

Hindu Message

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

Medical Supplement

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

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NOTES AND COMMENTS.

We are glad to note that the Municipality of Trichinopoly has sanctioned a sum of Rs. 3500 for opening an *Ayurvedic free Dispensary* in their town and that arrangements are being made for equipping the same with the necessary apparatus and medicines. We wish this new institution every success and hope that other local bodies will follow suit. We, however, object to the exclusive character of the designation *Ayurvedic* proposed to be applied to the new institution, for the *Unani* system has as much claim on the funds of local bodies as the *Ayurvedic* system, especially in a town like Trichinopoly which has been the former capital of the Carnatic Nawabs. As between the *Indian* systems one is as good as the other so that any distinction sought to be made between the two is likely to prove a failure. Both systems should work in perfect unison and harmony if they are to make headway against the foreign systems and no useful purpose is served by exalting one at the expense of the other. Otherwise the door cannot be permanently shut against *Hakeems* who can be imported from Northern India in sufficient numbers, even supposing that local talent is not readily available.

In hospital obstetric practice, in trained hands, Pettit considers the best prophylactic procedure against the development of infection of the cervix to be the routine exposure of the cervix in primiparas, after delivery, and suture of the lacerations of the cervix. With accompanying symptoms, certain types of amputation are the operations of choice. Trachelorrhaphy is preferable to cauterization if future pregnancy is a consideration. Cauterization, for the treatment of infection of the cervix should only be undertaken if future pregnancy is no longer a consideration. The Sturmdorff conical enucleation of the glandular elements of the cervix possesses the virtue of high amputation, and

should give the least possible interference with pregnancies.

* *

The indications for operation in injuries involving the brain according to Munro are compound fracture of the skull, depressed fracture of the skull, and a rise in the intracranial cerebrospinal fluid pressure. He advises that all cases in which an injury to the brain has been sustained or is suspected, no matter how slight, should as soon as the patient has recovered from the surgical shock, have the pressure of the cerebrospinal fluid measured, and the treatment should be based primarily on this finding alone.—

* *

Four cases of extraction of wire from larynx are cited by Wylie. These small pieces of wire get embedded in the tonsils and the bases of the tongue, or even get into the arytenoids of the larynx and cause great suffering, and serious results might follow. This condition is the result of cooks cleaning the kitchen utensils with a steel scrubber, sold for that purpose. The “Scrubber” consists of a quality of steel shavings rolled into a ball, and in the process of time, some pieces of the steel get detached by the constant use of the scrubber, and being very small and almost colorless, escape the cook’s notice and are served with the food.

* *

Caius and Mhaskar found betanaphthol to be a powerful vermicide acting both on ankylostomes and necators. Up to a dose of 40 grains, the advantage lies with a single portion treatment beyond 40 grains the drug may indifferently be given in one, two or three portions. In sufficiently large doses betanaphthol is an effective ascaricide. Up to 60 grains dosage betanaphthol is a very safe drug. Betanaphthol is a very safe drug. Betanaphthol has marked vermifugal properties and no after-purge is required in the treatment.

Ayurveda and Modern Science.

By VAIDYATILAKA B. V. RAJAMANICKAM.

At a time when the Governments of the several provinces are enquiring into the scientific basis of Ayurveda with a view to encourage the study and improvement of that science, it is necessary that every student of Ayurveda should consider it his duty to justify his calling by establishing the scientific basis of his system. A comparative study of the two systems—Ayurveda and Allopathy—will convince every impartial student about the scientific basis of the former. Such a study, it is needless to point out, would be useful and to the mutual advantages of the practitioners of the several systems of Medicine. It may be pointed out that *researches*, on the lines indicated below would help much in this direction. It is therefore necessary that earnest attempt shall have to be the primary consideration of all sincere students of the medical world, who are bent upon a real improvement of their systems, if they are to be of any real benefit to humanity at large.

If the followers of both the systems would only work hand in hand it is sure that both will greatly be benefited. For the one is incomplete without an embodiment of the principles of the other in it. What is meant by this is that Ayurveda has enunciated certain principles which if the West would incorporate in their system, would enable them to account for the various phenomena that are now unaccountable in it. Ayurvedists on the other hand will find the several instruments used in the western system of medicine a source of help in throwing much light on the high scientific basis over which it is built up.

It is not the question of priority that is to be taken into consideration; nor should the representatives of several systems fall back in taking certain knowledge from the other. If they would cast off their prejudices against such an incorporation and work with an open heart in the interest of science and humanity the goal will surely be achieved in days countable in numbers.

Of the most important forces that are working in every cell *Irritability* (or the movement of cells caused by external agents?) explains the phenomena countenanced in one of the agents among the Tridoshas of the Ayurveda. The chemical heat that is evolved during the processes of *assimilation*, *reproduction* and *excretion* is represented by another of the three agents coming under the aforesaid Trio. The force that is acting on the preservation of the liquid and solid contents of the cells in position, otherwise called the power of assimilation and growth, and the regulating of the heat is considered to represent the third of the three agents.

