The Controversy between the Kavirajas and Allopaths in the Context of Colonial Bengal

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Abstract: Ayurveda and allopathy are two most popular and important systems of prevailing medicine in this country. The people of this country have had been following these two systems through the ages. During the nineteenth century, the adherents of these systems indulged themselves in a unique controversy owing to the efficacy and effectives of their systems. They became very desperate to uphold their own system. Their arguments and counter arguments ushered in a new chapter in the history of medicine of our country. Later on, this trend started to demoralize the traditional spirit of pluralism in medicine. This paper seeks to examine the veracity of their remarks in the historical perspectives.

Key words: traditional medicine, cosmopolitan medicine, pluralism in medicine, ayurveda, allopathy, Mecaulay minute, anglicist and orientalist controversy, collaboration.

Introduction: Since the beginning of the nineteenth century to the present day a controversy continues on the question of the validity of ayurveda in contrast with allopathy in respect of their theory, practice and popularity. Though this controversy emerged long before the said period, it got official recognition since the time of the submission of 'Adam's Report' before the Grant Committee which was appointed by Lord Bentinck in 1829. Rev. William Adam, in his report, expressed the opinion that ayurveda was innately inferior and unscientific and based on irrational and empirical cure. Not only Rev. Adam, but many other followers and practitioners of allopathy

also, held the opinion that ayurveda had already lost its popularity due to the introduction of western medicine (allopathy) in India, because, allopathy was more scientific and more sophisticated mode of treatment. So it would be better to follow allopathy giving up this ancient mode of traditional medicine. The vaids and kavirajas and the adherents of ayurveda also, on the other hand, did not remain mute opponents. They also became very active to defend their system. They emphatically asserted that ayurveda was not only a complete compact and sophisticated mode of scientific treatment, it was a science of life and the encyclopaedia of medical and ethical knowledge. Therefore, it had succeeded to retain its popularity through the ages. Not only so, they also maintained that allopathy was not as scientific as its adherents and practitioners claimed unscrupulously, because it quite often produced some dangerous side-effects. So people should strictly follow ayurved athan allopathy. These arguments and counter arguments gave rise to a peculiar professional controversy and it has been still going on. The thrust of this paper is to deal with this debate or controversy and to examine the veracity of their remarks in its historical perspectives.

It is believed that ayurveda is a complete, compact and integrated medical system. It has been used in this country about three thousand years ago. Ayurveda means the science of life in terms of both prevention and cure and even attaining diseases free long life. Ayurveda is a generalized name of eight fold medical system generally known as astangaayurveda (kayatantra, salyatantra, salakyatantra, bhutatantra, agadatantra, rasatantra, bajikaranatantra and koumarbhrityatantra). It traces its origin to the atharvaveda. According to Hindu popular belief, it is composed by Lord Brahma, the creator of the world and codified and clarified by Dhanvantari, deitified as the God of medicine. It was developed by Bhardwaj, Atreya, Charaka, Susruta, Bagbhatta, Madhabakara, et.al and disseminated by a pool of Kavirajas across the country and the neighbouring states of India in the ancient period. But its popularity, to some extent, declined during the Muslim rule, especially, by the time of the Delhi Sultanate. It was able to regain its popularity during the rule of the Mughal

emperors. Some people believe that the renaissance of ayurveda was started since the rule of Great Akbar. The heyday of ayurveda lasted upto 1835. Since then, ayurveda had to face a serious threat from the protagonists and adherents of allopathy and the colonial Government also declared the end of ayurvedic medical classes in all native medical institutions in 07.03.1835. So the vaids and kavirajas had to face a unique phase of opposition and hostility till the end of the Company rule. Lord Bentinck wrote in a letter to the Secretary of The GCPI (General Committee of Public Instruction),

the medical class of the Sanskrit College of Calcutta and the medical class of the Madrassa have been abolished from the 1st February and a new institution has been ...for communicating medical education to the native youths through the medium of English language.¹

It is very interesting to note that there was no official designation of the Hippocratic and Galenic system of medicine. It was then called as 'western medicine', 'European medicine', 'English medicine' etc. It was Sir John Samual Hahnemann who first designated it as 'allopathy'. Allo means adverse and Pathy means treatment i.e. adverse mode of treatment. In fact, allopathy, at earlier days, was not at all developed and sophisticated as we can see today. Some epoch-making discoveries in the sphere of medicine and medical technology had made this system more developed and more sophisticated, especially, the discoveries during the nineteenth century i.e. the discovery of stethoscope (1819), Choloroform (1847), epidermology (1847), X-ray (1895), germ theory (1860) etc. The standardization and experimental investigating process is still going on in a very satisfactory manner.

