



ASIAN MEDICINE

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EDITORIAL

For some decades a major focus of scholars working on medicine in Asia has been on Western and 'traditional medicine' as representing different medical traditions. These were thought of as antithetical 'systems' that, although practised alongside each other, were based on different philosophical frameworks, variously in collusion, or in collision with each other. Although medical pluralism was acknowledged as a phenomenon typical of medical practice, a major chasm was seen to loom between the two major philosophical divisions: Western medicine, on the one hand, and 'traditional medicine' on the other.

More recently a shift in the conceptualisation of medical traditions has occurred. No longer do we seem to think of a 'medical tradition' as a clearly defined, strictly delimited and never-changing 'system'. Emphasis has been on the interactions and exchanges between 'traditions', on synecry and hybridity. The pluralism within a 'tradition' - both in terms of the variety of ways in which 'a tradition' has been interpreted and codified by different authorities and in cognisance of the great variety of prevailing practices has been much discussed.

The recent change of title of this newsletter from *Traditional Asian Medicine* to *Asian*

Medicine is indicative of the ways in which not only the practice but also the cognition of 'traditional Asian medicine' keep changing. This shift in emphasis is evident also in several of the contributions to the current issue of *Asian Medicine*, and not least in the topics raised during the recent IASTAM symposium on the 'past and present in traditional medical systems'. While the 'traditional' is easily dropped from the heading of a newsletter, important questions remain to be answered. What is 'traditional' about 'traditional medicine'? What happened to 'tradition' in Asian medicine? what qualifies as a 'tradition' in the modern age? What exactly is 'Asian medicine' meant to represent today, in Asia as well as in multi-cultural societies in the West?

Contributions in response to this editorial as well as on any other aspects of Asian and Traditional Asian Medicine are welcome. Please send your contributions (pasted into an e-mail, if possible or a hard copy) to the Editor.

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VARIETIES IN INDONESIAN TRADITIONAL HEALTH CARE

By Azwar Agoes

According to the summaries of a seminar on Traditional Medicine Health Care held by the Department of Health in 1978, the term of Indonesian Traditional Medicine means:

1. A science and/or art of treatment conducted by a traditional healer, that is in accordance with religious belief, that aims to cure, to prevent the diseases, to re-institute and to improve physical, mental and social health of the community.
2. All efforts conducted to achieve the cure, protection and promotion of the health standard of the community, based on ways of thinking that are at variance with modern medical science, and which are handed down from generations or gained by persons privately and conducted in other ways than modern medical science (inter alia covering acupuncture, faith healing, *shinshe*, arabic medicine, herbalism, massages)

A combination of traditional practices and modern medical care occur sporadically as these are carried out by the general public, well-to-do and educated people or even western-educated medical doctors themselves.

AN ART OF CULTURAL HERITAGE

Most outsiders identify Indonesian Traditional Medicine only with *jamu* (herbs used by the people for prophylaxis or for the cure of diseases). However, according to our studies it would more appropriately be grouped into four categories, namely:

1. Health care system of isolated tribes

2. Phytotherapy (or using herbs)
3. Manual therapy: massage and *kerokan* ("skin coin scrubbing")
4. Psychotherapy by faith healer or spiritualist.

THE HEALTH CARE SYSTEM OF ISOLATED TRIBES

The Indonesian isolated tribes consist of about 1,579,680 people, made up by members of many tribes (Suku): Suku Kubu, Suku Laut, Dayak, Belu, Waropen, Muyu, Mejibrad, Tengger, Baduy, Lio, Tano, Niha, Sasak and others. Medicines used and their healing methods have been reported by Dutch researchers and, following Independence in 1945, by Indonesian observers themselves.

In our field study of the Kubu tribe, we recorded a traditional healing ceremony that was referred to by that tribe with the term "*Besale*". On the chosen evening the materials for the ceremony were prepared in a special house - a kind of miniature house that was hung to the eaves of the house, filled with offerings, *keris* (traditional weapons), knives, and raw eggs. The medicine man and his woman assistant supported the sick person while walking around, chanting monotonous verses until the medicine man fell into a trance. The omen whether the sick person would recover or die was shown when the eggs were thrown out of the window: they would either remain intact (the patient would recover) or they would break (the patient would die).

In Kubu tribes disorders of mood, thought and behaviour are invariably explained in reference to taboo violation, witchcraft, the intrusion of harmful objects into the body, or loss of a vital substance and possession by angry or evil spirits. Incest and murder,

for example, are considered to be taboo violations that result in deleterious effects on the mind of the perpetrator, with punishment in the form of insanity coming from ancestral deities or God, or from the individual's conscience. Witchcraft inflictions are usually associated with ferocious activities of others, such as witches, sorcerers and black magicians, whose special powers or use of magic enable them to "implant" insanity in the victims. Witchcraft is often thought to be responsible for the introduction into the victim of magical or foreign substances that produce illness by upsetting the natural equilibrium of the body. To restore health these substances have to be extracted from the victim's body by blowing, sucking, bleeding etc. Strange behaviour is also explained by the presence of an alien spirit sent by sorcerers or by ancestral deities as a punishment for failure to honour the dead.