Of course the enumeration of these forces in Ayurveda is not enunciated with regard to and in connection with each individual cell; but it is based on the actions of the particular community of cells possessing particular powers of actions in particular localities.

The power of reproduction and the power of excretions the other two activities of the cells are nothing but the vital activity of the chemical decomposition. The former or the power of reproduction is not viewed in the same light as the west has viewed it. They trace the origin from the nutrient material undergoing several stages before its life. To put it in a plainer language they account this growth or reproduction from one to the other in the order enumerated below;—"from chyle to blood (tissues) to muscular tissues from muscular tissues to fat tissues, from fat tissues to bone tissues, from bone tissues to marrow (tissues,) and from marrow (tissues) to semen tissues.)

As regards the first changing into another no explanation needs necessary. As regards the transformation from the third to the sixth a close study of the embryo will reveal the fact. As to the last (changing of the sixth into the seventh) a reference to the pages of Halliburton may be interesting; wherein it may be found that, the author says that bone assumes an unusual shape in *Eunuchs* a result, by which it is possible to deduce that the formation of seminal cells is dead in their system. So marrow is burdened with semen and goes on accumulating, demanding more space.

The several excretions are identified as waste products of the activities of the cells. This in short forms the physiology of the East which I am sure is almost identical with that of the West barring, of course, in the terminology and arrangement used by the east, showing thereby their individuality in thinking and classification.

The pathology of Ayurveda is built upon a careful study of the functions of the several cells in the body. The vitiation or aggravation of the particular functions of the cells presenting particular symptoms in particular localities, with particular antecedents usually found across, is studied and labelled as a particular disease. A peculiar feature, in the labelling of the disease, adopted by the East, is that they have paid due attention to the particular function or functions of the community of cells which are deceased or aggravated as antecedents to the locality in which the particular symptoms are exhibited.

It is a sorry feature that many have not been able to grasp the truth of this principle and have been decrying the addition of *Vata*, *Pitta* and *Kapha* as the antecedent to the disease, adopted by the East as the burden of song, having no scientific significance in it.

In treating disease the system of the East is based on the cellular activity of the body and the correcting of it in order to obtain a normal condition of the body. It may be pointed out here that Ayurveda has always kept in view the cause of the disease and the correcting of it and has not attempted treatment for the symptoms exhibited, which are but the results of the morbidity caused to the cells in their normal functions.

Next as regards the properties of drugs and classification of them, the East has attempted a study and enunciation of them in relation to the aforesaid activities of the cells. That is in connection with the three activities of the cells mentioned above. They are classified in such a way as to eliminate such of the causes which the cells attain in particular places under particular circumstances producing particular symptoms. The fact is that a diagnosis of the strength of the force that is responsible for the diseased condition of the cells in a minuter degree, as the *Ancients* have been doing, has now become a practical impossibility for ordinary physicians, so much so that they have been presented with the results of their (ancients') scientific researches in a definite form to eliminate particular symptoms in order to minimise the work of the ordinary physicians (the present day physicians) without at the same time giving room to be called an empirical classification.

In studying the properties of drugs they have taken primarily into consideration (1) their tastes in the mouth and the effects of their actions on the system. (2) Their actions after undergoing chemical decomposition in the digestive system and the taste they may then appropriate (3) the maximum force of drugs which are calculated by experience in connection with the order of degeneration from one to another in relation to the time they take. They have also determined the speedy action of the drug that goes to

form the particular tissue and more or less neutralises in it. This accounts for the specific and speedy actions, which some drugs are said to possess on certain tissues only although they are identical in respect to correcting the vitiated actions of the cells in general. This they consider as the special property of the drug. A tabulation showing the name of the drug, its taste, its reverse function in the creation of more heat or the reverse of it in the system, its speedy action on particular tissues explained as special qualities, and its general qualities with regards to the three cellular activities, and its chemical constituents according to western lines, will throw much light on the principles, of the actions of the drugs, in which it is enunciated.

With regards to the causes of the disease, the chemical and physical forces acting around us are classified under (1) that arising out of climatic conditions (2) that arising out of habits and actions and (3) that arising out of the affections of sensory objects.

Lastly in connection with the question of *Bacteria* it has to be pointed out that it is only a fragmentary product of the vitiated cells, assuming different shapes, which depends largely to the locality in which it originates. This perhaps is the cause for the finding out of new *bacilli* every day by scientific investigators. A close study of the constituents of the cells before and after it is subjected to the disease in relation to the defective tissues of the body as a whole will lead to the conclusion that when substances, which are required for the building up of the cells in succession, deposit midway, they become vitiated and assume particular forms according to the influences they may have in or around their locality. This deposit of the cell-matter gives rise gradually to the nourishment that they may receive during the usual and regular processes of chemical transformations in the system. This vitiated cell-matter may be carried through the several channels inside and kept in circulation or discharged along with the several excretions from the body. An analysis of the constituents of the defective tissues and those of the vitiated cell-matter or the fluid that gives nourishment to the growth of this diseased cell-matter around it would convince anybody of the truth of this statement. Scientists engaged in Bacteriological and Biochemical researches are requested to pay more attention in correlation with this.

