INTRODUCTION TO MADHAVANIDANA

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ABSTRACT

The Rogavinishchaya, traditionally known as Madhavanidana or Nidana is first work of this type compiled by Madhavakara in 700 A.D. on a section of Ayurveda i.e. etiology, Pathogenesis and diagnosis etc., of the diseases mentioned in all the branches of Ayurvada. It is comprehensive, standard and indisputable work on this section. The order in which the diseases have been described in it became so popular that, the same is reflected in the works of subsequent authors. This work is given first rank in the knowledge of diagnosis and it is very oftenly said that, Madhava is supreme in diagnosis.

The Rogaviniścaya, traditionally known as Mādhavanidāna or Nidāna is a comprehensive, standard, indisputable and very popular work compiled by Mādhava on etiology, pathogenesis and diagnosis etc. of the diseases mentioned in all the branches of Ayurveda. This work has remained a classic till date and given first rank in the field of diagnosis. Therefore, it is very oftenly said that, Madhava is supreme in Nidana (diagnosis) as Vāgbhata is in Sūtra (principles and practice of medicine), Susruta is in Sārīra (surgery and anatomy) and Caraka is in Cikitsā (therapeutics).

The early authorities of Avurveda gave due importance, devoting their attention to the investigation of etiology. pathogenesis and diagnosis of diseases under a separate section i.e. Nidanasthana. To the Nidanasthana Caraka has devoted eight chapters, Suśruta sixteen chapters and Vagbhata also devoted sixteen chapters. After these three classics, known as the vraddha-trayī (Great-trio) of the ancients. Mādhavanidāna achieved an outstanding reputation dealing exclusively and exhaustively with the diagnosis of diseases among the later works 1

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^{1.} a. 'Hindu Medicine' by Zimmer, H.R., pp. 60-61.

b. "A short History of Aryan Medical Science" by Bhagvat Sinh Jee, Chapter 2, pp. 35-36 and Chapter 8, pp. 151-152

Greater part of the Mādhavanidāna draws appropriate to its nature and scope, from the above mentioned three classics, while a small number of verses has been taken from the Aṣṭānga Saṃgraha and the remaining verses are from unidentified sources or composed by Mādhava himself. Many diseases described in brief in the saṃhitās, have been described here in detail, more clearly and in an independent form.²

The order in which the diseases have been described in this work attained so much popularity that the same is reflected in the works of subsequent authors, viz. Vranda's Siddhayoga Cakrapāniś Cikitsāsārasamgraha, Vangasena's Cikitsāsāra-samgraha and Bhavamiśra's Bhavaprakaśa etc. Regarding his work, Madhava himself says "This (work) called Rogaviniscaya' (the ascertainment of diseases) containing the secondary effections, precursory signals of death, causes and signs, is making use of the words of various sages, composed now in a succinct way on the request of accomplished physicians". Further. giving utility of this work he says "This very work (book) entitled 'Rogaviniścaya' will enable physicians lacking the knowledge of various treatises and possessing little intelligence. to discern a disorder with ease. "The five means of getting knowledge

about an illness, one wants to understand, as mentioned by him are: "The discernment of diseases is traditionally said to consist of five elements nidāna (the origin), pūrvarūpa (prodromes), rūpa (symptoms) and also upaśaya (therapeutic diagnosis) and samprāpti (onset). These words indicate its purpose, to be knowledge about diseases.

PERIOD OF MÄDHAVANIDÄNA

Since Caraka and Suśruta are cited by Vagbhata, while Madhavanidana is not mentioned by him, this work must be later than the work of Vagbhata II, who belongs to 600 A.D. Vrnda and Cakrapāni have followed the order in which the diseases have been described in Mādhavanidāna. This shows, the period of compilation of Mādhavanidāna, is before Vrnda and Cakrapani. The period of Cakrapāni is 11th century A.D., he has arranged his work 'Cikitsāsārasamgraha' on the basis of Vrnda's Siddhayogasamgraha, So, Vrnda must have lived before Cakrapānidatta, i.e. around 9th century A.D. Mādhava is considered to be 100 or 200 years earlier to Vrnda. According to a number of evidences, the Mādhavanidāna was known to Arabs in 850 A.D., which proves that, it must have existed before 8th century A.D. So, the period of compilation of Madhavanidana may be fixed as 7th century A D.4

^{2. &#}x27;Indian Medicine' by Jolly, J.P., pp. 10.

