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HUMAN MOBILITY AND BOOKS: MODES OF CIRCULATION OF MEDICAL IDEAS AND DOCTRINES IN THE FAR SOUTH OF CHINA, 18TH AND 19TH CENTURIES

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> 余中年 . . . , 浮湘之粵，渡彭蠡以歸，凡洞庭南北，象郡西東，及滇閩邊界，足跡幾遍，計自戊寅迄甲午十七年，往來蠻煙瘴雨中，無日不臨深履薄 . . . 壬午春，道出南寧，於旅肆中得鈔本治蠱新方一書，其言半雜融縣土音 . . . 乃取其書 . . . 訂其僞舛，郵寄同人，廣為流布。
>
> In the middle of my life . . . I used to travel along the Xiang River to reach Yue. I used to cross Pengli Lake to return. I used to cross the Dongting Lake from south to north, the Xiangjun area from west to east, up to the borders of Yunnan and of Fujian. From 1818 to 1834, during 17 years, I did this journey several times. I used to come and go among the Barbarians and the miasmatic rains, being every day in great danger. . . . In the spring of 1822, as I was in Nanning, I found in a hostel the manuscript *New Formulas for Curing Poisons*, its language was mixed with local pronunciation of Rongxian . . . thus took it with me . . . corrected its mistakes and sent it to a friend of mine so that he circulated it widely.
>
> Miao Fuzhao 缪福照, 1835.[1]

This chapter examines the question of the modes of circulation of medical ideas and doctrines in late imperial China by focusing on the community of medical experts who lived and worked in the administrative unit called Liangguang that, during the Qing dynasty (1644-1911), included the provinces of Guangxi and Guangdong. As the short narrative by Miao Fuzhao recalls, these provinces, together with Yunnan and Fujian, were on the far southern fringes of the empire and were often considered as geographically

[1] Lu Shunde 路顺德 and Miao Fuzhao 缪福照, *Zhigu xinfang* 治蛊新方, 1823, *Congshu jicheng chubian* 叢書集成初編 (Shanghai: Shangwu yinshuguan, 1935), vol. 27, p. 1. The Xiang River in eastern Hunan flows into Dongting Lake; the river connected Guangzhou to the Yangzi River. Pengli Lake is another name for Poyang Lake in Jiangxi. Xiangjun is an ancient name for the area that includes southern Guangdong, Guangxi and northern Annam.

and culturally peripheral.[2] These two provinces, however, were not peripheral to the same extent and offered sharp contrasts with regard to their geographical configuration and their social physiognomy—Guangdong was far more urbanized and more closely connected to the rest of the empire than the province of Guangxi, which was surrounded by mountains, rivers and other natural barriers. Nevertheless they were both geographically remote from the political center, where, as often in history, economic and cultural forces were also concentrated.[3] During the Qing dynasty, the political center was located in the capital, Beijing, while Jiangnan, a macro-region which spread over the southern parts of Jiangsu and Anhui provinces and the northern parts of Jiangxi and Zhejiang provinces, was a dominant economic and cultural center.[4]

What medical experts living in these southern parts of the Qing Empire knew about medicine, to what type of cultural resources they had access and how they acquired them are the main questions discussed in this contribution. To provide at least some answers to these questions, I focus on the particular case of He Mengyao 何夢瑤 (1693-1764), who was an outstanding figure of eighteenth-century Guangdong. But, convinced that the history of medicine cannot be reduced to a historiography of great men or heroes, I also take care to examine to what extent this particular individual was paradigmatic of the broader population involved in medicine in the area. This has led me to examine the figure of He Mengyao while at the same time considering his less famous contemporaries.

I. "Medical Experts" of the Far South through the Lens of Biographies and Extant Medical Texts

Different types of written sources can shed light on the issue of the extent and the modalities of the circulation of medical knowledge in late imperial China, including biographies in local gazetteers of people who

[2] On the consciousness of cultural periphery in these provinces, see William T. Rowe, *Saving the World: Chen Hongmou and Elite Consciousness in Eighteenth-Century China* (Stanford: Stanford University Press, 2001); and Steven Miles, *The Sea of Learning: Mobility and Identity in Nineteenth-Century Guangzhou* (Cambridge, Mass.: Harvard University Asia Center, 2006), esp. pp. 1-2.

[3] On these contrasts, see William Skinner, *The City in Late Imperial Times* (Stanford: Stanford University Press, 1977), esp. pp. 211-272; and Robert B. Marks, "Rice Prices, Food Supply, and Market Structure in Eighteenth-Century South China," *Late Imperial China* 12, no. 2 (1991), pp. 64-116.

[4] On the cultural centrality of Jiangnan in late imperial times, see Benjamin Elman, *From Philosophy to Philology* (Los Angeles: University of California, 1984, rev. ed. 2001), esp. pp. 178-208.

were locally famous for their medical or healing talent as well as the medical writings these actors themselves sometimes produced.[5] These two types of sources, though important in number and in content, do not give us access to all the healers in these localities, to their doctrines or healing practices. First, many healing actors are what we could call, in the words of Steven Shapin, invisible actors.[6] Shamans, Daoist or Buddhist priests, and women who, very likely, played the most important role in the broad healing landscape were all invisible actors. They never quite merited individual biographies in the local gazetteers and, hence, are invisible today. Among the 272 biographies that I have analyzed and that celebrate the medical genius of local people, the fact that all concern men is illustrative. In spite of their notable role of assistance in childbirth, women were never felt to deserve an official biography for work that was, however, considered medical work and discussed at length in nearly all the medical books of the period.[7] Second, these official biographies were written not so much to convey the distinctive character of their subjects as to provide a series of models for future generations. As a matter of fact, such biographies prefer to emphasize medical experts' talents, genius, moral qualities, and to report edifying medical anecdotes rather than providing a detailed account of their subjects' medical training and thought.[8] Out of the 272 biographies, only 27 provide information on an expert's intellectual background. Unsatisfying though it is, this rare and indirect information is particularly welcome for shedding light on the local cultural landscape when the actors did not leave written documents.

Medical writings by local medical experts are a more direct source for clues to the local medical culture. But approaching the cultural landscape of a society through the surviving texts introduces other biases. Just as in our present society, not all medical experts recorded their own experiences and representations in texts. In my sample of 272 people involved in medicine during the Qing dynasty in these two provinces, 185 wrote medical texts.[9]

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[5] For a good presentation and interpretation of this type of official source, see Pierre-Étienne Will, *Chinese Local Gazetteers: An Historical and Practical Introduction* (Paris: Centre de Recherche et de Documentation sur la Chine Contemporaine, 1992).

[6] Steven Shapin, "The Invisible Technician," *American Scientist* 77 (1989), pp. 554-563.

[7] Wu, Yi-Li, *Reproducing Women: Medicine, Metaphor, and Childbirth in Late Imperial China* (Berkeley: University of California Press, 2010).

[8] On the genre and function of these biographies and on biographies in general, see Florence Bretelle-Establet, "Chinese Biographies of Experts in Medicine: What Uses Can We Make of Them?" *East Asian Science, Technology, and Society* 3, no. 4 (2009), pp. 421-451.

[9] Details on this corpus of biographies are in Florence Bretelle-Establet, *La Santé en Chine du Sud, 1898-1928* (Paris: CNRS, Asie Orientale, 2002) and Bretelle-Establet, "Chinese Biographies."

Furthermore, when medical experts deemed it important to record their medical knowledge and experiences in texts, most of the time they did not succeed in handing them down to posterity. Indeed, when we compare the list of the texts written in these localities, thanks to local bibliographies in gazetteers (225 in total, 160 from Guangdong, 65 from Guangxi) to the list of the texts that are still extant in academic libraries (32 in all, 29 from Guangdong but only 3 from Guangxi),[10] we must first admit that the major part of the medical writings produced in the last three centuries in these provinces has been lost.[11] Further, when we compare the social background of the authors whose writings have been preserved against that of the authors whose writings have been lost, we can state that this loss of texts was not only a matter of chance (**Fig. 1.1**). The loss of texts was greater or lesser depending on whether the authors lived in urban or rural areas and whether they managed to pass through the rigorous selection process of official examinations.

The medical writings that have survived and bear testimony to the medical culture of these provinces are biased towards the urban, coastal and scholarly writings. This is hardly unexpected. However, while the corpus of extant texts does not provide a representative sample of the medical literature that was produced in each corner of the far south and in each social circle, it still includes texts that were written by men belonging to different social and geographical settings (see the first columns of Tables 1.2 and 1.3

[10] Florence Bretelle-Establet, "Is the Lower Yangzi River Region the Only Seat of Medical Knowledge in Late Imperial China? A Glance at the Far South Region and at its Medical Documents," in Florence Bretelle-Establet, ed., *Looking at it from Asia: The Processes that Shaped the Sources of the History of Science* (Dordrecht: Springer, 2010), pp. 331-369. It is very likely that in the future we will discover more texts, since the Xue Qinglu's catalogue of medical books in Chinese libraries which lists the medical books available in 113 major libraries in China is far from error-free. See Xue Qinglu 薛清录, *Quanguo Zhongyi tushu lianhe mulu* 全國中醫圖書聯合目錄 (Beijing: Zhongyi guji chubanshe, 1991). A closer look at the Guangdong libraries' holdings, for instance, shows that some books written in Guangdong and held in one of the Guangdong libraries had not been included in this catalogue. See Lu Yinlan 盧銀蘭, "'Quanguo Zhongyi tushu lianhe mulu' zhi Qingdai Yue ban yishu buyi" 《全國中醫圖書聯合目錄》之清代粵版醫書補遺, *Guangzhou Zhongyiyao daxue xuebao* 廣州中醫藥大學學報, 25, no. 4 (2008), pp. 368-370.

[11] The loss of ancient manuscripts is a well-known fact. See Donald Harper, "The Textual Form of Knowledge: Occult Miscellanies in Ancient and Medieval Chinese Manuscripts, Fourth Century B.C. to Tenth Century A.D.," in Florence Bretelle-Establet, ed., *Looking at it from Asia*, pp. 37-80. Manuscripts and books produced in more recent times did not enjoy a much better lifespan. Lucille Chia recently reported that less than a quarter of the medical books written during the Yuan dynasty have survived; Lucille Chia, "Among the Missing: Lost Books of Late Imperial China," lecture, Paris, École Pratique des Hautes Études, 27 May 2009.

below p. 54-59). These extant texts thus give us the opportunity to encounter some twenty local medical experts, coming from different social strata, from the top of the elite, like He Mengyao, who was a "presented scholar" (*jinshi* 進士), the highest degree taken in the metropolitan examinations, to the lower circles of local medical experts, like Wang Xueyuan 王學淵 (act. 1838), who had no degree and whose medical text received no preface from a prestigious scholar. These extant texts further allow us to compare medical authors who worked, sometimes side-by-side in the Pearl River Delta's urban areas or in the villages in the north of Guangxi where, for instance, a doctor might be obliged to ask his patients to go to the prefectural capital to buy the drugs needed for his prescription.[12] And, as the short excerpt placed at the beginning of this chapter recalls, it also allows us to compare the medical culture in areas inhabited by Han Chinese with those populated by tribal peoples.

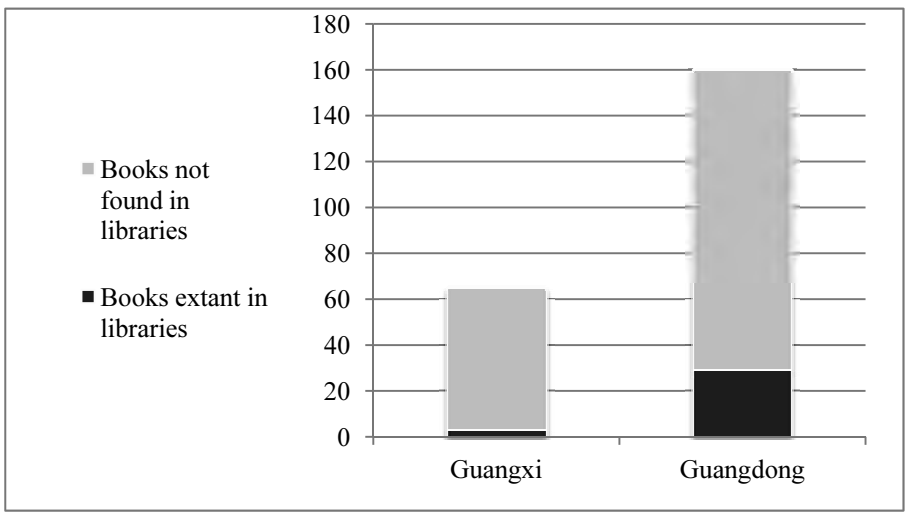


Figure 1.1 Preservation of Qing Medical Texts Written in Guangxi and Guangdong.

The surviving texts—allegedly the direct voices of certain authors—as well as the indirect testimony provided by biographies which allow us to grasp some elements about the medical ideas of those who have not left any traces of their own representations in written texts, will be our sources in exploring the medical culture of these medical authors of the far south.[13]

[12] Lu and Miao, *New Formulas for Curing Poisons*, p. 10.

