Love and Death are words that often appear together, not because they are antonyms, but because we feel them so closely bound. The people we love die, and, with changes in medical technologies, questions have arisen for those inside and outside the field on how best to handle this phase. In 2014, the National Institutes of Health called for a complete re-envisioning of end-of-life care. This dissertation is meant to contribute to that, as well as to increase cultural sensitivity. Finally, it is meant to illuminate the intersection of two medicines occurring in a shared geography but in disparate cultural milieus—the first Islamic and the second Hindu. Each has different conceptions about what generally happens after death—i.e., rebirth versus final judgment. The question I ask is simply what actions were taken or withheld for one fatally ill. In each tradition I examine a broad, foundational text and a narrowly focused one aimed specifically at dying: For Unani that means the Qānūn and Risālah Qabriya, and for Ayurveda the Carakasaṃhitā and Kālajñāna. My hypothesis was that different ideas about what happens after death would lead to different approaches to the dying. This, in fact, appears to be the case.

In the latter tradition, I identify strong prohibitions against medical treatment for the dying due to its inevitable ineffectiveness. I also identify changes in the conception of death over time. In the former tradition, I see an emphasis on keeping the patient pain-free. My method is philological, with a close reading and acute sense of terminology leading to an intricate understanding of these approaches plus a glimpse of the driving assumptions and philosophies behind them. Reflecting this work back upon our initial question, furthermore, helps to illuminate a recent shift in the Western attitude towards death, which has implications for care strategies. This research, then, begins with a small, concrete question and leads to broader, more enduring and difficult ones—questions we are all grappling with.