

Doctrinal Considerations

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1. Illness, Cure, and Care

Selections from the Pāli Canon

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This chapter presents translations of some discourses and discussions on the theme of medicine and healing from the Pāli canon, the only complete collection of early Buddhist scriptures that survives in its original Indian language. A brief account of Pāli language and literature will help explain the historical significance of these discourses. The Buddha would have taught the Dharma in one or more of the dialects of Middle Indo-Aryan, or Prakrit, spoken in northern India in the fifth century B.C.E. His followers then preserved these teachings orally, committing them to memory and passing them on in communities of reciters. They would have translated the teachings into the dialect of Prakrit spoken in their own region, and then into the dialects of the regions to which they took the Dharma. These teachings were eventually written down in Sri Lanka in a language that we now call “Pāli” (literally meaning something like “language of the texts”). Although some Buddhists believe that the Buddha spoke Pāli, the linguistic evidence suggests that it is essentially an artificial literary language based on a particular dialect of spoken Prakrit, considerably worked over by scribes familiar with Sanskrit, the great literary language of India.¹ The Buddha’s teachings were also preserved in other Indian dialects as well as in Sanskrit, and the Tibetan and Chinese translations were made from one or other of these versions. While the other Indian versions of the early Buddhist scriptures survive only partially, the Pāli canon uniquely survives complete.

Like the other versions, the Pāli version of the Buddhist canon is divided into three collections, the so-called Three Baskets (Pāli *Tiṭṭaka*; Skt. *Tripiṭaka*). In Pāli, these are called *sutta* (the discourses of the Buddha), *vinaya* (the rules of discipline for the monks),

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and *abhidhamma* (scholarly treatises that date from some centuries after the time of the Buddha). There is also an extensive commentarial tradition in Pāli, much of it attributed to the great fifth-century scholar Buddhaghosa, a monk from South India who lived in Sri Lanka. This commentarial tradition reflects the views of the Theravāda school of Buddhism, which was also taken to Burma and Thailand, where it continues to thrive, as it does in Sri Lanka.² While the Pāli *abhidhamma* and commentaries show a Theravādin sectarian affiliation, the Pāli *sutta* collection has much in common with the *sūtra* collections preserved in Chinese, suggesting that the Buddhists of the Theravāda school were concerned about preserving what they believed to be *buddhavacana*, that is, the words of the Buddha, as faithfully as they could. Nevertheless, the Pāli versions of the discourses and discussion translated here reflect just one recitation tradition, with many differences in detail from versions preserved by other traditions.

Our first text is a short discourse, the *Discourse to Sīvaka*, in which the Buddha explains to a religious wanderer named Sīvaka the eight causes of illness. Contrary to the theoretical religious views espoused by ascetics and Brahmins, the Buddha appeals to empiricism based on personal experience and widely accepted common sense. The Buddha prefers to explain illness in terms of observable natural causes, but he does leave open the possibility of explaining some painful feelings in terms of the theory of karma, a doctrine that is prevalent in many Indian religious and medical traditions. The Buddha's explanation of illness in this text shows his evident familiarity with a medical tradition that was developing in the ascetic milieu, which contrasts with more religious or magical medical traditions such as those based in the Vedas. The historian of Indian medicine Kenneth Zysk has suggested that the later Indian medical tradition known as Ayurveda, despite its own quite different account of its origins, must also have its roots in the "empirico-rational" medicine practiced by wandering ascetics (and also by court physicians such as Jīvaka) who were contemporaneous with the Buddha.³

Our second text shows how the Buddha, while appreciative of physicians' expertise in prescribing purgatives and emetics for the treatment of illness, himself teaches an unailing, and therefore superior, purgative—the Noble Eightfold Path. In this way, we see how the physical cure afforded by medical treatment becomes a metaphor for the spiritual cure afforded by the practice of the Dharma. Elsewhere in the Pāli canon, the Buddha is compared to a surgeon removing the arrow of suffering (see, e.g., chapter 17§1).⁴ Just as an expert physician treats illness immediately, so the hearing of the Buddha's teaching immediately causes suffering to vanish.⁵ The Dharma is therefore, so to speak, the ultimate cure.

Nevertheless, human beings still get ill. Our third text shows the Buddha finding one of his monks suffering from untreated dysentery. Once the Buddha and his attendant, Ānanda, have cleaned up the monk, he summons his monks and instructs them on how they—being renunciates without family members to look after them—should nurse one another when they fall ill. In this way, we see how the life of the early Buddhist monks involved mundane nursing care as well as spiritual striving.

