The Tibetan medical manuscripts from Dunhuang are few yet they are of great importance for our understanding of the development of Tibetan medicine and for the understanding of transmissions of substances and ideas in and around Dunhuang. These medical manuscripts are largely practice-based, but nevertheless include important information for understanding some of their theoretical assumptions. Tibetan medical histories refer to the early stages of Tibetan medicine as multi-cultural, deriving from all great traditions neighboring Tibet. The main focus of this paper will be assessing in what way do the Tibetan medical manuscripts from Dunhuang reflect this multicultural character of early Tibetan medicine by looking at foreign words and mentions of foreign places in these texts.

What Do Medical Histories Tell Us?

The multi-cultural character of Tibetan medicine is emphasized in Tibetan medical histories from the earliest extant exemplars of this genre. The earliest known Tibetan medical history by Che rje zhang ston zhig po, dated to the early thirteenth century, sets medical knowledge within what it terms ‘The Seven Schools’ (lugs bdun), referring to both divine and human realms. Within the human realm, the list refers to medical systems from India, Kashmir, U rgyan, Nepal (Bal po), Arabia-Persia (Stag gzig), Dol po, the Uighurs (Hor), the Tanguts / Xixia (Me nyag / Mi nyag), Khotan (Li), Byzantium (Phrom), China, and Tibet. Variations of this list became practically standard in subsequent Tibetan medical histories. In one way or another, they all refer to the three great medical traditions surrounding Tibet: The Indian, the Chinese, and the Greco-Arab.

The Tibetan medical manuscripts from Dunhuang are our earliest extant sources on Tibetan medicine, and are thus very important for studying its origins. The main advantage of the Dunhuang manuscripts over other early medical sources such as the Zla ba’i rgyal po and the Bijit Book (Bi ci’i pu ti kha ser) is that they are unedited. Another advantage is that we can more or less date them, based on their origin in cave 17 and their type of writing.

---

1 Research for this paper has been conducted thanks to a research grant from the Wellcome Trust. I would like to thank Brandon Dotson for his valuable comments on a previous version of this paper. All remaining errors are naturally my own.
2 For a study of this work see Martin 2007.
3 For a detailed analysis of the two western components of this and similar lists, i.e., Stag gzig and Phrom, see Martin 2011. See also Yoeli-Tlalim 2010.
Dunhuang, at the center of a hub of international trade routes of the ancient world, was a multi-cultural place. The most obvious evidence for this is the multiplicity of languages of the Dunhuang manuscripts. Although Chinese is the most important language of the Dunhuang collection, it also has many documents in Tibetan, Sogdian, Khotanese, Sanskrit, and Uighur. Other languages from other nearby sites include also: Syriac, Turkish, Arabic, Judaeo-Persian, and others. These languages – and the cultures that they represent – reflect both peoples who resided in Dunhuang (eg., Chinese, Tibetan) and peoples who passed through Dunhuang – traders and missionaires.

We know that Tibet was an important point on the trade route between India and China, not only for Buddhist missionaires, but also for Arab and Jewish traders. The main attraction of Tibet was its commercial goods – many of them lucrative to the point of being legendary, such as gold and musk. It appears that traders and missionaires had an important role in the transmission of medical knowledge, although we still need to find out more about how this process took place.

With the advance of research in the various languages of the manuscripts of Dunhuang, we are able to ascertain that the different cultures represented in the manuscripts found in the caves of Dunhuang and of other Silk Roads sites are not only present in the same locations, but have also interacted in multiple ways. This raises the grand question of discerning cultural interactions within the various medical cultures present in Dunhuang. Much more research – particularly of the collaborative kind – is needed to fully address this question. What I discuss here is one initial contribution in this direction.

I will refer here only to the six manuscripts which are strictly about medicine. There are three manuscripts (P. tib.127, P. tib. 1044, P. tib. 1058) on moxibustion. Of these two are texts, and one (P. tib. 1058) is an illustration. The other three – P. tib. 1057, IOL Tib J 1246 (formerly labeled: I.O. 56,57) and IOL Tib J 756 – include various treatments and prescriptions. They have all been tentatively dated to around the ninth-tenth centuries.

