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**WRITTEN AND PRINTED SOURCES
FOR THE STUDY OF
MONGOLIAN MEDICINE**

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Written and Printed Sources for the Study of Mongolian Medicine

Charles R. Bawden

The present paper must begin with a disclaimer. The author has no particular knowledge either of Mongolian medicine or of the Tibetan system upon which it relies so heavily. What will be said will of necessity be incomplete and subject to correction and will be literary rather than scientific in its nature.

A survey of sources can most conveniently begin with a survey of library holdings, so as to establish the number of items held in different collections, and, as far as possible, the type of book concerned. For this purpose, ten libraries or groups of libraries have been selected, on the mechanical basis of the accessibility of their catalogues, and they have been arranged in diminishing order of the size of the holdings. The figures themselves are not entirely accurate. Reasonable accuracy is attainable with a classified catalogue, assuming the accuracy of the catalogue itself, but cannot be guaranteed with an unclassified catalogue, though the discrepancies are likely to be small, and should not affect the general picture. The catalogue statistics selected are as follows :

1. All-China, 75 titles.
2. Ulan Bator, State Library, Mongolian People's Republic :
 - (i) as listed by Jambaa, 1959, 46 items, all said to be manuscript.
 - (ii) as listed in the 1937 catalogue of the library, 40 items of all types. There must be a considerable overlap, which has not been checked.
3. Copenhagen, Royal Library, 26 items.
4. Stockholm, Hedin Collection, 8 or 9 items.
5. Tokyo, Toyo Bunko, 8 items.

6. All-Germany, 7 items.
7. Chicago, Laufer Collections, 6 items.
8. Washington, Library of Congress, 5 items.
9. London, Bible Society, 1 item.
10. Dublin, Chester Beatty Library, nil.¹

These figures are not strictly comparable. Firstly, it is obvious that some catalogues, the Chinese and German ones, cover national holdings, while the other lists refer to individual collections. Secondly, the Chinese catalogue is a list of titles, indicating those libraries in which the item concerned is to be found, while other catalogues count each item individually. Hence, the total number of books in the Chinese catalogue is a good deal higher than 75. The section on medicine in the Copenhagen catalogue, too, contains one or two items which might better have been entered in the sections on divination or astrology. These discrepancies, though, do not detract from the overall impressions which can be gained from the figures. Firstly, the number of works on traditional medicine said to be preserved in public collections everywhere seems surprisingly small. Seventy-five titles for the whole of China, or at least for the 60 major collections taken into account, look rather a low total.

The same may be said of the 40 or 46 titles listed for the State Library of Mongolia. Against this, though, we know from other publications that there are many more items extant, for example in Mongolia, than are listed for the State Library. Secondly, and with more certainty, one can see that the holdings in China and Mongolia far outweigh those in western libraries. Only the Royal Library, Copenhagen, reaches double figures, and it would not have done so if the books had been numbered on the same principle as is used in the Chinese catalogue. Something will be said in the present paper about divination and astrology as applied to medical matters, but no attempt has been made to give figures for holdings in these categories, partly because what will be termed here "magic" processes are not concerned exclusively with medicine, but can be applied to all sorts of situations,

of which sickness is only one. Hence sections on medicine may lurk unrecognized in handbooks whose titles do not fully disclose their contents.

The actual contents of the libraries display a similar contrast. Western libraries are, on the whole, less rich and varied in their range than the oriental ones. Their holdings tend to include a disproportionate number of copies or parts — less often of the whole — of such works as the Mongolian versions of the Tibetan classic of medicine, known usually in Tibetan as the *rGyud-bṣi*, and in Mongolian as the *Dörben Ündüsün*, the “Four Tantras”, and of its sequel, the book generally known, even in Mongolian, as the *lHan-t’abs*, the addition or appendix. For example, all five items counted in the Library of Congress belong to this category, as does the single work owned by the Bible Society, a manuscript copy of the *lHan-t’abs* made in Siberia early in the nineteenth century for the English missionary, Edward Stallybrass. The one exception to this general impression is the Royal Library. The late Professor Kaare Gronbech, who collected the bulk of the books concerned, made a deliberate effort to collect less well known books in all subjects, not only medicine, in order to avoid duplicating existing western collections, in which blockprints of a religious nature tended to predominate. As a result, the Copenhagen collection is richer in such categories as medicine, divination and astrology than it might otherwise have been.

Without the advantage of personal inspection, one can get only a very superficial impression of the nature and quality of the oriental holdings. The Chinese catalogue is terse. A typical entry for a medical work will consist of the Mongolian title, a Chinese translation of the same, followed by an indication of the physical nature of the book, whether manuscript or blockprint, etc., and of the libraries where copies are to be found. It is usually silent on such basic matters as the date of composition or edition, size of paper, number of pages, and whether or not a translation and is so from what language. The Ulan Bator catalogues are less reticent, but are still not so informative as to contents as is the Copenhagen catalogue.

In recent years, few publications from either Inner Mongolia or the Mongolian People's Republic on the subject of the history of medicine have been seen, though the subject is by no means neglected. It appears from the annual publication plan issued by the authorities in the MPR that monographs are planned from time to time, and possibly actually published. The difficulty is to get hold of them. The publication plan for 1984, for example, announced a book entitled "Some problems of the theory and practice of eastern medicine"² which might prove of interest, since it is said to deal with the writings of Indian, Tibetan and Mongolian doctors amongst other themes. It should contain also the names of some 2000 drugs of plant, animal and mineral origin in Tibetan, Mongolian and Russian. It is, in fact, in the field of herbals that more publications have reached the west. Handbooks known to me include :

1. "Terminology of some medicinal plants used in Mongolian medicine"³
2. "Some medicinal plants of Mongolia"⁴
3. "Let us make wide use of local medicinal plants in veterinary practice"⁵

Handbooks of poisonous plants perhaps form a complement to herbals. The two following titles have been seen :

1. "Poisonous plants of Mongolia"⁶
2. "Poisonous plants"⁷

Not seen so far is an illustrated herbal entitled "Medicinal plants of Mongolia".⁸ Finally, an interesting semi-popular handbook containing much traditional lore is "medicines of animal origin used in popular medicine".⁹

One brief sketch of the history of Mongolian medicine which is accessible is a paper presented by Xaidav and Tserenchimed to the UNESCO symposium held in Ulan Bator on the subject of the role of the nomadic peoples in the civilisation of Central Asia, and published, in Russian, in the proceedings of the symposium.¹⁰ Amongst the novel facts presented in this paper is the

information that as a result of research carried out over the ten years up to 1974 by the Institute of Biology of the Mongolian Academy of Sciences, some 200 treatises relating to the history of medicine in Mongolia had become known to the authors, the majority of them, some 130, being handbooks of prescriptions.

