

Miraculous Surgery in a Heathen Land: Medical Missions to Nineteenth-Century China

“No branch of missionary work has proved more successful and profitable in China than medical missions”, claimed Rev. Ralph Wardlaw Thompson, the Foreign Secretary of the London Missionary Society after he had conducted an inspection of the Society’s missionary stations in China in 1883.¹ In the nineteenth and early twentieth centuries, medical missionaries played a significant role in the evangelic enterprise in China. In a conservative country with strong anti-Christian sentiments, many western missionaries regarded the healing art as one of the few effective means of overcoming native resistance to their proselytizing efforts. The missionaries claimed that their medical endeavors were not only charitable but also of profound religious significance because they were imitating Jesus Christ, the “Great Healer”. In his introduction to John Lawe’s ~~Medical Missions~~, William Muir for one described the medical missionaries as “following the example of our Saviour, who Himself, and through his disciples, healed the sick simultaneously with the blessed proclamation that the kingdom of heaven was at hand.” Lawe also attributed a “Christ-like nature” to medical missionary work.² Hence medical missions were not only practical measures of healing the sick but also highly symbolic acts with the connotation of salvation. However, in a different cultural and religious context, symbolically loaded missionary medicine was highly susceptible to alternative interpretations. The Chinese often had very different perceptions and understandings of the medical missionaries’ actions. This paper analyzes the way in which missionaries used medicine in their evangelic efforts and the backlash against it.

The Ideal and Practice of Missionary Medicine

The missionary movement in nineteenth century China was inextricably connected with the Western powers' imperialist activities in China.³ After the Sino-British Opium War, the Treaty of Nanjing was signed in 1843, opening five ports in China for commerce and the residence of foreigners. Since the 1724 imperial edict banning missionary activity in China, this was the first time that western missionaries could again extend their work beyond Canton (Guangzhou), the only trading port between China and Europe before the War. The Tianjin Treaty and the Sino-French Convention of Beijing signed in 1860 which concluded the Anglo-French joint expedition, led to the opening of more treaty ports, granted Chinese subjects the freedom to practise Christian forms of worship, and permitted European missionaries to travel to the interior of China.⁴ However, the missionaries soon found themselves in difficulties. For many Chinese, the demands of the missionaries such as forsaking ancestor worship and "idolatry" were akin to insisting on a radical overhaul of Chinese culture and social order. As a result, they reacted to Christian missions with indifference or outright hostility.⁵

In the 1830s, pioneering medical missionaries in China such as Thomas Colledge and Peter Parker had argued that "medical practice among the Chinese" could "bring about a more social and friendly intercourse between them and foreigners."⁶ After 1850 most of the Protestant missionary organizations were convinced by such arguments. They accepted medicine as a powerful aid to their evangelical enterprise. Several missionary societies held that medical missions should be sent to areas where ordinary missionaries could not secure access to local people. "Medical missionaries", the American medical missionary Robert Coltman Jr. claimed, "are treated more considerately by the Chinese than the clerical, and frequently a medical man obtains valuable concessions for his missions that would not be granted to the clergymen."⁷

Missionary medicine was deployed to placate native opposition and to promote amicable contacts between the missionaries and the natives. China was considered by the missionary societies as the country most resistant to their proselytizing efforts. As a result, the number and activities of medical missionaries in China increased significantly.⁸ In 1874 there were only ten missionary doctors in China. In 1905 the estimated numbers of fully qualified medical missionaries rose sharply to around three hundred.⁹

The medical missionaries often preferred surgical operations producing instantaneous spectacular results which they hoped would quickly attract the natives, convince them of the superiority of western medicine and establish the credibility of the mission. They were interested in patients suffering from huge tumors which the missionaries rarely saw in their home countries, as the removal of large tumors often impressed the Chinese.¹⁰ The effect of such displays of surgical skill was observed by some secular western medical practitioners as well.¹¹ The medical missionaries were also keen on performing surgery to remove bladder stones, which could relieve the patients' pain dramatically. John G. Kerr in Canton was reputed to have operated on more cases of stone in the bladder than any living man at the time.¹² Parker claimed proudly that his successful performance of lithotomy "arrested the attention of the people most powerfully."¹³

