Early Indian Medical Thought: A Study of Diseases and Remedies in the Atharvaveda.

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Abstract: This paper, investigates the notions of disease, healing, and therapeutic practices as reflected in the Atharvaveda. As one of the earliest textual sources of Indian medical knowledge, the Atharvaveda presents a unique synthesis of ritual, symbolic, and empirical elements of healing. The concept of *bheṣaja* in this text extends beyond mere herbal remedies to include mantra-based healing, protective rituals, amulets (*maṇi*), and invocations to natural and divine forces.

The study systematically examines various categories of diseases described in the Atharvaveda, including *takman* (fever), *yakṣmā* (consumptive disorders), *jalodara* (dropsy), skin diseases such as *kuṣṭha* and *kilāsa*, respiratory conditions like *kāsa* and *balāsa*, as well as hereditary disorders (*kṣetriya roga*). It also explores conditions related to wounds (*vraṇa*), glandular swellings (*gaṇḍamālā*), and disorders of bodily functions such as excessive discharge and obstruction. The analysis reveals that disease is often perceived as a combined outcome of physical imbalance and supernatural or moral factors, including *abhicāra* (sorcery), divine wrath, and ethical transgressions such as *anṛta*.

Furthermore, the paper evaluates different modes of treatment prescribed in the text. These include the use of medicinal plants (*oṣadhi*), water-based therapies, symbolic transference of disease, ritual recitations, and the application of specific substances. While many of these treatments appear symbolic or magical, certain descriptions—especially those concerning *takman*—demonstrate relatively systematic observation of symptoms such as periodic fever, chills, and associated conditions. This suggests the presence of an early empirical approach within a predominantly ritualistic framework.

Overall, the study demonstrates that the Atharvaveda offers valuable insights into the early development of medical thought in India, reflecting a transitional phase between myth, ritual, and rational healing practices.

Keywords: Atharvaveda, Early Indian Medicine, Bhaiṣajya, Oṣadhi, Vedic Healing Practices

INTRODUCTION

The history of medical thought in India can be traced back to the Vedic period, where the earliest reflections on disease, health, and healing are preserved in the Atharvaveda. Among the four Vedas, the Atharvaveda occupies a distinctive position due to its rich content on healing practices, medicinal herbs (oṣadhi), and disease-related hymns. Unlike the more ritual-centric focus of other Vedic texts, the Atharvaveda presents a broader and more practical

engagement with human health, making it a foundational source for the study of early Indian medical thought.

In the Atharvaveda, the concept of bheṣaj (healing) encompasses a wide spectrum of practices, ranging from herbal remedies and water therapy to mantra recitation, amulets (maṇi), and ritualistic procedures. Disease is not understood merely as a physical condition but as a complex phenomenon influenced by supernatural forces, moral transgressions (anṛta), and ritual impurities. Thus, healing in the Atharvavedic context reflects an integrated worldview in which physical, spiritual, and cosmic dimensions are closely interconnected.

The text contains references to a variety of diseases such as takman (fever), yakṣmā (consumptive disorders), jalodara (dropsy), skin diseases like kuṣṭha, respiratory ailments such as kāsa and balāsa, and hereditary conditions (kṣetriya roga). These descriptions, though often symbolic and expressed through metaphorical language, reveal an early attempt to classify diseases and observe their symptoms. In certain cases, especially in the treatment of takman, one can identify elements of systematic observation and practical therapeutic approaches.

Scholars have long recognized the close relationship between the Atharvaveda and Ayurveda, the classical system of Indian medicine. Ayurveda is traditionally regarded as an Upaveda of the Atharvaveda, and many of its fundamental concepts—such as the use of herbs, disease classification, and holistic healing—can be traced back to Atharvavedic traditions. However, while Ayurveda represents a more developed and systematized medical science, the Atharvaveda reflects an earlier stage in which magic, religion, and empirical observation coexist.

The present study aims to examine the nature of diseases and remedies described in the Atharvaveda, with particular emphasis on the interplay between symbolic and practical healing methods. By analyzing various disease categories and therapeutic approaches, the paper seeks to understand the conceptual foundations of early Indian medicine and its gradual evolution into more structured systems. In doing so, it highlights the Atharvaveda as a crucial transitional text that bridges ritualistic healing practices and the emergence of systematic medical knowledge.

