



Short History of Tibetan Medicine

- Pre-Buddhist period
- The Development of Tibetan Medicine from the 7th to the 10th Century
- Foreign Medical systems
- Schools of Tibetan Medicine

PRE-BUDDHIST PERIOD

The Medicine Man

In the early period of human life, Tibetans, just like other civilizations, discovered fire, hot spring waters, wine-making, milking and many other methods of survival. Also, during the reign of the Tibetan king Pude-gungyal¹, irrigation was developed and the king's minister Rulekye found how to produce metal from iron ore. At that time, Tibetans used curing methods such as hot and cold fomentation, and they developed moxibustion therapy among other therapies. With the treatment of wounds and injuries, they also discovered the benefit of hot melted butter and bloodletting. In short, they began to develop many natural therapies to heal the disorders and temporarily relieve pain.

Tibetan Folk medicine

The knowledge gained by elders passed on and through the family and expanded into an oral tradition of curing; healing methods mainly came from legends and healers, developed fairy tales, divine predictions, spirit propitiation, and dream tellers, as ways of herbal healing, hot spring water, cold and hot fomentation were also used to relieve pain and heal wounds.

Bon Shaman healers

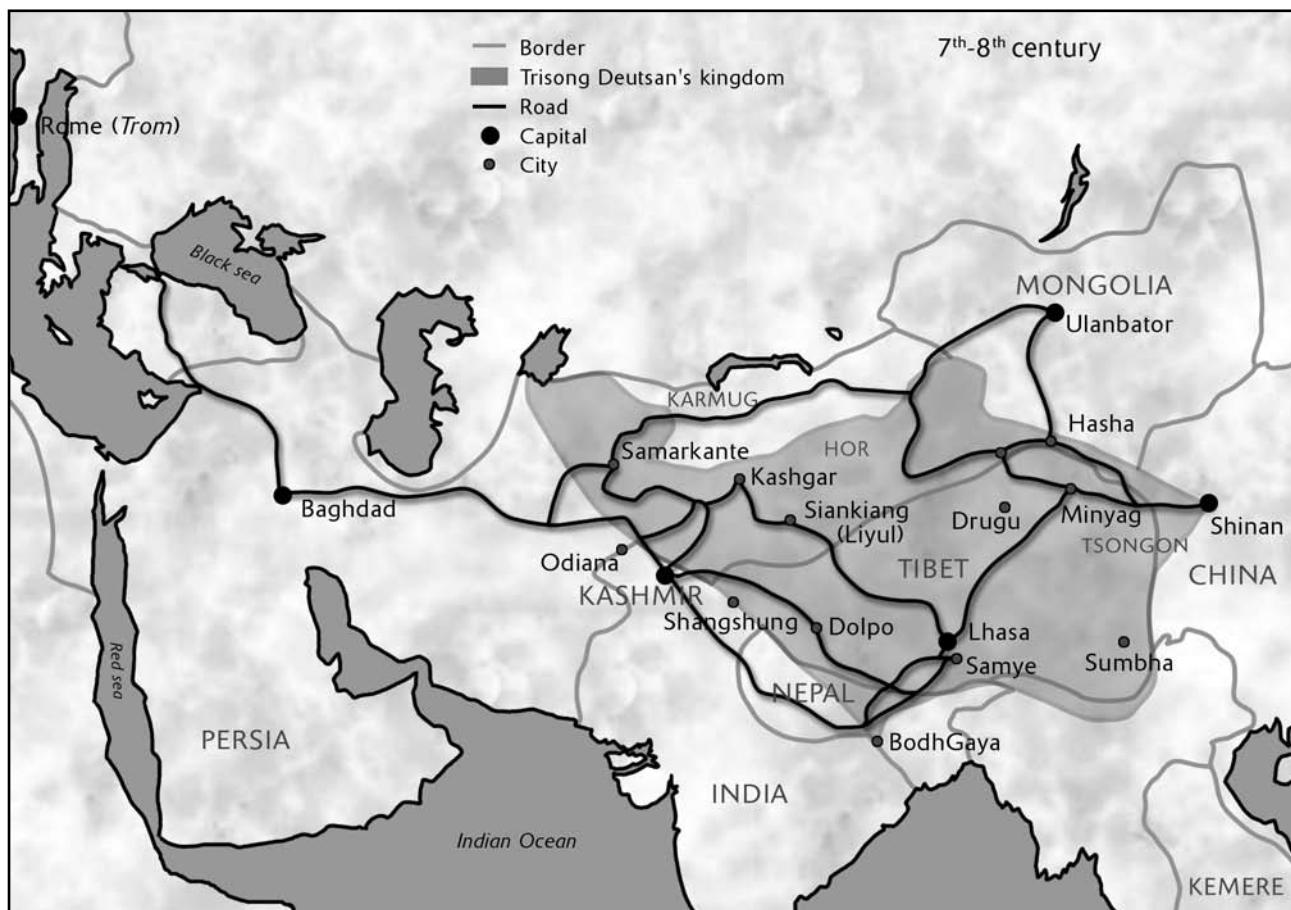
Mount Kailash and Manasvarovar Lake were the center of the ancient Tibetan civilization of the Bon religion. **Tonpa Shenrab Miwoche** was a legendary Bon master who is believed to have modified the Bon culture into becoming the Bon religion. The Tibetan Bon scholars believe that all shaman faith and practices in Siberia and central Asia originate from this legendary place and the ancient Bon civilization. The Bon shamans developed healing practices as a protection against natural calamities and disorders in Tibet. They believed that evil spirits and misfortune were the source of all diseases because these spirits govern human society and provoke the cause of disease to torment human beings. As a protection against the spirits, the Bon shamans developed shamanic rituals propitiating the ancestor spirits and demons. Sometimes ancestor spirits possess and communicate through a shaman or medium. This is why the healers developed the practice of animal sacrifice and offering to the spirits to placate them with a patient substitute. This practice and way of curing disease was very widespread throughout Tibet and central Asia. Later, Bon shaman medicine was modified and written in books by white Bon scholars of Tibet (not practicing sacrifices) who called it Bon medicine. It has its own history and complete system called *Bhumshi*.

