

The Buddhist Physicians Vow



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Essays on Buddhist Doctrines

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The Vejjavatapada is a vow or oath to be taken by Buddhist doctors and other professionals working with the sick. It is derived from statements attributed to the Buddha and dating from between the 5th and 3rd centuries BCE. The original is composed in Pali, a Middle Indo-Aryan language current in north-east India during the first half of the first millennium BCE, and now the liturgical language of Theravada Buddhism.

Contrary to popular misconception, early Buddhism did not claim that all physical conditions, including injury and illnesses, were necessarily caused by past karma. The Buddha mentioned at least eight causes of sickness of which only one was karma; the others being an imbalance in the bile (*pitta*), in the phlegm (*semha*), the wind (*vata*), An imbalance in a combination of all three (*sannipāta*), seasonal changes (*utuparinama*), carelessness (*visamaparihara*) and external agencies (*opakkamika*, e.g. accidents). [1] On other occasions he mentioned that improper diet and overeating can likewise cause sickness while intelligent eating habits can contribute to 'freedom from sickness and affliction, health, strength and a comfortable living.' [2] As disease and sickness with non-karmic causes can be susceptible to medical intervention the Buddha saw the physician's role as a vital one. The Pali Canon is replete with information about sickness and health, medicine, healing, medical care and medical ethics. [3] It reports the Buddha saying: "Those who tend the sick are of great benefit (to others)." [4] Because the Pāli Canon predates the separation and specialization of the medical profession as presented in āyurvedic treatises, it rarely makes a distinction between the doctor (*bhisakka*, *tikicchaka* or *vejja*) and the nurse (*gilanupatthaka*). [5] At the Buddha's time the doctor probably performed all the functions in the sick room, including that of nursing the patient.

The Vejjavatapada or Physicians Vow is the Buddhist equivalent to the Western Hippocratic Oath, the Japanese Seventeen Rules of Enjuin and the Jewish Oath of Asaph. It is based closely on four passages from the Pāli Canon, each of them attributed to the Buddha. The first part of the preamble contains a direct quotation from the first line of verse 204 of the Dhammapada and another taken directly from Vinaya where the Buddha, after having attended to a sick monk neglected by his fellows, instructed his monks to look after each other when they are sick. [6] Of the following six articles the first five are based closely on a discourse in which the Buddha lays down the attitudes and skills which would make "one who would minister to the sick qualified to minister the sick." [7] The sixth and final article is taken from the discourse in which the Buddha describes three types of patients according to their response to treatment; i.e. those who die whether they get proper treatment or not, those who recover whether or not they get proper treatment, and those who recover only if proper treatment is given. In the case of this first type, they should still be treated and nursed out of compassion and just in case there is a chance, no matter how slim, of recovery. [8]

Of the six articles in the Vejjavatapada, the first concerns the physician's responsibility to be fully trained in and skillful in the administration of drugs, given that the physician's *raison d'être* is effective healing and that some drugs can be dangerous if not proscribed properly. The second article is equivalent to the Hippocratic Oath's third and fourth stipulation, that the physician shall never do anything to harm a patient, even if asked to do so. The third article counsels the physician to have a benevolent attitude to patients and put their welfare above his or her personal gain. The fourth article reminds the physician that at times it might be necessary to deal with the loathsome aspects of the human body and that he or she should do this with detachment, both for his or her own mental balance and so as not to embarrass or humiliate the patient. The fifth article is a recognition of the fact that spiritual counseling and comfort can have a part to play in healing and that the physician needs to have at least some abilities in this area. There are several discourses which describe the Buddha doing just this. [9] The sixth and final article requires the physician to continue to care to the patient even if all the signs indicate that he or she is not responding to the treatment and will probably die. Even a dying patient may need palliative care and to be physically and

mentally comforted. In an interesting comparison to this, Susruta, the father of Indian medicine, advises the physician not to treat a patient he suspects of being incurable, so as to avoid blame and damage to his reputation if the patient dies. [10]

