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AN INQUIRY IN TO THE IDENTITY AND CONCEPTS OF THE NATIVE MEDICAL SYSTEM IN SRI LANKA**P.R.Ekanayake***Mphil (Sociology) University of Ruhuna, BA(Sp-Hons)(Sociology) Universtiy of Ruhuna.
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Abstract: Medical treatment system is a pattern of social institutions and cultural traditions functioning with an aim to find an effective cure for illnesses and diseases. The native medicine system in Sri Lanka is perceived by number of scholars as Ayurveda or the traditional native therapeutic system or a mixer of both these systems. Some researchers stated that the Ayurvedic medical system is practiced along with the native traditional medical system which had been originated and flourished in the island. However, some other scholars believed that Ayurveda has originated in India and subsequently expanded it into Sri Lanka. As still there is no unified idea on this matter, this study attempts to investigate and analyze those views and to recognize the identity of indigenous medical

system in Sri Lanka. The main objective of this study is to identify the native medical system and this system specific concepts and characteristics. This research is mainly based on secondary data which is drawn from the literature includes some written works and documents published by Ayurvedic doctors, native therapists, or "Sinhalese Doctors" and other publications on native medicine by intellectuals and archeologists. This study identifies some characteristics inherent to Ayurveda and traditional native therapeutic system while comparing and contrasting these two systems. Finally, it has been concluded that Ayurveda in Sri Lanka is the mixture of these two medical treatment systems.

Key words: Medical system, Ayurveda, Native system, concepts, Sri Lanka

INTRODUCTION

Treatment system simply means a set of ideas with actions of curing diseases. perera (2000:58) states that medical treatment system is a pattern of social institutions and cultural traditions functioning with an aim to find an effective cure for illnesses and diseases. In different societies numerous treatment methods plus health habits and rituals against illnesses and maladies have been evolved along with the fruition of their historical developments been born and bred in such specific environmental and culturally demarcated locations (Ranaweera, 1994:09).As Social scientists think that South Asian societies enjoy somewhat common cultural features. And among them Ayurveda is practiced as a common medical system while individual territories retain certain unique medical treatments.

In Sri Lanka, Ayurvedic medical system is practiced along with the native traditional medical system which had been originated and flourished in the island while it is believed that the Ayurveda has first originated in Indian subcontinent and gradually found its way towards Sri Lanka.Anyhow both these schools of medicines have now merged into one virtually in separable single system known as the indigenous medical treatment systems. As such, this phenomenon seems to have emerged as a problem of finding as to which kind of native medicine is prevailing in Sri Lanka whether it is Ayurveda or the traditional native therapeutic system or a mixture of both these systems.It has become a problem now making it difficult to arrive at a clear solution.Number of scholars have expressed different views on the subject of native medical treatment system presently existing in Sri Lanka.This study attempts to investigate those views and to recognize the identity of indigenous medical system in Sri Lanka.

RESEARCH PROBLEM OF THE STUDY

Any country may have its own medical system.It is considered the indigenous medicine of that country. Ayurveda is regarded as an indigenous medical system in Sri Lanka in both constitutionally and practical terms.But it is historically accepted that India was the homeland of Ayurveda and then spread to other parts of Asia.Before the advent of Ayurveda, medical treatment in Sri Lanka was regarded as *Sinhala vedakama*and it is believed that it was a unique system of medicine for Sri Lanka.In that context, the research issue of this study is what is the unique medical system for Sri Lanka.

OBJECTIVES OF THE STUDY

Some researchers state that Ayurvedic medical system is practiced along with the native traditional medical system which had been originated and flourished in Sri Lanka. Some other scholars believed that Ayurveda has originated in India and subsequently expanded it into Sri Lanka. The literature is evident that these two medical systems are distinguished to each other specially in terms of treatment procedures. As a result, it is complicated to identify the nature and characteristics of endemic medical system in Sri Lanka. In such a context the objective of this study is to identify the indigenous medical system of Sri Lanka and the nature and its inherent concepts by investigating and analyzing mainly the relevant secondary data and information through available sources.

METHODOLOGY

This research followed basically the qualitative research approach. This research is mainly based on secondary data which is drawn from the literature includes some written works and documents published by Ayurvedic doctors, native therapists, or “Sinhalese Doctors” and the scholars who had written about the native medicine. Furthermore, as a complement to the secondary data, views and opinions of some archaeologists are obtained through informal interviews conducted by the author and they have been utilized to support any historical findings in this field.

