Who Was He? Reflections on China’s First Medical ‘Naturalist’

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Abstract: This paper examines the reasons why Physician He (Yi–He, sixth century BCE) was regarded as a founder in the classical medical tradition of China. By most accounts, Physician He’s importance owes much to his theoretical innovations. In contrast to earlier healers, Physician He purportedly framed the aetiology of illnesses solely in terms of natural causes, as opposed to attributing sickness to gods or demons. In this paper, I reread a famous episode in the Commentary by Zuo, which is often cited as evidence of the physician’s naturalism. By paying close attention to the formal elements of the narrative as well as its larger discursive context, I argue that the standard reading of Physician He falls short. The episode provides little evidence of any secular challenge to religious conceptions of illness, and Physician He was, in fact, patterned after occult experts. A careful look moreover at the reception of Physician He in premodern histories of medicine reveals that the physician was extolled for his attunement to the will of the spirits as well as his powers of examination. Physician He’s reputation as a naturalist furthermore represents a modern interpretation, one that reflects efforts to defend the indigenous medical tradition against its biomedical detractors.

There are reports of physicians making frequent, true, and marvellous predictions, predictions such as I have never made myself, nor ever personally heard anyone make.

–Prorrhetic II.

For someone who is best known for being unable to cure a patient, Physician He (fl. ca. 546 BC) has been spectacularly famous. Since the third century AD, Physician He, known through accounts in two early Chinese texts, the Commentary by Zuo and the Discourses of the States, has been extolled as an ideal medical practitioner. In the Classic of the Pulse, a key text in the Chinese medical tradition, the court physician Wang Shuhe (180–270?) paid homage to the earlier figure. Writing about the difficulties of diagnosis, Wang noted, ‘The patterns of the pulse are finely intermeshed and their forms difficult to differentiate, and although they possessed the most subtle of

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1 Hippocrates, Prorrhetic II, Vol. 8, W.H.S. Jones et al. (trans.) (Cambridge, MA: Harvard University Press, 1939 [1995]), 219.
faculties, Bian Que [扁鹊] and Physician He nevertheless had to think twice sometimes.’

The comment – the first of many references – reveals little about why Physician He mattered to Wang. Questions notwithstanding, the interest in Physician He was shared by other medical thinkers. One of Wang Shuhe’s contemporaries also paid tribute to Physician He in the *AB Classic of Acupuncture and Moxibustion* [針灸甲乙經], a text often credited with bringing coherence to the medical tradition. In this work, the author gave Physician He a prominent place in an unbroken line that stretched from antiquity to the present. Since then, few accounts of medicine, including the exhaustive compilations produced in the late Imperial Period, fail to recount Physician He’s encounter with his noble patient.

The celebrated Middle-Period physician Sun Simiao [孫思邈] (581–682), for example, singled out Physician He, along with another court physician Huan [歘] (ca. 581 BC), as the exemplary physicians of their age. The great Qing physician Fei Boxiong [裴伯雄] (1800/79) similarly claimed that Physicians He and Huan enshrined the orthodox tradition of antiquity.

In accounting for Physician He’s prominence in the Chinese medical tradition, modern historians often point to the historical role that Physician He played in the development of medical theory. In *The Short History of Medicine* (1960), Chinese historian Fan Xingzhun characterises Physician He and another contemporary as the ‘lone island’ of rationality in an ‘ocean of superstition’. Remarking on the absence of any references to spirits or demons in Physician He’s diagnoses, Fan highlights the fact that the physician framed illness solely in terms of *qi* (ch’i; vapour, material force), a move that Fan reads as a sign that medicine ‘had already broken through the barriers of religion and superstition’. Physician He’s reputation as an early naturalist is also evident in Zhou Jianping’s history of Chinese medicine. In this, Zhou stresses the revolutionary character of Physician He’s diagnosis. Before Physician He, Zhou claims, ‘illness was seen as heavenly sanction or a scourge sent down by the spirits’; *after* Physician He, illness ‘could be analysed solely in terms of material causes’. This break with superstition, Zhou further adds, provided ‘the conceptual breakthrough for the foundations of the theory of pathogenesis found in the *Yellow Emperor’s Inner Classic*’. Similar explanations, which highlight Physician He’s theoretical contributions, can be found in important Japanese and English-language works on Chinese medicine. Such works nevertheless tend to see Physician He as a representative of new theories that connected human health and sickness to cosmic patterns, rather than to angry ancestors or malevolent ghosts.

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2 Wang Shuhe 王叔和, *Wangshi Maijing* 王氏脈經, *Sibu congkan* (ed.), pt 34, Vol. 9 (Shanghai: Shangwu yinshuguan, 1929/36) [序] 1a–1b.

3 Huangfu Mi 皇甫谧, *Zhenjiu jiayijing jiaozhu* 鍼灸甲乙經校注 (Beijing: Renmin weisheng chubanshe, 1996) [序], 16.

4 See the *Preface* by Sun Simiao cited in Okanishi Tameto 村井忠夫, *Song yiqian yiji kao* 宋平坐醫籍考 (Beijing: Xueyuan chubanshe, 2010), 522.

5 Volker Scheid, *Currents of Tradition in Chinese Medicine, 1626–2006* (Seattle: Eastland Press, 2007), 161, 171; see also the *Preface* of Shao Jinhan 郭靜涵 (1743/96) in *Song yiqian yiji kao*, 997.

6 Fan Xingzhun 范行准, *Zhongguo yixue shilüe* 中國醫學史略 (Beijing: Zhongyi guji chubanshe, 1960 [1996]), 12–3; see also Duan Yishan 段逸山 et al., *Yiguwen* 養吾文 (Beijing: Renmin weisheng chubanshe, 1986 [1994]), 5, 9; cf. Ma Boying 马伯英, *Zhongguo yixue wenhua shi* 中國醫學文化史 (Shanghai renmin chubanshe, 1994), 208–9; Li Jingwei 李炯薇, *Zhongyishi* 中醫史 (Yihai: Hainan chubanshe), 35–6.

7 Zhou Jianping 周建平, *Zhongguo yixue shi yanjiu* 中國醫學史研究 (Beijing: Zhongyi guji chubanshe, 2003), 63.

8 For a recent iteration of this view, see Aihe Wang, *Cosmology and Political Culture* (Cambridge: Cambridge University Press, 2000), 102–3.
assumes that the episode in the *Commentary by Zuo* in which Physician He appears reflects the state of medical theory in the sixth century BC, but he also plays up the cosmological dimensions of the physician’s diagnosis. For Yamada, the episode provides some of the first evidence of medicine as a system of knowledge.\(^9\)

Similarly, in his *Expressiveness of the Body*, Kuriyama Shigehisa also associates Physician He with new ways of understanding illness. Physician He, Kuriyama writes, ‘ignored demonic attacks, but instead blamed six causes: the *yin*, the *yang*, wind, rain, darkness, and brightness’.\(^10\)

For all of their appeal, previous explanations of Physician He fall short. Such explanations arguably derive from one of the master narratives in the field, a narrative that can be traced as far back as the influential *History of Chinese Medicine* (1919) by Chen Bangxian. In this seminal work, Chen – who was inspired by the secular values of the May Fourth Movement – argues that the medical tradition developed as a result of a historical schism: specifically between superstitious healers (wu [巫]) who attributed illness to spirits, and secular physicians (yi [醫]) who emphasised natural causes.\(^11\)

While Chen’s narrative was influential, more recent work complicates his opposition of secular and magico-religious healers. Nathan Sivin, for example, challenges the assumption that superstitious healers and secular physicians represented two separate social groups. Taking a close look at the evidence, Sivin shows that the term *wu* was actually an epithet and was used to refer to individuals who employed specious techniques, rather than magico-religious healers.\(^12\)

In addition, Donald Harper demonstrates the need to look beyond the polemics of the *yi*. A careful reading of the medical classics, he points out, reveals a more tangled history of interaction. In fact, the *yi* shared much with diviners and healers who used prayers and imprecations in their healing – for example, an interest in numerological techniques, a common vocabulary, and similar social backgrounds and patrons. What is more, the *yi*, Harper points out, were in dialogue with the very healers they decried.\(^13\)

The earliest and fullest account of Physician He, found in the historical chronicle the *Commentary by Zuo*, gives us additional grounds to wonder whether the physician’s significance had anything to do with his putative naturalism. According to the account, the Qin court physician went to Jin to attend to the illness of Lord Ping \(^14\). The brief utterance, only four characters

\(^9\) Yamada Keiji 山田慶之, ‘Henjaku densetsu 扁鵲傳說’, *Tōhō gakuhō 東方學報*, 60 (1989), 73–158: 67–79.

\(^10\) Kuriyama Shigehisa, *The Expressiveness of the Body and the Divergence of Greek and Chinese Medicine* (New York: Zone Books, 1999), 252; cf. Yan Yiping 嚴一萍, *Yan Yiping xiansheng quanjì 嚴一萍先生全集* (Banqiao: Yiwén yínshùguān, 1991), 364.

\(^11\) Chen Bangxian 陳邦賢, *Zhongguo yixue shi 中國醫學史* (Shanghai: Shangwu yínshùguān, 1937), 6–7, 10; esp. 22. The first edition of the work, which is no longer widely available, was published in 1919 and revised three times in the next six decades. On this point, see Zheng Jinsheng 鄭金生 and Li Jianmin 李建民, ‘Xiandai Zhongguo yixueshi yanjiu de yuanliu’, *Dalu zazhi 大陸雜志*, 95, 6 (1997), 26–35: 26.

\(^12\) Nathan Sivin, ‘Taoism and science’, in Sivin (ed.), *Medicine, Philosophy, and Religion: Researches and Reflections* (Aldershot, Great Britain: Ashgate Variorum, 1995), 1–72: 27–31.

