JOURNEYS WITH TIBETAN MEDICINE

HOW TIBETAN MEDICINE CAME TO THE WEST.
THE STORY OF THE BADMAYEV FAMILY.

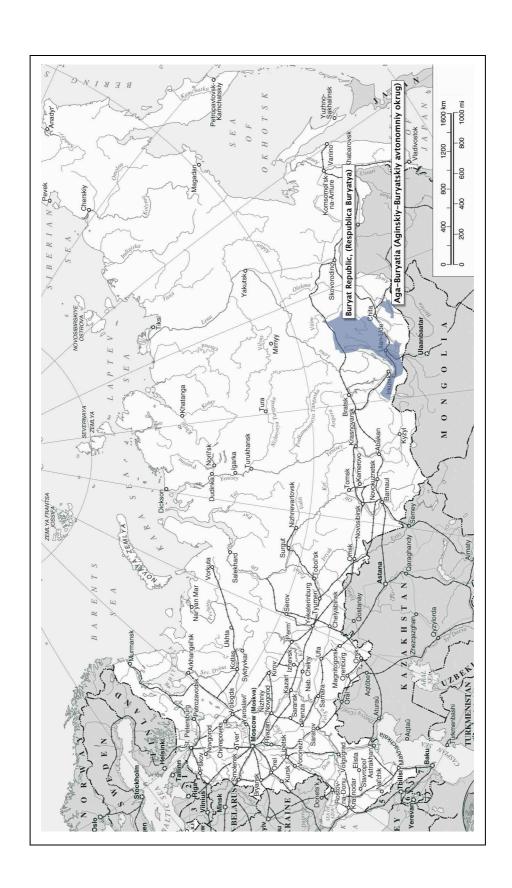
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Introduction

"It's two films. Either you make a film about the Badmayevs or you make a film about Tibetan medicine". Pandito Khempo Lama Ayusheyev, head of the Russian Buddhists, was sitting on a small podium and seemed to be in a bad mood. It was my first day in Buryatia, a Buddhist region in Russia bordering Mongolia. I had slept very little and still had a severe hangover from all the welcome vodkas we had drunk the night before. My hosts in Ulan-Ude, called Dulma and Bato, had organized a car, a driver, a translator and had freed themselves from all obligations in order to show me around. And so we had driven to Ivolginskiy Datsan, a monastery about 30 km outside of Ulan-Ude. I was very excited to get a first glimpse of Buddhism in Buryatia. Once we had arrived in Ivolginsk, Dulma began asking around for Pandito Khempo Lama and within 30 minutes she had arranged an audience for me. I was completely unprepared, but of course I couldn't say no. Shortly afterwards I found myself sitting on a low and narrow bench in front of this charismatic middle-aged lama. Ayusheyev – so his name, Pandito Khempo Lama being his title - had obviously caught a cold and every five minutes he would leave the room to blow his nose. He listened to me with an expression alternating between anger and lack of interest or he would ask me very pointed questions about my film project and intentions. I tried to explain that I wanted to make a film about how Tibetan medicine had come from Buryatia to my home country through the Badmayevs, a family of Buryat Tibetan physicians. I tried to explain my interest in the transformations and adaptations of Tibetan medicine and that I regarded it as something contemporary and alive. Ayusheyev continued to show his contempt until I asked him straight out if he thought it was a bad idea to make such a film. "Maybe yes", he said. I was desperate and had the impression that this important man whom I was wholly unprepared to meet had turned completely against my project and against me. Finally he asked me where I came from.

- Switzerland.
- And what language do you speak?

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Ivolginski Datsan, near Ulan-Ude Residence of Pandito Khempo Lama Ayusheyev.

01:14:15:13

- German, Swiss-German, to be accurate.
- So you are German and not Swiss.
- No I'm Swiss. It's a separate country. We have four official languages.
- Come on. You are German, just admit it!

I was completely confused and had no clue why he was fooling around with me. I had so obviously failed the test. Exhausted and hopeless I was taking out my red oversized passport and said:

- I'm Swiss! Here look - I have a passport!

Khempo Lama Ayusheyev burst out laughing and could hardly stop again. With a completely changed voice and expression he said: "OK. I will help you. What do you need?"

I was completely surprised. For some reason he must have decided that I had passed his test. Were my intentions honest enough? Or was it just Dulma and her personal endeavour that he didn't want to let down? I felt embarrassed because my attachment to my ego and worldly identity had

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been exposed so bluntly. At the same time I was slowly becoming aware of what had happened and what all this meant in a Buddhist context and I couldn't help but be fascinated by the intelligence, subtle irony and mastery of debate this man had shown. Ayusheyev's word and commitment to support my project opened many doors in Buryatia.

His spontaneous first reaction "It's two films. Either you make a film about the Badmayevs or you make a film about Tibetan medicine" had more implications than I first understood. Only later did I begin to comprehend its deeper meanings.

First, Ayusheyev's phrase contains a political dimension. Saying "either Badmayev or Tibetan medicine" implies that Badmayev has nothing to do with Tibetan medicine. It means: Badmayev does not belong to us. And it points to the politics of identity and the question of what Tibetan medicine essentially is and to whom it belongs. Only later did I learn how actively Ayusheyev had been involved in this particular struggle (see page 74). In a broader sense the link between medicine and politics became a focal point of my work.

Second: Ayusheyev's statement was visionary. To make one film out of the Badmayev-story and Tibetan medicine remained a big challenge throughout the entire editing process.

And third: The fact that things always happened just at the very minute I would arrive somewhere and there was therefore never any time to adjust and prepare became an earmark of the whole project.

Tibetan medicine has gone through tremendous transformations over time. These transformations are the main focus of my research. They appear – depending on the point of view one takes – as development and progress, as illusion and decay, as compromise, as survival strategy under communist rule, as phenomena of modernity or as resistance against it.

Tibetan medicine has a contested history. I followed it by examining the biographies of some of its prominent actors: The Badmayevs, a family of Buryat physicians who migrated to the West over four generations and 150 years. With them Tibetan medicine first came to St Petersburg and later to Poland, Switzerland, and the USA.

Tibetan medicine in Russia and the Badmayevs' story are relevant to me because in many ways they contradict a still dominant and wide-spread narrative about so-called traditional medicines: that they develop somewhere undisturbed in a remote place and then all of a sudden face modernity and Western biomedicine, against which they have to hold their ground. This standard narrative about traditions that are lost and perhaps reinvented later is becoming increasingly outdated amongst anthropologists. In public discourse it is, however, still omni-present. In every press report, and in every documentary about Tibetan medicine the same old stereotypes are repeated over and over again. Tibetan medicine is shown as an age-old wisdom or belief, without history, endangered and contested by modernity

Introduction



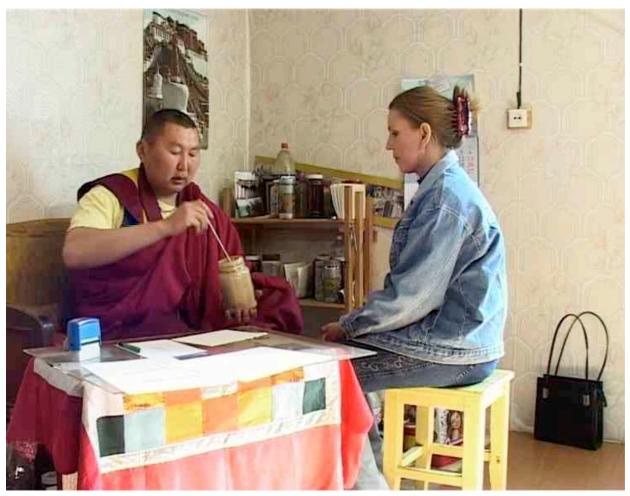
Tibetan medicine 01:02:18:20

Computerized pulse diagnostics used in a hospital in Ulan-Ude.

and biomedicine. This tale is one version of the old diffusion theory, which takes for granted that Western modernity slowly penetrates every region on this planet and leads to clashes with local traditions.

This is certainly a narrow perspective and it is at it's core Eurocentric (Randeria 1999, Sahlins 2000b, Conrad & Randeria 2002). It denies the fact that modernity has been shaped to a considerable degree outside of Europe and the USA (form Mintz 1985 to Gilroy 1996 and Stoler 2002), and it also overlooks the fact that a large number of different modernities have developed and do not seem to be disappearing (Eisenstadt 1987/2000, Therborn 1995, Arce & Long 2000, Sahlins 2000b, Wittrock 2000). This diffusionist perspective leads to a perception that regards contemporary non-western phenomenon like Tibetan medicine as relicts of a forgotten past.

The trouble already starts with the term "traditional medicine". In Russian "traditsionnaya meditsina" refers to biomedicine, and "netraditsionnaya meditsina" – non-traditional medicine – means everything else. In the



Tibetan medicine 00:00:56:15

Tsiren Lama, a former army physician, receives patients in a monastery in Ulan-Ude.

common dichotomy of medical anthropology, however, the latter is what is generally understood as "traditional medicine". Furthermore the concept of traditional knowledge is an outcome of the hegemonic claim of Western science to be in charge of producing knowledge. Within this perspective every other body of knowledge appears as local or traditional (Randeria 1999:380).

The Tibetan medicine I encountered suggests a different perspective: Tibetan medicine is a contemporary dynamic system of medical knowledge and practice. It is to be examined in the light of its history, its relationship to national politics and 'metamedical' cultural frameworks, and of course its encounter with the global forces of modernity and biomedicine (Janes 1995:7). This encounter is, however, not to be seen as a form of suppression through modernity, but rather as a process of translation and intertextuality (Randeria 1999:379). Sometimes "modernity" even becomes a pretext for a revival of traditional institutions (Kandiyoti 2000:59). Tibetan medicine has

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become a part of more than one modernity, thriving in the West as well as in

The concept of multiple modernities (Eisenstadt 2000) seems quite useful in this context because it does not confound modernization with westernization. The classical modernization theory included the prediction that all cultures would eventually become globally homogeneous and that Western culture, as the power of the functional fit between capitalism, democracy and individualism, would enable "modernity" to outperform anything brought forward by any "traditional" system sooner or later. Eisenstein, Wittrock, Therborn and many others argue that this classical notion of modernity falls short of providing explanations for all the countertendencies such as the anti-western and anti-capitalist movements that characterize our modern era so much. Their common frame of reference always used to be modernity - just another, a better one. They must therefore be seen as distinctively modern. Or as Wittrock puts it (2000:38): "In this perspective the age of modernity is characterized by the fact that the opponents of emblematic modern institutions cannot but express their opposition, cannot but formulate their programs with reference to the ideas of modernity". Modernity is understood herein as a phenomenon or a process in society and not as a distinct epoch.

A common feature of this phenomenon is an orientation towards the future (e.g. Beck et al. 2001:30). The world appears as something changeable. Progress becomes the centre of attraction. Wittrock sees "promissory notes", sets of hopes and expectations as the hallmark of modernity (2000:55).

This can easily be observed in the history of biomedicine. The first vaccines developed by Pasteur and the identification of the tuberculosis bacillus by Koch caused tremendous hope and expectations at the end of the 19th century. As Tibetan medicine developed parallel to the emergent biomedicine, its development and fate were intricately and deeply connected to biomedicine. Modernity – sometimes as a goal to achieve, sometimes as a thing to resist, but always as frame of reference – is crucial for the understanding of Tibetan medicine and its history in Russia.

A notion central to my approach is assemblage. Heterogeneous elements of, for example, ideas, designs, technologies, people and discourses, all with different histories and fates, are pieced together and emerge as an assemblage. As Michel Serres put it once:

"Consider a late-model car. It is a disparate aggregate of scientific and technical solutions dating from different periods. One can date it component by component: this part was invented at the turn of the century, another, ten years ago, and Carnot's cycle is almost two hundred years old... The ensemble is only contemporary by assemblage" (Serres 1995, cit. in Rabinow 1999:167).

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For example the machine for computerized Tibetan pulse diagnosis, such as was developed in Buryatia over the last 20 years (see page 71), can be seen as an assemblage. And even Tibetan historiography describes the original making of Tibetan medicine as a prototypical assemblage: In the 7th century King Songtsen Gampo called for the Indian, Chinese and Persian doctors to create a new medicine. The Persian physician was called Galenos — in obvious reference to the famous Greek physician from the second century A.D. Apart from the historical details and personifications it is widely accepted that representatives of the most advanced medical sciences of that time gathered at Songtsen Gampo's court (Yonten 1989:32ff, Meyer 1995:109f).

The notion of assemblage defines a field in which the interconnections between the strata of an assemblage can be examined. An important glue between these strata are metaphors, as they have the power to link together things and thoughts in different domains. Biomedicine and politics have relied on such metaphorical linkages since the dawn of bacteriology at the end of the 19th century. Germs threaten to invade the body just as foreigners invade a country (Weindling 2000). The body's immunological reaction is a border dispute, a battlefield, a bridge that must be defended against the evil intruder. The current talk of bio terrorism is much in line with this (Sarasin 2004).

Just as biomedicine has relied on metaphorical linkages to political discourses since its very beginnings, Tibetan medicine has also been in need of such non-medical and popular discourses in order to hold its ground. These discursive structures — Sarasin calls them interdiscourses — provide evidence and meaning to both sides (Sarasin 2001:136).

In the following chapters I will try to sketch out the political and social background in which Tibetan medicine in Russia evolved as a changing assemblage and the metaphorical linkages it used to survive.

The form I have chosen for this thesis is derived directly from my film: "Journeys with Tibetan Medicine". The structure of the text follows more or less the structure of the film and the chronology of events.

The images and quotes come mainly from the 80 minutes of footage I ended up using in the film (see timecode above the images). Whenever this is not the case, the timecode is missing. I decided to proceed in this way in order not to broaden my already broad subject and to enable the reader to recall scenes from the film.

At the end I will give a short summary of the methods I used as well as an account of the process of shooting and editing.

Transformations and the Tale of an Unbroken Tradition

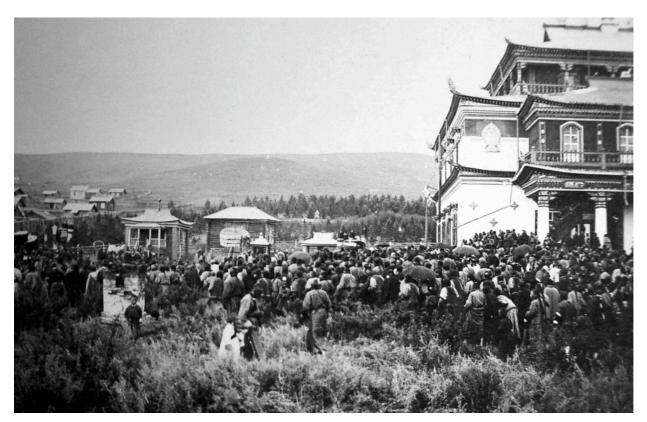
How Buddhism and Tibetan medicine came to Buryatia

The history of Tibetan medicine in Russia has close ties to the history of Buddhism in Russia. I will therefore start with a short introduction of how Buddhism came to Russia. Today there are three regions in the Russian Federation where Tibetan Buddhism is practiced: the Kalmyk Republic, the Tuvinian Republic and "Buryatia", which consists of the Buryat Republic and several smaller autonomous regions, like Aga-Buryatia (Aginskiy-Buryatskiy Avtonomniy Okrug). In the following I focus on Buryatia.

According to Snelling (Snelling 1993:3-11) and Terentyev (Terentyev 1996:60-70), migration of Buryat clans from Mongolia to the territory southwest and east of lake Baikal began in the second half of the 17th century and continued in the 18th century. About at the same time the outposts of the Russian empire reached Transbaikalia. Cossacks started raiding the area, building forts for trade and for their troupes. Russians and Buryats did not always get along well. At the same time, however, the Manchu dynasty expanded and the Buryats chose Russia over China as their protector and therefore also recognized its sovereignty. The Manchu rule had a reputation of being very cruel, and the Buryats went for the lesser of both evils.

The Buryats practiced shamanism and were not particularly interested in Buddhism at first. Only at the beginning of the 18th century did Buddhism slowly start to penetrate the steppes and semi-steppes east of lake Baikal. In 1712 or 1720 a group of about 150 monks from Tibet and Mongolia came to Buryatia. As Snelling puts it, they had been "thrown out for fomenting some kind of hocus-pocus at Gomang College in Drepung, the great monastic university just outside Lhasa" (Snelling 1993:4) and the rest were Mongols who had joined them on their way. Among the group was an *emchi* – the Mongolian word for a Tibetan doctor – called Chokyi Nawang Phuntsog. He is said to be an important founder of Tibetan medicine in Buryatia (Bolsokhoyeva 1999:3).

The lamas were allowed to stay by the government and were also exempted from taxation. Buddhism very slowly gained ground and only became an important part of Buryat culture in the 19th century. The tsarist regime did



Aginskiy DatsanBelievers gather for a religious festival around 1900.

not oppose this development, in spite of occasional protests by the orthodox clergy. The goodwill of the Buryat elite in the delicate border area was considered more important than orthodox qualms. In 1822 the so-called Speranskiy statute secured the Buryat privileges such as exemption from tax and military service (Snelling 1993:95). After that Buddhism started to flourish. Thirty-four monasteries were counted in 1850. Some of them had huge universities where several thousand students studied. The curriculum from the renowned colleges of Tibet was introduced, and the full system of Tibetan Buddhist education could be followed in Buryatia, up to the geshe degree, the Buddhist doctor of philosophy. Together with Buddhism, Tibetan medicine came to Buryatia (Terentyev 1996:62).

This short summary shows several things: Tibetan medicine in Buryatia did not develop undisturbed in some remote place over a long period of time until all of a sudden it had to deal with the arrival of a European power. Buryats and Russians came to the area approximately at the same time. World politics and global power strategies were decisive there right from the beginning. In addition, Tibetan medicine came to Buryatia through Buddhist missionaries, not aeons ago, but in the 18th and 19th centuries. The history of Tibetan medicine in Buryatia is deeply entangled — to use Randeria's notion (Randeria 1999/2002) — with Asian as well as European histories.



Aginskiy Datsan 00:04:10:19

Of course this Buddhism-centred account of Buryat history is only one possible version. Buryat history is also one of shamanism or nomadism and both their transformations (Thomas & Humphrey 1994, Humphrey 2002a:202ff, Humphrey & Sneath 1999).