Related to but not a part of the Vejjavatapada are the points the Buddha recommended for the patient if he is 'to be a help to himself' [11] and complement the physician's intervention. These include doing what is beneficial, doing or taking the beneficial in moderation, taking the medicine as prescribed, explaining his or her symptom accurately to the physician, and being able to endure discomfort and pain. [12]

Bhagavā etad-avoca: Ārogyaparamā Lābhā
The Lord said, Health is the Greatest Gain

Yo mañ Upaṭṭhaheyya so Gilānañ Upaṭṭhaheyya
He who would minister to me should Minister to the Sick.

Mattami pi arogyaparama labha, Tathagatassa up tthahami, tasma mam kosallena arogyabhavam bhavemi, gilanam hitesina, dayena, anukampakena upatthahami.

I too think health is a great gain and I would minister to the Buddha, therefore I will use my skill to promote health and minister to the sick with care, kindness and compassion.

(A) *Patibalo homi bhesajjam samvidhatum.*
I will be able to prepare medicines.

(B) *Sappayasappayam janami, asappayam apanamemi; sappayam upanamemi, asappayam napanamemi.*
I will know what medicine is suitable and what is not suitable; I will not give the unsuitable, only the suitable.

(C) *Mettacitto gilanam upatthami, no amisantaro.*
I will minister to the sick with a loving heart, not out of desire for gain.

(D) *Ajegucchi homi uccaram va passavam vavantam va khelam va nīharitum.*
I will remain unmoved when I have to deal with stool, urine, vomit or spittle

(E) *Patibalo homi, gilanam kalena kalam, Dhammiya kathaya sandassetum samadapet m samuttejetum sampahamsetum.*
From time to time I will be able to instruct, inspire, enthuse, and cheer the sick with the Teaching

(F) *Sace gilanam sappayabhojananehi va sappayabhessajjehi va sappayapatirupena upatthakena na vutthati, api ca kho mam patirupam upaṭṭhakam homi, anukampakena.*
Even if I cannot heal a patient with the proper diet, proper medicine and proper nursing I will still minister to him, out of compassion.

Notes

1. *Samyutta Nikaya* IV,230.
2. *Anguttara Nikaya* III,144 and *Majjhima Nikaya* I,473.
3. *Asceticism and Healing in Ancient India: Medicine in the Buddhist Monastery*, Kenneth G. Zysk, 1991. See also *Greater Magadha*, Johannes Bronkhorst, 2007, pp. 56-60.
4. *Api ca gilānupatthaka bah upakara*, *Vinaya* I, 303. This was in marked contrast to Brahmanism which looked upon doctors with distain; for Brahmanical text condemning doctors see *Buddhism in the Shadow of Brahmanism*, Johannes Bronkhorst, 2011, pp.115-6.
5. Zysk, p.43.
6. *Vinaya* I,302.
7. *Anguttara Nikaya* III,144.
8. *Anguttara Nikaya* I, 121.
9. *Anguttara Nikaya* III,297; *Samyutta Nikaya* V,381. Later Buddhist literature often encourages caring for and visiting the sick. The *Brahmajala Sutra* says: “If a disciple of the Buddha sees anyone who is sick, he should provide for that person’s needs as if he were making an offering to the Buddha”, *Brahma Net Sutra*, 1998, VI,9. The *Saddhammopayana* (Sri Lanka 12th century) says: “Nursing the sick was much praised by the Great Compassionate One and is it a wonder that he would do so? For the Sage sees the welfare of others as his own and thus that he should act as a benefactor is no surprise. This is why attending to the sick has been praised by the Buddha. One practicing great virtue should have loving concern for others”; *Saddhammopayana*, edited by Richard Morris, *JPTS*, 1887, pp.35-72.
10. *Sushruta Samhita*, XXVII.
11. *Supattoko hoti*, *Anguttara Nikaya* III,144.
12. *Idib*.

Further Reading

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