Ding Fubao and the Morals of Medical Modernization

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** Abstract:** This paper surveys the life and medical activities of Chinese scholar, physician, and translator Ding Fubao 丁福保 (1874-1952). Ding’s career as an early adopter and translator of scientific medicine, and as a broker between western-trained physicians and reform-minded practitioners of Chinese medicine, affords rare insight into both the promise and the shortcomings of western-style medical modernization. In particular, Ding’s experiences illustrate the ways in which illness and healing remained closely associated with moral virtue, even in the mind of this most committed modernizer. Through Ding, we can examine the growth of modern professions in China and the struggle to achieve any kind of professional monopoly on practice; the huge influence of Japan on China’s modernization, and aspects of the relationship between culture and scientific change.

**Introduction**

The history of modernization in areas outside of Europe and North America is a controversial one because of the assumptions that are often built into research on the subject. For most historians from the West, modernity has been seen as a desirable concept and set of values originating in the Enlightenment, so that histories of modernization in other parts of the world naturally have tended to focus on how ‘their’ less modern society was made to more closely resemble ‘ours.’ In Chinese
history, western and Chinese historians alike have accordingly privileged the views of a generation of modernizers who came of age in the early twentieth century and were instrumental in establishing modern institutions in China: the “May Fourth generation.”

The scientific-educational, political, and social reforms promoted by this generation attempted a simultaneous rejection and eradication of unscientific and conservative elements of Chinese life. Chinese folk medicine was particularly vulnerable in this regard because of its many superstitious practices, lack of professional or government standards, inattention to hygiene, and ignorance of modern anatomy, physiology, and disease causation. All of these characteristics were held to be signs of backwardness in terms of social and civilizational development.

Such criticisms were enough to condemn Chinese medicine to eradication in the minds of the leaders of the May Fourth movement. Interestingly, even supporters of Chinese medicine agreed that these were serious shortcomings, but instead of wanting to eradicate Chinese medicine, they were more interested in assimilating the modern medical knowledge necessary to reform Chinese medicine, thereby making it rational and scientific enough for a modernizing China. That is to say, both abolitionists and reformers agreed that scientific standards were necessary in medicine: where they differed was whether, and to what extent, Chinese medicine could be made modern.

The “May Fourth generation” is named after the protest movement sparked on May 4th, 1919, when Chinese delegates to the Paris Peace Conference at Versailles after World War I failed to secure the return of the Shandong Peninsula to Chinese sovereignty after the formerly German concession had been taken by the Japanese during the war. It spread into a far-reaching critique of China’s sources of weakness on the international stage, which included traditional medicine alongside such varied culprits as the cloistering and foot binding of women, the use of classical Chinese in publications, the lack of physical education in schools, and a general ignorance of scientific and rational principles. It overlapped with the New Culture Movement, which began these criticisms in the decade before 1919. May Fourth generation reformers are credited with establishing the modern education system in China, along with modern literature, the modern press, modern financial institutions, modern professions, and so on, and so present an ideal subject choice for historians in search of teleologies of the present. There are literally dozens of studies and biographies of the leaders of this movement, who included Hu Shih, Lu Xun, Fu Sinian, Chen Duxiu, Guo Moruo, Qu Qiubai, Cai Yuanpei, among many others. For an overview and guide to this extensive literature, see the introduction in Chow 2008. For a recent history of modern China which takes the May Fourth Movement as its leitmotif, see Mitter 2005.
These observations mesh with many more recent studies of modernization that emphasize the ability of local populations to create hybridized forms of modernity, in which “[S]o-called traditions no longer imply a contrast with modernity, as they did in modernization discourse or the domain of backward-looking conservatism … but are invoked increasingly to establish claims to alternative modernities (only rarely, to alternatives to modernity).”

Prasenjit Duara has offered an explanation—or rather, a culprit—for the dominance of this discourse of modernity: the nation-state, the assumed subject of most post-Enlightenment history-writing. The nation, as bearer of culture and existing in social-Darwinist competition with other nations, requires a teleological history demonstrating the continuous progression of its citizens towards actualization as self-conscious, rational moderns. This narrative, Duara argues, provided western nations with a justification for the imperialism of the late nineteenth century: “Social Darwinism represented a … discourse of History, nation, and race in which the only justification for nationhood was whether a race … could be shown to fit in with or advance Historical progress.”

Given the power relations of the late nineteenth-century high tide of imperialism, it is not surprising that the uncompromising modernizers of the May Fourth era became heroes, celebrated in all accounts of Chinese modern history for their attempts to make the Chinese ‘race,’ Chinese culture, or both fit for survival. However, their views were at the extreme end of a spectrum, their narratives correspondingly simplistic and teleological. In this paper, I want to examine how the demands of the new, nationalist modernism played out in the life of someone usually considered a cultural conservative, someone caught between loyalty to both the culture and the power structures of imperial China, and the imperatives of science and modernity. His story illustrates many of the challenges and inconsistencies of the project of modernization in the service of the new nation-state.

Ding Fubao 丁福保 (styled Zhonghu 仲祜, 1874-1952) was a crucial figure in the adoption of modern medicine in China. Classically trained, he began to study mathematics and medicine even before the abolition of the imperial civil service examination system in 1905. Between 1909 and 1921, he translated, collated and published at least 83 medical titles, the majority

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2 Dirlik 2005, p. 10.
He also contributed to almost all of the medical journals of the time, so that his writings dominated the early twentieth century market for information about modern medicine. His output was so prodigious that it eclipsed the fifty-plus years of missionary effort to create a terminology for translating modern medicine into Chinese: with Ding’s translations and publications, Japan became the main source for modern medical terminology in China.\footnote{Even by his own accounts, the total numbers of medical works Ding produced vary. In Ding 1948, p. 55, the figure 83 is mentioned, but a running total of the numbers of medical books published annually in Ding’s publishing ventures, as recorded in Ding 1937 gives the larger number of 95 titles. The figure of 83 may refer to the titles published as parts of Ding Fubao’s Medical Compendium (Dingshi yixue congshu 丁氏醫學叢書), the remainder being works and translations by other authors published by him.}

In addition to writing and translating medical works, Ding established his own publishing company in Shanghai, an enterprise which made him rich enough to become a major philanthropist in his hometown of Wuxi 無錫. This is a reflection of the social fluidity of the early twentieth century in China—the treaty ports and the rise of print culture gave former literati new opportunities in the business world, contributing further to an erosion of the class differences between scholars and merchants.