Adaptation to local conditions

As Tibetan medicine in Buryatia was subjugated to global forces throughout its history, and these forces kept changing, the conclusion that Tibetan medicine changed as well seems a matter of course.

With this conviction I went to the "field". After my first interviews I started having serious doubts about it. I would usually ask my informants what major changes Tibetan medicine had gone through over the last 100 years. Their immediate and initial answer was typically: "No changes. Tibetan medicine is the same as it always was. It's a perfect system. No need to change anything."

This narrative of an unbroken tradition was just the one I had set out to deconstruct. And now all my informants were blowing in the same biased



Tsiren Lama, Ulan-Ude

00:01:19:12

"Our Buryat herbs are different from Mongolian herbs, and Mongolian herbs are different from Tibetan herbs. When physicians from Tibet visit us, they don't even know our herbs. This means that Tibetan medicine has already become Buryat. And similarly in Mongolia it has become Mongolian. Regarding the diffusion of Tibetan medicine this means that it can work anywhere on this planet, it just needs to get adapted to the local conditions."

horn. Was I just completely wrong? Was Tibetan medicine after all a system without history, inherited from the forgotten past? Was my hypothesis a purely academic one?

I don't think so. Firstly, the narrative of the perfect and therefore unchanged system of Tibetan medicine is a powerful one, especially in a world where biomedical dogmas experience decreasing half-life periods. Old and untouched Eastern wisdom is a good sales argument when somebody comes and says he wants to make a film. And secondly, most of my informants started telling me different stories after some time. Of course they agreed that the fate and face of Tibetan medicine had been and still are closely

linked to the political and social conditions and discourses, which have changed more than once quite radically in the last 150 years in Russia. In addition Buryat *emchis* are very proud of their ancestors and their efforts to buryatise the Tibetan knowledge of healing. Last but not least I was not the only one who had encountered this narrative of an unbroken continuity in Buryatia. Caroline Humphrey describes in her study of collective farms in Buryatia a very similar thing (Humphrey 1983:441), and maybe this narrative is even a hallmark of Soviet and post-Soviet modernity.

Once Tibetan medicine had reached Buryatia it started adapting. The major problem for Buryat *emchis* was that many of the traditional herbs did not grow in Buryatia and were therefore expensive and difficult to obtain. To solve this predicament Buryat *emchis* started to substitute the traditional herbs with local ones. This process of adaptation happened in a very dynamic and unstructured way. Every *emchi*, every school, and every monastery tested herbs, changed recipes, copied recipes and integrated experiences from other *emchis*. It is in this context that the so-called *dzhors* were written. The term *dzhor* reflects practical knowledge, very often without a direct connection to the classical medical texts of Tibetan medicine.

Over time about 80% of the original Tibetan ingredients disappeared and were substituted with local herbs (Dashiyev 1999:12)¹. The main difficulty was that the Buryat language had no suitable vocabulary for the Tibetan materia medica. Thus very often the Tibetan names were kept and used for one or more Buryat herbs simultaneously, often with differences between the regions. The same happened with the recipes. A Buryat *dzhor* is not meant to be understood without oral instruction. Dashiyev describes a *dzhor* as following:

Being familiar with numerous sources of this kind reveals that these formulae were replenished from time to time, as new information was added. The first pages of these manuscripts are worn out to the degree where the script is hardly visible, whereas the later pages appear rather clear and fresh. Notes that were documented at different times were written either with ink or pencil. Their contents were not systematized. They reflect the personal experience and specialized expertise of the physician. While preparing such material for printing, all thematic lacunas, inevitable in such notes, were filled with selections from literary sources. The entire text was grouped under headings, which were adopted from the classifications used in the *Gyushi*. Such editions are fraught with the danger of individual experience amalgamating with the previous literary tradition. Personal remarks such as 'I tested this', or 'approved remedy' and others, distinguished the author's favourite formulae. (Ibid.:13)

Many of the important medical texts, also the *Gyushi* (see page 27), had been translated into Mongolian. In Buryatia both Tibetan and Mongolian texts were in use. A *dzhor* is therefore very often written in a mixture of three

¹ A process that happened also in Mongolia and in Tibet (Clark 2000).



EmchiBuryat Tibetan doctor weighing ingredients.

languages — formulae in Tibetan, indications in Mongolian, notes and comments in Buryat. This was quite awkward, as Tibetan is written from left to right, and Mongolian in its old script from top to bottom. In addition not all Buryat *emchis* were able to read and write Tibetan. So over time the Tibetan parts were translated into Mongolian — yet another source of possible misunderstandings.

The *dzhors* are evidence of a dynamic process of adaptation in which Tibetan medicine emerged in a re-assembled new and specifically Buryat form. It was soon highly valued by the Buryats as well as the Russians. Buryat herbs as substitutes for Tibetan or Mongolian herbs gained an excellent reputation. This experience probably encouraged the view that Tibetan medicine is able to work everywhere on this planet, given it is adapted properly to the local conditions.

Sultim Badma

For about thirty years the Speranskiy statute of 1822 had provided the Buryats with considerable freedoms and privileges, such as their own courts, religious freedom and partial exemption from taxes. For the Orthodox clergy, however, the Speranskiy statute was always a thorn in their side. Under the governor of Eastern Siberia, Muravyev-Amurskiy, a new law was finally enacted in 1853: The so-called lama-act. It approved the existence and de-facto independence of the 34 existing monasteries. At the same time the Russian regime tried to limit the propagation of Buddhism. No new monasteries could be built, and the number of lamas was not allowed to rise above 216, plus 34 novices (Snelling 1993:7). The Orthodox Church also started missionary activities and was quite successful among the Buryats at the western shores of lake Baikal. The lama-act was, however, never really enforced, and in 1917 a total of 45 monasteries were up and running with a student and monk population of around 13'000 to 16'000 (Snelling 1993:7, Terentyev 1996:62).

It is not clear why the Russian government was reluctant to enforce the lama-act. Two reasons might have had an influence. First of all, the Crimean War that Russia fought against the French, English and Ottoman empires between 1853 and 1856 ended in a defeat for Russia. In the Paris treaty of 1856 the Black Sea was neutralized, and Russia lost its right to further deploy a fleet there. During the war a blockade in the Baltic Sea exposed just how vulnerable the Russian ports were. The strategic goal of running a major naval base on the pacific coast in the Far East was therefore reinforced. In 1860 Vladivostok was founded. Friendly relations with the inhabitants of the East were considered very important.

Secondly, the Siberian General and Governor, Muravyev-Amurskiy, was himself a friend and supporter of Buryat monastic culture. When around 1850 a typhoid epidemic² threatened his troops, he sought for help in Tibetan medicine at the Aginskiy Datsan³. He met with the *emchi* Sultim Badma. Sultim somehow managed to bring the epidemic under control, and Muravyev-Amurskiy was very impressed. The Governor asked Sultim to

² It might have been cholera as well. Sources vary.

³ A datsan is a monastery.

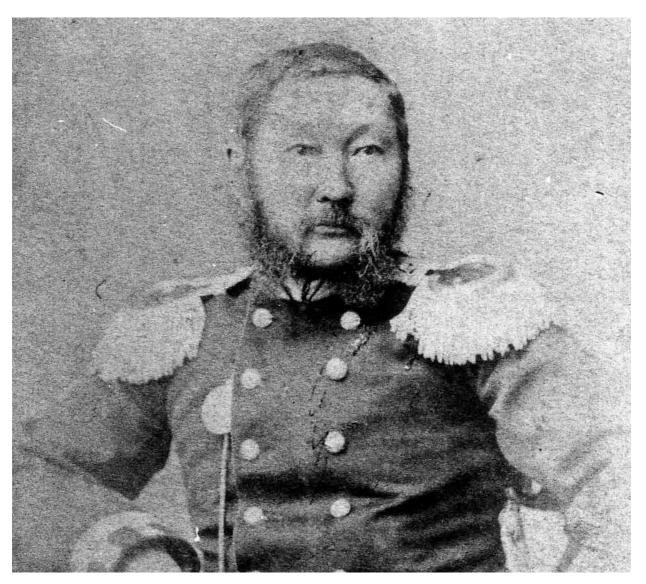


Sultim Badma

come with him to St Petersburg and to put his knowledge in the service of the Tsar⁴.

Sultim agreed and arrived in St Petersburg in 1857. There he was appointed to the Nikolayevskiy military hospital. In 1860 the following order reached the hospital:

⁴ So far the baseline of the story, derived from several sources, but mainly from interviews with Tatjana Grekova and Boris Gusev, as well as from their books (Gussev 1995, Grekova 1998, Gussev 2000). There are many unconfirmable rumours around Sultim. One says that he had studied in Tibet and was *sberete lama* – head lama – of Aginskiy Datsan (heard by relatives), another says he was not educated in Tibet but privately trained (Bolsokhoyeva 1999:5). Yet another story tells that Sultim healed the Governor's wife (Kaufmann 1985:9, Badmaev 2000:22) or even the wife of Tsar Alexander II (Gusev, personal conversation).



Sultim alias Aleksandr Aleksandrovich Badmayev

In 1861 Sultim was granted the right to wear a uniform.

The Lama Badmayev is instructed to apply his herbal healing drugs to patients who suffer from all stages of tuberculosis. As well, he shall try his remedies on cancer patients. The treatment shall be conducted under the supervision of the hospital physicians. In case he runs out of herbal ingredients, he shall inform the authorities in time, who are instructed to ensure sufficient supply. If he fails in treating the patients successfully, he shall not receive permission to practice as a doctor in our country. (Gusev 1995:8)

There are no documents about the exact results of the tests, but obviously Sultim's work satisfied the doctors in charge. In 1861 he received the title of assistant physician and the right to wear a military uniform. He was baptised and given the name Aleksandr Aleksandrovich Badmayev. Tsar Alexander II

became his godfather. For a short period of time Sultim was then sent back to Siberia to be on hand for the Governor. In 1864 he was called back to St Petersburg and started to study surgery at the Military Medical Academy. At the same time he taught Mongolian at the University. His request to be granted the title of an associate professor was, however, denied, as he had no academic certificates. He never finished his studies at the Military Medical Academy (Grekova 2000).

Early European attitudes towards Tibetan medicine

It is remarkable how Tibetan medicine was accepted and supported in St Petersburg in those days. It was indeed not the first attempt to translate Tibetan medicine into a European language and Western understanding. Tibetan medicine in Buryatia had found an echo in the West even earlier. In the mid-18th century a German named Johann Georg Gmelin travelled through Siberia and published a book about his adventures (Gmelin 1751). He met a Buryat *emchi* and described his methods and instruments (Dashiyev 1999:10f). Later, at the beginning of the 19th century, the Russian scientist Rehmann passed by Buryatia on an expedition to China and bought a "Tibetan pocket pharmacy" with 60 Tibetan herbal drugs (Gusseva-Badmaeva et al. 1972:164). He got very interested and invited a Buryat Lama – Sultim Tseden – to St Petersburg with the plan to establish Tibetan medicine in the West. Sultim Tseden died shortly after his arrival, however.

Another German – Rudolf Krebel – visited Buryatia and wrote:

In the whole of Southern Siberia Buryat physicians have a great reputation, and their help is sought whenever serious diseases occur. I was assured that they regularly achieve surprising success and only seldom does a sick person leave their office without betterment. As a proof hereof in the Medical Journal of Russia [original: "Med. Zeit. Russl."] 1849, pages 289-291, can be found [descriptions of] a healing of rheumatism of the lower extremities, of a disease that was diagnosed as phthisis and of a lip cancer. (...) Drugs have Tibetan and Mongolian names and most of them belong to the flora. (...) A major part of the used remedies grow wild and can be found across the Nerchinsk ridge. (Krebel 1858:49ff)

In Europe scientific biomedicine was in its very early stages when Sultim arrived in St Petersburg. Tibetan medicine was in many aspects clearly superior to traditional European medicine. It offered approaches where European medicine was rather helpless, e.g. in the domain of fighting typhoid, cholera and tuberculosis – the three common plagues in Europe. In the 1850s there was no hegemonic biomedical discourse yet. No one would call Tibetan medicine quackery just like that. The fact that Sultim had succeeded in bringing a typhoid epidemic under control was a strong argument for Tibetan medicine.

The question might emerge, what then enables Tibetan medicine to provide answers to any disease. Therefore I would like to give a minimal introduction to the concepts and methods of Tibetan medicine at this point.



Viktoria Kolotagina

00:14:08:00

A Tibetan physician regards the buman organism as an indivisible entity. One organ alone cannot fall ill. Usually illness is linked to one of the three bumors. If somebody suffers, for example, from heart pains it is usually a disturbance of the wind humor. During a diagnosis the physician will ask questions that may sound strange to a European doctor. He will ask whether you often have fits of dizziness, if you have a good memory, if you sleep soundly, whether you experience pains in the small of your back, and whether you are often cold. For a European physician it sounds strange that a bad memory or disturbed sleep or pains in the small of the back could be linked to a heart disease. However, if these questions are affirmed, they provide an indication of an imbalance of the wind humor.

Concepts and Methods of Tibetan medicine

Three Humors

Tibetan medicine regards disease as an imbalance of the three basic humors that make up human physics⁵. In Tibetan these three humors are called: rlung, mkhris-pa, and badkan; in Mongolian: chi, shara, and badgan. I will use the Mongolian terms here, as they are more common in Buryatia. Chi literally means wind and is responsible for the breathing and in a broader sense for psychic activity in general, like intellect, speech, and locomotor system. Shara means bile and regulates the process of digestion and metabolism. Badgan literally means phlegm and is, amidst many other things, in charge of the mucous membranes.

Wind, bile and phlegm as regulating systems are subjected to environmental conditions. Their balance changes with the seasons of the year and the age of the individual. In children phlegm prevails, in adults normally bile and in elderly people wind. Furthermore everybody has some kind of predisposition that makes him or her more vulnerable to a certain kind of imbalance.

The three regulating systems are closely linked to the five elements, or the five major representations: earth, water, fire, wind and space.

Badgan/phlegm can be understood as a composition of earth (bad) and water (gan). Earth as substance "builds" the bones and is linked to the sense of smell. Water is fundamental for all body fluids and the sense of taste.

Shara/bile is responsible for digestion and the required digestive heat is linked to fire. Fire itself is again linked to eyes and vision.

Wind and Space belong to *chi*. Wind – as it strokes the skin – is associated with the sense of touch, space with sound and the sense of hearing.

Another important concept in Tibetan medicine is the dichotomy between warm and cold. Diseases as well as remedies and food are distinguished between warm and cold, warming and cooling respectively. *Shara* is warm

⁵ This chapter is based on several introductions to Tibetan medicine (Clark 1985, Donden 1986, Dorji 1989, Martin 1991, Meyer 1992, Clark 1995, Meyer 1995, Nikolayev 1998).



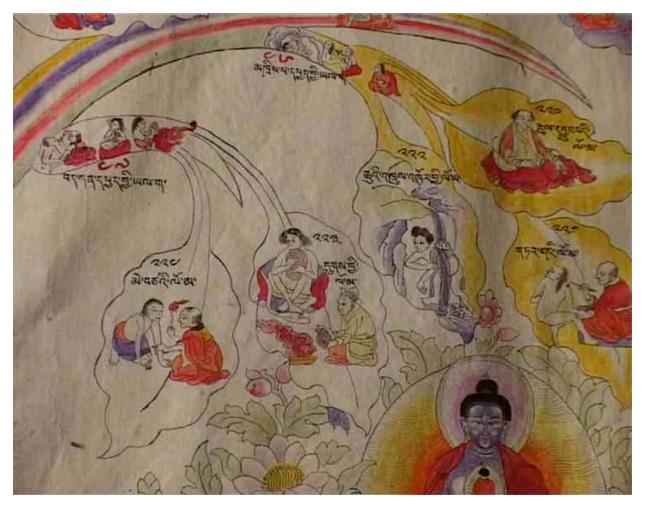
Padma AG, Switzerland

Taste has remained one method among many to ensure the quality and identity of herbs, even in industrial production.

and *badgan* is cool. *Chi* is a special case and is basically neutral. *Chi* can aggravate 'warm' and 'cold', much like wind is able to boost a fire as well as cool down the body. A *Chi*-imbalance is at the root of most diseases. Tibetan medicine follows the allopathic principle – a cold-disease is antagonized with warming remedies, therapies and nutrition, and vice versa.

Diagnosis

Three diagnostic approaches are described in the *Gyushi*: listening, looking and feeling. Listening means first of all listening to the patient, his or her case history, and the circumstances in which he/she lives and the diet he/she is used to. Looking mainly consists of a first visual impression of the patient (posture and movements), as well as the examination of his/her tongue and urine. Colour, smell, and bubbles of the urine are examined.



Atlas of Tibetan Medicine

A section of the diagnostic tree from the 17th century Atlas of Tibetan medicine, an illustration of one of the most important commentaries of the Gyushi.

The third approach – feeling – leads to the most distinctive diagnostic technique: pulse reading. The doctor reads the pulse with three fingers on the radial artery on both wrists. With each finger two pulses are felt, one on the left, and one on the right side of the fingertip.

In this way a total of 12 points are examined. Consecutively the pressure at each of the 12 spots is raised for a couple of seconds, and the pulse is observed. Notions like sunken, protruding, faint, strong, bulky, thin or more complex ones such as "like a banner in the wind", "like dripping water" or "like a jumping frog" are used to describe the state of a pulse.

Every pulse corresponds to an organ. On the right wrist the forefinger measures the pulses of heart and small intestine (for men: lungs and large intestine), the middle finger the ones of liver and gall bladder, and the ring finger the ones of left kidney and bladder. On the left wrist the forefinger is linked to lungs and large intestine (for men: heart and small intestine), the



Moxibustion 01:04:52:09

One of the many methods practiced in the Eastern Medicine Center in Ulan-Ude.

middle finger to spleen and stomach, and the ring finger to right kidney and sexual organs. Pulses vary with seasons, age and sex. Note the difference for lung and heart pulses between men and women.

All diagnostic methods together deliver an overall picture of the patient and the imbalance of *chi*, *shara* and *badgan*.

