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Tibetan medicine with respect to increased attention to the east in Russian society: The second half of the nineteenth century to early twentieth century

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Abstract

Growing interest to Tibetan medicine among the Russian scientific community and popularisation of its practices in the Russian Empire metropolitan areas in the second half of the nineteenth century to early twentieth century concurred with on-going changes in perception of the Orient by Russian society, establishment of its positive image, increased interest to the elements of oriental culture and practices within the framework of the Silver Age values, and the development of the natural science and experimental medicine, both of which caused an improvement in the healthcare system in Russia. At the turn of the twentieth century, Russian society manifested an ambivalent attitude towards Tibetan medicine. On the one hand, there was an increasing interest to theoretical foundations, a desire for scientific understanding, and spread of the Tibetan medicine practical component in the sociocultural environment of the metropolitan society, previously unfamiliar with oriental traditions and beliefs. On the other hand, an issue of the possibilities and principles of Tibetan medical treatment had opposed Western scientific medicine, which produced many discussions and critical reviews. The controversy was repeatedly caused by the negative attitude towards principal metropolitan specialist in Tibetan medicine – Peter Badmaev and distrust to his activities, as opposed to the medical skills of actual lamas. Despite the fact that it was virtually impossible to integrate Tibetan medicine into the Russian healthcare system, interest in it became a factor of attraction to the East and the oriental culture in Russian society at the turn of the twentieth century.

Keywords: Tibetan medicine; Peter Badmaev; Healthcare system; The Orient; Russian Empire

Introduction

Attitude towards the Orient in Russian society

Forming attitudes towards the Orient in the Russian educated society in the late nineteenth century to early twentieth century took place in conjunction with a general increase of interest to the oriental policy of the Russian Empire and elements of oriental culture. One of the most important components of oriental cultures has always been indigenous, or traditional, medicine, providing the level of a healthcare organisation as well as serving an indicator of general features related to the sociocultural system. In pre-revolutionary Russia, Tibetan medicine was the most popular of the oriental healing systems. It was prevalent among people who practiced Buddhism. Tibetan medicine aroused interest among representatives of the scientific community, primarily orientalists and physicians, as well as among the general public of the Russian Empire capital. In Saint Petersburg, medical care based on Tibetan medicine could be obtained by anyone in a medical institution created by Badmaev brothers.

Interest in Tibetan medicine emerged with respect to a number of sociocultural processes in the Russian Empire in the second half of the nineteenth century and early twentieth century. On the one hand, there was a change in attitude towards the Orient, associated with the development of its positive image in the perception of an educated public; the culture of the so-called Silver Age (a figurative term for

the era in the Russian culture history dating back to the turn of the twentieth century) was characterised by an increased interest of Russian society to the elements of oriental culture and its sometimes mystical practices.¹ On the other hand, development of the natural science and experimental medicine, both of which caused an improvement in the healthcare system in Russia, even though their efficiencies were still insufficient, shed the light onto the use of traditional treatment methods. In this regard, starting from the nineteenth century, Tibetan medicine, which was closely related to Buddhism and was quite specific sociocultural phenomenon for both Russian and Western societies along with many other popular oriental cultural elements and practices, has been the focus of discussions about the possibility of its integration into cultural and scientific traditions, as well as into the healthcare systems, of predominantly Christian Russian Empire and Western European countries.

For a long time, the attitude towards the East has been formed through the prism of perception of the West and relations between Russia and Europe. Orientation onto the West as a cultural focus has become a feature of understanding national and cultural identities by the Russian elite since the eighteenth century. The Patriotic War of 1812 against Napoleonic France became an important milestone, forcing an educated society to contemplate about its national roots and traditions. The next turning point was the defeat in the Crimean War and weakening of Russian Empire position in Europe, which led to rethinking of geopolitical objectives and the desire to compensate for failures in the West by moving to the East. Many representatives of the educated society have become interested in Asia, in terms of expansion and spread of Russian influence in the East. In the 1860s–1870s, Central Asian territories were annexed by Russia. At the same time, Siberia was gaining sociocultural significance. Hence it was no longer perceived by educated society as a distant region and place of exile. Awareness of the economic and cultural role of Asian territories within the Russian Empire gave a boost to the national policy on resettlement and economic development of the lands in Siberia and the Far East.²

During the rule of Alexander III, the beginning of the railway construction, which was supposed to connect the Western outskirts of the Empire with the Pacific coast, gave the reason to some Russian social, political and cultural leaders, along with the scientists, to believe that the future of Russia was in Asia. A new stage in changing the attitude of Russian society towards the East began at the end of the 1880s. At that time, two opposing concepts defined the tasks of Russia in the Far East – the *vostochnichestvo* of Esper Ukhtomsky (a system of views based on the idea of a peaceful expansion of Russian influence onto the East due to the cultural and historical proximity of both) and the idea of Yellow Peril first introduced by Vladimir Solovyov. The image of the East took a special place in the works of writers and artists of the Silver Age. The very concept of the Orient has transformed from territorial meaning to cultural and aesthetic connotation. Thus, it has lost clear geographical criteria and resulted in fashion for everything *oriental*.³ Despite a strong influence of orientalist concepts, penetrating Russia from Europe, on the Russian mentality, the attitude towards the East had its own – purely Russian – specificity, associated with the awareness of its eastern roots, attempts to find common features between Russia and eastern countries, and even with direct statement that Russia was the East.

The attitude towards the foreign East was largely determined by the level of knowledge about eastern countries, their peoples and their cultures. The following trend can be traced: the more knowledgeable were representatives of an educated society, the more positive was their perception of the East, which was, especially, well noticeable in oriental studies. Correlation of geopolitical views in educated society of

¹Valeriy V. Suvorov, *Formirovaniye polozhitel'nogo obraza Vostoka v rossiyskom obrazovannom obshchestve vo vtoroy polovine XIX – nachale XX veka* [Developing a Positive Image of the East in the Russian Educated Society in the Second Half of the Nineteenth Century and Early Twentieth Century] (Saratov: Saratov State Medical University, 2017); Valeriy V. Suvorov, 'MN Muravyov i VN Lamz Dorf o kul'turno-istoricheskikh zadachah Rossii na Dal'nem Vostoke' [The Opinions of MN Muravyov and VN Lamz Dorf on the Cultural and Historical Tasks of Russia in the Far East], *Bylye Gody*, 48 (2018), 786–93; Valeriy V. Suvorov, 'Vzglyady S. Yu. Vitte na kul'turno-istoricheskiye zadachi Rossii na Vostoke' [Views of S.Yu. Witte regarding the cultural and historical tasks of Russia in the East], *Bylye Gody*, 45 (2017), 1036–43.

²Suvorov, *Formirovaniye polozhitel'nogo obraza*, op. cit. (note 1).

