



Asian Medicine Newsletter

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Conference Announcement:

The Fourth International Congress on Traditional Asian Medicine (ICTAM IV)

The congress will be held in Tokyo, Japan, August 19-21, 1994, under the joint auspices of the IASTAM and the Japan Society for Oriental Medicine (JSOM). ICTAM IV follows the congresses in Canberra (1979), Surabaya (1984), and Bombay (1990).

The general theme of ICTAM IV is *History, Culture, Society, and Medicine*. The scientific sessions will include presentation of papers, symposia and lectures. The official languages of the Congress are English and Japanese.

Persons interested in attending ICTAM IV and who wish to receive further information should write immediately to the Secretary ICTAM IV at the Department of Medical History, School of Medicine, Juntendo University, 2-1-1 Hongo, Bunkyo-ku, Tokyo 113, Japan.

A call for papers and detailed information on the scientific program, registration procedures and accommodation will be available in August, 1993.

In this issue:

Article Review.....	p.3
Profiles.....	p.7
Recent Publications.....	p.6
Review Response.....	p.3
Viewpoints: How appropriate is "Tradition"??.....	p.2

instance) can one write an overview of such a topic which omits to mention the work of Nathan Sivin (1987), or the trio of major contributions by Paul U. Unschuld (1985,1986)? How can one talk about the date and composition of the Huang Di corpus without mentioning David Keegan's pathbreaking UCB thesis (1988)? And why does this essay not mention the work of John Henderson (1984) and Angus Graham (1986,1989) on the cosmological concepts central to its discussions? I leave to one side publications in Chinese and Japanese. To judge from his references, Schiffeler seems to have read nothing on Chinese science or medicine published after 1976. How can such an essay possibly be presented as a research report?

Bibliographical thoroughness does not guarantee that research will produce anything interesting, but it does at least help the beginner to locate the research frontier, so that he or she does not waste time in going over ground worked out decades ago. Schiffeler's writing on Chinese medicine is, like his sources, at least two decades out of date. In his treatment there is still a single a-historical entity hypostasised as 'Chinese Medicine'. This has not apparently been subject to any change worth mentioning since its origins in remote antiquity. Neither does it possess any internal variety, conflict, or regional variation worthy of note. It may be sufficiently characterised by reference to one text from around the beginning of the Christian era, cited in a notoriously inadequate translation. How long is it since anyone wrote about 'Greek Medicine' this simplistically? Surely this is just the type of approach to Asian medical systems attacked by Charles Leslie in his discussion of our use of the word

'traditional' in IASTAM's title (July 1992, issue no.2).

Sinologists may be disturbed by a number of points in Schiffeler's essay. 'Taoism' is still at work, unanalysed and a-historical, 'influenc[ing]' a 'philosophical premise of nature' with whose content no Confucian would have disagreed for the last two thousand years. The cosmic synthesis achieved in the early imperial age at the end of the first millenium B.C. is still projected back into the preceding millennium without justification. A group called the 'Yin-Yang school' exists as a self-conscious philosophical coterie of the third century B.C. rather than as an artifact of the hindsight of Han dynasty bibliographers. Oddly we are told (p. 4, top of column 1) that 'There is no known record of the names of the scholars who established this sect or any dates as to when it was founded', while at the foot of the same column we learn that Schiffeler believes in 'the establishment of the Yin-Yang "school" by the Ji-xia academician Zou Yan' in the third century B.C. The Five Phases wu xing are characterised as 'thermodynamic-like "force fields"'. Readers who have studied both thermodynamics and early Chinese cosmology will, I think, join me in state of deep puzzlement as to what this might mean. Later, we are told, Five Phases theory 'gradually became transformed into that of the "Five Elements"'. But 'Five Elements' is just an outdated translation of wu xing, now more happily replaced by 'Five Phases'. Could Schiffeler be confused by this?

Re-reading the essay, I am struck by how little Schiffeler succeeds in saying about Chinese medicine as opposed to cosmological generalities. What he does say seems to me confused or banal.

Thus Chinese medicine reflects 'a priori definitions of nature through inductive reasoning', a jumble of apparently contradictory characterizations. The Huang Di nei jing su wen is, ignoring the work of Keegan, dated to the third century B.C. as one of 'the oldest Chinese medical treatises'. The important corpus of early medical writings excavated in 1973 from a tomb dated to 168 B.C. remains buried so far as Schiffeler's readers are concerned. Yet several of these texts are obviously ancestral to the Huang Di material current today. We are told that the group postulated by Schiffeler as being behind the su wen texts was established 'to conduct research...into the psycho-physiological correlations of human beings'. The pleasant fancy of a medical research group at work in third century B.C. China fades in the light of what we actually know about the social forms of the production and transmission of medical knowledge in early China. Typically a student's training began by finding a reputable master, under whom he would serve humbly until he was counted fit to be given access to the texts from which the master derived his authority. These would be revealed to him only when he had taken a blood oath not to transmit them to the unworthy. Is it helpful to use words like 'research' in discussing intellectual activity in such a milieu? Apart from these instances of confusing writing, the rest of what Schiffeler has to say about Chinese medicine is so commonplace that one can only wonder (once again) what it is doing in a 'research report'.