[13] We cannot be totally sure of the real authorship of medical books in late imperial China, since medical literature in late imperial China was often plagiarized and/or published under different titles. An entire book could be copied verbatim with minimal changes (e.g., to dates

They highlight the ways medical knowledge was acquired at a time when no laws regulated the profession and when medical training took place in private contexts of learning. As it happens, the first feature that emerges from these sources is the fact that, during the Qing dynasty, people in Guangxi and Guangdong who practiced medicine and in some cases wrote about it were not governed by a national medical curriculum. Central imperial medical institutions of some sort existed, however, from the sixth century to the first years of the twentieth century, and they dealt with medical matters, medical education and publishing.[14] But, as historians have already stated, at no time did they have the means or the goal to educate, control or sanction all those involved in medicine, who were not organized as a profession but included a wide range of social actors, who, for convenience, I call "medical experts."[15] Only two biographies mention a relationship with the Imperial Academy of Medicine (Taiyiyuan 太醫院).[16] Biographies and extant medi-

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and names) that veiled the identity of the original author. See Barbara Volkmar, "The Physician and the Plagiarist: The Fate of the Legacy of Wan Quan," *The East Asian Library Journal* 9, no. 1 (2000), pp. 1-77.

[14] The most comprehensive study of these institutions is Gong Chun 龔春, *Zhongguo lidai weisheng zuzhi ji yixue jiaoyu* 中國歷代衛生組織及醫學教育, Beijing: Weisheng bu kejiao, 1983). For a particular focus on this institution during the Song dynasty (960-1279), see also Asaf Goldschmidt, *The Evolution of Chinese Medicine: Song Dynasty, 960-1200* (Needham Research Institute Series, London: Routledge, 2009); and TJ Hinrichs, "The Medical Transforming of Governance and Southern Customs in Song Dynasty China (960-1279 C.E.)," Ph.D. diss., Harvard University, 2003. For the Yuan dynasty (1271-1367), see Reiko Shinno, "Promoting Medicine in the Yuan Dynasty (1206-1368): An Aspect of Mongol Rule in China," Ph.D. diss., Stanford University, 2002 and Reiko Shinno, *The Politics of Chinese Medicine under Mongol Rule* (London: Routledge, 2016). And for the Qing (1644-1911), see Che-chia Chang, "The Therapeutic Tug of War: The Imperial Physician-Patient Relationship in the Era of Empress Dowager Cixi (1874-1908)," Ph.D. diss., University of Pennsylvania, 1998.

[15] On the absence of administrative norms regulating the medical practice in late imperial China, see Chao Yuan-ling, *Medicine and Society in Late Imperial China: A Study of Physicians in Suzhou, 1600-1850* (Asian Thought and Culture 61, New York: Peter Lang, 2009); Bretelle-Establet, *La Santé en Chine du Sud*; and Angela Ki Che Leung, "Organized Medicine in Ming-Qing China: State and Private Medical Institutions in the Lower Yangzi Region," *Late Imperial China* 8, no. 1 (1987), pp. 134-166. The way scholars named medical experts in biographies, that is, by using a verbal locution—"good at medicine" (*shan yixue* 善醫學), "excellent in Qi[bo] and Huang[di]" (*jing Qi Huang* 精歧黃), or "expert in medical techniques" (*tong yishu* 通醫術)—rather than using a substantive noun, is, I think, symptomatic of the vagueness of the medical experts' identity.

[16] Yi Liangshan 易良山 (Qing, dates unknown), from Dianbai 電白, Guangdong, would have met Zhai Yuhua 翟玉華 (1587-1671) working in the Imperial Academy of Medicine. See He Shixi 何時希, *Zhongguo lidai yijia zhuanlu* 中國歷代醫家轉錄 (3 vols., Beijing: Renmin weisheng chubanshe, 1991), vol. 2, p. 32. Qu Zunde 屈遵德 (*juren* 1786) held the

cal writings further show that, during the Qing dynasty, medical apprenticeship took place in private contexts of learning with masters, with a father or uncle, or with books, and often with a mix of masters, family members and medical books.[17]

II. Citations as a First Clue about the Medical Resources Available to He Mengyao and his Contemporaries

One way to sketch medical culture and give a first glimpse of the different doctrines that were current in Guangxi and Guangdong is to track down quotations and citations in local books. An investigation of the 32 medical books written in the far south that have come down to us shows that, with the exception of a few authors who did not feel it necessary to mention or cite anyone in their writings, the major part of the medical authors used quotations and citations. Undoubtedly, as researchers in discourse analysis and in sociology of science have shown, the act of quoting or citing meets different functions and is a complicated affair.[18] The question of the uses, functions and modalities of quotations in these particular medical texts is beyond the scope of this chapter. Here, we are simply considering quotations as a very preliminary means to get clues to the medical resources that were known and overtly refered to by these medical authors of China's far south.

Let us first focus on He Mengyao, a native of Nanhai 南海, a district close to Guangzhou, who was born in 1693. He devoted his early years in Guangzhou to studying for the imperial examinations. He was trained by Hui Shiqi 惠士奇 (1671-1741), a famous scholar who had notably specialized in Han studies and who served as Guangdong educational commissioner from 1720 to 1726. In 1722, He Mengyao was received among the stipend students (*linsheng* 廩生) at the district-level examinations in Huizhou 惠州. While he did not succeed at the special examinations held in 1723, he continued to work hard under the direction of Hui Shiqi and was finally sent to Beijing in 1729, where he succeeded at the metropolitan ex-

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post of Palace Physician (Taiyi 太醫); see Guo Aichun 郭靄春, *Zhongguo fensheng yiji kao* 中國分省醫籍考 (Tianjin: Kexue jishu chubanshe, 1987), p. 2027.

[17] Florence Bretelle-Establet, "Learning and Teaching Medicine in Late Imperial China," in Alain Bernard and Christine Proust, eds., *Scientific Sources and Teaching Contexts throughout History: Problems and Perspectives* (Boston Studies in the Philosophy of Science, New York: Springer, 2014), pp. 273-301.

[18] For an overview of the field, see esp. Harriet Zuckerman, "Citation Analysis and the Complex Problem of Intellectual Influence," *Scientometrics* 12, no. 5-6 (1987), pp. 329-338; and see Hervé Rostaing, *La Bibliométrie et ses techniques* (Toulouse: Editions Sciences de la Société, 1996).

aminations in 1730 at the age of thirty-eight. From then until he was fifty-eight years old, He Mengyao performed different functions in the civil service. He held official posts in the provinces of Guangxi and Liaoning. For reasons that are unclear, at the age of fifty-eight he retired from the civil service, returned to Nanhai and devoted himself to practicing medicine. As a brilliant scholar and polymath as well as the author of more than twenty treatises on mathematics, medicine, poetry, music and local history, he was selected by the Governor of Guangdong to preside over the most important academies of the province, at that time: the Duanxi 端溪 Academy, the Yuexiu 粵秀 Academy (from 1750 to 1752) and the Yuehua 越華 Academy. He died in 1764 in Nanhai.[19]

He Mengyao was thus a prolific writer, and a number of his medical texts were published during his lifetime: the *Stepping-Stone for Medicine (Yibian* 醫碥) and the *Essentials of the Three Disciplines* (*Sanke jiyao* 三科輯要) were printed in 1751 and 1757, respectively. He would be the author of *What People Need to Know from the Lezhi Hall* (*Lezhitang renzi xuzhi* 樂只堂人子須知), which was completed by a Buddhist monk and published in 1872, and of the *Complete Book of Formulas* (*Yifang quanshu* 醫方全書), which, according to the *Catalogue of Medical Books in Chinese Libraries*, was written in 1751 but published for the first time in 1918.[20]

The analysis of the quotations found in the two books that were published during his lifetime offers some clues as to what type of cultural resources were available and relevant to He Mengyao. As shown in Table 1.1, He Mengyao first refers to medical texts as well as to the Classics: the *Book of Rites*, the *Book of Changes*, the *Documents* and the *Mengzi*. Certainly, quoting the Classics was a way to present oneself as a learned doctor who had not only mastered the medical culture, a minor discipline, but had also mastered the Confucian culture necessary to the highest functions and status.[21] The systematic identification of He Mengyao's medical quotations

[19] On He Mengyao's biography, see Guo, *Zhongguo fensheng yiji kao*, pp. 1933-1934 and 1957-1958; and on his intellectual affiliation, see Miles, *The Sea of Learning*, pp. 26, 77-78, 151.

[20] He Mengyao, *Yibian*, 1751 (Beijing: Renmin weisheng chubanshe, 1994); He Mengyao, *Sanke jiyao*, 1757 (Guangzhou: Shijieyuan, 1895); He Mengyao and Huchan 互禅, *Lezhitang renzi xu zhi*, 1872 (Foshan: Huawenju, 1885); and He Mengyao, *Yifang quanshu*, 1751 (?) (Guangzhou: Liangguang tushuju, 1918). See also Xue Qinglu, *Catalogue of Medical Books in Chinese Libraries*.

[21] On the status of medicine, see Robert Hymes, "Not Quite Gentlemen? Doctors in Sung and Yuan," *Chinese Science* 8 (1987), pp. 9-76; Hinrichs, "The Medical Transforming of Governance;" and Pingyi Chu, "Narrating a History for China's Medical Past: Christianity, Natural Philosophy and History in Wang Honghan's *Gujin yishi* 古今醫史," *East Asian Science, Technology, and Medicine* 28 (2008), pp. 14-35.

then allows us to observe that while he draws on the most ancient and classical medical texts, he also largely draws on more recent medical authors and texts.

Table 1.1 Quotations in He Mengyao's Medical Works Published During His Lifetime.

Titles analysed	**Before the Song 500BCE-960CE**	**Song, Jin, Yuan 960-1367**	**Ming, Qing 1367-1911**	**Unidentified**[22]
Stepping-Stone for Medicine (*Yibian* 醫碥) 1751 and *The Essentials of the Three Disciplines* (*San ke ji yao* 三科輯要) 1757	*Lunyu* 論語; *Yijing* 易經; *Liji* 禮記; *Xuanzhulu* 玄珠錄; *Hongfan* 鴻範; *Laozi* 老子; *Huangdi neijing* 黃帝內經; *Nanjing* 難經; Wang Shuhe 王叔和; Zhang Zhongjing 張仲景; Chao Yuanfang 巢元方; Sun Simiao 遜思邈	Li Gao 李杲; Wang Pei 王裴; *Taiping sheng huifang* 太平聖惠方; Cheng Wuji 成無己; Chen Wuze 陳無澤; Liu Hejian 劉河間; Zhang Zihe 張子和; Yang Renzhai 楊仁齋; Seng Jihong 僧繼洪 (释繼洪); Wang Haicang 王海藏; Luo Qianfu 罗謙甫; Zhu Danxi 朱丹溪	Liu Zonghou 劉宗厚; Dai Yuanli 戴原禮; Zhu Quan 朱權; Wang Lun 王綸; Xue Ji 薛己; Li Shizhen 李時珍; *Dongyi baojian* (*Dongui Bogam*)東醫寶鑒; Wang Kentang 王肯堂; Sun Yikui 孙一奎; Zhang Jingyue 張景岳; Yu Jiayan 喻嘉言; Gao Gufeng 高鼓峰; Jing Dongyang 景東暘; Ji zhai jushi 亟齋居 士 (*Dasheng bian* 達生編); Xu Zongshuang 徐宗爽; Wu Qian 吴謙; Zhao Xianke 趙獻可; He Mengyao 何夢瑤	*Zhenjing* 鍼經; *Bencao* 本草

He Mengyao cites the core of the ancient Chinese medical doctrines, written around the Han dynasty (206 B.C.-A.D. 220), and two authors of the Sui and Tang dynasties, Chao Yuanfang 巢元方 (c. 550-630) and Sun Simiao 孫思邈 (c. 581-682), whose texts were later included in the medical curriculum of the Imperial Academy of Medicine. He also refers to books of formulas commissioned by Song emperors and to what came to be desig-

[22] In quotations, abbreviations of titles or personal names make many identifications uncertain. Furthermore, some titles are so common in Chinese medical literature that it is difficult to know to which particular book the quotation refers. Finally, some medical experts or authors quoted here were probably not famous enough to have their names recorded in any biographies or books currently located in a library collection, and today we no longer have information on them.

