

Imagining Acupuncture: Images and the Westernization of Asian Medical Expertise

Roberta Bivins

Chinese medicine draws upon a rich iconographic tradition; it was through this tradition (as well as careful observation, and the translation of medical texts) that the medical expertise of Asia became known to Europeans. As a therapeutic modality defined by and practiced in conjunction with a unique set of body maps, acupuncture's western history can be traced in the images through which it was represented. From Ten Rhyne's 1683 *De Acupunctura* to contemporary medical textbooks, changes in the imaging of acupuncture reveal the process by which it has been partially assimilated into western theory and practice -- and expose, too, areas of cultural, medical, and scientific intransigence. Anatomizing the body's surface, these pictures simultaneously render visible the impact of historical moments and trends on the cross-cultural exchange of medical expertise.

Here, I will focus primarily on images created by western medical professionals, whether intended for lay or medical audiences. Although often presented as straightforward copies of Asian originals, these pictures were actually translations, and as such, were subject to exactly the same kind of errors that have plagued translations of Asian medical texts. Like Chinese medical terminology, the images were variously exoticized, domesticated, over-simplified, and embellished. Moreover, it is essential to remember that none of these images existed in a vacuum; they were read in conjunction with an array of material and especially textual sources. And just as the images inflected (and reflected) western perceptions of acupuncture, so they were inevitably inflected by western perceptions of China. Thus I will explore contemporary commentaries on the images themselves, on their Asian originals and on 'Chinese' understandings of the body in general. And interpretations of images like those prepared by Ten Rhyne in the late 17th century, Engelbert Kaempfer in the early 18th, and James Morss Churchill in the early 19th were also influenced also by travellers' highly coloured accounts of the practice of acupuncture in China and Japan.

Trends in western medicine have also played a profound role in both the iconography of acupuncture, and its reception. So too have changing western modes and technologies for representation of the body. And although maps of the body's surface were among the most dramatic western representations of acupuncture, they did not provide the only images of the technique. The technology of acupuncture – needles, needle cases, striking implements, three-dimensional figures – too were closely observed and frequently portrayed, particularly in medical texts and instrument catalogues. They also appeared in lay accounts, although until the 20th century they were rarely pictured. Instead, they were depicted in vivid, detailed, and sometimes fanciful language.

The 20th century brought significant changes in the pathways by which westerners, whether of the laity or the medical profession, accessed information about acupuncture. Immigration brought whole communities – and their medical

practitioners and practices -- to Western Europe and North America. New and more accurate translations of Chinese medical, cosmological and philosophical texts became ever cheaper and more readily available. And more westerners were able to travel to East Asia to observe or study acupuncture in situ. But images and models have remained central to understandings of acupuncture in the West. In the final section of the paper, I will briefly consider the impact of contemporary representations of acupuncture on its acceptance as either complementary or alternative to biomedicine.

针灸的形象化：亚洲医学技术的形象化及西方化 Dr Roberta Bivins

中医吸收了肖像插图的丰富多彩的传统，由此（再加上细致的观察和对医学文献的翻译）使得亚洲的医学的专长和技术被欧人所了解。由于有关治疗方法的阐述和实践是与一组特定的人体图相结合的，所以西方的针灸史应该追溯于这些绘图所描述的内容及时期。从 1683 年 Ten Rhyne's 编著的 *De Acupuncture* 到同时代的医学文献中，针灸绘图的变迁揭示了其吸收部分西医理论及实践这一过程，而且还暴露了文化、医学和科学的某些领域中的不调和。对人体的表面进行剖析，这些绘图同时从可视的角度反映了特定的历史时期以及流行趋势对跨文化的医学专业技术的交流的影响。

在这里，我将着重论述西方医学专家们创作的图示，包括那些为专业人士及非专业人士所制作的图示。虽然这些图常常被冠名为亚洲原版的拷贝，但是事实上这些图是翻译版本。因此这些图中难免会出现那些在翻译亚洲医学文献时所出现的同样的错误。比如在对中医术语进行描绘时，这些图在不同程度上经常被描述的更奇异，或更简单，或者被美化。此外，我们不能孤立地看待这些图；在阅读时是应该将它们与其它大量一些资料，特别是文字资料相结合。正如这些图一方面受西方对针灸的理解的影响（同时它们也反映了西方对针灸的认识），它们还不可避免的受了西方对中国的理解的影响。因此，在这里我将对那些与这些图同时代所出版的注解本进行分析。这些注解本有的是直接解释绘图的，有的是对这些图的原籍图进行分析的，有的是解释“中国文化”对人体的一般认识。西方的一些有关中国和日本的游记中对针灸进行了绘声绘色的描述，而十七世纪晚期的 Ten Rhyne、十八世纪早期的 Engelbert Kaempfer 和 十九世纪早期的 James Morss Churchill 对这些图的理解都受了那些游记有机的影响。

同时代社会的思潮也影响了针灸图学及其被社会的接受。另外西方对身体表现的模式和技术的变化也对针灸图学有所影响。虽然最引人注目的西方针灸图是有关人体外表的，但是它们并不是有关针灸技术的仅有的图。针灸术包括针、用针、令人惊叹的工具、以及三维立体塑像模型；西方人也对它们进行了细心的研究并经常将它们描述在医学文献和器械目录中。虽然在非专业性的书籍文献中也有对它们的

描述，但是在二十世纪以前对其图像的描述是极少的。而对它们的文字描述是极其生动的，甚至有时所用的语言是极赋有想象力甚至很夸张的。

到二十世纪，无论是西方的外行还是医学专家所获得针灸信息的途径有了重大的改变。到西欧和北美来得移民带来了他们完整的社会团体，包括他们的医生和他们的医疗实践经验。中国的医学、宇宙论和哲学方面的文献在西方有了更新更准确的翻译版本，而这些新译本的出版发行比以前便宜多了，使更多的人也有机会接触它们。而且更多的西方人能到东亚对针灸进行实地考察和学习。但是在西方对针灸的理解仍是以图为中心。在这篇论文的最后部分，我会简要的介绍当代的针灸的图表对针灸被认确为生物医学的辅助或者替换医学的影响。

The Significance of Anatomical Charts in Tibetan Medical Paintings Series

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Tibetan medicine, an integral part of traditional Chinese medicine (TCM), pays high attention to drawing art, regarding it as an important intuitive teaching tool. It is called *Sman thang* in Tibetan language in which “*sman*” refers to “medicine”, while “*thang*” is the short form of “*Thangkha*”, or a hanging painting scroll.

Sman-thang has a long history. As early as the *Rgyud-bzhi* (*Four Medical Tantras*), in the 85th chapter of its third volume, entitled “Therapy for Wounds of Upper and Lower Trunk”, there are exact hints on how to locate the positions of the viscerae. For instance, the heart is located in a triangle drawn in between the three points, viz. the two nipples and a point four-finger breath below the laryngeal protuberance (Adam’s Apple). When a square is drawn outside the above triangle, the lungs are scattered just outside the triangle, or the remaining space of the square. Details are also given to the exact locations of other viscerae such as the stomach, the small and large intestines, the liver, and spleen, the kidney etc. This description demonstrates exactly that by then an anatomical chart for the chest and abdomen is already prepared and the gross anatomical chart of later ages, including that of the now available *Sman thang*, is exactly based on this design.

At the early stage, *Sman thangs* are mostly devoted to drawings for herbs, body organs and structures. However, it was not until the beginning of the 18th century that a full series of 80-painting *Sman thang* (the last one being supplemented later) was completed by the then Regent of the fifth Dalai Lama, Sde srid Sang rgyas rgya mtsho. This series of medical paintings deals with all parts of Tibetan medical system, the fundamental theory, the history, anatomy, physiology, embryology, pathology, clinical science, diagnostics, therapies, materia medica, macrobotics, etc.

Among the 80 paintings in the series, about 20 or one fourths are devoted to anatomical structure of the body which can be categorized into the following groups:

1. Appearance: mainly dealing with the configurations of the head, the physical constitutions, ... (No. 49)

2. Visceral metaphors: vividly depict the physiological functions of the internal organs, such as a cauldron for the stomach, a water bottle for the urinary bladder, the rafters of a house for the ribs, ... (No. 8)

3. Body points: there are numerous special points in the body, including bloodletting points, points for moxibustion, vital points. The points for moxibustion are different from that of TCM acupoints. (Nos. 6-7, 16-17, 40-41)

4. Skeleton: showing all bones forming the body, including the skull, the limb bones, trunk bones, even the teeth and nails. (Nos. 8-9)

5. Vessel systems: in Tibetan medicine, there are several systems of vessels, including connecting vessel, white vessel, black vessels ... There are also vessels on which points for bloodletting are located. (Nos. 11-12, 13-14, 15, 16-17, 49-50)

6. Internal organs: there is a special painting, the 51st painting, devoted to the internal organs in the chest and abdomen. All the important organs, the five “*don*” (hollow viscerae), the heart, liver, spleen, lung and kidney; the “*snod*” (solid viscerae), the stomach, the large intestine, the small intestine, the gallbladder, the urinary bladder and “*bsam se'u*” (the gonads) are included. (No. 51) Interestingly, most of the anatomical structures in Tibetan medicine are full of its own ethnic flavor. The points for bloodletting, vital points, the channels, the white vessels are quite unique, being different from all its counterparts in other traditional medical systems.

However, special attention should be paid to the painting on internal viscerae, the 51st in the series. Unlike all the other paintings in the series which are anonymous for its painter, this visceral painting bears 2 painters' name, Menlha Dundrup and Tendzin Norbu. Both painters belonged to the lineage of the same family Lhobrag. The former painter drew the anatomical chart by following the traditional pattern which was rather diagrammatic, idealistic and religious. The heart, for instance, is in the shape of a lotus flower situated at the center of the chest with its narrow end (the apex) pointing upward, and the round end at the bottom, just like the king of a state, seated at his throne. Meanwhile, all the other organs are all diagrammatic in its shape. Tendzin Norbu, the later generation of Menlha Dundrup, totally disagreed with the arrangement of his ancestor. He was a naturalist painter and drew his anatomical painting in a very scientific way. He emphasized that what he painted was based on what he “witnessed” in cadaver.

He put all these witnessed organs besides the original ones, including the heart, lungs, liver, spleen, kidney, gallbladder, stomach, large intestine, small intestine, urinary bladder and *bsam se'u* (the gonads).

By carefully analyzing this painting, it is quite natural that one can draw a conclusion on the scientific, historical and practical significance of this Thangkha:

1. The most exciting change of the painting is the position of shape and the heart which is no longer at the center of the chest. Rather, it shifts to its actual form *in situ*, with the position moved little to the left chest and the apex pointing down and towards the left. These changes offer a challenge to the traditional idea that the heart is “the king of a state” and should be situated right at the very center of the body!

2. All the paintings for internal viscerae are basically correct in its shapes and positions. Judging from the fact that Tibetan anatomy didn't have any clues of influences from the western anatomy, this painting can be regarded as by far the most advanced one in contemporary medical system, even not inferior to that of the father of anatomy in western medicine. Andreas Vesalius, just a century away from Tenzin Norbu.

3. Tenzin Norbu was very practical. He even corrected the wrong proportion of length of the cross-legged painting based on Buddhist iconography and put it back to an actual proportion.

4. Through the painting, one can see that the spleen and *bsam se'u*, two of the internal organs, are all well shaped and in their position. Since the visceral theory in Tibetan medicine is basically derived from its counter part in TCM, it may shed light on the solution on this long disputed organ of spleen and *san jiao* in TCM.

As I know, there are a few of these Thangkha paintings collected in the Wellcome Institute Library, including Bloodletting and Moxa points (No. 48, Wellcome order, not *Sman thang* order) and 3 anatomical charts which are all related to channels and points (No. 53, 54, 55). Unfortunately, there is no No. 51 (No. 49 in another series collected at Buryatia Museum in Russia), and at the seminar held in April 18, 1986 in Wellcome Institute, with the title “International Seminar on Documents of Mid Asia as Reflected in the Ancient Classics of Tibetan Medicine”, though there are papers dealing with the Tibetan Thangkhas, again, there was no mentioning about this painting, it is therefore worthy to introduce this rare and valuable painting to our audience here.

藏医学系列挂图（曼汤）中解剖图谱的重要意义

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藏医学是中国传统医学的组成部分，对直觉的教学工具的绘制给予高度注意。在藏语中，它称为“曼汤”，其中“曼”意为“医药”，“汤”为“汤卡”的简称，也即可以卷起来收藏的挂图。

“曼汤”有悠久的历史。早在《四部医典》时期（公元8世纪），在其第3卷“秘密医典”的第85章（篇名为“上下躯干创伤的治疗”）中，业已对内脏的定位给予了描述。例如，心脏位于以喉头下四横指、两乳这三个点画成的三角形之中。如对此三角形外接一四方形，则方形的其余部分是肺脏的部位。还对其余的内脏，如肝、脾、肾、大肠、小肠、胃给予描述，这些描述明确地表明当时已经绘有胸部及腹部的解剖图。包括后世的系列挂图“曼汤”中的解剖图都是由此衍化而来的。

早期的“曼汤”大多属于草药图和内脏图。一直到18世纪初，才由五世达赖喇嘛的摄政王第司·桑吉嘉措设计并主持绘制了一整套80幅（最后1幅为后代补绘的），其内容涉及藏医药的全部，包括藏医药的历史、基本理论、生理、病理、胚胎、解剖、临床各科、诊断学、藏药学及养生学等。

在整个系列中，大约有20幅（占1/4）左右是涉及解剖学的挂图，大约可以分成以下几类：

1. 外观类：主要涉及头形和体型（第49图）。
2. 内脏比喻：生动地描述人体器官的功能，如胃如锅，膀胱如水壶，肋骨如屋椽等（第8图）。
3. 身体穴位：身体上有无数特殊的点，即穴位，包括放血穴位、灸疗穴位，与汉族中医的灸疗穴位并不完全一样，或者有较大的不同（第6-7，16-17，40-41图）。
4. 骨骼系统：即构成身体构架的骨骼，包括头颅、四肢骨骼、躯体骨骼，以至于牙齿和指甲等（第8-9图）。
5. 管线系统：在藏医中，有好几种管线系统，包括连络脉、白脉、黑脉等等，还有供放血用的穴位的管线系统（第11-12，13-14，15，16-17，49-50图）。
6. 内脏器官：系列中的第51图是记录胸腹部内脏的“曼汤”。重要的内脏，包括五脏（心、肝、肺、脾、肾）和六腑（小肠、大肠、胆、胃、膀胱、三木休[指生殖器官]），都收入其中（第51图）。

有趣的是，藏医大多数的解剖挂图都充满民族色彩，其中的放血穴位，要害穴位、经络和白脉都十分独特，与其他传统医学体系的同类结构并不相同。

应当对内脏结构这一幅挂图给予特殊的注意，即第51幅，与全套其他的所有挂图不一样。一般说，几乎所有的图都不具有给画者的姓名，惟独这幅解剖挂图有两个具名的画家，即曼拉顿珠和丹津诺布。两位画家都属于同一个家族的，即洛札家族的成员。在本图中，曼拉顿珠以传统的绘制手法和观念的方

式来绘图，这是比较图解式的、理想主义的方法，有宗教色彩。例如，他把心脏画成莲花形状，位于胸腔的正中央，其尖端朝上，圆端在下，犹如一国的国王端坐在宝座上。另外，其余的内脏器官也都画得比较图解化。丹津诺布是曼拉顿珠的后代，他不同意他的先辈的这种绘制手法，改而用科学的手法来进行绘制。他强调指出，他所绘的是根据他“亲眼所见”来制作的。他把这些“亲见图”中的各种脏器都附绘在原图的旁边，以资对照，包括心、肺、肝、脾、肾、小肠、大肠、胆、胃、膀胱和三木休（生殖腺）等。

如果认真分析对比一下，我们不难得出一些结论，即关于这幅图的科学的、历史的和现实的意义：

1. 这幅图中最为引人注目的改变是关于脏器的位置和形态的变化，其中的心脏已不再位居胸腔的正中，而是略向左侧移位，其心尖部分不再向上，而是指向左下侧。这个改变对于传统的观念，即心脏为一国之君，位于身体正中，是一个极为大胆的挑战。

2. 所有的其他脏器的位置和形状基本上是正确的。根据当时的历史条件，藏医学并未接受西医学及其解剖学的影响来看，可以认为这些解剖图在当时是各传统医学中同类图谱中之最先进的，而且也并不比一百多年前被誉为西方解剖学之父的维萨留斯的同类图逊色。

3. 丹津诺布是非常现实的，他甚至把趺跏而坐的坐像中，由于佛教制像的规则而把人腿变短一些的不对称的比例矫正过来，使绘图与人体的正常实际比例相吻合。

4. 从图中可以见到，有两个器官，即脾与三木休，确实是有形的实体器官，这两个器官相当于汉族中医的脾和三焦。在中医学术上对这两个器官的功能和形态，历代以来长期争论不休。这幅藏医挂图中的这两个有形器官，也许会有助于澄清古代中医对脾和三焦的认识。

据我所知，在国外的一些单位也收藏有这类曼汤，例如，在威尔康医史研究所的图书馆，就有几幅与医学有关的挂图，其中有放血及火灸穴位（该所编号 48 号，不是系列挂图的序号，下同），还有 3 幅与经络和穴位有关的曼汤（53，54，55 号）。但该所并无此系列挂图中的第 51 幅内脏解剖图。

就我所知，在俄罗斯的布里亚特共和国里，收藏着另外一套比较完整的曼汤系列，全套共有 76 幅，这第 51 幅内脏解剖图被列为第 49 幅。1986 年 4 月 18 日，在英国伦敦威尔康医史研究所召开了一个名为“关于古代藏医典籍中所反映的中亚文献国际学术研讨会”。尽管会上也有论文涉及“曼汤”（如埃默瑞克博士的论文），但并未讨论到这个第 51 幅的内脏解剖图，因此，值得向各位推荐这幅曼

Che-Chia Chang
《婦女雜誌》中的藥品廣告圖像

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商務印書館所發行的《婦女雜誌》（1915-1931），是中國近代史上歷時最久、享譽最盛、銷量也最廣的女性刊物，除了受到女性讀者的喜愛之外，也曾經被票選為青年學子十大愛讀雜誌之一，雖然是在上海發行，讀者卻遍及全國以及海外的華人圈，是民國初年極具影響力的平面媒體，也因此該雜誌成為各種商業力量爭相刊登廣告而炙手可熱。本文即欲以這份具有一定代表性的雜誌中的醫藥廣告為例，探討民國初年中國的藥界業者，如何藉由廣告展現其影響力，而廣告內容中的種種訴求方法，如何呼應了當時中國民眾的衛生觀念與服藥心理，更是值得關注的課題。在這份雜誌中，每期均有五到十通的藥粧品廣告，除了商務印書館自己的新書廣告數量差可與之比擬外，在比例上明顯凌駕其他商品。英、美、日等國的藥廠或大藥房，固定每期在此刊登藥粧廣告，其他的歐美國家乃至中國的國產企業，偶而也會利用此處的版面進行宣傳。從此看來，當時中國的成藥市場乃是另一個世界列強的競逐場，中國本土的力量相對顯得十分薄弱。

值得注意的是，在《婦女雜誌》中所廣告的藥品，幾乎沒有任何傳統的中成藥，唯一的例外可能是來自日本的婦人科漢方「中將湯」，可是，該藥品在經過廣告包裝後，一點也看不出這是一種傳統式的藥品。在另一方面，原本來自諸外國的各式成藥，有時候一方面吹噓該藥品乃是西洋知名藥學博士所調劑，受到西方醫學團體的肯定，然而所宣傳的各項功效，卻是對於中醫病症具備神奇的效能，呈現一種中西形象混雜的景象。從《婦女雜誌》中關於醫藥知識啓蒙的「醫事衛生顧問」讀者投書專欄中，我們可以看到受到正規訓練的醫師大聲疾呼，力主這些成藥並非「西藥」，然而如五洲藥廠所販售的「自來血」、中法大藥房所販售的「百靈機」、以及美國韋廉士大藥房所發售的「紅色補丸」等等藥品，卻一再強調他們乃是來自西方文明國家的先進配方，混淆民眾對於「成藥」與「西藥」的認知。

在《婦女雜誌》中的藥品廣告，已經有別於傳統社會主要依賴招牌或文字招徠說服的宣傳模式，加入了各式各樣醒目的圖像。這些圖像當中，有的是畫出正牌藥品的包裝商標的種種細節，呼籲讀者在購買時務必驗明正身，切不可讓偽造或仿冒的商品魚目混珠；有的則是用圖畫描繪出一個想像，刺激讀者的情緒或欲求，或者是一個家庭健康幸福而令人稱羨；或者是一位患者纏綿病榻而望之鼻酸，但無論是要追求幸福或者遠離病苦，都需要靠購買該藥品才能得到。更為複雜的廣告，則是編織一段故事，藉由圖像吸引讀者了解情節的同時，就把所欲宣傳的意念傳達到讀者的腦海。

在本文中，將特別提出兩種商品的廣告加以分析。一是日本的「中將湯」，二是美國韋廉士藥廠的「紅色補丸」。前者在近代日本廣告史中，以擅長利用廣告打動人心而佔有一席之地，《婦女雜誌》的「中將湯」廣告，也顯得較為活潑而引人注意。其中的圖像已經配合中國國情而重新編繪。但我們更關心的是，「中將湯」廣

告圖像的訴求方式有哪些是承襲自日本原有的廣告手法，又有哪些明顯顧慮了本地的市場因素。至於「紅色補丸」則因其驚人的創造力而在《婦女雜誌》的廣告中特別耀眼。有別於其他大多藥品定期刊載相同的宣傳內容，「紅色補丸」則是不斷地更新其訴求主題，以不同的觸角試圖刺激更多潛在顧客的慾望。本文將分析「紅色補丸」廣告圖像開發新顧客的技巧，也將討論其各種訴求方式之間的共通點，藉以探究在藥商心目中當時中國顧客的購藥心理。

The images of medicine advertisements in Woman's Journal

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Woman's Journal published by the Commercial Press (1915-1931) was a publication for female with the longest history , the greatest reputation and largest sales quantity in modern history of China . Not only did female readers like it , but also it was elected as one of the ten most favorite magazines by younger scholars . Though it was published in Shanghai , its readers were popular in national and overseas Chinese . It was a plane media of great influence in the early years of the Republic of China , so it was very powerful to advertise in the journal for various kinds of commerce entities . In this paper , by drawing assistance from the examples of the medicine advertisements in this representative journal , it will be discussed that how the Chinese pharmaceutical scholars in the early years of the Republic of China showed their influences depending on the advertisements . And another more attractive topic is how the various ad ways aroused an echo in the sanitary opinion and medicine taken psychology in Chinese population at that time .

In the journal , there were average 5 to 10 pieces of medicine or cosmetic advertisement in each periodical . The proportion was significantly higher than that of other commodities , except the amount of advertisements for new books published by the Commercial Press itself could draw a parallel . Pharmaceutical factories or larger drugstores in England , USA , or Japan published their medicine or cosmetic advertisements definitely in each periodical . Some enterprises in other western countries and state-run ones in China also advertised occasionally . In point of the view , the patent medicine market of China at that time was like another battle field for all the most advantaged countries in the world , while the competitive power of native China appeared comparatively very weak .

Notably , there were almost no any traditional Chinese patent ones in those medicines advertised in Woman's Journal . The singulare exception was probably Zhongjiangtang coming from gynecologic Chinese prescription in Japan . But after it was packed by ads , it couldn't be recognized a little as a kind of traditional medicine . On the other side , many kinds of patent medicine from the foreign countries were boasted that they were prepared by the famous western pharmaceutical doctors and received the confirmation from the western medicine community while the Chinese medicine ways was used to promote their magical efficacy . This caused a confusion about Chinese and western medicine . In the reader's letter column of the Medical and Sanitary Consulters in Woman's Journal , where the medical knowledge was enlightened , the well educated and trained doctors asserted forcefully that these patent medicines were not western medicines . But some ads emphasized repeatedly that the

prescriptions were advanced formulas coming from the western civilized countries , which made people confused about the patent and western medicine , such as Zilaixue sold by Wuzhou pharmaceutical factory , Bailingji by Chinese and French drugstore and Hongsebuwan by American Williansh drugstore .

The patterns of medicine advertisements in Woman's Journal had already shown the differences from the traditional ones that depended on signboard or words persuading by adding in all sorts of eye-catching images . In these images , some drew the details of the package trademark in original brand drugs , which appealed to readers to verify real and false when purchase and not to pass fish eyes for pearls . Others depicted an image with pictures in order to stimulate emotion or desire in readers . For example , drawing a healthy and happy family made others admirable or a bedridden patient made sad . But no matter to pursue happiness or depart from distress would be obtained by purchasing the medicine . More complex ads would make up a story . At the same time the picture drew the attention of readers to understand the plot , it conveyed the ideas into the readers .

In this paper , the advertisements for two commodities were analyzed especially . One is Zhongjiangtang of Japan , and the other is Hongsebuwan of American Williansh drugstore . In modern Japanese advertisement history , the former won its solid status because of its being expert in utilizing advertisements to move people . Its advertisements in Woman's Journal also appeared lively and caught the attentions . Pictures in them had already been re-drawn going with the Chinese situation nowadays . But what made us more interested in is , in these publicizing ways , which followed the primitive ones of Japanese and which apparently considered native market factors . As for Hongsebuwan , it especially glared because of its surprising originality in ads of Woman's Journal . Different from most of the other medicines ads with same periodical contents , it changed its topics constantly and tried to stimulate more latent desire of customers from various angles . In this paper , it will be analyzed the techniques of developing new customers by the ad images of Hongsebuwan and discussed the common characteristics in all kinds of advertisements in order to investigate the psychology of purchasing medicine in Chinese customers in drug dealers' ideas at that time .

张爱琳译

**Fanciful Images from Abroad:
The non-Chinese pictures in *Bencao Pinhui Jingyao***

Chen Ming (Peking University)

LIANG Yongxuan (Beijing Chinese Medicine University)

The *Bencao Pinhui Jingyao* 《本草品汇精要》 (*Materia Medica* Containing Essential and Important Material Arranged in Systematic Order) was a last big pharmaceutical work officially edited before modern China. In the Hongzhi弘治 16th year(CE 1503) of Ming Xiaozong明孝宗, under the masterminding of chief editor Eunuch Liu Wentai刘文泰, many experts and artists began to compile this pharmacopoeia and finished it after two years. According to the former order of *Zhenglei Bencao* 证类本草(Categorized Pharmacopoeia) written by Tang Shenwei 唐慎微during the Song period, this work was divided into ten categories of jade and minerals, fruits and trees etc.in forty-two rolls. It contains 1815 kinds of drugs and relative 1358 illustrations. It even has been the biggest drugs collection of multicolor illustrative plates in ancient China. These lifelike illustrations paint plants, animals, minerals, and more daily scenes such as picking drugs and making pharmacy. Beyond all doubt, *Bencao Pinhui Jingyao* is a great valuable work on both the history of pharmacopoeias and of societal lives or art in ancient China.

It is worthy of note that there are seven illustrations about foreign drugs, viz. Shuhe Xiang 苏合香(turuùka), Xiangzhen Xiang 降真香(?), Longnao Xiang 龙脑香(karpåra),Anxi Xiang 安息香(guggulu), Aina Xiang 艾纳香(+aileya), Zhihan 质汗(?), Diyejia 底野迦(Theriac)respectively in *Bencao Pinhui Jingyao*. There are nine non-Chinese in these seven pictures. In contrast to other characters in this work, they are typical foreigner from abroad, because they all have crimped hair, Roman noses, special mustache and apparels such as cap, gown, coif, girdle and boots. The aim of artists was to paint those foreign drugs with non-Chinese pictures.

The simple content of the seven illustrations is following:

Shuhe Xiang 苏合香(turuùka) Picture: Carrying drug. Two men were carrying a jar of remedy followed by a non-Chinese businessman. This picture looks like a scene to go to sell remedy.

Xiangzhen Xiang 降真香(?)Picture: Lifting drug. A non-Chinese was lifting a Xiangzhen Xiang tree on his shoulder.

Longnao Xiang 龙脑香(karpåra)Picture: Choosing drug. A non-Chinese man who squatted a big bamboo basket beside a Longnao Xiang 龙脑香 tree was choosing remedy. Those sundries were picked out outside the basket.

Anxi Xiang 安息香(guggulu) Picture: Picking drug. While one non-Chinese man was cutting open a guggulu bark, another man was filling the resin into a plate. There was a small drug keg under the tree.

Aina Xiang 艾纳香(=aileya) Picture: Picking drug. A non-Chinese man with a drug-pannier was showing a handful of herb to a Chinese herbalist who was picking drug beside the tree.

Zhihan 质汗(?) Picture: Boiling drug. A non-Chinese man was firing while another was agitating the liquid of drug in a vessel. There were four dishes and two bowls that filled with drugs on the desk beside them.

Diyejia 底野迦(Theriac) Picture: Offering drug. A non-Chinese man on his knees was paying black Theriac pills in tribute to a Chinese officer or physician who sat down.

Comparing text of each drug and its illustration, we can find that only Aina Xiang 艾纳香(=aileya) and Anxi Xiang 安息香(guggulu) Pictures are very close with relative texts. In other words, these seven pictures are more important and valuable in the history of medical culture exchange than in the history of pharmacopoeias.

At first, because of flourish exchanges of culture between China and foreign zones from Han to Tang period, most images of non-Chinese businessmen, monks and gods etc. were mainly sculpted or described in picture stones of Han, fresco in rock caves, silk and paper paintings especially along Silk Road, folding screen or frescos in tombs, and famous pictures handed down from ancient times. However, the image materials about non-Chinese medical activities are very rare.

Second, since Han and Tang Dynasties, there has been a close collection between Chinese and foreign medical culture. In the field of material medica, *Xinxiu Bencao* 新修本草(Newly Revised Pharmacopoeia) had begun to include great deal of foreign drugs. During Tang and Five Dynasties, there were even works that specially recorded foreign drugs such as *Hu Bencao* 胡本草 (Pharmacopoeia of the Western Barbarians) and *Haiyao Bencao* 海药本草 ([Over]seas Pharmacopoeia) . However, there were not any non-Chinese images in the schematic illustrations in pharmacology works including *Zhenglei Bencao* 证类本草(Categorized Pharmacopoeia) during Tang and Song Dynasties.

Although the Yuan period Hu Shihui's *Yinshan Zhengyao* 饮膳正要(Proper and Essential Things for the Emperor's Food and Drink) is an authentic Arabic recipes in Chinese language, its all illustrations are additive traditional Chinese characters. By the way, there are not any pictures in the extant manuscript of *Huihui Yaofang* 回回药方(Muslim pharmaceutical prescriptions). By intuitionistic visuals these seven pictures in *Bencao Pinhui Jingyao* has directly shown the existence of foreign medical culture.

Third, the seven images mainly deal with aromatic drugs. From Song and Yuan Dynasties, there was a great current of Arabic medicine into China, for example, the great deal of trade of aromatic drugs, three institutions of Huihui medical treatment established by government of Yuan, *Yinshan Zhengyao* 饮膳正要 and *Huihui Yaofang* 回回药方 etc. Under such a kind of social and historical background, these pictures has brought to view that Huihui medical culture was popular in China since Song Dynasty. The authors of this paper think that those non-Chinese characters in seven pictures all are Huihui(Arab). It is undoubted

that Artists had drawn the fanciful lives from foreign zones in their imagines by non-Chinese and western drugs.

At last, it is noticeable that the seven pictures, especially Diyejia 底野迦(Theriac) Picture and Aina Xiang 艾纳香(=aileya) Picture, contain a kind of connotative social and culture mind, namely an idea that Chinese medicine is the center of world medical cultures. In early Ming period in common doctors or scholars, this idea was a part of great mind that China is the center of world.

Chen Ming
北京会议论文

异域的形象：

《本草品汇精要》中的胡人图

内容提要

《本草品汇精要》是刘文泰于明孝宗弘治 16 年（1503）开始主持编纂的一部药典，历时两年完成。该书依循宋代唐慎微《证类本草》的旧例顺序，共分 10 部 42 卷，收录药物 1815 种，正文之前有药物彩绘写生图共 1358 幅，可谓我国最大的彩色药物图谱。这些图谱不仅包括了动物、植物和矿物类药的写生，而且描绘了采药、制药等日常生活场景，因此，它不论是在药物学史，而且在社会生活史和艺术史上都有巨大的价值。

《本草品汇精要》中有七幅胡人图，引起了笔者的注意。这七幅图分别为：苏合香、降真香、龙脑香、安息香、艾纳香、质汗、底野迦。为何将其称为胡人图？因为与《本草品汇精要》中的其他人物形象相比，这七幅图中的人物显然不是汉人，而是异域的胡人。他们有着典型的外表——头发卷曲、鼻子高耸，胡子也不一样。他们的穿着（帽子、袍子、头巾和腰带）也不相同，多数还穿着高帮的靴子。这七种药物就是外来的，因此，艺术家们用胡人的形象来描绘外来的药物。

这七幅图的具体内容为：

苏合香图：抬药。三位胡人，其中二位侍者抬着一坛药，一位是作主人的胡商，跟在后面。整个画面颇有些准备进贡的味道。

降真香图：扛药。一人扛着一段香木（降真香）。

龙脑香图：选药。一人蹲在大竹筐旁边，用工具在筐内选药，筐边有选出来的杂物。还画了一棵龙脑香树。

安息香图：采药。一人拿铲子，一人端盘子，正刨开安息香树，采其树脂。树下还放了一个装药的小桶。

艾纳香图：采药。一中医正在树边采药，一背着采药囊的胡人，手中拿着一把药草，正此中医向讲述。

质汗图：熬药。一人（下蹲者）烧火，一人（站立者）用长勺搅动鼎中的药液。旁边桌子上有四个堆满了药的盘子，还有 2 个装着液体的药碗。

底野迦图：献药。一位胡人向坐着的中医者双手跪献黑色的底野迦药丸。

从图像与文字关系的角度，将这七幅图进行深入的分析，可以看出，只有艾纳香图和安息香图，结合得比较好。因此，从本草学（药物学）的观点，这些图的价值不算太大，但是，从文化交流史的角度来说，这些图是十分珍贵的。

其一，汉唐以来，中外文化交流比较繁荣，有关胡人的形象史料，主要见于汉代的画像石、石窟壁画（丝绸之路的石窟，特别是敦煌壁画中的胡商图）、丝绸之路的绢画与纸画（特别是佛画中的供养人图）、墓葬出土的官椁屏风和壁画（以近年出土的粟特人墓葬最有名）、传世的名画制作（如《职贡图》）等中。但有关胡人与医药的图像史料极为少见。

其二，汉唐以来，中外医学文化交流日渐繁荣，表现在药物学上，就是唐《新修本草》以来，均收录了大量的外来药物。甚至出现了纪录外来药物的专门著作，如《胡本草》和《海药本草》，但这些本草书（包括《证类本草》）中均未出现胡人的图像。元代的《饮膳正要》（四部丛刊续编本）所配的图是后加的，现存的明代抄本《回回药方》残本没有插图。而这些图以直观的形象效果，表现了外来医学文化的存在。

其三，这些图涉及的主体基本上是香药。从社会背景来分析，它们的产生与宋元时期的回回香药贸易、元代回回医疗机构的建立、《饮膳正要》与《回回药方》的出现等，这样一种大的回回医药外来潮流是分不开的。这些图是六朝到元明中外医学文化交流的缩影，特别是反映了宋元以来回回医药文化盛行的史实。因此，笔者认为，这些胡人均是回回人。这些图通过描绘胡人与胡药，无疑在想象中描绘出了异域天方的生活片断。

其四，值得注意的是，这些图所隐含的社会文化心理为——以中医为中心的观念，特别表现于底野迦图和艾纳香图。这种心理也是当时医者（或士人）夷夏心态（以华夏为中心）的组成部分之一。

CHINESE MEDICINE IN MODERN CARTOONS

Judith Farquhar

道可道非常道 名可名非常名

These famous lines from Laozi's *Dao De Jing* incorporate a whole theory of representation, one that has been immensely influential throughout Chinese history. This originary formula is located near the beginning of the written history of Chinese medicine. These important words teach us that all efforts to understand ultimate realities through any form of representation will fail. The lasting Way, the permanent names, may be approached, but they cannot be captured by mere human devices. We must forego all ambitions of taming reality by naming it. But at the same time, we are invited to think about representation in a different way. Laozi is clear: standard human ethics like the morality taught by Confucian thinkers is not the way to achieve harmony with elusive natural patterns. But mere mortals, armed only with a familiar morality and conventional names, will never become one with the lasting Dao. Instead, abandoning orthodox Daoist aims, we should ask: what can a less ambitious human language or ethics achieve? If the great names known to metaphysics necessarily miss their referents, then we must ask what a more concrete and particular naming process can achieve. What do images do for our understanding? In English we have a saying: A picture is worth a thousand words. But if words fundamentally fail to tell us the truth, if they fail to name the "lasting Way," then pictures also must be seen to fail. At the same time, pictures, words, and conventional morality do something.

