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IBN SINA ACADEMY OF MEDIEVAL MEDICINE & SCIENCES

Newsletter of Ibn Sina Academy (NISA)

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CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

Ministry of Health and Family Welfare, Government of India

Department of AYUSH

THE COUNCIL

The Central Council for Research in Unani Medicine (CCRUM) is an autonomous organization under the Ministry of Health and Family Welfare, Government of India, Department of AYUSH. Established in 1978, the CCRUM started functioning from 10 January 1979, and ever since it has been busy researching into various fundamental and applied aspects of Unani Medicine. Over the years, the CCRUM has emerged as the world leader in the field.

THE NETWORK

20 research Centres of the Council are functioning in different parts of the Country.

THE AREAS OF ACTIVITY

The Research Programme of the Council has four major components:

* Clinical Research
* Drug Standardization
* Literary Research
* Survey & Cultivation of Medicinal Plants

THE MAJOR ACHIEVEMENTS

Some significant achievements of the Council are as follows:

Developing Research in Unani Medicine

CLINICLA RESEARCH

- Has developed 24 Unani Drugs which are purely natural, standardized and without any side effects, for successful treatment of leucoderma, sinusitis, viral hepatitis, eczema, malaria, rheumatoid, arthritis and bronchial asthma.
- Has filed patents on seven of these drugs.

DRUG STANDARDIZATION

- Has evolved Standards for 222 single and 385 compound Unani drugs.
- Has signed a Memorandum of Understanding with Council of Scientific and Industrial Research (CSIR) for taking up advanced research in the field of drug development.

LITERARY RESEARCH

- Has translated from Arabic and Persian into Urdu language 25 Unani Medical Classics mostly manuscripts. And has edited and published these works.

SURVEY & CULTIVATION OF MEDICINAL PLANTS

- Has collected 59462 specimens of 1730 medical plants from the wild.
- Undertaking successful cultivation of four important medicinal species.
- Has gathered and documented 6650 folk medicinal claims.

PUBLICATIONS

- Has produced over 1000 research papers and brought out 116 research publications, besides regular publications of a bimonthly CCRUM Newsletter, Quarterly Urdu Journal Jahan-e-Tib and Annual Report.

For further information, please contact

Director General

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IAMMS ACTIVITIES

EVENTS AT IBN SINA ACADEMY
(From July to September 2010)

Jashn-e-Nazeer

A literary and cultural program – *Jashn-e Nazeer*, was organised late in the evening of August 3, 2010 at Library Hall of Ibn Sina Academy, Aligarh, in collaboration with Azar Academy, in honour of literary and cultural contributions of Dr. Nazeer Fatehpuri of Pune, Maharashtra. Azar Academy also honoured a few Urdu scholars such as Al-Haj Mohammad Arshad from Kanpur, Mr. Noorul Hasnain and Dr. Azeem Rahi from Malegaon. The program was presided over by Hakim Syed Zillur Rahman, while the guest of honour was Engineer SA Khan Rao. It was started with the introductory remarks of Musharraf Hussain Mahzar, General Secretary, Azar Academy and by the welcome address by Professor Hakim Anis Ahmad Ansari. Professor Tariq Chattari, Dr. Seema Saghir, Mr. Noorul Hasnain and Dr. Azeem Rahi read their *Afsânah* (Short Story in Urdu Literature). The program was conducted by Dr. Siraj Ajmali, while during the program; Dr. Nazeer Fatehpuri released few books by Sikandar Ahmad Kamal. At the end, the vote of thanks was moved by Dr. Saghir Afrahim. A large number of Urdu scholars and poets attended the program.

National Workshop on "Post Graduate Education, Research Methodology and Manuscript Studies in Unani Medicine"

Preparations are underway at Ibn Sina Academy to organize a national workshop in collaboration with Department of AYUSH, Ministry of Health and Family Welfare, Govt. of India, from November 22-23, 2010. This two-day national workshop is aimed at researchers, academicians, students and industry representatives. It is expected that a large number of delegates from across the country will be participating in this two-day national event. On this occasion a souvenir of the workshop will be published which will include research articles and abstracts of papers of renowned academicians and researchers.

This workshop coincides the tenth successful years of the institution of Ibn Sina Academy. A large extension of the Academy's hall for museums, library and reading rooms are expected to be completed and inaugurated on the same occasion.

Visits of Delegates and Personalities

Following dignitaries and personalities visited the Academy:

1. Delegates to the Re-orientation Training Program, A. K. Tibbiya College, Faculty of Unani Medicine, AMU, Aligarh, on 02.07.2010.

Professor Syed Zillur Rahman delivered a lecture on the topic, "History and Development of Unani Pharmacy with Special Reference to the Contribution of Pioneers of Unani System".

2. Delegates to the Re-orientation Training Program for environmental studies, UGC Academic Staff College, AMU, Aligarh, on 24.07.2010.
3. Delegates to the orientation Program, on 30.07.2010.
4. Delegates to the orientation Program, on 20.09.2010.
5. Delegates to the Subject Refresher Course on Social Scheme, on 21.09.2010.
6. Delegates to the Subject Refresher Course on History, on 27.09.2010.

On these occasions, Professor Syed Zillur Rahman addressed the participants and gave an account of the History of Unani Medicine and about the values of culture

and heritage. He also showed them the museums of Ibn Sina Academy.