Ding Fubao never earned an MD degree in spite of his prodigious medical output, and he is better remembered today for his publications in the classical tradition. Four of his publications became standard reference works in their fields; within classical scholarship, there are his *Collected Glosses on the Shuowen Dictionary* (Shuowen jiezi gulin 説文解字詁林, 1928) and his *Collected Poetry of the Han, Three Kingdoms, Jin, and Northern and Southern Dynasties Periods* (Quan Han, Sanguo, Jin, Nan, Beichao shi 全漢三國晉南北朝詩, 1916). Ding also became a devout Buddhist and a participant in the lay Buddhism movement that was popular across East Asia at the time. As his contribution to this movement, he translated and published a multi-volume *Encyclopedic Dictionary of Buddhism* (Fojiao da cidian 佛教大辭 典, 1921) from Japanese, thereby adding to the burgeoning market in all kinds of reference works for readers who did not have the benefit of long, apprentice-style educations. He was also interested in Daoism, and published an accessible compilation of significant texts from the monumental Ming Dynasty *Daoist Canon* as the *Daozang jinghua lu 道藏精華錄* (Essentials of the Daoist Canon) in 1922. Ding also collected coins as investments (an appropriate response to the hyperinflation of the 1930s), and in 1940 he published a guide to Chinese numismatics, the *Illustrated...\footnote{For the history of the creation of a modern medical terminology in China, see Luesink 2012.}
Guide to Ancient Coins (Lidai guqian tushuo 歷代古錢圖說), which is still the standard reference even today, and was most recently reissued in 2006.6

Ding’s life is more than a tale of extraordinary energy and virtuosity. Through him, it is possible to see many of the social and economic changes and contradictions of the late Qing and Republican era. In particular, Ding’s experiences give a rare insight into both the promise and the shortcomings of western-style medical modernization. Ding’s experiences illustrate the ways in which illness and healing remained closely associated with moral virtue, even in the mind of this most committed modernizer. Through Ding, we can examine the growth of modern professions in China and the struggle to achieve any kind of professional monopoly on practice; the huge influence of Japan on China’s modernization, and aspects of the relationship between culture and scientific change.

A Note on Biographical Sources

Much of the surviving information about Ding’s life and work is contained in his own writings. In addition to his many translations and publications in medical periodicals, the main sources of information concerning his personal activities are his autobiographical works. Principal among these are his Autobiography of the Lay Buddhist of Mathematical Mysteries (Chouyin jushi zizhuan 畈隱居士自傳), published in Shanghai in 1948 (hereafter Autobiography), and the Annalistic Autobiography of the Lay Buddhist of Mathematical Mysteries (Chouyin jushi ziding nianpu 畈隱居士自定年譜), Shanghai: c.1937 (hereafter Annals).7

Autobiography, like biography in China, was a genre of history-writing. By long-established convention, biographies included only externally verifiable facts, used in such a way as to be either exemplary or cautionary. The autobiographer’s inner world was excluded because it is unverifiable. Poetry was the form in which such private thoughts could decently be expressed.8 Ding’s Autobiography follows this model closely, recording events with a minimum of discussion, and omitting any personal detail. The Autobiography does record some of Ding’s poems, however, and it is in these that we learn of his distress at the fall of the Qing Dynasty in 1911.

The ‘annalistic’ form of autobiography (nianpu) was an accepted method of recounting the public and official aspects of a life. It was not considered

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6 Ding 2006.
7 The Annals also exists in a slightly different published version of c. 1930, which I have used to supplement the later version. Shorter versions also appear at the front of some of his other works.
8 Wu 1990.
formal biography, so events for which the author was the sole authority could be included. The function of the annalistic (auto-) biography as the public record of a prominent career meant that personal feelings and perceptions were excluded from this form, too. Its use at the front of books was a fairly common means for authors to introduce themselves to their reading public, though Ding’s are unusually long. It is likely that this rather exaggerated use of the annalistic autobiography was related to the social upheaval of the period—Ding was using the story of his classical and modern education and high-level political connections to assure readers of his credentials in the absence of mechanisms for acquiring formal (state or professional) qualifications.

Ding did assume a more direct and personal style in some of his works, the most striking of which is a popular work about tuberculosis, written in the voice of the bacteria who are conducting a war on humans. Several of the attacks by the bacteria in this book are on a “mathematics teacher” and his family, obviously Ding himself. It is in this work that Ding reveals personal details, such as his stormy relationship with his wife. Thus, the narrative conceit of the bacterium-as-narrator allows Ding to discuss intimate matters that would have been inappropriate in any of the formal biographical genres of Chinese literature.9

Beyond Ding’s own writings, newspaper articles, exchanges of letters reproduced in the medical press, and the reciprocal writing of prefaces for each other’s works allows a fair picture to be constructed of the networks within which Ding operated.

Evidential Research Methods as Training for Modern Science

Ding Fubao was the second son of a family of minor officials in Wuxi, Jiangsu province. After studying at home, both he and his elder brother were able to attend the local academy in Wuxi, Ding starting there at the age of 15, and by the age of 21 he had been accepted at the prestigious Nanjing Academy (Nanjing shuyuan 南菁書院) in nearby Jiangyin 江陰, a school of ‘evidential scholarship and literary style.’ The Academy had been established in 1884 with the help of the prominent self-strengthener and then governor of the Liangjiang provinces, Zuo Zongtang 左宗棠. On the Nanjing Academy, Bastid notes that “The scholars who taught there … were among the most brilliant of their time. Instruction in literary and scientific studies was given (the academy possessed an observatory).”10

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9 Ding 1916.
So, in the late Qing, precise literary scholarship of the ‘evidential research’ school and instruction in mathematics and astronomy were already linked. In 1887 mathematics was included in the civil service examinations as a specialist option. Although few candidates seem to have been examined in it, the examination certainly gave this branch of western learning official legitimacy.\textsuperscript{11}

In 1896, Ding took and passed the first degree in the imperial civil service examination system, the district examinations, earning the title of shengyuan 生員. The next year, he added the study of mathematics to the traditional canons and histories. Later in 1897, both Ding Fubao and his elder brother went to Nanjing city to sit the provincial civil service examinations. After an absence of about two weeks, they returned to find that their father, who had been suffering from tuberculosis (and Ding uses the modern Japanese-coined term fei jiehe 肺结核 for this specific disease), had died during their absence. As a mark of filial respect, Ding decided never again to sit for the imperial examinations.\textsuperscript{12}

This decision not to retake the civil service examinations was less of a change of career direction than it might appear. Barry Keenan notes that there were over 53,000 holders of the shengyuan status in Jiangsu province alone in the years between the suppression of the Taiping Rebellion in 1864-1865 and the end of the century. Of these, only 87 were admitted to second degree status (‘provincial graduate’ or juren 舉人) every three years. As Keenan notes: “The remainder were left as a rural intelligentsia naturally interested in educational innovations or management opportunities that could utilize its talents.”\textsuperscript{13} Ding also married the same year, and his decision to abandon the very expensive pursuit of a bureaucratic career may also have been influenced by the need to support a family without the assistance of his father.

The institutions of the Self-strengthening Movement of 1865-1895, such as the Jiangnan Arsenal in Shanghai and its associated Translation Bureau and Polytechnic Institution, represented an alternative route to employment to the graduates of the many new academies of post-Taiping Rebellion Jiangsu province. This emphasis on alternative employment outside the traditional bureaucracy is reflected in the fact that several local academies refused to teach the ‘eight-legged essay’ genre that was required of examination candidates. This essay style came to be (rather unfairly) blamed for constricting students’ thought and preventing a rapid response to western knowledge systems and imperialism.\textsuperscript{14} Certainly, China’s defeat

\textsuperscript{12} Ding 1937, p. 10A.
\textsuperscript{13} Keenan 1994, p. 499.
\textsuperscript{14} Keenan 1994, p. 502; Elman 2000, pp. 582-604.
in the 1894-1895 Sino-Japanese War had convinced many in the literate classes that China needed to emulate the military and political modernizations of Meiji Japan.