For purposes of this paper, then, I want to add a line to the first chapter of the *Dao De Jing*: 画可画非常画. In doing so, I will maintain a focus on both the successes and failures of forms of visual representation in relation to the possible goals of medical materials published for popular consumption. In what follows, then, I will present a relatively ephemeral genre of medical illustration: the widely sold and published cartoon versions of classical writings from the history of Chinese medicine. Examples are the Huangdi Neijing Yangsheng Tudian 黄帝内经养生图典 and the Zhongyiyao Shi Tudian 中医药食图典. Beginning by placing these illustrated books in historical context, I will present some other cartoon and illustration genres to which they can be compared, though the goals of these illustrations are not quite the same. These comparative materials include Maoist propaganda comics and illustrations used in an American publication about Chinese medicine.

I will then turn to a close reading of the typical representational strategies of a few cartoon books. The most obvious appeal of this kind of illustration stems from the "comic" character of the drawings. In these pages we have perfectly recognizable modern individuals discussing cosmic processes in a language that departs relatively little from a 2000-year-old classical language. Though Huangdi and Qibo are dressed in cartoon versions of Han Dynasty clothing, and display a certain ancientness in their serenely seated postures (but isn't Qibo's mustache

rather suspiciously 20th century?), the many ancillary characters are aggressively modern. The gestures, facial expressions, and spontaneous comments (in speech balloons) of these ordinary men and women, workers and farmers, are purposely anachronistic. This time dissonance is the source of the comic sense of the entire genre: one example is that of a Han dynasty mother, committed to the ancient idea of preventive medicine (上医治未病), taking her baby for a vaccination shot.

Even though these clearly modern images in the books are relatively few, the overall impression of the cartoon style is like that of a Han dynasty soap opera on television. The message is, “except for their clothes and hairstyles, those ancients were just like us.”

Perhaps this visual depiction persuades modern readers to take the science of the Chinese medical classics more seriously than they otherwise would. Certainly it provides a different kind of mnemonic technique than the classic books themselves do, even in their modern translated and annotated versions. An interesting example is a page depicting the “twelve officials” corresponding to the visceral systems (五脏六腑) [figure]. Here the various officials are arranged in a way that corresponds to the spatiality of a modern western medical body rather than following a classical Neijing understanding of the hierarchy of the *zang* and *fu*. There are two little officials for the lungs and two for the kidneys, for example; the heart is given the highest position; and the physiological importance of the kidney system and the liver system are curiously minimized. And the urinary bladder, depicted as a relatively large and fierce navy, looks a lot more important than classical medicine would normally claim. A reader who recalls the spatial and iconic relationships from this illustration, as she reads about the *zangfu* in later parts of this book, will continue to see the ancient material through a certain anatomical lens.

After this close reading of the contents of cartoon medical books, I turn to a discussion of some results from field research on yangsheng practices in contemporary Beijing. This research has been done in collaboration with Prof. Zhang Qicheng of the Beijing University of Chinese Medicine. The interviews we have conducted with city-dwellers who practice some form of yangsheng provide insights into how Chinese medical knowledge is received and understood by non-experts in contemporary China. There are many popular media representations of Chinese medicine, ranging from drug advertising to formal lectures in neighborhood committee offices, from TV documentaries to magazine articles, and including a wide range of inexpensive books that turn Chinese medical expertise into easily-understood public health advice. The cartoon books that are the subject of this paper were, for a while, prominent in this media mix. We find, however, that consumers of this Chinese medical knowledge take up particular facts or principles according to needs, experiences, and assessments of their own. We have noted a certain skepticism about information that can be found in books or advertisements. Instead the matrix within which Chinese medical information takes on significance for ordinary city-dwellers is a

complex mix of medical experience, friendly conversations, rumors and urban legends, and ways of being embodied.

Thus it can be argued from two points of view that the picture that can be pictured is not the lasting Picture. The first is the point of view of content analysis, which has shown us how much of the rich body of Chinese medical understanding is missed by the cartoon form. The second is the skepticism of the people, who actively assemble their understanding of health, medicine, and ways of forging a wholesome bodily life from materials that exceed all forms of representation.

CHINESE MEDICINE IN MODERN CARTOONS

当代卡通中的中医

Judith Farquhar

道可道非常道 名可名非常名

这些出自老子《道德经》的话包含了一整套关于再现的理论，在中国历史上有着巨大的影响。这个创意在中医的书写历史之初便已存在。这些意义重大的词语教给我们知道任何通过再现的形式来理解根本实在的努力，都不会成功。常道、常名也许可以人为地接近，但仅靠人为是抓不住常道、常名的。我们必须放弃自以为命名实在即可掌控实在的野心。不过同时，这也使我们想到用一种不同的方式来思考再现。老子明明白白地说：儒家所教的道德不过是标准化的人伦，不能与难以捉摸的自然形态达到谐和。但人的一生有限，所知的只有常规的道德和因袭的名称，如此说来永远也不会得到常道。于是，不去管正统道家得道的目的，我们要问：既然人类语言或道德没那么大能耐，那么它们可以做到什么？如果在形而上的学问中，那些重要的名称必须略去他们指称的事物，那么我们要问一个更加具体实在的命名过程可以做到什么。图像对我们的理解起什么作用？我们英语有这样一个说法：一幅画值一千词。但如果词语基本上不能告诉我们真实，如果它们不能命名“常道”，那么画也同样做不到。可是同时，画、词，和常规的道德还是有作用的。

于是，在这篇文章里，我想给《道德经》第一章加上一句：画可画非常画。我讨论的中心将是视觉再现（visual representation）在大众消费的医学书籍中的成功与失败。接下来，我会向大家解说一种出现得相对短暂的医学图解书：出版、销售得非常热门的卡通版中医经典作品。我所选用的例子有《黄帝内经养生图典》和《中医药食图典》等。在把这些图解书放到历史情境之初，我会同时展示一些其他种类的卡通与插图以资比较，尽管这些插图的目的不尽相同。我这些比较用的材料还包括一本在美国出版的中医书，书中用了毛泽东时代宣传用的漫画和插图。

然后我会对几本卡通书的典型的再现策略做一个细读。这种图解最明显的引人之处来自图画的“漫画”性。在这些书里我们看到现代人用一种与 2000 年前的古典语言相差不大的语言讨论宇宙过程。虽然黄帝和歧伯以卡通形式穿着汉代的衣服，并以他们安详的坐姿展现着某种古代的特性（不过歧伯的胡须倒很像是 20 世纪的），众多的次要人物则显然是干劲十足的现代人。这些普通的男人女人，工人农民，他们的姿势、面部表情，还有放在圈圈里的他们发出的评论，可以看到时间

被故意地错置了。这次是不协调的时间给予了这一整类书漫画的感觉：有个例子是关于一位汉代的母亲，信服古代关于上工治未病的想法，于是带着她刚出生的孩子去打预防针。尽管这些显然属于现代的情形在书中相对来说较少出现，这种卡通风格总体的印象就像电视上的汉代连续剧一样。传达的信息是：“除了他们的衣服和头式，这些古人和我们其实一样。”

也许这种视觉上的描画可以令现代读者更加认真地对待中医经典的科学知识，否则可能不会这样。当然，即便描画是以现代翻译并注解的形式，它也提供了一种与经典书籍不同的记述方法。一个有趣的例子是一页描绘对应于五脏六腑的“十二官”图。这里不同的“官”以在空间上对应西医身体的方式排开，而不是以中医经典《内经》对脏与腑等级区分的方式对应。如肺肾各有两个小官对应；心被放在最高的位置；而肾与肝系统的生理学重要性则不知为何减小了。膀胱被画成一个较大并且精力旺盛的舰只，看起来比古典医学所认为的重要得多。如果这幅膀胱图让读者记住了画里的空间与图像的关系，在后面读到脏腑部分时，读者还会通过这样的特定的解剖学的镜片来看古典材料。

细读卡通医学书的内容之后，我转而讨论我在当代北京养生实践的田野研究中的一些结果。这项研究是我与北京中医药大学的张其成教授合作进行的。中医知识在当代中国如何为非专业人士接受并理解？我们与进行养生实践的一些城市居民的访谈为此提供了一些深刻的见解。现在中医出现在许多大众媒体中，从药品广告到居委会组织的正规讲座，从电视纪录片到杂志文章，还包括大量廉价书籍将中医专门知识转变为易懂的公共卫生建议。这篇文章讨论的卡通书就曾在这些媒体组合中风靡一时。然而我们发现，中医知识的消费者根据他们自身的需要、体会，以及评价来选取专门的事例或原则。我们注意到，他们对从书籍或广告中找到的信息有一定的怀疑性。对普通市民来说，中医信息的获取是一个复杂的过程，是由医疗经历、朋友交谈、传言及城市传说，以及各种体验方式组成的。

因而，“画可画非常画”可从两点来谈。第一点是从内容分析来看，可以表明卡通的形式漏掉了许多丰富的中医知识。第二点是从人们怀疑的态度来看，他们积极组合自己关于健康、医学和利用物质条件打造一个生气勃勃的身体生命的知识，这已经超越了任何形式的再现。

Explanation of The Illustrations and The Historical Data on Acupuncture and Moxibustion

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When disinterring and utilizing historical data, the professional staffs who engage in the medical history investigation emphasize the literatures handed down from the ancient times more but despise unearthed ones and lay more stress on historical data recorded in words but neglect real object and illustration historical ones, which affects the increase of total level in medical history investigation to some degree.

“Sometimes the meaning expressed in the picture surpasses that by thousands of words.” It is believed that those people who have the experience of installing and using mechanical equipments must have the profound feeling about this sentence. When you unfold a piece of instruction manual for new equipment installation without schematic diagram, the confidence and the patience in installing will most probably be lost. Over the last 20 years, I experienced personally disinterring the pieces of historical data and putting the illustrations pertaining to the academic development of acupuncture and moxibustion together, which made me bring about a constantly fortified feeling that I can't help generating diffidence if no important or necessary real picture on the spot when historical data are investigated. It will be explained by the following typical cases that if the information of real picture is neglected in the process of medical history investigation, it will fall into what a big dilemma.

Case one: “Tian Sheng Bronze Figure” and “Tian Sheng Acupuncture Manual”

We know that Illustrated Manual of Acupoints of the Bronze Figure in the 4th year during the Tian Sheng period in the Northern Song Dynasty (1026), also called Tian Sheng Acupuncture Manual, is really the first national standard of acupoints in acupuncture and moxibustion. Besides the words expression, it also creates the diagrammatic representation of Tian Sheng Bronze Figure which is a stereo figure acupoints model made of bronze. As for the words in Illustrated Manual of the Bronze Figure, we have never doubted if the comprehension to them is right, and indeed never considered that if the comprehension is same in people of different dynasties or even in different people of the same dynasty. Until the discovery of Song-imitated Bronze Figure during the Zheng Tong period in Ming, we were suddenly aware that there existed a tremendous difference between our comprehension to the words in Illustrated Manual of the Bronze Figure and the original idea of the authorship, as well as among the comprehensions of people in different dynasties or those of the different people in the same dynasty. Especially on the words description about the acupoints location at head, shoulder, abdomen, postero-thigh etc, it shows a greater difference in comprehension. We get an important enlightenment from it, that is, due to the limitations of the words description and the irregularity of human morphous, it is difficult to ensure the unicity of points-attack in real body by the words description of acupoints location. In other words, different people will show different comprehension on the same words related to

acupoints location. Bronze figure for acupoints, which is a model of stereo acupuncture acupoints strictly based on national standard text of acupoints location ---Illustrated Manual of Acupoints of the Bronze Figure, is not only an important carrier of Illustrated Manual of Acupoints of the Bronze Figure at that time, but also the most canonical explanation of the standard.

Case two: Illustrations pertaining to acupoints and prescriptions pertaining to acupoints

In the literatures unearthed from Dunhuang, there is one moxibustion prescription without name, called Illustrations of Moxibustion today, whose serial numbers are S.6168 and S.6262. The Tian Chuang Acupoint appears twice in the recorded prescription and it is noted that the acupoint is single. However in a few ten years, though innumerable Chinese and foreign researchers who study Dunhuang and medical history investigated this literature many times, they connived at this extremely apparent fact and understood “Tian Chuang” in the prescription stubbornly as the well-known Tian Chuang Acupoint on the neck without exception. But if observing the attached illustrations of choosing points in the original literature, it will be found out that the acupoint is located at the midline of fore head. Companied with the investigation of other literatures at the same time, it is not difficult to find out lots of similar examples. For example, in Thousand Golden Prescriptions and Supplement to Thousand Golden Prescriptions, almost all of the Tian Chuang Acupoints in the prescriptions of acupuncture and moxibustion refer to the Tian Chuang Acupoint (another name of Xin Hui Acupoint) on the head. These evidences proved sufficiently that in the Sui and Tang Dynasty, people were used to call Xin Hui Acupoint on the head as Tian Chuang, so a period of contortive history got its original feature. But before seeing the illustrations of choosing points in moxibustion prescriptions from the Dunhuang paper, I had no idea how many times this kind of moxibustion prescriptions in the literatures before Song appeared before me, however I didn't catch the information even one time which was actually not difficult to get.

After finished reading above typical examples, we couldn't help asking that how many data were understood correctly in great amount of historical data possessed by us and in those historical data understood correctly, how many were put together exactly to make the natural historical picture. When we run into the history this huge elephant, within most of the time and on most of the occasions, we are just like taking the part for the whole and couldn't outguess its full view anyway, even touch the nose or tail if more unfortunately. What will direct us to make for the bright in the dark?

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论文题目：针灸图像与针灸史料的解读

从事医史研究的专业人员在史料的发掘与利用方面，多注重传世文献而轻视出土文献，多注重文字史料而忽略实物与图像史料，这在一定程度上影响了医史研究的总体水平的提高。

“一幅图有时胜过千言”，相信只要有过安装、使用机械设备经历的人对于这句话一定有非常深刻的感受。当你打开一份没有示意图的新设备安装《说明书》，多半会失去动手安装的信心与耐心，而 20 年来发掘历史碎片，拼复针灸学术发展

史图卷的亲身经历，使我产生了一种不断增强的感觉——考察史料时如果重要的（或必要的）图像实物不在场，会不由自主地产生一种不自信。以下通过几个典型案例来说明：医史研究过程中如果忽略了图像实物的信息，会陷入多么大的困境。

案例一“天圣铜人”与“天圣针经”

我们知道北宋天圣四年（1026年）《铜人腧穴针灸图经》（又称“天圣针经”）堪称中国第一个国家针灸经穴标准，这一国家标准除了用文字表述之外，还创用铜质立体人像经穴模型——“天圣铜人”图示。对于《铜人图经》的文本，我们从未怀疑过对它的理解是否正确，甚至也未曾想过不同朝代——乃至同一时代不同人的理解是否相同。直到明正统仿宋铜人的发现之后，才突然意识到我们今天对于《铜人图经》文本的理解与原作者的本意有多大的差异，以及不同时代，或同一时代不同人的理解差异是多么的大。特别是对于头部、肩部、腹部、大腿后部等处的腧穴定位文字的理解差异更大。从这里我们得到一个重要启示：由于文字表述的局限性和人体形态的不规则性，关于腧穴定位的文字描述很难确保在人体实际点穴的唯一性要求。也就是说对于同一腧穴定位的文字表述，不同的人会有不同的理解。严格基于标准文本《铜人腧穴针灸图经》的立体针灸腧穴模型针灸铜人，它既是当时腧穴定位国家标准文本《铜人腧穴针灸图经》的一种重要载体，同时又是该标准最权威的解释。

案例二“穴图”与“穴方”

敦煌出土文献有一种不知名灸方（编号为 S. 6168、S. 6262，今人题作“灸法图”），所载方中二次出现“天窗”一穴，文字均注明该穴为“一穴”，然而数十年来不知有多少中外敦煌研究学者、医史研究者多少次考察这篇文献，却都对这一极为明显的事实视而不见，无一例外将方中“天窗”强解为人们熟知的颈部“天窗”穴。可是只要注意到原文献所附之取穴图，便可发现此穴位于前头部正中线上，再通过同时期其他文献的考察，不难发现了大量这样的例子，例如《千金要方》、《千金翼方》二书针灸方中所有“天窗”穴，几乎全是头部“天窗”穴（即囟会穴别名），这些证据充分证明，隋唐时期人们习惯将头部“囟会”穴称作“天窗”，从而将一段被曲解的历史恢复了其本来面貌。可是在看到敦煌卷子灸方取穴图之前，宋以前文献中这类针灸方在我眼前不知出现过多少遍，我却一次也没有捕捉到这一并不难以捕捉到的信息。

读了以上典型实例，我们不禁会问：我们已经拥有的海量史料中有多少被正确解读？已被正确理解的史料中有多少被正确拼成固有的历史画面？当我们撞上历史这头大像时，在多数时间内、多数场合下，犹如盲人摸象，无论如何也看不清它的全貌。如果不幸的话，连象鼻、象尾也摸不到。黑暗中靠什么指引我们走向光明？

**Standardizing Medicine
Illustrations in Medical Compilations during the Northern Song Dynasty**

规范医学经典—北宋时期医学集成图书的插图
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郭志松，特拉维夫大学

When comparing Northern Song dynasty medical books to those of the Tang dynasty one fact stands out – the former included more illustrations than the latter. But this is only part of the story. The information presented or missing in these illustrations is much more telling when we compare them to illustrations found in both earlier and later medical compilations.

若将北宋时期的医书和唐朝时期的医书加以比较便显而易见前者的插图比后者多。但是事不仅此（这还只是事情的一部份），若对较早和较后发现的医学集成图书的插图加以比较，这些插图的存在或者遗漏就更加能说明所提供的信息。

More specifically, acu-moxa illustrations attached to eleventh century Song medical compilations differed from their Tang dynasty predecessors as well as from illustrations appearing in later Song dynasty works in two major facets. First, the illustrations eleventh century illustrations were much more detailed. This meticulousness is unique to these specific illustrations and was not reproduced in later compilations. Second, these illustrations portrayed information that did not appear in other illustrations, such as depiction of anatomical details of the body including the parts of the skeleton and visceral organs.

说的更具体一些，十一世纪宋朝的医学集成图书中所附加的针灸插图与唐朝前人的有所不同，而且与宋朝晚期医书的插图在两个方面也有所不同。首先，十一世纪的插图要详细得多，这种具体的针灸插图的细致是绝无仅有的，在以后的医学集成图书中未再采用过。

其次，这种用插图描绘的资料，在其他如人体骨骼和内脏器官解剖详细描述中未见应用到。

When an author includes medical illustrations in his work it is for a purpose. Often, it is incorporated as a mean to convey information too complex to delineate by textual description. We have to ask ourselves why did Northern Song authors include a greater number of illustrations in their medical manuals? Why do we find these detailed illustrations only during the eleventh century? Did the progress in print technology caused this change or is there another factors? Lastly, we have to ask whether the detailed illustrations were only part of acu-moxa compilations or do we find them in other medical fields?

若一位作者在其著述中加插图是有其目的意义的，通常是将插图作为描绘过于复杂事物的必要补充手段，而仅用文字叙述则无法表达清楚。我们必须反问自己为何北宋的作者才在其医学著述中加入了大量插图？为何我们只在十一世纪才见到这些细致的插图？是印刷技术的进步还是别的什么因素造成这种改变？最后，我们还得反问是否这些细致的插图仅见于针灸书籍？还是在其他医学方面的书籍也曾见到？

In this paper I will discuss a number of Northern Song dynasty illustration that survived to the present. My data includes illustrations appearing in a number of

medical compilations, mostly ones focusing on acu-moxa. These works include: the two acu-moxa chapters of the *Imperial Grace Formulary of the Great Peace and Prosperity Reign Period* (*Taiping sheng hui fang* 太平聖惠方), the eleventh century edition of the *Illustrated Canon of Acu-moxa Therapy [Depicting] the Acupoints of the Bronze* (*Tongren yuxue zhenjiu tujing* 銅人腧穴針灸圖經), illustrations of the twelfth century edition of the *Illustrated Canon of Acu-moxa Therapy*, and illustrations from the *Book of Classified Manifestation Types for Saving Lives* (*Leizheng huoren shu* 類證活人書). I also discuss illustrations from the *Illustrated Materia Medica* (*Bencao tujing* 本草圖經).

在本文中我将讨论今天仍保存下来的北宋时期的插图。我的材料是在许多医学图书中均能见到的插图，主要是针灸方面的。这些医学典籍有《太平圣惠方》的两章针灸，第十一世纪版本和第十二世纪版本的《铜人腧穴针灸图经》，《类证活人书》的插图，以及《本草图经》的插图讨论。

The involvement of emperors, scholar officials, and the Song activist government, brought about a need to standardize medicine due to the fact that medicine was taught in state-sponsored schools and had at to represent, to some extent, common and standard knowledge. I claim that the Song official and physicians, who worked in the government sponsored projects to compile medical books, used illustrations and other means to standardize medical knowledge. Working with government authority and funding enabled these writers to produce much more detailed illustrations. Furthermore, this face also enabled them to include innovative information in their illustrations. This trend places well in the general context of the reevaluating ancient and contemporary medical knowledge that occurred during the Northern Song dynasty. Later medical authors did not include this type of detailed illustrations probably due to the lack of resources essential for such projects.

由于在官办的学校中讲授医学，必须使医学成为某种具有共通性和规范化的知识，于是在皇帝，御用学者，和宋朝政府官员的积极参与下完成了有必要使医学成为规范化的典籍。我认为宋朝的官员和官医们发起了一个汇编医书的规划，采用插图和其他手段使医学知识规范化。有官方的支持和拨款促使这些学者得以绘制更加细致详尽的插图。而且进一步又使他们得以更新一些插图。这种趋势促使全面重新审定古代的和北宋当代的医学知识。后来的医学图书的作者之所以未在他们的书籍中采用这类细致的插图，很可能是缺乏必要的资源。

Popularizing 'Chinese Naturopathy' in Taiwan

Shih-pei Hung

Abstract

'Chinese Naturopathy' is a term invented by Mr. Chen Chou-yi, the president of World Federation of Chinese Naturopathy as well as the chief editor of its journal. With the aim of popularizing Chinese medicine internationally, Chen became the first man who tries to combine concepts of Western alternative medicine with those of Chinese medicine in Taiwan. Chen considers that the quintessence of the philosophy of Chinese medicine (represented graphically as $\bigcirc \rightarrow \text{☯}$) to be 'nature', which contains all and is everlasting revolving, whilst he believes that the concepts and treatments used by either biomedicine or homeopathy is more 'unidirectional' (represented graphically as $\rightarrow\rightarrow / \rightarrow\leftarrow$). He argued that the latter was not excluded by the Chinese medicine, but only played a minor role in it. The focus of the paper is the courses organized by one of the research committees of Chinese Naturopathy in Taiwan. The course combines ideas of Buddhism, Daoism, Chinese herbal medicine and Western alternative medicine in its teaching of 'energy therapy'. The course consists mainly in a set of religious practices, beginning with learning meditation, 'Nei-guan' (inner vision) as well as their concept of energy. Various methods of healings are introduced in the more advanced courses, including Gua-sha/cupping, learning medicinal properties of herbs, aromatherapies, massages. Optional courses such as acupuncture, inner alchemy, Chinese astrology and divination is also taught. These people emphasize a holistic lifestyle for health, and they believe that whoever wishes to cure others must know how to cure himself first. Therefore, the course seems more like learning a philosophy of life and its practice rather than learning medical knowledge and healing techniques only. Through an analysis of images

from the books used as references and textbooks in the course, the paper gives an overview of what type of philosophy these people were trying to promote. In a broader sense, popularizing 'Chinese Naturopathy' means popularizing their understanding of the nature and the way the human being interacts with the universe, which they deem essential for preventing people (as well as the world) from sickness.

在台推展中華自然療法

中文摘要

「中華自然療法」一詞是由陳紬藝先生所發明。陳紬藝先生自 1980 年創辦中華民國自然療法協會，並擔任理事長至今。他以「提倡醫道革命 復興中華文化 促進世界大同」為目標，並致力闡揚中國醫學至全球。陳紬藝強調中國醫學與同類療法、自然療法的關係，並成為台灣第一位講述自然療法並將其概念帶到中醫的第一人。陳紬藝認為，中醫哲學中的絕對原理指的就是自然界中的生命之輪，也就是採取了一個圓形運動（○ → ☯）：其中包含順治及逆治的單向性，圓形運動，如環無端，故「雖逆實順」；而西醫的逆治或是同類療法的順治，都只是走直線的單向治療（→→ / →←），因此無法涵蓋甚至解釋中國醫學的概念。此篇論文主要是研究中華民國自然療法協會種的研究委員會所開辦的一系列教學課程：包含佛、道觀念，西方的自然療法概念、以及能量療法。學員從靜坐、內觀以及認識能量開始學習。課程包含各式療法，從傳統療法（刮沙拔罐）、精絡按摩、認識中西草藥、芳香療法，到選擇性的課程如針灸、內丹、紫微斗數、易卦及姓名學。這些人相信，凡欲治人者必先懂得治愈自己，並強調全方位的健康（身心靈、家庭、社會環境、天下）。因此，整個課程不單單學習醫療本身，而是著重於學習一種處是生活哲學。若

從課程所用的書籍裏包含的圖像探討，我們可以蓋括地了解到此機構所教導自然療法的人生觀。廣義論之，推展中華自然療法，也就是等於了解並推展一種人類與環境的哲學。他們認為，掌握人類與環境、宇宙互動的關係，也就是掌握了預防(個人、家庭、社會、國家、天下)疾病之「機」之所在。

Can Tibetan illustrations elucidate literary Chinese texts on pulse diagnosis?

Elisabeth Hsu

This essay concerns methodology: how should visual representations be read if one wishes to use them for elucidating texts? One would presume that illustrations in a text elucidate that text. To a certain degree, this is often but not always so. In botany, for instance, the text and the visual representations often were done by different authors (Haudricourt & Metailie 1994). Thus, text and illustrations in the same text may date from different time periods, illustrations sometimes being added to an already existent body of text in a later edition; accordingly, the information provided in the illustrations may be quite different from that given in the text. In other words, the illustrations in a text cannot always be read as visual representations of the textual information.

Can illustrations from one text be used for elucidating textual information in another one? Many examples in this conference affirm this question, particularly, if the illustrations are from the same time period and the same tradition of writing. Nevertheless, the answer cannot always be a straightforward “yes”, for illustrations can be read in different ways.

This essay goes a step further. It presents one textual problem of early Chinese pulse diagnosis (2nd century BCE), and raises the methodological question as to whether it is legitimate to consult Tibetan medical thankas of the 17th century for providing an answer to this problem. The categorical answer to this methodological question, in a first instance, therefore appears to be a straightforward “no”. To historians and anthropologists it is unacceptable to use material from different historical periods, let alone from different cultures.

However, a less categorical answer may be that it depends how one reads the illustrations. The reading of illustrations is very much an active process, where the reader selectively foregrounds some elements at the cost of others. Rather than searching for a “representation of reality” in these illustrations, their judicious reading might help “channel one’s imagination”. Naturally, one has to demonstrate (a) cultural and (b) temporal relatedness between the illustrations and the texts discussed.

The (a) cultural affinity between Tibetan and Chinese pulse diagnosis is well established. It is generally assumed that Tibetan pulse diagnosis was in its foundation adopted from Chinese medicine, although Tibetan physicians adopted most medical concepts from Ayurveda (Meyer 1990, Zhen & Cai forthcoming). It is more difficult (b) to find a justification for comparing illustrations from the 17th century for elucidating textual problems encountered in texts over thousand years earlier. The reading of the illustrations has to be adjusted accordingly.

The reason why I became interested in Tibetan thankas for elucidating Chinese texts arose from a ‘channeling of my imagination’ for interpreting the terms *an* 按 and *ju* 舉 in the medieval pulse diagnostic literature. It has been proposed (e.g. Zhao 1992:180-182) that *an zhi* 按之 (to press on to it) and *ju zhi* 舉之 (to hold it up) refer to different pressure levels (namely, heavy 重 and light 輕). However, there is evidence in the Dunhuang medical manuscripts that one can press (*an*) onto the *mai* with different pressure levels, and accordingly, the definition just given is not correct (discussed in detail in Hsu forthcoming). Rather, the terms *an* and *ju* may have referred to two different bodily techniques of pulse taking: perhaps, *an zhi* meant to press down on to the *mai* (with the arm stretched out, the palm turned upwards, in the fashion Chinese doctors nowadays take the pulse, the wrist nowadays being supported by a cushion on a table), while *ju zhi* meant to hold up the *mai*, perhaps by holding the wrist and lifting the patient’s hand upwards (in the fashion some modern Tibetan doctors take the pulse). The basic meaning of *ju* is raising and lifting something upwards and making an offering (Karlgren 1957:38, 75a). The illustrations of Late Imperial China (e.g. Wellcome depiction, illustration 1) and 17th century Tibetan thankas (illustration 2) corroborate this referential meaning.

The example presented here concerns a phrase repeatedly mentioned in the first fairly extensive text on Chinese pulse diagnosis, the *Shiji* (Historical Records), chapter 105, second part, which deals with the biography of the physician Chunyu Yi and reports on twenty-five medical case histories. The events date to the mid-second century BCE. It is generally assumed that the texts were written then and edited about fifty years later (Sivin 1995, Loewe 1997, Hsu forthcoming). In the case histories the physician often says: “When I examined the *mai* (vessels), it was *qi* [coming from] the heart/ liver/ lungs etc.” The question that then arises is: how did Chunyu Yi conceive the *mai* to be connected to the viscera (*zang*)?

The 17th century Tibetan medical thanka (illustration 3), depicts *mai* as projections or appendices of the viscera, as though one *mai* grew as a long thin stalk out of each viscus and reached from the body trunk to the wrist. Such an illustration may well be used for “channeling one’s imagination” for reading the early Chinese medical text; perhaps, Chunyu Yi considered every *mai* to emerge from a different viscus.¹

In another illustration, the *mai* along the forearm are depicted as parallel lines (illustration 4), as though each *mai* coming from a viscus, became visible as one

¹ In the Tibetan thanka, furthermore, each viscus has a different form, seemingly inspired by anatomy. Since the early Chinese text contains no hint whatsoever that viscera inside the body had different forms, this anatomical aspect of the illustration must be considered a later Tibetan historical development.

line among others on the forearm (Meyer 1990). Perhaps, the early Chinese medical *mai* at the wrist were conceived to run in parallel lines?

In summary, I emphasize, such illustrations of a different culture and time period can only be used for elucidating technical terms in medical texts in the sense of “channeling one’s imagination”. They do not provide conclusive evidence, but their use should not be underestimated in directing the researcher towards further evidence along such lines of “channeled imagination”.

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藏画可以反映中华文献中有关脉诊的内容吗？

許小麗

这篇论文的中心是方法论，也就是如何以图释文？有些人认为文中的插图是用来表明正文的。在某种程度上是这样的，但也有例外。比如在植物学类的书籍中，正文和插图常常是由不同作者编写的 (Huadricourt & Metailie 1994)。因此，在同一篇文章中，正文和插图也许会出于不同时期。有时，插图是被新加到再版的正文中。所以，插图中所反映的信息可能与正文有很大的不同。换句话说，文章中的插图并不是总能反映文章内容的。

那么来自某一篇文章的插图可以用来解释另一篇中的文字吗？这次会议的许多论文，可能会对此问题做出肯定的回答。特别是那些来自于同一时期同一派别的插图。然而，结论并不如此简单，因为对一幅插图可以从多种角度来理解。

为了对此进行更进一步的探讨，这篇文章提出了一个方法论上的问题，那就是是否可以用十七世纪藏医典“唐卡”中的插图来解释中国公元前二世纪有关脉诊医书中的疑难问题？直觉的回答是“不能”。对历史学家和人类学家来说，来自不同历史时期和不同文化背景的素材是不能同时用来作论据的。

从另一角度来看问题的关键就在于如何来理解插图了。读者在阅读插图时的主观性较强，他们常会选择对他们有用的信息，而忽视其它一些内容。他们在理解插图时，并不去探究插图所反映的事实，而是喜欢发挥自己的想象力。他们就自然而然认为插图与文字在文化和时间上是相关的。

藏医的脉诊与中医的脉诊在文化上有许多相似之处。一般人认为藏医的脉诊是以中医为基础的，然而藏医学在很大程度上吸取了印度 Ayurveda 医学传统中的观点和理论 (Meyer 1990, Zhen & Cai forthcoming)。那么用十七世纪的插图来解释一千多年前医书中的疑难问题就更为困难了。因此对插图的理解也就应该作出相应的调整。

用充分“发挥想象力”来解释在中世纪的脉诊文献中的术语“按”和“举”使我对用藏医的“唐卡”来解释汉代医书产生了兴趣。有人提出“按之”和“举之”是指不同程度的压力，也就是重压和轻压 (e. g. Zhao 1992:180-182)。然而，在敦煌医学文献中有证据证明按脉时的程度是多种多样的。这样说来，刚刚提到的定义

是不正确的（更多细节以后再谈）。因此，“按”和“举”也许是指摸脉时的两种姿态：“按之”是指按脉时，伸开手臂，手心向上，把手腕放在桌上的一个小垫上，与现代中医摸脉一样。而“举之”的意思是举脉，就像握着病人的手腕，然后将他的手向上举（这是现代藏医师把脉的方式）。“举”的本意是向上抬起或向上托起某些东西，就如奉献出某件物品一样(Karlgren 1957:38, 75a)。中国皇朝晚期的医学插图(e. g. Wellcome depiction, 插图二)和十七世纪的西藏唐卡（插图一）都证实了这一点。

此例所涉及的是曾从重复出现于那些最早的系统记载脉诊医学文字中的一个习语。它出自于《史记》，第 105 章，第二部分，其中包括了淳于意医师的传记以及《二十五病历》。记载的事件的时间是公元前第二世纪中期。一般认为，这段史文是在完成撰写后五十年才编辑出版的(Sivin 1995, Loewe 1997, Hsu forthcoming)。根据病历的记载，淳于意医师常常谈到：“我在把脉时，把的是来自于心、肝、肺等内脏的气。”那么问题也随之而来：淳于意是怎么考虑到经脉是与内脏相连的呢？

十七世纪的藏医的“唐卡”（插图三和插图四）描绘了经脉作为内脏的一个投射或者附属物，每一个经脉像是从每个内脏延伸出的一条瘦长的茎，从身躯延伸到了手腕。在阅读早期的中医文献时，这样的插图可以使想象力得到充分发挥。也许，淳于意联想到了每一个经脉都来自于不同的内脏。¹

从另一个插图，我们可以看到前臂的经脉被顺着描绘成平行线（插图五）。就好像每一个经脉始于一个内脏，变为可以看得见的线条，同其他线条一样排列在前臂里。也许，在早期的中医学中，手腕里的经脉也被设想为成平行排列的。

最后，我再强调在充分发挥想象力的基础上，用来自不同文化背景不同时期的插图解释医学文献中的专有名词。虽然这些插图并不能提供确切地证据，但是我们不能轻视它们可以使研究者“发挥想象力”的作用。

¹ 此外，在藏医唐卡中，每一个内脏都有不同的形态，表面上看来是受了解剖学的启发。因为早期的中国文献中没有关于身体里的内脏是不同的形态的内容。所以与解剖学内容有关的插图一定是在藏族发展后被发现的。

Diagrams in the Herbal Medicine works of the Ming Dynasty

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In accordance with the statistic of the Chinese herbal medicine encyclopedia, compiled by the Chinese Association of cultural exploration, there remain more than 800 herbal medical works accomplished before the Qin Dynasty (221, B.C.) and other 10,000 works with the contents of herbal medicines. And over 30,000 diagrams, including 7,000 colorful ones, are found via the sort-out and selection in antique works falling 6,000 specific works & 8,000 officially sponsored local history records with chapters of herbal medicine, Ethnic Minority Works, Religious herbal medicine works and works written by the overseas specialists. Symbolizing the Chinese culture, the herbal medicines contribute to the resilience and accretion of Chinese nationality in its long history and over disasters. The Science is forged on the background of a unique humanitarian development history, via incessant clinical records with 3000 years of the exchange of food and medicine between human and nature. Just like words in the preamble of the CHME "Life and Demise is the issue area where the herbal medicine study persists. And the latter is accumulated, distilled and generalized via this circle by lives & wisdom of tens of generations."

