

Tibetan Medicine: The Art of Seeing More than Just a Disease



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Grady Hospital; Atlanta, GA, USA: The overwhelming emotion pulsating in Grady Hospital's emergency care center (ECC) is one of helplessness and chaos. The area is lit with abrasive florescent lights and is cluttered with stretchers, wheelchairs, wide-eyed undergrad interns who thought working in an ER would be a glamorous way to spend their summer, and frantic patients struggling to get seen first, or within the half hour, within the hour...or at all. At a given time, there are dozens of patients desiring care; those who are lucky enough to speak English or Spanish, who have their paperwork and insurance in some decently acceptable form and who appear needing enough for immediate treatment comparative to the rest, will be whisked off on a recently and hastily sanitized stretcher. They are seen usually by a resident who will be brisk and to the point; it has been said there is no time or energy for humanity in Grady's ECC.

Outside the ECC, in normal US checkup rooms, many doctors suffer from white-coat syndrome and are consumed by the mystical and mythical power and prestige their M.D. grants them. Those doctors who strive for a deeper doctor-patient relationship built on trust and compassion must struggle with a demanding third party solely concerned with a bottom line: the HMOs. Doctors are encouraged to spend no more than 5-9 minutes tops with each patient. Get them in, figure out precisely what is wrong with an individual's complex human body, give them some pills, and send them out. Again, the space for a significant and human relationship is slim to none.

Men-Tsee-Khang: Tibetan Medical and Astronomical Institute; Dharamsala, India: The waiting room was simple and oddly quiet; you took your number and sat on modest benches. The Tibetans around me chatted quietly, meditated while rocking themselves and gently humming, or spun their mala prayer beads while muttering a

mantra. When I entered the checkup room, the doctor motioned for me to sit down, reached out and silently began taking my pulse using three fingers with varying pressure on my radial artery. After several minutes he asked me a direct question about my health history, switched arms and continued his concentrated pulse reading. He went back to my first arm and this time, began a line of specific questions: Have you had trouble sleeping lately? When exactly did it begin? Have you also had an occasional sore throat upon waking up? And a runny nose too? How often do headaches accompany these symptoms? Have you had a stomach virus this last week? How many days ago was the last day? What have you been eating since then?

As he continued with his meticulous inquiry, he altered the pressure of various fingers, would wait about half a minute and readjust while asking another question. His manner was quiet and intensely attentive. By the time he began to even discuss treatment with me he had spent five to nine minutes solely to take my pulse.

Eastern and Western philosophy, culture, and ways of life differ greatly. The differences also apply to their medical systems. Many Westerners criticize Eastern medicines by deeming them “unscientific,” “mystical” and full of “bogus witchcraft.” After researching Tibetan medicine in Dharamsala, India for three months, it has become evident that Tibetan medicine is not a mystical magic show. It is a wealth of knowledge that has been taught and practiced for thousands of years. It is a deep understanding of not only physiological systems but of an individual’s health in relation to the entire universe around them. Tibetan medicine is more than a science; it is an art form and philosophy as well. Where Western medicine is reductionist, treats to remove the manifest symptoms, and attempts to be purely scientific, Tibetan medicine is holistic,

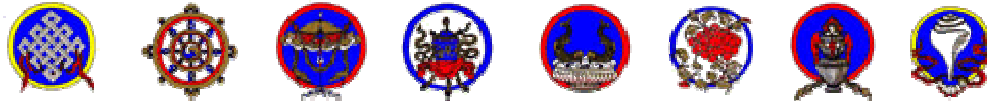
emphasizes preventative treatment, and allows space for spiritual mind-body healing. A new hypothesis proposes this needs not be a black/white, either/or situation, but an instance where two systems can benefit greatly from one another. At worst, an understanding and appreciation of Tibetan medicine would add a new perspective to the current medical treatment in the US, possibly with chances for beneficial integration. At best, Tibetan medicine could assist filling some of the gaps and shortcomings the US medical system now struggles with. Neither system is perfect, however sometimes it is through learning of things dissimilar from oneself that real growth is possible. This will hopefully be the case over the next several decades as the West and East share dialogue about the process of making one healthy again.

Dedication

I would like to extend my deepest gratitude to all of the Tibetans who assisted me with this project. I have never been as amazed by the generosity and flexibility bestowed upon me by those who taught me. My special thanks go to Dr. Kelsang and Dr. Namdul, who always had open doors despite their full lives and busy schedules. I was so impressed that two such talented and demanded physicians could find ample time to explain the basics of their breadth of knowledge to me. Dr. Kelsang went from mentor to “uncle,” helping me travel in Delhi and making sure I got to my plane home safely. I also extend a special thanks to Geshe Dorje Damdul, a Tibetan monk with a love for physics as well as Dharma.

I dedicate this paper to all the exiled Tibetans in appreciation of their selflessness and generosity. I hope that more people can learn of the Tibetans and their cause; I pray everyone will have the chance to watch a sunrise in the Himalayan mountains while

spending time with such a beautiful people and culture. Finally, I also dedicate this paper to future doctors over the world, whether they are allopathic, Tibetan, Chinese, or anything else under the sun. May their hearts be full of bodhicitta as they heal with the genuine motivation to relieve the suffering of all sentient beings.



Methods

In order to get the most accurate understanding of Tibetan medicine, I did both literary research and field work for three and a half months while studying abroad in Dharamsala, India, with the exiled Tibetan government. While there, I was privileged to have in-depth interviews with two Tibetan physicians who had been trained at Men-Tsee-Khang, the exiled government's medical college: Dr. Tzultim Kelsang and Dr. Tenzin Namdul. Dr. Tzultim Kelsang was extremely passionate about Tibetan medicine's approach to doctor-patient relationships and traveled over India giving speeches on this topic. Dr. Tenzin Namdul was a member of Men-Tsee-Khang's research team. He had just finished a study on Tibetan medicine's affectivity and efficiency with diabetes and was beginning a study on cancer within the Tibetan exiled community. This new study was two-fold. Its first goal was design a new diet for the Tibetans living in exile that would be less conducive to the development of stomach, pancreatic, and esophagus cancer. The second goal was to perform a scientific research study on the effect Tibetan herbal medicine had on various types of cancer.

I had three two hour interviews with both Dr. Kelsang¹ and Dr. Namdul². During the first interviews, each explained the basics of Tibetan medicine from their own perspectives. During the second interviews, each spoke about their individual projects within Tibetan medicine. Dr. Kelsang explained in detail the Tibetan's view of the expectations and requirements of a doctor, especially in terms of the relationships they form with patients. Dr. Namdul outlined the research projects he was involved with and discussed the difficulty for the Tibetans to learn how to conduct research in a way that is respected and accepted by the West. He also explained in greater depth Tibetan medicine's view of life-threatening illnesses, how they originate, and how they should be treated. The third interviews I reserved for asking two specific questions: What is the most important and beneficial for Tibetan medicine to learn from Western traditions? What is the most important and beneficial for Western medicine to learn from the Tibetans?

In addition to these interview series, I interviewed the General Secretary of the Department of Health, Mr. Tenpa Samkhar.³ The Tibetan exiled government's Department of Health manages the complicated balancing act of supporting both allopathic hospitals and the traditional Tibetan Men-Tsee-Khangs.⁴ Mr. Samkhar gave his insights on both medical systems and explained the important of preserving traditional Tibetan medicine.

¹ Interviews with Dr. Kelsang were held at the following times: February 14, 2004, 10:00am -12:30 pm; April 28, 2004, 5:00pm – 7:00pm; and May 2, 2004, 10:00 am -12:00 pm. These interviews took place in the sitting room of Dr. Kelsang's modest home located behind the medical facilities. Most noticeable was a large handwriting painting on the wall proclaiming, "Work is a slice of life; it is not the whole pie!"

² Interviews with Dr. Namdul were held in Men-Tsee-Khang's library at the following times: April 27, 2004, 3:00pm -5:00pm; April 28, 2004, 2:30 pm – 4:30 pm; and May 1, 2004, 3:00 pm – 5:00pm. Classes at the medical school were taking place in the nearby rooms

³ Mr. Samkhar's interview took place on April 16 2004, 2:00- 3:00 in his office at the Department of Health

⁴ Men-Tsee-Khang translates to "medicine house"

Additional field work included attending a lecture on Tibetan medicine, interviewing lay Tibetans on their opinions of Tibetan medicine and an interview with the CMO of the Tibetan's allopathic hospital, Delek Hospital. The lecture was given to my Tibetan Civilization and Culture class and was taught by Dr. Pema Dorji on April 5, 2004. He presented a summary of Tibetan medicine focusing on the role of optimism in healing. I interviewed several Tibetan college students attending the Institute of Buddhist Dialectics, Sarah Campus, in order to learn what they valued most about Tibetan medicine. My interview with Dr. Tsetan, head of the allopathic Tibetan hospital, provided an interesting analysis of the traditional discipline as he had chosen the Western system over that of his culture.