In 1898, Ding took a job as a teacher of mathematics at the Sishi xuetang 俟實學堂 (‘Await Results’ School) in order to support himself, with an annual salary of 160 yuan.15 His mathematics teacher from the Nanjing Academy, Hua Shifang 華世芳 (1853-1904), was the younger brother of the famous late Qing mathematician and popularizer of western mathematics Hua Hengfang 華衡芳 (1833-1902), and also a native of the Wuxi area of Jiangsu province. Hua Hengfang had co-founded the Jiangnan Arsenal in 1865, where he translated many books on western mathematics, including some of the most accessible and widely-read texts of the period. His approach was to explain and describe traditional Chinese mathematical techniques, including algebra, and proceed from them to a treatment of western algebra and the calculus. In this way he succeeded in making western mathematical techniques accessible and relevant to his classically-educated readership.16

The following year, 1900, Ding made his first two entries into this market for books on the new sciences: the first of these built on his training in modern mathematics. Called An Annotated Bibliography of Mathematics (Suanxue tiyao 算學提要) it used the familiar format of the famous catalogues to the eighteenth-century encyclopedia Complete Collection of the Four Treasuries (Siku quanshu 四庫全書) to describe the contents of traditional mathematical works in modern terms. At the same time, he forcefully rejected the popular idea that Chinese texts contained the equivalents of modern mathematics.17

His other 1900 publication, Questions and Answers on Hygiene (Weishengxue wenda 衛生學問答) was republished in 1905 as a textbook for the new school system after the abolition of the civil service examinations in that year. The word weisheng 衛生 (‘hygiene’) of the title of this primer was a mapping of an ancient term, ‘guarding life,’ that referred to a lifestyle in harmony with the cosmos. To ‘guard life’ in the classical literature was to rise early, eat and drink in moderation, avoid excess of work and sex, and mirror the changing seasons in matters of dress, exercise, and daily routine. It also involved adjusting the diet to anticipate and correct seasonal excesses of heat, cold, drought and dampness, as well as to rem-

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15 Ding 1937, p. 10A.
16 Horng 1993. Hua’s more famous colleague, Li Shanlan, had also used this eclectic approach in his earlier publications on western mathematics, and this approach had been followed in the late Qing academies, such as Nanjing. See also Luo 1985.
edy the *yang* inner heat of adolescence or the *yin* cold of old age. When these factors produced disease, taking the appropriate medicines was also part of *weisheng*—though it would be hard to say where the line between lifestyle and dietary modifications and medication lay. Ding’s version of modern *weisheng*, by contrast, was to use nineteenth-century sanitary and dietary theory from the West to advocate for a lifestyle and regimen most beneficial to health, which is how ‘hygiene’ was understood then. (The word ‘hygienic’ in modern English now means something more like ‘clean and germ-free,’ which is a narrowing of its earlier sense in both western literature as in Chinese, of ‘the art of preserving health.’) So starting from these very first publications, Ding’s agenda was to teach the new western knowledge on the basis of a solid understanding of existing Chinese scholarship.

Towards the end of 1900, Ding visited Shanghai where his mathematics teacher, Hua Shifang, introduced him to a cousin, who turned out to be a major figure in determining Ding’s future career. Zhao Yuanyi 趙元益 (1840-1902) was not only a provincial graduate, and therefore a prominent classical scholar, but had also studied both Chinese and western medicine, and had accompanied the Chinese minister Xue Fucheng 薛福成 (1838-1894) on a diplomatic tour of Europe in 1888. Zhao had even visited famous German bacteriologist Robert Koch’s laboratory while on this trip. On his return to China, Zhao worked at the Jiangnan Arsenal in Shanghai, collaborating with John Fryer (1839-1928) and Alexander Wylie (1815-1887) in translating western medical textbooks. Since Zhao Yuanyi, his cousins the mathematicians Hua Hengfang and Hua Shifang, Ambassador Xue and Ding Fubao all came from the Wuxi area in Jiangsu Province, it is evident that Ding’s career was highly dependent on his native place network. These connections sent him firmly in the direction of the new, western sciences.

In 1901, Ding left his job at the Await Results School and enrolled briefly at Suzhou University in Shanghai (run by the American Southern Methodists), until his tuberculosis forced him to leave. Zhao Yuanyi invited...

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18 Rogaski 2004, pp. 21-47.
19 Zhao 1991. Zhao Pushan quotes Ambassador Xue’s diary to the effect that he sent Zhao Yuanyi and an interpreter to Berlin to learn about Koch’s new vaccine against tuberculosis. See also Li 1988, p. 616. The Jiangnan Arsenal was founded in 1865 by the leading scholar-official Zeng Guofan, with the support of Viceroy Li Hongzhang, perhaps the strongest supporter of learning western science and technology at the Chinese court. By 1867, Zeng Guofan had persuaded the Empress Dowager to allow the Arsenal a full 20% of the foreign customs revenue, 10% of which was to be used to build steamships for China’s defense. See Teng and Fairbank 1954, p. 64.
ted him to live with him and study western medicine while recuperating. As a result of these connections Ding was able to enroll at the Jiangnan Arsenal Polytechnic Institute (Jiangnan zhizaoju gongyi xuetang 江南製造局工藝學堂) to study chemistry. Ding’s pride at his association with the prestigious Jiangnan Arsenal is evident in Figure 1, where he is pictured in the anatomy laboratory, in naval uniform, posed next to the anatomical models. The same year he passed the first entrance examination for a new School of Japanese (Dongwen xuetang 東文學堂) set up in Shanghai by the prominent government official and industrialist Sheng Xuanhuai 盛宣懷 (1844–1916), who was then at the height of his powers. Sheng’s patronage was to be influential in the development of Ding’s future career. Taking advantage of his preparation for this exam, Ding published Questions and Answers on Japanese Literature (Dongwendian wenda 東文典問答), which sold very well in this period of Chinese enthusiasm for copying the Japanese route to modernization. The same year, Ding named his new-born eldest son Yongkang 永康, meaning ‘Ever-healthy,’ reflecting his on-going concern with the health of his family.

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20 Sheng, also associated with the ‘self-strengthening movement,’ and the inventor of the ‘official supervision and merchant management’ formula for China’s early industrial enterprises, had just been awarded the upper second rank in the imperial bureaucracy and the title of junior guardian of the heir apparent in recognition of his role in keeping South China out of the Boxer uprising in 1900. See Feuerwerker 1958, p. 72.

21 Ding 1937, p. 15A.
Figure 1. Photograph of Ding Fubao, dressed in naval uniform, in the anatomy laboratory of the Jiangnan Arsenal Polytechnic Institute, around 1901-2. Taken from the front matter of Ding 1921.

