

Knowing Ayurveda: Historical and Cultural Reflections

Poonam Bala*

Visiting Professor

Centre for Studies in Science Policy

School of Social Sciences

Jawaharlal Nehru University

New Delhi

It gives me great pleasure in introducing a new section on the social history of Ayurveda via a maiden note that appears below. I am honored to be given this opportunity to share some of the well known and significant aspects of the medical heritage of Indian system of medicine. As one of the oldest medical traditions, Ayurveda signifies not only the 'knowledge of life' but also, and more meaningfully, a system of knowledge that has witnessed and withstood several foreign invasions and encounters over the years. Nevertheless, it has, and still continues, to cater to a vast population in India as well as globally in a manner that speaks volumes of its rich heritage and cultural links.

Unscathed by the tumultuous trajectories during the past several hundreds of years, Ayurveda has come to offer new perspectives in health that have paved the way for its existence as an important and an indispensable component of medical care. With this, a tradition almost 5000 years old, and in the process, it has set new paradigms in health care-paradigms that have made an absolute impact universally, thus capturing a visible share of the medical market. More significantly, it has set a new development paradigm addressing new opportunities in health care delivery in the contemporary world. The new paradigm offsets a shift from curative to preventive in contrast with western biomedicine. While several factors have contributed to this shift, the new preventive paradigm is often seen as a result of the new culture of preventive aspects of healing that has now been transmitted globally.

In order to better understand the roots of medical culture in India, it will be appropriate to revisit the historical trajectory of Ayurveda. The initial evidence of Indian culture and medicine is richly documented in the Vedas, the oldest repositories of Hindu knowledge which were called Rigveda, Samaveda, Yajurveda and Atharvaveda; in the words of Henry Sigerist¹, a world renowned medical historian, they represent the "most important canonic books of Hinduism." Similarly, Ayurveda, with its codification as rational science following thousands of years of work by sages and seers, was a complete professional knowledge form, as evident from the chief medical texts- the Caraka Samhita, Susruta Samhita and Astanga Samgraha, collectively called the Vrddhatrayi, or the three 'elder ones.' Ayurvedic physicians excelled in surgery and were credited with the practice of rhinoplasty (surgery of nose) and lateral lithotomy (for removal of stones). Towards the end of the early ancient period, Ayurveda represented a codified and professional body of medical knowledge, much ahead of all medical systems at the time. With the Muslim rule in India, was introduced the Greco-Arab or the Unani system of medicine. Support and patronage to Ayurvedic and Unani physicians was evident during this period, mainly through the royal treasury or *purshigan*. Akbar's rule is known for the maximum fillip given to both Ayurveda and Unani. Similarly, the reign of Shah Jahan witnessed an expansion of medical care through the establishment of medical institutions in the country. With the introduction of western biomedicine before British rule, the interaction between Ayurveda and western medicine became most apparent and it was during these interactions that the new transformations in the way indigenous medical knowledge was perceived and accommodated, became visible.

Bala Poonam : Knowing Ayurveda : Historical and Cultural Reflections

Needless to say, in the process, Ayurveda became a site that represented a rich cultural medical heritage of India as well as a site through which the dynamic relationship between Ayurveda and its western counterpart could be conceived. This has resulted in new visions of transformations in Indian medical knowledge. Initial reaction and, later an understanding, of a system of knowledge, has also been a central topic of interest in the sociological study of the nature of modernity. Indeed, despite the 'differences' between Ayurveda and western medicine, attempts at appropriating medical knowledge by the East India Company authorities as well as indigenous patrons, continued unabated. Initial support to and interest in indigenous medicine found expression through institutional establishment by the East India Company administrators in the early part of its rule. The establishment in 1832 of the Native Medical Institution (hereafter, NMI) in Calcutta, was the first major step in this direction for this represented the first attempt at 'official recognition' by the Company authorities. For the first time, simultaneous instructions in indigenous and western medicine were carried out to fulfill the need for more Native Doctors in the civil and military establishments of the Bengal Presidency. The NMI, however, ceased to exist in 1835 following a decision by the then Secretary to the Board of Control (who would oversee the affairs of the East India Company), Thomas Babington Macaulay, to introduce English-medium education in India through his famous *Minute on Indian Education* of February 1835. Inspired by the utilitarian ideas of his predecessor, William Bentinck (the then Governor General), Macaulay introduced an educational system with the idea of creating a class of anglicised Indians who would serve as 'cultural intermediaries' between the British and the Indians; this also brought an end to a debate on the most adequate form of language and medium of instruction- a debate that started in 1822. The idea behind this move was also to replace the then official language of India, Persian, with English language which also formed much of what was later introduced as the English Education Act of 1835. Issues of lack of anatomical practices were also a guiding force behind this decision. It also led to an 'unsettled' encounter between Indian and western medical systems which was reinforced