\(^13\) Donald Harper, ‘Physicians and Diviners: The Relation of Divination to the Medicine of the Huangdi neijing (Inner Canon of the Yellow Thearch)’, *Extreme-Orient, Extreme-Occident*, 21 (1999), 91–110: 91–2; ‘Iatromancy, diagnosis, and prognosis in early Chinese medicine’, in Elisabeth Hsu (ed.), *Innovation in Chinese Medicine* (Cambridge: Cambridge University Press, 2001), 99–120: 200; Liao Yuqun 廖育群, ‘Zhongguo gudai zhoutian jiao jiao fazhan de yuanlù’, *Ziran kexue yanjiu 自然科學研究*, 12, 4 (1993), 373–83.

\(^14\) Sibu congkan (ed.), *Chunqiu Zuozhuan zhengyi 春秋左傳正義*, pt 24 [Zhao 1.23], 41/13b; cf. Yang Bojun 楊伯峻, *Chunqiu Zuozhuan zhu 春秋左傳注* (Beijing: Zhonghua shuju, 1991), 1222–23.
in length, is somewhat puzzling. To begin with, the utterance sounds as if the physician was issuing not only a prognosis for the sick lord but also a prophecy for a minister. Here and elsewhere, *tianming* referred not only to the more familiar sense of a dynastic mandate but rather to the will of an anthropomorphic Heaven, who saw fit to visit early deaths on immoral men. But who was the minister in question? And how did the physician – who was presumably charged just with examining the sick lord – reach his conclusions about the minister? And why would this physician – who is famous for his *qi*-centred picture of illness – borrow the language of seers and diviners, a language associated with demonic explanations of illness.

Moreover, the received view of Physician He assumes that the persona in the *Commentary by Zuo* was a real historical figure whose views were accurately represented in the text. But such an assumption seems increasingly unwarranted in light of recent scholarship. Sure enough, the *Commentary* relates events in the regional courts of the Spring and Autumn period (ca. 771–453 BC), a period that overlaps with the time in which Physician He purportedly lived. Subject matter notwithstanding, most scholars now agree that the text postdates the Spring and Autumn period by centuries. In the mid-fourth century BC, compilers reworked earlier materials and pieces of legend to express their understanding of the moral patterns of the past. In the process, they adapted and added fictionalised speeches, episodes, and entire personalities. Given the pervasive pattern of creative licence in the text, we thus cannot assume that Physician He was anything like the figure in the *Commentary*. If anything, the *Commentary* tells us more about the beliefs of the fourth-century compilers than their sixth-century subjects. What is more, the compilers were masters of narrative, who, much like novelists or bards, availed themselves of an arsenal of rhetorical devices to drive home their larger message: rhymed speeches, prolepsis, dream narration, fictional episodes, and fantastic elements such as visits by ghosts and demons. For all of these reasons, it seems unwise to approach the episode with the goal of peeling away layers of commentary to reveal the beliefs of the original Physician He. As is the case with Hippocrates, the historical Physician He – if he ever existed – eludes detection. A more feasible line of inquiry focuses instead on what narrative function the persona served within the *Commentary*.

Through a careful analysis of the narrative and rhetorical structure of the episode preserved in the *Commentary*, I seek to shed new light on the question of who Physician He was, and how he became a fixture in the Chinese medical tradition. Was Physician He important to the tradition, as modern accounts suggest, because he moved away from invoking spiritual causes in explaining illness? Or, as I will propose, is this a modern interpretation of Physician He, one at odds with premodern understandings of the figure?

15 For earlier examples of *tianming* 天命 as ‘Heaven’s will or intent’; see *Shangshu* 尚書 in *Duanju Shisanjing jingwen* 斷句十三經釋文, ‘Shangshu’ 春秋, Pan Geng shang 盤庚上 (Taipei: Taiwan kaiming, 1991), 13a; Hong Xingzu 洪興祖 and Bai Huawen 白化文 (eds), *Chuci buzhu* 楚辭補注 (Beijing: Zhonghua shuju, 1983 rpt. 2000), ‘Tian wen 天問’, 3.111.
16 David Schaberg, *A Patterned Past: Form and Thought in Early Chinese Historiography* (Cambridge, MA: Harvard University Asia Center, 2001), 8–11; cf. Li Wai-yee, The Readability of the Past in Early Chinese Historiography (Cambridge, MA: Harvard East Asia Monograph, 2007), 47–59; Ronald Egan, ‘Narratives in Tso Chuan’, *Harvard Journal of Asiatic Studies*, 37, 2 (1977), 323–52, 339–40, 348. For the minority position, see Yuri Pines, Foundations of Confucian Thought: Intellectual Life in the Chunqiu Period, 722–453 BCE (Honolulu: University of Hawaii Press, 2002), 13–54, 233–46.
17 Schaberg, ibid., 26–7.
18 On this point, see Jodie Pinault, Hippocratic Lives and Legends (Leiden: E.J. Brill, 1992).
Towards this end, I reconsider the narrative of Physician He’s diagnosis of Lord Ping, an episode long assumed to contain ‘China’s first medical case history’. I begin by revisiting the often-cited description from the Commentary, which I show to be more ambiguous than previously thought. While some passages seem to indicate that the physician highlighted imbalances in the body as the root of illness, other elements in the narrative hint that Physician He also invoked angry deities in his explanations of sickness. With such a re-evaluation, I then situate the physician within the larger narrative of the illness of Lord Ping. Through an analysis of narratological features, I demonstrate that Physician He should be understood in terms of his rhetorical function rather than as a historical personage. Physician He represents the alter ego of another figure in the story, a statesman and well-regarded expert on spiritual matters. In the last section, I consider the visit of Physician He alongside tropes found in accounts of medical divination. As I show, Physician He’s denial of spiritual involvement in the sickness of Lord Ping did not imply any challenge to demonic explanations of illness. On the contrary, such a denial was consistent with archetypical representations of divinatory knowledge during the Warring States period (ca. 453–221 BC). Consideration of the evidence thus reveals that Physician He’s prominence in the later medical tradition had little to do with his putative naturalism. Instead, the authors of the Commentary created Physician He in the image of the noble expert of the spirits, which subsequently influenced the self-representations of later healers. As such, this case discloses the role that early historiographical conventions played in shaping the classical medical tradition. Physician He’s reputation as a naturalist furthermore represents a modern interpretation.

Re-reading Physician He’s Visit to Jin

As most discussions of Physician He rely on a single episode in the Commentary, our analysis begins by returning to the episode in question. As we will see below, the description of Physician He is less than straightforward. Certainly, the diagnosis of Lord Ping would seem to eschew spiritual or demonic explanations of illness. Yet the conversation between the physician and another member of the Jin court suggests that illness or death could result from Heavenly punishment. In other words, Physician He begins to look like a medical pluralist.

Given the importance of the account to my story, a few introductory remarks about the episode are in order. The account can be divided into roughly three parts, each of which is progressively shorter than the last. The first and longest part opens with Physician He’s consultation with his noble patient, Lord Ping. ‘There is nothing that can be done,’ he tells the lord, ‘for this is what is referred to as “being close to women,” a sickness generated in the same way as gu.’ It is at this point that Physician He issues his mysterious prophecy about the imminent death of the Jin minister – I say mysterious only.

19 Jin Shiqi, ‘Jin Pinggong bing’an gouchen 晉平公病案歸沉’, Guoli zhengzhi daxue lishi xuebao 国立政治大學歷史學報, 31, 5 (2009), 1–50, 2–6; Yao Chunpeng, 姚春鵬, Huangdi neijing – Qi guannian xia de tianren yixue 黄帝內經 翦範年下的天人醫學 (Beijing: Zhonghua, 2008), 5; cf. Lu Gwei-djen and Joseph Needham, Celestial Lancets: A History and Rationale of Acupuncture and Moxa (Cambridge: Cambridge University Press, 2000), 144.

20 I am following the emendation of the eminent scholar Wang Niansun 王念孫 (1744–1832) of the eight-character line (是謂近女色，疾如癰). Wang argues that shi (quarters) is a graphic error for sheng (to generate, produce). The line thus should read as two four-character lines: 是謂近女，生疾如癰. In addition, the term gu is a notoriously difficult term to translate, with scholars rendering the term differently and translating it as ‘bewitchment’ or ‘infestations of bugs’. For the former, see Kalinowski, ‘Diviners and astrologers under the Eastern Zhou: transmitted texts and recent archaeological discoveries’, in John Lagerwey and Marc Kalinowski.
because it is initially unclear how Physician He arrived at this conclusion. The prophecy, however, is ignored by the lord, who is evidently worried about the prospect of having to abandon his riotous lifestyle. Instead, Lord Ping gets back to what really matters. ‘Is it really true,’ he asks Physician He, ‘that women are not to be approached?’ The question gives the physician an opening to expound on the virtues of moderation and embark on a lengthy digression about music before turning to what scholars usually see as his main point: the role of the six qi in generating illness. According to the physician, Lord Ping was suffering from an imbalance of yang and dark qi, the consequence of excessive sexual relations. In the second part, the narrative moves away from the consultation between the patient and healer to a conversation between Physician He and Minister Zhao Wu [趙武] (d. 541 BC), who was then the most powerful minister of Jin. Minister Zhao had somehow heard of the prophecy regarding the ‘good minister’. Evidently intrigued, or perhaps worried, the minister asks Physician He to identify the minister in question. Without batting an eyelid, Physician He explains that he was speaking of Minister Zhao. The conversation has taken an awkward turn, and so Minister Zhao changes the subject and asks about the illness called gu, which the physician mentioned in his initial remarks. In response, Physician He furnishes an explanation based on the Book of Zhou Changes [周易].

