

Brief Historical Timeline of the Traditional Tibetan Medicine System: Sowa Rigpa “The Science of Healing”

Throughout the Himalayan regions exists a unique system of medicine known as Sowa Rigpa “The Science of Healing”, indigenous to Tibet prior to Buddhism becoming an integral aspect to the countries culture and its neighboring countries. Empirical evidence to the Tibetan Medical system predating Buddhism appears during the rise of the first Tibetan King Nyatri Tsenpo around 200 B.C in the Bön text Jam-ma Tsa-drel. The text describes the lives of twelve Bön scholars which includes a learned medical practitioner whom is said to have treated diseases using both hands on therapies, and medical formulas.

To understand the historical context of how pre-Buddhist era operated within Tibet, only later becoming incorporated into special aspects within Tibet’s Vajrayāna Buddhism, wholly unique from other Buddhism practiced worldwide; is to understand how Bön shamans, and animism played a pivotal role in society and medicine.

Working within nature’s rhythms and cycles, early Tibetan healers observed seasonal and environmental influences and the inseparability of nature’s influence on human life. This knowledge is understood in the first Tibetan medicine known to be prescribed, where boiled water was given for indigestion, melted butter applied to wounds, or making compresses for swelling using the residual barley grains after making chang (fermented barley wine). Therefore, fundamental integration with nature informed ancient Tibetan civilization in just how humans could not just survive, but thrive with health. Even in such a high altitude and sometimes very harsh climate. Tibetan physicians had carried this ancient relationship, with respect to and for natural phenomena, centuries before many cultures had any systematic medical care.

THE BUDDHA

To reference the arrival of Buddhism globally, and later to Tibet where it became Vajrayāna Buddhism, we use the Tibetan astrological system known as the Phuglug Tradition. This can vary with modern systems of calendar date reference, for the Tibetan, in this system, Shakyamuni Buddha was born first as Prince Siddhartha Gautama in a kingdom in Nepal circa 961 B.C.

The Buddha is a term meaning “The Awakened One” meaning he attained a level of realization known as ‘enlightenment’ or freedom from samsara and the habituated cycles of birth and death. Common understanding is that Buddha was born, enlightened and began to spread the Buddha Dharma (a method to awaken oneself from the the ultimate causation of human suffering, ignorance) roughly 600 years before Jesus Christ appears.

Like all great mystical religious leaders of the world, information about his life were not committed into writing until several centuries after his death, shortly before the beginning of the Common Era,. Therefore exact dates and events of his life in early Buddhist texts cannot be regarded as historically accurate, though his existence is accepted by scholars. It is typically believed that Buddha appeared within the 6th-4th century BCE. Born in Lumbini, near Kapilavastu, Shakya republic, in the Kosala Kingdom, in present day Nepal.

He is said to have lived to 80 years old, having taught for 45 years until 881 BC. During his enlightened lifetime he taught Buddha Dharma, which spread throughout India and Nepal, eventually making its way to Tibet and further East. According to the gSo-rig Kuns ‘Dus text, the appearance of Buddhism in Tibet occurred during the reign of the 28th Tibetan King, Thothori Nyantsen (245-364 A.D.,).

The Buddhist teachings gradually assimilated into the animistic Bön religion and influenced every aspect of Tibetan culture, including the cohesive system of medicine and astrology that itself arrived from a confluence of inherent Tibetan healing philosophies and influences of valuable visiting physicians who came and or stayed in Tibet establishing a medical lineage. The beginning of this lineage establishment later produced the “father of Tibetan Medicine” Yuthog Yonten Gonpo, who is attributed with authoring the primary medical text, the rGyud-bZhi, or Four Medical Tantras. The Four Tantras remains the unbroken system of healing in use thousands of years later.

