

## CHAPTER II

### PHYSICIANS AND THEIR SOCIAL WORLD

Not much is known about the social world of the physicians in ancient India. However, there are some verses in the classical texts like the *Rig Veda* which do give us some inkling about their status and the social world. Thus in one of the hymns of *Rig Veda* we have a physician who is also an apothecary and a poet who travels around with a wooden box full of herbs and medicine which he sold to make both ends meet.<sup>1</sup> In one of the *hymns*, thus, we hear the poet sing:

‘He who hath store of herbs at hand like kings amid a crowd of men,-  
Physician is that sage’s name, fiend-slayer, chaser of disease’.<sup>2</sup>

The social status of physicians, the healer can well be understood if one reads the *hymn IX* of the *Rig Veda Samhita* where they appear in between the Brahmin and the carpenter:

“Various are our acts, (various) are the occupations of men; the carpenter desires timber, the physician disease, the Brahman a worshipper who effuses Soma: flow, Indu, for Indra.

With dried plants (are arrows made), with the feathers of birds (and) with glistening stones; the smith seeks a man who has gold: flow, Indu, for Indra.

I am the singer; papa is the physician, mamma throws the corn upon the grinding stones; having various occupations, desiring riches we remain (in the world) like cattle (in the stalls): flow, Indu, for Indra.

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<sup>1</sup> See Rolph T.H. Griffith, *The Hymns of the Rig Veda Translated with a Popular Commentary*, Benaras, 1926, Vol. II, Book X, *Hymn 97*, pp. 533-35.

<sup>2</sup> *Ibid*, *Hymn, 97*, Verse 6.

The draught horse (desires) a cart easy (to draw); those who invite guests (desire) merriment; the frog desires water: flow, Indu, for Indra.<sup>3</sup>

Thus, physicians and healers constituted a particular group of “professionals” who combined the craftsmanship of a carpenter with the intellectual acumen of the priest. Like the learned priests, the healers commanded cryptic knowledge, and like the uneducated but skilled carpenters, they “repaired” the injured or broken human body. Within the social hierarchy of the early Vedic period, these professionals were respected and even praised in the *Rgvedic* hymns for the healing services they performed. However they were never considered at par with the ritualists of the sacrificial cults.<sup>4</sup> Subsequently by the later Vedic period they were denigrated by the priestly hierarchy and were rebuked for their ‘impurity and association with all sorts of people.’ Thus in one of the passages of *Taittiriya Samhita* it was noted that the ‘medicine is not to be practiced by a Brahman, for he, who is a physician [*bhisaj*], [is] impure, until for the sacrifice’.<sup>5</sup>

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<sup>3</sup> E.B. Cowell and W.F. Webster(ed.), *Rigveda Samhita : A Collection of Ancient Hindu Hymns Consisting the Sixth and Part of the Seventh Ashtaka of the Rig-Veda*, tr. H.H. Wilson, Vol. 5, London, 1888, p.412; See also Kenneth G. Zysk, *Asceticism and Healing in Ancient India: Medicine in the Buddhist Monastery*, Motilal Banarsi Das, New Delhi, First edition 1991, Corrected Edition 1998, p.21; See also, Zaheer Baber, *The Science of Empire: Scientific Knowledge, Civilization and Colonial Rule in India*, OUP, Delhi, 1998, p.41.

<sup>4</sup> Zysk, op. cit., pp. 21-22.

<sup>5</sup> *Taittiriya Samhiat* cited in Zysk, op. cit., p.22.

The term *vaidya* refers to ‘a *learned* man of any description’. In the *Mahabharata*, they are defined as those who possess the Vedic knowledge.<sup>6</sup> These *Vaidyas* needed to observe an ethical code. Both Charaka and Susruta stressed in several ways about the characteristics of good physician, or *Vaidya*, who were emerging as a professional group during this period.<sup>7</sup>

Charaka while mentioning ethical code of physician writes:

“Day and night, however thou mayest be engaged, thou shalt Endeavour for the relief of the patient with all thy heart and soul. Thou shalt not desert or injure thy patient even for the sake of thy life or living. Thou shalt not commit adultery even in thought. Thou shalt not covet other’s possessions. Thou should be modest in thy attire or possessions. Thou should speak words that are pure, gentle and righteous, pleasing, worthy, true, wholesome, moderate. Thy behavior must be in consideration of the time and place and heedful of past experience... No persons who are hated by the king or who are haters of the King shall receive treatment...While entering the patient’s house thou shall be accompanied by a man who is known to the patient and who has his permission to enter, and thou shall be well clad, self possessed and conduct thyself with dignity. Having entered, thy speech, mind, intellect and senses shall be entirely devoted to no other through than that of being helpful to the patient and of things concerning him only. The peculiar customs of the patient’s house shall not be made public. Even knowing that the patient’s span of life is coming to a close, it shall not be mentioned by thou there, where if so done. it could cause

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<sup>6</sup> K. N. Dutt, *Origin and Growth of Caste in India*, Vol. I &II combined, first combined reprint, Calcutta, 1986, pp.251-52; See also, A. L. Basham, “The practice of Medicine in Ancient and Medieval India”, in Charles Leslie (ed.), *Asian Medical Systems: A comparative Study*, University of California Press, Berkeley, Los Angeles, London,1976, p.23.

<sup>7</sup> A. L. Basham, “The practice of Medicine”, op. cit., p.23.

shock to the patient and to others. Though possessed of knowledge, one should not boast very much of one's knowledge. Most people are offended by the boastfulness of even those who are otherwise good and authoritative.<sup>8</sup>

This ethical code of Charaka has often been compared with the Hippocratic Oath taken by the modern physicians. At the time of beginning his career as a pupil to become a *vaidya*, he had to swear to lead a celibate's life, to speak the truth, eat vegetarian food, be free of envy and never to carry any arms. He was further expected to submit himself to his teacher (*guru*) completely, except in conditions where this would bring him into conflict with 'higher ethical values'. As a physician he was expected to work day and night for the relief of his patients, never to desert them or take advantage of them sexually. In fact, Charaka advises a physician not to treat 'women who were unattended by their husbands or guardians'. Similarly he was to deny treatment and his services to the enemies of the king and the wicked people. Like a modern physician he was to treat as totally confidential any privileged information regarding the patient and his household.<sup>9</sup>

Thus to quote 'the physicians' code and Charaka's advice the physicians:

"If you want success in your practice, wealth and fame, and heaven after your death... You must not betray your patients, even at the cost of your own life...you must not get drunk, or commit evil, or have evil companions...you must be pleasant of speech...and thoughtful, always

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<sup>8</sup> *Charaka Samhita*, op. Cit., vol. 3; 8, verses 23-24; See also Farokh Ekach Udwadia, *Man and Medicine: A History*, OUP, New Delhi, 2000, p.49.

<sup>9</sup> *Ibid.*

striving to improve your knowledge...when you go to the home of a patient you should direct your words, mind, intellect and senses nowhere but to your patient and his treatment...Nothing that happens in the house of the sick man must be told outside, nor must the patient's condition be told to anyone who might do harm by that knowledge to the patient or to another.”<sup>10</sup>

A qualified physician, before he started practice, needed sanction from the king. This procedure distinguished them from the quack doctors. Charaka also gave detailed descriptions and distinguished between trained *vaidyas* and quacks.

