

Caraka's Approach to Knowledge

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Abstract

Caraka, Suśruta and Vāgbhāṭa are known as the 'Great Three' of Āyurveda and their classics continue to be the foundational texts after many hundreds of years. Among the texts, *Caraka Samhitā* stands out by its emphasis on philosophical themes which potentiate the central theme of medicine. They are to Caraka's medicine what the powerful background is to the figure of Christ in the 'Last supper'. Among the themes of philosophy, knowledge appears in many contexts and shows Caraka's notable skill in adapting philosophical traditions to suit the demands of medicine because Caraka's guiding principle was 'compassion for fellow beings'. This essay outlines the philosophical underpinnings of Āyurveda and traces the ontological borrowings from the *Vaiśeṣika*, *Nyāya* and *Sāṅkhya* philosophers. Further, Caraka's own views on philosophical matters such as ethics, destiny and agency are discussed.

Key words: Āyurveda, Bioethics, Caraka, *Nyāya*, Philosophy, *Pramāṇa*, *Sāṅkhya*, *Vaiśeṣika*

1. INTRODUCTION

Knowledge can be viewed in different ways. In the first place, there are questions such as how do we know? How much do we know? How much can we know? These questions on the means of acquiring correct knowledge are standard in epistemology which was practiced in India as part of the *Nyāya* system of philosophies from ancient times. Caraka does refer to this briefly, but brilliantly, and the means he recommended were the forerunner of what appeared in the *Nyāya sūtra* later (Dasgupta, 1991).

But Caraka does deal in greater detail with other areas of knowledge which are of direct relevance to the physician. There is a segment of knowledge derived from non-empirical sources, which are called '*a priori*'. The examples of this knowledge are the awareness that compassion to patients is an essential part of the practice of medicine; and truthfulness is an essential component of a teacher's duty towards his pupils. *Caraka Samhitā* is replete with this kind of

examples of *a priori* knowledge. An even larger segment of knowledge relates to what is derived from empirical sources such as for example: such and such food habits produce diarrhoea; such and such formulations give relief to respiratory disorders; and such and such conduct of a society would bring about the destruction of their habitat. These examples would underline the medical overlay of Caraka's approach to knowledge. But there was more, which was intuition or inspiration as a source of knowledge. This called for a prepared and highly focused mind, problems in treating illness which challenged the physicians' intellectual limit, hard work and 'an element of luck'. An outstanding example of this pathway to knowledge is ancient *pañcakarma* which attracts patients from India and abroad in droves for the treatment of a variety of ailments and disabilities. The procedure was in vogue even in Buddha's period and was believed to eliminate the excess of *dōṣa-s* which had caused blocks in the countless channels (*srōtas*) which criss-cross the body bounded by the skin outside and the alimentary

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canal inside. The channels and the accumulated *dōṣa*-s blocking them were not visible to the physician except in his 'mind's eye'; and the idea of loosening the *dōṣa* plugs by the ingestion of a fat-based preparation and the elimination of the accumulated *dōṣa*-s which would flow into the alimentary canal by emesis or purgation was untested. In other words, the anxious physician was playing with mental images on the patients' management when he had few means to know directly what had gone wrong in the patient's body and even fewer means to set things right. When the manipulation of images of various schemes seemed to offer a flash of promise, the physician would rush to try the method in a patient. This was the role of inspiration or intuition in the practice of medicine, which will always enjoy a respectable role in *Religio Medici*.

2. CARAKA: A PHYSICIAN, PHILOSOPHER AND SAGE

Although, the period of Caraka and even his name are not certain, there is a consensus among scholars that he lived in the 1st century AD as a contemporary of King Kaniṣka in his realm. He redacted *Agniveśa tantra* which had been the standard text of Āyurveda for centuries earlier because Agniveśa was already a historic figure according to Pāṇini's references to him in the *Aṣṭādhyāyī* (4th century BC). By the 4th century AD, seventeen chapters of the *cikitsāsthāna* and *kalpa-* and *siddhi-* *sthāna*-s of *Caraka Saṃhitā* were lost and a Kashmiri physician, Dṛḍhabala, reconstructed the text which is in current use. It enjoyed immense authority and was translated into Arabic and Persian in the 10th century and into English in the 19th century. A group of senior physicians led by Sir William Osler set up a 'Caraka Club' in New York in the 19th century to celebrate Caraka's heritage in the advancement of medicine.