In the third and last part, the narrative closes with Minister Zhao’s words of praise for Physician He, who is extolled as a ‘fine physician’ and rewarded for his visit to Jin.}

With such an introduction, we turn to the main problem at hand: what evidence exists to suggest that Physician He eschewed spiritual conceptions of illness? The evidence would seem to be cut and dried; nowhere in his diagnosis does Physician He mention the spirits. This is obvious enough from the text of the physician’s celebrated diagnosis:

In Heaven there are six kinds of qi, which come down and produce the five flavours, emitted as the five hues, and result in the five tones. If there is excess, the six illnesses will be produced. The six qi are referred to as the yin, yang, wind, rain, dark, and light, each of which are separated into four periods and arranged into five pitches. When there is excess in one of these, there will be calamity. When the yin is

(eds), Early Chinese Religion, Part One: Shang through Han (1250 BC – AD 220) (Leiden and Boston: Brill, 2009), I: 341–96: 359. For the latter, see Donald Harper, Early Chinese Medical Literature: The Mawangdui Medical Manuscripts (London and New York: Kegan Paul International, 1998), 74–54; see also Jiang Dianwei, ‘Yi-He shi gu – du “Qin Yi-Huan He” zhaji’ [Zhao 1.12], 41/13b–15b; cf. Yang Bojun, op. cit. (note 14), 1221–3; cf. Li Wai-yee, op. cit. (note 16), 132–3.

21 Zuozhuan zhengyi [Zhao 1.12], 41/13b–15b; cf. Yang Bojun, op. cit. (note 14), 1221–3; cf. Li Wai-yee, op. cit. (note 16), 132–3.
excessive, there will be a cold illness, when the yang is excessive, there will be a heat illness; when wind is excessive, there will be an illness in the extremities; when rain is excessive, there will be an illness of the abdomen; when darkness is excessive, there will be avolition, and when light is excessive, there will be an illness in the heart. Women draw out the yang [i.e. the bright or hard] in things during the hours of darkness (22).

When there is excess in this, an internal heat, avolition, and gu will be produced. In the present case, I knew that his lordship had been immoderate and untimely in his sexual relations; thus how could this calamity not have befallen him?

The passage presents several points of interest. To begin with, not only are references to gods and spirits absent from the diagnosis, but the emphasis here is on the cosmological underpinnings of human illness: the excesses of yin and yang, as well as uneven proportions of dark and light, moisture and heat, which cause the body to lose its natural equilibrium. The very generality of the diagnosis – notice, for example, that the physician brings up symptoms that the patient does not experience – suggests that Physician He saw the theory of the six qi as a framework for understanding not only the illness of Lord Ping, but all cases of human sickness.

Perhaps more importantly, Physician He denies that the lord’s illness was the result of spiritual involvement: ‘This illness is not the work of ghosts . . . .’ Such a denial is all the more surprising in light of fourth-century sources. If divinatory records recovered from various tombs are to be trusted, illness was largely seen by the ruling elite as the result of spiritual displeasure: Heaven ‘sending down’ its punishments, an ancestor or spirit miffed about having received less than his or her due of the offerings, a demon seeking vengeance upon the murderer or his descendants, and the war dead incensed by the lack of sacrifices.

The case of one nobleman, who died a few decades after the compilation of the Commentary, leaves clues as to the strength of such beliefs. His illnesses occasioned the coordinated efforts of twelve diviners, who sacrificed no fewer than thirty-six pigs, six dogs, twenty-three sheep, nine oxen, and a horse. Given such a background, the physician’s denial that spirits and ghosts were responsible for the lord’s illness seems all the more like an expression of defiance, a protest lodged against the dominant views of the age.

The attention given to symptoms, it may be further argued, is incompatible with older conceptions of illness. The fact that Physician He could work backwards from symptoms to the source presumes a one-to-one relationship between symptom and cause – a stance at odds with older views that emphasised the capriciousness of spirits. While they ascribed a rationality to illness – the gods and spirits usually had a reason for sending down the scourge of sickness – older views nevertheless did not posit a necessary connection between specific symptoms and causes. As divination records hint, the expression of

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22 The passage has sparked considerable debate about its exact interpretation. Du You 杜佑 (735–812) has interpreted the passage as such: ‘Women usually attend to men, and thus this [intercourse] is referred to as yangwu’ (女常為男，故言陽物). Kong Yingda 孔穎達 (574–648), in contrast, says: ‘because women are used for intercourse, the body of the lord thus became heated; and since intercourse occurs during periods of darkness, the lord has thus suffered from avolition and gu’ (以女為陽物，故內熱以晦時，故感聳也). See Chunqiu Zuozhuan zhengyi 41/15a. The term wu has been glossed by Yang Bojun (op. cit. (note 14), 1221) as referring to ‘serving’ (shí 事), and so the passage would read, ‘With respect to women, they attend to intercourse during periods of darkness’. Li Wai-yee (op. cit. (note 16), 147) interprets the passage somewhat differently, reading the passage as ‘As the female brings out the yang in things and belongs to the hours of darkness; excessive intimacy with them breeds the sickness of inner heat, confusion, and spells’.

23 Chunqiu Zuozhuan zhengyi [Zhao 1.12], 41/14a–15a; cf. Yang Bojun, op. cit. (note 14), 1221–3.

24 Guolong Lai, ‘Death and the Otherworldly Journey in Early China as Seen through Tomb Texts, Travel Paraphernalia, and Road Rituals’, Asia Major, 18, 1 (2005), 2–44: 11.

25 Kalinowski, op. cit. (note 20), 384.
spiritual displeasure varied widely; the same illness could have any number of potential sources. When investigating the shortness of breath and loss of appetite suffered by the aforementioned nobleman, for example, diviners considered a long list of candidates: royal ancestors, various nature spirits such as the god of the Grand River and Wei mountain, and the angry war dead.26 Given the lack of correspondence between symptom and cause, diviners understandably paid little attention to the symptoms themselves, instead scrutinising the patterns found in the shells and stalks for clues about the causes of illness.

Other elements in the episode militate against the view that the physician opposed spiritual or demonic explanations of illness. Although he does not assign any role to the spirits in his diagnosis of Lord Ping, Physician He fails to issue a categorical denial. A closer look at the text, in fact, reveals that the physician not only ruled out spiritual causes, but also the effects of bad food in this particular case – ‘This is not the work of ghosts, nor the result of what was eaten’. To be sure, too much can be made of an absence. It is one thing to claim that the physician stopped short of ruling out spiritual causes, and quite another to say that the compilers attributed to him the belief that ghosts or gods were only sometimes behind human sickness. For the latter, we will have to search for positive signs that he attributed sickness or dying to spiritual forces.

The prognosis regarding Minister Zhao provides positive evidence that links Physician He to older views that highlighted spiritual causes of illness. Granted, the physician does not say in so many words that the spirits can punish men or women by making them sick. Even so, other remarks bring the physician close to such a view. As we saw above, Physician He claimed that Minister Zhao would die because Heaven had withdrawn its protection. Sure enough, the Commentary tells us that the aforementioned minister died suddenly in the twelfth month of the same year without a hint of violence; Physician He’s prophecy turned out to be on the mark.27 At the end of the episode, Physician He goes on to explain his prophecy, an explanation that indicates that an early death could be the result of divine sanction:

和闐之·國之大臣·祭其寵祿·任其（龜）[大]節·有狐禍興·而無
改焉·必受其咎·今君至於淫以生疾·將不能圖恤社稷·禍殃大焉？主
不能禍·吾是以云也。」

I, He, have also heard it said that if honoured by titles and having assumed responsibility for the gravest of state matters, the great minister does not change course when a disaster arises, he too will suffer the consequences of the spiritual fault. At present the lord has been licentious to the point where he is comatose and thus unable to focus on the altars of earth and grain (ie. the state). What disaster is more serious than this? You, sir, have been unable to intervene in this matter, and so I was speaking of you.28

Physician He’s speech presents two relevant points. To begin with, he uses the term jiu [龜], which I have translated as ‘spiritual fault’. In ancient texts, the term could refer generally to blameworthy conduct. But jiu was often used to describe offences that merited divine retribution; hence the common rendering of ‘curse’. Not surprisingly, in divinatory texts jiu was paired with sui [祟], the sickness, misfortune, or even death meted out by...
baleful spirits. And indeed, the use of jiu makes sense given the larger context of the passage. Physician He goes on to explain that Minister Zhao was richly deserving of Heavenly punishment. In permitting Lord Ping to pursue a life of pleasure, Minister Zhao had allowed the young lord to ruin his health. The minister was thus remiss in carrying out his duties to the state and so would be punished by Heaven.

With the exclusive focus on qi in his diagnosis of Lord Ping, Physician He would seem at first glance to eschew spiritual explanations of illness. And qi certainly served as the focus of the diagnosis. But the prophecy reveals that it was far from a foregone conclusion that the physician was an opponent of older, spiritual conceptions of illness. Had this been the case, we would not expect Physician He to speak of Heaven sending down premature death as punishment, for such a position implies the power of spirits to deliver lesser punishments, including the scourge of sickness. On the contrary, such a position linked the physician to demonic views of illness.

Physician He in Context: The Illness of Lord Ping

Through an examination of the description of Physician He, we have arrived at a more complex view of the figure. Our analysis of Physician He, however, would be incomplete without a consideration of the formal structure of the narrative. Embedded within a larger story of the illness of Lord Ping, the visit of Physician He represents less than one half of the episode, of which the rest is devoted to the visit by the famous statesman from Zheng, Zichan [子產] (d. 522 BC). In addition, the Commentary, as we have noted above, is a ‘doctored’ text. Events are recounted selectively, and the speeches and episodes have been crafted so as to illustrate the historical and moral vision of its compilers. In this regard, the episode about the illness of Lord Ping is no exception. As historian Jin Shiqi points out in a brilliant article, the purpose of the episode is not so much to expound on the finer points of medical theory as to explain the underlying causes behind the decline and eventual fall of the Jin state in the fifth century BC. For all of these reasons, we situate Physician He’s visit to Jin within the context of the larger narrative. Along the way, we arrive at an additional reason to question whether Physician He represents a challenger of spiritual or demonic conceptions of illness: the persona of the Commentary looks increasingly less like an actual historical person as much as a rhetorical device. When read in context, Physician He resembles the textual double to Zichan, a renowned expert on spiritual matters and an important minister.