Herbal diagrams are the important legacy for not our technical culture, but the whole mankind.

The resources where the author would explore the knowledge of the diagrams are the recently discovered colorful hand-scripts in China and Japan of the *Herbal Medicine, ramification and review (HMRR or Bencaopinhuijingyao)*, *Herbal Medicine as Food (HMF or Shiwubencao)*, and the *Addendum of Leigong (Thunder man) Introduction of the manufacture of Herbal Medicines (ALIM or Buyileigongpaozhibianlan)*. In the past 8 years, 10 different versions of these 3 anatomies are found namely:

Herbal Medicine as Food with Diagram, Osaka Takeda science reconnaissance funds, 3 Volumes, 2003, Xingyu Bookstore.

Herbal Medicine as food, Beijing Library Version, 4 Volumes, Huaxia Publishing House, 2000.

Herbal Medicine as food, Beijing Library Version, 4 Volumes, Beijing Library Publishing House.

Herbal Medicine, ramification and review, Ozuka Version, Taniguchi Store, Tokyo, Colorful Reprint.

Herbal Medicine, ramification and review, Ozuka Version, Huaxia Publishing House.

Herbal Medicine, ramification and review, Roman Version, Kyuju Publishing house.

Herbal Medicine, ramification and review, Roman Version, Huaxia Publishing house.

Herbal Medicine, ramification and review, Roman Version, Tokyo Science and Technology Publishing House.

the Addendum of Leigong (Thunder man) Introduction of the manufacture of Herbal Medicine.(not published yet)

Background of the Diagram with Herbal Medicine Gazette Project

A. Zhenghe's sail symbolized Chinese advanced sailing techniques & manufacture of ships in the early 15th century since Chinese discovered the same lining as the Europeans did at the same period. This unprecedented act fueled the fruitful relations with South East Asian Countries in the arena of Politics, Diplomacy, Commerce and Culture. The crewmembers named Mahuan, Feixin and Gongzhen respectively write the Review of the eastern Islands, Glimpse of the sail (Xing cha sheng lan) and Diary of Western Oceanic Countries, briefing the knowledge they obtained through the sail. They also brought home the medicine, food and alien animals, which is recorded in the emperor-sponsored Herbal Medicine gazette, namely, corn, lion, rosemary and the peanut.

B. Yongle Encyclopedia recorded more than 8,000 categories of works and information, falling into the astrology, geography, ethnicity, constitution, ideology, institution, anecdote and meteorology, and also containing the culture, Confucianism works, Buddhism, Taoism, drama, talk show drama, craft, agriculture, medicine and literature. All the information is unabridged, which contributed to the academic value of such works in terms of credibility.

Another well-known background of the editing genre in Ming Dynasty is the diagram left and letter right, or diagram up and letter down, in the print of novel or scripts of drama. Just as Beiping Qianpuxu by Luxun, a legendary writer in China, said: "there were constantly appearance of diagrams in the Song Dynasty's printing wood blocks, as well as in current medical and Buddhist works, either to identify the objects or to build up the credibility, and hence forged the genre to record the history with diagrams. Such genre has been broadly accepted in the Ming dynasty. Every novel or drama script has diagrams in it, either like sand painting in terms of crudeness or like painting on the hair in terms of prudence of the craftsman. There are also such amazing diagrams of chromatography. The genre has been booming in this arena." Beijing library and public sponsored central library in Taiwan Province both own *the poem depot with addendum of Ming dynasty* (Ming jie Zeng He Qian Jia Shi Zhu), a book for pediatric ethic education with diagrams which is edited in light of *Yongle Encyclopedia* and diagram of the court genre, and it is deemed as court's antiquity. The diagrams with meticulous skill are complimentary with the poems.

Both accomplishment of *Yongle Encyclopedia* and booming of the genre of diagram, contribute to the editing of the official gazette of Herbal Medicines sponsored by Emperor Hongzhi, with diagrams.

Decreed and sponsored by emperor Hongzhi, Diagrams with the herbal medicine gazette project is launched via the compilation of the 3 books. And as a result: HMRR is a gazette done by the cadre of the royal council for the Hygiene and craftsmen, all the diagrams done by the court artists.

HMF has 4 volumes, 8 Ramifications, including water, crops, vegetable and fruits categories and 386 kinds of medicines, with 1162 diagrams.

ALIM has a lot of Taoist terms and is hard to be understood, but the diagrams are still added thanks to the cooperation of the cadre of the royal council and the Royal artists.

(段然译)

Brief Discussion on the Illustrations in Surgery writings and Traumatology
Writings of Traditional Chinese Medicine (Abstract)

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In this paper, we try to briefly discuss the illustrations in traditional Chinese medicine surgery-traumatology writings.

1. Title

The first edition of National Union Catalogue for Traditional Chinese Medicine Books published by Publishing House of Chinese Ancient Books in 1991 included 12,124 traditional Chinese medicine books before 1949. In it, there were 448 surgery writings and 181 traumatology writings, totally 629, which were about 5% in whole traditional Chinese medicine books. Though there were major illustrations in surgery writings and traumatology writings, only eight books were signed the word of illustrations in their title, which were respectively Illustrations of Surgery Treasured in Pillow, Illustrations of Meridian and Vessels and Syndrome in Surgery, Illustrated Explanation of Surgery, Illustrations of Severe Surgical Illness, Illustrated Explanation of Seventy-four Furunculosis, Illustrations of Carbuncle, Research on Illustrations of Bone, Illustrated Explanation of Chinese Bonesetting. All of them were written after the Qing Dynasty. Most of the surgery writings and traumatology ones with illustrations were not found the word of illustrations in their titles.

2. Classification

Based on the content of illustrations in the books of surgery and traumatology, the illustrations were classified into 15 groups.

2.1 Illustrations of diseased region

The illustrations were used to demonstrate diseased region of disease of surgery and traumatology. This group of illustrations was maximum, clear at a glance and the easiest way to be understood.

2.2 Illustrations of therapeutic region

The illustrations were used to indicate therapeutic region. Some therapeutic regions were not coincident with diseased regions, which was difficult to be comprehended by words explanation, so the illustrations were drawn for help.

2.3 Illustrations of therapeutic methods

Illustrations were used to show therapeutic methods well.

2.4 Illustrations of bone-length measurement

Illustrations were used to indicate length of bone discussed in Bone-length Measurement Chapter of Miraculous Pivot.

2.5 Illustrations of skeleton

Illustrations were used to indicate the quantity, names and positions of systemic skeleton. The significance of every skeleton was also explained in words, that was, if its injury would cause death or not.

2.6 Illustrations of disease appearance

Illustrations were used to describe the appearance of disease.

2.7 Illustrations of etiological factors

Illustrations were used to express pathogenetic reasons.

2.8 Illustrations of therapeutic tools

Illustrations were used to describe the shape of tools truly. Some illustrations also expressed the usage of utensils.

2.9 Illustrations of therapeutic drugs

Illustrations of medicinal plants were often seen in the materia medica books. They also could be seen by accident in the writings of surgery and traumatology.

2.10 Illustrations of hour and position

Illustrations were used to show hour and position.

2.11 Illustrations of five elements' evolutions and six kinds of natural factors and illustrations of Taiji

Illustrations of five elements' evolutions and six kinds of natural factors and illustrations of Taiji based on the traditional Chinese medicine basic theory were induced into the writings of surgery and traumatology.

2.12 Illustrations of meridian point

Illustrations of meridian point were often seen in the writings of surgery and traumatology. Most of them described fourteen meridians and the specific acupoints which were same as the meridian points in acupuncture and moxibustion subject.

2.13 Illustrations of furnace of refining Dan

Dan was the common used medicine in surgery and traumatology of traditional Chinese medicine. Its refining methods were distinctive and its quality was closely allied to furnace of refining Dan.

2.14 Illustrations of interior, nose and viscera

Illustrations were used to indicate the position of viscera and facial five senses.

2.15 Portraits of authors

In some individual writings, portrait of its author was drawn.

3. The extreme of the writings with illustrations

The extant earliest in surgery writings and traumatology ones of traditional Chinese medicine was Wei Ji Treasured Book compiled by Dong Xuan Hermit of Song. Besides the illustrations related to cutaneous diseases, there were two illustrations. One of them was the positions illustrations of choosing points in median ridge application. Another was moxibustion acupoints illustrations of superficial infection, which was marked Quchi, Shouqili, Jianfeng, Zusanli, Fengshi, Tuifenggu.

The extant writing in surgery and traumatology of traditional Chinese medicine with most illustrations was Essentials of Surgical Mental Cultivation Methods, also called Surgery in Golden Mirror of Medicine or Essentials of Surgical Mental Cultivation Methods of Golden Mirror of Medicine, which was the content related to surgery in Golden Mirror of Medicine, a large scale medical book composed by the Qing government. It was written in the 7th year governed by Qian Long in Qing (1742). It was attached more than 260 pieces of surgical disease illustrations.

4. Summary

We only could find words description in the surgery and traumatology writings in the early period. No illustrations could be seen. With the deepened cognition of diseases and constantly accumulated therapeutic experience, it was difficult to understand and

master these words descriptions, so illustrations appeared as an adjunct. The extant earliest in surgery and traumatology writings of traditional Chinese medicine with illustrations was Wei Ji Treasured Book compiled by Dong Xuan Hermit of Song, in which illustrations of cutaneous diseases and therapeutic regions were drawn.

The illustrations in the early period only showed the function of hint and helped to explain the content which was difficult to be understood and mastered. Later doctors made the illustrations popular. No matter was the words description difficult or easy to be understood, the illustrations were added to assist, which led to the increased quantity of illustrations and their gradual perfection. The extant writing in surgery and traumatology of traditional Chinese medicine with most illustrations was Essentials of Surgical Mental Cultivation Methods of Golden Mirror of Medicine, which was attached more than 260 pieces of surgical disease illustrations.

There were great variety illustrations in the extant writings of surgery and traumatology, which were classified into fifteen groups. Illustrations of diseased region, illustrations of therapeutic region, illustrations of therapeutic methods, illustrations of bone-length measurement, illustrations of skeleton, illustrations of disease appearance, illustrations of etiological factors, illustrations of therapeutic tools all possessed special feature of surgery and traumatology. Some illustrations were drawn assistant from other majors, such as illustrations of five elements' evolutions and six kinds of natural factors, illustrations of Taiji, illustrations of viscera and illustrations of meridian point, which showed the relevance of surgery and traumatology with other subjects during their developing process.

Diseases characteristics of surgery and traumatology and the complexity of the therapeutic methods decided the application of illustrations in the writings of surgery and traumatology. The illustrations played the very important roles in diagnosing diseases and transmitting and inheriting therapeutic methods in surgery and traumatology.

略论中医外科伤科著作中的绘图（摘要）

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本文试对中医外科伤科著作中的绘图进行简要论述。

一、书名

《全国中医图书联合目录》（中医古籍出版社 1991 年第 1 版）收录 1949 年以前成书的中医药著作 12124 种，其中外科著作 448 种，伤科著作 181 种，合计 629 种，约占全部中医药著作总数的 5%。虽然外科伤科著作中绘图较多，但是在书名标有“图”字的仅有 8 种著作，即《枕藏外科图》、《外科图形脉证》、《外科图说》、《外科大症形图》、《七十四种疗疮图说》、《刺疗图》、《全身骨图考正》、《中国接骨图说》等，均为清代以后成书。大多数有绘图的外科伤科著作，书名中并没有标明“图”字。

二、分类

根据外科伤科著作中绘图内容，可以分为以下 15 类：

1、 病变部位图

用绘图指明外科伤科疾病病变部位。此类绘图最多，一目了然，最容易理解。

2、 治疗部位图

用绘图标明治疗部位。有些治疗部位与病变部位不一致，文字说明又较难理解，需要借助绘图说明。

3、 治疗方法图

用绘图形象表现治疗方法。

4、 骨度尺寸图

用绘图标注《灵枢经·骨度篇》所论骨之长短尺寸。

5、 骨格图

用绘图标明全身骨骼数量、名称及部位，同时用文字说明各骨骼的重要性（受伤后致命或不致命）。

6、 病形图

用绘图描述疾病的形状。

7、 病因图

用绘图表示发病的原因。

8、 治疗器具图

用绘图如实描绘治疗器具形状，有些图还绘出器具用法。

9、 治疗药物图

药用植物图，本草著作中常见，外科伤科著作偶有一见。

10、 时辰方位图

用绘图标明时辰方位。

11、 五运六气图、太极图

将中医基础理论的五运六气图、太极图引入到外科伤科著作中。

12、 经络穴位图

经络穴位图在外科伤科著作中较为常见，多为十四经脉及其具体穴位，与针灸学科的经络穴位一致。

13、 炼丹炉图

丹药是中医外科伤科常用药物，炼制方法独特，丹药质量与炼丹炉关系密切。

14、 内景图、明堂图、脏腑图

用绘图标明内脏及面部五官的位置。

15、 作者像

个别著作绘有该书作者的画像。

三、绘图著作之最

现存最早的有绘图的中医外科伤科著作是宋代东轩居士所撰《卫济宝书》。除痈疽五发的图形外，书中还有 2 图，一是中脊傅贴取穴部位图，一是灸痈疽穴位图（标有曲池、手七里、肩峰、足三里、风市、腿缝骨中等 6 个穴位）。

现存绘图数量最多的中医外科伤科著作是《外科心法要诀》，又名《医宗金鉴外科》或《医宗金鉴·外科心法要诀》，系清政府组织编写的大型医书《医宗金鉴》之外科内容，成书于清乾隆七年（1742 年）。附有外科病症形图 260 余幅。

四、小结

早期的外科伤科著作只是文字叙述，没有绘图。随着对疾病认识的深入以及治疗经验的不断积累，有些文字叙述较难理解，学者不易掌握，于是出现绘图加以辅助说明。现存最早的有绘图的中医外科伤科著作是宋代东轩居士所撰《卫济宝书》，绘有痈疽五发形状图和治疗部位图。

早期的绘图仅起提示作用，针对难以理解掌握的内容辅助说明。后世医家将绘图通俗化，不论文字叙述难易都增加绘图来辅助，导致绘图数量由少到多，逐渐补充完善。现存绘图数量最多的中医外科伤科著作是《医宗金鉴·外科心法要诀》，附有外科病症形图 260 余幅。

现存外科伤科著作中的绘图种类繁多，大致可分为 15 类。病变部位图、治疗部位图、治疗方法图、骨度尺寸图、骨格图、病形图、病因图、治疗器具图等绘图具有外科伤科专业特色。有些绘图则是从其它专业借鉴而来，例如五运六气图、太极图、脏腑图、经络穴位图等，表明外科伤科专业学科发展过程中与其它学科的关联性。

外科伤科疾病特点以及治疗方法手法的复杂性，决定了绘图在外科伤科著作中的应用，绘图对于外科伤科疾病诊断和治疗方法的传承有重要作用。

Cao Hui
明朝本草文献中的彩绘图像
(摘要)

国家中药现代化工程技术研究中心 曹晖

据中国文化研究会编纂出版的《中国本草全书》统计,先秦以来现存的本草专著有**800**余部

相关本草文献 1 万余种。对中国历代本草典籍(包括**6000**余种医籍类本草文献和**8000**余种中国古代地方志中记载的本草相关文献、少数民族本草文献、宗教领域里的本草文献以及古代海外学者撰写的本草相关文献)全面整理,收录的散见于历代本草典籍中图像有**3**万余幅,其中彩图即达**7000**余幅。

本草图像是我国科技文化的重要遗产,是人类历史文化的宝库,包括大量人类健康生活理念、环境科学理念、民俗文化、民族文化、区域文化、边疆文化、宗教文化等丰富多彩的文化艺术史料。

作为中国文化的重要符号,照拂着历史悠久而又灾难深重的中华民族,从而使中华文明虽历万劫而依然延绵韧性,传承不辍。它也是中国独有的国家资源,其中既包含丰富的人文资源,也是蕴藏丰富、亟待深入开发的自然资源。本草图像反映了人对自身的认识、对自然的认识、对人与自然的关系的认识、中国人的生活态度、生活方式。它所蕴含的内容十分丰富,不仅含有生药学、药理学、药剂学、植物学、动物学、博物学、临床药学、预防医学等内容,还含有农业、农艺、工艺、制造、农用植物、矿物冶炼、抗灾救荒技术、生产自救方面的知识和理论,是由多学科组成的独特的学术体系。

一个有别于传统史学的人类发展史观,是中国**3000**年不间断地记录了人体和自然界之间的交换(包括药食两部分),并一直沿用至今,这是一种不间断的临床记载。正如《中国本草全书》序中所言:“死死生生,正是本草学问所研究的所关注的,而本草学问又是在几千年的死死生生中发展和积累起来的,是几十代人的生命和智慧的汇集、提炼和升华。……它就像一条大的江河,下游无数人受到它的恩惠,但却没有几个人到过它的上游,甚至不知道它的上游的存在”。

笔者根据中日两国陆续新发现了明朝《本草品汇精要》、《食物本草》、《补遗雷公炮制便览》等彩绘抄本[中日两国在近**8**年内出版了这**3**部彩绘本草文献计**10**个版次,包括:1、大阪武田 Takeda 科学振兴财团 2003 年《绣像食物本草》(杏雨书屋藏明三卷本)彩色影印本;2、华夏出版社 2000 年《食物本草》(北图所藏明四卷本)彩色影印单行本和《全书》本;3、北京图书馆出版社 2001 年《食物本草》(北图所藏明四卷本)彩色影印本;4、东京谷口 Taniguchi 书店 2002 年《本草品汇精要》(大塚本)彩色影印本;5、华夏出版社 2003 年《本草品汇精要》(大塚 Ozuka 本)《全书》黑白影印本,6、九州 Kyuju 出版社 2002 年《本草品汇精要》(罗马本)彩色影印单行本;7、华夏出版社 2003 年《本草品汇精要》(罗马本)彩色影印《全书》本;8、东京科学书院 1997 年《本草品汇精要》(罗马本)黑白影印本;9、上海辞书出版社 2005 年《补遗雷公炮制便览》(中研院藏十四卷本)彩色影印本(印刷中)]以及《金石昆虫草木状》台湾

藏万历 12 卷本和《本草图谱》中研院藏 3 卷本和北图藏 2 卷本，探讨以《本草品汇精要》为核心的本草文献中彩绘图像。

明朝本草图像工程背景

一、郑和下西洋证明了在十五世纪初，中国具有世界领先的航海科技和船只制造技术，比欧洲地理大发现早一个世纪，基本与世界新航路的开辟处于同一时间段。由这一壮举，中国进入航海史上前所未有的辉煌时期，与当时东南亚国家建立了密切的政治、外交、贸易关系，双方的文化交流历久不衰。跟随郑和下西洋的马欢、费信、巩珍 3 人归国后，各著《瀛涯胜览》、《星槎胜览》、《西洋蕃国志》，记述下西洋的过程和西洋各国沿途所见所闻，并从海上带回了许多国外的药物和食物以及珍禽异兽，后均收录于弘治的官修本草中，如《本草品汇精要》“薏苡草”

（玉米）、狮子、艾纳香等大批海外香料药物、以及《食物本草》“落花生”。

二、《永乐大典》是一部官修的大型综合性类书，保存了中国上自先秦，宋元以后的佚文秘典，下迄明初的各种典籍资料达 8000 余种。举凡天文、地理、人伦、国统、道德、政治制度、名物、奇闻异见以及日、月、星、雨、风、云、霜、露和山海、江河等均随字收载。收录的内容包括：经、史、子、集、释庄、道经、戏剧、评话、工技、农艺、医卜、文学等，无所不包。所辑录书籍，一字不易，悉照原著整部、整篇、或整段分别编入，这就更加提高了保存资料的文献价值。

一个众所周知的背景是明朝在小说传奇、诗词戏曲的“左图右史”或“上图下文”插画兴起。正如鲁迅先生 1933 年在《北平笈谱序》中所言：“宋人刻本，则由今所见医书佛典，时有图形；或以辨物，或以起信，图史之体具矣。降至明代，为用愈宏。小说传奇每作出相，或拙如画沙，或细于擘发。亦有画谱累次套印，夺人目睛，是为木刻之盛事。”北图和台湾“国立中央图书馆”收藏的《明解增和千家诗注》彩绘抄本，形制类似《永乐大典》，彩绘插图也完全同《本草品汇精要》的明宫廷画师手法，系明代宫中之物无疑（北京图书馆出版社 1998 年影印，台湾“国立中央图书馆”藏本书影），其构图匠心独运，一秉诗意，诗借图解，图借诗成，图文并茂，相得益彰。

《永乐大典》组织完成与明朝插画风尚的兴起，为弘治官修本草提供了借鉴经验。如《本草品汇精要》、《食物本草》与《补遗雷公炮制便览》在形制上完全同《永乐大典》的规格，朱砂绛红的双线版框，色调浓艳的矿物颜料，药名金漆写就，绘图工笔重彩，一承两宋院体之风格；用纸也同《永乐大典》的竹制纸张，从而成为明代宫廷绘本版式。

三、《救荒本草》作为一种记载食用野生植物的专书，从传统本草学中分化出来，是中国本草学从药物学向经济植物学发展的一个标志。

孝宗皇帝在弘治年诏太医院编撰官修本草规划时，基本上分三个领域开展，即以综合性药典《本草品汇精要》为主线，辅以食物救荒为主的《食物本草》和以制药为主的《补遗雷公炮制便览》作为姐妹编，打造了一个包括药物本草、食物本草、炮制本草 3 大领域浩大的明朝“本草图像工程”。

明朝本草图像工程内容

《本草品汇精要》是孝宗皇帝在弘治十六年（1503 年）八月初八日下诏太医院编纂修订一部新的本草。该书由司设监太监作总督，编写班子包括太医院院使 1 人，院判 5 人，御医 3 人，医士或冠带医士 20 人，惠民药局副使 1 人，通政使司

掌院、同掌院 2 人，右参议 1 人，中书科儒士或冠带儒士 7 人分别任提调、总裁、副总裁、纂修、誊录、催纂、验药形质、绘图等职位共 49 人，最后由 14 位誊录工匠和 8 位宫廷画师完成，是历史上官修本草参加人数最多的一次。编纂工作於弘治十八年（1505 年）三月初三日完成，孝宗帝赐书名并亲自撰写序言。全书分 42 卷正文和 1 卷目录，仿照《永乐大典》格式装帧成 36 册，收药物 1815 种，配绘有精美的彩色写生图达 1370 幅之多，算得上是中国本草史现存的最大的一部彩色药物图谱。

《本草品汇精要》彩绘图像是弘治宫廷画院王世昌等 8 名画师所绘，作为艺术珍品在明清画家中传抄转绘。根据其传抄绘图的归类，大致有 3 类：传抄摹绘类，包括罗马本、东京本（大塚本）等；改编转绘类：包括台湾本（万历年间《金石昆虫草木状》）和北京本（崇祯年间《本草图谱》）；承袭增补类：包括正德宫廷画院彩绘《食物本草》和万历宫廷画院彩绘《补遗雷公炮制便览》。

《食物本草》全书 4 卷，正文分为水、谷、菜、果等 8 部，共收药物 386 种，配绘有精美的彩色写生图 492 幅（北图藏明本），大约 43%（213 图）来自《本草品汇精要》，其中 44 图完全相同；《补遗雷公炮制便览》全书 14 卷，正文分为金石、草、木、人等 10 部，共收药物 957 种，配绘有精美的彩色写生图 1162 幅（中研院藏万历本存 13 卷，缺果部卷，913 种，1122 图），大约 76%（880 图）来自《本草品汇精要》，其中 26 图完全相同。

《食物本草》中园艺品种图像和日常食物图像，前者卷 2 果类“李”条有绿李、黄李、紫李等 21 图，这 21 个园艺品种名称在《本草品汇精要》卷 34 “李”条“名”项下相同者有 8 种。同卷“梨”条有乳梨、鹅梨等 11 图，在《本草品汇精要》卷 34 “梨”条“名”项下相同者有 10 种。后者卷 4 味类“酒”条有 16 图，在《本草品汇精要》卷 36 “酒”条“名”项下相同者有 9 种。

《雷公炮炙论》作为第一部炮制专著，因该书出现之后使炮制在本草中单独发展成专科。其中许多药物和炮制是道家炼丹所需，因而药名隐晦、工艺烦琐。于是明弘治太医院编修人员与画院画师合作，以“雷公”为名的炮制本草《雷公炮制便览》为蓝本，增补七言药性歌诀和绘图，凡有“雷公云”文字内容的药物则配以炮制加工图绘。正如同期以“食物”为名的《食物本草》为蓝本，增补彩绘图。

Representation of the Chinese and their Pathological Conditions in Patrick Manson's Research of Elephantiasis in China

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In this presentation I will analyze visual representations used by Patrick Manson (1844-1922), in his investigation of filariasis in China: his pictorial representations of Chinese patients, pictures of different pathological conditions caused by the disease and drawings of the filarial worms by Manson. I will also discuss the pictorial representations of Manson's research produced by others.

Patrick Manson the so-called "father of tropical medicine," played an important role in the making of tropical medicine as a specialty. He was medical advisor to Joseph Chamberlain, Secretary of State for the Colonies. Chamberlain was keen to exploit more effectively the resources of Britain's vast tropical empire and considered tropical diseases to be one of the greatest obstacles to this objective. Through his connection with Chamberlain, Manson exerted a significant influence on the formulation of British colonial medical policy and applied critical leverage in the founding of the London School of Tropical Medicine, which trained medical men serving in the colonies. The School not only had a decisive and lasting impact on British colonial medicine but was emulated by other imperial powers when setting up similar institutions. Manson also gave crucial advice to Ronald Ross during his ground-breaking malaria research.

In 1866 Manson was awarded an MD degree at Aberdeen University. In the same year he obtained a position as a medical officer of the Chinese Imperial Maritimes Customs, an institution controlled by the British after 1858. Manson was posted to the treaty port of Takow in southern Formosa. In 1871 he was transferred to Amoy, a treaty port in South Fuh-Kien. Here Manson also worked as the Physician and Surgeon in Charge at a missionary hospital funded by European merchants and missionaries. It was at Amoy, that Manson encountered a prevalence of elephantiasis, a disfiguring disease which resulted in enlargement of the lower limbs and scrotum. Initially Manson main interest was in its surgical treatment. He differentiated between a poor prognosis for surgical treatment of elephantiasis of the leg and an excellent outlook for treating that of the the scrotum. With regard to its etiology, Manson considered elephantiasis a kind of malarial disease.

In a now famous series of experiments, Manson employed his Chinese assistant, who was infected by filariasis. He was required to sleep in closed house which was full of mosquitos. Next morning he caught the mosquitos which had sucked the blood of the assistant. Manson used his microscope to observe the metamorphosis of the filarial embryos in the mosquitos, and gave a detailed morphological description of their metamorphosis. Most of the mosquitos that Manson kept died about the fourth or fifth day. He believed that the mosquito died after it had laid its eggs in the water and that the filaria escaped into the water. Humans who drank the water containing the filarial worm, he reasoned,

would be infected. Nevertheless, this discovery initiated a new research programme leading to the elucidation of the etiology of malaria, yellow fever, sleeping sickness and several other parasitic diseases. It was arguably Manson's most important scientific work, for it had a profound impact on tropical medicine.

By analyzing the visual and textual materials, I argue in this paper that with Manson's research increasingly focused on the filarial worms, the Chinese patients gradually disappeared (*à la* Jewson) from his research vision. The Chinese patients were abstracted into pathological lesions and the 'host' of the parasites. On the other hand, several Chinese assistants participated in Manson's investigation. They were responsible for taking blood samples from Chinese patients, preparing slides, conducting microscopic examination and recording their findings. These were tasks that demanded substantial training and skill. The Chinese assistants were crucial to Manson's discovery of 'filarial periodicity', the phenomenon that the filarial worms only appeared in the peripheral blood circulation after dusk. The Chinese assistants and their contributions, however, were downplayed in narratives and pictorial representations related to Manson's discovery. They become what the historian of science Steven Shapin called 'invisible technicians'. In this paper, I point out that Manson's representations of Chinese were consistent with his view that Chinese, as a race, were passive and incapable of innovation. He claimed that most Chinese were suffering from anaemia caused either by malnutrition or malaria and that the conservative, national character of the Chinese was a result of such pathological conditions.

Shang-Jen Li
萬巴德的絲蟲病研究對中國人與其疾病的圖像呈現

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這篇論文將分析有關萬巴德（Patrick Manson，1844-1922）的絲蟲病研究的各種呈現，包括中國病人的圖像、絲蟲的圖像、絲蟲病態部位的圖像乃至後世以萬巴德此一研究發現為題的紀念圖像。

在十九世紀來華的諸多歐美醫師當中，萬巴德或許是西方醫學史上地位最受推崇的一位。他在 1866 年來台灣打狗（高雄）擔任海關醫官，並且在長老會醫療傳教士馬雅各創辦的醫院服務。六年後（1871）他轉任廈門海關，任職熟悉孫中山生平事蹟的人則知道，當年孫中山在香港就讀的醫學院就是萬巴德於 1887 年創設的，萬巴德擔任首屆院長，他延攬來的康德黎（James Cantlie）則是在蘇格蘭亞伯丁大學醫學院學弟。孫中山在倫敦蒙難時，萬巴德也參與了營救的工作。

後人常稱他為「熱帶醫學之父」（father of tropical medicine）。他會得到此一尊稱是有幾個原因：他是倫敦熱帶醫學校（London School of Tropical Medicine）的創辦人，此一學校的成立是熱帶醫學成爲一門醫學專科的重要里程碑。此外，萬巴德曾擔任大英帝國殖民部（Colonial Office）的醫學顧問，對於英國在熱帶殖民地的醫療衛生政策以及醫學研究發揮很大的影響力。他 1898 年出版的熱帶醫學專書《熱帶疾病手冊》（Manual of Tropical Diseases），成爲此一新興醫學領域的重要著作，幾乎是前往熱帶地區工作的西方醫師所人手必備的參考書。指導印度的英國軍醫羅斯（Ronald Ross）從事瘧疾研究，證明蚊子是瘧原蟲的媒介動物，而羅斯也因爲此一重大發現而榮獲諾貝爾醫學獎。

萬巴德本人最原創、最重要的醫學研究工作則是在中國進行的。他在打狗工作六年（1866-1871）之後，轉往廈門海關任職，並且在當地外國商人與傳教士設立的醫院中擔任主治醫師。他在廈門發現象皮病（elephantiasis）這種歐洲罕見的疾病在當地相當盛行，罹患此一。就像許多在海外的歐洲醫師一般，萬巴德認爲象皮病是熱帶瘴氣所引起的疾病。因此他沒有深究此病的原因，而把心力放在對病人進行外科治療。萬巴德在 1875 年返英休假一年，在大英圖書館研讀象皮病相關文獻，尤其是英國在印度的醫師的醫學報告。這些研究改變了萬巴德的想法，使他相信象皮病是寄生蟲引起的疾病。

萬巴德懷疑絲蟲病是透過蚊子來傳染的，從英國返回廈門之後便展開研究。萬巴德透過抽血觀察發現在廈門有不少人感染絲蟲，其中也有人血液中有絲蟲卻未發生象皮病。直到萬巴德設計了一個很有名的實驗，找來一個絲蟲病患者睡在一間房裡，房間晚上門窗大開吸引蚊子進來，隔了一段時間後再把門窗關起來，第二天早上用菸草燻蚊子，蚊子被燻得頭昏腦脹後，萬巴德就很有耐心且細心地捉蚊子，將捉到蚊子後就放進藥罐中。萬巴德利用這些吸過絲蟲患者血液的蚊子做實驗，他在顯微鏡下解剖蚊子，觀察結構簡單的絲蟲在蚊子體內會不會成長。如果絲蟲沒有被蚊子消化掉，而且會成長，那麼蚊子就是中間宿主。結果萬巴德真的觀察到絲蟲沒有被蚊子的胃消化且有成長，反而在蚊子體內不斷成長。此一發現顯示絲蟲感染是此一

疾病的病因，而蚊子則是絲蟲的中間宿主，在此一疾病的傳播過程中扮演重要角色。只是萬巴德研究一周後就觀察不下去，因為蚊子都餓死了。這是因為萬巴德受到那時流行的觀念所誤導，以為蚊子一生只吸一次血，吸完血產卵後就死在水裡。他不曉得蚊子會吸很多次血。萬巴德推想感染了絲蟲的蚊子在水上產卵之後就死在水中，絲蟲就進入水裡面，而人喝了含有絲蟲的水就會感染此一疾病。所以嚴格說來萬巴德只有解開絲蟲生活史一半的謎，他不曉得蚊子會二度叮咬人，透過唾液把絲蟲成蟲傳染到人體內。

但這個研究的卻已經指出昆蟲在寄生蟲疾病的傳播過程中扮演極重要角色。本來以為象皮病是熱帶瘴氣引起的疾病，現在發現它其實是昆蟲傳播的寄生蟲疾病，也讓研究熱帶疾病的醫生把注意力和思考方向轉到昆蟲身上，對寄生蟲學和熱帶醫學有很重大的影響。後來西方醫學界陸續發現黃熱病、瘧疾和昏睡病等疾病都是透過昆蟲來傳播方式，歸根究底就是萬巴德的絲蟲研究開啓了這樣的研究方向。因此這個絲蟲研究可說是萬巴德在科學上最重要的工作。

這篇論文將透過分析視覺材料來指出隨著萬巴德的絲蟲研究的開展，他的焦點逐漸由病人身上轉移到絲蟲，而中國病人一方面被抽象化為疾病病灶，以及絲蟲的宿主-受害者，具體的病人從疾病圖像中「消失」（就社會學家朱申的定義而言）。另一方面，萬巴德的其實訓練了一些中國助手參與他的研就，這些助手不只負責病人抽血、製作樣本玻片以及進行顯微鏡觀察記錄等需要高度技能的工作，而且在萬巴德發現絲蟲白天不會出現在人體周邊血液循環中、只在傍晚之後才會出現的所謂「絲蟲週期性」現象的過程中，扮演相當重要的角色。然而，在萬巴德此一研究的相關文字敘述與圖像呈現中，這些中國助手的貢獻乃至其身分背景都被忽略。他們成了科學史學者薛平所謂的「隱形的技術人員」。我在本文中將指出，對於萬巴德絲蟲研究的中國病人與中國助手的這種呈現方式，和萬巴德認為中國人由於普遍的營養不良和瘧疾感染造成的長期貧血導致被動而無力創新的民族性格的看法是一致的。

**An Investigation into the Native Places and Historical Remains
of Ancient Chinese Physicians**

Historical Images in Pharmaceutical Culture in The Era of Emperor Yan

China Academy of TCM Ma Jixing

First class, title catalogue images in the earlier come down edition of Shen Nong's Herbal Classic.

Second class, photocopied book images in edited edition of Shen Nong's Herbal Classic.

Third class, other photocopied book images in herbology with the name of Shen Nong.

Fourth class, book titles images of all categories of medical books with the name of Shen Nong.

Fifth class, book titles images of non-medical books with the name of Shen Nong.

Sixth class, statuary images of Shen Nong

1. Stone carving
2. Tile carving
3. Wood carving
4. Ivory carving
5. Earth carving
6. Ceramics
7. Bronze casting

Seventh class, wood carving images of Shen Nong for analyzing and observing viscera.

Eighth class, portrayal images of Shen Nong.

1. The Liao Dynasty
2. The Ming Dynasty
3. The Qing Dynasty
4. The Republic of China era
5. Japan
6. America

Ninth class, printed images of Shen Nong.

1. The Yuan Dynasty
2. The Ming Dynasty
3. The Qing Dynasty
4. Japan
5. Russia

Tenth class, picture scroll images of Shen Nong.

Eleventh class, place names images with the name of Shen Nong.

Twelfth class, enterprises images with the name of Shen Nong.

Thirteenth class, academic conferences images with the name of Shen Nong.

Fourteenth class, pharmaceutical units images with the name of Shen Nong.

Fifteenth class, drug trademarks images with the name of Shen Nong.

Sixteenth class, food or drinking trademarks images with the name of Shen Nong.

Seventeenth class, product advertising images of utensils with the name of Shen Nong.

Eighteenth class, firm or corporation names images with the name of Shen Nong.

Nineteenth class, media names images with Shen Nong sample.

Twentieth class, poems and essays images extolling the outstanding achievement of Shen Nong.

Twenty-first class, temples images for sacrificing Shen Nong.

1. Xian Nong Temple
 2. Yao Wang Temple
 3. Xian Yi Temple
 4. Shen Nong's Ancestral Temple
 5. Emperor Yan's Ancestral Temple
 6. Emperor Yan's Temple
 7. San Huang Temple
 8. Emperors of successive dynasties temples
 9. Shen Nong Temple in Japan
 10. Shen Nong Sacrifice in Osaka, Japan
 11. Shen Nong Sacrifice of Emperor Yan's Imperial Tomb and Temple
- Twenty-second class, tomb and temple images of Shen Nong.