^{3. &#}x27;Madhavan dana and its chief commentary' by Meulenbeld, G. J. Chapter I, pp. 29-32.

^{4.} a. 'Ayurveda Ka Brihat Itihasa' by Atridev, 1st Edn. pp. 268-269.

b. 'Ayurvada Ka Vaijnanika Itihasa' by Sharma, P. V., pp 242-243.

G.J. Meulenbeld says, among the number of Indian medical works recorded by Ibn Abī Uśaybia (who died in 1270 A.D.) in his twelfth book of History of Physicians, the 'Uyūn-al-anbā fī tabagāt-al-atibbā' the title of one of these treatises is written bdan (a variant reads ydan): this word is usually vocalized as Badan, though it is equally admissible to read Bidan. Uśaybia observes that the signs of 404 diseases are described in the work, without indicating their treatment. This indicates to the Mādhavanidāna and not to the Nidānasthana of one of the classical samhitas, as a restricted number of diseases only, is dealt with, in the latter under that heading. The Nidana is also mentioned by the Arab historian (Ibn Wādih)-Al-Yaqūbī. This author. who is earlier than Usavbia and Al Rāzī (he lived in the second half of the ninth century), describes the work in the same way as Usaybia. Abul Hasan Ali b Sahl Rabban-al-Tabari wrote 'Firdows-al-Hikma-filtibb' i.e. Paradise of Wisdom in Samrra in the third year of the reign of the Caliph al-Mutawakkil, i.e. 849-850 A.D. Its thirtieth and last section deals with Indian medicine. describes succinctly in thirty six chapters, the theory and general therapeutic principles of Indian medicine, while at the end many recipes are given. Ali b Sahl made use of the translations of Sanskrit medical works executed by order of the first Abbasid Caliphs, in particular Harun-al-Rasheed

(768-809 A.D.) and the Barmakids, Ali b Sahl based his work on earlier translations of Indian texts into Syriac or Persian. Among the Indian books of this treatise several Indian medical works are mentioned-Jrk, ssrd, ndan and ashtanghrdy, i.e. Caraka, Suśruta, Nidāna and Astāngahrdaya. highly probable that ndan is the Mādhavanidāna, because no other famous Indian book with a similar title could have spread to the Arab world at so early as date (about 850 A.D.). This reference to the Nidana as a separate book is mentioned once in the Indian books of 'Firdows-al-Hikma'. The term Nidana appears on two other occasions, where however, it is not the Mādhavanidāna which is referred to, but the nidana section of some other treatise. No direct translation of parts of the Madhavanidana are traceable, nor of the Carakasamhitā, Suśrutasamhitā and Astāngahrdaya, only summaries of Indian medical doctrines have been given. Accepting the evidence afforded by Ali b Sahl and later Arabic authors, it appears reasonable to suppose, that Mādhava's date is about 700 A.D., taking into account the time, needed for the work of an Indian writer to become so famous as to be translated into Arabic in Persia and to be employed as one of his chief sources by an Arabic author in 849-850 A.D.

THE COMMENTARIES ON MIDHAVANIDANA

Many commentaries were written

on Mādhavanidāna being an excellent and very popular work, such as:

- MADHUKOŚA by Vijayarakşita and his disciple Śrīkanthadatta in the first half of 14th century A.D.
- ĀTANKADARPAŅA by Vācaspati Vaidya in second half of the 14th century A.D.
- 3. SIDDHĀNTACINTĀMAŅI by Narasimha Kavirāja. This work seems to be the same as the Siddhāntacandrikā by Narasimha Kavirāja, son of Nīlakaṇṭha Bhaṭṭa and disciple of Rāmakṛṣṇa Bhaṭṭa. According to Dāsgupta it is an excellent work based on the Madhukośa, containing much that is both introductive and new. T. Aufrecht also recorded the Siddhāntacandrikā
- SUBODHINI by Vāsudeva Māthur, consisting of short interpretations of difficult portions of the Nidāna.
- MADHAVANIDANATIPPANI by Bhāvamiśra. A work of same title is also recorded without author's name in R. Mitra's Bikaner catalogue.
- RUGVINIRNAYATIKA by Bhavani Sahaya. This is a little known, recent, short and incorrect commentary.
- A short commentary written by Ramanatha Vaidya. This is a little known, recent, short and incorrect commentary, which is not procurable.