NATIVE AND AYURVEDIC MEDICAL SYSTEMS

Native methods of medicine therapy can be identified as the knowledge of medicine and the connected therapeutic methods that had been brought down from generation to generation. Certain human groups perpetuate their medical know how by passing it on verbally unto the younger generation. Native or the “tribal” cultivators or the “rural” people or “folk” are the terms applied sometimes within such pockets of habitats among whom the native treatments on sicknesses flourished (Malimage: 2005).

As per the definition given by the World Health Organization native medicine treatments mean “as process encircling whole practical experiences or influences which are explainable or otherwise in finding out cures and to diagnose physical, mental, and social imbalances by faithfully adhering to practical experiences and observations brought down by generation to generation whether by way of writing or verbal uttering”

(www.who.int/medicines/arears/traditional/definitions/en/index.../accessed on 08.09.2017)

Non complications (amassing writing works)of methods are identified with the terms like “Folk”, tribal and “native” generally these are traditional beliefs, rituals, hypotheses and practicing at family and community levels deriving effective and non effective results depending on centuries long application and trails. These phenomena are descending through verbal communication tradition and thus could be named as “community health culture” (PRTM, 2002) accordingly all the countries in the world might be possessing identical therapeutic methods and health habits. Majority of the countries in the present day world where the western medical system reigns high these still exists evidences of indigenous remedies achieved. Aborigines of 60,000 year ancient Australia had evidently used certain herbals with medicinal properties. In Iran, when excavating some 60,000 year old cemeteries, some parts of several medicines herbals were found (Magamma, 2003:346)

In India, Ayurveda reigns as the native medicine system while the Acupuncture is practiced in China as the native medical treatment. Unani is the term given to the native mode of treatment in the countries of Arabia and Turkey. Thus the foundations of medicine discipline in these societies necessarily depended on the philosophies, concepts accepted by such societies.

As such countries that are basically divided as Eastern and Western countries have developed their medicine disciplines in accordance with the philosophical foundations of their own countries. Nature of the medical systems like all the other sections and disciplines is decided in keeping with the philosophical concepts upon which the foundations of that society laid. At present the general acceptance is that Ayurveda was originated in India and gradually spread into the other parts of Asia.

The popular acceptance of India as the motherland of Ayurveda is out of question. Nevertheless, whenever the birth of Ayurveda had occurred and how it had adventured into the sub continental proportions do not provide definite answers. As per the historical legend Ayurveda came into existence just after the summit meeting of grand "rishis" convened in some Himalayan abode. As have mentioned in "puranas" like "Charaka" and "Susruta". Ayurveda was the oldest discipline originated from the "Mahabrahma's Wisdom. The book containing Mahabrahma's medicine was named as Ayurveda Maha Sanhitha consisting of ten sections or parts. However Mahabrahma contemplated over the lowest state of memorability and also of limited nature of longevity of man has restructured his (Kumaradasa, 2007:7) "sanhitha" to suit "ashtanga". Common feature of Indian thought is that all the arts, sciences etc. Brought into this universe by omnipotent mahabrahma who made this world us too.

Similarly, there exists legendary myth of creation on behalf of Ayurveda too. In addition to *rigveda*, *yadurveda*, *Sama veda* and *Atharva veda* 'mahabrahma' created *Upa veda* in volumes in order to find a salvation to humanity from sicknesses and diseases. Ayurveda is one book or a part of this Upaveda volumes. Another hypothesis is that god Shiva has created Ayurveda. Each part contained some hundred stanzas and one thousand such parts make one hundred thousand slokas. Mahabrahma who understood this difficulty and summarize these into eight parts and finally bestowed to the world (Kariyawasam, 2002:02). Thus *mahabrahma* appears in many hypotheses regarding the birth of Ayurveda. However, this hypothesis has been subjected to a controversial topic.

AYURVEDIC TREATMENT SYSTEMS

The definition of the term Ayurveda is the science teaching us to protect our lives span. *Vedaya* (higher erudition) on long life (*aryusha*) is Ayurveda (Kumaradasa, 2007:27). It is a philosophy of livelihood directing has not only to consider it as a medical treatment system against sicknesses and diseases but also as a philosophical way of lifestyle (Darmasiri, 1998, Kumaradasa, 2008).