炎帝药学文化的历史图像

中国中医研究院 马继兴

- 第一类 《神农本草经》早期传本的书目图像
- 第二类 《神农本草经》辑本的书影图像
- 第三类 冠有“神农”名称的其他本草学书影图像
- 第四类 冠有“神农”名称的各类医书书名图像
- 第五类 冠有“神农”名称的非医书书名图像
- 第六类 神农氏雕像类图像
- 一、 石雕类
 - 二、 砖雕类
 - 三、 木雕类
 - 四、 牙雕类
 - 五、 泥雕类
 - 六、 陶瓷类
 - 七、 铜雕类
- 第七类 剖视内脏的神农氏木雕图像
- 第八类 神农氏的画像类图像
- 一、 辽代
 - 二、 明代
 - 三、 清代
 - 四、 民国时期
 - 五、 日本
 - 六、 美国
- 第九类 神农氏版画类图像
- 一、 元代
 - 二、 明代
 - 三、 清代

四、日本

五、俄国

第十类 神农氏的卷画类图像

第十一类 冠有“神农”名称的地方名称图像

第十二类 冠有“神农”名称的事业单位图像

第十三类 冠有“神农”名称的学术会议图像

第十四类 冠有“神农”名称的药业单位图像

第十五类 冠有“神农”名称的药品商标图像

第十六类 冠有“神农”名称的食品、饮料商标图像

第十七类 冠有“神农”名称的器物商品广告图像

第十八类 冠有“神农”名称的商店、公司名称图像

第十九类 冠有“神农”字样的媒体名称图像

第二十类 赞颂“神农氏”业绩的诗文图像

第二十一类 祭祀神农的坛庙图像

一、先农坛

二、药王庙

三、先医庙

四、神农祠

五、炎帝祠

六、炎帝寺

七、三皇庙

八、历代帝王庙

九、日本的神农庙

十、日本大阪的神农祭

十一、炎帝陵庙的神农祭

第二十二类 神农陵墓图像

Kan-Wen Ma

On the spot investigation into the native homes and historical remains of six celebrated medical figures in the history of Chinese medicine were carried out during 1954 and 1955. These include Bian Que(C. BC 5th Century), Hua Tuo (AD C.AD 108-208), Ge Hong (AD 284-363), Tao Hongjing (AD 456-536), Sun Simiao (AD 581-682), Liu Wansu (C. AD 1120-1200), Zhu Zhenheng (AD 1281-1358) and Wang Kentang (.1549-1613). Valuable and new vivid evidence about their lives and careers had been obtained which have never been recorded in any literature in the past. The findings have not only provided us with strong and useful historical facts about their background and careers but also have deepened our understanding of their lives and achievements which influenced the development of Chinese medicine. The background of the initiation of the investigation project and its cultural and anthropological significance are also discussed.

Kan-Wen Ma

中国古代名医故里古迹调查

马堪温

作者曾参与中国古代名医故里遗迹的实际调查，感到收获很多。现简述其经过和感受，供医史研究参考。

1954年笔者在前中央卫生研究院中国医药研究所医史研究室工作时，为全面了解古代名医的生平事迹，提出对古代名医的故里等遗迹进行实地调查，得到室主任李涛教授的支持。当时拟定的名医有20余位。为此曾预先对每位名医的生平背景等做文献研究调查，包括有关历史资料和地方志等。1954年和1955年先后对扁鹊（秦越人）、华佗、葛洪、陶弘景、孙思邈、刘守真、朱丹溪、王肯堂等名医故里及有关历史遗迹进行了实地调查。此工作开始不久，政府提出继承发扬中医学遗产的政策，对此工作起到促进作用。现依名医年代次序对上述名医故里古迹调查做一简要报告如下：

扁鹊（秦越人，约公元前5世纪左右）。1954年笔者参与河北省任丘县**鄆州**的调查，依据史记所记，扁鹊为**鄆州**人。**鄆**为战国赵邑，其治所在今河北任丘**鄆州镇**（[图片](#)）。在该处发现有药王庙之山门，与三皇殿、文昌阁之山门并列（[图片](#)），并有明万历21（1595）及清咸丰11年（1186）重修药王药碑记。因扁鹊在元代被奉为神应王，故当地称他为药王，并有天下大庙属**鄆州**之说，可见当时药王庙规模之大。县志记载庙后有扁鹊墓。但已不存，而**鄆州镇**东门外仍有药王庄，传为扁鹊故里（[图片](#)）。

1954年11月10日至17日，笔者又参与河北省内丘县神头村有关扁鹊古迹之调查。内丘县在战国时亦属赵。在太行山麓，传扁鹊曾到该地。其中一座山名为“鹊山”（[图片](#)）。传魏太子曾在当地蓬山隐居，故又称之为“太子岩”。在与鹊山相连的山坡上有“鹊王庙”，县志记载该庙在汉唐期间已存在。庙前有一座大石桥，名“九龙桥”（[图片](#)），桥头山坡有九龙石柏（[图片](#)）和“药石”（[图片](#)）。扁鹊庙内尚存有鹊楼、山门等建筑（[图片](#)），并有10余碑记（[图片](#)）。我们发现最早的碑记（已残）立于周（五代）显德年间（公元954-959年），其中有“大王庙宇，颇为岁华”等字样（[图片](#)），证明该庙历史之久。另有宋熙宁2年（1069），元中统壬戌（1263）、明嘉靖戊戌（1538）年及清代重修该庙碑记等数十座，惜多数已残损。

华佗（公元108-208）。1954年在江苏徐州市调查，发现有华佗墓（[图片](#)）。沛县有“华庄”，传为华佗故里（[图片](#)），并有华祖庙（[图片](#)），另有华佗纪念馆（[图片](#)）。

葛洪（公元284-363）。1955年6月在杭州“葛岭”调查，尚有“抱朴庐”、“葛仙祠”、“葛洪丹井”（[图片](#)），明万历壬癸（1612）碑记（[图片](#)），从中可知“葛仙祠”自五代时已存在，宋金时遭破坏，明朝重修。又在广州罗弗山葛洪栖居地（当时在军队疗养院境内）发现有遗履轩、葛洪丹、洗药池（[图片](#)）、冲虚观（[图片](#)）等遗迹。还在广东句容县城（[图片](#)）西南发现传为葛洪故宅之“青元观”（[图片](#)），“葛洪丹井”（[图片](#)），“葛仙庵”（[图片](#)）等遗迹。

陶弘景（公元456-536）。1555年6月调查。在江苏茅山峰西北侧有“崇禧宫”，传为陶弘景隐居处（[图片](#)）。县志记当地建筑很多，抗日战争期间，八路军在当地打游击战，多遭日军破坏，现仅存残垣破壁（[图片](#)）。发现宋延佑6年（1091），“敕建万寿崇禧宫碑记”，由赵孟兆所书。在茅山后有“郁岗斋室”遗迹，传为陶弘景隐居地，已塌毁。仍存有“乾元观”石碑坊，从中尚可辨认记有陶真人字样。另有“松风阁”，传为陶弘景隐居听松风和弹琴之处，后被称为“宰相堂”。在茅山有“紫阳观”、“华阳宫”、“华阳洞”等遗迹。大茅峰有“玉晨观”，仅剩石碑坊（[图片](#)），从中尚可辨认刻有葛洪、陶弘景等字样。又在金坛县“陶村”（[图片](#)）及陶弘景隐居处之“洞虚观”前发现有陶隐居炼丹井（[图片](#)）。

孙思邈（公元581-682）。1954年8月笔者参与陕西耀县孙思邈故里孙家塬及药王山之调查。在孙家塬存有孙氏祠堂（[图片](#)），其中有孙思邈塑像（[图片](#)）。“孙思邈祖莹”，为清同治11年（1872）重修，但已破损。该县之“药王山”（[图片](#)）传为孙思邈隐居地，其中古迹甚多，孙之塑像（[图片](#)），配殿有古代其他名医塑像（[图片](#)），“千金宝要”碑（1542）（[图片](#)），其背面为历代名医神碑，记从三皇到元代名医198名。庙内还有洗药池（[图片](#)）。药王庙对面山上亦有碑记数座（[图片](#)）。1957年6月笔者再次去当地调查，发现建筑物及碑记有所破损，配殿中原有之十大名医塑像已不存。孙家塬情况大致如往（[图片](#)）。

刘守真（公元1120-1200）。1954年5月笔者参与到河北省河间县调查。其城东约20里有刘守村（[图片](#)），村内原有刘守真祠，抗日战争时遭破坏，但尚有仅存残墓和碑石（[图片](#)）。在附近发现的嘉靖丁亥（1527）“重修观音禅寺碑

记”中记述刘守真为仁医等。该寺原为永乐三年（1405）所建，说明刘守真死后不久，人民已为他立庙。河间一带原有刘守真庙几座，多已损毁。

朱震亨（公元 1281-1358）。1955 年 6 月去浙江义乌县东朱村调查朱震亨故里遗迹，在赤岸镇有朱氏祠堂，已作为政府办事处。村之东北有朱震亨祠，已大部毁坏。惟朱塑像尚完整。祠左有朱墓（[图片](#)），碑石具在，为乾隆及民国间所修。当地有溪水一条呈赤色，赤岸镇之土地亦呈红色，当为朱丹溪之名号之由来。

王肯堂（公元 1549-1613）。1955 年 7 月在江苏金坛县调查王肯堂故里遗迹。在县城东街曾会见王氏后裔，获所记王肯堂事迹书（[图片](#)）。王肯堂行医之“东禅寺”已由王氏后裔居住，并从其后人处发现王氏家谱，记王肯堂生平事迹及生卒（生于嘉靖己酉 1549；卒于万历癸丑 1613）（[图片](#)），与其他文献记载不同。另一突出收获是发现王肯堂之画像（[图片](#)）（洽购后藏于中医研究院）。王氏墓地在抗日战争时遭破坏。当地人谈王肯堂墓原甚大，原有石人、石碑、石马等，但已无存。

《产经》妊娠图研究（提要）

A Study of the Illustrations of Pregnancy from the *Chanjing* [Birth Classic]

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日本的《医心方》（984）卷 22 中有妊娠十个月的月别图，分别按月别绘制了与裸体孕妇及胎儿相关的经脉、经穴、脏腑、骨骼等，均引自《产经》。《产经》虽为佚书，但《隋书经籍志》中有“产经一卷”的著录，另外《日本国见在书目录》中亦有“产经十二，德贞常撰，产经图三”的另一种著录。因《医心方》卷 25 第 61 叶有“此是德家秘方不传。出产经”的记载，同书卷 22 的妊娠图一定引自德贞常所撰的《产经图》。

The twenty-second scroll (*juan*) of the Japanese text *Ishimpô* (984) [Prescriptions from the Heart of Medicine] contains illustrations depicting the ten months of pregnancy. Month-by-month, they show the channels, points, internal organs, bone structure etc. as they relate to the naked body of the pregnant woman and the fetus. The entire set is a quotation from the *Chanjing*. Although the *Chanjing* is a lost text, the bibliographic catalogue of the Sui dynasty records a "*Chanjing* in one *juan*." Moreover, the *Nihonkoku Genzaisho Mokuroku* [Catalogue of Extant Books in Japan] also records a "*Chanjing* 12 *juan*, authored by De Zhenchang, and illustrations to the *Chanjing* 3 *juan*. Lastly, the 61th leaf of the 25th *juan* of the *Ishimpô* contains a comment that "This is a secret formula by De Zhenchang, not to be transmitted. It comes from the *Chanjing*." This proves that the pregnancy illustrations in *juan* 22 of the same text must come from the "*Chanjing* Illustrations" by De Zhenchang.

因为该《产经》佚文中引用了《葛氏方》，所以《产经》一定成书于葛洪（261-341）之后。另外因其著录于《日本国见在书目录》（875-891），它的成书下限应为唐代 9 世纪末以前。据此可以推论本书的绘图，为世界现存最早的系统描绘妊娠十个月的胎儿发育等的绘图。而且，图绘以外《产经》的文章，多来源于公元前约 165 年被埋葬于马王堆的《胎产书》，其内容的来源也极为古老。Because of the fact that the cited paragraph of *Chanjing* contains quotations from the *Formulas by Mr. Ge*, it must have been composed after the lifetime of Ge Hong (261-341). On the other hand, since it was recorded in the *Nihonkoku Genzaisho Mokuroku* (875-891), its time of composition must have been before the end of the ninth century Tang dynasty. From this evidence, we can deduct that the drawings in this text constitute the earliest illustrations in the world to systematically portray the development of the fetus during the ten months of pregnancy. Moreover, the text that accompanies the drawings from the *Chanjing* originates to a large extent from the *Taichanshu* [Book of the Generation of the Fetus], buried in 165 BCE at Mawangdui, and the origin of its content is therefore also extremely ancient.

另外，从《黄帝蝦蟇經》（3-4 世纪）中标明针灸禁穴的裸体男人图以及《灸法图》（唐代抄写的敦煌文件 S.6168、S.6262）中标明灸穴、骨骼的裸体男人图中可以看出与《产经》妊娠图类似的描写内容、身体画法等。特别是身体的画法和经穴的图示有共通之处。但是，2 世纪后半叶汉代画像石描绘的人面鸟身针医所治疗的患者像中，完全没有上述的身体画法、经穴等。综上所述，可以试推论为，这些医疗人体图的画法有可能来源于大约成书于《明堂经》前后 3 世纪左右的《明堂图》一书。

In addition, we can compare the illustrations of pregnancy from the *Chanjing* with two pictures, to which they are similar both in the content portrayed as well as the style of depicting the body: The picture of a male naked body in the *Huangdi Hama Jing* [Yellow Emperor's Toad Classic] (3rd to 4th century) indicates points prohibited for acumoxa, and the pictures of male naked bodies in the *Jiufatu* [Illustrations for Moxibustion Methods] (S6168 and S6262 of the Dunhuang manuscripts, copied during the Tang dynasty) indicate moxibustion points and bone structures. Especially the style of depicting the body and the way in which the channels and points are marked show commonalities. However, among the patients treated by the healer with a bird face and human body, which are depicted in a late second century Han dynasty stone relief, the above-described style of depicting the human body and mark channels and points are completely absent. In conclusion, we can tentatively infer that the style of drawing in these various pictures of the human body in a therapeutic context perhaps originate with the text *Mingtangtu* [Illustrations of the Hall of Brightness] that was probably composed in the third century around the time of the *Mingtangjing* [Classic of the Hall of Brightness].

Explanations of the Illustrations of Reinforcing and Reducing Five ZANG-organs and Six FU-organs

Zhang Qicheng

Huangti's Dunjia Yuanshen Classic, Fairy Yuzhou Classic of Five ZANG-organs and Six FU-organs in Shangqing and Huangting Chapter, and Illustrations of Reinforcing and Reducing Five ZANG-organs and Six FU-organs in Huangting Interior Classic were three Taoism writings during Tang and Song Dynasty. Depending on the viscera theory of Huangti's Internal Classic and Huangting Classic, five ZANG-organs and one FU-organ were respectively matched with one kind of animal, which was the important characteristic of these three books and showed how Taoism doctors promoted the viscera theory between the Southern and Northern Dynasties and Song. This brought out great influences in clinical medicine and Taoism practice of that time.

Though the names of the three classics were different, the chapters in them were coincident. The names of the chapters and orders were completely same, which were Illustration of the Lung, Illustration of the Heart, Illustration of the Liver, Illustration of the Spleen, Illustration of the Kidney and Illustration of the Gallbladder by turns.

The illustrations in three classics showed full coincidence in viscera matching animals, which were the lung matched with lion, the heart with rose finch, the liver with dragon, the spleen with phoenix, the kidney with deer and the gallbladder with tortoise-snake respectively. But they still had some differences in angles of drawing, the pose of animals and fineness of writing.

1 · Illustration of the Lung

The mental activity the lung stored was named soul. The god of the lung was anger often. The white beast was used to be the metaphor of the god of the lung in the paper, which was probably allowed for the fury habit of the beast.

Because lion was the king of all animals, it was chosen as the representative of the god of the lung.

2 · Illustration of the Heart

The mental activity the heart stored was named spirit. In a theory, the nature of the god of the heart was impatient, savage and constantly changing.

Considering the appearance of fire, rose finch was chosen as the metaphor of the god of the heart or followed the god of traditional orientation.

3 · Illustration of the Liver

The mental activity the liver stored was named mood. The nature of the god of the liver tended to kindness. Dragon was used to describe the god of the liver.

figuratively , which was not only coincident with tradition in orientation , but also related to the widespread belief that dragon was in charge of rain and its behavior benefited to all things .

4 · Illustration of the Spleen

The mental activity the spleen stored was named thought . The nature of the god of the spleen was usually jealous . Both the theories in Yuanshen Classic and Yuzhou Classic thought that women were more jealous because of their yin nature , so phoenix was used as the metaphor of the god of the spleen . Thus , opposite to yang nature of dragon , the feminine characteristic of the god of the spleen was pointed out .

5 · Illustration of the Kidney

Different from the opinion of the doctors , the mental activity the kidney stored was named essence but not will , which was probably related to Taoists thinking highly of refining vital essence and energy . In the paper , the nature of the god of the kidney was claimed gentleness . Since its propensity was docile , deer was adopted to be the metaphor as the god of the kidney . Furthermore , deer was the image of longevity in traditional belief , and the kidney was the congenital foundation , so describing the god of the kidney with deer figuratively should contain another meaning of longevity . The image of double-head deer was probably pertaining to the specific appearance of kidneys .

6 · Illustration of the Gallbladder

In the paper , the name of the gallbladder's mental activity was not definite . In a theory , essence of metal was suggested , which was a little different from that of traditional doctors but related to the opinion of Taoism practice . The nature of the god of the gallbladder was stated bravery . Tortoise-snake was used as the metaphor of the god of the gallbladder because of its longevity image .

Conclusion : On one hand , the theories in three classics followed Huangti's Internal Classic and Huangting Classic . On the other hand , in the process of hinting theories with illustrations and explaining illustrations with words , with the core of the opinion of Taoism practice , the points in traditional five elements and the orientation gods were all modified more or less . All above indicated the option and innovation in medical theory and religion made by later Taoists . According to the words explanation of each illustration , all viscera had their own image and god . Though the ways of describing the image were detailed or brief , the general idea was the same . In the end , suspended musical stone , lotus flower , suspended bottle gourd , Chinese raspberry , cobble and suspended gourd were used to delineate corresponding images . The descriptions of the gods also showed differences , but white beast (lion) , rose finch , dragon , phoenix , deer and tortoise-snake were adopted respectively to

be the metaphor · So it was thought that the nature of each animal was indeed applied to summarize the characteristic of the god of viscera correspondingly · On this point of view , at least during Tang and Song , at the same time the opinions about the gods of viscera were debated and promoted , Taoism followed the thought of mental activities and viscera of Huangti's Internal Classic · In these books , the appearance of each viscera was mentioned simply · Besides it , the concept of the gods of viscera in Huangting Classic was especially educed · Notably , in discussing the gods of viscera in the three classics , the animal propensity was further borrowed to elucidate their characteristics in Huangting Classic · Moreover , it was not limited to ancient orientation gods when choosing animals · These all disclosed the active and fact-pursuing tendency Taoism of that time showed in elucidating the theories ·

五脏六腑补泻图解说

《黄帝遁甲缘身经》、《上清黄庭五脏六腑真人玉轴经》、《黄庭内景五脏六腑补泻图》是唐宋之际出现三部道教著作。这三部著作的重要特色，即以《内经》、《黄庭经》的脏腑理论为依据，为五脏和一腑各配一兽，是南北朝至宋之际道医对脏腑理论的发挥，对当时的医学临床和道家修炼都产生了重要的影响。

这三部经文，经名虽有不同，但分篇完全一致，篇名、次序完全相同，依次为“肺藏图”、“心藏图”、“肝藏图”、“脾藏图”、“肾藏图”、“胆藏图”。

三部经文的图形在藏府配属关系上完全一致，分别为：肺藏配狮形、心藏配朱雀、肝藏配龙、脾藏配凤、肾藏配鹿、胆藏配龟蛇。但是在绘制角度、动物姿势、笔法精细程度上存在一些差异。

一、肺藏图

肺藏神为魄，其神多怒，文中用白兽比喻肺神，可能与兽的暴怒习性有关。狮百兽之王，故选狮为肺藏神的代表。

二、心藏图

心藏神为神，一说本神，其性燥（暴）而无准。取火之相，选择朱雀为本神之喻，或为传统方位之神的沿袭。

三、肝藏图

肝藏神为魂，其性好仁，以龙作喻，不仅在方位上合于传统，而且与龙行雨施，惠泽万物的普遍信仰有关。

四、脾藏图

脾藏神为意，其性多嫉妒。《缘身经》与《玉轴经》皆以为“妇人则妒剧者，乘阴气也”，故以凤作喻，或与龙之阳相对，意指其阴性特征。

五、肾藏图

肾藏神未与医家相同而言“志”，而言“精”，或与道家重视修炼精气有关。文中称其性柔顺，取鹿作喻，或与鹿之温顺习性有关，另鹿在传统信仰中为长寿之象，而肾为先天之本，以鹿喻肾藏之神，应还有长生久视之意。双头鹿之形象，应与肾的具体形态有关。

六、胆藏图

将胆列为五藏之后，强调胆藏神，与传统医家不尽相同，应与道家修炼观念有关。但言其性神勇，以龟蛇作喻，应与龟蛇长寿之象有关。

结语：三部经文在理论上与《内经》、《黄庭经》一脉相承，但在以图喻理、以文释图的过程中，又紧紧围绕道家实际修行观念的核心，对传统五行观念、方位神的信仰观念都有改动，体现了后世道教修炼理论对医家理论和宗教观念的取舍与创新。

根据每图文字，每个藏府皆有象有神，对其象的描述各有详略，但是大义相胜地同，最后以悬磬、莲花、悬匏、覆盆、圆石、悬瓠分别描摹；对其神的描述也各有长短，但也以白兽（狮形）、朱雀、龙、凤、鹿、龟蛇分别譬喻，因而可以认为实际是采用每一种动物的品性概括每一类藏府神的特征。

从这个角度来看，道教至少在唐宋之际，在开展对每一类藏府神的讨论与发挥时，也延续了《内经》神藏思想，对各藏府形态简略提及但不拘泥，而是重点发挥了《黄庭经》藏府神观念，值得注意的是，这三部经文在讨论各藏府之神时，进一步借用动物习性对《黄庭经》藏府神的特征加以阐明，并且在选用动物时还跳出了古代方位神的框架，显示了此时道教在阐述理论时活泼务实的倾向。

The earliest stone inscription of medicine that exists

Ruixian Zhang, Jiaqui Wang

In the south of ancient capital Luoyang (Henan Province), there is an outstanding cultural heritage of the world—Longmen Grottoes. Inside Longmen Grottoes, there is a “cave of prescription” in which many medical workers are interested. Many ancient prescriptions are carved on the wall of the cave, and so they were called “Longmen Prescriptions”. The “Longmen Prescriptions” cherished simple drugs and convenient method, enjoying a greater influence on civilians than many doctors. But many doctors did attach much importance to the prescriptions for their simple theories and common treating methods.

Many researchers, no matter from medical circles or archaeological circles, were interested in “Longmen Prescriptions”. Since Qing dynasty (1644-1911DC), some random investigations have been made. These scientific investigations were recorded on several important literatures of epigraphy, including 《Jinshi Wenzhi Ji(金石文字记)》, written by Guyan Wu, 《Jinshi Cuibian(金石萃编)》, written by Wang Chang, 《Baqiongshi Jinshi Buzheng(八琼室金石补正)》, written by Luzeng Xiang, 《Yu Shi(语石)》, written by Yechang Chi, etc. From 1980s, more and more researches were done to “Longmen Prescriptions” and many new findings were found. Besides Chinese, many Japanese scholars were also interested in it.

一 · Criticism on the time of “Longmen Prescription”

Many scholars had different opinions on the carving of “Longmen Prescription”, some believed it was carved in Northern Qi Dynasty (550-577), and some believed Sui (581-618) or Tang Dynasty (618-907). In order to have a definite result, we carried out an on-the-spot investigation: although the prescriptions in the cave were carved at three separate places, the style of the handwriting is the same, which proved the prescription was written by the same person. From the style, taboo words, surrounding statues of Buddha, and the literature on the rubbings, we deduce the time of the prescription. The followings are the findings: (1) The handwriting of the stone inscription is different from that of Northern Qi dynasty(北齐, 550-577), but conforms with Tang Dynasty(618-907), especially near the style of Yangxun Ou, and Yu(the famous calligrapher of Tang dynasty). (2). Features of variant form of a Chinese character: the structure of all the variant forms of Chinese characters, nearly 307 variant forms and nonstandard popular forms out of 2800 Chinese characters, accords with that of earlier Tang Dynasty, not Northern Qi Dynasty. (3). The relation with the surrounding statue of Buddha: the inscription gave way to the statue of Buddha, for which we judge the inscription is in Tang Dynasty. (4). Taboo words: from the taboo words which avoided mentioning Tang Taizong, not including Tang Gaozong, Tang Zongzong, and Wu Zetian, we conclude the inscription is finished earlier than Tang zongzong. So we can see the time of the inscription is from the first year to the fourth year of Tang Gaozong(650-653).

二 · “Longmeng Prescription” shares the same source with ancient hand-copied book that could be rolled up of Dunhuang Grottoes

The source of “Longmen Prescription” is an enigma since ancient time, for there are not any medical books mentioned about it in China. The first “Longmen Prescription” on record is Japanese medical book 《Bencao Heming(本草和名)》 (918), which records the book 《Longmen Baiba(龙门百八)》. The later 102 articles of 《Longmen Yaofang (龙门药方)》 in 《Yixin Fang(医心方)》 did not conform with that on the stone inscription. Since 1994, we had made many attempts in the next three years and finally found it sharing the same source with ancient hand-copied book of Dunhuang Grottoes. We found that more than 54 prescriptions out of 213 prescriptions of France-collected ancient hand-copied book that could be rolled up of Dunhuang Grottoes (P.3596) are same or nearly same with the prescription of Longmen Grottoes, and more than 25 prescriptions out of 77 prescriptions of England-collected ancient hand-copied books of Dunhuang Grottoes (S.3347) are the same with the prescriptions of Longmen Grottoes. Such high reoccurrence rate is rather low in other circumstances.

These two ancient hand-copied books obviously have the same source with Longmen prescription. And what is the relation between these two books? We found that these two books possibly have the same source, for they have 40 same articles.

It is obvious that the two books are the different hand-copied books of the same medical book, and they share the same source with Longmeng Prescription.

Wang jiqing, professor of Lanzhou University, discovered two different fragments of S.9987 in the east of English library in 1991, which entitled 《Beiji Danyan Yaofang Juan(备急单验药方卷)》. The two fragments are same with S.3347, S3395 in content, nature of the paper, style of handwriting, font of character, form, and the color of ink. So we can draw the conclusion that S.3347, S3395, and S.9987 are different parts of one hand-copied book-- 《Beiji Danyan Yaofang Juan》. And there are 9 articles in S.9987. FRONT similar to those of “Longmen Prescription”.

For the above-mentioned reasons, the “Longmen Prescription” shares the same source with 《Beiji Danyan Yaofang Juan(备急单验药方卷)》.

现存最早的石刻医方

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在古都洛阳以南，有举世闻名的世界文化遗产——龙门石窟。龙门石窟内有一处医务工作者尤感兴趣的所在——“药方洞”，该洞的洞壁上镌刻着古代医方，俗称为龙门药方。龙门药方抄录于通衢大道，供百姓医药不时之需。它的药物简便易得，它的方法简单易学，因而它对于民间的影响要大于对医学家的影响。由于它的理论内容偏少，又少有独特的方药治法，因此医学家往往不重视它，就像他们也不重视其他经验方一样。

对龙门方的研究，无论从医学界还是考古界都有一定兴趣，从清代开始就有零星研究，曾被几部重要金石学文献，如顾炎武《金石文字记》、王昶《金石萃编》、陆增祥《八琼室金石补正》、叶昌炽《语石》等著录。上世纪80年代以后研究较为频繁，屡有新发现新成果出现。除国内研究外，日本学者对此也一定兴趣。

一 龙门药方镌刻年代考

龙门药方的刊刻年代，诸家说法不一，或以为北齐，或以为隋唐，迄无定论，因作考证如次。经实地考察了解到药方在洞内虽分刻三处，但书风统一，应是同一书手所为，由书法风格、讳字及与周围造像的关系，可推测其大致的镌刻年代。并结合拓片及有关文献，我们发现：

书法风格：药方刻石的书风与北碑迥异，而符合初唐楷书特征，尤其与欧虞书风接近。

异体字特征：我们注意到，药方刻石虽大量使用异体字，约有文字2800余，共使用异体字及俗体字307个（含重复使用），但其结构全不似北朝异体字，却符合初唐特征。

与周围造像的关系：药方刻字与佛像的避让关系可以看出当在唐代。

讳字：从药方刻字避唐太宗而不避唐高宗、唐中宗及武则天可以看出药方年代的下限不应晚于中宗。综合分析我们拟将药方的镌刻年代定在唐高宗永徽元年（650）至四年（653）之间。

二 龙门药方与敦煌卷子同源

关于龙门药方的来源自古就是一个谜。中国历代医籍中几乎没有它的痕迹。日本的《本草和名》（公元918年）载有《龙门百八》的书名，是最早的有关龙门药方的文献记载。此后的《医心方》中载有《龙门药方》条文102条，但与现存石刻多数不符。我们从1994年起，对龙门药方进行了3年的研究，终于在敦煌卷子中发现了一些端倪。其中法藏编号P.3596和英藏编号S.3347引起了我们的兴趣。P.3596载方213条，与龙门药方完全相同或基本相似的竟有54条之多。在这种完全出于无奈的残卷对残碑的对照中，鲁鱼豕亥当属难免，而这么高的重叠在古籍是并不多见的。

同样，S.3347载方77条，与龙门药方完全相同或基本相似的有25条。龙门方与S.3347也有着同源关系。

这两份卷子与龙门药方明显地具有同源关系。而这两份卷子之间又是什么关系呢？答案是P.3596与S.3347也有同源的可能。他们也有40条条文相同或近似。

那么显然这两份卷子是一医书的不同抄本。至此，虽然可得出龙门药方与上述两卷子同源的结论。

经兰州大学王冀青 1991 年报告，在英国图书馆东方部发现了两块同属于 S.9987 号的残片与 S.3347、S.3395 在内容、纸质、书法、字体、格式、墨色等方面完全相同，同属于一件写本，即以上三种 S.3347、S.3395 和 S.9987 同为一个抄本。更令人振奋的是其中保存了该写本的标题《备急单验药方卷》，在 S.9987.FRONT 中也有 9 条与龙门药方相同类似的条文。

据此我们可以说龙门药方与《备急单验药方卷》同源。

Impact of Chinese Anatomy Illustrations on Japan

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Chinese Anatomy Illustrations discussed here refer to those depicted centering in the five ZANG-organs and six FU-organs of human body, which include illustrations of interior, inside, viscera, and five ZANG-organs and six FU-organs.

Anatomy of the human body started in 1754 in Japan. At that time, the anatomy illustrations spread in Japan were Chinese ones. Until the later period of the 17th century, with the introduction of western anatomy books, there appeared some doctors who doubted the inconsistency between western anatomy illustrations and viscera illustrations. By human dissection, western anatomy illustrations were judged positive. After that, human anatomy was developed gradually everywhere, so it was necessary for the painters to do the paintings on the spot. In addition, because the work of translating western medical books started and became popular, the attention to the Chinese viscera illustrations decreased sharply. However, people still showed the strong confidence in the meridian doctrine of acupuncture, the theory pertaining to five ZANG-organs and six FU-organs, Yin-Yang theory and five elements in traditional Chinese medicine, and matching theory of five ZANG-organs and six FU-organs.

In the viscera illustrations kept in Japan, the earliest one was Illustrations of Five ZANG-organs and Six FU-organs in Huangting Interior Classic drawn by Mr Hu of Tang (848). But the one we can see is that included in Collection of Prescriptions in Categories (Volume 5) of Xi Duo Cun Zhi Huo issued in 1862. It was not decided definitely when it was spread to Japan. Depending on the investigation of Du Bian Xing San, Illustrations of Five ZANG-organs and Six FU-organs in Huangting Interior Classic recorded in Collection of Prescriptions in Categories was the one spread which was nearest to the original one of Mr Hu in Tang. Additionally, there drawn five ZANG-organs illustrations in Illustrations of Five ZANG-organs and Six FU-organs in Huangting Interior Classic, which were the earliest in the world. It could be concluded from Hu's preface that five ZANG-organs illustrations reflected Taoism medicine. So these illustrations of five ZANG-organs and six FU-organs also showed their highest value as the most ancient classic of Taoism medicine.

In the extant viscera illustrations in Japan, the oldest was the one recorded in Dun Yi Chao of Wei Yuan Xing Quan, which was known by the name of O Xi Fan's Anatomy Illustrations. They were drawn by doctors and painters when 56 prisoners including O Xi Fan were executed in Yizhou in the 5th year during the Qing Li period (1045).

Dun Yi Chao (1302) was a complete book in medicine compiled by Wei Yuan Xing Quan in the later period of Lian Cang. O Xi Fan's Five ZANG-organs Illustrations were recorded in volume 44 with the title of Combination of Illustrations of Five ZANG-organs and Six FU-organs with Twelve Regular Channels, which were composed of nine illustrations and twelve meridian and vessels.

Its so called O Xi Fan's Five ZANG-organs Illustrations was because of the explanation of the first illustration in nine. It was written that Wu Jian, the officer of Yizhou, cut the bellies of 56 people captained by O Xi Fan open in two days and

observed five ZANG-organs and six FU-organs carefully, then found three holes beside throat. Gas was blown into the three holes and the holes were all venting. One hole was for food, another for gas, and the left one for those similar to water. The first illustration was accomplished when O Xi Fan was dissected.

In Chinese medical science history, the Song Dynasty was considered as a special era of positivism, in which several anatomy illustrations were produced. Besides O Xi Fan's Five ZANG-organs Illustrations, another representative anatomy illustration at that time was Cunzhen Huanzhong Illustrations of Yang Jie accomplished in Sizhou execution ground during the Chong Ning period (1102-1106). Based on above two anatomy illustrations, Interior and Exterior Illustrations and Hua Tuo Illustrations of Inside were spread to the later generations.

Among them, Cunzhen Huanzhong Illustrations were really spread to Japan. Monk Huan Yun recorded this point in Historical Records Commentary and clarified the earliest five ZANG-organs illustrations spread to Japan were Cunzhen Huanzhong Illustrations. In view of this, Huan Yun cited the following content. Yang Jie said when the prisoner O Xi Fan of Yizhou was executed, the bureaucracy Wu Jian ordered the painters to draw the viscera in detail. Wu Jian said that in two days, 56 people including O Xi Fan were cut bellies open and every body was observed carefully. There were 3 holes in throat, one of which was for food, another for water, the third for gas. He then ordered soldiers to blow into them and found that they were all not blocked up. This was coincident with the record in Dun Yi Chao of Wei Yuan Xing Quan. The first illustration of Combination of Illustrations of Five ZANG-organs and Six FU-organs with Twelve Regular Channels in volume 44 of Dun Yi Chao was indeed the O Xi Fan's Five ZANG-organs Illustrations in Cunzhen Huanzhong Illustrations seen by monk Huan Yun.

Huan Yun made a record in the Cunzhen Huanzhong Illustrations of Yang Jie that when the prisoner O Xi Fan of Yizhou was executed, the bureaucracy Wu Jian ordered the painters to draw the viscera and got their detail shapes. Depended on the later verification, the paintings were not finished. During the Chong Ning period, the prisoners in Sizhou were executed in the market. The county officer Li Yixing dispatched doctors and painters to look on, uncover the abdominal membrane, get rid of the grease, draw them by lines and get the complete appearances of the viscera. Yang Jie then got these paintings and revised them. This noted that O Xi Fan's Five ZANG-organs Illustrations were not finished, so when the prisoners were executed during the Chong Ning period, they were dissected again and observed by doctors and painters in order to draw illustrations of five ZANG-organs and six FU-organs in detail.

On the other hand, in the 3rd year during the Zheng He period (1113), Jia Weijie recorded in the preface of Cunzhen Huanzhong Illustrations that Mr Yang Jie watched the real five ZANG-organs and drew them into illustrations. He also got those drawn by Yan Luo Zi, cleared them up and revised them. He further made them better with twelve meridian and vessels and named them with Cunzhen Huanzhong. Cunzhen referred to the illustrations pertaining to five ZANG-organs and six FU-organs, while Huanzhong referred to those of twelve meridian and vessels.