- VAIDYAMANORAMĀ by Rāmakṛṣṇa son of Gaurī and Nīlakantha.
- 9. A commentary by Raisarman.
- A commentary by Ganeśa Bhisaja.
- 11. RUGVINIŚCAYAPARIŚIŞTA by Hāradhana son of Viśārada.
- ŚĀRADĀ by Srī Śārdācaraṇasena, which is relatively a recent work in Sanskrit.
- SUDHĀLAHARĪ by Umeśānanda Śarman, which is also a recent work in Sanskrit.
- NIDĀNAPRADĪPA by Nāganātha 14 the eldest son of Krsnabhatta is sometimes said to be a commentary on the Mādhavanidāna. According to Eggeling it is rather surprising that, Mādhava is never once alluded to by the author, unless indeed, the title of the work is meant to imply that the work is intended to be an exposition or paraphrase of the Madhavanidana. J. P. Jolly is of the opinion that, it is an extensive work in verse on pathology and not a commentary on Mādhavanidana.
- VIKĀSINIVYĀKHYĀ by Dīnānātha Śarmā Śāstrī in Hindi.
- 16. VIDYOTINĪVYĀKHYĀ by Sudarśana Śāstrī in Hindi⁵.

^{5.} a. 'The Madhavanidana and its chief commentary' by Meulenbeld G, J, pp. 1, 2, 16, 21 & 22 (Introduction) and Chapter 1 pp. 29.31.

b. 'Ayurveda Ka Varjnanika Itihasa' by Sharma P. V., 1st Edn. pp. 242-245.

Madhukośa is the excellent work among all the above commentaries. This work from sections 1 to 32 is by Vijavaraksita and remaining portion i.e. from sections 33 till end by his disciple Śrikanthadatta, Caraka, Suśruta and Vagbhata have extensively been quoted in this work. It also refers to the views of Jejiata, Vapvacandra, Kirtikunda (Kārtika), Sudānta Sena, Bhattāra Haricandra, Gadādhara, Pālakapya, Karavīra, Parāśara, Hārīta, Bhoja, Jatūkarana, Gavasena, Cakra, Bhāluki, Kharanāda and Drdhabala. It also distinguishes between Vrddha Suśruta (the original compiler of the teachings of Dhanvantari) and Susruta (the author of the present Suśruta Samhita). The commentary promises to supply during the course of the commentary diagnostic material that will be useful, but left unsaid by the author Madhava. Śrikanthadatta has two verses before the commentary on the section 33 (Prameha), wherein he tells us that, his commentary was motivated by his reverence for the teacher Vijava (raksita). At the close of the commentary he refer's to his teacher's work 'Sūkti-muktāvalī' (which is probably another name for 'Madhukośa'), in which whatever was left unarticulated by his teacher has been supplied by himself in the very words of his teacher. Many of the medical works quoted in this commentary are

not available now. Its earliest available manuscript is dated 1529 A.D. Among the early editions of this commentary Jibānanda Vidyāsāgar's (1876) and the Nirṇayasāgara edition (alongwith Âtaṅkadarpaṇa commentary) may be mentioned.6

TRANSLATION OF MADHAVANI-DANA IN FOREIGN LANGUAGES

- It was translated into Arabic in 8th century A.D.
- 2. Its first five chapters were translated into Italian language by Mario Vallauri in 1913-14 A.D.
- First ten chapters of this work alongwith Madhukośa and Ātańkadarpana commentaries were translated into English by G. J. Meulenbeld in 1974.⁷
- 4. It was translated from second chapter in English by K. R. L. Gupta in 1892.

CCNTENTS

This work dealing with the branch of etiopathogenesis, clinical pathology and diagnosis of diseases, is divided into three sections by its author. In the first section, five aspects necessary for proper diagnosis of a disease have been described as the 'Pancanidānalakṣaṇam' which are as follows:

 NIDÂNA (etiology): The root causes of the diseases, such as bad food, bad water, indulgence,

^{6. &#}x27;Encyclopaedia of Indian Medicine' Vol. I, pp. 70, 93, 94 & 101.