The final selection here recounts a time when the Buddha himself is said to have benefited from the expert prescription of a purgative from Jīvaka Komārabhacca, the

famous court physician of King Bimbisāra of Magadha, who was also a devoted disciple of the Buddha.⁶ A similar story, with variations, is extant in Sanskrit, Chinese, and Tibetan (see chapter 20 for translation of the Sanskrit parallel). The Buddha becomes ill due to his being “flooded with *dosa*.” I have left the word *dosa* (Skt. *doṣa*) untranslated as it is a technical term from Indian medicine; in a general sense, it means “fault” or “corruption” (see glossary and discussion in chapter 4 for more details). The purgative that Jīvaka gives the Buddha, which is taken nasally, is made from treated flowers and is followed by a hot bath.

FURTHER READING

- Anālayo. 2012. “The Historical Value of the Pāli Discourses.” *Indo-Iranian Journal* 55: 223–53.
- Anālayo, Bhikkhu. 2015. “Āgama/Nikāya.” In *Brill’s Encyclopedia of Buddhism*, ed. O. von Hinüber, 1: 50–59. Leiden: Brill.
- Zysk, Kenneth. 1998 [1991]. *Asceticism and Healing in Ancient India*. New Delhi: Motilal Banarsidass.

1. THE EIGHT CAUSES OF ILLNESS, FROM THE *DISCOURSE TO SĪVAKA*⁷

At one time, the Blessed One was living in Rājagaha, at the Bamboo Grove, in Squirrel Sanctuary. Then “Topknot” Sīvaka the wanderer approached the Blessed One and exchanged friendly greetings with him.⁸ When this courteous, friendly talk had run its course, he sat to one side. Then, while sitting to one side, “Topknot” Sīvaka the wanderer said this to the Blessed One:

“Mr. Gotama, there are some ascetics and Brahmanas who hold the following belief, who hold the following view: ‘Whatever an individual person experiences,⁹ whether pleasant or painful or neither pleasant nor painful, all that is because of what was done in the past.’ What does Mr. Gotama say about this?”¹⁰

“As to this, Sīvaka, certain experiences arise because of *pitta*.¹¹ One can know this for oneself, Sīvaka, that certain experiences arise because of *pitta*; and indeed, Sīvaka, it is a universally accepted truth that certain experiences arise because of *pitta*. For this reason, Sīvaka, those ascetics and Brahmanas who hold the following belief, who hold the following view: ‘Whatever an individual person experiences, whether pleasant or painful, or neither pleasant nor painful, all that is because of what was done in the past’—they exceed what one knows for oneself, and they exceed what is universally accepted as the truth. Therefore, I say that those ascetics and Brahmanas are wrong.¹²

“As to this, Sīvaka, certain experiences arise because of *semha* . . .¹³ certain experiences arise because of *vāta* . . . certain experiences arise because of the combination [of the preceding three] . . . certain experiences arise because of the change of the season . . . certain experiences arise because of improper care¹⁴ . . . certain experiences arise because of assault . . . certain experiences arise because

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of what was done in the past.¹⁵ One can know this for oneself, Sīvaka—that certain experiences arise because of what was done in the past—and indeed, Sīvaka, it is a universally accepted truth that certain experiences arise because of what was done in the past. For this reason, Sīvaka, those ascetics and Brahmanas who hold the following belief, who hold the following view: ‘Whatever an individual person experiences, whether pleasant or painful, or neither pleasant nor painful, all that is because of what was done in the past’—they exceed what one knows for oneself, and they exceed what is universally accepted as the truth. Therefore, I say that those ascetics and Brahmanas are wrong.”¹⁶

When this had been said, the wanderer “Topknot” Sīvaka said this to the Blessed One: “Excellent, Mr. Gotama, wonderful, Mr. Gotama! May Mr. Gotama bear me in mind as a lay follower who has gone for refuge from today for life.”

Pitta and *semha* and *vāta*, their combination and the seasons,
Improper [care]¹⁷ and assault, the ripening of *kamma* as the eighth.

2. THE NOBLE PURGATIVE, FROM THE DISCOURSE ON DOCTORS¹⁸

“Monks, doctors prescribe a purgative¹⁹ to counteract illnesses caused by *pitta*, to counteract illnesses caused by *semha*, to counteract illnesses caused by *vāta*. Monks, this purgative does exist—I do not say that it does not exist—but it may succeed or it may fail.

“But I, monks, will teach you a noble purgative that only succeeds and does not fail. Having taken this purgative, beings subject to birth are released from being born; beings subject to old age are released from old age; beings subject to death are released from death; and beings who are subject to grief, lamentation, pain, misery, and despair are released from grief, lamentation, pain, misery, and despair. Listen to this; pay excellent attention. I will speak.”

