

Re-visiting ‘Galen in Tibet’¹

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Abstract: This paper readdresses the assertion found in much secondary literature that Greek medicine was adopted in Tibet in the seventh and eighth centuries. I discuss some of the traces of Galenic medical knowledge in early Tibetan medicine, and raise the question of why Tibetan medical histories who mention Galen give Galenic medicine a much more significant place than is evidenced in the Tibetan medical literature itself. I discuss some historiographical considerations and argue that the centrality given to Galenic medicine is more indicative of the period in which these sources are written than of the period which they presumably describe.

Keywords: Tibetan Medicine, Galen, Silk Road, Dunhuang, Turfan, Eastern Church

In his 1979 paper titled ‘The Introduction of Greek Medicine into Tibet in the Seventh and Eighth Centuries’, Christopher Beckwith brought to the attention of scholars the mention of ‘Galenos’ in Tibetan medical histories.² In this article, which has been widely cited in secondary literature,³ Beckwith discussed four Tibetan medical histories dealing with the origins of medical knowledge in Tibet. In one of these accounts, the earliest of the four, dating to the sixteenth century, the following account is found:

As for the beginning of the appearance of medicine in Tibet, to begin with there were just some bits of knowledge about nutrition. Later the Chinese consort, brought the [text] called *The Great Medical Treatise* [*Sman dpyad chen mo*], which was translated by the monks (ho shang) Mahadeva and Dharmakosa. Then, three doctors were invited, from India – Bharadvāja, from China – Hen-weng-hang-de and from Khrom

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² Christopher I. Beckwith, ‘The Introduction of Greek Medicine into Tibet in the Seventh and Eighth Centuries’, *Journal of the American Oriental Society*, 99 (1979), 297–313.

³ See for example, George M. Foster, *Hippocrates’ Latin American Legacy: Humoral Medicine in the New World* (Langhorne, PA: Gordon and Breach, 1994), 11; Roberta Bivis, ‘Histories of heterodoxy’, in Mark Jackson (ed.), *The Oxford Handbook of the History of Medicine* (Oxford: Oxford University Press, 2011), 578–597: 594 (note 10); Richard Bulliet *et al.*, *The Earth and Its Peoples: A Global History, Brief Edition*, 5th edn (Boston, MA: Wadsworth, 2010), 268.

of Stag-gzigs, Galenos. They translated much from their individual schools. Jointly they compiled the seven-volume text called the *Weapon of the Fearless* [*Mi 'jigs pa'i mtshon cha*].⁴

The author of the text, Pawo Tsuglag (Dpa' bo gtsug lag, 1504–1566), also adds that it was Galenos who 'stayed [in Tibet] as royal physician'.⁵ Galenos' stay is a point which is further emphasised by the seventeenth-century author Sangye Gyatso (Sangs rgyas rgya mtsho), who adds the following details:

The king gave gifts to the Indian and the Chinese physicians, and they departed for their own countries. Galenos remained as the royal physician. He stayed mainly in Lhasa and is known for his numerous compositions and commentaries. It is said that, having taken a wife, he had three sons....⁶

The three later Tibetan sources quoted by Beckwith – dating to the seventeenth to nineteenth centuries – locate the visit of these three medical authorities more specifically at the time of the Tibetan King Songtsen Gampo [Srong btsan sgam po] of the seventh century – whose reign marks the beginning of recorded history in Tibet. They thus present us with a history of Tibetan medicine, which was formulated in its initial stages as a synthesis of Greek, Chinese and Indian medical systems.⁷

These sources raise a host of fascinating questions. Although Beckwith discussed a number of them, many important questions remained open. Following up on Beckwith's groundbreaking work, I was interested, to begin with, in the general contextualisation of these cultural connections.

Traces of Galenic Medicine in Early Tibetan Medicine

My initial question was: could Greco-Arab medicine have arrived in Tibet during the time of the Tibetan empire (seventh to ninth centuries)?

The 'Islam and Tibet' project⁸ provided the necessary context for understanding some important aspects of this cultural background and gave an affirmative answer to this question.⁹ Yes, there is sufficient evidence of cultural connections between Tibet and the Islamic world from the eighth century onwards to suggest that such transfer of knowledge could have occurred.

The question which then followed was: can we find any traces of Galenic medical knowledge in early Tibetan medicine? The answer to this question was affirmative too. Particularly in the area of urine analysis, I found remarkable similarities between an early Tibetan medical text and Ibn Sīna's *Canon of Medicine* [*Qānūn fī al-ṭibb*]. In a study

⁴ Dpa' bo gtsug lag, *Mkhas pa dga' ston*, Delhi edition vol. tsa, fol. 46r. Quoted and translated in Beckwith, *op. cit.* (note 2), 298–9.

⁵ Beckwith, *op. cit.* (note 2), 301.

⁶ Sangs rgyas rgya mtsho, *Dpal ldan gso ba rig pa'i khog 'bugs legs bshad baidūryai me long drang srong dgyes pa'i dga' ston* [*Mirror of Beryl: A Well-Explained History of the Glorious Science of Medicine, A Feast to Delight the Rishis*] (Lanzhou: Kan su'u mi rigs dpe skrun khang, 1982), 151; Beckwith, *op. cit.* (note 2), 301; see also the new translation by Gavin Kilty, Desi Sangyé Gyatso, *Mirror of Beryl: A Historical Introduction to Tibetan Medicine* (Boston: Wisdom, 2010), 148–9.