To put it briefly *Bacteria* is nothing but the fragmentary products of the diseased cells, of that particular locality, which is produced when the normal activities of the cell become vitiated.

Thus the East has attempted to understand disease in its early stage whereas the West understands it in its malignant state. If the West would therefore endeavour to study the cellular activities as the basis to disease and incorporate in their system the study, the nature and characteristics of the *bacteria*

they will be able to know the precise condition, and the degree of intensity of the dead action of the cells, more precisely and clearly in all malignant cases than they could infer from the clinics.

In conclusion I say the Physiology, the Pathology, Diagnosis, and the Treatment, are all based on the cellular activity according to Ayurveda. The points of concurrence between the East and West are so very striking that it will give enough matter for earnest research scholars for further investigations.—(*The Kalpadruma*).

The Committee on the Indigenous Systems of Medicine.

With reference to a Note that appeared in the *Svadesamitran* dated the 21st July 1922 asking for a report about the work of the Committee the following report received from the Chairman of the Committee is published:—

In their order No. 964 P. H. Mis., dated 10th August 1921, the Government appointed the Chairman and the Secretary to the Committee in advance asking them to submit a preliminary report regarding their proposed programme of work; this was done on 28th August 1921, and the Government, in their order No. 1351 P. H. dated 17th October 1921, passed orders on the Report, approving generally the proposals contained therein and appointing a Committee of ten members, including the two already nominated viz. the Chairman and the Secretary.

The declared object of the Government in ordering the proposed enquiry being "to afford the exponents of the Ayurvedic and Unani systems an opportunity to state their case fully in writing for scientific criticism and to justify state encouragement of these systems", a questionnaire was prepared in English with this end in view, and it was translated into Sanskrit, Urdu and the chief vernaculars of the Presidency, and sent round to all interested in the subject. The indigenous practitioners are showing commendable zeal and interest, in returning answers to the questionnaire, some taking even the trouble of printing their answers at their own cost; the response has been full and abundant; although the time for receiving written replies is over, still, more answers are coming in; and while effort will be made to include even these late replies, in the main body of evidence, still, some it is feared, may be really too late for such inclusion. Answers have been received in English, Sanskrit, Urdu, Tamil, Telugu, Malayalam, Oriya and Kanarese; and these, are now being dealt with by separate sub-committees specially constituted for the purpose, with the Secretary to the Committee, as the Secretary of each sub-committee. As soon as the sub-committees have finished their work and reported, the oral examination of witnesses will commence; as things now stand, this work will

probably be undertaken in September and October next.

The inspection of institutions contemplated in the Preliminary Report mentioned above, was undertaken and completed between January and April 1922. Very valuable evidence was gathered during the tour and the Secretary has completed the editing in English of the evidence of certain representative witnesses as however some of them referred the Committee in the course of their evidence to their published works in Sanskrit, the editing of their evidence involved the translation and summarising of parts of their works; this evidence, as edited by the Secretary, is now referred back to the witnesses for their approval.

As contemplated in enclosure II G. O. No. 1351 P. H. Mis., dated 17th October 1921, the Secretary has already furnished the members of the Committee with a preliminary memorandum "incorporating such useful information on the subject of the present enquiry as he may be able to gather from Reports, Books, personal interviews and such other means." This necessarily involves a thorough study of all available literature on the subject, as also of the actual work and practical results of existing institutions for Medical relief and Medical Education of Indigenous systems; while the time at the disposal of the Secretary will not permit the undertaking of such a gigantic task, still, the memorandum will, it is hoped, give a Birds-eye-view at least of the whole subject under enquiry. Before the oral examination actually commences, the Secretary will also provide the other members of the Committee with English summaries of evidence, written in languages other than English.

The question of Medical Registration of Indigenous practitioners was specifically raised in the last September Session of our Legislative Council, over a Resolution on the subject by Dr. Slater M. L. C.; this question also has now been referred to the Committee.

Circulars have been issued to the Heads of Districts and Local Bodies requesting them to furnish the Committee with certain data necessary of reporting on this question, such as the number, distribution and qualifications of Indigenous practitioners in their area, the number, type and distribution as Dispensaries, Hospitals, Schools, etc., of Indigenous Systems, and so on these data are now being received classified and tabulated.

After the oral examination of witnesses is completed, the report of the Committee will be drafted and discussed; this will probably be completed in the months of November and December next; and it is expected that the final Report will be submitted to Government in January following.

—The Publicity Bureau.

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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