³Elena A. Chach, 'Oriental'nyi kontekst Serebryanogo veka' [The Oriental Context of the Silver Age] *Omsk Scientific Bulletin. Series 'Society. History. Modernity'*, 1 (2010), 59–62.

the Russian Empire with Orientalism, as a special intellectual mechanism for conquering the East, designed to form a negative image of the East and show superiority of the West over it, was a qualitative indicator of their substantial side. This issue was identified by Edward Said in his book *Orientalism* in 1978 and found wide resonance in the historiography of colonial politics. Applicability of the provisions of Orientalism theory to Russian reality and the intellectual space at the second half of the nineteenth century to early twentieth century has been being discussed for a long time. Many scholars were inclined to believe that both attitudes of the oriental studies representatives and the Russian imperial policy in Asia differed markedly from the attitudes of Western science and the colonial policies of Western empires. Many Russian orientalists, starting with S.M. Georgievsky, criticised Eurocentric attitudes towards eastern peoples and recognised the value and significance of their national traits and cultures. Western statesmen regarded actions of the Russian Empire in the East as partnering and patronising in relation to Asian countries and their peoples, with the purpose to protect those from colonial expansion by the European powers.⁴

Healthcare system development

Reviewing the topic of Tibetan medicine, we should mention that the second half of the nineteenth century in Russia was the time of important changes in the organisation of healthcare and development of medicine as a science. Medical science in both pre-revolutionary Russia and modern society faced the problem of identifying the causes of morbidity and finding effective treatment methods.⁵ At the same time, the healthcare is a complex hierarchical system, development and improvement of which contributes to maintaining a proper public health.⁶ Being an integral part of culture, the healthcare system is largely determined by spiritual and religious traditions existing in society, societal psychology, sociopolitical relationships and economic indicators.⁷

By the end of the nineteenth century, St. Petersburg had gradually turned into the centre of world scientific and practical medicine. It was there, where methods of physical examination were introduced into the clinical practice, much earlier than in other European countries. In St. Petersburg, municipal medicine emerged in 1884 and was free of charge. By 1910, there were 278 various medical institutions in the city (municipal, military, charitable and private).

Medical treatment of Imperial Family members was entrusted to the Physicians-in-Ordinary, who were well-known academicians and university professors, as well as other experienced and knowledgeable specialists of various profiles invited as consultants. At the Imperial Court, along with Physicians-in-Ordinary, there were court doctors of a lower rank assisting Court officials and ministers. Their position was called *Hofmedicus*. Over time, by the end of the nineteenth century, this position had been replaced by *medical doctors* who served as the staff at the Ministry of the Imperial Court and worked in its various institutions and Court hospitals. Thus, the court medicine by then had turned into a fairly well-developed organisational structure, which included specialised physicians with their assistants

⁴Suvorov, MN Muravyov i VN Lamzdorf, *op. cit.* (note 1); Suvorov, Vzglyady S.Yu. Vitte, *op. cit.* (note 1).

⁵Vera A. Pogodina, Evgeniy A. Babenko, Natalia A. Gusel'nikova, and Anatoliy I. Babenko, 'Comparative Dynamic Analysis of Morbidity in Various Age Groups in Russian Federation', *Russian Open Medical Journal*, 5 (2016), e0307; I.V. Yegorysheva, 'Problema dostupnoy meditsinskoy pomoshchi v dorevolutsionnoy Rossii' [The Issue of Medical Care Accessibility in Pre-revolutionary Russia], *Problemy Sotsialnoi Gigieny Zdravookhraneniya i Istorii Meditsiny*, 1 (2012), 55–8.

⁶Elena A. Andriyanova, Arkadiy I. Zavialov, Svetlana V. Raikova, and Valeriy V. Suvorov, 'The Input of Medical Societies and Zemstvo Physicians into Development of Sanitary Business in the Saratov Gubernia in the Second Half of XIX – Beginning of XX Centuries', *Problemy Sotsialnoy Gigieny Zdravookhraneniya i Istorii Meditsiny*, 27, 1 (2019), 83–8; Natan G. Korshever and Sergei A. Sidelnikov, 'Intersectoral Cooperation in the Sphere of Public Health Care: Ways of Optimization', *Russian Open Medical Journal*, 6 (2017), e0308.

⁷Vsevolod Yu. Bashkuev, 'Formirovaniye rossiyskoy gosudarstvennoy mediciny i status traditsionnykh praktik vrachevaniya kochevykh narodov Central'noy i Vnutrenney Azii (XVIII – nachalo XX v.)' [The Making of Russian State Medicine and a Status of Traditional Healing Practices of Central and Inner Asian Nomadic Peoples (Eighteenth – Early Twentieth Centuries)], *Bulletin of the Buryat Scientific Center of the Siberian Branch of the Russian Academy of Sciences*, 4 (2016), 38–48.

(paramedics, midwives, nurses and pharmacists) and medical institutions intended to serve officials at the Ministry of the Imperial Court.⁸ So, at the turn of the twentieth century, the Russian elite, as well as a significant part of metropolitan society, had the opportunity to receive high-quality medical care by the standards of that time.

Towards the end of the imperial period, there were about a dozen higher-education medical institutions in Russia, such as the Military Medical Academy, the Psychoneurological Institute in St. Petersburg and women's medical institutions in St. Petersburg. Late nineteenth century and early twentieth century became the Golden Age for Russian medical science. Names of Sergei Botkin, Ivan Sechenov, Nikolay Sklifosovsky, Fyodor Erismann, Ilya Mechnikov, Vladimir Bekhterev, Aleksey Dobroslavin, Vasily Obratsov, Grigory Zakharyin, Vladimir Snegiryov and many other specialists in various fields of medical knowledge went down in history of world medicine. At the beginning of the twentieth century, over 150 general and specialised scientific medical journals were being published in Russia.

Interest in traditional medicine

Although the healthcare system from the nineteenth century was based on scientific methods of medical treatment, they always co-existed with the methods of indigenous, or traditional, medicine, which was often trusted by the general public more than scientific medicine. Along with the national indigenous treatment approaches, there was also an interest in traditional treatment systems of other nationalities, which seemed to be more effective. A positive reputation of Tibetan medicine contributed to its spread, along with Buddhism, among the Buryats and Kalmyks, who belonged to the group of Mongolian peoples. The Buryats lived in Transbaikalia and Baikalia, while Kalmyks settled in the steppe area of the south-eastern European part of the Russian Empire.

The recognition and growth of Tibetan medicine popularity in the context of general interest to the Orient in pre-revolutionary Russia ensured its further spreading; however, its legalisation in conditions of the healthcare system based on scientific medicine encountered serious resistance, accompanied by criticism and discussions, which are still on-going.⁹

Scientific study of Tibetan medicine

Scientific study of Tibetan medicine in Russia began in the nineteenth century, attracting increasing attention of the specialists from various scientific fields. Numerous studies were dedicated to the history of Tibetan medicine dissemination across Russia and Europe in the nineteenth and early twentieth centuries.¹⁰ The PhD thesis of Lygzhima Ayusheva was among the most comprehensive

⁸Anatoliy A. Budko, *Istoriya meditsiny Sankt-Peterburga XIX – nachala XX v. [History of Medicine of St. Petersburg in Nineteenth and Early Twentieth Centuries.]* (St. Petersburg: Nestor-Istoriya, 2010), 241–63.

