SOME REFLECTIONS ON SIDDHA MEDICINE IN TAMILNADU

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This paper offers some observations on the history and development of Siddha medicine in Tamilnadu from the point of view of a scholar of Indian medicine, whose special focus has been the Sanskrit medical tradition. Contrary to popular belief, this paper offers that opinion that the basic principles and many of the practices now employed in Siddha medicine result from a combination of indigenous medical practices along with theoretical and practical elements derived primarily from Ayurveda and also perhaps from the Arabic based Unānī medicine. Although much more serious research is required, this study is based on a sound assessment of the available secondary sources on Siddha medicine and its history.

Key words: Diagnosis, Principles, Siddha medicine, Tamilnadu, Treatments

Three traditional medicinal systems predominate in modern India: Āyurveda, Siddha, and Unānī. Āyurveda is found mostly in northern India and in Kerala in the south, Siddha medicine occurs in Tamilnadu and parts of Kerala, and Unānī, which derives from Arabic medicine, is found throughout India, mainly in the urban areas. This essay focuses on Siddha medicine (Citta Vaṭṭiyam) and its history and practice in South India, with an eye towards the similarities and differences between Siddha medicine and Āyurveda.

Research into Siddha medicine in Tamilnadu has revealed certain problems which must be overcome in order to reach a proper understanding of this medical system and its history. The central problem lies with the reliability of the secondary sources, which are written primarily by Tamil ĉutta doctors. Very little scholarship

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on the subject has been carried out by western students and scholars of India and Indian medicine.

Due to the increased appreciation of Tamilnadu’s uniqueness in South Asia over the past decades, a strong sub-nationalist movement has grown up in Tamilnadu. Tamilians consider their cultural and linguistic heritage to be older and more important than their Indo-Aryan neighbours to the north; some even claim that their ancestors were the first civilised humans on the planet. The fire of this controversy has recently been kindled by a debate centring on the still-to-be-deciphered script of the so-called Indus Valley Civilisation. This ancient urban culture, which extended along the banks of the Indus River and its tributaries in what is now Pakistan, resembled the great civilisations of ancient Egypt and Mesopotamia in size, development and age. One side of the debate maintains that the script represents a language probably of Dravidian origin, while the other side claims that it does not represent a language at all. Tamilians, whose language is Dravidian, are anxiously following the debate, for if the former side prevails, it would confirm their antiquity on the Indian subcontinent. The cultural lens through which Tamilians look at their own history will always distort the image in favour of Tamil superiority and antiquity.

**History**

References to Āyurveda occur early in Tamil literature. The Tami term for Āyurveda, āyulvetār, occurs in the Cilappatikāra, which is said to date from the mid-fifth century AD; and mention of the three humours (tiritocam, Skt. tridoșa) is found in the Tirukural, dating from 450-550 AD.

The first Tamil Siddha text is the Tirumandiram by Tirumular, whose date is probably the 6th or 7th century AD. In it, there is mention of alchemy used to transform iron into gold; but no specific references to Tamil medicinal doctrines are found. Most critical scholars of Siddha, however, agree that on the basis of their language, the numerous texts on Siddha medicine, which present it as a codified system of healing, cannot be older than the 16th century. We must, therefore, understand that Tamil Siddha, as it is now conceived to be in theory and practice, began in Tamilnadu around the 16th century, but elements of healing practices which eventually became part of Siddha medicine, including those they hold in common with Āyurveda, derive from an earlier period.
Like all systems of Hindu knowledge, Siddha attributes its origin to a divine source; hence its knowledge is sacred and eternal, passed down to humankind for the benefit of all humanity. According to tradition, the god Śiva transmitted the knowledge of medicine to his consort Pārvatī, who in turn passed it on Nandi, from whom it was given successively to the remaining 17 Siddhārs, who are the acknowledged traditional transmitters of Siddha medical doctrines and practices. By attributing a divine or extra-human origin to its medicine, the Tamil Siddhārs have assured it a legitimate place in the corpus of Hindu knowledge and Tamil literature.

**THE PRINCIPLES OF SIDDHA MEDICINE**

Siddha medicine relies entirely on Āyurveda for the medical doctrines that bridge the natural world and the human body. First, there are the five gross elements (*pañcamahābhūtam*), which make up the entire natural world: solid/earth, fluid/water, radiance/fire, gas/wind, and ether/space. These combine in certain ways to give the three bodily humours (wind, bile, and phlegm), called *muppini* in modern Tamil.

