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Reviews


This catalogue was published in conjunction with an exhibition organized and presented by the Rubin Museum of Art, New York, 15 March, 2014, through 8 September, 2014, and curated by Theresia Hofer with the assistance of Elena Pakhoutova. I had a chance to visit the exhibition on September 8, coming from a conference in Princeton just an hour before it was to close. Therefore, I could only briefly observe its panels, elaborately prepared and so rich in details, thus opening to visitors the main aspects of both beautiful and intricate world of traditional Tibetan medical culture. Fortunately, I have got this catalogue to study and add more theoretical depth to visual impressions.

The catalogue consists of the Introduction (by the editor Theresia Hofer), 12 chapters and 3 vignettes divided almost evenly into two parts. The first part, Theoretical Foundations and Practices of Tibetan Medicine, explores basic theoretical and practical aspects of Tibetan medicine. Chapter 1, The Art of Tibetan Medical Practice (by Barbara Gerke), presents structure of the canonical text of Tibetan medicine, The Four Tantras (rgyud bzhi), and its most important theory, that of three nyepa1, which is explicated in connection with various types of diseases, their symptoms, methods of diagnosis (by pulse, urine, tongue, eyes, questioning) and therapy. Ideas that some diseases are caused by harmful demons and they can be healed or prevented by means of righteous behavior, religious rites and astrological calculations are also touched upon. Thus, the Tibetan term for medicine, Sowa Rigpa (gso ba rig pa) does “encompass more than what is commonly meant by the same terms in the present-day West” (p. 24).

1 According to B. Gerke, it roughly corresponds with Western concept of humors although their English translations (wind, bile and phlegm) “while apt, cannot be taken literally” (p. 24). In Russian literature the Sanskrit term doṣa is usually used.
Chapter 2, *Body and Mind in Tibetan Medicine and Tantric Buddhism* (by Geoffrey Samuel), focuses on the concept of the subtle body which is treated as “the internal structure of *tsa* (rtsa, channels; Skt. *nāḍī*), *khorlo* (*khor lo*, wheels or junction points; Skt. *cakra*), and inner flows that form part of the vision of the human organism in Buddhist Tantra” (p. 34). This theory does not correspond directly with exact bodily organs and is more important for the Tantric practices although some important Tibetan medical theoreticians, e.g. Zurkharwa Lodro Gyalpo (16th c.), saw it as a problem and tried to reconcile Tantric and medical views of the body.

Chapter 3, *Foundations of Pharmacology and the Compounding of Tibetan Medicines* (by Theresia Hofer), explains such crucial aspects of preparation of medicines as their tastes, potencies and the seven “limbs” (stages) of their compounding starting with “the growth of medical plants in their natural habitat”, etc. (p. 50). A big part of the chapter is given to a detailed survey of contemporary compounding practices as witnessed by the author, on the one hand, in a traditional monastery clinic in Central Tibet restored after the disastrous effects of Cultural Revolution in China and, on the other hand, in the laboratories and factory of Padma, Inc., Switzerland, the only officially legalized Western producer of Tibetan medicines whose products can be bought in drug stores along with standard medicines in certain European states. Padma’s drugs are “evaluated through in-house and external laboratory tests” (p. 63) but do not *look* or even *taste* like Tibetan medicines thus lacking the flavor of *Tibetanness* that is an important feature in the eyes of many followers of *Sowa rigpa*.

Chapter 4, *External Therapies in Tibetan Medicine: The “Four Tantras”, Contemporary Practice, and a Preliminary History of Surgery* (by Pasang Yonten Arya), divides external therapies into three groups — mild (including fomentation, spring waters and medicated baths, massages and oil applications), rough (moxibustion first attested in one of the Dunhuang manuscripts, and bloodletting), and drastic external therapies (“application of heated objects, such as stones, smooth pieces of wood, animal horns, or *gzi* stones onto specific points of the body” (p. 75), and cauterization). Some other therapies, not relating to the *Four Tantras*, are also discussed, e.g. golden-needle therapy and cupping. Finally, the author, an expert in this field of medical practices, touches upon the question of surgery in Tibetan medicine. Some practices of this kind were probably used in old times but were lost except for cataract surgery. It is remarkable that one of the few critical remarks on Tibetan medicine is expressed by its native practitioner — “Whether for cultural reasons or a lack of more frequent dissection and surgical practice, the limited study of human anatomy and physiology seems to me, from my practice-informed perspective, to be one of the weak points in Tibetan medicine” (p. 85).²