⁷ For an illuminating analysis of these accounts and a number of additional variations, see Frances Garrett, 'Critical Methods in Tibetan Medical Histories', *The Journal of Asian Studies*, 66, 2 (May 2007), 363–87.

⁸ I collaborated on this AHRC funded project with Charles Burnett, Anna Akasoy and Georgios Halkias. The project was hosted at the Warburg Institute, University of London. For more details on the project see the website of the project: <http://warburg.sas.ac.uk/index.php?id=160>.

⁹ I have provided an overview of these cultural interactions in 'Islam and Tibet: cultural interactions – an introduction', in Anna Akasoy, Charles Burnett and Ronit Yoeli-Tlalim (eds), *Islam and Tibet: Interactions Along the Musk Routes* (Farnham: Ashgate, 2011), 1–16.

dealing with musk, a Tibetan substance well known in Arabic literature from the eighth century, both for perfumery and as a medical substance, we also found many similarities in prescriptions.¹⁰

Given that my findings concerning urine analysis have not been readily available beyond Tibetological circles, I will briefly summarise them here.¹¹ I focused on the urine analysis section as it is discussed in the *Medical Method of the Lunar King* [*Sman dpyad zla ba'i rgyal po*, also known as *Somarāja*], one of the earliest extant Tibetan medical texts, dating to somewhere between the eighth and the twelfth centuries.¹² Tibetan medical historians have argued at length on the question of whether the text originated from India or from China. When analysing this text, however, one can see some features that are found neither in Indian nor in Chinese medical systems. One such distinct feature is the inclusion of urine analysis as a general diagnostic tool. Having studied a number of urine analysis texts, I found the urine analysis section in the *Medical Method of the Lunar King* remarkably similar both in content and in structure to the urine analysis section in Ibn Sīna's *Canon of Medicine*. I have also found a number of loan-words from Arabic and Persian in the *Medical Method of the Lunar King*, and have reached the conclusion that these two texts share some common tradition.¹³ The main problem with the *Medical Method of the Lunar King* as a source of information on the formative stages of Tibetan medicine, however, is that the text as we have it today has undergone a process of editing, the extent and dating of which is undeterminable.

Evidence from the Tibetan Medical Manuscripts of Dunhuang

Another group of sources, which could help us to tackle the question of the foreign influence during the formative stages of Tibetan medicine, is the set of the Tibetan medical manuscripts from Dunhuang. These manuscripts were discovered at the beginning of the twentieth century in the walled-up 'cave library' in Dunhuang, present-day Gansu Province in western China. Dunhuang was formerly an important town on the Silk Roads, at the centre of a hub of international trade routes of the ancient world. The 'cave library', which contained tens of thousands of manuscripts, was sealed in the early eleventh century for reasons which are still being debated by scholars.¹⁴ The manuscripts have been dispersed among libraries in Paris, London, St Petersburg, Tokyo, Beijing and elsewhere.¹⁵ Although Chinese is the most important language of the Dunhuang collection, there

¹⁰ On musk and its medicinal uses see Anna Akasoy and Ronit Yoeli-Tlalim, 'Along the Musk Routes: Exchanges between Tibet and the Islamic World', *Asian Medicine: Tradition and Modernity*, 3, 2 (2007), 217–40. For musk in perfumery contexts see, Anya King 'Tibetan musk and Medieval Arab perfumery', in Akasoy, Burnett and Yoeli-Tlalim (eds), *op. cit.* (note 9), 145–61.

¹¹ I presented my findings in the *Eleventh Seminar of the International Association of Tibetan Studies* in Königswinter in 2006. The published version 'On urine analysis and Tibetan medicine's connections with the west' is part of the collection, Sienna Craig, Mingi Cuomu, Frances Garrett and Mona Schrempf (eds), *Studies of Medical Pluralism in Tibetan History and Society* (Aniast: International Institute for Tibetan and Buddhist Studies, 2010), 195–211.

¹² This text was studied by Fernand Meyer in his unpublished paper 'Syncretisme médical en Haute-Asie d'après un texte Tibétain censé avoir été introduit de Chine au VIII^e siècle'. I would like to thank Fernand Meyer for sharing this article with me.

¹³ These are all discussed in my abovementioned 'On urine analysis and Tibetan medicine's connections with the west', *op. cit.* (note 11).

¹⁴ For an overview on these views see the posts on 'Secrets of the Cave' on Sam van Schaik's earlyTibet blog: www.earlytibet.com.

¹⁵ For more details and digital images of some of the manuscripts see the website of the International Dunhuang Project, based at the British Library: idp.bl.uk.

are also many documents in Tibetan, Sogdian, Khotanese, Sanskrit and Uighur.¹⁶ The Dunhuang manuscripts are of enormous significance for Buddhist, Central Asian and Chinese history. Their significance for the history of medicine and history of science has only recently begun to be explored.¹⁷ Being in manuscript form, they have the benefit of not having been edited, thus allowing a glimpse into the formative stage of Tibetan medicine, the period to which our Tibetan medical histories refer.

There are only a few Tibetan medical manuscripts in the collection: three manuscripts (PT 127, PT 1058, PT 1044) deal with moxibustion, one on *materia medica* (IOL Tib J 756) and two general ones (IOL Tib J 1246 and PT 1057).¹⁸ We have relatively little to go by, but there is still sufficient material to make a number of important points.¹⁹ There are many similarities – though also some differences – to Chinese moxibustion texts as found in Dunhuang.