In fact, allopathy is a second foreign system of medicine after unani, to be introduced in this country. It was first introduced in this country by the Portuguese, and the English gave it a proper and concrete foundation in the soil of this land. Dr. Gabrial Boughton and then Dr. Hamiltan proved its efficacy and effectiveness in the courts of some Indian rulers and chieftains. So it gradually became familiar to the people of this country. Then the British East India Company offered it the status of state medicine and laid it on a firm footing in 1835. This significant delay may be seemed

unnecessary but there were some practical reasons behind the scene,

a) The Company, by that time, was totally ignorant about the nature, topography, climate and atmosphere and more importantly about the nature of diseases and epidemics of this subcontinent.

- b) It was impossible for allopathy to combat the diseases and epidemics of this country.
- c) The Company was not capable enough to import sufficient doctors and surgeons and western drugs and medical components, in this colony.
- d) The Indians were not then fully aware of the efficacy and effectiveness of allopathy.
- e) The major political powers of that time remained undefeated, so it was very difficult for the Company to promote allopathy in the soil of India at that juncture.
- f) The age-long anglicist and orientalist controversy played very vital role in regard to delay in the introduction of allopathy.
- g) The Company was then more commercial than colonial in character.

In course of time (1765-1835), the scenario was totally changed. The Company became more imperial than commercial in nature and character and by then, it started to use western medicine as a tool of imperialism. So the situation was highly conducive for posing direct challenge and threat to all existing systems of indigenous medicines, especially, ayurveda.

In fact, the chapter of controversy and conflict opened in the thirties of the nineteenth century, more accurately, with the placement of Adams Report regarding the practice and prospect of traditional medicine before the Grant Committee. Rev Adam, in his report, expressed the following opinion;

They have not the least semblance of medical knowledge and they in general limit their prescriptions to the simplest vegetable preparations, either preceded or followed by pronouncing of incantations and by sticking a below upon, the body.²

Not only Rev. Adam, but many other critics also, held the kavirajas guilty

for thousands of premature deaths for administering ayurvedic medicine. They, in those cases, advocated allopathy for its efficacy and effectiveness. Samachar Darpan in 1843 wrote that the maltreatments by the vaids and kavirajas had caused many untimely deaths. Therefore, ayurveda was gradually losing its popularity.³ Dr. Mcleod also supported this view. He said that the practice of both kavirajas and hakeems were exceedingly crude and entirely empirical. They were ignorant of anatomy, their pathology was fanciful and their knowledge and power of detecting and discriminating diseases was very limited. In surgery, they were equally ignorant and imperfect.⁴ Dewan Kartikeya Chandra Roy (father of D.L.Roy) observed ayurveda very much defective and unscientific.⁵ Panchanan Neogi in the Prabasi maintained that the knowledge of kavirajas in chemistry was very much limited and that they usually used very costly chemicals in order to cure very ordinary diseases. ⁶ Thus the Calcutta Journal of Medicine pleaded for imposingly official ban on the practice of the vaids and hakeems due to their inherent limitations.⁷

They tried hard to counter these arguments. After the commencement of firing from the Fort William on 28.10.1836, the kavirajas and inherent of ayurveda realized very well that they would have to face another crisis period, which they had faced during the rule of the Delhi Sultante. So they became untied and formed the *Vaidyak Sabha* (kavirajas association) in defense of ayurveda and to protect the practice of the kavirajas. The *Ayurveda Sanjibani*, in reply to the comment made by Dr. Sutherland, commented,

We would like to remind Dr. Sutherland that ayurveda has been enjoying enormous popularity for thousands of years, not due to oriental prejudices and superstitions, but by virtue of its efficacy and medicinal properties.⁸

The *Calcutta Journal of Medicine*, edited by Dr.M.L.Sircar, harshly criticized Dr. Mcleod for his unwarranted and highly derogatory remark against traditional medicine. It also advised Dr. Mcleod to consult the statements of Dr. Eatwell, Dr. Tytler and Dr. O'shaughnessy and many other neutral western scholars and physicians to that context⁹ because Dr. Tytler

had pointed out that when a surgeon had failed to cure any malady, a native practitioner succeeded to cure that at once. Such instances did frequently occur. ¹⁰

If we arrange their arguments against ayurveda in sequence, those appear as follows:

- a) Ayurvedea is very primitive and oldest system of medicines; it needs necessary reformation and rectification.
- b) The knowledge of vaids and kavirajas in anatomy and surgery was very limited.
- c) Ayurveda did not recognise the 'germ theory'.
- d) The chemical properties of various elements were no familiar to the vaids and kavirajas.
- e) As it was very old and back dated, so there was not remedy of some modern diseases like cholera, beriberi, typhoid, malaria etc.
- f) The preservation of public health was completely unknown to the practitioners of ayurveda.