⁹Sergey M. Nikolayev, Larisa N. Shantanova, Natal'ya A. Kuznetsova, and Vitaliy V. Boronoyev, 'Tibetskaya traditsionnaya meditsina – zdavooohraneniyyu Rossii' [Tibetan Folk medicine – To the Public Health Service of Russia], *Acta Biomedica Scientifica*, 3 (2009), 279–83; D.M. Uvanchaa, 'Tuvino-tibetskaya meditsina: puti integratsii s sovremennoy meditsinoy' [Tuva-Tibetan Medicine: Integrative With Modern Medicine], *Kurortnaya Baza i Prirodnye Lechebno-Ozdorovitel'nye Mestnosti Tuvy i Sopredel'nykh Regionov*, 2 (2015), 20–2; Oleg S. Rinchinov, 'Sotsiokul'turnye aspekty problemy legalizatsii tibetskoy meditsiny' [The Problem of Tibetan Medicine Legalization: Sociocultural Aspects], in *Social and political challenges of modernization in the 21st century: Proceedings of the international scientific and practical conference* (Ulan-Ude, Russia: Publishing House of Buryat Scientific Center, 2018), 186–8.

¹⁰Semen Yu. Belen'kiy, M.I. Tubyanskiy, 'K voprosu ob izuchenii tibetskoy mediciny' [Studying Tibetan Medicine], *Sovremennaya Mongoliya*, 3, 10 (1935), 59–84; D.B. Dashaev, *Predislovie avtora perevoda «CHzhud-SHI» – pamyatnik srednevekovoy tibetskoy kul'tury* [Preface by the Author of the Translation of 'Gyushi' – an Artifact of Medieval Tibetan Culture] (Novosibirsk, USSR: Nauka, 1988), 7–21; D.B. Batoev, 'Istoriya organizatsii i razvitiya zdavooohraneniya, formirovaniya ego kadrov v Buryatii: Konets XVIII v. – 1960-e gg.' [The History of Healthcare System Organization and Development, and Formation of Its Personnel in Buryatia: Late Eighteenth Century – 1960s] (unpublished PhD thesis: Ulan-Ude, Russia, 2002); Martin Saxer, 'Journeys with Tibetan Medicine' (Master's thesis: Institute of Social and Cultural Anthropology, University of

studies revealing the peculiarities of Tibetan medicine distribution and role in domestic healthcare system.¹¹

Direct acquaintance of the metropolitan society with Tibetan medicine had been linked to Badmaev brothers, of whom Peter A. Badmaev has become the most renowned. Along with publications dealing with various aspects of Tibetan medical practices, the activities of Peter Badmaev attracted the attention of Soviet scientists and contemporary researchers, who studied his participation in Russian Far Eastern policy and his work as a medical practitioner of Tibetan medicine.¹²

In their publications, Russian orientalists and physicians of the second half of the nineteenth century and early twentieth century endeavoured to comprehend Tibetan medicine from scientific standpoint. Discussions of oriental medicine can be found in the publicistic essays of a poet, publisher and Oriental enthusiast in late Czarist Russia – Esper Ukhtomsky, and of his contemporaries, as well as on the pages of various periodicals.

Studying the place of Tibetan medicine with respect to increased attention to the East in Russian society of the second half of the nineteenth to early twentieth centuries involved the use of sociocultural approach, within the framework of which the society was considered in its integrity and unity of the cultural and social components. Expansion of Tibetan medicine, growth of its popularity and controversy regarding its effectiveness and possibility of integration into the healthcare system were considered within the framework of the social system and in the context of the sociocultural realities in the Russian society at the turn of the twentieth century.

An anthropological approach showing the contribution of various scientists and public figures to the study and popularisation of Tibetan medicine was equally important. Their values, reputations, personal qualities and life experiences largely determined their attitudes towards Tibetan medicine, and also, depending on their involvement in theoretical research or practical activity, have influenced public opinion.

In addition, general scientific and specific historical procedures were used, such as chronological method, comparative-historical analysis and historical-genetic technique, which allowed us to trace the processes in the perception of the Orient, spread of Tibetan medicine and changes in the public opinion about it.

Discussion

Tibetan medicine in Buryatia

The first doctors of Tibetan medicine in Buryatia were Buddhist monks who arrived from Mongolia during the troubled times of Boshokto-Khan reign in 1712. Medical practice of lama healers contributed to the spread and strengthening of Buddhism among the Buryats during the eighteenth and nineteenth centuries. According to rough estimates, by the end of the nineteenth century, there were about 500 lama

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Zurich, 2004); H. Schwabl, S. Geistlich, and E. McHugh, 'Tibetan Medicines in Europe: Historical, Practical and Regulatory Aspects', *Forsch Komplementmed*, 13, Suppl 1 (2006), 1–6; Martin Saxer, 'The Journeys of Tibetan Medicine', in Theresia Hofer (ed.), *Bodies in Balance: The Art of Tibetan Medicine* (New York and Seattle: Rubin Museum of Art and University of Washington Press, 2014), 246–56; H. Schwabl and C. Vennos, 'From Medical Tradition to Traditional Medicine: a Tibetan Formula in the European Framework', *Journal of Ethnopharmacology*, 167 (2015), 108–14.

¹¹L.V. Ayusheva, 'Rol' tibetskogo vrachevaniya v otechestvennoy meditsine (XVII–XX vv.)' [The Role of Tibetan Healing in Russian Medicine (Seventeenth – Twentieth Centuries)] (unpublished PhD thesis: Moscow, Russia, 2007).

¹²T.I. Grekova, *Tibetskaya meditsina v Rossii: Istoriya v sud'bah i litsah* [Tibetan Medicine in Russia: History in Destinies and Faces] (St. Petersburg, Russia: Aton, 1998); B.S. Gusev, *Pyotr Badmaev: Krestnik imperatora, tselitel', diplomat* [Peter Badmaev: The Emperor's Godson, Healer, and Diplomat] (Moscow, Russia: Olma-Press, 2000); D.I. Stogov, 'Kruzhok P.A. Badmaeva i ego vliyaniye na politiku Rossiyskoy Imperii v gody Pervoy mirovoy voyny' [P.A. Badmaev's Group and Its Influence on the Russian Imperial Politics During the World War I], *Historical, Philosophical, Political and Law Sciences, Culturology and Study of Art. Issues of Theory and Practice*, 6, 2 (2013), 165–71; Yu.V. Kuz'min, *Doktor PA Badmaev: uchenyy, diplomat, predprinimatel* [Dr. P.A. Badmaev: Scientist, Diplomat, Entrepreneur] (Moscow, Russia: Tov. nauch. Izd. KMK, 2014); Valeriy V. Suvorov, «Vostochnichestvo: kul'turno-istoricheskaya kontseptsiya i imperskaya ideologiya [Vostochnichestvo: Cultural and Historical Concept and Imperial Ideology] (Saratov, Russia: V.I. Razumovsky Saratov State Medical University, 2015).

healers. A specific factor in the development of the original features of Tibetan medicine in Buryatia was its geographical remoteness from the sources of traditional medicinal raw materials. About 80% of the assortment of Tibetan medicine medications used in Buryatia is represented by the Transbaikalia flora. Prescription guides were the most common type of medical literature in Transbaikalia. Whereas the name of the drug, the structure and indications for use remained generally accepted, the composition of the ingredients was undergoing significant changes, at times right up to the complete replacement of the entire component list.¹³ In Transbaikalia, local plants were often used to replace the plants from Tibet that were unavailable to the Buryat population.