It was during the entrance of Buddhism to Tibet under King Thothori Nyantsen that two prominent sibling physicians, Biji Gaje and Bila Gazey, brother and sister, enter the scene. They were said to have already been quite accomplished in The Science of Healing (ancient Ayurvedic medicine) prior to studying under the great Physician Atreya at Taxilla, located in present day Pakistan. Further studies and travels took them widely throughout India, to China, Nepal and East Turkistan (now under China and called Xinjiang Autonomous Region). They received additional medical teachings from the esteemed Kumara Jivaka, at Magadha. Their

appearance in Tibet was said to have been prophesied by Jetsun Arya Tara. Upon hearing news of the siblings skills for healing of the Tibetan people, they were invited to the palace. King Thothori Nyantsen requested they remain to teach medicine, and gave his daughter Yidkyi Rolcha as a bride to Biji Gaje because this would be a common thing to do in ancient times. Marriages formed alliances and bonds across cultures.

MEDICAL LINEAGES OF TIBET

From Biji Gaje and the kings daughter Yidkyi Rolcha's marriage, the first known Tibetan physician in the Yuthog lineage was born, Dung gi Thorchog, in the 4th century. Typical traditional lineage based medicine was through family. Thus, he trained with his father from a young age and became skilled in the healing arts: pulse reading, pharmacology, external therapies such as metza (moxibustion), bloodletting, diagnosis and treatment of injuries, wounds and general and complex diseases.

Dung gi Thorchog became as eminently known as his father, acting as personal physician to his king grandfather. Training his own and their successive sons, the medical lineage continued. All these sons served as personal physicians to Tibetan kings for four consecutive generations. Thus this is how the Tibetan medical lineage leading down to the famous Yuthog Yonten Gonpo began. The accounts of this history are chronicled in the Yuthok Sernying kyi Namthar text.

During the reign of the 33rd King, Songtsen Gampo, (617-650 A.D.,) he had two wives, one from Nepal and one from China. In ancient times when a princess would leave her home to live her remaining life in a foreign land, of course she would bring everything she would need. Including medical texts and supplies. The Chinese wife, Kong-jo, brought a medical text which was said to be translated into Tibetan by Hashang Maha Deva and Dharma Kosha. At that time King, Songtsen Gampo invited three eminent physicians to Tibet to share their knowledge. Bhardvaj from India, Han Wang Hang De from China, and Galenos from Persia. Each physician wrote a treatise which was assimilated into a seven volume text known as Fearless Weapon, Mijigpe-Tsoncha.

Patronage by kings of the healing sciences continued. Of particular importance, in the 8th century with the reign of the 38th King, Trisong-Deutsen, the first ever recorded 'world medical conference' was held at the first Buddhist monastery of Tibet, established by Guru Rinpoche at Samye. Sponsoring this event King Trisong-Deutsen had invited eminent physicians from India, China, Persia, East

Turkistan, and Nepal to debate and discuss their various systems theories and methods of healing. Yuthog Yonten Gonpo, an important descendent in Biji Gaje's medical lineage, is said to have represented Tibet. These accounts of the 33rd King, Songtsen Gampo down to the 38th King Trisong-Deutsen's patronage of medicine are according to the Dungkar Tsigzod Chenmo text.

The influence of the 'Father of Tibetan Medicine' otherwise known as 'Elder' Yuthog Yonten Gonpo. The gSo-rig Kuns 'Dus states he was born June 25, 708 A.D. Carrying on the prior lineage based medical system, he began his training early and was said to be remarkably accomplished in theoretical knowledge. Having debated other eminent physicians and scholars at a early age, and also through later appointment as the king's physician, he traveled extensively to India several times to study with eminent physicians as well as China. He established Tibet's first medical college, Tanadug at Kongpo Manlung in the south of Tibet in the year 763 A.D. That medical school is no longer in existence however. Yet throughout his lifetime of dedication to the propagation and promotion of Tibetan medical sciences, his lineage continues on to this very day.