“Certainly, Lord,” the monks replied to the Blessed One. The Blessed One said this:

“And what, monks, is that noble purgative that only succeeds and does not fail? Having taken that purgative, are beings subject to being born released from being born, are beings subject to old age released from old age, are beings subject to death released from death, and are beings who are subject to grief, lamentation, pain, misery, and despair released from grief, lamentation, pain, misery, and despair?”

“For one who has right view, monks, wrong view is purged, and the many bad unwholesome states that come into being because of wrong view are purged for that person, and the many wholesome states existing because of right view come to the fulfilment of their development.

“For one having right intention, monks, wrong intention is purged. . . . For one having right speech, monks, wrong speech is purged. . . . For one having right ac-

tion, monks, wrong action is purged. . . . For one having right livelihood, monks, wrong livelihood is purged. . . . For one having right effort, monks, wrong effort is purged. . . . For one having right mindfulness, monks, wrong mindfulness is purged. . . . For one having right concentration, monks, wrong concentration is purged. . . . For one having right knowledge, wrong knowledge is purged. . . . For one having right liberation, monks, wrong liberation is purged, and the many bad unwholesome states that come into being because of wrong liberation are purged for that person, and the many wholesome states existing because of right liberation come to the fulfilment of their development.

“This, monks, is that noble purgative that only succeeds and does not fail. Having taken that purgative, beings subject to being born are released from being born . . . and beings who are subject to grief, lamentation, pain, misery, and despair are released from grief, lamentation, pain, misery, and despair.”

3. THE MONK WITH DYSENTERY, FROM THE PĀLI VINAYA²⁰

At one time, a certain monk was ill with dysentery, and lay fallen in his own urine and excrement. Then the Blessed One, while walking about on a tour of the monastic lodgings with the Venerable Ānanda as his attendant, came to that monk’s hut. The Blessed One saw the monk lying fallen in his own urine and excrement, and went in and said to him:

“Monk, are you ill?”

“I have dysentery, Blessed One,” he replied.

“Monk, is there someone nursing you?”

“There is not, Blessed One.”

“Why do the monks not nurse you?”

“I am of no use to the monks, Lord, so they do not care for me.” Then the Blessed One addressed Venerable Ānanda:

“Ānanda, go and get some water. We shall clean up this monk.”

“Certainly, Lord,” replied Venerable Ānanda to the Blessed One, and brought some water. The Blessed One poured it on the monk, and Venerable Ānanda thoroughly washed him. Then, the Blessed One taking him by the head, and Venerable Ānanda raising him by the feet, they lowered him onto a bed.

In connection with this event, the Blessed One had the monastic sangha assemble, and he asked the monks:

“Is there, monks, in such and such hut a sick monk?”

“There is, Blessed One.”

“What illness does that monk have, monks?”

“The venerable has dysentery, Lord.”

“Monks, is there a nurse for that monk?”

“There is not, Blessed One.”

“Why do you not nurse that monk?”

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“That monk is of no use to the monks, Lord, so we do not nurse him.”

“Monks, you do not have your mother or father to care for you. If you do not nurse one another, then who will look after you? Monks, one who would serve me should nurse the sick. If you have a preceptor, then you should be nursed for life by your preceptor, who should stay until your recovery. If you have a teacher, then you should be nursed for life by your teacher, who should stay until your recovery. If you have a fellow monastic, then you should be nursed for life by your fellow monastic, who should stay until your recovery. If you have a student, then you should be nursed for life by your student, who should stay until your recovery. If you have a companion with the same preceptor, then you should be nursed for life by your companion with the same preceptor, who should stay until your recovery. If you have a companion with the same teacher, then you should be nursed for life by your companion with the same teacher, who should stay until your recovery. If you have neither preceptor, nor teacher, nor fellow monastic, nor pupil, nor companion with the same preceptor, nor companion with the same teacher, then you should be nursed by the sangha. If you will not care for someone, that is an offense of wrongdoing.²¹

“Monks, when a sick person has the following five qualities, they are hard to nurse: they do not do what is appropriate; they do not know moderation in what is appropriate; they do not take their medicine; they do not clearly communicate their illness as it really is to the nurse who desires their good, not saying it is worse if it has worsened, or it is improving if it has improved, or it is still there if it persists; they find it impossible to endure arisen painful bodily feelings that are sharp, fierce, distressing, disagreeable, unpleasant, and life-threatening. Monks, when a sick person has these five qualities, they are hard to nurse.