We can find references to Indian influence. The colophon of PT 1044 points, for example, towards India as a source for medical knowledge, saying: ‘This type of method comes from the land of the king of India.’²⁰

Several connections with the west can also be detected: PT 127, for example, includes three references to locations to the west of Tibet: Persia (ta zig), Turkic (dru gu) lands and Zhang Zhung, referring probably in the Dunhuang context to a kingdom situated to the northwest or north of Tibet. The reference to Persia appears as a source of paper, saying: ‘If there is bleeding from the nose, use paper from Persia.’²¹ The mention of the Turkic lands refers to bloodletting, saying: ‘[T]he Turkic (dru gu) method [using] iron for cauterization and bloodletting (? sur phug)²² is also suitable.’²³

We also find some foreign names of *materia medica* deriving probably from Persian or Arabic, such as a mention of theriac (Tib.: dar ya kan)²⁴ and mentions of camphor. The different forms of the word for camphor – Tib.: ga phor, ka phor and ga phur – mark it as a loan-word, and these spellings link it with the Persian or Arabic form of the word. It is also

¹⁶ See Takata Tokio, ‘Multilingualism in Tun-huang’, *Acta Asiatica: Bulletin of the Institute of Eastern Culture*, 78 (2000): *Tun-huang and Turfan Studies*, 49–70.

¹⁷ For studies on the Chinese medical manuscripts from Dunhuang see Vivienne Lo and Christopher Cullen (eds), *Medieval Chinese Medicine: The Dunhuang Medical Manuscripts* (London and New York: RoutledgeCurzon, 2005); Catherine Despeux (ed.), *Médecine, Religion et Société dans la Chine Médiévale: Étude de Manuscrits Chinois de Dunhuang et de Turfan*, 3 vols (Paris: Collège de France, 2010). The only Tibetan medical texts from Dunhuang which have been studied until now in any western language are those dealing with equine veterinary medicine, see Anne-Marie Blondeau, *Matériaux pour l’Étude de l’Hippologie et de l’Hippiatrie Tibétaines: à partir des manuscrits de Touen-houang* (Genève: Librairie Droz, 1972).

¹⁸ The manuscripts with an IOL Tib J signature are kept at the British Library. Those with a PT (Pelliot Tibétain) signature are kept at the Bibliothèque Nationale, Paris.

¹⁹ I discuss the foreign aspects of the Tibetan medical manuscripts from Dunhuang in ‘Central Asian Melange: early Tibetan medicine from Dunhuang,’ in Brandon Dotson, Kazushi Iwao and Tsuguhito Takeuchi (eds), *Scribes, Texts, and Rituals in Early Tibet and Dunhuang* (Wiesbaden: Reichert Verlag, 2012, in press).

²⁰ PT 1044, line 52.

²¹ PT 127, line 174.

²² The expression here is not clear. This suggested translation is based on the interpretation of the editors of this text, Byams pa phrin las and Luo Bingfeng. Luo Bingfeng, *Tun hong nas thon pa’i bod kyi gso rig yig cha gces bsdu* (Pe cin: Mi rigs dpe skrun khang, 2002), 233 (note 158).

²³ PT 127, line 182. For previous mentions of this phrase see: Géza Uray, ‘The old Tibetan sources of the history of Central Asia up to 751 AD: a survey’, in János Harmatta (ed.), *Prolegomena to the Sources on the History of Pre-Islamic Central Asia* (Budapest: Akadémiai Kiadó, 1979), 275–304; 304; Blondeau, *Matériaux pour l’Étude de l’Hippologie et de l’Hippiatrie Tibétaines*, *op. cit.* (note 17), 7.

²⁴ On Tibetan theriac see Christopher Beckwith, ‘Tibetan Treacle: A Note on Theriac in Tibet’, *Tibet Society Bulletin* (Bloomington, Ind.), 15 (June 1980), 49–51; Akasoy and Yoeli-Tlalim, *op. cit.* (note 10).

the case with the spelling of another *materia medica* Tibetan loan-word in the Dunhuang mss.: kur-kum, referring to saffron.²⁵

Another interesting point – which requires further research – is the notion of phlegm, *bad kan* in Tibetan. A notion which is fundamental to Tibetan medicine, that of the three *nyes pa*, usually translated as the 'three humours', of wind, bile and phlegm, does not appear as such in the Tibetan manuscripts from Dunhuang.²⁶ What we do find in the moxibustion manuals are many references to wind (*rlung*) as the main cause of illness. Bile and phlegm – each mentioned only once – also appear as a source of illness.²⁷ The form of the Tibetan word for phlegm – *peken* (*bad kan*, or as in the Dunhuang ms: *bas kan*) – is interesting as it seems to be derived from Persian or Arabic.²⁸ The loan-word for phlegm, then, might be a further trace of knowledge transfer from the west.

Looking in post-Dunhuang sources – both before the standardisation of Tibetan medicine as it is formulated in the *Four Tantras* [*Rgyud bzi*],²⁹ in texts such as the above-mentioned *Medical Method of the Lunar King* [*Sman dpyad zla ba'i rgyal po*] and the *Biji Book* [*Bi ji pu ti kha ser*], as well as in the *Four Tantras* themselves, one finds a significant Indian basis, various important Chinese inputs – and some Galenic input. The greater part of the physiological, pathological and pharmaceutical principles are derived from Indic medical notions. The Chinese input includes pulse diagnosis, moxibustion, many of the ideas linking micro- and macro-cosmos, the concepts of the five vital organs and the six hollow organs. The Galenic input includes diagnosis through urine.