Xaidav and Tserenchimed divide the history of Mongolian medicine into the four following periods :

1. Period of folk medicine
2. Period of penetration of oriental medicine
3. Period of laying the foundations of Mongolian medicine
4. Period of development of modern scientific medicine.

This is a fairly rough and ready periodization, since progress does not go in a straight line, but if it is acceptable for the purposes of this paper, then the third period is of particular interest. This period begins around the end of the 16th century, though Mongols had become acquainted with the Tibetan and other systems of medicine much earlier, during the time of the Mongol empire. It was, though, after the penetration of Buddhism into Mongolia, which began in the last quarter of the 16th century, that Tibetan medicine really took hold, and became the basis of Mongolian theory and practice.

The fundamental text was the "Four Tantras". It is not certain when this book was translated into Mongolian. W.A. Unkrig, in his preface to Fr. Korvin-Krasinski's monograph on Tibetan medicine, states that it was translated at the beginning of the 14th century by the scholar Choiji-Odser.¹¹ His authority for this may have been his Lama-doctor teacher Badmayev.

Unkrig's suggestion has been repeated subsequently, and has been taken up by the two Mongolian authors, but the standard life of Choiji-Odser by D. Tserensodnom, does not find the evidence for it wholly convincing.¹² However, it is certain that the book was translated more than once in and after the 17th century, and it appeared in both Mongol and West Mongol or Oirat, and circulated in both manuscript and printed form. Individual chap-

ters, especially that on the pulse, seem to have circulated separately.¹³

It is rather unrewarding at present to try to piece together the written evidence for the development, and, perhaps, the subsequent decline of classical medicine in Mongolia during the Manchu dynasty, since the available material is so scanty. References to doctor-authors and books can be found in Mongolian publications, though the books themselves are not easily accessible, if at all. However, it is a fact that the years following about 1600 saw a great deal of translation of books of all sorts from Tibetan into Mongolian, including works on medicine, and the compilation of works in both languages by Mongolian doctors. Medical schools grew up in lamaseries. Xaidav and Tserenchimed report that the first lamaist medical school in Outer Mongolia was founded in present-day Bayanxongor province by a lama named Luvsandanzan Jantsan, but they do not give a date. The founder himself wrote a number of medical works which, to judge by the quoted titles, were probably in Tibetan. The lamasery had a small printery which produced, amongst other items, an edition of the "Four Tantras" — again, it is not clear in which language. The two authors go on to mention other medical schools in Outer Mongolian lamaseries, and other celebrated lama-doctors of the 18th and 19th centuries. These include the 18th century polymath Ishbaljir, known as Sumpa khanpo. Ishbaljir happens also to have been the author of a little handbook of scapulimancy, or divination from the observation of the scorched shoulder blade of a sheep. Scapulimancy was practised in Mongolia in pre-Buddhist times, and Ishbaljir adapted this superstitious rite to accord with Buddhist thinking. His booklet had a wide circulation. There is a copy in Copenhagen, which was probably in use in Inner Mongolia as late as the 1930's. This is in Mongol only. Another copy, seen in private possession in Ulan Bator, is bilingual.¹⁴

Forecasts from scapulimancy relate to a range of predicaments, not only to sickness, and though they do embrace sickness, there is no medical content as such. One finds mainly such pronouncements as, 'If a figure appears from the location of the

Nose meeting this figure, there will be help from medicine. Good.' 'If the Crupper is straight, you will find a doctor should you look for one, and he will be of assistance.' 'Though there may be spells and evil influences from others, there will be assistance from *gürüm* (religious rites) and medicine, and so fear will be absent' and so on. That Sumpa khanpo should have entertained such ideas as there is an interesting comment on the lamaist approach to both medicine and the latent opposition from surviving folk-religious beliefs at the time. When editing part of this text some years ago, I found it difficult to make out what he meant by his apology for compiling a book which might appear to confer validity upon a doubtful practice. As far as I could understand him, his attitude was that, while scapulimancy was illusory as to its relation to absolute truth, it only shared thereby in the illusoriness of all conditional truth.

The two authors mention other doctor-authors. One of the more celebrated seems to have been a certain Dandar, active around 1900, and the author of several major works. Another name of importance is that of the Inner Mongolian Lama Ishidanzanwangjil, who is best known to Mongolists as a satirical poet, but who was also a doctor of note during the second half of the last century. He is credited with the composition of four treatises. Some of his works survive, in both Inner Mongolia and the MPR.

These scraps of knowledge could be supplemented, but they suggest how incomplete the accessible documentation is in the western world, and to what an extent we are dependent upon the publications of colleagues in Mongolia and China. To my own knowledge, only one more or less comprehensive handbook dealing with the treatment of sickness, and ascribed to a named author, is to be found in a western European library. This book is in Copenhagen and is entitled, in English translation: "The method of producing vigour, from the instructions and sealed pronouncements of the Doctor Darmo."¹⁶ It is probably the same as a work mentioned in the preface to Korvin Krasinski's book.¹⁷ The book comprises a number of chapters devoted to different

conditions and groups of conditions, and remains unedited. The combination of linguistic and technical skills which would be requisite to analyse the book present a considerable obstacle.

In theory, Mongolian doctors were the heirs to the best which the Tibetan tradition could offer, reinforced by ideas, practices and drugs imported from China. The China drug trade was in fact very important to the Mongols during the Manchu dynasty. Amongst the books in Ulan Bator are lists of the medicines held by certain drug shops in Peking. These lists are so far unpublished, and we have only the relevant catalogue entires.¹⁸ Again, amongst the books in Copenhagen is a list of drugs, printed in Tibetan and Chinese with the Chinese names figured in Mongolian script, composed in the 18th century and intended, partly, to help Mongolian purchasers to avoid being cheated.¹⁹ In practice, though, these high standards of training and practice were not always attained, but evidence for decline, if such was the case, is to be found, as far as western readers are concerned, mainly in missionary reports rather than in native sources, and will not be dealt with further here.²⁰

At a level below the directions for diagnosis, treatment and prognosis of the "Four Tantras", we find popular handbooks of remedies in small numbers in western libraries and in private hands. Oriental holdings are much larger. It would be instructive to be able to compare these with the classical system, and try to see whether they represent a decline from that system, or a different scheme of things altogether. Those such books which I have seen are rather carelessly written, which complicates the understanding of what are already difficult texts. A recent example has been presented by Dr. Caroline Humphrey in an article entitled "A Fragmentary Text of Curative Magic".²¹ The Mongol original is entitled *Dom-un bičig*, and it is interesting to observe, in view of what has just been said about the standard of copying, that the writer even got the title wrong and had to correct it. Not every problem in this text could be solved, but enough of it is clear enough to give a good idea of what such books contain. Another example, probably typical, which I shall quote at some

length is a short manuscript which I saw in the Bibliothèque Nationale, Paris, many years ago, and which I copied out as best I could. This book is entitled *Dom kemegdekü orusiba*, a title which one might perhaps translate as 'Herein is Leechcraft'. The Mongolian term *dom* has a range of meanings, from popular medicine or popular cure to magic ritual to effect a cure. Thus, in the Paris manuscript, as in Dr. Humphrey's book, the recommended *dom* are what I see as the application of natural substances, but one can find the word used also in handbooks of magic, which I shall look at, to describe substitute rituals and other practises of a supernatural nature. In fact, vocabulary in handbooks of this sort is inexact. *Dom* can be replaced by *tusa* meaning 'help' and even by the word *nom*, which normally means a Buddhist religious book, but can also, by extension, refer to a substitute ritual.

