Anthony Cerulli
*Somatic Lessons: Narrating Patiennenthood and Illness in Indian Medical Literature,*

The book is a significant contribution to recent studies of Indian medicine that extends the opening up of the patient-physician aspect of Āyurveda, a topic that has also been presented in Dagmar Wujastyk’s *Well-Mannered Medicine* (Oxford University Press, 2012). Cerulli presents the social and cultural aspects of Indian patienthood and illness, acknowledging the dominant religious features of traditional Indian medicine and establishing multidimensional connections between the human body, society, and religion. He observes that all bodies are the same on the priority of body dharma, i.e. to keep it healthy through physical and socioethical preparation (p. 149). The author is successful in establishing the somatic lesson throughout this book in a recurring theme that a healthy body is necessary because it is the support that will enable the fruition of all earthly and spiritual goals.

The author quotes the *Carakasamhitā* in chapter two and says that Vaidya, medicine, attendant, and patient are the four pillars of Āyurveda. The physician and the medicine of ancient India are widely discussed, but the author deals well with the comparatively ignored Āyurvedic medical patients of South Asia through a hermeneutic approach, which is increasingly popular. This fine study of medical narratives presents a beautiful balance between the ethics of illness and what it means to be a patient with qualities of memory, obedience, fearlessness, and expressiveness. Hopefully, we will have some studies on South Asian medical attendants in the Āyurvedic context in the future, which was also another important base of Āyurveda.

In the first two chapters, Cerulli situates patienthood and illness in the socio-religious somatic context. Chapter two includes the histories, contents, and the frequently observed theory and practice of three humors on the aspects of the classical and contemporary Āyurveda. Cerulli later focuses on diseases like fever (Chapter three), miscarriage (Chapter four), and king’s disease (Chapter five). These chapters try to answer questions like: what are the processes by which people become patients and what are the features of a patient? What is fever? In which ways, for which reasons, and at which times do women experience miscarriages? Does the king’s disease affect only kings and rulers? The narrative of such a general somatic condition as fever is interesting in the context of its emergence from attachment due to a cosmic decline in dharma related to Dakṣa’s sacrifice and the anger of the god Rudra (p. 59), and its later expressions through minimyths, and maximyths (pp. 55–8) is complex.
The detailed chapter on miscarriage—a result of demons taking refuge in women’s bodies due to non-dharma and general misconduct (p. 88) and being destroyed by Jātahārini, who is similar to the Buddhist goddess Hariti (p. 85)—has particular importance, because it highlights the gender bias in the conception of the female body and related conditions primarily formed by male narrators (pp. 94–101). The brief chapter on the king’s disease tells us that this king of illness is for everyone caused by an excess passion for sex, which in the case of King Moon resulted in the drying-up of the bodily fluids (p. 108), but can also be caused by psychological stress (p. 121). I am not sure why the author has chosen only the three above-mentioned diseases and ignored other visible maladies in the discussion like cholera (vīṣūcī), chickenpox, goitre (galagandha), piles (arśāṃsi), leprosy (kuṣṭa), madness (unmāda), ulcers (varṇas), diarrhoea (atisāra), tumours (gulma), etc. A seven-act allegorical play entitled the Joy of Life (freedom from disease and suffering and accordance between self and other) by Anandarāyamakhim comes into the analysis in Chapter six. This chapter adds and completes the previous discussion of rājayakṣman, reflecting the personification of illness in the fortress-model of the body with its treatment, as seen in the following example: ‘a legion of disease has infiltrated his fortress-body, obliterating his once-fortified immune-defenses, King Life again accepts the counsel of Social Knowledge and gets a brew of mercury-sulfur [i.e., modern medical value] resulted in the boost of immunity’ (p. 131). The entire play appears to have been a dramatic and metaphorical presentation to educate the masses that health and illness are products of the relationships existing among individual human bodies, the state, and religious institutions. The author has already analysed no less than eight medical collections and several non-medical sources including the Jīvānandanam, so it is curious that attention is given in a separate chapter on a text not neatly classified as an Āyurvedic text per se, the Jīvānandanam, which makes the book seem like it is flowing with the current intellectual overemphasis on texts when adding one or two more diseases could have made the book a more comprehensive study of illness and patienthood.

The author’s Āyurvedic narratives of fever, miscarriage, and rājayakṣman exposed a pathology in which an ethical transgression brings about a biophysical sickness that mythically originates among gods and comes down to humans. The book seems concerned with the kind of medical care that involves spiritual influences (p. 22) based on the particular social and religious attachment of patients and authors. How far this approach is reflected in the book is difficult to trace in overall philological explanations, especially when these stories might have played some role in physicians’ treatment of their patients. The author seems well-versed in Āyurvedic traditions and the language of those texts.