

Incorporation of Indian Medicine in Indo-Persian Medical Literature (16th To 18th Centuries)- A Study



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Abstract

The early Muslim conquerors and people brought into India, a system of new medical doctrines, associated with Hippocrates, Averroes, Galen, Avicenna and other physicians of different regions, which was called Unani or Islamic or Greco-Arabian medicine. But very soon the rulers and medical practitioners felt that Unani system was not best suited to the people of India, where the climate and the vegetation were different from those of the Greece and Arabia. So they started incorporating Indian healing system with Unani medical system, which by and by began to change the content of Unani medical literature produced in India.

Incorporation of Indian medical Knowledge into Indo-Persian medical works began in the Medieval India, from the 14th century onward under the Sultans of Delhi, Gujarat, Kashmir and Malwa. During the Mughal period, when Persian became the first language of North India, a number of works were composed in Persian on Indian medicine and pharmacology. It can be estimated that there exists a corpus of about eighty to one hundred Persian texts which incorporated the Indian medicine with Greco-Arabian medicine. The main Persian treatise which incorporated the Indian medicine are the Maadan-al-Shifa Sikandershahi, Dastur-ul-Attiba, Riaz-al-Adwiya, Ganj-i-Badaward, Alfaz-ul-Adwiya, Tibb-i-Aurangshahi, Mujarabat-al-Shifa, Mufaradat-i-Hindi, Dastur-ul-Hindi, Ilaz-ul-Amroj, Talif-i-Sharifi and Mulajat-i-Nawabi etc. It seems that Pharmacology was the Indian medical discipline that mostly attracted the attention of Persian medical writers. Practical needs such as finding and identifying the local substitute of Greco-Arabian drugs played a major role. Besides pharmacology and its lexicon, principles of Ayurveda, anatomy, pathology, therapeutics and Ayurved Practices of curing the several diseases by controlling the respiration in specific manner are also described in several Indo-Persian texts dealing with Avicennian medicine.

From the study of Indo-Persian medical texts it is clear that though Unani and Indian medical system differed in theory but in practice both the traditions interacted and borrowed from each other.

Keywords: Muslim Conquers, Incorporated, Indian Medicine, Greco-Arabian Medicine, Finding, Identifying, Local Drugs, Interacted, Borrowed, Each Other

Introduction

The science of medicine is of fundamental importance to man's well being and to his survival and it must have originated with man and developed gradually with the march of civilization. The development of medicine is a continuous process. Any system of medicine is not a discovery or invention but a gradual evolution in successive period of history. It owes its progress to great savants of science in various periods and also the society and civilization as a whole. To illustrate the above argument this article is an attempt to trace the progress of Unani system of medicine in India. The article tries to highlight it through the study of Indo-Persian medical literature produced during the 16th to 18th centuries. The period 16th to 18th centuries is studied because with the active support of rulers an important number of Persian text dealing with Indian medicine and pharmacology were composed in India.

The early Muslim conquerors and people brought into India, a system of new medical doctrine associated with Hippocrates, Averroes,

Galen, Avicenna and other physicians of different regions which called Islamic or Unani or Greco-Arabian medicine. The earlier Indian medical enrichment was also present in the Unani medicine because during the Abbasid Period the intellectual exchange of idea of medicine between India and West Asia began with the active support of Bermicide Vajirs.¹ They not only invited Hindustani vaid to Baghdad but also collected Indian plants and herbs and made translations of famous Indian medical books.² But Arabs were largely influenced by Greek medical system, the influence of Indian medical system on them was confined to therapeutic and medicaments only .

In fact, Greco-Arabian medicine and Indian system of medicine both followed the humoral theory of health. Their fundamental structure was fortified with postulate of four or five elements, three or four humours and the process of the temperament of the constitution of the human body. But there are many fundamental and essential differences between the Greco-Arabian and Indian system of medicine. The Indian theory start with Panchmahabhutas or five elements, viz prithvi (earth), ap (water), teza (fire), vayu (air) and akasa, the Greco-Arabian theory starts with the four elements, air, earth, fire and water. The Indian tridosas vatta, pitta and cough form a triad while the humours described in Unani medicine viz, blood, phlegm, yellow bile and black bile form a tetrad. Blood is an important humour in the Unani theory while it is considered a dhatu in the Indian theory. Besides there is fundamental difference in the conception of production of diseases by the humours. In Indian medical theory, the dosas by themselves can not produce any disease. After they are disordered, they vitiate the dhatus of the constituents of the body and produce disease in them. In the Unani system, it is the imbalance of humours that constitutes disease. Besides Indian Ayurvedic remedies are predominantly herbal while Unani practitioners use more of metal compounds and minerals.

