

measures, such as creating an official glossary of Chinese translations for Western medical terms, more effectively eroded Chinese medicine than did the sweeping ideological acts that have garnered more historical attention. The Ministry of Health's notorious 1929 resolution to abolish Chinese medicine, for example, never achieved its aim and only energised Chinese medicine's proponents. But the work of the government translation committee began to propagate a vernacular based on Western medical concepts without arousing comment or opposition. Daniel Asen's illuminating essay on efforts to transform forensic investigations shows that scientific hubris was not confined to the Ministry of Health. A year before the Ministry's abolition resolution, the Beijing Bar Association proposed to discard the thirteenth-century text that still informed coroners' work, on the grounds that it had not changed in six hundred years and was based on 'experience' (considered unscientific) rather than 'theory'. Whatever merits the call for reform may have had, Asen shows that it ignored the substantial changes that later scholars and coroners had made to the text, and the flexible way in which it was applied in practice – not to mention the value that centuries of empirical observation from China offered to the theories of forensic science coming from Japan and the West. Reformers of this period, in particular, seem to have embraced Western ways of constructing knowledge so completely that they failed to see any value in their own intellectual heritage.

Howard Chiang's avowed aim as editor of this volume is to bridge a gap between 'the literature on historical epistemology, which has mainly concerned itself with European and American science, and the historiography of East Asian medicine, which rarely invokes the tenets of the philosophy of science'. (p. 30) I agree with this characterisation of the two fields named, but I am not sure the book creates the bridge that Chiang claims it has. The contributors do occasionally mention the scholars whom Chiang holds up as today's standard-bearers for the philosophy of science – Lorraine Daston, Arnold Davidson, Ian Hacking, Hans-Jörg Rheinberger – but with the exception of Judith Farquhar, they do not seem to engage in any extended way with ideas from the philosophy of science.

I see this as a defect only in a truth-in-advertising sense: the book does not deliver exactly what the introduction promises. But readers who come to this volume already versed in historical epistemology will be able to ascertain for themselves how these histories of Chinese medicine affirm, negate or complicate the ideas they are familiar with from that literature. The essays provide plenty of lumber, in other words, but it is up to the reader to build the bridge.

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Benjamin A. Elman (ed.), *Antiquarianism, Language and Medical Philology: From Early Modern to Modern Sino-Japanese Medical Discourses* (Leiden and Boston: Brill, 2015), pp. viii, 232, \$135.00, hardback, ISBN: 978-90-04-28544-6.

Two sets of taken-for-granted distinctions have until very recently constituted the invariable lens through which medical historians, particularly those of a comparative bent, have approached East Asian medicines. The first frames Asian medicines with reference to the West, be it ancient Greece or modern science. The second differentiates these Asian medicines into a set of distinct cultural practices defined by the existence of modern nation states. Chinese medicine thus can be described as a humoral medicine similar to that of

pre-modern Europe, yet also distinguished from it by an essentially different clinical gaze; and while it may share that gaze with traditional Japanese Kampo by way of common origins, it also differs from it on account of different cultural values or aesthetics.

The present volume makes an important contribution towards a growing body of scholarship that seeks to re-orientate the history of East Asian medicines towards less Eurocentric and modernist perspectives. To this end it brings together nine essays that propose medical philology as a fruitful new focus of research in the field. As defined by Benjamin Elman in the introduction, medical philology identifies the engagement with classical texts as a core feature of East Asian medicines in the early modern and modern periods. While it shares an antiquarian orientation with classicism, the praxis orientation of medicine aligns all such interpretive efforts with clinical problems of the present. Elman's focus on philology thereby resonates with a focus on translation as central to the continued vitalisation of living traditions emphasised by other researchers in the field.

Elman's brief introduction in Chapter 1, which lays out the theoretical orientations of the volume and situates its genesis in a series of research seminars at Princeton, is followed in Chapters 2 to 9 by eight essays that explore medical philology in practice in the period from roughly the eleventh to the early twentieth century with a focus on China and Japan. Read collectively the authors thereby succeed in directing our attention to the flow and movement of texts and ideas across political and cultural regions in time and space. While all of the essays are at the cutting edge of their respective fields, the concerns of their authors are at times too specialist to be of interest to generalist historians, with circulation even among specialists limited by the high price of the volume.