^{7. &#}x27;Ayurveda Ka Vaijnanika Itihasa' by Sharma, P. V. pp. 245.

excesses etc. They very often give a clue to diagnose diseases. The popular meaning of the term NIDĀNA is diagnosis, which also includes prognosis. This term is generally applied to the collective Ayurvedic name for etiology, pathology, predromata, and symptomatology etc., although in a restricted sense it refers specially to the causes that bring about diseases.

- 2 PÜRVARŪPA (prodromal features): The pre-disposing signs and symptoms occuring during incubation period i.e., before the disease fully manifests itself may give a clue to the disease. But at this stage one can not be certain whether any disease will manifest itself or whether the disease may subside. indications help a physician to guess the advent of the disease very often and to correlate particular doshic derangement with a particular group of prodromata.
- 3. RÜPA (symptomatology): The symptoms by which a disease exhibits itself. By means of the study of signs and symptoms a physician is enabled to judge the special feature of the developed stage of disease and dosa, dūsya etc.
- UPAŚAYA (Therapeutic test leading to diagnosis in its different aspects): It is a form of diagno-

- sis in which a disease is ascertained by the experimental use of particular conduct, diet or drug. Such as, there is a doubt that a particular disease is due to the derangement of vata, then a diet, exercise or any other known remedial measure is prescribed to cure the suspected derangement, which is then either ameliorated or aggravated. If it is ameliorated, then the hypotheticated proposition is confirmed. If not, it is rejected. Thus, the medicine or food or the hygienic treatment which has given relief is called UPASAYA. On the other hand, if the patient feels worse, the anti-vata treatment in this instance is termed ANUPAŚAYA. Then it is immediately stopped and suitable other measures are undertaken. UPAŚAYA is also called VY \D-HIS TMYA, that, which is conducive to the welfare of the patient by giving relief from the disease.
- 5. SAMPRAPTI (Pathogenesis and clinical pathology): It is the observation of the course of the disease, or in other words, it is the description in detail of all the morbid processes that take place in different stages of the same disease. The accumulation of the dosas, their movements and the particular forms of the diseases are included in SAMPRAPTI.8

The second section has dealt with the detailed description of the following diseases including their clinical varieties: Jvara (fever), Atisāra (diarrhoea), Pravāhikā (dysentery), Grahani (chronic diarrhoea), Arśa (haemorrhoids / piles), Agnimandya (dyspepsia/sluggishness of the (tranforming) fire), Ajīrna (indigestion/ disorders of the process of disintegration (of the food), Visūcikā (cholera), Alasaka (intestinal inertia), Vilambikā (retardation of evacuation), Pāndu (anaemia/morbid (worms). pallor), Kāmalā (jaundice), Kumbhakāmalā (cholaemia), Halīmaka (chlo-Raktapitta (haemorrhage/ rosis), blood-bile/haemorrhagic disorders), Rajayak-ma (Phthisis Kingly consumption/pulmonary tuberculosis), Ksataksina (pulmonary cavitation/ a lesion of the chest/ulcer), Kasa (cough), Hikkā (hiccup). Śvāsa (bronchial asthma), Svarabheda (hoarseness of voice), Arocaka (loss of appetite/ anorexia/aversion to food), chardi (vomiting), Tṛṣṇā (abnormal thirst), Mūrcchā (fainting, syncope), Bhrama (vertigo/giddiness), Nidrā (coma), (drowsiness), Sannyāsa (apoplexy), Pānātya-Paramada Pānāiirna-Pānavibhrama (alcoholism). Dāha (burning sensation), Unmāda (insanity), Apasmāra (epilepsy, hysteria), Vātavyādhi (nervous diseases), Vātarakta (gout), Urustambha (paraplegia), Amavāta (rheumatoid arthritis), Sūla (colic), Parināmašula (duodenal ulcer), Annadravasūla (chronic gastritis/gastric ulcer) Udāvarta (distension of abdomen/retention of discharges), Inaha (pyloric obstruction/intestinal obstruction/constipation), (swellings in the abdomen/abdominal tumour), Hydroga (diseases of the heart), Mütrakrochra (painful micturition/dysurea/strangury), Mūtraghāta (obstructed micturition/retention of urine), Aśmari (calculus/urinary calculi), Prameha (urinary abnormalities/morbid secretion of urine), Madhumeha Pramehapidaka (diabetes), (boils associated with the urinary abnormalities/carbuncles), Medoroga (obesity), Udara (abdominal enlargements/ abdominál disease), Śotha (oedema/ swellings/dropsy), Vrddhi (inguinoscrotal swellings/hernia/hydrocele/haematacele etc.), Galaganda (goitre), Gandmālā (scrofula), Apacī (chronic lymphadenitis), Granthi (glandular swellings), Arbuda (tumours), Ślipada (elephantiasis), Vidradhi (abscess), Vraņašotha (inflammation), Śārīravrana (idiopathic ulcer), Sadyovrana (wounds/recent traumatic wounds), Bhagna (fractures and dislocations), Nālīvrana (sinus or fistula), Bhagandara (fistula-in-ano), Upadamsa (soft chancre/genital ulcer/venereal diseases) Śūkadosa (various genital conditions/ diseases caused by local applications to increase the size of penis), Kustha (diseases of the skin including Śitapitta-Udarda-Kotha leprosy). (urticaria/exanthymeta), Amlapitta (hyper acidity), Visarpa (erysipelas/ cellulitis), Visphota (bullous eruption/

