



INTERNATIONAL RESEARCH JOURNAL OF HUMANITIES AND INTERDISCIPLINARY STUDIES

(Peer-reviewed, Refereed, Indexed & Open Access Journal)

DOI : 03.2021-11278686

ISSN : 2582-8568

IMPACT FACTOR : 8.428 (SJIF 2026)

Physicians in Ancient India and the Shaping of Public Health

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DOI No. **03.2021-11278686** DOI Link :: <https://doi-ds.org/doi/10.2026-48318623/IRJHIS2604014>

Abstract:

This paper explores the pivotal role of physicians in shaping public health in ancient India. It examines the evolution of medical practitioners, highlighting key terms like Vaidya and Bhishaj, who transitioned from early healers to highly trained professionals. Classical texts, such as the Charak and Sushruta Samhitas, emphasized that genuine physicians required rigorous theoretical knowledge, clinical experience, and explicit state authorization. To safeguard public health from dangerous quacks, the state strictly regulated medical practice, enforcing severe punishments for unlicensed healers. Furthermore, ancient physicians functioned as vital educators and epidemic managers, establishing healthcare as a profound social responsibility.

Keywords: Public Health, Ancient India, Physicians, Vaidya, Ayurveda, Quacks, State Regulation

Introduction:

Public health is the most critical aspect of medicine, intrinsically linked to the general populace. It is a vast discipline that collectively encompasses promotive, preventive, and curative medical care for society as a whole. Public health is an organised collective effort—a science and an art—aimed at fostering the physical and mental well-being of individuals within a society, grounded in the foundations of personal hygiene, preventive medicine, medical services, etc. (Seal, 1971). According to the American Public Health Association, public health is directly concerned with preventing people from getting sick and injured. It is concerned with creating such conditions and promoting such behaviour in society. According to Seal (1971), public health consists of two main aspects: 1- Environment, which includes public sanitation and environmental pollution; and 2- Individual, which covers preventive medicine, health education, hospitals for treatment, and the medical profession.

Various Terms for Physicians in Ayurvedic Texts:

Before examining the role of physicians in ancient India, we should first understand the

different terms used for physicians, particularly those who practised Ayurvedic practices. Several specific terms were used to describe medical practitioners, each carrying distinct connotations. The terms Chikitsak, Bhishaj, and Vaidya were commonly used to refer to medical practitioners. Physicians in ancient India were a diverse group of professionals whose roles and social status evolved significantly over time, transitioning from the magico-religious priest-healers of the Vedic period to the highly trained and specialised vaidyas of the classical Ayurvedic era. During the Vedic period, the term Bhishaj was prevalent. Bhishaj was a Vedic term for a physician, often associated with divine healers like the two *Aśvins* mentioned in the *Rigveda* (1/157/6). The term is also used in the *Atharvaveda* (5/29/1). It remained a primary term in major Ayurvedic treatises, such as the *Charaka Samhita* (Sharma, 2012). Bhishaj was an ancient traditional healer knowledgeable in incantations (mantras), whereas a healer proficient in the science of Ayurveda was called a Vaidya.

A common generic term for a healer or medical practitioner was Chikitsaka. In legal and administrative texts such as the *Arthaśāstra*, the term encompasses a broad range of practitioners, including itinerant healers, military medics, and veterinarians who treat equine animals.

Vaidya was the most distinctive and primary term for physicians in ancient India, and it is still widely used today. Vaidya meant "person of profound knowledge." This term became widespread at the beginning of the Common Era. Its adoption was a strategy to elevate the status of the profession by emphasising learning and ritual initiation, distinguishing the professional doctor from "quacks" or itinerant healers. The term also signified scholasticism and scholarly status. In the *Mahabharat* and *Ramayana*, the word Vaidya has been used for both scholars and physicians (Sharma, 2012). The high-ranking personal physician to the king and advisor on public health was called *Raja-Vaidya*. A priest-physician associated with the *Atharva Veda* who performed healing through charms and magico-religious rites was called *Atharvan*. These terms were commonly employed to refer to physicians in ancient India, as documented in Ayurvedic texts and other prominent sources of Indian history.

Public Health and Medical Profession:

Alongside other factors, the medical profession plays a pivotal role in ensuring public health because curative medicine is fundamentally dependent on it, whether delivered individually or in hospital. Furthermore, the medical profession can more effectively facilitate public health by sharing vital information on health education, routines, epidemic management, etc. The medical profession was considered very important in ancient India because it concerned the life of a human being. Physicians are described as givers of life in Ayurvedic texts such as the *Charak Samhita* and the *Sushrut Samhita*. The physician is hailed as the greatest benefactor, one who tends to the well-being of living beings when they are inexorably drawn toward death by dangerous diseases. In this world, no one is found who surpasses a physician in the giving of *Dharma* and *Artha*. There is no giving greater than the giving of life. Given its relevance to human life, the Ayurvedic treatises provide extremely detailed

information and instructions on lesser-known and fraudulent physicians, with the specific aim of preventing public health crises. According to Charak Samhita, only a proven and knowledgeable physician is regarded as a true physician. Again, Charak Samhita says that for the alleviation of all diseases, a skilled physician, substances endowed with therapeutic properties, a skilled attendant, and a virtuous patient are necessary. In all of these, the first mention is of the physician, and he held the key role because he alone was the one who possessed the knowledge of both medicine and diseases, who directed the attendant, and who arranged for the provision of medicine and other necessities for the patients. A physician is as preeminent as the victor in a victory. A physician should have knowledge of both the scriptures (Theoretical Science) and the application of those scriptures. Charak Samhita emphasises that the physician should possess these four attributes to become a Pranabhisar (Saviour of Life), who brings back life.

