

INDIA'S ANCIENT PHYSICIANS

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ABSTRACT

There is no shortage of research on the medical systems and medical literature of ancient India in Indian medical historiography. Be that as it may, individuals who were liable for the mending certainly stand out. The development of the medical profession in ancient India is examined in this article. Using a variety of sources, this article conducts a review of the secondary literature on Indian healing and medical practice, with a focus on the individual medical practitioner. In ancient India, healers belonged to a variety of castes and classes. They enjoyed state patronage and enjoyed their respect. They were bound by a strict code of conduct and were held to the highest ethical standards of the time. They went through thorough preparation in both medication and medical procedure. Most doctors were multi-gifted generalists, and were expected to be talented in address and discussion. They were wealthy to. The paper also provides a brief history of how medicinal concepts developed in ancient India.

Keywords: *Prosopography; Indian medicine; Indian doctors; social history*

INTRODUCTION

Over the course of millennia, legendary Indian physicians have made numerous contributions to both traditional and modern medicine. It is difficult to obtain information about people who lived several thousand years ago, especially when there are no birth, death, educational, or case records. However, historical and biographical works as well as texts attributed to them can provide a wealth of information. We had three goals when we looked at the lives of nine famous Indian doctors. To begin with, to describe their contributions to medical care; secondly, to decide whether Indian and Western clinical practices share similarity in their development; also, thirdly last but not the least, to decide the commitment of these doctors to current medication. It is very difficult to determine whether or not any of these doctors ever existed because some of them have mythological references. In the Rig Veda and the Atharva Veda, most of the references to medicine are theurgical and rely on divine and supernatural remedies to treat physical ailments. Ancient Indian medicine did not begin to develop into the form it is today until the post-Vedic period (800 BC to 1000 AD). An elegant narrative demonstrates the charm as well as the difficulty of distinguishing fact from fiction and accurate information relating to these ancient doctors. It was decided at an ancient rishi conference that someone should learn how to cure the many diseases that plagued humanity. The mythical divine creator of this universe Lord Brahma had shared this knowledge with Daksha, the Ashwini twins,

and finally Indra, Lord of the Heavens. Bharadwaja Rishi participated in this mission as a volunteer and obtained the relevant information from Indra. Bharadwaja's understudies included Atreya rishi, and it was Agnivesha rishi (around 800 BC), Agnivesha rishi is credited to be the creator of the primary Indian composition on medication. All old civilizations of the world fostered their own restorative frameworks, yet the old Indian arrangement of medication is viewed as the most calculated and the most comprehensive framework, both in its thoughts and its corrective measures.[1]

Beginning from the nineteenth hundred years, Western and Indian students of history have accomplished broad work to cut out the philosophical underpinnings of Ayurveda and its techniques and the dating of Ayurvedic texts. Ayurveda's science relating to its development, science, materia medica, and its gradual decline have all been thoroughly investigated. Ayurveda has also been studied in relation to the ancient Greek system of medicine and its connections to ancient Chinese and Tibetan medicine. [2] A discussion of the people who practiced medicine is clearly absent from the historical analysis of the time period. Having said all this I try to shift the focus of this paper away from systemic studies towards individual research. Who were the doctors in this period, what sort of preparations they had, what was their stature in the general public, and what sort of conduct was required from them, these are a portion of the inquiries that I will investigate in this paper. I have used online search engines, libraries, and personal communication with other experts in the field to find relevant secondary research on ancient Indian medicine. A few common themes have emerged from these readings, which are discussed in the following sections.

VEDIC HEALERS

The four Vedas, along with corresponding Brahmanas, Aranyakas, and Upanishads, provide insight into the medicinal practices of the Vedic period (1500-600 BCE).[1,3] The Vedic people considered the spirits of all objects in the world to be gods. The earliest reliable information about medicine and medical practitioners in India can be related as way back to 1500 BC. The body ailments were treated using magico-religious methods and were attributed to divine remedies. The job of the clerics was to lay out contact between the divine beings and the masses. The divine beings were thought to be able to summon the gods, pacify them, and make them happy. The Priests through their mantras, had magical control over gods and used their this power for healing as well. Consequently, the priest was also the healer.