Tibetan medicine, established as the main system of knowledge for maintaining healthcare among the Buddhist population in the second half of the nineteenth century gradually began gaining popularity among some representatives of the Russian population. Like many other elements of Buddhist culture, Tibetan medicine aroused interest of the educated society to the mysterious Orient.¹⁴

Dissemination of Tibetan medicine occurred from the territories of Transbaikalia and Kalmykia, along with the establishment of Buddhism there in the seventeenth to nineteenth centuries. The availability and effectiveness of treatment methods for many ailments became the main reason for its spread among the peoples practicing Buddhism. From the mid-nineteenth century and before the fall of the empire, the Buryat branch of traditional Tibetan medicine flourished. At that time, many specialised monasteries were opened, in which medical schools were organised, and the number of emchi-lamas (naturopaths, healers) that played an important role in the medical treatment of the Transbaikalia population increased.

Effective methods of treatment in Tibetan medicine attracted attention of the Russian population in Transbaikalia, including the local administration, which contributed to its spreading into the Western Russia. The popularity of Tibetan medicine among the Buryat population was also determined by increased scientific interest in it. Based on Buddhist philosophy, Tibetan medicine has become an object of attention, both as ethnocultural phenomenon and as a field of knowledge contradicting European natural science.

Popularity growth of Tibetan medicine

The first mentioning of Tibetan medicine occurred in mid-eighteenth century and was associated with the name of Johann Georg Gmelin.¹⁵ However, its popularity started growing only in mid-nineteenth century. In 1857 and 1858, a missionary of the Russian Orthodox Church, Archbishop Nilus (1799–1874), published two reports on the art of Tibetan medicine.¹⁶ In the early 1860s, Tibetan medicine emerged in Saint Petersburg. In 1860, a former abbot of the Lamaist monastery – Sultim Badmaev, baptised as Alexander Badmaev – petitioned the highest command of Alexander II to translate *Gyushi* (*rGyud-bZhi* in Tibetan), meaning *Four Tantras*, into Russian, but neither he nor university professors were able to make the translation. The Military Governor of Transbaikalia, Bronislav Kukel, describing the activities of Alexander Badmaev, wrote about the growing popularity of Tibetan medicine at that time:

‘With the highest permission, he was allowed to treat using Tibetan herbs. To apply his method, he was given a special ward at the Army Hospital No.1. For his successful treatment procedures, Badmaev was awarded the rank of Titular Councillor, a medal (it seems, for saving the dying), and the title of Doctor’.¹⁷

¹³Saxer, Journeys with, *op. cit.* (note 10), 57; N. Bolsokhoyeva, Tibetan Medical Schools of the Aga Area (Chita region). *Asian Medicine* 3.2 (2007), 334–46; N.D. Bolsokhoyeva, Medical Faculties of Buryat Buddhist Monasteries’, *Ayur Vijnana* 6 (1999), 6–10.

¹⁴Valeriy V. Suvorov, *Formirovaniye polozhitel'nogo obraza*, *op. cit.* (note 1).

¹⁵Peter A. Badmaev, *Glavnoe rukovodstvo po vrachebnoj nauke Tibeta* [Gyushi: The Main Guide to the Medical Science of Tibet] (St. Petersburg, Russia: Tip. A.S. Suvorina, 1903).

¹⁶Nil, *O vrachebnoy iskusstve u lam* [Healing Art of Lamas]. *Buddhism considered in relation to its followers living in Siberia* (St. Petersburg, Russia, 1858), 265–67; Nil, ‘Vrachebnoye iskusstvo u zabaykal'skikh lam’ [Healing Art in Transbaikalia Lamas], *Vestnik Russkogo Geograficheskogo Obshchestva*, 4, 5 (1857), 28–33.

¹⁷B.K. Kukel, ‘Iz epohi prisoedineniya Priamurskogo Kraya’ [From the Era of the Amur Region Annexation], *Istoricheskiy Vestnik*, 8 (1896), 413–34.

This treatment technique aroused interest among the residents of Saint Petersburg, and, according to Kukel, ‘at one time, made a lot of noise and brought him such recognition’, that Badmaev was admitted to the best aristocratic houses.

Another practitioner of Tibetan medicine, Peter (Zhamsaran) Aleksandrovich Badmaev, characterised by a Doctor of Medicine and sinologist Vladimir Korsakov as ‘a famous Buryat physician in St. Petersburg, using Tibetan medications for treatment and dreaming of bringing the Tibetan medicine to life’,¹⁸ was the younger brother of Alexander Badmaev. Peter Badmaev happened to be the only Russian practitioner and theorist of Tibetan medicine. Since 1873, he was being constantly engaged in medical practice at a Tibetan medical office with a pharmacy of medicinal herbs inherited from his brother. In 1877, Peter Badmaev has bought a lot in the north of St. Petersburg, where, in 1885, a peculiar house with a turret was built and a medicinal herb garden was planted. In general, medical practice of Peter Badmaev was based on treating the patients with herbs and homemade medicinal powders. As for the use of insects as medicinal raw material, which is typical for Tibetan medicine,¹⁹ we found no information in published sources. However, it should be noted that Buryat branch of Tibetan medicine is characterised by using primarily medicinal herbs in the manufacture of medications.²⁰

Furthermore, Badmaev served at the Asian Division of the Ministry of Foreign Affairs²¹ and visited China, Mongolia and Tibet as an interpreter. There he had the opportunity to replenish knowledge in the field of Tibetan medicine and provide his pharmacy with essential medicinal herbs. Badmaev was also a teacher of Mongolian language at the university, but, in 1893, he left both university department and the ministry²², engaging himself in the study, development and promotion of Tibetan medicine procedures.

By the end of the nineteenth century, especially during the period of Far Eastern policy intensification, Tibetan medicine instigated wide public attention and became popular among authorities in the field of scientific medicine. In 1890, a Russian traveller, ethnographer and natural historian, Grigory Potanin, published the article about the Buryat names of medicinal plants used in Tibetan medicine. In 1892, an orientalist and publicist, Prince Esper Ukhtomsky, wrote that orientalists interpreted the practical outcomes of Tibetan medicine rather favourably, noting that the Orthodox Christians, including missionaries, rather than solely pagans and Buddhists, used the services of Tibetan medicine practitioners.²³ Later, in the book devoted to Tibet, the Prince, drawing attention to the fact that in Tibetan medicine ‘much seems wild and mysterious’, claimed that ‘transferred from one generation to another since ancient times’, the healing art of lamas, with its extensive literature and successful results, began to interest European authorities ‘due to probable, though not proven, connections with Egypt and Hellas (*via* India)’.²⁴ Ukhtomsky specifically emphasised the ethical aspect of medicine, referring to the fact that, in accordance with the requirements of Buddhism, only ‘kind, merciful, flawless lamas’ could practice with the hope for success; furthermore, ‘they were not greedy’ and did not charge the poor for consultations and medications.