7. Amin Venjara, Ph. D. candidate from Princeton University, on 11.07.2010. His research focuses on the "Muhammadan Law Offices" who served the pre-1857 colonial courts. Bringing the colonial achievements into conversation with the Ulama, he seeks to understand varying approaches jurists took in articulating *Shariah* in a colonial context.

Amin is based in the Religion Department of the University, which has as a subsection on Islam in addition to other religions. His work enables him also to interact with scholars from the Department of New Eastern Studies (NES), which houses research scholars in Arabic, Persian, Islamic history, Islamic law and Ottoman history.

Condolence Meeting

The Department of Urdu, AMU, Aligarh, has deeply mourned the death of eminent scholar Professor Mukhraruddin Arzoo on July 5, 2010 and described his death as an irreparable loss to Arabic, Urdu, Persian Literature and Islamic studies.

In a condolence meeting, presided over by renowned scholar Padma Shri Prof. Syed Zillur Rahman, glowing tributes were paid to the departed soul. Professor Rahman described Prof. Arzoo as an embodiment of profound scholarship and that in him the tradition of Aligarh got an accomplished protagonist. He concluded by adding that Prof. Arzoo's love of books was exemplary.

In his opening remarks, Professor Khursheed Ahmad, Chairman Department of Urdu, said that Professor Arzoo followed the footsteps of Ghalib, Sir Syed, Akbar Allahabadi and Mushfiq Khuwaja with admirable thoroughness. His critically edited Arabic texts supplemented with copious annotations were examples of his scholarship.

Professor Abul Kalam Qasmi said that Professor Arzoo made a new literary genre, "a daily account" (*rozmarrah*) the effective medium of expression. His daily record of events and depiction of scholars, critics, and people highlighted vividly the cultural milieu of his times.

Eminent Poet Professor A. M. K. Shaharyar said that Prof. Arzoo was an avid reader of journals published from various parts of the world and his writing betray his sophisticated sensibility and highly cultivated sense of humor.

Dr. Ata Khursheed moved the condolence resolution and Professor Athar H. Siddiqui and Dr. Shahabuddin Saqib also spoke on the occasion. A number of faculty members of other departments, research scholars and students participated in the condolence meeting.

Ajmal Foundation Sponsorship of Research works in Ibn Sina Academy

The Board of Trustees of Ajmal Foundation headed by Maulana Badruddin Ajmal, MP has approved the proposal of sponsorship of research work in Ibn Sina Academy. This has been announced by Mr. K. Islam, General Manager, Ajmal Foundation through a letter dated 22nd September 2010. The sponsorship will be for 12 months initially and may be continued further subject to the condition of satisfactory performance of the academy and fund availability of the Trust. The Ajmal Foundation will pay an honorarium of two Research Associates, one Museum Curator and Librarian per month. The honorarium will be continued after the submission of quarterly progress report of appointees to Ajmal Foundation, as stated in the letter. An amount of Rs. 110,000/- has also been sanctioned for Computer Lab as one time grant. The Academy welcomes this move of Ajmal

Foundation and pays its rich gratitude and appreciation for this kind gesture to the Board of Trustees of Ajmal Foundation.

MEMBERS' ACTIVITIES

Prof. Syed Zillur Rahman, President, Ibn Sina Academy, has been nominated as a member of board of management, Sir Syed Academy, Aligarh Muslim University, (Aligarh) for further two years, i.e 2010-2012. Prof Rahman also attended the meeting of the Academic Council of AMU, on July 5, 2010.

Professor Rahman has also been appointed as President of Mohammadiya Education Society, Sakras, Tehsil Firozepurpur Jhirka, Distt. Mewat-Nuh.

Members of Mohammadiya Education Society, Mr. Abdul Ghaffar, Yahya Khan, Nooruddin, Abdul Wahab, Hamid Hussain Shahid Ahmad and Shamsuddin, met Hakim Syed Zillur Rahman at Aligarh on July 12, 2010 and briefed him about the Muhammadiya High School, which is in the village of Sakras, not far from Ferozepur Jhirka. The school was started initially as a small Madrasah. By now it has developed into a regular co-educational school, and caters to almost 500 children, a fourth of which are girls. The school follows the syllabus prescribed by the Haryana Board, to which it is affiliated, but it also has facilities for Urdu, Arabic, and Islamic Studies. Although its medium of instruction is Hindi, it arranges for its senior students to take the examinations conducted by the Jamia Urdu, Aligarh.

Prof. S. M. Razaullah Ansari (Secretary of Ibn Sînâ Academy) was requested to deliver an invited talk at the Seventh International Conference on Oriental Astronomy (ICOA-7) held at Tokyo (Japan) Sept. 6-10, 2010. The conference was organized by the National Astronomical Observatory of Japan. Prof. Ansari was also a member of the Scientific Organizing Committee (SOS) of the Conference. The topic of his talk was *"A Survey of Arabic-Persian Sources on Astrolabe extant in India and on the Indian School of Astrolabe-Makers"*.

ICOA is an international conference on the history of astronomy particularly in the Oriental region and has been held triennially since 1993. Five well-organized proceedings of the past conferences have been already published.

Prof. Ansari has been very actively engaged with the idea of Oriental Astronomy. He edited himself a volume on "History of Oriental Astronomy", published by Kluwer Academic Publisher, Dordrecht (Holland) in 2002. Moreover, he attended the past two conferences, ICOA-3 held in Fukuoka (Japan) in 1998, and ICOA-5, held in Chiang Mai (Thailand) in 2004 at the occasion of the Commemoration of the 40th anniversary of Chiang Mai University. To note is that in that conference, Prof. Ansari read a paper on Raja Ratan Singh Zakhmi's Book: *"The First Book in Indo-Persian on Mathematical Astronomy— A Case Study for the Genuine Reception of Modern Astronomy in the 19th C. India"*.