Caraka Saṃhitā consists of prose and verse, often reminiscent of the style of Brāhmaṇas.

It is interesting that many chapters consist of the reports of discussions held in the *gurukula* of Ātreya in Himalayan surroundings, where Ātreya would introduce a medical topic to be followed by pupils who would discuss different aspects of the proposition, even express dissent, and Ātreya would close the discussion by offering a brilliant summing up. The central theme of the entire text was the ways to remain in good health and stay out of trouble (*svastha-vṛtta*) and how to treat ill health and get out of trouble when necessary (*ātura-vṛtta*). However, this central theme was supported and vivified by a rich background of philosophy and lofty idealism, testifying to Caraka's authority as a physician, philosopher and sage.

3. MEANS OF ACCESSING EXACT KNOWLEDGE ACCORDING TO CARAKA (*PRAMĀṆA*)

Caraka recognised three primary urges in human life - the urge to live long, to earn a living and to secure a good afterlife (*Caraka Saṃhitā : Sūtra 11 : 3-6*). About afterlife, he noted that there were doubts because it was not perceptible through our senses. This was the context in which he introduced the subject of accessing exact knowledge. There were scholars in his time who claimed that perception alone should be recognised as the valid means of accessing knowledge (*pratyakṣaparāh*) but, according to Caraka, their minds were warped by an addiction to the theory of chance (*yadṛcchopahatātmanah*). How could perception be the sole means for accessing knowledge when what is perceptible is so small (*alpam*) and what lies beyond perception is vast (*analpam*)? When a number of factors such as minuteness, too much distance, weakness of sense organs, mental instability etc. could obscure perception? (*Caraka Saṃhitā : Sūtra 11: 7-8*); when a vast range of the energy spectrum of the universe and the equally vast range of physiological events within the internal universe of the body lie beyond perception? Surely,

therefore, one should go beyond perception and apply other means as well.

3.1. Testimony of Sages (*āptopadeśa*)

Sages are exceptional individuals who personify profound knowledge, long experience, truthfulness, freedom from passion and a noble character (*Caraka Saṃhitā : Sūtra 11: 18-19*). They could always be counted upon for counsel, to dispel one's doubts and provide a means to exact knowledge. This is especially true for a physician who is faced with difficult issues in diagnosis and treatment for which the standard texts and his own resources of knowledge may not provide the answers.

3.2. Perception (*Pratyakṣa*)

Knowledge from direct perception arises as a result of the combined action of sense objects, sense, mind and self, each of which is indispensable for perception (*Caraka Saṃhitā : Sūtra 11: 17*). Though perception has been sub-classified into five subtypes based on contact with substance, *guṇa* etc., authorities agree that, 'in reality knowledge that results as the effect of sense contact' would fulfil the definition of perception.

3.3. Inference (*Anumāna*)

Perception leads to inference which was a powerful means for gaining exact knowledge (*Caraka Saṃhitā : Sūtra 11: 21 – 22*). Inference has three types; from effect, the cause could be inferred e.g. pregnancy and insemination; from cause, the effect could be known e.g. seed and fruit; and by constant association, one of a pair could be known e.g. smoke and fire. These methods were used extensively by physicians in diagnosis and treatment.

3.4. Reason (*Yukti*)

Caraka assigned an independent status to reason among the means to access knowledge while other authorities included it under inference

(*Caraka Saṃhitā : Sūtra 11: 23-24*). This was not surprising because Caraka had sought to make Āyurvedic practice '*yuktivyapāśraya*'. His idea of reason in this context involves a series of reasonings to reach a conclusion. For example, one could not predict a good or poor harvest from the quality of the seed alone; it would be necessary to look at other factors such as the quality of the soil, amount of rain fall, manure and so on. Only on a consideration of these related factors could one make an informed prediction of the harvest. This is obviously not inference.