Scholarly debate aside, typically physicians attribute the compounding of rGyud-bZhi, The Four Tantras, to Sangye Menla, the Medicine Buddha who is ultimately an emanation of Shakyamuni Buddha. Yuthog Yonten Gonpo is considered to either be an emanation of the Healing Buddha himself, or at the least, an extraordinary being who had capacity to travel and receive teachings in Medicine Buddha's realm. Accomplished in theoretical knowledge by the age of 10. Thus, the attribution of the rGyud-bZhi, when you purchase any current published form of the Four Medical Tantras, you will see the author listed as Yuthog Yonten Gonpo. Written in question and answer format the Medicine Buddha's mind emanation and speech emanation gave a discourse among an audience of four classes of beings.

In the 2010 PhD dissertation by venerated 21st century Tibetan doctor Yang Ga, his extensive research argues that there is not just one source of root text for the Four Medical Tantras, but rather "There were several early works that were important during the time of Yuthog Yonten Gonpo, and it also identifies his own influential works that functions as draft versions of the rGyud-bZhi."¹

Regardless of historical or scholarly discernment, the line of highly realized masters of medicine trained in lineage fashion continued and is well documented

¹ Ga, Y. (2010). The sources for the writing of the "rgyud bzhi", Tibetan Medical Classic1 (dissertation). ProQuest LLC, Ann Arbor , MI. (Pg 8)

and continues to this day. While modern regulatory systems are now being introduced, the ancient parent to child, or uncle to nephew or niece types of training have now faded in this current generation. The primary text and theories remain unchanged since the 8th Century when the cohesive system was instilled as Buddhism entered Tibet. Particularly affluent times was in the 11th-12th century attributed to the ‘Junior’ Yuthog Yonten Gonpo, (1126-1202 A.D.,) and the 17th Century with the support of heads of state championing the healing sciences.

Again, up for some scholarly debate, most various text put ‘Junior’ Yuthog Yonten Gonpo between the 10th and 12th Centuries. None-the-less, this was a very productive time in Tibet’s medical history when the Junior Yuthog Yonten was said to have begun his studies at age eight, quickly becoming a prolific student, scholar and Buddhist master.

Junior Yuthog studied in India at least six different times and sought both scholarly and religiously pertinent pursuits in other countries. Uḍḍiyāna (also spelled Oḍḍiyāna) was considered ‘North’ and the birthplace of Guru Padmasambhava (Guru Rinpoche) whom is credited for Buddhism’s arrival into Tibet. This is a small region in early medieval Gāndhāra, in Swat district of modern-day Pakistan. Likewise, Persia, Nepal and Sri Lanka were also documented in various texts and commentaries in which Junior Yuthog states his trips to India were in specific pursuit of studying various early medical texts. He in fact listed specific foreign medical texts. Some of these texts are attributed to the Buddha himself, as well as Nāgārjuna’s famous medical text known as White and Black Moonlight, ZlaZer dKar Nag, Vāgbata’s treatise on Astāngahrdayasamhitā, which is “one of the most important works on Old Indian medicine (āyurveda), is unattested in Central Asia.”² Such visits, said ages he pilgrimaged on these trips, and the text names are given in the Shog Dril Skor Gsum text³, all which ultimately helped to shape the Four Medical Tantras as we know it today.

TWO MAIN LINEAGES OF TIBETAN MEDICINE

Two main streams or lineages of commentary and style of practice of Tibetan Medicine the “Jangpa lineage” and secondly the “Zurlug lineage” are well known inside Tibet and attributed to the following masters. Firstly the “Jangpa lineage” and secondly the “Zurlug lineage”. The reason for these caring styles is due in part

² Asian Medicine, 4(1), 113-173. doi: <https://doi.org/10.1163/157342108X3812412>

³ Ga, Y. (2010). The sources for the writing of the “rgyud bzhi”, Tibetan Medical Classic3 (dissertation). ProQuest LLC, Ann Arbor, MI. (Pg 99-100)

also because Tibet itself is a large geographic area. The climate and growing conditions vary widely in the different areas. It therefore makes sense that just as you see in other traditions, such as in Chinese or Ayurvedic medicine, the climates vary both in North to South so famous doctors write commentaries with use of specific medicinal substances which vary by prescription formulations and methods. The gSo-rig Kuns 'Dus commentaries discuss both masters.

