



RESEARCH ARTICLE

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AN INTRODUCTION TO CRITICAL EDITION OF GUDARTHA DEEPIKA BY HARINATHA GOSWAMI A COMMENTARY ON LOLIMBARAJA'S VAIDYA JEEVANA

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ABSTRACT

The manuscripts preserved acts as valuable treasure of knowledge which can be utilized for the wellbeing of present generation as well as to pass on to the next generation. A thorough study on Gudarth Deepika commentary on Lolimbaraja's Vaidya jeevana, present in the form of manuscript in oriental research institute libraries has brought information that is new for present understanding. The present study focuses on treatment aspects of various diseases and preparation of yogas with easy available drugs in present clinical practice and better development of Ayurvedic practices. The study is based on the technical method of critical edition in order to update & conserve the medical knowledge dealt in Gudarth Deepika commentary on Lolimbaraja's Vaidya jeevana. Digitization of manuscripts, editing and analysis of mutual relationship among collected copies of Manuscripts with Critical Edition and English Translation of the Text is being done.

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INTRODUCTION

Etymologically the term 'Manuscript' refers to a document handwritten by an author. The word manuscript derived from Latin word 'manuscriptus', manu means 'hand' and scriptus means 'written'. This Latin word has been used for 'A document written with a person's own hand' (Nandi and Palit, 2010). But as per the Antiques and treasure act, 1972 of India." Any Manuscript is a handwritten composition, which has significant scientific, historical or aesthetic value and which has been in existence for not less than seventy-five years old". Manuscripts possess many things like Jyothisha shastra, Ayurveda shastra, Prani shastra etc. Sanskrit scholars predominantly undertake Ayurveda manuscript studies; the progression of any subject, particularly of the medical text, it is always getting better with the involvement of the subject expert with good Sanskrit background. So far the better understanding of the contents, research should be undertaken by Ayurveda physicians. The underlying medical knowledge in Vaidya Jeevana and its commentary is a contribution to the field of Ayurveda. Gudarth deepika by Harinatha Goswami is one among the commentary on Vaidya jeevana. The commentaries helps in easy understanding of the original texts. Vaidyajeevana is an important work of Lolimbaraja composed in 1633 A.D. It is compilation by nature, particularly from

medical point of view and generally for its poetic merits (Dash, 2007). Moreover this book has beautifully portrayed Lolimbaraja's wife Ratnakala. On account of his fundamentalism, brevity and preciseness regarding medical treatment he has given more importance to simple and practically useful drugs. Therefore Vaidyajeevana has reserved a prominent place among the other works of Ayurveda in present days. The ingredients used in formulae mentioned in Vaidyajeevana are limited. Above 350 manuscripts are available in the name of Vaidya jeevana at the manuscript preservation units throughout the world. Availability of this work throughout the subcontinent depicts its importance. As this work was popular among the medical fraternity of those days, nearly 250 commentaries are authored for easy understanding and interpretation of the text (Laxmithathachar and Alwar, 2010). Critical edition and translations of the concepts is need of the hour. Need of the hour is met by critically editing it, for the recognizing the contributions of Harinatha Goswami in understanding original text Vaidya jeevana on the treatment of all diseases by using single and multiple drugs for better practice. A total of five manuscripts of this commentary were collected from different Oriental Research Institutions and manuscript libraries from India i.e from BORI-Pune, Zen library Arrah, Bihar. Gudarth Deepika by Harinatha Goswami commentary on Lolimbaraja's Vaidya

jeevana is critically edited by acquiring all possible manuscripts present with the name cited above. Researchers and commentators based on their wisdom; use to present their works for better acceptance from time to time, so did the present scholar in writing Gudartha Deepika.

Aims and objectives:

The study is based on following aims and objectives

- 1) To collect and decipher the manuscripts on Gudartha Deepika by Goswami Harinatha commentary on Lolimbaraja's Vaidya Jeevana.
- 2) To collate and critically edit the manuscripts on Gudartha Deepika by Goswami Harinatha commentary on Lolimbaraja's Vaidya Jeevana.

- **Higher criticism** - The style, the language, source of work, life of author, his equipment, the circumstances that made the author compose the work, the situation at which the work was composed, influence of other writers in the field, influence of the author on other writers in the field, the reasons for the popularity of the work and its role in society.