Generally speaking, the texts are practical manuals and contain no theory. We can, however, deduce some theory from them. The main therapy which is mentioned is moxibustion (me btsa’), but we can also find references to bloodletting, fumigation, massage, and horn cupping. The manuscripts also discuss uses of materia medica, mostly from plants and animal substances.

---

4 Takata Tokio 2000.
7 Sen 2003.
8 See Akasoy and Yoeli-Tlalim 2007.
9 On some of these cultural interactions, particularly within the Buddhist sphere, see Rong Xinjiang 2001.
10 All six manuscripts have been edited and published, along with a translation into Chinese by the eminent Tibetan scholar of Tibetan medicine Byams pa ’phrin las together with Luo Binglen and Huang Bufan, in: Luo Binglen, et al. 2002. I am not discussing here the Tibetan Dunhuang manuscripts dealing with equine veterinary medicine, which have been studied by Anne-Marie Blondeau (Blondeau 1972).
Mentions of Foreign Places

A starting point in the direction of assessing the multi-cultural influences on this material is looking at specific geographical mentions. We can divide the foreign geographical mentions into two categories: locations associated with specific materia medica or other imported goods; and places associated with specific medical knowledge.

The foreign locations associated with imported goods are Persia (Ta zig), Khotan (Li), and possibly Kashmir (Kha che). P. tib. 127 includes a mention of Persia (Ta zig), as a source of paper, saying: “If there is a bleeding from the nose, use paper from Persia.”¹¹ IOL Tib J 756 includes a mention of “sugar from Khotan (Li).”¹² The same manuscript also includes a mention of a particular kind of silk, kha che dar, referring to possibly to Kashmiri silk (or perhaps: Persian brocade?). The usage is in a case where a foreign body is stuck in one’s throat.¹³

In the category of foreign locations as sources of knowledge we find India (Rgya gar), the Turks (Dru gu), and Zhang zhung. The colophon of P. tib. 1044 points out towards India as a source for medical knowledge, saying: “This type of method comes from the land of the king of India (or: a land of an Indian king).”¹⁴ Curiously, however, the moxibustion methods which are described in P. tib. 1044 are not known to have been used in classical Indian medicine.¹⁵

Another foreign mention is that of the Turks (Dru gu). In the Tibetan Dunhuang manuscripts, as Ligeti (in his analysis of P. tib. 1283) and others have discussed, the term drug gu / dru gu refers either to “Turks” in general or more specifically, particularly since the ⁹th century onwards, to Uighurs.¹⁶ The mention of the Dru gu in the medical manuscripts refers to cautery and possibly to bloodletting too, saying: “The Turkic (Dru gu) method [using] iron for cautery (?) sur phug is also suitable.”¹⁷ According to the editors of this text, this sentence probably refers to both bloodletting and cautery/moxibustion.¹⁸

---

¹³ IOL Tib J 756, l. 33. Luo Bingfen, et al. 2002: 133. A similar expression is found in the Li yul lung bstan pa, where it appears in the account dealing with a Chinese princess who married the Khotanese king and brought silk worms with her. As the Khotanese ministers get suspicious, the queen produces some Kashmiri silk in order to demonstrate to the king the secret of silk production. This type of silk appears as: kha cher dar. See Emmerick 1967: 33.
¹⁵ Indian cautery practices are fundamentally different from the moxibustion practices found in the Tibetan and Chinese sources. These are delineated, for example, in the chapter devoted to cautery in the Aṣṭāṅgahrdaya samhitā. How then to read the reference to “rgya gar gi rgyal po’i yul” remains an open question. It is to be noted, however, that the term me bsta’ was used in the ¹¹th century by the translators of the Aṣṭāṅgahrdaya samhitā into Tibetan to delineate cauteryization (agnikarman). This point was made by Fernand Meyer (Meyer 2002). I would like to thank Fernand Meyer for sharing his paper with me.
¹⁶ Ligeti 1971.
¹⁸ Luo Bingfen et al (eds) 2002: 233, n. 158. The word phug can mean: pierce. Previous translations of this sentence have appeared in Blondeau 1972: 7 and Uray 1979: 304. Both were unsure about the meaning of the term, but proposed iron cautery.
The third mention of a foreign land as a source of knowledge is the reference to Zhang zhung.\footnote{One of the most interesting discoveries regarding Zhang zhung texts from Dunhuang has recently been made by Takeuchi and Nishida, who have pointed out that the Zhang zhung texts from Dunhuang are medical texts. See Tsuguhito Takeuchi and Ai Nishida 2009.} This appears in the in the colophon of P. tib. 127:

