SOWA-RIGPA Tibetan System of Medicine

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ABSTRACT
“Sowa-Rigpa” commonly known as Tibetan system of medicine is one of the oldest, Living and well documented medical tradition of the world. It has been originated from Tibet and popularly practice in India, Nepal, Bhutan, Mongolia and Russia. The majority of theory and practice of Sowa-Rigpa is similar to “Ayurveda”.

Keyword: Sowa-Rigpa

INTRODUCTION
“Sowa-Rigpa” commonly known as Tibetan system of medicine is one of the oldest, Living and well documented medical tradition of the world. It has been originated from Tibet and popularly practice in India, Nepal, Bhutan, Mongolia and Russia. The majority of theory and practice of Sowa-Rigpa is similar to “Ayurveda”. The first Ayurvedic influence came to Tibet during 3rd century AD but it became popular only after 7th centuries with the approach of Buddhism to Tibet. Thereafter this trend of exportation of Indian medical literature, along with Buddhism and other Indian art and sciences were continued till early 19th century. India being the birth place of Buddha and Buddhism has always been the favourite place for learning Buddhist art and culture for Tibetan students; lots of Indian scholars were also invited to Tibet for prorogation of Buddhism and other Indian art and sciences. This long association with India had resulted in translation and preservation of thousands of Indian literatures on various subjects like religion, sciences, arts, culture and language etc. in Tibetan language. Out of these around twenty-five text related to medicine are also preserved in both canonical and non-canonical forms of Tibetan literatures. Many of these know ledges were further enriched in Tibet with the knowledge and skills of neighbouring countries and their own ethnic knowledge. “Sowa-Rigpa” (Science of healing) is one of the classic examples of it. rGyud-bZhi (four tantra) the fundamental text book of this medicine was composed by YuthogYontenGonpo who is believed to be the father of Sowa Rigpa. rGyud-bZhi which is based on indigenous medicine of Tibet enriched with Ayurveda, Chinese and Greek Medicine. The impact of Sowa-Rigpa along with Buddhism and other Tibetan art and sciences were spread in neighbouring Himalayan regions. In India, this system is widely practice in Sikkim, Arunachal Pradesh, Darjeeling (West Bengal), Dharamsala, Lahaul and Spiti(Himachal Pradesh) and Ladakh region of Jammu & Kashmir.

PRINCIPAL
Sowa-Rigpa is based on the principles of Jung-wa-nga (Skt: panchmahabhutas) and Ngepa-Sum (Skt: Tridosha). Bodies of all the living beings and non-living objects of the universe are composed of Jung-wa-nga viz Sa, Chu, Me, Lung and Nam-kha (Skt: Prithvi, Jala, Agni, Vayu and Akash). The physiology, pathology Pharmacology and metria-medica of this system are established on these theories. Our body is composed of these five Cosmo physical elements of Jung-wa-nga; when the proportion of these elements is in imbalance in our body disorder results. The medicine and diet used for the treatment of disorders are also composed of the same five basic elements. In the body these elements are present in the form of Ngepa-Sum (Skt: Tri-dosa) Lus-sung-dun (Skt: Sapta Dhatu) and Dri-ma-Sum (Skt: Trimala). In drugs, diet and drinks they exist in the form of Ro-dug (Skt: Shast-rasa) Nus-pa (Viryaa) Yontan (Skt: Guna) and Zhu-jes (Skt: Vipaka). It is in context of this theory that a physician would use his knowledge, skills and experience in treating a patient, using the theory of similarity and dissimilarity (Skt: Samanaya and Vîsesa) of five elements.
The basic theory of Sowa-Rigpa may be adumbrated in terms of the following five points:
1. The body in disease as the locus of treatment;
2. Antidote, i.e., the treatment;
3. The method of treatment through antidote;
4. Medicine that cures the disease;
5. Materia Medica, Pharmacy & Pharmacology

PRESENT STATUS
Traditionally the sMenpa are trained under the traditional educational system either under private guru-shisya tradition or under gyud-pa (lineage) system in families in which the knowledge is passed down from father to son through generations. It takes several years to become a skilful sMenpa, which requires hard theoretical and practical trainings. After finishing his/her training the trainee sMenpa has to give an examination in front of the entire community in the presence of a few experts sMenpa in a ceremony to confer the designation of sMenpa on him/her. For higher training, those from the Indian Himalayan region as well used to go to study with reputed scholars or to any of the medical colleges in Tibet in the past. Some from these regions preferred to go to Tibet to begin their education of Sowa-Rigpa. Given the modern social and educational system some institutions are imparting the education at par with the modern system in terms of time with packages to be completed within a limited duration. Presently, after 10+2 grante the students are selected on entrance test merit basis. The nomenclature of this six years course is sMenpa kachupa which is equivalent to Bachelor of Sowa Rigpa (Tibetan Medicine). This course is presently conducted in following four Institutions in India:

Central Institute of Buddhist Studies, Leh (under Ministry of Culture, Govt. of India)
Tibetan Medical and Astrological Institute, Dharamsala HP of his Holiness Dalai Lama
Central University for Tibetan Studies, Saranath UP (under Ministry of Culture, Govt. of India)
Chagpori Medical Institute Darjeeling (W.B).
Infrastructures of SOWA-RIGPA IN India

In most of Himalayan regions Sowa-Rigpa is practiced in traditional way with community support with an sMenpa in every village. But since the last two decades this scenario has been changing, adopting some of the administrative elements of modern hospital system in educational Institutions, dispensaries, hospitals and pharmacies etc. Nevertheless, still there are all together around 1000 practitioners of Sowa-Rigpa in India catering health care in harsh Himalayan regions and other places. Dharamshala in Himanchal Pardesh and Ladakh region of J&K are the main Centers for Sowa-Rigpa Institutions in India.

After taking refuge in India His Holiness the Dalai Lama has been in Dharamsala (Himachal Pardesh) where he has set up the Tibetan Medical and Astro. Institute to train the youngsters and provide quality health service through Sowa-Rigpa, This Institute has a Medical college, Pharmacy, Astrology section and a chain of 40-50 clinics all over India. There is Central Council for Tibetan Medicine in Dharamsala to regulate the practice of Sowa-Rigpa in India; it looks after the registration of practitioners, standard of colleges and other mechanism to regulate Sowa-Rigpa.

Ladakh
Ladakh region of Jammu and Kashmir has the wide and significant presences of Sowa-Rigpa in India. There are Sowa-Rigpa Centers from both Govt. and Non Govt. Institutions, but all these Institutes are small. For education there is an Sowa Rigpa Department in Central Institute of Buddhist Studies, Leh (under Ministry of Culture, Govt. of India) to conduct six year Kachupa course. For public health the local administration has an OPD in district Hospital and 80 sMenpa are provided with meager financial to serve public health in remote areas. National Research Institute for Sowa-Rigpa (under CCRAS, Ministry of Health & FW, Govt. of India), Leh has been doing R&D work on various aspects of Sowa-Rigpa. Beside these, NGO’s like Ladakh Amchi Sabha, Ladakh Society for Traditional Medicine and MentseeKhang Cultural Centre, Leh etc. are working for Sowa-Rigpa in Ladakh.

Himachal Pardesh
In Himachal Pardesh there is sizable number of sMenpa in the region of Lahoul-Spiti, Kinnor and Manali practicing without any support from Govt. agencies. There is a small private institute in Manali, which trains few students in Sowa-Rigpa. There is also a clinic of Men-tsee-Khang, Dharamsala. The Himachal Pardesh Govt. has also appointed sMenpa for public health in Kinnor and Lahoul-Spiti regions.
Arunachal Pradesh
The entire region of Mon in Arunachal Pradesh maintains the Sowa-Rigpa as an important part of their culture and prefers the treatment of Sowa-Rigpa to modern medicine. There was constant influx of Amchis from Tibet in the past. However these days besides some local Amchis and a branch of Men-tsee-Khang, Dharamsala, which was established to serve the local people in Tawang area, there is no establishment that can full fill the minimum requirement of the people. The handful of Amchis leave of the region in the various remote villages which has become a severe problem for the Amchis to visit them on regular basis, particularly, when the they are desperately needed, due to shortage of Amchis and lack of transportation facilities.

Sikkim, Darjeeling and Kalimpong
Sikkim, Darjeeling and Kalimpong also used to receive medical treatment from the visiting sMenpa from Tibet in the past, as these places were on the trade routes between Tibet and Indian cities like Calcutta. Students from these places used to go to Tibet to study Sowa-Rigpa. There are some sMenpa and from the local community and a branch of Men-tsee-Khang which are at great demand not only from the local people but also from the community who have come from other states of India. Despite demand from the remote areas of this region they can hardly visit them due to scarcity of sMenpa. In Darjeeling late Ven. Dr Trogawa-Rinpoche has set up a Sowa-Rigpa medical Institute for Education and public health following the tradition of Chagpori in Tibet.

Other regions of India
The Central University for Tibetan Studies, Saranath, Varanasi in Uttar Pradesh, which is under the Department of Culture, Ministry of Culture, Govt. of India has a faculty of Sowa-Rigpa. It provides a four years course of PUC and another five years and six months course of Bachelor degree (BTMS). The faculty runs a pharmacy and OPD clinic for the training of the students.

There are branches of Tibetan Medical Institute in all the Tibetan Settlements in various parts of India, which attract lots of Indians as well. Most of the branch clinics of Tibetan medical Institute, Dharamsala, in the cities like Delhi, Bombay and Kolkota, were opened on the request and initiatives taken by Indian people who were benefited earlier by Tibetan medicines.

REFERENCES