THE DEVELOPMENT OF TIBETAN MEDICINE FROM THE 7TH TO THE 10TH CENTURY

Central Asian Medicines

In Tibet, the shaman native Bon healers were the only healing practitioners and users of herbs and magic rituals until the 7th century. Tibetan people were barbaric and aggressive, constantly at war against India, Nepal, China; they even reached the Arab countries. At that time, Indian Buddhism was spreading very fast towards the northwest of India including, Pakistan, Afghanistan, Persia, Iraq and the Sogdian empires. The Tang dynasty of China was also taking interest in bringing the Indian Mahayana Buddhism of China through the silk route².

At the same time, in central Tibet, the young Tibetan King **Songtsan Gampo** (617-?) was expanding his kingdom and uniting Tibet into one nation. Then, this intelligent Tibetan King understood that to change the aggressive nature of his people into a peaceful one, he had to introduce Indian Buddhism as an antidote that could heal the inner wound caused by anger and aggressive mind. Therefore he brought Indian Buddhism into Tibet and created the first Tibetan official script, which was used to translate Buddha's teachings. He also established friendly relations with his neighboring countries, and two queens - Crown Queen **Brikuti**, King Ansuvarma of Nepal's daughter, and Junior Queen **Wenchen Kongjo**, princess of Tang Dynasty from China - shared his throne. Buddhism was widespread in both their countries and they introduced Buddhism to their husband. He built many temples and religious centers including the Potala and the palace of Buddha Avalokiteshvara. He invited physicians from India, China and Persia (*Tagzig*)³ and organized a first gathering of foreign physicians officially invited. He asked to translate the medical systems into Tibetan language. Unfortunately, he may have been killed at an early age⁴.



The 8th century was a golden period for the Tibetan people because the great King **Trisong Deutsan** (742-798) continued his grand father's efforts to develop Buddhism and culture, and this resulted in peace and prosperity for the kingdom of Tibet. Soon Tibet became the focus of central Asian culture and experts in a variety of disciplines came to Tibet from all directions. The King invited the great Indian Buddhist masters such as Abbot **Shanta Rakshita**, the tantric master **Guru Padma Sambhava** and Master **Bimala-mitra**. He also introduced monks to Tibet as a symbol of peace and self-control. The great Samye Monastery in central Tibet was built for the preservation and propagation of secular and non-secular sciences. The King invited physicians from India, China, Persia, Nepal, Kashmir, Mustang, Mongolia and Mi-nyag (a small principality in the eastern part of Tibet). He also held the first international conference on Medicine in Samye Monastery. The medical traditions officially recognized in Tibet, apart from the native Tibetan medicine, were the three foreign groups of Indian, Chinese and Persian (which included Greek Medicine) medicines. All the systems were translated into Tibetan, and schools were established for the study of the different systems of Medicine.