The meaning of the title of Combination of Illustrations of Five ZANG-organs and Six FU-organs with Twelve Regular Channels in volume 44 of Dun Yi Chao was indeed same as that of Cunzhen Huanzhong Illustrations. So it could be deduced that eight

illustrations except first one in Dun Yi Chao were drawn by imitating Cunzhen Huanzhong Illustrations of Yang Jie.

Even in the Jiang Hu era of Japan, Dun Yi Chao was also kept transmitting. There are many kinds of editions in stock. Therefore, it is comprehensible that there exists variation in viscera illustrations caused by transmitting. In addition, in the earlier period of Jiang Hu, there appeared the single Body Illustrations composed of nine illustrations of five ZANG-organs and six FU-organs and 12 pages of meridian and vessels illustrations. It was the transcript of Combination of Illustrations of Five ZANG-organs and Six FU-organs with Twelve Regular Channels of Dun Yi Chao, which was not related to Dun Yi Chao and spread as the medical books of acupuncture doctors. Furthermore, there also had one page of O Xi Fan's Five ZANG-organs Illustrations spread with the title of Ancient Anatomy Illustrations (temporarily used). All of them were spread not considering Dun Yi Chao. In volume 44 of the transcript of Dun Yi Chao accomplished during the Jiang Hu period, only the title of Combination of Illustrations of Five ZANG-organs and Six FU-organs with Twelve Regular Channels was recorded, but viscera illustrations were omitted because they were not necessary. This indicated that in Japan evaluations on five ZANG-organs illustrations were different between in acupuncture and in traditional Chinese medicine.

In china, we also may find the record about O Xi Fan's Five ZANG-organs Illustrations and Cunzhen Huanzhong Illustrations of Yang Jie, but the paintings are lost at all. In Japan, they are kept with Illustrations of Five ZANG-organs and Six FU-organs in Huangting Interior Classic of Mr Hu, which transmits the appearance of ancient anatomy illustrations.

中国解剖图对日本的影响

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此处所论“中国解剖图”，是指以人体五脏六腑为中心描绘的解剖图，包括了内景图，内照图，脏腑图，五脏六腑图等。

日本进行人体解剖是在 1754 年，到那时为止在日本流传的解剖图还是中国解剖图。但是，17 世纪后叶，西洋解剖书的传入，出现了对西洋解剖图和脏腑图不一致抱有疑问的医师，开展人体解剖，西洋解剖图被判断为是实证的。以后，人体解剖在各地逐渐开展，画家必然到场制作解剖画卷。另外，随着西洋医书翻译工作的开始，流传，对中国脏腑图的关心出现急速地下降。但是，对针灸医学的经络学说，五脏六腑学说，在汉方（中国传统医学）的阴阳五行学说以及五脏六腑相配学说等的信赖依然高涨，没有动摇。

在日本现存脏腑图的里面，最早年代完成的是唐代的胡*完成的“黄庭内景五脏六腑图”（848）。但是，现在可以看到的“黄庭内景五脏六腑图”是被 1862 年发行的喜多村直活的“医方类聚”（卷 5）一书收录的图。因而，它是什么时候传到日本的，还没有确切的定论。据渡边幸三研究，“医方类聚”中的“黄庭内景五脏六腑图”是和唐代胡*的脏腑图原图最为接近的形式流传下来的。另外，胡*的“黄庭内景五脏六腑图”中绘有五脏图，它是世界最早的五脏图。从胡的自序可以知道五脏图属于道

教医学。所以，这个五脏六腑图作为道教医学的最古的古典也有很高的价值。

在日本现存的脏腑图中，最古的是梶原性全的“顿医抄”中记载的，也就是被通称为“欧希范解剖图”的图。“欧希范解剖图”是庆历5年（1045年）犯人欧希范等56人在宜州被处死时，由医师和画师参加完成的五脏图。

“顿医抄”（1302）是镰仓末期梶原性全完成的医学全书，“欧希范五脏图”是“顿医抄”的第44卷以“五脏六腑形并十二经脉图”为题记载，由九图和十二系脉构成。

这个脏腑图之所以被称为“欧希范脏腑图”，是因为在九图的第一图的说明中，有“宜州的州官吴简，在两天之内，将以欧希范为首的56人，剖腹，仔细观察五脏六腑，发现喉咙旁边有三个孔。对这三孔吹气，都可通气而不堵塞。一孔为食，一孔为气，一孔为类似于水的孔”这样的记载，其中的第一图是解剖欧希范的时候完成的。

宋代，在中国医学史上，被认为是特殊的实证主义的时代，产生了几何解剖图。当时完成的有代表性的解剖图，除了“欧希范五脏图”外，还有崇宁年间（1102-1106），在泗州刑场处决当时完成的杨介的“存真环中图”。根据以上两个解剖图为基础，朱肱完成的“内外二景图”和“华佗内照图”被流传了下来。

其中，确实流传到日本的是“存真环中图”。对此，僧幻云在“史记评注”中有记载，明确了传到日本最早的五脏图是“存真环中图”。幻云对此，引用了“杨介曰。宜賊欧希範被刑時。州吏吳簡。令画工就囟之以記。詳得其狀。吳簡云。凡二日剖欧希範等五十有六腹。皆詳視之。喉中有竅三。一食。一水。一氣。互令人吹之。各不相戾。…”一文。这和梶原性全的“顿医抄”的记录基本一致。“顿医抄”第44卷的“五脏六腑形并十二经脉图”的第一图确实是僧幻云见到的“存真环中图”的“欧希范五脏图”。

幻云在杨介的“存真环中图”有这样的记载：“宜賊欧希範被刑時。州吏吳簡。令画工就囟之以記。詳得其狀。或以所考之。則未完。崇寧中。泗州刑賊於市。郡守李夷行。遣医併画工往觀。決膜摘膏。曲折囟之。得尽纖悉。介取以校之。…”注明了由于欧希范五脏图没有完成，崇宁年间在处决犯人的时候，再次解剖，让医师画师观察，详细描绘五脏六腑图。

另一方面，政和三年（1113），贾伟节在“存真环中图”“序”中，有“楊君介吉老。以所見五藏之真。繪而爲囟。取煙羅子所画。條折而釐正之。又益之十二經。以存真環中名之”的记载。“存真”是五脏六腑图，“环中”是十二经脉图。

“顿医抄”卷44的“五脏六腑形并十二经脉图”的图题和“存真环中图”确实意思相同。因此，“顿医抄”的第二图以后的8图，可以推论为是模仿杨介的“存真环中图”而完成的作品。

“顿医抄”即使到了日本的江户时代，也还被转抄，现存多种版本。因此，由于传本而出现的脏腑图的变动差异，也可以理解。另外，在江户初期，出现了只有五脏六腑图 9 图和经脉图 12 页构成的独立的“身体图”。那是“顿医抄”的“五脏六腑形并十二经脉图”的抄本，和“顿医抄”无关，以针灸医的医书流传。另外，还有“欧希范五脏图”1 页以“古代解剖图”（暂用题目）流传的。都和“顿医抄”无关地流传。一方面，江户时代完成的“顿医抄”的抄本，第 44 卷只记载了“五脏六腑形并十二经脉图”的题目，脏腑图等因为没有必要而被省略。这是在日本对针灸和汉方（中国传统医学）的五脏图的不同评价的表示。

在中国，有关“欧希范五脏图”，杨介的“存真环中图”的一些记载都还可以见到，但是，图已经失传了。在日本，它们和胡*的“黄庭内景五脏六腑图”同时存在，传播着以往解剖图的模样。

**Medicine, Religion, or Martial Art? – Qing Illustrations of Shaolin Hand
Combat (Shaolin Quan).**

医学、宗教、还是武术？—清代少林拳图释

Meir Shahar (Xia Weiming)

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The late-Ming and early-Qing were a pivotal period in the history of Chinese unarmed fighting. 明末清初是中国非武装战斗的关键时期。 The foundations of the now world-famous techniques of Shaolin Quan, Taiji Quan, and Xingyi Quan were laid during the seventeenth century by the integration of Ming techniques of empty-handed combat with the ancient *daoyin* calisthenic tradition, which had largely evolved in a Daoist context. 十七世纪期间，明代空手打斗的技术结合了道家经文中大量记载的古代“导引术”体力锻炼传统。这就是现在已闻名世界的少林拳、太极拳和形意（心意）拳形成的基础。

The resulting synthesis of fighting, healing, and religious self-cultivation has arguably been the source of the martial arts' appeal in their native land and the modern West alike. 这导致融战斗、治病和宗教修炼于一体，并发展成为不仅风靡该国乃至现代西方亦向往的武术根源，不过尚需进一步证明。

The late-Ming unarmed martial arts were not developed for fighting only. 晚明时期非武装格斗技术的发展，不只是为了战斗。 In real battle empty-handed techniques were no match for weaponry. (Shaolin monks, for example, had been practicing armed fighting techniques long before they turned their attention to *quan* (hand combat) in the sixteenth century). 在实际的战斗中，空手格斗技术与使用武器的优势无法比拟（例如少林和尚远在他们转向专注练拳（即徒手格斗）的十六世纪之前是用武器操练的）。

Rather, the late-Ming and early-Qing empty-handed styles were self-consciously intended, in addition to fighting, for the prevention and cure of disease as well as for spiritual perfection. 在晚明和清初赤手空拳的操练方式不仅是为了战斗，更准确地说，是自觉地为了防病治病和精神修炼。

In this respect the very term “martial” is misleading. 关于这点，格斗技术（或称武术）的英文，冠上（MARTIAL “军事”）一词是误导。

Late-imperial hand combat is a self-conscious system of mental and physical self cultivation that has diverse applications of which fighting is but one. 帝国晚期赤手空拳的打斗是一种自发的修身养性体系，战斗不过是一种例外的应用。

In this paper I will try to demonstrate the late-imperial synthesis of fighting, healing, and religious self-cultivation by examples drawn from Shaolin hand combat. 在本文中我姑且举出少林拳打斗的图画作例子来证明帝国晚期将战斗、治病和宗教的自我修炼融为一体的事实。The illustrations I will examine derive from three Qing manuals of Shaolin fighting:我研究的 这些插图来源于三本清代少林战斗手册的插图：

- 1) Hand Combat Classic, Hand-Combat Method Collection (Quan jing; Quan fa beiyao) (preface dated 1784 by Cao Huandou);
- 2) Xuanji's Secret Transmission of Acupuncture Points' Hand-Combat Formulas (Xuanji mi shou xuedao quan jue), (undated preface by Zhang Ming'e). (These two manuals probably derive from one earlier text that was likely authored in the seventeenth century); and
- 3) Illustrated Exposition of Internal Techniques (Neigong tushuo) (preface dated 1882 by Wang Zuyuan). Time permitting, I will also show a brief excerpt (which takes place at the Shaolin Temple) from the kungfu movie “Taiji Zhang Sanfeng”, featuring the great martial artist Li Lianjie (Jet Li) (b. 1963).

Qing illustrations of Shaolin hand combat attest the deep influence of *daoyin* gymnastics on the late-imperial martial arts. 清代少林空手格斗的插图证明导引术体操对帝国晚期的武术有很深影响。

Beginning in the sixteenth century, the ancient techniques of breathing and *qi*-circulation became an integral element of martial training. 始于 16 世纪，古代的呼吸技巧和“运气”融入军事操练成为一个要素。

Successful martial artists were believed to be those who could muster their internal energy and channel it to the proper action. 据信有成就的武术师都能凝聚其体内的能量成为运行自如的动作。

The ability to deliver – and withstand – blows was attributed to the concentration of *qi*. 出手拳击和反击的能力皆由凝聚的“气”所致。

Martial artists who smashed stones, for example, were said to have directed their *qi* into their palms. 武术师之所以能够粉碎石头据说便是把“气”运到了手掌上。The ubiquity of the terms “*qi*-cultivation” 练气(*lianqi*), “internal strength” 内力(*neili*), and “internal techniques” 内功 (*neigong*) is testimony to the centrality of breathing, meditation, and energy circulation in the late-imperial martial arts. 在帝国晚期武术中广为流传的词汇如练气、内力、内功便是集中了呼吸、打坐和能量循环的明证。

Daoyin gymnastics had largely evolved within a Daoist context and they served as a vehicle for the religion’s influence on the martial arts. 导引术体操在道家的经文中大量引用而成为宗教影响武术的载体。

Even though Shaolin is a Buddhist Temple, beginning in the late-Ming its monks were practicing gymnastic techniques that can be traced to Daoist sources. 尽管少林寺为佛教寺庙，从晚明开始寺庙的和尚都实行来源于道教的操练。

An examination of Shaolin manuals reveal that alongside Buddhist influences – certain fighting postures had been fashioned after the iconography of Buddhist deities – they draw heavily on Daoist sources.

从少林手册看出在佛教影响的同时，某些打斗的姿势虽然用佛教菩萨像装饰，但却主要以道教为范本。

Some Shaolin illustrations derive from Daoist manuals of self-cultivation. During the Qing period, Buddhist monks at the Shaolin Temple were practicing gymnastic methods that had been recorded in Daoist scriptures, that had evolved in Daoist circles, and that had been attributed to Daoist immortals. 有些少林拳的插图来源于道教手册的修炼图。在清代，佛教的少林寺和尚进行操练都按照道教经文记载的方法，这是由于道教的长久流传在道教圈内这些方法不断发展所致。

Daoyin was not the only source on which late-imperial martial artists drew. 导引术并非晚期帝国的武术师吸取的唯一源泉。 An examination of Shaolin manual reveal their indebtedness to traditional Chinese medicine. 从少林手册可以看出它们还得益于中国的医学。 In many manuals the goal of toning the body for battle is indistinguishable from the medical objective of preventing illness. 在许多手册中锻炼身体的目的是为了战斗还是为防病，无法区分。 The Sinews-Transformation Classic (Yijin jing) (which had been authored outside the temple, most likely in 1624) outlines a method of hardening the body that is supposed to be equally effective against martial adversaries and disease. (很可能在 1624 年这些手册是由寺外的人编写) 锻炼身体的提纲似乎想要既能御敌又能祛病。 By a combination of *qi*-circulation, massage, and self-pounding the practitioner is expected to gain “internal robustness” (*neizhuang* 内壮) that would eliminate all illness. 结合运气、按摩，自我叩击锻炼的方法，可以使人获得内壮而清除一切病症。 Indeed, the seventeenth century witnessed the appearance of the martial artist cum physician. 的确，17 世纪目睹了武术师兼医生的出现。 He who could take the body apart could presumably put it back together. 能使躯体离开的人，大概也能使躯体回归聚合。 The integration of medical theory into martial practice is attested, for example, by the significance of acupuncture points (*xuedao* 穴道) in illustrations of hand combat. 将医学理论纳入武术操练获得证明的例子为徒手格斗的插图标注了针灸的穴位（穴道）。 Late imperial martial artists held that those points that were responsive to treatment were equally susceptible to injury. 晚期帝国的武术师坚持认为对治疗有反应的穴位也容易受到损害。 Accomplished martial artists targeted their adversaries’ acupuncture points. 故功夫深的武术师都对准敌手的穴位。

In their attempt to transform the martial arts into comprehensive systems of thought, late imperial martial artists drew also on the classics of Chinese philosophy that articulated the culture’s traditional worldview. 为了把武术纳入无所不包的思想系统，帝国晚期的武术师也从形成文化传统世界观的中国哲学经典中吸取养料。

Terms such as the “Supreme Ultimate” (Taiji) figure in late-imperial fighting techniques in which the practitioner reenacts the process of cosmic differentiation from the primordial unity through the interplay of the Yin, Yang and the Eight Trigrams (Bagua) to the myriad phenomena – only to reverse the course of universal history thereby achieving mystical union with the Supreme Ultimate (Taiji). 在帝国晚期打斗技术的太极图中武功操练者重新制定了宇宙的分化，从原始混沌到气象万千都是阴阳八卦的交互作用（这只不过是宇宙历史进程的反面）由此成为神秘色彩的太极一统天下。

The term “Supreme Ultimate” figures not only in Taji Quan – which had been consciously named after the cosmology – but also in Shaolin Quan. The two unarmed fighting techniques were created during the same period (the seventeenth century) within the same geographical region (northern Henan). It should not come as a surprise, therefore, that they share common traits. 太极图这个术语不仅见于有意识地根据这种宇宙理论命名的太极拳，也见于少林拳。这两种徒手打斗的技术均在同一时期（17世纪）和同一地区（河南北部）创建。因此他们具有共同的特征就不足为奇。

Why did the late-Ming witness the emergence of a synthesis of fighting, healing, and religious self-cultivation? 为什么在晚明时期可见到打斗、治病和宗教修炼融合？ Can we associate the appearance of novel fighting techniques with economic, cultural, or religious developments? 我们能否将此新型的打斗技术用经济、文化或者宗教发展联系？ The late-Ming was, of course, a period of remarkable creativity in all areas of Chinese economy and culture: 固然在晚明时期中国各地都有明显的创造力。 From the growth of domestic and international commerce to the development of the publishing industry; from the spread of women’s education to the maturation of new forms of fiction and drama. 从本地商业、国际商业的成长到印刷工业的发展，从妇女教育的扩大到新形式的小说和戏剧的成熟。 The appearance of such new bare-handed styles as Shaolin Quan and Taiji Quan could be taken as yet another example of the vibrancy of late-Ming society. 此种新形式的徒手的少林拳和太极拳的出现可以看作是晚明时期社会震荡

的另一例证。More specifically, however, the synthesis of fighting, healing, and spiritual self cultivation might have been related to the age's religious syncretism. 不过更具体说，打斗、治病和修身养性融于一体 是与那个时代宗教的整合有关系。The late-Ming witnessed an unprecedented degree of tolerance and mutual-borrowings between Confucianism, Buddhism, and Daoism. 晚明时期目睹了儒教、佛教和道教史无前例地深层次的互相包容和借鉴。An examination of martial-art manuals reveal that they had been informed by the age's slogan: "The three religions unite into one" (Sanjiao heyi). 从武术手册可以查到当时的口号是“三教合一” A climate of religious openness might have permitted the Shaolin Buddhist monks to practice Daoist techniques of self-cultivation just as it encouraged Daoists to investigate the Shaolin military tradition. 此种宗教开放的气候也可能容许佛教的少林寺和尚操练采取道教的修身养性技术，正如促使道教去探索少林的武术传统。Syncretism might have provided, therefore, an intellectual foundation for the late-Ming evolution of empty-handed fighting. 也许此种整合的气氛 因此给晚明时期空手打斗的发展提供了理智的基础。

To the degree that late-imperial fighting techniques self-consciously express philosophical tenets, their articulation belongs to the history of ideas. Even though the agent of the martial arts is the body, their evolution is in this respect the domain of intellectual history. 帝国晚期打斗技术自觉表达哲学原则的程度清楚表明是从属于历史潮流的观念。即使武术是主体，它们在这方面的发展却是理智的历史潮流所主宰的。

General Review on Diagrams and Pictures in History of Traditional Korean Medicine

传统朝鲜医学史中的图解和插图总评述

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I analyze diagrams and pictures in traditional Korean medicine (TKM) during Choson dynasty (1392-1910) in this paper. How many kinds of diagrams and pictures did it have? Where did they originate? What was their purpose? In my research I identify the specific features of the Korean diagrams and pictures within the East Asian medical tradition.

在本文中我分析了朝鲜王朝（1392-1910）传统朝鲜医学（TKM）中的图解和插图。图解和插图的种类有多少？它们出自哪里？其目的何在？在本人的研究中我确定了在东亚医学的领域内朝鲜图解和插图的特征。

My primary resources for this study are three medical books, Ui'bang'ryuchui (醫方類聚, 1477), Dong'ui'bo'gam (東醫寶鑑, 1613), and Chijong'ji'nam (治腫指南, the fifteenth century), and one acu-moxibustion bronze statue (鍼灸銅人) in Deoksu palace (德壽宮). Other traditional Korean medical books from this period do not contain many diagrams or pictures. In addition, they quoted from famous Chinese medical books without any modifications. Four Chinese books, Hua Shou (滑壽)'s Shi Si Jing Fa Hui (十四經發揮, 1341), Lou Ying (樓英, 1332-1402)'s Yi Xue Gang Mu (醫學綱目), Li Chan (李梴)'s Yi Xue Ru Men (醫學入門, 1575), had great influence on diagrams and pictures of TKM, since these books were required reading for anyone aspiring to a medical career during the Choson dynasty.

我研究的基本资料来源包括三本医学书：《医方类聚》（1477）《东医宝鉴》（1613），《治肿指南》（15世纪）和一本“德寿宫”的针灸书《针灸铜人》。此后朝鲜的传统医学书籍就未再有图解和插图。而且，引自中国著名医书者，都原原本本未加修改。四本中国的书为：滑寿的《十四经发挥》1341），楼英（1332-1402）的《医学纲目》，李参的《医学入门》（1575）对传统朝鲜医学的图解和插图均有很大影响，因为这些书对朝鲜王朝时代立志于医学事业的人都是必读的书。

Ui'bang'ryuchui (醫方類聚), the earliest one (1477) whose diagrams and pictures later appeared in Korean medical books, has the greatest number of medical diagrams and pictures. It contains diagrams of the five organs [五臟], (liver, heart, spleen, lungs, kidneys) and the gall bladder; the regular meridians; two pictures of palpation and six pictures of acupoints related to Shanghan (傷寒) disease; diagrams of 'five orbiculus' and 'eight regions of the white of the eye'; 21 pictures of swellings, three pictures of the head; three pictures of 'Qi Zhu Ma (騎竹馬)' moxibustion; eight pictures of physio-breathing exercises. All of these pictures originally appeared in Chinese medical textbooks from the Tang Dynasty to the early Ming Dynasty. The most valuable of these diagrams are those of the five organs and the gall bladder. They were copied from Hu Yin's Zang Liu Fu Tu (Diagrams of Five Zang-organs and Six Fu-organs), a ninth-century Daoistic

medical book that was subsequently lost, and show the features of early Daoistic ideas of anatomy.

最早的一本书《医方类聚》（1477）其图解和插图都在后来的传统朝鲜医书中出现，此书的图解和插图数量最多，包括五脏（心、肝、脾、肺、肾）和胆囊。合乎规律的经络子午线，两幅扞诊图，5幅与伤寒病有关的针灸穴位图，5 orbiculus 和眼白 8 个区域图解。21 幅肿块，3 幅头，3 幅“骑竹马”，8 幅生理呼吸图。所有这些图片最早都见于从唐代到明代的中国医学教科书。最有价值的是五脏和胆囊的图解。它们复制于 HU YIN 的《五脏六腑图》。这是一本 5 世纪道家的医学书，以后散失，可以窥见早期道家对解剖学的观点。

Huh Jun (許浚)'s Dong'ui'bo'gam (東醫寶鑑), the most famous book in TKM, has diagrams of viscera and of the five organs. Although his diagrams were copied from Chinese medical books, Yi Xue Gang Mu (醫學綱目) and Yi Xue Ru Men (醫學入門), they are somewhat different from the originals, in that they reflect a stronger Daoistic influence. In the case of diagram of viscera of Dong'ui'bo'gam(東醫寶鑑), Huh Jun (許浚) paid attention to the creation and circulation of three vital body elements (Jing(精), Qi(氣), and Shen(神)), emphasizing the three entrances [三關] in the backbone as pathways of Qi (氣). Moreover, following the Daoistic teaching, “a wise man has seven holes in his heart,” he drew seven holes in the diagram of heartholes that were conspicuously absent from other Chinese diagrams of the heart. These features reflected Huh Jun's attitude to life and medicine: “Daoists got the heart of life, but medicine got only minor details.”

许浚的《东医宝鉴》一书在朝鲜传统医学中最有名，有内脏和五个器官的图解。虽然它们都从中国医书《医学纲目》和《医学入门》抄袭而来但略有不同，更富于道家色彩。在许浚的《东医宝鉴》中更加注意称为三关的三个生命要素：精、气、神，他们是气的通路支柱。他根据道家教义：“心有七窍”，在心脏图上画了七个洞，这是中国其他医书上没有的。许浚的看法反映了他的道家观点“道教具有生命的核心，医学仅具有支微末节”。

A bronze statue of acu-moxibustion [鍼灸銅人] in Seoul's Dukso Palace shows the highlight of diagrams of fourteenth meridians in Korea. This bronze statue, assumed to have been made in Korea, is different from any Chinese ones. This bronze statue is highly estimated by some scholars, in that, unlike any Chinese bronze statues, it correctly positioned the three acu-points, (Yin Men (殷門), Fu Que (浮郤), and Wei Yang(委陽)).

汉城“德寿宫”《针灸铜人》一书中的铜人图解显示了朝鲜的十四条经络，这个铜人可能是在朝鲜建造故与中国的铜人不同。有些学者对此铜人的评价甚高，它正确地标识了三个穴位：殷门、浮口、委阳的位置，这和中国铜人不一样。

The mid-sixteenth century Chijong'ji'nam (治腫指南), in which Im Eon'kuk (任彦國) and his students described swellings, contains 33 pictures. These pictures show not only the invasive surgical method into the narrow disease category (i.e. carbuncle and furuncle, cellulites, erysipelas, and gravitation abscess), but also extended the surgical method to 'non-external' but 'looks-like swelling' diseases,

such as pleurisy, tympanitis, testicular swelling, and sequestrum of osteomyelitis. These surgical methods had not been practiced in East Asian medicine.

十六世纪任彦国和他的学生在《治肿指南》一书中描述了带有 33 幅图画的肿块。不仅介绍了用侵入性（穿刺引流？）外科方法治疗这些肿块（即痈、疽、蜂窝组织炎，丹毒，引力性脓肿）而且将外科的方法扩大到与肿块相似的非外部疾病，如胸膜炎、腹胀、睾丸肿大、骨髓炎导致的死骨。在东亚医学中未采用过这些外科方法。

TKM did not have any native systematic herbal books with pictures of plants, animals, and minerals. Even the 85 great volumes of Hyang'yak'jipseongbang (乡药集成方, 1433), the definitive medical book on locally produced drugs in Korea, do not contain any pictures of drugs. For pictures of herbs, TKM relied completely upon Chinese herbal books, especially upon a revised and enlarged edition in early Ming period of Da Gwan Ben Cao (大观本草) which showed several publications during the Choson dynasty.

在朝鲜传统医学中没有系统的草药书籍记载当地的植物图、动物图和矿物图的。即使 85 大卷的《乡药集成方》(1433)确实是记载朝鲜当地生产药物的医学书籍也没有任何药物的图画。传统朝鲜医学的草药图都完全依靠中国的草药书，特别是增订极多的明朝初期的《大观本草》一书，在朝鲜王朝年代多次出版。

Diagrams and pictures of TKM reveal three important features of TKM. First, nearly all types of essential diagrams and pictures of East Asian medicine were also found in TKM, because TKM had shared the tradition of East Asian medicine to which traditional Chinese medicine (TCM) had made a great contribution. Second, diagrams and pictures of TKM are less varied than the ones in TCM. This reflects a weakness of TKM's anatomical and physiological research. Third, Korean doctors, sought effective new treatments in the less well-established disciplines of external medicine and surgery. Finally, TKM, influenced by Dong'ui'bo'gam(东医宝鉴), emphasized nurturing of the living body, rather than studying the anatomy of corpses. Practitioners of TKM had not drawn any anatomical diagrams of the dead bodies before the introduction of Western medicine in the early twentieth century.

传统朝鲜医学书的图解和插图有三大特征:1 所有东亚医学最主要的各种图解和插图均在传统朝鲜医学图书中可以见到。因为传统朝鲜医学和东亚医学共有一个传统，此传统以中国医学贡献最大；2 传统朝鲜医学的图解和插图的多样性逊于中国传统医学的图解和插图。反映出传统朝鲜医学在解剖和生理方面的研究较弱；3 朝鲜医生在寻求新的外部和外科治疗方法方面，建立的规范不够成熟；4 最后，传统朝鲜医学受《东医宝鉴》一书的影响，注重对活体的研究而忽视以解剖尸体研究解剖学。传统朝鲜医学的医生在以前从未绘制过死尸的解剖图，直到 20 世纪初期西方医学传入后情况才有改变。

2005 年 8 月 1 日译完

Animal illustrations from Guo Pu 郭璞 to Li Shizhen.

从郭璞到李时珍的动物插图

Roel Sterckx, Cambridge 剑桥

Incorporated in received editions of Li Shizhen's (1518-93) *Bencao gangmu* is a set of illustrations accompanying his descriptions of *materia medica*. Although evidence remains scarce, references to the use of illustrations to accompany nomenclature can be traced back to pre-imperial, early imperial and early medieval times.

现有所谓李时珍（1518-93）的《本草纲目》的各种版本中都在对“药物”描述时加入了插图。引证这些药名插图的用途可以追溯到前帝国时期，帝国时期早期和中世纪早期，不过证据很少。

Their function however was varied and ranged from substituting textual representation to illustrating a textual narrative, to autonomous representation. Through a selection of examples I will propose to examine two distinctive uses of illustration. First the use of images as iconic or talismanic mediums that take on autonomous meaning. Second the use of images as illustration, that is, as a commentarial accompaniment to an existing text or, possibly, a cycle of orally transmitted narratives. I will start in early China to end with Li Shizhen.

然而它们的功能不一，从代替文字描述到用绘图作为文字叙述的注释，乃至成为有独自含义的图标。我选出几个例子研究了它们绝然不同的两种用途：一是作为有独自含义的一种图标神符或者吉祥物。二是作为图注，即作为已有文字附加的注释或者有可能作为口传解说的一环。我从古代中国开始到李时珍为止

In addition to references to the use of pictorial representations of strange creatures to ward off illness or demonic possession, early Chinese ritual and medical texts record procedures in which officiants, patients, or healers are invited to draw images or copy representations in reality or through bodily gesture. Representing a demon, creature or pathogen through image was a means of exerting control over the forces it represented. Other sources suggest that illustrations were used in combination with a magical formula, incantation or spell (often depicted on it). Here a curious interplay of visual and aural interpretation occurred in which texts become image, and images become text.

除了据说用怪兽的图标来祛病驱邪外，中国古代宗教和医学还记载了请巫师、病人、术士来画图、临摹实物或者躯体姿势这样的内容。通过绘出致病的妖魔鬼怪和臆造生物图像的手段便可以达到制服它们。有些其他来源的插图可能是与符咒一同使用（常在图上画有符咒）。这里有个奇特的用视觉和听觉作诠释的交互作用，图像可以变成文字解释，文字解释也可以变成图像。

Li Shizhen operated as much in the moral realm of *ge wu* 格物 (“the investigation of things”) as in an atmosphere of naturalist inquiry. I hope to address the following issues. If the rectification of names underlay the preoccupation with nomenclature, in what ways then can the use of illustrations serve his purpose? The visual image requires a totally different hermeneutic: without textual or pictorial precedent, how does an image claim authority beyond the moment and

occasion for which it was crafted. The information conveyed in a picture is necessarily different from and partly detached from its textual equivalent. Certain categories of knowledge, e.g. whether or not a creature is edible or useful as medicine, are not represented in picture. Likewise whereas a hermeneutics focusing on nomenclature relies on a Confucian tradition of textual hermeneutics, the creation of an image does not always build on antecedent models as authoritative example. Where, therefore, ought we to search for the value of a drawing if a) it does not convey meaning imbedded in an accompanying text and b) if it is unable to address values such as sensory perception expressed in the recipes. Finally, how is the user of a pharmacopoeia expected to relate illustrations to his or her own construction of biological reality?

李时珍在格物和探索大自然方面所投入的精力同样多。我打算从以下两个题目予以探讨。如果需要正名，在哪方面能够用插图达到此目的？视觉图像需要从完全不同的诠释方法进行解释：没有文字和图画的先例可依循，臆造的图像怎样能够宣称它们可以超越所产生的那个瞬间或者时刻？图画所能表达的信息必然不同于和部分脱离它相对应的文字解释。某些方面的知识在图画中是无法标识出来的，例如臆造的生物是否可以食用和医用。同样，虽然对名称的解释方法是按照对文字解释的儒家传统进行，而臆造的图画则不全是根据有权威性的先例或模型。因此，一，如果不能表达从其所衍生文字解释的含义，二，如果它不能像处方表示的价值那样一目了然，我们何必一定要从画图中去搜索它的价值呢？最后，又怎能期望药典的使用者将其个人的具体情况与这些插图相联系呢？

**A Tibetan Image of Medical Divination: some contextualising remarks
Ronit Yoeli-Tlalim (Warburg Institute, University of London)**

一幅西藏的藏医占卜图：某些诠释

作者 Ronit Yoeli-Tlalim

This paper will focus on a Tibetan image of medical divination found in the Wellcome Medphoto collection (image number L0035124), illustrating the close association between divination and medicine as taught and practised in the Tibetan medical tradition. This paper will link the visual imagery with some of the theoretical considerations and practical applications as they are found within the context of Tibetan medicine. Some of these will then be compared to ideas found in other medical systems.

本文重点讨论西藏的藏医占卜图（收藏于WELLCOME博物馆医学图片收藏部，编号为：L0035124）表明在藏医传统的教学和医疗实践中占卜与医疗有密切的关系。本文就此图画联系藏医的某些理论和实际应用方面进行阐述。然后与其它医学系统的观点作一些比较。

The central figure of this image is of a large tortoise, with a magical square of three (sMe ba dgu). Surrounding it are the eight trigrams (sPar kha brgyad). The tortoise depiction in the context of divination is derived from the Chinese mediaeval association of a magical square with the shell of a sacred turtle. The tortoise is not known in Tibet and the name for a tortoise as depicted in these drawings (rus sbal) signifies a frog of bones (rus=bones; sbal=frog). According to Chinese legend, a sacred turtle with a magical square on its shell appeared to the mythical King Yü from the waters of the Lo river at the time of taming the floods.² From medieval times, it was called Lo Shu, or: “Document of the Lo River”, and was generally represented by a pseudo-archaic arrangement of black and white knots or beads on short string of cord.

图画的中央是一只大龟，具有三行的魔方(sMe ba dgu)。周围是一个八卦(sPar kha brgyad)。对龟绘制作占卜方面的用途衍生于中国中世纪的一个神龟龟甲上的魔方。龟在西藏不为人所知，故将绘制的龟称作“骨蛙”(rus sbal) (rus=bones; sbal=frog)。按照中国神话传说，禹王治洪水时洛河的一只神龟从水中爬出，出现在禹王面前，龟甲上有魔方。从中世纪起称为洛书，意为“洛河之文件”。一般用一根短绳上黑白相间的结或者小珠表示。

Uses of magical squares for divination (‘Nine Halls’) was recorded in China already in the second century by the late Han mathematician Chang Heng. The use of these in divination seems to have been taken out of use in China, but was later taken up by the Tibetans and Mongolians.

² ¹ The tortoise episode is also associated with Huang Ti, the Yellow Emperor in some Taoist writings. Cammann Schuyler, “The Evolution of Magic Squares in China.” *Journal of the American Oriental Society*, Vol. 80, No. 2 (Apr.-June 1960). p. 118 注解1 根据道家的记载龟卜也与黄帝有关系。

魔方用作占卜（亦称“九宫”）二世纪的中国汉代已故数学家张衡对此即有记载。此种占卜似乎在中国已不存在，但以后在西藏人和蒙古人中仍在沿用。

Similar Tibetan depictions of this image, incorporating the tortoise, the magical square, the eight trigrams and the twelve animal signs and the seven (or eight) planet signs, became very popular in the image of the Srid-pa-ho. Images of srid-pa-ho became very popular in Tibet by the 17th century, and are still very popular amongst Tibetan communities, either hung in Tibetan homes or used as amulets. 同样，西藏绘制的图画也包括了龟、魔方、八卦和十二生肖及七个或八个行星，此种 srid-pa-ho 的图画很盛行。Srid-pa-ho 的图画 17 世纪便在西藏社会群体中广为流传，西藏人将其悬挂在家中或作为吉祥物佩带。

Charts such this one have been used in association with a number of medical - divination practices within the context of Tibetan medicine. The favourable and unfavourable consequences of some medical actions, are said to be determined by the position of the magical square, the trigrams and year cycle in relation to the time when the action is performed.

在藏医中此种图画和其他许多医疗占卜的东西一并使用。治疗效果的好坏据说取决于施行医术时魔方和八卦的位置，以及年辰的季节

One of these practices, for example is urine divination, in which a sample of urine is used in order to detect the presence of negative spirits. When conducting a urine divination, a fresh sample of urine is placed in a shallow round container. A tortoise divination chart is place on top of the container, after which changes of the urine specimen are observed in the different nine sections which correspond to the sections of the magical square. According to the changes of urine the doctor may identify which type of negative spirit is affecting the patient and which ritual needs to be performed.

