THIRD INTERNATIONAL CONGRESS ON TRADITIONAL ASIAN MEDICINE

Organized by the Indian Chapter of IASTAM
4th - 7th JANUARY, 1990
BOMBAY, INDIA

SEE ANNOUNCEMENT IN BACK PAGE AND
INFORMATION CARD TO BE FILLED UP
FOR RECEIVING FUTURE ANNOUNCEMENTS

PROGRAM COMMITTEE IN PAGES 5-6

AL BASHAM MEDAL AWARDED TO
YAMADA KEIJI, &
G JAN MEULENBEULD

PROFESSOR YAMADA KEIJI OF JAPAN AND
PROFESSOR G. JAN MEULENBEULD OF HOLLAND NAMED
AS FIRST RECIPIENTS OF THE A.L. BASHAM MEDAL

The International Association for the
Study of Traditional Asian Medicine has decided
to establish an A.L. Basham medal in honor of
the great Indologist and founder of IASTAM.
The medal shall be awarded every five years
on the occasion of the International Congress
on Traditional Asian Medicine to outstanding
scholars in the field of study of traditional
Asian medicine.

It is the goal of IASTAM to encourage, with the
A.L. Basham medal, serious, scholarly work on the
social and intellectual history of traditional
Asian medicine, and the recipients will be scholars
who have set the highest standard possible.

The A.L. Basham Medal Award Committee headed by
Paul U. Unschuld and Charles Leslie has elected
Professor Yamada Keiji of the Research Institute
for Humanistic Studies of Kyoto University in
Japan, and Dr. G.J. Meulenbeld, retired Professor
of Indology of the University of Groningen, The
Netherlands, as the first two scholars to be
thus awarded an A.L. Basham medal for their
scholarly work, on the occasion of ICIAM III in
Bombay, January 4-7, 1990.

The award ceremony will be part of an A.L.
Basham memorial session, and the recipients will
present papers on that occasion.

Professor P.U. UNSCHULD, President of IASTAM

IMPORTANT BOOKS REVIEWED

Roger JEFFERY Politics of Health in India  pp. 2, 14
Charles LE BLANC Hsi Hua Tzu  3-4
Emotion, Illness and Healing - Middle East  7-8
Paul U. UNSCHULD Approaches  9-10
André PADOUX Mantras  11-12
Claude LARRE Voie du Ciel (Suwen I, II)  13
The first part, "Health and Health Policy under the British," carefully outlines the status of health in India before 1947, the relations between indigenous medicine and the State, the Indian Medical Service and health expenditures, and concludes with an overall assessment of medical policy in India under the British, "the three legs of [which] were (in order of prestige) medical education, medical services, and public health" (p. 75). Just to give a short extract from a well-argued and qualified set of conclusions: "The imperial impact on health in India was thus contradictory. Changes in famine policy and food distribution helped reduce mortality; increasing numbers of men (and, later, women) were trained in medicine according to international standards of the time; hospitals and dispensaries attracted considerable numbers of patients; and issues of disease prevention and public health provision were addressed as never before. But equally, the impact of many measures was restricted to a small sector of the population, first, to the European civil and military servants and their families, later to Indians with access to urban facilities... [One may say that this pattern was a colonial mode of health care; however, Jeffery convincingly argues, p. 101, that sanitary reform and medical services were given higher priority in India, as a government concern, than in Britain, were they tended to be left to charities.] "Health measures, per se, probably had little influence on mortality and morbidity, but they did establish a framework (of personnel, ideas, institutions) that permitted more substantial postindependence provisions, whose impact is more noticeable" (p. 100). Throughout the book, the reader can enjoy the same kind of thoughtful and challenging analysis; facts and figures are carefully selected, and their reliability systematically discussed.

Part I is preliminary. The author's first priority was to understand the patterns of health provision and their developments since 1947, and this required a picture of their position when the British left; hence part I devoted to the legacy of British rule. But part II, "Health Policy in Independent India," constitutes the core of the book. It comprises the following chapters: Health care and development in postcolonial India; Health plans and expenditures, 1951-1984; Politics of medicine in India; India in the world health economy; Medical and paramedical personnel; Structure and process in health services; New directions in health policy?

Jeffery argues that the health services are only loosely connected to the patterns of class domination in India. This is why they are able to serve the Indian elite without totally ignoring the major health needs of the mass of the population. On each and every specific point discussed, at the end of each chapter, a conclusion is drawn which gives us reasons for better expectations, or else, reasons to worry about. The final conclusion is very pessimistic. We should not ignore "the very real achievements of Indian health policy. Health planners have ensured that resources are allocated to preventive medicine, rural areas, and paramedical workers [whereas many other developing countries have devoted resources to hospitals and medical colleges]. Substantial preventive campaigns have been waged against malaria and smallpox. Large numbers of Primary Health Centers and subcenters have been built and equipped, and staff have been appointed. In some areas—such as Kerala, or parts of Gujarat—staff have worked fairly conscientiously, albeit generally in those areas that are relatively well-equipped and favored in other ways too. Beneficiaries may have been disproportionately drawn from the higher classes and castes, but the poor have not been totally excluded" (p. 295). Reforms since 1970 have continued this tradition. International agencies, pressure for job improvements by employees of the disease-control programs, and "rural populism" (personified by the Janata Health Minister Raj Narain, see p. 254) were among the social forces that allowed health reforms to be implemented. However, health services are plagued by bureaucracy. A major issue is that of transfers, a well-established feature of the Indian bureaucracy (p. 270). Another one is the unwillingness to work in rural areas; indigenous medicine graduates have been almost as unwilling to work in rural areas as their Western medicine counterparts (p. 186). Then, "the thread that links the masses at the bottom to the planners at the top is a clientelist political structure... the paramedical worker who wants a favorable transfer must please the local elites..." (p. 298). Lastly, Jeffery evokes the threat to health services posed by the family-planning program, which has taken a growing share of health-related expenditure, and also...
Ch Le Blanc
Huai Nan Tzu
Charles LE BLANC
Huai Nan Tzu,
Philosophical Synthesis in
Early Han Thought
The Idea of Resonance (Kan-Ying)
With a Translation and Analysis
of Chapter Six
Hong Kong: Hong Kong University
Press, 1985
962-209-179-2 (Casebound)