Treatment

Treatment consists of external therapies (massages, moxibustion, baths), ritual treatments (reading mantras, meditation practices) and mostly herbal medications. Which therapy is applied when and where, varies from doctor to doctor and from region to region. Generally treatment with herbal medications is the most common and most important. Very often a consultation consists of a short interrogation, a pulse diagnosis, sometimes a urine analysis, and the prescription of herbal medications.

Formulas and medications

The Tibetan materia medica consist of minerals, animal substances and a huge number of medical herbs. Especially in Mongolian and Buryat traditions minerals and animal substances are used only rarely; in Tibet and Northern India they are still common, especially for the preparations of so-called Jewel Pills. The *Gyushi* says there is nothing on earth that could not be used as medicine.

Medical substances are grouped by their properties. The grouping process relies on taste. Taste is of paramount importance in Tibetan pharmacology. There are six different tastes: sweet, sour, salty, bitter, astringent and hot. Every taste is linked to the three humors. Sweet, sour, salty lower *chi*; sweet, bitter, astringent lower *shara*, and sour, salty, hot lower *badqan*.

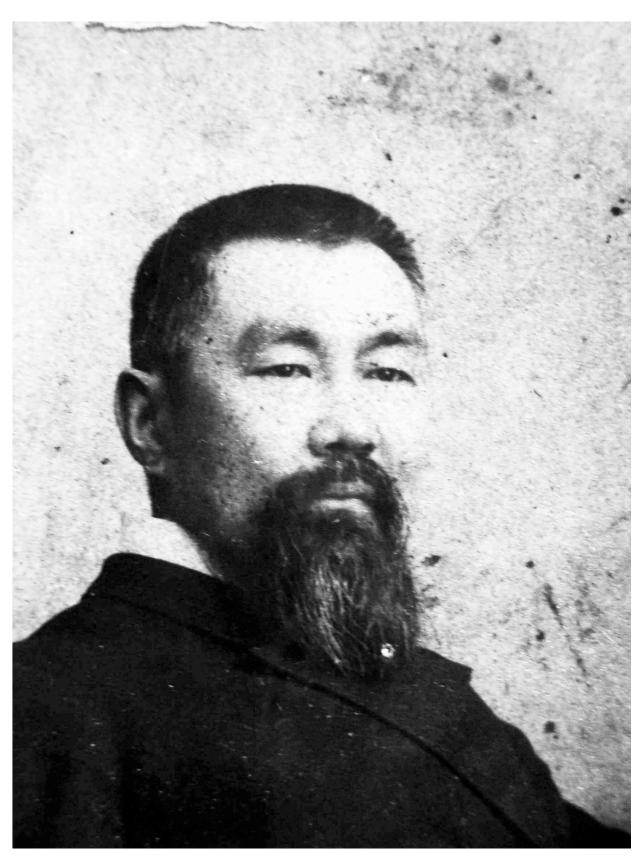
Another important dimension of properties are the so-called eight potencies: heavy/light, oily/rough, hot/cold and blunt/sharp. The taste of a substance is directly linked to one of the eight potencies. Sour, hot and bitter in this order are increasingly light and rough.

All the properties can be perceived without technical equipment. A subtle sense of taste is crucial for a Tibetan pharmacist and is developed through training. Taste is the basis for working with formulae. First, the properties of taste give a possibility to test a single plant for its quality. Second, they enable a pharmacist to substitute rare plants with readily available ones.

A Tibetan drug always consists of several ingredients, often 20 or more. One group of ingredients usually affects the warm-cold balance, another group takes care of rebalancing wind, bile and phlegm, and a third group operates directly on the organs (Nikolayev 1998:52). According to another source, there is, in most cases, one major group of ingredients and two minor ones. Of the two minor ones, one supports the effect of the major group and the other one helps suppress unwanted side effects⁶.

The raw materials are first dried and grinded, then mixed and eventually pressed into pills or simply used as powder or decoction. The actual process of mixing is considered very important. The ingredients need to be mixed into a perfectly homogeneous whole. There is also a metaphysical dimension to this. During the process of mixing mantras are chanted to increase the potency of the remedy. Mixing and chanting can last for several days. Today in most places machines are used to grind and mix. Several *emchis* told me that they considered it a compromise or necessity of modern life but eventually it would always affect the drug's potential negatively.

⁶ Peter Badmajew, personal conversation. More about my interview partners see page 85.



Zhamsaran alias Pyotr Aleksandrovich Badmayev

Pyotr Aleksandrovich Badmayev

Sultim alias Aleksandr Aleksandrovich Badmayev established a pharmacy in St Petersburg on Suvorovsky Street. It was the first Tibetan practice in Europe. Little detail is known about it, but fact is that after a while he called for his brother. Sultim was the eldest of seven sons⁷. His youngest brother, Zhamsaran (born around 1850), had just finished his studies at the Russian Gymnasium in Irkutsk. Sultim invited him and in 1870 he arrived in St Petersburg⁸. He was baptised and became Pyotr Aleksandrovich Badmayev, his godfather being Aleksandr III, the Tsar's son and heir.

Pyotr entered the Imperial Military Academy in St Petersburg. But after a year he was expelled from the course because he failed to pay the fees. After Muravyev-Amurskiy guaranteed for him he began studying again at the Oriental Faculty of St Petersburg. After graduation he again matriculated at the Imperial Military Academy as a casual student. Quarrels with his professors, however, prevented him from passing the final examinations (Grekova 1998:30-36). According to his grandson Boris Gusev, he didn't take the exams because of the required vow to use exclusively European methods of treatment. Be that as it may he did not receive a diploma but at first this was hardly a problem.

Sultim died 1873. By this time Pyotr had already gained ground in St Petersburg. He married a noble woman and soon became an intriguing figure of the Russian elite. Having studied in the Russian gymnasium in Irkutsk he was familiar with Russian culture and language. As the future Tsar's godchild he was well established in the high-society. Pyotr opened up a clinic on the Poklonnaya Hill just outside of St Petersburg. His practice was a tremendous

⁷ He probably had sisters as well. Balzhir Zhargalov, who has been working on a pedigree for the last 30 years, says there were seven brothers and seven sisters. As sisters were traditionally not included in family trees this cannot be verified.

⁸ The dates are controversial: Gusev states that his grandfather was much older. According to photos and Grekova's archival research, these dates seem the most reasonable: Pyotr was born either 1849 or 1851 (Grekova 1998:25) and arrived in Petersburg 1870 (Grekova 1998:29).



Marriage
Pyotr's marriage with Nadezhda Vassilyevna, probably in 1872.

success. People such as the Minister of Finance, Count Witte, were among his patients.

At the end of the 19th century St Petersburg was one of the leading centers of tibetology and research on Buddhism. Up to then the study of Buddhism had been an entirely philological enterprise. Texts were translated and analyzed, but there was only little known about actual Buddhist practice. When the Russian academics discovered Buddhism as a lived practice in their own hinterland, they were completely fascinated. In addition a certain mysticism was widespread among Russian elites at the turn of the century.

⁹ According to Andrey Terentyev and based on correspondence between orientalists of that period, Russian scientists considered their access to Buryat knowledge and raw materials as a crucial advantage over their Western collegues (see also Gammerman et al. 1935:228f, Borozdin 1929:323).

People like the Roerichs and Madame Blavatsky were captivated by the mystical dimension of Buddhism and had many followers. As Snelling writes:

This was a time of great ferment in Russian culture, and many people, growing dissatisfied with the conventionalities of Orthodox Christianity, were casting around for new spiritual directions. (Snelling 1993:9)

Pyotr's translation of the Gyushi

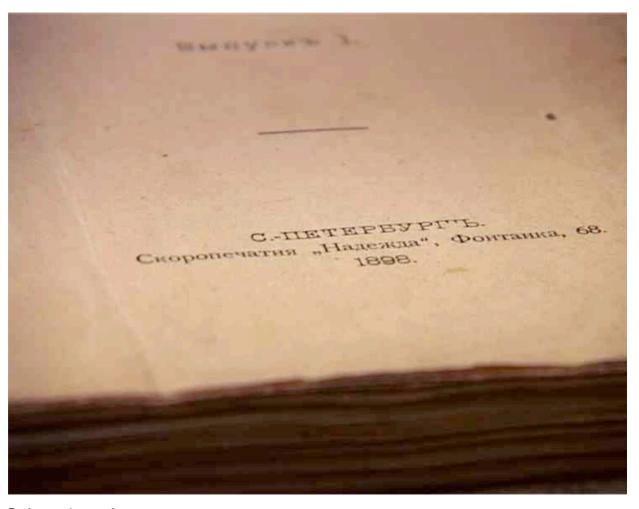
Pyotr's attitude towards mysticism was ambivalent. He certainly knew how much it helped his ambitions. At the same time he felt it was time for Tibetan medicine to open up and become a Western style science. He saw as a first step in this direction the translation of the main treatise of Tibetan medicine: The "Quintessential Tantras of the Secret Oral Transmission of the Eight Branches of the Knowledge of Healing" – short: Four Tantras or Gyushi – are the standard textbook of Tibetan medicine. In a highly concentrated, systematized and sometimes encrypted fashion the Gyushi contains all the basic concepts and practices of Tibetan medicine. Studying the Gyushi and normally learning it by heart is until today the starting point for studying Tibetan medicine.

The genesis of the *Four Tantras* is subject to a heated debate among Tibetan scholars. Some take it for what it claims to be: the authentic teachings of the historical Buddha in his emanation as Medical Buddha. The famous scholar Vairocana then translated the *Four Tantras* from Sanskrit into Tibetan and handed them over to Padmasambhava, his teacher and the founder of tantric Buddhism in Tibet. Padmasambhava decided to hide them (together with many other secret texts) so they would be found again when the time was right.

The other fraction of Tibetan scholars point to the obvious Chinese influence and suggest that a Tibetan scholar must have been the author (most probably one of the two Yuthogs). Those scholars who regard the *Gyushi* as Buddha's authentic words explain the non-Indian influences by saying that the text was retrieved in the 11th century and adapted to the local conditions of Tibet by Yuthog the Younger (Meyer 1995:114, Yonten 1989:32-42, Karmay 1989:19ff).

Badmayev's efforts to translate the *Gyushi* into Russian were not the first attempt at doing so, however. At the beginning of the 19th century, when Rehmann brought the Buryat *emchi* Sultim Tseden to St Petersburg, they had also planned for a translation of the *Gyushi*. But Sultim Tseden died shortly after arrival. Sultim Badma had also been requested to do such a translation. Two philologists from the University of St Petersburg had been appointed to assist him. But the three did not succeed either, probably because the philologists didn't know much about Tibetan medicine and Sultim's Russian language skills were very basic¹⁰.

¹⁰ According to Grekova, personal conversation.



Badmayev's translation

00:29:00:12

In the foreword he writes:

"The majority of the readers is most likely not familiar with Eastern literature, especially not with its scientific genre. We therefore considered it necessary to give some elucidations concerning the following excerpts of the Gyushi. We speak only about excerpts, because in presenting the Gyushi we wanted to conceal everything that belongs to Buddhism and mysticism. This means: we excluded everything that belongs to the ignorance and superstition of Buddhist lamas."

JOURNEYS WITH TIBETAN MEDICINE

Pyotr Badmayev's attempt was – at least in part – successful. He invited Buryat scholars to help him and in 1898 the first two of the *Four Tantras* were published. He also began to translate the *Third Tantra*, by far the longest (the manuscripts are in the possession of his descendants), but it was never completed. One of Pyotr's secretaries – Vishnevskiy – gave an account of the translation process. It provides insight into the specific assemblage from which this pioneering work emerged:

I worked for Pyotr Aleksandrovich Badmayev as an assistant secretary and I participated in the translation of the ancient Tibetan medical manuscripts into Russian. The work was done in the early morning hours before Pyotr Aleksandrovich left to receive patients in the city. (...)

The work itself was done like this: a box containing printed sheets was put on the table and passed to the old lama. A young lama accompanied him. The old man was sitting in an armchair at the table; the young lama was standing behind the armchair. The young lama had a blue silk handkerchief in his hands with which he, if necessary, cleaned the old man's nose. I was interested why the old man couldn't clean his nose himself and employed a man for it.

Pyotr Aleksandrovich explained to me that the old man was considered sacred and didn't want to endanger living creatures in the air with an arbitrary movement of his hand. I was pleased with this explanation.

The sheets were taken out of the box and put in front of the lama. He read what was written and translated it instantly from Tibetan into Buryat. Pyotr Aleksandrovich (...) translated the lama's words straight away into Russian. Tushlevich, the second secretary, and me (...) wrote down what Pyotr Aleksandrovich was saying. After each session Tushlevich and I compared our texts and (...) discussed our work with Pyotr Aleksandrovich. 11

Pyotr's translation was clearly aimed at a Western audience. In the foreword (as quoted to the left) he makes clear what his intentions and ambitions were and what he thought the future of Tibetan medicine was.

Of course Badmayev's *Gyushi* was not appreciated by everybody. Some considered it as a proof that Tibetan medicine was quackery, others opposed it as it denies the Buddhist basis of Tibetan medicine so radically.

But can there be Tibetan medicine without Buddhism? What are the Buddhist elements in Tibetan medicine?

Tibetan medicine's view of the world is essentially a Tibetan Buddhist one. Buddhist philosophy regards suffering ultimately as a mental thing, because the world, as we see it, is an illusion. The mental pitfalls that afflict the human being and keep humanity trapped in the circle of rebirth are delusion, hatred and attachment. All three are ultimately a result of ignorance about the true existence. Tibetan medicine proclaims causality between these mental meanders or poisons and the three humors. The foolishness to be

¹¹ Quoted from a manuscript in the family archives.



Orthodox service 00:18:25:08

Serafin Sorowskiy Temple, St Petersburg.

deluded leads to excessive *badgan*; hatred and envy aggravate *shara*, and attachment or passion result in too much *chi*.

This worldview could easily lead to constructivist fatalism: If everything is illusion then disease is illusion as well. So what is medicine good for? The key concept in Buddhist philosophy that prohibits this short-circuit is the principle of *compassion*. Even if disease may not be what it seems to be, human suffering is real and cries for compassion. Above all, many diseases are not caused by the mental poisons of this life, but come from an earlier one. These karmic diseases can't be cured, at least not completely. Only spiritual practice and insight can help.

Institutionalizing education

To view Badmayev's assault on "bad lama doctors" only as an expression of his eagerness to show his orthodox disposition would, however, miss the point. His scathing criticism echoed a Buryat debate of that time. Medical

JOURNEYS WITH TIBETAN MEDICINE

education in Buryatia underwent considerable changes during the second half of the 19th century. Before that time an experienced emchi had one or more disciples who learned Tibetan medicine in a very practical way over a long period of time, either within a monastery or often within family lineages outside the monasteries. These family lineages of Tibetan physicians were common and contributed to a vast amount of heterogeneity in the practice of Tibetan medicine. Specific lineages of Tibetan medicine also existed in Mongolia and Tibet. Some of them had an excellent reputation; some did not. The problem of undereducated emchis was thus widely recognized. In the second half of the 19th century efforts to institutionalize medical education began to have an impact¹². In 1869 the first manba datsan – as the medical schools are called – was founded in Tsugolskiy Datsan, one of the big monasteries in Buryatia. The curriculum of Labrang monastery in Eastern Tibet (Amdo) served as a model. In the following decades manba datsans were also founded in the monasteries of Aginsk and Atsagat. Basic studies lasted for four to five years, and the exams were public, following the academic tradition of Tibetan Buddhism (Bolsokhoyeva 1999). The exams consisted of a debate on various aspects of the Gyushi.

The practical education component lay in the hands of the teachers and normally lasted much longer. Students would assist them in their practices and join the expeditions to gather medical herbs in the steppes and half-steppes of southern Siberia (Gammerman 1964:582ff).

Pyotr Badmayev also had very distinct ideas about education. He established a private school on the Poklonnaya Hill. It was for promising Buryat children and opened up probably around 1893¹³. Although it followed the curriculum of a regular Russian gymnasium it was never granted full recognition as such. The only photograph I came across (see opposite page) shows Pyotr Badmayev and Count Ukhtomskiy (the two men in Western clothes), as well as a whole delegation from Buryatia and the future students. Amongst the students were four of Pyotr's nephews (Zhamyan, Ossor, Tsiren Dondok and Tsirenshap) as well the future Khempo Lama Gamboyev¹⁴. At some point Pyotr obviously obliged the Buryat children to adopt Orthodoxy, which led to quarrels with their parents. As a consequence some parents called their children back home.

¹² Janes describes a similar situation for Tibet (Janes 1995:12).

¹³ I couldn't find out the exact date. 1893 refers to an incription on the rear side of a photograph I consider to be taken in the early days of the school.

¹⁴ According to Gusev, personal conversation.

Tibetan Medicine and the "Great Game"

Pyotr Badmayev also supported Gombozhap Tsibikov's studies at the University of St Petersburg. Tsibikov later became a famous Buddhist scholar. In 1899 he left for Tibet, where he stayed for about three years and took some of the very first photographs of Lhasa and Central Tibet (Schaumian 2000:18, Kuleshov 1996a:25, Savelli 1997, Andreyev 2001). Tsibikov was often called a Russian spy; a consequence of the Great Game – the secret struggle over influence in Central- and Eastern-Asia between the Russian and British Empires (for an overview see Hopkirk 1990).

Pyotr Badmayev also played a role in the Great Game. In 1876 he was called to work for the Russian Ministry of Foreign Affairs. In 1883 he came up with a very ambitious project. He proposed that Russia should annex Manchuria, Mongolia and Tibet. Pyotr predicted the fall of the Manchu dynasty in China and suggested that Russia be prepared for this. Count Witte, at that time not only the Minister of Finance but also probably the most influential figure at the court, supported Badmayev's idea. Badmayev planned to establish a trading house in Chita as a camouflage and base camp for further activities. Apparently he was given two million roubles in gold for his plan, an enormous sum at the time (Snelling 1993:40-73, Schaumian 2000:33-48, Kuleshov 1996a:12, Grekova 1998:37-46, Gusev 1995)¹⁵.

During these years the Great Game was at its peak. British and Russian "geographical expeditions" were sent out to prepare the two empires for a possible military confrontation (Kozloff 1910, Younghusband 1910). Badmayev's trading house in Chita served as a base camp for agents who made their way to Manchuria and Beiying. In 1895 one group of Badmayev's agents, disguised as pilgrims, made its way to Tibet and Lhasa – the Forbidden City.