boils), Masūrikā (small-pox), Romāntikā (measles), Ksudraroga (minor diseases), Mukharoga (diseases of the oral cavity), Karnaroga (diseases of the ears), Näsäroga (diseases of the nose), Netraroga (diseases of the eyes), Siroroga (diseases of the head/ brain), Asrqdara (dysmenorrhoea and menorrhagia), Yonivyāpat (diseases of female genital organs), Yonikanda (utero-vaginal tumours), Mūdhagarbha (malpresentation / abnormal presentations/unnatural labour), Sūtikāroga (puerperal diseases), Stanaroga (breast diseases), Stanyadusti abnormal milk discharge), Bālaroga (diseases of children), Visaroga (effects of poisons).

The last section of this work contains a list of diseases described in the Rogaviniścaya and it ends with a prayer that all living beings be freed from the entire host of diseases.

THE AUTHOR OF ROGAVINISCAYA

In the colophon of the Rogavinis-caya the name of its author is given as Mādhava son of Indukara. In Madhukośa commentary he is called as Mādhava and Mādhavakara. No sufficient information is available regarding his lineage. The name of his father is given in few works only, but there is no agreement among these sources. In the colophon of a manuscript of Vācaspati's commentary on the Nidāna, his father's name is

given as Indukara, whereas the name of the father of Mādhavakara, the author of Nidāna and Cikitsā (Mādhavacikitsita) is given as Candrākara. If the author of Mādhavanidāna and Mādhavacikitsita is one, which is most possible, then Candrākara may be taken as a synonym of Indukara. It is assumed that Indukara is the correct form of the name of Mādhava's father.

Hoernle had created confusion with regard to the identity of Madhava and his works. He observed that, Dalhana in the introduction to his commentary on Suśrutasamhita mentioned that, before starting to write his own comments, he had studied the glosses of Śri Mādhava. So, he made a link between Mādhava, the glossator and Vrnda, the author of the Siddhayoga, after noticing the observation of Śrikanthadatta that, Vrnda added glosses of his own to stanzas of the Siddhayoga, taken from the Carakasamhita or Suśruta-He then, assumed that samhitā Mādhava and Vrnda were probably one and the same person. In support of this assumption he drew attention to the fact that the Siddhayoga, as per its colophon is also called Vrndamādhava. The author has given his name as Vrnda at the end of his work. In this way Hoernle came to regard wrongly that the Madhavanidana and Siddhayoga as the two parts of one great work by Vrnda.