FOREIGN MEDICAL SYSTEMS

Ayurveda

Ayurveda in Tibet

Ayurveda (Tib. *Tseyirigjed*) ‘science of life’ is still the term used in sutra, tantra and secular sciences in Tibet. Tibetan scholars use this term for Tibetan Medicine writing and secular works. According to the history and biography of Elder Yuthok Yonten Gompo, Ayurveda came to Tibet very early, even before Buddhism did, during Tibetan King Lhathothorinyantsan’s reign (probably 2nd century), with the two Indian physicians Vijay Gajay and Bimala Gajay. Vijay Gajay became court physician and remarried with the King’s daughter. They gave birth to Dungithorchogchen (which means ‘he has a white turban around the head’, like the ancient Indian physician’s costume) who followed the tradition of his father and became the first historical Tibetan court physician. His descendants were at the origin of the Yuthok family and physicians’ heritage. It is not clear whether these two Indian physicians were Ayurvedic physicians or Buddhist. In my findings, there are some clues that they belonged to Ayurvedic physicians because they learned the art of medicine from the son of great Atreya (of Taxila) and Kumara Jeevaka’s lineages and became experts in medicine. Later Vijay Gajay and Bimala Gajay left for India.

During his reign, King Songtsan Gampo (617- ?) invited the Indian physician Master Bharadwaja to translate some Ayurvedic texts into Tibetan language. There are two other Bharadwaja that lived in different periods and who shouldn’t be mixed up with him: The first one was half man and half god, and the disciple of Indra who brought Ayurveda in the world. The second is found in the lineage of the great master Atreya and is contemporary of Buddha. Numerous Indian physicians and Buddhist masters visited Tibet and translated many medical texts which are available in five volumes in the Buddhist canon *Tengyur*. Many of these Ayurvedic texts were lost in India. Dr. Bhagwan Dash has done some work in this subject and retranslated from Tibetan to English and Hindi several Ayurvedic texts, including *Yoga sataka*. The latest translations (from Sanskrit to Tibetan) were done during the fifth Dalai Lama time (1617-82).

Famous Indian Ayurvedic Samhitas (tantras)

Master Susruta (Tib. *Legthoe*) wrote *Susruta Samhita* (500 BC) which became the origin of the Indian tradition of surgery. He also developed knowledge on anatomy and teachings on medicine in general.

Some most important Ayurvedic texts are:

1. *Agnivesh Samhita*

Composed by Master Agnivesh (Tib. *Meshinjug*), who was the disciple of Bharadwaja

2. *Caraka Samhita*

Caraka (Tib. *Thotsuntsaraka*), was a great physician and philosopher who revised the Agnivesh tantra and made *Caraka Samhita*, which contains seven parts. Later the general Ayurvedic medical system has eight parts, called ‘the eight parts or branches.’

3. *Yoga Sataka*

Composed by master Nagarjuna Acharya (Tib. *Gonpoludup*).

4. *Astanga Hridaya*

Master Vaghbata (Tib. *Phakhol*) synthesized the *Caraka Samhita* which became the *Astanga Hridaya*, the main Ayurvedic text. It was translated into Tibetan by Lotsawa Rinchen Sangpo in the 11th century.

5. *Astanga sangraha*

Composed by master Vaghbata (Tib. *Phakhol*), also translated into Tibetan by Lotsawa Rinchen Sangpo.

6. *Chandrica*

Composed by master Chandranandana (Tib. *Dhawa Ngonga*) and translated into Tibetan by Lotsawa Rinchen Sangpo.

There is a great number of important works available in the Ayurveda world.

Gyud-shi ‘The Four tantras’

Translated by the Tibetan Master Vairochana and Indian Kashmir physician Chandranandana in the 8th century, the *Gyuh-shi* is not of Indian Ayurvedic origin.

Relationship between the Tibetan and Ayurveda systems

India was Master of Dharma and culture for the Tibetan people from the 7th to the 20th century. The whole characteristic of medicine was also borrowed from the Indian Ayurvedic concept. But it is not clear if Ayurveda was like the present concept and practice or if Buddhism influenced it. In the 3rd century (BC), Mauryan Emperor Asoka the Great conquered all Indian Kings. He became Buddhist and built many dispensaries, hospitals and health centers for men and animals, in his empire and bordering states. He and later kings encouraged the development of medical science and planted rare medicinal herbs, plants and trees in the country. In short, Buddhism flourished and the Buddhist concept and ethics reanimated the cultures involved. **Master Nagarjuna Acharya** (1st-2nd century), a Buddhist saint, physician, alchemist and philosopher who had studied in the University of Vidarbha and become a celebrated physician, revised *Susruta Samhita* and written supplements. His work could have greatly influenced Ayurveda. He was the first alchemist to introduce black sulphide of mercury, which does not cause salivation. He wrote many works on alchemy and medicine, for example *Yoga Sataka*. After Nagarjuna acarya, the almost whole world of India became Buddhist.

Concerning Tibetan Medicine, the theory of the three humors, concept of anatomy, physiology, pathology, diet, seasonal behavior, Materia Medica, surgical instruments and therapeutic works have their origin in the above mentioned Ayurvedic texts of Vaghbata and Nagarjuna. They were the pattern or source of correct reference for writing and teaching in any school of Tibetan Medicine in the past. Still today, you can find many original sentences of *Astanga Hridaya* that are unchanged in the *Gyud-shi*.