Many western medical men in China recognized that, with its dramatic and immediate results, surgery was one of the few aspects of western medicine that could persuade the Chinese of its efficacy. Patrick Manson, the founder of the London School of Tropical Medicine, had observed this. Manson spent his early career in China serving as a medical officer to the Chinese Maritime Customs which was administered by British officers after 1860. At the treaty port Amoy (Xiamen), Manson worked at a hospital supported by Baptist missionaries and European merchants. He said that the hospital was

attended by three classes of patients only viz.: people of any rank suffering from surgical disease, who really believe in our superiority; people in the last stage of incurable disease who apply to us thinking though their own doctors have failed to cure them there may be a chance from the foreigner; and the poor who cannot pay and are in a measure forced to apply to us.¹⁴

The popularity of surgical practice among the Chinese was reported by many western medical practitioners. James H. McCartney claimed that the Chinese showed “a surprising readiness to submit to surgical treatment.”¹⁵ R. G. White remarked that “[p]ractice amongst the Chinese in the majority of serious cases, was of a surgical nature.”¹⁶

The medical missionaries held that Chinese people were good surgical subjects. In 1846 the American medical missionary Peter Parker praised Chinese patients' endurance of pain and their ability to withstand shock.¹⁷ Another American medical missionary, Robert Coltman, also stated that “[t]he Chinese bear surgical operations exceedingly well, and it is rare for high inflammation to follow operative interference.”¹⁸ Many European doctors in China repeated such claims. John Francis Molyneaux said that the Chinese people in Ningpo not only supported surgical intervention, they were also “highly satisfactory subjects” once the surgeon had secured their confidence. He believed that the Chinese “are less prone to inflammatory reaction than foreigners, and they are unquestionably more patient and endure pain with at least equal courage.” The rapidity of the natives' healing processes surprised western medical men such as Molyneaux.¹⁹

Besides the removal of tumors and bladder stones, the medical missionaries also favored the practice of ophthalmic surgery because it could dramatically restore the vision, hence facilitating the process of conversion. It also had the religious connotation of making the blind see, of enlightening people. The Medical Missionary Society in China proudly told its supporters that to

many hundred of human beings, suffering from blindness, perhaps the severest affliction with which it has pleased Providence to visit our imperfect nature, the blessed light of heaven had been restored, the darkness of a long gloomy night dispelled, and the road to happiness and useful industry once more before re-opened eyes. It is the same result as that of the miracle in Scripture, without the inspiration; the triumph of human science over affliction and disease.²⁰

The medical missionaries knew well that the Chinese often regarded western surgery as miraculous. “Though the practice of medicine and surgery among western nations is founded upon *science*, yet, to an uncivilized superstitious nation, it has much of the appearance of a superhuman power.”²¹ In Beijing John Dudgeon observed that some patients and their friends believed that the medical missionaries possessed “almost the power of working miracles.”²² Coltman stated that “[a] brilliant surgical operation is regarded by the Chinese as miraculous and is reported for miles away, increasing in the miraculous element with distance.”²³ There were also theatrical aspects to missionary medicine. The medical missionaries often travelled around, and treated patients on the roadside. Coltman argued

A sure way to build up a fine practice and reputation in any given city is to

itinerate through all the surrounding village, visiting and prescribing for the sick, drawing teeth, and performing minor operations, at the same time telling where you may be found in the city.²⁴

Nineteenth-century scientific spectacles staged before the crowd often required well thought out designs and meticulous preparation to create effortless-seeming dramatic effects.²⁵ To maintain the appearance of wondrous efficacy and convince the Chinese of the superiority of western medicine the missionaries had to act with discretion. As Coltman said, “Much care has to be exercised in the selection of cases for operation at first, as an unsuccessful or fatal operation in a new field would have a very detrimental effect on not only the medical work, but all branches of missions’ work at that point.”²⁶ At Amoy the missionaries noticed that some Chinese patients had “made false statements respecting the dates of the disease” because they knew that the missionary hospital “rejected as hopeless many long standing cases.” As a result, Cumming, the medical missionary in charge of the hospital, advised his colleagues to conduct more careful examination of the patients. “Cross-questioning is not more important in legal than in medical practice...”²⁷ Dramatically successful operations required the careful evaluation and selection of patients.