Before, during, and after this field work was being conducted, I read many books summarizing and analyzing Tibetan Medicine. The topics of the books can be broken down into two categories: overviews of the history and practice of Tibetan medicine, and comparisons of Tibetan medicine with Western medicine or forms of holistic medicine.



TIBETAN MEDICINE

A Brief History

Tibetan medicine has the dual foundations of a mastery of herbal remedies and a command of recognizing subtle changes within the body. It is speculated that much of the discipline began with nomads in ancient Tibet taking notice of what plants helped certain ailments. Tibetan medicine became a cohesive tradition, however, after adopting much of

the Indian Ayurvedic system in the early 4th and 5th century A.D.⁵ During this time there was a large amount of exchange between cultures in terms of religion, philosophy, and medicine. From the Ayurvedic tradition, Tibetan medicine adopted its philosophy of health as a balance of the five elements and three humors. Tibetan medicine was also influenced by Chinese medicine, from which it derived the art of pulse taking and tongue analysis. As Tibetan medicine developed within Tibet, they established a completely original method of diagnosis: urinalysis. With time the Tibetans increased the sophistication with which they could read pulses, tongues, and urine. A story Dr. Kelsang told with extreme gravity during his first interview on February 14, 2004 was of the first medical conference in the world, which he claimed took place in Tibet during the seventh century A.D. At this conference, physicians from came from Tibet, China, India, Ladakh, Persia, the Middle East and even some of the great Greek physicians showed up. There was a competition of who could best decipher the pulse of a cow. This task was made extra difficult in that the doctors could only feel the pulse through a coarse rope attached to the radial artery of the cow. Despite the fact that pulse taking originated in China, Dr. Kelsang assured me that the Tibetan physicians won the competition.

Tibetan medicine is summed up entirely in one piece of writing, the Four Tantras. This work is called *Gyu-shi*, which means ‘the secret oral tradition of the eight branches

⁵ “Dr Yeshe Dhonden, a Tibetan doctor and personal physician to His Holiness the Dalai Lama, describes its arrival in Tibet during the reign of King Thothori Nyentsen, the twenty-eighth king of Tibet, in the 4th century: ‘What we now call Tibetan medicine was first introduced into Tibet during the reign of that same king, when two doctors, Biji Gadje and his female companion Bihla Gadzey, came to Tibet from India and practiced in the court of King Thothori Nyentsen. In Bodhgaya, Tara, the feminine embodiment of enlightened compassion, had previously appeared to them in a vision and told them they should go to Tibet to practice and teach medicine there. For many generations thereafter, this medical system was transmitted from teacher to disciple solely as an oral lineage, without any textual basis.’ Maresco, Susan C. “Practicing the Art of Tibetan Buddhist Healing,” Mandala. May-June 2000. p 45 – 58.

of science of healing.’⁶ This piece was compiled sometime around the era of King Songsten Gampo, one of the most favorite and successful Tibetan rulers. It was not well used or taught until the rule of the 5th Dalai Lama, Lobsang Gyatso, who had all the information in them verified and organized, and then had them reprinted and taught.

Gyu-shi contains all the knowledge necessary for a Tibetan physician to understand in order to practice. Tibetan medical schools now require students to memorize word for word the entire text, which is four main books subdivided into smaller chapters. The first book, the Root Tantra, discusses the origins of illnesses. It also teaches the diagnostic process and basic treatment methods. The second book, the Tantra of Enlightenment, teaches anatomy, physiology, medical ethics, and more on diagnosis and treatment. The third book, the Tantra of Instructions, goes into detail about individual illnesses and how to treat all of them. It also discusses pediatrics and gynecology. The final book, the Latter Tantra, explains much about the preparation of medicine and the different important plants used in medicine.⁷

The first Tibetan medical school was founded during the time of the 5th Dalai Lama in Lhasa. It was called the Chagpori Medical School. It was updated and expanded during the time of the 13th Dalai Lama, and in 1916, Men-Tsee-Khang or the Tibetan Medical and Astronomical Institute was founded in Lhasa. This institution took half a student body from the lay population and half from the monastic community. Men-Tsee-Khang was the official medical training university in Tibet until invasion of the Chinese in the 1950s, when it was destroyed. The Chinese rebuilt it in the 1970s, however the medicine taught there currently is only what the Chinese government sanctions. Now

⁶ Samel, Gerti. Tibetan Medicine, p 16.

⁷ Samel, Gerti. Tibetan Medicine, p 17-20

aspects of Chinese medicine and Tibetan medicine have been combined at the Lhasa facility.⁸

After the 14th Dalai Lama fled to Northern India and settled his refugee community in Dharamsala, he founded a second Men-Tsee-Khang and an allopathic medical program. The Tibetan government is dedicated to supporting both hospital systems for its people. Jayanti Alam in Tibetan Society in Exile explained it well:

The Tibetans own an excellent system of medicine. It works miraculously when Allopathy and Homeopathy fail. It is gaining fast in popularity not only in India, but also in parts of Europe and America. Yet, the government has an open mind to the specific benefits of all other systems (including Allopathy) What is important to them is the well being of the people- whatever it means.

The Department of Health has a very interesting balance of the two medical systems it supports. They represent a microcosm of the Tibetan exiled government's current struggle to both preserve the unique Tibetan culture and become more modernized as a result of globalization. Tibetan medicine is one of the precious aspects of Tibetan culture that the Chinese are threatening in the Tibetan Autonomous Region (TAR). Tibetan medicine is receiving attention worldwide and helps the Tibetan cause in promoting interest for the Tibetan people. Because of this, it is an area of extreme pride for the Tibetan exiled government and is greatly publicized and promoted. Men-Tsee-Khang was founded shortly after His Holiness the Dalai Lama set up his exiled government and is very competitive, enrolling only twenty new students every other year. It is at minimum a seven year program (including the two years of shadowing fully trained physicians.) Students take all their classes in Tibetan and spend their summers in the mountains of Ladakh learning about and collecting the different herbs and plants used to make Tibetan medicine. This medicine is currently manufactured at Men-Tsee-Khang.

⁸ Samel, Gerti. Tibetan Medicine, p 17-20

Tibetan Tree of Medical Knowledge: This tree summarizes the philosophy behind, diagnosis process of and treatment of various illnesses. Each limb, branch and leaf symbolizes a different aspect of the medical knowledge. Medical students use this tree to help their memorizing process.

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Philosophy: Tibetan's Understanding of Health

An uncomplicated way of looking at Tibetan medicine is to see it as something that communicates with, rather than fights, the disease. It makes peace with the disease. The sickness is there and you respect it. You understand it. After understanding it, you give the right medicine for the sickness, the medicine that puts everything in order. Our organs that are sick, and the system that is sick, are not our enemies. The body is out of harmony with itself, that is all. And that is why we experience illness. The purpose of medicine is to communicate respectfully with the body and to do the right thing to balance it.

~The 12th Tai Situpa

A fundamental difference between Western medicine and Tibetan medicine is their choices of diction. Speaking to a Western physician, the diction is one of war: bacteria invade weaken immune systems; antibiotics kill and exterminate the rogue cells; resistant strains of bacteria counterattack the antibiotics doctors prescribe; the patient is the victim in need of rescue. Disease is seen a battle to be fought with the best technological “weapons,” or medicine. A white coat and stethoscope are the new sword and shield; doctors become the Achillean heroes in the bloody battlefield of pristine clean hospitals.

Tibetan medicine, on the other hand, is called *gSoba Rig-pa*, the science of healing.⁹ It centers on the goal of maintaining harmony within the body. Physicians describe illness as clouds on an otherwise clear blue sky. Health is a natural balance, a state of homeostasis altered by diet, mind state, environment and behavior. A patient controls his or her own health by their actions and thoughts. When one becomes ill, a

⁹ “Introduction to Tibetan Medicine,” http://www.tibet.com/Med_Astro/tibmed.html

fight or violent battle does not need to occur; instead balance must gently be restored to the system in as nonabrasive manner as possible.

Westerns often describe health as a lack of sickness. This is comparable to defining peace as a lack of war. Tibetans view health as much more than a lack of sickness. It is a delicate balance and harmony of the body energies and constituents. The state of homeostasis-or lack thereof- is described in two main ways. First, everything in the cosmos is made of the five elements: earth, water, fire, air and space. Earth gives substance; water creates moisture and cohesion; fire provides heat and light; air promotes growth; space is the place and area.¹⁰ Both Dr. Kelsang and Dr. Namdul emphasized that the entirety in the universe is made of different compositions of these five elements. This includes not only humans, plants, animals and all tangible things around us, but even abstract things such as mental states. Nothing can exist if it is not made of these basic building blocks. This is similar to the 1st Law of Thermodynamics: energy and matter are neither created nor destroyed.