While the Indian medical system did not fully succeed in influencing Greco-Arabian medical system of the Abbasid period it succeeded in later centuries in influencing the Persian medical works produced in India.

Unani Tibb received encouragement and state patronage during the Delhi Sultanate period. So many emigrants Muslim physicians - Arabs, Turks, Afghans and others, familiars with the Unani system of medicine came to India and settled in the different regions. But soon rulers and practicers felt that Unani system was not best suited for the people of India, where the climate and vegetation were different from the Greece or Arabia, so they started incorporation of Indian healing system with Unani medical system, which began to change the content of medical literature.

The first traceable book on Unani medicine written in India was a Persian translation of 'Kitab-ul-Saidana'³ of Al-Beruni. In the first part of this book Al-Beruni discusses the Saidana and Saidala and states that their origin is from the Indian word Chandan, the aromatic tree of India. In this rare treatise he also mentioned the difference between Islamic and Indian medical system.⁴ The translator Abu Bakr Bin ali al

Kasmi did not simply translate the Arabic terms into Persian but also added fresh information regarding the location and particulars of certain materials as well as the view of the authorities about their nature. He mentioned many Indian products and their medicinal use which are not found in the original Arabic text.⁵ Indian drug lexicon is also used in the Tibb-i-Firuzshahi, a work by Shah Quli on the treating of birds composed during the period of Ghiyasudin Balwan.

The incorporation of Indian medicine in Indo-Persian works started in Medieval India from the 14th Century onward under the Sultans of Delhi, Gujarat and Malwa. It seems that practical needs, such as finding local substitute of drugs described in Unani pharmacopoeia played an important role. During the Delhi Sultanate period Indian pharmacology and its lexicon were incorporated in several Indo persian text dealing with Avicennian medicine. For instance, Zia Muhammad Masood Rashid Zengi, a noted physician of Muhammad bin Tughluq's period wrote 'Majmua-i-Ziea', in which he added a separate chapter on the Indian system of medicine.⁶ A manual of pathology and treatment from Indian medical lexicon were also used in another treatise 'Rahat al-Insan' composed by Hakim Iliyas Bin Sahab during the period of Firoz Shah Tughluq.⁷

In the Sultunate of Gujarat the court physician of Muzaffar Shah-I, Sahab-bin Ahd-ul-Karim Nagori composed two medical books, the 'Tibb-i-Shihabi', in verse and 'Shifa-al-Khani' in prose. Tibb-i-Shihabi, which deals humoral pathology combining the view of Muslim and Hindu physicians. The second book Tibb-i-Shifakhani contains a list of tested prescription of Indian medicine available everywhere in India. It also mentioned the Hind equivalents of Arabic and Persian terms.⁹

Another important work produced in Gujarat during the period of Mahmud Begra is Tibb-i-Shifa Mahmud Shahi by Ali bin Muhammad bin Ismail Usaili. It was the Persian translation of Ayurvedic classic 'Astanghritya'. This was the first Persian translation of any Ayurvedic book.¹⁰

Of the Persian book written in the attempt to synthesize Greco-Arabian and Indian medicine, the most important is 'Madan-ul-Shifa Sikander Shahi.' This book is a general manual of various medical topics, which begins with the list of Sanskrit sources used an introduction discussing the Prophet Muhammad's tradition praising the knowledge of medicine.¹¹ Perhaps the reference to the Prophetic tradition act as a powerful symbolic means for the adoption of the knowledge of the Mulsim physician to local condition.

In this book the terms and names of the Indian herbs, plants and medicines were translated into Persian and if the equivalent of the term was not found in Persian, it was written in its original name in Persian scripts.¹² After the compilation of Madan-ul-Shifa, famous historian Ferishta, composed his book Dasturu'l Attiba' or 'Ikhtiyarat-i-Quasmi' dealing with the Indian system of medicine.¹³

This trend continued in the period of Mughals where Hakim Yusuf bin Muhammad bin Yusuf wrote with equal confidence on both Unani of Ayurvedic during the reign of Babar and Humayun. He collected

all the available material from the Indian system of medicine regarding hygiene, general principles, diseases, diagnosis and treatment and composed memorable works in prose and verse. On the basis of his experience with Unani medicine and knowledge of Ayurveda, he was one of the pioneer Persian scholars to write medical books integrating the two system of medicine.¹⁴ He was the author of a dozen books on medicine, including Riaz al Advia, Fawaid al-Akhyar, Ilaj-ul-Amraz, Dalail Nabz, Dalail Bol, Sitta-a-Zaruria, Zama al Fawaid etc. These books were done between 1500 to 1540 A.D.. Many of his books have survived because some of these were published by Nawal Kishor Press, Kanpur in 1886 under the title Tibb-i-Yusufi.¹⁵