Difference between Tibetan Medicine and Ayurveda

There are some fundamental differences between them beside the common concept and practice mentioned above.

Firstly, even if both medical systems were created in India and grew like twins, Ayurveda originated from Samkhya Philosophy of Hindu religion and came from *Rig-veda*, whilst Tibetan Medicine originated from Buddha and Buddhism, and received the contribution of the Tibetan Buddhist tradition with special concept and reactivated culture.

Secondly, Tibetan Medicine was developed in Tibet in the special environment of Buddhist altruistic life, and the Himalayan fresh air gave many different characteristics of practice and methods. It produced rich knowledge on herbs and minerals instead of metal and its treatments. The patients are cured by herbal pills and decoctions along with many other Tibetan healing traditions rather than Panch-karma principles.

Finally, there are also basic differences found in the lifestyle, thought and holistic concept of the whole person, which developed the salient figure of Tibetan Medicine in the world.

Chinese Medicine

Chinese Medicine never came to Tibet as a complete system or text, but rather through history. History recorded that Chinese Medicine arrived in the 6th century, as well as during King Songtsan Gampo reign (617- ?) when Queen Wengshen Kongjo, the Chinese princess, brought Chinese medicine for health reason; but it did not develop then.

During King Mei-Agtshom's time (7th century), Chinese translator Hashang Mahakyinda, Tibetan physician Gyatrug-garkhan, Khyungpotsetse, Khyungpodhumtshug, and Choglamonbar translated *Somaraja* (Tib. *Menchad-dhaweygalpo*) in 115 chapters.

King Trisong Deutsan (8th century) invited Hashang Bala, Tongsumgangwa and Hangtipata, three Chinese physicians from China, along with other foreign physicians. They translated *Sojedtrulgizod-rinpocheidronme*.

Then Tibetan Master Situ Choekyijungne (1700-1794) translated in the middle of the 18th century some parts of Chinese Medicine and the pulse diagnostic method into Tibetan. It is strange that Chinese Acupuncture and Taoist Philosophy of Yin and Yang did not come to Tibet along with the medicine. Also Chinese physicians and Medicine did not succeed in creating a home like the Indian's did.

Today, *Somaraja* (Tib. *Menchad-dhawey-gyalpo*) 'king of moon' is the only existing available text and one of the fundamental writings that makes reference to Chinese Medicine. The history of this text is complex and there is unfinished research on its origin. Generally or officially, it is accepted that *Somaraja* text came from China and has 115 chapters. There is another *Somaraja* from India which was translated by Abbot Krishna and translator monk Choebar (11th century) with 113 chapters (this text is in the Kagyur collection and is also published in China in 1985). Both texts are said to have been taught by Bodhisattva Manjushri in China under the request of Nagarjuna Hridaya. Another source, like Lonpo kathang says that it was composed by Nagarjuna, and Kongtrul Rimpoche said in his *Shejakunkhyab* that it was composed by collective Tibetan scholars. In short, there are four different translations found under the same name and it is difficult to determine if its origin is from China or India.

The concept of the medicine is found mixed in the *Somaraja* book with Chinese, and Tibetan or Ayurveda. According to the legend, the book was taught by Bodhisattva Manjushri on the five sacred mountains of China as a symbol of the five elements and the five consciousnesses in order to cure the five delusions and their disorders. It explains that the Chinese five elements correspond to five vital organs and the two principles of 'Yin and Yang' in pulse diagnosis, urine examination and seasonal chapters. But an interesting point is that it does not mention the two principles as a principal theory and meridians even in moxibustion practice. Instead of the two principles, it explains the three principles as does Tibetan Medicine; wind, bile and phlegm in all chapters of Materia Medica, pathology and therapeutic works.