Mādhavakara is supposed to belong to the 'Kara' family mentioned as one of the families of Bengali physicians by Bharatamallika (about 1800 A.D.). a Bengali commentator in his Candraprabhā. Bhattacārva is also of the opinion that, he belongs to Bengal, and in support of this theory, he drew attention to the Bengali synonyms of substances of vegetable, animal and mineral origin mentioned in Paryayaratnamālā, which is said to be one of the Mādhava's work, N. N. Dasgupta also believes that. Mādhava was a Bengali and pays attention to the vernacular words in the Paryayaratnamālā, adding that the substances, occuring in it are for the greater part still known by the same name in Bengal. 10 Gananātha Sen also assigns him to Bengal. It is also said that. Mādhava was born in Kishkindha, now, called Golkonda, in South India, and was Prime Minister to King Vira Bukka of Vijayanagar in the 12th. century A.D. He was a brother of the famous scholar Savana the author of the great commentary on the Rgyeda, to which. Mādava is said to have also contributed. Besides the 'Rogaviniscaya' or 'Mādhavanidāna', the other works attributed to this Mādhava are— 'Sarvadarsanasamgraha', 'Māddhavavedārthaprakāśa', 'Pancadasi', 'Mādhavavrtti', 'Kālamādhava', 'Vya-

vahāramādhava', 'Acāramādhava' and 'Sankaradigvijaya' etc.12 Here also the author of the Nidana, a native of Bengal belonging to 7th century A.D. is wrongly identified with Madhava the brother of the famous Savana 18. In T. Aufrecht's catalogus catalogorum also, many Mādhavas have been mentioned. Among them the Mādhava or Mādhavakara son of Indukara is considered as the author of a number of works, viz. 'Ayurvedaprakāśa', 'Äyurvedarasaśastra', 'Kūṭamudgara', 'Paryāyaratnamālā, 'Rasakaumudi' and 'Rugviniścaya' or 'Mādhavanidāna' etc.14

From the above description it is clear that there were many medical authors called Mādhava or Mādhava-kara. Apart from the Rogaviniścaya or the Nidāna many other works are also attributed to the author of the Nidāna. Prominent among these works are as follows:

 Āyurvedaprakāśa: This work was composed by Mādhavaupādhyāya. He was originally from Saurashtra but settled in Kashi. He was later than the author of the Rogaviniścaya or Mādhavanidāna, since he has quoted from Trimallabhaţţa's 'Yogatarangini' of 17th century A.D.

^{10. &#}x27;The Madhavanidana and its Chief Commentary' by Meulenbeld, G. J. pp. 5-8 (Introduction).

^{11. &#}x27;Pratyaksha Shariram' by Gananath Sen, Part-I, pp. 51-52 (Sanskrit Introduction).

^{12. &#}x27;A Short History of Aryan Medical Science', by Bhagvat Sinh Jee, Chapter II, pp. 35-36.

^{13. &#}x27;Encyclopaedia of Indian Medicine', Vol. I, No. 69.

^{14. &#}x27;Catalogus Catalogorum' by T. Aufrecht, Part-I. pp. 449.

- Āyurvedarasaśāstra: Though the author of this work is also Mādhava the son of Indukara, but, probably he was again different from the author of the Nidāna.
- Kuṭamudgara: This work is attributed to Bhiṣak Mādhava. According to S. K. De, there is nothing to identify him with the author of the Nidāna. Neither 'Kara' is there with his name nor the name of his father is Indukara. This work belongs to tāntrik or probably modern period.
- 4. Paryayaratnamala: According to P. V. Sharmaji, its author is Mādhavakara, the son of Indukara, who has given his place as 'Silāhrda'. Some people take Silahata by Śilāhrda and few other take it Patharaghatta, the site of the university of Vikramaśila, near Bhagalpur (Bihar). Probably he must have been related as a teacher with the university, which was established during the reign of Palavamsa in 8th century A.D. Its author is different from the author of the 'Rogaviniścaya'. It contains mercury, sulphur and mica etc. which indicates some what developed state of Rasaśāstra. This work seems to be posterior to Mādhavaciķitsita, a work ascribed to the author of the Nidana, which does not con-

tain any mercurial preparations. Vinda (9th century A.D.) has guoted and followed the Rogaviniścava, while the Paryayaratnamālā has not been quoted by any author prior to Sarvananda (12th century A.D.) the famous commentator of 'Amarakośa'. Apart from this 'Bradhna' disease found mentioned in it has not been described in the Nidana. So, the author of both the works is not the same, otherwise, this disease would have certainly been mentioned in the Nidana also. It is also certain that, this work is not later than 11th century A.D., as opium is not given in it. Its period, therefore, must be later than the Nidana. Since the period of the Nidana has been fixed as 7th century A.D., the Paryāyaratnamālā must have been composed between 7th and 11th centuries i.e. 9th century A.D. But G. J. Meulenbeld believes that the Ratnamala can without much doubt, be regarded as an authentic work by Mādhava, the author of the Rogaviniścaya. He has mentioned one more Paryayaratnamālā written by Maheśvara Misra. He has also reported another work known as Ratnamālā written by Govardhana, who was later than Madhava and also one of the Niścalakara's distinguished authorities. Mād-

^{15. (}a) 'Ayurveda Ka Vaijnanika Itihasa', by Sharma, P. V., pp. 240-241.