Indices

1. Extant of codices selected for critical edition
2. Sequential subject matter dealt in the text
3. Scribal peculiarities observed in the text
4. Title of work/text cited in the text
5. Name cited in the text
6. Name of the synonyms of dravyas dealt in the text

Sl.no	Name of book	Author	Commentaries & author	No of folios	Language	Place of availability	Sigla- accepted for Mss
1	Vaidyajeevanasateeka	Lolimbaraja	Harinatha	40	Devanagari	BORI-462/ 1895-98	Dn-1
2	Vaidyajeevanasateeka	Lolimbaraja	Harinatha	66	Devanagari	BORI-913/ 1887-91	Dn -2
3	Vaidyajeevanasateeka	Lolimbaraja	Harinatha	30	Devanagari	BORI-635/ 1895-1902	Dn -3
4	Vaidyajeevanasateeka	Lolimbaraja	Harinatha	41	Devanagari	BORI-238.B/ A 1883-84	Dn -4
5	Vaidyajeevana sateeka	Lolimbaraja	Harinatha	57	Devanagari	Zen,Arrah, Bihar- 76/42	Dn-5

MATERIALS AND METHODS

This commentary named Gudhartha deepika by Goswami Harinath deals with commentaries of chikitsa for various diseases explained in Vaidya jeevana text. The broad classification of the contents can be summarized as below.

- a. Diagnostic interpretation of common diseases
- b. Pharmaco- clinical appreciation
- c. Dietetic principles

The commentary is seen for entire five sections and over 205 verses.

Source of data: The study is based on below mentioned resources,

Sigla - Dn = Devanagari

1. D.K. Jain Oriental Research Institute, Arrha, Bihar. And
2. Bhandarkar Oriental Research Institute, Pune (Dash, 2013).

Method of collection of data:

- a) **Plan of the study:** The source materials are collected and digitalized, their mutual relation is decided and trust worthy copy is identified. Then next step is deciphering and Collation of all the copies procured for critical recension. In many readings one of the original readings is accepted and description of facts and features are done for the critical recension and presented in accordance to constituent text. In presentation of the constituent text, rules for higher criticism are followed as below

Presentation of constituent text

- **Critical apparatus** - While constituting a text only one reading is accepted while others are rejected. Those that are rejected are called critical apparatus. They should also be presented as footnotes on the same pages on which the related text appears.

7. Name of the synonyms of the diseases dealt in the text
8. Name of the Rasashoudhis dealt in the text
9. Name of the other synonyms dealt in the text
10. Name of the Yogas
11. Names of Method of drug administration
12. Name of the Mukhya dravya/ Agrya aushadhi dealt in the text⁵.

Example of critical edition of Page 1 and last page are shown below:

Accepted Reading: नरहरि नमस्कारः	
यस्याधिकं जमकरं दलिहोलयोमि व्यासादयो विविध वाङ्मयमाचिकीर्षुः । भक्तार्ति दैत्यदलनाय कृतावतारोविघ्नं सनोनरहरि निखिलं निहन्त्यात् ॥१॥	
Diacritics: yasy ghrika ⁻ jamakara ⁻ daliholayumi vy s dayu vividha v ±maya m cik s r'zu bhakt rti daityadalan ya k t vat r p v ighna ⁻ sanonarahari nikhila nihany t 1	
1 dn4-वांमव	Translation: Author offering his salutations by touching the foot of Eternal Narahari, who is from place named Dalihola (Udichya desha), well versed in various shastras which are learnt by Vyasadi Maharshis, who destroys all the obstacles of his people who are devotedly attached in the whole world.
2 dn4-माचिकीर्षुः	
3 dn4- दैत्य	
4 dn2- निखिल	

Accepted Reading: श्लोक समाप्तः	
आयुर्वेदवच इति । ¹³²⁷ लोलिबरजः ¹³²⁷ कविः वैद्यजीवनं नाम ग्रंथं अकृत चकारेत्यर्थः ।	
Diacritics: yurvedavaca iti loli ⁻ bar ja kavi vaidyaj s vana ⁻ n ma gra ⁻ tha ⁻ ak ta cak retyartha	
Critical Apparatus: ¹³²⁷ Dn1, Dn4 - आयुर्वेदति	
Translation: Lolimbaraja kavi accomplished the grantha named Vaidya Jeevana.	