The Paris manuscript is not, then, a handbook of magic, but contains everyday, folk-remedies for common-place conditions. It is short, comprising only five sheets, and it seems as if it might have been the vade-mecum of a rough and ready quack. There is nothing in the way of diagnosis. What is treated is, in each case, a single symptom, which is stated in bald terms, and for which an equally simple remedy is prescribed. There is no observable order in the entires, though women's complaints tend to form a group. One entry is repeated. The remedies may or may not have proved effective, though some, I think, may have been actually harmful. What their appeal was one can only guess at. The disgusting nature of some may have been an element, and occasionally one may perhaps glimpse sympathetic magic at work. The following extracts are typical :

If the throat is swollen and the voice hoarse, boil down some large (lit. ox) beans and drink, and it will get better.

If one cannot pass water, boil down corn stalks and drink, and it will get better.

In case of continuing bloody diarrhoea, boil down red bean-flour and drink, and it will get better.

If a woman's periods flow excessively, burn the nest of a wren and drink down the ashes with three drams of spirits, and it will get better.

If the sight of the eyes is dulled, drip human milk on to them each morning, and the sight will return.

If someone's eyes go dark, and he loses his sight, pick out the eyes of a crow and prick these with a needle above that person's eyes, and drip it in, and the sight will be restored.

If anthrax breaks out, burn the bones of a cat and smear this on, and it will get better. (The point here may be that sympathetic magic may be intended. The Mongol term which I translate anthrax means, literally, mouse ulcers.²² The connection is partly strengthened by comparison with Dr. Humphrey's text, where the instruction is to cut upon a mouse and apply it to the patient while still warm. Unfortunately the hypothesis is weakened by the alternative suggestion that fox guts will do just as well.)

If one wishes the eyes to be bright, burn the gall of a pig in fire, make pills the size of a millet seed, and rub these into the eyes. Do this three times, lying down, for as long as it takes an incense stick to burn, and the eyes will become as bright as the sun.

If one cannot pass water at all, pound up rock crystal and salt and drink, and it will get better. (There are some startling continuations if this does not work.)

In case of a burn, burn fish bones in fire, pound them up with fat and smear this on, and it will get better.

If the teeth hurt badly, rinse them with the urine of a black ox, and it will get better.

If someone has a nose-bleed, pound up wheat flour in cold water and if they drink it, it will be stanchd. And so on.

Considerable attention is paid to female disorders, though the outcome of the treatments suggested appears questionable. Thus,

should a woman wish to get pregnant (which is how I interpret the Mongol) the roots, stalks and leaves of nettles should be pounded up, dried in the shade, and powdered. She should drink this down with warmed spirits, and conception will ensue. Should her periods dribble, on and off, she should drink a cup of human milk and they will be stanchd. If a woman is about to give birth, but the child will not emerge, then one should burn what I take to be snake-spittle with human hair, divide this into two, and get her to drink it down with spirits, and the child will emerge without fail. But if the child threatens to be born feet first, then one should prick its feet with a needle and smear on a little salt, and it will emerge without delay. It is encouraging to know that an unconscious drunk can be brought round by scraping the hooves of a donkey, boiling down the scrapings in water, and getting him to drink the lot.

I have gone into this much detail in order to bring out what I think characterises these remedies, that is, a haphazard, individual approach to illnesses, lacking diagnosis and prognosis, though relying on the application, internally or externally, of remedies of substance. The remedies may even have proved harmful. It might not matter if one were to plaster one's flesh with one's own hair dirt to remove a thorn, but the same remedy applied in the case of an ulcer on the face might not prove innocuous. But such considerations do not affect my main point, which is that what is prescribed is, in every case, something tangible. There is no element of magic or appeal to the supernatural involved, a distinct difference from the books in the next group I propose to look at, those whose ethos is a religious one. Structurally, too, there is a contrast. The popular remedies may be presented unsystematically, but the handbooks of "magic" are characterised by their internal schematization. The systems, of classification, though, are mechanical and have nothing to do with sickness. Indeed, the same systems are regularly applied to other situations as well as to sickness. Again, some of the magic handbooks are specific about the reasons why an illness has occurred, but these reasonings, too, are non-medical, partaking of the superstitious.

The terminology, though, recalls that of classical medicine. A typical section of the *lHan-t'abs*, for example, will describe the origins and treatment of a particular disease under a number of set headings, sometimes more, sometimes fewer. These headings include the word *siltayan*, 'main reason' and *ĵasaqu arya*, "method of treatment". It is these two terms, the second often varied to *ĵasal*, "treatment", which figure most prominently in the magic handbooks. There appears to be a superficial association of magical with classical medicine, then, if we simply examine the terminology, but this association is a very limited one. Once we get beyond the level of arrangement and vocabulary, we find ourselves in a very different world. Whereas the *lHan-t'abs* proposes natural causes for a named disease and prescribes, generally speaking, natural remedies, the magic handbooks see sickness in terms of breaking taboos, incurring the malice of demons, and so on, while the remedies are intended to correct such imbalances in the order of things.