Ding started at the School of Japanese in 1902 and opened an office he called the ‘Sino-Japanese Library’ (Ri-Qing shuguan 日清書館) to carry out his editing work in collaboration with two friends. However, his book business brought in only enough for him to save only a disappointing 300 Mexican silver dollars in 1902.²² Probably because of his worries about

²² Ding 1937, p. 16A.
money and recurring financial embarrassment, Ding accepted an invitation to teach at the translation bureau of the new Metropolitan University in Beijing 京師大學堂 for a monthly salary of 100 yuan. The Metropolitan University was established as part of the New Policies (xinzheng 新政) of 1901-1911, an ambitious modernization program initiated by the Qing court after the humiliation of the Boxer Rebellion and its defeat by western forces in 1900. Ding taught mathematics and physiology from 1903, but resigned in 1905, returning first to Shanghai, and then to Wuxi. He counted the benefits of his stay in Beijing to be the 4000 yuan he had earned, the good relations he had established with his students, and the fact that he had managed to secure posts at the University for three other Wuxi scholars. This time, Ding was acting as a patron of the native-place network, where before, he had been its beneficiary.

Back in Shanghai in 1908, Ding raised capital to start a new publishing house, the Medical Bookstore (Yixue shuju 醫學書局). Some of his early publications, such as Ancient Prescriptions for Today (Gufang tongjin 古方通今), The Contents of Medical Works Through the Ages (Lidai yixue shumu 歷代醫學數目), A Survey of the Inner Canon and the Canon of Difficult Issues (Neinanjing tonglun 內難經通論), A Survey of the Treatise on Cold-damage (Shanghan lun tonglun 傷寒論通論), Biographies of Famous Physicians Through the Ages (Lidai mingyi liezhuan 歷代名醫列傳), and The Medical Section of the Annotated Catalogue of the Four Treasuries (Siku tiyao yijia lei 四庫提要醫家類), suggest that Ding still had a strong interest in the classical medical tradition. He also began work as a medical doctor, but with limited initial success — after several months he had only saved 30 yuan from his medical practice. At this time, there were no restrictions on medical practice: anyone could prescribe remedies for whatever fee they were able to command. In Ding’s case, that was not much, though his luck was about to turn.

In 1909, the Manchu governor-general of Liangjiang 長江 (the two lower Yangzi provinces), Duanfang 端方 (1861-1911), picked up on a previously unenforced clause in the Qing legal code to the effect that anyone

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23 For an account of this period in the context of Sino-Japanese relations of the period, see Reynolds 1993.

24 The Translation Bureau of the Metropolitan University was the continuation under a different name of the old Tongwen Guan 通文官 or School of Foreign Languages, founded in 1863. Both were damaged and forced to close during the Boxer Rebellion of 1900, and Ding Fubao’s invitation coincided with the reopening of the University as part of the Qing government’s New Policies reforms and the transfer of the Tongwen Guan’s functions to the University’s Translation Bureau. See Biggerstaff 1961, pp. 94-139.

25 Ding 1937, p. 17B.

26 Ding 1937, p. 19A; Zhao 1990, pp. 248-249.
practicing medicine without an official license could be fined up to 500 yuan. He decreed that medical licensing examinations should be held for all practicing physicians in the region. The fact that graduates of foreign medical colleges did not need to attend reveals that the intent of the new examination was to provide modern credentialing for Chinese doctors.\footnote{27} Candidates in his medical exams were graded into one of five classes; the achievement of one of the top three grades merited a license to practice; candidates who achieved the fourth grade were allowed to study and retake the exam later, and those who fell into the bottom grade were disqualified from practicing medicine altogether.\footnote{28}

The examination questions were remarkable for the fact that they demanded considerable knowledge of western medicine in addition to a solid grounding in the classics of Chinese medicine. Ding took the exam, and characterized the gist of the questions as:

1. Describe the advantages and disadvantages of Chinese and western pulse-taking.
2. Describe the similarities and differences between Chinese and western pharmacy.
3. Discuss the use of anesthetic drugs in ancient times. [An invitation to describe Han dynasty surgeon Hua Tuo’s 華佗 apocryphal invention of an anesthetic powder].
4. Discuss the properties and uses of X-rays. [In its full form, this question referred to Hua Tuo’s legendary ability to see through bodies to detect illness, and asked for a comparison with modern X-ray technology].
5. Discuss Chinese and western needling techniques.
6. Discuss the cause and treatment of rat-borne plague. [The association of bubonic plague with rats appeared much earlier in Chinese texts than western ones, so this question plays to Chinese scientific and nationalistic pride].
7. Discuss the character cong 愚 in the context of the theory that consciousness belongs to the brain. [An allusion to the discussion around whether the etymology of this ancient character for ‘brain’ implied that Chinese had the concept of the brain as the seat of consciousness, rather than the heart, as it was usually understood in Chinese medicine].\footnote{29}

\footnote{27} See Anon. 1908, pp. 16-17. The same issue of the Shaoxing yiyao xuebao reported the concern of the Bureau of Civil Administration (Minzhengbu 民政部) in Beijing over standards of medical practice there. According to the report, the Bureau was planning an investigation of medical standards in and around the capital. See ibid., p. 53.
\footnote{28} Ding 1937, pp. 19 A-B.
\footnote{29} Ding 1937, p. 19A. Ding reproduces all his answers in Ding 1948, pp. 32-48.
This examination is the first recorded attempt in China to actually enforce medical licensing on all practicing physicians in any area outside of the imperial bureaucracy. It preceded the formation of the Chinese National [Western-] Medical Association 中華醫學會 by seven years. Not surprisingly, some influential figures in the Chinese-medical world found it distressing. He Lianchen 何廉臣 (1861-1927, given name Bingyuan 炳元), one of the founding editors of the Shaoxing Journal of Medicine and Pharmacy (Shaoxing yiyao xuebao 紹興醫藥學報), a friend of Ding Fubao’s and co-vice president, with Ding, of the Chinese Medicine Society, wrote in the front page editorial of issue 3 of 1908:

The greatest pity in all this is that those [practitioners] who have diagnosed many [patients], and whose experience is refined and profound, or whose manual skills are precise and skillful, but who are unable to express themselves in writing, will on this account fail the exams and so the government will stop them from practicing.

He Lianchen used the social-Darwinist terms coined by Yan Fu 嚴復 (1854-1921) to compare the examination to a violent struggle for existence, in which ‘the superior vanquish and the inferior perish,’ and urged his colleagues to boycott the examination. This shows that in 1909, there was as yet no consensus that Chinese medicine would have to be upgraded and standardized among its elite practitioners. It also demonstrates that Chinese physicians were very much aware that attempts to control their practice were about power relations and the creation of a larger market for western medicine.

On the other side of the debate, Cantonese revolutionary activist and graduate of the first school of western medicine to be entirely run by Chinese, Chen Yuan 陳垣 (1880-1971), blasted the examinations, because without state provision of a uniform and regulated medical education system, the examination certificates were meaningless.\(^{30}\) For Chen Yuan, western medicine was an essential tool of modern government that China needed in order to abolish extraterritoriality and regain both national sovereignty and health and prosperity for its people. This would not be possible unless Chinese doctors were trained to the same standards as western medical graduates—so Duanfang’s examination represented a compromise that would satisfy no-one, and certainly wouldn’t persuade foreigners that Chinese license-holders were up to international standards in medicine.

