

Book Reviews

as in so many others; while there are occasional points of detail on which the compiler's descriptions could be amplified or corrected, these are unavoidable at this stage in the process of identification, they are relatively few, and they are much more than counter-balanced by the advantage of having the basic information accessible sooner than otherwise would be possible. Equally, misprints are extremely rare: the only ones noticed in an extensive sampling of the handlist were a repeated "of" on p. xii, line 1, and omitted letters in *Saptaślokaḥ* (no. 1776 on p. 137) and *Siddhāntacandrikā* (no. 1995 on p. 177).

This substantial Sanskrit manuscript collection (the third largest in Britain after those in the Bodleian Library and the Oriental and India Office Collections of the British Library), along with the related holdings of printed Sanskrit works in the Wellcome Library, deserves to be better known among Indologists than it has been so far. The collecting policies of Dr Paira Mall in the early part of this century (together with some subsequent additions), which resulted in the acquisition of so much more than medical materials that were their prime purpose, mean that the collection can undoubtedly offer much to Indologists in every field. Dominik Wujastyk's efforts in this regard—not only through the compiling of the handlist but also in many other ways—have already begun to ensure that it is better known and the present volume will be a significant further step towards attracting the attention that the collection merits. Altogether it is a valuable addition to the tools available for manuscript study.

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Harkishan Singh, *Pharmacopoeias and formularies*, History of Pharmacy in India and Related Aspects, vol. 1, Delhi, Vallabh Prakashan, 1994, pp. 159, \$35.00, Rs 225.

Harkishan Singh, *Pharmaceutical education*, History of Pharmacy in India and

Related Aspects, vol. 2, Delhi, Vallabh Prakashan, 1998, pp. xvi, 204 (81-85731-0908).

Dr Singh's studies of pharmacy in India indicate it to be based on British pharmaceutical practices imported and adapted for the sub-continent. In the early nineteenth century the emerging medical profession used the 1836 edition of the *London pharmacopoeia*, translated from the Latin into English by Richard Phillips and distributed in Hindustani, Bengali and other languages. A number of Indian drugs had already been incorporated into the European materia medica and British officials in India began to take notice of the wider range of indigenous remedies available. In 1837 a committee was asked to report on the East India Company's Dispensary and the possibility of using indigenous remedies. In 1841 William Brooke O'Shaughnessy, Professor of Chemistry and Materia Medica at the Medical College, Calcutta, published the *Bengal dispensatory*, based on the *Edinburgh new dispensatory*, and in 1844 the *Bengal pharmacopoeia*, which included a number of remedies long used by native practitioners. In 1868 the *Pharmacopoeia of India*, compiled by Edward John Waring, a surgeon in the Indian Army, was published under the authority of the Secretary of State for India. It contained information on Western drugs and indigenous remedies of India but its usefulness was limited until Native Surgeon Moodeen Sheriff of Madras prepared a supplement listing synonyms of the items in fourteen native languages.

There was only one edition of the Indian pharmacopoeia. Singh attributes this to the lack of interest in indigenous remedies by the Western trained doctors and to the fact that no arrangements were made for revisions. He might have added that Dr Waring, who was best qualified to undertake the work of revision, had retired and was back in London compiling his comprehensive *Bibliotheca therapeutica*. The author's account of what followed may be described as the evolution of

Book Reviews

the *British pharmacopoeia* from a national to an imperial formulary. First the *British pharmacopoeia* of 1885 replaced the Indian version on the list of stores supplied by medical depots, then it was decided that there would be an *Indian and colonial addendum* to the 1898 pharmacopoeia. It was issued in 1900 but was withdrawn and a revised version prepared for India when officials noted that the animal fats used in some preparations were offensive to Indian religious susceptibilities. Those items in the *Addendum* which proved to be of value were incorporated into the *British pharmacopoeia* of 1914, which was described as a work "suitable for the whole Empire". In 1946, a year before independence, *The Indian pharmacopoeial list* was published with monographs on indigenous drugs on the lines of the *British pharmacopoeia*. This paved the way for the *Pharmacopoeia of India* in 1955,

described on the title-page as the first edition, ignoring the earlier work of 1868. The author goes on to describe the further development of the pharmacopoeia, and the introduction of a National Formulary.

Pharmaceutical education in India, the subject of the second volume of this history, broadly followed British practice but with very limited facilities for studying the subject. Although a degree course was introduced at the Benares Hindu University in 1937 there was very little progress and at independence pharmacy practice was not properly organized and there were low minimum standards of education for entrants to the profession. The author gives a detailed account of the developments in education after the passing of the Indian Pharmacy Act of 1948 which provided for regulation of the profession and practice.

M P Earles, London