Editorial

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The frequently quoted statement by Heraclitus (c. 535–475 BCE), ‘the only thing that is constant is change’, aptly summarises the wide range of transformations analysed in this issue’s articles and translations. The issue consists of a stand-alone article that raises new insights through both a gender analysis and textual exegesis of a famous medical case in the Zuozhuan (Zuo Commentaries, comp. 4th cent. BCE), a main section consisting of four articles and three translations that innovatively address the central theme of ‘Transformations of the Treatise on Cold Damage in East Asia’, and a concluding section featuring thirteen reviews of books on the history and anthropology of medicine in Tibet, China, Japan, and Southeast Asia.

Zhang’s opening article ‘Enchantment, Charming, and the Notion of the Femme Fatale in Early Chinese Historiography’ argues that the cultural concept of the femme fatale had ritual and political as well as medical resonance in Chinese antiquity. By examining the range of textual responses to the famous sex-related medical case of the Lord Ping of Jin (who reigned in the mid-sixth-century BCE), Zhang proposes that they reveal a broader concern about the sexual excess of patriarchs in early Chinese polygamous families. Zhang thus shows how complex, varied, and political the discourses on illness were already before the first versions of what became the medical canons—such as the two parts of the Inner Canon of the Yellow Emperor (c. 1st cent. BCE) and the Treatise on Cold Damage and Miscellaneous Disorders (Shanghan zabing lun, c. 196–219 CE)—came into existence later in Chinese antiquity during the Han dynasty (202 BCE–220 CE). Culturally resonant notions of enchantment, charming, and the femme fatale as potentially pathogenic were circulating centuries before we have evidence of climatic factors, such as cold and wind, articulated as dominant pathogenic vectors of disease.

The remaining four articles and three translations thus turn their attention to the second of the two above-mentioned Han medical classics. Volker Scheid’s introduction to the first four articles reveals how illuminating his research group’s focus on the Treatise on Cold Damage has been as a window on historically emergent formations of different medical practices in China, Japan, and Korea between the sixteenth and twentieth centuries. Previous scholarship on
medical history in East Asia has dominantly taken the Cold Damage medical current that developed in response to the later Song editions of the Treatise on Cold Damage as representative of the more conservative flank of classical Chinese medicine. Wedded more to the idea that the best responses to their patients’ illnesses remain preserved in the canonical formulas from the second-century Treatise rather than the many innovations in Chinese drug therapy and disease concepts that developed after the Song dynasty (960–1279), this flank has been considered by some scholars to be more or less stagnant. Certainly, such scholars recognised that the Cold Damage medical current had a complex commentarial tradition but they largely understood its revisions, rearrangements, and reinterpretations as textual forms of conservative resistance to broader changes in clinical practice and medical thought.

The four articles in the section on ‘Transformations of the Treatise on Cold Damage in East Asia’ put an end to such a simplistic assessment. Together they reveal varied ways physicians across East Asia used the Treatise on Cold Damage to think through complex concerns about the human body, disease, the environment, and appropriate therapeutic responses in their own eras. Scheid’s physicians thus found inspiration in the Treatise to conceptualise the human body in new ways that in turn opened up the possibility for the newly emergent medical currents of warm disease within China from the seventeenth century on and the classical formula current in Japan during the eighteenth century. Keiko Daidoji picks up this second thread in Japan through a contextualised analysis of eighteenth-century physicians, especially Yoshimasu Tōdō, and their innovative interpretations of the Treatise as responses to both Chinese influence and local Japanese consumer expectations. Eric I. Karchmer then shows how the innovations Yoshimasu Tōdō and other Kanpō physicians developed in Japan returned to Mainland China in the first half of the twentieth century and became part of a broader movement within the Chinese medical community to use the potent formulas of the Treatise as a resource for strengthening the Chinese national body. In conclusion, Soyoung Suh analyses not only how Korean physicians also found the Treatise useful to think through their medical concerns from the sixteenth to twentieth century but also how useful the Treatise can be for medical historians as a lens into specific historical periods and local responses to disease in East Asia broadly.

The three contributions to the following translation section amplify this issue’s opening theme on transformations within the Cold Damage tradition in East Asian medicine. Asaf Goldschmidt begins this section with translations of three medical case histories on cold damage disorders from the Song physician-official Xu Shuwei’s Ninety Discussions on Cold Damage Disorders (printed
c. 1165–73). This exceptional text represents one of the earliest attempts to make the, by then, century-old imperial-Song versions of the *Treatise on Cold Damage and Miscellaneous Disorders* more accessible to a wider audience. The Song Medical Bureau for Revising Medical Texts (newly established over a century earlier in 1057) had published between 1065 and 1066 three partial versions of the extant *Treatise on Cold Damage and Miscellaneous Disorders* that had been found in the Song imperial library. These were the ten-chapter *Treatise on Cold Damage Disorders* (*Shanghan lun* 傷寒論, 1065), eight-chapter *Canon of the Golden Casket and Jade Case* (*Jinkui yuhan jing* 金匱玉函經, 1066), and three-chapter *Essential Discussions of Prescriptions in the Golden Casket* (*Jinkui yaolue fanglun* 金匱要略方論, 1066).1 Goldschmidt argues that Xu innovatively used the literary genre of the ‘medical case’ (*yian* 醫案) to best represent his clinical experience using one or more of the newly published versions of the *Treatise* as a foundation. In this way Xu thought he could reconcile differences he observed between the *Treatise* and contemporary clinical practice, thereby enabling other doctors to integrate the relatively new cold damage concepts and formulas into their own medical practices.