The nature state of harmony is also described in terms of the three bodily humors, or *nyipa sum*. Each of the three *nyipa sum* is made of the different elements and has unique characteristics and functions within the body. When physicians discuss the balance and imbalance in a person, they generally use the three humors to describe them. The three *nyipa sum* are *rLung*, *mKhrisa-pa*, and *bad-kan*.¹¹

¹⁰ Interview with Dr. Kelsang, 02/14/04.

¹¹ All descriptions of the three *Nyipa sum* are a compilation of my understandings of them through the books I read and people I spoke to. Everyone explained the three a little bit differently; here I am writing the descriptions that repeated the most frequently in my interviews with Dr. Kelsang and Dr. Namdul. Also, all the information confirms with Dr. Yeshe Dhonden's descriptions in his book, Health through Balance. The English versions of these terms also vary; I used the versions used on the Tibetan Medical and Astronomical Institute's website (<http://www.tibetan-medicine.org/>)

rLung in English is often referred to as ‘wind.’ It is light by nature and characterized by a subtle flow of energy. In Chinese medicine, *rLung* is analogous to *chi*. *rLung* is light, cool, and very movable. It is rough in nature and hard. Its functions within the body when at normal levels include respiration, muscle movement, excretions of all varieties, spurring growth of bones, muscles, etc, and clearing and steadying the mind. While all the three humors are essential for life, *rLung* often gets extra attention. Dr. Kelsang explained this with a story. He said, “If there is a burning fire and you add wind, the fire only becomes more hot and passionate. If it is a cold day and there is wind, you only are chilled even deeper to your core.”¹² *rLung* is the wind, *mKhris-pa* the fire, and *bad-kan* the cold day. Dr. Kelsang’s point was that a *rLung* disorder is particularly dangerous because in addition to creating the disturbances *rLung* disorders do, it will aggravate even the smallest disorders from the other two humors. Common *rLung* disorders include sinus infections and other respiratory illnesses, any type of mental disturbance or psychological problem and extreme fatigue.

mKhris-pa is often translated into English as ‘fire’ or ‘bile,’ and is what the Chinese refer to as yang. It is hot and sharp; oily and moist; light and pungent. *mKhris-pa*’s most important role is providing the body with the correct amount of digestive heat. It is the humor most closely linked to the blood and creates hunger and thirst. It also maintains body temperature and creates emotions such as anger, ambition, aggression and courage. *mKhris-pa* disorders tend to involve digestion but also include frequent headaches, any fever-related illness, and aches and pains in the upper region of the body.

Finally, *bad-kan* is a cold natured humor, usually referred to as ‘phlegm’ in English. It is analogous to the Chinese yin. It is made of earth and water, thus is heavy,

¹²Interview on February 14, 2004

sticky, oily, blunt and smooth. If *mKhris-pa* and *rLung* are thought of as faster moving, more volatile in nature humors, *bad-kan* is slow moving and more like molasses. It is responsible for balancing out the digestive heat should it get too great, allowing flexibility within the joints, and controlling all bodily fluids. It creates sleepiness and strengthens memory. *Bad-kan* disorders include indigestion, a loss of appetite and any disease that produces an extreme dullness to ones movements and thought processes.



Philosophy: Tibetan's Understanding of Illness

A state of health entails a complete balance of these three bodily humors. Illness occurs if there is a misuse, overuse, or underuse of any of the three.¹³ Geshe Lobsang Negi explained the interconnections between mental state and physical wellbeing in his dissertation,

All disease is viewed as a disturbance and thus misbalance within the three humors. All 84,000 diseases arise from this misbalance...The inner energies that underlie the energies are affected by food, behavior of body, speech and mind, and environmental factors. The energies in turn shape the mental and emotional states, which affects the three humors. Thus the model is cyclic.¹⁴

Imbalances manifest in different ways; some physical such as common colds or infections and some mental such as insomnia or mild psychological disorders. However to the Tibetans, one is 'sick' if there is an imbalance, even if the symptoms are yet to manifest. This is an enormous difference between Tibetan medicine and Western medicine. To the Tibetans, if the root cause has been planted, from that point on one is no longer healthy, even if the person is functioning as they normally would. In that aspect,

¹³ Lecture by Dr. Pema Dorje, April 14, 2004.

¹⁴ Negi, Geshe Lobsang. Emotions and their Impact on Health, p 209.

we are always sick because as imperfect humans stuck cyclic samara, we will never attain the ideal state of harmony. Thus, achieving health becomes more of a goal to maintain the highest amount of balance as possible.

In Tibetan Buddhist philosophy, the root cause of all suffering is considered to be ignorance, or delusion of the mind. This integral belief is the foundation of the Tibetan's medical system as well. In an interview on February 14, 2004, Dr. Kelsang provided an interesting analogy for health and sickness. He said true health is like a clear blue sky. This sky also symbolizes a mind free of delusion and free from the state of samsara. Imbalances of the three humors are manifested as different types of clouds. These clouds originate from ignorance. Each of the three humors has an emotion that creates its disturbance: desire and attachment creates excess *rLung*, hatred and anger creates excess *mKhris-pa*, and delusion and confusion creates excess *bad-kan*. Disturbances are influenced and created in four main ways: a person's diet, their behavior, their environment and finally, their karma.

Diet and one's digestive functionality plays a crucial role in maintaining equilibrium of the three humors. Every food is made of varying quantities of the five elements and has different amounts of the three humors in them. Thus when one eats a certain food, it affects the individuals' levels of the different bodily energies. After one chews and swallows the food, it enters the stomach where the essence, or nutrition, of the food is absorbed. If a person is decently healthy, the nutrition is used as followed: the essence is absorbed into the blood stream, then turns into flesh, then fat, then bone, then bone marrow, and then the regenerative fluids such as eggs in a woman's ovaries and

semen.¹⁵ This cycle links the health of the entire body to what one is eating. If one isn't eating a balanced diet, the essence that is absorbed will not be balanced which will lead to problems first in the blood, then flesh, etc. In addition, if the digestive heat is not at the correct level, the nutrients cannot be dissolved properly. Improper diet and poor digestive heat are the main causes of most treatable illnesses.¹⁶ Tibetans thus would never support a low-carbohydrate Atkins style diet, as is the current Western fad. Instead, they constantly advocate a balanced diet. When questioned on how to know the diet is balanced, Dr. Kelsang explained one needs to listen to their body:

In the West, people move very quickly and are so busy; they never take time to rest and listen to their bodies. Your body will let you know what it needs. Maybe for one meal you eat large amounts of sweet foods. At the next meal if you hear your stomach, it will probably desire salty foods or maybe something spicy. The key is in developing a greater awareness of yourself.

The Tibetans would also probably enjoy our adage “you are what you eat.” If one eats too many sweet foods, they will have an increase in *rLung* because sweet foods are mainly made of *rLung*. If one eats too much spice, which consists of *mKhrispa*, their *mKhris-pa* will increase and they will develop a *mKhris-pa* disorder. If one eats a balanced healthy diet, they will most probably be a balanced healthy person.

Behavior of one's mind, speech and body also influence their state of physical wellbeing. On one level, acting in healthy ways such as not smoking, participating in moderate levels of exercise and getting the correct amount of sleep will obviously contribute to health. Tibetans take the importance of behavior one step farther. Good thoughts, words, and deeds increase an individual's positive karma. Likewise, malevolent thoughts, words, and deeds increase a person's negative karma. Karma, in turn, affects

¹⁵ Donden, Dr. Yeshe, Health through Balance

¹⁶ Namdul, Dr. Tenzin. personal interview, 27 Apr. 2004.

the health of a person. Different actions take on qualities of the three *nyipa sum*. For example, if a person is very stingy and has a great attachment to accumulating much wealth for his own person, every action of his that enforces this will increase his *rlung*, due to the excess attachment and desire.

Tibetan physicians also stress the benefit of following the Dharma, the way of the Buddha. Living as ethically as possible, emulating the Buddha's life, and making time for meditation and prayer are all essential parts of living a healthy lifestyle. This at first can seem superstitious: without prayer, one's chances of becoming sick are greater? However, it can be rationalized by considering the effects of such practices. Much of Buddhism focuses on increasing quality of the mind-body continuum. Meditation slows a person down, allowing them to strengthen their awareness of themselves and their surroundings. The more one meditates the more intimate they are with their mind and body. Their ability to "listen" to the body and its needs is improved. Thus, meditation should be able to increase one's state of health. Also, studies have proven that living a religious lifestyle does in fact improve one's chances of health. An analysis of such studies was presented by Dr. Herbert Benson of Harvard Medical College. Tables 1, 2 and 3 in the appendix summarize his results.