4. CARAKA'S LINKS WITH *Vaiśeṣika*, *Nyāya* AND *Sāṅkhya*

Among the six systems of Indian philosophy, Caraka had close links with *Vaiśeṣika*, *Nyāya* and *Sāṅkhya*. The first century AD was a vibrant period in India's intellectual history when the six systems of Indian philosophy were in the process of evolution and were involved in serious debates with Buddhism. As a physician and philosopher, Caraka was not only interested in the philosophic debates but he also made significant contributions of his own. Dasgupta rates Caraka highly as a philosopher especially with reference to *Vaiśeṣika*, *Nyāya*, and *Sāṅkhya*. But Caraka's approach was always influenced by his basic commitment to the discipline of medicine.

4.1 *Vaiśeṣika*

Vaiśeṣika was an ancient system dating back to the time of the Buddha and drew within its fold 'physics, metaphysics, and logical discussions skillfully dovetailed' (*Caraka Saṃhitā: Sūtra 11: 44 - 56*). Its first authoritative exposition was made by Kaṇāda whose view of the atomic basis of the physical universe is famous. *Vaiśeṣika*'s main concern was the categorisation of '*padārtha-s*' which included all that exists, all that can be named, or experienced. The primary classification of '*padārtha-s*' into substance (*dravya-s*), quality (*guṇa*), activity (*karma*),

Table 1

Term	<i>Vaiśeṣika</i>	Caraka
<i>Para / Aparā</i>	Indicate remote/near in time and space.	Superior/Inferior in reference to geography, season etc. Eg. A dry country is <i>para</i> (superior), a moist, humid country is <i>apara</i> (inferior).
<i>Samyōga / Vibhāga</i>	Union of things which were separate/ separation of things which were in union.	Mixing up two or more substances/their separation.
<i>Sāmānya / Viśeṣa</i>	A certain property resides in many things and is shared/when the property is regarded as distinguishing them from other things.	When a like substance is added to another like substance they increase the bulk/when unlike substance is added, the bulk reduces.

generality (*sāmānya*), particularity (*viśeṣa*) and inherence (*samavāya*) was adopted by Caraka without changes. But other adoptions from *Vaiśeṣika* were qualified. Qualities (*guṇas*), for example, are inherent in substances and have no independent existence. The *Vaiśeṣika sūtra* laid down 17 qualities originally such as colour, taste, smell, touch, size, conjunction and disjunction etc., and the list was expanded by Praśasthapāda later by the addition 7 more qualities including heaviness/lightness, solidity/fluidity, merit (*dharma*) and so on. From this total list, Caraka adopted 20 but limited their practical use to 10 which were physical qualities such as heaviness/lightness and solidity/fluidity. What is also striking is the meanings he assigned to the terms adopted from *Vaiśeṣika* (Table 1).

The direction of Caraka's changes indicated a change of the abstract categories of *Vaiśeṣika* into the more concrete ones of Āyurveda.

4.2 *Nyāya*

Nyāya existed prior to the *Nyāyasūtra* of Akṣapāda (2nd century AD) and had an earlier name Anvikṣikī which was referred to in Kautilya's *Arthasāstra*. *Nyāyasūtra* refers to three kinds of inference i.e. cause to effect (*pūrvavat*), from effect to cause (*śeṣavat*) and from a pair of similarities (*sāmānyatodṛṣṭa*). This was exactly the classification Caraka had used, which was Akṣapāda's source. Dasgupta states that no work

earlier than Caraka's in Hindu, Buddhist or Jain literature treats logical subjects including inference and parameters of debate found in *Caraka Saṃhitā* (Dasgupta, 1991: II: 399). It is however possible that these ideas may have been discussed in *Agniveśa tantra* which Caraka redacted and which is unfortunately lost. But the absence of terms like *pūrvavat*, *śeṣavat* etc. in relation to inference in Caraka would suggest a process of subsequent refinement in nomenclature in the *Nyāyasūtra*. This is equally true in regard to Caraka's definition of perception as a combined operation of sense object, sense, mind and soul, and its more elaborate treatment in *Nyāyasūtra*.