Ayurveda enjoys having a scientific and philosophical foundation. It has a given a definition of a healthy person as having a balance between malfunctioning and this disposal of excretory refuse digestion of food and maturing process cycling of bodily sprits proper functioning of excrete movements along with the presence of pleasant mind body parts and so on ((Perera, 2000:288).

Ayurveda has developed certain theories on body functions and nonfunctions particular to Ayurveda itself. Accordingly, there exists three malfunctioning and five elements upon which is founded the basic theory of illnesses. Ayurvedic philosophy contains five great elemental powers conducting this universe. These five elements are earth wind, water, earth and fire and these elemental powers join in numerous ways resulting wellbeing of all the living beings with their health concern. Provocation of these bodily elements like air, bile, phlegm may cause a chain of melodies (Obeysekara, 1977:155). This is very important in Ayurvedic concept. These three pollutants classify and explain the health and illness of the human being. In addition to these physical pollutions malfunctioning of mental sphere caused by *Sathwa*, *Rajas* and *Thamas*.

Good condition of health is achieved whenever the desirable level of balance is maintained among three pollutions, vital elements and poisonous fuse while any imbalances are causing illness. Ayurveda teaches how to maintain these three balances intermittently.

Here operates two factors causing illness according to Ayurvedic concept. They are environmental factors and personal habits. Fluctuation of elemental powers of the universe cause diseases, while bad habits of a persons' may also cause sickness. As such, Ayurveda teaches how to conduct a sober livelihood according to a daily chart from the time of awaking in the morning up to going to sleep at nightfall. Diagnosis of sickness, explanation of symptoms, administering of medicine etc. are carried out in keeping with a theoretical system. This system has the capability to provide explanation for all the maladies except those are believed as created by super natural powers (Obesekara, 1991:181).

Ayurvedic system follows two procedures in order to make a patient a healthy person. Draining away pollutants from a body by way of purgatives, vomiting, nasal inhaling, clearing out blocked excreta and by perspiration is one procedures. The other is tranquilization of provocation of three elemental factors by way of diet control, keeping in hunger, providing sun shine, various exercises and also by medicines (Pilapitiya, 1991:2).

Ayurveda contains eight major parts namely, physical therapy, surgery, shalakyā, kumāra, āgāda, būthā, chemistry, and rejuvenation. Accordingly, the entire Ayurveda is made up four structures namely diseases, making causes, healthiness, and the way of maintaining good health (Pilapitiya, 1991:2).

In this way, Ayurveda has become well established and effective treatment system in Sri Lanka. It enjoys formal institutional structure and administrative set up too. Government and private owned Ayurvedic medical colleges undertake to train the required doctors and those who are to provide treatments.

DIFFERENT OPINIONS ON THE IDENTITY OF THE NATIVE MEDICAL SYSTEM IN SRI LANKA

Different opinions existing with regards to the Sri Lankan native medical system can be identified into two groups. One is "Sri Lankan native medical system is necessarily built up with the influence of Ayurveda in India (Kumaradasa and seneviratne, 1963 Kumaradasa, 1984, 1986, 2007 lokubandara, 1986 wanninayaka, 1986)". The other one is "Native medicine System in Sri Lanka is the traditional native therapeutic of the Sinhalese medical practice existing since ancient time in Sri Lankan society(Fernando, 1962, Gunasekara, 1995, Ranasinghe, 1995, 1998, Ranwala, 2009, Jagoda arachchi, 2009, Chandra sekara, 1995, Alwis, 1998, Kusumaratne, 1983)".

1. Sri Lankan Native medical system is necessarily built up with the influence of Ayurveda in India.

According to Kumaradasa (1987,2007) Sri Lankan Ayurveda has been built upon the influence of Indian Ayurveda and now it has become as the native medical system in Sri Lanka. Lankan Ayurveda is necessarily a branch of Indian Ayurveda. Not a single medical work written with the letters appearing in first Sri Lankan stone inscriptions has not been found so far. Certain medicines prescriptions not found on Indian books are to be found in Sri Lanka. This cannot be a fact to prove that a separate medical system away from Ayurveda existing on Sri Lankan soil.