其中的一个例子是用小便占卜有无“阴灵”存在，取新鲜的小便放在一个浅圆盘内，上面覆盖龟卜图画，观察小便在与魔方九宫对应的九个格子中的变化情况，医师可判断何种“阴灵”对病人作祟，需要采取什么正确措施。

A Tentative Study on Chinese Erotic Art in Relationship with Chinese Art of the Bedchamber

Sumiyo Umekawa

This paper attempts to examine the relationship between Chinese Erotic Art, often known as *chungonghua* 春宮畫 and Chinese Art of the Bedchamber, generally known as *fangzhongshu* 房中術. Their relationship or influences especially from sexual art onto the pictorial art seem to have been recognized and discussed especially since the publication of van Gulik's *Chinese Erotic Art of the Ming Dynasty*. For instance, *Miyitu Dagan* 秘戲圖大觀 (Spectacles of Drawings for Secret Plays) inspired by van Gulik's work was published in Taiwan, and it offers us great amounts of suggestions how the sexual art might have influenced on the pictorial art. Most of researches concerning this matter, however, seem to have been explored mainly by art historians or someone those who know about the art. Thus, their points tend to focus on how erotic drawings reflect the ideas of the traditional sexual art or how ideology of the sexual art might have influenced on pictorial works. Then, for me who have been interested in the art of the bedchamber, the questions are 1) if there was any benefit for the practical art to associate with pictorial art, 2) if there was, then, how the sexual art gained benefit from the association with the fine arts, and 3) why or for what purposes they needed to cooperate, despite that the sexual art must have been rather cryptic techniques.

Speaking of technical aspects of the sexual art, most of the erotic art, being a pictorial medium, depict sexual positioning rather than other practical techniques, like how one restrains from ejaculation or how one obtains *qi* 氣 from a woman. Thus, this paper starts with a survey on what sexual positioning means to the sexual art, what role it has in a series of sexual techniques or for what purposes it is used.

Following to that, I would like to make a tentative clarification of Chinese erotic art, in a brief comparison with Japanese erotic art. For this, recent work by Professor Liu Dalin, *fushi yu chunmmeng* 浮世与春夢 (The Flouting World and Spring Dreams), would be taken into account. Chinese erotic art have been pointed out by some scholars that many of them might have been in a stream of *shanshuihua* 山水畫 (drawings of mountains and water), which is to depict the harmonization of *yin* and *yang*. In contrast to Japanese with extreme exaggerations on sexual organs, Chinese are often claimed, for instance with Nakano Miyoko's words, the erotic pictures with "non existence of physical body 肉体不在". Yet, more variations and varieties of sexual positioning that Chinese erotic pictures offer in comparison with Japanese, would indicate "physical body" does exist in the Chinese pictorial art with certain importance. Moreover, it would also suggest that treatments of "physical body" in the drawings are different between Chinese and Japanese, simply because of their focus or purpose of drawing are different. Chinese erotic art would address its focus on the sexual positioning, while Japanese would do on sexual pleasure; that is to say, Chinese

erotic art might have been a symbolism of the unity of *yin* and *yang*, at the same time, the guide for sexual positioning for people, possibly in terms of the art of the bedchamber.

Considering the erotic art depicting sexual positioning in relationship with the practical art, one may instantly think about van Gulik's *Huaying qinrong* 花營錦榮 (Flower Barracks of Flourishing Glory). Although there are claims that these are the fakes, it still presents us how pictorial art would bring benefit for the practitioners of the practical sexual art. So, thirdly, I would like to examine briefly the erotic pictures apparently offering sexual positioning mentioned in the sex manuals, in addition to re-examination of van Gulik's *Huaying qinrong*. By doing so, it will possibly show us how it offers advantages for the art of the bedchamber as well as how Chinese art dealt with "body".

Finally, this paper will consider why Chinese erotic art depict sexual positioning, some of which are definitely come from ancient sex manuals. In other words, the question this final part would deal with is why these pictorial and practical arts started to cooperate. In this part, I would like to think about the followings, though briefly. 1) The literacy percentage, which might relate with pictorialization of sexual positioning so that non-literate could practise some sexual cultivation. 2) The aspect of the art of the bedchamber which connected with pictorial art--- if it were the idea to become the immortal or that of more general self-cultivation. 3) The possible new evaluation of the sexual art linked with the erotic art --- for instance, it, in connection with erotic art, probably became a medium to increase erotic excitement rather than manuals for becoming immortal or for cultivation, as we can witness in *Dalefu* 大樂賦 (Songs for Great Satisfaction).

Through this tentative survey, I would hopefully suggest that the association with pictorial medium, the art of the bedchamber might have obtained wider audience or wider practitioners, although they could have enjoyed small part of the practical art. Moreover, the practical sexual art which had been serious techniques for various purposes to become better-beings might have been opened up to public, as a means to increase sexual excitement, together with erotic art.

试论春宫图与房中术之间的关系

Sumiyo Umekawa

本文尝试去研究春宫图 Chinese Erotic Art 和房中术 Chinese Art of the Bedchamber 之间的关系。自从 Van Gulik 的著作《明代春宫图》一书出版后，春宫图与房中术之间的关系，以及他们的影响力，特别是从性艺术（性技巧）角度对绘画艺术的影响已经引起了广泛的关注和讨论。例如，Van Gulik 整理及在台湾出版的《秘戏图大观》一书（为一些秘密剧作而绘），给了我们大量的论据，既性艺术如何对绘画艺术可能产生了影响。关注和研究该领域的学者，大多数是一些艺术史学家，或者是一些懂得艺术的人。所以，他们的观点倾向于集中研讨这些色情图画是如何反映传统的性技巧的，或者性技巧的理念如何对绘画产生了某种影响。所以，像我这样对房中术感兴趣的人就会有如下的疑问。1) 实践技巧与绘画艺术相结合是否有什么益处。2) 如果有益处，那么又是如何从美术中获得益处的。3) 因何种原因他们需要结合在一起，尽管性技巧通常是比较隐秘的事情。

从技术角度上来谈性艺术（性技巧），大多数春宫图以绘画为媒介，着重地描述了性交的姿势，而没有去探究其他一些实践技巧。例如，如何从射精中获益，或者是如何从女人身上得气。所以本篇文章将以一份调查开始，来探讨性交的姿势在性艺术（性技巧）中有何等的意义？同时，它在一系列性技巧中起到何种角色，使用它的目的何在？

接下来，我想通过与日本春宫图的比较来分析中国春宫图。在这里，刘达临教授的新作《浮世与春梦》值得我们重视。一些学者已经指出中国的春宫图大多以山水画的形式出现，注重描述阴阳的协调。与中国春宫图相比较，日本的“春画”对于性器官进行极度的夸大，如中野美代子（Nakauo Miyoko）指出的“那些色情图画中人体是不存在的”。与日本的春画不同的是中国春宫图描述了多种不同的性交姿势，可以看出，在中国的绘画中人体是存在的，而且人体在绘画中是重要的。此外，我们还可以看到，因为绘画的目的和重点的不同，中国与日本在绘画中对人体在绘画中的处理方式是不同的。中国春宫图重点在描述性交的姿势，而日本的春画则表现性爱的愉悦。也就是说，中国春宫图可能是一种阴阳结合的象征，同时也是为人们指导性交的姿势，可能相当于房中术的一种表现形式。

考虑到春宫图中的性交姿势与绘画艺术之间的关联，我们就会马上想起 Van Gulik 所著《花营锦荣》一书。虽然，有评述称这些只是伪装，可我们依然可以看到绘画艺术是如何给这些实用性技巧的实践者带来益处的。所以，第三点我想简要的阐述一下，这些色情图片中的性交姿势是源自于远古时期的性手册，作为对 Van Gulik 《花营锦荣》的补充。由此似乎可见，春宫图为房中术的传播带来了益处，也可以看到中国艺术中是如何处理人体这一要素的。

最后，这篇论文想提出这样的思考，为什么中国春宫图描述性交的姿势？其中一些无疑是源自于远古的性手册。换句话说，最后这部分将来研讨为什么绘画与实践技巧开始结合？在这部分，我想来思考如下这些问题，简单的讲 1) 那些可能将性交姿势图片化的人，也就是有文化的人，通过这种方式使得人们无须文字就可以得到性知识的教育。2) 房中术与绘画技艺的结合，是否有着将其更好地保存下去或让

更多的人可以提高自身的认知的作用？3）对于性技巧与春宫图的结合最新的评论可能是，例如，相对于性手册而言，通过与春宫图的结合，在起到煽情作用的同时，可以更好的传播性知识，使其更易流传，如我们可以看到的《大乐赋》。通过这篇论文，我想得到如下的结论。房中术通过与绘画这个媒介的结合，赢得了更广泛的读者及实践者，虽然他们可能已经掌握了部分的实践技巧。此外，这些原本很严肃的技巧问题，通过与春宫图的结合，不仅提高了性爱的乐趣，且更易向公众展示了。

Paul U. Unschuld

**The Aesthetics of Suffering in Chinese Medical Manuscripts of the
18th – early 20th Century**

The *Huang Di Nei Jing Su Wen* is perhaps the most-informative documentation available today of the dynamics of Chinese medicine during the three or four centuries of its initial development in the early and later Han dynasties. Already at this early stage of its conceptualization, Chinese medicine exhibited approaches towards illness and disease that have been known from the history of European medicine throughout its entire history. Chinese physicians who accepted the paradigms of the “new” medicine felt forced to provide age-old nosological facts with an explanation based on the novel insights into the physiology of the human organism, and its integration into the wider context of the science of systematic correspondences.

Malaria, a disease called *nue* 虐, in ancient China and later on, and cough are such nosological facts. They have bothered humans, and they have been considered worth searching for therapies, regardless of cultural background and throughout times memorial. The *Su wen* bears ample witness of attempts to include these and other ailments in the new science of correspondences. We witness, in *Su wen* 35, attempts to explain *nue*/malaria as a disease affecting the entire body, and we read, in *Su wen* 36, of the approaches preferred by other authors to assign each single organ and conduit vessel its own specific type of malaria.

One of the most fascinating disease models was built to explain cough. Ancient Chinese physiologists were faced with two facts: First, the main organ responsible for cough is the lung. Second, although several people may have been exposed to identical situations potentially causing one to cough, not every one does indeed develop cough. The resulting disease model is most ingenious. It integrates all five depot-organs, and yet leaves the central role in the generation of cough with the lung. Also, it shows what factors have to come together to generate cough, and thereby offers an explanation why following a seemingly identical exposure not every person develops a cough.

While these attempts at providing a modern rational basis to age-old health problems remind one of attempts in Europe, beginning in the 19th century, at explaining ailments on the basis of new insights in human biochemistry and biophysics, another type of illnesses discussed in the *Su wen* has its parallels in European history too. In the *Su wen*, we find a continuum ranging from what we have called transculturally valid nosological facts to nosological constructs that owe their legitimation to a specific cultural context only. Diseases such as “block”, *bi* 痹, and “recession”, *jue*, are examples. Various symptoms are grouped together under a label that is culture-specific, and not necessarily found in foreign cultural contexts.

Bi is based on a notion that certain functions of the human body cease when a tubular structure is blocked. Beginning with failure to urinate, and the assumption that the duct passing the urine is blocked, this notion was projected, over time, to

other body functions and structures to the extent that eventually kidneys, spleen, skin, etc. all could be “blocked” with the result of specific ailments.

The concept of “recession” starts from a military view on certain physiological functions of the human organism. Yin and yang qi should occupy specific regions. If they withdraw because of weakness or exhaustion, their opponents immediately invade and occupy the deserted territory – again with the result of specific ailments.

That is to say, we have a full-fledged notion of “disease” and “sign of disease”, or patho-condition, as we prefer to call the latter in the context of Chinese medicine. The “block” is a theoretical construct. It cannot be seen with one’s eyes, or noticed by any other sense organ. What can be observed are the pathological conditions presumably resulting from a “block”. Similarly, “recession” is a purely theoretical construct. It too cannot be seen. What can be seen are the assumed pathological consequences of a “recession”, such as cold feet or unconsciousness. The same, of course, is true for nosological facts. The assumed dynamics in the organism leading to malaria or cough are closed to the observer’s eyes. It is only the periodicity of cold and heat spells, or the explosive emission of breath that offer evidence of pathological processes deep inside the body that require an explanation.

Chinese medical literature, in the same manner as European medical literature, does not normally offer illustrations depicting malaria patients or patients suffering from cough. Chinese Manuscript #72 in the Wellcome Institute Library in London is a rare exception. Here one finds images of malaria patients, of patients exhibiting various types of cough, as well as of patients suffering from harm caused by cold, and various types of “dripping”, *lin* 淋, i.e. urological ailments of male patients. Nevertheless, most illustrations in the Wellcome manuscript #72 are devoted to images visible on the human body, such as dermatological ailments, that lend themselves to graphic reproduction most easily. With these images, the Wellcome manuscript is part of a tradition, of many centuries, of Chinese texts on the “external discipline” of medicine, *wai ke*, offering a wide range of illustrations of swelling, boils, ulcers, etc. Similarly, ophthalmological literature, has shown images of ailments of the eyes, and texts on ear, nose, throat disease have shown illustrations of pathological changes falling within their range of concerns.

In the present paper, I wish to take a closer look at “the aesthetics of suffering in Chinese medical manuscripts of the 18th to early 20th century” as are found in the collection of the Ethnological Museum in Berlin. Various questions may be raised. First, what is the range of ailments/diseases depicted? Second, to what extent do these illustrations reflect the conceptual differentiation between disease and sign of disease? Third, taking the recent paper by Catherine Despeux on “Visual Representations of the Body in Chinese Medical and Daoist Texts from the Song to the Qing Period” into account,¹ one may wonder to what degree such illustrations are codes of culture-specific notions. Or, in simpler language, to what degree appear these illustrations strange or familiar to an observer from a foreign cultural background? The examples selected include dermatological ailments (including pox), representations of jing 惊 (“trembling”, “fright”), growths (various

types of tumors), cramp (*fan* 翻), ailments affecting tongue and throat, internal ailments, as well as demons as disease.

十八世纪至二十世纪早期中医文献中有关病痛的美学观 Paul U. Unschuld

《黄帝内经·素问》可能是现存的有关中医最初在第三和第四世纪汉代时的发展动态的最有参考价值的文献。中医理论在其形成初期所显示的对疾病的态度在欧洲医学史上也可以找到。中国的医师们在接受新的医学范例时，感到有一种压力去用新获得的有关人体生理器官的知识及其与其它科学间的关系来重新解释古老的疾病分类学的病例。

疟疾—在中国古代以及稍后一段时间内都称为虐。它和咳嗽都被列为疾病分类学的病例。在人类历史中，各种文化背景的人都受到这类疾病的威胁，因此人们一直在寻找救治的方法。《素问》可以充分证明当时的医师们为了迎合当时的新科学而将疟疾、咳嗽以及其它疾病收成病例。从《素问》35 我们得知，疟疾是一种影响整个身体机能的疾病。在《素问》36 中我们又读到其它著者认为每一个内脏器官和导管都有其不同类型的疟疾。

最有意思的是用来解释咳嗽的疾病模式。中国古代生理学家面对着两大事实：第一，咳嗽的病因与肺有关。第二，虽然几个人都同等接触了导致咳嗽的病源，但是最后并不是每个人都会患咳嗽。由此用来解释产生的疾病的模式是极具独创性的。它把五个器官看成一个整体，但把肺作为导致咳嗽的主体。另外它还指出导致咳嗽是由于几种不同因素在一起的作用，这样它就对不是所有接触病源的人都患咳嗽作出了解释。

这种用现代科学方法来解决古代的健康问题使人们回想起欧洲十九世纪早期医生们曾试图用对人体生物化学以及生物物理学的新知识来解释疾病。《素问》中所讨论的其它疾病也在欧洲医学史有例可找。在《素问》中，我们会找到一些跨文化的疾病分类学的病例，同时我们也可以找到许多有特殊文化背景的疾病分类学的概念。痹和厥就是这样的例子。它们被看成是相关的因此被组合在一起并赋予特定的文化背景，也就是说在其它文化中是没有这样的例子的。

‘痹’的形成来源于那些认为当管状组织被阻滞将导致人体某种功能丧失的观点。最初是小便的失调被认为是尿道受阻而产生的。这种观点到后来被借鉴来解释人体的其他功能和组织如肾、脾、皮肤等，都可能受痹而导致不同疾病。

厥的定义来自于对将人体某种生理功能的军事化。也就是说阴和阳气应该在体内占据了特定的区域。如果人体虚弱或筋疲力尽时，它们就会退缩，而与之相对的势力就会立即侵入并占领这片荒芜的区域，继而导致某种疾病。

这就是说，这里我们有了一个完整的“疾病”和“病兆”的概念，或者叫做疾病的症状，我们喜欢称后者为中医学的观点。痹无非是一个理论，我们无法用肉眼观察，也无法用其他的感官去感知它。我们所观察到的仅仅是那些被认为是由“痹”而产生的病状。与之类似，厥也只不过是一个理论而已，它也不能为肉眼所见。我们观察到的只是那些被认为是由厥而导致的疾病后果：如双足冰冷或昏迷。疾病分类学的病例也是如此。研究者是无法看到那些被认为是导致疟疾或咳嗽的生物有机体的活动变化。因此他们只有将身体表面的一些现象如身体的忽冷忽热或呼吸急促来作为解释人体内的病理学的变化过程的证据。

中医文献与欧洲医学文献同样没有提供有关患疟疾和咳嗽的病人的图示。伦敦 Wellcome 研究所图书馆所收藏的第 72 册中国文献是一个例外。它包括的图像中有疟疾病人、各种各样类型咳嗽患者、由受风寒而生痰的病人、以及各种淋病病人如患泌尿的男性病人。然而，Wellcome 图书馆第 72 册文献中的绝大多数图只限于那些外科疾病，例如皮肤病，因此图的复制是非常容易的。Wellcome 文献中的图是千百年来中国传统外科的一部分，提供了大量关于肿胀，疥痂，溃疡等疾病的图例。同样，眼科文献也提供了有关眼科疾病的图，并且描述耳，鼻，喉的文字都配有相关疾病的病理学变化的图示。

在这篇论文中，我将以现在收藏于柏林民俗博物馆那些中医文献为基础来进一步讨论“十八世纪至二十世纪初中医文献中有关病痛的美学观”。这里有几点值得注意：第一，其中包括了几种疾病？第二，这些图示在多大程度上说明了疾病与症状在概念上的差别？第三，阅读了 Catherine Despeux 最近关于“从宋朝到清朝中医和道家文献中对身体的图画表现”的文章后，我想了解这些图在多大程度上反映了特定的文化背景。或者更简单的说，对于一个文化背景不同的非中国学者来说，这些图在多大程度上让人感到陌生或是熟悉？文中所谈到的例子有皮肤病（包括疹）、受惊的表现、各种类型的瘤、腹部绞痛、舌头和喉咙的疾病、内科疾病、以及魔疾。

Analysis of Important Diagnostic Value of Illustrations in Literatures of Smallpox in Children

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Since young children have their own physiological and pathological characteristics , the techniques of diagnosis are different from that for adults . Inspection is the key in pediatric four diagnostic methods . Firstly , because the patients are too young to express themselves well , inquiry is limited greatly . Secondly , children don't go with the actions of doctors initiatively like adults , so it is not easy to get the objective pulse condition in pulse-taking . As a result , inspection becomes an important means of making up shortages of other diagnostic methods . In this paper , with the example of smallpox inspection in children , the diagnostic method characteristic of pediatric diseases of Chinese medicine was elucidated . Based on it , the ancient pertinent literature records were discussed . As the illustrations data directly reflected the history , the academic thoughts of previous wise people were probably explained with them and could provide references for the future .

Smallpox

Smallpox , commonly called variola , has been the urgent and serious plague threatening the lives of children since ancient time . With its quick invasion , dangerous patient's condition and unfavorable prognosis , its mortality is very high . Before the birth of smallpox vaccination prevention , Chinese medicine was the only way for resisting smallpox . Doctors of past dynasties all thought highly of the diagnosis and therapy of the disease , which was shown apparently with considerable percentage of specific books of smallpox in extant ancient pediatric medical writings . Doctors in successive dynasties searched for the diagnosis and therapy of smallpox hard and constantly , which indicated that smallpox hadn't been controlled effectively and ideally . If the children patients of smallpox were inherent weak and received very exuberant pathogenic factor , pathogenic factor would be closed and couldn't be expelled . A deteriorating case and dangerous syndrome probably could happen at any time . At this time , the children might die soon and the responsibility of doctors was heavy and great . If the diagnosis was in time and accurate , the significance was no small matter . On this occasion , it was undoubtedly offering fuel in snowy weather to provide mature programs and means of the diagnosis and therapy for doctors . As such , medical writings of smallpox developed continuously . Furthermore , with the occurrence of the deteriorating case of smallpox , many dangerous and serious complications appeared often , which led to the dysfunction of viscera , even death . All the color of smallpox on skin , the

distribution density , the smallpox full of serofluid or not were the rare signs of diagnosis and distinguishing . Grasping its rule was the magic weapon for saving life . In ancient medical writings of smallpox , many smallpox illustrations provided the reference for doctors to make the diagnosis . The effect of words description was impossible to be compared with that of them . This was why during Ming and Qing Dynasty many medical writings of smallpox were matched with illustrations . This reflected the fusion of the theory and practice in clinical Chinese medicine . It was a crucial incision of ancient medical writings study nowadays and worth lucubrating .

Abstract of Yulinzhishi Calcedony

Abstract of Yulinzhishi Calcedony is the segmental abstracting of Mysterious Smallpox Calcedony and there are many editions in stock . It is a widespread specific writing of smallpox . Before it , there only had limited several kinds of specific writings of smallpox spread . In the book , the first page of the inferior volume was named Illustrations Explanation of Yulinzhishi Smallpox Calcedony , and it was all of illustrations and words explanation in the volume . It was not common in ancient medical writings before Ming . The shape of smallpox , locus and distribution density were also described directly , and in the same page the words note was affiliated . This made clinical doctors understand the smallpox fully at a glance and not easy to develop different meanings . Its role of instruction was self evident .

Illustrations of Abstract of Yulinzhishi Calcedony

1. Nine-not-known smallpox and related illustrations

There were 76 illustrations in the inferior volume of Abstract of Yulinzhishi Calcedony . All of the manifestations and treatment of smallpox were described with illustrations . Nine kinds of different smallpox were listed first , called Nine-not-known smallpox , which were named according to their distribution locus on the skin , the shape and the density characteristic . In the same page , their good or bad prognoses and the therapeutic principles were elucidated with the words explanation . Then their prognoses were discussed based on their pertaining to the meridians of five ZANG-organs . The illustrations were still used correspondingly . The way of using the words and the illustrations simultaneously made it possible for the readers to comprehend the intentions very well .

Now Nine-not-known smallpox is used as the example to explain above characteristic . The content of Nine-not-known smallpox was extracted from Mysterious Smallpox Calcedony , but in the book the smallpox was not named Nine-not-known . The author of Abstract of Yulinzhishi Calcedony named it Nine-not-known , which had his special purpose . It aimed at warning the doctors that it was easy to confuse the smallpox with similar sore or other diseases , so clinical doctors shouldn't misunderstand them each other , or else the life saving was delayed .

Nine-not-known smallpox : the smallpox named Xuanjing (on the back) , the smallpox named Xiezi (on the liver meridian) , the smallpox named Fufu (on the vertex which is the convergence of yang) , the smallpox named Suojing (converged on the spleen collateral) , the smallpox named Panshe (on the lung collateral) , the smallpox named Huanhu (around the navel and converged on the spleen and stomach) , the smallpox named Xuanqiu (arriving at the kidney through heart and converged on the penis) , the smallpox named Shigu (on the yangming meridian and converged on the axillae) , the smallpox named Juane (on the spleen meridian and converged on the yangming) . Not only was illustration drawn for each kind of smallpox , but also the way of rhymed formulas and clear notes was used to describe the shapes of smallpox by metaphor . The words summarized the symptoms concisely and pointed out definitely that identifying the diseases incorrectly would result in the dangerous outcome of improper treatment . (Details seen in the attached illustrations)

If no auxiliary illustrations here , the doctors wouldn't identify the shapes of smallpox , distribution locus and density accurately and directly . So it would be very difficult to distinguish smallpox from other doubtful ones , and a correct and quick diagnosis would be impossible . As a result , the patients would be faced with the danger of losing life . It could be deduced that the illustrations in medical writings of smallpox had the absolute reference value in diseases diagnoses .

2. Illustrations of good or bad smallpox pertaining to the meridians of five ZANG-organs

In this book , after the content of Nine-not-known smallpox , good or bad smallpox were discussed according to their pertaining to five ZANG-organs . Observing the pathogenesis transformation of smallpox were laid stress on and corresponding methods for treatment were made depending on it . The good or bad conditions of smallpox pertaining to five ZANG-organs were complicated and changeably . The dangerous syndrome and deteriorating case appeared randomly . Timely and exact observation of the doctors was the key premise of making correct therapeutic scheme . At this time , the illustrations of good or bad smallpox were necessary for instructing observations of the doctors . In the book , Qihuoyao , Qimuyao , Qijinyao , Qituyao and Qishuiyao were named to describe the key of observing the smallpox pertaining to five ZANG-organs , on which the author emphasized that the doctors should be careful and not regard them as general ones .

According to the literary style of the book , rhymed formulas was used to state respectively the shape , color and distribution locus of good or bad smallpox pertaining to each viscera at the beginning of every chapter . Then it was analyzed what good or bad smallpox was . The therapeutic principles were also indicated . The illustrations were all seen with the corresponding words . So the illustrations and the words complemented each other .

Inspection was the most detailed one in all the diagnoses methods of pediatric smallpox and matched with illustrations . Other three diagnostic methods went with it subordinately . The discussion about pulse-taking was quite few , which was the popular phenomenon in ancient medical writings of smallpox . Therefore , it was deduced that the diagnosis of smallpox of that time mainly depended on inspection and inquiry , and inspection hold the leading status especially . Almost all the illustrations in ancient medical books of smallpox were drawn for describing the shape of smallpox , that was , all the content were about inspection , which was irreplaceable in providing the evidence for the diagnosis and prognosis of smallpox . So the illustrations in medical books of smallpox showed significant influence on the diagnosis of smallpox . At that time , smallpox belonged to great strong plague with sky-high mortality . So the illustrations not only showed great effect on saving the lives of patients but also possessed important academic value on investigating the historical development of smallpox prevention , diagnosis and treatment . During Ming and Qing , both the illustrations and the words were used in medical books of smallpox . Many contents of illustrations were developed from Abstract of Yulinzhishi Calcedony . Because the illustrations in medical books of smallpox could convey the information that the words couldn't express , they promoted the direct spread of medical knowledge of smallpox , which was another active effect it produced .

Attached illustration 1: The smallpox named Suojing , the smallpox named Panshe

Attached illustration 2: Illustrations of good or bad smallpox on the Heart meridian of hand-shaoyin

试析小儿痘疹文献中图象的重要诊断价值

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幼儿存在自身的生理与病理特点，其诊法与成人不同。幼科四诊以望诊为要，由于病人年幼言语表达不利，问诊受到很大局限，切脉也不如成人主动配合，可取得客观脉象。望诊成为补充其它诊法不足的重要手段。本文以小儿痘疹的望诊为例阐述中医儿科疾病诊法特点，藉此探讨古代相关文献记载，以图象资料直观反映历史，图解先贤学术思想，以供借鉴。

痘疹

痘疹，俗称天花，自古以来一直是威胁小儿生命的急重疫病，发病迅速，病情凶险，预后不良，死亡率非常之高。种痘预防问世之前中医药是抵御痘疹的唯一手段，历代医家都格外重视这一疾病的诊治，从现存儿科古医籍痘疹专书占相当大比

例就明显体现这一点，分析历代医家们不断求索，竭力探寻痘疹诊治方法，说明痘疹在这个时期从未得到理想的有效控制。小儿痘疹患者若先天禀赋薄弱，感受邪气甚重，邪气郁闭不得透发，逆证险证随时出现。此时生命危在旦夕，医家责任重大，诊断及时正确，意义非同寻常。这个时机为医生提供成熟诊治方案与手段，无疑雪中送炭，痘疹医籍正是因此不断产生。不仅如此，痘疹逆证出现，往往同时伴见若干危重并发症，可导致脏腑功能衰败，甚至死亡，而外在皮肤痘形的色泽、疏密变化、痘中浆液是否饱满抑或塌陷均为可资诊断与鉴别诊断不可多得的征象，掌握它的规律，即是挽救生命之法宝，痘疹古医籍中许多痘形图象为医生提供这方面的借鉴，它的作用是文字描述无法比拟的。这也是明清时期很多痘疹医籍配以图象的原因所在。它体现中医诊治疾病理论与实践融合的精髓。值得我们深入研究，是当今研究古医籍非常重要的切入点。

《毓麟芝室玉髓摘要》

《毓麟芝室玉髓摘要》系《秘传痘疹玉髓》的节要摘录本，此书现存版本不少，是广为流传的一部痘疹专著，在此之前，流传下来的痘疹专著仅存有限几种，而此书卷下首页题名《毓麟芝室痘疹玉髓图像注解》，整卷俱为图象及其文字注解，这在明以前的古医籍是不多见的。它直观描述痘疹形状、部位、疏密，并在当页配以文字注解，使临床医生一目了然，不易产生歧义，其指导作用不言而喻。

《毓麟芝室玉髓摘要》图象

1·“九不识”痘及图象

《毓麟芝室玉髓摘要》卷下绘图 76 幅，均为以图叙述痘疹证治，先列九种不同痘疹，谓之“九不识”痘，分别以其在皮肤分布部位、形状、态势特点予以命名，又当页以文字说明其吉凶预后、治则大法。然后按照痘疹的五脏经脉归属讨论其吉凶，仍配以图，图文相对应，使读者能很好地领悟其意旨。

现以“九不识”痘为例说明之。“九不识”痘内容摘录于《秘传痘疹玉髓》，但是书中未以“九不识”冠名，《毓麟芝室玉髓摘要》作者将这部分内容冠以“九不识”之名，有其特殊用意，旨在警示医家此类痘易与类似疮症或其它病证混淆，临证务必不能将此痘误识作彼证，否则贻误性命。

“九不识”痘：悬镜痘（发于背）、蝎子痘（发于肝经）、覆釜痘（总会诸阳巛峻）、锁井痘（轆于脾络）、盘蛇痘（郁匿于肺络）、参虎痘（轆攻脾胃，盘结脐轮）、玄丘痘（经心达肾，毒轆玉茎）、师姑痘（经于阳明，轆于两腋中窝）、卷阿痘（经于脾，毒轆于阳明）。每一种分别绘图，又以诀句和“明注”文字形式，形象比喻痘形，简练概括见症，明确指出误认别证导致误治之凶险后果。（详见图象举例）

试想若此处未配绘图，医家阅读时对痘之形状、分布部位、疏密态势把握不准，没有直观印象，则难以从中明确与疑似病证之鉴别，不能迅速作出正确诊断，而对患者就是生命的存亡与否。痘疹医籍之配图，于疾病的决断参考价值是可以想见的。

2·五脏经脉吉凶痘图

此书在“九不识”之后，分五脏论痘之吉凶，注重观测痘疹病机转化，并以病机转化为根据，制定相应治法。五脏痘疹吉凶病情复杂，动态变化多端，险证逆证随机出现，医家观测及时准确是制定正确治疗方案的关键前提，此时吉凶图对医家观测

的指导不可或缺。书中以启火钥、启木钥、启金钥、启土钥、启水钥冠名五脏痘观测之要，系作者强调此处当用心留意，不能等闲视之。

按照该书行文体例，每篇篇首即以诀句分述本脏吉痘凶痘形态色泽、分布部位，然后析述何为吉何为凶，并指出治则大法，对应之处均见图象，图文相得益彰。

小儿痘疹以望诊论述详备，并配图象，其余三诊从属配合，对于脉诊的论述颇为少见，这是痘疹古医籍中存在的普遍现象。由此推论，当时痘疹的诊断主要依靠望诊与问诊，望诊更占主导地位。痘疹古医籍中的图象几乎全部为描述痘疹形态，也即均为望诊内容，为痘疹诊断与预后提供的依据是不可替代的。因此痘疹医籍中图象对于痘疹诊断具有十分的重要影响。当时痘疹属于死亡率极高的重大烈性疫病，它对挽救患者生命所起的作用至关重要。对于我们今天研究痘疹预防诊治的历史发展进程也具有不容忽视的学术价值。

明清时期痘疹医籍图文并叙，图象中不少内容由此书衍变化生，痘疹医籍图象可以传达文字无法表述的信息，促进了痘疹医学知识的直观传播，这是它所发挥的另一积极作用。

附图 1：锁井痘 盘蛇痘

附图 2 手少阴心经吉凶图

Medical Images in Dun Huang Grottoes

Jinyu Wang

Dun Huang Grottoes 敦煌石窟(including the Mogao Grottoes莫高窟, west Thousand-Buddha Caves西千佛洞, An Xi Yu Lin Grottoes 安西榆林石窟and other grottoes, altogether 6 to 7 grottoes which keep more than 570 artworks) is a treasure of the world culture heritage. Dun Huang Grottoes is not only a magnificent artwork, but also showing an history of Chinese painting art (11 Dynasties from BeiLiang, BeiWei, XiWei, BeiZhou, Sui, Tang, WuDai, BeiSong, HuiGe, to XiXia) over a period of nearly one thousand years. Many researchers have already showed a great interest in them. This paper will focus on medical images in Dun Huang Grottoes and try to make some instruction and conclusion of them.

1. Medical Treatment

Most of the scenes relating with medical treatment in Dun Huang frescos were coming from Buddhism stories, altogether pcs. For instance, No.296 grottoes built in BeiZhou 北周, in the story of “Fu Tian Jing Bian”福田经变, there was a scene named “Shi Yi Yao” 施医药(giving medical treatment to public free of charge), it described two family numbers supported patient in bed, while the doctor felt the pulse, and someone pestle the medicine by Yao Jiu 药臼. No.302 grottoes built in Kai Huang 4 开皇 4 年 of Sui 隋 Dynasty (A.D. 584) also had the scene of “Chang Shi Yi Yao Liao Jiu Zhong Bing”常施医药疗救众病. These two different scenes showed us the difference of internal syndrome 内症 and trauma 外伤. No. 217 grottoes built in Sheng Tang 盛唐 had a scene named “De Yi Tu” 得医图 which was based on the Buddhism story “Ru Bing De Yi” 如病得医 of “Fa Hua Jing Bian”法华经变. No. 321 grottoes built in Chu Tang 初唐 also had frescos about patient getting medical treatment. Furthermore, there were some frescos indirectly described medical technologies at that time. And there were varieties portrait of patient in the frescos.

2. Acupuncture

There are also some acupuncture texts with imagines in Dun Huang medicine works. There are existent 6 volumes of fragment acupuncture texts 针灸残卷, for instance P.2675<Xin Ji Bei Ji Jiu Jing> 《新集备急灸经》. S.6168 and S.6262 Jiu Fa Tu (灸法图). Dun Huang Tu Fan Zang Wen (敦煌本吐蕃藏文) medical text is the earliest existent copy of Zang 藏 medical text, for instance, Pt.127 < Zang Yi Jiu Fa Can Juan> 《藏医灸法残卷》.

3. Portraits of the medical workers (include some Buddhism characters)

We could find portraits of ancient medical workers in frescos. For instance, the aged doctor in No.217 grottoes “De Yi Tu” 得医图 and a Seng Yi 僧医 in No.31 grottoes. We also could find the portraits of Lu Tou Fan Zhi 鹿头梵志, who was a

miraculous doctor in Buddhism. And part of the medical texts in Cang Jing Dong 藏经洞 were available for the public and doctors in the temple at that time.

4. Medicine Buddha and Psychotherapy

Medicine Buddha is the king of the herbal medicine in Buddhism 佛教里的大医王. He could release people from illness and make them healthy. For instance , as the saying “Jiu Zhong Sheng Zhi Bing Yuan, Zhi Wu Ming Zhi Gu Ji” “救众生之病源，治无明之痼疾” .So people also called him “Da Yi Wang Fo”大医王佛， “Yi Wang Shan Shi”医王善逝. But here the “illness” is not the meaning as normally, here it mean the illness of Gen 根 Xing 性 in Buddhism. For instance, we could find frescos about the treatment of illness by ‘incantation’ in No. 85 grottoes. The “Jiu Heng Si” 九横死 and “Shi Er Da Yuan”十二大愿 in “Dong Fang Yao Shi Bian” “东方药师变” also express the wish to have peaceful and healthy life.