in alter years. The year, 1835 was, thus, a decisive point in the medical history of India. With the first ever dissection of human corpse being carried out, it also meant paving the way for framing new medical technology in anatomical practices. It also lay open more appropriation of medical knowledge by the imperial authorities.

Admittedly, Ayurveda, is a science of medicine which has successfully forged for itself a new medical structure or structure of knowledge over the years. This has been dictated by the ongoing social and political changes and changes in the political ideologies that necessitated medical encounters in India. Its new form has to be located within the culture of which it is very much a part. Seen as an expression of both culture and medical power, the establishment of colonial power after the 1857 Mutiny, sparked off numerous changes in the way in which Indian medicine was looked upon by the colonial authorities. Given that Ayurveda was complete in terms of a medical profession, to use the sociological parlance, it was often faced with numerous challenges from its western counterpart. These were seen in various phases of initial acceptance by the British administrators, followed by resistance and finally accommodation, each signifying the health and medical needs of the vast population. Despite the tumultuous and challenging medical encounters, Ayurveda withstood them with much professional elegance.

The late nineteenth and early twentieth centuries witnessed a long-lasting political instability in India. Coupled with rise of the nationalist movement and anti-British sentiments, and the move towards freedom from colonial rule, nationalists saw the decline of Indian culture and heritage as a result of these instabilities and forceful changes. As a result, Ayurveda came to be increasingly linked with nationalism and the need to revive India's rich culture and traditions came to the fore. The near unanimous belief of the decline of India's culture as a result of colonial rule, loomed large in the minds of nationalists, medical practitioners and the general public at large. For Ayurveda is, and has always been very much part of our culture- it is how we perceive and experience health and illness and how we communicate our experiences. In this context, owing to its cultural links, revival of Ayurveda necessarily

meant recovery of India's culture and tradition.

Ayurveda today

Over the years, Ayurvedic practitioners also accommodated the validation of Ayurveda as a necessary prelude to recovering the pristine heritage of India, while also enabling a new institutional structure and a new paradigm the effects of which we see today. The global spread of Ayurveda and its infusion into western cultures is a sure indication of the manner in which it has been 'modified' and 'extrapolated' to cater to a worldwide clientele. It also indicates the structural changes that were needed to present Ayurveda in a format that was acceptable in western cultures. Perhaps, one might talk about Yoga and its extreme popularity outside India where it exists as fulfilling the needs of the New Age Movement which is based on the spiritual exploration and accommodation of various mind-body-soul- approach in the western culture. Yoga is one such form that over the past several years, and more so recently, has existed as a powerful system. Marketed as a new healing system for the health consumers, Ayurveda has now become an indispensable system to the New Age ideals. So what we see today is Ayurveda being marketed either as a healing paradigm of herbal medicines or a form of wellness and spa culture. In my view, in so doing, Ayurveda is being reduced to a form that is amenable to the western audience, thereby losing its rich appeal with which it has represented over several thousands of years. Nevertheless, its 'appeal' as a wellness therapy in the form of a spa culture, has also spread to the emerging middle classes in India, and not just American and European health tourists and globally.

On a final note, one question will remain unanswered: is the commodification of Ayurveda essential to cater to the affluent middle class professionals and entrepreneurs in India and to the western audience, necessitating the emergence of a new form that would seem to lose its rich appeal ?

* Author of *Imperialism and Medicine in Bengal: A Socio-Historical Perspective, Medicine and Medical Policies in India*, and editor of *Biomedicine as a Contested Site: Some Revelations in Imperial Contexts, Contesting Colonial Authority: Medicine and Indigenous Responses in 19th- and 20th-century India*, and *Medicine and Colonialism: Historical Perspectives in India and South Africa*

References

1. Henry Sigerist, 1961, *A History of Medicine*, Oxford University Press : New Delhi.

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