Ding came top in this examination, and this result and his model answers were reported widely in the medical journals of the time. (It is likely that the questions were set by Ding’s friend Zhao Yuanyi, although

\(^{30}\) Chen 1909, pp. 181-191.
this is just a speculation.) As a result, governor-general Duanfang decided to reward Ding by sending him to Japan to report on the medical reforms that had been instituted there since the start of the Meiji Restoration in 1868. He was instructed to report on medical legislation, the training of doctors, the organization of medical schools, and the use of Chinese herbal drugs. In addition to this, Sheng Xuanhuai gave him a letter of introduction to the Chinese Ambassador in Japan, instructing him to give Ding 1,000 Japanese yen for books and western drugs.

On arrival in Japan, Ding was met by a group of Wuxi natives who took care of him during his visit. Ding published a summary of his findings in a travel diary and in the Medical News (Yixue bao 醫學報) of 1909, but his official reports of the five-week study trip attracted little official attention. His patron Duanfang had been transferred to the post of governor-general of Zhili 直隸 (the area of ‘Greater Beijing’), where he was soon dismissed from office for being disrespectful enough to take photographs of the Empress Dowager’s funeral procession.31

Ding’s experiences in Japan made him into a supporter of the westernization of medicine in China. On the very day of his return to Shanghai from Japan, he wrote to He Lianchen that:

Most doctors in the [Japanese] capital look down on Chinese medicine, but all of them welcome Chinese-medical drugs. Their investigations of Chinese-medical drugs are in scientific terms and not in terms of yin and yang and the Five Phases. Although Chinese drugs really have excellent materials [in them], yet their true qualities have often remained hidden beneath erroneous theories.32

Not all of Ding’s colleagues were prepared to accept Chinese-medical theories as erroneous. Things came to a head later in 1909 in a dispute over the editorship of the Medical News.33 Ding and his colleague He Lianchen decided that the News should be edited by a student of Ding’s, Gu Mingsheng 顧鳴盛, in place of the existing editor, Wang Wenqiao 王問樵, who was a student of Cai Xiaoxiang 蔡小香 (1863-1913), the Chairman of the Chinese Medical Society (Zhongguo yixue hui 中國醫學會), of which they were all members. One of the stated aims of this Society was the reform of Chinese medicine along scientific lines, and the Medical News was its official publication. This was not just a trial of political strength, but also an issue of editorial principle. Ding insisted that the reform of Chinese medicine necessitated abandoning most Chinese medical theory, and concentrating on the scientific analysis of Chinese drugs, while Cai and

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32 Ding 1909, p. 18.
33 See the Shenbao of May 16, 1910, p. 13, and Zhao 1989, pp. 77-81.
Wang accused Ding and Gu of slavish copying of foreigners. Wang also pointed out that in view of the scarcity of physicians who had had adequate instruction in both systems of medicine, Ding was advocating the impossible. Unable to settle the issue amicably, the two sides eventually took their cases to the Shanghai magistrate, who decided against Ding. This was in 1910, by which time Ding had already established his own association, the Sino-western Medical Research Association (Zhong-Xi yixue yanjiu hui 中西醫學研究會). He promptly made Gu Mingsheng editor of the new society’s journal, the Journal of Sino-western Medicine (Zhong-Xi yixue bao 中西醫學報), withdrawing his considerable financial support from the Medical News, which folded shortly thereafter.\(^{34}\)

By contrast, Ding’s new association quickly attracted several hundred members. Ding’s personal prestige was high, partly because he had taught at the nation’s foremost academy, the Metropolitan University, and also because of the publicity surrounding his success in Duanfang’s medical exam. There was no lack of an audience for Ding’s views on how to make Chinese medicine scientific. However, the supporters of an intact Chinese medicine continued to regard Ding with great suspicion, and the Nanjing Medical Association (Nanjing yixue hui 南京醫學會) even went so far as to make a resolution to have no dealings with him.\(^{35}\)

In 1911, Ding noted the fall of the Qing to the Revolutionary armies, and that he, too, “cut off his queue.” In fact, the Revolution was a potential disaster for Ding, since he owed his success to the patronage of the two prominent Qing officials Sheng Xuanhuai and Duanfang. Duanfang was killed in 1911 on his way to Sichuan to try to quell the rebellion there. Ding expressed some of his feelings at the change in a poem entitled ‘Autumn feelings:’

> Things of the past cause me so much pain
> I cannot bear to look at the tattered banner
> Swords and spears penetrate the whole world
> Where is Chang’an?\(^{36}\)

\(^{34}\) Notice that the term ‘Sino-western’ (Zhong-Xi) in the names of Ding’s society and its journal mirror the common Chinese term of this period for the western medicine practiced in Japan, ‘Eastern-western medicine’ (Dong-Xi yiyi).

\(^{35}\) Zhao 1989, p. 80.

\(^{36}\) Chang’an was the imperial capital for most of the period from the unification of China in 221 BC to the An Lushan Rebellion during the Tang dynasty, in 756 AD. Ding is therefore saying that he doesn’t know where to place his political loyalties. See Ding 1948, p. 14.
Hygiene and Capitalist Modernity

In fact, from the beginnings of the New Policies era (1901-1911), Ding had been actively seeking ways to make money from his education in modern science. The fall of the Qing, and with it his hopes of an official position, made him all the more determined to make his fortune in business. So, in addition to promoting his translations of modern medical texts in the pages of the new medical journals of the day, and also regularly buying advertising space for them in the Shenbao 申報, Shanghai’s major newspaper, Ding started to engage in some more questionable money-making endeavors.

In 1910 and 1911, repeated advertisements for Ding’s drug preparations appeared in the Shenbao. The first, “Pinellia Anti-phlegm Pills” (banxia xiaotan wan 半夏消痰丸), claimed effectiveness for all kinds of disease-related phlegm and the increased phlegm of old age. It claimed to thin the secretions of the bronchial tubes, improve night-time coughing, improve asthma related to diseases of the lungs and heart, and could be used to treat bronchitis, tuberculosis, whooping cough, influenza, pneumonia, and pleurisy. Each bottle cost the large sum of one customs (dayang 大洋) silver dollar. The second, “Refined Blood-Supplementing Pills” (jingzhi buxue wan 精制補血丸), would supposedly cure all blood deficiency diseases, including jaundice and general weaknesses from illness, blood loss, chronic diarrhea, scrofula, or malaria. It also cured excessive lust! Like his other preparation, the price of a dollar a bottle seems to be at the upper end of the price range: by comparison, a tin of 50 cigarettes imported from London and advertised on the same pages cost only 50c.37

Much later, in 1943, a short biographical article in the Chinese journal Coins (Quanbi 泉币) praised Ding for having promoted cotton plant roots for lung diseases and agrimony for its heart-strengthening and blood-clotting effects because they were cheap and effective. Comparing this information with the advertisements for preparations for exactly these effects from the Shenbao of 1910 and 1911 suggests that Ding may have used these cheap herbs to make rather expensive drug preparations at a considerable profit.38

