The formation of any medical profession involves several basic elements, such as educational qualifications, medical knowledge, the establishment of the criteria for acceptance and dismissal from a society of professionals, and the struggle for reputation and social recognition. This process has taken different paths in different social and medical contexts. However, some scholars also suggest that the sociological approach to the analysis of the “profession” is of little use to medical historians, especially to non-Western ones. There have been many debates about how the term “medical profession” should be defined and applied in the history of medicine in China, including some heated arguments about whether it is even proper to apply this term to medicine in late imperial China. Recent scholarship has generally argued that it is inappropriate to see classical medicine in China as a “profession” prior to the twentieth century and its encounter with “Western medicine” because of the absence of two key features of a medical profession: self-regulation and self-certification.

Chao Yüan-ling challenges this stereotypical argument in her book *Medicine and Society in Late Imperial China*, which applies the idea of professionalization to analyse of the rise of a group of Confucian physicians in Jiangnan, a region which included the south of the lower reaches of Yangtze river and which was a centre of cultural, intellectual, economic, and commercial activities in the late Ming and Qing dynasties. Beginning from the seventeenth century, a dramatic increase in population brought about intensified competition in the civil service examinations, which forced more and more Confucian scholars to choose medicine as a means of livelihood. Chao defines this phenomenon as the “Confucianization of medicine.” These Confucian scholars strove to distinguish themselves from other types of physicians or healers, particularly the hereditary physicians, and form their own separate identity. The first and foremost step was when the Confucian physicians interpreted the term “three generations” (sanshi 三世) in the passage “one should not take any medicine which does not come from three generations” to mean “the three traditional medical
classics” rather than “a family with at least three generations of experience in medical practice,” which is how “three generations” was interpreted by hereditary physicians. This new interpretation indicated that Confucian physicians were attempting to create an identity that was associated with classical learning and medical expertise based on classical training.

In the absence of state regulations, the categorization of different types of physicians and the ascendancy of the Confucian physicians as a professional group was mainly achieved through labelling, defining the qualifications of an ideal physician, and moral restraints. The effort at categorization indicated the supremacy of Confucian ideas in medicine and expressed the Confucian physicians’ efforts to exercise control over the membership of their group, and dominating and controlling the ranks of their own fraternity. Reputation based on the efficacy of the treatments played a major role in evaluating and regulating the practice of medicine. Chao explores the process of demarcating the boundaries of inclusion and exclusion and establishing the criteria of legitimacy. Meanwhile, the publication of medical works contributed to the dissemination of medical knowledge and the creation of a network of literary communication among scholars and physicians, which extended their professional and social influence and facilitated the formation of group consciousness and a sense of community and identity among the Confucian physicians. She argues that the Confucian physicians in late imperial Jiangnan created a professional identity through cultural and social strategies rather than institutional or legal means.

Though the state was absent from the rise of the professional identity of Suzhou’s Confucian physicians in terms of explicit institutional and legal controls over their medical practice, the state in late imperial China did nevertheless exert symbolic and moral control over medical knowledge and the practice of medicine. This was accomplished through sponsoring publications, setting up charitable pharmacies, providing medical relief during epidemics and patronizing the recognized orthodox tradition of temple worship. By analyzing the dynamic relationship between the ritual worship of the Three Emperors and medicine as defined by each dynasty, Chao argues that the Three-Emperor Temple (sanhuangmiao 三皇廟) was a space in which the lines of medical orthodoxy, popular medical beliefs and practice, state power and legitimacy, and local elite activism interacted.

By focusing on Confucian physicians in Suzhou, this book presents the dynamics of change and transformation in the medical landscape of late imperial China, before Western missionaries introduced modern medicine there. Chao illustrates the interrelationships between medicine and the economic and cultural developments of the region, the networks of physicians and literati, and the layered relationships between state and local practices. Chao’s work reveals the rise of a particular medical pro-
fession and the specialization and transmission of medical knowledge in China during the Qing Dynasty. Her work makes important theoretical contributions in terms of the evolution of interpretations of the “three generation” (sanshi) concept found in classical medical texts, as well as the changing relationship between the Qing state and the Three-Emperor Temple in late imperial China.