It is worth starting by providing a brief outline of Zichan’s visit, which can be analysed in three parts. The first opens with the arrival of Zichan in Jin, where a divination was performed to determine the aetiology of the illness. The diviners reported that two spirits were behind the sickness. As no one in the Jin court was familiar with the identity of the spirits, Zichan was asked about them. Although he had heard of them, Zichan was nevertheless sceptical that the spirits were involved. The pair, Zichan explained, were nature spirits and did not even have dominion over the lord’s body. ‘What do the gods of the hills and rivers, or of the stars and planets’, he asks, ‘have to do with the health of the prince?’ The real cause, Zichan adds, lay with the lord’s riotous lifestyle, a lifestyle characterised by slack discipline and violations of sexual taboos. In the second part, which is considerably shorter, the narrative moves away from Zichan to a conversation between

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29 See, for example, Chen Wei, op. cit. (note 26), 95 (Baoshan strips no. 234–35).
30 Jin Shiqi 金希麒, op. cit. (note 19), 1–50, 2–6, 33–5.
31 Chunqiu Zuo zhuan zhengyi [Zhao 1.15], 41/10b–13b; cf. Yang Bojun, op. cit. (note 14), 1219.
a Jin noble and another member of the Zheng delegation. The Jin nobleman inquires about the chief minister of Zheng, to which the delegate replies that the days of the Zheng minister in question are numbered. In the third and shortest part, the narrative returns to the Lord of Jin, who hears of the diagnosis before bestowing words of praise and tokens of appreciation upon Zichan.  

Before showing how Physician He represents an alter ego to a well-regarded expert on the spirits, it is worth considering first a potential objection. Even if we assume that the visit of Physician He is merely one half of the larger narrative about the sickness of Lord Zhao, this does not mean that Physician He’s views about illness were necessarily comparable to those of Zichan. For the story to be plausible, the expertise ascribed to Physician He arguably reflected fourth-century medical wisdom. And insofar as noble ministers and physicians heralded from different backgrounds, the two presumably had dissimilar theories of pathogenesis.

The foregoing line of reasoning suffers from several drawbacks. To begin with, it assumes that the positions ascribed to Physician He in the Commentary reflected specialised knowledge. But recent work suggests that such an assumption is unwarranted. Through a comparison of the episode with other passages in the Commentary, Jin Shiqi argues that we have no reason to believe that the views ascribed to Physician He were unique to healers. The conceptual vocabulary associated with the physician, Jin furthermore points out, was in fact indistinguishable from those of other noble figures in the Commentary, including Zichan.

In addition, this line of reasoning underestimates the level of creative licence exercised by the compilers of the Commentary; the other physicians featured in the text also functioned as rhetorical devices. The famous encounter between Physician Huan and an earlier ruler of Jin provides one such example. The episode opens with Lord Ping’s predecessor dreaming of a vengeful ghost who explains that the lord will be punished for having murdered the descendants of the ghost. Concerned, the lord consults a witch, who confirms the dream, adding that the lord would not live to eat the new grain, and so when the lord falls ill, Physician Huan is summoned from Qin. Before the physician arrives, however, the lord has a second dream, where the illness takes the form of two lads residing inside of his body and discussing the physician’s imminent arrival. One says, ‘Huan is a fine physician, and I fear that he will harm us and so how can we escape?’ In response, the other proposes to evade the physician, moving to the area between the heart and diaphragm. ‘If we do this,’ the second lad replies, ‘what can he do to us?’ And indeed, when he finally arrives, Physician Huan declares the illness to be incurable. ‘The illness’, he tells the lord, ‘resides in the space between the heart and diaphragm’, and so the physician’s arsenal of remedies was of no use. The lord praises Huan as a ‘fine physician’ and sends him back to his home state in pomp and ceremony. At first, the lord’s condition does not worsen, leading him to believe that he has outwitted fate. The lord then recalls the witch and shows him the new grain before killing him. But just as the lord is about to taste the grain, he collapses, dying shortly thereafter. Here, the parallels between Physician Huan’s visit and the encounter with the unfortunate witch suggest a doubling effect. As
Li Wai-yee notes, the two episodes are symmetrical.\textsuperscript{36} Structurally, physician and witch stand in the same relation to the lord; both converse with him after his dream and confirm its message. The witch describes a future that corresponds to the first dream about ghostly retribution, and the physician’s prediction is consistent with the conversation overheard in the second. Such doubling introduces an element of narrative intensification, as the repetition reinforces the inevitability of the lord’s end.\textsuperscript{37}

If we return to the illness of Lord Zhao, it becomes clear that Physician He and Zichan represent textual doubles or twins. The doubling effect becomes clear if we consider the narrative as a whole, where the two figures not only occupy parallel positions within symmetrical narratives, but also exhibit the same logic. As Figure 1 reveals, the two halves of the narrative are almost identical, with minor variation. Whereas Zichan’s explanation of the oracle appears early in the narrative, Physician He defers discussion of the hexagrams until the end of his speech. The variation is to be expected; other instances of doubling in the Commentary contain small variations that minimise the monotony of repetition. Discrepancies aside, the two halves proceed in parallel. Both open with the main figure disputing the message of the oracle and providing two alternative explanations of the lord’s sickness. Zichan blames the illness on the lord’s use of time and concubines who share the lord’s surname, while Physician He traces the causes to the lord’s over-indulgence in loud musical performances and sexual excess.\textsuperscript{38} A narrative turn, or what poets call a \textit{svolta}, is then introduced, as the discussion shifts away from the subject of the lord’s health to the conduct of the chief ministers in the states of Zheng and Jin. The narrative then closes with words of praise; Zichan is described by Lord Ping as a ‘gentleman of broad learning’ (博物君子) and given a rich gift, whereas Physician He is extolled as a ‘fine physician’ (良醫) by Minister Zhao and escorted back to his home state with ceremony.

Aside from such structural parallels, the doubling of Zichan and Physician He can be seen at the level of thematic content and style. Physician He’s message closely resembles that of Zichan; both figures reject the conclusion of the oracle and stress the importance of restraint. In addition, Zichan’s emphasis on timing resonates with Physician He’s injunctions for men to know \textit{when} to stop a musical performance. The use of counterfactual reasoning presents a final similarity between the two. Zichan rules out the gods by exploring likely expressions of spiritual displeasure and clarifying the lack of connection between the power of the spirits and the lord’s sickness. As he puts it, if the gods of the mountains and rivers were angry, they would bring ‘disasters of floods, droughts and pestilence’. And if it were the gods of the sun, moon, stars and planets, we would expect to see ‘untimely snow, frost, wind and rain’. Physician He similarly arrives at his final diagnosis by entertaining other scenarios before arriving at the description that provides the best match: ‘When the \textit{yin} is excessive, there will be a cold illness, and when the \textit{yang} is excessive, there will be a heat illness; when wind is excessive, there will be an

\begin{itemize}
\item \textsuperscript{36} Li Wai-yee, \textit{op. cit.} (note 16), 240–2.
\item \textsuperscript{37} Kalinowski, ‘La rhétorique oraculaire dans les chroniques anciennes de la Chine. Une étude des discours prédicitifs dans le \textit{Zuozhuan},’ \textit{Extrême-Orient, Extrême-Occident}, 21 (1999), 49–50.
\item \textsuperscript{38} There has been considerable debate about whether the discussion of music is metaphorical. Some traditional commentators have taken this position, but more recent interpreters have resisted this reading. See, Du Zhengsheng 杜正勝, ‘Zuowei shehuishi de yiliaoshi – bing ieshao jibing, yiliao yu wenhua yantao xiazhu de chengguo’ 作為社會史的醫療史-並介紹疾病, 醫療與文化研究小組的成果, \textit{Xinshi xue 新史學}, 6, 1 (1995), 113–53; cf. Jin Shiqi, \textit{op. cit.} (note 19), 29.
\end{itemize}
illness in the extremities; when rain is excessive, there will be an illness of the abdomen . . . .’

We have argued that Physician He and Zichan represent textual doubles, but was the physician actually the counterpart to an expert on the spirits? The issue merits consideration, as some scholars have read this episode differently. Pointing to Zichan’s invocation of *qi*, one historian argues that Zichan challenges older beliefs regarding the
divine or demonic origins of illness. In *Cosmology and Political Culture*, Aihe Wang similarly characterises the episode as evincing a break with Bronze Age cosmology, whereby the sicknesses of princes were no longer signs of ancestral displeasure so much as the ‘expression of a cosmic pattern that regulated both natural and social orders’. In fairness, Zichan (like Physician He) does not deny the role of the spirits in producing Lord Ping’s illness. Instead, Zichan points to the effects of habits that destroy the body’s integrity:

As with Physician He’s diagnosis, Zichan’s explanation of the illness is rooted in the physiological: the flow of the qi and the fruits of the womb. Notice, for example, that the ancient dictates of ‘timeliness’ are explained as providing a check against the dangers of sexual excess and the pursuit of amusement, which result in blockages and accumulations

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39 Zhou Lisheng, *Chunqiu zhexue 春秋哲學* (Shandong: Daxue chubanshe, 1989), 155–81.
40 Aihe Wang, *op. cit.* (note 8), 102–3. Though he does not comment specifically on this incident, Marc Kalinowski offers his reflections on instances where a wise man contests the diviner’s proposal to offer rites of elimination. According to Kalinowski, such contestations owe much to the general tendency in the *Commentary* to ‘depreciate sacrificial and magico-religious practices’ and reflect a ‘deep crisis of belief in the traditional techniques of divination by turtle and yarrow’. For this view, see Kalinowski, *op. cit.* (note 20), 372, 390, 394–5.
41 Commentators have read the four characters jin wu nai yi differently. Yang Bojun interprets yi as zhuan (to concentrate). He thus takes the passage to mean that when a person concentrates his essence and qi solely on one matter, an illness will result. However, this reading overlooks the fact, as Chen Shuguo notes, that wunai can also mean dewu (to get to be without), and so the passage should be read as ‘treating the four periods as one’ (四時); see Chen Shuguo, *Chunqiu Zuozhuan jiaozhu 春秋左傳校注* (Changsha: Yuelu chubanshe, 2006), 806–7.
42 The phrase xianmei 先美 is ambiguous. Du You glosses the passage in the following way: ‘The ability of people of the same surname to get along resides in the initial attraction. When the attraction reaches its height, it will then be exhausted, and once exhausted, an illness will be generated’ 兩姓之相與先美矣, 美極則盡, 當則生疾; Chen Shuguo, *ibid.*, 807.
43 *Chunqiu Zuozhuan zhengyi* [Zhao 1.12], 41/12a–13a; cf. Yang Bojun, *op. cit.* (note 14), 1220.
of qi’. The taboos against endogamy are similarly justified in terms of preventing barren unions and illnesses resulting from sexual contact with relatives.\footnote{Chen Bangxian, \textit{op. cit.} (note 11), 22–3.}