Practical success was the criterion for a good physician and thus he was supposed to strive not only the acquisition of theoretical knowledge but also on its right application. It was explicitly mentioned in *Charaka Samhita*:

“He is the best of physicians who can, in actual practice, cure people of diseases. Practical success depends on the right application of all the relevant measure. Thus it is practical success which makes one a first rate physician endowed with all the required medical qualifications”.<sup>11</sup>

In another passage while extolling the virtues of a good physician Charaka describes the high social position and standing of a physician as ‘earned not inherited’:

“Every one admires a twice-born (i.e. a *brahmin*) physician (*vaidya*) who is courteous, wise, self-disciplined, and a master of his subject. He

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<sup>10</sup> A.L. Basham, *The Wonder that was India: A Survey of the History and Culture of the Indian Sub-Continent Before the Coming of the Muslims*, Third Revised Edition, Rupa & Co, New Delhi, 1967, p.500.

<sup>11</sup> *Charaka Samhita*, Vol. I, no. 1, pp. 134-35, See also V.K. Thakur, “Surgery in Early India: a note on the Development of Medical Science”, in Deepak Kumar, (ed.), *Disease and Medicine in India: A Historical Overview*, New Delhi, 2001, pp. 15-25.

is a *guru*, a master of life itself. On completing his studentship a physician is said to be born again; the title '*vaidya*' [doctor/physician] is earned, not inherited. On completing his studentship a spirit, be it divine or heroic, enters firmly into him because of his knowledge: that is why the physician is called 'twice-born' [*dwija*]. For someone being dragged into death's realm by savage diseases, no benefactor, either religious or worldly, can match the person who holds out life. This is no gift to compare with the gift of life. The practitioner of medicine who believes that his highest calling is the care of others achieves the highest happiness. He fulfills himself".<sup>12</sup>

A hyped quack or an unqualified self-pretending imposter is also mentioned by Charaka. Thus in one of the passage condemning such persons he writes:

"Attired in physician's outfits, they wander the street looking for work. As soon as they hear that someone is ill, they descend on him and his hearing speak loudly of their medical expertise. If a doctor is already in attendance on him, they constantly harp on that physician's failings. They try to ingratiate themselves with the patients' friends with jokes, confidences and flattering. They put it about that they want much money... but when they fail to avert the illness they point out that it was the patient himself who lacked equipment, helpers and the right attitude".<sup>13</sup>

The diagnostic and practical aspects of this system also depended on a thorough knowledge of the medical texts like *Atharva Veda*, *Ayurveda* etc. The good physician would memorize a vast amount of material which consisted largely of medical verses giving correspondences between the three

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<sup>12</sup> *Charaka Samhita*, Vol.6, no.1, pp.60-62.

<sup>13</sup> *Ibid.*,I,no.2, verse 9; For dangerously ill-equipped *vaidyas* and quacks See also Ksemendra, *Narmamala*, Vol. 2, 68-81 cf. A. L. Basham in C. Leslie, *Asian Medical Systems: A Comparative Study*, Berkley, 1976, pp.30-31.

humours, viz. wind, bile and phlegm and the different symptoms, diseases, herbs and treatments.<sup>14</sup>

To be an accomplished physician years of training was required from a young age. Intelligence and sensitivity were also essential tools. However it appears that there was no centralized system of qualifications and testings. The *vaidya* was simply judged by his reputation.<sup>15</sup>

In this system, thus the physician was directly involved in every aspect of the science from acquisition and organization of theoretical knowledge down to herb collection and its administration to the patients. This aspect is further strengthened by Susruta when he says that although there were twenty one surgical instruments, ‘the hand (of the surgeon) itself’ was to be viewed ‘as the most important of the instruments’ as ‘all these instruments are ineffectual without the hand and only as subjected to the hand the instrument acquire their function’.<sup>16</sup>

It appears that in the pre-medieval period, the physicians were earning more than the surgeons. According to the inscriptions on the wall of the Temple of Venkateshwar at Tirumakudal, district of Chingelput(TN), Kodani Rameshwathan Bhattar, a physician was paid about 90 *kalam*\* of paddy per

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<sup>14</sup> F. Zimmerman, *The Jungle and the Aroma of Meats: An Ecological Theme in Hindu Medicine*, Berkley, 1987, chapter V; See also Jan Van Alphen and Anthony Aris, *Oriental Medicine: An Illustrated Guide to the Asian Arts of Healing*, Serindia, 1995, pp. 23-25.

<sup>15</sup> Guido Majo, *Healing Hand: Man and Wound in Ancient World*, Cambridge, 1975, pp. 271-304.

<sup>16</sup> *Susruta Samhita*, I, 7.1, See also V.K. Thakur, “Surgery in Early India”, op. cit., p.21

year while Calliyakkirivai Pannuvan, the surgeon in the hospital was remunerated only with 30 *kalam* of paddy per year.<sup>17</sup>

The status of the physicians appears to have kept falling down with time from the position they enjoyed during the Rig Vedic and Vedic times: from a respected position they were ultimately downgraded to the status of *Shudras* by the beginning of the early historic period. *Manusmriti* mentions about *ambastha*, a mixed caste of Brahmana and *vaisya* who were specially equipped in the art of healing.<sup>18</sup> But a later text *parasara* mention that being a clean caste, they probably treated only Brahmin<sup>19</sup> and therefore were different from the *vaidya*, who were unclean. These *ambastha* were specially favoured by the orthodox Brahmins. Thus within the group of men of medicine, different categories existed on the principle of social division of the society.<sup>20</sup>

Another passage of the *Manusmrti* further strengthens the view that the common *vaidyas* were socially looked down and equated with the hunters and

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\* 1 *kalam*= 12 *Markals*

<sup>17</sup> S. Grumurthy, "Medical Science Dispensaries in Ancient South India as Gleaned from Epigraphy", *Indian Journal of History of Science*, 5, 1, 1970, p.76; See also O.P. Jaggi, "Hospitals in India", in D.P. Chattopadhyaya (ed.), *History of Science, Philosophy and Culture in Indian Civilization*, Vol. IX Part I: *Medicine in India: Modern Period*, PHISPC, OUP, New Delhi 2000, p.71.

<sup>18</sup> Manu, *The Laws of Manu*, J. B. Buhler, tr. *Sacred Books of East*, Vol. 25, Clarendon Press, London, 1886, x.8,47, Cf. A. L. Basham, "The practice of Medicine", op. cit., p.37. (*ambastha* believed to be descended from Brahmin father and *vaisya* mother.)

<sup>19</sup> Dutta, op. cit., p.255; See also A. L. Basham, "The practice of Medicine", op. cit., p.37.

<sup>20</sup> A. L. Basham, "The practice of Medicine", op. cit., p. 37.

that the Brahmins were not accepting food from them.<sup>21</sup> They were looked down upon as during the course of their duty they came into contact of blood which no ablutions could wash from their hands. A later *smṛti*, the *Vishnusmṛiti*, prescribes self-punishment for one who accepts food from a physician. The punishment entailed living only on milk for seven days.<sup>22</sup>

*Baudhayana* declared that if any Brahman practices medicine he should be considered as professional actor or a teacher of dancing and if he practiced so then he has to live as an outcaste for two years.<sup>23</sup> The social status of men of medicine within the society is further certified by the epic *Mahabharata* which mentions the *vaidyas* as a menial caste which originated from the union of *sudra* men and *vaisya* women.<sup>24</sup>

The dawn of the medieval period in India as we have seen saw the introduction of a new system of medicine. With the establishment of Turkish rule in India, new ideas and knowledge got implanted. The Hindu scholars could not be left immune to this change and there was much interaction between the practitioners of the old and new traditions. Thus to give an example, Bhojar, a Brahmin of Varanasi during early Muslim period

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<sup>21</sup> Manu, *The Laws of Manu*, op. cit., Vol. iii, 152, Cf. A. L. Basham, "The practice of Medicine", p.37.