The medical missionaries also argued that their medical work could bring about other benefits. Parker held that missionary medicine could “promote between [the Chinese] and Europeans an amicable and profitable system of commerce.” He claimed that the superintendent of British trade spoke highly of the Medical Missionary Society in Canton because “the surgeon’s knife was better calculated to conciliate the Chinese than any weapons of war.” Surgery would render the Chinese receptive to other Western imports.²⁸ Christopher Lawrence has observed that there were “similarities between the language of the frontier and the

language of surgery” in nineteenth-century American surgical discourse.²⁹ The frontier mentality could be clearly seen in Parker who nurtured the ambition of opening China to western influences by his surgical knife. For Parker, surgery was as useful as gunboat diplomacy for the penetration of China by trade, evangelical missions and political influence. Parker came to be deeply involved in the politics of Sino-American relations. He eventually gave up his medical mission, and became a diplomat for the United States. In his diplomatic career Parker often advocated using military measures to coerce China to meet western demands, a goal he once claimed to be achievable by western medicine.³⁰

Curing disease, according to the medical missionaries, was just one of the benefits brought about by western medicine. Missionary medicine was part of the grand project of enlightening China. The Medical Missionary Society in China argued that if “an army of philanthropic surgeons” were sent into the Chinese Empire, “the great barriers, ignorance, and prejudice” that existed “would be swept away” without leaving any trace.³¹ Medical missions could, Parker said, “enlighten the empire of China in the sciences of physic and surgery; and spread amongst the vast population of that country, the blessing of Christianity.”³² According to the medical missionaries, the diseases prevalent in China, especially the huge tumors rarely seen in Europe, represented not only individual pathological conditions but also the sickness of Chinese culture.³³ Missionaries blamed the prevalence of disease on the backwardness of Chinese medicine.³⁴ The comments of Benjamin Hobson, who held traditional Chinese medicine in contempt, were typical. He stated that in China, “[a]ll study of animated nature is neglected; error is preferred to truth...” Traditional Chinese medicine was only one of the faults of Chinese culture to which Hobson gave the following description: “Dark superstition and spiritual ignorance at present rest upon the people; the free exercise of thought and intellect is suspended, and all moral

improvement prevented by the withering, benumbing influence of a base idolatry.’³⁵ If the Chinese patients refused surgical treatment, the missionaries often attributed it to the superstition and ignorance they perceived to permeate traditional Chinese culture. From the evangelic point of view, surgery could cure the Chinese of their ills just as Christianity could redeem them from the sins of paganism and superstition.

The Native Backlash against Missionary Medicine

The medical missionaries endowed their medical practice with various positive meanings and claimed that it had brought about numerous progressive effects in China. However, in a strongly xenophobic country, the miraculous dimension of missionary medicine often caused an unexpected backlash. In Hankow the medical missionary complained that

all sorts of opposition, known and unknown, have been brought to bear upon our work. Pasquinades have been affixed to the hospital-gates, vile and infamous libels upon the fair fame of our institution have been uttered, and every other means which could be devised to traduce us in the presence of the people, whose highest good we had come, openly and honestly to seek.³⁶

James L. Maxwell, a Presbyterian medical missionary working in south Taiwan, reported that there was “active hostility on the part of priests, street doctors, and the anti-foreign aristocracy, who are sure to be found everywhere, a hostility taking form in the shape of the vilest accusations, in insinuations of secret poisoning, murder, and other crimes...”³⁷

In the summer of 1867 the natives, incited by rumours, attacked Maxwell’s chapel and dispensary. Subsequently a Chinese catechist of his chapel was murdered by an angry mob.³⁸

In 1871 at Amoy, there was a rumour accusing the missionaries of dispensing magical, poisonous pills to the Chinese. Those who swallowed the pill could only be cured by the missionary hospital.³⁹ Many similar instances were reported by the medical missionaries.

The missionaries seldom revealed the details of the accusations which they deemed too vile to dwell on, but from other sources we can find out what they were. The content of an anti-missionary poster found in Damingfu in 1870 was typical. The poster accused the missionaries of taking the eyes and the hearts of the Chinese for use in alchemical experiments. It even claimed that the missionaries sucked young men's semen and virgins' vaginal secretions and used the body fluids to concoct aphrodisiacs. It denounced the missionaries for drugging and raping Chinese women, and claimed that the missions induced Chinese Christians to take part in orgies.⁴⁰ These outrageous accusations were not uncommon. They, along with the allegation that the missionaries removed fetuses from Chinese women to produce medicine, appeared in numerous anti-missionary pamphlets. These posters and pamphlets were printed in massive number and distributed widely in several provinces. Many anti-missionary riots were provoked by the pamphlets.⁴¹