Jangpa Namgyal Dragsang (1395-1475 A.D.,) was born into a royal bloodline seventh in the lineage of King Se'u of Minyag. Like many adept masters, he studied the medical texts at the early age of ten. A diligent prodigy of both Sutra and Tantra, he was awarded the title Rinpoche Thamka, by the King Gongma-Sechen. In previous history, to be awarded the title of Rinpoche meant the person was particularly adept in scholastic and practical understanding of Buddha Dharma. Unlike modern times, when some students will start to call someone Rinpoche out of respect or appreciation, in such ancient instances, such titles were not awarded easily. Rather here, in Jangpa Namgyal Dragsang's case, it carried the weight of accomplishment in both Buddhism and Medical Sciences. Jangpa Namgyal Dragsang is the author of eleven books on medicine, as well as texts on astrology, an integral aspect of the medical sciences, as well as Buddhist philosophy texts.

The Zurlug lineage stems from a man named Zurkhar Nyamnyi Dorjee (1439-1475 A.D.,) whom also began his study young. He is attributed for writing a famous text at the young age of sixteen, Mannag-Jewa-Ringsel alongside other books on medicine. His grandson Zurkhar Lodoe Gyalpo wrote a commentary on rGyud-bZhi which is called Oral Instructions of my Forefathers, Mepoi Zal-lung.

These two specific lineages of famed methods and commentaries within Tibetan Medicine have remained well known, passed down and studied all the way through the twenty-first century.

PATRONAGE FOR THE HEALING SCIENCES TO GROW

Various heads of state, such as the very famous Fifth Dalai Lama, Ngawang Lobsang Gyatso (1617–1682) and his regent, Desi Regent Sangye Gyatso (1653-1706 A.D.,) were huge supporters of Tibetan Medicine and the healing sciences.

The famous regent Desi Sangye Gyatso began his studies at only five years old. By his eighth year, he was learning directly from the great Fifth Dalai Lama. Desi

Sangye Gyatso was an esteemed expert in Tibetan grammar, astrology and medicine. Later he was appointed as Regent by the famous Fifth Dalai Lama, acting in that powerful position and directly supporting the medical sciences heavily during his 26 year rule. He is well known for the rebuilding and expanding the Potala Palace to the current size. Another important historical duty was upon the passing of the Fifth Dalai Lama, he had the famous 'Golden Stupa of the Great Fifth Dalai Lama' built. Regent Desi Sangye Gyatso personally and politically undertook a huge expansion to both the availability of study and access to Tibetan Medicine for the general people of Tibet, and its systematic and formal educational system.

Chagpori Medical College (Iron Mountain Medical School) was established in Lhasa in 1696 (in the Fire Mouse year) at the request of the Fifth Dalai Lama. This monastic medical school sat on the mountainside directly opposite to the Potala Palace in Lhasa. Under the regent's guidance, the famed seventy nine medical thankas, depicting human anatomy, still in use today, were produced, the rGyud-bZhi was edited and published.

Desi Sangye Gyatso himself was a limitless patron to the healing sciences by writing some of the most famous books on medicine and astrology. The Vaidurya-Karpo (White Beryl), on astrology and perhaps the most popular commentary on the rGyud-bZhi is the Vaidurya sNgon-po (Blue Beryl). He authored a medical practice text named Man-ngag Lhen-thab. Likewise, his historical book the Sorig Khogboog, on the early history of Tibetan Medicine is of great significance. One might argue that the Regent Sangye Gyatso was one of the primary reasons for the flourishing of Tibetan Medicine inside Tibet during that important time.