When Liu An, King of Huai-nan (1792-122 BC),
paid his state visit to Emperor Wu (r. 141-87 BC),
he presented him, as a token of esteem, with a
book in 21 chapters that had "just recently been
completed." It is this work which has come down
to us under the title Huai-nan Tzu, "The Book of
Master Huai-nan." It encompasses a wide
variety of subjects, from ancient myths to
temporary government, from didactic histori-
cal anecdotes to applied psychology, and from
astronomy and topography to philosophy and
mysticism. Charles Le Blanc's contention is
that, despite the diversity of subject-matter,
ideas and style, one overriding concern
pervades Huai-nan Tzu: the Utopian attempt to
define the essential conditions for a perfect
socio-political order of Taoist orientation.
Charles Le Blanc, who studied Chinese philo-
osophy with Derk Bodde at the University of
Pennsylvania, is a Professor of Chinese
studies and the Director of the Center for
East Asia Studies at the Université de
Montréal. Many years of scrupulous and dedicated
studies went into this book which is obviously
a fundamental publication. An incredible amount
of information has been incorporated in the foot-
notes, and even the most unphilosophical reader,
looking only for matter-of-fact punctual data,
will find here his due! Let us mention, for
example, the discussion of animals' identities
in footnotes to pp. 144-148, on Huai-nan Tzu 6,
section V (the fable of the dragons and mud-eels
and the fable of the phoenixes and sparrows).
In other words, this is an erudite book, edited
to perfection (chronology, bibliography, gloss-
ary and index, etc.), but its essential value lies elsewhere. It expounds the philosophical
basis of a vast, cosmic Physiology (which results
from the Taoist True Man being attuned to the
cosmos) and, consequently, the philosophical
basis of medicine as well as of Utopian politics.
Ch. Le Blanc has concentrated his attention
on Chapter 6 of Huai-nan Tzu which expounds the
to theory of kan-ying, stimulus-response, resonance,
postulating that all things in the universe are
interrelated and influence each other according
to pre-set patterns. "The view of an integrated
universe, in which the large and the small, the
hard and the soft, the hot and the cold, and
other complementaries all have their meaningful
place and function," Bodde writes in his fore-
word, "is basic to the key Chinese concept of
kan-ying... According to such a doctrine, the
universe is an organismal whole consisting of
things and phenomena that, despite their diversity,
belong to certain common categories within which
they stimulate and respond to one another. In
other words, they resonate. Some may be as far
apart as the celestial moon and terrestrial ocean,
whose resonance consists of the ebb and flow of
the tides. Others may be as close together as the
organs of the human body... " (p. xii). In such
a trend of thought, astronomy, ecology, politics
and medicine are interrelated; in other words,
they resonate!
The first hundred pages of the book are
devoted to the historical, philosophical, and
textual background of Huai-nan Tzu: chronologi-
cal sketch of the life of Liu An, and writings
attributed to him; the transmission of the text;
Han commentaries on Huai-nan Tzu; The sources
of Huai-nan Tzu.

The next hundred pages contain the translation
of Huai-nan Tzu, Chapter 6, divided by Le Blanc
into nine sections. For each section he gives
first his translation copiously annotated in
footnotes dealing with textual criticism and
factual information. But each section's trans-
lation is followed by Le Blanc's own "Commentary,"
and this is the core of the book. He discusses
the rhetoric, structure and meaning of each
passage, the basic themes and ideas, the overall
rhetoric of the text. See for example in p. 139 ff.:"That the two paragraphs form one single lit-
erary unit is indicated clearly by the recurrence
at the crucial point of each paragraph of parallel
formulae:
- wei shih yi yü sheng (There had as yet been no
differentiation as regards sound); and
- wei shih ch' u ch'i tsung (He [The True Man] had
not yet begun to emerge from his origin).
The full import of the parallel formulae as well
as the structural unity of the two paragraphs will
become clearer as we analyse the text in more
detail..." This is a typical "explication de
texte," following in the great tradition of Euro-
pean classical philosophy, and it resonates with,
for example, Claude Larre's structuralist and
continued in page 4
such as Iao, non-action (wu-wei), naturalness (tzu-jan) and return to the origin (fan) to form a new all-embracing cosmology." Both very rich and perfectly lucid, this book teaches a wonderful lesson of classical philosophy. FZ

Ayurveda of Trees

Das Wissen von der Lebensspanne der Bäume
Surapâla’s Vṛksāyurveda
kritisch ediert, übersetzt und kommentiert
von Rahul Peter DAS
Mit einem Nachtrag von
G. Jan MEULENBEEK zu seinem Verzeichnis
'Sanskrit Names of Plants and their Botanical Equivalents'
Stuttgart: Franz Steiner Verlag Wiesbaden GmbH, 1988
(Alt- und Neu-Indische Studien, 34)
herausgegeben von Seminar für Kultur und
Geschichte Indiens an der Universität Hamburg
IX-589 pp. ISBN 3-515-04663-1 DM 148.00

A critical edition, German translation, and
German commentary of Surapala’s Vṛksāyurveda,
"The science of the duration of life in trees," an
Ayurvedic text on horticulture.

Appended to this impressive piece of German
philology are G.J. Meulenaer’s Additions to his
"Sanskrit Names of Plants and their Botanical
Equivalents" which were published in 1974 along
with his well-known translation of the Mādhava-
mīrāṅga and its Chief Commentary Chapters 7-10
(Leiden: Brill, 1974).