One's environment also affects the interactions of their *nyipa sum*. Both location and season contribute to the various energy levels. At different times of the year, each of the three *nyipa sum* are at varying intensities. The flux of energies subtly adds to the factors one needs to consider while maintaining health. Dr. Namdul explained how the Tibetans currently need to adjust their lifestyle to their new location.

Location strongly affects the balance, as we see today. Now we are really working on modifying a plan for the diet in our communities...we have found the lifestyle

and diet in Tibet can be extremely inappropriate in this environment. The altitude is lower, the climate different; in the summers it is very hot or very rainy with the monsoons. Tibetans have not yet altered their diets, so there have been many more illnesses here.¹⁷

Since they once inhabited an area with very high elevations, very cold weather, and much wind, they needed to eat certain foods and live in a specific way to cope with the intense environment. Now that they are in a lower altitude area with a milder climate, they need a new “program” for health. Many Tibetans hold on to their old lifestyle and Tibetan physicians claim this is why there is an increased amount of sickness within their people. Specifically, Dr. Namdul believes that Tibetans are developing stomach, esophagus and liver cancer because they have suddenly been introduced to much spicy food and are living in a warmer climate. All the increased *mKhris-pa* leads to sickness in the digestive tract and many Tibetans are now dying of these cancers to the extent that cancer has become the leading cause of death within the Tibetan community¹⁸.

Karma, which can be translated to mean ‘action,’ is the fourth factor of a person’s health and can be the most difficult for Westerners to accept. The Buddhists believe with every thought and deed, people accumulate positive or negative karma. It is largely dependent on both motivation and consequence. Thus if one has pure intentions and creates a harmful situation for someone else, they still accumulate negative karma due to harming the other individual, however they do not take on as much bad karma as they would have should they also have had malicious intentions. Karma can influence health directly as discussed earlier, however it also can have indirect and more lasting effects. If

¹⁷ Namdul, Dr. Tenzin. personal interview, 27 Apr. 2004.

¹⁸ Cancer is the number one cause of death, 13.7% of all Tibetan deaths. Tuberculosis is the third cause of death, at 9.5%. (“Health Care of Tibetans In-Exile,” CTA Department of Health, 2004)

a person has a large amount of bad karma, it will carry over into the future health of their next lives. Tibetan doctors explain incurable diseases as products of corrupted karma. Recently, there has been discussion of the parallel between karma and genetics. Genetics is the study of heredity and inherited characteristics that passed down through generations. Karma “carries over” traits as well.¹⁹ Just as most genetic disorders are permanent and untreatable, karmic disorders usually cannot be cured with the traditional approach if at all. Many believe in order to negate the bad karma, one must suffer through whatever illness they have been afflicted with.

Four Types of Disease

Tibetan physicians classify four main types of disease. The first is day-to-day illnesses. These are usually extremely small problems, such as a common cold, minor cut or bruise, or low-stress mental issue such as anxiety or a bout of depression. The causes of these illnesses generally are improper diet and behavior. Thus, day-to-day illnesses are most frequently self-treated.

The next sort of disease is a build up of day-to-day issues which develop into something more serious. Again, they are generally caused by improper diet and behavior. Examples of physical manifestations are infections, broken bones, or more serious psychological issues. For these, most people turn to a doctor for treatment. The first step of treatment would be to correct the dietary and behavioral imbalances. Sometimes this is not enough, so Tibetan herbal medicine would be applied.

¹⁹ When comparing Eastern and Western philosophies, each culture may be discussing a similar concept except using different terminology. Just because something is understood in a certain way does not mean the other point of view is “unscientific” or “less cultured.” In some cases such as genetics and karma, it can merely be another method of describing the same thing.

The third and fourth types of illness cannot be cured by changes in diet, behavior, or by taking medication. The third type is diseases caused by old karma. Usually this bad karma creates such an intense imbalance within the individual and their energies that no amount of medication or change in behavior could possibly repair the situation. The fourth category of disorder is diseases created by evil spirits. These are also called diseases due to external influence. Again, an objective Western scientist might scoff at such an idea, however if considering what exactly the Tibetans mean by evil spirit, it can be taken more seriously. “An evil spirit is a presence that enters the body and begins to take over. It cannot be killed by medicine of any kind.”²⁰ This description is very similar to that of a virus. Viruses are very complicated organisms which enter a body, reproduce and begin taking over the area they are in. It does not respond when treated with antibiotics or other traditional forms of Western medication. It seems it may be analogous to an external influence.

Tibetan Medicine Mandala #1



Even though karmic diseases and illnesses brought about by evil spirits are called untreatable, sometimes Tibetans attempt to cure these with religious methods. The logic is that if these create the worst imbalances, the only way to heal them would be through the intervention of a god or higher power. These diseases depend

²⁰ Namdul, Dr Tenzin. personal interview, 28 Apr 2004.

on the spiritual immune system, and if it needs strengthening, religious practice is absolutely essential. Doctors might prescribe different sorts of meditation and prayer. Faith in the medicine Buddha becomes particularly important at this time. Specific incense might be used. Lamas are often called in to perform lengthy ceremonies, pujas, or incantations. In the most extreme situations, an oracle may perform a divination. Often, these religious measures will supplement a traditional course of medicine. Even though the doctors may not expect the medicine to completely heal the individual, they do believe their treatments can slow down the progression of all diseases.



Philosophy: The Importance of the Whole Body Healing and the Mind-Body Continuum

“...this we know: the earth does not belong to man, man belongs to the earth.
All things are connected like the blood that unites us all.
Man did not weave the web of life, he is merely a strand in it.
Whatever he does to the web, he does to himself...”
~Chief Seattle

Western medicine has been criticized for being specific to the point of seeming restrictive and reductive. It is mechanistic; it examines the disease confined to a certain location in the body, considers the exact mechanism occurring there, and treats that one area. It allows its doctors to specialize, focusing on one part of a much larger, complex person. This approach would never work with Tibetan medicine. As explained earlier, Tibetan medicine does not treat only the manifest symptoms, it treats the entire person: disease, infected areas and everything else as well. This causes Tibetan doctors to have much versatility as they must demonstrate proficiency in all areas of healthcare.

Tibetans doctors consider the larger picture, focusing on the interdependence of all things. Any change in one organ of the body has an effect on all the other organs and systems. To the Tibetans, it is impossible to consider a disease localized in one organ. Perhaps the symptoms are revealed in one only organ, but the sickness itself must be regarded in terms of the entire body. Not only do they consider the relations between different systems of the body, they take into account the connectivity with the universe as well.

In the traditional Ayurvedic and Tibetan approach to medicine, the body is more than a mere life-support system. Although each person may seem separate and independent, all of us are connected to patterns of intelligence that govern the whole cosmos. Our bodies are a part of the universal body; our minds an aspect of a universal mind.²¹

Focusing on the mutually dependence of whole body and cosmos influences the methods Tibetans utilize for treatment. Understanding that a small change will affect many other complex systems, they are hesitant to use abrasive therapy without weighing the consequences. Thus to Tibetans, chemotherapy is always viewed as a poor decision. They agree it can help save the person, however believe it has negative impacts on that individual's karma, the karma of those involved and unknown effects on the greater universe. It becomes a question of the greater good vs. individual happiness.

Certainly one organ Tibetan doctors will never disregard when making a diagnosis is the mind. In Western medicine, psychology is an entirely separate discipline from general medical practice. Healing mind and body rarely mix; even the most dexterous doctors, general practitioners, do not have adequate training for mental issues. The last century in United States allopathic medical treatment has marked the most

²¹ Baker, Ian A. The Tibetan Art of Healing p 8

divisive period of healthcare in terms of ignoring the power of the mind and spirit when healing.²² In the last several decades, studies have begun to show the mind does play a more powerful role than previously acknowledged. New fields, such as psychoneuroimmunology and neuroplasticity are emerging to explore the connections between the brain, immune system, emotional states, and physical body. Currently the most conclusive results report that negative emotions such as anger, aggression, and stress directly decrease one's health. Not only do they cause people to become sick more, they also have been shown to slow the immune system's ability to restore the body to health. "Dr Herbert Benson states that fully 60 to 90% of all visits to doctors' offices have stress related causes. He comments that doctors often fail to recognize this important factor, thus limiting the effectiveness of their cures."²³ While physicians in the West are struggling to understand the complex relations between mental states and physical health, and learn how to utilize their conclusions to generate more effective healthcare, this particular aspect of healing is Tibetan medicine's expertise.