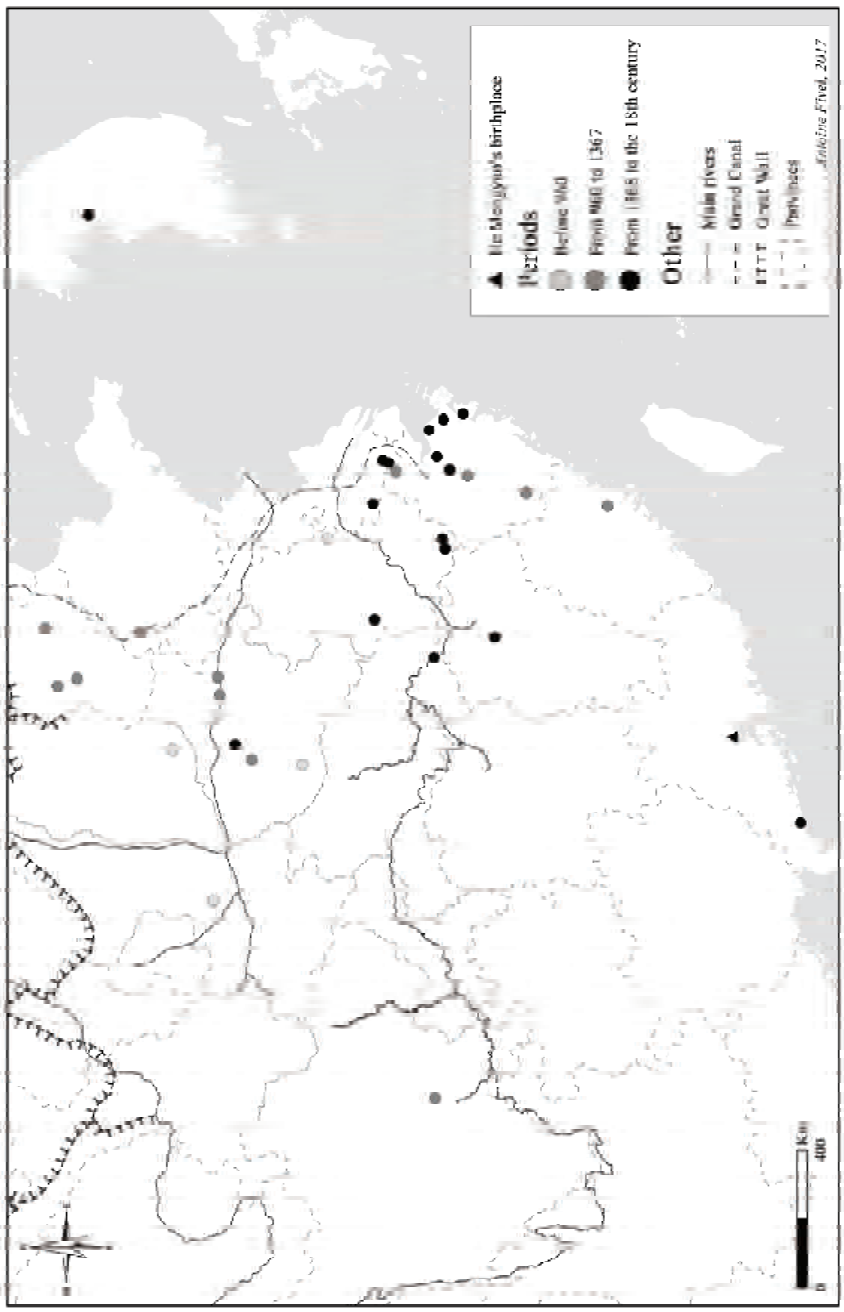
nated as the "great masters" (*da jia* 大家) of the Song, Jin and Yuan dynasties (12th-14th centuries).[23] In addition to these references, canonised by the imperial state by way of the imperial medical curriculum and medical compilations, He Mengyao quotes ten authors of the Ming dynasty (1368-1644) and seven of the early and mid-Qing, some being his close contemporaries, like Wu Qian 吳謙 (1689-1748), the imperial doctor and chief editor of the *Imperially Commissioned Golden Mirror of the Orthodox Medical Lineage* (*Yuzuan yizong jinjian* 御纂醫宗金鑑).[24]

Map 1.1 illustrates the geographical origins of the authors and texts quoted in He Mengyao's medical texts. It shows that the medical culture of He Mengyao was not restricted to that of his close environment. The Ming and Qing authors and books quoted by him were essentially from Jiangnan. In the mid-eighteenth century, doctrines elaborated by people living and practicing medicine in Jiangnan were thus well known by an author from the Pearl River Delta such as He Mengyao. Table 1.2 and Map 1.2, which recapitulate and illustrate the distribution of quotations in the medical texts of two Guangdong contemporaries of He Mengyao and two others from Guangxi, confirm these general trends. First, while these four authors quote the most ancient and classical medical texts, they also refer to their contemporaries, sharing He Mengyao's concern to keep up-to-date. Second, the map shows that access to medical texts or doctrines produced outside the two provinces, notably in the Jiangnan area, was not exceptional but rather the rule for medical authors working not only in the Pearl River Delta but also in rural northern Guangxi.

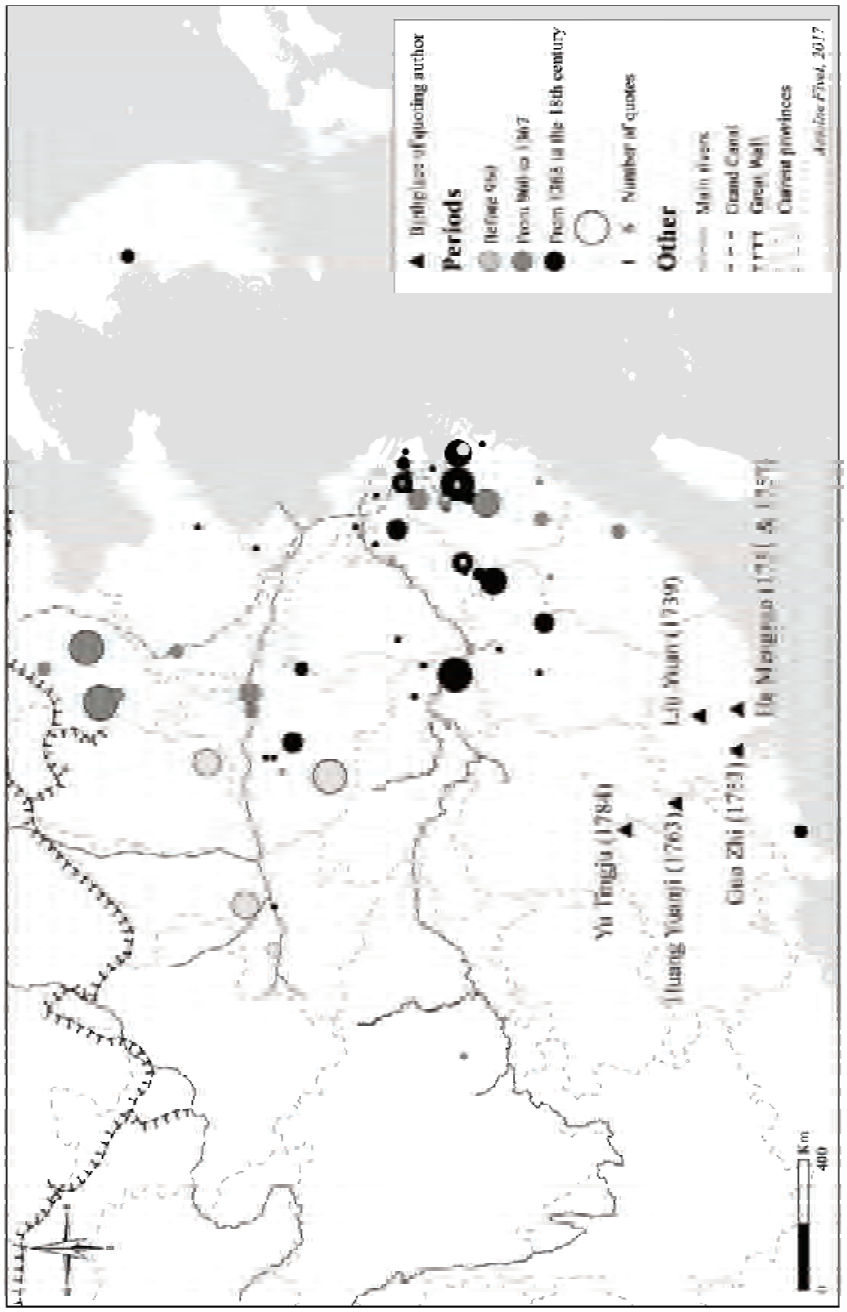
Table 1.3 and Map 1.3, compiled according to the same guidelines, indicate the distribution of quotations found in the medical texts written in the two provinces in the nineteenth century. Since the corpus is larger, the map indicates even more clearly that nineteenth-century authors in the far south knew about their Jiangnan contemporaries.

[23] On the concept of the four masters of the Jin-Yuan period, see Volker Scheid, *Currents of Tradition in Chinese Medicine 1626-2006* (Seattle: Eastland Press, 2007), p. 386.

[24] The *Yuzuan yizong jinjian* 御纂醫宗金鑑 was ordered by the Qianglong emperor in 1739 and completed in 1742. See also note 51. For a modern edition, see Wu Qian 吳謙, *Yuzuan yizong jinjian* (3 vols., Beijing: Renmin weisheng chubanshe, 2006).



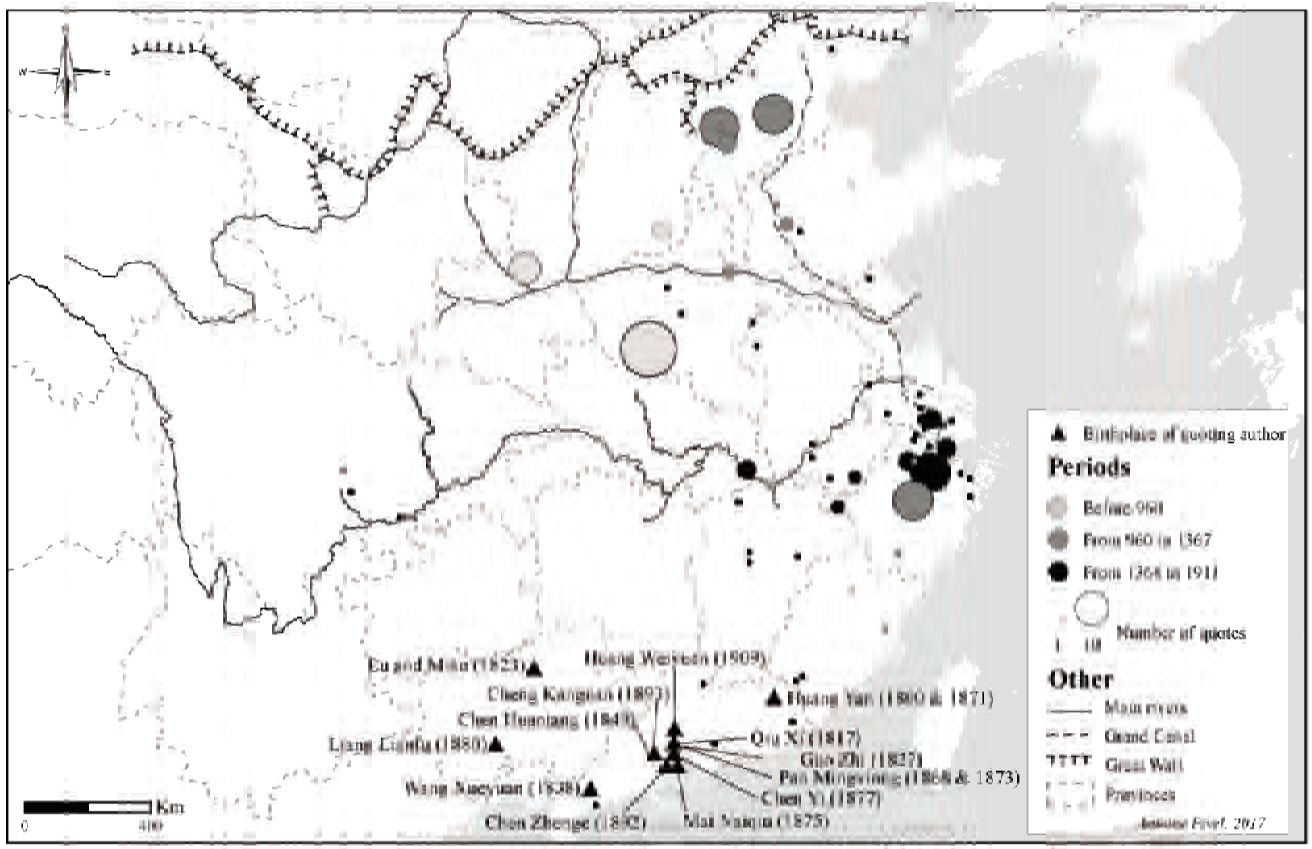
Map 1.1 The Geographical Distribution of the Texts and Authors Cited in He Mengyao's Medical Books Published During His Lifetime (1751 and 1757).



Map 1.2 The Geographical Distribution of the Texts and Authors Cited by He Mengyao and by His Contemporaries in Guangxi and Guangdong.

1804_0138_PM_032.pdf

1804_0138_PM_033.pdf



Map 1.3 The Geographical Distribution of the Texts and Authors Cited in Medical Books Written in Guangxi and Guangdong, 1800-1911.

This survey also shows that while nineteenth-century authors shared a common knowledge of ancient medical texts and doctrines, the range of their Ming and Qing intellectual guides, mostly located in Jiangnan, was far wider and less commonly shared. With the exception of a handful of key medical authors of the Ming and the Qing, such as Zhang Jingyue 張景岳 (1563-1640) or Li Shizhen 李時珍 (1518-1593), who were cited in nearly all the local texts written in the nineteenth century, the major part of the cited authors were cited once only. This first survey thus confirms the general trend of the decentralization of the medical world in late imperial China favored by the boom in medical publications together with the growing confidence in personal experience.[25]

The large place given to Ming and Qing authors or texts from Jiangnan in the citations of the medical writings in the far south deserves reflection and invites us to regard it as partly linked with what sociologists of science, following Merton, have called the "Matthew effect" in science. This translates the fact that the more authoritative a text is, the more it is cited, since citation allows peer recognition.[26] And indeed, citing famous authors from what was considered the cultural center of the empire was certainly the best way for a new author to have his writings accepted by the members of the elite who played an important part in the social life of written documents.[27] As shown earlier, not all the medical writings produced in the far south have managed to survive. A series of filters, both at the time of the actors themselves but also later, worked to preserve only a tiny part of medical texts. The first step that allowed a better preservation of texts was printing, which allowed the circulation of one text in far more copies than when copied by hand. Even a medical practitioner like Sun Yikui 孫一奎 (1522-1619), from Xiuning 休寧 (in modern Anhui) and thus living in a prestigious area where printing was an important industry, had great difficulties in printing his text.[28] One can easily imagine how much more difficult it was for authors living far away from printing centers in what was considered the cultural

[25] Marta E. Hanson, *Speaking of Epidemics: Disease and the Geographic Imagination in Late Imperial China* (Needham Research Institute Series, London: Routledge, 2011), p. 112.