The role of Peter Badmaev in popularisation of Tibetan medicine

In the 1890s, Peter Badmaev’s medical practice in Saint Petersburg gained considerable popularity. In the preface to his book, he reported: ‘From 1889 to 1896, I had 169 834 patient visits, and 2 462 720 medical

¹⁸V.V. Korsakov, *V starom Pekine: Ocherki iz zhizni v Kitaye [In Old Beijing: Essays from Life in China]* (St. Petersburg, Russia: tip. St. Petersburg. t-va pech. i izd. Dela ‘Trud’, 1904).

¹⁹Olaf Czaja, ‘The Use of Insects in Tibetan Medicine’, *Études mongoles et sibériennes, centrasiatiques et tibétaines* 50 (2019). <http://journals.openedition.org/emscat/3994>.

²⁰D.B. Dashiev, ‘Tibetskaya meditsina v Buryatii’ [Tibetan Medicine in Buryatia] *Buryaty [Buryats]*, (M.: Nauka, 2004); Ayusheva, *op. cit.* (note 11); Nikolayev, *op. cit.* (note 11), 279–83.

²¹Central State Historical Archive of St. Petersburg, coll. 2300, aids 1, fol. 18, p.113 (unpublished source).

²²Central State Historical Archive of St. Petersburg, coll. 394, aids 1, fol. 2441, p.4 (unpublished source).

²³Esper E. Ukhtomsky, *O sostoyanii missionerskogo voprosa v Zabajkal’e [On the State of the Missionary Issue in Transbaikalia]* (St. Petersburg, Russia: Synod. Typ., 1892).

²⁴Esper E. Ukhtomsky, *Iz oblasti lamaizma: K pohodu anglichan na Tibet. [From the Field of Lamaism: On the British Campaign in Tibet]* (St. Petersburg, Russia: Parovaya skoropechatnya ‘Vostok’, 1904).

powders were distributed'.²⁵ Apollon Maikov (Russian poet, corresponding member of the Imperial Academy of Sciences in St. Petersburg), Alexander Protopopov (Russian politician, big landowner and industrialist, member of the State Duma, the last Minister of Internal Affairs of the Russian Empire) and Pavel Kurlov (lieutenant general of the Russian Imperial Army, who held a number of high posts: Kiev's governor, governor of Minsk, Deputy Minister of Internal Affairs, the commander of a Special Corps of Gendarmes)²⁶ were among his patients. Many representatives of Russian political elite were personally acquainted with him, since, along with medical practice, Badmaev was actively engaged in social and political activities, trying to provide an assistance in order to expand Russian imperial influence in Asia, and, therefore, met many high-ranking public officials. Some of those, entirely trusting Badmaev's medical abilities, along with scientific medicine of that time, trusted the methods of Tibetan medicine.

Despite a widespread anecdotal opinion about Badmaev treating Imperial Family and testing alternative Tibetan medicine techniques on the courtiers,²⁷ Dmitry Stogov suggested that such claims were unfounded because they were not confirmed by the chamber Fourier journals. The latter did not contain records of Badmaev visiting the Imperial Family, neither did the memoirs of Badmaev's contemporaries, nor the diary of Nicholas II of Russia, in which just a single visit to Tibetan healer was recorded.²⁸

In February 1893, Badmaev wrote in his letter to the Minister of Finance, Sergei Yu. Witte, that both in society and among physicians, there was an opinion that he deliberately avoided sharing the information about the medications of Tibetan medicine, to which he owed his success. Therefore, the Tibetan doctor reported that the time had come for publishing his materials.²⁹ A number of Peter Badmaev's publications on Tibetan medicine were issued in 1898–1903. In the preface to the book about the system of medical science in Tibet, Badmaev pointed out the insufficiency of the Western knowledge on Tibetan medicine. In his opinion, researchers, although trying to acquaint the educated world with the practices of Tibetan medicine, nonetheless raised doubts about its scientific propositions, and, as a result, 'deprived many of the desire to explore this field of study'.³⁰

Badmaev conducted a free Russian translation of the canonical source of Tibetan medicine and its main guide, the book of *Gyushi*,³¹ with an attempt to comment on some of the provisions of Tibetan medicine. Peter Badmaev noted with regret that European scientists were too busy with their own specialties to take time and study the medical science of Tibet.³² The book was highly praised by a well-known therapist of that time, Professor of Dorpat University (at present: University of Tartu, Estonia) Sergei M. Vasilyev, who argued that after reading the Badmaev's book, every educated European physician could see that Tibetan medicine had achieved 'an amazing development, and undoubtedly, in some respects, was ahead of European medicine'.³³

In addition to Peter Badmaev, another researcher of Tibetan medicine has become famous. It was Danbo Ulyanov, a full-time lama healer at the Don Army. The latter is an original branch of Russian armed forces, the largest of the Cossack troops in the Russian Empire, the formation of which

²⁵Peter A. Badmaev, *O sisteme vrachebnoy nauki Tibeta [On the System of Medical Science in Tibet]* (St. Petersburg, Russia: Skoropechatnaya 'Nadezhda', 1898), 2, X, XXXVI, 234, 2, XXXV.

²⁶Stogov, *op. cit.* (note 12), 165–71.

²⁷E. Shahmatova, 'Opravdaniye mistitsizma: Rossiya i Evropa v zerkale vostoka' [Justification of Mysticism: Russia and Europe in the Mirror of the East], *Rossiia i Zapad: Dialog ili stolknovenie kul'tur [Russia and the West: Dialogue or a Clash of Cultures: a collection of articles]* (Moscow, Russia: RIK, 2000), 47–75.

²⁸Stogov, *op. cit.* (note 12), 165–71.

²⁹*Dokladnaya zapiska Badmayeva ministru finansov Vitte [Badmaev's report to the Minister of Finance Witte]*. in *Za kulisami tsarizma: Arhiv tibetskogo vracha Badmaeva [Behind the Scenes of Czarism: Archive of the Tibetan Physician Badmaev]* (Leningrad, USSR: Gosudarstvennoye izdatel'stvo, 1925), 50–5.

³⁰Badmaev, *op. cit.* (note 25).

³¹Badmaev, *op. cit.* (note 15).

³²Badmaev, *op. cit.* (note 25).

³³*Mnenie professora S.M. Vasil'eva o sisteme Vrabchebnoy nauki Tibeta P.A. Badmaeva*. St. Petersburg., 1898. Vyp. 1.' [Opinion of Professor S.M. Vasilyev on the PA Badmaev's System of Tibetan Medicine] (St. Petersburg, Russia, 1898), *Meditcina*, 1, 1 (1899), 13–7.

on the river Don dates back to the sixteenth–seventeenth centuries. He had completed a word-for-word translation of the first volume of *Gyushi*, published 3 years after the publication of Badmaev's book.³⁴ Danbo Ulyanov, noting the difficulties of translating and understanding the text, drew the reader's attention to the fact that his task was to translate the work of the Tibetan hermit scientist Sang-Ji-Jam-Tso (a.k.a. Desi Sangye Gyatso, or Sangye Gyamtso, in Tibetan transliteration of his name), 'not allowing himself to bring in something of his own, as other translators of different Tibetan texts did, which, therefore, distorted the meaning and significance of Tibetan scientific manuscripts'.³⁵

Scientific interest in Tibetan medicine remained, and, in 1908, the Professor of Mongolian Studies, Aleksey M. Pozdnev, completed a literal translation of the first two volumes of *Gyushi* from Tibetan and Mongolian into Russian,³⁶ which gave a new impetus to the practical study of Tibetan medicine.