Questions aside, considerable evidence exists to suggest that Physician He’s textual double, Zichan, was a noble expert on spiritual matters.\footnote{Li Wai-yee, \textit{op. cit.} (note 16), 201–2.} As a point of fact, Zichan is not called upon to weigh in on the causes of the illness, but rather to explain the oracle. In contrast to the Confucius of the Analects, who is famously reticent about spiritual matters,\footnote{\textit{Lunyu zhengyi} 論語正義 (Beijing: Zhonghua shuju, 1998), [11.12], 449.} Zichan accepts the challenge readily; he recounts the identity of the spirits – their origins, the background behind their respective domains, and the states under their control, and so forth.\footnote{\textit{Chunqiu Zuozhuan zhengyi} [Zhao 1.12], 41/10b–12a; cf. Yang Bojun, \textit{op. cit.} (note 14), 1217–9.} The description, which continues at length, represents no minor point in Zichan’s presentation; such background occupies more than one third of Zichan’s entire speech – it is longer, in fact, than his actual diagnosis. Given such an emphasis, Zichan’s knowledge of the numinous realm seems hardly incidental. To put it differently, Zichan appears less as a naturalist or ‘Confucian’ humanist than a figure with essential knowledge of the spirits.

Other episodes in the \textit{Commentary} further support the view that Physician He’s double (Zichan) was an expert on spiritual matters. As Li Wai-yee points out, Zichan serves as a consultant on spiritual matters in several different episodes. For example, he is summoned after the people of Zheng experience nightmares in the wake of the murder of a nobleman who lost a power struggle at court. Taking his cues from the dreams, Zichan realises that the spirit of the murdered man is restless and would continue to haunt the living unless placated. Accordingly, Zichan reinstates the son of the murdered man – who had been stripped of rank and fortune in the aftermath of the murder. More importantly, Zichan allows the son to offer sacrifices to the spirit of the murdered father, and so the nightmares cease.\footnote{Li Wai-yee, \textit{op. cit.} (note 16), 238; \textit{Chunqiu Zuozhuan zhengyi} [Zhao 7.9], 44/6b–7a; cf. Yang Bojun, \textit{op. cit.} (note 14), 1291.} A second episode involving the same Lord Ping provides a final example of Zichan’s prowess at interpreting signs from the numinous realm. Several years after the visits of Zichan and Physician He, Lord Ping becomes deranged and is confined to bed. At this time, Minister Zhao Wu is dead, and a new minister has assumed a leading role in the governance of the state. This new minister dreams about a golden bear entering the door of the lord’s bedchamber. Suspecting that the bear was responsible for the illness, the minister asks Zichan, ‘What demon might this be?’ This time Zichan does not deny that spiritual forces are at work. The bear, Zichan tells the minister, is a spirit who had been offered sacrifices by previous dynasties. So, Zichan inquires whether the Jin ruler might have neglected the cult of the spirit. Being a man of superior judgement, the minister recognises the value of Zichan’s advice and restores the sacrifices to the spirit. Not long afterwards, the sick lord makes a full recovery.\footnote{\textit{Chunqiu Zuozhuan} [Zhao 7.7], 44/15b–16a; cf. Yang Bojun, \textit{op. cit.} (note 14), 1289–90; cf. Li Wai-yee, \textit{op. cit.} (note 16), 237–8.}

Our analysis of the narrative structure of the larger account in the \textit{Commentary} discloses that Physician He represented the textual double of Zichan. Though sometimes treated by modern historians as a proponent of a new naturalist philosophy, the figure of Zichan was associated in the \textit{Commentary} with deep knowledge of the spiritual realm. The symmetry between the two episodes, moreover, points to a high level of artistic licence exercised by
the editors, who must have reworked existing archival materials – if not fabricated entire speeches. As a result, Physician He begins to look more like a literary device in a didactic story than the historical figure behind a scientific revolution.

Physician He and the Archetype

We have seen that the compilers of the Commentary associated Physician He not only with prophecies, but also with famous experts on the spirits. Was there something inconsistent about the fact that the physician would contradict the oracle and then issue a prophecy in the same breath? In order to answer this question, our investigation must be broadened to encompass the larger corpus of early narratives about medical divination, to determine whether Physician He’s speeches fit a pattern. To put it somewhat differently, we look at the rhetorical resources marshalled by the compilers of the Commentary in their construction of a patterned past. As we will see, a third and final reason exists to question the received view of the physician as initiating a shift in medical thinking. In Warring States narratives about divination, the noble expert of the spirits often disputed the oracle and questioned the necessity of sacrifices of appeasement; Physician He’s denial of spiritual involvement thus fits with an established archetype.

Before going further, it is worth noting that experts on the numinous realm were hardly created equal in works from the Warring States period. As Marc Kalinowski points out, there was a world of difference in the Commentary between the diviners or invocators at court, on the one hand, and noblemen known for their understanding of spirits, on the other. Of comparatively low status, diviners occupied hereditary posts, rarely associated with any special discernment or knowledge of the numinous realm.50 Counting ministers and rulers among their ranks, noble experts were linked, in contrast, with more unconventional interpretations of the numinous realm. When called upon to interpret dreams or omens and to determine which sacrifices were required, it was these figures, Kalinowski points out, who took a critical stance about oracles, going so far as to contest the interpretations of diviners and to question sacrifices of appeasement.51

The incident of 562 BC, which involves the father of Lord Ping, reveals that Physician He’s denial of spiritual involvement has precedents. According to the Commentary, the elder Jin lord is being entertained by the ruler of Song, who proposes to use the ceremonial music of the spirit Sanglin [桑林]. The proposal meets with favour from members of the Jin lord’s entourage, but one nobleman protests on the grounds that the ceremony is improper. Over the objections of the nobleman, the lord of Jin agrees to the ceremony but has second thoughts not long after it starts and decides to leave early. En route back to Jin, the lord falls ill, and so the shells are consulted and the spirit of Sanglin is reportedly seen in the oracle. But when members of the Jin entourage urge their lord to rush home to sacrifice to the spirit, the nobleman protests once more. ‘We declined the ceremony,’ he tells the lord, ‘It was the Song delegation that used it, and so if the illness is indeed caused by a ghost or god, it is the Song delegates who should be all the worse for it.’52 The analysis of the nobleman turns out to be on the mark, for the Lord of Jin recovers from his illness without offering a single sacrifice. The episode carries echoes of the sickness of Lord Ping. As before, the oracle is revealed to be a red herring, but it is

50 Kalinowski, op. cit. (note 20), 350, 370, 384, 390.
51 Kalinowski, ‘La rhétorique oraculaire’, op. cit. (note 37), 38, 40; op. cit. (note 20), 351, 354, 369, 373, 390, 394–5.
52 Chunqiu Zuo zhuan zhengyi [Xiang 10.2], 31/3b–4a; cf. Yang Bojun, op. cit. (note 14), 977.
only the nobleman who knows better. However, as with Physician He and his twin, the critical stance of the nobleman cannot be chalked up to agnosticism. On the contrary, the nobleman’s wariness of the ceremony reveals his attentiveness to spiritual matters and, above all, his concern about ritual missteps that might incur divine wrath. Indeed, his comment about the Song delegation hints that the lord would have been subject to divine retribution had the ceremony continued.

The case of the king of the southern state of Chu (fl. 490 BC) provides an additional example of an expert on the numinous realm, who challenges the message of the oracle. According to the Commentary, when the king falls ill, the tortoise is consulted and the Yellow River is named as the source. Interestingly, the king does not act on the information provided by the oracle, which prompts his nobles to request permission to offer sacrifices on the king’s behalf. The king nevertheless resists the pressure and explains his reasoning as such:

三代命祀、祭不越望。江、漢、雎、漳、楚之望也。福福之至、不是過

According to the sacrificial mandates of the three dynasties, [the ruler] should not make offerings that extend beyond the hills and mountains that can be seen from within the distance of the state.\(^53\) The Jiang, Han, Ju, and Zhang rivers represent [the limits] of such sacrificial [obligations] for Chu. Since blessings and calamities have nothing to do with [what resides] beyond these rivers, the [god of the] Yellow River could not have been offended by me, however deficient in virtue that I may be.\(^54\)

The episode shares several commonalities with the illness of Lord Ping. To begin with, we find a familiar contest between the oracle and the noble expert. As with Physician He and his double, the king rejects the conclusions that are to be drawn from the oracle. While the king does not reveal the actual source of his illness, he is nevertheless clear that the oracle is a red herring. In addition, the rejection of the oracle does not amount to scepticism regarding the existence or power of the numinous realm. On the contrary, the king’s comment affirms the power of the gods and sacrificial obligations of human princes. It is only that the king knows that the jurisdiction of the god does not extend to Chu territory, which lies south of the Yellow River.

Our discussion has been confined to accounts preserved in the Commentary, but it is worth emphasising that similar themes can be found in other Warring States texts. As Table 1 should reveal, narratives of medical divination – which are to be distinguished from divination records – are found in a handful of historical chronicles and excavated manuscripts, including the Spring and Autumn Annals of Master Yan \[^{[1]}\]. In many cases, the narratives feature the interpretations of a nobleman who either contests the message of the oracle or argues against the necessity of performing sacrifices of appeasement.