[26] Robert K. Merton, "The Matthew Effect in Science: The Reward and Communication Systems of Science are Considered," *Science* 159/3810 (1968), pp. 56-63; see esp. p. 58.

[27] Florence Bretelle-Establet, "How Do Documents Become Sources? Perspectives from Asia and Science," in Florence Bretelle-Establet, ed., *Looking at it from Asia*, pp. xxi- xlvi.

[28] Judith T. Zeitlin, "The Literary Fashioning of Medical Authority: A Study of Sun Yikui's Case Histories," in Charlotte Furth et al., eds., *Thinking with Cases: Specialist Knowledge in Chinese Cultural History* (Honolulu: University of Hawai'i Press, 2007), pp. 169-202, see esp. p. 170.

back country.[29] Several anecdotes show that if one had no connections among the local elite, who were required to recommend a new text by way of a preface, or among local wealthy people who would be able to open a subscription and provide financial assistance, one had little chance of having one's manuscript printed. Certainly, one way to draw the elite's attention to one's manuscript in the context of the steady expansion of medical writings was to display one's scholarly culture. Citations allowed this. And, as Jiangnan was in scholars' eyes the most important intellectual center of the day, citing Jiangnan medical authors was very likely a way to situate one's own work in the mainstream and to have more chances to have it printed. While the choices as to whether to print or not print a text need further research, we can assume that publishing houses were likely to favor the printing, publishing and circulation of texts that refer to the most authoritative and mainstream writings, thus contributing to consolidate, in return, the flagship position of Jiangnan.

But the prominent place given to Jiangnan authors in the network of citations in medical writings from the far south that have survived must not overshadow the traces of local elements. In addition to the assumption that some of the texts or authors cited but not yet identified were local texts or authors, precise references to connections between local medical experts can be found in these medical writings. Guo Zhi 郭治, a medical expert from Nanhai who lived during the Qianlong reign (1736-1795), cites his local contemporary He Mengyao in his two books, *On the Pulse* and the *Treatise on Cold Damage*, both written during the second half of the eighteenth century and published in 1827 for the first time.[30] Huang Yuanji 黃元基 (*juren* 1733), a native from Henan who had moved to Guangdong because of his father's official functions and who had been sent to Lingshan 靈山 in Guangxi province, mentions in his text certain recipes that sound local, such as the "Recipe from magistrate/local chief Zhu of Guangxi" 廣西朱太守方. Huang Yan 黃巖 was a medical expert who lived at the end of the eighteenth and beginning of the nineteenth century in the Hakka region of Jiaying 嘉應 in the province of Guangdong. In addition to referring to authors, books and doctrines elaborated in Jiangnan or outside the far south, he mentions in his *Essentials of medicine*, written in 1800, several local mas-

[29] Miles, *The Sea of Learning*, p. 1, reports anecdotes showing how Guangdong was still considered a "peripheral outpost" in the beginning of the nineteenth century and how Guangdong intellectuals were often sneered at by Jiangsu and Zhejiang elites, who, conversely, clearly shared the feeling of belonging to the most important cultural center of the empire.

[30] See notably Guo Zhi 郭治, *Mairu* 脉如, 1753 (Shanghai: Shanghai guji chubanshe, 1981), *juan* 2, p. 7; and Guo Zhi, *Shanghan lun* 伤寒論, place and name of publishing house unknown, 1827, p. 61.

ters from whom he borrows doctrines and experience. After a short summary of the ancient and contemporary medical literature about pediatrics, Huang Yan notably explained that he finally adhered to the doctrine of a local master whom he encountered in his immediate surroundings: "In 1788 (or 1728), I met Master Liao Zengming 廖增明 from Huangsha 黃沙 who taught me his secrets, his diagnostic methods based on the observation of the tongue, and suddenly all became very clear." In the chapter on eye diseases, he reproduced the clinical cases of another master he claims to have encountered, Huang Hengyu 黃恒瑜, in Yongding 永定, on the Fujian border.[31]

The analysis of quotations in the surviving medical texts from the far south together with the few biographies that contain information on the cultural background of local medical experts enables us to observe that medical culture of the far south was a mixture of ideas and practices taken from actors, both local and those located in other parts of the empire, and that medical knowledge circulated widely. Medical authors or books from Jiangnan were known by their contemporaries located in the hinterland. Before we examine how knowledge circulated at a time when the study of medicine was not controlled by a national medical curriculum, let us underline that the analysis of quotations further suggests that the local appropriation of Jiangnan authors' ideas happened surprisingly quickly. Yu Tingju 俞廷舉 (*juren* 1768), in northern Guangxi, refers in 1784 to his Jiangsu contemporary Xu Dachun 徐大椿 (1693-1771). Wang Xueyuan 王學淵, a medical expert and author from Maoming 茂名, Guangdong, in his book about summer-heat diseases, prefaced in 1838, refers to his Zhejiang contemporaries Zhang Xuyu 章虛谷 and Jiang Hantun 江涵暾, authors of books published in 1825 and 1824, respectively. The period between the first edition of a text printed in Jiangnan and its first citation in the medical literature produced in the far south of the empire was sometime very short.

III. Mobility of Books: The Issue of the Book Market in Guangxi and Guangdong

The question of the dissemination of knowledge is closely linked with the issue of the accessibility of books and thus with that of their production and distribution as well as their presence in libraries. Historians of books have recently shown that, because of the publishing boom that took place

[31] Huang Yan 黃巖, *Yixue jingyao* 醫學精要, 1800 (Shanghai: Cui ying shuju, 1918), *juan* 1, p. 11, and *juan* 4, p. 12. Huangsha was a place close to Yongding, not far from Jiaying where Huang Yan was living.

beginning in the late Ming, books were more accessible in late imperial times than before.[32] However, as Joseph McDermott emphasized, the problems surrounding access to books, even in heartland areas, were not yet completely solved in the nineteenth century.[33] The preface to the *Diagnosis of Leprosy* (*Fengmen bianzheng* 瘋門辨證*),* written by authors who lived in Fujian province at the end of the nineteenth century and thus close to major printing centers, gives evidence that books could be inaccessible. After recalling that only one book—the *Complete Book on Leprosy* (*Fengmen quanshu* 瘋門全書)—had been written on the subject because of the general disgust the disease provoked among scholars trained in medicine, the authors explained that late in the nineteenth century, in 1877, this book was not even available in a provincial capital: "In Fuzhou, the provincial capital, not even one printed exemplar was available. One or two families had copied it and kept it in secret, but they did not want to show it to other people."[34]

How the book market was related to publishing, distribution and storage in Guangxi and Guangdong during the Qing dynasty is not entirely clear. However, these two provinces were not famous for being pioneering pub-

[32] Since Zhang Xiumin's 張秀民 pioneering book, *Zhongguo yinshua shi* 中國印刷史 (Beijing: Renmin chubanshe, 1989), the field of book history in China has expanded steadily. See notably Ellen Widmer, "The Huanduzhai of Hangzhou and Suzhou: A Study in Seventeenth-Century Publishing," *Harvard Journal of Asiatic Studies* 56, no. 1 (1996), pp. 77-122; Cynthia J. Brokaw, "Commercial Publishing in Late Imperial China: The Zou and the Ma Family Businesses of Sibao, Fujian," *Late Imperial China* 17, no. 1 (1996), pp. 49-92; Lucille Chia, "The Development of the Jianyang Book Trade, Song-Yuan," *Late Imperial China* 17, no. 1 (1996), pp. 10-48; Cynthia J. Brokaw and Kai-Wing Chow, eds., *Printing and Book Culture in Late Imperial China* (Berkeley: University of California Press, 2005); Joseph P. McDermott, *A Social History of the Chinese Book: Books and Literati Culture in Late Imperial China* (Hong Kong: Hong Kong University Press, 2006); Cynthia J. Brokaw, *Commerce in Culture: The Sibao Book Trade in the Qing and Republican Periods* (Harvard University Press, 2007); Lucille Chia, *Printing for Profit: The Commercial Publishers of Jianyang, Fujian, 11th-17th Century* (Harvard-Yenching Institute Monograph Series 56, Cambridge, Mass.: Harvard University Press); and Kai-Wing Chow, *Publishing, Culture, and Power in Early Modern China* (Stanford: Stanford University Press, 2004).

[33] On this issue, see McDermott, *A Social History of the Chinese Book*, Chaps. 4 and 5. Scheid, *Currents*, p. 104, shows that even in cultural and economic centers access to books was not always easy.

[34] Zheng Fengshan 鄭鳳山 and Hou Jing'an 侯敬庵, *Fengmen bianzheng* 瘋門辨症 (Diagnosis of leprosy), 1877 (?) (Qiu Qingyuan 裘慶元, comp., Shanghai: *Zhenben yishu jicheng* 珍本醫書集成, 1936), p. 87. The date of the first edition of this book remains unclear. Xue, *Catalogue of the Chinese Medical Books*, p. 561, gives 1796. However, this is probably a mistake, since the authorial prefaces of this book were written in 1877. For a good understanding of the history of this disease, see Angela Ki Che Leung, *Leprosy in China: A History* (New York: Columbia University Press, 2009).

lishing areas. Until the late Ming it was the Jiangnan cities of Nanjing, Suzhou, and Hangzhou alongside Jianyang 建陽 district in northern Fujian that played this role.[35] After the dynastic change in 1644, Suzhou and Beijing became prominent centers for book publishing and trade, while at the same time many provincial capitals emerged as centers of commercial printing.[36] To what extent the provinces of the far south experienced this change remains unclear. According to Steven Miles's study of Guangdong intellectual life, Guangzhou was not known as a major publishing center before the early years of the Daoguang era (1820-1851).[37] However, a study of the Morrison Collection of Chinese books gives clues to the beginnings of printing and publishing in Guangzhou at least as early as the last years of the eighteenth century. Between 1807 and 1823, the Protestant missionary Robert Morrison (1782-1834) started to buy the Chinese books which were available to him in order to make a collection that would serve for Chinese studies. Since Morrison was resident in Guangzhou and Macao and had no opportunity to travel elsewhere within the empire, Morrison's book-collecting activities were restricted to Guangzhou's book market.[38] The analysis of this book collection shows that the majority of the books purchased by the missionary were published locally by some twenty-nine publishing houses located in Guangzhou or Foshan 佛山. The development of commercial printing in Guangzhou is thus more likely to have begun in the last years of the eighteenth century or in the first years of the nineteenth century. In addition to books published locally, the collection also includes books published in Jiangnan or in Beijing, attesting to what Cynthia Brokaw has illustrated through her study of the Sibao 四保 book trade: book trade networks became more comprehensive at that time.[39] The development of commercial printing in late-eighteenth or early nineteenth-century Guangzhou together with the book trade, notably fueled by the printing houses of Sibao, which were very active in the eastern part of Guangdong, favored the extension of the book market in different areas of the province.[40] By the end of the nineteenth century, the book market in the province was well known,

[35] Brokaw, *Commerce,* p. 9; see also Francis Lok-wing Yee, "The Historical Geography of Book Markets in China: A Case Study of Liulichang," Master's thesis, University of British Columbia, 1983.

[36] Brokaw, *Commerce*, p. 10.

[37] Miles, *The Sea of Learning*, pp. 127-128.

[38] On this book collection now in the School of Oriental and African Studies, London, see Andrew C. West, *Catalogue of the Morrison Collection of Chinese Books* 馬禮遜藏書書目 (London: School of Oriental & African Studies, 1998); http://www.babelstone.co.uk /Morrison/Collection/History.html, accessed 19 January 2012.

[39] Brokaw, *Printing*, p. 28; Brokaw, *Commerce*, pp. 189-234.

[40] Brokaw, *Commerce,* pp. 200-202.

and many printing houses from Jiangnan had migrated there, notably to Magang 馬崗 because of its cheap labor force, including a pool of female block cutters.[41] The expanding book market in Guangzhou and in the whole province during the nineteenth century surely favored the accessibility of books in this province. Miles has noted that Guangdong scholars in the 1860s—in a tone reminiscent of Zhu Xi several centuries before—lamented the unprecedented variety and accessibility of books.[42] This complaint, which became common in the prefaces of Guangdong medical texts too, underlined the impossible task for a beginner to read all of them in any proper way. However, several anecdotes also show that some books remained unprinted for a long time.[43]

Since Morrison was a physician, he was particularly interested in the medical books he could find in Guangzhou. From 1807 to 1823, he thus bought some 133 medical titles. His collection, made of books locally printed or locally sold, gives us an unexpected snapshot of the medical book market in Guangzhou at the beginning of the nineteenth century. A preliminary survey of the catalogue underscores the fact that the major part of the books that one could buy at the beginning of the nineteenth century in Guangzhou were written by Qing authors and, to a lesser extent, by Ming authors. Therefore, a medical practitioner visiting Guangzhou in the first decades of the nineteenth century would find the most up-to-date medical texts, such as the *Collected Expositions by Suzhou Physicians* (*Wuyi huijiang* 吳醫彙講), published for the first time in 1792. While one would find some books written by local authors, such as He Mengyao's *Essentials of the Three Disciplines*, Liu Yuan's 劉淵 *Compilation of Medicine*, or Huang Yuanji's 黃元基 *Tested formulas from the Jingyun Studio* (*Jingyunzhai ji yanfang* 靜耘齋集驗方), published for the first time in 1757, 1739 and 1763 respectively, nevertheless, one would find especially the most recent medical texts by Jiangnan authors.[44]

While books were not affordable for everyone, as revealed by biographies of Ma Xindao 馬信道 or Tu Tingxian 涂廷献, who were still obliged to borrow and hand copy medical books in Guangdong in the second part of the nineteenth century, there is no doubt, however, that the development of the book market in Guangzhou and in the whole province facilitated the

[41] Brokaw, *Commerce*, p. 11.