<sup>22</sup> *Vishnusmṛiti*, L.1.10, Cf. Dutta, op. cit., p.253; See also A. L. Basham, "The practice of Medicine", p.37.

<sup>23</sup> Dutta, op. cit., p.254; See also A. L. Basham, "The practice of Medicine", op. cit., p.37.

<sup>24</sup> *Ibid.*

approached Qazi Ruknuddin to learn the art and literature.<sup>25</sup> There were also efforts made by Muslim scholars to learn the traditional knowledge of India. During the Sultanate period, patronage was offered to translate Sanskrit texts on medicine into Persian. Thus physicians during the Sultanate period learnt Sanskrit to access medical manuscripts and there was interaction between both systems. For example, Zia Muhammad Masood Rasheed Zangi the author of *Majmuah-i-ziai*, was well versed in Sanskrit. It is to be noted that he was also personal physician to Muhammad Bin Tughlaq.<sup>26</sup> Similarly one finds, *Madinu-us- Shifa-i-Sikandar Shahi* of Miyan Bhawa Khwas Khan having a heavy influx of Sanskrit terminology. This treatise is also known as *Tibb-i-Sikander Shahi*.<sup>27</sup>

With the establishment of Turkish rule in India in the early thirteenth century a large number of physicians migrated to India during the reign of Sultan Iltutmish. Those physicians either set up their own clinics or served as court physicians.<sup>28</sup> In the subsequent years the development of Unani system of medicine came to more prominence during the reign of Alauddin Khalji

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<sup>25</sup> R.L. Verma, "The Growth of Greaco-Arabian Medicine in India" *I.J.H.S.*, Vol. V, no. 2, 1970, pp.348-49

<sup>26</sup> Hakim Syed Muhammad Hassan Nagrami, op. cit., p.393.

<sup>27</sup> For detailed Studies see Hakim Bhuwa bin Khawas Khan, *Madinu-us Shifa-i Sikandar Shahi*, *Madinu-us Shifa-i Sikandar Shahi*, Tibbiya College Collection, No. 93, ms 616/64, 418ff, Maulana Azad Library, Aligarh, the details of treatises mentioned in chapter III.

<sup>28</sup> T. Siddiqi, "Unani Medicine in India during Delhi Sultanate", *IJHS*, 15, 1, 1980, p.20.

(1296-1316).<sup>29</sup> The progress of Unani medical science continued under the Tughluq Sultans.

Even the first ruler of this dynasty, Gyassuddin Mohammad Tughluq had some knowledge of medicine and reportedly treated the wounded persons of his army. Mohammad Bin Tughluq also possessed deep knowledge of Unani medicine.<sup>30</sup> Firoz Shah Tughlaq was said to have been well acquainted with Unani medicinal science. It is also noted that during this period there were 1200 physicians who had been enrolled as state employees.<sup>31</sup>

Like Sultanate rulers, the Mughal emperors also paid full attention towards the development of Unani medicinal system and physician's professions also achieved prominence like other professions. Historical sources tell us about the important positions held by physicians in the Mughal establishment. Abul Fazl, Nizamuddin Ahmad and Lahori, while listing *ulema* (scholars) and poets, duly included the physicians of the period. Considerable interest appears to have been taken in patronizing them.<sup>32</sup>

Babur who laid the foundation of Mughal Rule in India took keen interest in this regard. He was himself interested in medical art and brought a

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<sup>29</sup> S.H. Askari, *op.cit.* p.12; See also, Altaf Ahmad Azmi, "Unani Medicine : Hakims and their treatises", in B.V. Subbarayappa(ed.), *Medicine and Life Sciences in India*, Vol. IV, Part 2, PHISPC, Centre For Studies in Civilization, New Delhi, 2001.p 327.

<sup>30</sup> Altaf Ahmad Azmi, *op.cit.* PHISPC, p 329.

<sup>31</sup> Cf. R.L. Verma, *op.cit.* , p.350.

<sup>32</sup> S.A.N. Rezavi, "Physicians as Professional in Medieval India", in Deepak Kumar (ed.), *Disease and Medicine in India: A Historical Overview*, Tulika Books, New Delhi, 2001, p. 42.

number of expert personal physicians in his court. According to Babur, a surgeon in Central Asia could enjoy the rank of a *bakhshi*.<sup>33</sup>

Describing the feats of such a surgeon at Andijan, who also treated an injury on his leg, Babur informs us:

“He was a very skillful surgeon; if a man’s brains had come out, he would care it, and any sort of wound in an artery he easily healed. For some wounds his remedy was in form of a plaister, for some medicines had to be taken. He ordered a bandage tied on the wound in my leg and put no seton in; once he made me eat something like a fibrous root (*Yildiz*). He told me himself, ‘a certain man had his leg broken in the slender part and the bone was shattered for the breadth of the hand. I cut the flesh open and took the bits of bone out. Where they had been, I put a remedy in powder-form. That remedy simply became bone where there had been bone before’. He told many strange and marvelous things such as surgeons in cultivated lands cannot match”.<sup>34</sup>

In 1529 when Babur was at Prayag (modern Allahabad), he notes a case of dissemination of medicinal knowledge. To cure him of nasty boils all over his body a ‘Rumi’ (Ottoman Turkish) administered him with boiled pepper before washing the sores with hot water. Babur pointed out that it was a remedy ‘recently discovered in ‘Rum’.<sup>35</sup>

During the reign of Humayun, Persian physicians and surgeons migrated in large numbers to India and consequently led to the development

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<sup>33</sup> *Babur Nama (Memoirs of Baber)* tr. A.S. Beveridge, Translated from the Original Turki Text of Zahirud-din Muhammad Babur Padshah Ghazi, Luzac & co London. Vol. I, 1922, p.107.

<sup>34</sup> *Ibid.*

<sup>35</sup> *Ibid.*, p. 657.

of medical knowledge. It is recorded that surgeons used to perform plastic surgery which is mentioned as early as this period:

“In narration of events of A.D. 1542, it is recorded that at Umarkot Kaufer was ordered to cut the end of Husyn’s ear as a punishment for his treachery (of hiding ingots of pure gold) Kaufer misunderstanding the order cut off the whole ear. On seeing this king was very angry, sent for a surgeon and had the ear sewn again. The Emperor himself assisted in the operation of Husyn and apologized to the sufferer”.<sup>36</sup>

Akbar extended his patronage to the scholars and practitioners of Unani medicine. Their status in the society during the Mughal period can be discerned from the fact that a list of physicians (*tabibs*) is appended to the works of such authors as Abul Fazl, Nizamuddin Ahmad and Abdul Hamid Lahori. A perusal of these lists indicates that in ethnic terms they were predominantly Iranis. This fact is also borne out by the information supplied to us by the European travelers to the Mughal Empire. Thus Manucci specifically mentions that the physicians of the Mughal Court were basically Iranis.<sup>37</sup> But at Akbar’s court the situation was slightly different in so far as there were also present a considerable numbers of Hindu *tabibs*, who were mentioned by Abul Fazl and Nizamuddin in their list of *Atibba*.<sup>38</sup> These

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<sup>36</sup> Jauhar Aftabchi, *Tazkirat-ul Waqiat, or Private Memoirs of Emperor Humayun*, English translated by Charles Stewart, Calcutta, 1904, p.63-64.