Chapter 2 by Asaf Goldschmidt explores the attempts and ultimate failure of a twelfth-century Chinese physician to transmit his medical knowledge through texts that explored a range of different genres from the rewriting of classics, to clinical commentary and case studies. Chapter 3 by Fabien Simonis examines the emergence and then disappearance of 'syncretism' 折中 as a new philological strategy of text production in Chinese medicine between the thirteenth and sixteenth centuries. Chapter 4 by Daniel Trambaiolo shows how a wider concern with philology and a 'return to antiquity' 復古 in Tokugawa Japan (1600–1867) enabled physicians to generate new strategies for engaging with ancient medical texts and create entirely new forms of medical practice. Chapter 5 by Mathias Vigouroux looks at the role the inflow of acupuncture texts from China to Japan in the fifteenth century played in the revival of acupuncture in Japan during the sixteenth century, and how this differed from developments in China before and afterwards. Chapter 6, by Susan Burns, focuses on the engagement of a village doctor in nineteenth-century Japan with the *Treatise on Cold Damage*, a Chinese medical text dated to the second century. This is the very same text that inspired the physicians described by Trambaiolo in Chapter 4, demonstrating how their concerns had percolated to the village level but also how they were reconfigured in the context of rural medical practice. Chapter 7 by Frederico Marcon looks at the transformations of older types of knowledge, specifically medicine and materia medica, through and in relation to modern western science in nineteenth-century Japan. Chapter 8 by Angela Ki Che Leung retraces how ancient medical knowledge was utilised differently by physicians in nineteenth- and twentieth-century Japan and China to deal with a disorder labelled by means of the same ideograms - 腳氣 - which was then newly prevalent in both countries, but one which manifested and was understood and reacted to in very different ways. Chapter 9 by Mayanagi Makoto, finally, provides a meticulous examination of how book buying and collecting – in this case of a Chinese collector of medical books in early

twentieth-century Japan – interfaces with the various aspects of philology in the medical domain.

Individually and collectively the essays in this volume successfully demonstrate that the translations at the heart of East Asian medicines viewed from the perspective of philology are multi-dimensional endeavours proceeding along multiple trajectories, often at once. They encompass not only the linguistic translation of words and texts but also the many related activities into which such literal translation is embedded on which it relies: the editing, copying, printing, storage, movement and trading of manuscripts and books; the institutions and technologies that facilitate these activities; and the movement of human actors and the networks that tie them to each other across time and space. This focus makes it entirely impossible to perceive medical traditions in a bounded cultural sense, successfully disabling what was hitherto assumed to be the starting point of any investigation into East Asian medical traditions. In that sense, the volume more than delivers on its promise and will become an essential reference point for scholars in the field.

There are also, however, some shortcomings that need to be pointed out, not in order to distract from the achievements of the editor and contributors but because they relate to wider problems in the field of East Asian medicine itself. Three points in particular stand out. The first, not surprisingly, is the issue of translation itself. Different authors frequently translate the same term (for instance, 證 *zheng* or *sho*) differently without this being made transparent, or without authors constructively engaging with such difference. Secondly, I would have liked to see a greater engagement of authors not only with each other but also with other writers in the field. My final concern relates to how seriously historians should take the technical nature of the practices they analyse. For instance, any clinician conversant with the *Treatise of Cold Damage*, which constitutes the focus of three chapters of the present volume, would find that some of the arguments and translations presented by the authors demonstrate not only a lack of understanding of how its formulas work as a medical practice but even, perhaps, an attitude of carelessness in representing clinical knowledge. Should a historian of chemistry be familiar with the difference between carbon-dioxide and carbon-monoxide, or a practitioner of Chinese medicine knows the difference between the Tang and the Ming dynasties? If so, then the same surely might be demanded of historians of any medical tradition, however strange or unfamiliar its practices may seem.

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Valeria Finucci, *The Prince's Body: Vincenzo Gonzaga and Renaissance Medicine* (Cambridge, MA, and London: Harvard University Press, 2015), pp. 273, \$39.95, hardback, ISBN: 978-0-674-72545-4.

In Valeria Finucci's book different dimensions of early modern medicine are shown in interaction with the individual life of Vincenzo Gonzaga, fourth duke of Mantua. Because of Gonzaga's status, his life had repercussions on the political, cultural and social dimensions of the duchy of Mantua and of other Italian states with which the duke dealt. Finucci narrates in four engagingly written chapters the life of Vincenzo Gonzaga 'an alpha male in search of a cause' (p. 9). In this book Finucci skilfully avoids the Scylla and Charybdis inherent in the narration of an individual life, namely, the dangers of generalising out of a single case, and the trap of psychobiography.