

Panel 5: Medical Manuscripts on the Silk Roads

Panel Organiser: Professor Catherine Despeux (INALCO)

This panel will comprise papers by scholars working on Silk Roads manuscripts concerned with healing and medicine. The papers will aim to identify contexts and analyse content that will contribute to our understanding of the cross-cultural transmission of medical knowledge and practice. Inevitably this subject will bring together scholars working across a range of different linguistic and disciplinary fields.

Panel participants and abstracts

5. 1 A Himalayan Melange - Exotic *materia medica* in the Tibetan Dunhuang medical manuscripts

Dr Ronit Yoeli-Tlalim

Research Fellow, UCL

This paper will deal with foreign names in Tibetan *materia medica* mentioned in the Dunhuang mss. and show how the origins of these names mirror what the Tibetan medical histories tell us, i.e.: that the origins of Tibetan medicine contains/synthesises elements from Chinese, Indian and western medical systems.

5.2 Medical Diagrams in the Tansuqnamah, the Treasure Book of Ilkhān on Chinese Science and Techniques.

Dr Vivienne Lo

Convenor of Asian Studies, UCL

This paper will analyse medical diagrams in the *Tansūqnāmah* [*The Treasure Book of Ilkhān on Chinese Science and Techniques*]. The illustrations in this fourteenth century Persian translation of Chinese medical writings undertaken at the court of Rashīd al-Dīn (1247-1318) are the earliest extant editions of a genre of anatomical illustration beginning with *Yan Luo Zi* 煙羅子 lit. ‘Master of the Smoke Curtain’ – a figure thought to have flourished between 936 and 941 CE. Among them are a variety of charts that seem to organise seasonal and calendrical influences on the body for prognosis and diagnosis. An analysis of the content and changing contexts of these charts will form the core of this presentation.

5. 03 Agada pills in *Qian Jin Yi Fang*: A case of Indian Ayurvedic medicine in medieval China

By Chen Ming

The agadatantra (Toxicology) is one of the eight branches (astanga) of ancient Indian Ayurvedic medicine. In Chinese Buddhist canons, ‘agada’ not only refers to an antidote for cure different poisons, but also a drug potency itself and, as an extension of this meaning, becomes a kind of metaphor for the potency of Buddha’s dharma or wisdom. In the 21st chapter of *Qian Jin Yi Fang*, *A Jia Tuo Yuan Zhu Wang Bing Di Er* (B: Agada pills cure ten thousand illnesses), famous physician Sun Simiao in Tang Dynasty recorded an important agada pill together with 46 prescriptions. This article traces the agada pill to Indian Ayurvedic texts, and analyses how Sun Simiao sinicised this foreign prescription.

5.04 Medical Globalization in the Mongol Era: The Linking of Traditions

Paul D. Buell (Western Washington University)

The Mongols united a good part of Eurasia under the empire and its successor states and also initiated profound exchanges of cultural goods between West and East, East and West. The proposed paper will focus on one aspect of these exchanges, an on-going medical globalization as local medical traditions, including those of China, Tibet, the Middle East and Mongolia were amalgamated into one larger tradition with official patronage and encouragement. One evidence of this is the borrowing of Chinese medicine in Mongol Iran as part of an effort to make it part of the medical mainstream there and of Islamic medicine in China, which became the preferred medicine of the Mongol elite of Mongol China and which was combined with Chinese, Tibetan and Mongolian traditions to create a new, assimilated medicine with a little something for everyone. What was involved is witnessed in part by the surviving chapters of the great Islamic medical encyclopedia of the era, the *Huihui yaofang* 回回藥方, “Muslim Medicinal Recipes,” which, on the surface, reflects good Islamic medicine quoting Galen and other traditional authorities but which, looked at more closely, is a best a highly assimilated Islamic medicine that has been reinterpreted to reflect new international standards that seem to have applied throughout the Mongol world order and perhaps even beyond, since early Western medicine was very much a part of the international changes taking place.

5.05 Rashīd al-Dīn and the introduction of Chinese medicine Into Persia

Yidan Wang, Peking University

Rashīd al-Dīn (1247-1318), the influential statesman and historian, as well as an imperial physician of the Il-Khanid Dynasty 1256-1353 in Persia, had showed special interest in Chinese medicine while being in the office of Vazīr. He not only wrote the book *Tanksuq*-name on Chinese medical science based on the translation of Chinese medical literature, but also was very active in importing Chinese medicinal liquid into Persia and inviting Chinese physicians to practise and teaching Chinese medicine in a town named “Rab‘e Rashīdī” in the suburb of Tabrīz. This paper will try to trace the history of the introduction of Chinese medicine into Persia, and work out whether the Chinese medicine had any influence on the Persian medicine.

5.06 How to read a Buddhist medical treatise: The social logic of healing in early medieval Chinese Buddhism

C. Pierce Salguero
Johns Hopkins University

Beginning with the Buddha’s copious use of medical metaphor in the earliest scriptures, illness and healing were always of central concern for Indian Buddhism. Upon its introduction to China, translators enthusiastically rendered Indian medical doctrines found in the Canon into Chinese—sometimes including entire medical treatises. However, close analysis of these texts reveals that far from straightforwardly transmitting Indian medical knowledge, Chinese translators mobilized specific rhetorical strategies and translation tactics in pursuit of tangible sociopolitical goals. This paper argues that Chinese Buddhists emphasized healing as a key pillar in their proselytizing mission in order to compete with the systematized homology of cosmos, state, and body in indigenous Chinese thinking. In challenging the classical world-order, Buddhism forwarded its own idealized cosmos-state-body triad: a multi-tiered chain of beings linked by karma and grounded in emptiness, a political ideal of the Dharma-wheel-turning king cum bodhisattva, and an emphatically Buddhist vision of the material body’s health and illness. Whereas the classical Chinese medical body corporeally inscribed the waterways, depots, and palaces of the unified empire and the cosmic cycles of yin-yang and the five phases, the Buddhist body made material the contest between ignorance and wisdom, the battle between demonic and angelic beings, and the transformation of the phenomenal into the supramundane. I argue that medieval Chinese Buddhist texts about illness and healing therefore cannot be read as strictly medical manuals, but must be understood as social, political, and philosophical texts of the highest order if we are to understand their meaning in their contemporary context.