These wild accusations might sound fantastic, but the vivid images conjured up by the propaganda were obviously convincing to many nineteenth-century Chinese. Between 1860 and 1900 there were several hundred serious anti-missionary incidents that needed to be dealt with by top diplomatic officials of the Chinese government while thousands of minor cases were handled by local authorities.⁴² The torrents of anti-missionary riots finally reached the tragic climax in the Boxer War of 1900. As late as the early twentieth century such anti-missionary rumours still persisted. The American medical missionary Paul Adolph reported that when he went to north China in 1929, many of the Chinese he encountered "were distinctively skeptical of

what we could do and had heard all sorts of tales about us, such as that we were foreign devils who had come to China to scoop out the eyes of Chinese children so as to grind them up for medicine to send abroad.”⁴³

There were several factors that contributed to the Chinese distrust of Christian missions and enhanced the credibility of these wild accusations. First, in China there was a long anti-heterodox tradition. Several Chinese dynasties were toppled or undermined by rebellious religious sects. As a result, the Chinese government not only viewed religious sects with suspicion but also often persecuted them severely.⁴⁴ With many of its creeds and rituals completely alien to traditional Chinese culture, it was not surprising that Christianity was regarded by many Chinese as a heterodox cult. In the sixteenth-century, some courtiers and government officials had tried to label the Jesuits in China as a heterodox sect.⁴⁵ In the nineteenth century the fact that missionaries were from and supported by those western powers that had repeatedly humiliated China only enhanced Chinese hostility and fear.

Second, since the late eighteenth century several mass panics over rumors of sorcery had broken out in China. There were reports of “soul-stealing” perpetrated by queue-clipping sorcerers and of people being attacked by flying objects. In the nineteenth century, such incidents often further complicated the situation. For example, during the 1876 mass panic a group of Chinese Christians was taken for a gang of soul-stealing sorcerers by local people.⁴⁶ The confusion, however, was not accidental. The majority of those who were accused of “soul-stealing” and other forms of sorcery were wandering Buddhist monks and Taoist priests. Because they were strangers from foreign parts and they were considered as being in touch with the supernatural, the travelling monks and priests easily fell victims to local suspicion.⁴⁷ The itinerant medical missionaries who traveled to the countryside to preach and tried to attract the

villagers by dispensing their medicine also possessed these two qualities. Moreover, medical missions often attracted those who were too poor to seek treatment from conventional Chinese doctors. These patients were so desperate that they were willing to take the risk of submitting themselves to the foreigners' unknown medicine. Most of them were from the lower classes and were marginal to the Chinese society. Their background was exactly the same as the followers of heterodox sects.⁴⁸ The compositions of their native followers made the missionaries look all the more suspicious in the eyes of Chinese gentry and local officials.

The Taiping rebellion in the mid-nineteenth-century further strengthened the idea that Christianity was a dangerous heterodox cult. The leader of the Taiping was influenced by the Protestant missionaries and their religious tracts. He had the vision that he was God's second son, the younger brother of Jesus Christ and his mission was to establish a Heavenly Kingdom in China. He launched a violent campaign with the goal of overthrowing the Qing Dynasty along with the traditional order of Chinese society. The Taiping movement was eventually defeated by the Government with equally violent measures. It is estimated that at least twenty million people died during the Taipings' fourteen-year campaign (1851-64).⁴⁹ The incident certainly reinforced the impression that Christianity was a subversive, dangerous, heterodox sect.⁵⁰

The suspicion and fear of Christian missions had an effective agent of propagation. The Chinese gentry held strong anti-Christian sentiments. As an educated class, the gentry were deeply immersed in Confucianism and considered themselves the defenders of Chinese orthodoxy. The missionaries who preached against ancestral worship and other Chinese customs were considered by the Chinese gentry as a threat to their traditions. The social status of the Chinese gentry was regarded as equal to that of local officials and they often acted as mediators between the local governments and the commoners. In fact both government officials

and local literati came from this class. The foreign missionaries, who enjoyed extraterritoriality and other privileges, also often behaved as equals to the local officials. They frequently intervened on behalf of Chinese Christian converts in lawsuits and disputes with local people. The missionaries' education efforts also undermined the Chinese literati's monopoly of the status of teachers. Hence the missionaries became competitors to the Chinese gentry and threatened the latter's prestige. As a result, many of the Chinese gentry vehemently resented the missionaries. The hostility of the gentry caused serious problems for the missionaries. Many anti-missionary incidents were incited by the gentry. With their status and local influences, the gentry was able to mount formidable opposition to the Christian missions.⁵¹