Let us look at one of the accounts found in the Annals of Master Yan, which shows that there was nothing unusual about Physician He both disregarding the message of the oracle and discussing heavenly retribution. The most famous of such episodes revolves around a bout of fever that plagued the lord of the powerful state of Qi, which is interpreted by the

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\(^{53}\) I follow Du You in interpreting the reference to ‘sacrifices by the great lords to the distant [gods and spirits of] the mountains, rivers, and stars within the borders’ 諸侯祭祀境內山川風辰; see Chen Shuguo, op. cit. (note 41), 1254. For a different reading, see Kalinowski, op. cit. (note 20), 354.

\(^{54}\) Chunqiu Zuozhuan [Ai 6.4], 58/2a–b; cf. Yang Bojun, op. cit. (note 14), 1636; for another story regarding King Zhao and medical divinations, see Chunqiu Zuozhuan [Ai 6.4], 58/1b–2a; cf. Yang Bojun, op. cit. (note 14), 1635–6.
Table 1: Records of Divinations/oracle interpretations of illnesses.

| No. | Date (BC) | Sick | Textual source(s) |
|-----|-----------|------|-------------------|
| 1   | 633       | Xiong Zhi 熊晉 of Kui 晉 | Zuozhuan [Xi 26.5] |
| 2   | 631       | Lord of Jin | Zuozhuan [Xi 28.12] |
| 3   | 608       | Lord of Qi  | Zuozhuan [Wen 18.1] |
| 4   | 562       | Lord of Jin | Zuozhuan [Xiang 10.2] |
| 5   | 544       | Mother of Wuyu 無芻 | Zuozhuan [Xiang 28.9] |
| 6   | 540       | Lord Ping of Jin | Zuozhuan [Zhao 1.12]; Guoyu [Jinyu 8] |
| 7   | 534       | Lord Ping of Jin | Zuozhuan [Zhao 7.7]; Guoyu [Jinyu 8] |
| 8   | 521       | Lord Jing of Qi | Zuozhuan [Zhao 20.6]; Yanzi chunqiu [wai] 7.4a-7b; Yanzi chunqiu [nei] 1/7b-8a; Shanghai bowuguan, VI: 157–92. |
| 9   | 521       | Lord Jing of Qi | Yanzi chunqiu [nei] 6.3b-3c |
| 10  | 521       | Lord Jing of Qi | Yanzi chunqiu [nei] 3.5b-6a. |
| 11  | 515       | Shusun Zhaozi 樸孫昭子 of Lu | Zuozhuan [Zhao 26.4] |
| 12  | 490       | King Zhao of Chu | Zuozhuan [Ai 6.4] |
| 13  | 490       | King Zhao of Chu | Zuozhuan [Zhao 26.4] |
| 14  | 431       | King Jian of Chu | Shanghai bowuguan, v. 4, 195–215. |
| 15  | 256       | King She (r. 314-256) of Zhou | Zhanguo ce 1/6a |

Table 1: Records of Divinations/oracle interpretations of illnesses.

famous minister Yan Ying [晏婴] (d. 500 BC). For one account, the lord of Qi is seriously ill for more than a year. Confident that the illness will improve by doubling the number of sacrifices, the lord dispatches his diviners to make rich offerings to the ancestral spirits – above and beyond what had been offered by his predecessors. The lord’s condition, however, does not improve. Suspecting his diviners of foul play, the sick lord convenes a meeting with several nobles including Yan Ying, announcing his plan to kill the diviners in order to move the gods and to end the scourge. Predictably, the plan meets with approval from the sycophants, but Yan Ying remains silent. Sensing opposition, the lord presses Yan for an answer, thus giving the minister an opening to express his disapproval:

晏子曰：「君以祝為有益乎？」公曰：「然。」「若以為有益，則詭亦有損也。君疏賓而遠拂，忠臣擁塞，諫言不出，臣聞之，近臣嘿，遠臣騰。眾口鍵金，今自調（抑）【攝】以東，姑尤以西者，此其人民眾矣，百姓之咎怨讟謗，詣君于上帝者多矣。一國詭，兩人祝，雖善祝者不能勝也。」

Master Yan said, ‘Does your lordship believe that offering prayers will bring benefits?’ The lord replied, ‘Yes, this is so.’

Master Yan then said, ‘If this is indeed the case, then cursing will also bring harm to Your Lordship. Your Lordship keeps at a distance the ministers who would assist him and alienates those who would help him. Thus, the loyal ministers have been blocked [in their efforts] and their admonishments are silenced. Your servant has heard it said that when the favourites are blind to the truth and those distant are dumb, the sound of the angry clamours of the masses will be great indeed! At present, the state of Qi reaches to the West from the cities of Liao and She, and in the East, its borders reach to Gu and You. Among the different inhabitants of Qi, the hundred surnames are full of resentment and dissatisfaction, and many of them curse

55 For the first version of the episode, see Chunqiu Zuozhuan zhengyi [Zhao 20.6], 49/5b–7b; cf. Yang Bojun, op. cit. (note 14), 1415–18; Sibu bei yao (ed.), Yanzi chunqiu 晏子春秋, pt 90 (Shanghai: Zhonghua shuju, 1927/36) [wai], 7/4a–b. For a second episode, see Yanzi Chunjiu [nei], 1/7b-8a; Ma Chengyuan 馬承源 (ed.), Shanghai bowuguan cang Zhanguo Chu zhushu 上海博物館藏戰國楚竹書 (Shanghai: Shanghai guji, 2001/8), 6.157–92.
your lordship to Heaven. If the whole state curses you, then your lordship’s two invocators – even if they are good – will be unable to counteract the effects of the curse.\textsuperscript{56}

A number of parallels exist between this episode and the visit of Physician He. True, the particulars of the case are different. In contrast to Physician He, Yan Ying does not find himself questioning whether the illness had a spiritual cause; instead, Yan is sceptical that the deities were disgruntled in this case because of their lack of sacrifices. Still, the narrative is similar enough to the illness of Lord Ping. To begin with, we find the same habit of questioning the sacrificial logic of illness. Physician He’s rejection of spiritual causes can be seen as a challenge to the view that illnesses could always be handled through sacrifices of appeasement. Yan Ying’s position similarly overturns the simple arithmetic of sacrifice (i.e. the more sacrifices and prayers, the less vulnerable the prince to illness). All the same, neither of these figures questions the existence of gods and spirits. Much like the physician, Yan affirms the power of gods to make humans sick, and indeed, his stance on sacrifice reveals his belief in Heavenly justice. Just as Physician He stresses the power of Heaven to strike down negligent ministers, Yan Ying highlights the connection between the conduct of the prince and his health. As he explains it to the lord, the only way to reverse the effects of the curse is to address the root problem: the quality of the lord’s governance. If the lord rules in a benevolent fashion and leads an austere life, the collective curses will come to an end and the illness will improve.

The illness of a king of the fifth-century BC comes still closer to articulating the positions found in the visit of Physician He. This account is preserved in a manuscript dating to the third or fourth century BC that was looted from a tomb before being bought by the Shanghai museum from an auction in Hong Kong.\textsuperscript{57} Possessing no known parallels in sources transmitted through the ages, this manuscript recounts a series of divinations performed in the Chu court in the mid-fifth century. According to this manuscript, the king falls ill after observing a divination performed to determine the cause of a long drought. The king subsequently dreams of hills and streams and suspects that the nature spirits of a state recently annexed by Chu were responsible. Consequently, the tortoise is consulted, but the nobles at court debate about what to do. One noble interprets the oracle as confirmation of the king’s dream; the culprits were indeed the nature spirits of the new acquisition and so a sacrifice should be made to appease them. Another noble, however, disagrees on the grounds of precedent; the earlier Chu kings, this noble reminded the other, had not offered sacrifices to the spirits in question, and so it would be improper for the king to do so. At a loss about what to do, the pair consults a third nobleman, the wise Taizai Jinhou [太宰宿侯], who is described, no less, as a ‘sage’ and ‘descendant of a sage’. Taizai sides with the second nobleman, arguing that the king would be rewarded for putting ancestral traditions above his own wellbeing. ‘The ghosts, spirits, and the Lord-on-High [i.e. a god]’, Taizai explains, ‘are the most exalted and clear-sighted and so they invariably

\textsuperscript{56} Yanzi Chunqiu [内], 1/8a.

\textsuperscript{57} For the origins of the manuscript, see Sarah Allan, ‘Not the Lun yu: The Chu Script Bamboo Slip Manuscript, Zigao, and the Nature of Early Confucianism’, Bulletin of the British School of Oriental and African Studies, 72, 1, 115–51: 116. My understanding of the manuscript draws upon the reconstruction of the text of Lai Guolong 来国龙, ‘Jian dawang bohan’ de xushi jiegou yu zongjiao beijing – jianshi “shaji”’, Proceedings for the Second International Forum on Excavated Manuscript at the National Taiwan University, Taipei, Taiwan (Taipei: Taiwan daxue chubanshe, 2011), 433–462. For previous discussions, Shen Pei 沈培, ‘Cong Zhangguo jian kan guren zhanbu de bizhi 從戰國簡看古人占卜的“範式”, Guwen zi yu gudai shi, 1 古文字與古代史 (2007), 391–434; Chen Wei 陳維, ‘Jian dawang bo han’ xinyan’《簡大王泊旱》新研, Jianbo yanjiu, 2 (2007), 259–68; Kalinowski, op. cit. (note 20), 392–3.
will know [about the king’s choice]. ‘The king’s illness’, he furthermore promises, ‘will come to an end starting today’.

By now, all this should be familiar, as the Shanghai manuscript contains echoes of themes seen in the narrative about Lord Ping. Much like Physician He (and Zichan), Taizai challenges the message of the oracle, which is understood by other members of the court to mean that a sacrifice of appeasement was necessary. As with Physician He and Zichan, Taizai’s challenge to the oracle should not be read as a sign of scepticism about the numinous realm. (In a later episode recounted in the same manuscript, Taizai in fact calls for a sacrifice to be carried out by the king in order to end the drought.) On the contrary, Taizai’s comments betray confidence in the power of the spirits. As with Physician He, Taizai explains that the spirits not only monitor the conduct of men, but they will also reward and punish them. In this respect, Taizai’s position is very similar to that of Physician He, who emphasises that Minister Zhao would be punished for failing to shepherd the ruler.