As repeatedly remarked, Tibetan medicine has deep Buddhist religious and philosophical roots. One of its most concrete positions is that the mind controls how we understand and interact with the world around us. This is true to Buddhists regarding our relationships, happiness, and even our health. In Tibetan Medicine and Other Holistic Health Care Systems, Tom Dummer eloquently expresses this concept.

Mind is superior to the body. Mind is the architect of all our sufferings and happiness. Mind is the master; body and speech are the attendants. While the cultivation of the art and science of medicine is predominantly intended to cure the physical ailments of a being, Tibetan physicians place an equal degree of stress on the cultivation and development of mental power and the observation of

²² Benson, Dr. Herbert. The Power and Biology of Belief

²³ Negi, Geshe Lobsang. Emotions and their Impact on Health, p 255.

moral laws...Tibetan medicine, firmly rooted in religion and philosophy, takes man as a whole...as a physical entity and a metaphysical potentiality.

One of the first implications of directing healing to the mind and body is that the patient is immediately empowered. Should they take a positive attitude through the treatment process, they will have a greater chance of recovery. During his lecture on April 14, 2004, Dr. Pema Dorje explained a simple instruction he gives his patients to assist in better health. “A more relaxed person will heal much better than one who is stressed. Also they will not become sick so fast. Because of this, I suggest to all my patients three smiles a day. If everyone will smile from the heart, I think this could be the best medication in the world.” Surprisingly, in the West most of the studies on emotions affecting health have been on negative emotions. The studies on positive emotions have not yet produced consistent results. However the Buddhist have spent centuries exploring the processes of the mind and their relations with the body. Perhaps it is time for Western scientists to turn to the East for assistance in understanding how a genuine smile can help alleviate the common cold.



The Diagnostic Process

The Four Tantras explain there are three parts to the diagnostic process: observation, pulse-feeling, and questioning. Observation has several subcategories. When a patient

Image 2: Painting of a Physician Evaluating a Patient



initially walks into the room, a Tibetan physician immediately analyzes their behavior and decides which of the three bodily humors dominates the individual. Posture, physical stature, speech, and mannerism are considered to determine each person's nature humor tendency. Generally, people who are short, large, move leisurely and are slow to anger or react are dominated by *bad-kan*. *rLung* individuals make rapid movements, can tap impatiently, are often thin and tall and talk a lot. *mKhris-pa* people are often of medium height and build, are more aggressive in manner and posture, and might be quicker to anger. It is important to determine which humor naturally governs a person before any other procedure, because if a physician does not recognize a person's true inner nature, they may misdiagnose them as having too much or too little of any of the three humors. Learning a person's nature adds to a more complete and accurate understanding of their current health state. In an interview on May 1, 2004, Dr. Namdul shared the importance of this initial visual evaluation of a patient "Instead of first looking at the disease, look into the patient and their body itself. Before even asking what is wrong, look into the patient's body and being, and develop an understanding. Only then can the diagnosing process begin."

The visual diagnostic process continues with tongue analysis and urinalysis. Urinalysis was developed by Tibetans and is completely unique to their practice. Tibetan physicians have become so precise and sophisticated at deducing a person's health through their urine that Dr. Tenzin Namdul once said urine is the mirror to the soul. When examining urine, doctors investigate the color, shade, odor, amount of bubbles before, during, and after stirring, the sediment after allowing urine to sit, and the consistency of the urine. They evaluate these factors three times: in the morning, in the

midday, and in the evening. There is a strict regime of dietary and behavior requirements the day before providing urine as well. Some Tibetan physicians do not even need to see the patient, but from a sample of urine alone can accurately diagnose a patient. Tongue analysis also provides valuable information. Tongues are examined for color, moisture, size of bumps, and type and consistency of phlegm covering it.²⁴

The second segment of the diagnostic procedure is the subtle art of pulse reading. Several Eastern medical systems, mainly the Tibetans and Chinese, are famous for their ability to determine so much about a person's health through listening to the pulse. Physicians place three fingers on the inside wrist, on the radial artery. Each finger is applying a different amount of pressure and thus can feel a unique aspect of the beat. Susan C Maresco, in her article "Practicing the Art of Tibetan Buddhist Healing," compares pulse reading to mastering musical understanding.

Feeling pulses is somewhat comparable to understanding and appreciating music- the beats, rhythm, intensity, structure- all are part of a recognizable composition. In music, this might mean a minuet, canon, fugue, symphony, etc. In Tibetan medicine, this translates to a variety of pulses indicating certain conditions in the patient. Like playing the guitar, talent at pulse reading comes only with much practice and



familiarity with the skill. They determine the gender tendency of the pulse: a female pulse is strong, firm and taught, a male pulse is swift and strong on the surface but nonexistent when more pressure is applied, and a neutral pulse is weak and lazy.²⁵ They

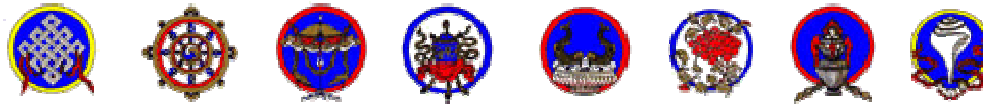
²⁵ Dr. Tenzin Namdul, 04/28/04

determine whether the pulse is hot or cold, which allows them to decide if the ailments are hot or cold. A hot pulse seems to jump under the physicians fingers and is very quick, while a cold pulse is slow, thin and more difficult to follow. Then, each of the three fingers on a doctor's hand is divided into two sections and corresponds to a different part of the human body. The pulse they feel at each portion of their fingertips tells them if that area of the body is functioning normally or is out of balance. Doctors take the pulse on both arms and vary the pressure of each finger. After all of this, the doctors have a full analysis of the inside health of the body without an x-ray machine or an ultrasound or any other form of modern technology that provides Western doctors with their information. The only "tool" Tibetan physicians need is their own hands. They are so gifted at this craft that Tibetan doctors can feel when a person is going to die, even from when they are a young child.²⁶

Questioning is the third step of the diagnostic process and is often integrated with the other two steps. As the doctors observe the patient, their tongue, their urine, and take their pulse, they ask questions regarding the patient's health history. They ask about previous health problems, the diet the patient has maintained in the recent past, the behavior the patient has partook in, and so on. Tibetan physicians consider the questioning process very delicate. They do not want to ask too much, which could potentially lead a patient to false conclusions of their health state and worry them. At the same time, they do not want to ask too little and miss an important piece of information. They must be thorough. Sometimes an answer to a question will cause them to repeat one of the earlier steps, or pay extra attention to a specific part of the pulse. In this way, the

²⁶ All information regarding pulse reading comes from an interview with Dr. Kelsang on February 14, 2004. I verified it with Dr. Yeshe Donden's [Health Through Balance](#).

process is cyclical in parts. The diagnostic process is not a linear check list, it is an interactive web that must be individualized for each patient and the symptoms present at that time.



Treatment

The basic strategy when Tibetan doctors are presented with an illness is to 1) stop creating more disturbances in the body's equilibrium and 2) to guide the body back to its initial state of harmony. The first step is often neglected in Western medicine. If a patient comes in with a sinus infection, he or she is given antibiotics to rid the body of the infection. However, it is rare that a doctor would discuss things with the patient such as sleeping patterns, vitamin and mineral intake, or stress reduction. All of these things affect the immune system's susceptibility to a sinus infection; if not taken care of, a new infection will inevitably return. Tibetan doctors seem to follow the old adage: "To prepare and prevent is far better than to repair and repent." Healing is not merely about ridding the body of its symptoms, it is also greatly concerned with discouraging future illnesses. As Dr. Namdul said in an interview on April 28, 2004: "It's not just about treating sick people, it is about keeping healthy people healthy."

After a Tibetan physician gathers enough information to evaluate his or her patient's health, they have a much fuller understanding of how to go about fixing it. In Western medicine, patients tend to look for a miracle drug that will solve all of their problems immediately. However, for all the reasons previously discussed, Tibetan medical treatment pursues a much different course.

To arrest the causes of the disease, a doctor almost always first considers the state of digestive heat. Dr. Namdul repeatedly emphasized that most day-to-day build up diseases originate due to poor digestion. If the digestive heat is not working correctly, the nutrients will not absorb in beneficial ways which will immediately disrupt health. Regardless of the severity of the illness, without restoring the effectiveness of the digestive heat, any improvement in health will be thrown off again when additional poor digestion occurs. Most often, to repair the functionality of the digestive heat, one needs to consume more *mKhris-pa*, which increases the heat, or more *bad-kan*, which helps the fluids flow in the correct manner and dissolve properly.