In such an atmosphere of suspicion and fear, the Chinese could easily identify the medical missionaries as witch doctors. Unfortunately for the missionaries, some of their teachings and practices fitted well with traditional descriptions of the sorcery and magic of heterodox sects. In the anti-heterodox campaigns one characteristic accusation against the heterodox sects such as the White Lotus Teachings and the Non-Action Movement (*wuwei jiao*) was that they rejected ancestor worship.⁵² Rejection of ancestor worship was precisely what the Christian missionaries told their Chinese followers to do.⁵³ The spectacular effects of western surgery could easily be taken by the Chinese as a form of magic. Traditional Chinese medicine did not perform anatomical dissection. Dissection of corpses was regarded by the Chinese as mutilation of the dead body and violated a great Chinese taboo. Western medical men's attempts to perform post-mortem examinations on their deceased Chinese patients often aroused great fear and anger among the local populace. Some of the medical men were consequently attacked by angry mobs.⁵⁴ "The superstitious ideas regarding the dead body", the medical missionaries complained, "made the practice of dissection an impossibility."⁵⁵ In the Chinese pharmacopoeia, human flesh

was considered to be a cure for certain diseases, and there were numerous folkloric accounts of pious sons and daughters feeding their flesh to their ailing parents to cure them of a serious disease.⁵⁶ Hence the rumors that the missionaries gouged out the eyes of the Chinese for use in alchemical experiments, and removed the organs of the natives to produce magic pills and opium mobilized long-standing familiar fears.

On the other hand, not all the western medical men in China were happy with the medical missions. Some of the secular medical practitioners were well aware of the problems brought about by missionary medicine, and they criticized it trenchantly. Manson, for example, complained that the theatrical aspects of missionary medicine only impressed the ignorant but failed to convince the educated Chinese. Manson stated: "We heal by working with nature. What is wanted for rapid and general conversion is a miracle. Something theatrical as the removal of a bladder stone from the bladder, the excision of a tumour and such like proceedings impress the ignorant more than something infinitely more difficult and wonderful, such as the elaborate diagnosis of some internal disease."⁵⁷ Moreover, Manson was dissatisfied with the types of patients attracted by missionary medicine. In his hospital report in 1874, Manson lamented that although nearly 10,000 patients had received advice and medicine at the Hospital during the last five years, it still failed to convince the Chinese community of the superiority of western medicine. He blamed this on the practice of dispensing medicine for free. Manson argued that gratuitous medicine only attracted the native poor while making European medicine disreputable in the eyes of the Chinese gentry. He complained that "coolies, opium smokers, soldiers, peddlars, farm labourers, prostitutes, sailors, beggars, waifs and strays form the staple of our practice".⁵⁸ For secular medical men such as Manson the goal was the establishment of the practice of European scientific medicine in China, and they modeled their professional identity

upon that of their metropolitan counterparts. Winning the trust of the Chinese gentry was essential for establishing the credibility of western medicine. Manson also argued that to render the Chinese appreciative of the value of their medical service, a fee-paying system was indispensable. For Manson, the medical missionaries' practice of dispensing medicine for free and attracting poor and credulous people by exploiting the marvelous appearance of western surgery was harming the western medical enterprise in China.

Conclusion

Healing was, and still is, an act often rich in symbolic significance. However, symbols could be read in different ways, especially when transported to other cultures. For the missionaries the parallel between healing the body and saving the soul was a symbolic one. Although the medical missionaries compared their activities to that of Jesus Christ and the apostles, they knew well that they were not performing miracles. "What he was pleased to do by his Divine power, and what they did by miraculous endowments, no one can in these days pretend to effect." The missionaries claimed to be "commanded and encouraged to imitate them, by the use of such means as knowledge and the exercise of a genuine charity..."⁵⁹ The missionaries regarded the effectiveness of their medicine as a great achievement of Christian civilization, but they did not consider it as containing anything supernatural.⁶⁰ However, the Chinese often failed to appreciate such distinctions. Many doctrines of Christianity were alien to polytheist Chinese society. The missionaries' attempts to exploit the spectacular aspects of western surgery further added to the confusion.