Dr. Abdul Latif, Joint Secretary, Ibn Sina Academy and Chairman, Department of Ilmul Advia, Faculty of Unani Medicine, Aligarh Muslim University, has been awarded Bharat Jyoti Award in recognition of his contributions in the field of education and research on Indian Medicine and for outstanding voluntary social works. The award was given to him by Former Tamil Nadu and Assam Governor Dr. Bhisham Narain Singh at a function, which was organized by India International Friendship Society (IIFS) at Constitutional Club, New Delhi on 30th July. Large number of participants attended the program such as Ms Laxmi Kant Chawla (Punjab Health Minister),

Joginder Singh (Former Director CBI) and Major Ved Prakash (Veteren freedom fighter).

Syed Ziaur Rahman, Treasurer, Ibn Sina Academy has been appointed as:

1. Honorary Trainer, Badanami Centre for Indigenous Education, University of Western Sydney, Australia. The Centre works under the 'Indigenous Tutorial Assistance Scheme' and provides academic, personal and cultural support to all indigenous students of Australia. It also conducts an indigenous student orientation program and conducts research and consultancy.
2. Affiliate member, of Traditional Healers Fellowship, Traditional Medicine Network and Graeco-Arabic Medicine Society Incorporated, Australia.

Dr. Rahman also attended following academic programs:

1. MEdEx 2010 Conference: Medical Education Excelience, Medical Education Unit, School of Medicine, University of Western Sydney, July 8, 2010.
2. Research Seminar, the Centre for Complementary Medicine Research, University of Western Sydney, July 7, 2010. Professor Janet Richardson of Plymouth University presented a talk on "Embedding evidence into service development and information production in cancer supportive care: the experience of three UK Projects".
3. Molecular Medicine Research Group Symposium on "International Efforts in Translational Medicine", School of Medicine, University of Western Sydney, Australia, 16-17 September 2010.
4. 63rd Annual United Nations DPI/NGO Conference on Advance Global Health: Achieve the Millennium Development Goals (MDGs), Melbourne during August 30 to September 1, 2010. Dr. Rahman was officially representing International Association of Medical Colleges (IAOMC) in the above UN Conference. In the conference, there were around more than 1600 participants, representing 350 CSO/NGOs from nearly 70 different countries. Dr. Rahman interacted with many NGOs representatives, exchanged thoughts in different areas and related issues of MDGs. He briefed about IAOMC and its missions, gave importance to medical education, and also expressed in 2-3 workshops his views that without medical training and education to other allied health workers such as carers, nurses, midwifes in addition to medical teachers, nothing would help in true sense in achieving various MDGs. He stressed women's empowerment and transformation of medical students into community physicians in relation to MDGs.

   More information on the proceedings of the conference in general, please visit: <http://www.un.org/dpi/ngosection/conference/> and read the declaration signed at the conference. Point # 9 is little bit concerned with medical education.

Mr. Mohammad Nafees (Asstt. Curator, Karam Husain Museum of Arts, Culture and Sciences, Ibn Sina Academy) was invited to attend the workshop on conservations held in Raza Library, Rampur, September, 2010. He was an official delegate of Ibn Sina Academy.

CONFERENCES, SEMINARS ON HISTORY OF MEDICINE AND SCIENCES

Knowledge in the Making, 1400-1700: Science, Art, Epistemology

Modern Research Workshop of the State University of New York (SUNY) Buffalo is pleased to announce an interdisciplinary conference on science and the humanities, "Knowledge in the Making,

1400-1700: Science, Art, Epistemology," to be held on September 30 and October 1, 2010. This conference will explore intersections between and among scientific practices, cultural production, and aesthetic forms in early modern England, France, Italy, the Iberian Peninsula, and the Americas.

The full program along with abstracts submission and other information about registration can be found at conference website:
http://knowledgeinthemaking.wordpress.com/

Workshop on the Legacy of Antiquity: Books and Practice

Alain Touwaide, Historian of Sciences at the Smithsonian Institution's National Museum of Natural History in Washington DC. and Scientific Director of the Institute for the Preservation of Medical Traditions, is the organizer of a workshop that will be held during the Annual Meeting of the History of Science Society, Montreal, QC, November 4-7, 20

Integrated History and Philosophy of Science

From September 23-26, the Department of History and Philosophy of Science, Indiana University (Bloomington) is hosting a three day conference on "Integrated History and Philosophy of Science." This is the third in a series of meetings devoted to the topic, and it coincides with the fiftieth anniversary of the Indiana HPS Department. The paper topics range from a discussion of seventeenth-century comet theory to history and philosophy of contemporary embryology.

For complete information on the conference, including the program, abstracts of papers, and other details, go to http://www.indiana.edu/~andhps/

Conference on Otto Neugebauer (1899-1990)

A Mathematician's Journeys: Otto Neugebauer between history and practice of the exact sciences at New York University, November 12-13, 2010.

The year 2010 marks the twentieth anniversary of Otto Neugebauer's death. Neugebauer, more than any other scholar of recent times, shaped the way we perceive and study ancient science. Less known among historians of science but just as important is his role in the contemporary mathematical community. Though he only coauthored a single mathematical paper not on a historical subject, Neugebauer's career was at the heart of the mathematical life during the period before, during and after World War II. While tracing the ancient transmission of the mathematical sciences, Neugebauer was himself part of a modern stage of these processes, and his career as much as his scholarship responded to his conviction that mathematical reasoning was a phenomenon unlimited by nationality, language, or culture.