⁽b) 'Introduction to Dravyaguna' by Sharma, P. V., pp. 93-99.

hava's Ratnamäla is quoted by Vandvaghatīva-Sarvānanda in his commentary called Tikasarvasva, on Amarasimha's Nāmalingānuśāsana, composed in 1159 A.D. Mādhava's work was known to Medinikara (14th century A.D.). who refers to the Ratnamala and Mādhava in his Nānārthašahdakośa, also known as Medinikośa. Rayamukuta, the author of the commentary 'Pādacandrikā' on the Amarakośa, in 1431 A D. quotes from Mādhava's also Ratnamālā. The Batnamālā by the physician Mādhavakara is clearly referred to by Haricaranasena in the introductory stanzas of his Parvāvamuktāvalī, which indicates that the work was based on that by Madhava,16

- 5. Mādhavacikitsita: S. K. De says that, it is not a separate work different from the Rogaviniścaya, but it is either identical with the Nidāna or represents a version of it. According to N.N. Dasgupta, this work was composed by Mādhava as a supplement to the Nidāna, which is quoted by Śrīkaṇṭhadatta in his commentary on the Siddhayoga. Mādhava's treatise on therapy was also known to Niścalakara, who refers to it as the Mādhavasamgraha.
- 6. Rasakaumudi: The author of this

- work is also Mādhava, the son of Indukara, but, it was probably composed in 16th or 17th century. Its contents are comparable to Rasapradīpa in many aspects. Opium and mineral acids are found mentioned in it. 17
- Rasasiddhiprakāśa: It was composed by Mādhavabhatta not by the Mādhavakara.
- Yogavyākhyā: Its author is Mādhava. No other information regarding the author of this work is available except, as given by Śrikanthadatta and Niścalakara.
- Suśrutaślokavārtika or Praśnasahasravidhāna: It is difficult to say something with regard to its author. But, most probably it is also a work of the author of Paryāyaratnamālā.
- Dravyaguna (Bhāvasvabhāvavāda): Mādhava, the author of this work was grandson of Śrikanthadatta, son of Cakrapāni and father of Puruśottama.¹⁸

On the basis of the above discussions, it can be concluded that 'Rogaviniścaya', 'Paryāyaratnamālā', 'Mādhavacikitsita' and 'Suśrutaślokavārtika' or 'Praśnasahasravidhāna' can be attributed to Mādhava or Mādhavakara, the son of Indukara, a native of Bengal, belonging to 7th century A.D.

^{16. &#}x27;The Madhavanidana and its Chief Commentary' by Meulenbeld, G. J., pp. 8-12.

^{17. &#}x27;History of Chemistry in Ancient and Medieval India' by Ray, P., pp. 162, 229 & 307.

^{18. &#}x27;Ayurveda Ka Vaijnanika Itihasa' by Sharma P. V., pp. 238-241.

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सारांश

माधवनिदान-एक परिचय

-मोमिन अली

सातवीं शती ईसवी में माधवकर ने आयुर्वेद की सभी शाखाओं में उल्छिखित रोगों के निदान सम्प्राप्ति तथा लक्षणों आदि का संग्रहण कर, एक विशिष्ट ग्रन्थ 'रोगिविनि-रचय' लिखा, जिसकों पारम्परिक रूप में 'माधविनदान' अथवा 'निदान' भी कहा जाता है। इस विशिष्ट शाखा का यह एक विस्तृत, प्रमाणिक तथा निविवाद ग्रन्थ है। इसमें प्रति-पादित रोगों के वर्णन का कम इतना लोकप्रिय हुआ कि बाद में आने वाले लगभग सभी ग्रन्थकर्ताओं द्वारा इसी कम का अनुसरण किया गया है। अतः रोगों के निदान विषयक ग्रन्थों में इस ग्रन्थ को प्रथम स्थान दिया गया है।