

HISTORICAL BACKGROUND TO TIBETAN MEDICINE IN THE REPUBLIC OF TUVA (RUSSIAN FEDERATION)

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Abstract. The paper considers historical preconditions for existence and development of Tibetan medicine in the Republic of Tuva. It assumes the existence of Tibet-Tuvinian branch of Tibetan medicine.

Keywords: medical anthropology, Tibetan medicine, ethnomedicine, traditional medicine, Republic of Tuva, Sowa Rigpa

The Republic of Tuva is located in the central part of the Asian continent. Its total area is about 170,500 square kilometers, of which 82% are mountains. The republic is divided into three climate zones: dry-steppe Tuvinskaya, semi-arid Ubsu-Nurskaya (on the border of Mongolia) and taiga-covered Todjinskaya and Tere-Holskaya areas [16]. This varied climate results in a diversity of soil and vegetation cover encouraging development of traditional Tibetan medicine in the Republic. Plants growing at high altitudes with rich insolation tend to accumulate more biologically active substances than their peers in the valleys. This situation was found to be of importance to oriental medicine theorists and practitioners.

Researchers identify several periods in the development of medicine in Tuva [15]. The first period was a period of nomadism, when folk medicine and magico-medical practices dominated [8]. Tribes inhabiting the territory of modern Tuva were treated with livestock products, used various organs and tissues of wild animals and birds, as well as medicinal plants growing on the territory of the republic [3]. Until now, there are recipes made of parts of animals, such as lynx, wolf, bear, squirrel. The bile of such fish as grayling and taimen treat diseases of the middle ear. Polar partridge, crow, and a number of other birds are used for obstetric care¹.

The tribes inhabiting Tuva became familiar with Buddhist teachings at the beginning of the 6th century AD. This is confirmed by the rock carvings on the territory of modern Khakassia (formerly the territory of Tuva). As historians note, since the 6th century the elite of Turkic society began to embrace Buddhism. However, the expansion of Buddhism in the region is associated with the power of the Mongols who adopted Tibetan Buddhism. The first Buddhist temples on the territory of Tuva appeared, obviously, inside the Chinese settlements founded on the territory of Tuva by Mongols at the end of the 13th century. Familiarity of ancestors of contemporary Tuvinians with the foundations of Buddhism increased in the 16th-17th centuries under the rule of the Altyn Khans and the Dzungar rulers. At this time the Tibetan Buddhism including teachings of the Diamond way spread to Tuva. The leading role, mainly for political reasons, was eventually taken by the school of Gelug. Archaeological studies in the central part of Tuva confirm existence of the Buddhist temples, pagodas and chapels all across its territory, dated the 13-14th centuries and built up to the canons accepted in the Mongolian empire. [5, 9]

In the second half of the 18th century, when Tuva was ruled by the Ching Ambyn Noyon (a Mongolian Gombozhap), the first Buddhist monasteries (khurees) were constructed on the territory of the Uryanhai Territory. In Tuva the first two khurees were built in 1772: the Kyrgyz

¹ From archives of fieldwork in 2015-2017

one – on the territory of the present Erzinsky kozhuun, and Oynarsky – in the Tes-Hemsky kozhuun. Khure in Samagaltaye was opened in 1773.

Along with Buddhism, Tibetan medicine comes to Tuva. By the beginning of the twentieth century, this region numbered nine khurees. In 1926 there were 26 khurees and around 4 thousand lamas on the territory of Tuva. In the monasteries, Tibetan language, reading and writing, linguistics, poetics, botany, pharmacology, anatomy, physiology, pathology, mathematics, alchemy, history, philosophy, astrology were studied. After four years of studying "four books of medicine" students became doctors of Tibetan medicine - "emchi" [1]. In traveling notes of A.A. Turchaninov it is noted that lamas-emchi studied also in Mongolian educational institutions [6, 11, 12].

Western medicine was not known in Tuva almost until the end of the 19th century. The first people knowledgeable of European medicine were Russian travelers and researchers who carried during their journeys first-aid kits with medications. Researchers [4] note that no Russian or European medical practitioner had visited Uraňhai Krai before 1913. The first clinic was opened on April 20, 1913, with the arrival of Anna Mikhailovna Safianova, a graduate of the Medical Department of Tomsk University. She became the head of Turansky medical station, the first European-type local medical institution [8].

The second phase in the history of healthcare in Tuva started in 1928, with the resolution of the Healthcare Commissariat of the Russian Soviet Federal Socialist Republic to send a brigade of doctors to the republic to provide medical services to locals, and later to build up a comprehensive healthcare system [4]. The situation with traditional Tibetan medicine specialists also started to change at that time. During the first years after the Revolution, the first Constitution of Tuva People's Republic declared freedom of religion, which increased the number of monasteries. Only 22 monasteries operated in Tuva before the Revolution, but many more khurees were built later. In absence of the European medicine, treatment and disease prevention functions were mainly performed by lama healers living in the monasteries. The number of such healers can be estimated from the fact that out of the 33 delegates representing all khurees of Tuva at the Pan-Tuva Lama Congress, 9 were emchi-lamas. Since 1930, the situation in the Republic started to rapidly transform. In October 1930, the VII Congress of the Great Khural of Tuva passed the Republic's fourth Constitution, which proclaimed socialist development of the country. According to the document, lamas, shamans, and orthodox priests lost their electoral rights. Religious leaders were prosecuted in TPR. Out of 2,200 lamas in Tuva in 1929-1930, only 594 survived by 1936 [7, 9, 14].