Relationship between the Chinese and Tibetan Medicine

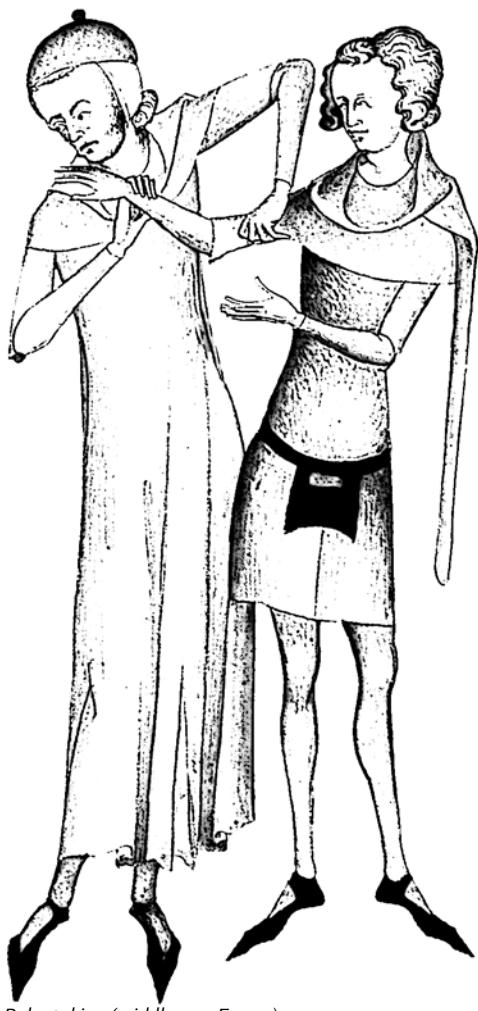
The relationship between the two systems is quite popular because many Tibetan scholars have made quotations from the *Somaraja* text, especially in the field of anatomy, pulse diagnosis, urine examination, moxibustion, blood letting, and elemental spirits and their diagnosis. But the main theory and concept is not as clear as the four tantras *Gyud-shi*, from the beginning to the end. Beside these points, there are a lot of common grounds and the important ‘meeting point’ is the ‘two principles of hot and cold’ concept. Tibetan Medicine elaborates the two principles (*dag-sib*, hot and cold, corresponding to Yin and Yang) into three (*rLung*/Wind, *Tripa*/Bile and *Badken*/Phlegm) and explains the energy system not only in the level of subtle energy but also in the physical systems. Sometimes, Tibetan Medicine also makes up its conclusion of three principles into two during the treatment and pathological diagnosis. For example blood and bile are hot nature (Yang) and wind and phlegm are cold (Yin). This concept is also similar to the four humors of Galen theory in Greek Medicine.

Difference between Tibetan and Chinese Medicine

There are several differences between the two systems. One is about the five elements: Tibetan Medicine and Ayurveda share the same five basic elements: earth, water, fire, air and space, whilst Chinese Medicine counts the five elements of wood, fire, earth, metal and water.

Tibetan medicine does not have the same concept as Chinese medicine concerning organs and their energetical relationships. Tibetan Medicine doesn't have a theory of meridians and it also does not carry the concept of the two principles, which is the backbone of Chinese medicine, as its main one. A Tibetan doctor reads the pulse of the right side organs with the right hand and vice versa while a Chinese doctor does the opposite.

Taoism and Acupuncture didn't develop the same in the Snow Land of Tibet. There are also some more differences.



Pulse taking (middle age, France)

Greek and Trans-Arabian Medicine

Greek Medicine was developed in the Prussian Empire and was spread from the northern side of Tibet, so it is called ‘upper medical system’ (Tib. *Toelug*). It is popular in the history of Tibetan Medicine and has become an important school of Medicine in Tibet from the 7th to the 8th centuries. Galen (Tib. *Galeno*, 2nd century) is still popular in the history of Tibetan Medicine, and one of its tradition follower (whose name is also Galeno) was invited by Tibetan King Songtsan Gampo (617- ?) from Persia. The physician translated the Greek medical text called ‘Coke, Peacock and Parrot’ and offered it to the King. He gained the name of ‘Prince of the physicians’ and thus became the court physician. His descendants kept the medical tradition and spread it in the upper central part of Tibet. The second Galeno’s disciples taught the theory of the four humors, especially knowledge on anatomy and surgery in Tibet.

Later, King Trisong Deutsan invited a famous physician called Biji Tsampashilaha with his disciples from *Trom* (Rome ?) who translated many texts called *Lhached-tshoweidho*, ‘treaties for the King’. They lived in Tibet, practiced and got married. Tsampashilaha wrote medical works called *Tsienyidhe-khorlo* with seven chapters, and *Rinchenpungeikor* with 27 chapters commented, and surgical works. Later, Tsampashilaha composed another famous text *Bebum Nagpo* given to his son, and two ‘anatomy books’. They are all together called *Bijie-potikhaser* or ‘Biji’s yellow text’. He offered them to the King before he left for Rome in the later part of his life.