In the present conference, which will be hosted by the Institute for the Study of the Ancient World and the Courant Institute at NYU, it is proposed to cast new light on the many facets of Neugebauer's career, his impact on the history and practice of mathematics, and the ways in which his legacy has been preserved or transformed in recent decades, looking ahead to the directions in which the study of the history of science will head in the twenty-first century.

Please visit the conference website: https://sites.google.com/site/neugebauerconference2010/ to find program, abstracts and other information.

Submitted by Alexander Jones
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DOCUMENTATION

SHAMANISTIC PRACTICES IN MEDICINE

By Paul Hysen
Director, Traditional Medicine Network & Graeco-Arabic Medicine Society Incorporated, Australia

Following article is based on discussion, which I had with Dr. Paul Hysen by our continued e-mail correspondence. I am personally thankful to him for enlightening me with such a wonder concepts in medicine – S. Ziaur Rahman, Ass. Editor.

Psychic Surgeon:
In the early 1970s, some years after I had completed my initial Tertiary qualification, a group of "fringe" churches in Australia sponsored a South American "Psychic Surgeon" to visit this country. Although the name of the healer in question has escaped me after all these years, I do remember him traveling to Sydney, Melbourne and Adelaide to practice his healing skills at meetings that had been specially organised by this group of churches. I personally attended one of these sessions, out of interest rather than need, unlike most of the other attendees.

His healing methods were astonishing. Sometimes he would just place his hands on a person, over the afflicted area and keep them in place for some time. At other times, particularly if abdominal organs were involved in some way, he would get a person to bare their skin over the affected organ and seemingly plunge his hands into the abdomen. Some blood would appear around his hands, supposedly from the wound that opened around his hands. He would withdraw his hands and with a slight wave of his hands "close the wound"; he would then display some "diseased" tissue which was "extracted" from the abdomen. It was all pretty convincing.

The interesting thing in all this was that although not all those he treated were cured of their condition, certainly a large proportion was healed. What particularly peaked my interest was that many people with serious diagnosed malignancy and autoimmune diseases were cured of their condition. As I said, there were many failures and some temporary successes followed by a relapse, but all-in-all from the limited records that I managed to keep at the time, better than 20% of those with serious diseases were cured (of course the cure-rate of serious diseases reflected the proportion of those present with those diseases; approximately 25% of those attending the sessions had chronic skin conditions, while perhaps 15% suffered from some form of malignancy, and the rest had autoimmune or chronic gastrointestinal disorders, ranging from gastric ulcers to colitis; there were also those that suffered from epilepsy and migraines, and from heart disease and the sequelae of a cerebrovascular accident, but these did not represent a large proportion of the attendees).

I managed to have some discussions through a translator, which was necessary as the healer spoke Spanish and knew very little English. He certainly struck me as being totally sincere as regards his healing practices, but appeared somewhat evasive, citing divine intervention, when I tried to query him more in depth about his surgical methods.

What was sad at the time, was that the medical doctors almost fell over one another in condemning the healer as a charlatan, by eliciting some of his failures and holding these up as proof of their claims. No interest was ever shown by the medical fraternity in his successes. To me this proved that although there may be many sincere and hard working medical doctors, the profession also has a serious infestation of people whose personal pride

is much more important to them than the wellbeing of their patients.

The healer in question contacted me by mail about 6 months later from South America and provided me with an address of a person there that belonged to his community, who could read and write English. I kept in contact with this person for a couple of years, long enough to learn a great deal more about these "psychic surgeons", and then lost contact.

Meaning of Charlatan:
A charlatan is a person who lays claim to capabilities or powers, or to qualifications or status that they do not have. So a person that does not have a medical degree but claims to be a medical doctor is a charlatan; as is a person who claims to be a duke but is a commoner. But the degree of education does not exempt one from accusations of charlatanism: thus a person, irrespective as to whether he or she is a medical doctor or alternative

the last three approaches, I will explain the first two.

A shaman enters into a trance in order to release his own spirit from his body so that he can travel freely into the "spirit realm" (called the Dreamtime by Australian Aboriginals). In shamanism the spirit realm is always seen as having different levels or "planes of existence"; interestingly these levels seem to correspond almost exactly to the major evolutionary structures of the human brain, but we can explore this more later if you are interested.

To continue, this journeying into the realm of spirit is done for a number of reasons:

1. To discover the psychic cause of a disease. This may be a curse that has been placed upon the patient by a living or dead person, or a spirit entity; or the loss of the patient's soul; or damage to the patient's soul by some agent or ever

styled witches too seriously. If you really want potent help in that country, you either seek out a Catholic Priest to lift a curse, or a real sorcerer to place one. Of perhaps all those involved in the local beliefs, the sorcerer is the most feared of all. His (they are usually male) curses do not just stop your chickens from laying eggs, or make you feel off-colour, but are deadly without reprieve. It is believed in that place that if you offend a sorcerer you can finish up a zombie, which is a person that has had their spirit removed by the sorcerer and walks around as a soulless shell. Sorcerers in that country reportedly use these unfortunates to perform menial tasks for them. There is more than enough evidence that these beliefs are not sheer superstition, but as they are not politically correct in our atheistic and nihilistic age, they do not excite researchers and are therefore not talked about much these days.