Medical system should possess many components like fundamentals anatomical diseases matters therapies etc and also a history of its beginning (Kumaradasa, 2007:33). He does not accept having any treatment systems prior to the advent of Ayurveda. If there were any treatments methods existing in Sri Lanka before king Vijaya's arrival it should have been necessarily the Indian system he believes. What he believes is that ancient Sri Lanka had been a part of south Indian territory by enabling the spread of Indian cultural connections including Ayurveda which had influenced the built up of Sri Lankan ways of treatment.

In 1963, Kumaradasa and Seneviratne had pointed out this idea. They discarded away the hypothesis of the origin of the native Sri Lankan medical system during the legendary *Rawana* and *Pulasthier*. They pointed out that Rawana was king who reigned in an area called *Lankapura* which was situated near to Vindya hills in India. They further clarified that *Lankapura* was Vindana rocky area which was subsequently converted from Lanka to *Lankapura* (Kumaradasa and Seneviratne, 1963:567)

Lokubandara (1986) views a similar opinion. There was not a single medical system except Ayurvedic system in Sri Lanka until the advent of Dutch people who introduced the western medical system in Sri Lanka during the first half of 17th century. Native treatment improved with North Indian, South Indian and Unani medicines along with the native drugs were used to cure the illnesses but still is not an another medical system away from Ayurveda (Lokubandara, 1986:11). However, he mentioned in another place in the same book as when Prince Vijaya landed in this country Kuweni was spinning cotton. We learned accordingly it provides a finest clues as to the living of a cultured people who were refined enough to wear cloths. Further Dr. Deraniyagala who was a superintendent at Colombo museum had conducted a geological research in Balangoda area was able to find some pre historical human species lived during 10th century BC that is many years before the Vijaya's arrival (Lokubandara, 1986). If they were a developed kind of men we can conclude that they had practiced some kind of medical treatments against their illnesses. For all that it is impossible to comprehend the opinion of Lokubandara with regard to a native medical system existed in Sri Lanka.

Wanninayaka (1983) declares that since the beginning of Ayurveda was treatment system known in Sri Lanka. As India and Sri Lanka were close to each other geographically and culturally it was natural for Lanka to follow up Ayurveda in India that was flourishing in India. Ayurveda has gained a very high position in India and its fundamentals were accepted in Sri Lanka too. As such it is clear that ancient medical systems in Sri Lanka were the Ayurveda. This is identified by the names, native medical system, national medical system, Sinhalese medical system (Wanninayaka, 1983). However, he states this idea in another place in the same book "although the fundamentals were in the background of Ayurveda local treatment methods too were in the practice. Many medicinal prescriptions away from the Ayurveda made in Sri Lanka and this was identified as the traditional therapeutic system. Medicinal prescriptions came in to the light with the names kalka, kasaya, pitika, thaila which were not mentioned in the first Ayurvedic books. But with the traditional therapeutic systems these prescriptions should have been established (Wanninayaka, 1983). This statement clarified a system of treatment deviated from the Ayurvedic system was in practice by the name native therapeutics. Any how this opinion regarding identifying of indigenous medicine systems have not been clearly mentioned.

2. Native medicine System in Sri Lanka is the traditional native therapeutic of the Sinhalese medical practice existing since ancient time in Sri Lankan society.

Ranasinghe 1995,1998 have aired his view on this matter. He points out that even before very important historical events like Vijaya's and Mahinda's arrival people in this country evidently had maintain a highly cultured civilization. Legends of Rawana and rishi Pulasthi who represented Sinhaladeepa, at the medico rishi conference held in Himalayan abode are the solid evident for a wide spread existed in this country since ancient time.

IDENTIFY OF THE NATIVE MEDICINE SYSTEM IN SRI LANKA CAN BE TRACED WITH FOLLOWING FEATURES

- Particular therapeutic methods and systems against various diseases in provinces are in operation. Also calling names for generations of doctors by the names of the provinces concerned. E.g., catarrh treatments, fracture treatment at Nuwara kalaviya.
- Treatment methods introduced with expertise in treatment suiting the requirements E.g. Fracture treatment (tree treatment,) treatment for poisonous attack by serpents, Mandanam treatment and eye treatment.
- Generational heritage generation pass on from father to son, teacher to pupil etc, teaching astrology after ascertaining good manners and generation and the birth chart. This is a special learning unique to generational medical system preventing of the misuse of relevant resources and obtaining undue earnings, prevent in defamation etc are the aims of this teacher clan.
- Presence of unwritten code of with native doctors. This code of unwritten ethics comprised providing service, manners to be observed while living in the society, thought of equanimity on making profit various rituals to be adhered to when employed in the medical treatments (Ranasinghe, 1995).