² It is hard not to mention that Pasang Yonten Arya has some unconventional ideas on the neighbors of the Tibetans in the old times. According to him, “the name *hor* refers to the peoples who lived on the northernmost border of Tibetan areas, such as the Mongols, the ancient Kurds, and Caucasians and who tended to be nomads and pastoralists” (p. 78).
Chapter 5, *Medicine, Astrology, and Divination* (by Ronit Yoeli-Tlalim), discusses “some of the theoretical background of the links between medicine and astrology: the lunar cycle of vital energy, urine and pulse analysis, and the seven-day planet week” (p. 91). The astrological tradition extracted from Kālacakra Tantra is of major importance but Chinese influence attested already in Dunhuang manuscripts is more emphasized in the chapter, with links to *Yizing* (parkha trigrams), the *renshen* concept of the human spirit (*bla*) that transfers around the body according to the lunar calendar, the turtle myth and even the image of Kongtse. Yet, as the author thinks, the vividness of Tibetan astro-medicine “seems to be all its own. In attempting to explain this vividness, one can perhaps point out the implications of the Buddhist notion of karma <…> In addition to any deterministic readings into one’s constitution, links with particular heavenly bodies or any other calculation, it is the karmic factor that may alter, in one way or another, a basic proscribed tendency <…> Hence in the context of Tibetan medical divinations, predictions are not considered to be deterministic but cautionary and prescriptive” (p. 104).

This chapter is supplied with Vignette 1, *A day at the Astrology Department of the Men-Tsee-Khang in Dharamsala, India* (by Inger K. Vassveit), that outlines some routines of the astrologers and their assistants who work at the Men-Tsee-Khang, the astro-medical institution founded by the Tibetan government-in-exile in Dharamsala, India. The expertise on finding a good day, making amulets for individual wear, and recommendations on ritual remedies against various obstacles (including compilations of horoscopes of various types) are most required services.

Chapter 6, *Tibetan Medicine in the World: Local Scenes, Global Transformations* (by Sienna R. Craig), adds some sociological (and slightly ironical) dimension to the picture of Tibetan medicine in the contemporary world. The author presents five scenes starring practitioners of Tibetan medicine. One is a doctor in Kathmandu whose clinic is especially trusted with people from his native land of Mustang, who claim that they find both medical and psychological help there. Another illustrates the ideas of members of the Tibetan community in Charlottesville, US, who enjoy all the advantages of Western medicine and still belong to the ever-going process of exchanging medicines “across Tibetan cultural and diasporic worlds” (p. 115). Another is a group who studies Tibetan medicine in the US and is basically motivated by “their desires to alleviate suffering”, even if they were “quick to recognize that making a living as Tibetan medical practitioners would be difficult” (p. 119). Last come vignettes on a proud Western guru of Tibetan religious medicine who eagerly claims “that no real Tibetan medicine can be found anymore inside China’s Tibet” (p. 121), and a Tibetan woman working for the Arura Group (a leading producer of Tibetan medicines in China) who reports that both Chinese clients and salespeople rarely care much about Tibetan medical culture as such — but that for them the Arura outlet in the Chinese city of Xian, is nothing but “a supermarket for medicine” (p. 123).
Part II of the catalogue, *Medicine, Buddhism, and Historical Developments*, analyzes the history of Tibetan Medicine as a part of Tibetan religious culture and textual tradition. Chapter 7, *The Buddhas of Medicine* (by Gyurme Dorje), focuses on the image of Bhaísajyaguru, the Buddha of Medicine whose iconic representations are widely found in Tibetan and Mongolian areas. A special attention is paid to mandalas, with Bhaísajyaguru and seven other buddhas of medicine in the center and a number of attending bodhisattvas, protector divinities, etc., structured in several rows around it, up to fifty-one or fifty-five figures in all. Various ways of contemplative dealing with Bhaísajyaguru and his mandala aimed at curing diseases and obtaining longevity are exemplified in texts belonging to three genres of Buddhist ritualistic literature, namely *anujñā* (rjes snang, permission ritual) *sādhana* (sgrub thabs, the means of attainment), and *abhiṣekavidhi* (dbang chog, empowerment rite). Some translations are also provided in the Appendices.