During the time of Akbar Unani system of medicine spread throughout the greater part of India and many eminent Hakim and scholars migrated to his court from Persia and other central Asian countries. Abul Fazal gives a list of 29 Physicians (Hindu and Muslims) who were paid out of the royal treasury.¹⁶ The Tabaqat-i-Akbari mentions a few other Hindu doctors (Vaid) of distinction who lived during Akbar's reign, among them were Bhairan, Birju and Chandra Sen.¹⁷ Among all the Physicians Abul Fath Gilani was the greatest. He wrote a voluminous masterly commentary on Qanun of Ibn Sina entitled "Sharah-i-Qanun-i-Ibn Sina". This compendium is considered to be one of the most authentic source of Greco-Arabian medical literature produced in India. This text follows the pattern of the personate medical literature of Galen, Avicenna, Al-Jurjani as well as Ayurvedic medical tradition of India.

During the Mughal period Persian writers on Avicennian medicine included in their books important descriptions of the Indian medicine. The two main examples were the Aman Ullah Khan and Nur-al-din-Shiraji. During the period of Shah Jahan famous physician Amanullah Khan composed medical treatise Ganj Badaward and Dastur-ul-Hind. Ganj-i-Badaward known as Qarabadin Khanzamani is a huge compendium of simple and compound drugs which presents the pharmacological techniques, practices and experience of the Unani physicians, together with those of the Indian physicians.¹⁸ Dastur-ul-Hind is another important medical compilation by Hakim Amanullah Khan.¹⁹ It is a Persian translation of Madan Vinod, an Ayurvedic manuscript of hygiene composed in A.D. 1375 by king Madanpala, By composing this medical work the author made an effort to present Vedic medicine through the court language Persian.

Nuraldin Muhammad Shirazi was another, Hakim who included Indian medicine in his books. He wrote two books Alfaz-al-adwiyah and Ilazat-i-Dara Shikohi in Persian. The former he wrote for Shah Jahan and later for his son Dara Shikoh. Alfaz-ul-Adwiyah is a vocabulary of drugs which reveals that Shirazi collected drugs from local Ayurvedic pharmacopoeias and combined them with Persia. He listed about 1441 items in the Arabic, Persian and Hindawi language. Nural din's medica caters to the humoral concept of health, qualified by natures and element that was central both to Unani and Ayurveda²⁰. But the Tibb-i-Dara Shikohi by Nur al din Shirazi is the biggest Persian medical encyclopedia written in India and stands as a leading efforts aiming

to describe in same book the knowledge of the Unani and Indian physicians.²¹ This book embodies the collective medical knowledge of Greek, Arab and Indian physician together with the achievement and activities of the physicians during the period of Akbar, Jahangir and Shahjahan. Treatment of disease by controlling the respiration in specific manner, are also described.²² In fact this manuscript reveals the theory and practice of Islamic and Indian medical science of seventeenth century in India.

The tradition of writing medical encyclopedias continued in the period of Aurangzeb. Most of the standard works on Unani Tibb were composed and translated into Persian. In this period of imperial crisis Muhammad Akbar Shah Arzani produced several works : Tibb-i-Akbar, Mizan-i-Tibb, Tibb-i-Nabavi, Qarabadin-i-Qadari, Mujarrabat-i-Akbari, Hudud ul Amraz and Tibb-i-Hindi. Among them more famous ones are the Tibb-i-Akbari or Akbar's medicine and the Mizan-i-Tibb or the scales of medicine. Both follow the tradition of Shirazi in borrowing freely from local influences in their choice of drugs and treatments.²⁴ Tibb-i-Akbari covers a wide canvass in its twenty seven chapters, which deals with the history of Unani, symptomatic treatment of local and general diseases.²⁵ While Mizan-i-Tibb translates the Persian scribes into Hindi, using Devanagari to make it easy for the lay reader to recognised the medicines recommended.²⁶ The Tibb-i-Hindi specially deals with the drugs of Indian system of medicine.²⁷ The Tibb-i-Awarang Shahi by Darwesh Muhammad dedicated to Aurangzeb, is a work divided into seven chapters covering in order : the principle of Ayurveda, anatomy, pathology and therapeutics, calcinations of metals, purgation, compound and simple drugs.²⁸ A Persian translation of an Ayurvedic work Nidan by Abu Fath Chisti was composed during the region of Aurangzeb in the name of Mirat-al-Hukama-i-Aurangshahi.