MODERNIZING TIBETAN MEDICINE EDUCATIONAL OPTIONS

The Thirteenth Dalai Lama realized more needed to be done for access to study and care for the general population. This was in part due to general monks vows, where they could not even touch a woman. While monastic physicians do not take 100% full ordination vows, due to the need to treat patients and work with human bodies, both the lay females of Tibet and nuns alike culturally were unable to access as much care as needed. Particularly so with the majority of physicians being male monastics. While historically, there were always female physicians; remember that the earliest doctors to come and remain in Tibet were the brother and sister pair Biji Gaje and Bila Gazey. Still, there were far fewer female doctors. Just as Bila Gazey was a woman practicing in ancient times, so too did other

Tibetan women train in the classic healing sciences and in a lineage, father to child, or master to pupil method.

Chagpori at that time remained restricted to male monastic students. As the premier medical institution, thus women were not as widely trained. Moreover, culturally speaking, most women would not seek a monk out for pregnancy care, or gynecological issues. With his very forward thinking, the great Thirteenth Dalai Lama realized the answer to this issue was in training lay practitioners as physicians. Making learning opportunities more open to both men and women. Therefore, in 1916, also in Lhasa, Men-Tsee-Khang (Men=Medicine / Tsee=Astrology / Khang = House) was established (in the year of the Fire Dragon.) This revolutionary move allowed non-monastic persons of both genders to become educated in either the medical or astrological sciences and increase access to much needed healthcare.

Dr. Khyenrab Norbu, a former Lhasa Chagpori Medical College student is notable to mention in the not so far distant history. Acting as the Drepung Monastery medical clinic director, he was appointed to the post of Junior Physician to the Dalai Lama in 1918 and spent his life promoting medicine and astrology by doing research and authoring many famous texts. He also trained some of the most famous physicians of the 20th century whom are even famous in the short time Tibetan Medicine has been in Western and European countries. These include Dr. Tenzin Choedak, Dr. Lobsang Wangyal, Dr. Yeshe Dhonden and Dr Jampa Thinley.

CURRENT BORDERS FOR TIBETAN MEDICINE PRACTICE EXPANDS

Tibetan Medicine was spread early throughout the Himalayan regions and widely practiced by Tibetan-Indo Buddhists for thousands of years. The influence of the Silk Road carried not just religion, knowledge and spices. A large majority of those spices found in your kitchen cabinet today are common medicines in many Tibetan formulas. Practiced to the West of Tibet, in Northern India and Ladakh. A region that historically, at various times, was part of Tibet throughout history. The people of that area practicing Tibetan Buddhists, but alongside their own unique culture. Currently this area is administered by India as a union territory and constitutes an eastern portion of the larger Kashmir region. Currently Kashmir remains a disputed area between India and Pakistan since 1947, and India and China since 1959.

To the South, are Nepal's Northern mountainous borderlands. Dolpo, Nupri, Tsum and Solukhumbu areas are inhabited by descendants of the people of Tibetan.

Many such trans-Himalayan people are culturally and linguistically mirrors of Tibetan culture through practice of Buddhism, culture and the medicine systems. The Sherpa's, for example have a written lineage that looks Tibetan and have practiced traditional Sowa Rigpa for centuries just like many of these northern tribes. Likewise, to the Southeast in the Buddhist kingdom of Bhutan, Sowa Rigpa is the national health system currently in practice today.

Tibetan Medicine has now spread throughout India and indeed worldwide as the Tibetan diaspora have moved throughout the globe since the early 60's. Multiple colleges of Traditional Sowa Rigpa Medicine are found in Nepal, Bhutan, India and the Tibet autonomous region.

EDUCATION OF A MENPA

Traditionally the course for the Menpa Kachupa degree (Doctor of Tibetan Medicine) is a five-year rigorous study and one to two years internship. Though most physicians will tell you it takes nearly a decade to truly become a "junior" physician capable of dealing with more complexity. There are no schools outside of Asia which give the full five years in person, with written and oral examinations and full internship possibilities are difficult to obtain. The meticulous exam based training equivalent to that which you find in Asia is yet to be fully ripened in the West. However, the ancient lineage based training model has ended in the last decade inside Asia.