The third stage can be attributed to the beginning of 1980s characterized by national and cultural revival. Neo-shamanism was being actively restored, the number of folk healers and specialists in traditional Tibetan medicine greatly increased. [13]

Currently the interest to traditional Tibetan medicine in the Republic of Tuva is growing again.

Tibetan medicine exists in two versions. The first one is traditional Tibetan medicine, the way it is taught at specialized educational institutions or khurees. Most often doctors practicing traditional Tibetan medicine graduate from Medical and Astrological College at Dharmasal. People are directed to study there through a religious community of Khure Cecheling (Kyzyl), the residence of the Cambo-lama of the Republic of Tuva. Further their practice is carried out on the territory of the Khure (in Kyzyl, Erzine). [14]

To some extent, Tibetan medicine seems to be open to the use of modern biomedical developments. While maintaining its holistic approach, the traditional Tibetan medicine (TTM) has acquired some reductionist aspects of modern biomedicine. This is especially visible in the the doctors' vocabulary, as they explain the nature of diseases to the patients in modern biomedical terms.

The second version of Tibetan medicine is more appropriately called Tuvian branch of Tibetan medicine, and it relates to the continuous transfer of TTM knowledge to Tuva since the 18th century. Until 1928, the Tibetan medicine had an official status in Uraňhai Krai. In his

memo, doctor A.P. Preobrazhensky wrote that the Ministry of Internal Affairs had registered 235 practicing lamas; however, the actual number was much higher [10]. Even though lamas used methods of traditional Tibetan medicine, they also contributed greatly to the prevention of smallpox by performing vaccination. Despite Preobrazhensky being very skeptical about the lamas' medical skills ("Tibetan medicine, already based on mysticism, largely turns into sorcery in the hands of local lama doctors"), he gives an important indication that most lamas were trained not in Mongolia or Tibet but in the local monasteries, learning the healing methods from their ancestors.

According to A.A. Turchaninov, llamas used such diagnostic procedures as examination of the patient, pulse diagnostics, collection of detailed information about the patient's condition. Broths and powders made of herbs were used as medicines[12]. These were the most commonly used treatment forms. This information was confirmed by Sayah K.M. who studied as a teenager at Koop-Sook khuree [14].

By the beginning of the 20th century, the recipes were modified to use local plants. Since medical activities of the Buddhist followers, based on the traditional Tibetan medicine, were transformed with the view of the local knowledge learnt by emchi-lamas in this area, it would be logical to say that their practices were synthetic in nature and open to new cultural and medical traditions.

Studies of the modern local variations of TTM (Buryatia, Mongolia) show that each region practicing TTM has its own set of medications, and therefore peculiar theoretical and literary activities. [2] Since 2008, researchers from Sechenov University and Tuvian State University have been studying the ethnomedicine of Tuva's people. Field research has shown that several monasteries providing medical assistance to the local population started to operate in this area before the 1930s. Toora-Hol settlement in Kyzyl also had several hospitals with doctors practicing Tibetan medicine. In 2015-2017 artifacts were found that belonged to one of the last Tibetan doctors – Homushku Kenden-Surun (1916-1981). A doctor, philosopher, theologian, he was first educated in the Chedin-Tashiling and then in the Verkhnechadansky khuree. He also communicated with scientists who studied in Tibet and Mongolia. Thus, the continuity of knowledge of Tibetan medicine was provided.

Owing to the situation developed in the Republic of Tyva when all clergy had been outlawed, Homushku Kenden-Surun had to emigrate to Buryatia (Ivolginsky dastan) right after the Great Patriotic War. There he died in 1981. The devices used by Kenden-Surun for storage and dosing of herbs are documented. Little sacks for storing raw materials with labels denoting the names of Tibetan herbs written in Tibetan were discovered. Memories of relatives about his stay in Tuva before and after leaving for Buryatia were recorded. Based on the available information (memoirs of relatives, acquaintances, people who knew him), all herbal compositions were collected directly in Tuva. Traditional names of medicines stored at his relatives demonstrate that prescription of plants was carried out in full accordance with the theory of use of plants, despite the fact that they were collected in Tuva. Thus, we are talking about a complete replacement of plants growing in Tibet with local raw materials. It can be stated that over the years of the existence of Tibetan medicine in Tuva, its part associated with drug provision has been transformed almost completely. A similar picture can be observed in Buryatia, where there was also a substitution of imported raw materials for local ones. At the same time the diagnostic, physiotherapeutic parts of Tibetan medicine did not change.

In 2016, students and faculty of Tuva University conducted field research at the location of Koop-Sookskoe khuree – the center of medical thought of Tuva in the first third of the 20th century. Recently the khuree has been reconstructed, however at a much smaller scale, by Kogel Saaya, a stone carver and a member of the Union of Artists of Russia, who was the novice (huuraky) in Koop-Sooksky khuree in 1945-1947. Material assets and other information held by Oorzhak Boydu, the disciple of a famous healer and the last abbot of the Koop-Sook khuree, Tulush Chamdyylai (1889-unknown) was also documented. The teaching of Tibetan medicine happened underground; however, students kept notebooks, where they recorded information on

methods of diagnosis and treatment. They were also taught how to use plant resources growing in Tuva. The comparison of samples and names of herbs revealed that in some cases the names of Tibetan herbs were used improperly. The lab researchers compared a list of plants used in Mongolian version of Tibetan medicine, against the plants growing around the khuree. More than 40 items were matched in the two lists.

The conducted studies allow us to prove right the existence of the Tuvian branch of the Tibetan medicine. In addition, the results of field observations and experimental studies have confirmed the possibility of using plants from the Tuvian branch of the Tibetan medicine to create drugs based on medicinal plants.

Gratitudes:

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