[42] Miles, *The Sea of Learning*, p. 214.

[43] See for instance Liang Shicheng's 梁世澄 preface copied in Guo, *Zhongguo fensheng yiji kao*, p. 1982.

[44] West, *Catalogue of the Morrison Collection*, pp. 84-124, especially pp. 86, 94, and 104 for citations of the three local books, and p. 123 for citation of the *Collected Expositions*. On the *Collected Expositions*, see Hanson, *Speaking of Epidemics*, pp. 118-121.

circulation of books and culture from different points of the empire and attracted, as we will see, medical experts coming from the Guangxi hinterland, where the book market was very likely less developed.[45] Certainly, the steady expansion of academies (*shuyuan* 書院) from some seventy under the Ming to 221 under the Qing in the province of Guangxi also favored the constitution of libraries and a greater accessibility to books for local residents.[46] However, the books held or printed in these academies and accessible only to their students were mostly limited to what was necessary for the official examinations and the elite culture: classics, history, poetry and regulations.[47] Medical texts, apart from the imperially commissioned medical compilations, were usually published by commercial printing houses. The beginnings of commercial printing in the province of Guangxi remain to be explored. Francis Yee notes that there was no commercial printing house in the province in 1850;[48] Brokaw, however, has shown that certain Sibao booksellers, who themselves claimed to work as pioneers in Guangxi, had done business in this province since the beginning of the eighteenth century. By mid-eighteenth century, they had established a branch bookshop in Nanning 南寧 which became the base for further expansion into the province. According to Brokaw, the book business reached western Guangxi in the nineteenth century following the route of the Gong 龔 River and its tributaries, the rivers Yu 郁 and You 右, as far as Bose 百色.[49] In spite of the Sibao booksellers' activities, the book market in Guangxi was certainly more limited than in Guangdong. This probably explains why nearly all the medical writings produced there in the eighteenth and nineteenth centuries are lost today and why hand copying was still widely used by Guangxi students in the nineteenth century.[50]

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[45] See Guo, *Zhongguo fensheng yiji kao*, pp. 1938, 1975-1976. On the controversial issue of the affordability of books in late imperial China, see Brokaw, *Commerce*, pp. 548-553.

[46] On the role of *shuyuan* in the history of books and libraries in the Ming dynasty, see Timothy Brook, "Edifying Knowledge: The Building of School Libraries in Ming China," *Late Imperial China* 17, no. 1 (1996), pp. 93-119. For an estimation of *shuyuan* in the province of Guangxi, see Zhou Ling 周玲, "Guangxi shuyuan wenhua yanjiu" 廣西書院文化研究, Ph.D. diss., Guangxi Normal University, 2003, p. 32.

[47] Zhou, "College Culture," pp. 32-33.

[48] Yee, "The Historical Geography of Book Markets," p. 106.

[49] Brokaw, *Commerce*, pp. 195, 200-203, 222-225.

[50] According to Gong Pengshou's 龔彭壽 biography, Gong's pupils used to copy their master' textbook; see Guo, *Zhongguo fensheng yiji kao*, p. 1987. While copying was a pedagogical practice highly encouraged by masters in the process of learning medicine in ancient as well as in modern times, it may also be a clue indicating the scarcity of books in the hinterlands. Scheid, *Currents*, p. 117, reports this practice in the little town of Menghe, in Wujin district. Elisabeth Hsu herself experienced such learning; see Elisabeth Hsu, *The Transmission of Chinese Medicine* (Cambridge: Cambridge University Press, 1999), p. 108.

The question of the accessibility of books via the book market in the peripheral areas needs further research. As far as we know, before the late eighteenth century, books in Guangdong were not as accessible as they were in the capital or in the cities of Jiangnan, and the book market in Guangxi developed even later, in the second part of the nineteenth century. How then did doctrines, elaborated at a great distance from the far south reach the medical thinkers of Guangdong as early as the beginning of the eighteenth century and of Guangxi as early as the end of the eighteenth century, as revealed in the medical texts of Liu Yuan (1739), He Mengyao (1751), or Yu Tingju (1784)?

IV. Human Mobility: From Peripheral Areas to Cultural Centers and Vice-versa

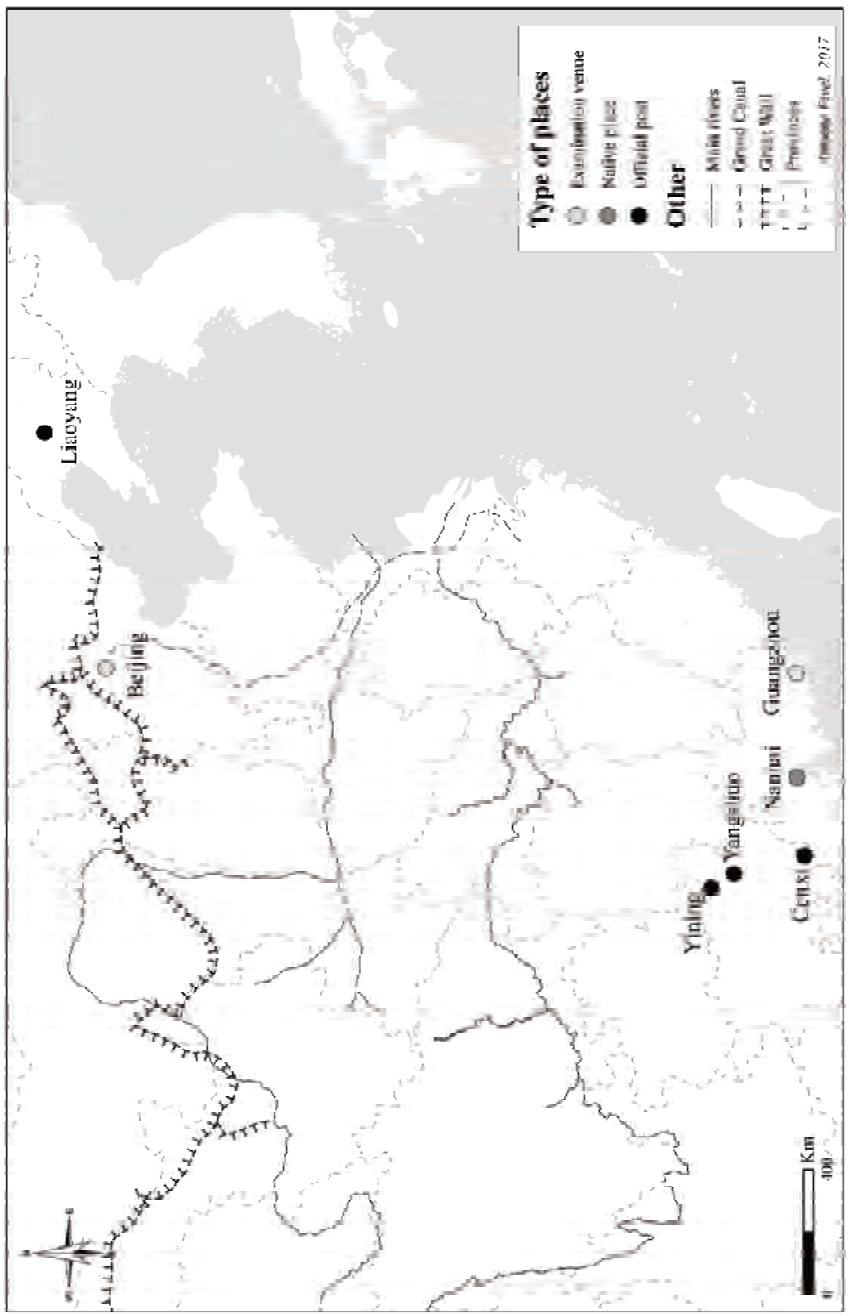
There is no doubt that the policies of centralization of the Qing court were influential in homogenizing medical knowledge. The *Golden Mirror of the Orthodox Medical Lineage* (*Yizong jinjian* 醫宗金鑑), commissioned by the Qianlong emperor in order to provide medical experts with a corrected body of medical knowledge, was published in 1742 and ordered to be distributed to local governors.[51] To what extent this distribution actually took place is unclear, but nevertheless this imperially commissioned text was in the hands of some of the medical experts of the far south quite soon after its publication. He Mengyao refers to it in his *Stepping-Stone for Medicine* (1751) only nine years after its first publication.[52] Yu Tingju in northern Guangxi refers to it in his *Medical Anecdotes from Jintai* (*Jintai yihua* 金台醫話), that he prefaces in 1780. Whether He Mengyao and Yu Tingju had gained access to this imperial medical compilation so soon after its publication as a result of the imperial command to distribute the text free of charge to local authorities or because these two men had been to the capital is difficult to ascertain. However, one thing is certain: human mobility was one of the factors that, in the far south, favored what Brokaw has called "the dissemination of knowledge and national or local cultural integration," particularly when the book market was not yet developed.[53]

Biographies of medical experts bear testimony to a consistent human mobility, which is well illustrated by the case of He Mengyao (**Map 1.4**). As discussed previously, He Mengyao was from Nanhai and studied in Guangzhou

[51] Marta E. Hanson, "The *Golden Mirror* in the Imperial Court of the Qianlong Emperor, 1739-1742," *Early Science and Medicine* 8.2 (2003), special issue on Science and State Patronage in Early Modern East Asia, Catherine Jami, ed., pp. 111-147.

[52] He, *Yibian*, p. 93.

[53] Brokaw, *Commerce*, p. 7.



Map 1.4 Places of Residence of He Mengyao.

from 1721 to 1729. The following year he was in Beijing for the metropolitan examinations. After his success in 1730, he held several posts in the provinces of Guangxi and Liaoning: He was magistrate at Yining 義寧 and Yangshuo 陽朔, two localities close to Guilin 桂林 in northern Guangxi, then at Qinxi 芩溪 and Si'en 思恩, near Wuzhou 梧州, and finally magistrate at Liaoyang 遼陽 in the present-day province of Liaoning before returning to Nanhai and practicing medicine. While the chronological details of his itinerary are not clearly known, we do know that He Mengyao had been in these different places.

The mobility demonstrated by He Mengyao was not exceptional. In fact, biographies allow us to observe that medical experts of the far south were frequently mobile. Many reasons prompted them to move. As He Mengyao's example shows, a significant number of medical experts or writers took the official examinations, and some of them succeeded and served as officials.[54] For all of them (16 out of the 28 biographies that mention mobility indicate the civil service as a reason), this meant extensive travel. In the process of taking the examinations, people had to reach the district capital, then the provincial capital and finally, for those who were successful, the capital of the empire. If they succeeded in securing a position, they were then obliged to move regularly from one district to another and from one province to another. These officials, who had one foot in the medical field and one foot in officialdom, undoubtedly bridged different social and geographical milieus and served as a cultural transmission link between the different localities of the empire. Before giving examples of how they played this particular role, let us recall that mobility was not limited to officials.

In fact, a substantial number of biographies give evidence that medical experts who were not engaged in government service also traveled throughout the empire. The constraints linked to medical activity obliged them to move. While some medical experts established offices where they received and treated their patients, some were more or less itinerant and had to travel throughout the territories in which they maintained a practice. The long biography of Cheng Yinyang 程尹揚, a medical expert from Guiping 桂平, Guangxi, describes Cheng as an itinerant doctor, likely active in the eighteenth and nineteenth centuries, who used to treat patients up to a hundred *li* (approximately 50 km) around his native place. The clinical cases reported

[54] On the frequent combination of public functions and medical practice, considered an activity highly praised by Confucian ethics, see Hymes, "Not Quite Gentlemen?"; Bretelle-Establet, *La Santé en Chine du Sud*; Joanna Grant, *A Chinese Physician: Wang Ji and the 'Stone Mountain Medical Cases History'* (London: RoutledgeCurzon, 2003); Scheid, *Currents*; and Chao, *Medicine*.

in his biography show that he cured people in the surrounding cities of Nanning, Pingnan 平南 and Guixian 貴縣.[55]

Medical experts' quest for knowledge was another motivation for extensive travel; this is mentioned in nine biographies. The example of Cheng Shichao 程士超 (1804-1888) from Guiping illustrates what Jean Levi, discussing the circulation of knowledge in the Warring States period (475-221 BCE), has called "transhumant teaching" (*enseignement transhumant*), a process which became synonymous with movement.[56] As many medical experts' biographies show, the mobility implied by the quest of medical experts for broader knowledge extended well beyond the chronological limits of the Warring States: it was a common way of learning medicine in late imperial times. Cheng Shichao, who had first studied with one of his family members, Cheng Yinyang, mentioned above, left his native place in order to "improve" his medical knowledge. He first went to Guangdong province, then turned to Guilin and there received the teachings of a master, Zhu Yi 朱易, native of Jiangxi province. Later, Cheng followed his master to Jiangxi province and returned home only at the end of his life.[57] Although his medical writing has not survived, his biography recalls that this medical expert referred to such figures as Yu Jiayan 喻嘉言, Zhang Jingyue 張景岳, Xue Ji 薛己, Zhang Zhicong 張志聰 and Chen Nianzu 陳念租, all from Jiangnan and active in the Ming and Qing.[58] Others, like Cheng Shichao, left the hinterland of Guangxi to reach more central areas, such as Guangzhou, a city which emerged as a brilliant cultural center in the early nineteenth century, thanks to the development of new academies and publishing houses, and where, as we have seen, a book market had blossomed. But some went even further: Yi Liangshan 易良山, a native of Dianbai 電白, Guangdong, went to Beijing towards the end of the seventeenth century to improve his medical knowledge with the imperial doctor Zhai Yuhua 翟玉華 (1587-1671). In the middle of the eighteenth century, Huang Tingju 黃廷矩, from Shunde 順德, Guangdong, reached Chunan 楚南 in Hunan to get medical training in the field of traditional inoculation against smallpox, working with a certain Ou Shizhen 歐世珍. In the last decades of the nineteenth century, the journeys of medical masters that implied travel involved those who looked for training in either Chinese-style or Western-style medi-

[55] Guo, *Zhongguo fensheng yiji kao*, pp. 2028-2029.