All of this, however, does not quite add up to a 'meta-narrative' in which Galen settles in Lhasa and establishes a lineage and family, but rather brings us to the conclusion that both in the formative and the mature/classical periods of Tibetan medicine, the Galenic influence is clearly secondary to that deriving from India and China. How then should we understand the primary position given to Galenos in our Tibetan medical histories?

One important text for further examining this question is one of the earliest extant Tibetan-language medical histories, by Che rje zhang ston zhig po, dated to the early thirteenth century. It was not available to Beckwith at the time of his study in the 1970s. This text, recently studied by Dan Martin, sets medical knowledge within what it terms as 'The Seven Schools' [*lugs bdun*], referring to both divine and human realms.³⁰ Within the human realm, the list refers to medical systems from: India, Kashmir, Urygan (in present-day Pakistan), Nepal [*bal po*], Arabo-Persia [*stag gzig*], Dol po, Uighur [*hor*], Tangut/

²⁵ See Berthold Laufer, 'Loan-Words in Tibetan', *T'oung Pao*, 17 (1916), 404–552.

²⁶ *Nyes pa* literally means 'fault' or 'trouble'. These correspond to the Indian concept of the three *doṣa*, as they are termed in Sanskrit. On the problematic translation of *nyes pa* as 'humours', see Yonten Gyatso, 'Nyes pa: A Brief Review of its English Translation', *The Tibet Journal*, 30 and 31 (4 and 1) (2006), 109–18.

²⁷ For bile (*mkhris pa*) see PT 127, line 169; for phlegm (in the Dunhuang occurrence: *bas kan*, in later sources: *bad kan*) see PT 127, line 132.

²⁸ The western origin of this word has been pointed out by Marianne Winder, 'Tibetan Medicine Compared with Ancient and Mediaeval Western Medicine', *Bulletin of Tibetology*, 17, 1 (1981), 5–22.

²⁹ The origin and dating of this work has been a subject of heated debate for centuries. For an overview of these positions, see Samten Karmay, 'The four Tibetan medical treatises and their critics', in Samten Karmay (ed.), *The Arrow and the Spindle: Studies in History, Myths, Rituals and Beliefs in Tibet* (Kathmandu: Mandala Book Point, 1997), 228–37. Most scholars now agree that the *Four Tantras* dates to the 12th century. On this view see Frances Garrett, 'Buddhism and the Historicising of Medicine in Thirteenth-Century Tibet', *Asian Medicine: Tradition and Modernity*, 2, 2 (2007), 204–24; Leonard van der Kuijp, 'Za Hor and its Contribution to Tibetan Medicine, Part One: Some Names, Places and Texts', *Journal of Tibetology*, (2010), 21–50.

³⁰ For a study of this work see Dan Martin, 'An early Tibetan history of Indian medicine', in Mona Schrempf (ed.), *Soundings in Tibetan Medicine* (Leiden: Brill, 2007), 307–25.

Xixia [*me nyag*]; Khotanese [*li*]; Byzantine [*phrom*]; Chinese and Tibetan.³¹ Although the text discusses specific names – Tsan pa shi la ha and Urbaya – as doctors who originated from somewhere in the Arabo-Persian–Byzantine world – there is no mention of Galenos. Also – significantly – no preference is given to one system over another.³²

Perhaps then, the appearance of Galenos in Tibetan historical narratives of the sixteenth century and the prominence which is given to him at that time reflects the period of these texts' composition more than the period which the texts presumably describe?

The knowledge of Galen at this point in Tibet could have come via numerous routes. Galen, or rather Galenic medicine, was by this time established, or at least well known, in most cultures surrounding Tibet, for example among the Mughals of India, the Jews and Muslims of Central Asia, as well as western missionaries and Christians of the Eastern Church ('Nestorians') in China and Central Asia. I will briefly raise here some points relevant to the Christians of the Eastern Church and to Mughal India.

The Eastern Church in Central and East Asia

We have evidence of the presence of members of the Church of the East,³³ in Central and East Asia from at least the eighth century.³⁴ Following the persecution of the Christians of the Church of the East in Persia, many of them fled to Central Asia. We know, for example, that Kashgar and Samarkand were important centres of the Church of the East from the eighth to the tenth centuries.³⁵ Indeed, in the Turfan expeditions carried out by Grünwedel and von le Coq in the early twentieth century, many Christian texts in Syriac and in Sogdian were found.

Recent studies have provided extensive detail on Eastern Christianity in Tang China, in Dunhuang and in Turfan.³⁶ According to Chinese, Arabic, Syriac and Latin sources, members of the Church of the East were active in China predominantly in two waves: the first was during the Tang Dynasty. A strong re-emergence came in the thirteenth century during the Mongol period, to which we shall return below.

³¹ For a detailed analysis of the two western components of this and similar lists, ie. stag gzic and phrom, see Dan Martin, 'Greek and Islamic medicines' historical contact with Tibet: a reassessment in view of recently available but relatively early sources on Tibetan medical eclecticism', in Akasoy, Burnett and Yoeli-Tlalim (eds), *op. cit.* (note 9), 117–43.