From 1912, the year of the establishment of the Republic of China, Ding immersed himself in his commercial publishing activities, the paucity of further references to government officials in his writings confirming the impression that his politics were no longer those of the ruling elite. He also started publishing a series of translations from Japanese called Ding’s Medical Compendium (Dingshi yixue congshu 丁氏醫學叢書). In the general

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37 See, for example, Shenbao 1910, 11th month 5th day (Dec. 6th), Shanghai edition, p. 1.
38 Zhongguo Yiyao She 1943.
preface, Ding explained that even after studying all the Chinese medical classics, from the *Yellow Emperor’s Inner Canon* to the four famous doctors of the Yuan, it was not until he studied western anatomy, physiology, hygiene (*weisheng* 衛生) and pharmacy that he was able finally to defeat his longstanding illness from tuberculosis. This experience clearly impressed Ding, who had already published four books on the treatment and care of tuberculosis by 1911. He also ascribed medical progress to medical specialization, observing that although Chinese medical books had many good insights, only the increased specialization that had come with modern science had enabled great progress to be made. In 1913, Ding entered his *Compendium* for two international competitions and won first prize in both Rome and Berlin. He had been able to use his knowledge of Japanese and of western medicine to achieve success and a certain amount of fame. His publishing activities had not only enabled him to survive in the absence of his former mentors, but they were also making him rich. With his increasing capital, Ding was able to build himself new houses in both Shanghai and Wuxi (with glass windows, he noted, with obvious pride), and employ many people in his publishing enterprise.

In 1914, when Ding was 40 (41 sui), he seems to have had a mid-life awakening. He wrote a note to himself on the back of a photograph, pointedly questioning whether he was capable of earning money without misleading people, without indulging in the slightest pretense, and without pursuing wealth, fine clothes, money, and sex. “Look at yourself,” he wrote, “are you more like a gentleman (*junzi* 君子) or a vile person (*xiaoren* 小人)?” Accordingly, from this point on, his philanthropic activities multiplied, and he also devoted himself to Buddhism and vegetarianism. In 1917, he gave up smoking and gave the 50 *yuan* saved from cigarettes to Longhua Orphanage, and in 1918 he began donating books from his enormous collections to various libraries, something that he repeated many times in the rest of his life.

Traditionally, this contrast between the *junzi* and the *xiaoren* was part of the moral code that was supposed to guide the practice of both Confucian officials and doctors. A *junzi*, or gentleman, concerned himself with the good of his family, community, and the nation, whereas a *xiaoren*, here translated “vile person,” was more concerned with personal gain. As we have seen, in the chaos of the final years of the Qing, and following the

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39 These are advertised in the *Zhong-Xi yixue bao* (17 1911), p. 2. There is an abstract of one of the books, *Feilaoing jiuhufa* 肺痨病救護法 (How to Save and Nurse Tuberculosis), published in 1911, on page 12 of the same issue.

40 This story was first published in an article in the June 1930 issue of *Liangyou*, then was reprinted in a special combined issue of *Mingdeng* (Beacon) and *Daosheng* (Sound of the Way) 明灯道声非常时期合刊, June 1939, pp. 29-30.
abolition of the civil service examinations, Ding’s hopes of achieving an official position during through his association with the Jiangnan Arsenal had been raised and then dashed by the Xinhai Revolution of 1911. Disillusioned by his years of struggling to earn a living, Ding had, in fact, spent the previous few years engaged in self-promoting commerce. What caused him to change direction and reemphasize the code of ethics of the *junzi*?

Henrietta Harrison’s article in this issue emphasizes how the Confucian scholar she studied, Liu Dapeng, often viewed disease as a punishment from heaven for sins. In his educational tract written from the point of view of tuberculosis bacteria, *Consumption-worms’ War Diaries* (*Laochong zhanzheng ji* 嚬蟲戰爭記), Ding Fubao relates the story of a mathematics teacher—clearly himself—who is infected by the “worms” of consumption as a consequence of his poor hygiene and bad habits of smoking, drinking, and visiting prostitutes. The teacher unwittingly passes on his tuberculosis to a student through licking a shared pencil, and is guilt-ridden as a result. Later, the bacteria invade one of the teacher’s testicles, which he has surgically removed, and then while recovering at home “heaven did not spare him,” and he infected his beloved two-year-old son, who died of tuberculous meningitis. His wife fell sick of pulmonary tuberculosis shortly thereafter, and the teacher was overcome with guilt. The story only gets worse: a wedding for one of their daughters is called off because the family of the betrothed is afraid they will be infected; an in-law who lives in the countryside falls ill with a lung fluke disease but because of the family history of tuberculosis, gets mis-diagnosed and dies, and so on. It is clear that Ding’s charitable activities to promote education about tuberculosis were partly motivated by a desire to atone for his deeply-felt guilt about spreading the disease.41

His evaluation of his guilt in these matters was shared by some in his community. Even though Ding’s ensuing frugality and commitment to vegetarianism, daily cold-water rub-downs, meditation, Buddhism, and his substantial philanthropic efforts, including donating his time as a doctor, often earned him praise in the local newspapers, occasionally some more critical evaluations were published. So, for example, in 1935 an article in the local press related how Ding’s eldest son Yongkang had developed a mental illness while still a schoolboy and never recovered despite his father’s attempts to bring in specialists.42 Another Shanghai newspaper in 1947 explained that not only did the eldest son suffer from a mental condition, but Ding’s youngest son had died as a child (the child he infected with tuberculosis), and both his daughters were gravely ill. Only the second son, Huikang, had escaped from inheriting ill-health. Small wonder,

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42 Xu 1935, p. 7.
the anonymous author concluded, that Ding Fubao had become a vegetarian Buddhist and philanthropist: he clearly would spend the rest of his life atoning for the sins he had visited on his family.\textsuperscript{43}

We see, then, that even though Ding pursued the establishment of modern medicine in China, publishing Japanese texts on modern medicine and sending his one healthy son to Germany to get a \textit{bona fide} medical degree, then building him a modern hospital to work in, Ding’s motivations were more complex than a simple belief in the superiority of modern medicine. He was initially persuaded to study modern medicine for the opportunity it seemed to offer for advancement within the New Policies government of the late Qing, and when that failed, he vigorously pursued its potential for income generation. His understanding of the germ theory of disease causation led him to a realization that he had been the vector of many cases of tuberculosis in his family, a fact he interpreted within a moral framework of responsibility and guilt that drew on both Buddhist ideas of karma and Confucian morals that suggested that greed and striving for personal gain at the expense of society would be punished.