The philological treatment of the text is
incredibly thorough. The slightest graphic ambi-
guities are recorded among variant readings.
Exhaustive indices of Sanskrit words, Latin plant-
names, and "things and names," are supplemented
with a pāda-index. The bibliography (references
cited in the commentary) occupies twenty pages,
and it is supplemented with a specific bibliography
of the secondary literature on agriculture and
horticulture in ancient India (to be found in
pp. 4-16). The critical edition is based on the
collation of more than 60 manuscript or printed
texts. Treasures of ingenuity are being spent on
etymology. Clearly, Dr. Das went all out!

But one has the feeling that, so to speak, all
ideas have been evacuated from the landscape.
Whenever Dr. Das has do deal with an abstract word,
a category, a traditional concept, instead of
defining or discussing it, he gives bibliographic
references. What is at stake in Trees and Gardens,
their fundamental differentiation from Village in
Hindu culture, has been totally missed out. FZ
THIRD INTERNATIONAL CONGRESS
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4 - 7 January 1990

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4th to 7th January 1990

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[Not a definitive list. We apologize for any inexactitude.]
emotion, illness and healing in Middle East

CULTURE, MEDICINE, AND PSYCHIATRY
An International Journal of Comparative Cross-Cultural Research
Volume 12 No. 1 (March 1988)
"Emotion, Illness and Healing in Middle Eastern Societies," Edited by Mary-Jo DelVecchio Good, Byron J. Good [Editor-in-Chief of the Journal], and Michael M.J. Fischer

Part I: Discourse and Affect

Part II: Discourse, Illness and Healing
Evelyn ALEENE EARLY, "The Baladi curative system of Cairo, Egypt"; Kaveh SAFA, "Reading Sa'di's Ahl-e Hava ['The People of the Air', Tehran, 1966]: Pattern and significance in spirit possession beliefs on the southern coasts of Iran"; Yoram BILU, "Rabbi Yaacov Wazana: A Jewish healer in the Atlas mountains."

This fine little volume (of about 140 pp.) accomplishes two breakthroughs. First, taken as a whole as if it were published as a book of its own (and the reader has the feeling that it was the editors' intention), it is an important publication in the field of "West Asian" medicine (Egyptian, Iranian, Jewish, etc.) on which not much is known. Then, on the theoretical level, the new themes of Emotion and Affect are incorporated into the field of Medical Anthropology. Of course, this may not be totally new to one who keeps up with the production of the Harvard school. For example, A. KLEIMAN & B. GOOD, Eds. Culture and Depression (Berkeley: U. California Press, 1985) already carried contributions by Beeman and the Goods, touching upon the question of "emotional discourse" which is now tackled in full. Fischer comes to help them very efficiently. Since this review must remain very short, and we have to choose at least one illustration of the quality of this publication, we would like to draw attention to Michael M.J. Fischer's essay (pp. 31-42). Lila Abu-Lughod's documentation of Bedouin poetry, he argues, "is one gem among a slowly but

drinkers and non-drinkers of milk


Françoise SABBAN, "Un savoir-faire oublié: le travail du lait en Chine ancienne," Zinbun, Memoirs of the Research Institute for Humanistic Studies, Kyoto University, Number 21, 1986, pp. 31-65

[A forgotten savoir faire: the processing of milk in ancient China]


This short bibliographic note is about a well-known, but not so well understood, anthropological fact which is sometimes called "the milking boundary" in South Asia. Broadly speaking, today a boundary exists between the milk-drinking states of India and Tibet to the west, and to the east Assam, Burma, and Ceylon where milking, as in the Far East, is unknown. The references given above represent only a very narrow selection, but they all carry extensive bibliographies and, especially through the very recent papers by BERNOT and MAHIAS, readers will gain a very complete view of the various problems involved. Or (Mrs.) MAHIAS (CNRS, Paris) is more interested by ritualistic, ideological divisions and patterns (as is also this reviewer, who touched upon the milking boundary in his work on Ayurvedic ecology), while Professor BERNOT (Collège de France) follows in the line of cultural ecology, and looks for positive explanations: Nutritionists have recently explained the dislike of milk by the impossibility of digesting it, because some persons, notably Far-Easterners, whose bodies do not produce lactase, develop an allergy. However, as Or (Mrs.) Françoise SABBAN (EHESP, Paris) has demonstrated in her brilliant essay based on the most erudite and penetrating reading of the Chinese textual evidence (developing previous contributions by Edward H. Shafer and Francesca Bray), milk used to be drunk in ancient China; other anthropologists have also mentioned the drinking of milk in ancient Timor, in Mejji Japan. Peoples of Southeast Asia still drink large quantities of concentrated, sugared milk. Therefore, there must have been a traditional way of compensating continued in page 8

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emotion... Middle East

continued from page 7

steadily growing treasury of the social and psychological uses of cultural poetics." Abu-Lughod discovered that among the Bedouin, expression of emotion is restricted in everyday discourse, but that a rich and intimate discourse on loss, love and honor is present in the traditional poetic form of the ghinnaw, "little songs," through which sentiments are organized and expressed. The vocabulary of these little songs is often obscure, the images condensed, and the referents are made ambiguous. Yet, this is a linguistic form for expressing vulnerability, love, attachment, stress, loss, pain. . . . The interpretive approach to emotional discourse, which has thus been developed about well-defined "genres" and "texts" will, in turn, be extended to illness narratives, as Evelyn Alene Early's contribution shows later in the volume. FZ

milk boundary

continued from page 7

for lactase deficiency, Prof. BERNOT argues, and he draws attention to the custom of chewing food before giving it to children who have just been weaned. Food initially chewed by the mother, and impregnated with the mother's saliva, might play a digestive role when a baby is weaned.


Sri Lanka

Carolyn Rebecca NORDSTROM

Meaning and Knowledge in Medical Pluralism: Sri Lanka

Ph.D. Dissertation

Univ. of California, Berkeley and Univ. of California, San Francisco, May 1986

University Microfilm International, 1987
[300 N. Zeeb Road, Ann Arbor, MI 48106, USA]

Contents:


The Society and the Medical System.
IV. The System: 8. Conclusion, Negotiating the System.

