
Ann Shu-ju Chiu


Using socio-economic and biographic sources and textual and gender analysis, Joanna Grant studies the Chinese physician Wang Ji 汪機, who lived in Huizhou 徽州 in the early sixteenth century, and his work “Stone Mountain Medical Case Histories” (Shishan yian 石山醫案). The methodologies Grant employs to reconstruct the thought of Wang Ji and his contemporary medical culture are very interesting and original. The four chapters of the book reflect the findings originating from her methodological strategies. She comprehensively reviews a wealth of traditional primary sources and secondary literature to present a picture of Wang Ji as a respected physician, prolific medical writer, and Confucian gentleman of benevolence. Readers would hardly question such a perfect image of this reputed doctor as described in the historical materials.

Grant then subtly connects the micro approach with the macro perspective to explain how Wang Ji diagnosed his patients and arrived at his medical decisions. During Wang Ji’s lifetime Huizhou underwent drastic changes that marked the dawn of late imperial China. An increasing number of merchants came to play an active role in a society witnessing a boom in commercialisation, urbanisation and transportation networks. More often than not they cultivated an extravagant and unrestrained lifestyle. Wang Ji and his medical case histories can be best understood against the background of the particular conditions of that time and place. Influenced by the ethical thought of his contemporaries, Wang Ji shared their
concern over the excessive financial, physical and spiritual indulgences of his merchant patients. He feared that these bad habits might further sabotage the socio-economic foundation of the whole empire. Wang Ji therefore implanted many elements of this hypothetical causation into his treatment of male patients. They were to be cured of the diseases caused by excesses in drinking, eating, or sexual activities with a large supplement of warm and sweet tonics like ginseng (renshen 人参) and astragalus roots (huangqi 黄芪).

Through Grant’s textual guidance and interpretation we can see how Wang Ji endeavoured to carve out a social space and promote symbolic power for himself and his profession. Grant brilliantly succeeds in providing a living human face to a figure of a time long passed away. Facing the fierce competition of his rival medical practitioners, Wang Ji struggled hard to establish his own theoretical school for his disciples by debating with his rival elite physicians and by convincing his patients of the efficiency of his cures. Obviously, his clients were susceptible to the advise of other healers available in this region. In addition, nouveau riche merchants sometimes aspired to elevate their status by sponsoring educational institutions and medical publications. Wang Ji thus became aware of the threat from those ambitious merchants who turned to classical studies and aligned themselves with the medical profession. He sensed the need to establish a core of ethics and professional knowledge to distinguish the elite physicians from those outside of the traditional medical lineages and training.

Grant’s gender analysis of the “Stone Mountain Medical Case Histories” constitutes an intriguing part of this book. Although the author of this collection of medical cases never highlights explicitly any gender differences in the text, Joanna Grant depicts vividly how differently Wang Ji rendered his clinical services to men and women in terms of diagnosis, aetiology, illness syndrome, treatment and outcome. Where male patients were advised to be abstinent, female patients were rarely judged to be suffering from overindulgent behaviour, needing only simple treatment and being expected to recover quickly. Grant considers this to be an almost innate reaction of Wang Ji towards his contemporary culture. Huizhou women were reputed for their chastity and frugality throughout the history of imperial China. Since men were held to be the instigators of the chaotic socio-economic transformation, Wang Ji unconsciously attributed their illnesses to their moral decadence. In most cases, Wang Ji therefore prescribed ginseng and astragalus roots for them to supplement the depletion of yuanqi 元气 or “vitality” resulting from their self-indulgence. This medical therapy implied the restoration of social order. Grant certainly deserves high credit for her unravelling of the social values behind the clinical practices of Wang Ji, thus adding a cultural dimension to her research into the history of science and medicine. Because physicians are products of their own culture, Wang Ji cannot escape from the influences of his time, and especially not from the influences of the regional culture of which he was a part.

Although Grant takes keen notice of the changing socio-economic environment of Wang Ji’s period in her analysis of culture and medicine, she misses, or
does not pay enough attention to, some salient characteristics of Huizhou. The micro approach, focusing simply on one single text, may have led to her refraining from making some comparisons between Huizhou and the rest of China. Compared with other areas, people from Huizhou were distinguished by their strong devotion to Confucianism. Not only Huizhou literati and physicians observed the precepts of Confucian conduct, but merchants adhered to this philosophy in their business practices as well. In addition, as noted by Grant and mentioned above, Wang Ji’s application of warm and sweet tonics (ginseng and astragalus root) to supplement yuanqi depletion in his merchant patients was a treatment more prominent among physicians in Huizhou than in other areas of China. Since Huizhou was called Xin’an in pre-modern times, this feature was termed Xin'an wenbu peiyuan xuepai (“Xin’an school of restoring vitality by the application of warm medicine”).

Some scholars have also pointed out that the Huizhou physicians’ use of warm medicines to restore vitality was related to their reverence for the Yijing (Classic of Change). This Confucian classic was not only of great importance in the civil service examinations, but was also a canonical scripture for physicians. Although Grant mentions that many physicians like Wang Ji established their profession as a result of their failure in the civil service examinations (pp. 31-32), she does not explore further the internalisation of Confucian classics by these men withheld from bureaucratic power. Although it cannot be measured precisely how much former civil service examination candidates who had now turned to medical careers were influenced by the Yijing, there can be no doubt that due to their long practice in memorising this text they relied on relevant

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2 Tong Guangdong 童光東 and Liu Huiling 劉惠玲, “Ming Qing shiqi Xin’an yaodian ji qi yiyaoxue zuoyong” (Ming Qing Period Xin’an Dispensaries and Their Role in Medicine in the Period of the Ming and Qing Dynasties), Zhonghua yishi zazhi 中華醫史雜誌 (Journal of the History of Chinese Medicine), 25.1 (1995): 32.

knowledge from it in the construction of medical theory. Connected to this, it may also be that Wang Ji’s moral inclination in medical practice is related to his earlier experiences in the civil service examinations.