From the Chinese perspective the marvelous and spectacular elements of western surgery

easily rendered it indistinguishable from magic. In a tense and hostile atmosphere misunderstandings frequently led to explosive results. The anti-missionary Chinese gentry employed cultural resources such as folklore, literature and Chinese medical theories to stigmatize western medical practice as a form of sorcery. Although the missionaries tried to impose religious and symbolical meaning on western medicine, the natives were able to provide alternative interpretations and subverted their efforts. Demarcations between medicine, religion and magic could easily be blurred at cross-cultural encounters.

¹ Ralph Wardlaw Thompson, London Missionary Society, Deputation to China, March 30 to June 16, 1883 (London: Alexander & Shephard, 1885), p.5.

² John Lowe, Medical Missions: Their Place and Power (Edinburgh: Oliphant Anderson & Ferrier, 1895, 4th ed.), pp. vi, 147.

³ For a general survey of the missionary movement in China, see Kenneth S. Latourette, A History of Christian Missions in China (New York: Macmillan, 1929).

⁴ See Frederick Wakeman, Jr, 'The Canton Trade and the Opium War' in Denis Twitchett and John Fairbank (eds.), The Cambridge History of China, vol. 10: Late Ch'ing, 1800-1910, Part 1 (Cambridge: Cambridge Univ. Press, 1978), pp.163-212; Peter J. Cain and A. G. Hopkins, British Imperialism: Innovation and Expansion, 1688-1914 (London: Longman, 1993), pp.422-446. On the locations and the opening dates of the Treaty Ports see Andrew N. Porter, Atlas of British Overseas Expansion (London: Routledge, 1991), p.92. For a reproduction of the content of the Treaties see William F. Mayers, Treaties Between the Empire of China and Foreign Powers (Shanghai: J. Broadhurst Tootal, 1877), pp.1-48.

⁵ For a discussion of the difficulties encountered by the missionaries in China see Paul A. Cohen, “Christian Missions and their Impact to 1900,” in Twitchett and Fairbank ed., Cambridge History of China (n.4), pp.543-590.

⁶ Thomas R. Colledge, Peter Parker and Elijah Bridgman, Suggestions for the Foundation of a Medical Missionary Society, Offered to the Consideration of all Christian Nations, More Especially to the Kindred Nations of England and the United States of America (Canton: [s.n.], 1836), p.3.

⁷ Robert Coltman, Jr., The Chinese, Their Present and Future: Medical, Political and Social (Philadelphia: F. A. Davis, 1891), p.174.

⁸ C. Peter Williams, “Healing and Evangelism: the Place of Medicine in Late Victorian Protestant Missionary Thinking,” in W. J. Sheils ed. The Church and Healing: Papers Read at the Twentieth Summer Meeting and the Twenty-First Winter Meeting of the Ecclesiastical History Society (Oxford: Basil Blackwell, 1982), pp.271-284. See, in particular, pp. 271-276.

⁹ Cohen, “Christian Missions,” (n.5), p.574.

¹⁰ Peter Parker, The Fourth Quarterly Report of the Ophthalmic Hospital at Canton, for the Term Ending on the 4th of November, 1836 ([s.l.]: [s.n.]; 1837), pp. 4-5. See also Coltman, The Chinese (n.7), pp.43-44. British medical missionaries in Africa also favored such practices. See Megan Vaughan, Curing their Ills: Colonial Power and African Illness (Cambridge: Polity Press, 1991) pp. 58-59.

¹¹ “Dr Alexander JAMIESON'S Report on the Health of Shanghai for the half year ended 31st March 1881,” Medical Report of the Chinese Imperial Maritime Customs. (hereafter cited as Medical Report), 1881, No.21: 78-97, on pp.92-94; 'Dr. C. BEGG'S Report on the Health of Hankow for the half year ended 31st March 1881', Medical Report, 1881, No.21: 44-47, on pp.46-7.

¹² Coltman, The Chinese (n.7), p.175.

¹³ Peter Parker, Notes of Surgical Practice Amongst the Chinese (Edinburgh: Sutherland & Knox,

1846), p.2.