The seamlessness between medicine and philosophy in Caraka is again evident when his detailed discussion on the logical parameters of debate appears in a chapter on '*Roga-bhiṣag-jitīyam*' (features of therapeutics) and is presented in the context of a student's training as a physician. Following an exhortation 'there is no finality in āyurveda: therefore one should devote himself to it constantly and without any negligence', Caraka advised physicians to confine their discussion among professional peers and to Āyurvedic topics. He was a strong advocate of *sambhāṣa* (discussion) as it 'promotes advancement of knowledge, fluent speech; enhances fame; removes doubt; creates confidence, and uncovers new ideas'. In a long chapter on the logical parameters of debate, he gave definitions of no less than 36 technical terms (*Caraka Saṃhitā* : *Vimāna* 8: 27- 65). This kind of description of the

logical aspects of debate is unique to Caraka and the *Nyāyasūtra*.

Training in debate was important for physicians who were bright and ambitious and who wished to establish their doctrines among peers or win recognition as royal physicians. The debates were classified as *vāda*, *jalpa* and *vitaṇḍā*; *vāda* seeks to ascertain truth, *jalpa* seeks to overthrow the opponent's view rightly or wrongly, and *vitaṇḍā* seeks to pick holes in the opponent's thesis without any attempt to present an alternative. Reading the long section on debate and the importance attached to debates in all branches of learning – philosophy, medicine, art – as a means to win peer cognition, one is tempted to believe that special training schools may have existed to hone debating skills among different professional aspirants in Ancient India.

4.3. *Sāṅkhya*

A key concept of the *Sāṅkhya* relates to evolution (*pariṇāma*) which continues to evoke admiration and criticism (*Caraka Saṃhitā* : *Śarīra* 1: 63-65). What is of importance in the present context is the observation of Dasgupta that the original concept of evolution (*mūlasāṅkhya*) consisting of 24 *tattvas* attributed to *pancaśikha* in the *Mahābhārata* finds full expression for the first time in the *Caraka Saṃhitā*. The twenty four *tattvas* evolve as shown in fig. 1.

According to Caraka, the initial perturbation in *avyakta* which triggers the evolutionary process is not predictable or controllable. However, the subsequent changes ending in sense objects are fixed, irreversible and necessary. It resonates with the scientific concept of chance and necessity in evolution. But Caraka's evolution is not open ended like Darwin's evolution; *pariṇāma* will terminate in infinite time and the universe with its stupendous diversity will dissolve into *avyakta* to begin the cyclical process of evolution again. The whole process has no external control and is deaf to human

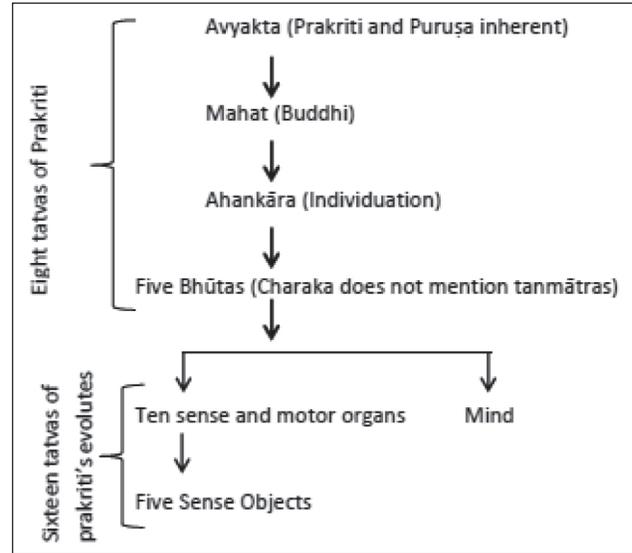


Fig. 1. Evolution of twenty four *tattvas*

supplications. The ultimate state is absolute annihilation or an indefinable Brāhmaṇ state (*Caraka Saṃhitā* : *Śarīra* 1: 98-100). This conception would place Caraka among the best of ancient Indian philosophers. In subsequent versions, *Sāṅkhya* had 25 *tattva*-s (Iśvarakṛṣṇa; *puruṣa* independent) and theistic *Sāṅkhya* (mentioned in *Bhāgavata*) had 26 *tattva*-s (26th in *paramātmā*).