\textbf{Ding’s Western Medicine}

Ding described himself as interested in any and all kinds of medicine as a result of his own frequent and long illnesses and the deaths from illness that he saw around him. When he first suffered a long illness in 1899, he read widely in the Chinese medical literature, and tried many remedies from them, all ‘in vain.’ In 1901, while recuperating from tuberculosis at Zhao Yuanyi’s house in Shanghai, Zhao instructed him in western medicine. Although, with hindsight, we may consider the therapies of the time to have been fairly ineffectual compared with modern antibiotic therapy for tuberculosis and other infectious diseases, to Ding the new therapeutic regimes and the bacteriological causal explanations were convincing. He, after all, recovered, whereas the pages of his biography reveal that he lost at least 12 family members to the same disease, including an infant son. Later, in 1933, Ding also started up a ‘Chinese lung disease study society’ in Wuxi, and gave out several thousand copies of his books and pamphlets on the prevention and treatment of tuberculosis.\textsuperscript{44}

In spite of his enormous personal influence in and around Shanghai, both in person and through his many translations from Japanese, Ding Fubao’s only formal qualification in western medicine remained the certificate he gained as a result of sitting Duanfang’s medical registration exam in

\textsuperscript{43} Anonymous 1947, p. 6.

\textsuperscript{44} Ding 1937, p. 70B.
1909. As Chen Yuan had noted so caustically at the time, this was insufficient to qualify Ding in the eyes of either foreigners or of the western-educated physicians of the day. Ding’s position within the medical world reflected this ambiguity. He remained a member of several associations of Chinese-medical physicians, while maintaining that most Chinese-medical theory was useless and should be discarded. In the preface to his 1911 translation of Wada Keijurō’s 和田啟十朗 (1872-1917) Iron Spear of the Medical World (Yijie zhi tiezhui 醫界之鐵椎, 1910), he wrote:

Western medical arts have not yet advanced to a state of completion; among China’s drugs and prescriptions there are some that surpass the westerners’. […] If we exert ourselves to the utmost to investigate Chinese drugs, there are bound to be new discoveries. These will enable western drugs to be replaced and illnesses to be cured that western medicine is unable to cure. These may justifiably be called discoveries of world significance.\(^{45}\)

For Ding, the ‘investigation of Chinese drugs’ referred to scientific investigation. In the editorial to the first issue of The New Voice of National Drugs (Guoyao xinsheng 國藥新聲) of 1939, Ding wrote: ‘For forty years I have been advocating that the synthesis of Chinese and western medicine must start from making Chinese medicine scientific.’\(^{46}\)

Ding’s book publications on the subject of the Chinese pharmacopeia emphasized this point. For instance, in his Simple Chinese Pharmacy 中藥淺說 of 1940, he classified herbal drugs under western rubrics (‘febrifugals,’ ‘diuretics,’ ‘analgesics,’ ‘stimulants,’ ‘antihelminthics,’ etc.), and included in each entry the alternative names of each herbal drug, their botanical descriptions, results of chemical analysis and their applications using SI units of measurement and western disease nomenclature.\(^{47}\) Ding’s attitude, like that of the Japanese researchers, was rather similar to pharmacognosists of today who regard the traditional pharmacopeiae of the world as so much raw material for analysis in their search for ‘lead compounds’ for the development of new western-medical drugs. This explains why the only Chinese-medical books Ding published after 1910 were either reference tools or pharmacological studies of the Chinese materia medica.

Ding Fubao also had his own clinic in Shanghai for many years, and an account of his clinical activities is preserved in a long preface to his translation of a Japanese Encyclopaedia of Modern Internal Medicine (Jinshi neike quanshu 近世內科全書, 1914). Contributed by a former director of the

\(^{45}\) Cited in Lu 1985.

\(^{46}\) Ding 1939.

\(^{47}\) Ding 1940. Ding published at least another five titles of this type, which are listed in his Autobiography of 1948.
prestigious Nanjing Academy in Wuxi where Ding had studied, Lu Jusheng 陸菊生, it records several consultations which Lu had observed. These short case records are interesting for the rare glimpse of the kinds of diagnostic tools and therapies used by western-medical practitioners at this time. As we shall see, the range of procedures Ding employed varied according to the educational and social status of the patient, showing that Ding’s spiritual awakening had not yet extended to treating all his patients with the same degree of compassion. The cases are summarized below:

[Case history 1]: Lu’s elder brother consulted Ding Fubao because the brother was fat, listless and impotent. On examining the brother’s urine, Ding found sugar, and diagnosed diabetes. He prescribed some drugs and forbade the patient from eating cereals and sugary foods, which should instead be replaced with animal food products. After several months of the drug and food regime treatment, the illness was cured.

[Case history 2]: Lu’s nephew, aged 12 sui, was suffering from swelling over his entire body, but particularly of the scrotum. Ding examined the urine, which contained protein, and diagnosed acute nephritis. He ordered bedrest and the drinking of only cow’s milk, and prescribed a strong purgative; the patient was cured.

[Case history 3]: A woman surnamed Li came to Ding with a painful abdomen. Ding examined her chest and examined her stool, in which he found fly larvae and eggs. He thought he could cure the painful abdomen, but since the lung extremities sounded waterlogged, he also diagnosed pulmonary tuberculosis, which was bound to deteriorate. After the abdominal pain was cured, the patient refused to believe she had TB, and the next year, sure enough, she died of it.

[Case history 4]: An old lady had headaches, vomiting and high fever. Ding examined her lymph glands and a blood sample, and diagnosed plague. He ordered her to go quickly to the Ministry of Works’ Infectious Disease Hospital, but she didn’t obey. The next day, she died, as did several of those who lived with her. This was the first news of plague in Shanghai.

[Case history 5]: Mr Zhou Xueqiao [1870-1910; founder of one of the first Chinese medical journals, the Yixue bao 醫學報 (Medical News), in Shanghai in 1904], was suffering from a stomach complaint, bringing up blood, and producing noxious sweat over his whole body. Ding diagnosed stomach cancer, and said that it should be operated on quickly, or it would be incurable. Mr Zhou was unable to reach a decision, and died two years later as a result.
[Case history 6] Mr Song Gengfu had a hacking cough and brought up blood. Ding introduced tuberculosis serum [i.e. Koch’s tuberculin] into his shoulder in the same way as one inoculates with cowpox [against smallpox]. About 24 hours later the shoulder showed a tuberculous reaction. Ding also examined his phlegm under the microscope, and found tuberculosis bacteria. Accordingly he diagnosed pulmonary tuberculosis. Using a combination of injected and oral drugs, in a little over 4 months he was completely cured.

Lu continued:

These few are all cases I saw and heard myself, and I marvel that none of today’s diagnosticians are up to Ding Fubao. [...] I saw that Ding Fubao’s treatments and methods are not recorded in the ancient books. So I questioned him minutely on the sources of his medical practices. Ding replied: ‘My treatment of ailments comes primarily from the Encyclopaedia of Modern Internal Medicine by Hashimoto Sessai 橋本節齋): I have no diagnoses or prescriptions that are not drawn from this book.’

Lu’s preface continues by mentioning the prizes that Ding’s Compendium had won in international competitions. Lu was wonderfully explicit in his praise for the methods transmitted by Ding Fubao: what he admired most was the consistency of the Japanese book, and its usefulness in generating precise diagnoses, even though fully half of these cases were fatal. What appealed was the standardized and accessible nature of the western medical approach, which promised control of disease even though it may not have been able to deliver cures.