Agni, or fire, is mentioned in the Gita as the intermediary between the sacrificer and the gods. As a result, the priests of the Agni cult—the Atharvans, the Angiras, and the Bhrgus—were regarded as adepts at performing magico-religious rites for the purpose of healing. They are also thought to be the ones who wrote the Atharva Veda, which has information about early understandings of the human body, diseases, and treatments for them. In addition, the Vedic people believed that consuming the juice of the soma plant following an offering of it in a fire sacrifice could grant immortality. The Atharva Veda's description of the extraordinary properties of other plants was made possible by this

eneration of soma. The details of the majority of the Vedic healer's materia medica consisted of plants and the products of those plants. According to the Rig Veda, "for a skilled healer, the herbs rally together like an army of kings" Individual sages and schools of herbalists are regarded as having discovered, described, and propagated the use of particular plants, many of which bore the sage's name. As a result, Kanva was credited with discovering the medicinal use of the plant known as Kanva's plant. Different materials incorporated cow's milk and its constituent, water, and soil from different sources, powdered shells, and rock salt. Hymns and sacrifices were used by the Vedic priest to make the medicine more spiritual. Some foods served as carriers for particular medicines. Inhalation, fumigation, and topical application of ointments were also used in addition to oral medications. Amulets were made of certain plants. The medications were administered at specific times and locations. Using a variety of creative methods, the Vedic priests attempted to exorcise or atone the demon that was the root of all diseases. The demon could be "trapped" with fire and a hot water-filled ditch surrounding it. A frog that was tied under the patient's bed received the fever. Magico-strict spells and customs to fix the different sicknesses have found mention in the Atharva Veda. Despite the widespread recognition of the divine and demonic origins of illness and health, there were also some prevailing rational ideas relating to it, most of which emerged during the Later Vedic period (1000-600 BCE). The bones and internal organs, among other body parts, are described in the Atharva Veda. It is acknowledged that fever is the "sister" or "cousin" of other diseases, and certain symptoms, of fever, are classified precisely. Infection with germs or worms, altered phlegm, wind, or bile, seasonal changes, and contaminated or unwholesome food are all potential sources of disease. Diseases that are inherited were also detailed.

EMERGENCE OF AYURVEDA

Beginning in 600 BCE, the Vedic period laid the groundwork for a more rational and methodical system of Indian medicine known as Ayurveda (the Science of Life).[3] The practitioner of Ayurveda was referred to as a vaidya, which connotes "a person with profound knowledge."

Buddhist texts, Chanakya's Arthashastra, and accounts of contemporary Greek visitors to India from 600 to 200 BCE provide evidence for the medicinal ideas and practices of India. For Ayurvedic hypothesis, most history specialists allude to the two Sanskrit clinical texts dating from early hundreds of years of Christian time, the Charaka Samhita (Charaka's assortment) and Sushruta Samhita (Sushruta's collection).[3] Vagbhatta's Astanga hridaya dated seventh century BCE is one more significant text of Ayurveda. Epics, Jatakas, travelogues, and other works of relating to early Christian literature also make mention of Ayurveda. The Atharva Veda was where Ayurveda got its start because it relied on the medicinal properties of plants and other things. Ayurveda, on the other hand, developed into a fully complete rational theory of health and disease by deliberately deviating from magico-religious and empirical thought. The Charaka Samhita looked to show the doctor the essential thoughts of rationale with the goal that finding and treatment could be founded on legitimate

perceptions and reasoning.[8] Ayurveda held a portion of its Atharva Vedic roots as a branch called Bhuta vidya (psychiatry and demonology).

The vaidyas of Ayurveda consistently applied its tenets to the biological world of humans, animals, and plants, making it regarded as an example of intellectual coherence. Vaidyas considered every individual remarkable, and gave specific consideration to the constitution of the individual.[1] Vital to Ayurveda is the tridosa or the three humoral hypothesis of vata, pitta, and kapha, and all physical, physiological cycles as well as the obsessive causation of illness are made sense of as far as the three dosas. Although they were referred to in English as wind, bile, and phlegm, they had much broader meanings for vaidyas. Balance of the three dosas appeared as wellbeing though the disequilibrium or disharmony of these three brought about infection. This disequilibrium could have an effect on any one of the seven dhatus, or body parts. In fact, the vaidyas greatly encouraged discussions and the exchange of ideas in order to help standardize the Ayurvedic theory, which is how Ayurveda developed into a well-organized scientific field through symposia and conferences[1].