By situating the figure of Physician He within the larger corpus of divination narratives, we find a third reason to question whether the episode in the Commentary by Zuo portended changes in medical theory. Judging from other episodes in the Commentary and accounts about divination, the compilers used existing tropes and templates to cobble together the image of the healer. What is more, there was nothing strange about the denial of spiritual involvement, nor incoherent about the fact that Physician He would reject the message of the oracle in one case and issue a prophecy about divine retribution in another. On the contrary, such a position makes sense within the context of the larger Warring States corpus, where contested oracles and disputed sacrifices represented a leitmotif.

The Afterlife of the Physician

An examination of the narrative structure and larger historiographical context of the episode long seen as ‘China’s first medical case history’ provides a new perspective on Physician He. When examined with care, it becomes clear that the figure of Physician He did not occupy an important role in the medical tradition because of any challenges to conceptions of the demonic causes of illness. The contributions of the original Physician He, if he ever existed, are lost to us. Instead, the figure found in the Commentary should be understood as a persona, one that functioned as a rhetorical device. What is more, within this narrative, the persona of Physician He not only affirmed the power of the spirits to visit death on the wicked, but was also patterned after noble experts of the numinous realm. Such experts moreover were not only apt at detecting when the hand of the spirits was at work, but also capable of determining when illness or death was the result of bodily imbalance and immoderate lifestyles. For all of these reasons, the views ascribed to Physician He can only be understood in relation to the rhetorical conventions of Warring States narratives about divination. What is more, an understanding of the significance of Physician He requires that we move beyond the earlier, decontextualised readings of the Commentary to appreciate the role that historiographical conventions played in creating the medical persona and shaping the self-fashioning of later healers.

Indeed, our contention that Physician He was originally the creation of chroniclers receives support from a later account found in the Discourses of the States (third century BC). For the most part, the later description overlaps with the earlier presentation in the

58 The transcription of the text appears in Ma Chengyuan, op. cit. (note 55), 4, 195–215.
Yet it is worth pointing out that the later account provides a few new details, which further suggest that the physician was a rhetorical device. The Discourses altogether drops the theory of the six qi and instead focuses on Master Zhao’s impending death. As a result, the association between Physician He and older views of sickness and death as divine punishment is still more pronounced. Moreover, the later text provides us with a remark not found in the earlier Commentary. At one point, Minister Zhao asks Physician He whether healers have a role to play in state affairs, to which the physician remarks, “The superior physician rescues the state, whereas the inferior one merely attends to the sick.” The physician’s comment underscores the rhetorical interchangeability of the good minister and the exemplary physician in early Chinese chronicles. And indeed, in many other texts from early China, the physician stands in a metonymical relationship to the sagely minister, just as the body exists in parallel to the body politic.

Our foregoing discussion begs the question how Physician He became a medical ancestor, particularly one credited with the naturalistic turn in Chinese medicine. For this to happen, the rhetorical account in the Commentary by Zuo had to be first remade into a literal piece of medical history, and Physician He had to be transformed from a rhetorical device to an actual historical personage. This first step occurred belatedly. Prior to the late first century BC, medical thinkers gave few indications that they were aware of Physician He. The physician’s name is noticeably missing from the great compendiums of the Han medical tradition: the Yellow Emperor’s Inner Classic, the Pharmacopeia of the Divine Husbandman, and the Classic of Difficult Issues. Moreover, the name of the physician cannot be found in any of the formula books or manuals for vessel diagnosis recovered from Qin (221–206 BC) and Han-dynasty (206 BC–AD 220) tombs.

The first presentation of Physician He as a historical personage and medical ancestor occurs in the Seven Summaries. Written by Liu Xin (ca. 50 BC–AD 23), son of the imperial bibliographer Liu Xiang (77–6 BCE), the text was based on an earlier catalogue that contained a bibliography of all surviving medical texts, compiled with the assistance of court physician Li Zhuguo. Here, Liu Xin provides the first reference to Physician He after centuries of silence:

In high antiquity, there was Qibo and Yufu; in middle antiquity, there was Bian Que and Physician He, whose analyses of illnesses had implications for the state and who examined the body to learn of the circumstances of governance. Since the founding of Han, there was the Lord of the Granaries [ie. Chunyu Yi, fl. 180–154 BC]. At present, the technical arts have fallen into obscurity, and so for this reason, I have analysed the documents, ordering such arts into four kinds.

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59 Schaberg, op. cit. (note 16), 5.
60 Guoyu 国語 (Shanghai: Shanghai guji, 1978) [Jinyu 8], 14/473.
61 On this point, see Yamada Keiji, Zhongguo gudai yixue de xingcheng 中國古代醫學的形成 (Taipei: Dongda tushu gongse, 2003), 369.
62 Ban Gu 班固, Hanshu 漢書, annotated by Yan Shigu 雲師古 (581–645), 12 vols (Beijing: Zhonghua shuju, 1962; reprinted 1996), 30, 1701; Okanishi Tameto, Song yi qian yi jia kao, 905; cf. Vivienne Lo and Li Jianmin, ‘Manuscripts, received texts, and the healing arts’, in Michael Nylan and Michael Loewe (eds), China’s Early Empires: A Reappraisal (Cambridge: Cambridge University Press, 2010), 367–97: 368.
63 The Seven Summaries was lost but was reconstructed based on quotations by later scholars. For fragments, see Liu Xiang 劉向 and Liu Xin 劉歆, Qilüe bielu yiwen, qilüe yiwen 七略別錄佚文, 七略佚文, Deng Junjie 七月佚文 (ed.) (Shanghai: Shanghai guji, 2008), 106–7. A version of the text appears in the Treatise on Arts and Literature (Yiwen zhi 藝文志) of Ban Gu, ibid., 30, 1779.
The passage is worth marking, for we must first bear in mind that the genealogical account that contains Physician He was not only associated with healing, but with the technical arts (fangji 方技) more generally. By some Han-dynasty accounts, such arts encompassed astrology, hemerology, and diviners.\(^\text{64}\) In other words, the association between medical and divinatory knowledge remained strong. The new role awarded to Physician He moreover deserves comment. Here, Physician He figures in a genealogical account that treats medicine and other related arts as a subject of independent enquiry rather than as a metaphor for statecraft. Along with Bian Que, who also played a large role in political allegories from the Warring States, Physician He is now presented as an exemplary practitioner of the middle ages, a halfway point between a golden antiquity and recent times. To put it differently, Physician He is no longer a rhetorical construct or literary prop, but rather a historical person that anchored the craft in space and time.

The sudden interest in Physician He after so many centuries of silence – and in a discussion concerned primarily with medical matters – is striking. Granted, Liu Xin is never explicit as to why Physician He acquires so much importance both as an ancestor and a historical personage. We may attribute the interest in part to logistical factors; in contrast to his contemporaries, Liu had access to the *Commentary*, which made it possible for him to hear of Physician He in the first place.\(^\text{65}\) In addition, the personal agendas of Liu Xin and his father undoubtedly played a role. To see this, we must not only bear in mind that the Lius associated Physician He with all forms of technical knowledge, but also that they saw the early physician as epitomising the connections between technical learning and statecraft. To paraphrase Liu, Physician He examined the body to learn of state matters. In other words, the expertise of masters of the technical arts extended to the health of the body politic. The importance of such a message was not lost on the Lius. Though blood relatives of the emperor, father and son were relegated to minor posts within the Han court.\(^\text{66}\) In order to raise their fortunes, the two busily applied their knowledge of astrology to matters of state.\(^\text{67}\) For them, figures such as Physician He illustrated the critical importance of giving men with mastery of the technical arts a leading voice at court.

While commentaries produced in the centuries after the *Seven Summaries* disclose that Physician He’s position as an ancestor was secure, interestingly he did not acquire a reputation as the forefather of Chinese medical naturalism until the twentieth century. In fact, premodern works on medicine often mention He’s theory of the six qi 以及 alongside his prophecy about the minister, which suggests that the interchangeability of divinatory and medical forms of knowledge remained unchanged.\(^\text{68}\) One sixteenth-century work, *The

\(^{64}\) For this expansive understanding of *fangji*, see Ban Gu, *op. cit.* (note 62), 10, 1780. Liu Xin, in contrast, defines *fangji* more narrowly to include healing, formula-making, methods for achieving transcendence, and the techniques of the inner chamber. As with Ban Gu, Liu Xin lists the four kinds of *fangji* alongside techniques for divination, an arrangement that suggests the close association between healing and other technical arts. On this point, see Liu Xiang and Liu Xin, *ibid.*, 107.

\(^{65}\) Michael Nylan, *Yang Xiong and the Pleasures of Reading and Classical Learning in China* (Yale: New Haven: 2011), 40–5.

\(^{66}\) Michael Loewe, *A Biographical Dictionary of the Qin, Former Han, and Xin Periods* (Leiden: EJ Brill, 2000), 372.

\(^{67}\) Loewe, *ibid.*, 374.