This expedition would have far reaching consequences for the political landscape in Asia in general and especially for Buddhism and Tibetan

¹⁵ Most of the following information on Badmayev's Great Game activities are derived from these sourses as well as interviews with Grekova, Gusev, Andreyev and Terentyev.



Badmayev's school

In the back (in Western clothes) Prince Esper Esperovich Ukhtomsky (left) and Pyotr Aleksandrovich Badmayev. First row from left to right: Zyrenshap, Zyren Dondok, Ossor (alias Nikolai), unknown, Zhamjan (Vladimir).

medicine in Russia. Badmayev's agents met in Lhasa with a Buryat lama whose name was Agvan Dorzhiev. As a young lama Dorzhiev had left for Tibet to study at one of the famous colleges. Having excelled in his studies he had been appointed teacher of his Holiness the 13th Dalai Lama, a young child at that time. The Dalai Lama and Dorzhiev became friends, and the latter became an influential advisor (Andreyev 1993/1996, Snelling 1993).

Dorzhiev quite liked Badmayev's plans. On one hand the crumbling Manchu authority was seen as a chance for Tibet to become independent from China. On the other hand it also spelled a great danger. British, Russians or any new Chinese powers could easily try to occupy Tibet (Shakabpa 1984:192-205). To secure official Russian protection and gain de facto independence looked like a good idea. Russia had already proven to be tolerant towards Buddhism on its territory. A popular myth in Buryatia even saw the Russian Tsars as incarnations of the White Tara, an important Tibetan deity, be this as a sign of gratefulness for a certain protection against foreign powers or simply a metaphorical analogy between White Tsar and White Tara.

Dorzhiev also had very personal reasons to support a rapprochement between Russia and Tibet. As many of his countrymen who came to Tibet in order to study he had first been technically illegal there (Andreyev



Agvan Dorzhiev

2001:351). Tibet was a closed country, in part even for fellow Buddhists. A closer link to Russia could be of great benefit to all the Buryat monks wanting to study in Lhasa.

Not many details are known about the contacts between Badmayev's agents and Dorzhiev. In Badmayev's periodical "Live in the Border Areas" he published in Chita it says:

"In Beijing, several provinces of China as well as in Mongolia and the Eastern Tibetan province of Amdo employees of the Badmayev Trading Company have made friendly relations. With the Dalai Lama closer contact has not yet been established but will soon be (...) with the help of the Buryat lama Agvan, one of the four principle rulers at the Dalai Lama's court" 16

The 13th Dalai Lama agreed to the plan and sent Dorzhiev to Russia and to find out more about possible cooperation.

¹⁶ According to a copy in the family's archive in St Petersburg. No date of publication available.



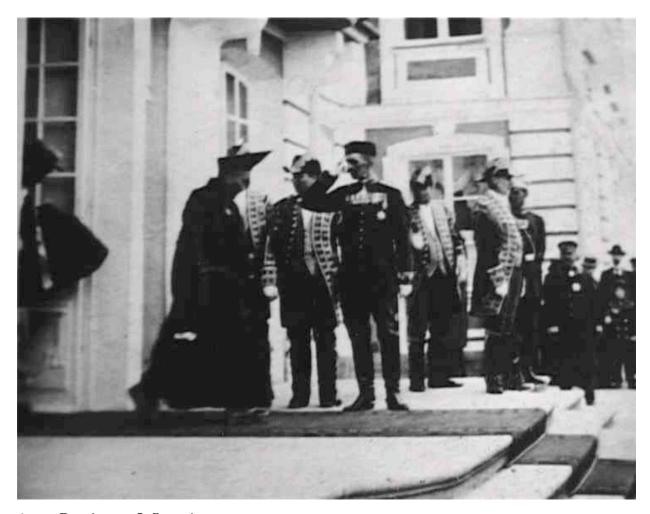
Tsugolskiy Datsan 00:08:19:00

This "Gate of Luck" near Tsugolskiy Datsan used to be a starting point for pilgrims and prospective students for their dangerous and strenuous voyages from Buryatia to Tibet.

Nikolai II gifted Agvan Dorzhiev in 1896 with a monogrammed watch for the services he had rendered to Badmayev's agents in Lhasa. Also awarded were Ocir Dzhigmitov – one of Badmayev's agents – and a third Buryat who probably also took part in the expedition (Snelling 1993:39).

Dorzhiev's mission in St Petersburg

In 1898 Dorzhiev had a meeting with Tsar Nikolai II. A certain Prince Esper Esperovich Ukhtomskiy had arranged for this. Ukhtomskiy was a friend of Badmayev and belonged to the inner circle around the Tsar. As an orientalist Ukhtomskiy had joined Nikolai's journey to the East in 1890/1891 (Ukhtomskiy 1899). He had his own publishing house in St Petersburg and was editor of a newspaper named "St Peterburgskiye Vyedomosti". The fact that a confident of His Holiness the Dalai Lama was in St Petersburg must



Agvan Dorzhiev in St Petersburg

have caused great excitement. Most probably Ukhtomskiy introduced Dorzhiev to the Russian high society.

The myth of Shambala played a crucial role in the context of Dorzhiev's visit. Shambala is a mystical hidden kingdom, a paradise of wisdom and eternal life. The concept of Shambala forms an essential part of the Kalachakra Tantra and is very important for tantric Tibetan Buddhism in general. Many scholars in Tibet as well as in Europe were captivated by the idea of Shambala, and there were many theories about where it might actually be in reality (Berzin 2003). After Schliemann (who also lived in St Petersburg for a while) had taken Homer's Illias seriously and discovered Troy in 1868, the quest for Shambala was on the upswing.

As Shambala lies somewhere in the north (in the context of Buddhism as well as Hinduism north is the holy direction) some scholars suggested it must be somewhere in Siberia. Dorzhiev himself supported this theory, or at least knew about the political advantage of supporting it. If Shambala was in

Russia, and the Romanov dynasty as "The White Tsars" were incarnations of White Tara, it would then be easy to propagate the idea of Tibet being a Russian protectorate (Rupen 1956:391)¹⁷.

In 1900 the Boxer uprising gave new impetus to Badmayev's prediction that the Chinese empire would soon collapse. It also strengthened the faction at the court who supported an expansionist strategy in the east. A particular triangle – made up of a political project, Badmayev as an important figure and a shot of mysticism – created very fertile ground for the diffusion of Tibetan medicine in Russia. This constellation wouldn't last, however.

The turning point

Agvan Dorzhiev visited St Petersburg a second time in 1901. This time his visit attracted public interest and was widely covered by newspaper reports. A rapprochement between Tibet and Russia was discussed openly – too openly in the eyes of Badmayev and Ukhtomskiy. Ukhtomskiy's "St Peterburgskiye Vyedomosti" tried to limit the damage:

Talking about a Protectorate can only have the result of bringing misfortune to our countrymen who may be travelling in these countries, embitter the Chinese and excite the British Indian Government to a more active policy. (cit. in Snelling 1993:85)

Indeed the British Secret Service finally learned about Badmayev's plans and Dorzhiev's visits. The idea that Russian troops could all of a sudden secure Tibet's borders to India made the British regime uncomfortable. Concerned about Dorzhiev's mission in Petersburg the British Secret Service informed Lord Curzon, the new viceroy on the subcontinent. Due to a series of mishaps the message took two years to reach India, but then had a great impact. One of Lord Curzon's intimates was Francis Younghusband, a young adventurous officer and mountaineer who had already led expeditions in the Karakorum. Younghusband wrote:

I am inclined to think that Dorjieff was 'worked' by some agent such as Badmaieff or Von Groot, an ex-official of the Chinese Customs service, who resides at Urga and is known to have great influence with the lamas of both Peking and Tibet. (Cit. in ibid.:108)

The British Secret Service had intelligence suggesting that shipments of Russian arms were already on their way to Tibet. This turned out later on to be nothing but a rumour. In fact, the Tsar never really considered making

¹⁷ Reincarnation narratives of leaders to place them in metahistories is still common in Buryatia. Caroline Humphrey describes how Stalin is seen today as a reincarnation of the Blue Elephant, the mythical revenger (Humphrey 2002).

Tibet a Russian protectorate. Dorzhiev's second meeting with the Tsar in 1901 did not lead to any substantial promises by the Russian side (Shakabpa 1984:203).

The British tried to get in touch with the Dalai Lama in Tibet in order to clarify things. Their official letters were not opened, however, and they did not get any response. So finally in the winter of 1903/1904 Lord Curzon sent troops led by Younghusband to enter Tibet (ibid.:205-223, Schaumian 2000:63-87). The Dalai Lama fled to Mongolia. This so-called "Younghusband expedition" wasn't the beginning of a permanent occupation of Tibet, as many Tibetans had feared. Younghusband soon moved out of Tibet again. But the Dalai Lama stayed in Mongolia and for some time tried to get Russian support. The Russians, however, had other problems: Japan had begun getting a hold of the remains of the Chinese empire and was feeling strong enough for a military confrontation with Russia. In a blitz the Japanese troops destroyed most of the Russian pacific fleet in Port Arthur in February 1904 (Zink 2004, Aegerter 2004). The Russian-Japanese war ended in a complete disaster for Russia, and all its lofty plans in the East came to an abrupt end. Above all internal unrest and revolt started in 1905. The Tsar's power was dwindling away and never recovered after this first Russian revolution of 1905.

The Eastern lobby at the Tsar's court lost its influence. Ukhtomskiy, with his newspaper "St Peterburgskiye Viedomosti", was being mired in quarrels with the almighty Orthodox Church and as a consequence he fell in disgrace at the court (Snelling 1993:51f). In addition Badmayev fell out with Witte, as the latter started to believe that Badmayev had wasted state money in the East or even worse had gotten rich on it himself. This was, most probably, an unfair reproach, but not totally unfounded, as Badmayev had certainly used a lot of money to engage in the local gift economy.

Badmayev's opponents

Badmayev had many enemies. First of all the pharmacists resented his success. A dispute between pharmacists and physicians began to emerge at the beginning of the 20th century in St Petersburg. The new scientific biomedicine was gaining momentum, and many new remedies such as vaccines appeared. The physicians started to prepare these new remedies themselves. Of course the pharmacists were concerned about this development and began to argue that physicians shouldn't be allowed to produce drugs themselves. In the context of this argument Badmayev served as a prime target for the pharmacists. Not only did he produce a huge amount of drugs himself – he also kept the recipes secret.

The newspaper articles of the time provide insight into Badmayev's practice. One journalist describes, for example, that in Badmayev's waiting room officers were sitting next to an elegantly dressed lady and an old woman wrapped in rags. The actual consultation would only last about three minutes, and no medical equipment was used (Grekova 1998:69ff).



Viktoria Kolotagina 00:16:43:20

Viktoria reads a satire from 1906: "Badmayev heals everybody and everything with powders. Nobody knows anything about the ingredients. Maybe the powders consist of chalk, turpentine and saffron, maybe only pepper, salt and sugar.

Dr. Badmayev sells his powders in small paper bags between one and five roubles. You can apply Badmayev's powders externally, or besprinkle your sheets before going to bed; you can clean your metal chattels with them. At a push ladies may even use them as powder substitute. Some patients of this Tibetan Esculapius even take them as remedies, whereupon the healthy stay healthy and those moribund will die just as if nothing had happened."

(From the "Book of Humor", cit. in Arkhangelskii 1998:78)

Badmayev himself used to swagger about the number of patients he treated. He carefully kept records and often counted a total of more than 100 patients a day (Badmayev 1898:Appendix). Such bragging caused a lot of scepticism, and it is no wonder that Badmayev also became a favoured target of jokes. Backed by the early victories of the advancing biomedicine, Tibetan medicine was increasingly called quackery.



Packing Powders 00:17:33:09

Natalya Rogovskaya, Pyotr's great-granddaughter, shows how Tibetan remedies were grinded, mixed and packed: "We learned how to do this when we were children [from our grandmother, Pyotr's daughter Aida]. We used to help her and liked it very much."

One of Badmayev's opponents was a certain doctor Kirillov (Grekova 1998:81-93). He had studied at the famous University of Moscow and regarded it as his mission to fight Tibetan medicine. He had travelled for half a year through Siberia and Mongolia. One of my informants¹⁸ stated that Badmayev gave a lecture on Tibetan medicine in Chita that Kirillov happened to attend. He spoke up against Badmayev, and a personal enmity between the two men developed.

¹⁸ Tamara Aseyeva, personal conversation. Asyeva is a researcher at the Scientific Center in Ulan-Ude.

JOURNEYS WITH TIBETAN MEDICINE

After his travels Kirillov felt entitled to write a pamphlet against Tibetan medicine, in which he argued that pulse diagnostics, pharmacology, as well as the basic concepts couldn't hold out against scientific examination.

Another opponent was a physician named Kraindel. In January 1904 he accused Badmayev in public of being responsible for the death of the director of the Petersburg conservatory, Fonark. Kraindel argued that Badmayev's diagnosis had been wrong and that he had hindered Fonark from seeking help from another physician. Badmayev sued Kraindel for libel, and the case attracted attention in St Petersburg. The court asserted that Badmayev was not responsible for Fonark's death and that he had supported the family generously. However, Badmayev signed the death certificate, which he wasn't entitled to, as Badmayev had never finished his Western medical education and had no approbation as Russian physician. Badmayev's practice was almost shut down. But in the end his noble contacts were still strong enough to protect him once more (Grekova 1998:94-102).

Remarkable in this story is the detail that of all things it was the death certificate that became the biggest problem for Badmayev. The emerging field of biomedicine claimed monopoly in diagnosing death. Biomedicine was creating a new "border regime" (Lindemann 2002) in order to separate the living from the dead and in doing so was deciding who is still a social actor and who is not anymore (e.g. ancestors). Following Latour the dichotomization between humans and non-humans is one of the central notions (and flaws) of modern thought (Latour 1993:64ff). With this in mind there is considerable symbolic value in the fact that a court (another hallmark-institution of modernity) decides that a Tibetan doctor like Badmayev is not entitled to decide whether somebody is dead or alive.

Furthermore a second popular discourse of that time must be mentioned: Tibetan medicine was not only called quackery but also seen as a potential danger. The reason for this being that germs could be imported from the East together with the ingredients. The concept of germs in a popularized version had quickly become part of public discourse. Philipp Sarasin shows that the talk about possible bacteriological danger coming from the East or South was an important argument in favor of biomedicine in Europe from its start in the late 19th century (Sarasin 2003/2004b, Metschnikoff 1877:321ff). Germs and potential carriers of the germs (foreigners) were thereby equated with each other in a metaphorical way. An analogy was drawn between the health of a single individual, who is always threatened by germs, and the health of the community, for which foreigners pose a danger. Whenever bacteriology was in need of strong arguments it used this xenophobic analogy, which was absolutely presentable at the time. This metaphorical link to the dominant non-medical discourse on xenophobia was essential for the success of bacteriology. Reciprocally xenophobic policies frequently used bacteriological images to back their ideology. The two discourses amplified each other.

Tibetan medicine was generally affected by such metaphorical and discursive constellations. Before the Russian-Japanese war the "Orient" had a very good standing amongst the Russian elite — holding connotations of being promising, slightly mysterious, and full of future. With the "tectonic dislocation" in world politics the East became increasingly associated with something dangerous. The metaphorical link between germs and foreigners came in handy. In this way Tibetan medicine suffered very directly from the ending of Russian schemes in the East.

A Buddhist temple in St Petersburg

Despite all this Buryats und Kalmyks filed an application for an official recognition of Tibetan medicine and the medical faculties in Buddhist monasteries in 1906. The Ministry of Health rejected the request quite harshly. Leo Berthenson, the leading advisor in this affair, wrote:

"At the end of February of this year [1906] the Imperial Medical Council discussed the question whether to legally adopt Tibetan medicine in the governorates of Irkutsk and Trans-Baikalia, which are inhabited by Buddhist tribes, as well as the approval to open up special medical schools for the training of doctors in Tibetan medicine. (...) Of course Tibetan medicine, which is no more than a mixture of rudimental and archaic science and ignorance including superstition, cannot be granted the official recognition; for the same reason it wouldn't be appropriate for the government to approve the organization of Tibetan medical schools. But apart from that the lama's medical practice is not in need of legal regulation because, according to Buddhist doctrine, medical help has to be free of charge and in this circumstance lies its right of being, because our law allows everybody, even if he is not a physician, to cure for free." (Berthenson 1906:253)

Probably thanks to this loophole – free treatment and selling remedies underhand – Badmayev was able to continue his practice in St Petersburg.

Dorzhiev had not abandoned hope for Russian support for Tibet. Whereas China, England and Russia had finally carved out their territories of influence in several treaties (Schaumian 2000:127ff/183ff), the Dalai Lama returned from Mongolia to Tibet in 1910. Only a couple of months later he had to flee again – in this instance because of scattered Chinese troops. This time he chose to seek refuge in India. The British granted him protection, but also kept a careful eye on him. During his asylum in Kalimpong and Darjeeling he tried several times to get in touch with the Russian court. Sherbatsky, the leading figure of the oriental school in St Petersburg, visited him in Darjeeling and handed over letters in both directions. His Holiness, however, received only courtesies from the Russian side and no substantial answers (Snelling 1993:142-157).

The supporters of Buddhism in Russia were, however, still very active, although without attracting much attention. Dorzhiev was finally allowed to build a Buddhist temple in the outskirts of St Petersburg (Andreyev 1992/1994). An illustrious committee was installed to supervise the building. Besides Dorzhiev there was Sherbatsky, Ukhtomskiy, the well-known



Kuntsechoinei Datsan, St Petersburg

The Buddhist temple in St Petersburg during construction, around 1910.

explorer and great-gamer Pyotr Koslov and Nicholas Roerich, the famous mystic and painter. According to the descendants of Pyotr Badmayev, Badmayev gave a substantial sum for the construction of the temple.