AYURVEDIC METHODS

The vaidya mostly used what's known as rational therapy. He looked at the person as a whole, not just the disease.[1] He paid close attention to the patient's innate physiology, mental state, and other factors like age, food habits, and the time of year the disease started. The vaidya, like modern doctors, used both direct perception (pratyaksa) and inference (anumana) to conduct a thorough examination. Likewise, oral or composed declaration of the individual experience of Ayurvedic specialists was acknowledged as a symptomatic device (aptopadesa). The vaidya was also expected to ask the patient a lot of questions (prasna), examine the patient with all five senses (pancendriya pariksa), and try to prove or disprove his diagnosis (yukti) based on these details. The classical Ayurvedic texts don't mention pulse examination. Ayurvedic therapeutics comprise of both purificatory and corrective strategies. Sanitization, both interior and outer, is accomplished through a deliberate methodology of panchakarma (five processes). Curative techniques included different means and measures to reestablish the equilibrium of the vitiated dosas. The Sushruta Samhita provides in-depth descriptions of a variety of surgical procedures, whereas the Charaka Samhita focuses primarily on therapeutics. The vaidya's drug knowledge is emphasized heavily in ancient texts. A vaidya was expected to consider the drug's benefits and drawbacks when prescribing it. The vaidya gathered the herbs and other ingredients during auspicious times, prayed over them, and then made his own drugs with them. The Vaidyas placed equal emphasis on disease prevention and treatment as well as health promotion. For the purpose of preserving a well-balanced state of health, they advised following a daily and seasonal routine and paying attention to nutrition. For a healthy life, they advocated a harmonious body and mind as well as a harmonious relationship between man and the universe.[1] Vaidyas used spiritual therapy to treat diseases whose causes were unknown. The patient's actions during previous births were used as an example to explain these. Praying and making offerings, repeating mantras, and wearing amulets and gems were all part of the treatment, which was meant to please the gods.

Additionally, mystic treatment was applied to illnesses of the brain. To guard against negative thoughts, the vaidya suggested a variety of methods at his discretion.

THE VAIDYAS AS PROFESSIONAL

Medication for the vaidyas was a full time calling. They vaidyas as were individual experts, joined medical clinics, and vaidyas were utilized by the state. There is additionally notice of vagrant vaidyas, who moved around searching for patients and visiting the patient's home for treatment.

Doctors in state administration needed to take care of the imperial family, squires, and royal residence entourage. The Raja-Vaidya, the king's personal vaidya, held the highest position among these state physicians. A doctor used to regulate the food prepared in the illustrious kitchen to guarantee the wellbeing of the imperial family. Specialists and doctors (and toxicologists) were routinely utilized in the military both during war and harmony. There is mention of eight divisions of Ayurveda in the old style texts, yet references to expert vaidyas are uncommon. It was expected of a vaidya to be proficient in all medical specialties, including surgery. The fact that vaidyas were paid well is supported by evidence. Physician Jivaka, for instance, is described as extremely wealthy in the sources. The salaries paid to the state-serving physicians were lucrative. Vaidyas were compensated in cash and in kind. Delinquency to a vaidya was objected, as it was perceived that the vaidya was expected to use cash to gather spices and different fundamentals. The ancient texts say that a vaidya should give the Brahmins medicines and not take money from them. He is prompted not to treat crooks, bird-snarers, huntsmen, and the rivals of the rulers. The vaidyas were subjected to numerous checks. Permit from the state was essential for vaidya taking up clinical practice. Fines were forced for the erroneous treatment of patients. The vaidya, on the other hand, had a lot of autonomy because the law codes say not to argue with doctors. The swindlers were derided by Vaidyas. By advocating for the standardization of Ayurvedic training and practices, efforts were made to slow their expansion. Charaka faults laxity with respect to state for the presence of quacks. In order to discourage these con artists, the Sushruta Samhita prescribes severe penalties.

Among the famous doctors of old India was a doctor named Charaka at the court of Kaniska. It is plausible, however not very sure, that this doctor composed Charaka Samhita.[3] Dridhbala was a Kashmiri researcher doctor, who later changed and redacted the Charaka Samhita.[1] Other incorporate Sushruta, created Sushruta Samhita, Nagarjuna reexamined and expanded it, and Vagbhata composed the Ashtangahrdaya.[1,3] A few Buddhist priests were Ayurvedic pioneers.[1] Maybe, the most famous doctor of old India was Jivaka, to whom various stories and legends are credited. He is mentioned in Buddhist texts as a member of Gautama Buddha's entourage.[3] Ayurveda gained popularity with both the upper and lower classes, and Vaidyas enjoyed a high social status and prestige comparable to that of the upper castes.[1] In any case, certain lawful texts of the period restricted the doctors from normal dining and barred them from services. The fear of communicable diseases, their contact with blood, (which was considered impure) or the fact that they

came into contact with people from all social classes could all have contributed to their exclusion. It is notable that vaidyas were not female. The main notice of a female vaidya is that of Rusa whose work on Ayurveda was converted into Arabic on the request for Abassid caliph Harun al Rashid in the eighth hundred years. Women students were unable to pursue medical education because they were married by the time they reached adulthood.