As in Āyurveda, Siddha medicine maintains that the three humours predominate in humans in accordance with their nature and stages of life. Every individual is born with a unique configuration of the three humours, called the person’s basic nature, which is fixed at birth and forms the basis of his or her normal, healthy state. However, it is natural that one humour should dominate during the three different stages of life. The classification of the humours in relation to the stages of life in Siddha differs from that found in Āyurveda. According to Siddha, wind predominates in the first third, bile in the second third, and phlegm in the last third of life, while in Āyurveda phlegm dominates the first third and wind the last third of one’s life. It is for that reason, according to Āyurveda, that as we become older, we tend to develop a tendency to produce more gas in the stomach and bowels.

**DIAGNOSIS IN SIDDHA MEDICINE**

The diagnosis of disease in Siddha relies on the examination of eight anatomical features (*envagi thaervu*), which are evaluated in terms of the three humours. Of these, most modern Siddha doctors place the greatest emphasis on the examination of the pulse, whereby both diagnosis and prognosis are evaluated
at the same time. This method of diagnosis also occurs in Āyurvedic texts, but only after the 14\textsuperscript{th} century. Prior to this time, Āyurvedic treatises, teach that diagnosis of disease caused by a disturbance of one or more of the humours is to be carried out by means of observation, touch and interrogation.

Siddha pulse diagnosis (\textit{natiparitchai}, Skt. \textit{nāḍīparīkṣā}), like that found in Āyurveda, in all probability owes it origins to Unānī medicine, where it is a highly developed form of diagnosis derived from Arabic medicine. Moreover, it requires a highly refined sense of touch and subjective awareness, which we call intuition.

The pulse is felt on the female’s left and male’s right hand by the doctor’s opposite hand, a couple of centimetres below the wrist-joint using the index, middle, and ring fingers. Pressure should be applied by one finger after the other beginning with the index finger. Each finger represents a particular humour which in normal conditions has a movement representative of certain animals. The index finger feels the windy humour, which should have the movement of a swan, cock, or peacock; the middle finger feels the bilious humour, which should have the movement of a tortoise or a leach; and ring finger feels the phlegmatic humour, which should have the movement of a frog or a snake. Any deviation from these normal movements indicates which humour or humours are vitiated. If all humours are affected the pulse is usually rapid with a greater volume of blood-flow. After long periods of practice under the guidance of a skilled teacher, a student can begin to detect subtle differences in the flow, volume, and speed of the pulse at the point of each of the three finger-tips. These changes correspond to abnormalities in particular body parts, which the skilled Siddha doctor can pin-point and for which he or she can prescribe the appropriate cure.

\textbf{THE PRINCIPLES OF TREATMENT IN SIDDHA MEDICINE}

Treatment and pharmaceutics are the two areas where Siddha differs from Āyurveda. Derived from Siddha yoga, the principle aim of Siddha medicine is to make the body a perfectly functioning organism, not subject to the normal process of decay, so that a maximum length of life is achieved. Like Āyurveda, Siddha places emphasis on positive health, so that the primary object of the medicine is disease-prevention. Beyond this fundamental agreement between the two systems, Siddha and Āyurveda differ from each other.
Unlike in Ayurveda, Surgery per se does not form a significant part of Siddha medicine. Medicated oils and pastes are applied to treat wounds and ulcers, but the use of a knife is not found in Siddha medicine.

Closely connected with the tradition of the martial arts in South India, there developed a treatment by a type of acupressure based on the vital points in the human body, known as varmam (Skt. marman). There are 108 points mentioned in the Ayurvedic classics, where they are identified and explained as the vulnerable points on the body. Injury to them normally results in death. Although the number can vary, Siddha usually counts 108 out of a total of 400 varmam points. Siddha doctors developed techniques of applying pressure to these special points to remove certain ailments and massaging the points to cure diseases. They also specialised in bone-setting and often practised an Indian form of the martial arts, called cilampam.