Observation

Observation on Accepted reading: Accepted readings from different codices were noted and maximum readings were accepted from Dn-1, Dn-3 followed by Dn-2, Dn-4.

Siglum	Dn-1	Dn-2	Dn-3	Dn-4
Total A.R	88%	62%	78%	40%
Total number	1173	827	1040	533

Observation on Critical apparatus (Rejected reading): Rejected readings from different codices were noted and maximum readings were rejected from Dn-4 followed by Dn-2, Dn-3 & Dn-1

Siglum	Dn-1	Dn-2	Dn-3	Dn-4
Total RR	12%	38%	22%	60%
Total Number	161	507	294	801

Observations are done under various headings as Extant of codices selected for critical edition, Sequential subject matter dealt in the text, Scribal peculiarities observed in the text, Title of work/text cited in the text, Name cited in the text, Name of the synonyms of dravyas dealt in the text, Name of the synonyms of the diseases dealt in the text, Name of the Rasashoudhis dealt in the text, Name of the other synonyms dealt in the text, Name of the Yoga, Names of Method of drug administration, Name of the Mukhya dravya/ Agrya aushadhi dealt in the text.

RESULTS

- Collection, Transliteration, Collation and Critical edition of the included manuscripts resulted in the critical recension of the text.
- Grammatical and contextual editing is done.
- Critical edition led to highlighting of contributions of the text.
- The unpublished text in the form of Manuscripts is converted to a ready form for publication.

DISCUSSION

Discussion on selection of the manuscript: Selection of manuscripts is done by considering its importance, its content, availability, which is complete and unpublished. As the Ayurvedic manuscripts are selected for critical edition, after critically analyzing, translation, publication has to be done. As the Vaidya Jeevana being the popular Vaidyaka manuscript, which explains the various diseases along with its treatment. The Yogas dealt in this are useful in present days because of easy availability of ingredients. This Vaidya Jeevana is written by Lolimbaraja, well known physician, who is famous for his brevity and poetry. Many commentators written commentaries on Vaidya Jeevana for its better understanding, such as Rudrabhatta, Harinatha Goswami, Krishna pandita, Sukhananda. Among them; one of the commentary named as Gudaartha Deepikaa written by Harinatha Goswami, who is son of Manohara and grandson of Lakshmi Das. So this commentary is selected and deciphered and critically edited as close as possible to the original reading for better understanding of text of Vaidya Jeevana as a present research. For the present study the source materials are searched by going through Descriptive catalogue of Sanskrit manuscripts published by BORI(Poona), Catalogue of Sanskrit medical

manuscripts in India, published by CCRAS and New catalogus catogorum, Published by University of Madras. A total of five Mss were traced with different accession number and different places of availability along with brief information of manuscripts such as their condition, handwriting, measurement, folios no., completeness, etc. Through proper correspondence, two manuscript libraries were approached and got good response. They have sent the photocopies and softcopy of manuscripts of Gudartha Deepika by Harinatha Goswami.

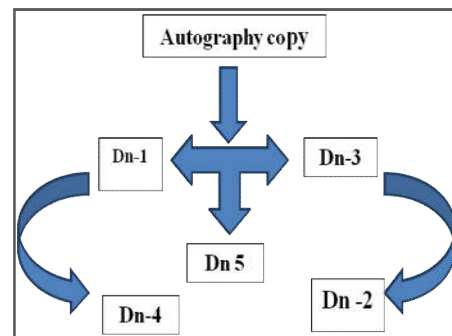
Discussion on obtained Mss: There is availability of five manuscripts total. Among them four are collected from Bhandarkar oriental library, Pune. Another one collected from Zen library, Arrah, Bihar. As per the Descriptive catalogue Gudartha Deepika Mss were present in BORI similarly as per the NCC and CCRAS catalogue, Mss are obtained with respective libraries as per accession no. of catalogue and according to its availability. These Mss are matched with each other and possess same title and same contents of Gudartha Deepika. The sigla-Dn-1,Dn-2,Dn-3,Dn-4&Dn-5 shows similarity in Title, Colophon (PC, IC and EC), subject and writing style. Dn1 Devanagari Ms has been kept as base considering the appropriateness, correct reading while collating the manuscripts.