Regarding the treatment of typhoid, malaria, cholera etc., Kj Chandrashekhar claimed in the *Sambad Prabhakar* that though the terminologies of these were different, but their signs and symptoms were almost all the same in both ayurveda and allopathy. If any vaid and kaviraj treated any of these maladies according to the signs and symptoms, the patient must be cured. For example, the symptoms of cholera and bisuchika were the same. Similarly, the symptoms of beriberi and batbalasaka, malaria and bishamajwara or typhoid and sannipatik were almost the same. So they could be cured by any kavirajas or an ayurvedic physician easily. They also suggested to administer *bisuchikakalantak* for cholera, *sudarshan churna* for malaria, *karamcha* (corsia carnadas) for various types of fevers. In regard to anatomy and surgery, the followers of ayurveda were equally assertive. They argued that *Susruta Samhita* of ayurveda was the oldest of all prevalent texts on surgery and its chapter on *abaghersana* (dissection)

was considered as the oldest but perfect and developed mode of dissection of the world. Dr. Roylis, Dr. Breton and many other European doctors highly praised the surgery of ayurveda. Kj. K.L.Bhisagartna wrote in this context,

Susruta's *abagharsana* is now considered by many as the perfect mode of dissection, that the layer of epidermis and dermis could be disclosed and blood vessels with their minute branches could be counted as many as thirty million Susruta still stands as a model of surgery and European surgery has borrowed many things from him and has yet many things to learn.¹³

Similarly, the adherents of ayurveda strongly refuted the complaints regarding the ignorance of the Hindus in medical chemistry. They maintained the Rig Veda, Atharva Veda (Kaushika sutra), Rasaratnakara (Nagarjuna), Rasendra Chintamoni (Ramachandra) Rasaratnasamuchhaya (Bhagbat) and many other texts on chemistry had been written by the savants of India before the advent of the Muslims. The *Tattvabodhini Patrika*, in this context wrote, 'Chemistry was the oldest among all ancient Indian sciences, and Rasachandrika could be regarded as the most authentic text in this discipline. Ancient Indian chemists could extract some metals like gold, zinc, copper, silver and mercury from different compounds through some indigenous processes'. Acharya P.C.Roy also strengthened this view in his most famous work 'A History of Hindu Chemistry'. He mentioned that Charaka spoke of different metals and their application in medicine. Kj Surendranath Das Gupta argued that chemistry (Rasatantra) is an indispensible part of astangaayurveda (eight fold ayurveda)¹⁴. So, the allegation, according to their consideration, was totally absurd and baseless and motivated by acute jealousy.

The 'germ theory' also became a bone of contention between the kavirajas and doctors. The doctors quite strongly claimed that kavirajas were in the dark about the recently invented 'germ theory' which ushered in a new era in the history of contagious diseases. But the kavirajas were not ready to admit this argument at all. They replied that the physicians of those days were quite familiar with this theory. For illustration, they referred to *Vimanasthana* of *Charakasamhita*, where it was introduced as

janapaddhangsha karini vyadhi (epidemic)¹⁵. D.G. Crawford also informed that before the introduction of vaccination, inoculation was in common use in India as a protection of small pox and the people of India usually maintain the principle of segregation in case of small pox, cholera, leprosy etc.¹⁶

After defending ayurveda, they held all out challenge to allopathy. They argued that allopathy was a very complicated system of treatment and vicious for its dangerous side effects. For example, if a patient of blood dysentery would like to consult an allopathic doctor, the doctor would first advise him to examine his stool by a specialist pathologist. Then the patient had to go to a compounder, if the doctor prescribes any injection. But the patient would not have to face such trouble, if he or she wanted to consult any kaviraja. Only some prescribed batika (tablet) or churna (powder) could cure dysentery. Beside, the most important limitation as pointed out by the kavirajas was its dangerous side effects. They also emphatically said, it could provide only some temporary reliefs. Their main target was quinine, one of the best patent drug for malaria. There were a number of periodicals which used to mention frequently about this limitations of allopathy. Anubikshana mentioned that if anybody tried to cure his / her malaria he/ she would not be cured permanently because the fever must relapsed again.¹⁷ A.B.Fry in his Report on Malaria in Bengal informed that the Italian Malaria Commission suggested to ban the use of quinine forever. 18 Similarly, the WHO (World Health Organisation) has been banning regularly some harmful drugs like mexaform, durabolin, decadurabolin, enteroquinol etc. mainly for their dangerous side effects.¹⁹

Besides, these inherent limitations, allopathy became very unfamiliar in our country due to some basic constraints. The followers of ayurveda pointed out following impediments,

- a) Allopathic medicines were very costly and not easily available like ayurvedic drugs.
- b) The fees of doctors were very exorbitant in comparison to the vaids and kavirajas.
- c) The facility of allopathic treatment in the rural area was very limited, but the vaids and kavirajas were easily available in any

- part of this country.
- d) The attitude of allopathic doctors and medical officers was not at all friendly towards the native patients.
- e) In most cases, they used to examine the efficacy and effectiveness of any newly made drug over the native patients.