It must be remembered that Shamanism, although similar to these kinds of beliefs, is considerably more benign. Beliefs like Voodoo came into existence in extreme circumstances, among people who were ripped away from their culture by slave traders and were totally disempowered in a system of brutal slavery that provided them with an average life expectancy of less than 30 years of age. It is therefore not surprising that curses were the only resource available to these people. Unfortunately, when slavery was abolished in Haiti, the grinding poverty remained, which has ensured that these practices exist to this day.

On the other hand, considerable research has been done in the powers of the shaman of Siberia and the shaman of the Tunguskan Peninsula, by Russian Parapsychology Scientists. I had the privilege of meeting a group of these researchers at a congress in Sri Lanka, and took the opportunity over the week or so they were there, to learn as much as I could from them (I do not speak or read Russian, so the translator they brought along was handy) and also to observe the capabilities of the two psychics that accompanied them, one of which was capable of psychotelekinesis (moving objects by will power alone), and another who shook me to the core by providing me with detailed information on personal matters.

When considering the skills of the shaman, I believe that two things that are of vital importance to the observer.
The first is to keep an open mind, and not to dismiss something just because it does not fit in with current scientific thought. After all, science is based on fact, but most of modern science is not based on complete knowledge. This is why no scientific hypothesis is cast in cement, and why these are malleable by being continually adjusted and fine-tuned by our increasing pool of information.

The second is to not get carried away with the events that surround shamanism, as has happened to so many "New Age" thinkers. Shamanism is intended to stretch one's credulity as it is from this that its power flows; there is absolutely no reason why shamanistic practices cannot be composed of a mixture of sleight of hand and genuine phenomena. After all, the shaman is neither a religious leader nor a scientist; his role is more basic than that, it has to do with survival. Thus the shaman's main aim is to achieve his end, whether this is healing or anything else, by any means.

Perhaps the two quotations of eminent historical personalities that represent these two approaches best is firstly the statement by St. Augustine of Hippo (354-430 AD.) who said that "miracles do not happen in contravention to the laws of nature, but in contravention to what we know of the laws of nature" and secondly the saying of the great Roman Statesman

Cicero (106-43 BC.), who stated: "I believe that all things are possible, but consider that some things are more probable than others".

ABORIGINAL MEDICINE IN AUSTRALIA

By Syed Ziaur Rahman & Anton Rahmadi, Badanami Centre for Indigenous Education, University of Western Sydney, Australia

We visited 'Nura Gili Resource Centre' at the University of New South Wales (UNSW) on 3rd August 2010. There, we found 2 important bibliographies on traditional aboriginal medicine. The one which is most often quoted but presently out of print is 'Ngangkari work - Anangu way: traditional healers of Central Australia' (1). It is a book, which deals with medicine, healers of Australia, Aboriginal Australians, Ngaanyatjarra (Australian people), Health and hygiene in general. In the book, a glossary of all terminologies particularly used in reference to medicine in the language of Pitjantjatjara and Yankunytjatjara is also supplied, which helps in understanding various principles and concepts. The indigenous medical information in the book is shared by many Ngangkaris. The book is a sort of educational manual to learn from aboriginal point of view for those who come to work on the Aboriginal lands.

According to Aboriginal belief all life forms – human, animal, plant and mineral – are part of one vast unchanging network of relationships which can be traced to the Great Spirit, ancestors of the Dream-time. The Dream-time continues as the "Dreaming" or *Jukurrpa* in the spiritual lives of Aboriginal people today (2). The Dream-time is the source of the rich artistry, creativity and ingenuity of the Aboriginal people. The events of the Dream-time are enacted in ceremonies and dances and are chanted incessantly to the accompaniments of didgeridoo (also known as a didjeridu or didge), which is a wind instrument developed by Indigenous Australians of northern Australia at least 1,500 years ago and is still in widespread use today, both in Australia and around the world. Clapsticks (an ancestral instrument that traditionally accompanies the didgeridoo) is sometimes referred to as musicstick or just stick. In the language of the Yolngu Aborigines of Northeast Arnhem Land, Australia, these clapsticks are called bimli. These sticks are used to keep time with the playing of the didgeridoo.

Ngangkari

Throughout Australia, Aborigines believed that serious illness and death were caused by spirits or persons practicing sorcery. Even trivial ailments, or accidents such as falling from a tree, were often attributed to malevolence. Aboriginal culture was too rich in meaning to allow the possibility of accidental injury and death, and when someone succumbed to misfortune, a man versed in so called supernatural power was called in to identify the culprit. Ngangkari is believed to remove such influence of sorcery and evil spirits and to restore the well-being of the soul or spirit. During the night the spirit of the Ngangkari leaves the body and soars into the sky to better observe the world below. These traditional Aboriginal healers say they were taught to do this by their forefathers who took them on dream journeys and passed onto them the secrets of healing.

Ngangkari work as healers in a resurgent indigenous medical tradition that dates back to centuries and was shared by most of the Aboriginal tribes. The Ngangkari's job is to find and banish bad spirits from the body of the sick. In the course of a healing session they study the patient intently and trace over the body with their hands, almost like an aura check. The sickness is sometimes located in the abdomen or the legs but often it is in the

head. With a healing movement they force the bad spirit – the mamu – out of the body then suck out the badness that caused the illness from the mouth of the patient and toss it into the wind.