Several treatise on the Indian pharmacopoeia were also composed during the later Mughal period. Such as the Mualajat-i-Nabawi by Gulam Imam, the Anis al Atibba by Nafi al Siddiqui, and Yusurul Ilaj by Hakim Hidayatullah²⁹. An outstanding physician of this period, Mirza Alvi Khan wrote seven text of which "Jami-ul-Jawani" is a master piece embodying all the branches of medicine then known to India.³⁰ Another great physician of this period was Sharif Khan who wrote ten text among them Ilaj-ul-Amraz, Tuhfa-i-Sharifi, Ujala-i-Nafia are important. His book Talif-i-Sharifi was the most renowned Persian dictionary of Ayurvedic materia medica. His work almost last efforts to popularizing Unani drugs in India and finding equivalent suitable Hindi terminology for them acceptable to the masses.³¹

During this period religious and magical remedies of Indian origin were mentioned in some Persian text. For instance, the 15th century mystical treatise Lataif-I-Ashrafi by the Sufi Ashraf Jahangir Semnani includes Sanskrit mantra against diseases. Both the work on Indian pharmacopoeia by Amanullah Khan and by Sharif Khan mention the anti -demoniac; properties of several substances.

The incorporation of Indian medicine received encouragement and found expression in the

working of hospitals and dispensaries, where Indian vaidyas and Muslim Hakims work together. Abul Fazal and Nizamuddin Ahmad mentioned that a considerable number of Hindu Vaidyas and Muslim Hakims were working in the state hospitals.³² We have information about the Mughal state hospitals of Aurangabad Surat and Ahmadabad where Unani as well as Ayurvedic physician and surgeon were appointed.³³ They included several compound medical preparation and Dhatu, Bhasmes (Calyxes) in Unani system. They also enriched Unani medicine with other indigenous herbs.

During the period under review not only Muslim Hakims were involved in Persian text production but also many Hindu scholars began to study Persian and composed medical and scientific work in this language, some also on the sciences of Avicennian tradition. Hindu began to write Persian scientific works especially from the second half of 17th century. Some important examples are the Rahat al-Faras, on the horse and his treatment by Anand Ram Mukhalis, Mualajat-i-Hindi by Shyakh Haider Misri. A Hindu vaidya Lala Chandra Pandit composed a Persian treatise Kuhlu't Absara dealing with ophthalmology, preparation of collegiums and ointment etc. It is also possible that the early 16th century Madan-al-Shifa-i-Sikander Shahi had been composed with the help of Hindu scholars. The biographies of these Hindu physicians versed in Persian were included in a few collections of physicians composed in Urdu during the colonial period.

Another thing worth nothing is the reciprocal contribution of Unani medicine to Indian system of medicine. Bhav Misra described several drugs in Bhav Prakash, which were borrowed and assimilated from Unani system of medicine.

Some of them are as follows
 Henbane (Ajwain Kharasani),
 China root
 Rubik and
 Opium.³⁴

During the 18th century Mahadev Bhatta composed two Sanskrit text Hikmat Prakash and Hikmat Paradipa which refers to the Unani system of medicine and use numerous Arabic and Persian term.³⁵ Important contribution to Unani Tibb to Indian system of medicine were in the field of diagnosis, the examination of pulse, the therapeutics, the use of opium and other metallic compound in the field of public health and the introduction of concept of hospitals.

Aim of the Study

The present paper intends to focus on some of the main features of Unani and Indian system of medicine on one hand, while on the other the contribution of Persian scholars and their text in the advancement of healing system for the People of India

Conclusion

Thus we find with the active support of rulers and scholars medical men of India have written a number of Persian books on Unani system which incorporated in its materia medica many of drugs available in India because those used by emigrating physicians from Central Asian countries were not

available here. Further more they also observed and incorporated in the medicine the rules of health and hygiene. In course of time Unani medicine has embraced Indian ideas, pathology, therapy and pharmacy and adapted itself to Indian conditions. There gradually appeared a hybrid of Unani and Indian system of medicine which differ in theory but in practice both traditions seems to have interacted and borrowed freely from each other. In the 17th and 18th centuries when Unani medicine almost died in Iran, it was kept alive by the Hakims of Delhi and Lucknow. Unani Tibb of India is the active representative of a great historical tradition and by now is as much cultural heritage of India as Ayurveda and uncountable people are being treated and relieved of their ailment by this system.

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