[56] Jean Levi, "Les 'circulateurs de savoirs' au temps des Royaumes combattants (V^e^-III^e^ siècle av. J.-C.)," in Christian Jacob, ed., *Lieux de savoir, espaces et communautés* (Paris: Albin Michel, 2007), pp. 805-823.

[57] For a full translation of this biography, see Bretelle-Establet, "Chinese Biographies," pp. 424-425.

[58] For details on the Cheng family, see ibid., pp. 424-425.

cine. For example, in the last years of the century, Deng Daliang 鄧達亮, from Hexian 賀縣, Guangxi, went to Penang Pulau (Binglangyu 檳榔屿) in Malaysia for training; there he graduated in Chinese medicine at the Nanhua yiyuan 南華醫院 (later known as the Lam Wah Ee Hospital). Similarly, Pang Pengzhan 庞鹏展, from Xiancheng 縣城, Guangxi, went to Guangzhou and later Shanghai to train in a "Sino-Western hospital", while Chen Zhenge 陳珍閣 went to Singapore in 1886 to compare Chinese and Western anatomical knowledge.[59]

The analysis of the careers of this group of medical experts brings out the fact that people located in peripheral areas traveled, just like those living in the cultural center of Jiangnan.[60] From the far south, such experts moved eastwards and northwards, toward major cities elsewhere in China. At the same time, the rule that obliged officials to move regularly from post to post also favored the travel of elites from other parts of the empire to the far south. As Steven Miles has shown, it is through this movement of people that the latest trends in scholarship and literature, known as Han Learning, were transplanted from Jiangnan to Guangzhou in the nineteenth century.[61] As we will now see in the case of He Mengyao and others, we can assume that medical knowledge produced outside the region was also carried to peripheral areas through human mobility.

V. Long-distance Circulation of Books through Human Mobility

Liu Xiaobin 劉小斌 has recently analyzed the trajectory of a particular title that would have a great impact on the Guangdong medical culture, the *Complete Book of Jingyue* (*Jingyue quanshu* 景岳全書), written by Zhang Jingyue in 1624, a native from Sichuan who had migrated to Zhejiang. In 1700 this book was introduced into the province of Guangdong by Zhang Jingyue's nephew, Lin Riwei 林日蔚, who brought the manuscript to the Provincial Administration Commissioner of Guangdong, Lu Chao 鲁超, to be printed. Ten years later, Jia Tang 賈棠, the official in charge of transport in the two provinces of Guangdong and Guangxi reprinted it. Three years

[59] For information on the mobility of these medical experts, see He, *Catalogue of Biographies*, vol. 2, p. 31; Guo, *Zhongguo fensheng yiji kao,* pp. 1979, 2038, 2035; and Chen Zhenge 陳珍閣, *Yigang congshu* 醫綱總樞 (Guangzhou: Zuijinglou keben, 1892), p. 3. Chen mentions a British hospital, the *Yingguo wangjia da yiyuan* 英國王家大醫院, that I have not been able to identify thus far.

[60] See other examples of mobility in Scheid, *Currents*, p. 98; and Zeitlin, *Literary Fashioning*, p. 177.

[61] Miles, *The Sea of Learning*, pp. 42, 54.

later, it was printed again in Guangdong and was widely disseminated in the province, as the large number of local texts that refer to it indicates.[62]

Unfortunately, we cannot trace all the itineraries of books cited in the local medical writings of the far south. As mentioned above, the development of the book market in Guangzhou in the late eighteenth century allowed a wide circulation of medical books. Other narratives, like the case of Miao Fuzhao cited previously, confirm that it was common both before and after this period for people on their travels to acquire medical texts and then promote their distribution when they returned to their home provinces.[63] Yi Liangshan, also cited above, left his native Dianbai for the capital during the second half of the seventeenth century. There he met Zhai Yuhua, who was then working at the Imperial Academy of Medicine. When Yi Liangshan returned home, Zhai Yuhua gave him one of his books, a practice that, according to McDermott's recent study of Chinese books, must have been common in the process of sharing knowledge.[64] Liang Shicheng 梁世澄, a native of Nanhai, explains in his preface (1874) to the *Bronze Mirror to Protect the Body from Smallpox* (*Douzhen yuti jinjing* 痘疹玉體金鏡, 1579) that on his way to the capital to sit for the metropolitan examinations, he found this book about smallpox; he brought it with him so that it could be printed and spread through Guangdong. The book was reprinted in 1874.[65] Liang Yuanfu 量元輔, a native of Guangdong, recounts that, while he was holding a position in Wuzhou, Guangxi, in the late nineteenth century, he found there a manuscript about the disease "white throat" (*baihou* 白喉). He sent it to his nephew, who had contacts with a Guangdong printing house, so that this book would be printed and widely distributed in the province, where this disease, according to Liang Yuanfu, had been introduced only recently and was unknown and inappropriately treated by local doctors.[66] All theses anecdotes show that people on their travels, and in particular those who attended provincial or metropolitan examinations and who would easily find book stalls close to the examination hall, could seize the opportunity to visit bookshops and acquire new books.[67] Once back in their home

[62] Liu Xiaobin 劉小斌, *Lingnan yixue shi* 岭南醫學史 (Guangzhou: Guangdong keji chubanshe, 2010).

[63] Zeitlin, *Literary Fashioning*, p. 170.

[64] McDermott, *A Social History*, pp. 84-95. See Guo, *Zhongguo fensheng yiji kao*, pp. 1931, 1960; and He, *Catalogue of Biographies*, vol. 2, p. 32, and vol. 3, p. 172.

[65] Guo, *Zhongguo fensheng yiji kao*, p. 1982.

[66] Ibid., p. 1985.

[67] On the display of book stalls, see Yee, "The Historical Geography of Book Markets," p. 75. For the constitution of local libraries thanks to human mobility, see Miles, *The Sea of Learning*, p. 128.

provinces, they would either include these imported books in private libraries that sometimes were open to local doctors, as several biographies remind us,[68] or take them to a local printer for reprinting. A third way to disseminate doctrines, ideas or practices borrowed from medical thinkers living and working far away was to copy or summarize the imported texts and doctrines in newly written texts and make them available to a new generation of local readers.

VI. Circulation over Shorter Distances of Ideas and Doctrines from Outside Through Teaching and the Local Production of New Books

Let us return once more to the case of He Mengyao. While he is not credited with having imported medical books into his home province, nevertheless several clues indicate that he played an important role in making available the most up-to-date imported medical knowledge to those around him. First, in all his administrative functions He Mengyao was involved in local medical assistance. In Si'en, for example, when an epidemic broke out, he delivered prescriptions that local authorities eventually decided to distribute in the surrounding region. Moreover, the preface to his *Stepping-Stone for Medicine* states that he had written this book while he was a civil servant in Guangxi:

> This book was composed when I was traveling in the country to take up office, from Guangxi to Liaodong . . . . Chapter five on the four-step diagnosis is the material I gathered while I was an official at Si'en and was teaching medicine in the district.[69]

He Mengyao was thus an official and a medical expert at the same time. Furthermore, he had disciples, as the biography of Chen Guodong 陳國棟 from Xinhui 新會 indicates, as well as medical friends such as Guo Zhi, for whose work *On the Pulse* He Mengyao wrote a laudatory preface in 1753.[70] He Mengyao was not an isolated medical thinker, but was at the center of a social network; although it is impossible to fully reconstruct it, this network included disciples and friends with whom he shared knowledge. Moreover, his medical texts, the *Stepping-Stone for Medicine* in particular, were a digest of ancient and new doctrines that he took care to summarize for his audience. How he discussed "sudden disorders" (*huoluan*

[68] Guo, *Zhongguo fensheng yiji kao*, p. 1975.
[69] He, *Yibian*, pp. 55-56.
[70] See Guo, *Zhongguo fensheng yiji kao*, pp. 1933-1934; and Guo, *Mairu*, pp. 1-3.

霍亂)[71] for instance, illustrates his role as a spokesman of both his predecessors and contemporaries:

> Whatever the violent diseases or violent deaths, they all belong to fire. The *Zhunsheng*[72] says that its origin lies in a damp spleen. Damp is abundant in the spleen, there is thus obstruction and heat production at the same time. For Zhang Zihe,[73] it is the combination of the three *qi* of wind, damp and heat that produces the evil. . . . Wang Haizang[74] too says that it is the combination of wind, damp, heat and food that produces the evil. The *Mingli lun* 明理論[75] says that for the most part "sudden disorders" are caused by troubles coming from food and drink.[76]

This way of crafting new texts, namely by citing or summarizing his predecessors' doctrines, was far from uncommon and not restricted to the medical field. But it appears to have been widely adopted in medical writings. As many authors' prefaces state, personal ideas or inventions were not at the forefront in justifying the creation of a new medical book.[77] Very often, authors explained that they had not added anything personal. This statement of humility that implicitly refers to the famous saying of Confucius—"transmitting but not creating" (*Analects* 7.1)—and to the advice formulated by the Song-dynasty scholars Su Shi 蘇軾 (1036-1101) or Kou Zongshi 寇宗奭 (act. c. 1111-1117) to avoid introducing new ideas and formulas when good ones already existed, may appear to be merely rhetoric.[78] A medical author gained more authority and legitimacy when he could frame himself as an heir to a tradition and as a conveyor rather than as someone who neglected his heritage, dismissing it and displaying only his

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[71] In the biomedical taxonomy of disease, *huoluan* translates as "cholera." But until the beginning of the nineteenth century it designated a set of pathological states that included all types of gastroentiritis and alimentary intoxication.

[72] This is an abbreviation for *Zheng zhi zhunsheng* 證治準繩 (Rules for diagnosis and treatment), written by Wang Kentang 王肯堂 (1549-1613) in 1602.

[73] Zhang Zihe 張子和 (1151-1231).

[74] Wang Haizang 王海藏 (1200-1264).

[75] Abbreviation for the *Shanghan mingli lun* 伤寒明理論 written by Cheng Wuji 成無己 (active 11th-12th c.).

[76] He, *Yibian*, pp. 288-289.

[77] For a detailed analysis of medical prefaces, see Florence Bretelle-Establet, "The Construction of the Medical Writer's Authority and Legitimacy in Late Imperial China Through Authorial and Allographic Prefaces," *NTM Zeitschrift für Geschichte der Wissenschaften, Technik und Medizin* 19, no. 4 (2011), pp. 349-390.

[78] See Paul U. Unschuld, *Nan-Ching: The Classic of Difficult Issues* (Berkeley: University of California Press, 1986), p. 44; and Paul U. Unschuld, *Medicine in China: A History of Pharmaceutics* (Berkeley: University of California Press, 1986), p. 87.

own points of view. But as tables 1.1, 1.2 and 1.3 show, most of the texts that survive do pay great attention to quoting their forebears. Figure 1.2 shows an excerpt of Huang Yan's *Essentials of Medicine* (*Yixue jingyao* 醫學精要, 1800) which illustrates in a very clear way how doctrines produced before the author's time and sometimes outside his area were made available to local readers. Following the well-known format of the *leishu* 類書 (classified books or encyclopedias), also used in textbooks for the civil service examinations,[79] under a specific heading (here, for example, the "diagnosis and treatment of fever caused by depletion" *xu re bian zhi* 虛熱辨治), once the author has given his own explanations, he quotes the different doctrines that are available or considered relevant, thus providing the reader with either original short excerpts from other books or with a summary of their content. Figure 1.3 provides another example of this way of writing and conveying knowledge from earlier writers. The *Tested Formulas from the Jingyun Studio* was written in 1763 by Huang Yuanji 黃元基. Under each heading for a specific disease, the author compiled a wide-ranging selection of recipes excerpted from ancient and contemporary books systematically quoted at the end of each recipe.

Certainly not all the medical texts written in these areas adopted this format of writing, which, in a very clear and systematic way, gives a local audience access to doctrines and techniques elaborated by predecessors and contemporaries often located far away. As already mentioned, some medical authors avoided citations or quotations, but most of the authors used this way of crafting new medical books, one which made such medical doctrines and techniques, mostly from Jiangnan medical thinkers, visible to others, even in marginal areas such as Guangxi.