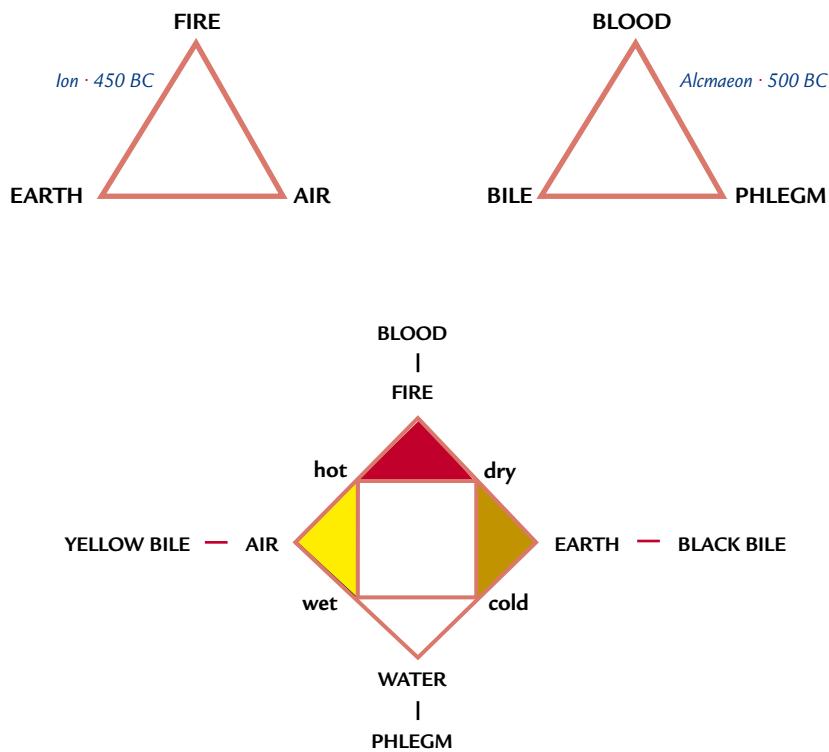
There was another Greek Medicine practitioner, called Halashanti, invited by the same Tibetan King for the international congress on Medicine. He translated ‘Treatment of head injuries, blood vessels, combined humor disorders, treatment of poison and anatomical works’. See more details

about the books and translations in the article written by Dr. C.I. Beckwith's 'The introduction of Greek medicine into Tibet in the seventh and eighth centuries', Journal of the American Oriental Society, Vol. 99

Relationship between Greek and Tibetan Medicine

The relationship between the two medicines is not much seen superficially but is much more found in the theory and treatment. The most significant similarity is the four humors that became three in Tibetan Medicine. For example, the concept of 'Brown Phlegm', *Badken-mugpo*, called 'combined humor disorder' in translated Greek Medicine, was adopted by Tibetan Medicine and Ayurveda. The disorder is manifested from four humors of wind, bile, phlegm and blood, exactly like in Greek Medicine. We can also find the four humors term (*Dhuwashi*-four humors) in ancient Buddhist texts. Another important connection is the concept of constitution and elemental theory of the body and medicine, especially pulse reading, urine examination and medical thangka painting tradition (medical illustration) on anatomy and physiology, all believed to have come from Greek Medicine. It is an interesting point to see that sometimes in Tibetan Medicine history, 'Greek Medicine' is called *Toechog bodkyilug*, 'upper Tibetan Medicine'. Maybe it is due to the fact that Tibetan socio-economic relations with the trans-Arabs was so high before and after the beginning of the 6th century.

The terminology of *Daryaken*, 'instant curing or curing snake poison', in Tibetan, interprets the language of Shangshung, land of Tibetan Bon religion. But it is very clearly introduced by Dr. Christopher I. Beckwith's 'Tibetan treacle', a note on theriac in Tibet that is in a Greeko-Arabian language. The journal was published by the Tibetan Society Bulletin, Bloomington, Indiana vol. 5, p. 49. Dr. Beckwith has done some important research on the works of Roman physician Tsampashilaha who translated *Dudtsidaryakangyikhrulkhor*, also called in Greek language Theriakon pharmakon or theriac. In short, *Daryaken* may not be a Shangshung Bon word but has its origin in the Greeko-Arabian language that came to Tibet.



Difference between Tibetan Medicine and Greek Medicine

The significant difference between the two is that in Greek Medicine the important works of Galen are already a lost concept in the West. What remains from it now is *Unani Tibbia* or ‘Greek Medicine’, which is widely practiced in Syria, Persia, Iraq and has reached Asian countries including Pakistan, India and Bangladesh. The difference has increased a lot from the origin of the four humors theory, by the influence of Muslim spirituality and culture. A part of *Unani Tibbia* practice was translated from India in Tibet in mid 17th century.

Indian Buddhist Medicine

Buddha gave the medical teaching in Varanasi, in the Bihar State of India, when he was 71 years old. The system is in four parts and is called *Gyud-shi* ‘the Four Tantras’. The great physician **Jeevaka**, Buddha’s own physician, and **Asoka the Great** (3rd century BC), propagated it throughout the Empire of India. This medical system was further developed by **Nagarjuna** and Vaghbata among others in the Indian Buddhist monastic universities such as Takshasila, Nalanda, Brikrumashila.