\(^{68}\) For representative examples, see Zhang Gao 張果 (twelfth and thirteenth centuries) and Yu Bian 命弁 (sixteenth century), *Yi shuo: fu su Yi shuo 醫說:附錄醫說* (Shanghai: Shanghai kexue jishu chubanshe, 1933 [1994]), 1/6a–6b. The *Yibu quanlu 醫部全錄* provides quotations to Physician He in famous Ming and Qing medical works; see Chen Menglei 陳夢雷 (seventeenth century) *et al.*, *Yibu quanlu* (Beijing: Renmin weisheng
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History of Medicine [醫史], provides a case in point. Its author even discussed the puzzle with which we began – namely, how Physician He came to the conclusion that the chief minister would die while examining the Lord of Jin. In the margins, this author noted that some were sceptical about the episode. By way of rebuttal, the same author alluded to the controversy surrounding a Buddhist monk of the Song dynasty (960–1279). The monk was famous for his ability ‘to determine the station, luck, and virtues of a person based on an examination of the pulse’. And like a ‘divine being’ (shen [神]) the same monk was also capable of discerning the fortune of a son based on the condition of the father.69 This physician’s penchant for divining apparently had created a stir, with at least one famous man objecting that the monk’s feats had no precedent in antiquity and were either impossible or unorthodox. The famous minister Wang Anshi [王安石] (1021–1086), however, disagreed, citing the example of Physician He. ‘In ancient times,’ Wang said with approval, ‘Physician He examined the pulse of the lord of Jin and determined that his great minister was about to die.’ This led him to conclude, ‘If the fate of a minister can be seen in the pulse of the lord, what is so strange about a physician seeing the father and knowing the [fate] of the son?’70 Wang does not explain his reasoning at length. Presumably, he thought that since Physician He knew of Minister Zhao’s impending death, the monk could also divine a son’s fate based on an examination of the father. The comments of Wang – which are quoted with admiration in the Ming history of medicine – are illuminating. Such comments reveal that in the minds of premodern physicians and their literate patrons, there was nothing strange about a physician acquiring the qualities of a seer and being able to divine the future. What was at stake was whether it was possible to infer someone’s fate based on an examination of a close associate. For Wang Anshi as well as the author of The History of Medicine, the answer to this question was to be found in the Commentary by Zuo. And given what we have learned about the original account, healers through the centuries naturally would have found the figure of Physician He to their liking. After all, Physician He was as shrewd at detecting imbalances in the qi as he was at predicting the turns in the wheels of fortune.

We have seen the process by which Physician He became a medical ancestor, but this raises the question of how he specifically acquired the reputation as a naturalist, particularly when he had been extolled for his ability to discern the will of Heaven for two millennia. To answer this question, it would be instructive to close by reflecting on the account of Physician He in Chen’s aforementioned History of Chinese Medicine. By the time this work was revised in 1937, Physician He had acquired a decidedly more secular face.71 Admittedly, Chen’s treatment of Physician He does not appear to have been very different from those of his premodern forebears. Much like earlier commentators, Chen was something of a bricoleur, for he was in the habit of cutting out passages from ancient sources and stitching them into a new genealogical narrative.72 Still, there is one subtle difference worth marking, one that foreshadowed the strong associations of Physician He

69 Li Lian 李濂, Yishi 養史 (Shanghai: Shanghai guji, 1995), 1/223.
70 Tuotuo 脫穵, Songshi 宋史 (Taipei: Dingwen shuju, 1980), 255/462, 13524.
71 Chen’s work was translated into Japanese in 1940 as Shina igakushi 支那醫學史 (Tokyo: Daito Shuppansha); hence his influence on Japanese narratives of the history of Chinese medicine.
72 For such a characterisation, see Nathan Sivin, ‘The History of Chinese Medicine, Now and Anon’, Positions: East Asian Cultures Critique, 6, 3 (1998), 731–62: 735.
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with naturalism in the 1960s. In recapping the story about Physician He’s visit to Jin, Chen omits mention altogether of the prophecy both in his History of Medicine and his later Record of Chinese Medical Personalities (1957). Instead, his presentation focused on the physician’s discussion of the six qi. What is more, Chen goes so far as to argue that Physician He’s diagnosis discloses medicine’s momentous ‘split with superstitious healers’.

To understand why Chen chose to downplay Physician He’s associations with religious experts, we must set the writing of modern accounts within a broader context of the ascendancy of biomedicine. As Sean Lei shows us, not content merely to compete with practitioners of Chinese medicine, Western-style doctors went so far as to demand in 1929 a ban on traditional Chinese drugs and acupuncture. While ultimately unsuccessful, the call prompted a thorough re-evaluation of the indigenous medical tradition. Some of the defenders of Traditional Chinese Medicine argued that the tradition had value because it was empirical and was thus worth retaining in spite of its metaphysical failings. Others took a different tack, however, asserting that the metaphysical framework of Chinese medicine represented a symbolic system for conveying naturalistic concepts.

The decades the follow the History of Chinese Medicine saw intensified efforts to reconcile the indigenous medical tradition with the universal values of modern, Western science. The Communist victory in 1949 brought with it state support for Chinese herbs and acupuncture, as Mao declared that Chinese medicine represented ‘our motherland’s treasure house’. Such support not only spurred efforts to defend the dignity of Chinese medicine, but also to reconcile it with a materialistic science so as to create what Mao envisioned as the Unified Medicine of China. Figures such as Chen Bangxian and Fan Xingzhun, the early leaders of the Institute of Chinese Medicine in Beijing, worked towards such ends. In their writings, they upheld the universal validity of biomedicine, more specifically, and evolutionist narratives of the progress of science, more generally.

73 For Chen’s role in mentoring the first generation of medical historians in the People’s Republic in the capacity as teacher and Deputy Director of the Institute of Chinese Medicine, see Zheng and Li, op. cit. (note 11), 268.
74 Chen Bangxian, op. cit. (note 11), 22; Chen Bangxian and Yan Lingzhou, Zhongguo yixue renming zhi (Beijing: Renmin weisheng chubanshe, 1956), 237–8.
75 For efforts to carve a role for Chinese medical traditions within a world medical tradition, see Sean Lei, ‘Writing Medical History for a Living Tradition, or, Rescuing Medical History from both the Nation and Nature’, Science, Technology & Society: An International Journal Devoted to the Developing World (forthcoming). For responses to attacks, see Zheng and Li, ‘Xiandai Zhongguo yixueshi yanjiu de yuanliu’, op. cit. (note 11), 28 (268).
76 Sean Lei, ‘When Chinese Medicine Encountered the State, 1910/49’ (PhD Dissertation: University of Chicago, 1999), 67–9; Sean Hsiang-lin Lei, ‘From Changshan to a New Anti-malarial Drug: Re-networking Chinese Drugs and Excluding Traditional Doctors’, Social Studies of Science, 29, 3 (1999), 323–58: 324.
77 Sean Lei, ‘How did Chinese Medicine become Experiential? The Political Epistemology of Jingyan’, Positions: East Asian Cultures Critique, 10, 2 (2002), 333–64.
78 Ralph C. Crozier, Traditional Medicine in Modern China: Science, Nationalism, and the Tensions of Cultural Change (Cambridge: Harvard University Press, 1968), 96–7; see also Fan Xinghan, op. cit. (note 6), 22–3.
79 Elisabeth Hsu, ‘The History of Chinese Medicine in the People’s Republic of China and its Globisation’, East Asia Science, Technology, and Society: An International Journal, 2 (2008), 465–84: 466; Mei Zhan, Other worldly: Making Chinese Medicine Through Transnational Frames (Durham: Duke University Press, 2009), 37; Zhang and Li, op. cit. (note 11), 28 (268). For clinical studies to determine the physiological basis of acupuncture, see Lu and Needham, op. cit. (note 19), 184–62. For Mao’s goals of unifying Western and Chinese medicine, see Kim Taylor, Chinese Medicine in Early Communist China, 1945–63: A Medicine of Revolution (London and New York: RoutledgeCurzon, 2005).
80 Chen Bangxian, op. cit. (note 11), 1; see Taylor, ibid., 80–4.
nothing of scientific value to the Chinese medical tradition. Over thousands of years of accumulated experience, such historians asserted, the Chinese had made discoveries that could contribute to the progress of medicine.\(^81\) And amid the darkness of feudal society, there were forward-thinking secularists, who challenged the dominant superstitions of the day.\(^82\)

Given such circumstances, we can see how Physician He acquired his modern reputation. By omitting mention of the physician’s prophecy and overlooking centuries of commentary, Chen Bangxian and later Fan Xingzhun were able to attribute a materialist outlook to the physician. In this way, they could find new uses for the physician from Qin, one better suited for the story of Chinese medicine developing in parallel to that in the West.\(^83\) Rather than exemplifying the backward tendencies of traditional society, He now exemplified the genius of Chinese civilisation, for in the account of the visit to Jin, we find the first stirrings of a scientific mentality that also took root in Greece. And indeed, roughly about the time that Hippocrates purportedly broke with older views about the divine sources of illness, He’s ‘rejection’ of demonic causes initiated China’s progress from superstition to enlightened materialism.\(^84\)

\(^81\) See, for example, Sean Lei’s discussion of Wang Jiming (1889–1972) and Wu Liande (1878–1960), two Western-educated physicians who produced the *History of Chinese Medicine* (published first in 1932 in English). On this point, see Writing Medical History for a Living Tradition; see also Fan Xinghan, *op. cit.* (note 6), 1; Lee T’ao [Li Tao], ‘Achievements of Chinese Medicine in the Ch’in (221–207 BC) and Han (206 BC–AD 219) Dynasties’, *Chinese Medical Journal*, 71 (1953), 380–96; Lee, ‘Ten Celebrated Physicians and Their Temple’, *Chinese Medical Journal*, 58 (1940), 267–74.

\(^82\) Chen Bangxian, *op. cit.* (note 11), 6–7, 10, 67. The Han physician Zhang Zhongjing 張仲景 (c. 150–219) is a particular favourite of modern interpreters, who celebrate Zhang’s empiricism and relative de-emphasis on correlative cosmology. See, for example, the preface by Mr Chen in Liu Boji 賴伯祺, *Zhongguo yixueshi* 中國醫學史 (Yangmingshan: Huagang chubanbu, 1974) I, 1; see also Scheid, *op. cit.* (note 5), 206.

\(^83\) Taylor, *op. cit.* (note 79), 66.

\(^84\) For an older view of Hippocratics, see Owsei Temkin, *Hippocrates in a World of Pagans and Christians* (Baltimore: Johns Hopkins University Press, 1991), 190. For more nuanced understandings of the relationship between the Hippocratics and religious healing, see G.E.R. Lloyd, *In the Grip of Disease: Studies in the Greek Imagination* (Oxford: Oxford University Press, 2003), 40–84; Vivian Nutton, *Ancient Medicine* (London: Routledge, 2004), 103–14.