This text (yig) on medical practice (dpyad) is not even [to be found] at the archives (\textit{phyag sbal}).\footnote{\textit{Phyag sbal} is a term for a place where something is hidden or confined. It is used either to refer to archives, or to a state of confinement. I would like to thank Brandon Dotson for discussing this term with me. \textit{Phyag sbal} is mentioned in P. tib. 1079, ll. 9 and 21 and in P. tib. 986. For Coblin’s translation and study of P. tib. 986 see Coblin 1991.} It is a compilation of all traditions of medical practice (dpyad yig thams cad), in addition to being compiled according to the indigenous (phugs pa)\footnote{I follow Yang Ga in translating \textit{phugs pa} here with indigenous; Yang Ga 2010, 32.} medical practice of Zhang zhung.

\begin{verbatim}
dpyad yIg ’dI ni phyag sbal na yang myed de/ dpyad yIg tha,ms cad las kyang bdus pa ’I steng du zhang zhung gyl dpyad phugs pa dang/ sbyar te bgyis pa lags so/ ///
\end{verbatim}

\section*{Foreign Names of Materia Medica}

Tracing \textit{materia medica} which are derived from foreign names is another path to follow in order to trace foreign interactions. Luo Bingfen has pointed out that particularly in two of the manuscripts there are many drug names that are transliterated from the Chinese.\footnote{Luo Bingfen, \textit{et al.} 2002: 11.} Thus, for example, we find the Tibetan \textit{th}I\textit{n}g \textit{shin},\footnote{IOL Tib J 756, l. 65; Luo Bingfen, \textit{et al.} 2002: 135.} a transliteration of the Chinese: \textit{deng xin}, referring to a type of pith or reed. We also find a number of medical herbs which end with the Tibetan \textit{tsha ’u}, transliterating the Chinese ending \textit{cao}.\footnote{For example: Tibetan – \textit{thong tsha’u}, transliterating the Chinese: \textit{tong cao}, referring to pith of rice in IOL Tib J 1246, l. 23. Luo Bingfen, \textit{et al.} 2002: 205.} The Dunhuang manuscripts also contain names of \textit{materia medica} which seem to be derived from the west. Two interesting cases are: \textit{ka phur} (camphor) and \textit{dar ya kan} (theriac). In the ancient world, camphor, often coupled with musk, was equally rare and costly. It thus featured highly in long-distance trade, between Asia and Europe via the Middle-East. Its uses in different cultures, both medical and ceremonial, stem from a common body of supernatural lore.\footnote{See Donkin’s fascinating study: Donkin 1999. On musk, see Akasoy and Yoeli-Tlalim 2007.} Although originating primarily from Southeast Asia (the Malayan peninsula in particular), its trade was dominated from ancient times by the Persians.\footnote{Colless 1969–1970.} Indeed, even in Chinese sources camphor is associated with Persia.\footnote{Laufer 1919: 478–79.} Camphor features highly in Persian pre-Islamic writings as a rare, precious and exotic substance and was therefore valued as a royal gift.\footnote{A’lam 1990.}
In the Dunhuang manuscripts, the Tibetan word for camphor appears in several different spellings, marking it as a loan-word. It appears as *ga phor* (P. tib. 1057, l. 25),

\[ka phor\] (P. tib. 1057, l. 125), and *ga phur* (P. tib. 127, l. 178). \[^29\]

Laufer has already pointed out that the Tibetan forms of this word are closer to the Arabic and Persian *kāfūr* (Middle Persian: *kāpūr*) than to the Sanskrit *karpūra*.