The interest in Tibetan medicine and its certain success in the metropolitan society were determined, on the one hand, by its reputation as a medical system that gave promising results in treating patients, and, on the other hand, by the entrepreneurship of Badmaev brothers (especially Peter Badmaev), who were favoured by the Russian Emperors (Alexander II, Alexander III and Nicholas II) and who managed to convey treatment methods to the general public of the Russian capital. The reputation of Tibetan medicine was not based solely on its positive outcomes: it has developed within the framework of the philosophical system of Buddhism, to which the Russian society augmented its scientific and cultural interest towards the turn of the twentieth century. Moreover, unlike other traditional treatment methods, including healing by shamans, also known to educated societies, Tibetan medicine presumed clear treatment principles, reflected in written manuals, translations of which began to appear by the end of the nineteenth century.

Discussions on Tibetan medicine

However, simultaneously, with a general increase in interest to Tibetan medicine, the attitude towards it from the doctors, who adhered to the principles of treatment developed by Western scientific medicine, was very ambiguous. A research doctor of the second half of the nineteenth century, Nikolay Vasilyevich Kirilov,³⁷ who worked for a long time in Transbaikalia and the Far East, admitted some practical use of indigenous oriental medicine. Engaged in research activities, he contributed to the study of Tibetan and Chinese medicine. He investigated applied methods of the lamas' healing art, along with theoretical foundations of Tibetan medicine and its pharmacopoeia. Kirilov has received medications and instructions from highly educated lamas.³⁸ Although he rejected the theory of Tibetan medicine in his publications, he insisted on the necessity for Tibetan and European medical doctrines to interact with each other in order to point out to Lamaists the shortcomings of their theory.³⁹ Rejecting an immediate

³⁴D. Ulyanov, *Podstrochnyy perevod 1-y chasti Tibetskoy meditsiny «Zavi-dzhyud»* [Word-for-word Translation of the 1st Part of Tibetan Medicine "Zavi-dzhud"] (St. Petersburg, Russia: Skoropechatnya «Vostok», 1901); D. Ulyanov, *Perevod iz tibetskikh meditsinskih sochineniy Dzhe-duning-nor*, gl. 91 i Hlan-tab, gl. 30: *Lechenie chumy, holery i prokazy* [Translation from Tibetan Medical Writings by Je-dunning-nor, ch. 91 and Hlan-tab, ch. 30: Treatment of Plague, Cholera and Leprosy] (St. Petersburg: Parovaya Skoropech. «Vostok», 1902).

³⁵Ulyanov, *op. cit.* (note 34).

³⁶A.M. Pozdnev, *Uchebnik tibetskoy meditsiny* [Tibetan Medicine Textbook] (St. Petersburg, Russia: Tip. Imp. Akad. nauk, 1908), Vol. 1: VIII.

³⁷N.V. Kirilov, 'Interes izucheniya narodnoy i tibetskoy meditsiny v Zabajkalye' [Interest in Studying Indigenous and Tibetan Medicine in Transbaikalia], *Etnograficheskoye Obozreniye*, 4 (1893), 84–120; N.V. Kirilov, 'K voprosu o tibetskoy meditsine' [On the Issue of Tibetan medicine], *Vostochnoye Obozreniye*, 8 (1899); N.V. Kirilov, *Sovremennoye znachenie tibetskoy meditsiny kak chasti lamayskoy doktriny* [The Modern Meaning of Tibetan Medicine as Part of Lamaic Doctrine] (St. Petersburg, Russia: Tip. Ministerstva vnutrennih del, 1892).

³⁸Bashkuev, *op. cit.* (note 7), 119–27.

³⁹Kirilov, *Sovremennoye znachenie*, *op. cit.* (note 37).

eradication of Tibetan medicine from the aboriginal population of Siberia, he believed that it was the mission for Russia to disseminate European culture to its neighbours – the Mongols, which, in his opinion, should be rather easy with the help of Buryat Lamaists.⁴⁰

Along with growing popularity of Tibetan practical medicine by the beginning of the twentieth century, its opponents started talking about it more and more often, but their criticism was habitually directed not so much at the principles of Tibetan medical treatment, but more at Peter Badmaev's practice. For example, Dr. Aleksander A. Lozinsky rather negatively spoke about his publications. He accused the author of the intent to spread 'his fantasies using a printing press' and attempts to endanger public health.⁴¹ According to Lozinsky, Badmaev's book was 'an amazing collection of absurdities, which, in the form of a public health textbook, could undoubtedly cause (due to underdevelopment of the majority in our society) a major harm to public health'.⁴² Talking again later about Tibetan medicine, Lozinsky denied its right for official existence.⁴³

Badmaev was opposed by Dr. Isaak Solomonovich Kreindel, who repeatedly argued with him on the pages of St. Petersburg periodicals. After Badmaev's translation of *Gyushi* had been published, Kreindel wrote a letter to the newspaper, in which he reported five cases of Badmaev's allegedly incorrect treatment.⁴⁴ Kreindel emphasised the incompetence of Badmaev, who, in his opinion, could not have a good knowledge of Tibetan medicine, because 'he did not live among his own people and abandoned them when he was a boy'.⁴⁵ He also noted that Badmaev did not have European medical practice, as he allegedly did not receive the necessary knowledge and skills at the Imperial Medical and Surgical Academy. Some clinicians, although recognising an interest in Badmaev's translation, exhibited ignorance and misunderstanding of the healing principles adopted in Tibetan medicine and specificities of medications used in it, which was especially noticeable in the discussion unleashed on the pages of the periodicals.

For instance, in his 1902 article, *Whether the doctors are right*, published in *St. Petersburg Vedomosti* (a daily metropolitan newspaper founded by Peter the Great), some physician, Grigory Gordon, noted that, in the introduction to Badmaev's book, there were some interesting paragraphs. The author pointed out that, on the twentieth page of the *Introduction* section, he was struck by a very original definition of medicine: 'everything that exists in the world can be called a medicine, including the space itself, if the organism needs it'.⁴⁶ Gordon also quoted descriptions of physiological processes, anatomy and structure of the human brain.

The main issue, to which the article has been devoted, was admissibility of a joint treatment of one of the patients by Peter Badmaev and physicians of St. Nicholas the Wonderworker Hospital. Gordon reported: 'Some Mr. N. A. attacks the doctors of St. Nicholas the Wonderworker Hospital for Insane in the *Novoe Vremya* (*New Times*)⁴⁷, because they do not allow the Tibetan doctor Badmaev to give herbs to his brother, a patient of this hospital, suffering from progressive palsy'. At the same time, the clinicians had already stopped treating this patient and 'sentenced him to death', whereas Badmaev was ready to cure him and, according to Mr. N. A., would have probably done so if the hospital authorities had agreed to allow him to treat the patient. Furthermore, Gordon concluded that the patient was dying, clearly, as a result of stubborn and hard-hearted hospital medics. Portraying Peter Badmaev, he noted that 'he is

⁴⁰N.V. Kirilov, 'Bor'ba s epidemicheskimi zabolevaniyami v Zapadnom Zabaykal'e' [Fighting Epidemic Diseases in Western Transbaikalia], *Vostochnoe Obozrenie*, 18 (1893), 9.