³² There are, to be sure, more medical histories that do not mention Galenos, which I am not discussing here. For a discussion of these sources, see Garrett, *op. cit.* (note 7).

³³ On why the term 'Nestorian' in this context should be replaced by either 'Church of the East' or 'Church of Persia', see Peter L. Hofrichter, 'Preface', in Roman Malek (ed.), *Jingjiao: The Church of the East in China and Central Asia* (Sankt Augustin: Monumenta Serica, 2006), 11–14.

³⁴ According to Baum and Winkler, Merv (present day Uzbekistan) may have been Christianised as early as 360. Wilhelm Baum and Dietmar W. Winkler, *The Church of the East: A Concise History* (London and New York: RoutledgeCurzon, 2003), 46.

³⁵ Hans-Joachim Klimkeit, *Die Begegnung von Christentum, Gnosis und Buddhismus an der Seidenstrasse* (Düsseldorf: Westdeutscher Verlag, 1986), 11–12; see also B.E. Colless, 'The Nestorian Province of Samarqand', *Abr-Nahrain*, 24 (1986), 51–7.

³⁶ Malek (ed.), *op. cit.* (note 33); Michael S. Kordosis, *T'ang China, The Chinese Nestorian Church and 'Heretical' Byzantium* (Ioannina, 2008); Li Tang, *A Study of the History of Nestorian Christianity in China and its Literature in Chinese – Together with a New English Translation of the Dunhuang Nestorian Documents*, (Frankfurt: Peter Lang, 2002); see also Paul Pelliot, *L'Inscription Nestorienne de Si-ngan-fou*, edited with supplements by A. Forte (Kyoto/Paris: Scuola di Studi sull'Asia Orientale/Collège de France, 1996). Malek's edited collection also includes an extensive bibliography on this topic.

In Dunhuang, the extensive evidence for Christian presence comes from Tang dynasty Chinese sources.³⁷ Li Tang has recently enhanced our knowledge of Christian presence and influence in Central Asia through her examination of Chinese Christian documents from Dunhuang.

Other evidence linking the Church of the East with Tibet includes Syriac letters from the Patriarch Timothy I referring to Tibet³⁸ and Eastern Church monuments from peripheral Tibet.³⁹ There are also two Nestorian references in the Tibetan manuscripts from Dunhuang, including a mention of '*Jesus, the messiah*' and a drawing which appears to be a Nestorian cross,⁴⁰ although we probably need to be cautious not to read too much into this cross.

Did these Eastern Christians bring any medical knowledge with them to central Asia? While the importance of the role of the Nestorians in the transmission of medical knowledge in western Asia is well known,⁴¹ their role in the transmission of medical knowledge into central and eastern Asia has received hardly any attention to date. Medical texts in Syriac from the ninth to tenth centuries have been found at Turfan, another Silk Road site.⁴² In Bulayiq in the oasis of Turfan, an east Syrian monastery has been found. To date, only a small sample of the monastery's four hundred to five hundred Syriac texts have been published.⁴³ One important advance, however, has recently been made by Professor Sims-Williams, who, in a paper presented in the *Turfan Forum on Old Languages of the Silk Road* in Turfan in October 2010 and in a paper which was published in the *Bulletin of the School of Oriental and African Studies*, has been able to demonstrate that the medical fragments from Turfan, which he has translated, reflect medical knowledge which is also attested to in the so-called *Syriac Book of Medicines*.⁴⁴ As has been pointed out by Pormann and Savage-Smith, although the date of the final compilation of the *Syriac*

³⁷ For an overview and translation of the Chinese Nestorian documents from Dunhuang, see Li Tang, *op. cit.* (note 36), 103–204.

³⁸ See the various relevant chapters in Jean Dauvillier, *Histoire et institutions des Eglises orientales au Moyen Age* (London: Variorum Reprints, 1983).

³⁹ Colless has mentioned a rock at Drangtse in Ladakh which has three Nestorian ('Maltese') crosses engraved on it, together with inscriptions in Sogdian, Tibetan and other languages. B.E. Colless, 'The Nestorian Province of Samarqand', *Abr-Nahrain*, 24 (1986), 51–7; 52; Hans-Joachim Klimkeit, 'Das Kreuzessymbol in der zentralasiatischen Religionsbegegnung', *Zeitschrift für Religions und Geistesgeschichte*, 31 (1979), 99–115: 103–4. For a photo of the Drangtse rock, see Gerd Gropp, *Archäologische Funde aus Khotan, Chinesisch-Ostturkestan* (Bremen: Verlag Friedrich Röver, 1974), 367.

⁴⁰ For more details, see Géza Uray, 'Tibet's connections with Nestorianism and Manicheism in the 8th–10th centuries', in E. Steinkellner and H. Tauscher (eds), *Contributions on Tibetan Language, History and Culture: Proceedings of the Csoma de Körös Symposium held at Velm-Vienna, Austria, 13–19 September 1981*, Vol. 1 (Wien: Arbeitskreis für Tibetische und Buddhistische Studien Universität Wien, 1983), 399–429; see also the various relevant chapters in Dauvillier, *op. cit.* (note 38).

⁴¹ See primarily the studies by Raymond Le Coz, *Les Médecins Nestoriens au Moyen Âge: Les Maîtres des Arabes* (Paris: L'Harmattan, 2004) and *Les Chrétiens dans la Médecine Arabe* (Paris: L'Harmattan, 2006).