Chapter 8, *The Origins of the “Four Tantras” and an Account of Its Author, *Yuthog Yonten Gonpo* (by Yang Ga), considers various views on the genesis of the Four Tantras, the canonical text of Tibetan medicine and shows quite convincingly that its actual, human author was the Tibetan doctor and theoretician of the 12th c., Yuthog Yonten Gonpo, although he did draw on earlier sources, including the famous Ayurvedic text, Vāgbhata’s *Aṣṭāṅgahṛdayasaṃhitā* (*The Heart of Medicine*) translated from Sanskrit into Tibetan in the 11th c. This is one of the reasons why the Four Tantras could not have been produced earlier, such as in the eighth century, as some Tibetan scholars have claimed. The problem of Yuthog Yonten Gonpo the older, the legendary figure possibly invented in the fourteenth century or later, is discussed among many other details relating to the development and transmission of the Four Tantras.

Chapter 9, *The Making of Medical History, Twelfth to Seventeenth Century* (by Frances Garrett), emphasizes the role of the terma tradition associated with Nyingma lineages in transmitting Tibetan medical knowledge. The Four Tantras itself is called “the most prominent revealed text in the medical tradition” (p. 179), this statement being in contradiction with the previous chapter arguing that this is but a legend. The major medical lineages and their chief representatives are further discussed, up to Situ Panchen, the 18th c. prolific medical writer. The author then shows that close links between medicine and religion neighbored in Tibet with widespread belief in the higher effectiveness of purely religious and magical practices in comparison with medical treatment. Legendary stories supporting it are easily found in Buddhist historiographic literature such as Zhonupal’s *Blue Annals*.

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3 The author mentions some early 20th c. Russian translations of this fundamental text (p. 159) but seems to be unaware of the latest full translation made by the Buryatian scholar D.B. Dashiev, see — *Chzhud shi: Kanon tibetskoi meditsiny* [Gyushi: the Canon of Tibetan Medicine], tr. by D.B. Dashiev. Moscow, Vostochnaya literatura 2001.

4 The practice of “edible letters” (*za yig*) taken as medicine is particularly impressive.
Chapter 10, *Buddhist Practices and Ideals in Desi Sangye Gyatso’s Medical Paintings* (by Janet Gyatso), explores some circumstances of the creation of the famous set of about eighty paintings (late 17th c.) that illustrated the famous treatise *Blue Beryl*, a commentary to the *Four Tantras* composed by Sangye Gyatso, the regent to the Fifth Dalai Lama. The National Museum of the Republic of Buryatia, Ulan Ude, preserves one copy of the set. First published in full in 1992, it has been widely used in literature and this catalogue is adorned with numerous pictures borrowed from it\(^5\). The author of the chapter shows that the paintings have some tendency to a more secularized view of medicine since they often use Buddhist imagery on one level with other phenomena of day-to-day life. It gets even a slightly scandalous dimension when the picture “illustrating things that one should not do on the night before having a urinalysis” includes the image of “a monk sitting with a young novice monk on his lap” as a reference to a homosexual encounter and the whole picture has no moral judgment whatsoever. This, Gyatso asserts, “marks a central way in which the medical paintings depart from Buddhist discourse on the subject of sex” (p. 210).

It is important to mention that neither this chapter nor the previous one provides any information on another medical treatise written by Sangye Gyatso after *Blue Beryl*, in 1702, the so-called *Lhan thabs*. According to D.B. Dashiev, *Lhan thabs* was written not as a commentary on the *Four Tantras* and could include, therefore, a lot of medical information gathered by several generations of Tibetan medical practitioners that could not be attached directly to the earlier canonical text. *Blue Beryl*, in this sense, completed the long formational period when medical knowledge was mainly borrowed from sources of other medical systems. The Tibetans could turn then to the systematization and description of their own medical experience and *Lhan thabs* served as a fundamental text in this process. The Tibetan collection kept in the Institute of Mongolian Studies, Buddhology and Tibetology, RAS, Ulan Ude, has much more copies of this text than those of *Blue Beryl* or even the *Four Tantras*.\(^6\) The same proportions also pertain to the IOM, RAS and its Tibetan collection as well.

\(^5\) Though the book mentions that the Ulan Ude set was “copied from an older set at the Mentsikhang” and “taken to Buryatia in southern Russia” (p. 202) and refers to the paper by N.D. Bolsokhoyeva on the history of this set I suppose more details could be presented here, taking into consideration its importance for academics worldwide.