In the Resource Centre, we also watched a short documentary by Ronin Films regarding the 'Ngangkari' traditional healers. These healers, who serve primarily indigenous communities in Central Australia, used unique methods to help their patients regain health. It was interesting to view different ways on how these Ngangkari people receive their powers and tell remarkable stories related to their lives as Ngangkari; a real hands-on healing of Anungu as they talk about the Ngangkari's connection to the spirit world and the age-old healing beliefs of a community at central Australia. Such methods included 'restoring the spirit' of their patients and 'sucking out blockages' in the blood. Sometimes the spirit is missing or lost and must be tracked down in order for the patient to get well.

In one memorable scene, an elderly Ngangkari casts 'his power' out into the bushes, from whence it returns to him with the message that a man's spirit is hiding amongst their roots. The Ngangkari collects the spirit and inserts it into the ailing man, who immediately straightens up and adopts a more cheerful aspect. In another case, "You seem to have no spirit," two Ngangkari from Fregon, Andy Tjilari and Rupert Peters, tell a sick man who needs their help. "We will look around for it." They hurl some of their power into the sky to hunt down the missing spirit, find it and bring it back. In this case the lost spirit was close by at the base of a bush and was easily retrieved and replaced. The sick man looked noticeably happier than when the Ngangkari drove into town.

Old men like Andy and Rupert have been Ngangkari since they were boys and they are training other young Aborigines to take their place. They see themselves as the equal of doctors but with a different understanding of sickness and health. "We see disease as forming something solid and physical, such as a small piece of wood," they say. "The treatment means we have to remove the piece of wood from the sufferer's flesh or bone in which it has lodged. After removal we use suction by the mouth which removes the final parts of the rubbish."

While this 'healing' may seem somewhat comical or insubstantial to those familiar with conventional modern medicine, it is treasured amongst the indigenous people, who have used it for centuries. They do not perform any surgeries (except for blood-letting, with the Ngangkari sucking out blood with his mouth). From a sceptical standpoint, it is hard to attribute much credibility to such an insubstantial therapy, which depends entirely on unobservable, immeasurable 'spirit' phenomena to function. Nonetheless, it is the attitude of the Ngangkari (and indeed the documentary as a whole) which impressed us.

The Ngangkari were shown working alongside conventional doctors in a regional medical establishment and, when interviewed, were perfectly happy to state that there were some illnesses which only white fella (sic) medicine was able to cure. Not only this, but they encouraged their patients to seek additional help from 'white' doctors if necessary. Confronted with an obvious medical problem like advanced cancer, appendicitis or a broken leg, they are the first to suggest western medical help. Faced with chronic indigenous health problems caused by petrol sniffing or marijuana abuse, they admit to being powerless. "Marijuana smoke goes right inside," they explain. "We have many strings inside and when marijuana smoke travels along them, it kills them. Marijuana and petrol cannot be

treated by Ngangkari methods."

Yawulyu Ceremonies

Yawulyu ceremonies and healing songs are frequently performed by Warlpiri women. These ceremonies improve the health of sick people but cannot remove the influence of sorcery. The ceremony consists of singing songs and painting designs on the sick person. These designs are derived from the power of the Dream-time. Each ritual is carried out by the *Kirda* (owners) or *kurdungurlu* (managers) of a particular "Dreaming". Sometimes the songs and designs appear to the people in their dreams and are thought to be revealed by spirit creatures called yinawuru. During the ceremony the sick person may be massaged with fat and red ochre. These materials derive special potency from the songs. In some cases, senior persons sing songs without the ceremony to strengthen sick people. Songs are sometimes sung to ensure safe childbirth. The Yawulyu ceremonies and songs assist in providing strong family support for the sick person (3).

Bush Medicine and Bush tucker:

Different language groups have different bush medicine knowledge, based on where they live in Australia. Apart from spiritual healing by Ngangkari and yawulyu ceremonies, aborigines also believe in 'bush medicine' (or herbal medicine). They make decoction from various available bush plants. Aboriginal expertise regarding plants has been acknowledged for many years such as the use of Paperbark leaves *(Melaleuca)* which has been traditionally used by indigenous native Bundjalung to alleviate headache. Bitter Bark (Alstonia constricta) used to prepare a tonic, contains reserpine, a tranquilliser and anti-hypertensive. Plants used on sores and wounds contain proteolytic enzymes that help healing. Spilanthes, a native daisy used to treat toothache, has been shown to contain spilanthol – a local anaesthetic. Over half the world's supply of the drugs hysocine and scopolamine come from Australian native tree, Duboisia, which was used by Aborigines as an emu and fish poison (4). In addition to herbs, a notable feature of Aboriginal medicine was the importance placed upon Bush tucker such as oil as a healing agent, an importance that passed to European colonists, and is reflected today in the continuing popularity of Australian Blue Cypress Oil (Callitris intratropica), Eucalyptus Oil, Emu Oil (Dromaius Novae-Hollandiae), Goanna Oil, Mutton Bird Oil, Snake Oil and Australian Native Tea Tree Oil (Melaleuca Oil).

Conclusion: The basic principle of Ngangkari is healing and balancing spirits (kurrpa) of Aborigines with their surrounding by means of touch, rub, and blood sucking with mouth. A spirit is portrayed as a free and joyful bird (eagle). As soon as people fall asleep, spirits would travel and journey a vast area before going back to the person. Ngangkari would see if a spirit is not balanced as of it cannot fly and joy the journey. Helping spirit to regain its power is a part of Ngangkari responsibility. A very sick person is presumed to have lost his spirit, then Ngangkari tasks to bring the spirit back and rejoin with his physical body.