Serious illness among the Dayak will be treated by the tribe's medicine man. The healer recites parts of prayers to the Dayak Gods, performs ritual dances around the patient and sprinkles water in which several kinds of flowers and herbs have been soaked, thereby trying to chase away from the body of the patient the evil spirits that cause the illness. In many cases the ceremony of healing is accompanied by "*klentangan*" music. The patient's whole family has the duty to remain within a certain area, close to the sick person, until a designated day after the ceremony. The other members of the tribe are not permitted to enter the sick quarters during that period.

Well known are the shamans of the Bataks, their rhythmic drum music and dance, the practice of inhaling *menyan* smoke (for example incense) and of drinking *tuak* (alcoholic fermented

plant-juice). In trance the shaman would make contact with a spirit. The audience then could ask the shaman about the sick. While in trance the shaman might cry, move violently, fall down, toss about etc. The shaman behaves like the spirit who possesses him or her.

The Madurese Kejiman medicine man, when in trance, might speak in Arabic, Chinese or Dutch, in conformity with the spirit who has taken possession of him. Sometimes a shaman needs a translator for words uttered during the trances.

The most famous witches or medicine man are of the Dayaks from Kalimantan (Borneo) and the Torajas (Sulawesi or Celebes). They would sing long incantations/*litania* that tell about their journey to heaven. Their own spirit would fly away through the main pillar of the house, creep on all fours on the roof top and, thereafter, reach the kingdom of heaven via the rainbow. The *litania* is the idiom of gods or spirits, not the language of the shamans. Sometimes the shamans themselves do not understand this language.

In trance the capability of the shamans is much more enhanced than in every day life. We know, for example, that the Kubus in central Sumatra, while singing and dancing in trance, can walk on glowing coal. Also Balinese child dancers can walk on glowing coal during trance, performing difficult movements they never learned before. Trance or possession usually refers to a relationship between spirit and humans, manifested as the spirit enters the human being and takes control of his or her behaviour.

PHYTOTHERAPY

The use of herbs in the treatment or prevention of disease is common practice in Asia and Africa and is gaining popularity in western countries. Many books have been published on medicinal herbs and their mode of application. Analysis and research in the last few decades have revealed the medicinal compounds present in the herbs, making the manufacture of synthetic pharmaceutical products possible. The process of modernisation has made it possible to introduce herbal medicine (*jamu*) in all parts of the archipelago and even abroad. Mainly women use herbal medicine, but there are also several kinds that are quite popular among men. The purpose ranges from preserving health in general to the crushing of kidney stones and the promotion of sexual prowess. It is said that the sales promotion outside Indonesia is based on the fact that women using *jamu* look younger than they actually are, preserve their slim body build and always render satisfaction to their husbands.

Choosing the right sort of medicinal herb is straightforward and easy as it merely involves reading the indications printed on the label of medicine packages specially prepared for self-medication. However, many *dukuns* or medicine men prepare their own blend of herbs for their patients. Normally the medicine man recites some prayer formulas before handing over the herbs to the patient, either to give more effectiveness to the medicine or for psychological effect.

We have written on the use of *jamu* among women in Palembang municipality (3). Our research was based on questionnaires to which 942 women responded. We came to the

conclusion that the main purpose for which herbal medicines were used was to improve metabolism (slimming 34.65%, tonics 26.73%, appetite stimulant 10.8%, promotion of lactation 47.61%, countering fluor albus 19.04%, inducing delayed menstruation 14.28%, and intensifying sexual desire and pleasure 5.49%). Elderly women generally take *jamu* to maintain good health and to prevent kidney stones, diabetics, and jaundice. Other indications were the stimulation of hair growth, easing of back pain, influenza, cough, odorous perspiration, indigestion, high blood pressure, and prevention of cancer.

Most of the *jamu* users also get "ready for-use" *jamu* from *jamu* peddlers (*jamu gendong*) and *jamu* shops. Others prepare *jamu* by themselves from raw materials bought from markets or by using fresh parts of the medicinal plants. Nowadays large-scale companies using modern equipment have produced finished products of traditional medicines. The products are presented in modern dosage forms such as capsules, tablets, dragees, elixirs and even as beverages. There are now 450 companies producing traditional medicines, most of them supervised by pharmacists. Raw materials for herbal medicines can be obtained locally through wholesalers, collectors or directly from the peasants. Only a small percentage is imported. Since 1976 all traditional medicines produced and marketed with trade names and those produced by traditional medicine manufacturers should be registered every two years.

The Ministry of Health, on occasion of the National Health Day in November 1998, announced the motto: "back to nature: use Indonesian indigenous medicine". There are twelve "Centres for the Development and Application

of Traditional Medicine", constituting a first step towards the creation of 27 such centres in every province.