Research conducted mostly in an urban area on the southern coastal belt of Sri Lanka, this study is oriented toward gaining an understanding of the dynamics of the health care system as it exists in the daily lives of people. Such an approach revolving around the concept of "negociation" (as a basic pattern of all social dynamics) reflects one of the few dominant trends of thought in North American medical anthropology. "Patients and practitioners enter into a dynamic relationship in which the requirements and values of both are negotiated in an effort to satisfy all the actors involved" (p. 251). Dr Carolyn NORDSTROM did fieldwork mainly in 1982 and 1983, and the end of her stay coincided with the country experiencing severe nationwide inter-ethnic rioting. Her study does not address this social context specifically, but the idea of crisis underlines the conception of illness. She might be willing to reorganize the conceptual framework, to escape from pragmatic oppositions like individual vs. society, and knowledge vs. action, to present her material in a more dramatic way.

A selection of papers from a symposium organized by Charles LESLIE at the 84th Annual Meeting of the American Anthropological Association (Washington DC, 1985) has been edited by Professor Beatrix PFLEIDERER and appeared in SOCIAL SCIENCE AND MEDICINE, Vol. 27 No. 5, 1988. Along with Paul Michael TAYLOR's article on Mantras reviewed below (this issue, in page 12), this special number contains a wealth of contributions by experts of Asian medicine, under the general title "Permanence and Change in Asian Health Care Traditions." Some of them (by Laurel Kendall, and by Dorothea Sich on Korea; by Mitchell Weiss et al. on India; etc.) will be reviewed in future issues of IASTAM NEWSLETTER.

Since this brief review is focussing on Sri Lanka, let us mention Carolyn NORDSTROM's paper, "Exploring pluralism - the many faces of Ayurveda" (pp. 479-489), which is a welcome publication of part of her dissertation work. To be compared to: Nancy E. WAXLER-MORRISON, "Plural medicine in Sri Lanka: Do Ayurvedic and Western medical practices differ?" (pp. 531-544); Ivan WOLFFERS, "Illness behaviour in Sri Lanka: Results of a survey in two Sinhalese communities" (pp. 545-552).
APPROACHES TO TRADITIONAL CHINESE MEDICAL LITERATURE

Proceedings of an International Symposium on Translation Methodologies and Terminologies

edited by
PAUL U. UNSCHULD
Institute for the History of Medicine, Munich University, FRG

ISBN 1-55608-041-7
Hardbound Dfl. 140.00/£44.00
Kluwer Academic Publishers

These are the proceedings of a IASTAM Meeting held in Munich/W. Germany, August 25-29, 1986. See IASTAM NEWSLETTER No. 9 (November 1986).

Reviewed by HELWIG SCHMIDT-GLINTZER, Munich

In his "Introductory Remarks" Paul U. Unschuld, the editor of this remarkable volume, describes different approaches through which Europeans and Americans have sought access to the conceptual contents and clinical application of traditional Chinese medicine, and he points out that these approaches "neglect the literary basis of traditional Chinese medicine" (p. ix). What he asks for are reliable translations of "Ancient Chinese medical literature." The goals of the conference which he has been organizing in 1986 in Munich under the auspices of IASTAM were, as he put it, "first, to discuss problems associated with terminological choices and basic translation methodologies; second, to compare the issues confronting European and American scholars with those presenting themselves to Asian scholars; and third, to examine whether scholars pursuing research on ancient Chinese medical literature may benefit from the experiences of other disciplines" (p. xii). The fourteen contributions to the conference which the present volume contains are arranged by the editor into four main parts.

After a short opening address given to the symposium by WOLFGANG BAUER and entitled "Chinese Studies and the Issue of Fachprosa Research" (pp. 1-4) follow the four articles of the first part which bears the title "The Study of Ancient Chinese Medical Literature in Contemporary China and Japan. Surveys and Examples": MA KANJEN in his paper "Classic Chinese Medical Literature in Contemporary China: Texts Selected for Modern Editions, and Problems Associated with this Work" discusses mainly "problems associated with collation, annotation, and revision" of classical Chinese IASTAM News1. 12 (March 1989)

medical texts and illuminates these problems by giving examples. After AKAHORI AKIRA's general survey "The Interpretation of Classical Chinese Medical Texts in Contemporary Japan: Achievements, Approaches, and Problems," ZHENG JINSHENG demonstrates his work of collating and annotating the LÜ Chanyan Bencao, a recently discovered book on medicinal herbs which was written in A.D. 1220 in the Hangzhou area in Southeast China. The extant copy, however, is a Ming dynasty reproduction. The author stresses the importance of pictures and drawings, and he points out the fact that we always have to take regional differences and peculiarities into account. A picture in the LÜ Chanyan Bencao, e.g., called renshen miao, would from the terminological point of view be taken as Panax ginseng. But during the Southern Song Dynasty, this plant was not widely grown in southern China. Thus the author compares the drawing with other pictures in the book and comes to the conclusion that the plant must belong to the carrot family. The contribution by CHANG HSIEN-CHE "The Pen-ts'ao pei-yao: A Modern Interpretation of Its Terminology and Contents" is a thorough study of a work of the bencao (pharmacopoeia) genre. (There is no uniformity in the use of romanization systems for the Chinese language over the book; hence "pen-ts'ao"/"bencao").

Part II of the volume, bearing the title "Translating Chinese Medical Literature into European Languages. General Considerations," consists of the following three articles: "Rectifying the Names: Suggestions for Standardizing Chinese Medical Terminology" by NIGEL WISEMAN and PAUL ZMIEWSKI, "Obstacles to Translating Classical Chinese Medical Texts Into Western Languages" by ELISABETH ROCHAT DE LA VALLEE, and "In Search of a Term Translation Strategy for Chinese Medical Classics" by CONSTANTIN MILSKY. WISEMAN and ZMIEWSKI differentiate technical terms in Chinese medicine into three fundamental categories: "fixed terms," "historical terms" and "conditionally stipulated terms," and they stress the need for standard equivalents, being aware of the fact, however, that, "because the differences of opinion about Chinese medicine are even greater in the West than in the East, gaining general agreement on a standardized terminology will be no easy task." E. ROCHAT DE LA VALLEE gives a report on her reading of the Huangdi Neijing, particularly discussing "coupled expressions" and the "translation of numerology." MILSKY, who seems also to be in favour of a standardized translation terminology, contrasts "symbolic translation" with "explanatory translation."