In the Atharvaveda, the hymns associated with herbs (*Oṣadhi Sūktas*) are designated by the term *bheṣaj*, broadly meaning “healing” or “remedy.” Related forms such as *bheṣajī* and *bheṣajīḥ* are employed not only for medicinal plants and water but also for ritual practices

intended to counteract malevolent forces. In this context, *bheṣaj* assumes a wide semantic range, encompassing therapeutic, ritualistic, and protective dimensions of healing. Notably, even anti-magic peace mantras and protective rites are subsumed under this category. However, the term is not used in the technical sense of a systematic "science of herbs" (*oṣadhi-vijñāna*) within the Atharvavedic framework.

In contrast, the Kaushika Sutra—particularly in its *Bhaiṣajya* section (25.1–32)—along with Brāhmaṇa literature, employs the term *bhaiṣajya* in a more specialized and developed sense, referring explicitly to medicine, herbal knowledge, and therapeutic procedures. This shift suggests an evolution from a broad, ritual-oriented understanding of healing to a more structured and systematized conception of medical practice.

Nevertheless, the precise stages in the development of the concept of *bhaiṣajya* remain unclear. This ambiguity arises from the likelihood that even during the recitation of Atharvan spells against *abhicāra* (harmful ritual acts), certain forms of herbal application were simultaneously performed. However, the details of such practices are not explicitly preserved in the Atharvaveda itself and can only be partially reconstructed from the procedural explanations found in later Sūtra texts.

The more intense and, at times, aggressive dimension of herbal knowledge (*oṣadhi-śāstra*) is prominently reflected in the *Abhicāra Sūktas* of the Atharvaveda. These hymns reveal a distinctive aspect of early healing practices, wherein therapeutic intent is closely intertwined with ritualistic and apotropaic elements. The use of herbs in such contexts is not merely medicinal but also symbolic and magical, aimed at counteracting harmful forces and restoring balance.

Comparable *Abhicāra Sūktas* are also found in the Rigveda (Ṛgveda 10.137; 10.161; 10.163), which exhibit notable similarities in both stylistic features and historical orientation. This suggests a continuity of certain ritual-healing traditions across Vedic texts.

Further, the occurrence of terms such as *bheṣaj* and *bheṣajya* in the Atharvan corpus—bearing resemblance to Avestan expressions like *baešaz* (mantra) and *haoma baešazya*—along with the recurrent invocation of water and plant deities for *svasthya* (well-being) and *dīrghāyuṣya* (longevity), indicates a probable Indo-Iranian cultural and linguistic milieu for these hymns.

According to Albert Kuhn, the treatments for *krimi* (worms) and wounds described in Atharvan literature show parallels with Teutonic herbal traditions. He argues that such practices in both traditions may ultimately derive from a shared Indo-European folk heritage of medicine, thereby highlighting the broader comparative context of early healing systems.

The foundational roots of Ayurveda may be traced to the *Oṣadhi Sūktas* of the Atharvaveda, on the basis of which Ayurveda is traditionally regarded as an *Upaveda* (subsidiary Veda) of the Atharvaveda. This close association underscores the continuity between early Vedic healing traditions and the later systematized medical knowledge of Ayurveda.

A notable degree of correspondence can be observed between the two traditions in their understanding of the preliminary symptoms and classification of diseases such as *jvara* (*takman*—recurring fever) and *yakṣmā* (consumptive disorder). As noted by Maurice Bloomfield and H. F. Wize, certain disease terms occurring in the Atharvaveda—namely *āsāva*, *apacit*, and *manya* (Skandha 6.25)—may be correlated with specific pathological conditions described in Ayurveda. These correspond respectively to *atisāra* (diarrhoea), *apacī* (glandular swelling), and *gaṇḍamālā* (scrofula) (Wize, *Hindu Medicine*, p. 316).

DEVELOPED FORM OF ATHARVAN HERBAL SCIENCE

Despite the conceptual continuity between Atharvavedic healing traditions and Ayurveda, there exists a considerable chronological gap—approximately ten centuries—between the composition of the Atharvaveda and the classical Ayurvedic corpus. Consequently, significant developments and transformations in *oṣadhi-vijñāna* (herbal science) are evident over this period.