That is,

1. Dn-1-BORI- 1920
2. Dn-2-BORI- 1870
3. Dn-3-BORI- 1868
4. Dn-4- BORI -1883-84
5. Dn-5-1848- it contains only verses, no commentary.

All these Mss are paper Mss written in Sanskrit language and Devanagari script. Easy understanding of language helps to deciphering and critical edition of Mss.

Geneology of Manuscripts:



- Dn-4 follows Dn-1,
- Dn-2 follows Dn-3,
- Dn-5 has only verses without commentary.(This ms helps in compare the original verse and verse number).

Discussion on subject matter

The present text is divided into five chapters; 'chapter ' is named 'Vilasa' i.e

- 1) Prathama Vilasa
- 2) Dviteeya Vilasa
- 3) Truteeya Vilasa

- 4) Chaturtha Vilasa and
- 5) Panchama Vilasa

The commentator has followed same sequential order of concepts, diseases and treatment as in the original verses.

Prathama vilasa- Author has given introduction about himself and his background and beautifully described about the Goddess Saptashrungi, Bharga means Bhagavaan, Shat Aishwarya as Aishwarya, Dharma, Yasha, Shreeya, Jnana, Vairagya. Explains about Roga and Arogya as dosha samyata and dosha vaishamyata as same as explained by Acharya Vagbhata. To explain the Surya(Bhaskara) is God of Arogyah, he has taken reference of Matsya purana. narration found as the whole Rahasya of Vaidyaka shastra about Roganasha as narrated in Vaidyaka shastra by Charakadi munis, it is not written by his self imagination. Author has mentioned as Bharadvaja muni narrated to his disciples - Bheda, Jatukarna, Agnivesha, Harita etc about Deerghayu to increase their Ayu for welfare of prajahita. Importance of Vaidya as Vaidya is Adhikari for Chikitsa as being the first paada among the chikitsa chatuspada as explained by Acharya Vagbhata. Explanation about Mudavaidya, one should not get treated by such Vaidya and about duty of a Vaidya and also explains about nidana panchaka, sadhyaasadyata of vyadhi. Person who is suffering from jvara should stay away from the chikitsa from muda vaidya. Importance of Pathya as quoted by Acharya Charaka. Among all roga, Jvara is considered as pradhana. in this vilasa author has explained Jvara pratikara. Firstly the treatment of Jvara is explained as langhana, doshanusara jvarahara kvathas and Dahashamana viharas are explained. 8 types of Jvara are explained.

Dwiteeya vilasa: Explained about Atisara and its chikitsa. Jvaratisara, Raktatisara, Amatisara, seven types of Atisara and their treatment, explained famous Churna yogas like Gangadhara churna in Jeernatisara. Explained about Grahani, Sangrahani, Pravahika, Arsha and their treatment like Chandrakala churna.

Truteeyaa vilasa: Explained about Kasa, Shwasa pratikara. Churna and avaleha yogas are explained. Famous yogas like Chintamani churna. also explained about Amavata and their treatment, Netrarogas, Kamala, Pandu. Explained about dushta dugdha shodhana, streerogas like shwetha pradara, Asrapradara, Garbhapatana upaya, Pratikara for Garbhini chardi, Prasuta rogas.

Chaturtha vilasa: Explained about Kshayaroga, Sarva Prameha, Mukhapaka, Chardi, Vatarakta, Visuchika, Pama and many diseases with their treatment.

Panchama vilasa: Explained about Vajikarana and Rasayana yogas and viharas. Rasoushadhis and famous yogas like Panchamruta parpati, Laghu Mrighanka rasa, Narayana churna as well as taila and some Agrya aushadhis are explained.

Discussion on Accepted reading: Total 1334 readings. among them 873 readings are accepted. In the process of critical edition, accepted readings from different codices were identified. The maximum number of accepted readings from Siglum Dn-1 and Siglum Dn-3 considered as the appropriateness and fewer mistakes in these manuscripts and subsequently, readings from Siglum Dn-2 and Dn-4 are accepted. This indicates Siglum Dn-2 and Dn-4 are following/ copied from Dn-1 and Dn-3 respectively.