⁴¹A.A. Lozinsky, 'P.A. Badmaev. O sisteme vrachebnoy nauki Tibeta (recenziya)' [P.A. Badmaev. On the System of Medical Science in Tibet (Review)], *Vrach*, 12 (1899), 352–4.

⁴²*Ibid.*, 352–4.

⁴³*Ibid.*, 315.

⁴⁴I.S. Kreindel, 'O Badmaev i tibetskoy medicine (pis'mo v redakciyu)' [About Badmaev and Tibetan Medicine (Letter to the Editor)], *Novosti i birzhovaya gazeta*, (1902, 24 Sept).

⁴⁵*Ibid.*

⁴⁶G. Gordon, 'Pravy li vrachi?' [Whether the Doctors are Right], *Sankt-Peterburgskie Vedomosti*, 238 (1902).

⁴⁷N.A., 'O vrachebnoy etike' [About Medical Ethics], *Novoe vremya*, (1902, 26, 29 Aug).

publicly called a Tibetan doctor, and he calls so himself too'. However, Gordon, despite his desire, was not personally acquainted with the Tibetan doctor and familiar with his system of treatment.⁴⁸

In the same issue of *St. Petersburg Vedomosti*, a clarification of the matter was placed. Without denying the importance of Tibetan medicine, the author of the article sharply contrasted Peter Badmaev's activities with the healing art of lamas: 'Sufficiently assessed by our press, the self-advertising brochure of Mr. B. should not – and cannot – be equated with the true knowledge of selflessly serving humanity lamas, who are direct owners of the most ancient healing art'.⁴⁹

Remarking that foreign scholars, 'without any mockery, pay a thorough attention to Tibetan medicine for a number of years', the author contemplated the difficulties in scientific investigation and comprehension of Tibetan medicine, related to the complexity of everything that needs to be 'mastered in linguistics, oriental studies in their broadest meaning, history of religions and natural science'.⁵⁰ The author believed that Tibetan medicine was 'closely related to the innermost beliefs of the Orient', and was difficult to approach, since specialists in a certain field could not be competent in all other areas of knowledge, hence understanding Tibetan medicine was possible solely with a comprehensive consideration of oriental culture. Besides, 'the smartest and most skilful healing lamas' were still unable to share 'undoubtedly valuable information and means, transferred to the Buddhist world from the darkness of ages and widely justified by life itself'.⁵¹ As a result, the attitude towards clinicians, practicing Tibetan medicine, was rather highbrowed.

According to the author of the note, the representatives of scientific medicine did not see any reason to believe 'the quackery of some *khalatniks*' (meaning *those who wear robes*), and even less to trust the 'monopolist' of Tibetan medicine Peter Badmaev, who constantly risked 'sending one or another of his naïve patients *ad patres*'. The use of derogatory term *khalatniks* indicated prejudices and a certain disregard of some educated representatives in the Russian metropolitan society in relation to Asian peoples, their culture and methods of treatment.

The publication drew attention to the contradiction that existed in Russian society. On the one hand, Badmaev was exclusively allowed 'to fool the audience and to disguise science, discrediting the Mongol–Tibetan dogma and worldview, an interpreter of which he was presumed'. On the other hand, medical treatment activities were strictly prohibited to 'experienced healers' from Transbaikalia or Astrakhan province, despite abundant evidence from the healed patients. As a result, the author came to the conclusion about the injustice of such 'anomaly'. The benefit of a single privileged person with European education, but deprived of the educational qualifications of lamas, 'reinforces our prejudice against the Tibetan medicine, deserving a versatile study'.⁵²

Later, the discussion on using Tibetan medicine was continued. In one of the articles, there was an idea that since doctors had not been able to study Tibetan medicine, therefore, there was no reason to reproach on assumed unwillingness to deal with it. It was noted that a competent institution for studying medical sciences, the Institute of Experimental Medicine, could pay attention to the 'voice of the public' and seriously participate in a comprehensive study of Oriental medical practices, so that the practitioners could later use the results of this study.⁵³

Tibetan medical practices had negative reviews. In his letter to *St. Petersburg Vedomosti*, Dr. Dyachenko claimed: 'As it would be ridiculous to demand that contemporary clinicians study Greek or Arabic medicine and put it into practice, it is also ludicrous to offer it in relation to "Tibetan" medicine'. Furthermore, Dyachenko believed that, 'talking about "Tibetan" medicine as "highly developed", contrasting it to modern scientific medicine, is only possible if one is unaware of scientific medicine, and of

⁴⁸Gordon, *op. cit.* (note 46).

⁴⁹'K voprosu' [To the Question], *Sankt-Peterburgskie Vedomosti*, 238 (1902).

⁵⁰*Ibid.*

⁵¹*Ibid.*

⁵²*Ibid.*

⁵³Ramz, 'Eshche o meditsine' [More about Medicine], *Sankt-Peterburgskie Vedomosti*, 255 (1902).

the difference between scientific and empirical knowledge'.⁵⁴ In general, the discussion in the press displayed the need for scientific study of Tibetan medicine and treatment methods.

Kreindel, who called the Tibetan doctor a fraud, remained one of the most active opponents of both Badmaev and Tibetan medicine.⁵⁵ In 1904, the Doctor of Medicine, I.S. Kreindel, accused Badmaev of 'grossly ignorant healing methods', of 'bringing to the grave' many patients, including a conservatory professor Carl von Ark (died in 1902), and of illegally issuing death certificates for his patients, using the services of a certified physician. The lawsuit was initiated, in which Kreindel was accused of slandering Peter Badmaev.⁵⁶ However, the Court of Law, after an hour meeting, acquitted Kreindel. The majority of the public met the sentence sympathetically. At the same time, the metropolitan medical board appealed to the Bailiff of the Second District asking for disallowing Badmaev to practice medicine.⁵⁷

Tibetan medicine was often perceived as a potential threat rather than solely viewed as a fraud, because along with the components for therapeutic drugs, infectious diseases could be imported from the Orient. At the same time, the diseases *per se*, and their potential carriers – foreigners – were often associated with each other in the public perception.⁵⁸

Tibetan Medicine in Russia after the Russo-Japanese War

In 1904–1905, the Russo-Japanese war took place between Russia and Japan for the influence in the Far East, mainly in Korea and Manchuria. Withdrawal from an active Far Eastern policy after the defeat of Russia in the war showed inconsistency of many ideas related to the expansion of Russian imperial influences in Asia and establishment of the patronage over the eastern countries. Among the consequences of the war, we should mention a general reduction in the interest to the Orient, as well as the change in its perception. The East began to be associated with something dangerous. The perception of oriental peoples as 'aliens' and disease carriers undermined confidence in Tibetan medicine. As a result, as Martin Saxer noted, Tibetan medicine suffered greatly from the end of an active Far Eastern policy.⁵⁹