Regulations and standards are currently being implemented to modernize the traditional Tibetan medical educational system within Nepal and India and throughout its counters of origin. This will help standardize medical education, limit degradation by maintaining and updating the authenticity of the practitioners of this system. Specific registration process for physicians will ensure genuinely trained Menpa have standardized education, and help to preserve cultural accuracy and ensure qualified complete study of this precious unbroken medical lineage has taken place. Schools will continue the traditional oral and written exams, alongside study methods and cultural aspects utilized for centuries. Ultimately, the elimination of the lineage based model is protective against cultural appropriation.

In addition modern sciences are being introduced so Menpa can interact with allopathic physicians and understand models of care and basic laboratory test most all in health related fields must know.

However, implementing the preservations via regulation of the traditional system has brought specific challenges. Entrance exams need to maintain standards set by the cultural needs around Tibetan written and spoken language, as well as introducing and including western sciences within the timeline of the traditional 5 year model.

Particularly difficult in this transition is the impact to less well funded traditional schools of Tibetan Medicine. In order to comply with new government requirements, such as having a new batch of students every year and graduating a set yearly comes with currently not having classroom or dorm room capacity.

This is both a time of expansion for all of Tibetan Medicine and growing pains are expected. Some of these new regulatory and registration processes for qualified physicians trained in authorized schools were wisely initiated under the Central Council of Tibetan Medicine, based in India. This ultimately ended the lineage-based training model which existed for centuries in order to ensure educational and cultural standards.

This may seem difficult to see such large changes to this thousands of years old system, particularly to lineage based training given the rich history of masters trained in this way.

However, these new systems ultimately maintain authentic heritage, cultural and spiritual contexts which with globalization and popularity of Tibetan Medicine are an increasing concern of diminishing. With strict entrance exams and requiring full traditional college course and semester based teachings, Menpa who are given the title of Menpa Kachupa can be relied on to contain a quality education behind their degrees.

Regulations will continue to require competent exam results of the theoretical methods found in the primary text, the rGyud-bZhi and its many commentaries. This too, ensures that those who seek out a Menpa for treatment, will indeed be interacting with someone well trained in the traditional manner. Such modern regulatory changes will also protect the original texts and commentaries, ensuring they are learned in full. Putting this systems text into other languages remains a challenge, both culturally and ethically. Exam standards will continue to ensure the rGyud-bZhi text is not learned in only a surface manner. Bear in mind it was only in the last decade that the full text itself was translated to English and now being translated to other languages.

WORKING TO PRESERVE TRADITIONAL TIBETAN MEDICINE

Chagpori US

We are a registered 501c3 Charitable Religious Organization since 1986. Tax ID #84-100605

Our mission is to help in the preservation and promotion of the spiritual and practical aspects within the Sowa Rigpa Traditional Tibetan Medical System.

Specifically to support and educate Tibetan Buddhist nuns through the traditional Tibetan medical education process. Provide aid to the infrastructure and needs of the entire Chagpori Institute: college, clinics and pharmacy. We offer free and paid literature and teachings on traditional Sowa Rigpa, The Healing Science of Tibet.

Chagpori trained physicians now reside worldwide. In the United States and North America we at Chagpori US are trying to help promote and preserve the tradition, while also giving opportunity to further Tibetan Medicine and research both inside Asia and offer clear and accurate teachings within the United States. The promotion of the Buddhist spiritual components unique to Tibetan Medicine are vital to continue just as Chagpori has historically placed emphasis on the Buddha Dharma's role in the basic medical theory.

The above historical accounts and commentary is written by Nashalla G Nyinda TMD Menpa, Ma Acu. I confess any mistakes or omissions as my own. It is with the interest in informing the general public the authentic and unbroken lineage of the Sowa Rigpa Tibetan Medical system that I give this brief history. References texts mentioned are given below and the information on Chagpori in India is provided by the Institute itself. For further information please see: www.chagpori.org

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