Here are some references, they placed herein to justify their remarks. The price of one ounce of quinine was one rupee and the value of one pint of sarasperilla was the same, but the monthly salary of a labourer in those days was only two rupee.²⁰ The Indigenous Drug Committee showed a comparative statement for the treatment of serious typhoid, having duration of 26 days by ayurvedic and allopathic methods respectively. The total cost of treatment by allopathic treatment would be 81 rupees while that by ayurvedic medicine would be a little over 15 rupees. ²¹ Pundit Madhusudan Gupta furnished a statistics that only 15 out of 18,000 persons could possess the power of purchasing European medicine during the 1830s.²² At the very outset, while the hospitals and dispensaries used to be controlled by European doctors, nurses and health officers, they used to treat natives like cats and dogs. The Hitabadi informed that in the Calcutta Medical College & Hospital and in the Dufferin Hospital, Indian women were treated worse than cats and dogs, most of the nurses were guilty of maltreatment²³. Bangabasi alleged that doctors were playing with the lives of Indian patients in the Campbell Hospital. They quite often examined new medicines on the native patients. For these reasons, only utterly helpless persons used to undergo Government hospitals and dispensaries.²⁴

Ayurveda, on the other hand, did enjoy much advantage. First, it was closely associated with the climate, culture and convictions of the people of this country. Second, the raw materials of ayurvedic medicine were cheap and easily available. Third, the fees of vaids and kavirajas were very normal and they used to visit patients at their home. Fourth, Aurvedic medicine did not possess any dangerous side effects and fifth, ayurvedic education had been imparted both by institutionally and hereditarily.

It is very interesting to note that in spite of all controversy and debate, some kavirajas and doctors tried to reconcile their differences for the good

of the people. It was noticed for the firist time in the joint venture of Kj Kaliprasanna Sen and Dr. Radha Govinda Kar. The outcome was the tract entitled *Kaviraj-Daktar Sambad*, published in 1892. In that tract, both professionals tried to know other system of treatment and they depicted that knowledge in that tract in the form of conversation and dialogue. Dr. Harinath Ghosh, Dr. Nilratan Sarkar, Kj Bijoy Ratna Sen, Kj Gananath Sen, Kj Yaminibhusan Roy were also firm supporters of this attempt at reconciliation and combination between the western medicine and traditional medicine in the interest of medical science. Dr. Sarkar once made the remark that if it (ayruveda) could be included within allopathy, allopathy would be highly benifited. Kj Yaminibhusan Roy and Kj Kaviraj Ganannath Sen, for the first time, prepared a combined syllabus consisting ayurveda and allopathy for the students of the Astanga Ayurvedic College and Hospital. But it gave birth of *suddhapanthi* and *misra panthi* controversy among the followers of ayurveda.

However, the controversy and conflict between the adherents of ayurveda and allopathy does not come to an end. Moreover, it assumes a unique character in modern times. Recently, a section of doctors and Western scholars have expressed their opinion that all regional medicines including ayurveda should be transformed into cosmopolitan medicine by absorbing better features of western medicine, because western medicine is superior to other systems. ²⁸ In fact, this view strongly differs from the ideal of pluralism in medicine. Naturally, the followers of traditional medicine strongly oppose this view. They are of the opinion that ayurveda is a complete compact and highly sophisticated medicine. It has separate identity. It has had unique record of treatment and cure. It is a storehouse of medical knowledge since four thousand years. ²⁹ This invaluable knowledge cannot be brushed aside. Its limitations must be rectified with help of modern medical science and technology but it should not be transformed into any system of prevailing medicine. ³⁰

In fine, it may be said that every system of treatment has some innate flaws and limitations. Neither allopathy nor ayurveda is free from all flaws. If the moral ethics of these systems are deeply concerned with human welfare, it would be better to have collaboration rather than competition between these two systems of medicine. It should be better to keep open the advantage of multiple choice for the patients of this country so that if one fails, they can try other. This trend is still going on. This paper ultimately leads to this conclusion.

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