After attempts are made to correct digestive heat problems, a physician considers what dietary changes should be made. Again, in order to promote health, an individual needs to be consuming a balanced diet to provide his or her body with the correct amounts of each bodily humor. Mistakes most people make in terms of diet are eating too many sweets, which increases the *rLung*, eating foods at the wrong temperatures, which affects the digestive heat, and drinking too much dairy, which increases the *bad-kan*.²⁷ Dietary changes are useful in two ways: they can be corrected so the patient is no longer eating out of balance, and they can also overcompensate one or more of the humors to help the body reach its equilibrium point faster.

After considering an alternation to one's diet, a physician makes recommendations for one's behavior. Some of their "prescriptions" here might sound like common sense: get enough rest, exercise a certain amount, bath frequently. Tibetan physicians also readily give religious and ethical advice. To the Tibetans, doctors have a greater responsibility of their patients lifestyle, and at times act as family members,

²⁷ Dr. Namdul, personal interview, 27 Apr. 2004.

chiding a certain behavior and encouraging another. Dr. Kelsang, who speaks to the public about doctor patient relationships within the Tibetan medical community, explained the relationship should be as that of a brother and sister. “A doctor-patient relationship is like a brother-sister relationship. They must be very close, comfortable with one another, and able to offer advice. Other people- your friends, family, and doctor- *must* tell you your behavioral errors. Then you must analyze yourself and change.”



If the disease appears severe enough to the doctor, or if the disease was not cured after trying to change diet and behavior, a course of Tibetan medicine is prescribed. Tibetan medicine is 95% herbal.²⁸ The five percent that isn't herbal is only used in the precious pills, which are used for the worst illnesses. These precious pills have small amounts different metals such as silver and gold combined in them. One year of

Tibetan medical school is dedicated to memorizing the different plants used to make medication, their uses, and how to prepare the actual medicines. The entire community, lay people, monastic members, and doctors alike, expressed extreme pride in Tibetan medicine. It is supposed to be gentle enough so it leaves zero side effects. Tibetans criticize Western medicine in that while it might be quick and effective, it often is harsh

²⁸ Samel, Gerti. Tibetan Medicine p 23

and harms the rest of the body, opening the gateway for new illnesses to take hold.

Tibetan medicine is taken multiple times a day with hot water. It must be taken must be ground up to a fine powder with a mortar and pestle. It certainly is a long process, and requires much more effort than Westerners are accustomed to. Dr. Kelsang, Dr. Namdul, and Dr. Tsetan all admitted unless a change in many Westerners mindsets occurred,

An Assortment of Tibetan Pills



Tibetan medicine would be much less successful in Western cultures simple because it requires so much energy and mindfulness. However, when used diligently and correctly, it is remarkably successful at

alleviating the body of illness without harming the body at all.

Should the person not respond to all of the discussed treatments, more drastic measures are taken. It is very rare that surgery is ever performed. In general, Tibetans regard surgery as doing far more damage to the body than good. It is quick, hard, and destructive to the body system as a whole. During an interview with Dr. Namdul on May 1, 2004, he explained that surgery is technically allowed in the Four Tantras. There is one entire chapter dedicated to when and how surgery should be allowed. However, the grandmother of one of Tibet's kings died during surgery and ever since that incident, surgery has been forbidden. The reasons for avoiding it are thus the preservation of tradition, which is an extremely strong sentiment among the Tibetan culture, and to

follow the philosophy of the medicine to do less harm than good. Dr. Namdul specifically named gangrene, gallbladder stones, and kidney stones as health issues that should never be treated with surgery. He insisted four to six months of Tibetan medicine would cure these issues in a nonaggressive manner. The theme of nonaggression and noncombative methods to cure diseases reveals the influence of Buddhist religion on its medical practice.

Finally, a more acceptable route for severe and seemingly untreatable illnesses is religious intervention, as discussed earlier. It is essential to recognize why Tibetans would seek religious help for a health problem. To them, physical illness is interdependent and irrevocably linked to spiritual illness and mental state disturbances. They also believe much of a doctor's strength comes from following the Dharma.

There is no separation of healing skill from Dharma. The greater the person's heart-realization of true Dharma, the greater doctor he can be, for he will have the two-fold Buddha-nature aspects of wisdom and compassion, rendering him more capable of understanding the depths of the medical sciences and serving the physical, emotional, and spiritual needs of his patients.²⁹ While the West believes they will find the answers to medicine's trickiest problems by observing the cells and their interactions, the Tibetans are more convinced they will find the answers in something less tangible.



Doctor-Patient Relationships

I will admit, what drew my interest to Eastern medicine and in particular to Tibetan medicine was the concept of a stronger doctor-patient relationship. As a pre-med

²⁹ Terry Clifford, Tibetan Buddhist Medicine and Psychiatry p 61

student in the United States beginning to work in hospitals, I had started asking both physicians and the people they treat questions. The answers, both spoken and observatory, were causing me feel quite apprehensive about the ideals of a doctor versus what they actually do. I saw many cold interactions where doctors treated patients as little more than objects. I felt the wolfish presence of HMOs crowding compassion and humanity out of hospital rooms, and most horrifying for me, I saw deep fear and confusion in the eyes of so many patients. I had always wanted to be a doctor for my idealistic goals of helping people when they are frightened, comforting them and above all, giving them hope. Because I am stubborn and hate giving up, instead of accepting failure of the US healthcare system to provide enough of the doctor-patient interactions I'd hoped for, I started asking more questions: Could there be an emotional bond in healthcare? Is objectivity the best route? Are there any medical traditions that support more of my ideals for treatment?

After some online research, I became interested in several Eastern medical practices. They had an air of mysticism to them which I was skeptical of, however they seemed to support a more human tone to treatment. I was intrigued and researched more. I was mainly drawn to Tibetan medicine because it seemed to maintain a scientific, knowledgeable approach to treatment while advocating the important of doctors being much more than pill-pushers. The more I learned about their philosophy and training, the more impressed I became. There are five aspects of Tibetan's view of doctor-patient relationships I believe the medical tradition its unquestionable quality and value. The importance placed on a doctor's responsibility, the sense of compassion, the importance of faith and trust, the power of touch, and patient empowerment and responsibility are all

considered integral to an effective healing process. I suggest that Western medicine would become much more successful should more of its physicians practice these approaches.

The first crucial approach to establishing a strong doctor-patient relationship is the responsibility of the doctor for his or her patients. This is advocated to an extent in the West; a physician is expected to know the newest medical developments, make it through medical school and residency collecting as much knowledge as possible so they will be able to treat any issue in the most efficient way possible. While this is all good and well, the Tibetans take it to a new level. When I was in India, I also worked at Delek Hospital, the Tibetan run-and-supported allopathic hospital. There, I felt the weight of doctor responsibility crushing into me based on what I disliked the doctors doing. Many times while observing at Delek, the doctors did not consider a patient's comfort or feelings but instead treated them as instructional demonstrations. By never acknowledging the patient or asking for their permission, it almost dehumanized them. Most patients seemed to retract into themselves and ignore the doctors during this time. However, occasionally I would look into their eyes and see a mix of fear, confusion and a child-like trust.

Working with the doctors at Delek taught me much nitty gritty information about various diseases; however I was affected more by the responsibility a doctor has for his or her patients. The patients were coming to the doctors usually because they were so physically ill they did not know what to do. Many were scared and helpless. They were giving the doctors the right to treat them, completely trusting their decisions. The weight of this responsibility and the extent of possible abuse truly hit me.

In Tibetan medicine, not only are the doctors responsible for knowing how to treat the disease, they are responsible for encouraging and inspiring the patient to want to heal, to follow the correct regimen in terms of diet, behavior, and medical treatment to heal, and to instill hope in each and every patient that they can heal. Dr. Kelsang claimed if a patient did not follow his medical treatment, it would be his own fault for not inspiring enough or for not impressing the importance of a specific instruction. In an interview on April 23, 2004, Dr. Tsetan, a Tibetan allopathic doctor who has been greatly influenced by his culture traditional medical system, explained why the level of doctor responsibility should be so great: “Unconsciously, there are three questions a patient asks him/herself when walking into a doctor’s office: Do I have faith in this person? Do I believe in their ability? Do I respect them?” When a sick person approaches a doctor, they are showing themselves at one of their weakest moments, vulnerable and not sure how to heal themselves. According to the Tibetan model, not only are they physically sick, but spiritually and mentally confused as well. It is thus up to the doctor to pick up their spirits and lead them to health.