According to the Bower Manuscript, the classical system of Ayurveda had attained a mature and well-structured form by around the 5th century CE. This advanced stage of medical knowledge is clearly reflected in the sophisticated therapeutic principles and detailed pharmacological understanding found in the works of Charaka and Sushruta.

In contrast, the herbal knowledge embedded in the Atharvan tradition appears to represent a much earlier phase, predating even the Kaushika Sutra, as suggested by internal textual evidence. The Atharvavedic material thus preserves a more archaic form of medical thought, in which empirical observations coexist with ritualistic and symbolic elements.

Therefore, the medical knowledge articulated in the works of Charaka and Sushruta may be understood as a refined and systematized evolution of earlier Atharvavedic herbal traditions. This developmental trajectory also lends support to the broader hypothesis that Indian medical knowledge, in its mature form, may have exerted a gradual influence on subsequent Greek, Arabic, and European medical systems.

SYMBOLIC METHODS OF TREATMENT IN ATHARVAN TRADITION

Within the *Abhicāra Sūktas* of the Atharvaveda, the classification and identification of diseases often remain ambiguous, with multiple and sometimes unrelated pathological conditions being subsumed under a single designation. Furthermore, there appears to be a conceptual overlap between physiological symptoms and conditions attributed to spirit-possession (*bhūta-bādhā*), reflecting a worldview in which physical and supernatural causation are not clearly differentiated.

The therapeutic measures prescribed in these hymns exhibit a diverse character, encompassing symbolic procedures, *mantra-tantra*-based practices, and the use of amulets (*maṇi*) prepared from plants whose precise identification remains uncertain. Such methods indicate that healing was conceived not merely in pharmacological terms but also within a broader ritualistic and symbolic framework.

Illustrative examples of symbolic therapeutics may be observed in the treatment of *pāṇḍu-roga* (AV 1.22) and *takman* (AV 7.116). In the former, the characteristic yellowish pallor of the patient is symbolically transferred to yellow objects such as the Sun or birds, thereby effecting a ritual “removal” of the disease. In the case of *takman* (fever), the burning heat of the afflicted individual is metaphorically transferred to animals, particularly sheep considered to possess cool blood. Additionally, the hymns include invocatory prayers seeking the restoration of the patient’s normal complexion, transforming the yellowish hue into a healthy red coloration.

Similarly, in hymns referring to *kuṣṭha* and *marīca* plants, the emphasis in curing fever (AV 5.4.1; 19.39.1) and wounds (AV 6.109.1) appears to lie more on symbolic invocation than on the demonstrable medicinal efficacy of the substances employed.

Consequently, the *oṣadhi-vijñāna* reflected in the Atharvaveda often appears indeterminate and unsystematic. In the absence of interpretative support from later Ayurvedic literature, these

healing practices are difficult to reconstruct in strictly medical or empirical terms, underscoring their fundamentally symbolic and ritual-oriented character.

***Takman* (Fever)-**

An important exception to the predominantly symbolic mode of treatment is observed in the hymns relating to *takman* (fever) in the Atharvaveda (AV 1.25; 5.22; 6.20; 7.116). In these passages, the therapeutic measures are articulated in a comparatively systematic and structured manner, suggesting an early form of empirical observation. Notably, the use of the *kuṣṭha* plant as a remedial agent (AV 5.4; 19.39) is explicitly prescribed, indicating a more concrete application of herbal knowledge.

The disease *takman*, described in the Atharvaveda as a *mahā-bhayānaka vyādhi* (highly dangerous illness), exhibits close parallels with *jvara* (fever) as elaborated in the medical tradition of Sushruta, where it is characterized as *roga-rāja* (the "king of diseases"). Furthermore, its clinical features bear resemblance to seasonal febrile conditions, particularly those akin to malaria in modern medical understanding.

The principal symptom of *takman* is fever accompanied by chills, typically manifesting either at fixed daily intervals or on an alternate-day (tertian) pattern. The condition is also associated with a range of accompanying disorders, including *pāṇḍu-roga* (anaemic condition), *śiro-vedanā* (headache), *kapha* (phlegmatic disturbance), *balāsa*, *pāman*, and *khāja* (itching). Of these, the latter two are metaphorically described in the Atharvaveda as the "brother" and "son" of *takman*, reflecting a conceptual attempt to relate associated symptoms within a familial framework.