Despite a negative reputation of Peter Badmaev, whom many contemporaries called a fraud and a swindler⁶⁰, his practical activity continued up to 1917, finding both new opponents and new supporters. In 1911, the treatment based on his method was considered 'harmful for health', and, therefore, the Tibetan doctor was given permission to create a society solely for scientific study of Tibetan medicine.⁶¹ However, representatives of conservative circles gave him full support. For example, Prince Vladimir Petrovich Meshchersky, in response to a letter from E. Lorenz, stating that various obstacles were created to the medical practice of Badmaev, expressed his support for the doctor, who 'benefited suffering people'.⁶²

Although Badmaev was acquainted with the Emperor and repeatedly addressed him with different requests, and also knew many representatives of Russian political and cultural elite, some of whom were even treated by him, he did not have a noticeable effect on the Emperor's Court life and State politics. When, in the late 1890s, his relationships with Sergei Yu. Witte and Esper Ukhtomsky went downhill, and the Emperor, Nicholas II, lost confidence in him, Badmaev's projects related to the expansion of Russian influence in Asia, including the trading house he had established in China, ceased to be

⁵⁴E. D'yachenko, 'O znachenii «tibetskoy» meditsiny: Iz pisem v redaktsiyu' [On the Meaning of 'Tibetan' Medicine: From Letters to the Editor], *Sankt-Peterburgskie Vedomosti*, 255 (1902).

⁵⁵T.I. Grekova, *Tibetskii lekar' kremlevskikh vozhdov* [Tibetan Doctor of the Kremlin Leaders], (St. Petersburg: Neva, 2004).

⁵⁶Central State Historical Archive of St. Petersburg, coll. 2300, aids 1, fol. 8, p. 1–32 (unpublished source).

⁵⁷Stogov, *op. cit.* (note 12), 165–71.

⁵⁸Saxer, *Journeys with, op. cit.* (note 10).

⁵⁹*Ibid.*

⁶⁰*Iz arhiva S.Yu. Vitte. Vospominaniya: rasskazy v stenograficheskoy zapisi, rukopisnye zametki* [From the Archive S.Yu. Witte. *Memories: Stories in Shorthand, Handwritten Notes*] (St. Petersburg, Russia: Sankt-Peterburgskiy institut istorii RAN, 2003), V. 1, Book. 1; Feliks F. Yusupov, *Konets Rasputina* [The End of Rasputin: Memories] (Moscow: Otechestvo, 1990).

⁶¹'Deystviya i rasporyazheniya pravitel'stva' [Government Actions and Orders], *Grazhdanin*, 6 Nov (1911).

⁶²V.P. Meshcherskiy, 'Dnevnik. Pyatnitsa, 29 aprelya' [Diaries. Friday, April 29], *Grazhdanin*, 11 May (1911).

financially sponsored. Nonetheless, he repeatedly came forward with various economic and foreign policy initiatives, for example, railway construction in Mongolia.⁶³

Peter Badmaev, through his connections, as well as directly appealing to the Emperor until the fall of the monarchy, sought to influence the politics pursued in Russia. Badmaev was acquainted with Grigory Rasputin, but for a long time did not support his activities, speaking in 1912 on the side of Hieromonk Iliodor, who demanded from Rasputin to stop his communications with the Imperial Family and to repent of his sins. According to Boris S. Gusev, it was because of the desire to expose Rasputin, that Badmaev was banned from the Imperial Court.⁶⁴ Later, in 1916, Badmaev tried using Rasputin for his political goals. At that time, it was believed that Badmaev, along with Rasputin, had treated the heir to the throne, Czarevich Aleksei Nikolaevich⁶⁵, and even provoked worsening of his condition⁶⁶, but this information was not confirmed by other sources.⁶⁷ The Court doctors refused to admit Badmaev to the Imperial Family, while he did not have sufficient influence or connections to take part in the treatment of the heir to the throne.

Although there was an opinion of Badmaev as an adventurer in high society, due to the fact that he had no noticeable influence on the Emperor and the policies pursued in the State, he, unlike Rasputin, did not experience such sharp negative attitude from the Russian public and political elite, with the exception of criticism of his medical work by some representatives of European medicine.

Conclusion

Thus, along with the interest to oriental culture and a change in the perception of the East in Russian society in the second half of the nineteenth to early twentieth centuries, the oriental methods of treatment, presented by Tibetan medicine and closely related to Buddhist philosophy, were also of considerable interest. Attitudes towards Tibetan medicine were at the conjunction of attempts at rational, scientific understanding and perception of it as something exotic, irrational or even mystical. In the context of a general fascination with the Orient, interest in Tibetan medicine practices was often driven by the interest in Buddhist culture and oriental traditions.

In Russian society, at the turn of the twentieth century, ambivalence towards Tibetan medicine was clearly visible. On the one hand, there was a growing interest to the theoretical foundations, attempts at scientific understanding and spread of the practical component of Tibetan medicine in the sociocultural environment of the metropolitan society, which was not related to eastern traditions and beliefs. On the other hand, there were discussions and critical reviews of the possibilities and principles of Tibetan medicine treatment, contradicting Western science. In the latter case, the controversy was often caused by a negative attitude to the chief metropolitan specialist in Tibetan medicine, Peter Badmaev, and distrust of his activities, as opposed to the medical skills of true lamas.

As a result, despite quite successful activities of P.A. Badmaev, the competitive struggle and his tarnished reputation did not contribute to the development of Tibetan medicine practices in pre-revolutionary Russia. For the residents of St. Petersburg, acquaintance with Tibetan medical practices occurred at the level of using individual methods, not requiring a holistic approach to the spiritual foundations of traditional healing as part of Tibetan Buddhism. For the most part, the medical practice of P.A. Badmaev boiled down to selling the medications he made.

The identification of Tibetan medicine with P. Badmaev, whom many considered a swindler and a fraud, discredited oriental healing practices *per se* and resulted in progressive decline of interest in them, along with distrust to oriental spiritual and religious culture in general. Publications and activities of Peter Badmaev provoked discussions and controversy among orientologists and physicians, as well as

⁶³State Archive of the Russian Federation, coll. 713, aids 1, fol. 60 (unpublished source).

⁶⁴Gusev, *op. cit.* (note 10), 37.

⁶⁵Yusupov, *op. cit.* (note 60), 25.

⁶⁶Vedun, Tayna Vyryubovoy [Mystery of Vyryubova] *Petrogradskiy Listok*, (1917, 23 March).

⁶⁷Stogov, *op. cit.* (note 12), 165–71.

caused debate in the periodical press. At the same time, attention to Tibetan medicine based, among other things, on its outcomes became the factor of attraction to the Orient, oriental culture, and even some incidents of conversion to Buddhism in Russian society of the considered period.

Designated at the turn of the twentieth century, the problem of integrating Tibetan medicine into the emerging Russian national healthcare system, based on scientific medicine, remains still unresolved at present, despite numerous studies of Tibetan medicine in the 1920s–1930s in the Soviet Russia, along with a noticeable interest towards it in contemporary Russian society.