A final point of accuracy: Schiffeler is not the first to refer to "Sir" Joseph Needham, despite the fact that Needham has never been given the honour of knighthood which is more or less routine

in Britain for captains of industry, senior civil servants, superannuated Members of Parliament and heads of some large academic institutions. However, his many friends and admirers will no doubt be pleased to hear that in his 92nd year, he has recently been created a Companion of Honour by Her Majesty the Queen, and is thus now a member of a far more elite group in the British status system.

-Christopher Cullen
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- Graham, Angus C.
1986 Yin-Yang and the Nature of Correlative Thinking. Singapore.
1989 Disputers of the Tao, La Salle, Illinois.
- Henderson, John B.
1984 The Development and Decline of Chinese Cosmology, New York.
- Keegan, David J.
1988 "The 'Huang-ti Nei-ching': The structure of the compilation; significance of the structure."
Ph.D. Dissertation, University of California, Berkeley.
- Sivin, Nathan
1987 Traditional Medicine in Contemporary China. Michigan.
- Unschuld, Paul U.
1985 Medicine in China: A history of ideas. Berkeley.
1986 Medicine in China: A history of pharmaceuticals. Berkeley.
1986 Nan-ching: The classic of difficult issues. Berkeley.

Recent Publications:

The below publications are those brought to the attention of the IASTAM editors. Persons interested in reviewing any of these for future IASTAM newsletters should contact Charles Nuckolls, Editor. Also, please direct to him announcements of future publications for advertisement in this column.

Anthropological Approaches to the Study of Ethnomedicine. 1992. Mark Nichter, ed. Amsterdam: Gordon and Breach Science Publishers.

"Ten essays and a critical commentary highlighting major themes and suggesting avenues of further investigation comprise this collection..... Individual essays discuss the importance of systematically collecting data on measures of healing efficacy, the prevalence of folk illnesses, and the distribution of knowledge about illness attributes; the negotiation and instantiation of illness identities; the power of discourse to produce as well as cure affliction; metamedical discourse as moral commentary; linkages between medico-religious institutions, models of self, power, and the state and the relationship between ethnomedical research and anthropological studies of the body, gender relations, self and 'Other.' " (Cited from Nichter's Introduction, p. ix).

Siblings in South Asia. 1993. Charles W. Nuckolls, ed. New York: Guilford Press.

"The degree to which we focus on sibling relations, and the manner in which we do so, are issues determined largely

by context. In this volume, there is considerable diversity in the contexts we deem most relevant: marriage organization, patterns of socialization, economic maximization, social strategies and conflict resolution, and ethnopsychology. Theoretical positions and methodological strategies also differ, from purely structural accounts to fine-grained psychocultural case studies. Common to all, however, is the finding that siblings are important. (Cited from Nuckolls' introduction, p. 33).

Herbal Medicine in Paediatrics. Translation of A Thai Book of Genesis. 1989. Jean Mulholland. Canberra: Australian National University.

"A complete translation of the Thai text on children's diseases, *Khamphree prathom chidaa*, discussed in Medicine, Magic and Evil Spirits. This work was compiled in 1871, from earlier texts of unknown origin, by a committee of court doctors appointed by King Chulalongkorn. It tells the story of the origin of the world, the origin of man, conception, pregnancy, birth and the diseases of children. The translation gives the scientific names of more than 800 animal, mineral and herbal substances mentioned in the hundreds of recipes for medicine included in the text." (Cited from the publisher's book announcement and order form.)

Imperialism and Medicine in Bengal: A Socio-Historical Perspective. 1991. Poonam Bala. New Delhi: Sage Publishers.

"The book discusses the impact of

imperial policies on the medical profession in the nineteenth and early twentieth-century Bengal. It is a study of the interaction between Ayurvedic and Unani (indigenous medical systems in India) and Western systems of medicine, and the colonial imperatives during the period 1800 to 1947. * (Cited from personal communication from Dr. Bala.)

Paths to Asian Medical Knowledge. 1992. Charles Leslie and Allan Young, eds. Berkeley: University of California Press.

"The Wenner-Gren conference on which the present volume is based brought together scholars whose research spans a wide range of topics and regional cultures, but these essays have been selected to focus on a particular set of interests: the sources and modalities of medical knowledge....The shared perspective throughout the book is epistemological. Authors ask: How do patients and practitioners know what they know? What are their various rules of evidence, what kinds and categories of information do they find persuasive, and under what circumstances? How do they know when a medical judgement is wrong or correct? What do "wrong" and "correct" mean to patients, to village practitioners, and to experts trained in the great tradition? What sorts of inductive logic and analogy are at work here? Under what circumstances are these people inclined to accept or ignore novel medical ideals and practices?" (Cited from Leslie and Young's introduction, pp.13-14.)