5. Yang Sheng Xiu Lian 养生修炼

There are many imagines of Yang Sheng Xiu Lian 养生修炼 in Chan Xiu Tu 禅修图 and frescos, and in which there are imagines of “Static Qigong” “静功”, “Internal Exercise” “内功” and “Physical Exercise” “外功”, “Dynamic Qigong” “动功” (describe constantly activities) . They are the visible materials for the researching of Qigong 气功 and daoyin ‘therapeutic movement’ 导引.

6. Hygiene

There are 17 pieces of “Lao Du Cha Dou Sheng Bian” “劳度叉斗圣变” frescos probably made in the period from Tang 唐, Wudai 五代 to BeiSong 北宋 Dynasty and more than 10 pieces of “Mi Le Jing Bian” “弥勒经变” in Dun Huang Grottoes. Most of these frescos show us the Buddhist’s daily life, such as shower, shave, and brush or wipe their teeth. One fresco describe Buddhists brushing teeth in mid Tang Dynasty is the earliest one about mouth hygiene in China. And there are also many frescos about bodybuilding.

7. Environmental Health

Some frescos in Dun Huang Grottoes describe how to green or sweep the courtyard, fence the well and build toilet to keep the public environmental health.

8. Athletic Sports

Some frescos describe the athletic sports at that time, which are the vivid historical materials for the researching of physical culture.

9. Zang Mi Xiu Xi 藏密修习 and sexual medicine

“Huan Xi Fo”欢喜佛 we could find in Zang Mi 藏密 No.465 grottoes is very important for the researching of sexual medicine.

敦煌文物中的医学卫生图像

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敦煌石窟（包括莫高窟、西千佛洞、安西榆林窟等大小六、七个石窟，共保存了有艺术品的洞窟 570 多个）是世界人类文化遗产的宝库。她不仅是艺术珍品，而且也是一部包括中古时代（北凉、北魏、西魏、北周、隋、唐、五代、北宋、回鹘、西夏、元 11 个朝代）跨越千年的现实生活与艺术相结合的形象历史。浩如烟海的壁画、莫高窟藏经洞绘画中，描绘了不少古代医疗卫生发展演变以及中西交流方面的历史图像。其中的一些画面早已引起国内外医学史、科技史学家们的珍视并加以研究。这里我们将主要的医疗卫生图像作一综述、介绍。

医疗：敦煌绘画中的各种医疗场面大都是围绕佛教内容所画的一些小品，约有 幅。北周第 296 窟“福田经变”中的“施医药”场面为：两位家属扶着平躺的患者，医生在一旁静心诊脉，身后有一人正在用药臼研磨药物；隋开皇 4 年（公元 584 年）建造的第 302 窟的“福田经变”中，也有“常施医药疗救众病”这一场面。这两个描写不同的医疗场景，显示着两个患者有内症和外伤的区别。盛唐第 217 窟的“得医图”是根据“法华经变”中的“如病得医”比喻绘成的。初唐 321 窟南壁“十轮经变”中也有病人得医服药的场面。另外，壁画中还有一些间接反映医疗技术的画面。还有各种各样的病人的形象。

2、针灸：在敦煌中医药学著作中还有图文并茂的灸疗专著。针灸残卷有六卷，包括 P.2675《新集备急灸经》、S.6168 和 S.6262 灸法图等。敦煌本吐蕃藏文医学卷子现存最早的藏医学文献，其中包括 Pt·127 号《藏医灸法残卷》等。

3、医生肖像画（包括与医学有关的佛教人物）：壁画中给我们留下了古代医学博士和民间医师疗救众病的真实形象。而藏经洞大量的医学文献中的一部分就是当时社会和寺院医生们用的书籍。例如，第 217 窟“得医图”中的老医生、第 31 窟“得医图”中，坐于木墩上的僧医。在北魏、西魏、北周、隋、初唐壁画中都画有鹿头梵志这个佛教中的大神医。

4、药师佛信仰与心理疗法：药师佛是佛国里的大医王，因他是为人医治无明痼疾，解除病苦。令人身心安乐的医生，所以又名大医王佛，或名医王善逝；可以“救众生之病源，治无明之痼疾”。但这里的病，非人体生理病，而是佛教里所谓“根、性”之病。第 85 窟的巫医治病。“东方药师变”两侧画的九横死、十二大愿也间接反映了人们渴望人生平安、健康的美好愿望。

5、养生修炼：从北朝时期的药叉、到历代的禅修图及其他壁画中，描绘了不少养生修炼的画面，既有禅坐修炼的“内功”、“静功”，也有进行连续性动作的“外功”、“动功”，为我们研究中国古代“气功”导引术提供了可靠的形象医学资料。

6、卫生保健：敦煌石窟唐、五代、北宋时期的 17 幅“劳度叉斗圣变”、10 多幅“弥勒经变”壁画中，大部绘有佛徒们洗浴、剃头、刮脸、揩齿、刷牙等卫生保健画面。其中中唐时期的刷牙图是已知的我国最早的，有关口腔卫生绘画。属于健身、健美方面的内容画面也不少。洗澡、沐浴

7、环境卫生：属于人们日常生活和环境卫生方面的庭院绿化、洒扫院落、拦护水井、建造厕所等内容在壁画中也有反映。

8、体育活动：敦煌壁画中描绘的许多有关古代体育活动的画面，为体育史的研究提供了大量的形象生动的研究史料。

9、藏密修习及性医学：莫高窟藏密第 465 窟的男女合抱双身修习像——欢喜佛，有重要的性医学研究价值。

Varieties illustrations in Ancient Chinese Medical works

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The ancients had paid great attention to make use of illustrations in their works. For instance, with the format of ‘illustration left text right or history right’ 左图右书，左图右史 and ‘illustration and text make up for each other’ 文不足以图补之，图不足以文叙之 in ancient works had become a good traditional way. Among the ancient works, there still remained varieties of ancient Chinese Medical works. We could find over 5,500 categories and 60,000 volumes of reliable texts 善本 and thread-bound books 线装书 collected in the Library Academy of Chinese Medicine; And we suppose that it should be over ten thousand volumes of Chinese Medical works collected in Chinese Library and oversea. Many of them were with excellent illustrations, which are not only the precious treasure of history and culture heritage, but also vivid resources for the researching of traditional Chinese medical science.

Hand-copied book 写本书 and printed copy 印本书 are the two main method of producing books. Before Han Dynasty, people used bamboo slips 竹简, wooden tablets or slips 木牍, and thin silk 缣帛 for writing. For example, the 《Dao Yin Tu》 《导引图》 <Therapeutic Movement Charts > found in Ma Wang Dui 马王堆 in Hu Nan province, Chang Sha, was the earliest hand-copied book with illustrations existing in the world. After the technology of papermaking came into use, people began to write on scrolls. For instance, as we could found the hand-copied book in the Cang Jing Dong 藏经洞 Dunhuang, was written in scrolls, probably made in Sui or Tang Dynasty.. Those I have mentioned above could be called hand-copied book 写本书, which had a number of illustrations concerning the medical history with the genre of line drawing 白描 and colored realistic painting 工笔彩绘. From Song Dynasty block-printed edition 刻本 became popular, but there were a number of ancient books still written by hand

Printed copy is using the technology of engraving to print books. Since most printed copies were engraved the characters and pictures on the plank of peer and Chinese date, we usually name the illustrations in these kind of books, block print 版画, or wood engraving 木刻画. But they’ re also a few lithographs in ancient Chinese medical works.

We still could not affirm when the engraving originated. The earliest one, which remained and clearly dated, printed in AD 868. That

is the famous “咸通”本《金刚般若波罗密经》卷首图 preface illustration in <Jin Gang Ban Ruo Bo Luo Mi Jing>.

We could find a acupuncture diagram in the book of *Xinjibeijijiujin* 《新集备急灸经》，in Dunhuang, in which preface note said that ‘it was printed at the east market of the Capital city by the family of Li’ , “《新集备急灸经》一卷，京中李家于东市印”。 That means the original version of the book was printed and hand script was based on the printed version. The evidence also lies in the end of the book. “咸通二年（公元861年）岁次辛巳十二月二十五日衙前通引并通事舍人范子盈、阴阳汜景询二人写讫” It said that this book were written in AD 861. So we could estimate that the engraving originated no less than AD 861.

The project of “the History of Illustrations in the Chinese Medical Works” funded by the Wellcome Trust was launched out in early 2004. Contributed by the efforts of the initiators and some experts, about 500,000 explanatory words now are added for 1400 illustrations of ancient Chinese medical works. The illustrations are picked up from 172 works, mostly are hand-copied works and block-printed editions published in Ming Dynasty, a few in Qing Dynasty, and several in the RC era 民国时期.

Although we have collected 1400 illustrations from ancient medical works, it seems that they still are not up to the all. And we can categorize them into 10 category, such as herbal medicines 本草, acupuncture 针灸, diagnosis of illness 诊法, massage 推拿, Internal organs and anatomy 脏腑解剖, sexual intercourse 房室 and ect.

Within the category of materia medica, we could find varieties of illustrations done in the genre of colorful drawing on the silk 绢本彩绘图, colored realistic painting 工笔彩绘图, line drawing 墨线图 and wood engraving 木刻版画. Within the category of *acupuncture*, we could find the illustrations of main and collateral channels (Jingluo) 经络图, Gu Du 骨度图, acupoint (Xuewei) 穴位图, and acupuncture tools 针具图. Within the Category of diagnosis of illness, we could find illustrations of pulse diagnosis 脉诊, complexion diagnosis and physiognomy 望诊, tongue

diagnosis舌诊, and 小儿三关指诊. The illustrations of internal organs and anatomy, and道家脏腑内景图. There are also many illustrations concerned with vary kinds of illness for internal medicine, surgery typhoid and other contagious diseases, gynecology, ophthalmology and larynx diseases in terms of symptom and therapy. Only several Chinese Erotic Art were recorded owe to the feudal system of ancient Chinese society. Opposed to sexual arts, there are many Yang Sheng Tu 养生类插图, for instance, there are illustrations of daoyin ‘therapeutic movement’ for people to preserve health and release from illness, and also some illustrations for dietetic treatment of Taoists. Other categories are including illustrations about the treatment of illness with ‘incantation’ and talismans, images of famous doctors, and format of ancient medical works.

Through those illustrations, we could find a vivid history and culture heritage of Chinese medical science, and also make us much easier to understand the ancient Chinese medical science.

丰富多彩的中医古书插图

(摘要)

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古人著书立说，重视图的作用。“左图右书”、“左图右史”、“文不足以图补之，图不足以文叙之”，图文并茂，相辅相成，是中国书的一个优良传统。中医古籍是中国古籍中的一部分，其种类繁多，仅中国中医研究院图书馆藏善本、线装中医古书共计 5500 余种，6 万余册，估计国内外各个图书馆藏中医古书约近万

种，可谓汗牛充栋，浩如烟海。其中不少附有精美的插图，这不仅是一份宝贵的历史文化财富，也是研究中国古代医学的生动材料。

中医古书，以其生产形式而言，大致可以划分为写本书和印本书两大类。在汉代以前，人们将书抄写在竹简、木牍等天然载体或缣帛等丝织品上。如湖南长沙马王堆《导引图》，其中保存了中医现存最早的写本插图。随着造纸技术的发明，人们将书抄写在纸卷上，如敦煌藏经洞封藏的隋唐前后纸质写卷。宋以后刻本书大量出现，但也保存下许多手工抄录的古书。以上均可统称为写本书，其间有许多白描、工笔彩绘等医史插图。

印本书就是指用雕版印刷的方式取得的稿本复本。由于古代书版以梨、枣木为主，故这些插图，都是版画，也称为木刻画。中医古书也有少量的石印本，故其插图为石版画。

中国的雕版画的起源，有汉朝说、东晋说、六朝以至隋朝说。现存我国最早的版画，有款刻年月的，是作于公元 868 年，举世闻名的“咸通”本《金刚般若波罗密经》卷首图。敦煌医学写卷《新集备急灸经》卷首题“《新集备急灸经》一卷，京中李家于东市印”，据此可知，此写本是据刻印本抄绘的，写卷末记有“咸通二年（公元 861 年）岁次辛巳十二月二十五日衙前通引并通事舍人范子盈、阴阳汜景询二人写讫”，这是手工抄绘的时间。此写卷中有一幅灸疗穴位残图。从这一记载可推知，中医版画插图的出现当不晚于公元 861 年。

2004 年初，受英国维康基金会资助的“中医历史图像研究项目”开始启动，在课题组多位学者的共同努力下，为 1400 幅中医古书插图撰写了解说辞，约 50 余万字。这些插图选自 172 部古医书，其中明代的写本、刻本居多，清代写本、刻本次之，也有少数几部民国期间的刊印本。

虽然我们收集的古书插图数量已经很多了，但这远不是中医古书插图的全部。这 1400 幅插图，如果按图画描述的内容分类，大致可分为本草、针灸、诊法、推拿、脏腑解剖、各科病证、房室、养生、祝由及医史文献资料等十类。

本草类有绢本彩绘图、工笔彩绘图、墨线图、木刻版画等多种美术形式的插图。针灸类有十四经络、骨度、穴位及针具等插图。诊法类有脉诊、望诊、舌诊、小儿三关指诊等插图。脏腑解剖类有人体脏腑解剖图、道家脏腑内景图。各科病证插图较多，有内科杂病、外科痈疽疮疡、伤寒病及传染类疾病、妇产科、眼科、喉科等病证插图，这类插图有的描述发病时的症状，有的描述病灶形态，有的描述治疗手法。房事类插图较少，这与中国封建思想观念有关，即使有少量图画，表述也很含蓄。养生类插图也很多，有多种导引强身术、导引祛病术、道家内功及饮食养生等图示。其他类别也有许多图画，如画符的精神暗示疗法图、名医画像、古医书版式特征等等。

通过对中医古书插图的介绍，我们可以形象地展示中医悠久的历史及深厚的文化底蕴；通过欣赏中医古书插图，读者可以较容易地理解古老的中医学的内容。

Nourishing the Fetus in Medieval China: Illustrating the Ten Months of Pregnancy in the *Ishimpō* 醫心方

Sabine Wilms

This paper discusses ten depictions of the naked female body that are found in the *Ishimpō* 醫心方 (Prescriptions at the Heart of Medicine), completed in 982 by Tanba no Yasuyori 丹波康賴. The *Ishimpō*, a Japanese compendium of Chinese medical texts, is one of our most important sources for early medieval Chinese medical literature, and gynecology in particular, because it contains numerous quotations from texts that have not been preserved elsewhere. The charts discussed in this paper are located in the second of four scrolls on women's medicine (*Ishimpō* 22:1). Titled *Renshen mai tu yue jin fa* 妊娠脈圖月禁法 (Charts of the Channels and Methods of Monthly Prohibitions During Pregnancy), this section is marked as a citation from the *Chanjing* 產經 (Classic of Childbirth). This is an otherwise lost manual on the medical management of childbirth, composed by De Zhenchang 德貞常 around the fourth or fifth century and recorded in the bibliographic catalogue of the Sui dynasty. The various citations of this text in the *Ishimpō* offer a wide range of childbirth-related prescriptions similar in style to those found in other prescription texts like the *Beiji qianjin yaofang* 備急千金要方 (Essential Prescriptions worth a Thousand in Gold for Every Emergency), composed ca. 652 CE by Sun Simiao 孫思邈.

The textual quotation from the *Chanjing* that accompanies the drawings discussed here describes month by month the development of the fetus as well as dietary and other behavioral taboos and recommendations for the mother during pregnancy. In addition, it names and describes the channels illustrated in the corresponding drawing, which are said to nourish the fetus during each month and may therefore not be treated with acupuncture or moxibustion. This text offers a textual variant of a type of literature on *yang tai* 養胎 (nurturing the fetus) that contains descriptions of gestation and instructions for nurturing the fetus for the mother. While no direct precedents exist for the images of the pregnant woman in the *Ishimpō*, the text can be easily traced back to other sources. The earliest evidence of this literature is the *Taichanshu* 胎產書 (Book of the Generation of the Fetus), discovered among the Mawangdui medical manuscripts and therefore predating 168 BCE. An almost literal, but significantly expanded variation of this description of gestation and related advice for the mother is found in the above-mentioned *Beiji qianjin yaofang* by Sun Simiao, the most comprehensive source of information on *furen fang* 婦人方 (Prescriptions for Women) for the early medieval period. The information from the *Taichanshu* is expanded by several features that reoccur for each month: The association of a specific channel with each month; an alternative, more detailed account of fetal development, which correlates each month and channels with viscera and physiological functions in line with standard five-phase theory; and two medicinal prescriptions for treating a damaged and threatened fetus. This text is then

further expanded in the *Ishimpō*, most notably by the inclusion of the ten drawings.

The ten *Ishimpō* charts depict the course of the channel, the location of several important acupoints and related physiological features that nurture the fetus during each month. As the text states, “[The channel] may not be treated with acupuncture or moxibustion during this month, in order to avoid injury to the mother and fetus.” In addition, the sparse line drawings show the overall changes in the pregnant woman’s body and the development of the fetus, from a tiny dot to an increasingly humanlike figure with gradually differentiating limbs, extremities, and by the tenth month, to a fully developed monkey-like figure that barely fits in the womb of a voluptuous, curvy woman with enlarged breasts, a spine sagging from the weight of the fetus, and an outward- and downward-protruding abdomen.

These pictures appear to be the first instance of a medical representation of the naked female body and the development of the fetus in Chinese literature. They are stylistically related to two sets of drawings of the naked male body that identify prohibited acumoxa points, namely the *Huangdi hama jing* 黃帝蛤蟆經 and two Dunhuang manuscripts, both most likely from the early Tang period. Therefore, they provide evidence for the confluence of a literary tradition on *yang tai* (nurturing the fetus) with a pictorial tradition of acumoxa prohibition charts, depicting the location of channels and acumoxa points on the naked human body.

Sabine Wilms
中世纪的中国古代养胎法
《醫心方》中十月妊娠图解

这篇文章论述了在公元 982 年由丹波康賴撰写的《醫心方》中对一个裸体女身的十种描写。因为《醫心方》中收集了很多久已失传的医学典章，所以它既是一本日语的中华医药集，也是中世纪早期的中医学，特别是妇科学，最重要的参考文献之一。这篇文章所描述的图示来自于四卷妇科中的第二卷（醫心方 22:1）。标题为妊娠脈圖月禁法的这部分内容是从《產經》引用而来。《產經》是由德貞常在大约四、五世纪编写的，关于分娩时医学护理的医学典籍，曾记载于隋朝的书籍目录中，现已失传。《醫心方》引用了《產經》中很多与分娩相关联的处方，其文体风格与孙思邈在公元 652 年编写的《備急千金要方》很相似。

我们这里所讨论的这段来自《產經》的引文及其图示，描述了胎儿逐月的变化，以及孕妇在饮食和行为方面的禁忌和建议。此外，引文还对相关图示中的经脈进行了命名和描述。由于这些经脈是养胎的，因此在怀孕期间不应对这些经脈使用针灸。而且这段引文也类似于其它的养胎文献，它对妊娠进行了描述，并为孕妇提出了养胎的建议。虽然《醫心方》中的妊娠脈圖是无先例的，但其引文可以很容易的追溯到其他的一些参考资料。在马王堆医学文献中所发现的《胎產書》，是在公元前 168 年前编著的，也是养胎文献中最早的一部。上文提到由孙思邈编著的《備急千金要方》其对分娩及孕妇的建议在文体上与《產經》几乎相似，但在内容上有很大扩展。它为中世纪早期出现的《婦人方》提供了最全面的参考价值。它在《胎產書》的基础上对在孕期每个月都会重复发生的一些特征进行了详细描述：每月都有一个相应的经脈；在描述时，以五行理论为基础将每月的经脈与内脏和生理机能进行相应的联系；以及两份关于治疗受伤或是受到惊吓的胎儿的医学处方。在此之后，《醫心方》又对这段引文进行了进一步的扩展，其中所收集的十幅妊娠脈圖就是最明显的例子。

《醫心方》中的十幅妊娠脈圖描绘了经脈的路线、许多重要穴位以及与养胎相关每月的生理特征。正如引文记载的那样，“为了避免母亲和胎儿受到伤害，不应该在这个月对这些经脈进行针灸治疗。”另外，妊娠脈圖用稀疏的线条全面展示了怀孕时期女性的身躯变化以及胎儿的生长过程：胎儿从一个很小的圆点逐渐变成一个四肢齐全的人的轮廓；到第十个月的时候，这个完全发育得像猴子一样轮廓的胎儿几乎无法包在子宫里了。孕妇的躯体逐渐变成曲线型，双乳也变得丰满。由于胎儿的重量，孕妇的脊骨微微向下弯曲，腹部也向外及向下突出。

妊娠脈圖图似乎是中国医学文献中第一例用图来展示裸体女性以及胎儿的发育的。它们与唐代早期的《黃帝蛤蟆經》和两篇敦煌文献中的两组用来鉴别针灸禁穴的男性裸体脈图有相似之处，并有一定联系。因此，这说明养胎文献与针灸禁穴图献在对人体经脈的路线以及针灸穴位的描述上是相互影响的。

The gendered medical iconography of the *Yizong jinjian* 醫宗金鑑 (1742)

Yi-Li Wu 吳一立

This paper explores the relationship between gender and medicine by analyzing the illustrations that appear in the Qing government medical textbook *Yizong jinjian* 醫宗金鑑 (1742, hereinafter “YZJJ”). Charlotte Furth has shown that classical Chinese medicine defined the human body as fundamentally androgynous. This meant that there were no essential differences between the structure and function of male and female bodies, which were defined as complementary and equal counterparts. However, when we look at the medical illustrations in the YZJJ, a different view of the relationship between medicine and gender emerges. Of 484 illustrations depicting the human body, over 400 include clothing and hairstyles that mark them as male or female. Of these figures, only about a dozen are female, with the rest being male. This lopsided gender distribution is especially noteworthy because of the conceptual importance of the medical figures that are depicted as men. For example, all the figures used to depict meridians and vessels (*jingmai* 經脈) are male. Similarly, the illustrations that depict the location of disease on the body are almost all male. The few female figures that appear are almost all associated with the disorders of childbirth and gestation. In sum, the YZJJ depicts male bodies as the standard for all bodies, with female figures being used only in special cases.

The YZJJ does include a few illustrations with androgynous figures. We must therefore ask why the vast majority of the medical figures were given a recognizable gender at all. One explanation is the classical medical view that each patient had to be treated as an individual, with unique bodily endowments that would influence the course and appearance of a given disease. This would have also created an imperative to portray medical figures as real people with a distinct gender, age, and class. But why the predominance of male figures? One factor may have been the gendered meanings of nakedness in Chinese art. Most of the figures in the YZJJ have bared part of their body to show the site of a meridian, acupoint, or external ailment. While exposure of the female body was primarily associated with erotic art, exposure of the male body could be associated with spiritual and religious enlightenment or physical health, such as that enjoyed by Daoist adepts, Buddhist holy men, and *qigong* practitioners. A second factor was that the YZJJ borrowed illustrations and iconographic conventions from Chinese figure painting in general, particularly from illustrated collections of didactic biographies. The dominance of male figures in the YZJJ may thus reflect the dominance of male figures in Chinese art overall. Finally, the prevalence of male figures may be linked to the fact that these medical illustrations were addressed to a primarily male audience of doctors and imperial officials. The editors were acutely aware of their readers' gaze, as shown by the fact that many of the YZJJ illustrations include objects that symbolize good fortune or that are associated with Daoist immortality practices. Examples of these objects include *ruyi* scepters 如意, fly-whisks 麈尾, feathered or tasseled

fans, and *lingzhi* fungi 靈芝. The symbolically-laden illustrations of the *YZJJ* thus embodied wishes for the reader's continual health and the sufferer's impending recovery, while simultaneously affirming that the teachings and therapies described in the *YZJJ* were efficacious. In conclusion, the philosophies of classical medicine, the artistic conventions of Chinese figure painting, and the male-dominated environment of the imperial medical service may all have contributed to the gendered medical iconography of the *YZJJ*.

《医宗金鉴》中有性别区分的医学肖像画法 吴一立

本文通过研究由清政府组织编写的《医宗金鉴》（1742）一书中的插图来探讨医学与性别之间的关系。Charlotte Furth 曾指出，在传统中医中人体基本上界定为男女相同的。也就是说，认为男性与女性的身体，从结构上和功能上是近似的，没有本质上不同的。但是，当我们查看《医宗金鉴》时，我们却发现了关于性别与医学关系的一个不同的观点。描述人体的 484 张插图中，其中有 400 余张可以通过服装与发式的不同看出是男是女。以此特征区别，其中只有 10 几张为女性，其余均为男性。这种性别上的倾向是非常值得关注的，因为认为重要的医学画像以男性来描述。例如，用来描述经脉的画像均为男性。同时，那些描述疾病位置的插图几乎也均为男性。仅有的一些出现了女性特征的画像，几乎都与怀孕及出生时的异常情况有关。所以，总体上而言，《医宗金鉴》以男性身体为人体的标准，一些带有女性特征的画像只是很特别的例子。

《医宗金鉴》中确实包括一些不区分男女特征的插图，因此我们必然会有这样的疑问，为什么占较大比例的大量的医学画像，给出了明显的性别区分呢？一种解释是，传统医学观点中，每个病人都是一个独立的个体，具有其独特的身体天资，这将影响到疾病产生的原因及疾病的表现。所以，这也就形成了一种规则，既医学画像中需要描述真实的人物，区分他们的性别，年龄及阶层。但是，为什么男性画像居多呢？第一个因素可能是，在中国艺术中裸体的意味是有性别区分。在《医宗金鉴》中大多数画像暴露了他们身体的某一部分，以表明其针灸穴位，或外部疾病的位置。女性身体的裸露基本上与春宫图（色情图画）有关，而男性身体的裸露则与宗教及精神上的启迪，或人体的健康有关，例如，描述道长、佛教圣人及练习气功者。第二个因素是，《医宗金鉴》从中国画像绘画艺术中汲取了插图和肖像画法的绘画习惯，特别是其中一部分是从一些有插图的带有教育性质的传书中而来。《医宗金鉴》书中男性画像占主导地位，也正是在当时中国艺术中男性画像占主导地位的反映。最后，男性画像的广泛使用，也正是因为这些医学插图主要是面向那些男性的医生和皇家的官员。编辑者也非常了解其读者的眼光，可以看到在《医宗金鉴》的插图中包括了许多象征着好运的及与道教长生修炼有关的物品。例如，如意、麈尾、羽毛的或抽穗的扇子和灵芝。这些承载着象征意义的插图，在《医宗金鉴》中以物化的形式，表达了读者希望长生或者从疾病中康复的愿望，同时也用来证明书中的治疗方法是有效的。总而言之，传统的医学哲学体系，从中国人物绘画中汲取的艺术惯例，以及医学为皇权服务的男权统治氛围，都成为了《医宗金鉴》中有区分性别的肖像画法的原因。

（英文译中文：段然）

Body and Spirit Theory Investigation Depending on History Illustrations in Literatures of Chinese Medicine

Zhang Jiawei

There kept a lot of history illustrations in considerable ancient books of Chinese medicine. By reviewing these illustrations, it could be gotten that body and spirit being impartible was a notable characteristic in Chinese medicine therapeutics. That was, body regulation could adjust spirit and spirit regulation could also treat body. For example, in Immortals' Massage Knack In Male-female Pediatrics of Zhou Yufan in Ming, hypnody of babies was treated by massaging Yudu acupoint. Both Large and Small Chengqi Decoctions were also recorded to treat muddled and delirious mind and incoherent talk in Illustrations of Major Recipes from Treatise on Febrile Diseases of He Guifu in Qing. And two shoulders prick-acupuncture and anus moxibustion were used to treat uncontrollable nasal discharge, heartache and coma in Plotting for Learning Acupuncture Easily of Li Shouxian in Qing. All above were the typical delegations of body regulation for spirit. While many charms about praying in some books, such as transcript of Heaven Doctor's Charms in Song, Eight Key Points Related to Life-cultivation of Gao Lian in Ming and the transcript of Spread Knack of Heaven Doctor's Praying in Qing, were witness of spirit adjustment for body. Furthermore, many inner health cultivation exercises were introduced in Reference to Immortals' Longevity of Wu Weizhen in Ming, Experience Instruction on Mental Cultivation Methods in External Diseases Therapy of Liu Jichuan in Qing, Illustrations of Physical and Breathing Exercises of Kun Lan in Qing and Essence collection of Hygiene of Tang Huaizhi in the Republic of China, which made the thought of spirit adjustment for body infiltrating into various fields in Chinese medicine, such as health cultivation, disease prevention and treatment. In this paper, body and spirit theory in Chinese medicine was investigated systematically depending on the discussion on their relations, the discovery of the features and treatments of the body-spirit diseases and the modulation of body and spirit.

In the theory of Chinese medicine, it is thought that body produces spirit and spirit controls body. Both body and spirit are the most foundational necessary factors in human vital movement. Body is the material foundation of spirit and spirit is the functional manifestation of body. Spirit, consciousness, thinking activities and sentiment are based on the healthy organic development. Normal function of five viscera and six hollow organs and fluent circulation of full Qi-blood keep normal psychoactivity. Otherwise, the upset psychomotility and damaged sentiment directly interfere in the function of viscera, lead to Qi-blood circulation disturbance, use up essence and blood gradually and cause pathological changes in body.

For instance , incoordination between the spleen and stomach resulting in insomnia and dreaminess , deficiency of QI and blood in the heart and spleen leading to crying tendency due to sadness , fainting caused by hyperactivity of liver-YANG , coma and delirium due to stagnation of phlegm in the heart , and horror resulted from deficiency syndrome of the heart and gallbladder are all examples of spirit damage caused by body injury . While rage impairing the liver , violent joy impairing the heart , anxiety impairing the spleen , grief impairing the lung and great fright impairing the kidney are all examples of spirit damage invading corresponding viscera . Rage driving QI upward , excessive joy relaxing QI , excessive sorrow leading to consumption of QI , terror causing sink of QI , fright disordering the flow QI and anxiety causing QI stagnation are the summary of disorder of QI movement caused by spirit damage . As for essence and blood injury resulted from excessive spirit stimulation and reduced longevity from mind excitation are often the serious results of body injury due to spirit damage .

Therefore , body regulation for spirit or spirit regulation for body becomes one of the characteristics of Chinese medicine therapeutics . On one hand , by drug taken , the coordination and balance get recovery in QI-blood , yin-yang and the functions of viscera . As a result , the mental status is improved obviously . On the other hand , the functional activities of viscera , tissues and organs are improved by adjusting mental status and body injury also recovered . Besides therapy , it is applied generally in routine health cultivation and disease prevention that spirit regulation for body and body protection for spirit . The theory has been an effective guidance for life-cultivation practice thousands of years .

从中医文献历史图像谈中医学的形神理论

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在浩如烟海的中医古籍当中，保存着大量的历史图像。复习这些图像，可以看出中医治疗学上存在着一个显著的特点，那就是形、神二者之间存在着密不可分的关系。通过调形可以治神，通过调神亦可以治形。如明·周于蕃《仙传男女小儿科推拿秘诀》采用按摩鱼肚穴的方法治疗小儿昏睡不醒，清·何贵孚《伤寒论大方图解》以大、小承气汤治神明昏乱、谵语如狂，清·李守先《绘图针灸易学》用挑刺两肩、艾灸肛门之法治流涕心痛、昏迷不醒等，均属调形以治神的典型代表；而宋抄本《天医符录》、明·高濂《遵生八笺》、清抄本《天医祝繇科流传奥旨》等书中的诸多祝由符咒，又是调神以治形的历史见证，加之明·吴惟贞《万寿仙书》、清·刘济川《外科心法真验指掌》、清·昆岚《导引图》、民国·唐怀之《卫生合璧》等书中的诸多内养功法，使得调神以治形的思路渗透到中医养生、防病以及治疗的各个领域。本文从形与神的关系、形神疾病的发病特点和治疗以及形神二者的调理等几个方面，对中医学的形神理论进行了系统的论述和阐发。

中医学认为，形生神，神役形，形与神是人体生命活动过程中不可或缺的两个最基本的方面。形是神的物质基础，神是形的功能表现。人体精神、意识、思维活动以及情志表现，都必须以机体器官的健康发育为基础。五脏六腑功能活动正常，气血流行充盈畅通无阻，人体才能保持正常的精神、意识、思维活动。反之，若精神活动失常，情志受到伤损，又将直接影响脏腑功能的发挥，造成气血运行失调，精血暗自耗伤，形体发生病变。

举例而言，脾胃不和可致失眠多梦，心脾两虚可致悲伤欲哭，肝阳上亢可致昏仆晕厥，痰蒙心窍可致神昏谵语，心胆虚怯可致惊惕不安，皆属由形伤而导致的神伤。而大怒伤肝，暴喜伤心，思虑伤脾，悲忧伤肺，恐惧伤肾，则属因神伤而侵及相应的脏腑；怒则气上，喜则气缓，悲则气消，恐则气下，惊则气乱，思则气结，又为因神伤而引起的气机失调；至于情志过激耗伤精血，精神刺激折损寿命，常为神伤而致形伤的严重结局。

因此，调形以治神和调神以治形就成为中医治疗学上的特色之一。通过服用药物，恢复体内气血阴阳以及脏腑功能的协调平衡，可以使人体精神状态明显好转；而通过调节人体的精神状态亦能使脏腑、组织、器官的功能活动得到改善，使人体的形体损伤得到修复。除治疗外，调神以养形和保形以全神还被广泛运用于日常的养生防病之中，千百年来有效地指导着人们的养生实践。

Tactile Expression in Tibetan Medicine

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There are 9 paintings to express pulse-taking among the 80-painting series of *Sman-thang* in Tibetan medicine, accounting to over 1/10 of the total series. Using figurative and intuitive paintings to express the knowledge of pulse-taking is one of the important characteristics of the development of pulse-taking of Tibetan medicine, expressing a tactility to a visual perception.

Through the research of paintings of pulse-taking in the *Sman-thang*, two points could be pointed out: firstly, the expression of scientific connotation of pulse-taking of Tibetan medicine, for instance, the displaying methods for different locations for pulse-taking; secondly, the application of intuitive displaying methods, for instance, the figurative description of different pulse manifestations.

First, there are 7 detailed paintings in No. 56 painting, describing the different locations for pulse feeling. Viewing from these detailed paintings, except the *mtshon-kan-chag* and dorsal artery of foot recorded in *Rgyud bzhi*, pulses taken at the neck, groin, axillary fossa, and even precordial region of the chest are also put forward. Thus, the locations for pulse feeling extended from two to six all over the body. This evolved process of the locations for pulse feeling, namely, from simple to complicated, inspired us to associate with the evolvement of the locations for pulse feeling in traditional Chinese medicine (TCM), that is, from complicated to simple, just reversed to that in Tibetan medicine.

In TCM, the locations for pulse feeling simplified from a kind of tactility all over the whole body with “three parts and nine manifestations” to *cun-guan-chi* at the wrist only. The reason for this changing include two aspects. On the one hand, taking pulse at the wrist was a rather simple method, and on the other, the influence of Confucianist thoughts in the society of Han nationality was a major reason for this evolvement. With the predomination of Confucianist thoughts in polity, it was very inconvenient or even a taboo for taking the pulse of a woman patients all over her body. Thus, the changing of the locations for pulse feeling from over the whole body to the wrist became a necessary tendency. After the Song dynasty, the appearance of legend of taking the pulse through a

thread tying around the wrist of woman patient was an embodiment of the thoughts of Confucianism.

Before *Sman dpyad zla ba'i rgyal po* (*The Medical Investigation of Lunar King*) appeared in the early 8th century, the locations for pulse-taking, *cun-guan-chi* has been confirmed as the main site for pulse diagnostics in TCM. Thus, it wasn't strange that *cun-guan-chi* was absorbed by *Sman dpyad zla ba'i rgyal po* when Tibetan medicine took its counterpart in TCM as a reference. With the development of Tibetan medicine, different locations for pulse-taking all over the body and their advantage was recognized. Because of the influence of Tibetan Buddhism, there was no restriction whatsoever from Chinese Confucianism in Tibetan society. So, even the drawing of a naked man can be seen in Tibetan paintings, which was basically absent in TCM paintings.

Second, pulse-taking is a diagnostic method relied on touching the patients' relevant locations of pulse beating. It is rather difficult to use a painting to express a kind of feeling. In Tibetan medicine, two ways were applied for solving this difficulty, that is, using the size of the vessel wall to express the strength of pulse beating, and using density of ripple to express the speed of pulse beating. Even so, some pulse still could not be expressed fully, such as deep pulse, slippery pulse, etc.