To do this properly requires the second important criteria of a Tibetan doctor-patient relationship: compassion. Compassion is an emotion deeply rooted in and supported by Tibetan Buddhism. Bodhicitta is the concept of a universal intense sense of compassion to alleviate the suffering of all sentient beings. It is the most noble and pure emotion anyone could experience, and is also the most meditated on and strived for. Doctors are required to always attempt implementing bodhicitta into their practice. The motivation of a doctor should be to do anything in their power to assuage the suffering of his or her patients. The physician should want so strongly to eradicate the suffering of

those around him or her, it should be as if the suffering were the doctor's own. The doctor should also want to cure everyone's suffering because bodhicitta is universal. True to the ideal, Men-Tsee-Khang treats anyone and everyone regardless of race, country, economic status or religion. Delek, the allopathic hospital even emulates this philosophy with a sign outside the hospital claiming "All races, all creeds, all colors are welcome here." As Dr. Kelsang Dhondrup said, "Knowledge and skill alone are not enough to become a good doctor. Love and compassion towards patients and a sincere effort to share their tension and distress is an equal- if not more- important and essential quality of a doctor."³⁰

A strong sentiment of compassion from the doctor will assist giving the patient the third important quality: faith and trust in the doctor. Earlier, the power of one's mental state and belief was discussed. If one is confident their doctor is not only capable of helping them but also genuinely wanting to, they will believe more in the treatment process. Because of the ability of the mind to affect physical state, if the patient believes the medicine is going to help them, it will heal them more than it would have if they were skeptical of the doctor's intentions in the first place.

There are additional benefits of increased trust. The more a patient trusts and respects their doctor, the more likely they are to follow the doctor's advice. Also, the more comfortable a patient is with their doctor, the more open and honest the patient will most likely be with the physician. A doctor could then get a better idea of how the illness is progressing, how the patient is managing, and what course of action to follow to

³⁰ Baker, Ian. The Tibetan Art of Healing p 16

continue improving the state of their patient's health. Therefore, instilling faith and trust in a patient is more than a nice idea, it will directly improve the healing process as well.

A fourth admirable aspect to Tibetan medicine that they and I believe contributes to their success is the power of touch. A delicate and complex dynamic between doctor and patient is the hierarchical feel to most doctor-patient interactions. We have established the importance of respect and trust for a doctor from a patient, and can agree a patient is turning to a doctor for help and advice. However the power system is often taken too far. White-coat syndrome in many Western medical

Tibetan Medicine Mandala #2



practices leaves the patient feeling like a helpless victim while the doctor becomes the almighty and almost god-like hero. While the respect is alive and well, the humanity and compassion aspects begin to disintegrate. With this lack of emotional connection, a barrier can build between doctor and patient. This distance most certainly will decrease the effectiveness of the treatment.

One method the Tibetans claim helps to ameliorate this problem is the simple solution of human touch. Human contact, regardless of how small or for however short an amount of time, forms a bond between two people. Of course, even if doctors recognize touch could be a positive idea, the natural question in this day and age arises: how to

integrate touch while maintaining a professional and respectful environment? The Tibetan's solution was already an essential part of their diagnostic process: holding a patient's wrists while pulse reading. Dr. Kelsang believes this simple act breaks down a barrier and immediately puts the patient at ease. In an interview on February 14, 2004, he said: "When I take the pulse of a Westerner, with the slightest touch of the wrist, I can feel them crying inside. The power of touch does so much. There should be a close relationship between a doctor and a patient. The touch must be there, it brings them close, it is the doctor actively caring."

In the West, doctors do not take pulses for five to nine minutes as they do in Tibetan consulting rooms. In fact, they do not take a patient's pulse at all; the nurses do. However, Dr. Kelsang believes even a minute of touch can be beneficial. How difficult would it really be for the doctor to spend sixty seconds taking their patient's pulses themselves?

Finally, the fifth powerful aspect of Tibetan medicine that enhances its doctor-patient relationship is the emphasis on patient empowerment and responsibility. First a doctor has taken it upon him or herself to genuinely encourage and inspire their patient; after that doctor then must act with bodhicitta and instills a sense of faith and trust in the patient; then, when the hierarchical system is exchanged for one of respect and friendship, the patient and doctor can begin to act as a team. Instead of the doctor being the white knight who saves the day for the patient-in-distress, the doctor is guiding the patient through the treatment. The patient must be made aware he or she has an active role in the healing process. The patient must take some responsibility to take their medicine as directed. The patient is the only person who can actually change their diet

and behavior. The patient is the only one who controls their mind, the architect of their universe. The power to heal lies in whoever will follow the steps laid out for them. The doctor explains the path, acting as a mentor, but it is the patient who must act them out.

This responsibility is empowering. I feel that once the patient realizes it is his or her efforts in conjunction with the doctor's knowledge and encouragement that is healing them, their belief in themselves can only grow. The Buddha Shakyamoni taught, "You are your own savior/Who else can be your savior?/ Wise people completely refine their minds/ And attain the higher states of being." This summer, I volunteered at Children's Healthcare of Atlanta on the oncology floor. With the cancer patients, doctors are beginning to add complementary medicine to their traditional chemotherapy and radiation treatment. Visualization and meditation are frequently used, as are classes on patient empowerment. The children are taught what foods are the best to keep them strong when fighting the cancer; the importance of relaxation for more effective improvement is explained; cancer survivors come in to discuss the power of determination. This gives them something to do, a way to participate in their own journey back to health. This is the mentality the West has started to learn from the East and it hopefully will continue in the years to come.



What the East can Learn from the West

In the last twenty years, open dialogue has initiated between the West and the East in terms of philosophy, science and religion. The Mind-Science Conferences bring together top Buddhist philosophers and scientists with elite Western philosophers and scientists so they may all pick at each others brains about the overlaps and associations

between science and religion. These two topics, which at times seem so controversial, come together so easily with Buddhism. It thus provides a great starting point for conversation. Without conversation, new ideas will never be born. It is exciting comparing topics one might never have thought to compare, such as the Dharma and neurophysics, or Einstein's Theory of Relativity and the Buddhist idea of impermanence. One of my objectives when interviewing the Tibetan physicians was to get an idea of what they valued most in their medical system and in ours.

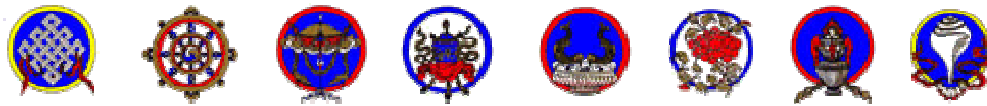
Dr. Kelsang and Dr. Namdul both believe Tibetans need to learn how to do better scientific research. Concepts such as the scientific method are brand new and still somewhat foreign to them. They view Western clinical studies as clear-cut, conclusive, and logical. Tibetans have never had to do clinical studies to prove to others their medicine works; they have simply practiced what they knew. Now that they want their medicine to be respected by the rest of the world, they need scientific evidence that they have creditable information. For example, some Americans would like access to Tibetan medicine, however every Tibetan pill is made of many different herbs and few of these herbs have been approved by the FDA. Many of them might never get approval from the FDA either; the FDA tests herbs individually and Tibetan medicine only works when they are all combined in specific proportions. Since the Tibetans have never run tests on their drugs themselves, they have no data to give the FDA to prove their medicine isn't a hoax. Dr. Namdul is on Men-Tsee-Khang's research team and spoke candidly about the difficulties they have had learning how to complete successful, official research projects that will be accepted by the global science community. He hopes to run a few research

projects jointly with Western scientists so the Tibetans can work hand in hand with them and learn from our precise and procedural work.

Dr. Namdul also expressed a desire to learn some of the mechanisms that occur when the body is fluxing between states of harmony and disharmony. During his last interview on May 2, 2004, he said: “While we do not *need* to know the mechanisms because we know the result, it would be nice and perhaps fun to learn what is going on at a smaller level.” To learn things at a microscopic level would only strengthen the Tibetans medical system. Then they would be able to communicate their views to more people as they would have another method of understanding and explaining their philosophy of health.

Dr. Kelsang discussed briefly the contrast of Western “S.O.S.” drugs versus Tibetan slow-effecting ones. He mentioned how the Tibetan exiled government supports both allopathic and traditional Tibetan medicine and shared why he thought both were needed. His Holiness has done a remarkable job of setting up the refugee community and pushing its international agenda by marketing Tibet’s unique culture. At the same time, he has encouraged his people to accept some amount modernization. If the Tibetan government did not support an allopathic medicine system, Tibetans who wanted the option of more modern medicine would be forced to turn to Indian hospitals. This would create money issues for many refugees. It also would leave the Tibetan exiled government less self-sufficient. Men-Tsee-Khang and traditional Tibetan medicine are still viewed as excellent health care by the majority of Tibetans, however allopathic medicine has several benefits that Men-Tsee-Khang does not offer. Tibetan medicine generally takes a much longer time to cure a patient. Today’s world is so often focused

on speed, and allopathic medicine offers a quick recovery. So, when Tibetans are sick and know there is an “S.O.S.” drug that will immediately heal them, they sometimes take that option and then take Tibetan medicine afterwards, to restore balance. During Dr. Kelsang’s last interview on May 2, 2004, he said he hoped Tibetan medicine could study more ways to use both the “S.O.S.” drugs and their traditional, safer, less abrasive medicines. Then perhaps people could receive the relief they desired at a more attractive speed, while still receiving the benefits of a balanced, whole body health.



