

Dhamma Medicine

December 20, 2020

The Buddha often compared himself to a doctor treating the diseases of the mind, and the Dhamma was his medicine. This fact is directly related to his strictures for what he would say, what he would teach. One, it had to be true. Two, it had to be beneficial. And three, it had to be timely. These things are connected because that's the way it is with medicine, too. You want to have genuine medicine, and you want make sure that it's beneficial for the particular disease that the patient is suffering from. You also have to make sure that it's timely: right for that particular point in the course of treatment.

Years back, when I was in Thailand, I went to India to visit the Buddhist holy spots. When I came back, I had a relapse of malaria. I went to the hospital, and they discovered that I had picked up giardiasis while I was in India. So they gave me some medicine for that, too. It looked like good quality medicine. It actually had the Roche trademark on it. After a week or two in the hospital, my malaria symptoms all went away, so I went back to the monastery, but I still had the symptoms of giardiasis.

Ajaan Fuang had a couple of nurse students, so I asked one of them what other medicine I might take. She said, "Well, let's look first at the medicine you're taking." She had a friend who worked in the pharmaceutical department of the Thai public health ministry. The friend ran a test on it. She came back and she said, "That wasn't medicine. That was cornstarch."

This is a big problem in Thailand. People are really good at making what looks like genuine pills from genuine pharmaceutical companies. But it was just cornstarch. It wasn't even medicine. You have to check everything to make sure it's genuine. In the same way, when you're practicing the Dhamma, when you're talking about the Dhamma with other people, first you want to make sure that what you've got is true Dhamma, because there's a lot out there that's fake. It looks just like the real thing. They dress it up really nicely, but it can't really cure any diseases.

So make sure you've got your sources right and that they're reliable.

The next question is, "Is this particular Dhamma lesson in line with what that particular person needs, given his or her condition?" Another story from Thailand: Toward the end of my stay, I had bronchitis, and I was given an herbal medicine that was a big hit at the time. It's called *faa thalaai joan*, which literally means "the sky destroys thieves." It's a great name for a medicine, and it works

really well for most feverish conditions. It's very cooling. But, it turned out, it was precisely the medicine I should not have taken, given my condition, because it made it worse.

So when you're looking at yourself in your own practice, or you're talking to other people about the Dhamma, you want to make sure that what you're using is right for your condition, and what you're telling other people is useful for what they've actually got in terms of the diseases of their minds. For example, when people are starting out with concentration practice, you don't tell them, "Concentration is not-self. It's going to be beyond your control," because the problem at that point, of course, is that it really is beyond their control. That's not the medicine they need. And also it's not timely. They need to be taught what they can do to exercise some control over their minds. Not-self comes in another stage in the practice.

Ajaan Fuang was very strict about this point when discussing the Dhamma. There was a minor prince who liked to go around Thailand asking different ajaans really high-level Dhamma questions to figure out what level of attainment they had. He came to see Ajaan Fuang one time and asked a very high-level question. Ajaan Fuang's first question in response was, "Is your mind anywhere near that point in the practice?" The prince said, "No." So Ajaan Fuang said, "In that case, I don't want to talk about it, because at the moment, it's going to be nothing but concepts." He wanted to wait until you needed that particular Dhamma medicine for what your condition was, and then he would talk about it. After all, he realized that Dhamma is medicine. It's not just a topic to discuss idly in your spare time.

You look at the Buddha when he taught. He didn't set out any Dhamma treatises, which would have been like medical treatises. He just treated individual people with their individual problems. He made some general comments to the monks at large about the Dhamma. But it was a sign of the wisdom of the Buddha—and probably of Ven. Ananda or whoever was responsible for the fact—that we have all these discourses that describe who came to the Buddha with what particular problem. We get to see the Buddha as a doctor in action, treating his patients. Unfortunately, Pali is not a living language anymore, so there's probably a lot in the way the questions are asked, or the type of Pali that's used, that would tell us a lot about the person who's being treated. But still we can get some pretty good ideas. People come with certain questions, and this is how the Buddha responded to those questions. In fact, he cited the ability to respond properly to questions as one of the signs of a wise person.

Some questions require categorical answers: yes or no, across the board. Others require analytical answers, in which case you have to reanalyze the question,

rephrase the question, and then give an answer. Some require cross-questioning. In other words, you have to ask questions of the person asking the questions to make sure they're ready to understand what you're about to say. And then there are questions that just should be put aside. They're not worth answering at all.

Now, if the Buddha had just written a treatise on the Dhamma—like, say the Visuddhimagga—we never would have gotten to see those principles in action. But it's because we have the discourses that we see a wide range of people from that time in India coming to see the Buddha with different questions, and you get a sense of which questions fall into which category.

In other words, the suttas teach us medicine as case studies. Each medicine has its context. So it's good to think about that, both as you practice and as you're reading the different case studies to figure out: "Does his particular case apply to me?"

This is also good to notice when you're talking about the Dhamma with others. You want to say something that's effective: true, beneficial, and timely. In that way, the Dhamma can show its true worth as medicine. Otherwise, you've just got a big shelf of medicines and you open up a bottle, taste it yourself, and then share it with somebody else without any real sense of what disease it's for. Sometimes you get sick, because some medicines can make you sick if they're not right for your illness.

Ajaan Maha Boowa said that Ajaan Mun, when he was giving his general Dhamma talks, tended to skip over some really important things. At first he found it frustrating. Why didn't Ajaan Mun go into that particular problem? It turned out that he *would* go into that particular problem if you had that problem and you came to him one-on-one. But for general consumption, he wanted to keep quiet about it, because otherwise people would have preconceived notions when they got to that point, and the preconceived notions would get in the way of seeing what was actually going on in their own minds.

So think about the ajaans. They were very sensitive to time and place, and what was appropriate for time and place. And of course they tested the truth of the Dhamma, not only in looking for reliable sources, but also in their own practice, so that they knew what they were talking about.

So when you make sure that your discussion of the Dhamma is true and beneficial and timely, that's when you get the most out of it.