[79] See Hilde De Weerdt, "The Encyclopedia as Textbook: Selling Private Chinese Encyclopedias in the Twelfth and Thirteenth Centuries," in Florence Bretelle-Establet and Karine Chemla, eds., *Qu'était-ce qu'écrire une encyclopédie en Chine?*, special issue of *Extrême-Orient, Extrême-Occident*, 2007, pp. 77-102.

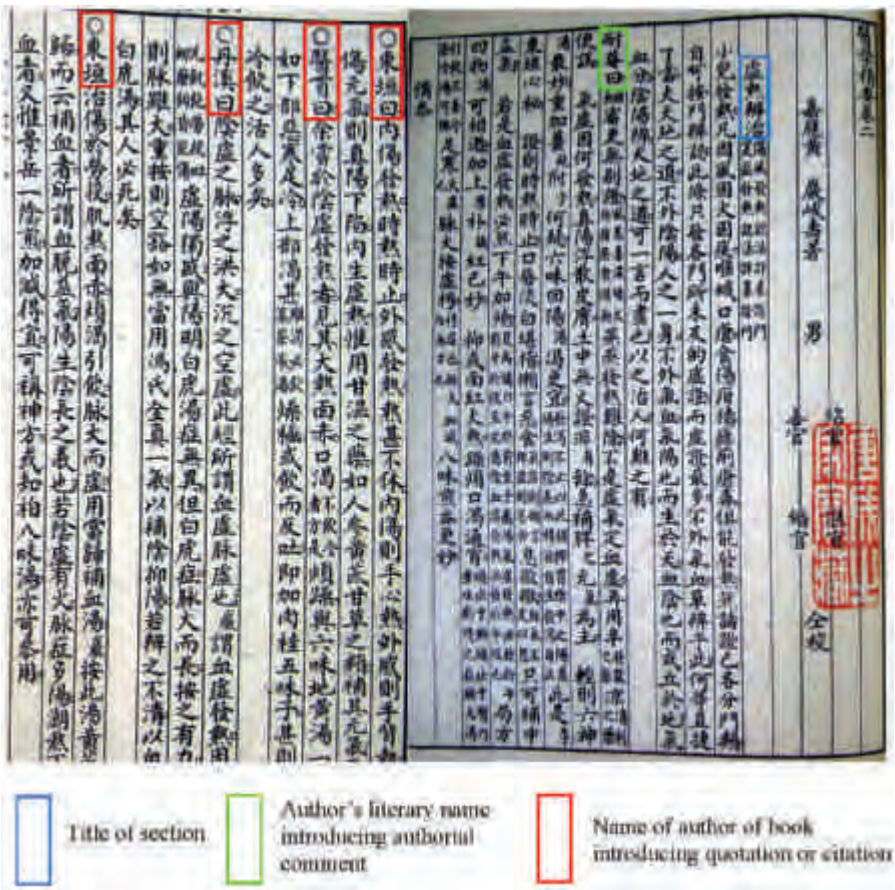


Figure 1.2 Layout of Quotations and Citations in Late Imperial Medical Books. Huang Yan 黃巖's *Yixue jingyao* 醫學精要 *(Essentials of Medicine*), 1800 (Shanghai: Cui ying shuju, 1918, *juan* 2, pp. 1a, 1b).

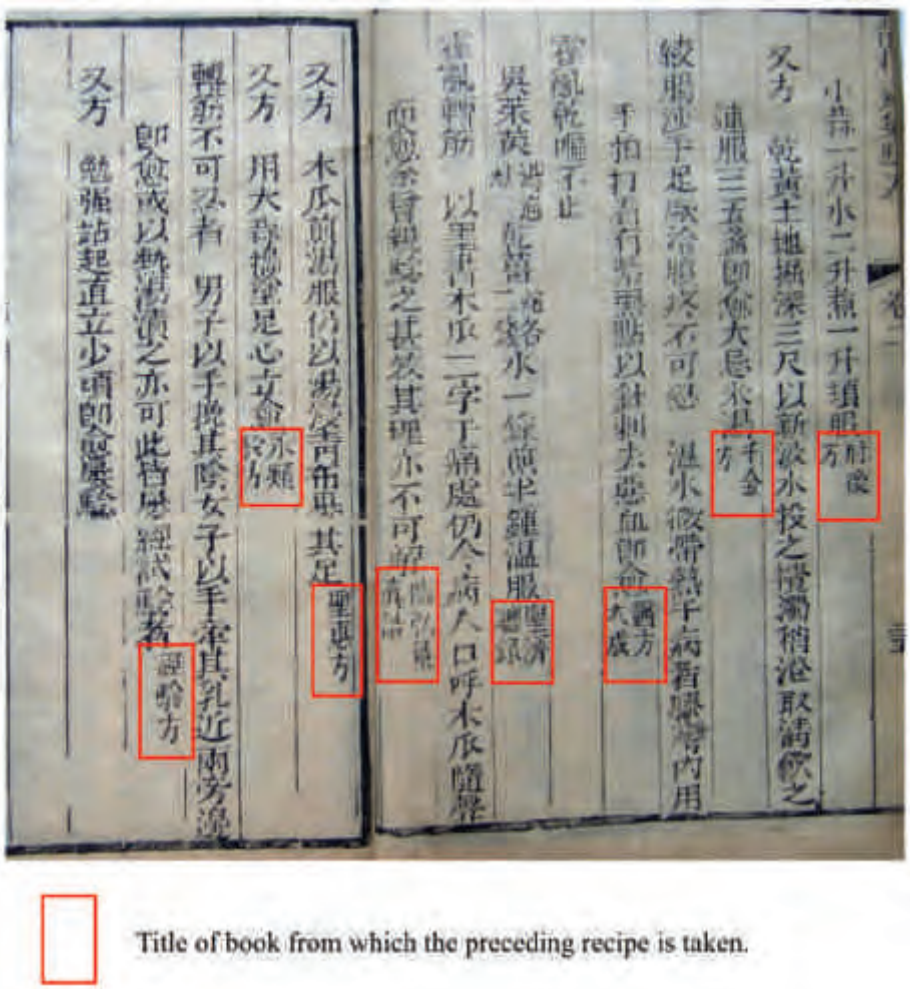


Figure 1.3 Citation of the Origin of Each Recipe in Huang Yuanji 黃元基's *Jingyunzhai ji yanfang* 靜耘齋集驗方 (*Tested Formulas from the Jingyun Studio*), 1763 (Benzhai zangban, 1799, *juan* 2, pp. 25-26).

Conclusion

A preliminary survey of the quotations in the medical texts produced in Guangxi and Guangdong during the Qing dynasty and of the references mentioned in the biographies of local medical experts shows that medical doctrines and ideas circulated widely. Many books or doctrines elaborated far away from the provinces of China's far south were referred to by local authors, and, sometimes, this process of appropriation did not take long. The emergence and flourishing of the book market and printing centers in late eighteenth-century Guangdong certainly favored the circulation of books in this province and, later, in more distant corners of the far south, such as western Guangxi. Before and even during that time, the customary travels of people engaged in medical activities also contributed to the circulation of books over long distances. The crafting of new medical books that often quoted or summarized doctrines of both the authors' predecessors and famous contemporaries contributed to the dissemination of medical culture to new generations of local readers.

The present initial survey of extant local medical writings links certain elements to a reflection on the center-periphery relationship. As David Faure stressed a decade ago, the historiography of late imperial China had thus far been centered on Jiangnan, and historians had accustomed us to seeing late imperial history through the lens of Jiangnan.[80] Focusing more broadly on the far south allows us to address the question of the centrality of Jiangnan. The maps illustrating the geographical origins of the authors cited by medical authors in the far south clearly show that certain core locales did exist. It is mainly among the pool of Jiangnan medical authors that writers in the far south found their intellectual guides. At first glance, then, and contrary to what Faure expected from a wider inquiry into Chinese local history when he stated "a corollary of this approach is that the more we know about other parts of China, the more the centrality of Jiangnan fades away,"[81] the analysis of the extant medical literature from the far south confirms the centrality of the Jiangnan region. It reveals that the active competition that existed between the different currents of thought in Jiangnan had repercussions for the medical landscape of the far south.[82]

[80] David Faure, "A Perspective on the Study of Chinese Culture and Society," unpublished paper available at www.cckf.org/PrincetonWorkshop/David%20Faure.doc (accessed 14 September 2015).

[81] Ibid., p. 3.

[82] This competition is discussed in Paul U. Unschuld, *Medicine in China: A History of Ideas* (Berkeley: University of California Press, 1985). See also Marta E. Hanson, "Inventing a Tradition in Chinese Medicine: From Universal Canon to Local Medical Knowledge in

Some authors, like Chen Huantang 陳煥堂 from Guangdong, who, in his book *Back to the True Zhongjing* (*Zhongjing guizhen* 仲景歸真) published in 1849, invited readers to reconsider the famous medical *Treatise on Cold Damage* (*Shanghan lun* 傷寒論) by Zhang Zhongjing 張仲景 (150-219 CE) and to expunge from it later misinterpretations, clearly shared the fashionable trend of Han learning (*hanxue* 漢學) and of evidential scholarship (*kaozheng xue* 考證學) that originated in Jiangnan. Others, like Pan Mingxiong 潘明熊 (c. 1807-1886), from Panyu 番禺, Guangdong, in his book *Abstract of Ye's [Ye Gui's* 葉桂*] Medical Cases from the Pingqin Library* (*Pingqin shuwu Ye an kuoyao* 評琴書屋葉案括要), agreed with the new ideas and discourse on epidemics introduced by Wu Youke 吳有可 (1582-1652) and later adopted and adapted by Ye Gui 葉桂; these two medical thinkers would later be known as the Jiangnan ancestors of the so-called "Warm diseases current of learning" (*wenbing xuepai* 溫病學派).[83]

This does not necessarily mean that the medical landscape of the far south of the empire was a simple reproduction of the situation in Jiangnan, with all its competitive currents and practices. As mentioned earlier, some authors did not inscribe their own texts and medical culture into any authoritative current of thought. Others, while referring to doctrines, explanations and recipes from prestigious authors from Jiangnan, sometimes explained they had to change or adapt them to local realities and contingencies. Finally, some writers deliberately referred to local masters' doctrines, clinical experiences and recipes. Behind an explicit claim to know and to agree with authoritative medical thinkers from Jiangnan in their writings, medical experts from the far south give many clues that invite us to further the present discussion so as to address the issue that Kostas Gavroglu has raised in the context of Europe: how what was received has been appropriated.[84]

South China, the Seventeenth to the Nineteenth Century," Ph.D. diss., University of Pennsylvania, 1997; Hanson, *Speaking of Epidemics*; Grant, *A Chinese Physician*; and Scheid, *Currents*.

[83] Hanson, *Speaking of Epidemics*, pp. 20, 115-118.

[84] Kostas Gavroglu et al., "Science and Technology in the European Periphery: Some Historiographical Reflections," *History of Science* 46, no. 2 (2008), pp. 153-175.

Table 1.2 Quotations in the Medical Works Written in Eighteenth-Century Guangdong and Guangxi.

Medical works and their authors	**Before the Song 500 BCE-960 CE**	**Song, Jin, Yuan 960-1367**	**Ming, Qing 1367-1911**	**Unidentified**
Liu Yuan 劉淵 in *Yixue zuanyao* 醫學纂要, 1739. From Changning 長寧, Guangdong. Military licentiate (Wusheng 武生), known as a medical expert only.	*Huangdi neijing* 黃帝內經; Wang Shuhe 王叔和; Zhang Zhongjing 張仲景	Zhu Gong 朱肱; Cheng Wuji 成無己; Chen Wuze 陳無擇; Liu Hejian 劉河間; Zhang Jiegu 張洁古; Li Gao 李杲	Dai Tongfu 戴同父; Hua Boren 滑伯仁; Wang Lü 王履; Tao Jieyan 陶節菴; Wang Lun 王綸; Xue Ji 薛己; Li Shizhen 李時珍; Gong Yunlin 龔雲林; Wang Kentang 王肯堂; Zhao Xianke 趙獻可; Zhang Jingyue 張景岳; Yu Jiayan 喻嘉言; Li Shicai 李士材; Lü Wancun 吕晚村; Chen Shiduo 陳士鐸; Wang Ang 汪昂; Li Qishu 李期叔; Jing Rizhen 景日昣; Cheng Jiaoqian 程郊倩; Qian Zhen 錢禎	Wu Caolu 吳草廬; Liu Shi 柳氏; Yueren 越人; Wu Hefeng 吳鶴峰; Li Changqi 李昌期; Li Ziyong 李子永
Guo Zhi 郭治 in *Mairu* 脈如, 1753. From Nanhai 南海, Guangdong. Tribute student (*fugongsheng* 附貢生). Known as a medical expert only.	*Huangdi neijing* 黃帝內經; *Nanjing* 難經; Wang Shuhe 王叔和; Zhang Zhongjing 張仲景	Gao Yangsheng 高陽生; Zhang Jiegu 張洁古; Li Gao 李杲	Hua Boren 滑伯仁; Li Yanwen 李言聞; Li Shizhen 李時珍; Li Ting 李楹; Zhang Jingyue 張景岳; Zhang Shiwan 張石頑; He Mengyao 何夢瑤; Xu Donggao 徐東皋	Liu Shi 柳氏; *Xianwei* 顯微
Yu Tingju 俞廷舉 in *Jintai yihua* 金臺醫話, 1784. From Quanzhou 全州, Guangxi. Provincial graduate (*juren* 擧人) 1768 and magistrate in Yingshan 营山, Sichuan.	*Huangdi neijing* 黃帝內經; *Nanjing* 難經; Wang Shuhe 王叔和; Zhang Zhongjing 張仲景; *Mengzi* 孟子; Sun Simiao 遜思邈; Wang Tao 王燾	Liu Hejian 劉河間; Li Gao 李杲; Wang Haizang 王海藏; Zhu Danxi 朱丹溪	Hua Boren 滑伯仁; Wang Lun 王綸; Xue Ji 薛己; Wan Quan 萬全; Li Shizhen 李時珍; Gong Yunlin 龔雲林; *Dongyi Baojian (Dongui Bogam)* 東醫寶鑒; Wang Kentang 王肯堂; Nie Jiuwu 聶久吾;	*Jiyan liangfang* 集驗良方; *Baochan jiyao* 保產輯要