“Monks, when a sick person has the following five qualities, they are easy to nurse: they do what is appropriate; they know moderation in what is appropriate; they take their medicine; they clearly communicate their illness as it really is to the nurse who desires their good, saying it is worse if it has worsened, or it is improving if it has improved, or it is still there if it persists; they find it possible to endure arisen painful bodily feelings that are sharp, fierce, distressing, disagreeable, unpleasant, and life-threatening. Monks, when a sick person has these five qualities, they are easy to nurse.

“Monks, when someone nursing the sick has the following five qualities, they are not fit to nurse a sick person: they are not competent to prescribe medicine; they do not know what is appropriate and what is not appropriate, so they dispense inappropriate treatment and remove appropriate treatment; they nurse the sick person with their own advantage in mind, not at all with a loving heart;²² they are too disgusted to touch excrement or urine, saliva, or vomit; they are not competent to explain, to rouse, to inspire, and to delight the sick person from time to time with talk connected with the Dharma. Monks, when someone nursing the sick has these five qualities, they are not fit to nurse a sick person.

“Monks, when someone nursing the sick has the following five qualities, they are fit to nurse a sick person: they are competent to prescribe medicine; they know

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what is appropriate and what is not appropriate, so they dispense appropriate treatment and remove inappropriate treatment; they nurse the sick person with a loving heart, not at all with their own advantage in mind; they are not too disgusted to touch excrement or urine, saliva, or vomit; they are competent to explain, to rouse, to inspire, and to delight the sick person from time to time with talk connected with the Dharma. Monks, when someone nursing the sick has these five qualities, they are fit to nurse a sick person.”

4. THE BUDDHA IS TREATED BY JĪVAKA KOMĀRABHACCA, FROM THE PĀLI VINAYA²³

On one occasion, the Blessed One’s body was flooded with *dosa*. Then the Blessed One addressed the Venerable Ānanda, saying, “The Realized One’s body is flooded with *dosa*, Ānanda. The Realized One wishes to drink a purgative.”

Then the Venerable Ānanda approached Jīvika Komārabhacca, and said to him, “Friend Jīvika, the Realized One’s body is flooded with *dosa*. The Realized One wishes to drink a purgative.”

“In that case, Ānanda, the Blessed One’s body should be rubbed with oil for a few days.” Then the Venerable Ānanda rubbed the Blessed One’s body with oil for a few days, and then approached Jīvika Komārabhacca, saying to him, “Friend Jīvika, the Realized One’s body has now been rubbed with oil. What do you think it is time to do now?”

Then Jīvika Komārabhacca had this thought: “It would not be appropriate for me to give the Blessed One a coarse purgative.” Having treated three bunches of blue lotuses with various medicines, he approached the Blessed One and offered the first bunch of blue lotuses to the Blessed One, saying, “Lord, the Blessed One must sniff this first bunch of blue lotuses. This will purge the Blessed One ten times.” He offered the second bunch of blue lotuses to the Blessed One, saying, “Lord, the Blessed One must sniff this second bunch of blue lotuses. This will purge the Blessed One ten times.” He offered the third bunch of blue lotuses to the Blessed One, saying, “Lord, the Blessed One must sniff this third bunch of blue lotuses. This will purge the Blessed One ten times.” And he thought, “In this way, the Blessed One will have altogether thirty purges.” Then Jīvika Komārabhacca, having prescribed altogether thirty purges for the Blessed One, saluted him respectfully, circumambulated him, and left.

Then, when he had left through the outside door, Jīvika Komārabhacca had this thought: “I prescribed the Blessed One altogether thirty purges since the Realized One’s body was flooded with *dosa*. But the Blessed One will not be purged thirty times; the Blessed One will be purged twenty-nine times. Moreover, the Blessed One will bathe once purged. Once bathed, the Blessed One will be completely purged. This will be the Blessed One’s thirtieth purge.”

Then the Blessed One, knowing the thought in Jīvika Komārabhacca’s mind with his mind, addressed the Venerable Ānanda: “Now when Ānanda had left

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through the outside door, Jīvaka Komārabhacca had this thought: ‘I prescribed the Blessed One altogether thirty purges. . . . This will be the Blessed One’s thirtieth purge.’ Therefore, Ānanda, prepare some hot water.”

“Certainly, Lord,” replied the Venerable Ānanda, and he prepared some hot water.

Afterwards, Jīvaka Komārabhacca approached the Blessed One, greeted him, and sat to one side. While sitting to one side, Jīvaka Komārabhacca said this to the Blessed One:

“Lord, is the Blessed One purged?”

“I am purged, Jīvaka.”