Part III, "Reflections Associated With the Rendering of Specific Texts," consists of four articles. JÜRGEN KOVACS in his "Linguistic Reflections continued in page 10
Chinese medicine

continued from page 9

on the Translation of Chinese Medical Texts" comes to the conclusion that "classical Chinese medical texts should be recognized and treated as technical language texts." Thus, he concludes, the translator needs technical competence (Fachkompetenz) in the associated discipline. PAUL U. UNSCHULD's "Terminological Problems Encountered and Experiences Gained in the Process of Editing a Commentated Nan-ching Edition" discusses the translation of "generic terms," where he states that "the conceptual interpretation of reality cannot be part of the translation of the generic term employed to designate this reality." Thus he feels "perfectly justified in rendering the Chinese term hsüeh into English as 'blood.'" Then he deals with the translation of "metaphoric terms," and of "ambiguities," and raises the issue of using in certain contexts different target terms for one single source term. PAUL D. BUELL's "The Yin-shan cheng-yao, A Sino-Uighur Dietary: Synopsis, Problems, Prospects" deals with a most interesting instance for the problem of translating technical texts in traditional China, thus pointing out the fact that problems of translating technical texts have been encountered in China already a long time ago. UFE ENGELHARDT in her article "Translating and Interpreting the Fu-ch'i ching-lun: Experiences Gained from Editing a T'ang Dynasty Taoist Medical Treatise" demonstrates her dealing with metaphoric terms and technical terms in her study and translation of this Taoist text of breath technique. The fourth part of the volume contains three contributions by representatives from other disciplines such as Indology, Arabic studies and classic European philology: "Terminological Problems in the Process of Editing and Translating Sanskrit Medical Texts," by FRANCIS ZIMMERMANN, "The Philological Rendering of Arabic Medical Texts into Modern Western Languages," by ERHART KAHE, and "The Corpus Medicorum Graecorum et Latinorum: Problems Related to the Philological Rendering of Medical Texts from Classic European Antiquity," by JUTTA KOLLESCH. Since it has been one of the goals the organizer has aimed at "to examine whether scholars pursuing research on ancient Chinese medical literature may benefit from the experiences of other disciplines" (p. xii), this fourth part is perfectly justified.

To sum up, this volume is not only most useful for the historian of Chinese medicine, but also of general importance for all those who are interested in the problems of translating - especially "Fachtexte" - from Chinese, as well as for the historian of science. The book is well edited, and I could find only very few misprints. Fortunately, Chinese characters are inserted, but an index is missing. One must congratulate the editor for having presented to the scholarly community this collection of articles on a highly important subject which badly needs further scholarly attention.

Helwig SCHMIDT-GLINTZER, Munich

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PAUL U. UNSCHULD

INTRODUCTORY READINGS IN CLASSICAL CHINESE MEDICINE

Sixty Texts with Vocabulary and Translation, a Guide to Research Aids and a General Glossary
474 pp. ISBN 1-55608-040-9 Dfl. 155/£ 47

Introductory Readings in Classical Chinese Medicine offers a selection of sixty texts culled from two thousand years of Chinese medical literature prior to the twentieth century. The texts are presented in ten lessons and give information on the issues that have gained the most attention in the West: general values, structure and function of the organism, concepts of illness and diagnosis, principles of therapy, pharmacoeutics, and needle treatment. Each text is presented in Chinese characters, in transliteration, and in English translation. A vocabulary is provided which builds up as the lessons progress and which emphasises medical terminology, and a final glossary of all the characters introduced in the individual texts allows the student to systematically access the classical Chinese medical literature. The work also contains a detailed guide to currently available dictionaries, biographies and bibliographies, thus making it dispensable as a starting point for the study of the primary sources of Chinese traditional medicine.

Contents

Both books distributed by Redwing Book Company, 44 Linden St., Brookline, MA 02146, in the USA; and Cygnus Book Import. & Publ., Sonnblickstr. 8, 8000 Munich 70, FRG, for Europe and Asia.
Hindu mantras

[André Padoux, Ed.]

Centre National de la Recherche Scientifique
Equipe de recherche n° 294 [A Research Group]
"L'Hindouisme - textes, doctrines, pratiques" [On Hinduism]

Mantras et Diagrammes Rituels dans
L'Hindouisme [in French]

Table Ronde, Paris, 21-22 juin 1984 [Proceedings]

xii-230 pp. ISBN 2-222-03849-9 FF 240.00

Arion ROȘU, "Mantra et yantra dans la médecine et l'alchimie indiennes," JOURNAL ASIATIQUE, Tome 274 (1986), No. 3-4, pp. 203-268


H.P. ALPER, Ed. Understanding Mantras, Albany: SUNY Press, forthcoming, which includes Kenneth G. Zysk, "Mantra in Ayurveda," was not yet available to this reviewer.

For our IASTAM readers, who are mainly interested in Asian medicine, it might be appropriate to begin this review with Taylor's article (medical anthropology), continue with Roșu's (history and philology), and conclude with the more comprehensive volume edited by André Padoux.

The Sanskrit word mantra means "instrument of thought." Classical mantras are short formulae borrowed from the Hindu texts, or even mere monosyllabic invocations (like "om"). They are used in rituals along with other spiritual tools like yantras ("Instruments of restraint"); they are also resorted to in medicine and alchemy.