The appearance of pulse painting in TCM is earlier than those of Tibetan medicine. Formerly, Shi Fa' s *Cha bing zhi nan* (*A Guide to Diagnosis of Diseases*) of the Southern Song dynasty was considered as the first book containing pulse painting. In fact, Xu Shuwei' s *Zhong jing san shi liu mai fa tu* (*Zhongjing' s 36 Pulse Paintings*) of the Southern Song dynasty was the earliest one, and its lost contents was cited and extant in the transcript of *Mai jue mi zhi* (*Secret Contents of Pulse Rhyme*) of the Ming dynasty, called *Mai fa wei zhi* (*Profound Gists of Methods of Pulse*). For pulse paintings, there are, infact, different characteristics between Tibetan medicine and TCM. For the expression of pulse manifestations, graphic method was used in TCM. Thus, the pulse painting of TCM was simple, rather rough and abstract. Even for the expression of the theory of pulse-

taking, Tibetan medicine has more detailed descriptions than those of TCM, and almost all aspects of pulse feeling were included in *Sman thang*. In addition, the final purpose of pulse painting in Tibetan medicine was for practical teaching, whereas, the real purpose for TCM pulse drawing was ambiguous and appeared very diagrammatic, and not just for expressing the connotation of pulse-taking, this might be the main reason why the pulse paintings of TCM were faded away later, and those of Tibetan medicine have survived the examination of time and still in use now.

藏医的触觉表达法

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在藏医整套共 80 幅的系列挂图 (曼汤) 中, 共有 9 幅专门用来讲述脉诊的内容, 占十分之一强的篇幅。用一种形象直观的图画形式来表述藏医脉学知识的内容, 从而将一种触觉感受转化成一种视觉表达, 这是藏医脉学发展过程中一个重要的特点。

透过藏医曼汤中的这些展现脉学内容的图, 可以看到两个方面的内容。其一, 是藏医脉学科学内涵的表达, 如对藏医诊脉部位的多样化的表现手法; 其二, 是直观化表现手法的运用, 如对各种不同脉象的形象描绘。

首先, 对于诊脉部位的多样化, 在第五十六幅曼汤中有 7 幅小图是描述诊脉部位的, 其中的诊脉部位除了《四部医典》(公元 8 世纪) 中提出的冲、甘、恰和足背部动脉之外, 还提出可以“在尼洛 (颈部) 切上身脉, 在米玛 (股部) 切下身脉, 在乌都切 (腋部) 切中间脉, 判断寿命的长短还可以在胸膛直接切心搏。”由此可见, 藏医的诊脉部位由原先的手腕和足背两处扩展到了全身多处。在藏医脉诊中, 其脉学理论形成之初, 就只提及一处诊脉部位, 即“冲、甘、恰”的诊脉部位。其后, 《四部医典》中提出如果在患者临终前腕部脉搏摸不到的情况下, 可以切摸足背部的动脉。直到《四部医典蓝琉璃》(公元 17 世纪) , 则更进一步提出了可

以在不同的部位，即颈部、腋部和股部切诊不同部位疾病的脉象，甚至可以在胸部的心前区部位直接切诊，并将这一点在曼汤中形象地展现出来。藏医诊脉部位这种由简至繁的演变过程，让人不禁联想到一个很有意思的现象，那就是中医诊脉部位的由繁入简。

中医的诊脉部位由三部九候的遍身诊发展至腕部寸、关、尺的诊脉方法，一方面是因为通过腕部脉搏来诊得脉象是一种比较简单的方法；另一方面，也是更重要的原因，就是汉族社会儒家思想的影响。随着儒家思想在政治上占据统治地位，男女之间自然不便于再用遍身诊这样的诊法来诊断疾病，而且这种遍身诊也的确过于繁琐，在很多情况下并无太大必要。于是，将全身的诊脉部位自然地简化到手腕部的寸、关、尺三部诊脉便成为一种必然的趋势。宋代以后，甚至出现了悬丝诊脉这样的传说，即将一根丝线悬系在病人的手腕上，医生在线的另一端用手指接触即可以了解病情。虽然这仅仅是一种传说，但这却是一种受道学思想影响，使身体暴露部分用于脉诊成为忌讳。

而藏族社会笃信藏传佛教，并没有像汉族那样受到诸多封建礼教的束缚。在《月王药诊》成书的公元8世纪，中医脉诊的诊脉部位已经在《脉经》中确立为寸、关、尺的寸口诊法，而三部九候的遍身诊法已渐渐被弃而少用。藏医在借鉴中医诊脉法的时候，很自然会把这一最重要的诊脉法借为己用。随着藏医学的发展，后世的藏医学家在日渐积累起来的更为丰富的医学经验的基础上，认识到了在必要时，可以在身体不同部位选取切脉点的优点，这样无疑可以更加准确地诊知疾病的状况。从图上可以看到，藏医脉学没有丝毫受到象中医那样的封建礼教的影响，他们所绘的图中，甚至是没有着装的男性患者，这在中医学的医学绘图中是绝对不可能看的到的。

其次，在对各种不同脉象的描绘上，因为脉诊是通过触摸患者相应部位的脉搏的跳动来诊察疾病的方法，所以要尝试通过图形来描绘脉象，将触觉感受转化为视觉效果，这是一个相当困难的课题。脉诊又是一种需要凭借主观经验进行判断的诊断技术，所以古人有“心下了了，指下难明”的感慨。因此，曼汤要准确地将这种触觉的感受转化为视觉的直观形式，是有一定困难的。藏医在解决这一难题中，使用的最基本的两个方法是：在对脉跳的强弱上，以触摸到的脉管的粗细来表达；在对脉跳的速率，即快慢上，则以波纹疏密不同来表达。相对来说，这是一种比较客观的表达方法，便于学习者的理解。当然，不管用什么样的方式，对于一些诸如沉、滑这样有立体感和指下

细致感觉的脉象，还是难于用图示的方法来表现。藏医这种独特的脉象图示法，与中医运用的脉图有很大的区别。

脉象图也存在于中医脉诊中，但与藏医曼汤中的脉图有着各自不同的特点。

中医的脉图出现历史从时间上来说早于藏医曼汤中的脉图。早年的研究一般认为最早的中医学的脉图是南宋·施发的《察病指南》（1241）。但后来的研究发现，南宋·许叔微《仲景三十六脉法图》（1132年以前）堪称今存最早的脉图。其佚文存于明抄《脉诀秘旨》中，名为《脉法微旨》。

中医脉图是一种笼统的说法，现在的研究认为应当分为两种，一种是脉法图，一种是脉象图。前者表述诊脉的部位和方法，是从客观上可以见到的；后者则是表述各种不同的脉象在指下的感觉，只能用喻示的方法来表述，难度很大。例如《察病指南》一书中的脉图就是极为简单的图解式，虽然也有些变化，但却流于过度抽象化，图解化，与脉搏本身并无直接的联系，甚至连脉搏的粗细也无法区分。比较汉、藏两类脉图，可以知道他们无论从风格还是思路都有根本的区别。

就两者的脉象图来说，最大的区别就在于描绘手法的不同。藏医是从平面的角度直观地描述脉象的性质，比较客观化，形象化。而中医则更加着重于对指下脉象的形状进行抽象图示，有的类似从一种脉管的横断剖面即横断的角度进行，比较图解化，但有的却接近一种符号式的会意方式，十分抽象。同时，藏医曼汤中对于脉学知识的描绘毕竟只是整套曼汤中的一部分，而曼汤的出现是以形象教学为目的的，所以，在描述藏医各种脉象的脉象图中所用的示意方法，重点是在用直观的方式帮助学生们完成对理论的理解和记忆，它根本无法、也没有必要去彻底用图画表现每一种脉象的具体性状。在古代的条件下，脉象图只是古人一种积极的脉象总结方式，它对科学客观表达脉象并没有真正的帮助。这也是为什么这种脉像图在南宋创始之后，虽在明、清都有转载和部分发展，但其粗劣程度是每况愈下，故其图像并没有得到普遍的应用和普及，最后甚至成为书籍的一种点缀，宛如历史小说中的绣像图一般。

将脉象用图画的形式来表达，是人们试图用图解的办法来帮助理解那些复杂而抽象的脉象，这对学习脉诊无疑是有好处的。但是，这种图形毕竟只是一种示意图，其中的一些示意方法并不十分理想。从以上藏医和中医脉象图中可以看到，这

种图形对于脉动的强弱和速率表示得比较清楚，而对其他抽象的性状的描述则显得非常模糊，难于用图像的方法来表达。

在脉法图方面，中医脉法图表达的形式过于单一，一般也就是出示两手腕，然后标示寸关尺的位置、对应的脏腑而已。但藏医曼汤中的脉图，则不仅包括了脉法图和脉象图，甚至对藏医脉学的几乎所有理论都有所表述，这其中有些描绘诊脉前准备工作的，脉象与季节、物候、天象的关系等内容也都有所表达，还有描绘各种鬼邪脉的。

这样的效果，如果从两者期望达到的目的上来说，藏医要比中医的脉象图来得更有意义。这也就是为什么虽然中医脉图形成以后虽有传承，但终归日渐衰落，而藏医的曼汤的传承却经久不衰，时至今日仍不失其历史和现实价值，在藏医的教学中广为使用的原因。

论本草书中的写实插图与艺术插图（提要）

郑金生

中国古代有插图的本草书约 40 种，插图数量超过 1 万幅。本草插图旨在方便辨识或制造药物，因此衡量本草插图是否实用，最重要的标志是其写实性。

为了保证药物的安全、有效，准确鉴定药物形态、保证正确药物来源是早期本草一个最重要的学术焦点。由此促进了本草插图的产生。

隋代已出现了“本草图”这一专用名词。唐以前已产生了辅助《神农本草经》的本草图谱。唐代《新修本草·药图》（659 年）则是第一部官修的本草图谱。由于手绘本草图难以传播，唐代及其以前的手绘本草图丧失殆尽，中国本草插图的实际源头在北宋。

1、写实本草插图

北宋·苏颂《本草图经》（1061 年）是古代本草考求药物正确来源阶段最出色的总结，该书依托全国征集来的药物标本和药图素材，编绘成《本草图经》；又利用北宋兴盛的版刻技术，制成黑白版图，流传后世。该书存图 933 幅，其中大部分来自写实，少部分带有示意图性质。宋以后许多本草都曾借鉴或转绘此书之图。

随着古代本草学术主题和学风的变化，写实本草插图逐渐衰落。从元代开始，本草学术探讨的焦点逐渐转向药理和临床用药。随着医、药分业越来越明显，临床医家也越来越少接触到药物的原生状态。因此，《本草图经》以后，写生绘图的传统并未得到应有的发展。即便是明·李时珍《本草纲目》的附图，其水平也远不及《本草图经》。

写实本草图在更需要形态鉴别的植物学、农学领域继续发展。其中最值得称道的写实本草图谱为明·朱橚《救荒本草》（1403-1424）和清·吴其浚《植物名实图考》（1846）。朱橚种植并观察植物，又请专业画工绘制而成《救荒本草》。该书共有 414 种植物图，其中 276 幅图属于原创。该书的插图及注重实物考察的写实风格东传日本，促进了彼邦植物学、农学的发展。《植物名实图考》的写实绘图，成为连接古代与近代植物学的桥梁。

明清医、药分业，药物鉴别的重心从原生状态（基原）逐渐转向药用部位（药材）。由此催生了药材图谱的出现。明·李中立《本草原始》（1612 年）是最早的

药材图谱，绘有药材图 379 幅。其图依据药材写生，甚至展示药材内部特征，图形准确，且配合文字说明，归纳药材鉴别经验。

古代民间医生保持医药不分家的传统，因此反映民间草药的图谱依然以表现药物原生态为主。如清·莫树蕃《草药图经》（1827）、清·刘善述《本草便方》（1870）等书，其图虽然简陋，但皆属写生原创，对药物鉴别仍有重要参考价值。

必须注意的是，明清许多临床药学书籍所附本草图属于装饰插图，并非原创。书商逐利，模仿小说“绣像”，在本草书中附上药物插图。明·陈嘉谟《本草蒙筌》、清·汪昂《本草备要》的原刊本都没有附图，后世书商从其他本草书移植药图。这些插图并非作者原创，故往往图、文不符，张冠李戴。明·李时珍《本草纲目》原图粗糙，后世翻刻者将其插图两次改换，使之面目全非。这是商业利益影响本草插图的表现。

2、艺术本草插图

唐代以前的本草图多被列入艺术珍品。古代美术界的花鸟虫鱼画，很多也是基于写生。所以本草图与艺术画并没有截然的分界线。古代画家以药物为题材的美术作品一直绵延不绝，即便在宋代版刻本草插图盛行之后也从未停止过。南宋·王介的《履巉岩本草》（1220 年）就是由画家写实绘成的本草图谱。该书存图 202 幅，为珍贵的本草写实科学绘图。

本文所说的“艺术本草插图”，不是指具有艺术价值的本草图。其“艺术”二字对应于“写实”而言。经过艺术构思提炼和艺术加工，注重美观、示意，不局限于写实的一类本草图，称之为“艺术本草插图”。它类似当今的“艺术摄影”，可以通过艺术处理，将实有之景物艺术化，也可以组合创造出非实有之景物。

“艺术本草插图”肇始于明《本草品汇精要》（1505），在其后续性彩色本草图谱中又得到进一步的发展。《本草品汇精要》共有药图 1357 幅，由王世昌等八名宫廷画师绘制。大批难以流传实用的彩色本草插图出现在明代，并非本草学自身发展的需要。《本草品汇精要》成书的其特殊政治背景，宣德、弘治间画院的兴盛，促使该书绘制彩色本草图。画院画师参与绘制彩色本草图，决定了其插图偏重艺术的特质。这些明代彩色本草插图一直在画家之间传承、复制，更说明其艺术性受到重视。

《本草品汇精要》据宋《本草图经》墨线药图再敷色仿绘者 699 幅，新增绘药图 668 幅。其中 384 幅常见禽、兽、菜、米谷、虫鱼、果品图，几乎全部来自写

生重绘。这类插图最为精美准确，艺术和学术价值均为上乘，是《本草品汇精要》插图的精华！

该书的“艺术本草插图”也很有特色。它们经常添加背景、虚构形态、增补有
人物活动的场景（含采集、炮制以及相关的社会活动）。具体表现形式有三：1、
绘制 95 幅“辅助图”（内有人物 147 个）。“辅助图”不描绘药物实际形态、却
根据文字展示药物相关的生态、产地、采集、炮制、运用、民俗、传说等内容。
2、根据文字或想象绘制出虚假、怪异的药物图百余幅，例如传说中的“龙”，被
绘成龙骨一药的基原。3、敷色仿绘《本草图经》墨线药图时，采用润饰、“嫁
接”（将药用部位写实图与原图组合）等手法美化原图。总而言之，这些“艺术本
草插图”不受“写实”束缚，充分发挥画师的艺术想象力和艺术表现力。

《本草品汇精要》有两种明代后续性的彩色本草图谱：《食物本草》、《补遗
雷公炮制便览》。这两书中的“艺术本草插图”数量更多、范围广泛。

《食物本草》中的水部、食物品种图等，都是属于“艺术本草插图”。该书还
依据简单的文字描述，想象绘出了数十种错误药物形态图。

《补遗雷公炮制便览》最大特色是新绘了 224 幅药物炮制图。炮制题材为画师
们创作人物活动画（人物竟达 910 人）提供了施展之地。但据考证，其图并非依
据当时炮制工艺写实绘成，多据文字记载想象绘制炮制场景。该书还绘制了 54 幅
辅助图，其中最引人注目的是前无古人的“人部”药图。这部分插图构思奇特，
场景各异，是典型的艺术本草插图。

“艺术本草插图”是介于科学绘图和艺术绘画之间的一类图画，是中国古代本草插
图中的一个特殊现象。由于此类插图无益于表现药物形态，因此本草学术研究者应
注意甄别本草中的写实与艺术插图。但“艺术本草插图”能生动地表现药物某些相
关内容、为本草学增添情趣。且这类图画每多取材于当时的社会活动，为考察古代
的器物、服饰、礼俗、民俗等提供材料。因此，作为艺术绘画，这类插图具有较高
的艺术欣赏价值。

Beauty and Health: Medical Imagery from 20th century China

Zhou Xun

SOAS

Visual documents provide invaluable evidence that both bolsters and supplements other forms of information available to historians. In the 20th century, visual arts featured heavily in the everyday life of ordinary Chinese, not only in cosmopolitan urban cities but also in rural areas. They became an expression of 'modernity'. For the majority of Chinese at the time, being 'modern' (*modeng*摩登) had multiple meanings and appeals, it was often interchangeable with the term 'hygiene'. The word 'hygiene' (*weisheng*卫生) on the other hand could mean 'being beautiful'(*mei*), 'being healthy'(*jian*) or 'being fashionable'(*shishang*). Images of healthy, beautiful and fashionable women, chubby children as well as men full of muscles penetrated into people's homes through advertisements, calendars, popular magazines, posters and photographs. Medical and hygiene products were more than a means to cure and to prevent one from illnesses, or to preserve one's health, but beautiful objects to be desired for and be consumed. On the other hand, many of the everyday items were marketed as hygiene products or medical products from toilet paper to all kinds of manufactured foods.

The present paper attempts to show that the use of visual images was an integral part of the discourse on 'medicine', 'health' and 'modernity' in modern China. In particular, the advent of photography played an important role in the proliferation of health images in China. These images gradually changed ordinary people's ideas of body, health and beauty: the traditional concept of longevity was reconfigured into images of masculinity, full breasts and chubby babies.

Body as commodity

By the turn of the 20th century, hygiene and cleanliness linked to body became commodities and was given prominent consumable value. Such value was promoted through visual advertisements. It is evident that early visual culture of modern consumption in the West was replete with bodily images. Advertisement featured heavily on hygiene and toiletries, first in Europe and America, then in urban Chinese cities, was an integral part of advertisement of the body.

New hygiene practices disdained with 'germ theory' developed in Britain only until well into the 20th century. In pre-modern China, body decoration and hygiene was already an important part of bodily vocabularies marking various social differences, from class, to gender and age. On the other hand gender and age were also vital in day to day hygiene practices for ordinary Chinese. In the first decade of the 20th century, the tone of teachings about cleanliness, bodies (modern), domesticity, and 'civilization' began to change. European-inspired practices of cleanliness were generally accepted in China with other types of 'common sense' about body, health and manners. This shift was partly due to professionalized advertising and the growth of toiletry manufacture began to

have an increasing influence on propaganda about bodily appearance and health. Also the weight and persistence of discourse about hygiene and domesticity had to some degree established European models of bodily behaviour as a form of hegemonic 'common knowledge' for many Chinese. Illustrated text books on domestic and personal hygiene sanctioned by government and endorsed by medical and scientific authorities became an everyday essential reading. It also presumed that women had an innate inclination for this task.

In traditional China, health and longevity was mostly achieved through particular exercise and diet regimes. From the early 20th century however, through the power of advertisement, cleanliness and hygiene could now be purchased, in other words, a 'modern healthy body' could be bought with money. While health was previously linked to the inner self, or the styles of being, now health was marked by keeping clean and consuming hygiene products. The more expensive the products were, the more hygienic and cleaner, thus the more healthy, whereas disease became ultimately linked to being 'dirty', the lack of sanitation, the over crowdedness, the slum and the rural countryside. The new concept of health, cleanliness and hygiene led to social segregation. Rural life, 'traditional' culture, parents and elders, and the urban poor all have been defined in various moments as dirty, repellent, unhygienic and diseased, embarrassing, primitive, or insufficient. Advertisements regularly endowed hygienic products with the ability to give 'health'. They replaced 'traditional medicine' for modern consumers. The commodification of cleanliness and domesticity through new practices of using toiletries: soap, Vaseline and lotions, skin lighteners, cosmetics, perfumes, toothpaste, deodorants, and shampoos subsequently produced 'modern' Chinese bodies. Photo essays were published in popular pictorials instructing 'modern' Chinese readers were instructed on how to use them.

Just as many advertisements for products played on men's concerns about remaining healthy and energetic, the capacity of women to satisfy male demands and organise their households was regularly featured in advertisements. Hygiene products were marketed in terms of glamour, smartness and beauty. Thus being hygienic became marker of feminine beauty and her virtue. While women bore the burden of ensuring their own purity and the purity of their households through the use of soap and other hygiene products, the 'beauty' of their bodies and the 'modernity' of their manners were a major subject of domestic and hygienic training. Women also became 'suffers' of headaches, menstruation pains, stomach pains, tiredness, sadness and of course the most vogue Chinese illness 'neurasthenia', whereas pills promised to give her 'new blood and new health', thus 'new happiness'.

The Modern 'Chinese' Body

By the early 20th century, spurred by new knowledge about human anatomy, the mechanical metaphor featured prominently in modern discourse of the body. The modern body was viewed as a machine, finely attuned with cogs and wheels, with intricate mechanism, which can be adjusted and regulated. Being placed within an industrial landscape, the modern body became a factory;

muscles became representations of strength and power, as well as the future of China. The body of an 'opium addict' on the other hand was seen as a sign of China's present weakness. If China was to emerge as a modern nation and to survive on the world stage, 'the' Chinese men must attain a modern body, a healthy and masculine body - the body of a strong and powerful productive force. Images of men with full muscles covered pages of magazines and newspapers. They became ultimate representation of the modern Chinese man.

For a modern Chinese woman however her body was believed to be different from that of a modern Chinese man: gender differences were to be found in every part of the body. A woman's health was linked to her capacity to reproduce healthy future generations, her ability to raise healthy children and to maintain a healthy home, thus fundamental to the survival of the Chinese race. Photos of healthy brides became a regular feature in women's magazines.

Medical discourses on the other hand described the process of bodily degeneration in the language of modern science. A degenerated body had shrivelled and shrank breasts, it suffered thin blood and started to hoard fat tissues in compensation, leading to a pathological state of obesity (*feipangbing*). This was the case with both men and women. To keep the body in shape, young and full of vitality, Western style physical exercises was recommended by medical journals and culture elites. Sports clubs sprung up in big cities, swimming became a popular pastime for fashionable urban youth, swimming pools and the beach became the most captured theme by photographers. Health and beauty, 'Jian' and 'mei' had gradually merged into one. For a modern Chinese woman being healthy was being beautiful and glamorous, on the other hand a beautiful woman is a healthy woman. Photographs of famous actresses and society beauties became the ideal of modern Chinese women.

Healthy Babies

Better baby contests were an American phenomenon emerged in the early 20th century.³ It began as an eugenic and public health programme teaching parents about child care, hygiene and Sanitation. Its aim was to improve children's health and to prevent racial degeneration. After the World War I, it gradually evolved into the fitter family campaign. In China, fine or healthy baby photo contests (*jiankang ertong bisai*) became widespread in the 20s and 30s. These photo contests became a visual display of the prestige of the emerging middle class – the proud parents. Fine babies and children's photos often appeared in popular pictorials and weekly magazines side by side with photos of screen actresses, society ladies, political leaders, famous artists and wealthy industrialists.

After the Nationalist party consolidated its power in 1927, the concern for national revival became one the main political and social priorities of central

³ For further readings see Annette K. Vance Dorey, *Better baby contests: the scientific quest for perfect childhood health in the early twentieth century*, Jefferson, NC: McFarland 1999.

government. Public health campaigns and sanitation programme were seen as an integral part of the nation's regeneration. Positive eugenics, or known as 'science of superior birth' (*youshengxue*) in China, became widespread. Child Health became an important issue. In 1930s the Child Health Institute was established in Beijing and the Department of Maternity and Child Health in the Central Field Health Station was organised, which oversaw a number of pilot programs in Beijing and Nanjing. One of the programmes was to hold an annual fine baby contest.

Encouraged by medicalised notions of physical perfection, an emphasis was placed on abstract measurements, including the correlation between weight and height.

Measurements and quantifications boosted claims to scientific exactness. Traditional link between health, balance and appearance was reconfigured into sets of figures and statistics. During fine baby contests, mental and physical tests were also carried out. Survival the fittest: the stronger the baby the better.

Fine/healthy babies were the future of Chinese race, as Yan Fuqin put it that the task of national reconstruction 'must fall on the shoulders of the children of China today and of future generation.'⁴ The message on this photo poster commissioned by the Nationalist government was loud and clear.

⁴ F. C. Yen, 'Problems of Public Health', in *People's Tribune*, new series, 23 (1938), p. 117.

**Illustration Explanation of Brief History of Body
Building in Ancient China
Abstract**

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Twenty three series of illustrations pertaining to qigong or physical and breathing exercises between the period of Spring-Autumn and Warring States and 1911, more than 600 pieces, were picked carefully from ancient literatures and the archaeological data of cultural products in Chinese medicine and Taoism. Their content relates to the ways of entering the still condition, expiration and inspiration, and sports. Moreover, with the brief illustration explanation, this paper outlined the general picture of the development of the knowledge of body building and life cultivation in ancient China in era order.

1. QI-promoting Jade Pendant Inscription

It is the earliest in extant cultural products data related to qigong theory in our country. According to the research, it is the work of the later period of the Warring State. It is stored in Tianjin Museum.

2. Painting of Physical and Breathing Exercises

It is a piece of color silk painting unearthed from Tomb 3 of the Han Dynasty in Mawangdui in Changsha in the end of 1973. The primitive painting is 50 centimeters high and about 100 centimeters long. On it, there are 44 men and women exercising with various kinds of postures and actions in four lines. It is a cultural product at the beginning of Han Dynasty, at least not later than the 12th year governed by Emperor Wen in Han (B.C.168) when it was buried. Here is the recovered painting.

3. Five Mimic-animal Boxing

It is five kinds of imitating animal exercises devised by Hua Tuo in the Three Kingdoms period and conducted by the motions of tiger, deer, bear, monkey and bird. The picture is from Chi Feng Sui of Zhou Lvjing in Ming Dynasty.

4. Six Words Rhyme of Treating Viscera

It is a physical exercise for treating diseases recorded in Nature-cultivation and Life-increase of Tao Hongjing in Liang Dynasty. Chui, Hu, Xi, He, Xu, Xi are read silently simultaneously to match with the breath. The illustration is from the carved edition of The Essence of Longevity of Xu Wenbi in the 40th year governed by Emperor Qian Long in Qing (A.D.1775).

5. Yi Jin Classic

It was reported that the classic was created by Monk Bodhidharma in the Southern and Northern Dynasties, but the related recording of words and illustrations appeared after Song. At present, the popular rule of exercise was the one recorded in The Essence of Hygiene of Pan Wei in Qing. At the end of Qing, this rule of exercise was changed to call Wei Tuo Jin Twelve Postures in Illustration Explanation of Complemented Yi Jin and Xi Sui Internal Exercises of

Zhou Shuguan. Now the edition adopted is the block-printed one of Mr. Zhou in 1930 and both its illustrations and words are excellent.

6. Illustrations of Eliminating Diseases with Sitting Posture in the 24 Solar Terms
It was reported that the illustrations were created by Chen Tuan in Song. In fact, the related illustrations were not seen until Ming, in Fairy Writing of Longevity of Luo Hongxian, but the pictures were vague. The Illustrations are from The Essence of Hygiene in China and Foreign Countries of Zheng Guanying in the Gui Si year governed by Emperor Guang Xu in Qing (1893).

7. Sleeping Posture Illustrations of Chen Xiyi

It was reported that the illustrations were created by Chen Tuan in Song. The illustrations here are from Eight Key Points Related to Life-cultivation of Gao Lian in Ming.

8. Ba Duan Jin of Standing Position

It is a series of dynamic exercises composed of eight segments of actions, with the function of health care. The time it appeared should not be later than the Northern Song. The illustrations are from Illustration Explanation of Complemented Yi Jin and Xi Sui Internal Exercises of Zhou Shuguan in Qing.

9. Ba Duan Jin of Sitting Position

Zhongli Ba Duan Jin was first recorded in Ten Books of Xiu Zhen in the Jin and Yuan Dynasties and changed a little later. The illustrations are from the Fang Cao Xuan edition of Illustration Rhyme of Ba Duan Jin of Sitting and standing Posture created by Lou Jie in Qing. The pictures are more exquisite.

10. Shi Er Duan Jin

It is a series of physical exercises derived from Ba Duan Jin and almost fell into the pattern at the beginning of Ming. The illustrations are from the carved edition of The Essence of Longevity of Xu Wenbi in the 40th year governed by Emperor Qian Long in Qing .

11. Illustrations of Physical and Breathing Exercises of Xiaoyaozi

There had the words record of Rhyme of Physical and Breathing Exercises of Xiaoyaozi in The Essence of Xiu Ling compiled by Leng Qian at the beginning of Ming. The illustrations were drawn according to the words in the end of Qing. The present illustrations are chosen from the transcript of The Rules of Eliminating Diseases with Sitting Posture in 1911 compiled by an anonymous author in Qing.

12. Illustrations of Fairy Physical and Breathing Exercises

They came from Real Rhyme of Hygiene of Luo Hongxian. In it, both the illustrations and the words were used together and the prescriptions for exercises were also stated. But the illustrations were not good. 42 illustrations are picked out from another book of Mr. Luo named Fairy Writing of Longevity, and the absent 7 pieces from the transcript of Fairy Forty Nine Prescriptions in Qing.

13. Illustrations of Physical and Breathing Exercises of Ancient Fairy

These are 46 pieces of illustrations named with ancient fairy pertaining to the exercise rules for treating diseases. They come from the carved edition of Chi Feng Sui created by Zhou Lvjing in Ming in Ji Mao year during the Wan Li period (1579).

14. Nine Turnings for Macrobiosis

It was indeed Illustration Research of Palm-rubbing Abdomen for Directing the flow of Qi compiled by Fang Kan in Qing. Later it was put in order and renamed Nine Turnings of Macrobiosis. Present illustrations are selected from Illustrations of Handling Abdomen with Nine Impulsions in Illustration Explanation of Complemented Yi Jin and Xi Sui Internal Exercises created by Zhou Shuguan in the end of Qing.

15. Rhyme of Rubbing Face for Beauty

Both the illustrations and the words are seen in The Essence of Longevity of Xu Wenbi in Qing. The illustrations are extracted from its edition of the 40th year governed by Emperor Qian Long in Qing (1775).

16. Illustrations of Doing Internal Exercises

It is indeed a series of exercises rules of Taoism named Small Circle of The Evolution. The illustrations and the words are recorded in The Essence of Longevity in Qing.

17. Ba Duan Jin for Physio-strengthening

It refers to the eight physical exercises rules, that is, drawing, grasping, pressing, pinching, clenching, pushing, superduct, lifting. The illustrations and the words are recorded in the edition of Two Classics of Yi Jin and Xi Sui corrected by Ma Yizhen in Qing. The illustrations are from the You Zhu Shan Fang edition of this book in the 23th year governed by Emperor Dao Guang in Qing.

18. Illustrations of Regulating Qi to Train Exterior Vital Essence, Spirit and Qi
They are three series of exercises rules of Qi-regulation recorded in Illustrations of Regulating Qi to Train Exterior Vital Essence, Spirit and Qi written by Tan Fu in Qing. The color illustrations are from the edition in Xin Chou year during the Dao Guang period.

19. Illustrations of Taking Qi to Eliminate Diseases

The illustrations are recorded in Illustration Explanation of Taking Qi to Eliminate Diseases written by an anonymous author in Qing. They are selected from the republished edition of the book in the 29th year governed by Emperor Dao Guang in Qing (1849).

20. Eighteen postures of Standing Ba Duan Jin

They are seen in Illustration Rhyme of Ba Duan Jin of Sitting and Standing Exercises created by Lou Jie in Qing. The illustrations are from the Fang Cao Xuan edition of the book.

21. Complemented Illustrations of 12 Exercises of Yi Jin and Xi Sui

The exercises are stated to be done with the postures of frontal position, lateral position, half body, flexion, folding, twisting, handstand, turning over, locomotion, sitting, fixed position and lying position respectively. The illustrations are from Illustration Explanation of Complemented Yi Jin and Xi Sui Internal Exercises of Zhou Shuguan in Qing.

22. Twelve Illustrations of Massage

In Mysterious Methods of Life Cultivation with Massage and Physical and Breathing Exercises created by an anonymous author in Qing, there are 12 pieces of color water-ink illustrations about treating diseases with massage. They are chosen from the Yun Ping edition of the book.

23. Illustrations of Eliminating Diseases with Sitting Posture

They are Twenty Four Illustrations of Eliminating Diseases with Sitting Posture, totally 24 pieces, and seen in the transcript of The Rule of Eliminating Diseases with Sitting Posture which is written by an anonymous author in Qing.

图说中国古代健身简史 摘要

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从中医、道藏等古籍文献及文物考古资料中精选出春秋战国至 1911 年间历代有关气功导引等图片 23 组 600 余幅，内容涉及入静、吐纳、运动等方法，且以简要的图说，按时代顺序排列，勾划出中国古代健身养生发展的历史概貌。

行气玉佩铭：是我国现存最早的气功理论文物资料。据考证为战国后期的作品。藏天津市博物馆。

导引图：1973 年底从长沙马王堆三号汉墓出土的一幅彩绘帛画。原帛画高五十公分，长约一百公分。其上绘有 44 个男女分四行排列练功的各种姿式和动作。汉初文物，至迟不晚于下葬年代的汉文帝十二年（公元前 168 年）。现用复原图。

五禽戏：三国时期华佗编创的虎戏、鹿戏、熊戏、猿戏、鸟戏五种仿生术。图用明代周履靖《赤凤髓》。

六字治脏诀：梁朝陶弘景《养性延命录》记载一种呼吸时配合默念吹、呼、唏、呵、嘘、咽六字口诀治病的锻炼方法。图用徐文弼《寿世传真》乾隆四十年（1775 年）刻本。

易筋经：相传南北朝时达摩和尚所创。宋代之后才出现有关图文记载。目前通行功法是清代潘●（上“雨”下“尉”）《卫生要术》所载者，清末周述官《增演易筋洗髓内功图说》改称“韦驮劲十二势”，现采用图文俱佳的周氏 1930 年石印本。

二十四节气坐功却病图：相传宋代陈抟所传。明代罗洪先《万寿仙书》出现图，但斑驳不清。图选清代郑官应《中外卫生要旨》光绪癸巳（1893 年）刊本。

陈希夷睡功图：相传宋代陈抟所创。图选明代高濂《遵生八笈》。

立式八段锦：由八节动作编成的一套有保健作用的动功锻炼方法。至迟北宋已有此功法。图选清代周述官《增演易筋洗髓内功图说》。

坐式八段锦：金元时期《修真十书》首载“钟离八段锦”，后代稍有变化。现选清代娄杰《八段锦坐立功图诀》芳草轩藏板，图较精美。

十二段锦：从八段锦中化裁出来的一套锻炼方法，至明初基本定型。清代徐文弼《寿世传真》乾隆四十年刻本。

逍遥子导引图：明初冷谦《修龄要旨》有“逍遥子导引诀”的文字记载，至清末据文绘图。现图选自清无名氏《却病坐运法则》1911 年抄本。

诸仙导引图：出自罗洪先《卫生真诀》，图象文字并茂，练功药方兼备，但图不佳，现选罗氏另一书《万寿仙书》图 42 幅，所缺 7 图选自《仙传四十九方》清抄本。

古仙人导引图：46 幅以古仙人命名的治病功法图。图出自明代周履靖《赤凤髓》万历己卯（1579）刻本。

延年九转法：清代方开编录《摩腹运气图考》，经后人整理改名为《延年九转法》。现图选自清末周述官《增演易筋洗髓内功图说》“操腹九冲图”。

擦面美颜诀：图文见于清代徐文弼《寿世传真》，图选该书乾隆四十年（1775年）刊本。

行内功图：即道家“小周天”功法。图文载于清代《寿世传真》。

外壮八段锦：指拉、抓、按、揪、拧、推、举、提八种行功法。图文载于清代马一贞校刊《易筋洗髓二经》，现图选自该书道光二十三年友竹山房藏板。

调气炼外丹图：清代坦夫《调气炼外丹图式》所载的三套调气功法。彩图选该书道光辛丑刊本。

服气祛病图：载于清代无名氏《服气祛病图说》，图选该书道光二十九年（1849年）重刊本。

立八段锦十八式：见于清代娄杰《八段锦坐立功图诀》，图选该书芳草轩藏板。

增演易筋洗髓十二功图：以正身、侧身、半身、屈身、折身、扭身、倒身、翻身、行身、坐身、定身、卧身等姿势锻炼，图选清末周述官《增演易筋洗髓内功图说》。

十二度按摩图：清代无名氏《按摩导引养生秘法》载 12 幅彩色水墨按摩治病图，选自该书云屏藏本。

却病坐运图：24 幅治病坐运二十四图，见于清末无名氏《却病坐运法则》抄本。