¹⁴ Minutes of a meeting of the friends and supporters of the Amoy Chinese Hospital, 1874 (Amoy: A. A. Marcal, 1875), p.4

¹⁵ “Dr. James H. McCARTNEY'S Medical Report on Chungking,” Medical Report, 1891, No.42: pp.13-16, quoted from p.14.

¹⁶ “Dr. R. G. WHITE'S Report on the Health of Chinkiang for the year ended 31st March 1881,” Medical Report, 1881, No.21: 98-100, on p.100.

¹⁷ Peter Parker, Surgical Practice (n. 13), p.2.

¹⁸ Coltman, The Chinese (n. 7), p.153

¹⁹ “Dr John Francis MOLYNEAUX'S Report on the Health of Ningpo, for the half year ended 31st March 1894,” Medical Report, 1894, No.47: 10-13, on p.12.

²⁰ The Medical Missionary Society in China with Minutes of Proceedings, Officers, &c. Also an Appendix Containing a Brief Account of an Ophthalmic Institution at Macao for the Year 1827, 1828, 1829, 1830, 1831, 1832 (London: Royston & Brown, 1839), p.58.

²¹ Peter Parker, Statements Respecting Hospitals in China (London: Edward Suter, 1841), p.3.

²² John H. Dudgeon, The Third Annual Report of the Peking Hospital under the Care of J Dudgeon, M.D.C.M. for the Year 1864 (Peking: James Ly and Co., 1865), p.9.

²³ Coltman, The Chinese (n. 7), pp.174-5.

²⁴ *Ibid.*, pp.174-5.

²⁵ Faraday's public demonstration of experiments is a good example. See David Gooding, “In Nature's School: Farady as an Experimentalist,” in David Gooding and Frank A. J. L. James ed., Faraday Rediscovered: Essay on the Life and Work of Michael Faraday, 1791-1867 (Basingstoke: Macmillan, 1985), pp.105-36.

²⁶ Coltman, The Chinese (n. 7), p.174.

²⁷ W. H. Cumming, "Report of the Dispensary at Amoy for the Year 1846", in Report of the Medical Missionary Society in China for the Year 1847 (Victoria: Hongkong Register Office, 1848), p.30.

²⁸ Parker, Statements Respecting Hospitals (n. 21), pp.15-16. Most of the cases reported by Parker in this propaganda pamphlet were surgical cases, *ibid.*, pp.23-6.

²⁹ See Christopher Lawrence, 'Democratic, divine, and heroic: the history and historiography of surgery', in idem (ed.), Medical Theory, Surgical Practice: Studies in the History of Surgery (London: Routledge, 1992), pp.1-47, especially pp.28-31.

³⁰ On Parker's career see Edward V. Gulick, Peter Parker and the Opening of China (Cambridge, MA.: Harvard Univ. Press, 1973); George B. Stevens, The Life, Letters, and Journals of the Rev. and Hon. Peter Parker, M.D. (Wilmington: Scholarly Resources, 1972).

³¹ The Medical Missionary Society in China (n. 20), p.63.

³² Parker, Statements Respecting Hospitals (n. 21), p.15.

³³ Sander L. Gilman, "Lam Qua and the Development of a Westernized Medical Iconography of China," Medical History, 1986, 30: 50-69.

³⁴ Lawe, Medical Missions (n. 2), pp.153-6.

³⁵ Benjamin Hobson, "To the Committee of Friends of the Medical Missionary Society, Hongkong, Communicated by Benjamin Hobson," in Report of the Medical Missionary Society in China for the Year 1847 (Victoria: Hongkong Register Office, 1848), p.35.

³⁶ F. Porter, The First Annual Report of the Hankow Medical Missionary Hospital, in Connection with the Wesleyan Missionary Society under the Charge of F. Porter, M. B. Lon. M. R. C. S. from July 1st 1864, to June 30th 1865 (Shanghai: Presbyterian Mission Press, 1865), p.6.

³⁷ James L. Maxwell, The Medical Mission in Formosa: Report 1867-8 (Birmingham: Martin Billings,

Son and Co., 1868?), p.3.

³⁸ *Ibid.*, pp. 8-10.

³⁹ Patrick Manson, Report of the Amoy Missionary Hospital (Amoy: A. A. Marcal, 1873) p.1.