The Persian economic stronghold in the trade of camphor probably lies at the source of the form of this loan-word in Tibetan.

In one of its mentions (P. tib. 127, l. 178) camphor is prescribed together with rhubarb and saffron: “If the flesh has become yellow take saffron (*gur kum*), \[^34\] rhubarb (*cum rtsa*) and camphor (*ga phur*) ...”\[^35\] The last prescription is an interesting example of the abundance of luxury goods in the Tibetan *materia medica*: in one sentence we have three of the most sought-after goods on the ancient world: saffron, camphor, and rhubarb.

The word for saffron (*gur kum*) is another interesting loan-word. As Laufer has pointed out, the Tibetan forms of the word point out to a direct link with the Persian *kurkuma*, rather than the Sanskrit *kunkuma*. The Persian itself is traceable to the Assyrian *karkuma*, Hebrew *karkōm* and Syriac *kurkēmā*.

Another foreign name in the Dunhuang *materia medica* is the Tibetan name for theriac, *dar ya kan*, \[^37\] a loan-word which has been discussed by Beckwith, and which seems to be derived from the Arabic or Persian form of the potion *tīryaḡ* (Arabic: ٢٤٣, Greek: θηριακή), a very popular remedy originating from Greece, which became very widespread in the Muslim world. \[^38\] It is used here – as it often is in the Muslim and western world – against poisoning.

Foreign locations, foreign names, and the abundance of luxury goods in the Tibetan *materia medica* from Dunhuang all point to the importance of analyzing this material in relation to cross-cultural trade. The location of the Dunhuang caves, a crossroad of both of trade and of culture, brings to mind a key perspective of André Gunder Frank, his notion of “the Centrality of Central Asia,” where he argues, following Christopher Beckwith, that “Central Asia is truly the ‘missing link’ in Eurasian and even world history.” \[^39\] The Tibetan medical knowledge as mirrored in the Dunhuang manuscripts is crucial for reflecting on the global nature of ancient medicine, not only in relation to

---


\[^30\] Ibid: 184.

\[^31\] Ibid: 223.

\[^32\] See Laufer 1919: 591.

\[^33\] The text says: *dgong gur kum* – for which the editors explain: *gur kum mam kha che sba ka ma*; p. 232, n. 146.

\[^34\] The text has: *lcem rtsa*, for which the editors suggest: *lcem rtsa*. Luo Bingfen, *et al.* 2002: 232, n. 147. *Lcum rtsa* appears in the medical painting for chapter 20 of the Second Tantra of the *rgyud bzhi* (Medical Painting no. 27, no. 101). Parfionovitch *et al.* (1992: 69, 225) have identified it as East Asian Rhubarb (*rheum palmatum/webbianum*). *Lcum rtsa* also appears in the medical illustration for chapter 21 of the Second Tantra (Medical Painting no. 33, no. 85) in a list of purgative medications.


\[^36\] See Laufer 1919: 321. For trade in saffron among the Arabs see Heyd 1923: Vol. 2, 668.


medical knowledge which Tibetan medicine ‘imported,’ but also in relation to medical knowledge which Tibetan medicine ‘exported.’

Bibliography

Old Tibetan Manuscripts

IOL Tib J 756    Medical text.
IOL Tib J 1246   Medical text.
P. tib. 127      Moxibustion text.
P. tib. 1044     Moxibustion text.
P. tib. 1057     Medical text.
P. tib. 1058     Moxibustion illustration.

References


40 Yoeli-Tlalim, in preparation.


Yoeli-Tlalim, Ronit. 2010. On urine analysis and Tibetan medicine’s connections with the West. In Craig, Sienna, Mingji Cuomu, Frances Garrett, and Mona Schrempf, eds, Studies of Me-