<sup>37</sup> N. Manucci, *Storia do Mogor*, Vol. II, pt. iii, pp. 332-333.

<sup>38</sup> Abul Fazl, *A'in-i Akbari*, translated and edited by Blochman, Vol. I, Calcutta, 1927, pp.542-44; Khwaja Nizamuddin Ahmad, *Tabaqat-i Akbari*, edited by B.De, Vol. II, Calcutta, 1931, pp. 481-84; For details on this point see Rezavi, “Physicians as Professionals”, op. cit., pp. 42-43.

‘Hindu’ *tabibs* were probably brahmins by caste,<sup>39</sup> and experts of Ayurvedic rather than of Unani *tibb*.

Abul Fazl in *Ain-i-Akbari* provides a list of 29 Hindu and Muslim physicians who were paid out from the royal treasury. Some of them were also granted *mansabs*.<sup>40</sup> The physicians who were assigned *mansabs* could be recruited directly to the service of the emperor; others would join the establishment of nobles. Before a physician or surgeon could join the Mughal service he had to pass certain tests which were to satisfy the employer of their proficiency. Extreme care was taken to select or appoint only the most accomplished and experienced physicians.<sup>41</sup> Thus at the time of Hakim Ali Gilani’s employment, Akbar ordered several utensils containing the urine of the sick and healthy persons, as well as that of cattle and asses, to be brought before the *hakim* for detection. The *hakim* reportedly diagnosed each one of them correctly and thus passed the test. From that time Hakim Ali’s reputation and influence increased and he became a close confidant

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<sup>39</sup> See, for example, the testimony of Fryer, John, *A New Account of East India and Persia begin Nine Years Travels, 1672-81*, ed. W. Crooke, Vol. I, Hakluyt Society, London, 1909. p.115, also p. 27; See also Pyrard, *The Voyages of Francois Pyrard of Laval*, translated and edited by Albert Gray and H.C.P. Bell, Vol. I, Haklyut Society, London, n.d./ p.373.

<sup>40</sup> *A'in-i Akbari*, I, pp.542-44

<sup>41</sup> Manucci, *Storia Do Mogor*, II, iii, p. 332.

(*muqarrab*) of Akbar.<sup>42</sup> Manucci recounts a similar incident that happened to him while in the retinue of Prince Shah Alam.<sup>43</sup>

The number of physicians enjoying official patronage continued during the subsequent reigns as well. Under Jahangir a number of these men of medicine rose to high positions and *mansab*. An example can be given of Hakim Mukarrab Khan, a physician, surgeon and veterinary who rose to the high rank of 5000/5000 and the governorship of such provinces as Gujarat and Bihar.<sup>44</sup> It has been generally argued that in medieval India, there were two classes of physicians, One who were working at the royal courts and the other working with the middle classes or *masnabdar* of the medieval India.<sup>45</sup> However, Rezavi mentions that there were three types of physicians in Mughal India. A large number of persons became physicians due to training and interest. He categorized as first, those who joined the service of the king and nobles who were appointed as *mansabdari* (see Table I). The second category was those who were receiving state patronage but were awarded cash salaries, *nazrana* and grants. The third category was that of the *bazar* physicians. The first two were appointed on the basis of assessment of their knowledge and experience. The ‘bazar physicians’, on the other hand those

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<sup>42</sup> *Ma'asir-ul Umara*, I, p. 569; Farid Bhakkari, *Zakhiratul Khawanin*, edited by Moinul Haq, Vol. I, Karachi, 1961-74, pp. 243-45

<sup>43</sup> Manucci, *Storia Do Mogor*, pp. 373-74

<sup>44</sup> S.A.N. Rezavi, “An Aristocratic Physician of the Mughal Empire: Muqarrab Khan”, *Medieval India*, I, ed., Irfan Habib, 1992, pp. 154-67

<sup>45</sup> Poonam Bala, “The Ayurvedic System of Medicine Its Fate in Medieval India”, *Bulletin of Indian Institute of History of Medicine*, Vol. XII, 1982, p. 26.

who had their own clinic in the market. These physicians were part of the urban middle classes which was emerging under the Mughals.<sup>46</sup>

Mughal miniatures also confirm the hierarchical division amongst the physicians serving the kings, princes and nobles. In three or four miniatures, a chief physician (*saramad-i Atibba*) is depicted tending the patient along with his subordinate colleagues. The growing prosperity of the medical profession can be discerned through the depiction of the physician-bureaucrats. Muqarrub Khan (identifiable from inscription, '*Shahib-i Muqarrub Khan*'), in all his portraits, is shown wearing a white silken *dastar* with a golden design and standing amongst the nobles close to the emperor.<sup>47</sup> This attire is typical of a Mughal noble, with the exception that he is always wearing sober colours.<sup>48</sup> Unlike him, Masihuz Zaman is shown in a dress that was typical of

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<sup>46</sup> Cf. S.A.N Rezavi, "Physicians as Professionals", in Deepak Kumar (ed.), *Disease and Medicine in India: A Historical Overview*, Tulika Publication, New Delhi, 2001, pp. 58-59; See also S. A. N. Rezavi, *Urban Middle Classes under the Mughals*, Ph.D. thesis submitted at AMU, 2006.

<sup>47</sup> 'Jahangir amongst his courtiers', Victoria and Albert Museum, IM. 9-1925, cf. Ivan Stchoukine, *La Peinture Indienne a l'Epoque des Grands Moghols*, Paris, 1929, p. XXVIII. Cf. S.A.N. Rezavi, "Physicians as professionals" op.cit. p.43.

<sup>48</sup> 'Jahangir being offered food by Dervishes', *Jahangirnama*, Edward Binney third collection, San Diego, cf. A.K. Das, *Splendour of Mughal Painting*, Bombay, 1986, pl. V; 'Jahangir his court in a garden', State Library, Rampur, cf. Percy Brown, *Indian Painting under Mughals, AD 1550 to AD1750*, Oxford, 1924, pl. xlix; Jahangir celebrates *Ab-pashi*', attributed to Govardhan, State Library Rampur, No. 1/5, cf. P. Brown, *ibid.*, frontispiece. cf. S.A.N. Rezavi, "Physicians as Professionals" op. cit., p.43.

the attire of the scholar and *ulema*.<sup>49</sup> Physicians who joined imperial service or that of a noble, but had not been assigned a *mansab*, were recruited on a daily (*yaumiya*) or annual (*saliyana*) salary.<sup>50</sup> Even after the grant of *mansab*, they received ‘pocket money’ (*zar-i jeb*) to maintain a medicine box (*kharita*) comprising essential medicines.<sup>51</sup> From our sources it appears that the personal salary of a Mughal physician could vary between the Rs.300 per month, i.e. Rs. 3600 per annum, and Rs. 100,000 per annum.<sup>52</sup> According to Manucci, the salary of a blood-letter (surgeon) varied between Rs.2 per day and Rs. 700.<sup>53</sup> Apart from remunerating a physician for his services through grant of *mansab* or cash allowances and salaries, they could also be given grants of bureaucratic offices or *madad-i ma’ash* grants. The Mughals had given shelter and patronage to Persian physicians who had fled to the Mughal

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<sup>49</sup> ‘Portraits of Hakim Sadra, Masihuz Zaman’, signed by Mir Hashim, folio of an Album, BM, Add.18801, no.30, cf. P. Brown, *ibid.*, pl.65. cf. S.A.N. Rezavi, “Physicians as Professionals” op. cit., pp.43-44.