⁴² Miklós Maróth, 'Ein Fragment eines syrischen pharmazeutischen Rezeptbuches aus Turfan', *Altorientalische Forschungen*, 11 (1984), 115–25. The fragment discussed by Maróth is a Syriac prescription from the 9th to 10th centuries, dealing with hair loss; see also Peter Zieme, 'Notes on Uighur Medicine, Especially on the Uighur Siddhasāra Tradition', *Asian Medicine: Tradition and Modernity*, 3, 2 (2007), 308–22.

⁴³ See Baum and Winkler, *op. cit.* (note 34), 74.

⁴⁴ Nicholas Sims-Williams, 'Medical Texts from Turfan in Syriac and New Persian' (unpublished paper) and Nicholas Sims-Williams 'Early New Persian in Syriac Script: Two Texts from Turfan', *Bulletin of the School of Oriental and African Studies*, 74, 3 (October 2011), 353–74. I would like to thank Professor Sims-Williams for sharing these papers with me. See also Nicholas Sims-Williams, 'Sogdian and Turkish Christians in the Turfan and Tun-huang manuscripts', in Alfredo Cadonna (ed.), *Turfan and Tun-huang: The Texts* (Florence: Leo S. Olschki Editore, 1992), 51 and 54.

Book of Medicines is still unclear, the text contains much material dating to the sixth and seventh centuries.⁴⁵

Christians and Medical Knowledge During the Mongol Empire

The prominence of Eastern Christians and of their medical knowledge in central Asia became particularly significant at the time of the Mongol Empire. Khubilai Khan, himself a son of a Christian mother (Sorkaktani), employed a Christian physician as his personal doctor. Rashīd al-Dīn, the court-physician turned minister of the Mongol Ilkhanid court, tells us that this Nestorian physician was known as Īsā the Translator.⁴⁶ Īsā's Chinese biography indicates that he was born in Fu-lin, the Chinese transcription of Rum, the equivalent of what the Tibetan sources referred to above call Khrom, ie. Byzantium. After a particularly successful career as the Khan's personal physician, he later became a central figure in the medical establishment of the Mongol Empire. He set up the Islamic Medical Bureau (Guanghui) in the main Mongol capital (in what later became Beijing) and later became head of this bureau. He also went as medical envoy to Ilkhanid Iran in the mid-1280s and was back in China by 1287. It appears that while in Iran he met his local colleague, Rashīd al-Dīn.⁴⁷

Meanwhile, in Mughal India

Islamic medicine came to India with the Moslem conquerors and migrations in the twelfth century and was later established at the Mughal courts in the sixteenth century. In his autobiography, the Fifth Dalai Lama (1617/82) tells us how in 1675 he brought to his court a physician from India known for his expertise in cataract surgery.

This physician, Manaho, is accredited with a work on ophthalmology preserved in the Tibetan Tanjur [*bstan 'gyur*], the part of the Tibetan Buddhist canon composed primarily of various commentarial works.⁴⁸ The Tibetan title of this short work on the treatment of eye diseases, translated in the Potala by Lhun grub, is *Opening the Eyes to See* [*Mig 'byed mthong ba*]. The preface to the text says that the author was a physician of the Indian Shah Jahan and that he came from the country of Paripura. This location is yet to be identified, but according to Dan Martin, Paripura may indicate a link with Persia.⁴⁹ The Fifth Dalai Lama tells us that Manaho taught the art of cataract surgery to a local Tibetan physician, who later performed a successful operation on the Fifth Dalai Lama himself.⁵⁰ An analysis

⁴⁵ Peter E. Pormann and Emilie Savage-Smith, *Medieval Islamic Medicine* (Edinburgh: Edinburgh University Press, 2007), 19–20.

⁴⁶ On Rashīd al-Dīn, see Anna Akasoy, Charles Burnett and Ronit Yoeli-Tlalim, *Rashid al-Din as an Agent and Mediator of Cultural Exchanges in Ilkhanid Iran* (London: Warburg Institute, in press).

⁴⁷ On Īsā/Isu'a, see Kim Ho Dong, 'A portrait of a Christian official in China under the Mongol rule: life and career of 'Isa Kelemechi (1227–1308)', in Gaby Bamana (ed.), *Christianity and Mongolia: Past and Present* (Ulaanbaatar: Antoon Mostaert Center, 2006), 41–52; Shinno Reiko, 'Promoting Medicine in the Yuan Dynasty (1206–1368): An Aspect of Mongol Rule in China' (unpublished PhD thesis: Stanford University, 2002), 47–8; Thomas Allsen, 'Medicine', *Culture and Conquest in Mongol Eurasia* (Cambridge: Cambridge University Press, 2001), 141–60; 149–51; Paul Buell, 'How did Persian and other Western Medical Knowledge Move East, and Chinese West? A Look at the Role of Rashīd al-Dīn and Others', *Asian Medicine: Tradition and Modernity*, 3, 2 (2007), 279–95; Tu-chien Weng, 'Ai-hsieh: A Study of His Life' (unpublished PhD thesis: Harvard University, 1938).

⁴⁸ Toh. 4443, Derge Tanjur.

⁴⁹ Dan Martin, *Tibskrit*, entry on: Manaho, available on-line (several URLs).