Paul Michael Taylor [Associate Curator of Asian Ethnology, Dept. of Anthropology, National Museum of Natural History, Smithsonian Institution, Washington DC 20560, USA] studied in the field an anthropological variant of Hindu mantras. He reports the curative use of opaque, esoteric formulae, and he examines the full range of registers of speech in which the special language of these mantras (formulae) is used. Mantras opacity varies from one context to another, from the most 'public' contexts to the most 'private' or 'esoteric'. A continuum from transparent to opaque formulae parallels a continuum of contexts from public to private. The most opaque formulae "serve as a kind of [gold bullion, a relatively liquid asset, a commodity always capable of being traded at a high price"; Taylor has heard reliable accounts of apprentices in magic/medicine who offered to give their mentors the equivalent of over one year's income, to learn just one of the highly-priced formulae (p. 428b). The few examples given here are sufficient to show that these mantras are not remnants of an 'archaic' language, but specialized forms of speech made to sound archaic, esoteric, and opaque. Taylor specifies (p. 427) in which features they differ from classic Hindu mantras. His paper, nevertheless, reveals utilitarian and sociolinguistic aspects of mantras that are often neglected by the philologists.

However, there will be from now on one authoritative and exhaustive essay on Mantras and Yantras in Hindu medicine and alchemy, the sixty dense and erudite pages published in Journal Asiatique [in French] by Professor Arion Roșu [35C, rue Henri Simon, 78000 Versailles, France; A. Rosu is at the CNRS in Paris; see IASTAM NEWSLETTER nos. 5 (August 1984) p. 2, and 11 (Sept. 1988) p. 11]. This survey of the Sanskrit technical literature on Jyurveda and rasāsāstra includes also texts on agriculture and horticulture. Mantras are rare in Jyurveda, but more frequent than geometrical designs or amulets of which there exists about a dozen examples. The medical mantras have no specific form. Some of them composed in metrical stanzas resemble Vedic charms, others at a later period, are in prose with bijas (phonic germs) which come close to Tantric formulae. Combining alchemy with religious practices, Indian iatrochemists used mantras to ensure success in transmutation, and to render elixirs even more potent. This paper was first given at the meeting organized by A. Padoux and it is summarized in the proceedings (reviewed below); but scholars must refer to the complete version for its wealth of citations from the Sanskrit as well as from the grand tradition of Indology (A.F. Rudolf Hoernle, Sylvain Lévi, etc.). Dr Roșu refers only briefly (p. 264 n. 258) to Emile Benveniste's and Georges Dumézil's articles on the Indo-European traditional division of medicine into three methods respectively using knife (surgery), drugs (pharmacy), and incantations; the therapeutical use of mantras and yantras would come under the third category (see IASTAM NEWSLETTER No. 8, June 1986, p. 8). Another possible approach to the question of Mantras in medicine would be to undertake an epistemological analysis of the Ayurvedic concept of daivasvyapaśrayam aṣuḍham, "a therapy based on the recourse to divine entities." Dr Roșu hesitates in his translation of daiva in that respect; he says "divine" (p. 212), but also "religious or magical" (p. 213), or else, "supernatural" (p. 213), and even "spiritual" (in Padoux ed., p. 124). One may well wonder if these renderings are acceptable, but this actually poses the question of the epistemological status of...
From the angle of Asian medical studies, this excellent book can be read at two levels. First, there are specific doctrines and technical words, in the philosophical and religious traditions here surveyed each by the most authoritative European specialist, that parallel Ayurvedic doctrines and words. For example: the body concept in Saundaryalahari (pp. 129-30), or marman as "point of concentration" (pp. 53, 57) in architecture and sculpture normative texts; etc. Then this book addresses the more fundamental question of the relations between the voice and the eye, speech and writing, transaction and inscription, the spirit and the letter, instruments of thought (mantras) and of (physical/ritual) restraint (yantras), thus going beyond the dualism of mind and body. André Padoux, in his Introduction (p. 4) notes that mantras (which are phonetic entities) must often be "visualised" by the initiate in order to be fully enacted. The mix of Speech and Perception is at the core of the Hindu concept of life, knowledge and action. FZ

**Mantras and yantras.**


**Watershed of Diseases in South Asia**

Manohar J. JOSHI

*Surgical Diseases in the Tropics*

Delhi: Macmillan India Ltd., 1982

A close reading of M.J. JOSHI and C.D. DESHPANDE, "The pattern of disease distribution and ecology in Southern Asia with special reference to the Indian sub-continent," published in Nais AKHTAR and A.T.A. LEARMONTH, Eds. Geographical Aspects of Health and Disease in India, New Delhi: Concept, 1985 (reviewed in IASTAM NEWSLETTER No. 11, Sept. 1988, p. 10) led us to this earlier publication, which is fortunately still in print. We want to draw attention to this most valuable book, which contains a series of very striking maps showing the distribution of, for example, filariasis, guinea-worm disease, hydatid disease, yaws, etc., in the Indian subcontinent. The central argument is that there is an ecological watershed separating two well-defined groups of diseases in Southern Asia. The argument is visualised on the map outlined below (see Joshi 1982, p. 473; repr. in Akhtar-Learmonth, p. 64). It should be compared with a map showing the distribution of rainfall in South Asia.
Huangti neiching suwen

Claude LARRE
La Voie du Ciel,
Huangti, l'Empereur Jaune,
disait...
Paris: Desclée de Brouwer, 1987
160 pp. ISBN 2-220-02-671-X FF 89,00

Claude LARRE s.j. et
Elisabeth ROCHAT DE LA VALLEE
(Huang-ti nei-ching) Su-wen
Texte, présentation, traduction
et commentaires
Paris: Institut Ricci
Institut Ricci (Centre d’Etudes Chinoises),
68 rue de la Tour, 75116 Paris, France
Publication in progress, in French; each
of the following fascicles consists of about
50 to 70 pages:
- Plein Ciel (Suwen, chap. 1)
- Assaisonnement les Esprits (Suwen, chap. 2),
2 fascicles
- Vif (Suwen, chap. 3), 3 fasc.
- Par Cing (Suwen, chap. 5), 7 fasc. available
- Tit (Suwen, chap. 8)