Above mentioned features' according to Ranasinghe cannot be seen in the Ayurveda of Indian schools. There appears genuine practicability and applicability in the native medical systems where as such firmness cannot be seen in the relevant books in India. Many of the yogas clarifications belonging to those generations are existing mysteriously (Ranasinghe, 1995).

Sri Lankan medical practice existed since the beginning of Lankan society got merged easily with Indian Ayurvedic system due to the economic, cultural and social relationships with India. Thus a medical system complete with surgical and therapeutic capabilities came in to existence as having a national identity Ranasinghe further pointed out (Ranasinghe,1995)

Alwis (1992) has declared his views on the indigenous medical systems, according to him here existed human habitat even before 25,000 years as per the research made,although our history was written since the arrival of Vijaya it is a clear fact now. If so, those early human could have been subjected to various illnesses for which they would have followed a certain medical treatment, we can assert. This medical practice brought down by verbal conversation includes many words that

cannot be attached to any other language. Native eye treatment, treatment for bone fractures, poisonous serpents, cows and elephant etc. contain much more particular than the Indian Ayurvedic books (Alwis,1992:149).

Ranwala (2009) point out that traditional Sinhalese medicines existed in Sri Lanka even before the birth of Indian Ayurveda. It is the oldest medical, system in Asia. Research made by Dr.Deraniyagala raise the evidence for habitation of two groups of human namely, homo Sinhala yesus and Balangoda yesus in an around Balangoda areas in between 1000 -8000 BC. If so his view is the probability of having certain rituals, practice and medicines could have been flourished among them is believable. This era was earlier than Harappa and Mohendojaro civilization with which the changes of society had begun (Ranwala 2009,21). He further points out that the term "*Sinhala Wedakama*" was used for the traditional medical practice even reflects some historical situations. By that time the human groups named as home Balangoda yesus and home Sinhala yesus had been lived scattered in the island. The group Sinhala yesus practiced Sinhala medical methods. Later on these two groups faced extinction and then merged human tribal groups by the names, *Raksha*, *Yaksha* and *Naga*. When Vijaya with his team landed in Sri Lanka these tribal groups were living here in different territories in the island.

According to the geographical situation in Sri Lanka *Raksha* tribe lived in the areas like Puttalam, Mannar, Anuradhapura, Thammannawa etc. Their medical practice was associated with herbal environs called *Gas wedakama* and occult science methods. *Yaksha* had inhabited in the central parts of the island and they had performed various mysterious kem methods. *Naga* tribe had lived around the costal belt and used "*nila*", medical methods.

Ranwala further clarifies the origin of various sections of the native medicines that had depended upon the necessity and the environs of the daily needs of the person. Man fallen from a tree helped commence "*gas vedakama*" or joint treatment pricking thrones in the eyes during land works had given a birth to eye treatments, attack by poisonous serpents helped begin treatment for such snakes bites etc, make it clear that native treatment had originated with day today requirements of the common working man. These medical treatments methods are different with the areas. E.g., catarrh treatment in Sabaragamuwa, bone fracture treatments in Nuwarakalaviya. Theories and doctrines are not to found in Sri Lankan native medicine unlike in Ayurveda or other medical systems. Instead these exist the practical experiences gained, experience of seeing and experience of practice.

Accordingly, Ranwala concludes Sri Lankan native medicine had developed gradually since the beginning of the Sri Lankan society. It passed from generation to generation to become traditional Sinhalese medical system having its own identity and can be easily separated from Indian Ayurveda.

Fernando (1995) thinks that Sinhalese treatment was born and bred in Sri Lanka itself. Truly, it is very much similar to the Ayurveda in India, yet a completely separate system. Rain of king Rawana was the golden era of native medicine in Sri Lanka. Treatments methods running beyond Rawana era was the foundation of native medical system in Sri Lanka he points out. Bhagna therapy poison therapy etc like many treatments methods and the required medicaments are not mentioned in Indian Ayurveda. Origin and end of native kalka guli etc is to be found in native ayurveda school. These *guli* and *kalka* when mixed with numerous leaves provide tremendous relief. Factors helped

identified the native medical science are many when even considers scientifically. Fernando (1995:37) Further more Fernando advices not to see Sri Lanka though Indian history and culture anymore thus enabling to identify Sri Lankan thing Fernando (1995:38). Accordingly Fernando's view the traditional Sinhalese medical system developed in Sri Lanka is none other than the Sri Lanka native medical system.