The temple still exists. Its architecture is an expression of cosmopolitanism, avant-gardism and mysticism. There is a big central kitchen in the basement, central heating in the whole building, and Roerich re-designed the eight auspicious symbols of Buddhism. The temple features Buddhist architecture with a dash of Art Nouveau. In August 1915 it was finally inaugurated. Russia was already at war with Germany. St Petersburg had become Petrograd —

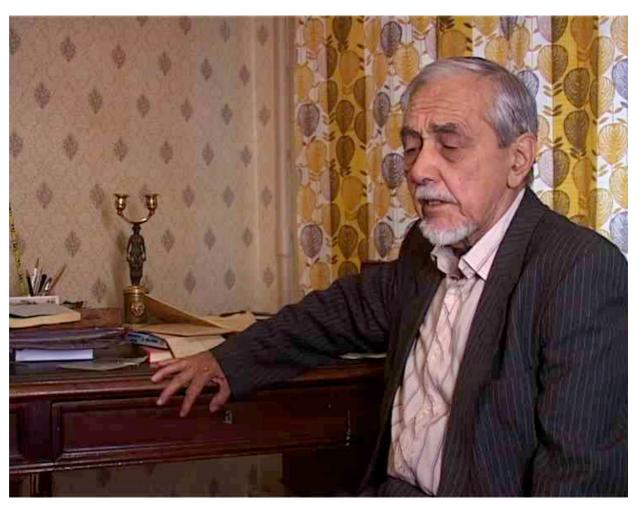
TIBETAN MEDICINE AND THE "GREAT GAME"

maybe a sign that Russia would be self-absorbed for the years to come and that the days of cosmopolitanism and avant-gardist spirit were over. Towards the end of World War I Russia stumbled into the revolutions of 1917 and the ensuing civil war. The Bolshevists emerged as the strongest power. Petrograd became Leningrad. After the revolution Pyotr Badmayev was arrested five times and finally died in 1920.



Central Heating

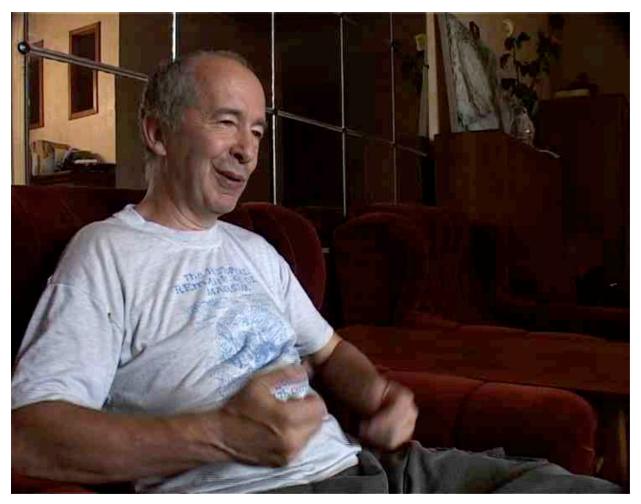
A dash of «art nouveau» in the Buddhist Temple in St Petersburg.



Boris Gusev 00:35:07:05

"I read through the files. There it says: "We searched Badmayev's dacha. Nothing special was found. But considering his open declaration that he was a monarchist, he was arrested." A group of seamen came, grandmother told me. They asked: "Where is Badmayev?" — "He was arrested." — "Which prison was he brought to" - "Kresti." The sailors went to Kresti and returned with Badmayev. With guns they went... saying: "Give us Badmayev. He is curing us!" And the Bolsheviks set him free. (...) Then the temporary government gathered all the people close to the Tsar, including Badmayev, and exiled them to Sweden. But in Finland they were caught by the Bolsheviks, who said that the Tsar himself must be in this carriage. But he wasn't. Neither the Tsar, nor his family were actually there. Only people close to him, including grandmother, my mother and he [Pyotr] himself.(...)

He returned and resumed to treat patients until he was arrested [again and brought to a concentration camp]. And when the camp's commandant addressed him as "Du" he slapped the commandant in the face. The latter wanted to kill him and drew out his sword. But wife and daughter fell on their knees and one of them stood in between the two. Grandfather was put into the punishment cell and had to stand in cold water for two days. Thereafter grandfather fell ill. He got typhoid. But recovered again and was released. That was two weeks before his death.



Andrey Terentyev 00:33:39:02

"First [Badmayev] received money from the Russian government to develop this thing [his Eastern schemes]. But it happened that he needed more. And as far as I remember he received money for the second time. But not for the third time. So he was unable to complete this plan. And I was just thinking that if Badmayev had been successful — because the fall of the Chinese empire did happen a few years later, and Japan then came to take over the remains of the Chinese empire from the east — if Russia had been better prepared for this through Badmayev's efforts, then the Russian-Japanese war would not have been as disastrous for Russia. If so, then we wouldn't have had the first Russian revolution in 1905. If we hadn't had this revolution of 1905, we wouldn't have had the revolution of 1917, and the whole history of mankind would have gone a different trail. But unfortunately they didn't give enough money to Badmayev, so it all happened as it happened."

Tibetan Medicine in the Soviet Union

Modernist movement in Buryatia

In Siberia the situation after 1917 was very confusing. In 1918 Japan began to move its troops forward to Siberia, using the port of Vladivostok. A Buryat called Ataman Semyonov assembled a private army, which, with the help of French and Japanese forces, exercised control over vast parts of Trans-Baikalia. Semyonov was a Buddhist and proclaimed a theocratic Greater-Mongolian empire (Terentyev 1996:63f).

At the same time there was a second attempt to create a theocratic Buddhist state on the territory of Buryatia. A lama known as Tsedenov was the key figure in this endeavor. He had lived as a hermit for 33 years, monastic life still seeming too worldly to him. Tsedenov had the authority of a great spiritual leader. The theocratic state he was determined to establish was named *Balagat*. Just as the *Balagat*-movement gained momentum, Semyonov arrested Tsedenov and his ministers. A young boy was chosen as Tsedenov's successor. His name was Bidya Dandaron. The boy stood out for his spiritual talent. After some time he too was arrested and spent all in all more than 20 years in the *Gulag* (Wilcox 1998:16ff). At the beginning of the 70s he again played a role in regards to Buddhism and Tibetan medicine in Russia (see page 69).

In about 1920, after six devastating years of war and revolution in Russia that had cost millions of lives, caused famines and in many regions already a deeply rooted hatred against the Bolshevist powers — the Red Army slowly gained control over Siberia. British, Czech and French troops, which had been involved in all sorts of coalitions, were finally pulling out. Japan, which was still present in Siberia, seemed to be a little less bent on extending its continental adventure. Nevertheless, the Bolshevist regime was not certain of its power in the region. It seemed wise to set up a buffer state between Russia and Japan. Buryatia was therefore declared independent in 1920 and named the "Far-Eastern Republic". As president a moderate Bolshevist was appointed. His name was Krasnoshchekov and he committed himself to a liberal policy towards Buddhism.



BuryatiaSocialist culture coming to the Buryat steppes in order to substitute Buddhist culture.

As a result Buryat Lamaism flourished as never before. Old monasteries were renovated, and the official lama population rose above 16'000 (Snelling 1993:204f).

Despite its boom Agvan Dorzhiev as well as many others regarded Buryat Buddhism as degenerated and in need of reform. The Buryat monasteries were generally very rich, and enormous differences in wealth were common amongst the lamas . A reform movement assembled around Dorzhiev, which aimed at implementing a whole set of fundamental changes to monastic life. Dorzhiev saw, at least in the early 1920s, many parallels between Buddhism and Marxism. He liked the Marxist ideas of a simple life, justice and equality – virtues he saw as fundamental to monastic life¹⁹.

 $^{^{\}rm 19}$ My information about the Buryat Reform movement is mainly derived from an interview with Terentyev.

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In 1913 Dorzhiev founded a *manba datsan*, a medical college, at the monastery of Atsagat. It quickly became a stronghold of Tibetan medicine in Buryatia. In October 1922 the first All-Buryat Buddhist congress took place in Atsagat, where the reforms were discussed. A fierce dispute between reformers and traditionalists took place. In the end – probably also under the pressure of the Bolshevist government – the following resolutions were passed:

The institution manha datsan was to be renewed. The curriculum would include Western medicine along with Tibetan medicine. Especially anatomy and western diagnostics were to be integrated. Only those physicians who had successfully passed the final exams would be allowed to practice. Private education and family lineages were to be discontinued. And last but not least the medical colleges should be open to everybody – monks as well as lay people, women as well as men. Treatment would be free of charge and only focus on herbal remedies – without the use of massage, baths, mantras and so on. At the same time the union of religion and medicine was confirmed. A more professional approach was the goal, not a secularization of Tibetan medicine. In order to increase the "cultural value" of religion, however, the institution of tulkus, reincarnate lamas, was to be abandoned.

The Communist regime of the Far-Eastern Republic welcomed the self-transformations of the Buddhist community and in reciprocity it was given a certain degree of autonomy. But shortly after Japan finally withdrew its troops from Siberia, the Far-Eastern Republic was liquidated and incorporated into the Soviet Union (ibid.:204-218). Conditions changed again, not over night but in a lasting and radical way.

Soon after Lenin's death in 1924 the Politburo saw clearly that his agricultural reforms were not working. The fixed and low prices for grain had the devastating effect that the peasants wouldn't sell what they had produced. Only 15% of the total grain production was sold on the market. This led to horrible shortages in the cities and hindered the industrialization. Rumours about total collectivization were in the air – a tremendously unpopular measure (Maeder 2004). The regime was still reluctant to enforce it. But the idea was there, and Dorzhiev himself thought that the conversion of monasteries into collective farms wasn't the worst thing. He said that farm labor was well in line with the Buddha's teachings. The first steps in this direction were taken in 1926, when the monasteries in Buryatia were "nationalized". This meant that the responsibility for the management was transferred to collectives of laypeople. The clergy was deprived of its power. This lead to much hostility, but the monasteries remained very active, and the position of the reformist forces was again strengthened.

In 1927 a conference of Tibetan physicians took place in Atsagat. Again led and managed by Dorzhiev, propositions for a future standardization of Tibetan herbal medications were discussed, including a central institution to supervise the production of herbal remedies (Grekova 1998:173).

In Leningrad the Buddhist temple was revived. It had been looted and abandoned during the hunger-winter of 1919. It was now officially

recognized as the Tibetan-Mongolian embassy. Sherbatsky still held his position as head of the Orientalist school in Leningrad, and his contacts to the temple remained strong. A Tibetan pharmacy was opened up, and two *emchis*, Balzhir Zodboyev and Shchoyshi Dhaba Tamirgonov, practiced on the temple's premises (Andreyev 1991/1994, Snelling 1993:225).

The temple became a stronghold of the reformists. The international, cultural, philosophical and atheist sides of Buddhism were highlighted, and the temple was propagated as a center of encounter between East and West. The mystic side of Buddhism, that had once been so strong, was completely masked. No word of Shambala or the Kalachakra Tantra. The same people as before the revolution started using completely different discourses to fight for their cause. On the one hand this was certainly a necessary survival strategy. But on the other hand a certain atmosphere of 'departure', of a bright and modern future was also prevailing in the young Soviet Union (see e.g. Maillart 1997[1932]). Regulations were not as strict as they had been, and the regime even tolerated a certain degree of private initiative on the premises of the temple. Besides the pharmacy and the two *emchis* there were several small shops around the temple that sold rice, spices, incense sticks and religious objects.

In 1927 the first All-Soviet Buddhist congress took place in Moscow. During the conference the regime decided to found an institute for Buddhist culture. Sherbatsky was appointed rector (Snelling 1993:232). It looked like Buddhism was gradually finding its place in the Soviet Union.

Nikolai Nikolayevich Badmayev

Back to the Badmayevs: Pyotr's second wife, Elisaveta, and his nephew, Ossor alias Nikolai Nikolayevich Badmayev, carried on the Badmayev lineage of Tibetan medicine.

Nikolai had been studying at the Military Medical Academy when he was already a lieutenant in the Russian army²⁰. Pyotr Aleksandrovich had pushed him to go this way and to obtain the approbation as a military doctor. Pyotr didn't want his nephews to run into the same kind of trouble he had gone through. In 1914, just when World War I started, Nikolai obtained his diploma and was called to the front. He became chief physician of a field hospital. After the war he worked in Kislovodsk, a famous Russian health resort with mineral springs. During his time there he got in contact with party members who resided in Kislovodsk for treatment. As they responded positively to Nikolai's Tibetan methods he approached the Health Ministry with the request to be transferred to Leningrad and to start a Tibetan

²⁰ The following information is based on interviews with Grekova.

TIBETAN MEDICINE IN THE SOVIET UNION



Tatjana Grekova 00:39:25:05

"Some of Nikolai's case histories have been preserved. This is the patient history of a very famous man: Bokiy, Gleb Bokiy. The head of a special unit of the NKVD [secret service, KGB's precursor].

Patient details, medical condition: neuralgia, pains in the neck, arms and legs. Digestive organs: appetite — O.K. Nervous system: insomnia, headaches, tendency towards perspiration during the night for the last three years. Anaemia. Former diseases: pneumonia (once), pleurisy, tuberculosis (1920). (...) Further there are the results of the diagnosis and details about the treatment."

medical department at the Military Medical Academy. His request was dismissed. But Nikolai finally went to Leningrad of his own accord.

It stood to reason that he would work together with Elisaveta Fyodorovna, Pyotr's second wife. Elisaveta had a lot of experience in Tibetan medicine, and Nikolai had an official medical diploma. There was, however, obviously a problem between Nikolai and his wife, who was a niece of Elisaveta Fyodorovna. The couple had three sons together. At a certain point she was

put in an asylum, and Nikolai didn't allow her to see the children. Elisaveta never forgave Nikolai, and collaboration with him fell through²¹. Elisaveta continued her husband's practice in Leningrad. She worked together with Vera Ivanovna Naumova, a relative of hers who was a physician.

Nikolai started his own practice. In 1927 a newspaper published an article by the same Dr. Kraindel against whom Pyotr had sued for libel. Kraindel wrote that he had fought against Pyotr Badmayev, and that he would now fight against Nikolai, as the latter continued his uncle's quackery. He said that Nikolai insulted his patients with a "brutal form of massage" Thereupon Nikolai was called to the health Ministry for Health. He had to promise not to use "unscientific powders" any longer and to refrain from "brutal massage methods". However, as he had a diploma as a military physician, the health Ministry couldn't shut down his practice.

Shortly after this incidence Nikolai was arrested by the Secret Service. Strangely enough the arrest only lasted for three weeks. Nikolai was released, and the attacks on him stopped for a while. Most probably he had managed to convince a member of the Secret Service (NKVD) of the helpfulness of Tibetan medicine (Grekova 1998:198-207).

After this arrest Nikolai's career moved forward quickly. More and more distinguished and important personalities were among his patients, including Gleb Bokiy, the head of a special unit of the NKVD, the famous author Maxim Gorki, and the *narkomsdrav* (health minister) Kaminskiy.

Collectivization and its consequences for Tibetan Medicine

Despite this partial success the general trend in which the Soviet regime developed gave no reason to be particularly sanguine. In the fall of 1929 the party leadership (completely dominated by Stalin after Trotsky had been exiled) finally made a decision for the total collectivization of agriculture (Dohan 1976, Terentyev 1996:64f, Maeder 2004, Berzin 2003). The Politburo was convinced that the supply problems in the industrial centers could only be solved with the implementation of big collective farms. An enormous propaganda campaign accompanied collectivization. This campaign was not only extremely in favor of collective farms, but also pretty much against anything that seemed to inhibit the progress of modernity in the Soviet Union (Kandiyoti 2000:58f). Monasteries and lamas suffered a lot under this campaign. The argument against Lamaism was straightforward and easily understandable for everybody. A considerable part of the male Buryat population still lived in monasteries – a seeming waste of work force.

²¹ According to Gusev, personal conversation.

²² Most probably he meant a special technique known as dry massage on the abdomen, which can be can be very painful at the beginning. See page 63.



Nikolai Nikolayevich Badmayev Nikolai and bis three sons: Kirill, Mikhail and Andrey.

JOURNEYS WITH TIBETAN MEDICINE

Accordingly the lamas were called parasites who lived an easy life at the expense of the working class. They were (amidst many other groups) blamed for the economical problems of the socialist state.

Interestingly enough the Soviets again used a biomedical metaphor to discredit Lamaism. Buddhist lamas were like parasites on a sound body. The image was strong and clear: they had to be eliminated.

In 1929 religious institutions were no longer allowed to run medical facilities and treat patients. The new bill was clearly targeted at Tibetan medicine. Now at the very latest, the hopes of Agvan Dorzhiev and other like-minded people were destroyed. Communism and Buddhism were not compatible. Protesting was futile. The practice of Tibetan medicine was no longer allowed in monasteries.

To add insult to injury the whole Buddhist reform movement was labelled 'anti-Soviet' and 'reactionary'. The newspaper Buryat-Mongolskaya Pravda started to campaign against the reformists (Grekova 1998:267-273). These were charged with being worse than the normal reactionists, because they were wolves in sheep's clothing.

One datsan after another was shut down, most of them during the Second 5-Year Plan between 1933 and 1937. The monks fled to Manchuria, were deported or killed, and most of the monasteries were destroyed (Snelling 1993:236-254).

A niche in the 1930s

Maxim Gorki was still very committed to helping Tibetan medicine find its place within Soviet society. With his support Nikolai managed to convince the authorities that a scientific approach to studying Tibetan medicine would be of great benefit. In 1934 – in Buryatia the monasteries were already being closed one after another – a new department was established at the Institute for Experimental Medicine in St Petersburg. Fyodorov, the Institute's head, was however a fierce opponent of Tibetan medicine, and the new department opened against his will. Fyodorov was originally from Irkutsk where he had worked towards tighter regulations for monasteries and *emchi*. He couldn't avert the new department from being established, but he did manage to prevent Badmayev from getting an official position at the department. Less than a year later the Institute was moved to Moscow, and the department closed again under the pretext of reorganization (Grekova 1998:208ff).

Badmayev didn't give up, and his influential patients helped him. His plan was to establish a real clinic of Tibetan medicine, where research, training and treatment would go hand in hand. He approached the Central Committee with this project, and indeed the decision was taken to support



RepressionMonks are being shot outside a monastery in Buryatia.

such a clinic²³. This was certainly due to the Health Minister Kaminskiy who was himself one of Badmayev's patients. Rooms in the former residence of Count Bobrinskiy were provided, and training courses for the future staff organized. Badmayev invited Buryat *emchi* lamas as teachers and also won over the two *emchis* Zodboyev and Tamirgonov from the Buddhist Temple in Leningrad. Everything was readied whilst the signs of a forthcoming repression became more and more alarming.