The processes involved in the recognition of the source and nature of the disease and in the choice of a suitable remedy are perhaps of secondary interest, but they cannot be ignored. We can divide them roughly into two groups, that is, normally occurring phenomena and artificially produced omens. Characteristic of the first group is a handbook belonging to the Scheut missionaries in Louvain, entitled, in English translation : "Book for enquiring into the horse ridden by one going to make enquiries for a sick person."²³ The first section deals with the behaviour of the horse itself. Thus, if the horse yawns, it will be chronic; if it snorts, recovery will be swift; if it coughs, the illness will be acute; if it stretches, death will occur within 24 hours. If saddle cloth and saddle lie crooked there will be trouble — don't go; if it neighs, the illness will be serious; if it tries to get loose, the patient will recover. The next section concerns the demeanour of the man who has come to summon the practitioner, whether he speaks from outside the tent, how he sits down when he comes in, and so on. So, if he comes in and sits down with legs crossed, the sickness will not be dangerous. As for the reason — *siltayan* — it came from a grey-haired man. This man should be modelled

in flour, on a horse, and exposed. The patient's body should be washed while reciting the *Siditen*, and he will get better. If the man comes in and sits down with one leg bent, then the patient has been going from tent to tent, or else he has eaten carrion taken by an animal, and the demons are active on that account. He will vomit and have sharp pains. The sickness will be acute. One should recite the *Altan Gerel*, make incense offerings, expel a substitute of the body with clothes and boots. If the man calls out before coming in, the sickness will be severe. The reason — *siltayān* — is that the harm has come from having killed birds or beasts. One should recite *Čaγan Sikūrtei* a thousand times, and expel weapons, saddle, bowcase, bow and arrows, and clothes and the illness will be relieved and he will get better.

Our texts provide several different methods of deliberately consulting oracles, with variations on some. Scapulimancy we have mentioned. Dice may be thrown, either one die, usually inscribed with the six syllables of the mani prayer, or three dice, giving a series of combinations. Coins may be tossed, using groups of 5, 6, 9, 10 or 12. Here it seems likely that some processes, especially that using six coins, which are associated with the hexagrams of the *I Ching*, are to be identified as of Chinese origin, while nine coin divination may be of Tibetan origin. I suggest that this may be so because there is a handbook for this process in Tibetan in the Chester Beatty library, while in Copenhagen we have parallel handbooks in Mongol. But of course it may only be the case that Tibetan was used because it was, so to speak, a sacred language. The process is simple but interesting. Each of the nine coins has a name — stupa, mountain, boat, lion, wolf, sun, crow, moon, vase. One of them is marked. They are held between the palms of the hands while prayers are pronounced, and then moved about on the palm of the left hand by means of the right hand. The moment when the marked coin falls is the operative one, and the handbook will provide advice under the name concerned. This advice is not limited to cases of wickedness, but covers a general prognostication, sickness, search for lost beasts, and travelling. As with the other handbooks we have looked at, diagnosis and treatment are tersely expressed.

For example, if no. 5, wolf, is applicable, the illness will have come from a bad smell, or from scorching. Under 7 it will have come from red-coloured goods, and so on. The remedies recommended are the recitation of certain scriptures.

To give an idea of the possibilities inherent in these artificial methods of classification, I quote now from an incomplete manuscript in Copenhagen.²⁴ Successive sections offer the following categories :

1. Relationship between the day when the sickness occurs and the sickness itself. For example, if someone falls ill on a mouse day, the intestines will be heavy, there will be trembling, and the tongue, heart, hands, feet and sides will be affected. The harm has come from a ghost which died in blue water, from a black tent, and from black-coloured goods. Or else the harm has come from a traveller. Remedy — undergo consecration (*abhisheka*).
2. Relationship between the day of the month and the sickness. If someone falls ill on the first day of the month, it is because he has gone towards the west, and so on.
3. Relationship between the 8 trigrams and the sickness. The text here has a nine-squared diagram with the names of the trigrams written in the outer 8 squares. The method is not explained, but from another text kept in Louvain we can see that one system was as follows : for a man one counted sunwise from a certain trigram, for a woman, backwards from a different one. The counting was done with 7 white stones and one black one, or with similarly coloured barley corns, and where the black counter fell was the operative lot. The process was to be carried out 7 times, so as to provide advice on what disease was involved, how it was caused, what demon was responsible, what dreams would be dreamed, how the sickness should be treated, whether it would be acute or chronic, and whether it would be easy to cure.

4. Relationship between the birth year of the patient and the proper day for examining the sickness or for avoiding examination.
5. The influence of particular evil spirits upon people born in particular years, in association with particular days of the month. Thus : On the 8th day of the first month of spring, the *mangyus* or orge-snare will be cast on people born in the dog, horse and tiger years. If they fall sick on that day they will die. If they do not die, the ogre will never let them go, like a bird caught in a net. If you know about this snare, make an ogre-sword and cut the snare, and you will get better.
6. Prohibitions connected with illness in each month of the year. For example, if you fall ill in the 7th month, do not admit anyone born in a snake year.
7. Actions to be taken in connection with illness occurring on certain days.
8. Prognostications in case of illness occurring on certain days of certain months.

The purpose of engaging in divination, as far as illness was concerned, was to establish the nature of the illness and the reason for its occurrence — that is, its possible connection with the patient's astrological data, with his actions, which might have aroused a demon, perhaps through breaking some sort of tabu, and so on — and to discover an apt remedy. There is an extraordinary range of curious analysis and advice in the handbooks I have seen, and in a short paper one cannot do justice to the subject, of which I made a fairly full analysis several years ago.²⁵ But one thing seems to be common to all handbooks — disease is not attributable to effective physical causes. There may be dogmatic statements as to the connection between an action and a sickness, but this connection is a supernatural, not a natural, one. Even when the eating of impure food is established as the reason, the impurity resides not in physical decay or infection, but in the origin of the food. Thus, one should not accept food from a

widow, or a woman who has lost her children. Food coming from a particular compass direction may turn out to be dangerous. All sorts of actions on the part of the patient may have been responsible for his condition — accepting old clothes, crossing water, having contact with the rider of a camel, going into a ruined city, accepting red-coloured things, accepting a sharp knife, and so on. These and other actions seem to become effective because they attract the attention of a range of malevolent influences, or it may be that the subject has simply met with these influences. Thus, if someone falls ill on a snake day, it may be that an *ada*-demon, which has been following a woman, was responsible.

Remedies are many and various. The term generally used in *Jasal*, the word favoured also in classical medicine, though in our handbooks it denotes any type of magic or ritual performed in order to combat a sickness. *Jasal* include the making and expulsion of substitute figures — a ritual known from pre-Buddhist times in Mongolia. There is a description in the 13th century Secret History of the Mongols, for example, of how this method was resorted to when the emperor Ögedei, the successor of Genghis Khan, fell seriously ill. Buddhist scriptures may be recited, gifts made, apparently to the responsible demons, and so on. The subject is inexhaustible.