⁵⁰ On Manaho, see Janet Gyatso, 'The Authority of Empiricism and the Empiricism of Authority: Medicine and Buddhism in Tibet on the Eve of Modernity', *Comparative Studies of South Asia, Africa and the Middle East*, 24, 2 (2004), 83–96; 90; Olaf Czaja, 'The making of the *Blue Beryl* – some remarks on the textual sources of

of this interesting text, and a comparison with Islamic ophthalmology of the time, should yield interesting data with which we could further our understanding of the transmission of ophthalmological knowledge in this period.

As discussed by Janet Gyatso, this episode is part of the Fifth Dalai Lama's active efforts to seek out medical experts from abroad, not only for his own well-being but also with a view of broadening Tibetan medicine's repertoire of diagnostic, therapeutic, surgical and pharmacological tools.

The person who most likely oversaw the invitation of this foreign physician, along with other physicians from neighbouring countries, was the Fifth Dalai Lama's regent, Sangye Gyatso. His crucial role in systematising Tibetan medicine needs to be seen in conjunction with his composition of his seminal seventeenth century text on the history of Tibetan medicine. It is in his text on the history of Tibetan medicine that the story on Galenos staying in Lhasa elaborated above is found.

Making Sense of Sixteenth-Century Tibetan Medical Histories

With all this in mind, we can now return to the narrative on Galenos with which we began. This text on how medicine began in Tibet appears in Pawo Tsuglag's [Dpa' bo gtsug lag] sixteenth-century history, the *Scholar's Delight* [*Mkhas pa'i dga' ston*]. This enormous work – the 1986 Chinese printed edition of it includes over 1500 pages – shows a remarkable acquaintance with neighbouring peoples and cultures. The genre of the work is that of 'religious history' [*chos 'byung*]. Like numerous similar works of this genre, the focus of this work is the history of Buddhism in India and Tibet. Pawo Tsuglag contextualises this history within a general description of the world and his detailed accounts on India and Tibet are followed by accounts on the history of Khotan, ancient China, recent China, the Tanguts, and Mongolia. Indeed, this work is considered to be one of the most well-informed Tibetan sources on the Mongol period. The last part is a kind of 'History of Science' text, dealing with the five classical fields of Buddhist knowledge – medicine being one of them – and the way they spread. It is in this section that the narrative, quoted above, appears.

In another section of this work, within his discussion of the influence of Tibetan lamas in the Mongol court, we are supplied with an indication that Pawo Tsuglag was aware of the Nestorian presence in the Mongol court. The Tibetan word he uses, a loan-word, is *er ka un*. This word seems to be derived from the Greek word *arkōn* [ἀρκόν], meaning 'the ruling one' or 'an abbot'. According to Paul Buell, who commented on this word in 1968, this form of the word came to the Tibetan via Sogdian and Middle Mongolian.⁵¹ In Mongolian the word for Christian is *erke'ün*. Although Paul Pelliot did not support the Greek source of the word, he pointed out that in Persian it is transcribed as *ärkäwün* ارکاوون.⁵² The apparent path of this word – from Greek – possibly via Syriac – to Sogdian (possibly via Middle Persian) – to Mongolian – and Tibetan – gives us an indication of a possible way this word could have taken its path in relation to medical knowledge.

the famous commentary of Sangye Gyatsho (1653–1705)', in Schrempf (ed.), *Soundings in Tibetan Medicine*, *op. cit.* (note 30), 345–71: 348; Dan Martin, 'Veil of Kashmir – Poetry of Travel and Travail in Zhangzhungpa's 15th Century Kāvya Reworking of the Biography of the Great Translator Rinchen Zangpo (958–1055 CE)', *Revue d'Etudes Tibétaines*, 14 (October 2008), 13–56: 29 (note 38).

⁵¹ Paul D. Buell, 'Some Aspects of the Origin and Development of the Religious Institutions of the Early Yüan Period' (unpublished MA thesis: University of Washington, 1968), 155 (note 311). I would like to thank Paul Buell for making his thesis available to me. The quote appears on p. 77.

⁵² See Paul Pelliot, *Notes on Marco Polo: Ouvrage Posthume*, Vol. I (Paris: Imprimerie Nationale, 1959), 49.

Galenos' Colleagues

Returning to the quotes with which we began, we ought to also have a closer look at the two other physicians who allegedly came to Lhasa with Galenos. The accounts mention a Chinese physician and an Indian one. Who are these two colleagues of Galenos?

Beckwith identified the Chinese one as the Yellow Emperor, and the Indian one as Bharadvāja. The Yellow Emperor is known in the Chinese tradition as the origin of medical knowledge. Bharadvāja is described in the opening chapter of the *Carakasamhitā* as the member of the assembly of sages who approaches Indra requesting his help in removing illnesses which had befallen humankind. Bharadvāja's request is granted by Indra, who transmits medical knowledge to him. Bharadvāja then disseminates this knowledge to other sages. Bharadvāja is also mentioned in other Indian medical treatises, as well as in the Vedic literature, the epics and the Purānas.⁵³ Both the Chinese and the Indian physicians are *mythical* figures. The point that Galen is sharing his knowledge-transmission role with two mythical figures is worth pondering on. How should we interpret the historical role of 'Galen' in this context?