<sup>50</sup> Discussing the salary of the state physicians, Manucci comments that ‘those bearing the title of Khan-that is “noble”, having a gross allowance of from twenty, thirty, fifty, one hundred to two thousands a year’; Manucci, *Storia do Mogor*, p.332; see also, Lahori, *Padshahnama*, II, p.422; Muhammad Waris, *Badshahnama*, MS, IO Ethe 329 (transcript of MS, Raza Library Rampur, at Department of History, Aligarh Muslim University), II,p.255. cf. S.A.N. Rezavi, “Physicians as professionals” op.cit. p.45.

<sup>51</sup> Muhammad Waris, *Badshahnama*, op. cit., II, p.306. cf. S.A.N. Rezavi, “Physicians as professionals” op. cit., p.45.

<sup>52</sup> For example see, Manucci, op. cit., IV, pp. 205,210; *Mirat ul Alam*, I, p 332; Lahori, *Padshahnama*, II, pp. 8,11,12,184,234,301,334 and also I, p. 332; Qazwini, MS.DM.OR. 173, Add.20734, II, p. 277; *Ma ‘asir ul Umara*, I, p. 589; cf. S.A.N. Rezavi, “Physicians as Professionals” op.cit. p.45.

<sup>53</sup> Manucci, op cit., IV, p. 205.

court due to the internal problem in Safavid Iran.<sup>54</sup> Most of these *hakim's* works were dedicated to emperor and gained prominence and come to constitute the inner core of court society.

The physician attached to the mausoleum of Saint Shah Wajiuddin at Ahmadabad got 10 annas per day. The Ayurvedic physicians (*Tabib-i-Hindi*) appointed for the treatment of the Hindus were two in number and one of them got 8 annas per day for expense and 8 annas more for medicine and other got 10 annas per day. There was a *Jarrah* (Surgeon) who got 8 annas per day for expenses. The total expenditure of the government on medicine and food for sick and poor patients amounted to 2000 rupees.<sup>55</sup>

Hakim Alavi appointed in the service of Muhammad Shah with a monthly salary of Rs.3000.<sup>56</sup> Mughals gave the hakims a much higher position and paid them much higher salaries, some of them received Rs. 50,000 per annum and occasionally bestowed upon them much higher rewards in cash.<sup>57</sup>

Another important aspect of the physicians regarding the dependence on them by their patron can be noticed in a story narrated by Tavernier. In December, 1665, when Tavernier passed through Allahabad, he was told that

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<sup>54</sup> Seema Alavi, *Islam and Healing: Loss and Recovery of an Indo-Muslim Medical Tradition 1600-1900*, Permanent Black, Ranikhet, 2007, p.32.

<sup>55</sup> Ali Muhammad Khan, *Mirat-i Ahmadi, Supplement*, op. cit., pp.160-161; See also S.H. Askari, op. cit., p.19.

<sup>56</sup> Hakim Zillur Rahamn, Op. cit. PHISPC, pp.386-87.

<sup>57</sup> M.Z. Siddiqi, "The Unani tibb (Greek Medicine) in India", *Islamic Culture*, July 1968, p.165.

the chief of the Persian physicians in the governor's pay had tried to kill his wife by throwing her from the top of a terrace. The woman survived the fall. The governor dismissed the chief physician departed with his family. But soon after the governor fell ill and recalled the physician. On getting his massage, stabbed his wife, children and thirteen slave girls, and returned to the governor at Allahabad. The governor said nothing to him and accepted him back in his service.<sup>58</sup> Similarly, Taqarrub Khan was retired and his son dismissed by Aurangzeb after the *hakim* had cured the imprisoned Shahjahan. But after sometime when Aurangzeb himself fell ill, the *hakim* was restored to favour and the dismissal of his son was revoked.<sup>59</sup>

Faqeer Azizuddin Bin Mohiuddin Hakim was born and brought up in Lahore and got his medical education from Hakim Rai. He treated successfully the disease of eye of Ranjit Singh, the ruler of Punjab who gave him *jagir* and made him as his personal assistant. He was an experienced physician and orator. He established a big school in Lahore and died in 1846 A.D.<sup>60</sup> Further, it appears that a physician joining the service of the state or the noble was not bound to his patron. He could, like a true professional, change his employer as and when he willed. This becomes apparent by the way the author of *Ma'asir-i Rahimi* mentions approvingly that after joining the service of Khan-i Khana, Hakim Mohammad Baqir remained attached to

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<sup>58</sup> Jean-Baptiste Tavernier, *Travels in India*, translated by V. Ball, Vol. I, New Delhi, 1977, p.96.

<sup>59</sup> Manucci, op. cit., II, iii, pp. 328-29,332,374-75; See also *ibid.*, p.195.

<sup>60</sup> Syed Zillur Rahma, *Dilli Aur Tibb-i Unani*, p.11

him throughout his life.<sup>61</sup> We also have the evidence of hakim Mohammad Husain Gilani, who on migrating to India initially joined the service of Mahabat Khan. After sometime we find in the service of Khana-i Zaman Bahadur. From there again he went to the court of Adil Shah at Bijapur, where he remained employed for a period of ten years. Later he joined the service of Khan-i Dauran.<sup>62</sup> A similar example is that of Hakim Momena Shirazi who, on coming to India, joined the service of Mahabat Khan.<sup>63</sup> In 1662 we find him employed with Bahadur Khan, the *subadar* of Allahabad.<sup>64</sup> In 1665 he joined the imperial service and became the chief physicians treating an ailing Shahjahan.<sup>65</sup>

Hakim Mehdi Bin Safi Lucknawi served Nawab Saadat Ali Khan of Awadh. Then his son made him the secretary of Qairabad and Muhammedi. After some time, he was appointed as the minister. In his ministry he established a big hospital in Lucknow. He also established a government press, a poor house and English school and an observatory headed by Herbert. After he reigned Muhammad Ali Shah re-appointed him as minister. He died in Lucknow in 1838 A.D.<sup>66</sup>

During the Asaf Jahi period Unani system of medicine was being used extensively in India. Medical works in Arabic and Persian were translated into

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<sup>61</sup> *Ma'asir-i Rahimi*, I, p.45.

<sup>62</sup> *Zakhiratul Khawanin*, III, pp.336-38.

<sup>63</sup> Lahori, *Padshahnama*, I, ii, p.349; *Ma'asir-i Jahangiri*, p. 345.3.

<sup>64</sup> Manucci, op. cit., II, p.76.

<sup>65</sup> Muhammad Bhakhtawar Khan, *Mirat'ul Alam*, ed. Sajida Alvi I, Lahore, 1979, p.332.

<sup>66</sup> Syed Zillur Rahma, *Dilli Aur Tibb-i Unani*, p.16.