We may leave magic here, and go on to the last part of the paper, which concerns the use made by Mongols today of the principles of classical Tibetan medicine. Here I can only proceed very cautiously, as I have little reliable information, and what I do have has been fortuitously acquired, and is very incomplete and unsystematic. In the Mongolian People's Republic, to my knowledge, modern medical practice is based on what we may call western practice. Education, training and procedures, provision of medicines and equipment, and so on, are all linked with the Soviet world and with technical specifications current in eastern Europe and the USSR. However, older practices, which while discouraged and forcibly repressed, were never entirely extirpated, have surfaced once more, in the wake of the political liberalization which is affecting the Mongolian People's Republic together with the rest of the former Soviet world. This revival

has been encouraged by the establishment of an Institute for Popular Medicine (Ardyn Emnelgiin Xüreelen). These older practices are discussed in the press and are the subject of recently published books, and are apparently acquiring the status of an alternative medicine, though without the benefit of personal observation it is impossible to gauge the practical extent of the revival. An unwelcome feature of this revival is the emergence of charlatans, who exploit the new freedom in order to engage in more quackery.²⁶ In Inner Mongolia, a part of China, the older traditions of medicine have been fostered for some time past alongside modern theory and practice. I cannot speak with any particular knowledge of what has been happening in Inner Mongolia in the last several decades, but must limit myself to looking at a few books which happen to have come my way.

First of all, the *Dörben Ündüsün*, in "Four Tantras". This book was re-translated in the 1950's and published in 1959 in two volumes in an edition of 7000 copies.²⁷ On the title page, editing and translating are ascribed to the Chinese and Mongol Medical Research Institute of the Inner Mongolian Autonomous Region. Besides the "Four Tantras" itself, the book contains a number of selected chapters from the *IHan-t'abs*. The book has an interesting preface. In this, the "Four Tantras" as a book is traced back to Indian origins via Tibet. It is said to have reached the Mongols originally during the Yüan Dynasty, since when it has continued to be studied by Mongol doctors and to have enriched Mongol medicine. It was translated into Mongol during the Manchu Dynasty, and also printed. Other Tibetan works, whose names are given in Mongol transcription, also helped to form the basis of Mongol medicine, as did Chinese medical science, together with that of other countries, with the result that Mongol medicine has now developed into a particular system. After analysing the contents of the book, the preface goes on to extol it as a work which should be studied by all Mongol doctors, since it would have an important effect on the emergence of what is called 'new medicine' in China. It was in order to implement a call by the Communist Party to enhance the heritage of national medicine, that Mongol doctors were mobilised under the leader-

ship of the Chinese and Mongol Medical Research Institute and the Office of Health of Inner Mongolia to re-edit and re-translate the "Four Tantras" with the aim of promoting Mongolian medical science. Re-editing was considered necessary in order to eliminate what were thought to be unscientific and religious elements in the book, and also to simplify passages which were hard to understand, taking certain other medical treatises into account. For example, the editors cut out the legend concerning the origin of the 'Four Roots' which occurs at the beginning of the book, though interestingly enough they proceeded to summarise the legend they had excised, and they also removed passages referring to such practices as the use of dharanis. I do not know what, if anything, happened to the 'Four Roots' during the cultural revolution, but the book was re-edited and published once again at the end of the 1970's, appearing in one volume in 1978 in an edition of 11,540 copies.²⁸ No extracts from the *lHan-t'abs* were included in this second edition. The 1978 preface describes the process of revision as it affected the first edition in much the same words as the 1959 preface, and then goes on to explain the further revisions which were made subsequent to that edition, whose intention was to make the book even more accessible to contemporary readers. Surviving religious or superstitious elements were removed, errors corrected, difficult or obsolete expressions replaced, and terminology reviewed and brought into line with common usage. There can, it seems, be no doubt as to the significance which the 'Four Roots' has in the development of medicine in present-day Inner Mongolia, though one lacks evidence as to the details of practice.

Secondly, in 1982, there appeared a Tibetan-Mongolian medical dictionary, compiled by an author named Galsang, in an edition of 6,300 copies and just under 800 pages.²⁹ The book has a preface by the Silingol Medical Research Institute. It contains some 15,000 Tibetan headwords. One stated aim is to standardise the terminology of modern Mongolian medicine. The headwords have been taken from the "Four Tantras" and from a number of other works, including not only classical texts from Tibet, but also native Mongolian works. These include the *Saran-u geral*

kemekü toli, 'Dictionary called Light of the Moon' by Agwang-dandar, a doctor from Alashan, *Töbed Mongγol dokiyan-u bičig nere üge udqa γurba-yi tododqayči toli* 'Tibetan-Mongolian Terminological Dictionary, explaining Names, Words and Meanings' by the Buryat Lubsangdorji, and others.

The third book to be mentioned is a handbook entitled *Tabun Ĵasal*, 'The Five Treatments', by one Mingγanbayar, which was published in 1982 in what seems to be rather a small edition of 1700 copies. This book appears to be an exposition of certain of the procedures explained in the Four Roots, refined and brought up to date, and expanded by reference to Chinese theory and practice, and forming part of what is termed Mongol medicine.

This Mongol medicine³⁰ — a term met with already in the preface to the Four Roots — is said to have several advantages. The equipment is simple, the exercise of the methods is easy, the expense is small, the scope for application is wide, and the effectiveness is rapid, and for these reasons, it is said, it is widely welcomed among the mass of the herdsmen.

The book consists of three parts, entitled respectively : *Tabun Ĵasal* 'Five Treatments'; *Dotor Ĵasal*, 'Internal Treatments' and *Emčilegen-ü Sine Ĵasal*, 'New medical treatments.'

The "five treatments" of the first part are in fact six in number, and correspond to the so-called Rough and Gentle Treatments³¹ which are the subject of the final section of the Four Roots in its modern Mongolian editions. These are the chapters listed under the heading 'External treatments' by Dr. Finckh.³² These treatments comprise bleeding, moxibustion, use of compresses and similar applications, massage, bathing and acupuncture. Of these, bleeding, moxibustion and acupuncture are classified as rough treatments, the other three being gentle. There appears to be a third category, named hard treatment, which embraces actual surgery, but this is merely mentioned along with the other two, and does not seem to be dealt with further. The first section, on bleeding, begins with a general statement, describing its purpose, which is to extract so-called "bad blood" from the veins. The next section describes the equipment, with reference to the cor-

responding text in the "Four Tantras". The following section is of especial interest, as it deals with cleanliness, stressing the absolute necessity for a clean environment, either a proper surgery or a clean tent, for the sterilisation and hygienic storage of equipment, using either a special boiler or 95 p.c. pure spirit, for absolute cleanliness on the part of the operator, who must sterilise his hands thoroughly and refrain from operating if there is any lesion on them, and for sterilisation of the area of the patient's skin surrounding the chosen site for the operation. This area is to be thoroughly cleaned from the centre outwards with cotton wool soaked in iodine, followed by a similar cleansing with spirit. The next section deals with what conditions may be treated by bleeding, and those where it is not indicated. This section is literally almost identical in naming the permissible and the forbidden conditions with the corresponding passage in the "Four Tantras". Next comes a section on the procedure, divided into preparations and actual operation. The latter is subdivided into the following headings : ligatures, method of bleeding, veins for bleeding, examination of the blood (visual inspection), as in the "Four *Tantras*", amount of blood to be taken, correction of anomalies. The most extensive part of this section is that which lists the appropriate spots for bleeding, which are identified by their Tibetan names, and illustrated in diagrams.