In May 1935 an official conference on Tibetan medicine was held, officially supported and organized by the Soviet Academy of Science. In the same year the Lamas in the Buddhist temple were arrested, but somehow got off lightly (Andreyev 1991:221). It must have been almost at the same time that Badmayev engaged the temple's two *emchis* for his project. The temple stayed open until 1937.

²³ Grekova, personal conversation.

JOURNEYS WITH TIBETAN MEDICINE

In 1936 the Medical Council of the Soviet Health Committee again discussed the status of Tibetan medicine. Several experts were invited to speak. They argued that Tibetan medicine and Eastern medicine in general were crucial for public health because biomedicine had no effective remedies against many diseases (tuberculosis, rheumatism, vascular diseases and infections²⁴). Nikolai Badmayev held a speech in which he again tried to explain the fundamental differences between Eastern and Western medicine. Gammerman, who was to become a leading figure in Tibetan medicine after the Stalin era, presented her first results of a pharmacological study on Tibetan remedies (Gammerman 1941).

It looked as if Tibetan medicine would, despite all the set backs, finally manage to be officially recognized – a new Tibetan medicine of course, without the religious background.

Stalin's paranoid distrust, however, started to extend to his closest companions, and the repression gained a new dimension. Many of Nikolai's patients themselves were incriminated. In 1937 the temple in Leningrad was finally closed, and all the remaining lamas shot that same day. Elisaveta Fyodorovna was imprisoned (but survived and was released after World War II). Agvan Dorzhiev was arrested in November 1937 and died in January 1938 (Snelling 1993:252). It was the time of the show trials, during which Stalin started to ditch his closest companions (Hedeler 2002/2003).

Despite all this, Badmayev's clinic finally opened its doors in the winter of 1938 and for a short time treated patients. On April 10th the clinic was shut down, and all the members of staff were arrested. Badmayev was accused of being a Japanese spy. He was shot as were most of his patients.

There was certainly a fundamental contradiction between Tibetan medicine, its worldview and idea of man, and the attempt of the young Soviet Union to achieve modernity as soon as possible. Biomedicine just fitted in better. Tibetan medicine, with its focus on individual constitution and a slow but lasting healing process, its Buddhist language and background, could not findontact with the dominant ideas of the time. All attempts to renew, secularize and streamline it were ultimately in vain.

In China some years later Mao took a completely different direction in this respect. As all traditional medicine was strongly curtailed under Manchu rule, the Maoists propagated it as part of a suppressed Chinese identity that communism would free again. Mao started to revive all the heterogeneous medical traditions and sum them up under the title of "Traditional Chinese

 $^{^{24}}$ In 1936 there were no antibiotics on the market yet. Flemming had discoverd Penicilline in 1928 but it was only available after World War II.

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Medicine" (Scheid 2002, Janes 2001:204ff). Tibetan medicine in Russia lacked this revolutionary potential, also because it had always been a minority affair. Its destiny therefore remained dependent on a few important protagonists. When they were repressed, Tibetan medicine disappeared.

Wlodzimierz Badmajeff

Nikolai's younger brother Zhamyan was born in 1884. He was sent to Aginskiy Datsan for education at the age of about four. Some years later, probably around 1893 or 1895, he came to St Petersburg to study at Pyotr Badmayev's school. In 1897 he was baptised Vladimir Nikolayevich Badmayev, again with Nikolai II as his godfather²⁵. Later he studied at the University of Moscow and became a physician like his elder brother. He served in the army and was in charge of a train hospital in World War I.

During the war he must have fallen in love with a Tatar women²⁶. His uncle Pyotr was not at all pleased with these developments, as she had been previously married. Vladimir wedded her, and she gave birth to a daughter, probably in 1917. They fled together to Poland and settled in Tomaszów Mazowiecki, a small town about 100 km from Warsaw. Vladimir Badmayev became Wlodzimierz Badmajeff and got the approbation as a Polish physician.

Sometime in the 1920s the family moved to Warsaw. There he met Tamara Ramlau, a young women of noble Polish descent who had lived in Russia up until the revolution. Tamara's seven brothers had all been officers in the Tsar's White Army, and all but one had died during the revolution. Tamara, pregnant and abandoned by her husband, had escaped through Odessa on a British battleship where she had given birth to a son. In Poland she had family, but they were obviously not inclined to help their impoverished relative. Tamara met Wlodzimierz as a patient, and they fell in love with each other. Eventually Tamara got pregnant, and Wlodzimierz left his first wife.

Wlodzimierz started a new life and with Tamara's help and good contacts he got ahead quite quickly. Poland had become a republic after World War I, and Wlodzimierz became the personal physician of its president, Stanislaw Wojciechowski, and later his successor, Ignacy Moscicki. Again Tibetan medicine had found refuge among the power elites.

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²⁵ According to a Polish translation of his birth certificate.

²⁶ The following section is derived from interviews with his son, Peter Badmajew, as well as documents belonging to the family.



WlodzimierzAt the Baltic Sea in the 1930s.

Wlodzimierz was still in contact with his brother Nikolai Nikolayevich and his friends and relatives Leningrad. In his trial Nikolai was accused of staying in touch with his anti-Soviet brother and repeatedly receiving remedies in foreign packaging²⁷.

Due to Wlodzimierz's good contacts the Polish government legalized the production of Tibetan herbal medications. Wlodzimierz started to produce them according to his uncle's recipes, but it was difficult to get all the necessary ingredients. Again a process of adaptation started. Wlodzimierz tried to substitute the ingredients he couldn't find. As he kept track of his prescriptions it is possible to follow these transformations. First, in the 1920s he sometimes used things like caffeine or acetylsalicylic acid (aspirin) in his drugs. When supplies from India and China picked up he again adjusted the prescriptions. The remedies were still ordered and numbered according to

²⁷ According to Grekova, personal conversation.

Pyotr Badmayev's scheme, and the polish authorities registered them under these numbers and their Mongolian names. The ingredients, however, were already figured as botanical Latin names. Wlodzimierz started a semi-industrial production of Tibetan drugs. He contracted farmers to cultivate some of the herbs and built up a laboratory in Warsaw.

Wlodzimierz, who had only lived in Buryatia for the first few years of his life, still identified closely with being a Buryat. He was e.g. very fond of *kumis*, the traditional Mongolian fermented horse milk, and used it as a remedy. According to his son Peter, he was also a talented horseman who taught his horse the specific Mongolian pace. Wlodzimierz also liked to tell the story of the circumstances of his birth: His elder sister had died as a child, and the lama who was called to do the death rites marked the forearm on the girl's dead body, saying that a boy would be born with the birthmark at the same place. And indeed, Wlodzimierz had such a birthmark.

Many stories, also about his uncle in St Petersburg, were written down later by friends and disciples. They convey an image of Pyotr Badmayev as a wise old Buddhist scholar who had learned Tibetan medicine in Tibet and had died at the age of 112. These stories do not agree with Russian sources, and it is hard to say if Wlodzimierz himself wrote them down or even Pyotr, and if so, why. Following Wlodzimierz's tracks I quite frequently came across legendary versions of the family's story (Kowalewski 1973, Kaufmann 1985, Unkrig in Korvin-Krasinski 1953:XXVII, Badmajeff 1998[1927]:27f).

Wlodzimierz was, like his brother and his uncles, Sultim and Pyotr, a border dweller. As a child he was sent to Aginskiy Datsan for education. He then moved to St Petersburg and lived in the world of Russian high-society. Following this period he migrated to the Catholic Polish Republic and sometimes even treated rich Americans in Paris²⁸. In short: Wlodzimierz lived in many worlds and he tried to bring them together.

For this purpose he published a journal for his Polish patients. At first it was called the "Tibetan Healer" and later renamed the "Synthetic Medicine". Wlodzimierz aimed at working towards a synthesis of Western and European medicine. In 1929 he published a book called "Chi, Shara, Badahan" – according to the three humors in Tibetan medicine. The book was translated into German and delivers an interesting insight into Wlodzimierz's way of thinking. It is a complete blend of Tibetan and Western philosophy, Tibetan medicine and biomedicine. An example:

The blood contains in its composition life energy [Lebensenergie] for all three physiological factors. In particular the white blood cells deliver "chi" to the tissues and cells, the red cells "shara", and the blood serum "badgan" (Badmajeff 1998[1929]:34).

²⁸ In the 1930s he had as a patient an American millionaire of Polish decent. Mrs MacCormick-Vazca was living in France and frequently invited Badmajeff and his family.

WLODZIMIERZ BADMAJEFF

The biomedical concepts of cells and blood cells are confidently incorporated into Tibetan medicine as if it had been so forever.

Another striking aspect of the book is its link to the *Lebensreformbewegung* of that time. In the early 20th century many counter-movements against the alienating effects of industrial modernity developed: from anthroposophy to nudism and the German "Wandervogel-Bewegung". Wlodzimierz related his Tibetan medicine to these emerging alternative discourses. He wrote for example:

The human being should free itself from the slavery of civilization [...]. Civilization should be adjusted to the needs and laws of nature and human culture. We are able to notice the needs of nature whenever we observe ourselves and the natural world. Regarding the needs of culture it is to be said that culture is only true if it is rooted in us, in an auto-analysis. Only such culture does not loose its linkage with nature and goes the way nature has shown. (Badmajeff 1998[1929]:45)

Again this anti-modern mindset is deeply rooted in modern thought and language. The separations of nature and culture as well as the conceived potential of change and progress are concepts of modernity (Latour 1993, Arce & Long 2000). According to Wlodzimierz, it lies in the hands of the individual to observe nature and to develop a true (better, healthier) culture. All the human being needs is strong willpower and tight discipline – two notions that sound more Prussian than Tibetan.

Tibetan medicine in Russia had been propagated as mystical, scientific or socialist accordingly. Wlodzimierz positioned it as an alternative to biomedicine, as a holistic path towards a better life.

In 1939 the German occupation started, and the short life of the Polish Republic came to an end. When President Moscicki and his entourage fled to Romania they sent a car for Wlodzimierz. He agreed, but revised his decision at the border and returned to Warsaw. The family lived together in the former laboratory, and Wlodzimierz and his sons were active in the resistance movement without knowing this about each other.

One day the Gestapo arrested Wlodzimierz and he was brought to the infamous Gestapo headquarters. Men were separated from women, and none of the men would survive the day. However, a German officer pushed Wlodzimierz to the women's side, and he was released the same evening. Peter, his son, was arrested after the Warsaw uprising and spent the last year of the war as a prisoner of war in Germany.

From Poland to Switzerland

After the war it became more difficult to practice Tibetan medicine in Poland. All the herbal drugs had to be re-registered under the new communist regime. Most of them got registrations in the end, but often Wlodzimierz did not indicate all the ingredients. And for some unknown reason the new authorities forbid the use of the Mongolian names.

JOURNEYS WITH TIBETAN MEDICINE

Wlodzimierz was running two practices, one in Warsaw and one in Krakow. In the 1950s he got Parkinson's disease, and Peter, his son, helped him in the practice, especially with the so-called "dry operation".

"Dry operation" refers to a deep massage of the abdomen – most probably the same method that Kraindel labelled "brutal" in his pamphlet against Nikolai in Leningrad. The goal of dry massage is to dissolve stasis of any kind. Wlodzimierz always emphasized this physical therapy as a crucial aspect of Tibetan medicine. One of his patients, the young pianist Johannes von Korvin-Krasinski, described the process as follows:

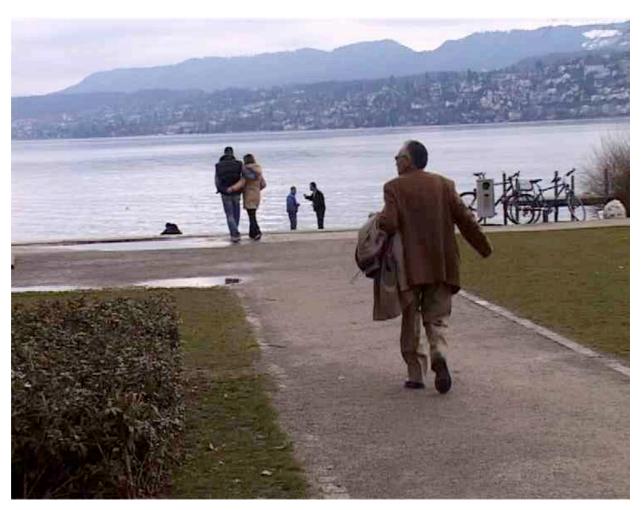
Badmayev welcomed me in his clinic and wanted to know everything about me and the symptoms of my illness. While I narrated, rather embarrassed, my life and habits, I felt that he was not only interested in my case but also in my personal fate. At the time he was about 40 years old, and had a smooth, quiet face with a high forehead, intelligent eyes and a small, sharply carved mouth. When I finished, he ensured me in his dry manner that I was not suffering from an incurable illness. He went over to his laboratory, in which I was later to frequently work in, and returned with a packet of herbal tea, of which, he said, I should drink several cups daily.

During my second or third visit he asked me to undress and lay down on a table. He performed what he called 'the dry surgery'. Initially his hands slid gently over my skin, the soft massage then turned into a kneading, he gripped deeply into my intestines as if he was searching for something. His face was expressionless; it was as if he was listening inside himself. Suddenly, I felt a deep trust in him and remained quiet, even though his grips were painful. At one point he seemed to have found what he had been looking for. For a moment he kept on feeling and then, suddenly, pushed one finger strongly into a specific point on my belly. What happened next remains unforgettable to me. I felt a kind of electric shock that went from the point he had touched through my abdomen right into my legs. For a moment I thought my big toe was glowing, but the pain passed, and comforting warmth remained in the lower extremities. He watched me for a while, and then told me to get up and go home. He asked me to return two days later, and in the meanwhile to continue drinking my tea. On my way home, I already felt the trembling in my hands disappearing. A few hours later, my bowl movements and digestion started working again. (Kaufmann 1985:18f)

After this experience in 1936 Korvin-Krasinski stopped his career as a musician and became Wlodzimierz's disciple. Later he entered the order of the Benedictines and settled down in Maria Laach, a monastery in Germany. His name as a monk was Brother Cyrill. Throughout his life he kept working on Tibetan medicine. He wrote several books. One of these – "Die tibetische Medizinphilosophie" – was published in 1953 in Zurich.

The Swiss businessman Karl Lutz stumbled across Korvin-Krasinski's book and read it with great interest. Lutz was the director of the local branch of Schering, an German pharmaceutical company. He had always been interested in alternative worldviews, and Tibetan medicine as described by Korvin-Krasinski was very intriguing. It happened that Korvin-Krasinski held a public lecture at the University of Zurich. Karl Lutz met him and found out that there was more to Tibetan medicine than philosophy, namely

WLODZIMIERZ BADMAJEFF



Peter Badmajew
At the lake of Zurich, March 2004

00:51:46:02

a living practice and not just somewhere in the Orient but actually in Europe – in Warsaw. Lutz decided to get in touch with the Badmayevs.

Wlodzimierz died in 1961, and about the same time the practice of Tibetan medicine in Poland became virtually impossible. Initially the Communist government had given permission to produce many of Wlodzimierz's drugs. But in the 1950s a struggle against all sorts of private enterprises began, and as a consequence the Polish authorities finally completely banned any private distribution of herbal medications. They also shut down the laboratory that produced them outside of Warsaw. With Wlodzimierz's death Tibetan medicine vanished. Peter, who had helped his father during the last years, was a trained surgeon and considered himself much more as such than as a Tibetan physician. But nobody else was there to carry on the family tradition.

When Lutz came to Warsaw, the family saw it as an opportunity to continue the business of Tibetan medicine in the West. Peter came to Zurich to help Lutz.

Tests with the first two formulae began. To obtain the necessary ingredients turned out to be an exciting issue at the beginning. Normally a letter or a telex was sent to a company in London that had contacts in India. The herbs were ordered somewhere on the subcontinent and then handed over to a Swissair pilot who brought them personally to Zurich. The whole procedure easily took several months. Development advanced slowly, and the Swiss authorities soon started to ask whether it was really necessary that this Polish doctor stayed in Switzerland. Peter's residence permit was reluctantly prolonged a few times, but it finally became clear that settling down in Switzerland was no real option. Peter migrated to the USA where he easily obtained a permit to practice as a medical doctor.²⁹

It was a difficult start, as the idea of producing Tibetan drugs in Switzerland obviously seemed very strange to many people. Lutz lost his job as director of Schering Switzerland. He started a new company and when he first tried to register it the Swiss authorities even demanded a change of name. The company was to be called "Padma AG für tibetsiche Heilmittel", and the suffix "für tibetische Heilmittel" – "for Tibetan remedies" – was not accepted. It seemed absurd to the authorities to establish a company for Tibetan remedies, and something absurd wouldn't be allowed, of course³⁰.

Padma finally got off the ground, and the next step was up: after the initial experimental tests by a couple of physicians a broader scientific study had to be conducted as a next step towards official recognition of a first drug.

Translation

In 1970 two gastroenterologists from Zurich published the first scientific work on Tibetan medicine in a medical journal (Flück & Bupp 1970) – a study about the effect of formula 179, branded Padma Lax. The fact that Bupp's article was published was an important recognition for Tibetan medicine. Following this it became possible to register Padma Lax. A second formula – Padma 28 – followed in 1978^{31} .

Lutz's idea was to push these two drugs first and to postpone the registration of others. But the late 1970s and 80s showed that this was not so easy, as the registration process became more and more demanding and expensive. Until today there are therefore only two formulae that are registered nationally in

²⁹ Based on correspondence between Lutz and the Swiss authorities.

³⁰ Information on the history of Padma AG comes from an interview with Herbert Schwabl, the company's current CEO.

³¹ A lot of scientific research on Padma 28 has been carried out since the 1970s. For an overview see the scientific documentation on www.tibetischemedizin.org



Padma 28 00:55:36:10

«System troubles. Time for an update.» Ad campaign for Padma 28 in Zurich 2003.

Switzerland. Beyond that Padma sells herbal teas and a set of about a dozen herbal drugs in the canton of Appenzell, where regulations are not so tight.

