

Medicine Behind a Mask

Posted on



Returning on a visit to the land of his birth after a decade of practising surgery in “the sterile, impersonal environment of England, Dr Sanjiva Wijesinha had the privilege of being taken to watch a Sri Lankan Devil Dancing ceremony. Here is his account.

The ceremony was not one of those exotic spectacles of sound and light, staged for the benefit of foreign tourists on a floodlit stage in some five-star hotel. The performance that I witnessed was a genuine Sanniya, a traditional ceremony of exorcism for a seriously ill patient, by a masked dancer in a little village off the beaten track in Sri Lanka’s deep south.

The poor patient, a previously healthy 24-year old farmer, had been suffering from high fever with chills and shivers for several days. A combination of analgesics, antipyretics, antimalarials and antibiotics prescribed by the local “physician” had failed to bring relief.

That worthy individual, by virtue of the fact that he was the only person in the village who had a knowledge (though limited) of the English language and the British Pharmacopoeia, had for many years been passing off as a practitioner of western medicine – but he was, after all, only a retired pharmacist. The patient’s relations had therefore fallen back on traditional therapy: a dance of exorcism to drive out the devil causing the disease, done by a dancer donning a dazzling coloured mask that depicted the Demon itself.

Traditionally, the most important mask in this demonological approach to medicine is that of the Mahakolasanniya or great Demon of disease. The intricate mask of this Demon’s face is surrounded by 18 miniature faces of different shapes and colours. Each little demon-mask represents a different category of disease.

For example, the Pissu Sanniya represents Mental Illness, Bihiri Sanniya Deafness, the Amukku Sanniya diarrhoea manifested by vomiting, and the Golu Sanniya, Dumbness. The remaining faces represent various other diseases ranging from Cholera to Epilepsy.

When an ailment can be easily identified by its signs and symptoms, a life-sized version of the appropriate face is worn by the dancer who then acts out the disease. He may shiver and shake violently like a patient with malaria, or stumble and grope about in a pathetic demonstration of blindness, or retch and throw up in a revolting

simulation of a vomiting man.

The dancing is performed by the light of flares in the humid tropical night, with the throbbing beat of drums providing the background .', music. Frequent pauses for verbal exchanges spiced with ribaldry and black humour, between dancer and drummer, afford some comic relief for the spectators.

The whole show is directed by a Kattadiya, the equivalent, perhaps, of the chief surgeon in a modern hospital. The Kattadiya on occasions takes part in the dancing himself, but more often these days, he directs his assistant to perform the actual rites while he overlooks the ceremony, rather like the junior doctor in the operating theatre who performs surgery under his chiefs supervision.



The colourful demon masks are carefully hand-crafted from the wood of the nux vomica tree, which is soft enough to be carved with a sharp knife or chisel, yet hardy enough if smoked and cured properly to last for a hundred years. The masks are utterly life-like the Kana Sanniya that represents Blindness, for example, has empty sockets for eyes, and frowns grotesquely in an effort of concentration as the blind are wont to do.

How does all this exorcism work? It certainly has its moments of efficacy – for how else can one account for the persistent faith that generations of Sri Lankans have in it? When western medicine men fail to deliver the goods, or in situations where there is no doctor, the local population turns to the Kattadiya. And who can blame people faced with this type of predicament for resorting to Sanniya, if the surgeon's scalpel and the physician's drugs are out of reach?

Does Devil Dancing work by producing a shock-like effect in the patient so that the evil spirit in possession is terrified into leaving – a sort of humane version of the Electro Convulsive Therapy practised by modern western psychiatrists? Does the Kattadiya propitiate the demon of disease itself, persuading it to release the patient? Is it Black Magic, or Oriental Witch Doctoring? I suppose it depends on the way you look at the whole business.

I have heard it said that the western physician and the traditional medicine man are teammates in the same ball game, like the centre-forward and the right wing in a soccer team; both have the same aim in view though they use slightly different techniques. After all, the role of every medicine man – whether kattadiya, Cardiologist, shaman or surgeon is to relieve, comfort, and occasionally even cure their patients.

Watching the devil dancer in action, it struck me (spoiled though I was by a decade of working in British hospitals) how much more colourful, how much more dramatic, how much more human an approach to disease the masked dancing ceremony seems. What a stark contrast to the sterile and soul-less scene with which we have now become familiar – of masked surgeons and anaesthetists performing their cold white magic in a western operating theatre!

Dr. Sanjiva Wijesinha has trained in Oxford, Melbourne and Sri Lanka. He is chief of surgery at the Colombo Children's Hospital. •

