so, that the industrial art of making particular instrument rest with only certain, limited, particular individuals. It may be that it is not the concern of the Doctor to know who makes the instrument. But the doctor must be satisfied that the instruments are made quite in consonance with the injunctions given by the science and of specified metal, size and dimensions. It is the Doctor who is the best judge in this respect and it is customary therefore that the industrialists used to get their instruments certified first by a known recognised scientist in the profession. Thus that the instruments used in the art—of the science gets its scientific sanction in the modern days.

The science and the art were perfected and cultivated in ancient India. But it is a matter for regret that the science of Ayurveda now severed of its art resembles severed of its wings. The Science alone is still in India while the art has practically become severed both in its practical and industrial aspect, owing to various political causes which are beyond the scope of this article. The revival of that portion of the lost art is the duty of everyone of the followers of the system. At the practice of the art should be revived at any further delay. For Susruta says. सुवदुश्रतो

डापि अकृतयोग्यः कर्मसु अयोग्यो भवति ॥ However perfect is the knowledge of the science it will be of no use without the practice of the art. The practice of the art is unmistakably insisted upon by Susruta in the third chapter of his Sutrasthana.

The art is confined in Hindu medicine not in the surgery. Even in medicine too the physician has to practice the art. The application of Sruha, Dhara, Varti, Nasya, Sweda etc., require constant practice. They are of primary importance to a practical physician in certain chronic cases of the various derangement. These may not be considered as important as the practice of the art in surgery is insisted upon. That may be true

but the application of Dhara and Varti is equally important to the physician, which have to be learnt from the practical man alone in spite of one's knowledge in theory. The practice of these arts is restricted as it is practicable only under certain limited circumstances and they need not be considered as dangerous or harmful as the art of surgery is on account of its application in known conditions and circumstances. The art of surgery on the other hand is otherwise.

The practice of the art of surgery has to be well conducted. It requires among many other things firmness, quickness, dexterity, skill, and fear of life as it has to deal with living beings. These should be practiced often on dead matters. Susruta has suggested such practice, on roots, fruits, and such other quite appropriate materials. He must acquire by so doing all the above which are most essential in dealing with living organisms. Now-a-days the practice of this art is being carried on human dead bodies. When the life is out it is immaterial whether the art is practiced on dead bodies or inanimate objects. Nothing of any importance will be gained by the physician in this practice. The real student could only gain these knowledge and qualifications only in his daily practice, as he treats cases of major and minor operations on human lives. In this respect an Ayurvedic man who has to practice surgical operations on inanimate objects is in no way inferior to an allopathic student who practices the same art on dead bodies.

It may be said that by making these operations on dead bodies the allopathic student is able at least to pick up a knowledge of the constitution, structure, of the human system and the position of the various organs. This knowledge will be denied to an Ayurvedist who practices the art of surgery on inanimate substances as fruits and roots. But an Ayurvedist on the other hand, who practices the art of surgery on inanimate things gains that knowledge, which is assured to an allopathist practicing surgery on dead bodies from dead bodies themselves, though not simultaneously with the practice of the art of surgery. He picks up a dead body specially for this purpose at a little later or earlier and acquaints himself well with these knowledge of constitution, structure etc. Thus the Ayurvedist is as much on the alert to have that knowledge as the allopathist is. How then the one becomes superior to the other in this respect?

The question now is not of the present day Ayurvedists. It is of the science. The present day Ayurvedist may be a stranger to this art which the allopathist may claim for him. Just a century back where was the allopathist who claims super-priority for himself in this respect. It is not to be understood that their knowledge is deprecated, in any way. What is meant by this is nothing short of this. It is to insist upon the fact that all things have to be judged by their merits and not by what they are today.

If the Ayurvedists have lost their art of surgery true it is so. That cannot by itself contribute to a wholesale condemnation of the science by its enemies. It is the revival of that art that the practitioners of the indigenous system are striving at. It is a matter for gratification that still there are few Ayurvedists, scattered here and there, who have kept up the tradition and preserved this art from complete decay or extinction. In the course of a review on the Presidential address delivered at the Bombay Ayurveda Sammelan, in these pages, it was pointed out that the President still practices the art of surgery as indicated by Susruta in his treatise called Susruta Samhita.

What the Calcutta University Commission observed in their finding on the indigenous practitioners that "there is an obvious and promising desire at the present moment among the numerous adherents of these systems for closer touch with modern scientific methods" is, it is to be understood, in this direction. It is an attempt for the revival of their lost art. Having in their mind the principles laid down by the promulgators,



the Ayurvedic system these numerous adherants have begun to endeavour to practise the art in such a way that it does not in no way interfere with or contradict those principles. What they now desire is not an incorporation of all and everything Western or the so-called modern, in their system. It is only the practice of the art that they desire to have and when once they have had that practice they would apply their own principles as enunciated by Susruta in application.

The manner of applying an instrument, the place where an instrument is to be applied and how it is to be applied are not the exclusive privilege of any particular individual. It is a common ground, where neither an allopathist nor an Ayurvedist could have two different views. In the case of an operation to be made in the eye it will be preposterous to suggest that an Ayurvedist would open in the abdomen or somewhere else. But where he will disagree is in the treatment before and after the opening. He would be found to insist his own principles and like to treat with his own medicines as directed by those greatest authorities in his system. It is thus the revival of Ayurveda is to be contemplated and it is this very same that the Ayurvedists now endeavour to do, by a closer touch with modern scientific methods.

In this connection it is with pain that it has to be pointed out that the attitude among certain sections of the allopathists, is not what it ought to be towards the indigenous practitioners. They view them not with any brotherly feeling but would treat them as enemies and an inferior. Even those who profess to be extremely sympathetic towards the indigenous systems and who identify themselves with them by associations in all their activities seem to entertain that Ayurveda has no surgery in it and that the indigenous practitioners ought not to be trained and instructed in the art of surgery. It is to be emphasized here that by this attitude of theirs they are doing more harm to the system than any good they seem to do by their sympathetic associations and identifications.

Whether Ayurveda possesses surgery, whether that surgery is perfect will be dealt with in a subsequent paper.

It has to be reiterated again that a science cannot live without the art, nor the art can live without the science. Both are interdependent and therefore cannot be separated from each other. Thus the medical science is both a science and an art of which the science enunciates and explains the principles while the art applies these principles in practical operations. It is but mere assumption of super-ingenuity and superiority for oneself that tempts to declare all systems other than one's own as alien, unscientific, quackery and the like. It is not this hostile attitude that will bring harmony among different sections of our countrymen. Harmony could be obtained or established only by co-operation which if pursued with a broad and open heart, there will be no doubt, so far as the medical world is concerned, will be productive of very good results and advantages both to the allopathists and the indigenous practitioners.

## Swarna - Rathnakaram

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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

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