They are decidedly non-antagonistic and are able to happily 'augment' conventional medicine, rather than attempting to subvert and replace it. These Ngangkari people seem to have done the impossible; retaining their prestige and traditional places while still recommending real, useful, non-traditional medicine. A fundamental problem is that the manner in which the Ngangkari have worked for thousands of years is almost the antithesis of the highly regulated western health care model. They are usually accessed through communities and their work is based on almost metaphysical

concepts of inherited powers and secret knowledge. Their work is largely preventative and is particularly effective in the area of mental health where the notion of bad spirits or demons has greater cultural overlap.

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INTERNATIONAL ASSOCIATION OF MEDICAL COLLEGES & ITS ROLE IN ECOSOC SPECIAL CONSULTATIVE MEETING

By Syed Ziaur Rahman, MD
Chair, Advisory Council (Section 3), IAOMC

The United Nations Department of Economic and Social Affairs (ECOSOC) granted the International Association of Medical Colleges (IAOMC) a special consultative status as a NGO in 2009. This consultative status is governed by the UN Charter and related resolutions of ECOSOC and opens the door for NGOs like IAOMC to actively engage with the ECOSOC and its subsidiary bodies, as well as with UNs Secretariat, programmes, funds and agencies.

It is now our duty as officials of IAOMC to actively participate in the work of the Council which would allow the Association to consult with Member States and the UN system and effectively implement the provisions of the consultative relationship.

The next United Nations DPI/NGO annual conference is going to be held in Melbourne from August 30 - September 1, 2010 on the theme of "Global Health Challenges: Achieving the Millennium Development Goals". As we all know, the international community has agreed to implement the Millennium Development Goals (MDGs) by 2015. Three of the MDGs relate directly to health. This conference will provide a unique forum for NGOs to discuss challenges and solutions to global health issues. The deliberations at the Conference and its outcomes are expected to inform the forthcoming UN review of the Millennium Development Goals scheduled to take place in the latter half of 2010.

The conference will emphasize the multidisciplinary, multifaceted issues in fostering health, not just managing disease. Additionally, the conference aims to harness the energy of those passionate about issues of previous conferences such as human rights, disarmament, climate change, human security and dignity, and through collaboration, help them understand their role and or responsibility, to utilise their knowledge, to help mitigate the underlying causes of illness, and help create a healthy world. Being a part of medical fraternity, IAOMC should show its presence in these medical issues.

It is only the third time in the Conference's 63 year history that the conference has been held outside New York. In view of the fact that I am presently staying in Australia and there is no glitch in travelling

diffusion, says Touwaide – but it's impossible for now to be sure that the sunflower in the pills isn't simply from recent contamination.

Drugs described by Dioscorides and another Greek physician known as Galen of Pergamon have often been dismissed as ineffectual quackery. "Scholars and scientists have often dismissed the literature on such medicines, and expressed doubt about their possible efficacy, which they attributed only to the presence of opium," says Touwaide. He hopes to resolve this debate by exploring whether the plant extracts in the pills are now known to treat illnesses effectively.

He also hopes to discover theriac – a medicine described by Galen in the second century AD that contains more than 80 different plant extracts – and documents the exact measurements ancient doctors used to manufacture the pills. "Who knows, these ancient medicines could open new paths for pharmacological research," says Touwaide.

The team presented their findings during the Fourth International Symposium on Biomolecular Archaeology in Copenhagen, Denmark on 7-11 September, 2010.

BUBBLE CHAMBER

The Bubble Chamber is a new blog (http://thebubblechamber.org/) written by historians and philosophers of science for discussing contemporary issues of science and society through the lens of historical context and critical analysis.

Founded by the University of Toronto's Science Policy Working Group, The Bubble Chamber is a forum for those interested in a critical assessment of science in society and the development, regulation, and trajectory of science.

AVICENNA AT PAULS STRADINS MUSEUM OF THE HISTORY OF MEDICINE

Valda Pundure
Pauls Stradins Museum of the History of Medicine

The world history of science knows a number of examples about famous men, whose ideas and knowledge have left a long lasting influence upon the future generations. One of them is Avicenna (Ibn Sina 980-1037), Whose works left essential influence upon Medieval European medicine through centuries. The card index of the Pauls Stradins Museum of the History of Medicine contains more than 150 items connected with his name. Part of them can be viewed in the Museum's display of Medieval Medicine. The largest exhibit in the collection is Avicenna's bust (Authors J. Atabekov, Sh. Hamidulin, J. Sokolova, 1980, Bronze) /1/, the scientific basis of which was worked out by Andizhan Institute of Medicine (Uzbekistan), by making use of a number of photographs of Avicenna's skull. The painting "Avicenna" (artist I. Stradina, 1958, oil painting on canvas)/2/ and the portrait of Avicenna (artist E. Vende, 1959, water colour painting on cardboard) /3/ were created based on the graphic documentary portrait of Avicenna in profile made by the Russian anthropologist M. Gerasimov in 1956. Avicenna's iconography is supplemented by 2 medals (artists J. Strupulis, 1979, cupronickel / 4/; I. Vasiljevs, 1985, bronze) / 4a/.

The collection of Avicenna's medical instruments together with a catalogue embraces 117 items (author G. izmestiev, 1983, Bronze, reconstructions).

It was made in Tashkent (Uzbekistan), based on his encyclopedic work "The Canon of Medicine". The collection contains instruments for blood-letting /5/,

cauterizing /6/, operations of the skull, stones in the urinary bladder, eyes /7/, as well as the extirpation of a dead foetus, treatment of wounds, boils and bone fracture /8/. It has instruments for removal of arrows from bodies, amputation /9/, as well as various catheters /10/, blood obtaining vessel /5/. All exhibits were specially made to order of the museum.