Persian and Urdu. During this period a number of highly experienced physicians and surgeons flourished. Under Nizamul Mulk Asaf Jah I (1724-1748 AD) many talented medical personalities including famous physicians from Delhi like Hakim Abdul Husain Khan, Hakim Mohammad Ishfahani, Hakim Izzat Khan and Hakim Mohammad Jafer Shirazi etc were famous. Few of them were awarded Royal titles and some of them were state physicians.<sup>67</sup>

Medical education was also patronized in the Kashmir valley. The first Kashmiri physician of Mughal period was Khowaja Abdullah Ghazi who acquired his medical education from Hakim Danismand Khan of Delhi.<sup>68</sup> Hakim Ali Naqi was a famous physician of Kashmir during eighteenth century. He died in. A.D.1783.He successfully treated a number of patients whose cases had been declared incurable.<sup>69</sup> Hakim Dindar Shah was the best-known physician in Kashmir during the Sikh rule and appointed as a personal physician to Sheikh Ghulam Muhiuddin Governor of Kashmir during 1841-45. Hakim Maqbul Shah and Hakim Mustafa were son of Hakim Dindar Shah were also noted physicians.<sup>70</sup>

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<sup>67</sup> Khurshid Ahmad Shafqat Azmi, "Development of Unani system of medicine during Asafjahi period", *Bulletin of Indian Institute of History of medicine*, Vol. XXV, pp.183-184.

<sup>68</sup> Muhammad Ali, K.K. Bhutani and C.K. Atal, "Evolution of Medicine in Kashmir Valley", *Studies in History of Medicine*, Vol.VI, No.4, December 1982, pp.177-78.

<sup>69</sup> Ibid

<sup>70</sup> Ibid

We also hear of a female physician, Sati al-Nisa Khanam<sup>71</sup> in the seventeenth century who possessed great insight in both *Tibb* and management of diseases. She was very skillful in treating complicated diseases. She was deputed to take care of Princess Jahan Ara during her illness. She was also associated as a special physician with Begum Mumtaz Mahal. She ultimately died in 1646 at Lahore.<sup>72</sup>

Dona Juliana was a Portuguese woman physician of Mughal period that practiced at Goa and later shifted to the court of Emperor Akbar. She married with John Philip Bourbon, a French officer at Akbar's court.<sup>73</sup> There was also female surgeon in Mughal India which is recorded in *Ma'asir-i-Alamgiri*. When in March 1705 news came from Ahmadabad that Jahanzeb Banu Begum, wife of Shah Alijah, was ill and suffered from a swelling on one of his breast, a French Monsieur Martin reported.

“There is a skillful woman-surgeon (*haziqa*) among my relatives at Delhi. If she is summoned and after examining the patient tells me the details of the case she will be quickly cured”.<sup>74</sup>

A large numbers of physicians and individuals who practiced medicine in various branches such as Pharmacy (*Dawa-sazi*), Surgery

<sup>71</sup> Shahnawaz, *Ma'asir-ul-umara*, *op.cit.*, Vol. I, pp.260-61,295. (In the royal harem, sometimes a woman having a sound knowledge of *tibb* could also be attached. Lahori (Padshahnama, II, i, p.629) refers to sati-un Nisa Begum, the wife of Nasira, the brother of Hakim Rukna, who was attached to the household of Mumtaz Mahal.)

<sup>72</sup> Hakim Zillur Rahman, *op.cit.*, PHISPC, pp.383; see also, R.L. Verma, *op.cit.* p.359; see also, S.H. Askari *op.cit.* p.15. (mentioned the name as Umdat-un-Nisa Satti Khanum and died in Safar 1056 A.G); A.K Bagchi, *op.cit.*p.102.

<sup>73</sup> A.K Bagchi, *op.cit.*, p.125.

<sup>74</sup> *Maasir-i-Alamgiri*, *op. cit.* pp.293-94

(*Jarrahi*), Physiology (*Manafi-ul-Aaza*), Anatomy (*Tashrih-ul-Aaza*), Therapeutics (*Tashkhis-o-Mualijat*), Ophthalmology (*Ilm-i-Amraz Chashm*), Dietetics (*Ilm-ul-Ghiza*), Phlebotomist or bleeder (*Fassa or Ragzan*) Oculist or eye Doctor (*Kuhhal*) and Bone setters can be noticed during the Mughal period.

A number of famous physicians of this period, who were attached to the Royal court and also served the poor and sick, include Hakim Muhammad Amin Shirazi who held a prominent position in the court of Aurangzeb and was appointed to a suitable rank from the very beginning of his service.<sup>75</sup> Hakim Muhammad Amin Shirazi and Hakim Muhammad Mehdi Ardastani were honoured with the rank of 1500 *Zat* and 50 *Sawars* both enjoyed great confidence of the king. They were called upon to treat the king and other members of the royal family. When Emperor Aurangzeb suffered from fever in the 5<sup>th</sup> year of his rule, i.e. 1072 A.H/1662 A.D, these two physicians attended on the king. Hakim Muhammad Mehdi, who was entrusted to treat his ailment jointly, rendered prompt service and made appropriate diagnosis. After recovery the king bestowed on these two physicians the robes of honour and rewards.<sup>76</sup>

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<sup>75</sup> Mirza Muhammad Saqi and Munshi Muhammad Kazim, *Alamgir Nama*, Matba Ilahi, Agra, 1873, p.399; See also Zillurrahman, *Dilli Aur Tibb -i- Unani*, pp.50-51.

<sup>76</sup> Saqi Mustad Khan, *Ma'asir-i-Alamgiri: A History of Emperor Aurangzeb-Alamgir (reign 1658-1707 A.D.)*, Translated and Annotated by Sarkar, J.N., The Asiatic Society, Calcutta, 1947, reprint 1990, p.84; See also Zillurrahman, *Dilli Aur Tibb -i- Unani*, Pp.50-52.

Hakim Shamsa who reached the court along with daughter of Adil Khan Bijapuri and received a special robe, a horse with gold Saz, an elephant, the rank of 3000, the title of Shamsuddin Khan and posted under Khan Jahan Bahadur.<sup>77</sup>

Another Hakim Inayetullah son of Sadullah Khan elevated to the post of Bakhshi of Apprentices (*Shagird-peshah*) vice Hakim Muhammad Muhasan during the reign of Aurangzeb.<sup>78</sup>

Hakim Mir Muhammad Mehdi Ardastani attaining proficiency in medicine came to India and joined the team of the court physicians of Emperor Aurangzeb with the rank of 1000 *zat*. In 1663 A.D., was honoured with the title of *Hakim-ul-Mulk* and also rewarded on other occasions.<sup>79</sup>

Haziq Khan the son of Hakim Mohsin held a distinguished position in the realm of learning and skill. In the 49<sup>th</sup> regnal year of Aurangzeb's rule (1704-05). When the emperor got seriously ill Hakim Haziq treated him with meticulous care. After being cured by his treatment, the king bestowed on him a turban-crown (*sarpech*) in reward.<sup>80</sup> Hakim Haziq was also held in high esteem and respect during the reign of Muhammad Muazzam, who bestowed

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<sup>77</sup> *Ma'asir-i-Alamgiri*, op.cit, p.117.

<sup>78</sup> *Ibid.*, p.97

<sup>79</sup> Nawwab Samsam ud Daula Shahnawaz Khan and Abdul Hayy, *Ma'asir-ul-Umara*, Translated by Beveridge, H. and Annotation and compiled by Baini Prasad, Janki Prakshan, Patna, Vol. I, 1979, pp.607-08; See also Abdul Hayy, *Nuzhat-ul-Khawatir*, ed by Sharifuddin Ahmad, Vol. VI, Hyderabad, 1962-79, p.357. See also, Muhammad Bukhtawar Khan, *Mirat ul Alam*, I, op. cit., p.297.