According to Dr Brigitte Sébastia, who has discovered through her fieldwork that the art of varmam is particularly widespread among the hereditary Siddha practitioners belonging to the Nadar or Shanar caste in the district of Kanniyakumari in southern Tamilnadu. The development of this special form of healing evolved naturally from males’ occupation as toddy-drawers, which necessitated that they climb coconut and palm trees to collect the sap. In carrying out their work, they occasionally fell from great heights. In order to repair the injury or to save the life of a fall-victim, skills of bone-setting and reviving an unconscious patient by massage developed among certain families within the caste, who have passed down their special art from generation to generation by word of mouth. In the past, rulers employed members of this caste to cure injuries incurred in battle and to overpower their enemies by their knowledge of the Indian martial arts.

The Siddha system of rejuvenation-therapy, known as kāyakalpa (lit. “making the body competent for long life”), is closely connected to the practice of Siddha yoga and marks the most distinctive feature of Siddha medicine. It involves a five-step process for rejuvenating the body and prolonging life:

1. the preservation of vital energy by means of the Yogic technique of breath-control (vasiyogam or Skt. prāṇāyāma),
2. the conservation of semen,
3. the use of muppu,
4. the use of calcinated powders (chunnam, Skt. bhasman) prepare from metals and minerals, and

5. the use of drugs prepared from plants special to each Siddha doctor.

The esoteric substance called muppu is particular to Siddha medicine and may be considered as Siddha’s equivalent of the “philosopher’s stone” in Western alchemy. Its preparation is hidden in secrecy, known solely by the guru and passed on the student only when he is ready to receive it. It is generally thought to consist of three salts (mu-uppu) called puniru, kallupu, and vediyuppu, which correspond respectively to the sun, moon, and fire. Puniru is said to be a certain kind of limestone, composed of globules that are found underneath Fuller’s Earth. It is collected only on the full-moon night in April, when it is said to bubble out from the limestone, and is then purified with a special herb. Kallupu is hard salt or stone salt, i.e., rock salt, which is dug up from mines under the earth, or is obtained from saline deposits under the sea; or else it can be gathered from the froth of sea water, which carries the undersea saline. It is considered to be useful in consolidating mercury and other metals. Finally, Vediyuppu is potassium nitrate, which is cleaned seven times and purified with alum.

This religio-medical form of therapy is the cornerstone of the Siddha medical practice and provides the basis for the rich variety of alchemical preparations that make up the pharmacopeia of Siddha medicine.

Alchemy and Siddha Pharmacopeia

The precise origin of the system of Siddha pharmacology is not known, but it seems to have been closely linked to the Tantric religious movement, which can be traced back to the 6th century AD in North India and influenced both Buddhism and Hinduism. It was strongly anti-Brahminical and stressed ascetic practices and religious rituals that involved “forbidden” foods and drinks, and sexual intercourse, and often included the use of alchemical preparations.

The alchemical part of Siddha appears from at least the time of Tirumular’s Tirumandiram (6th or 7th cent. AD), in which various alchemical preparations are mentioned. Alchemy is also found in Sanskrit texts from North India, from about 6th – 7th cent. AD, and only later became an integral part of Ayurvedic medicine called Rasaśāstra, “Traditional knowledge about Mercury.” In the classical treatises of Ayurveda, reference to alchemy is wanting and only certain metals and minerals
are mentioned in the late classical treatises of the 7th century AD by the author Vagbhaṭa. Since alchemy plays a more central role in Siddha medicine than it does in Ayurveda, some scholars believed that medical alchemy may well have begun in South India, among the Siddha yogins and ascetics, and was later assimilated into Ayurveda.

Mercury and sulphur are, as in Rasaśāstra, the corner-stones of Siddha pharmacology and have been equated to the deities Śiva and Pārvati. The crucial ingredient in almost every Siddha alchemical preparation is mercury or quicksilver. Although mercury plays a key role in both the Ayurveda and Siddha, it does not occur in its pure form in India and, therefore, must be imported, most often, I am told, from Italy. A prudent student of Siddha medicine is, therefore, compelled to ask: if mercury never existed in its pure form in India, from where did alchemy come?

When combining drugs, Siddha considers substances that form a natural affinity to each other, such as borax and ammonia sulphate, to be greater than the sum of its individual parts, and called it nadabindu, where nada is acidic and bindu is alkaline, or in the Siddha cosmology female Śakti mated with male Śiva. The most important mixture of this kind is alkaline mercury and acidic sulphur.