Significantly, the occurrence of *khāja* (itching) is also attested in the Avesta, suggesting possible parallels and shared conceptual elements within the broader Indo-Iranian cultural and medical milieu.

Remedies for *Takman* (Fever)

The therapeutic measures prescribed for *takman* (fever) in the Atharvaveda are further elaborated in the Kaushika Sutra, where the recitation of healing mantras is accompanied by symbolic ritual practices. These include the use of amulets (*maṇi*) prepared from plants such as *kuṣṭha* and *jaṅgiḍa*, reflecting a synthesis of herbal and ritualistic modes of treatment.

In addition to such amuletic practices, the Atharvaveda (AV 7.116.2) also prescribes an alternative symbolic remedy involving a *śīta-rudhira maṇḍūka* (a cold-blooded frog). This practice appears to function on the principle of symbolic transference, wherein the heat of fever is ritually transferred to a naturally "cool" organism.

Elsewhere in the Atharvaveda (AV 1.12), *Agni* (fire) is invoked and, in certain contexts, conceptualized as a causative force behind conditions such as fever, *kapha* (phlegmatic imbalance), and *śiro-vedanā* (headache). Furthermore, a distinct hymn (AV 1.22) is devoted to the treatment of *pāṇḍu-roga* (a condition associated with pallor or anaemia), which is often described as accompanying febrile states.

Notably, these hymns, along with the associated ritual procedures (*anuṣṭhāna*) detailed in the Kaushika Sutra, continue to be recited in traditional contexts with devotional intent, underscoring the enduring cultural and ritual significance of Atharvavedic healing practices.

Jalodara and the Moral Etiology of Disease

The condition *jalodara* (dropsy) is described in three hymns of the Atharvaveda (AV 1.10; 6.24; 7.83), where its origin is attributed to the agency of *Varuṇa* as a form of retribution (*prāyaścitta*) for moral transgression, particularly *anṛta* (falsehood or unethical conduct). This attribution reflects the Atharvavedic tendency to interpret disease not merely in physiological terms but within an ethical and cosmological framework.

In one of these hymns, the disease is characterized by the expression *hṛd-roga-bādhita* ("affecting the heart"), which may be seen as an early attempt to associate specific pathological conditions with particular bodily regions, thereby suggesting a rudimentary form of clinical observation.

The prescribed remedy for *jalodara* involves the symbolic use of water, which appears to operate on the principle of conceptual correspondence between the nature of the disease and its treatment. Such an approach bears a resemblance—albeit in a preliminary and non-systematic form—to the later principle of similarity observed in modern homeopathic thought.

A comparable mode of treatment is also noted in relation to a condition resembling *harṣa-vāyu* (associated with imbalance of the *tridoṣa*), for which the Atharvaveda prescribes the use of water and aquatic or water-associated organisms, such as frogs. This again reflects a symbolic

and analogical method of healing, wherein therapeutic efficacy is derived from perceived affinities between the disease and the remedial medium.

Āsrāva–Ārtrāva and Related Treatments

The Atharvaveda contains three distinct hymns (AV 1.2; 2.3; 6.44) that address conditions referred to as *āsrāva* and *ārtrāva*. According to traditional commentators, these terms may denote pathological states such as *atisāra* (diarrhoea), excessive urination, or the initial stages of disorders characterized by abnormal bodily discharge. The ambiguity of these terms reflects the broader tendency in Atharvavedic literature to employ generalized or fluid disease categories.

One of these hymns (AV 1.2) is composed in the form of *yuddha-abhicāra* mantras, indicating the application of aggressive or apotropaic ritual techniques in the context of disease management. Another hymn (AV 6.44) invokes a plant identified as *viṣāṇakā*, which is considered significant in the therapeutic process.

Commentarial traditions suggest that *viṣāṇakā* may correspond to *meṣa-śṛṅga* (ram's horn). Etymologically, the term may be interpreted as "that which releases" (*vi* + *ṣā*), and in this context, it is plausibly associated with a remedial function aimed at regulating or restraining excessive discharge, particularly *mūtra-srāva* (urinary flow).