**Ding’s Influence on Medical Terminology in China**

Even though Benjamin Hobson’s translations of western medicine were published in China (and pirated in Japan and Korea) from the 1850s, in 1935, medical historian Li Tao 李濤 (1909-1959) considered them too old-fashioned and limited in circulation to count them as the first medical textbooks in China. Instead, he counted Ding’s debut publications in 1909 as the first medical textbooks in Chinese. By 1935, Ding’s translations were slowly falling into disuse and being replaced by publications by the China Medical Missionary Association, the Commercial Press, and others. Nonetheless, of the 166 textbooks of western medicine listed as circulating

48 Reprinted in Ding 1937, pp. 32B-33B.
49 Li 1935.
at the time, 17, or ten percent, were still either written or translated by Ding Fubao.50

The Chinese Medical Association, formed in 1915, established a Terminology Committee to attempt to create a standard medical vocabulary in Chinese, and Ding Fubao attended its first meeting. Its subcommittees drew up tables of all the competing translations for various medical terms. Already by the early 1920s, the Committee was overwhelmingly choosing to endorse terminology that had come into Chinese from Japanese, that is, from Ding Fubao’s translations.51

The Japanese translation terms introduced by Ding were significant because they generally avoided the use of pre-existing medical terms from the classical medical literature. For the modernizing Japanese of the Meiji era, the goal had been to discard Chinese science in favor of the new science and technology from the West. Using old terminology would only have created confusion. This was a direct contrast to the translation strategies of early missionary translators, who had needed to win supporters by all means available, and had deliberately tried to map existing Chinese medical terms and concepts onto new imported meanings using classical Chinese terminology. After the Japanese victories in the 1894-5 Sino-Japanese War and the 1904-5 Russo-Japanese War, most Chinese agreed that a clean break with traditional Chinese knowledge was necessary, and students flocked to Japan to learn the secrets of its military and technological success. Ding Fubao was the medical face of this movement in China.

Ding’s Place in the Professionalization of Western Medicine

From the point of view of the development of a medical profession in China, Ding’s career illustrates some of the contradictions of the late Qing and Republican eras. Under the Qing, Ding had been poised to lead in the creation of modern medicine in the service of the Chinese state, in spite of the fact that he had no medical degree. In traditional China, it was the state that decided how much education would suffice, and the preferred mechanism for making that decision was by setting examinations such as the one Ding excelled in during 1909.

The leaders of the Republican era, by contrast, were mostly educated abroad, in Europe, America, or Japan, and the Republican state quickly required foreign degrees or their equivalents (for instance, a degree granted

50 For the history of the creation of a terminology of western medicine in Chinese, see Luesink 2012.
51 Luesink 2012.
by a missionary college in China) instead of examinations for official posts. Then, in 1915, two professional associations of medicine were founded in China: the National Medical Association or Zhonghua yixue hui 中華醫學會 for MDs who had studied Anglo-American medicine, and the Republican Medical and Pharmaceutical Association or Zhonghua minguo yiyao xuehui 中華民國醫藥學會, established by and for graduates of Japanese medical schools. These associations took over the job of investigating the quality of practitioners of western medicine. The National Medical Association divided its members into three classes: regular members, who were graduates of foreign medical schools or approved medical schools in China and who could read and write at least one foreign language; associate members, who had recognized MD degrees but no working knowledge of a foreign language; and honorary members, a category that included “distinguished” persons who had “rendered some signal service to China.” Ding Fubao was unqualified for regular or associate membership, but the Association did award him honorary membership in recognition of his role in bringing western medicine to China.\(^{52}\)

This exclusion from active membership in the nascent profession did not stop Ding from serving as the Director of the Shanghai Tuberculosis Sanatorium, and even establishing his own hospital, named “Ding Fubao’s Hospital” (Ding Fubao yiyuan 丁福保醫院) on Meibai Road 梅白路 in Shanghai. But it did prevent Ding from getting any of the new government medical positions. This divide, between doctors who hung out their shingles regardless of qualifications, and doctors who represented the modernizing Chinese state, was to continue until after the Communist revolution in 1949. Where the modernizing Japanese Meiji government had grandfathered competent traditional physicians into its licensing system in 1873, the Chinese Republican government allowed the foreign-trained MDs to monopolize positions of medical influence while failing to create any kind of universal system of licensure, so that medical practice remained largely unregulated. In this situation, Ding was a respected figure, known for his broad knowledge of western science and medicine, which was grounded in a solid classical scholarship that was beyond the reach of most foreign graduates. This traditional scholarship also provided a strong moral compass that ultimately led Ding to reject the most blatantly exploitative medical practices such as hyping his overpriced herbal preparations, prompting him instead to adhere to the philanthropic ideal of the gentleman scholar, the junzi (once he had made enough money to keep himself and his family comfortably!). Ding ultimately came to realize that many of the efforts of the western-educated doctors to protect themselves from the competition with Chinese-medical practitioners were not so much about promoting

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\(^{52}\) Wong and Wu 1936, p. 605.
science and modernization as about protecting their own incomes, and were thus morally questionable. In studying the germ theory of disease, Ding came to understand his own role in spreading tuberculosis within his community, which likewise led him to question his own moral responsibility. These moral insights led him to become a noted philanthropist, a key supporter of the lay Buddhist movement in the region, and also to his personal regimen of vegetarianism, fasting, and cold baths that satisfied both his understanding of ‘hygiene’ in its sense of ‘health-promoting activities,’ and his need to atone for the moral lapses that his enthusiasm for making money from western medicine had led him into.

Conclusions: Medicine as a Moral Endeavor

On one level, Ding Fubao’s career is an example of how a scholar trained in western sciences by supporters of the ‘self-strengthening movement’ of 1860-1895, and taught in institutions established by them, became the leading source of information about western medicine in the first decades of the Republic of China, after 1911. The best efforts of the western medical missionaries and of the western-educated Chinese physicians were not able to supersede Ding’s prodigious output until the late 1920s at the earliest.

At another level, Ding represents a thoroughly Chinese literary elite who sought to promote Chinese cultural values even as they adapted to the abolition of the traditional civil service exams and the introduction of a modern education system. In his own day, Ding’s influence on a whole generation of Chinese was to make the principles and therapeutics of western medicine accessible and comprehensible for the first time.

However, the pursuit of modern medicine led Ding into morally questionable behaviors, such as relentless self-promotion, selling herbal preparations as the latest modern drugs and charging outrageously high prices for them, and also led him to understand his own role in spreading a disease that ultimately killed his students and beloved members of his own family. The second half of his life was largely devoted to correcting these moral failings, and to using modern printing technology to preserve traditional Chinese literature and culture.

By understanding the conflicting commercial, professional, and moral pressures on someone as well-connected and highly educated as Ding Fubao, we can better understand that western medicine in China was not considered morally neutral, and its practitioners were often seen, on the contrary, as morally corrupt. If this was true of Ding Fubao, prodigious scholar, philanthropist, and patriot, then the multitude of doctors of western medicine (of varying qualifications) whose advertisements took up approximately one-third of the column inches of the Shenbao in the Repub-
Bridie Andrews: Ding Fubao

lican era must remind us once again that the spread of western medicine world-wide is very far from being an unqualified good thing.
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