<sup>80</sup> *Ma'asir-i Alamgiri*, p.303.

on him the rank of *Do Hazari Chahar Sad Sawar* in the beginning, which was later increased to *Seh Hazari wa Yek Hazar Sawar*. Hakim honoured in the reign of Muhammad Shah and received the rank of *panj Hazari* and the title of *Hakim ul Mulk*. He died in 1730 A.D. at Delhi.<sup>81</sup>

Another important Hakim namely Ibn Ramazan Baig Mazandarani emerged during Muhammad Shah reign. He wrote an admirable book on sex called *Asbab al-Nishat*, and dedicated to Muhammad Shah.<sup>82</sup> The reign of Muhammad Shah witnessed another able Hakim; Muhammad Kazim who compiled a book, *Akmal al-Sanaat*, in Arabic in 1736A.D. The ruler bestowed the title of *hadhiq-ul-mulk*.<sup>83</sup>

Hakim Muhammad Kazim Dehlavi was a very skilful physician and was honoured with the title of *Nawab Hadhiq al-Mulk*. He died in 1737.<sup>84</sup>

Hakim Mirza Muhammad Bin Ali Muhammad Gilani was a famous physician of Muhammad Shah. He completed a treatise *Matlab al-Mubashirin* which dealt about sexuality.<sup>85</sup>

Hakim Muhammad Sharif Khan was amongst the popular physician of Shah Alam II (1759-1806) reign and the founder of Sharifi family. He studied

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<sup>81</sup>Maulana Ghulam Ali Azad Bilgrami, *Ma'asir-ul Karam*, Book 2, KutubKhana Asafiya, Hyderabad, 1913, p.136; Syed Zillur Rahman, *Dill Aur tibb-i-Unani*, pp.60-61; *Nuzhat ul Khwatir*, op.cit p.61.

<sup>82</sup> Syed Zillur Rahman, *Dilli Aur tibb-i-Unani*, p.64; See also Altaf Ahmad Azmi, op.cit, 2004. p.231

<sup>83</sup> Syed Zillur Rahman, *Dilli Aur tibb-i-Unani*, pp.63-64; See also Altaf Ahmad Azmi, op.cit, 2004. p.232.

<sup>84</sup> *Nuzhat ul Khwatir* op. cit., Vol. VI, p.346.

<sup>85</sup> Syed Zillur Rahman, *Dilli Aur tibb-i-Unani*, p.64.

medicine under the guidance of Hakim Abid Sarhandi, Hakim Achhe Sahib and his father Hakim Akmal Khan. The emperor appointed Sharif Khan as his court physician and granted him *jagir* and conferred upon him the title of *Asraf ul hukma*.

Hakim Laqa Khan joined the service of Shah Alam as a court physician. Later he joined the service of Maharaja Madho Rao Sindhia and he was given the titles of *Fakhrul Haque* and *jagir* of Rs. 5000 in 1785 A.D. and appointed to the service of Maharaja at the Salary of Rs. 1000 per month. He died in 1801 A.D. at Agra at the age of 48 years.<sup>86</sup>

Hakim Salamat Ali Khan emerged during last eighteenth century and received the title of *Hejaqul khan* by Shah Alam in A.D. 1795. He shifted from native place Delhi to Banaras after the collapse of Nawabi rule and became mufti at the court of appeal in Banaras. He earned a very good reputation in the society.<sup>87</sup>

By the beginning of nineteenth century Buchanan mentioned that there were in the Gaur and Darbhanga another set of medical practitioners who reject prayer and exhibit herbs. There were 450 in numbers and people called them by various name as *atai baidyas* (doctor who defraud the ignorant), *Dehati baidyas* or village doctors, *chasa baidyas*, plough doctors, *Haturya baidyas*, or doctors who attend markets.<sup>88</sup>

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<sup>86</sup> Ibid., p.71.

<sup>87</sup> Ibid. pp.91-92.

<sup>88</sup> F. Buchanan, *An Account of the District of Purnea in 1809-10*, Patna, 1928, p.185.

Besides physicians there were also many *kamangar* (Bow-makers), *Jarrah* (Barber-Surgeon) who also occupied a place in Mughal India.<sup>89</sup> One of the oldest and most traditional occupations in world medicine had been that of the *Jarrah*, a handy medical practitioner who extracted tooth and performed other non-major operations, besides being beard-trimmer and hair cutter.<sup>90</sup> A person who treated wounds and performed bloodletting was also called a *Jarrah*. During the Mughal period the surgeon had been known as the *Jarrah*.

Buchanan mentioned that there were about 150 *Jarrahs* (Barber-surgeons), who cup, bleed and treat sores in Behar and Patna.<sup>91</sup> In the vicinity and city of Purnea, *Jarrahs* were the persons, who might be compared with surgeons. Despite their illiteracy they profess to treat sores and tumors with help of oils.<sup>92</sup> In Shahabad, there were 40 *Jarrahs* or Surgeon-barbers who treated sores with good skill of healing but did not applied drugs to *Ulcers*.<sup>93</sup>

Heber during the travelling of Casherpur (Kashipur) mentioned about a quack doctor as:

“The most remarkable things which I saw a quack doctor, a mussulman, educated. He said at Lucknow, and well stocked, not indeed with

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<sup>89</sup> cf. Irfan Habib, “Inside and outside the System”, in Deepak Kumar (ed.), *Disease and Medicine in India: A Historical Overview*, Tulika Publication, New Delhi, 2001, p. 79.

<sup>90</sup> H.R Turner, op. cit., p.138.

<sup>91</sup> F. Buchanan., *An Account of the District of Behar and Patna in 1811-12*, Vol. I, Usha Press, Patna, 1934, p.303. See also M. Alam, “Some Aspects of Healing Tradition in Bihar: Special reference to Buchanan”, Sinha, A.K. (ed.) In *Dimensions in Indian History*, New Delhi, 2005, pp.117-23.

<sup>92</sup> F. Buchanan, *An Account of the District of Purnea in 1809-10*, Patna, 1928, p.185.

<sup>93</sup> F. Buchanan, *An Account of the District Shahabad in 1812-13*, Patna, 1934, pp.175-176.

medicines, for he had only a very little satchel, but with all the usual grimace of a merry Andrew, and a good stock of confidence, with some little English and Persian.”<sup>94</sup>

In Gorakhpur, the physicians were earning Rs.100 to Rs. 300 yearly and the barber-surgeons were about Rs.10 to Rs.12 monthly.<sup>95</sup> In Purnea, Some physicians were working for wealthy families on a monthly pension and those who practiced at large had earned Rs. 10 to Rs.12 monthly.<sup>96</sup> In Shahabad, Physicians were earned Rs.10 to Rs.20 monthly but Unani Physicians were earning more than general physicians.<sup>97</sup>

**TABLE I**

**Hakims holding *mansabs* under Mughal Rulers:**

Reign	Those holding <i>Mansabs</i>	Others	Total
Akbar	08	34	42
Jahangir	07	12	19
Shahjahan	15	09	24
Aurangzeb	05	?	?
Total	35	55	85

<sup>94</sup> Reginald Heber, *Narrative of A Journey Through the Upper Provinces of India from Calcutta to Bombay, 1824-1825*, with notes upon Ceylon, Third edition, Asian Educational Services, New Delhi,1995., Vol. II, p.46.

<sup>95</sup> Martin, *Eastern India*, Vol. II, p.444.