The situation in Switzerland is in this respect completely different from the one in the USA for example. There it is much easier to bring herbal drugs as so-called food supplements to the market. This niche is not available in Switzerland.

At about as Tibetan medicine reached Switzerland with Peter Badmajew, the migration of Tibetan refugees set in. Amongst them were also some experienced *emchis*. Why did their contribution to Tibetan medicine in Switzerland remain small during the first years³²? Herbert Schwabl says:

 $^{^{32}}$ Today this situation has changed, and Padma keeps close contacts to the Tibetan exile community in Northern India.



Vladimir Badmaev Jr.

00:58:37:13

"We cannot - and I want to stress this - we cannot neglect the fact that one kilogram of valuable medicine would not be sufficient to convince people all over the world that Tibetan medicine is meant to improve the bealth of millions of people."

- "And what does that mean?"

"If need is: making synthetic. But obviously the next question would be: Can you really make it synthetic, without compromising the Tibetan medicine and its value? It's a tough question."

"Despite the fact that the people were here, their knowledge remained very distant. It had to be translated first in order to become comprehensible and operational. [...] The knowledge of the Badmayevs was already westernized. It figured Latin names and Western indications. This means, not only the recipes were translated but also the indications. [...] It was just readymade."³³

This "translation" - as Schwabl calls it - was and is taking place on several levels. At the medical or scientific level evidence for the biological effect of a

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³³ Schwabl, personal conversation.

WLODZIMIERZ BADMAIEFF

drug has to be provided. And at the marketing level people have to be able to understand a drug — emotionally ("This could do me good..."), as well as intellectually (its effects and indications). For this purpose Tibetan medicine is again in need of non-medical discourses that amplify its value metaphorically: Padma's current ad campaign for Padma 28 shows a healthy looking elderly couple probably hiking somewhere in the Swiss alps, combined with a computer error message saying: "System troubles. Time for an update".

The concept of balance is accentuated again, combined with the lifestyle of the target market (Padma 28 enhances blood circulation and acts against arteriosclerosis). I am not saying this to unmask Padma's marketing department. On the contrary, for me it shows how carefully Tibetan medicine has to be placed in the public and which discourses are considered beneficial for a product. Interesting is also that Padma has decided not to use "Tibet" as a sales argument. Herbet Schwable says: "If Tibetan medicine is something good, then we have to first push its effectiveness. Only then can we add: ...and it's Tibetan."

A third level of translation is a material one. In order to meet Western pharmaceutical standards ("Good Manufacturing Practice") the raw materials must first be "translated" into pharmaceutical raw materials. The herb itself may not change in this process. But it is tested for mould, pesticides and contamination and checked over and over again to make sure that it is really the right thing. All herbs go through this procedure in order to become certified. Only then can they be used for production.

All these required translations change Tibetan medicine again, and some Tibetan doctors have started questioning whether Tibetan drugs can really be produced in an industrial setting without losing their properties. Opinions vary. But the fact that handpicked, hand-made drugs could never meet the demands created by marketing standards in the West is widely accepted.

Buryat Revival

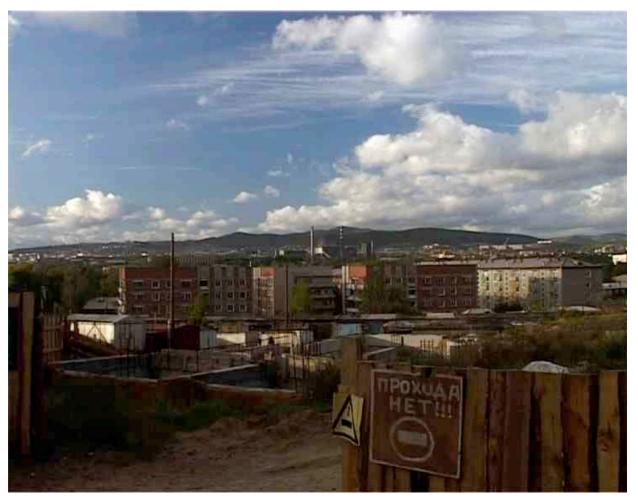
It is not only in Switzerland that Tibetan medicine had to accept the rules of science and biomedicine. A similar process began in Russia as well. Right after the repression in 1937/38, research was only possible to a limited extent in the domains of pharmacology and botany (Gammerman 1941). And certainly some practice continued privately in Buryatia.

After 1945 two Buryat monasteries – the newly built Ivolginskiy Datsan and the renovated Aginskiy Datsan – were opened again. A small number of lamas were allowed to render basic ritual services to the local population. But Tibetan medicine as well as the study of Buddhism were still not legal.

In the 1960s research on Tibetan medicine slowly began to recover. The Botanical Institute of the Soviet Academy of Science in Leningrad organized expeditions to Buryatia again. Researchers collected plants and tried to get in touch with those who still knew about Tibetan medicine. In 1975 a "Department of Tibetan Medicine" was established at the "Buryat Institute of Biology and Medicine of the Siberian Division of the Russian Academy of Sciences" (Nikolayev 1997). The aim was to promote interdisciplinary and scientific research on Tibetan medicine. Herbs were to be identified and their pharmacological properties described, books to be translated and formulae to be understood (Nikolayev 1998:70f). The department was following the trend to make Tibetan medical knowledge usable for medicine in general. Even animal experiments were conducted for this purpose; a thing that couldn't be more at odds with the Buddhist principle of compassion with all sentient beings.

Some level of contact with old Buddhist scholars and *emchis* was possible during that time, but this was always a tightrope walk for both sides. The study of Buddhism was not on the institute's agenda, but at the same time it was a crucial precondition to know more about it in order to understand the medical texts. Several researchers came in contact with Buddhism and got very interested in it.

At the end of the 1960s Bidya Dandaron, who as a child had become the leader of the *Balagat*-movement in the 1920s (see page 48), started to gather secretly with a group of disciples. Among them were several scientists from the west of the Soviet Union. Dandaron was a tantric Yogi coming from the Ningmapa tradition of Tibetan Buddhism. Whereas the Gelugpa School is



Ulan-Ude00:59:48:06Capital of the Buryat Republic.

focused much more on an academic approach, Dandaron emphasized practice and tantric initiations.

Finally the Secret Service learned about Dandaron's activities. He was arrested in 1972 and sent to the *Gulag*. His disciples lost their jobs and were committed to mental institutions³⁴. The Dandaron affair clearly showed the limits in which Buddhism could be practiced and Tibetan medicine researched (Wilcox 1998:16ff, Snelling 1993:260ff).

The purely scientific approach has in many respects led to an essentialized version of Tibetan medicine. I wouldn't, however, dare to blame the Buryat researchers for that. Their work deserves respect. And science and Buddhism

³⁴ Interview with Donatas Butkus, one of his diciples.

are – at least nowadays – not seen as contradictory. Nikolayev, the current director of the department, says:

"Our research work is based on premises recorded in Tibetan medical works, with the maximum conservation of the traditional priorities of Tibetan healing. Simultaneously, in our work are used modern methods of research with evaluation of the state of the organs and systems at the quantum, atomic, membrane, cellular, tissue, organ, and organism levels with regard to specificities of the methods of study of this traditional medical system, its medicinal repertoire and non-medicinal techniques of prophylaxis and treatment." (Nikolayev 1998:73)

Computerized pulse diagnosis and the Eastern Medicine Center

An interesting example of how Soviet science has approached Tibetan medicine is the development of an automated pulse-reading machine (Azargayev et al. 1996, Boronoyev 1997/1998). The project started in 1983, again with an interdisciplinary team consisting of engineers, tibetologists, computer experts, mathematicians and an old *emchi*, who came back from Manchuria, where he had fled to during the purges in the late 1930s. Together they started to look at pulse diagnosis with scientific rigor. Today, after 20 years of work, their machine is being field-tested in three public hospitals.

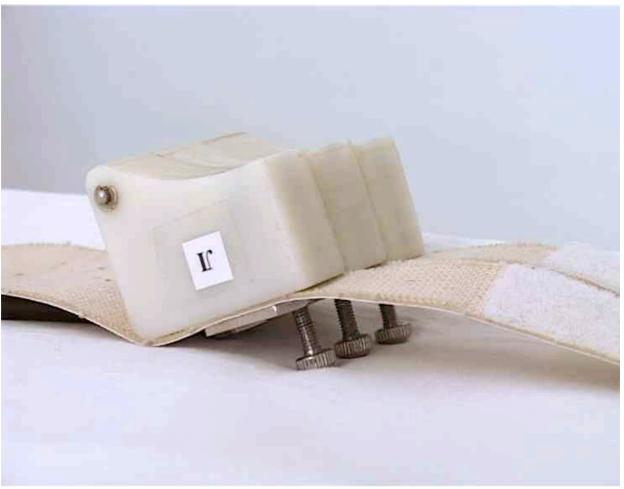
The diagnosis the machine delivers is a Tibetan one – it still needs a physician familiar with Tibetan medicine to make sense of it. As a next step an expert system is now being developed that should translate the results into a Western diagnosis³⁵.

A side branch of the project has developed a way to extract a normal electrocardiogram from the data gathered. It is primarily used as a sales argument. Normally biomedical doctors are very reluctant even to look at the machine. "As soon as they see an ECG coming out of it, they start to listen," says Vitaly Boronoyev, one of the pioneers of the project.

The interesting question is how other Tibetan doctors see the project. Of course sometimes the scientists are smiled at. An *emchi* may think: "what is this good for? I only need my hands." But the team has commanded respect over the years. And most *emchis* know that the nimbus of science is finally helping their cause.

What was missing up until the 1980s was the practice of Tibetan medicine. Research was confined to the laboratories, and no patients were treated. Only with the dawn of Gorbachov's perestroika did it become possible to plan for an integration of Tibetan medicine into the official health care system. Bair Balzhirov, a young biomedical doctor with a profound interest in Tibetan medicine, was the driving force behind this idea. In 1989 the

³⁵ Interviews with Boronoyev and Azargayev.



Sensor... 01:03:52:07

... used for computerized pulse diagnostics

Eastern Medicine Center in Ulan-Ude was established, and Balzhirov was appointed director.

After the collapse of the Soviet Union Buryatia became a republic within the Russian Federation, which again enlarged the window of opportunity for Tibetan medicine. Bair Balzhirov became health minister for the Buryat Republic.

The boundaries between Tibetan, Chinese and Mongolian medicines are fluent. The patients in the Eastern Medicine Center choose between a vast range of methods and treatments. Every doctor wears a white coat like in a Western hospital. Even divination is practiced at the center. A woman – also in a white coat of course – diagnoses patients and gives them advice. And if you doubt what she is saying just go up to the first floor and check with the computerized pulse diagnosis!



Bair Balzhirov 01:05:10:13

"At the beginning of 1990s I was in America taking a special course at the Center of Eastern Medicine in California. The guy who received me, his name was Scott, was the owner of the center. When I started telling him about medicine in Buryatia, he said: "Great! I have a friend, he comes from Tibet and he uses Tibetan medicine. Let's go to see him!" We went there, he had a small one-story practice. We entered the office and indeed a Tibetan person was sitting there in modern clothes. We greeted each other. I said: I am Buryat, from the Soviet Union, from Baikal. We shook hands with one another. And I said: "I have Tibetan medicine". He said: "I don't know what medicine you have. I have Tibetan medicine!" (laughs)

I started to show him the books, and he said: "Everything ours!"

Thereafter I had such a complex. How to call it? (...) Buryats are not Tibetans, and Siberia is not Tibet. But we do form a part of Buddhism, there is no doubt. Tibetan medicine came here and adapted itself here. (...) We have a right to call it the Tibetan medicine of Buryatia. In Mongolia medicine also has Tibetan roots, but they call it Mongolian medicine. We don't do that. We say, it's Tibetan medicine, but it's Tibetan medicine from Buryatia."

Buddhist Revival

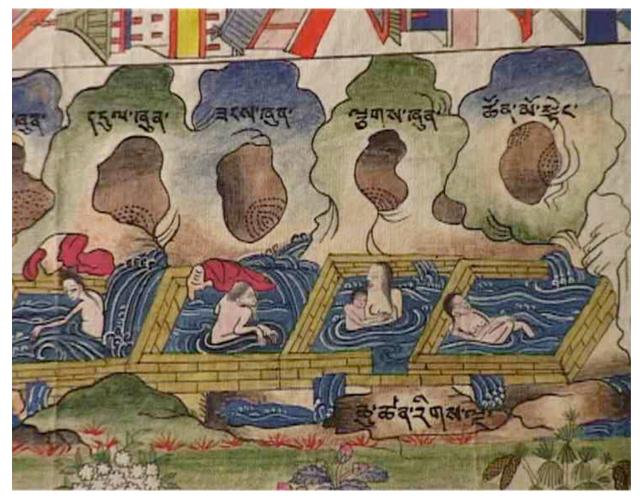
The big challenge for the revival of Tibetan medicine in Buryatia was and is the lack of institutionalized education. Experienced teachers are scarce, not only of Tibetan medicine but also of Buddhist philosophy. The Tibetan government in exile therefore sent a group of teachers to Buryatia. Two of them work in Aginskiy Datsan, where a school for Tibetan medicine was established in 1993. The "Aginskiy Buryatskiy Buddiyskiy Institut" - the Buryat Buddhist Institute of Aginsk - offers medical and philosophical programs. For the medical program the curriculum is the same as at the Tibetan Medical and Astro Institute Men-Tsee-Khang in Dharamsala (India). The medium of instruction is either Tibetan or Mongolian (in the old script). The program leads to an officially recognized university degree, although a philosophical, not a medical one. This is a problem for the graduates, as they get no official licence to practice as medical doctors. They are therefore strongly encouraged to study biomedicine as well. Of course there are niches again, e.g. in the officially recognized Eastern Medicine Center and inside the monasteries, where the authorities do not interfere. But technically only a biomedical diploma entitles somebody to treat patients.

Because of this unsatisfying situation the Institute now has, after a long struggle, established a medical college, where a normal medical diploma can be obtained. This is probably the first monastic biomedical college ever to exist. Courses began in September 2003.

A second legal dimension concerns herbal drugs. Russian law actually demands that every component of a drug is researched and recognized by the official pharmacopoeia. This is not the case for all herbal ingredients in Tibetan formulae. But the Center for Eastern Medicine has received certain rights to certify herbs and formulae. Noone was able to tell me how far its authority technically goes. But in practice a wide range of Tibetan drugs are readily available – at the center, in monasteries or privately, being locally made or imported from India or China.

Tibetan medicine has regained ground in Buryatia. It was certainly also encouraged by the revival of Buddhism that started in the post-soviet era. Buddhism is regarded to be a crucial part of Buryat identity.

How important it has become is exemplified in the quarrel around the so-called "Atlas of Tibetan Medicine". The Atlas, a collection of 76 large-sized medical paintings, serves as a visual key to the "Blue Beryl", one of the most important commentaries on the *Gyushi*, edited by Sangye Gyamtso in the 17th century. Several copies of the Atlas were made in Tibet, and one found its way to Buryatia, either as a gift or pilfered from the 13th Dalai Lama's party on its way to Mongolian exile in 1904. It survived Soviet times in the cellar of an Orthodox church in Ulan-Ude. In the late 1990s an American institution offered to restore it professionally and frame it, so that it could be shown in museums. The first exhibition was to take place in the USA. A quarrel started in Buryatia. One side was very happy with this offer, as the



Atlas of Tibetan Medicine

00:28:41:13

means for restoring it were otherwise not easily available. It was argued that the Atlas could be shown to a wider audience, not only in the USA but thereafter in Moscow and finally in a permanent exhibition in Ulan-Ude.

The then-president of the Buryat Republic supported this view. The other side did not trust the US offer and argued that the Atlas would be stolen, and foreigners would make money with it. This was not without cause, as two editions of the Atlas had already been published, not to everybody's pleasure. Tibetan medical knowledge had always been secretly guarded, and this attitude had only recently begun to change. It was argued that the Atlas (and the knowledge and the medicine) was Buryat property – a tightrope walk given the history of Tibetan medicine in general and the Atlas in particular. The most prominent exponent of this movement against the sell-out of Buryat knowledge was the head of the Russian Buddhists himself, Pandito Khempo Lama Ayusheyev, the man I met on my first day in Buryatia. Even a vote by his Holiness the 14th Dalai Lama, who supported

BURYAT REVIVAL

the idea that the Atlas should be restored and exhibited, wouldn't pour oil on troubled waters. The dispute went on and finally a group of Buryat lamas tried to inhibit the removal of the Atlas with a sit-in. The police stepped in, and the Atlas was brought to America. It did return: framed and restored.

From Research to Film

In this last chapter I will provide a summary of the actual making of my film. I do not attempt to explain in detail why this or that image or statement is used, nor how I position myself in the debates about ethnographical filmmaking. My aim is to reflect the major issues I came across.

Visual concepts

What should be filmed and what shouldn't

"Why are you filming this naked steppe?" my friend Dulma asked me. We were driving from Chita to Aginsk and for the first time in my life I saw the open vast steppe. I was completely captivated and couldn't help but film. "Do you like it? Why? I don't like it," she continued. As soon as some pine trees turned up she wanted me to film them, as they were in her eyes so special and beautiful. We laughed a lot about this, and it became sort of a running gag. However, what had initially seemed to me to be just a simple difference in what people know and what they consider exceptional and therefore worth filming, has turned out to have a broader relevance.

It points to a semiotic layer of images (or imagined images) I was not fully aware of before. Beyond the actual contents of an image and the intentions of the creator – like style, individual and collective fantasy of the time (Oppitz 1989:24) – another power shaped our footage. All our protagonists were very much aware of what it meant to be filmed. All of them were visual experts in a way, educated as they were by television, and each had specific ideas about what should be filmed and how. Dulma, my host and friend, was always concerned that I might show the Buryats and Buryatia as "primitive". "This is not Africa," she would say and told me about the anger and discomfort many people had with the film "The Knowledge of Healing" by Franz Reichle (I owe him much and personally never got the impression that he was conveying an exotic image of Buryatia).