Profiles

IASTAM is unique in its diverse membership of persons interested in Asian medicine, broadly conceived. Francis Zimmerman noted in his recent Letter from the President (7. December 1992) that the heterogeneity of IASTAM membership is, if a handicap to our scholarly credibility, a great asset in creating a dialogue among the persons engaging in Asian medicine and health care. Indeed, with the recent trend in academics towards examinations of the meta-dialogues, the scholarly scene should recognize the immense potential of interdisciplinary cooperation which lurks, as yet untapped in our organization.

This column highlights our diversity and is a step towards facilitating international and interdisciplinary cooperation.

Dr. Syed Rafatullah is a researcher in the medicinal, aromatic and poisonous plants division of the College of Pharmacy in Saudi Arabia. He is working on a project evaluating the efficacy of Saudi folk medicines. Dr. Rafatullah has particular interest in reading publications on medicinal plants and traditional medicines.

M. Cameron Hay is a Ph.D. candidate in anthropology at Emory University. Her dissertation fieldwork among the Sasak of Indonesia will examine the articulation of ethnomedicine with understandings of personhood and vulnerability in the sphere of popular health care.

C.F. Vreede, Consultant in Transcultural Rehabilitation, is interested in references or other information on traditional concepts and practices regarding disability, handicap, and/or rehabilitation in the Asian/South Asian literature and regions.

Review Response:

Book reviews frequently have inordinate influence on the general reception of a text, rather than being one reader's critical reading. With this in mind, it is important for the writer to be given the opportunity to respond to those criticisms and also to have the last word regarding his/her text. This column is dedicated to offering writers that opportunity.

Carol Laderman's response to Cameron Hay's review (IASTAM Newsletter, July 1992) of Taming the Winds of Desire (University of California Press, 1991).

I would like to thank Cameron Hay for her enthusiastic review of my book, Taming the Winds of Desire. There are, however, a few misunderstandings concerning the content of this review that I would like to clarify:

1. According to the Malay theory of the Inner Winds (*angin*), strong personalities are only in danger of becoming ill if they cannot express themselves. If their social circumstances allow them to express these drives, they stand a good chance of being leading, powerful, and healthy members of their communities.

2. Presenting the seances in their entirety, rather than choosing excerpts to illustrate pre-chosen points, allows for future analyses. This is likely to be the sole opportunity to record these seances, since they have been largely curtailed due to religious objections. No other reviewer has found them difficult to comprehend, and, in fact, I have been informed that a reviewer's anthropology class acted out one of the performances, complete with music, and found my stage directions and explanatory footnotes adequate for the

students' comprehension of the proceedings.

3. The ceremonies presented in this volume are not transcriptions. They are my translations into English of the original east coast dialect Malay, which I recorded during performances. Malay speakers can compare these translations with my transcriptions published in Kuala Lumpur (*Main Peteri: Malay Shamanism*. A monograph of the Federated Museums Journal, volume 31, 1991).

-Carol Laderman

Article Review: Keeping the score on Chinese Medicine

As a member of the Council of IASTAM I was pleased to see the latest Newsletter, all the more so because its generous coverage of Chinese issues reflects my own interest. A growing number of young researchers is now following the lead of a few of their elders in raising Western scholarship on Chinese medicine to new standards of professionalism and originality, and IASTAM should be doing all it can to help.

Newsletter no. 2 (new series) contains two major pieces relating to Chinese medicine. One is Catherine Despeux's review of Nathan Sivin's Traditional Medicine in Contemporary China, in which a careful scholar describes and evaluates an important contribution by a fellow professional. The other is the 'Research Report' entitled "Tenets of Traditional Chinese Medicine" by John Wm. Schiffeler. In my view this article is open to serious criticisms.

Schiffeler's writing is fluent and thoughtful, but his essay is ill informed on the subject which it reports. How (for

Viewpoints: How appropriate is "tradition"?

In the July 1992 issue of the Asian Medicine Newsletter, Charles Leslie proposed that the word "traditional" be dropped from the title of the organization because it is frequently misunderstood by outsiders who therefore do not interact with IASTASM. In response to this issue, we have received the following view:

"Tradition in itself is a venerable word referring culturally to ancient wisdom handed down from generation to generation. One admires hand-made traditional pottery, carpets or jewelry for their rarity. Traditions as such are a buttress to culture, and cultures must be safeguarded if better values of life must prevail. But unfortunately even in common parlance the word 'tradition' often conveys the idea of backwardness. Its application to a set of old medical systems seems somehow to brand them as something which is not readily amenable to change and advancement – something static and unscientific which is shy of a changing world. Such a thinking in terms of a medical system is apparently degrading and incorrect because any system of treatment with a bona fide corpus of theory, and enforced by current practice in our own time and day, must take due cognizance of the real world around. Medicine is a living science for all intents and purposes, and the set of medical systems bracketed as 'traditional' meaning backward, static or unscientific must be liberated from this misnomer."

-Hakim Mohammed Said

INVITATION TO SUBMIT

**Articles, research reports,
essays, book reviews,
commentaries,
recent publications,
and news items**

may all be submitted to
IASTAM for publication in this
newsletter. Submissions should be
directed to Charles Nuckolls, Editor.

A Reminder: All members of
IASTAM are required to pay the \$20.00
annual dues to their regional chapters.

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