This is only a small part of the publications
brought out by the very productive team working
with Father Claude Larre at Institut Ricci,
which is described (with a bibliography) in
La Voie du Ciel [The Celestial Path], pp. 158-
160. Claude Larre, s.j., studied in Beijing and
Shanghai (1947-1952), and then in Japan and
Vietnam; he has been teaching at the Institut
Catholique, and the Director of Institut Ricci
for nearly twenty years. Ms. Elisabeth Rochat de
la Vallée, who teaches Acupuncture and researches
into the classical texts of Chinese medicine,
participated in the IASTAM 1986 Munich symposium,
and her most recent paper, "Obstacles to transla-
ting classical Chinese medical texts into
Western languages," has just appeared in the
volume edited by P.U. Unschuld (See this issue
in page 9).

Claude Larre's book La Voie du Ciel is
constructed around the text, French trans-
lation and commentary of Chapters 1 and 2
of the Huang-ti nei-ching Su-wen. The
calligraphy of the Chinese text matches
the French glosses in elegance. The
translation itself was already published
in three fascicles - "Plein Ciel," and
"Assaisonnement les Esprits" - still available
with Institut Ricci. Students will need to
compare both publications: the commentary is
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more detailed and informative in the fascicles, but
in the book it is elaborated into short philosophical
essays, the wording of which is most careful, lucid
and evocative. Attempts are made at a comprehensive
reading of the classic texts, by examining each
ideogram in detail, and searching for every possible
connection, or correspondence, between particular
ideograms in any specific text. The classic text is
compared to "a temple, constructed to shelter a word"
(Voie du Ciel, p. 16). To some students of Asian
medicine, this approach might appear slightly over-
romanticized: allusions to Baudelaire's Correspond-
dences (p. 18: "La Nature est un temple où de
vivants piliers laissent parfois sortir de confuses
paroles...") or Borgson's "Données immédiates de la
conscience" (p. 33) and "Élan vital" (p. 154). But
this is the kind of inspired philology we need
actually. C. Larre and E. Rochat are concerning
themselves with the most basic questions of semiotics
in Chinese: the relation between processes and the
denominations that "unfold" these processes, the
rhetoric of coupled expressions, the systematic use
of numerology, and so forth. Their approach itself
embodies some of the stylistic devices commonly
found in the classic texts. A striking example is
Claude Larre's enumeration of "the eight aspects" of
the interpretive process: "One should distinguish
eight aspects in the process which we are submitting
ourselves to, in order to render the Celestial Path
perceptible in French as it does unfold itself in
classical Chinese: listening to the text [recited
aloud], writing it [calligraphy is interpretive], per-
cieving, retrieving, understanding, interpreting,
translating, commenting upon" (p. 17). The style of
thought here resembles that of a learned Chinese!
This is a deliberate epistemological choice which
should be pondered over by anthropologists, when
they give in to the current craze for the semiotics
of text and what the American Francophiles use to
call "deconstructionism." One should be faithful
to the text without being pedant: espousing the
mood and rhythm of a specific text, through a
careful process of unfolding.

The rendering of "si qi tiao shen da lun", the
title of Suwen's Chapter 2, in French will give a
more concrete illustration of Larre's and Rochat's
method. This chapter is a detailed exposition of
the Chinese cycle of the four seasons. Incidentally,
let us draw attention to La Voie du Ciel and
Assaisonnement les Esprits as basic sources offering
a wealth of informations on the Chinese cycle of
the seasons (a quartet, to be contrasted with the
Hindu triad). The above-mentioned title reads:
"Fundamental (da) exposition (lun) of the Spirits
(shen) being harmonized (tiao) with the Four (si)
breaths (qi)." The French rendering eventually
retained in Larre's book is the more grammatical:

continued in page 14
R Jeffery
continued from page 2
undermines staff-client relationships by
destroying confidence. The book ends on a sad
note: "No easy conclusions apply to the whole
of the country. In states like Bihar, it is
difficult to find any reason for hope... The
only grounds for hope in the Indian experience
is the possibility that such local social forces
[as the localized party structures] can be
mobilized to control the resources which are
finally arriving at village level... But there
are no signs that such changes are at all imminent
in the 'Hindi heartland' states of Uttar Pradesh,
Madhya Pradesh, Rajasthan, and Bihar in the
foreseeable future" (pp. 298-299).

In the perspective of Asian medical history and
sociology, the most interesting sections of this
excellent book are: Chapter 2 (pp. 42-58) on
indigenous medicine and the State before 1947,
the last part of Chapter 7 (pp. 175-186) which
recounts the fight of Western-style doctors for
their recognition in the West and against the
indigenous practitioners' "quackery," and the
discussion (pp. 252-254) of various estimates of
the numbers of indigenous practitioners.

Estimates depend on assumptions about whom to
include as healers. Official statistics for 1977
have given the following numbers for practitioners
of Indian Systems of Medicine (Table 39, p. 253):
- Qualified 130,000
- Registered 142,000

However, Jeffery argues that, if homoeopathic
practitioners are included, along with all those
engaged in any kind of (full- or part-time)
practice, and all those known locally as having
particular expertise, the number of healers would
be not less than 1.5 to 2 million (p. 254).

Chapter 2 raises the most fundamental questions
about the social context and social impact of the
classical tradition of Ayurvedic medicine: the
position of physicians, the restrictions on who
might study medicine, women's access to elite
medicine, the place of folk healers and midwives,
etc. Jeffery's summary of what we know of all
that is excellent, but we know very little.