In addition, a separate hymn (AV 1.3) is devoted to the treatment of obstructive conditions such as *baddha-koṣṭha* (constipation) and *mūtrāvarodha* (urinary retention). More detailed procedural and ritual explanations of these treatments are provided in the Kaushika Sutra (25.10–19), thereby offering further insight into the practical application of Atharvavedic therapeutic concepts.

Vāyu-roga (Abdominal Pain)

The Atharvaveda contains a brief and somewhat indistinct reference to *vāyu-roga*, a wind-related disorder identified as *udara-śūla* (abdominal pain) (AV 6.90). The causation of this condition is symbolically attributed to the *astra* (weapon) of *Rudra*, reflecting the tendency to interpret physiological suffering through mythological and ritual frameworks.

In the Kaushika Sutra (31.7), the prescribed treatment involves the recitation of a *bucī* mantra, indicating the continued reliance on incantatory and ritual methods for alleviating such ailments.

The conceptual basis underlying this description appears to rest on an analogy between the experience of abdominal pain and the piercing action of sharp, spear-like weapons (*barchī-sadṛśa tīkṣṇa śastra*). Accordingly, the disease is symbolically construed as the internal effect of such penetrating forces, thereby reinforcing the interpretative model in which physical conditions are explained through metaphorical and ritual imagery.

Balāsa and *Kāsa* Diseases

The Atharvaveda contains hymns relating to *balāsa* (AV 6.14) and *kāsa* (AV 6.105; 7.107), which are generally understood to denote pulmonary or respiratory disorders. These conditions are further subsumed under the broader category of *kṣayakāni* (AV 2.33; 3.11; 9.8; 19.36; 44), a term indicative of wasting or consumptive diseases.

In later Vedic literature, analogous conditions are referred to by terms such as *yakṣmā*, *rājayakṣmā*, and *ajñāta-yakṣmā*—the latter also designated as *pāpa-yakṣmā* in the Taittiriya Samhita. These terminological variations likely represent different aspects or stages of a similar pathological category, reflecting a continuity in the conceptualization of chronic and degenerative illnesses.

Additionally, ritual (*yājñika*) literature preserves references to a debated hymn (AV 6.80), which invokes one of the two divine dogs (*divya śvāna-dvaya*) associated with the Sun. This hymn is traditionally recited for the alleviation of *pakṣa-hṛt*, a condition interpreted as paralysis or impairment affecting one side of the body. Such references further illustrate the interweaving of mythological symbolism and therapeutic intent in Atharvavedic healing practices.

Kṣetriya (Hereditary) Diseases

The Atharvaveda includes three hymns (AV 2.8; 10.3; 7) that address *kṣetriya* diseases, generally interpreted as hereditary or lineage-based conditions. These references indicate an early recognition of diseases transmitted through familial or generational factors, even though the conceptual framework remains non-systematic.

The pathological conditions implied in these hymns appear to correspond to disorders such as *gaṇḍamālā* (glandular swellings) and *upadaṃśa* (ulcerative or venereal-type diseases). While the precise identification of these ailments remains tentative, the descriptions suggest an attempt to classify persistent and possibly chronic conditions within a hereditary context.

In addition to these, the Atharvaveda contains several important hymns (AV 2.33; 9.8; 19.44) that refer to a wide range of internal diseases affecting the human body, along with their corresponding remedies. These therapeutic agents are collectively described under the term *sarva-bhaiṣajya* ("universal remedies"), indicating a generalized curative efficacy attributed to certain herbs and substances.

A more comprehensive enumeration of such disease categories is preserved in later compilations and commentarial traditions, where detailed lists of disease names associated with these hymns are systematically presented.

Skin Diseases (*Carma-roga*)

The Atharvaveda contains numerous *Abhicāra Sūktas* that address the treatment of skin diseases (*carma-roga*), reflecting a predominantly ritualistic and symbolic approach to dermatological conditions. These hymns frequently combine herbal references with incantatory and apotropaic elements.

In one such hymn (AV 1.23–24), a symbolic mode of treatment is prescribed for *kuṣṭha* (*kilāsa*—a skin disorder, possibly comparable to leprosy), wherein dark-colored plants such as *rajanī* and *śyāmā* are employed. The therapeutic logic appears to rest on symbolic correspondence, rather than on empirically demonstrable medicinal properties.