THE IDEAL VAIDYA

Ayurveda emphasized the importance of a physician's development of positive traits. It was expected of a vaidya to be a comprehensive expert with (i) theoretical knowledge of Ayurveda, (ii) experience, (iii) practical skill, and (iv) cleanliness. It was expected of the vaidya to constantly "try to get more and more knowledge without prejudice." "[6] The vaidya began to exhibit a certain behavior that distinguished him from the liar and was appropriate for a professional. As per Sushruta, a vaidya ought to have resolve, fortitude, memory, great discourse, and harmony, while quacks miss the mark on these characteristics. These sentiments are echoed by Charaka, who explains that the vaidya should be fit, modest, patient, truthful, skilled, and fearless. He shouldn't be arrogant about his knowledge; he should have a steady hand and a disciplined mind. The vaidya must wear white or brownish-yellow clothing according to the Sushruta Samhita. The Ayurvedic teachers believed that medicine was more than just treating diseases. He was going to assist a person in achieving the ultimate spiritual objective of self-emancipation, which necessitates good mental and physical health. He was to teach individuals about wellbeing and illness, and had the option to speak with the lay public and the researchers at the same time. This necessitated knowledge and effective communication. According to Charaka, the goal of the vaidya is "Not for self, not for the fulfillment of any earthly desire or gain, but solely for the good of suffering, should you treat your patients and so excel all." As a result, an adept Ayurvedic physician was expected to engage in exclusive philosophical study, participate in professional discourse, and become proficient in the art of public speaking.[6] Gold is neglected by those who sell disease treatments as merchandise. "[6]

The old texts discuss the specialist patient relationship. In order for his patients to not fear him, a vaidya was expected to be friendly and compassionate towards them. He should also take a practical approach at the same time: Focus on the reparable and not to be interested in those liable to bit the dust. To avoid harm, Charaka suggested that the vaidya keep his conclusions to himself. In Ayurvedic texts, doctors are forbidden from having private conversations or making fun of women.

During a home visit, specific guidelines for how to behave were provided. Respectful behavior and appropriate attire were required of the doctor when he visited the patient at his residence. He ought to zero in on restoring the sickness, and restricted from examining homegrown undertakings or from reporting the looming demise of a patient.

MEDICAL EDUCATION IN ANCIENT INDIA

By the second century BCE, medicine had developed into its own distinct field. Following completion of basic education, medical education was pursued[1-4]. Teachers in their ashramas provided medical instruction. In ancient India, the University of Taxila was well-known for its medical education, and its graduates were revered.

Students of Ayurveda came from various castes and classes. Charaka says that the reason for reading up medication shifted for various standings. Brahmins studied medicine out of compassion, Kshatriyas did it to protect others, and Vaishyas did it to make money. According to the Sushruta Samhita, Sudras could also go into medicine if their family was good. Rarely are references to physician families found. Students from such families of Physicians, according to Charaka Samhita, received priority admission. However, Charaka also asserts that a vaidya is created through training, not birth. Sushruta Samhita portrays exhaustively the inward person and outer worked of an understudy who is to be conceded as a clinical understudy. This admissions procedure was extremely rigorous. A clinical understudy was supposed frankly, modest, calm, liberal, and dedicated. He was not supposed to fall in love with women, gamble, or hunt. His memory and scholastic execution were likewise given significance. The proper ceremony was used to admit the medical student. He was supposed to follow a severe set of rules and conduct. According to Jivaka's legend, seven years were required to complete medical school. Students were expected to memorize the classical texts and their commentary because rotational learning was an essential component of medical education. They were also encouraged to investigate Bhuta Vidya, popular beliefs, and folklore. Practical instruction was a crucial component of Ayurvedic studies. Watching their educator relieving the evil, and supporting him in the planning of medications brought about a ton of learning. As a component of their careful preparation, Sushruta encourages Ayurvedic understudies to rehearse surgeries on vegetables, organic products, and body portions of creatures. Sushruta advised careful observation of a dead body for anatomical knowledge. Charaka also recommends learning to recognize herbs. The student was expected to improve his enunciation, conversational skills, and comprehension after completing his medical education.[6]

CONCLUSION

The magico-religious Vedic medicine of ancient India gave way to the highly systematic Ayurvedic therapies. The doctors had differed social foundations. They were expected to uphold high moral standards given their high status and honor. The rigorous medical education produced physicians who were equally adept at public speaking and communication as they were at medicine and surgery.

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