Leitner 1882 quoted by him might be supplemented
with, for example, the Adam Reports 1835-38 (J.
Dibona ed., One Teacher One School, New Delhi,
1983) or smaller pieces of information like
Vaughan's Report 1825 quoted in Dharmapal (The
Beautiful Tree, New Delhi, 1983, p. 200). Jeffery
used only external sources, but now, classical
scholars ought to take up the challenge and to
substantiate Jeffery's conclusions by collecting
and translating the textual testimonies that abound
in Sanskrit sources, albeit in cryptic formulations
which need to be deconstructed. FZ
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Suwen
continued from page 13
"Aux Quatre souffles, harmoniser les Esprits" [With
the Four breaths, harmonize the Spirits]. This is
glossed as follows (Voie du Ciel, pp. 102, 106ff.).
A year is the combination of four differentiated
breaths that are slipping towards one another. This
movement is the yin/yang of the Four seasons, and
the four seasons of the yin/yang. Living is maintain-
ing oneself in harmony with the movement of breaths.
The classic text, here, teaches how to keep in phase,
or to draw our individual Spirits back into phase,
with the swinging of life between spring and summer,
between autumn and winter. Larre and Rochat have been
in search of a suitable rendering in French, to
connotate the idea of a human regimen of life in phase
with the cycle of the seasons, and the interplay of
breaths and spirits. They have been tempted into
using archaics, obsolete meanings of old French
words, the etymology of which would convey the right
idea. For example, the above-mentioned title of
Chapter 2 has also been rendered as: "Assaisonneer
les Esprits" [Seasoning the Spirits]. This is a
linguistic play on the etymology of "Assaisonnement"
[seasoning], that is, "to accommodate to the
season," to appropriate one's Spirits to the
seasonal cycle of moods and rhythms.

Larre and Rochat were able to devise many
suggestive renderings thus based on a word's shift
to a suitable conventional meaning. These "cata-
chreses" should not be mistaken for "metaphors."
The careful selection and deliberate use of figures
of speech should not be mistaken for uncontrolled
mysticism or romanticism. Catachreses, and other
figures of speech, are only conventions required
to render the "unfolding" process that characterizes
Chinese texts. FZ

Vandana Shiva
Staying Alive. Women, Ecology
and Survival in India
New Delhi: Kali For Women, 1988
Published in India by KALI FOR WOMEN, 80
Panchsila Park, New Delhi 110 017, and in the U.K.
by ZED BOOKS Ltd., 57 Caledonian Road, London
N1 9BU. ISBN (Indian Hardbound) 81-85107-07-6
xx-224 pp. Rs. 125.00

This book is most refreshing and informative.
Although it is written by a dedicated activist-
Ms. Vandana Shiva has been active in citizens'
mobilization against ecological destruction and in the
Chipko movement - it partly avoids the kind of
biased approximations, and virtuous declamations,
continued in page 15
The International Association for the Study of Traditional Asian Medicine, incorporated in Australia, was founded in 1979. Its objects and purposes are to promote and encourage the study of traditional medicine, including both the classical systems and the local traditions, in all their aspects – historical, philosophical, anthropological, sociological, and scientific.

IASTAM NEWSLETTER is published twice a year, to be circulated to the paid members of the Association. It is published from the Centre d'Etudes de l'Inde et de l'Asie du Sud, at the Ecole des Hautes Etudes en Sciences Sociales, in Paris.

V Shiva

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that are usually to be found on such topics as women and ecology. It is not completely devoid of these defects, however, and the preposterous condemnation of "modern science" (which has no meaning at such a degree of generality) in the first three chapters might well function as a repellent on potential readers. But the second half of the book is well documented and provocative. It comprises Chapters 4 (Women in the forest), 5 (Women in the food chain), and 6 (Women and the vanishing waters). It provides an interesting selection of traditional concepts on forests, soils, seeds, cultivation and violence, and the links between plant genetic diversity and natural water storage in the mixed monsoon forests, that represent as many keys to new perspectives on ecology, sanitation, food, and medicine.

For example, let us draw attention to the list of alternative methods of water treatment given in pp. 215-217. "The Sushruta Samhita lists seven modes of purifying water, among which is the clarification of muddy water by natural coagulents such as the nuts of the nirmali tree (Strychnos potatorum). ... used to clear water by rubbing them on the insides of vessels in which it is stored. Seeds of horne (Pongamia glabra) are similarly used..." (p. 215). The classical teachings are thus put back in their anthropological context. Even if we do not share V. Shiva's enthusiasm for tradition as an alternative to modern science, she provides us with useful information. FZ

IASTAM News1. 12 (March 1989)

annual membership fee of US $ 15

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International Association for the Study of Traditional Asian Medicine

announces the
THIRD INTERNATIONAL CONGRESS ON TRADITIONAL ASIAN MEDICINE
BOMBAY
4th to 7th January 1990

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THIRD ICTAM 1990

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The THIRD INTERNATIONAL CONGRESS ON TRADITIONAL ASIAN MEDICINE (ICTAM III) will be held from January 4th to 7th, 1990 at Hotel Oberoi Towers, BOMBAY, India.

It is sponsored by Bombay University, Gujarat Ayurved University (Jamnagar), and Banaras Hindu University (Varanasi). This official Congress organized by the Indian chapter of IASTAM will constitute a major scientific event. The Second ICTAM, organized in 1984 by Airlangga University at Surabaya, Indonesia, was attended by 495 participants coming from 24 countries. It is the goal of IASTAM to mobilize people from all countries and all disciplines who are interested in the study of Asian medicine, and organize such meetings fostering intellectual exchanges.

The theme of the Third Congress is: "The Pluralistic Character of Traditional Asian Medicine." Topics to be discussed include: Theory and practice of health in antiquity and the middle ages; theory and practice of healthcare in recent centuries 1600 to 1900; professionalization of Asian medicine in the 20th century; Primary Health Care and traditional medicine since World War II; relations between private and public sectors of health care services in current practice; social and cultural research on traditional medicine; biomedical research on the efficacy of traditional therapies; commercial production and sale of traditional medicines; pharmacognostical studies of traditional medical drugs; etc.

Information slip to be mailed to:
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III ICTAM 1990
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International Association for the Study of Traditional Asian Medicine