In the 8th century The Tibetan translator **Master Vairochana** translated the *Gyuh-shi*, which came through an unbroken lineage from the Buddha to Master Chandranandana of Kashmir. As Padma Sambhava advised king Trisong Deutsan to hide it in Samye monastery, the *Gyud-shi* remained then secret during 150 years and therefore does not exist in the *Tengyur* collection. Some scholars of past and present sharply criticize the origin of the ‘Four Tantras’, and they also believe that the Tibetan masters Elder and Younger Yuthok are those who composed it with the knowledge of Buddhism, medicine and foreign medical systems.

Many of the Indian masters who visited Tibet translated hundreds of texts on Buddhism and other secular sciences. There are five volumes of Indian Ayurveda and Buddhist Medicine in the *Tengyur*. Tibet became a more renowned country for its knowledge in the medical and spiritual field and, gradually, Tibetan people embraced the Buddhist medical system and practice to the present day, known as Tibetan Medicine.

Gyud-shi ‘Four Tantras’

The text contains four tantras with 156 chapters.

<i>Tsagyud</i>	Root or heart Tantra
<i>Shadgyud</i>	Explanatory tantra
<i>Mengag-gyud</i>	Oral transmission tantra
<i>Chima-gyud</i>	Last tantra

Fundamental of the tantras

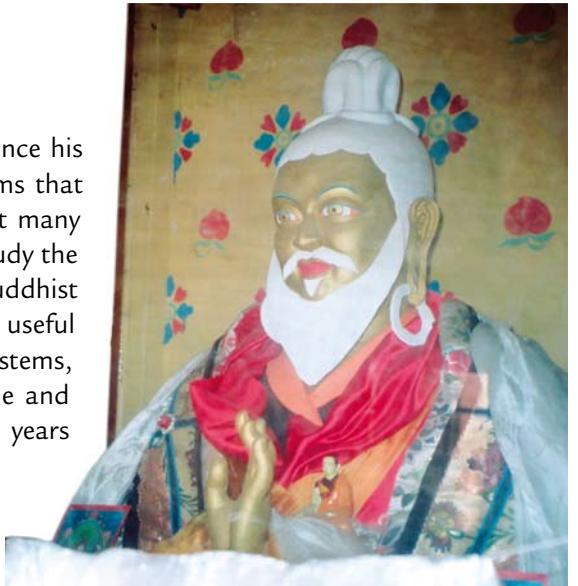
They originate from Buddha himself and are based on the Buddhist doctrine of law of cause and effect and the way of healing.

TIBETAN TRADITIONAL MEDICINE

Tibetan Medicine *Bodkyimen* has started to be written and spoken of in the 7th century only. In fact the original name for Tibetan Medicine is *Bodkyi-gSowa-Rigpa* or ‘Tibetan science of healing’.

Yuthok Yonten Gonpo the Elder (708-833)⁵, the father of Tibetan Medicine

Yuthok Yonten Gonpo was a great scholar since his childhood. He studied all the medical systems that had already come to Tibet and he also went many times to India, Persia, China and Nepal to study the original systems. He especially studied the Buddhist Medical system directly in India, used many useful techniques and methods from other medical systems, and composed numerous books on medicine and spiritual practice. He lived until he was 125 years old.



Elder Yuthok statue at his birthplace, in Toelung - Tibet



Yuthok Yonten Gonpo the Younger (1126-1202)

He was a descendant of Yuthok Gonpo the Elder. He was a realized being since his childhood and knew medicine. He followed the tradition of his ancestor and visited India, Persia, China and Nepal. He received the *Gyud-shi*, ‘Four Tantras’ from the physician Rokten-Kouchokyab, revised it and wrote many books on it. The most famous ones are *Chalag-chogayed-Yuthok*, the Yuthok’s 18 supplements to the Four Tantras, and *Yuthok Nyingthik*, a medical and spiritual practice for Tibetan physicians. He established a school in his place and spread the ‘art of healing’ in those countries. Students came from Mongolia, Siberia, Nepal, Bhutan, China and the Himalayan countries.

Both Yuthok were believed to be emanations of the Medicine Buddha who came in human form to establish this medical system and help the people of the Land of Snow. In short, all the medical systems that reached Tibet were synthesized into the Tibetan Buddhist medical system, which has produced thousands of Tibetan physicians.

SCHOOLS OF TIBETAN MEDICINE

Kongpo Menlung school

Yuthok Yonten Gonpo the Elder (708-833) established this school in Kongpo Menlung valley in southeast Tibet. *Menlung* means ‘valley of medicine’ and a great number of Tibetan physicians were trained there.