Chandrasekara (1995) has explained the matters regarding the identity of Sinhalese medical practice. According to him Sinhalese medical methods are the traditional medical system originated in Sri Lanka. It is older than the Indian Ayurveda. Anyhow at present this factor got mixed with other mode of medical practices which could not be identified by the very owners of the heritage as happening in many other cultural sections Chandrasekara (1995:26).

He has furnished certain examples in order to illustrate the identity of Sinhala medical practice. Accordingly, there conduct Ayurvedic medical colleges to teach medical science in Sri Lanka. But, there exists not a single college to teach Sinhalese medical practice. But even today Sinhala doctors care patients very satisfactorily. They perform astonishing treatments methods to the wonder of the world. Specially, in the fields of fracture and poison treatments.

Moreover, he points out the difference between concoction of Ayurveda and a heated medicinal preparations of Sinhalese methods and also the difference in weight and measures could be used to illustrate the identity of these treatments methods. Accordingly, there are twelve "*kalans*" of all the drugs in a concoction. But in Sinhalese way doctor prescribes suitable shares to be prepared for the correct heating stage. Thus he thinks that the heated preparation of medicine is older than concoction. As such Sinhalese medicine treatments is a matured results of a long time experience. Chandrasekara declares that the able men who understood the power and capabilities of trees, creepers, and herbs have deployed their knowhow for the perfect health of their fellow beings. That was the genuine Sinhalese medical treatments system (Chandrasekara, 1995:27).

Kusumaratna(1983) concludes the present native medical traditions in Sri Lanka is a unification of Ayurveda derived from North Indian culture. Siddha medical system derived from south Indian culture, Unani system derived from Islamic culture and the native therapeutic system descending since pre Rawana times of Sri Lanka. However he clarified that a native independent medicine system was evidently in practice use in the ancient times.

These held a rishi conference in the Himalaya territory at which *rishi Pulasthi* represented Lanka had Rawana a grandson of Pulasthi participated in doctors conference, historical tale of the three books namely *odsitantra*, *artha*, *prakasha*, *Kumarantra* written by him and the basic workers of Ayurveda namely *charaka*, *surutha* and *vagbhata* not mentioning the medicine which are available with doctors in rural Sri Lanka. These are the evidence gathered by Kusumaratna. Nevertheless, he concludes at the end that the present native medical system in Sri Lanka is Sri Lanka Ayurveda, a combination of Indian Ayurveda with indigenous practices.

Pilapitiya (1991) is of the view that the native medical system in Sri Lanka is necessarily a combination of several medical systems. They are the Siddha medical systems arrived from north India, unani system arrived from Yawana Desha and native medical practices endemic to Lanka with

those who arrived with Vijaya and Sangamitta from northern India, most probably Ayurveda too could have arrived here in Sri Lanka.

As per the Ayurvedic Act, it has been defined as one Ayurvedic medical system embracing all the Ayurvedic systems, unani systems, siddha systems and other medical systems existing in Asian countries. The native medical practice endemic to Sri Lanka was based on basic doctrines belonging to Ayurveda medical system and then spread widely and variously acquiring with specialities (Pilapitiya, 1991:8). Thus Pilapitiya declares that Ayurveda came to Lanka with the arrival of Vijaya. This Ayurveda mixed very well with the existing native medical system.

As the written history of Sri Lanka was begun with the arrival of Vijaya written history of medical system too had begun at the same time. First written account on a Lankan treatment system was found in Anuradhapura during the reign of Pandukabhaya (377-307 BC) who built a "Sivika" hall (Kumarasinghe, 2007:202). However, archeologically evidence have been traced on the presence of human habitats. Some 125,000 years ago there definitely existed pre historical habitats in Sri Lanka (Deraniyagala, 1997:3). A question put to Rajsomadeva professor of archaeology as to the probable availability of any archaeological evidence regarding the health factor and treatment system of those men then arrived.