<sup>96</sup> F. Buchanan, *An Account of the District of Purnea in 1809-10*, Patna, 1928, p.185.

<sup>97</sup> *Ibid*, p.175.

**TABLE II**  
**MANUCCI'S LIST OF TITLES OF THE PHYSICIANS AT THE**  
**MUGHAL COURT**

Aquim Busurg	<i>Hakim-i buzurg</i>	Great Physician
Aquim Elmulq	<i>Hakim-i mulk</i>	Physician of the country
Aquim Bina	<i>Hakim-i bina</i>	Physician of sight
Aquim Mossen	<i>Hakim-i muhsin</i>	Beneficent Physician
Aquim Janbalch	<i>Hakim-i jan bakhsh</i>	Life giving Physician
Aquim Momena	<i>Hakim-i mu'min</i>	Physician of believers
Aquim Muzin	<i>Hakim-i muzaiyan</i>	Physician in place
Aquim Fased	<i>Hakim-i fazil</i>	Instructed Physician
Aquim Abdul Fata	<i>Hakim-i        abdul-ul Fattah</i>	Physician slave of victory
Aquim Taccarrob can	<i>Hakim-i Taqarrub khan</i>	Favoured Physician
Aquim Salle	<i>Hakim-i Salah</i>	Good-natured Physician
Aquim Nabas	<i>Hakim-i Nabz</i>	Physician of the pulse
Aquim Alayar	<i>Hakim-i Allahyar</i>	Physician Cherished by God
Aquim Nader	<i>Hakim-i Nadir</i>	Physician Unparalleled
Aquim Coda Doste	<i>Hakim-i Khuda-dost</i>	Physician Friend of God
Aquim Faradbach	<i>Hakim-i Farah-bakhsh</i>	Physician giving repose
Aquim Emteriani	?	Physician Divine
Aquim Badan	<i>Hakim-i Badan</i>	Physician of the Body
Aquim Becata	<i>Hakim-i Be-khata (?)</i>	Faultless Physician
Aquim Moccorrom can	<i>Hakim-i        Mikarrab Khan</i>	Physician Assistant
Aquim El Zamana	<i>Aflatun-uz Zamanah</i>	Plato of the century
Aquim El Zamana	<i>Aristu-uz Zamanah</i>	Aristotle of the century

Aquim El Zaman	<i>Jalinus-uz Zamanah</i>	Galen of the century
Pocraig El Zamana	<i>Buqrat-uz Zamanah</i>	Hippocrates of the century
Bualy El Zamanah	<i>Bu' Ali-uz zamanah</i>	Bu Ali (Avicenna) of the century

**Source:** Manucci, *Storia Do Mogor*, I, pp332-33.

**TABLE III**

**A. Prominent Hakims of the Sultanate period:**

Alauddin Khalji	Hakim Maulana Badruddin Damishqi, Hisamuddin Marikali, sadruddin Marikali, Matraz, Aliuddin, yamani Tabib (physician from Yemen), Aizzuddin Badayuni, Mahchander, Jaja jarrah, Alimuddin ( <i>Kahhal</i> )
Mohammad Bin Tughlaq	Hakim Khawaja Shamshuddin Mustaufi and Hakim Zia Muhammad Masud Rashid Zangi Umar Ghaznavi

**B. Noted Physicians under the Mughals:**

Reign Of Emperor	Prominent Physicians/Surgeons
Babur	Mir Nizamuddin Ali Khalifa known also as Mir Khalifa (well versed in medicine), Abul Baqa, Maulana Yusufi (came from Khorasan on the invitation of emperor)
Humayun	Khwaja Khawind, a disciple of Maulana Imaduddin Mahmud, a famous physician (came from Shiraz).
Akbar	Hakim Misri, Hakim-ul-Mulk Shamsuddin, Hakim Abdul Fath Gilani, Hakim Zambil Beg, Hakim Ali Gilani, Hakim Hassan, Hakim Aristu, Hakim Fathullah, Hakim Mashi ul Muzaluddin Muzaffar, Hakim Lutfullah, Hakim Saif ul Mulk, Hakim Humam, Hakim Ain ul Mulk , Hakim Shifai, Hakim Nematullllah, hakim Dawai, hakim Talab Ali, Hakim Abdur Rahim, Hakim, Ruhullah, Hakim Fakhruddin Ali, Hakim Ishaq, Sheikh Hassan, Sheikh Bina, Mahadev, Bhim Nath, Narayin and Siwaji, Dona Juliana (Female Physician).

Jahangir	Hakim Ali, Hakim Mashiuzzaman, Hakim Abdul Shakur, Hakim Sadra, Hakim Ruhullah, Kahim Hassan, Hakim Amanullah, Hakim Momina Shirazi and Muqarrab khan (surgeon).
Shahjahan	Hakim Khushhal, Hakim Nizammuddin Ahmad Gilani, Hakim Mir Muhammad Hashim, Hakim Hadhiq, Hakim Daud Taqarrub Khan, Hakim Fathullah Shirazi, Hakim Zaiuddin Rahmat Khan, Hakim Nurrudin Mohammad Abdullah Ain ul Mulh Shirazi, Hakim Shaleh Shirazi Hakim Muhammad Amin Gilani, Sati al-Nisa Khanam (Female Physician).
Aurangzeb	Hakim Muhammad Amin Shirazi, Hakim Muhammad Mehdi Ardastani, Hakim Shamsa, Hakim Inayetullah, Hakim Muhammad Muhasan, Hakim Masum Khan, Hakim Muhammad Shafi, Hakim Muhammad Raza, Hakim Muhammad Amin Sawji, Hakim Abdurrazzaq Mashrab, Hakim Namat Khan Ali Shirazi*, Hakim Abdurrazzaq Ishfahani, Hakim Sheikh Hussain Shirazi**, Hakim Muhammad Hashim, Hakim Mohsin Khan, Hadhiq Khan, Hakim Muhammad Akbar Arzani, Sheikh Ahmad Qannoji, Hakim Abdullah Akbarabadi,
Mohammad Shah	Ahmad al-Tabib, al-Birgandi, Hakim Sheikh Kalimullah Jahanabadi, Hakim Ibn Ramazan Baig Mazandarani, Muhammad Kazim, Hakim Mirza Muhammad Bin Ali Muhammad Gilani, Hakim Gharibullah Bin Muhiuddin Natwani,
Shah Alam II	Hakim Israil Khan, Hakim Muhammad Sharif Khan, Hakim Razi Khan Bin Qutbuddin Khan, Hakim Mazhar Muzaffar, Hakim Shifai Khan Arshad, Hakim Muhammad Ishaque Khan, Hakim Laqa Khan, Hakim Salamat Ali Khan, Hakim Israil Khan, Hakim Imamuddin Khan
Ahmad Shah Thani	Hakim Raziuddin***, Hakim Zaka Ali Khan,
Akbar Shah Thani	Hakim Muhammad Ashraf Khan,
Bahadur Shah Zafar	Hakim Muhammad Ismail Khan, Hakim Raziuddin Khan, Hakim Imamuddin Khan,

Above list was prepared from various chronicles.

\*served under Shahjahan, Aurangzeb, Muhammad Azam Shah and Shah Alam Bahadur Shah (Muazzam)

\*\* He served also during the period of Muhammad Azam and Farukhsiyar and he received the title of *Hakim ul Muluk*.

\*\*\* Also served under the Asiud daullah of Awadh