It is beyond question that Huizhou scholars admired the Cheng-Zhu orthodoxy (Cheng Zhu lixue 程朱理学) and were enthusiastic about the civil service examinations. Cheng Hao 樟號, Cheng Yi 樟一 and Zhu Xi 樟喜 were all of Huizhou origin and initiated the doctrine of Neo-Confucianism (lixue 理学). Since they provided the government with philosophical support for the maintenance of social order and stability, it was Zhu Xi’s annotations of the “Four Books” (Sishu 四書, including the Daxue 大學 (Great Learning), Zhongyong 中庸 (Doctrines of the Mean), Lunyu 論語 (Confucian Analects), and the Mengzi 孟子 (Works of Mencius)) which shaped the spirit of examination topics in the late imperial period. While it may be true that the social chaos during his time prompted Wang Ji to adopt ethical principles in his medical practice, it may also be possible that he simply acted in a manner akin to a cultural reproduction of the civil service examination system. Though once he may have had great hopes of transmitting, as a successful candidate, the moral philosophy of the “Four Books” into the bureaucratic sphere, he now at least could still instil his understanding of Confucianism into his daily medical theory and practice.

In addition to the “Four Books,” every candidate was required to select one book from the “Five Classics” (Wujing 五經, i.e. Yijing 易經 (Classic of Change), Shijing 詩經 (Classic of Poetry), Shujing 書經 (Classic of Documents), Chunqiu 春秋 (Spring and Autumn Annals), and Liji 礼記 (Record of Rites)) as his specialisation in taking the policy question (ce 策) examination. This policy question tested the broad learning of the candidates in such fields as astronomy, law, medicine, etc. With its many cosmological passages, the “Book of Change” was the first choice of most candidates. The emperors believed that when the cosmological cycles proceeded in a smooth way this was a good omen for their rule. Familiarity with the concepts of the “Book of Change” might equip the candidates with the technical capacity required for answering the policy question in an appropriate way. The central concepts of cosmology were also reflected in traditional Chinese medicine, in which the philosophical duality of yin and yang combined with the Five Phases (wuxing 五行) was widely applied in the explanation of the functions of the human body. Illness resulted when the principles of cosmological operation became disordered in the human body. In the binary pairs of yin/yang, heaven/earth, sun/moon, life/death, dry/damp, hot/cold, the yang-related elements like heaven, sun, life, dry and hot were hailed as the positive principle. The yin-related elements like earth, moon, death, damp and

4 Benjamin A. Elman, A Cultural History of Civil Examinations in Late Imperial China, Berkeley: University of California Press, 2000, p. 466.
When taking a closer look at the *Yijing*, we can see that *yang*, heaven and vitality, the primary elements of the universe, are held in high esteem. Quite a few Huizhou physicians relied on *Yijing* concepts when favouring the application of warm medicine for the restoration of vitality. Unsuccessful civil service examination candidates starting an alternative career in medicine were convinced that the *Yijing*, a work so familiar to them through their long and intense efforts in learning, was also an indispensable foundation in the medical field.

Another aspect to be mentioned is that the tension between physicians and merchants might have been more apparent than real. When reading Grant’s book, we are given the impression of a tension between Wang Ji and his merchant patients whose diseases were attributed to general overindulgence. However, given the pervasive and cohesive clan organisation of Huizhou, the relations between literati and merchants might have been more of a reciprocal than a rival nature. Merchants used the wealth earned in other regions to sponsor the education of their clansmen aspiring success in the civil service examinations. We can clearly tell from the biographical sources that the medical profession was dominated by members of certain famous surnames and lineages such as the Wangs 汪 and the Chens 程. The Wang family might have benefited tremendously from its Confucian merchant forebears. Of course the clansmen serving in the court might also have helped their hometown by promoting policies favourable to the interests of the Huizhou merchants. During the Ming dynasty most of the physicians ran their own pharmacies, which were supplied with sufficient and diverse medicinal herbs by the Huizhou merchants. As observed by Grant, “Wang Ji himself had a pharmacy in Qimen 祁門, and presumably medicinal herbs were yet another commodity that merchants traded in, which would enable him to procure supplies of herbs that could not be grown locally” (p. 81). If we believe that diagnosis was free of charge in late imperial China (p. 33), herbal prescriptions would have been the main source of income for physicians. Grant also notices that Wang Ji and other elite physicians preferred the internal medical treatments employing herbal remedies to the use of acupuncture and moxibustion or other external surgeries practised by popular medicine healers (pp. 83-84). Thus in

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8 See Li Jiren, *op. cit.*
addition to medical theories, the motive of profit should be considered in a more pronounced way. As Grant outlines in her analysis of patient/physician dynamics, “the level of society to which Wang Ji’s patients belonged” was relatively high (pp. 86-88). A considerable proportion of poorer patients, who could not afford the expense of treatment, might have turned to popular medicine healers.

In conclusion, Joanna Grant presents a lively picture of the Chinese physician Wang Ji and his work “Stone Mountain Medical Case Histories.” Scholars will not only find it enjoyable reading, but hopefully will be stimulated by it to raise further issues awaiting discussion and research.