. . . Then Jīvaka Komārabhacca said this to the Blessed One, “Until the Blessed One’s body is back to normal, it will suffice to take soup during the alms round.”²⁴

NOTES

1. For more details, see Gombrich 2000.
2. For more details, see Norman 1983.
3. See Zysk 1998.
4. In MN 105 (MN II 260), the Buddha compares himself to a surgeon removing a poisoned arrow, the arrow being the poisonous *dosa* of ignorance; also translated in Nāṇamoli and Bodhi 1995: 867.
5. This is mentioned in AN 5.194 (AN III 238); also translated in Bodhi 2012: 811.
6. Biographical details from Pāli sources about Jīvaka Komārabhacca can be found in Malalasekera’s *The Dictionary of Pāli Proper Names* (1937–1938). Accounts of Jīvaka’s healing feats differ across Buddhist scriptural traditions and are compared in Zysk 1998 and Salguero 2009. See further references in chapter 20.
7. SN 36.21 (SN IV 230); also translated in Bodhi 2000: 1278–79. The eight causes of ill health are also listed at AN 4.87 (AN II 87), in the context of discussion of an ascetic such as the Buddha, who does not often suffer illness.
8. The commentary explains that the wanderer’s name was “Sīvaka” and that the sobriquet “Topknot” (*moḷiya*) was due to his wearing his hair up in a knot.
9. “Experiences” (*vedayitāni*) imply the felt hedonic tone of what is experienced, so the word could also be translated as “feelings.”
10. The view that experience arises “because of what was done in the past” (*pubbekatahetu*) is also criticized at AN 3.61 (AN I 173) for undermining ethics and at MN 101 (MN II 214), where it is attributed to the Jains, for being misguided and unhelpful. In the present context, however, the Buddha does not criticize the view on religious or theoretical grounds, but focuses on its implication in the specific case of the painful experience of being ill.
11. The first three causes of illness translate roughly as “bile,” “phlegm,” and “wind.” See glossary entry for *tridoṣa*.
12. This raises the question of how one could know that a particular painful feeling is caused by *vāta*, *pitta*, or *semha*, and implies some widely accepted symptomatology not explained here.

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13. The whole of the preceding paragraph is repeated for semha instead of pitta. Repetition is common in oral literature but is somewhat numbing on the page. In what follows, ellipsis (. . .) denotes similarly elided repetitions.
14. The expression *visamaṇārahāra* is difficult to translate. The commentary explains experiences caused by *visamaṇārahāra* in terms of carrying a heavy burden or crushing mortar, or in terms of snakes, gadflies, falling in holes, etc., for one who walks around at the wrong time. The commentary on AN 4.87 (AN II 87) (which also lists the eight causes of illness) instead explains experiences caused by *visamaṇārahāra* in terms of too much sitting and standing, and so forth. Hence, Bodhi (2000: 1279) translates the phrase as “careless behaviour.” Gombrich (2009: 20), however, points out that the context is medical and suggests “inappropriate or inadequate care or treatment.” My translation—“improper care”—seeks to convey the idea of ill health caused by not looking after oneself due to carelessness or overdoing things.
15. Note that the preceding passage was condensed to eliminate repetition of long phrases.
16. Although the Buddha leaves open the possibility that some illness is caused by past action, the later philosophical text *Milindapañha* minimizes this possibility: “small is what is born of the maturing of kamma, greater is the remainder” (Horner 1963: 189).
17. The text simply has “improper” (*visama*), probably to fit the meter, so that presumably “improper care” (*visamaṇārahāra*) is implied.
18. AN 10.108 (AN V 218); also translated in Bodhi 2012: 1489–90.
19. While in this discourse it is said that doctors prescribe a “purgative” (*virecana*), in the following discourse, which is otherwise identical, it is said that doctors prescribe an “emetic” (*vamana*). The prescribing of purgative and emetic are two of the worldly modes of knowledge from which virtuous monks abstain (see chapter 10).
20. Mv 8.26 (Vin I 301); also translated in Horner 1938–1966, 4: 431–34.
21. An “offense of wrongdoing” (*dukkata*) is a class of minor offense against the monastic code.
22. “Their own advantage” (*āmisā*) refers to worldly or material gain of some kind, whereas a loving heart (*mettacitta*) is an attitude of disinterested benevolence.
23. Mv 8.1.30–33 (Vin I 278).
24. On another occasion, it is said that some monks were flooded with *dosa* from overeating; Jīvaka recommends that they have somewhere to walk up and down, and have the use of a sauna (*jantāghara*), and the Buddha allows it (Cv 5.14.1–2, Vin II 119).