The Yuthok Gosh Rethang School

Yuthok Yonten Gonpo the Younger (1126-1202) established a medical school in his famous Turquoise house called Goshi Rethang. Afterwards, he returned to Tibet from India. His fame even reached Tibet’s neighboring countries and hundreds of students went to his school to study medicine. He revised the *Gyud-shi* and founded a school for the study of the Tibetan art of healing in the central part of Tibet, which became the heart of Tibetan Medicine. All the different traditions of Tibetan Medicine praised and respected him as a great master and emanation of the Medicine Buddha. His main disciple, Sumton Yeshe zung, collected all the medical and spiritual teachings and wrote the famous book *Yuthok Nyingthik* for the integration of spiritual practices into the practice of Tibetan Medicine for physicians. The Practice has 33 parts beginning from the history of the book until the highest path of enlightenment combined with the Medicine Buddha and Yuthok Guru yoga practices.

The Jangpa and Zurkhar traditional schools

Namgyal Daksang (1395-1475) was a great master in Buddhism and Medicine from the northern part of Tibet, and Zurkhar Nyamnyid Dorje (1439-1475) was a great practitioner and physician from the southern part. They founded the Jangpa schools and the Zurkhar schools of medicine according to their respective traditions. Later, these became the most influential schools in the history of Tibetan Medicine. Then, in the 17th century, Gongman Konchog Phendar, also a brilliant Tibetan physician who had learned all the healing systems in Tibet, created his own tradition called the *Gongmen* tradition⁶.

Chakpori Medical College

Chakpori Medical College was built on the top of Iron Hill alongside the Potala. Traditionally, Tibetans call it ‘Vajrapani Hill’. To fulfill the wishes of the 5th Dalai Lama, his regent **Desid Sangye Gyatsho** (1653-1705), who was extraordinarily well versed in the ‘science of healing’, designated the hill to have a Medicine Buddha Monastery and be a center for physicians. Desid Sangye Gyatsho personally administrated the Institute, transmitted the Four Tantras and provided commentaries to them. He produced 79 excellent medical thangka illustrations. Such professional medical paintings had never been seen before in Asia or Europe⁷.

Desid Sangye Gyatsho brought all the traditions into this Institute and preserved them for the future generations. The Chakpori became the greatest center for the study of medicine and the spiritual practices related to healing. Hundreds of great physicians were trained in this institute.

The Lhasa Mentseekhang

The personal physician of the 13th Dalai Lama, the Ven. Khyenrab Norbu (1883-1962) built Lhasa Mentseekhang, (Lhasa Medicine and Astrology school). This institute educated both monks and lay people in Tibetan Medicine and Astrology. The Government supported the Institute to maintain public health and the institute had excellent facilities for childcare and maternity. Many physicians graduated from these two institutes and spread Tibetan Medicine throughout Mongolia, Buryatia, Bhutan, Ladakh, Sikkim, Nepal, China and other countries.

After 1959, thanks to the great efforts of its director, Prof. Dr Jampa Trinley, the Lhasa Mentseekhang has gained support from the Chinese government of Beijing to re-start the Institute and its regular functions, like the Tibetan medicine and astrology education and the preservation of the Tibetan culture and sciences. Now the institute welcomes hundreds of Chinese and Tibetan patients per day, has a regular medicine production and educates young Tibetans in the Lhasa Tibetan medical university.



Old Lhasa Mentseekhang Institute



Tibetan medicine clinic, Lhasa

Present Tibetan Medicine

H.H. the 14th Dalai Lama built the Indian **Tibetan Medical and Astro-Institute** (the Mentsee-Khang) in **Dharamsala** (India), in 1961, for the preservation of Tibetan culture and the wisdom of its people. Numerous young Tibetan physicians have already graduated from the Dharamsala Mentsee-Khang, and Tibetan Medicine is being taught in Tibetan higher study in Varanasi, U.P. and in the Institute of Buddhist Philosophy in Ladakh, as well as in many other Institutes so far developed.

Notes

¹ Due to the lack of precise history records, ancient kings date of birth and so on, are not available

² See more detail in Xuanzang, A Buddhist pilgrim on the silk-road by Sally Hovey Wriggins
Published by Westview Press, Inc., 5500 Central Avenue, Boulder, Colorado 80301-2877 U.S.A

³ Tagzig (*sTag-gzig*) is often interpreted in Tibetan history as in Persia. But it could also be the Tajikstan under former Soviet Union.

⁴ There are different records, some say he died at 37; others say he lived until his 80s.

⁵ More detail in ‘Tibetan medicine, biography of Yuthog Yonten Gonpo’ by Rechung Rimpoche Jampal Kunsang, Wellcome Institute of the History of Medicine, London, 1973

⁶ Arya, Pasang Yonten Tendi Sherpa’s *Bodkyi sowa rigpei logyui kyi Bangzod Yuthog Lama drenpeiphonya*, publ. in Ladakh 1989

⁷ ‘Tibetan Medical thangka paintings’ was first published by People’s Publishing House, China in 1986, and the second atlas from the Buryati collection was published in 1992. It is available in major languages.

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