Florence Bretelle-Establet’s translation introduces us to a physician very far in time and place from Xu Shuwei but one who was wrestling with similar concerns related to discrepancies observed between the *Treatise* and current medical practice. By the time the Guangdong physician Chen Huantang wrote his *Back to the True Zhongjing* in 1849, nearly 700 years had passed since Xu Shuwei’s mid-twelfth-century attempt to improve medical practice among his contemporaries based on his interpretation of Zhang Zhongjing’s *Treatise on Cold Damage*. Although situated in the Far South of the mid nineteenth century, Chen similarly sought to reconcile differences he perceived between the *Treatise* and his contemporaries’ clinical practices. But whereas Xu accepted the Song edition of the *Treatise* as it was and focused on reforming clinical practice through his own example, Chen sought to reform clinical practice by revealing the mistakes and misinterpretations of later rearrangements of the *Treatise* itself.

Xu Shuwei thus innovatively used his own medical cases and Chen Huantang conventionally applied the older genre of critical commentary to later Ming redactions of the *Treatise* to align their colleagues’ clinical practices better with what both authors considered to be a classical medical canon. Both had the same goal but marshalled the power of completely different genres—medical case records and critical commentary—to address it. Although Chen

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conventionally drew on quotations from the *Inner Canon* (*Neijing*) in his textual criticism, however, he exceptionally compared the anatomy of humans with that of animals he had cut open himself. He thus used the new form of anatomical evidence within the older commentarial form to support his clarion call to return to the *Treatise* from Han antiquity.

Chip Chace and Jason Blalack’s introduction to the Hebei physician Zhang Xichun’s (1860–1933) *Essays on Medicine Esteeming the Chinese and Respecting the Western* (1909) brings the core theme of transformations of the *Treatise on Cold Damage* sixty years forward and into the early twentieth century. Similar to Xu Shuwei, Zhang also used the genre of case records to illustrate a broader clinical argument related to the *Treatise*; namely, that a patient with a type of febrile disorder (*wenbing* 溫病) should not be treated with a canonical cold damage formula. But differently from both Xu and Chen before him, Zhang developed some new formulas derived from but not identical to the by then canonical formulas of the *Treatise*. The authors show how, although Zhang Xichun’s ‘Follow the Dragon Decoction’ may well have been derived from one of the *Treatise*’s formulas (‘Bupleurum, Dragon Bone, and Oyster Shell Decoction’), through his reformulation Zhang demonstrated an appreciation of Zhang Zhongjing’s *Treatise* far beyond the rote application of canonical formulas. This medical case may also be read as a portrayal of one physician’s clinical virtuosity through both his adaptation of an ancient formula from the *Treatise* to his individual patient and his adoption of therapeutic strategies from multiple medical frameworks—cold damage and warm disorders in this translated case—and even including western medicine in some of his other medical cases.

Although the overall structure of this issue is organised thematically, another way to follow the central theme of transformation is to read the separate contributions chronologically. Thus I would recommend starting with Hanmo Zhang’s ‘Enchantment, Charming, and the Notion of the *Femme Fatale*’. Then delve into the four academic articles on ‘The *Treatise on Cold Damage* in East Asia’ and the three translations that illustrate different individual responses to making the *Treatise* relevant for contemporary clinical medicine.

Of these seven contributions taken together, I thus suggest starting with Goldschmidt’s translation of three medical cases by the twelfth-century physician Xu Shuwei. Then read Scheid’s analysis of innovations within the Cold Damage current that followed during the Ming and Qing dynasties. Suh’s study of different responses among Korean physicians from the sixteenth to twentieth centuries and Daidoji’s work on Japanese physicians who developed the ‘Ancient Formulas Current’ during the middle to end of the Edo period (1603–1868) complement well Scheid’s argument concerning change within the Cold
Damage current across East Asia. Bretelle-Establet’s translation of a passage from a mid-nineteenth-century Guangdong physician’s polemic against previous redactions of the Treatise and Chace and Blalack’s translation of a medical case of ‘mistaken identity’ between cold damage and warm disease from an important 1909 medical text logically follow these first three articles and two translations. Finally, Karchmer’s focus on debates over the relevance of the Treatise on Cold Damage during the Republican period in ‘Ancient Formulas to Strengthen the Nation’ concludes well this issue’s thematic thread on transformations of the Cold Damage tradition within East Asia.

Whatever order you choose to read these wide-ranging yet thematically coherent contributions to this issue I hope you will find them as interesting, exciting, and inspiring as I found them to be as I shepherded them through the publication process. As Heraclitus also wrote, ‘No man ever steps in the same river twice, for it’s not the same river and he’s not the same man’. As the contributions to this issue have demonstrated, the same may be said of a text as people pass it along the currents of time, reformulating it in the process to meet the demands of new expectations, interpretations, and audiences.