Omissions: Total number of omissions -346. More omission is found in Siglum Dn-2 and Dn-4 in comparison to the Dn-1 and Dn-3. The cause for omission may be due to many reasons viz., scribe not belonging to the profession of medical practice, unavailability of the legible/ complete extant for copying, practical non-applicability of the particular subject matter during that period, etc.,

Conjectural emendations: Conjectural emendation is suggested in the critical edition at 28 spaces found to be appropriate with due considerations to contextual meaning and versification.

Dn1-sÉÉāsÉqqÉÉUÉeÉÉāMÚüiÉ; Dn3, Dn2-sÉÉāísÉqqÉÉUÉeÉÉāMÚüiÉ; Dn4-sÉÉāsÉrÉÇoÉUÉeÉÉāM×üiÉ, all reading are not appropriate and grammatically correct. So emendation has been done as sÉÉāísÉqoÉUÉeÉÉāM×üiÉ.

Transpositions: Transpositions are found in the source manuscript only. Transpositions indicate haplography i.e. corruptions made while copying due to visual misappropriation. Availability of transpositions in Dn-1, Dn-2 copies are very less.

In Dn-3 given as MüÉÇiÉäirÉ U2 qÉ 1È| it should be read as MüÉÇiÉäirÉqÉUÈ|

Repetitions: Repetition of same words is noted in the Dn-2, Dn-3 and Dn-4. This indicates the fact that Siglum Dn-2, Dn-3 and Dn-4 are not the Auto copy. Repetition might be due to error in oral dictation while copying or an attempt of the scribe to provide a suitable reading.

In Dn2 - xiÉÏhÉqÉÇeÉIÉÇ ìuÉUāMü SÒoÉisÉÉ SÒI'UÉÍSirÉÇ mÉëÉmrÉxÉÍŠiÉ xÉsÉuÉhÉiuÉÉ is repeated.

Additions: In the same way 65 scribal additions are noted in source MS during critical edition.

Conjectural Deletions: Conjectural deletions were made during the critical edition considering the context and meaning. This is necessary to standardize the commentary for understanding and applicability.

Dn2 - (deletion), In Dn2 scribe repeated the same sentence and deletion has been done by scratching it with a line. This line has been deleted.

Conclusion

Vaidya Jeevana text is easily available and in it very practical formulations with respect to the many diseases with Rasayana, Vajikarana and Agryoushadhi are documented. So the need of critical edition is met by critically editing it, for the recognition of its contributions of the Goswami Harinatha in understanding the original text Vaidya Jeevana to the treatment of various diseases by using single and multiple drugs for the better practice in present era. *Gudārtha deepika* by Goswami Harinatha commentary on *Lolimbaraja's Vaidya jeevana* deals with elaborate and easy explanation of each verses of Vaidya jeevana text. Being a commentary on Vaidya jeevana, the author comments and helps in easy understanding of the original text, which explains treatment for sixty diseases. The text explains treatment for sixty diseases. All of these are described systematically in five Vilasa (chapters) of Vaidya jeevana with unique manner.

Author has taken many cross reference and concepts from texts such as Maarkandeya purana, Matshya purana, Shrungarabhivyakti by Govardhanacharya, Chikitsa kalika by Tisatacharya to justify the context. Author has explained diseases in easy manner which helps in better understanding the text Vaidya jeevana. Harinatha Goswami has explained the yogas along with its drug's and their relevant synonyms for easy understanding; this is one of the contributions of author to the Dravyaguna. He also explained mode of administration of yogas, their phalashruti in different diseased condition. The list of contribution still goes further and is perceived at even in the form of Shreshta dravyas and ekamulika yogas in treating various disorders. The author has given more importance to shamana aushadha and bahir parimarjana rather than shodhana. Explanation of usage of rasa aushadhis and rasayana yogas and their mode of administration is narrated beautifully in the text. So Gudārtha deepika by Goswami Harinatha commentary on Lolimbaraja's Vaidya jeevana helps in better understanding of diseases as well as their treatment application in day today clinical practice.

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