What the West Could Learn from the East

Both Dr. Kelsang and Dr. Namdul thought the West could learn much more from the East than the East could learn from the West. While they did value the objective research and speedy drugs, they agreed that if a choice must be made between slow, compassionate and balanced healing or fast, objective and aggressive healing, the slower and less researched method should be picked without question.

The first subject both mentioned was the doctor-patient relationships. They felt Western physicians need to stop avoiding contact, both physical and emotional. Overwhelming what they agreed was most lacking in Western medicine was a close doctor-patient relationship. As Dr. Kelsang exclaimed, “Life is about human interaction! It is about closeness!” Patients come to doctors for advice and care; it is the doctor’s job to provide both of those things. As discussed earlier, a relationship where an actual bond is formed will only help the healing process for the patient.

Second, the care cannot just be about the physical body. The mind and the spirit need nurturing too. It must be a whole body healing because it is all interconnected. Dr.

Namdul chided the West at one point, saying, “You have begun to find the evidence and proof that emotions can affect the immune system and vice versa. Now you cannot ignore it.”

Third, Dr. Namdul firmly believed the Western doctors need a new philosophy of illness. Now, doctors see the symptoms and attempt to eradicate them. Tibetan medicine makes the case that there is so much more to a disease than its symptoms. There is a body out of balance and there is a disrupted system. Western physicians need to consider more than just the disease. They need to 1) Recognize the root cause(s) of the illness, 2) check digestion and how it might not be functioning correctly, 3) consider what needs to be done to revitalize every organ affected by the illness and 4) decide the best treatment to take care of all of the above.³¹ If doctors can learn to utilize this approach when treating patients, perhaps people will not get sick as frequently. This whole-body approach might alleviate some of our country’s large percentage of psychiatric issues. It has not worked in the past to ignore the mind and emotions; some experts claim we are experiencing an emotional crisis.³² Dr. Kelsang pointed out that Western science almost has a pride problem and does not want to associate with “softer” sciences or even worse, a field such as religion. However, the medical field today needs work. As Dr. Herbert Benson writes in his book Timeless Healing: The Power and Biology of Belief, “The god of science we once believed had the power to stamp out disease and delay death’s eventual toll is proving inadequate” (p107). Surely then, if our current system is failing in some areas, we can gather the courage to open our minds to alternative views.

³¹ Dr. Namdul outlined this approach to diagnosing patients to me three separate times. He repeated the importance of each step and emphasized missing one will only lead to incomplete healing.

³² Benson, Dr. Herbert. . Timeless Healing: The Power and Biology of Belief. P 107

Conclusion

In the last century, technology has made our world exceedingly smaller than ever imagined. With television, the high speed internet and other forms of increased communication, information can be shared much easier. Because of this, there is a world of wisdom and knowledge to explore. Darwin's theory of evolution explains that the more organisms there are, the more variation there will be. With greater variation is a higher chance for continued existence of the species because the strongest or most beneficial traits for survival will be carried on. Variation creates a continuing cycle of improvement, almost analogous to reliving our lives through the cyclic existence of samsara, each time hopefully becoming closer and closer to nirvana. Thus every difference within a species is a blessing; each unique characteristic one runs across could just be the next "must-have" trait. It is only time that judges what will continue and what will vanish.

In a similar way, it is wonderful that every culture produces different views on music, art, religion, social structure and even medicine. Looking at it anthropologically, it could be claimed that our differences are our greatest strength and should thus be guarded. Who knows what mindset will be useful should a stressful and possibly existence-threatening situation arise for the human race.

Currently, the Western medical field has accomplished so much, yet is also struggling. We once conquered bacterial infections with antibiotics, yet now bacteria is forming resistant strains and outsmarting us. We spend years and millions of dollars on AIDS and cancer research, and the progress we make seems so small. While there is so much good in Western medicine, it is also not time to rest on our laurels.

Tibetan medicine has existed for thousands of years, preaching balance and harmony for health. They might not have MRI machines and CAT scans, but their simple skill of pulse reading can be as deadly accurate as the finest Western instruments. If nothing else, it is worth learning about their philosophy and techniques which have survived through the trial of time. Building bridges between the different cultures of the world will only strengthen a greater understanding. Sharing our knowledge will help initiate new discoveries and inventions. However, closed minds will never promote scientific development and progress. In the end, it will be challenging our current beliefs and looking beyond what we already know that helps us advance.

TABLE 5 (continued) THE INFLUENCE OF RELIGIOUS FACTORS ON HEALTH			
CONDITION	NUMBER OF STUDIES	NUMBER OF STUDIES IN WHICH HEALTHFUL EFFECTS WERE PRESENT	PERCENT IN WHICH HEALTHFUL EFFECTS WERE PRESENT
Reduced Hostility	4	4	100
Reduced General Anxiety	11	8	73
Reduced Death Anxiety	15	10	67
Improved General Health	5	4	80
Reduced Blood Pressure	5	4	80
Improved Quality of Life in Cancer Patients	8	7	86
Improved Quality of Life in Heart Disease Patients	6	4	67
Increased Survival	9	8	89

TABLE 7
THE INFLUENCE OF RELIGIOUS FACTORS
ON PSYCHOLOGICAL MEASUREMENTS*

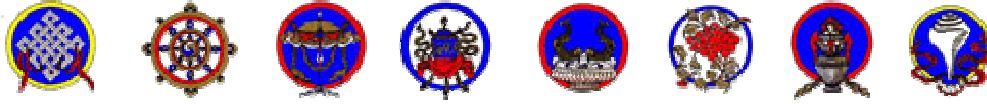
PSYCHOSOCIAL MEASUREMENT	NUMBER OF STUDIES	NUMBER OF STUDIES IN WHICH POSITIVE EFFECTS WERE PRESENT	PERCENT IN WHICH POSITIVE EFFECTS WERE PRESENT
Greater Life Satisfaction	13	12	92
Greater Marital Satisfaction	3	3	100
Greater Well-being	16	15	94
Greater Altruism	5	3	60
Greater Self-esteem	4	2	50

*Data summarized from: D. A. Matthews, D. B. Larson, and C. P. Barry, *The Faith Factor: An Annotated Bibliography of Clinical Research on Spiritual Subjects*, Vol. 1 (John Templeton Foundation, 1994).

TABLE 6 THE INFLUENCE OF RELIGIOUS FACTORS ON HEALTH			
CONDITION	NUMBER OF STUDIES	NUMBER OF STUDIES IN WHICH HEALTHFUL EFFECTS WERE PRESENT	PERCENT IN WHICH HEALTHFUL EFFECTS WERE PRESENT
Reduced Alcohol Use	18	16	89
Reduced Nicotine Use	6	6	100
Reduced Drug Use	12	12	100
Improved Psychological Symptoms Including Adjustment and Coping	15	14	93
Reduced Depression	17	12	71

*Data summarized from: D. A. Matthews, D. B. Larson, and C. P. Barry, *The Faith Factor: An Annotated Bibliography of Clinical Research on Spiritual Subjects*, Vol. 1 (John Templeton Foundation, 1994).

Tables 1, 2, and 3: Dr. Herbert Benson's Summaries of Religious Factors Influencing
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Resource Information

Dr. Tzultim Kelsang

Physician at Men-Tsee-Khang, also has much knowledge about the Tibetan doctor-patient relationship. He has wonderful English and was extremely helpful talking about everything and anything in regards to Tibetan Medicine.

Phone number: 226 020

Dr. Tenzin Namdul

He is also a physician at Men-Tsee-Khang but works more in the research department. He is extremely generous with time and information, allowed me to use the Men-Tsee-Khang library and helped me find information on different subjects. He also speaks excellent English.

Phone number: 223 222 (ask for Dr Namdul, it does not put you immediately through to him)

Dr. Dawa

General Secretary of Men-Tsee-Khang

Phone Number: 221 213

Mrs. Tsering Dolma

Secretary at Delek Hospital. She helped me get my internship at Delek and set up my interview with Dr. Tsetan. She speaks English very well.

Phone Number: 229 314

Dr. Tsetan

He is the CMO of Delek Hospital but hard to get a hold of. My advice is to go through the General Secretary at the Department of Health, Tenpa Samkhar. Dr. Tsetan's English is excellent although at times he is a little bit colder and less willing to help than the others.