A large part of the collection is formed by printed works of which Avicenna's work "Opera in re medica" in Latin, issued in 1564 in Venice /11/, is the most valuable and oldest. The story of life of Avicenna in Persian, issued in 1952 in Tehran (Iran). Several editions are dedicated to Avicenna's millennium in 1952 and 1980, as well as to the work on creation of a scientifically sound portrait and sculptural image of Avicenna. An important work is Avicenna's "The Canon of Medicine" – a translation of the full edition from Arabic into Russian with comments and explanations. There are over 20 items of books, copies of scientific articles, most of them with autographs and dedicated inscriptions.

This collection is in line with the mission of the museum – reflection of the development of medicine in the world.

THE DANCING SURGEON

By Rajnish Sharma

Dance your blood pressure and hypertension away with Dr. Masroor Ali.

He is as dramatic as they come and a delight for journalists looking for good copy. And not without reason. He showers you with quotable quotes and his interview is peppered with sensational statements. Meet Dr. Masroor Ali, the surgeon who thanks the lord for making him a heart patient and a diabetic!

Says Dr. Ali, "I almost died twice, once in the operating room and once in the recovery room. They had to resuscitate me. I think it has been a blessing for me to be a diabetic and to have undergone a heart attack/bypass surgery. It has made me more physically fit than I was at any point of time".

He adds that a doctor has a better understanding for the disease if he himself has it, though it's not mandatory.

If you're plagued by high blood pressure, hypertension and diabetes don't worry.

Go seek an appointment with Dr. Ali, popularly known as Max Ali. Just ensure that you're dressed in a dark suit (if you're a male) and in an elegant saree or long skirt (if you're a female). And then get ready to dance away your aliments, ballroom and Latin dancing to be precise.

"Dance and say goodbye to heart attack, diabetes and hypertension" is Dr. Max Ali's Maxim. The surgeon based in Detroit, Mich., is a specialist in rectal diseases and has patented laser therapy to treat piles.

"I just perfected a method of piles treatment with laser. All I did was to fuse local anesthesia treatment which I learnt in Lucknow, with the use of laser. For this, I got a patent in Washington DC under Hemorrhoid Clinic of America (Dr. Ali's clinic)." These days, the good doctor is in the process of creating a chain of dance club all over the world to treat obesity, high blood pressure, hypertension and diabetes. He was recently in Lucknow to attend the KGMU-AAPI conclave.

Born in seohara town of Bijnor district in Uttar Pradesh, Dr. Ali did his Bachelor of Science from Aligarh Muslim University and completed his medical studies (MBBS, MS and surgical training) from Lucknow's King George's Medical College (KGMC) in 1965. Thereafter, he went to UK and then to the United State where he developed a thriving practice.

He says, "Dancing has saved my life. It is my passion now. I learnt dancing after suffering a heart attack and undergoing a bypass surgery. In fact, I took dancing lessons for several years and even passed an examination." You bet, passing the MBBS examination was easier than learning proper dancing, quips the 60 plus doctor.

Talking about diabetes and heart-related diseases, Dr. Ali says, "Diabetes treatment has not changed". It's the same, diet and exercise."

He recommends aerobic exercise. "As you increase your heart rate, you bring more oxygen into your body which sensitizes your body to insulin (as it utilizes the sugar in your body). Exercise makes your body receptive to insulin."

This is where dancing comes into the picture. Dancing is the most regularized and refined form of exercise, avers Dr. Ali. Not to forget, the most entertaining too because regular exercise can become boring. "For heart patients, dancing is more potent than walking, jogging, skipping, and running. It provides a wonderful atmosphere of happiness and conviviality to boot."

Dr. Ali says that unlike the regular club dancing, ballroom (Foxtrot and Waltz) and Latin dancing (Cha Cha Cha and Ramba) with their elegant steps are rejuvenating and provide relief from tension thereby reducing the chance of heart attack and diabetes.

Dr. Ali also doesn't much care for pills. In fact, he even goes so far as to say: "Invention of pills is the biggest tragedy. They don't do a damn thing! At the most they will bring your sugar level down by 15 mg, but it hardly makes a difference." He advocated instead taking insulin injection to control diabetes and to monitor your blood sugar level at home by using a glucose meter, which is available at a reasonable cost. He also stresses on the right diet. "Diabetes and heart patients need to restrain their fat intake, especially whole milk products and meat which are very rich in calories. This will help control the blood sugar." Though the doctor advocates vegetarianism, he sounds a note of caution: "Avoid *halwa, khoya* and other mouth-watering Indian desserts. They are killers for people with a sedentary lifestyle.

"Dr. Ali also writes for websites on dancing tidbits and in the course of his worldwide tour teaching dance therapy, has formed close association with some top dancers of the world. The genital doctor speaks passionately about dancing: Dancing is a science which needs involvement and I am confident that soon it will be included in the Olympics as a sport." He hopes to open a dance club in KGMC which teachers, students and others can joint so that they can dance their way to a healthy and happy life.

As the interview draws to an end, Max Ali shakes the hand warmly and waves to his group of friends waiting in the hotel lobby. As he walks briskly towards them, they wave back cheerily and shout out to him. *Aise nahi, dance karte hue aao!* (Not like this, come dancing). – Rajnish Sharma.

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