Essentials of Tibetan Traditional Medicine
by Thinley Gyatso and Chris Hakim

Reviewed by Sienna R. Craig

Within the past decade, scholarship and publications on Tibetan medicine have grown exponentially, across a range of disciplines, from history and medical anthropology to public health, religious studies, ethnobotany, development studies, and complementary and alternative medicine. Essentials of Tibetan Traditional Medicine by Thinley Gyatso and Chris Hakim adds to this growing bibliography. This book is a collaborative effort between a Tibetan physician living and working in the Pacific Northwest and an American trained in Chinese medicine and, in recent years, Tibetan medicine. The authors describe this book as a ‘commentary of sorts’ drawn primarily from the Oral Instruction Treatise (sman ngag rgyud) of the Fourfold Treatise, or what is often translated as the Four Tantras.

Part I provides an overview of concepts fundamental to the study of Tibetan medicine. This includes precepts on ‘being a worthy student,’ a discussion of the body in a state of health, and strategies for discerning illness through pulse diagnosis, urinalysis and questioning the patient. Part II is titled ‘The Humors.’ It explores the relationship between the three nyes pa (often translated as ‘humors’) of rlung or wind, mkhris pa or bile, and bad kan or phlegm. Part III is entitled ‘Therapeutics.’ The majority of this part is an exegesis on materia medica and Tibetan medical formulations. Individual medicinal ingredients are presented here, followed by a section on the principles of compounding and a list of commonly used herbal formulas. Additional information on therapeutic strategies, lifestyle and diet are also presented.

The authors’ stated goal with this book is not to present a ‘scholarly translation’ of the Oral Instruction Tantra but rather to provide ‘medical insight’ for people who are already assumed to possess some knowledge of Tibetan medical principles. While this is a laudable goal, the book falls short of this goal because of its lack of clarity with regard to audience and due to related problems of language and terminology, epistemology and reasoning. Questions also arise as to the books’ relevance for contemporary
Tibetan medical practice. The authors claim at the outset that their work is intended to be an ‘intermediate’ textbook. Yet many parts of the book strike me as elementary and at the same time decontextualized, as if the authors had a difficult time balancing their desire to be true to the *Fourfold Treatise* and to be relevant to contemporary audiences, particularly those who are non-Tibetan speakers and who presumably reside and practice medicine in the West. The authors’ rationale for including some material and excluding others is unclear. We do not get a sense why there is such detailed material on different types of fevers in Part II, but a discussion of smallpox and influenza is jettisoned. Why do we learn about bloodletting when this is so rarely practiced in contemporary Tibetan medical clinics, and we hear little about Tibetan forms of massage, medicinal bath use, or types of acupuncture that are routinely used in Tibetan medical practice in both Asia and the West?

In other areas in the text, chasms of clinical experience and theoretical understanding are glossed over through the ‘commonsensical’ approximation of a Tibetan term with a biomedical equivalent. For example, on p. 105, the authors write of ‘epidemic fever affecting the brain’ and that ‘this disease pattern probably corresponds to meningitis.’ Such comments can be found throughout the book. This is a problem at two levels. First, the reader is jarred here into realizing that this is clearly not a translation from the *Oral Instruction Treatise*, but an inserted contemporary notation. While the insertion itself is understandable, the lack of differentiation—even in typeface—is confusing and raises issues about how or in what ways other passages from the Tibetan original have been rendered. Second, such comments presume an equivalency between biomedical and Tibetan medical concepts and etiologies. There is a growing scholarly literature on the ways medical concepts are translated across the cultural and scientific terrain that distinguishes Tibetan medicine from biomedicine, but the authors seem unaware of, or inattentive to, these issues.

The authors do not include any Tibetan language in the text except in the third section on *materia medica* and therapeutics. To me, an ‘intermediate’ level of Tibetan medical study requires some fluency with Tibetan language and asks that one access core Tibetan medical concepts without having to rely on an English approximation. While the Tibetan medicinal plant, mineral and animal ingredients are all rendered appropriately in Wylie transliteration, crucial concepts such as taste (*ro*) and potency (*nus pa*)
are mentioned—but only in English—and their precise meanings are not explored. Yet a detailed understanding of these concepts remains essential to make sense of the descriptions of individual materia medica and compounds. This work of defining terms could have been undertaken in the beginning of this section or even in Part 1. Also, it would have been useful to link discussions of particular compounds to a sense of how and why these are used in contemporary Tibetan medical practice.

Given the organization of Part III, the reader could emerge with an erroneous presumption that Tibetan materia medica can or should be viewed as individual ingredients, when really the brilliance of Tibetan therapeutics has to do with how and why different ingredients are mixed together. No single Tibetan herb or other ingredient is used in isolation. I am also not clear why the authors chose to represent this section with the term ‘herbs’ when materia medica would have been a more accurate term. ‘Herbs’ gives the wrong impression, since Tibetan medicines rely heavily on minerals, animal products, semi-precious and precious stones, and also metals. Also, the bibliographic information in this section is uneven and there seems to be slippage in many places between specific ingredients’ indications or according to Chinese medical sources, Ayurveda and Tibetan medicine. While each of these Asian medical systems do have points of connection to the others, it would be wrong to assume that an ingredient’s use in one medical system is the same as that in another Asian medical system, or to named biomedical / biochemical properties either. The comparisons are interesting, but are not ends in themselves.

Finally, although I have no doubt that Dr. Thinley Gyatso has put a great deal of work into this book, his experience as a clinician and as the interpretive source for much of what is presented in English, are largely absent and silent. I wonder about this. A short prologue or afterword in which he comments on his own path to becoming a doctor, the relationship between medicine and Buddhism, or even his contemporary use of Tibetan medicines, for example, would have been welcome. As it is, the present-day experience of this Tibetan physician seems absent from the text, except for what is communicated through the meta-structure of the text itself. These shortcomings aside, the authors clearly have a deep respect for Tibetan scientific and cultural knowledge. I found the book useful, if primarily as a means of reflecting on how Tibetan medicine is rendered cross-culturally.