5. CARAKA AND THE HUMAN CONDITION

Caraka's vision was universal in so far as it transcended philosophical systems and medicine. His reflections on destiny, bioethics and the habitat were profound and sounded a note which resounds even today. Caraka's consideration of destiny is as follows: Is life span predetermined? (*Caraka Saṃhitā*: *Vimcna* 3: 29 – 38). This was a question of vital concern to patients and physicians at all times. Indeed the question uppermost in the patient's mind is 'what would happen to me?' And not 'what is my disease?' If life span is predetermined and destiny (*daiva*) is irrevocable, what would a physician's treatment or patient's prayers avail? True, the strong belief in the immutability of destiny had been countered in India from ancient times by the

‘*pauruṣeya*’ view of Yōgavāsiṣṭa which upheld the supremacy of human effort. Caraka dealt with this question in his own way by treading the middle ground. He disagreed with the view that life span was predetermined and nobody could do anything to alter the predetermined span of life. He pointed out that this view would make human effort including Āyurveda meaningless and futile. While errors – small and large – committed in the past would have generated negative forces of *karma*, subsequent actions undertaken in accordance with a virtuous code of life would generate positive forces which could neutralise or even overcome the burden of the negative forces from the past. There is no point in being weighed down by grief, brooding over the past and entering into fatal lethargy. Action, vigorous and righteous, should be the watchword of every wise individual. Vāgbhaṭa endorsed this view on the potency of human endeavour.

Bioethics (*Sadvṛtti*) in Caraka’s view, is much more than biomedical ethics in so far as it takes its stand on the principle that the well-being of humanity is integral to the well-being of our planet (*Caraka Saṃhitā: Sūtra* 8: 18-29). It is not enough that we have concern for our fellow beings today but we need to show equal concern for all living creatures today and for the generations to follow. Caraka’s repeated exhortations that one should learn to see oneself in all living beings and appeal to avoid the overuse and misuse (*atīyōga* and *mithyāyōga*) of physical resources have a contemporary ring because we hear more and more about ‘sustainable consumption’. The oath which he prescribed for initiates into a physician’s training covered the personal, professional, social and spiritual aspects of the candidate’s life in so lofty a manner that it has few parallels in the history of medicine. The code of conduct stipulated ‘*sadvṛtti*’ as a way of life for everyone, which would ensure ‘happy life, wholesome life’ (*bahu-jana-sukhāya, bahu-jana-hitāya*).

6. DESTRUCTION OF THE HABITAT (*JANAPADŌDHVAMSANA*)

Caraka was probably a witness to wars, plunder, punitive taxation, famine, pestilence, mass evacuation of towns and places and the total collapse of civilized living (*Caraka Saṃhitā: Vimāna* 3 : 20 – 24). He traced these disasters to the greed, corruption and aggression of rulers and the progressive decline in the moral fibre of the entire society. The sovereign prophylaxis and remedy for the destruction of the habitat was the recovery of a righteous code of living. Anything less would fail to prevent ruin and extinction.

7. CONCLUSION

In summing up, it is appropriate to study Caraka’s views on knowledge with reference to Āyurveda. He held that knowledge of life – Āyurveda – is without beginning. It dealt with the characteristics of life endowed by nature, which are eternal (*Caraka Saṃhitā: Sūtra* 30 : 27). There was never a time when the flow of life and intellect did not exist. Nor was there a time when the knowers of Āyurveda did not exist. Health and disease, happiness and sorrow, their material substrates and many interrelations are also eternal. Similarly, substances and their inherent properties such as heavy and light, cold and hot and the law of generality and particularity which determine the union and disunion of substances are also eternal. The knowledge of Āyurveda did not arise out of nothing or from a moment of creation. It was only the organisation of timeless concepts and traditions which crystallized as a treatise or a system that was looked upon as the genesis of Āyurvedic knowledge which is, in fact, eternal and without beginning (*śāśvata, anādi*).

The enduring lesson to be taken into consideration here is Caraka’s willingness to draw upon the philosophical and intellectual frames of the *Vaiśeṣika*, *Nyāya* and *Sāṅkhya* philosophers without treating them as frozen dogma. Instead

he built upon and refashioned their concepts to suit his own intellectual conception of science – Āyurveda. The other noteworthy point is the discussion of social awareness and professional ethics in a scientific-technical treatise, which is a lesson modern scientists could do well to learn.

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