The following sections follow a similar pattern. The section on moxibustion describes the preparation of pellets from a particular plant, *ula ebesü*.³³ These pellets may be supplied directly to the skin, or some substance, usually ginger or garlic, may be interposed. Moxibustion may also be performed by means of heated needles. The pellets themselves are prepared in a wooden mould which allows for the production of pellets of different sizes and hence of graded severity.

I do not possess similarly extensive evidence concerning the use of such practices as bleeding, moxibustion, application of compresses, and so on, in the Mongolian People's Republic, but chance references suggest that such old practices may survive, and that modern versions of them may be current. One such reference came in a popular booklet on cancer, where the importance

of marks left by cupping, hot compresses and mustard applications on the back of the patient in connection with the investigation of possible metastases of breast cancer is alluded to.³⁴ A second significant hint comes in the announcement of the planned publication in 1986 of a book on needle-cauterisation. The advertising matter shows that this method of treating internal and nervous conditions, women in childbirth, and some diseases of children, has been developed in the Republic over the last 20 years. What relation, if any, this has to classical Tibetan medicine is not stated.³⁵

The second part of the book, dealing with internal treatments, is dependent upon the seven chapters in the "Four Tantras" which precede the once just mentioned. In Dr. Finckh's analysis of the "Four Tantras" these are the chapters headed "Radically effective treatments". The handbook, again following the usage of the "Four Tantras", gives these procedures the general name of *Tabun Üile*, "Five actions". These are :

1. Treatment with oils, applied externally for example by rubbing or dripping into the eyes, or internally as liquid medicine,
2. Purges,
3. Emetics,
4. Nasal treatment,
5. Gentle enemas,
6. Clysters,
7. Cleansing of the veins.

The third part of the book, dealing with what it calls new or modern treatments, describes ways of employing needle-like instruments which involve both acupuncture and the drawing of blood. Thus we find :

1. Use of needles with triangular points, to draw blood,
2. Syringes, used to inject fluids,

3. Electrical needle treatment,
4. Acupuncture applied to the hand.

Finally, there is a section on acupuncture to be carried out by local doctors, followed by one on linked acupoints.

The above is a mechanical and superficial attempt to analyse a fascinating handbook, which represents a mingling of old and modern theory and practice, in the Mongolian, Tibetan and Chinese traditions, and which demands more expert appraisal. One would also welcome some indications from our Mongolian colleagues as to the extent to which the methods expounded in the book are put into practice, and to what effect. This information may indeed be available in Inner Mongolia, though not in this part of the world.³⁶

Notes :

1. Bibliographical references are as follows :
 1. *Bükü Ulus-un Monγol Qaγučin Non-un Yarcay*; *Quanguo Mengwen Gu-jiu Tushu Ziliao Lianhe Mulu*, 1979.
 2. Jambaa : "Ulsyn Niitiin Nomyn Sangyn Anagaax Uxaany Mongol Bichmeliin Garchig", *Studia Mongolica*, I, 9, Ulaanbaatar, 1959 *Ulus-un Nom-un Sang-un Azi-yin Anggi-dur Büküi Mongγol Anggi-yin Bičimel ba Darumal Nom bičig-ün Bүridkel*, Ulan Bator, 1937.
 3. Walther Heissig assisted by Charles Bawden : *Catalogue of Mongol Books, Manuscripts and Xylographs*, The Royal Library, Copenhagen, 1971.
 4. Pentti Aalto : *A Catalogue of the Hedin Collection of Mongolian Literature*, Statens Etnografiska Museum, Stockholm, 1953.
 5. Nicholas Poppe, Leon Hurvitz, Hidehiro Okada : *Catalogue of the Manchu-Mongol Section of the Toyo Bunko*, Toyo Bunko and University of Washington Press, 1964.
 6. Walther Heissig : *Mongolische Handschriften, Blockdrucke, Landkarten*, Franz Steiner Verlag, Wiesbaden, 1961.
 7. John R. Krueger : 'Catalogue of the Laufer Mongolian Collections in Chicago', *Journal of the American Oriental Society*, 86, 2, 1966.
 8. David M. Farquhar : 'A Description of the Mongolian Manuscripts and Xylographs in Washington, D.C.', *Central Asiatic Journal*, I, 3.
 9. M. Rosaria Falivene and Alan F. Jesson : *Historical Catalogue of the Manuscripts of Bible House Library*, Bible Society, London, 1982.
 10. C.R. Bawden : *The Chester Beatty Library : A Catalogue of the Mongolian Collection*, Dublin, 1969.
2. Ch. Baavgai : *Dorno Daxiny Anagaax Uxaany Onal Praktikiin Zarim Asuudal*, announced in *Nomyn Sedevchilsen Tölvölgөө*, 1984, 2.
3. Ts. Xaidav and others : *Mongolyn Anagaax Uxaand Xereglegddeg Emiin Zarim Ürgamlyn Ner Tom'yoo*, no. 61 of the Reports (*Medee*) of the State Terminological Commission. The book lists 429 items under their Russian name, with Latin, Mongolian and Tibetan equivalents, and with indices in the latter languages.
4. Ts. Xaidav : *Mongol Orny Emiin Zarim Asuudal*, 1962 describing some 42 items, classified under their Mongol names, and quoting the Latin equivalents. Botanical descriptions are followed by remarks on the medicinal usefulness of each plant.