Our Palembang Centre is staffed by members of the faculties of Medicine, Agriculture, and Mathematics and Natural Science of Sriwijaya University. South Sumatra Province specialises in particular on the health care tradition prevalent among the isolated tribe of Kubu. The Kubu live in the deep forests of the mountainous region of Bukit Barisan and make use of rare medicinal plants.

The aims of the Centres are:

1. To find safe and effective traditional medicines used by people of the region by survey, research and experimental trial. One focus of research is on plants for cancer.
2. To run courses for traditional health care practitioners, especially for those with non-academic backgrounds.
3. To deliver traditional health care for patients, in co-operation with the general/ teaching hospital "Dr Muhammad Husin" at Palembang.
4. To carry out pre-clinical and clinical trials for well-accepted, localised traditional medicines prior to more general production.
5. To establish centres for data collection on traditional medicine and traditional health care.
6. To utilise medicinal plants efficiently and to provide for their conservation.

With all these intentions, we would appreciate and welcome any questions about Indonesian Traditional Medicine or the possibility to co-operate in field research on medicinal plants in Indonesia.

MANUAL THERAPY

Probably the oldest literature on "manipulation" as manual treatment is in the "*kong-fau*", presumed to have been written about 2700 BC. Missionaries returning from Peking to France brought the *kong-fau* to the attention of the western world. This suggests that the practice of manipulation is very old. However, it is also close to being universal. It was practised not only by the Chinese and Japanese but also by the ancient Greeks, Egyptians, Babylonians, Syrians, Tibetans, Hindus, as well as the Aztecs and Incas of Central and South America. Hippocrates, known as the "father of healing", stated that it was necessary to know the nature of the spine and what its natural purposes are, for such knowledge will be a requisite for understanding many diseases - vertebrae of the spine may dislocate and be likely to produce serious complications and even death, if not properly adjusted.

Galen, the celebrated physician, also wrote of the importance of spinal manipulation in treating many physical conditions. In Indonesia a traditional medical healer practising massage is called "*tukang pijit*". This art focuses not only on sprained ankles and other joints, but is used also to treat children and adults suffering from fever, cough, or mental disorders. Skin coin scrubbing is a unique curing method, perhaps specific to Indonesia. The skin of children and adults is scrubbed with a piece of metal (mostly a coin) after the location has been rubbed with oil (coconut oil, olive oil, peanut oil), an ointment ('Vicks') or a balm (tiger balm). The traces of the scrubbing on the skin are very peculiar and impressive to the patients, especially for sufferers of influenza, fatigue and rheumatic pains. This treatment gives a

feeling of relief. Common cold can sometimes be cured quicker than by modern tablets.

PSYCHOTHERAPY

Many traditional healers (*dukun*), both men and women practise this kind of therapy. It is widely accepted in society. The Department of Health held a seminar in 1978, which was attended by many kinds of traditional healers from no fewer than ten provinces. On this occasion demonstrations of their traditional healing methods were also given, such as the one in which a ball-point and human anatomical diagram are used to show the point of trouble, the methods of acupressure, the analysis of colours and chiropraxis, accompanied by magic incantations. To the traditional healers symptoms of disease and the feelings of the patients are more important than their cause. The patient is suffering from headache, has fever, has trouble with eczema, or is insane, impotent, etc.

In Java this category of healer is also called faith healer or spiritualist. Magic incantations are very common means for the traditional healer. In the sequence of the words we can recognise terms originating from the Hindu or Muslim faiths, while the metaphors are adapted to modern times. Water as well as *sirih* leaves and red pepper, which are chewed and then rubbed on the forehead of the patient, are sometimes also used. Healing by prayers takes also recourse to different practices, in line with the different beliefs of the healers. There are also differences in the kinds of media used, basically depending on the type of the sickness.

1. Prayers to the disciples of Mohammed in which are included requests for help.

2. Prayers to Allah, with the request for help to well-known Islamic scholars of the first ten centuries of the Moslem Era.
3. Request for help to Indonesia Islamic scholars of the time when Islam was preached to the Indonesian people and the late *kyais* (great Islamic teachers) of different areas in Indonesia.
4. Prayers to Allah only.

The Moslem *dukun* (medicine man or healer) basically uses Islamic prayers, containing verses of the Holy *Quran*. Many of the verses cited in the prayer are in relation to the pre Mohammed era and mentioned in the Holy *Quran*. To the patient it is explained beforehand, that the prayer for curing the sickness is directed toward Good (Allah) and that God only cures the sickness if He so desires, and that God deserves to be thanked if the patient becomes well again.

In 1951 the Department of Religious Affairs issued a list of 73 "Believers' Sects". The number increased by nearly ten times in 1972 to 644 in all provinces. *Kebatinan* (inner-self) teachings attract all men of all classes. Persons of high rank having heavy obligations need help to deal with the emotional conflicts occurring in their daily lives. Low ranking people are more attracted by magic strength to gain emotional peace.

Some disciples of the "Jawa Dwipa Teaching" believe that their *kebatinan* does not conform to Hindu, Islam and Buddhist learning, but that it conforms with the traditional Javanese order, the way it existed prior to Hindu, Buddhist and Islam influence.