\(^6\) This is my abstract of some ideas expressed in the paper: Dashiev D.B. *Meditsinskie traktaty Desrida Sanchzhai-chzhamswo* [The Medical Treatises by Desi Sangye Gyatso], published as an introduction to Dashiev’s complete translation of *Blue Beryl* in Russian – Desrid Sanchzhai-chzhamswo. *Vaidurya onbo (Girlyanda golubogo berilla): kommentarij k “Chzhud-shi” — ukranenyi ucheniya Tsarya meditsiny* [Desi Sangye Gyatso. *Vaidurya ngonpo (The Garland of Blue Beryl): The Commentary to Gyushi — the Decoration of the King of Medicine’s Teaching*]. Tr. by D.B. Dashiev. Moscow, Nauka — Vostochnaya literatura 2014. It seems to be the first full translation of this extensive and complicated text in any European language.
Vignette 2, *The Tree Murals of Labrang Monastery’s Medical College, Eastern Tibet* (by Katharina Sabernig), recites the story about the famous tree-shaped schemes of concepts taught in the *Four Tantras*’ first volume, *Root Tantra*, painted on the murals at the medical college of Labrang, the major Buddhist monastery in Amdo. They were seriously damaged during the Cultural Revolution in China but restored twice by Nyingchag Jamzer although his recent attempt at renovation, completed in 2007, “does not seem as elaborate in style as the previous one” (p. 225).

Chapter 11, *Illustrated Materia Medica Prints, Manuscripts, and Modern Books* (by Theresia Hofer), presents several Tibetan texts aimed at the identification of plants, animals, minerals, etc., that can be used in pharmacology. The main attention, especially visually, is paid to the 19th c. block printed encyclopedia *Beautiful Marvelous Eye Ornament* by the Mongolian author Jampal Dorje but some other interesting books of this kind are treated, too, up to the recent books produced in the second half of the 20th c. One of them was even printed during the Cultural Revolution in Lhasa, “Tibetan pharmacopeia being one of the few areas of Tibetan medicine officially sanctioned and perceived by local health authorities to have socialist potential” (p. 244).

Chapter 12, *The Journeys of Tibetan Medicine* (by Martin Saxer), presents a nice sketch of the history of the Badmaev family who brought traditions of Tibetan medicine and its Mongolian and Buryatian sub-branches to St. Petersburg and eventually via Poland to Switzerland where some traditional recipes were put into production by the company Padma, Inc., discussed in Chapter 3. Although one can expect to find incorrect statements in papers dealing with the Russian realities if not written by professional Slavists this is definitely not the case.

Finally, Vignette 3, *Pillars of Tibetan Medicine: The Chagpori and the Mentsikhang Institutes in Lhasa* (by Theresia Hofer and Knud Larsen), outlines the story of two major medical institutions founded in two periods when Tibetan history wavered to relative secularization and application of some advanced forms of social life. The Chagpori Medical College was established by Desi Sangye Gyatso as “the first documented example of a formalized monastic medical institute” (p. 265) that was a progressive step for the end of the 17th c., while the Mentsikhang Institute was founded by the 13th Dalai Lama, in 1916, its mission being “to teach students from diverse social groups rather than only Gelugpa students” (p. 262). The vignette provides some very interesting information of architecture of both structures, their localization in the city of Lhasa, and their so different fates after the end of “old Tibet”.

As my review has hopefully shown, the catalogue covers so many important aspects of theory, practice and history of transmission of Medical knowledge in Tibet and areas influenced by Tibetan culture that it can be called a great source of learning for anybody who would like to be introduced into Tibetan medicine as a holistic entity. The wonderful and numerous illustrations make this introduction a really inspiring experience. Perhaps, some issues could be added or expanded to a greater
extent. I lack, for example, some criticism concerning real problems that the Tibetan society did face in this sphere of life before the implementation of Western, in its Soviet form, approach to hygiene and medicine. But, of course, it is impossible to tell about everything in one book and my sincerest gratitude is directed to all the authors of the catalogue and, particularly, to its editor, Theresia Hofer, for structuring my own understanding of this part of Tibetan culture and giving some clues to further learning.

Alexander Zorin
Institute of Oriental Manuscripts,
Russian Academy of Sciences