5. U. Ligaa : *Oron Nutgiin Emiin Urgamlyg Mal Emmelgiin Praktiki Örgön Xeregl'ye*, 1964, similar in make-up to the preceding item.
6. D. Dagdaa : *Mongol Orny Xort Urgamluud*, 1965.
7. S. Shatar : *Xor Xönöölt Urgamal*, 1967.
8. Ts. Lamjav : *Mongol Orny Emiin urgamal*, announced in *Shine Nom*, 1971, no. 4.
9. Ts. Xaidav : *Arдын Emnelegt Xereglej Baisan Am'ny Garaltai Em*, 1982.
10. Rol' Kochevyx *Narodov v Tsivilizatsii Tsentral'noi Azii*, Ulan Bator, 1974. See pp. 289-293 : *O Staroi Mongol'skoi Meditsinskoi Literature*.
11. *Die tibetische Medizinphilosophie*, Zürich, 1953, xx.
12. D. Tserensodnom : *XIV Zuuny Üeün Yaruu Nairagch Choiji-Odser*, Ulaanbaatar, 1969, 45-46.
13. For example, Copenhagen, Mong 293 and 295.
14. C.R. Bawden : "On the Practice of Scapulimancy among the Mongols", *Central Asiatic Journal*, IV, 1, 1958, 1-31, and "A Tibetan-Mongol Bilingual Text of Popular Religion" in R. Kaschewsky, K. Sagaster, M. Weiers : *Serta Tibeto-Mongolica*, Otto Harrassowitz, Wiesbaden, 1973, 15-32.
15. See W. Heissig : *Geschichte der Mongolischen Literatur*, Harrassowitz, 1972, vol. 2, chapter 11. For his activities as a doctor sunan article in Chinese, "Jiechude Mengguzu Yixuejia Yixidanjinwangjila", in *Chinese Journal of Medical History*, 1983, no. 13, 4, 255-258.
16. Mong 439.
17. op. cit. xxii.
18. Jambaa, 9-15.
19. Mong 68.
20. Relevant books are : James Gilmour, *Among the Mongols*, 1882, John Hedley, *Tramps in Dark Mongolia*, 1910, 1912, and my *Shamans, Lamas and Evangelicals : The English Missionaries in Siberia*, London, RKP, 1985.
21. *Journal of the Anglo-Mongolian Society*, IX, 1 and 2, 1984, 27-42.
22. Mo. *quluyana yara*. The equivalence is by no means certain, and dictionary-hunting leads one in a circular chase with no reliable solution. The best modern Mongolian-Russian dictionary, that of Luvsandendev, translates *sibirskaya yazba (u skota)*, i.e. *anthrax (in cattle)*. However, the Report of the State Terminological Commission, no. 71, on human medicine, gives *boom* as the Mongol equivalent of *sibirskaya yazba*, and *boom* is defined by Luvsandendev also as *sibirskaya yazba*. The two Mongol words might of course be used for the one condition, except that a manual of veterinary practice, A. Pürevjamts : *Zoo-mal Emmelgiin Ün-*

- des Sudlagchdad Tuslamj*, Ulaanbaatar, 1963 describes *two* conditions under these names. In this work, *boom*, though not translated, is evidently anthrax, whereas *quluḡana yara* (modern form *xulḡana yar*) is not, though what it is I do not know. Reference to other dictionaries leads one further afield. Kowalewski has Russian and French equivalents corresponding to English mumps, and Tibetan equivalents *mdze* and *mdze-nad*. The recently published Tibetan-Mongolian medical dictionary to be described below gives as equivalents *uyaman ebedčün*, which the Commission's Report explains as leprosy; *quluḡana yara*, which does not help further; and *nebterkei yara*, "penetrating ulcers" which I have not traced. The equivalents for *quluḡana yara* in the standard Mongol-Chinese dictionary published in Huhhot in 1976 *shu-chuang* and *luo-li*, both defined elsewhere as scrofula. Scrofula can be traced, e.g., in Vietze's German-Mongol dictionary, as *bulag övchin*, leading in yet another direction.
23. MS. no title. See no. 37 in W. Heissig : "The Mongol Manuscripts and Xylographs of the Belgian Scheut-Mission", *Central Asiatic Journal*, III, 3, 161-189.
 24. Mong 301.
 25. "The Supernatural Element in Sickness and Death according to Mongol Tradition", *Asia Major*, 1961, New Series VIII, 2, 215-257 and 1962, IX, 2, 153-178.
 26. In particular, a whole-page article in the newspaper *Utga Zoxiol* no. 4, 25 January 1991, signed by P. Yansan, a research worker at the Institute of Medicine (Anagaax Uxaany Xüreelen) outlined the history of traditional medicine, expressing regret at the damage done to the tradition during the Choibalsang and Tsendenbal years, in particular through the destruction of lamaseries and their medical faculties and the wholesale persecution of lama doctors. The article concluded with a seven-point plan for the rehabilitation of Mongolian traditional medicine. As long ago as 1970 the publishing plan for that year announced a book by D. Dorjjantsan entitled *Ardyn emchilgee*, "Popular medicine" which was described as dealing with popular remedies for conditions including concussion and fractures. The 1974 plan announced a book by D. Doljin-Ochir entitled *Fizik ba emiin bus emchilgee*, "Physical and Drug-free Treatment" which was to deal with blood-letting, massage, cupping and so on. A book-list circulated in June 1991 lists the following titles : *Mongol emiin jor*, "Mongol prescriptions"; *Dorno daxiny anagaaax uxaany onoshlogoo*, "Diagnosis in Oriental Medicine"; *Ardyn emchilgeenii arga zasaḷ*, "Popular medical treatments"; *Züü töönüürün zaslyn uxaan*, "The Science of Acupuncture". These books are said to be in print.
 27. *Anaḡaqu Uḡaḡan-u Dörben Ündüsü*, Peking, 1959
 28. Title as in note 26.

29. *Bod-sog gso-rim brda-yig, Töbed Mongᠭol Emneige-yin Toli.*
30. On Mongolian folk-medicine see Klaus Sagaster : "M.M. Haltods Notizen über die mongolische Volksmedizin" in H. Franke and W. Heissig (eds.) : *Heilen und Schenken*, Harrassowitz, 1980, 77-96.
31. *Jögelen sirügün Jasal-un tobči.*
32. Elisabeth Finckh : *Foundations of Tibetan medicine*, vol. I, Watkins, London and Dulverton, 1978, 39.
33. The identity of this material is discussed by Sagaster, 85-88.
34. P. Sagaraajav : *Ömön Üü Övchniig Tanin Medexed Tuslanj*, Ulaanbaatar, 1964, 31.
35. D. Badarchin, Ts. Lxamsüren, B. Tsolmonpürev : *Züü Töönüür Zaslyn Uxaan*. In passing we may note that bleeding and needle-cauterisation are practised as part of veterinary medicine in the MPR. See, for example, a handbook on the subject by D. Shaariibuu : *Matyn Xanuur Züü Töönöl-giin Zasal*, published in 1965 under the auspices of the Ministry of Rural Economy. Bleeding for animals is also described in M. Dash's handbook of animal husbandry, *Mongol Orny Bilcheerün Mal Mallagaany Arga Tusshlaga*, 1966.
36. Since this paper was prepared a large Handbook of Mongolian Medicine (*Mongᠭol em-ün oyillaᠷa*, 1336 pp., 144 coloured plates, 1981) has come into the writer's hands. The shorter first section of the text discusses general matters concerning the collection, preparation and application of medical material, and the much longer second section deals individually with medicinal substances of vegetable and, to a smaller extent, animal origin.