- 1- Knowledge of Shastra (Scripture)
- 2- Understanding the meaning of Shastra
- 3- The ability to perform treatments oneself
- 4- The experience of observing medical procedures performed by others

The other foundational treatise of Ayurveda, Sushruta Samhita, says that just as a two-wheeled chariot can function in battle, a wise physician proficient in both scriptural knowledge and practical application can serve the aim of Ayurveda.

Since the medical profession was highly important in ancient India, permission from the king was required to enter in this pivotal profession. As stated in Sushrut Samhita, a physician who studied the Shastras (Scriptures) thoroughly, understood their meaning clearly, observed and practised medical procedures, passed an examination and last but importantly obtained formal permission from the king, is fit to enter medical practise. It is very similar to the present time that permission from the state is essential for the medical profession. A physician must have both theoretical and practical knowledge. In ancient India, it was the king's duty to nurture and protect the public from all harm. Because the medical profession directly affects people's lives, the state has historically regulated it. According to Sushrut Samhita, when any individual attempts to become a physician by studying only the Samhitas without practical experience, or having only experience without knowledge of theory, without the permission of the king, he was liable to receive the death penalty at the hands of the king. The king (State) took direct responsibility for public health by acting as a regulatory body. Only knowledge was not sufficient. A physician needed the golden trio of theoretical knowledge through Shastras, practical experience through training, observation, and self-procedure, and, in the last, legal authorisation through the king's permission. The mention of the death penalty underscores how seriously the ancient state viewed unlicensed practice, as it directly endangered human life.

Through the above discussion and mention of several fake doctors, it is clear that in ancient

times, there were also fake doctors who would rob common people of both their wealth and their precious lives. Therefore, the Samhita clearly advises avoiding such impostors. Samhita provides detailed information to identify these fake doctors and to stay safe from them. The famous Charak Samhita describes two types of physicians: Pranabhisara (The life giver/True Physician) and Rogabhisara (The disease-promoters/Quacks). Further, Charak Samhita elaborates Rogabhisara in two other categories, Bhishak-Chhadmachara and Siddhsadhit. Bhishak- Chhadamchara was described as a type of person who appears to be a physician through their outward equipment, dress, medicine books in hand, acting, and cleverness; however, they do not possess the knowledge of scripture. They maintain an external appearance like a sincere physician. When a sick person presents before them, they talk excessively and perform fake pulse examinations (Nadi Pariksha) with other gestures to hide their ignorance, as if they were an incarnation of Lord Dhanvantari (The God of Medicine) himself.

Siddhasadhit is described as a person who pretends to be associated with a famous physician known for their success and knowledge. They use the name of a famous expert to pass themselves off as that expert, or they associate themselves with a famous physician. Medical fraud does not only exist in modern times. Quacks were present in ancient times, as Charak and Sushruta described themselves in their treatises. The Actors (Bhishakchhadamchara) and the Name-Dropper (Siddhsadhit) were dangerous to public health. Samhitas were concerned about protecting the public from these quacks who aggravated diseases rather than curing them. Samhitas emphasise that a physician's true identity is defined by deep study and clinical observation, not by appearance alone.

Ayurvedic texts reinforce that a true physician requires an authentic lineage, education, and genuine success in treatment. These Rogabhisaras aggravate diseases and destroy public health. Among these, the Bhishak-Chhadmachara (imposter) type of doctors are life-threatening and spreaders of disease. Ayurvedic texts clearly advised common people to avoid such quacks. Even when a patient is capable, the medicine is of high quality, and the attendants are skilled, these foolish doctors cause the disease to worsen. General illnesses that could be cured with minor treatment end up becoming severe under their care. In the hands of a foolish doctor, even life-giving medicines become like weapons, thunderbolts, or poison; therefore, one should clearly keep a distance from this type of physician. There were provisions for fake doctors even in non-medical texts like the Arthashastra. The Arthashastra clearly states that if a physician does not provide proper treatment or the disease worsens due to their negligence, the physician should be punished for misconduct.

Conclusion:

Thus, because public health depended on the medical profession, only qualified and genuine doctors were permitted to provide medical services. While the public was advised to stay away from fake and foolish doctors, if such quacks still existed in society, it was considered a failure on the king's part. To ensure that public health was not harmed, there was even a provision to give the death penalty

to such doctors. Ayurvedic texts indicate medicine as a double-edged sword that an appropriate person should use it with caution. It is the responsibility of the state to make its kingdom free of quacks and monitor the medical profession for public and individual health.

Physicians of ancient India, Vaidyas, did not heal only individuals; they also did a fantastic job advising the whole community on health issues, especially preventive care to improve public health. They played a crucial role in public health governance. Even though they were regulated and controlled by the state, they were also guided by Ayurveda's ethical and textual traditions. As Rajvaidya, royal physician, they were attached to courts and kings. They advised the king on issues related to public health, diet and epidemics. They helped shape state health policies. Ancient Indian physicians were not just healers; they were educators. They educate on daily and seasonal regimens for living in harmony with nature, as well as on daily lifestyle practices for the good health of society. They educate about air and water sanitation in the context of public health.

When any epidemic (Janpadodhwamshh) appeared, the physician first identifies the cause by examining the air, water, and land. After receiving proper satisfaction, they reported on the epidemic and advised the state and community on quarantine measures, purification procedures, and the treatment of the ill. They suggested that people act collectively to end the epidemic. Through a combination of **textual authority, ethical discipline, and state collaboration**, physicians contributed significantly to the development of an organised, preventive public health system. This integrated model reflects an early understanding of healthcare as a **social responsibility rather than merely a clinical service**.

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