This sort of juxtaposition is nothing new to the genre of the religious history [*chos 'byung*] to which Pawo Tsuglag's narrative belongs. When dealing with Tibetan historiography,⁵⁴ western scholars have noted it to be essentially of 'hagiographical and mythical' form,⁵⁵ containing – what some scholars have termed – 'a lack of distinction between reality and fiction' at least in the way we assume them to be defined in western-based scholarship.⁵⁶ A clear-cut distinction between, so-called, 'historical truth' and 'fiction' may prove to be not only impossible to delineate, but also unfruitful for understanding the Tibetan sources. One common 'methodology' for treating such accounts has been to strip what is presented as historical account from what is judged to be, in western eyes, implausible events. The late Michael Aris has pointed out that what in western eyes are termed 'mythical' events constitute a fundamental part of Tibetan life.⁵⁷ Geshe Samdhong Rinpoche, one of Tibet's most learned lamas, and formerly the Prime Minister of the Tibetan Government in Exile, writes in his foreword to another *chos 'byung* text, Tāranātha's *History of Buddhism in India* (1608):

When I walk on snow-laden paths of hills my each footprint appears clear, deep and distinct through which I can trace my path back without effort. But after a while due to wind and fresh snowfall all traces of my footsteps are wiped out in the snow. The residue is what sticks to my imagination. It is the same with the study of history

. . . [T]he logic of today recalling the events of past times with indecisive evidences must surely be inaccurate in many different ways.

⁵³ For an overview of these, see Gerrit J. Meulenbeld, *A History of Indian Medical Literature*, Vol. IA (Groningen: Egbert Forsten, 1999–2002), 152–4; Vol. IIA, 158–60, 764, 781.

⁵⁴ In Tibetan there is no one word that correlates to the term 'history'. We should therefore bear in mind that from the outset, trying to analyse 'Tibetan histories' is problematic. In Tibetan literature the following genres have been collectively termed as 'history': *chos 'byung* – origin of religion, religious history; *rgyal rabs* – stories/histories of kings; *ldan rabs* – stories/histories of monasteries; *lo rgyus* – tiding of years, records of years. On the different historical genres in Tibetan literature, see Leonard van der Kuijp, 'Tibetan historiography', in José I. Cabezón and Roger Jackson (eds), *Tibetan Literature: Studies in Genre* (New York: Snow Lion, 1996), 39–56.

⁵⁵ Giuseppe Tucci, *Tibetan Painted Scrolls*, 2 vols, Vol. I (Rome: La Libreria Dello Stato, 1949), 142.

⁵⁶ Per K. Sørensen, *A Fourteenth Century Tibetan Historical Work: Rgyal-Rabs Gsal-Ba'i Me-Loñ: Author, Date and Sources – A Case Study* (Copenhagen: Akademisk Forlag, 1986), 260.

⁵⁷ Michael Aris, *Hidden Treasures and Secret Lives: A Study of Pemlingpa (1450–1521) and the Sixth Dalai Lama (1683–1706)* (Delhi: Motilal Banarsidass, 1988), Introduction.

The line of demarcation between history and legend is too thin to observe while writing: the two overlap each other unconsciously and unknowingly.⁵⁸

Samdhong Rinpoche is directing us towards a more careful reading of our sources. The task in front of us is a difficult one, particularly since we stand, as Matthew Kapstein beautifully described it, in front of a hall of mirrors:

[T]he study of early medieval Tibet may be compared without much exaggeration to the view from one end of a great hall of mirrors: there is little basis initially for determining which of the many reflections one perceives actually originate from the opposite end of the hall, which only reveal persons and objects situated in the intervening corridor, which are just optical illusions, and, finally, which are in fact the observer's own reflection coming back upon himself.⁵⁹

Such a state of affairs, as Kapstein notes, is not unique to the study of Tibet, but other difficulties *are* unique to Tibet:

The far end appears to be closed off by a curtain, which, so far as we can tell from our vantage point, is translucent and at the same time reflective, with several small gaps through which some parts of the enclosed hallway may be seen. Among other things, we can discern that, in the area immediately behind the curtain, all the mirrors are shattered. The curtain, perhaps, was set in place by an architectural restoration firm that was never able to complete its work. . . .

[T]he far end of the corridor is the history of the early medieval Tibetan empire; the rubble partially visible behind the curtain is the original documentation that survives – above all, the Dunhuang Tibetan manuscripts and the Central Tibetan Pillar inscriptions; the curtain is woven of the great historical myths of the early empire that were elaborated in the centuries following its collapse, and that established the patterns that would dominate all later Tibetan historiography; its translucency represents the incorporation within these myths of authentically ancient traditions; while its reflectivity represents the distinctive perspective of the postimperial period during which they were redacted.⁶⁰

Conclusion

Kapstein's allegory of the hall of mirrors provides us with a framework with which we can interpret the sources and data I presented above. While there is good reason to believe that trickles of western medicine came into Tibet from its formative stages around the eighth century, based on the 'bits of rubble' which we have from this period, ie. the few original sources, we really cannot speak of a 'Tibetan adoption of Greek medicine' in the seventh and eighth centuries, as many authors have referred to it. It seems rather that the key role given to Galenic medicine was transposed during the sixteenth and seventeenth centuries back into the days of the Tibetan Empire, for reasons which are probably more reflective of the period of the composition of these histories than of their object of reflection.

⁵⁸ Samdhong Rinpoche, p. xi, Foreword to *Tāranātha's History of Buddhism in India*, Debiprasad Chattopadhyaya (ed.) (Delhi: Motilal Banarsidass, [1970] 1997).

⁵⁹ Matthew Kapstein, *The Tibetan Assimilation of Buddhism: Conversion, Contestation, and Memory* (Oxford: Oxford University Press, 2000), 24.

⁶⁰ *Ibid.*