Yura Lama, the young *emchi* in Aginskiy Datsan, who showed us around and took us to the field to collect herbs, was very sensitive about the light in which I would show the monastery. He would say things like: "Please don't film this building. It's too old and too dirty." And before we left for

FROM RESEARCH TO FILM



Yura Lama 00:00:29:07

«Shall I go and get a robe?»

collecting herbs he asked me: "Shall I go and get my robe?" I asked him what cloths he would usually wear. He immediately understood my intention to "show things as they are normally" and agreed to keep his adidas sweat suit on. But when it came to filming "monastic life" he insisted on staging a little ceremony, including yellow hats of course, because he thought it would look better than what we had already filmed before. These are just examples of an long list of such incidences that show the awareness of my protagonists regarding their (imagined) visual representation. I was confronted with a strong desire and will to make things look beautiful and proper.

My intention was to make these efforts transparent in the film. It is easy for a filmmaker to transfer things to a meta-level and to create the impression of unmasking them and showing the "reality" behind the stage. During the editing process I realized, however, that I would somehow deceive my protagonists if I included too many private moments, which showed the staging (we had filmed quite a few of these, my cameraman and sound recording engineer both being experts in not switching off).



Aginskiy Datsan
The making of real Tibetan medicine

Above all I was responsible for the staging as well. I had already met and discussed with almost all of my protagonists during my first visit in Buryatia. I knew the stories they wanted to tell. I then proceeded to harvest these stories, sometimes leaving aside the magic that can emerge when somebody tells a story for the very first time. Of course this approach also had a practical reason: my Russian was still pretty basic and in this way I was able to follow what people said and respond adequately. In this respect I would say that most of the scenes in the final film are to some degree staged or at least influenced very directly by my "harvesting" approach and the protagonists' ideas of representation.



Ulan-Ude 01:04:01:06

Assemblages?

Besides the protagonists and their stories, I had planned from the beginning to use voice-over in order to link things together. I was therefore looking for images that would convey a certain atmosphere without focussing on action or people. I had very specific ideas about this, derived from my theoretical approach to see things as assemblages. I was looking for "moving tableaux", where multiple layers of history had left their visual traces — I was seeking visual assemblages. For example a monastery in front of decaying soviet-style tower blocks (Tsugolskiy Datsan) or monks with cell phones. I wanted images that would contradict stereotypes, "broken" images. This turned out to be a rather academic approach, and it took a while until I started realizing what implications it actually had.

Especially the "monks-with-cell-phones" fantasy (it is not difficult to find them) now seems really odd to me. It is very Eurocentric, as the "surprising effect" it aims at is rooted in a distinct vision of what belongs to "us" and what to "them", respectively to modernity and tradition (cell phones as

Western technology being the modern element – monks with red dress being the non-western traditional one). It reinforces the dichotomy between tradition and modernity and tells the old story of modernity's infiltration into tradition over again³⁶. This fantasy plays with a new exoticism and it somehow fails to capture the normality in which technology (made in Asia but still considered as Western) has become part of everyday life in so many places on this planet.

At least this is where my reflections have brought me today. It might be a rather moralistic argument. But my protagonists' heightened alertness to their filmic representation made these questions important for me to hold in awareness and to reflect further upon. So what happened to the idea of "moving tableaux"?

The main work was to find them in the vast amount of footage (some 90 hours). It was a quest for images that hold a certain emotional density and go beyond the obvious, for images with a "punctum", as Roland Barthes (1993) called it.

An examples of such images is maybe the roadside poster advertising a traditional Buryat restaurant, showing yurts and a traditionally dressed girl with a Buddhist welcome scarf. Heavy lorries pass by and lend the situation a certain sadness. The girl on the poster looks so proud and happy. This "tableau" tells the story of the re-emerging Buryat identity without any glorification or criticism. It matches my memories.

Another example would be the image of a suburb in St Petersburg. Beyond simply being a suburb it has a strange grandiosity, a reference to the scale of the Soviet project of modernity as well as the country's enormous dimensions.

The use of video³⁷ for filming certainly set substantial constraints to this kind of cinematography. Resolution is just not sufficient for the very wide master shot.

Portrait stills

Another visual element of the film is the portraits. As I had hundreds of historical photos, mainly family portraits, I wanted to continue this visual theme. The idea was simple and worked out very well during the shooting phase. It was not at all difficult to explain this idea to my protagonists, and everybody always wanted to pose for a photo together anyway.

Of course the idea is not new. I do, however, regard it as very suitable for this particular film. It relates the historical images to the present. It also helps the historical figures come more to life, as one knows that they once posed

³⁶ Marshall Sahlins would call it a Tristes-Tropes-narrative (Sahlins 2000a).

³⁷ For the records: single definition, 4:3, PAL.



Badmayev family in Aginsk

01:13:17:14

for these photos just as people pose for pictures today. It adds a smile to what Barthes called the transformation of a subject into an object (Barthes 1981:13).

Shooting

Schedule and team

The project followed a tight schedule. I did about five months of preparatory work (November 2002 until February 2003, including fund-raising, research design, etc.), followed by a period of two months in Russia to do preliminary research and meet with as many people as possible (March 2003 until mid-May 2003). After this I had about two months left for developing a script and organizing the actual shooting. In between I spent a week in the USA to interview Peter Badmajew. Shooting in Russia started mid-July 2003 and lasted nine weeks in total.



Shooting in Ivolginsky Datsan

00:09:41:20

The main reason for this tight schedule was that I absolutely wanted to shoot in a team. As there were no funds for professional salaries I had to limit shooting time to nine weeks in Russia. Another reason was that after my first visit in Buryatia it was clear that as a guest there was no chance for me to pay for anything. Knowing this I was aware how expensive it would be for my hosts to cater for a team of three people over a longer period of time. Luckily we were able to raise some funds in Buryatia itself, which were happily accepted by my hosts.

I am sure the film would have profited if we had had more time to hang out and let things happen and arise in their own time. As I knew we would not have this time, I decided to plan as much as possible in advance and to write a script.

Script

Scripts for documentaries are certainly a contradictory thing. I consider them now to be completely useless for taming the unexpected. I had, however, always aimed at something else, too: I felt it was necessary to reach a certain

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Crew
Director and cameraman in working clothes, Buryatia 2003.

degree of determination in my appearance. A script was to help me with that. Russia in general, and its provincial parts in particular, are very formal and hierarchical. As a consequence it was always necessary to directly approach the *nachalniks* (the omnipresent chief of whatever) to get access and shooting permissions. If we didn't they would instantly feel missed out. I quickly realized already during my first visit in Russia that I had to change my initial strategy, which was to mime the innocuous student.

The script described a possible final film. It consisted of 19 scenes and sketched out the subjects of the conversations, protagonists, visual themes, sites, available archival material, and possible action. When I approached somebody I could show him or her in which context he or she would appear in the film.

In fact the script proved to be very helpful, not only from the perspective of interaction, but also so as not to forget about original ideas. The definite downside of working with a script is, in my eyes, that once it is there one tends to "fulfill" it and is no longer really open to what happens and emerges naturally. So after shooting I was afraid for some time that I had succeeded in fulfilling the demands of the script, but I was not at all sure if my script itself was good enough.

Shooting situations, logging

We worked as a classical small documentary team: A director, a sound recordist and a cameraman. Usually, as with my first interview with Pandito Khempo Lama Ayusheyev (not taped), things happened the very moment we arrived somewhere. There was hardly ever any time to prepare. My role was therefore mainly to try to slow down the whole thing, so that Michael (the cameraman) could quickly analyze the situation and set up some light if necessary, while Anet (the sound recordist) tried to get as much of the preliminary talks as possible on tape.

Anet was also responsible for the log. As we recorded sound separately from the image (radio units being too expensive, a cable too restrictive and the line-in ports on the camera not good enough)³⁸, we used an acoustic procedure to sync sound and image. Michael would announce the reel number and timecode of the camera, Anet the number and track of the Portadisc, and I would clap my hands in front of the lens. If this procedure was not possible at the beginning of a take we did it at the end. Anet logged Michael's timecode together with a short description of the take. At the end of the day we captured the video to the computer (in offline quality) and discussed it briefly. Michael would then log the footage, while I was usually busy preparing for the next day.

The two logs together with the camera's timecode in the audio log enabled me to quickly sync audio and video afterwards.

Editing

Who is in and who is not...

One of the most crucial decisions during editing was to select the protagonists. We interviewed and filmed a total of 34 people in the USA, Switzerland, Poland, Lithuania and Russia (not counting all the Badmayev relatives in Buryatia). I distinguish three groups among them: relatives, experts and practitioners (doctors, pharmacists, etc.). In the final film 14 interviewees are included. Here a short overview who they are and what they stand for.

Relatives:

– Balzhir Zhargalov, a retired army officer and Badmayev descendant. He has been working on the Badmayev's pedigree for the last 30 years. Family trees are very important in Buryat culture. Many generations of ancestors are normally known by heart. The Badmayev's pedigree goes back to Genghis Khan (as quite a lot of pedigrees do, in fact).

³⁸ We worked with a Sony PD150 Camera in DVCAM mode, an HHB Potradisc (professional MiniDisc recorder) and two Neumann microphones (KMR81, KM185)

- Boris Gusev, Pyotr Badmayev's grandson. He is the author of two books about his grandfather. He hopefully conveys some of the charisma and pride his grandfather is said to have had.
- Natalya Rogovskaya, Pyotr's great-granddaughter, Boris Gusev's daughter. She is in charge of the family archives in St Petersburg and her mission is to show Pyotr as a good Christian. According to her, Pyotr invented the real Tibetan medicine with the help of his Christian belief.
- Peter Badmajew, Vladimir's (Wlodzimierz's) son and co-initiator of Padma in Switzerland. His is the emigrant in the film. His personal odyssey exemplifies the family's odyssey. He lives in the US and is a physician and surgeon. His passion is running marathons.
- Vladimir Badmaev Jr, his son. As a medical doctor he did research on formula 28 (branded Padma 28 in Switzerland) and works for a pharmaceutical company in the USA. He stands for new horizons and the young generation. Will it be possible to produce Tibetan remedies synthetically?

Practitioners:

- Yura Lama, the young emchi in Aginsk who is shown collecting herbs and making drugs. He studied at the Buryat Buddhist Institute and represents the Revival of Buddhist Tibetan medicine in Buryatia.
- Tsiren Lama. He was a former army physician, and we filmed a lot of very interesting material with him that finally dropped out. He says at the beginning of the film: "Tibetan medicine can work in any region on this planet. It just has to adapt to the local conditions."
- Viktoria Kolotagina, a young Russian Tibetan doctor in St Petersburg. She studied in Aginsk as well and stands for the contemporary link between Aginskiy Datsan and St Petersburg.
- Lev Azargayev, the physician in the Republic Hospital in Ulan-Ude who explains the computerized pulse diagnosis. An insight into Soviet science and its outcome.
- Babu Lama, rector of the Buryat Buddhist Institute in Aginsk. He is one of the leading personalities of the Buddhist revival in Buryatia.

Experts:

- Tatjana Grekova. She is a biologist by education and became a medical historian when she stumbled upon documents about Nikolai Nikolayevich, who cured her mother.
- Andrey Terentyev, tibetologist and historian. He is an exponent of the new European Buddhists in Russia and the editor of a journal called "Buddhism in Russia". I love his smile when he talks about the grand issues of world politics.
- Herbert Schwabl, current CEO of Padma AG. He brings in the pragmatic perspective of a producer of Tibetan remedies in the West: How can we make Tibetan medicine accessible for people here and now?



Shooting near Tsugolskiy Datsan

00:20:59:03

– Bair Balzhirov, medical doctor by education, representative of the Buryat Republic in Moscow, initiator of the Center for Eastern Medicine in Ulan-Ude and former health minister of the Buryat Republic. His story about the encounter with a Tibetan physician in California raises the question to whom Tibetan medicine belongs.

Of course Balzhirov and Schwabl are also practitioners in some respect as well as Peter and Vladimir Jr. I differentiated the three groups mainly in order to focus on certain aspects. Peter, for example, educated me about a lot of medical details that I finally wasn't able to use for the film.

Talking heads and working towards the final film

Among filmmakers "talking heads" are often considered to be out of fashion, boring and not "cinematic". Television stations don't like talking heads either, especially if somebody speaks more than a few sentences in a foreign language. This is regarded as unacceptable. Subtitles are arduous to read and

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voice-over translation is not suitable for longer statements. As a result the usual television documentary only allows for very short statements as soon as somebody speaks in a foreign language. I am not a lover of endless talking heads but in this case I really wanted to show my protagonists as thinking and speaking individuals, as intelligent people, because I am convinced that they have something to say. Of course this comes with the price that some people might get tired of reading the subtitles.

Perhaps a second reason why I decided to let people have longer statements lies in the way I approached the footage: I worked with transcripts. Two people in Russia made timecoded and roughly translated transcripts of all the spoken parts in the film (about one million characters). I processed these transcripts with a standard method of qualitative research. I coded them, wrote memos, re-coded them and so on.

I had the idea that the process of editing a film is very similar to qualitative research and could therefore benefit from its methods. I had always wanted to try this approach out with a larger film project. So before I started editing I outlined and developed a software solution that allows for coding and memoing, deals with timecodes and video files, and finally provides an interface to the editing software³⁹. With the timecoded and coded transcripts I also had a tool to quickly generate subtitled rough-cut versions and show these to people. This text-based approach probably contributed quite a bit to the focus on speech in the film.

Parallel to the text-based approach I also worked on the film from the angle of the images and the (rare) scenes where something really happens. I basically started to refine the logs my crew had done during shooting.

As we had captured everything to hard disks the whole 90 hours remained highly accessible. I never looked through them in one long go and rated scenes, as it is usually done. Rather, I logged, coded, and refined the log during the whole process of editing. Some of the images in the final film were added on the very last day.

I feel that I know my material much better than was the case with my first film, where we had pre-selected a fraction of the original material and basically dropped 4/5 after looking at it just one single time. Right up until the very end of editing it often happened that images I knew and considered bland suddenly revealed themselves as appealing in a certain context.

Finding the narrative

Just as Ayusheyev had spontaneously anticipated, the major challenge of my project was to bring together the Badmayevs' biographies with Tibetan medicine. Of course one could focus on either of the two, or leave the Badmayev story aside totally. Several times I was on the edge of making such

³⁹ Final Cut Pro 4.5, Filemaker 6, AppleScript and XML

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a decision. My subject was so broad, and so many things that I considered to be captivating are not easy to understand unless you get some background information first.

As I edited the film on my own I started showing rough-cuts at an unusually early stage, the first after two (of a total of eight) months of editing. It was 105 minutes long and focused very much on the Badmayev story. As a result my test audience complained that a) they were confused by all the nieces and nephews and marriages and second wives, b) they couldn't really make sense of who was speaking and why, and c) were missing some basic information about Tibetan medicine.

As a consequence I cancelled many of the biographical details and tried to find and tease out the "secret missions" my protagonists pursued. I dropped about 50% of the original material and added new scenes that focussed more on Tibetan medicine.

The second rough-cut was about 90 minutes long. The reactions to this one led me to discover something very fundamental: What was still missing was my own personal attitude towards the subject. The baseline of the critique was like: "interesting, but tell me, what was your motivation towards making this film?"

My interest in the subject is very strong, but obviously the film didn't make this explicit. The second half of the editing process was therefore focused on working the accessability and depth of my own interest — Tibetan medicine and its transformations. I continued to show rough-cuts to several people and slowly gained confidence that things were becoming increasingly understandable.

It is still a very broad subject. But it is, in its final version, what I had planned at the beginning: An epic tale about a family showing how Tibetan medicine developed and changed.

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Note on transliteration

The transliteration of Russian names and words follows the system as stated below. Soft and hard signs are not recognized so as to make the text more readable. Some general exceptions are made for common spellings such as Buryatia (instead of Buryatya) as well as authors' names where they are spelled differently in published works. Russian transliteration remains tricky. The Badmayevs spell their family name in four different ways: Badmayev, Badmaev, Badmajew, and Badmajeff.

A a a Like the a in fath

A	а	a	Like	tne	a	ın	ratner	

H H n Like the n in north

Like the o in port

("ah" if not stressed)

Π π P Like the p in pepper

 Π Π p Like the p in pepper

r Like the r in red (rolled)

s Like the s in soon

T t Like the t in tea

y y u Like the double **o** in fool

Φ **φ** f Like the f in fire

X x kh Like the **ch** in scottish lo**ch**

L u ts Like the ts in sits

4 ch Like the ch in chair

Ш ш sh Like the sh in short

Щ щ shchLike chch in french cheese

"Hard" sign; not transliterated

i Like the i in ill

"Soft" sign; not transliterated Ьь

e Like the e in let

Ю ю yu Like you in youth

Я я ya Like ya in yacht

Лл l Like the double l in fill

M m Like the m in mouse

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Martin Saxer, December 2004

Curriculum Vitae

Martin Saxer

Born 25 January 1971 in Leuggern, Switzerland

Education

Primary and secondary school in Hundwil and Stein AR, Switzerland

High school in Trogen AR, Certificate of Maturity 1991

1994/95 Theater studies at the University of Bern

since 1994 Continuing workshops in improvisation with Jean-Martin

Moncéro

since 1998 Studies at the Institute of Social and Cultural Anthropology

at the University of Zurich

Work experience

1991/92	Glass design, work at the Atelier Tre Fiori, St Gallen
1993	Social education projects with mentally handicapped
	persons in Kreuzlingen and Geneva.
1994 - 1998	Actor, writer and stage director in various theatre companies Production management in various theatre projects Freelancer for graphic design, layout and text
1998 - 2003	Part time job as web designer at "Berufsbildungsprojekte Wettstein GmbH"

Languages

German, English, French, Russian, Spanish

Film and theater (selection)

1996	Director: "Cyberfaust". Multimedia theatre project, shown in St Gallen, Zurich and Zug (invited to the Landis & Gyr Kulturfestival)
1997	Director: "Versuch mit der Dauer der Liebe" – theatre play, shown in St. Gallen, Frauenfeld, and Zurich
1998	Dramaturgy: "@ffenschwanz" (HMT Zurich, Director: N. Galeazzi)
2000	Camera/Co-Director: "Mosimann" – Documentary film (74 min), invited to the "Filmfestival Spiez"
2004	Director/Producer: "Journeys with Tibetan Medicine" – Documentary film (77 min). Official release at the Solothurn Film Festival in January 2005.