Another set of references (AV 6.127.1; 9.8.20) pertains to a condition termed *vidradhi* (boils or abscesses). Additionally, four hymns (AV 6.25; 6.57; 7.74; 7.76) describe the disease *apacit*—later identified as *apacī*, often associated with *gaṇḍamālā* (glandular swellings)—in a vivid and metaphorical manner. The swollen and painful growths are depicted as if they gently alight upon the human face like birds and are ritually commanded to depart, illustrating the strong presence of imaginative and symbolic expression in therapeutic discourse.

A further remedy involving *rudra-oṣadhi* in conjunction with *jala* (water or cooling treatment) is prescribed for such conditions (AV 6.57), again reflecting a blend of ritual invocation and elemental therapy.

Moreover, the Kaushika Sutra and related Sūtra literature elaborate a variety of *tāmasika* (magico-ritualistic) procedures for the treatment of *gaṇḍamālā*. These accounts collectively underscore the extent to which Atharvavedic dermatological treatments are embedded within a symbolic and ritualistic framework rather than a strictly empirical medical system.

Wounds and Ulcers (*Vraṇa* Treatment)

The Atharvaveda contains specific hymns (AV 4.12; 5.5) that address the treatment of wounds and ulcers (*vraṇa*), wherein an unidentified healing plant is extolled under various epithets such as *rohiṇī*, *aruṃdhatī* (literally, "that which heals wounds"; *arus* = wound), *lākṣā*, and *silācī*. These designations emphasize the curative potency attributed to the plant, though its precise botanical identification remains uncertain.

Another hymn (AV 6.109) praises the *marīca* (*pippalī*) plant, highlighting its therapeutic significance in the context of wound management. Such references indicate an emerging recognition of specific plants associated with healing functions, albeit within a largely symbolic and incantatory framework.

According to Albert Kuhn, the hymn dedicated to the *rohiṇī* plant in the fourth book exhibits notable parallels with the *Merseburg charms* of Central European Teutonic and Slavic traditions. This comparison suggests the possibility of shared Indo-European elements in early healing practices.

In addition to herbal and incantatory methods, the Atharvaveda (AV 1.117) also describes techniques for arresting bleeding (*rudhira-srāva*) through *abhicāra* practices. Furthermore, the application of a bandage coated with sand (*vālukā-lipta paṭṭī*) is mentioned as a practical measure for controlling hemorrhage. This combination of ritualistic and pragmatic approaches illustrates the coexistence of symbolic and empirical elements in Atharvavedic wound management.

CONCLUSION

In conclusion, the Atharvaveda presents an early stage of Indian medical thought where healing is a combination of ritual, symbolism, and emerging practical knowledge. Diseases are understood not only in physical terms but also in relation to supernatural forces and moral causes. While many treatments—such as mantras, amulets, and symbolic transfer of disease—appear magical or ritualistic, certain conditions like *takman* (fever) show clear signs of observation-based and practical healing methods. The use of herbs (*oṣadhi*), water, and simple techniques like bandaging indicates the beginnings of empirical medical practice. Over time, these early ideas developed into the more systematic and scientific tradition of Ayurveda. Thus, the Atharvaveda can be seen as a transitional phase in the history of medicine, where magic, religion, and science coexist and gradually evolve into structured medical knowledge.

References

1. Bhishagratna, K. L. (1916). *Sushruta Saṃhitā* (Trans.) Calcutta: Kaviraj Kunjalal Bhishagratna. (Original work published ca. 1st millennium BCE)
2. Bloomfield, M. (1890). *The Kauśika Sūtra of the Atharva-Veda*. New Haven: American Oriental Society.
3. Bloomfield, M. (1897). *Hymns of the Atharva-Veda*. Oxford University Press.
4. Filliozat, J. (1964). *The Classical Doctrine of Indian Medicine*. Munshiram Manoharlal.
5. Kuhn, A. (1868). *Herabkunft des Feuers und des Göttertranks* (2nd ed.). Berlin.
6. Sharma, P. V. (1949). (Trans.). Chaukhambha Orientalia. (Original work published ca. 1st–2nd century CE)
7. Sharma, P. V. (1992). *History of Medicine in India*. Indian National Science Academy.
8. Whitney, W. D. (1905). *Atharva-Veda Saṃhitā* (Vols. 1–2). Harvard University Press.
9. Wize, H. F. (1845). *Hindu Medicine*. Calcutta.