Biographical Notes

BAWDEN, Charles Roskelly (1924—)

FBA, Professor of Mongolian 1970-84, now Emeritus Professor, School of Oriental and African Studies, University of London. Educated at Weymouth Grammar School and Peterhouse Cambridge MA, PhD, Diploma in Oriental Languages. War Service RNVR (Royal Naval Volunteer Reserve) 1943-46. Assistant Principal, German Section, Foreign Office 1948-9, Lecturer in Mongolian SOAS 1955, Reader in Mongolian 1962. Head of Dept. Far East SOAS 1970-84, Pro-Director 1982-84. Publications : *The Mongol Chronicle Altan Tobči* 1955; *The Jebtsundamba Khutukhtus of Urga* 1961; *The Modern History of Mongolia*, 1968, reprinted in 1989, *The Chester Beatty Library : a Catalogue of the Mongolian Collection* 1969; *Shamans, Lamas and Evangelicals, the English Missionaries in Siberia* 1985. Articles and reviews in SOAS Bulletin, Central Asiatic Journal, Zentralasiatische Studien and other periodicals. At the moment he is working on a Mongolian English Dictionary.

DAKPA, Nawang

Head of Paris Tibetan Community. Wrote "La folie d'après un commentaire du rGyud-bži, les Quatre Tantra." *Scientia Orientalis*, 1979, 16, 31-39 and "La sphymologie tibétaine." *Les Médecines Traditionnelles de l'Asie, actes du colloque de Paris 11-12 juin 1979*. Edition préparée par G. Mazars. (Publication du séminaire sur les sciences et les techniques en Asie). Université Louis Pasteur, Strasbourg, 1981, 23-29.

EMMERICK, Ronald E. (1937—)

Born Sydney, Australia. BA Cambridge 1961, Ph.D. Cambridge 1965, University Lecturer, London 1964-71. Visiting Associate Professor Chicago 1967-8, ordentlicher Professor Hamburg 1971. Corresponding member of the Istituto per il medio ed estremo Oriente (Rome) and Fellow of the British Academy. Edited and translated : *Tibetan texts concerning Khotan* 1967; *The Book of Zambasta* 1968; *The Śūraṅgamasamādhisūtra* 1970; *The Siddhasāra of Ravigupta* 1980-82; translated : *The Sūtra of golden light* 1970, 1979; second (revised) edition 1990; wrote : *Saka grammatical studies* 1968; *A guide to the literature of Khotan* 1979; *The Tunshuqese Karmavācānā Text* (Abhandlungen der geistesund sozialwissenschaftlichen Klasse, Jahrgang 1985, Nr. 2), Akademie der Wissenschaften und Literatur, Mainz, 1985; *Studies in the vocabulary of Khotanese*, I, II (Veröffentlichungen der iranischen Kommission, Band 12, Band 17) Vienna, 1982, 1987 (with P.O. Skjærvø).

FINCKH, Elisabeth, Dr. med., née Drescher (23.8.1912—20.1.1993)

Specialist in naturopathy for internal diseases, she trained also in neurology, psychiatry, tropical medicine and homeopathy. Born in Germany, resident in Hamburg. In 1962 she studied in the Tibetan Medical School in Dharamsala under the expert guidance of Tibetan doctors, and she returned there and to the

Himalayan valleys in later years where she observed the work of itinerant doctors. Besides a great number of articles in journals and papers read at conferences, she is the author of the following books : *Foundations of Tibetan Medicine*, 3 vols. (Watkins and Element Books, 1978-88, volume 3 in preparation, originally in German), *Studies in Tibetan Medicine* (Ithaca, Snow Lion, 1988) *Der tibetische Medizinbaum* (Uelzen, Medizinisch-literarische Verlagsgesellschaft, 1990). She also wrote a foreword to the new edition of Heinrich Laufer, *Tibetische Medizin*, Fabri Verlag, 1991.

MANDELBAUM, Arthur

Senior Editor of *Yeshe Melong*, the publishing arm of Yeshe Nyingpo, the centre of the *Nyingmapa* School of Tibetan Buddhism presided over by the late Dudjom Rinpoche and his successors in New York City. *Yeshe Melong* published Terry Clifford's last work which was an edition of *The lamp of liberation* consisting of Dudjom Rinpoche's *Inner Yoga prayer* and his *Heart nectar of the Saints* the whole of which was later translated into English. Arthur Mandelbaum spent six years in India from 1965 to 1971, studying Hindi, Sanskrit and Tibetan at the Sanskrit University of Varanasi, and teaching English in Rewalwar, Himachal Pradesh, and in Kathmandu. He met Terry Clifford during that period, and they remained close friends ever since. He has continued his study and practice of the *Vajrayāna* with Tibetan Lamas in the United States. For the last sixteen years he has been teaching English in the New York City high school system. He is going to Nepal in 1991 on a sabbatical where he hopes to complete a translation project.

TROGAWA (i.e. 'Khro-dga'-ba), Doctor, Rinpoche

Born in Lhasa in 1931 as the son of Tsipon Trogawa, a highranking officer in the Finance Ministry. Realised as a child that in his previous life he had been Lama Mengom Rinpoche at the Gyantse Monastic complex. Sent there at the age of 12 where his own monastery was Mindrol Rabten Ling. He stayed there for three years. At the age of 14 he memorised few short medical writings. At 16 he went to Lhasa where he was apprenticed to Doctor Nang-nong-shag in a private practice, a family man, with whom he spent nine years. This doctor had been for twenty years the pupil of Khenpo Jampa Thubwang, a nobleman and famous physician, at the Norbulingka summer palace. During the last four years of his apprenticeship he began to practise in Lhasa and the surrounding villages, asking for the advice of his teacher when there was a difficult case. At the age of 25 in 1954 he went on a pilgrimage to India, and since that time he has been practising in India, Nepal, Sikkim and Bhutan, also teaching at the Tibetan Medical School at Dharamsala. Since 1981 he has also been practising and teaching in Western countries.

WINDER, Marianne (1918—)

Born in Prague (Czechoslovakia), escaped to England in 1939. Graduate of London and Nottingham Universities. Member of library staff at Institute of Germanic Studies, University of London, 1953-1964 and at Wellcome Institute

for the History of Medicine 1964-1978 (Curator of Oriental Manuscripts and Books 1972-1978), after which Consultant on Tibetan Medicine. Editor of the Buddhist Journal *The Middle Way* 1962-1965. Published translation of Edward Conze's *Buddhist texts through the ages* into German as *Im Zeichen Buddhas*, Frankfurt, Fischerbücherei 1957, and introduction to Rechung Rinpoche, *Tibetan medicine in original texts*, Wellcome Institute, London and California University Press 1973 and 1976, and *Catalogue of Tibetan manuscripts and xylographs and catalogue of thankas, banners and other paintings and drawings in the Library of the Wellcome Institute for the History of Medicine*, London, Wellcome Institute, 1989, besides numerous articles on Tibetan and Renaissance medicine.