He asserts that there existing archaeological evidence on human habitats beyond one hundred and twenty five thousand years. If so there should have been necessary steps taken to protect health from illnesses. But it is difficult to arrive at a definite conclusion in this regard due to the absence of any material evidence. He explained that further researchers should have to be launched in order to ascertain whether those stones implements, grinding stones etc., which have been discovered in connection with the ancient human habitats and used in the preparation of medicine. (Interview,18/12/2012).

Deraniyagala points out archaeological evidence in support of the ancient human habitats. According to him pre historic records dating back to some 34000 years is almost completed. First example (before 34000 years) of the modern man was obtained from the Fahian cave subsequently the excavations carried out at Batadomba cave, Beli cave, Bellanbendhi cave and many other areas of the island too have provided more evidence in this connection.

Particularly, the information about Balangoda man provide clues as to the habitation of them in all the areas of Sri Lanka. Height of males was about 174 centimetres while the height of females was about 166 centimetres and they have lived as families. Their homes exceeded 50 square meters. They had consumed herbal foods, yams, and animals thus illustrating the balanced diet they had enjoyed. Constitution of the nature of their bones proves this fact. Evidence of salt transportation from the seacoast has been found from the Beli cave is a proof for the use of salt in the food. Also evidence found to prove that they had observed various rituals, customs, ethical manners etc, clear proofs have been recorded as to the customs of cremation of their dead.

Furthermore, stone implements of different shapes were in the set of implements in the possession of the Balangoda man. In addition small sharp tools made of bones and horns were found in plenty since beyond 28500 years (Deraniyagala, 1997, 345). Nevertheless, any solid factors have

not been recovered as to their practicing of any medical treatment. Any how it is justifiable to guess that they could have used any kind of medical treatment while conducting satisfactory life style.

However, it is not justifiable to make effect to identify a Sri Lanka mode of native medical system be based on the archaeological factors. Although the evidence have been found in connection with the existence of human habitats running back to hundred thousand years, some clean evidence with regards to their habits on health and illnesses have not been identified yet. Archaeologist believe that further explorations should be launched in this field.

CONCLUSION

In the above discussion, two hypotheses on the native medical systems in Sri Lanka were taken to task. When investigating the facts produced in order to strengthen each hypothesis we could arrive at the main feature of their stance on the Sri Lankan history that help shape their opinion on the identity of native medical systems in Sri Lanka. These who uphold the opinion that Sri Lanka is a part of Indian land mass and such main features have been developed with the influence of India. These scholars uphold the opinion that the native medical systems identical to Sri Lanka is nothing but the Ayurvedic system itself.

Those who accept the hypothesis of the traditional therapeutic system as the native medical system flourished within Sri Lanka uphold the argument that Sri Lanka is an independent state possessing a human history beyond hundred thousand years during which a separate culture had been evolved. Anyhow the available information on the beginning of human history in Sri Lanka are controversial even to the present day. As per the first hypothesis human habitat in Sri Lanka if commenced along with an Indian origin then the treatment system of India could have made a strong influence on a Lankan treatment system. But this has not been a well established therapy. Archaeological explorations carried on the human history of Sri Lanka and their life style does not provide information on illnesses and diseases needing further research in this field. Among the information recovered from the recent explorations do not provide information on the health sector. Ayurveda has been made a native medical system in present Sri Lanka. The government had proclaimed all Ayurveda, Siddha, Unani and native therapeutic systems as Ayurveda system with a view to facilitate the legal and administrative functions by the act no. 31 of 1961. By virtue of this proclamation and in keeping with the common usage Ayurveda has been subjected to due consideration. However certain differences could be identified as per some traits visible in these two systems. Identifiable with the investigation of the origin of two systems foundation of knowledge and the procedure of treatment etc. For all that both these systems have mostly adapted to the natural environment. Fundamental features of native therapeutic accompany with Ayurvedic theories. This reflex the common philosophy founded upon the Asian society. However, it is not practical to identify native therapeutic of the Ayurveda separately as the native medical system. Therefore, we can arrive at a conclusion to accept Sri Lanka Ayurveda as the desirable outcome of the unification of both these medical treatment systems. However I suggest that in order to identify the endemic medical system in Sri Lanka, more medical Anthropological research should be done.

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