The six pharmaceutical preparations are common to both Siddha and Ayurveda, which can be administered internally or topically: calcinated metals and minerals (chunnam), powders (churanam), decoctions (kudinir). pastes (karkam), medicated clarified butter (nei), and medicated oils (ennai).

Both Rasaśāstra and Siddha have devised methods for purifying or detoxifying metals and minerals, called śuddhi murai in Tamil and śodhana in Sanskrit, before they are reduced to ash (chunnam/bhasman). However, their techniques and procedures are different. Purification is done by one of two methods in Siddha. One involves the repeated heating of sheets of metal and plunging them into various vegetable juices and decoctions. The other method, called “killing” (māraṇa), entails the destroying of the metal or mineral by the use of powerful herbs, so that is loses its identity and becomes converted into fine powders, having the nature of oxides or sulphides, which can be processed by the intestinal juices. After this purification procedure, the metal or mineral is combined with its appropriate acid or alkaline and is then ready for its final transformation into an ash or “bhasman” by incineration in special furnaces made of cow-dung cakes.
The incineration process may vary slightly among the different Siddha doctors, but all procedures require repeated heating in a fire fuelled by dung cakes. The number of burnings can reach 100 for certain preparations. In Ayurveda, the duration and intensity of the heat is regulated by the size of the pile of dung cakes called *puțas*. Siddha medicine has devised method with a special substance made of inorganic salts, called *jayani*, which reduces the number of burnings to only three or four. In order to increase the potency of the *chunnam*, Siddha practitioners add the esoteric substance *muppu*.

Despite the irrefutable scientific evidence that shows most of these minerals and metals to be toxic to the human body, both Ayurvedic and Siddha practitioners continue to use them in their every day practice. They claim that their respective traditions have provided special techniques to detoxify the metals and minerals and to make them extremely potent medicines.

**Conclusions**

Unlike Ayurveda, which has a long and detailed textual tradition in Sanskrit from around the beginning of the Common Era, Siddha medicine’s textual history in Tamil is vague and uncertain until about the 16th century AD, when definitive medical treatises began to appear. Most of the knowledge about Siddha medicine comes from these late Tamil works and from modern-day practitioners, who often maintain a historically unverified development of their own tradition and who, sometimes out of their Tamil enthusiasm, tend to make fantastic claims about the age and importance of Siddha medicine vis-à-vis Ayurveda.

Based on the evidence thus far marshalled by means of written secondary sources and the reports of fieldworkers in Siddha medicine and informed by my own observations, it would appear that Siddha and Ayurveda share a common theoretic foundation, but differ most strikingly in their respective forms of therapeutics. This would tend to suggest that the original form of Siddha medicine consisted principally in a series of treatments for specific ailments, probably derived from regional traditions of folk medicine. Eventually a theoretical framework and epistemology was added to these indigenous forms of medical therapy. The theoretical part of Siddha medicine relies principally on Ayurveda, while its use of pulse (as well as urine) as a means of diagnosing disease owes its origin to the Arabic based *Unānī* medicine, which was also probably the basis of pulse-diagnosis in Ayurveda.
The core of Siddha medicine is its alchemy, whose fundamental principles conform to those found in the alchemical traditions of ancient Greece and China, and in Arabic alchemy. It would, therefore, seem possible that the alchemy found in both Siddha and Ayurveda could well have derived from one or a combination of these extra-Indian traditions. Further investigation into the each system in relationship to Indian alchemy (both Siddha and Ayurveda) could reveal important connections between Indian and other systems of alchemy and medicine.

Ayurveda has left the soil of India and has found fertile ground in the West, where alternative and complementary forms of healing have become increasingly more popular over the last couple of decades. There are clear signs on the horizon that Siddha medicine is ready to follow the same course. These Indian systems of medicine must undergo changes and adaptations to be accommodated in a foreign environment; and some of these modifications will invariably find their way back to India, where they will be reintroduced into the system. Such has been the pattern of medicine in most parts of the world, so that the final chapter on a particular medical history can never really be written. In fact, an understanding of Siddha’s medical history can only be seen in light of its change and adaptations over time.

BIBLIOGRAPHY
[The following are the principal sources on which this article drew for its information.]
Narayanaswami, V. Introduction to the Siddha system of medicine. Madras, Pandit S.S. Anandam Research Institute of Siddha Medicine, 1975.