Medical works and their authors	**Before the Song 500 BCE-960 CE**	**Song, Jin, Yuan 960-1367**	**Ming, Qing 1367-1911**	**Unidentified**
			Li Ting 李楟; Wu Zhiwang 武之望; Chen Shigong 陳實功; Zhang Jingyue 張景岳; Fu Renyu 傅仁宇; Wu Youke 吳有可; Yu Jiayan 喻嘉言; Li Shicai 李士材; Chen Shiduo 陳士鐸; Feng Zhaozhang 馮兆張; Wang Ang 汪昂; Zhang Shiwan 張石頑; Zhu Chungu 朱純嘏; *Dasheng bian* 達生編; Wu Qian 吳謙; Xu Dachun 徐大椿; Chen Fuzheng 陳復正	
Huang Yuanji 黃元基 in *Jingyunzhai ji yanfang* 靜耘齋集驗方 1763. From Henan, he moved as an official to Guangdong and Guangxi. Provincial graduate (*juren* 舉人) 1733.	Hua Tuo 華陀, *Weibing fang* 危病方; Zhang Zhongjing 張仲景; Ge Hong 葛洪; Tao Hongjing 陶弘景; Sun Simiao 遜思邈; Wang Tao 王燾	*Taiping sheng huifang* 太平聖惠方; *Shengji zonglu* 聖濟總錄; *Taiping hui-min heji jufang* 太平惠民和劑局方; Yang Tan 楊倓; Wang Qiu 王璆; Chen Yuanjing 陳元睛; Liu Hejian 劉河間; Wang Zhizhong 王執中; Li Ziyu 李子豫; *Yi jian-fang* 易簡方; Li Gao 李杲; Yang Renzhai 楊仁齋; Yan Yonghe 嚴用和; Sun Yunxian 遜允賢; Li Zhong-nan 李仲南; Wang Gui 王珪; Luo Qianfu 羅謙甫; *Danxi fang* 丹溪方	Dai Yuanli 戴原禮; Liu Tianhe 劉天和; Li Shizhen 李時珍; Gong Yunlin 龔雲林; Wang Huazhen 王化貞; Zhou Jinran 周金然; Chen Shiduo 陳士鐸; Ni Hanchu 倪涵初; *Wang Yan gong zhuan* 王驗公傳; *Huang Jinwen zhuan* 黃晉問傳; Yang Gong 楊拱; Chen Yuepo 陳月坡; Wang Lun 王綸	*Jingyan zhu-fang* 經驗諸方; *Jiyan liangfang* 集驗良方; *Jingyan yifang* 經驗醫方; *Jianbian fang* 簡便方; *Jingyan fang* 經驗方; *Jijiu fang* 急救方; *Guangdong huoluodan* 廣東活絡丹; *Guangxi Zhu taishou fang* 廣西朱太守方; *Ji yanfang* 集驗方; *Zazheng fang* 雜症方; *Baoshutang jifang* 寶樹堂集方; *Mifang* 秘方

Table 1.3 Quotations in the Medical Works Published in Guangdong and Guangxi Between 1800 and 1911.

Medical works and their authors	**Before the Song 500 BCE-960 CE**	**Song, Jin, Yuan 960-1367**	**Ming, Qing 1367-1911**	**Unidentified**
Huang Yan 黃巖 in *Yixue jingyao* 醫學精要, 1800 and in *Yanke zuanyao* 眼科纂要, 1871. From Jiaying 嘉應 (Hakka region), Guangdong. Known as a medical expert only.	*Huangdi neijing* 黃帝內經; Wang Shuhe 王叔和; Zhang Zhongjing 張仲景; Xu Shimao 徐士茂; Sun Simiao 遜思邈	Qian Yi 錢乙; Xu Shuwei 許叔微; Chen Wuze 陳無澤; Liu Hejian 劉河間; Zhang Zihe 張子和; Li Gao 李杲; Wang Haizang 王海藏; Yang Renzhai 杨仁齋; Yan Yonghe 嚴用和; Zhu Danxi 朱丹溪; Lou Quanshan 婁全善	Hua Boren 滑伯仁; Dai Yuanli 戴元禮; Tao Jieyan 陶節菴; Zhou Gong 周恭; Xue Kai 薛鎧; Wang Lun 王綸; Wang Ji 汪機; Hu Dacheng 胡大成; Xue Ji 薛己; Li Shizhen 李時珍; Gong Yunlin 龔雲林; Nie Jiuwu 聶久吾; Zhao Xianke 趙獻可; Xia Yuzhu 夏禹鑄; Chen Shigong 陳實功; Zhang Jingyue 張景岳; Li Song 李松; Chen Shiduo 陳士鐸; Feng Zhaozhang 馮兆張; Jiamu zeng ruren 家母曾孺人; Zhang Sunyu 張遜玉; Chen Fuzheng 陳复正; Liao Zengming 廖增明; Jia mi wan 家秘丸; Zhang xianzhi mizhuan 張顯志秘傳; Wu Yuhuai 吳聿懷; Huang Hengyu 黃恒瑜; Wan Mizhai 萬密齊; Hua Yuanhua 華元化; Wang Ang 汪昂; Xu Donggao 徐東皋	*Tianjing* 天鏡; *Hongfei* 鴻飛; *Mi-zhuan zhifa* 秘傳知法
Guo Zhi 郭治 in *Shanghan lun* 傷寒論 1827. Cf. Table 1.2.	*Huangdi neijing* 黃帝內經; Zhang Zhong-jing 張仲景; Sun Simiao 遜思邈	Li Gao 李杲; Wang Haizang 王海藏; Cheng Wuji 成無己; Zhang Jiegu 張洁古	Tao Jieyan 陶節菴; Han Mao 韓懋; Xue Ji 薛己; Zhang Jingyue 張景岳; Gao Gufeng 高鼓峰; Lü Liuliang 吕留良; Yang	

Medical works and their authors	**Before the Song 500 BCE-960 CE**	**Song, Jin, Yuan 960-1367**	**Ming, Qing 1367-1911**	**Unidentified**
			Shengliu 楊乘六; He Mengyao 何夢瑤; Tong Yangxue 童養學	
Qiu Xi 邱熄 in *Yin dou lüe* 引痘略, 1817. From Nanhai 南海, Guang-dong. Known as vaccinator.			Wu Qian 吳謙; Zhang Yan 張琰	
Lu 路 and Miao 繆, *Zhigu xinfang* 治蠱新方, 1823. Lu Shunde, *juren* 舉人 from Rongxian 融縣, Guangxi. Miao Fuzhao 缪福照, from Jiangxi (editor).				Yang Shengguang 楊生光
Wang Xueyuan 王學淵 in *Shuzheng zhinan* 暑症指南, 1838. From Maoming 茂名, Guangdong. Known as a medical expert only.	Ban Gu 班固; *Huangdi neijing* 黃帝內經; Zhang Zhongjing 張仲景; *Zuosi* 左思; Sun Simiao 遜思邈; Han Yu 韓愈	Su shi 蘇氏; Liu Hejian 劉河間; Li Gao 李杲; *Taiping huimin heji jufang* 太平惠民和劑局方; Zhang Zihe 張子和; Wang Haizang 王海藏; Yan Yonghe 嚴用和; Zhu Danxi 朱丹溪	Zhang Jingyue 張景岳; Ye Tianshi 葉天士; Dai Yuanli 戴原禮; Xue Ji 薛己; Gong Yunlin 龔雲林; Wu Kun 吳琨; Zhang Fengkui 張鳳逵; Xia Yuzhu 夏禹鑄; Li Shicai 李士材; Cheng Yingmao 程應旄; Jing Dongyi 景東旸; Ni Hanchu 倪涵初; Cheng Zhongling 程鐘齡; Wu Qian 吳謙; Hong Jinding 洪金鼎; Jiang Hantun 江涵暾; Zhang Xugu 章虛谷; Weng Zao 翁藻; Wang Qichang 王岐昌	Wang shi 王氏; *Liangfang* 良方

Medical works and their authors	**Before the Song 500 BCE-960 CE**	**Song, Jin, Yuan 960-1367**	**Ming, Qing 1367-1911**	**Unidentified**
Chen Huantang 陳煥堂 in *Zhongjing guizhen* 仲景歸真, 1849. From Dongguan 東莞, Guangdong. Known as a medical expert only.	Zhang Zhongjing 張仲景; *Huangdi neijing* 黃帝內經; Wang Shuhe 王叔和; Kongzi 孔子	Qian Yi 錢乙; Liu Hejian 劉河間; Zhang Jiegu 張洁古	Tao Jieyan 陶節菴; Wu Shou 吳綬; Wang Kentang 王肯堂; Li Cunji 李存濟; Li Ting 李楹; Zhang Jingyue 張景岳; Yu Jiayan 喻嘉言; Li Shicai 李士材; Wu Qian 吳謙	
Pan Mingxiong 潘明熊 in *Pingqin shuwu yi lüe* 評琴書屋醫略, 1865, and *Pingqin shuwu Ye'an kuoyao* 評琴書屋葉案括要, 1873. From Panyu 番禺, Guangdong. Government student (*zhusheng* 諸生). Known as a medical expert.	*Huangdi neijing* 黃帝內經; Zhang Zhongjing 張仲景; Wang Bing 王冰	Liu Hejian 劉河間; Li Gao 李杲; Luo Qianfu 羅謙甫; Zhu Danxi 朱丹溪	Wang Ji 汪机; Li Shizhen 李時珍; Wang Kentang 王肯堂; Zhao Xianke 趙献可; Zhang Jingyue 張景岳; Yu Jiayan 喻嘉言; Gao Gufeng 高鼓峰; Feng Huiting 馮蕙庭; Zhao Zhang 兆張; Ye Tianshi 葉天士; Hua Xiuyun 華岫雲; Shen Jin'ao 沈金鰲; Wang Yaozhou 汪藥洲	
Mai Naiqiu 麦乃求 (ca 1819-1876) in *Shanghan fayan* 傷寒法眼, 1876. From Xiangshan 香山, Guangdong. Government student (*zhusheng* 諸生).	Wang Shuhe 王叔和; *Huangdi neijing* 黃帝內經; Hua Tuo 華陀; Zhang Zhongjing 張仲景; *Tai lu yao lu* 胎臚藥錄; Sun Simiao 遜思邈		Yu Jiayan 喻嘉言	
Chen Yi 陳義 in *Yifang bu qiu ren* 醫方不求人, 1877. Unclear whether he was from Shunde 順德, Guangdong or Gengshan 耕山,	*Huangdi neijing* 黃帝內經			Feng Yaoyan 馮曜巖

Medical works and their authors	**Before the Song 500 BCE-960 CE**	**Song, Jin, Yuan 960-1367**	**Ming, Qing 1367-1911**	**Unidentified**
Guangxi. Hereditary physician.				
Liang Lianfu 梁廉夫 in *Bu zhi yi biyao* 不知醫必要,1880. From Chengxiang 城廂, Guangxi. Tribute student (*kefuxiang* 科副貢), Second Class.	*Huangdi neijing* 黃帝內經; Zhang Zhongjing 張仲景			
Chen Zhenge 陳珍閣 in *Yigang congshu* 醫綱總樞, 1892. From Xinhui 新會, Guangdong. Grandson of the physician Chen Bichen (Wang Qingren lineage and interested by Western anatomy).	*Huangdi neijing* 黃帝內經; Zhang Zhongjing 張仲景; *Shennong bencaojing* 神農本草經; Sun Simiao 遜思邈	Liu Hejian 劉河間; Li Gao 李杲; Zhu Danxi 朱丹溪	Wang Qingren 王清任; Chen Bichen 陳弼臣; Wang Zhaofu 王昭孚; Liang Linshan 梁璘山	
Cheng Kangnan 程康南 in *Erke miyao* 兒科秘要, 1893. From Gaoming 高明, Guangdong. Hereditary physician.	*Huangdi neijing* 黃帝內經			
Huang Huishi 黃暉史 in *Yixue xunyuan* 醫學尋源 1909. From Dabu 大埔, Guangdong.	Zhang Zhongjing 張仲景; *Zuozhuan* 左傳; *Yijing* 易經; *Huangdi neijing* 黃帝內經; *Nanjing* 難經; Wang Shuhe 王叔和	*Shengji zonglu* 聖濟總錄; Chen Wuze 陳無擇; Liu Hejian 劉河間; Li Gao 李杲; Chen Ziming 陳自明; Zhu Danxi 朱丹溪	Hua Boren 滑伯仁; Tao Jieyan 陶節菴; Li Shizhen 李時珍; Zhang Jingyue 張景岳; Hua Yuanhua 華元化; Wu Youke 吳有可; Fang Yizhi 方以智; Feng Zhaozhang 馮兆張	Chen Yuren 陳毓仁; Zhao Yang 趙養