⁴⁰ Jiao-wu Jiao-an dang (Archives on Church Affairs and Disputes Involving Missionaries and Converts), 5 series (Taipei: Institute of Modern History, Academia Sinica, 1974-1981), Series 2, Vol. 1, pp.265-267. In Japan in the early nineteenth century, there were similar rumors of European men collecting vaginal juices from Japanese women. See Timon Screech, Sex and the Floating World: Erotic Images in Japan, 1700-1820 (London: Reaktion Books, 1999), pp.284-288.

⁴¹ Cohen, China and Christianity: The Missionary Movement and the Growth of Chinese Antiforeignism, 1860-1870 (Cambridge, MA.: Harvard University Press, 1963), pp.45-60.

⁴² Cohen, "Christian Missions," (n. 5), p.569.

⁴³ Paul E. Adolph, Surgery Speaks to China: the Experience of a Medical Missionary to China in Peace and in War (Philadelphia: China Inland Mission, 1945), p.39.

⁴⁴ For the history of Chinese anti-heterodox traditions and religious persecutions see Cohen, China and Christianity (n.41) pp.3-60; B. J. ter Haar, The White Lotus Teachings in Chinese Religious History (Leiden: E. J. Brill, 1992).

⁴⁵ Ter Haar, *op. cit.*, pp. 219-224, 234-241.

⁴⁶ To discuss the cause of the panics is beyond the scope of this paper, but see the detailed study of the 1768 mass panic over "soul-stealing" in Philip A. Kuhn's Soulstealers: the Chinese Sorcery Scare of 1768 (Cambridge, MA.: Harvard University Press, 1990). Kuhn's book also contains a brief discussion of similar panics in 1810 and 1876. For a general survey and discussion of sorcery scares and religious persecutions in Qing period see ter Haar, *op. cit.*, pp. 247-288.

⁴⁷ Kuhn, *op. cit.*, pp. 41-48, 105-118

⁴⁸ Cohen, “Christian Missions” (n. 5), p.557; ter Haar, White Lotus Teachings (n. 44), p.220.

⁴⁹ For the history of the Taiping Rebellion, see Philip A. Kuhn, “The Taiping Rebellion,” in Twitchett and Fairbank ed., The Cambridge History of China (n. 5), pp.264-317; Jonathan D. Spence, God’s Chinese Son: the Taiping Heavenly Kingdom of Hong Xiuquan (New York: W. W. Norton, 1996).

⁵⁰ Cohen, China and Christianity (n. 41), p.4.

⁵¹ See Cohen, “Christian Missions,” (n. 5); *idem*, China and Christianity (n. 41).

⁵² Ter Haar, White Lotus Teachings, (n. 44), p. 202.

⁵³ The missionaries often deliberately positioned themselves as the enemy of traditional Chinese culture. See, for example, Rev. John MacGowan, Christ or Confucius, Which? The Story of the Amoy Mission (London: London Missionary Society, 1889).

⁵⁴ Patrick Manson and his brother David were attacked by a mob when they tried to conduct a post-mortem examination on the body of a Chinese. See Philip H. Manson-Bahr and A. Alcock, The Life and Work of Sir Patrick Manson (London: Cassell and Company, 1927) pp.18-9.

⁵⁵ Harold Balm, China and Modern Medicine: a Study in Medical Missionary Development (London: United Council for Missionary Education, 1921), p.22.

⁵⁶ Chung-lin Ch’iu, “Renyao yu xiechi: gegu liaochin xianxiang zhong de yiliao guannian” (The Human Flesh as a Medicine and the Idea of “Vitalism”: the Medical Idea of the Behavior of “Cutting Flesh to Heal Parent” from Sui-Tang Dynasty to Modern China), Xinshixue (New History), 1999, 10.4: 67-116; *idem*, “Buxiao zhi xiao: Tang yilai gegu liaochin xianxiang de shehuishi chutan”(A Socio-Historical Study of the Phenomenon of “Cutting Flesh to Heal Parents” from Tang Dynasty to Modern China), Xinshixue, 1995, 6.1: 49-94.

⁵⁷ Patrick Manson, Report of the Amoy Chinese Hospital for the Year 1873 (Amoy: A. A. Marcal, 1874) p.4.

⁵⁸ *Ibid.*, pp.3-4

⁵⁹ T. R. Colledge, Peter Parker, and E. C. Bridgman, “Address”, in The Medical Missionary Society in China (n. 59), p.26

⁶⁰ Maxwell, Medical Mission (n. 37), p.6; Benjamin Hobson, An Appeal to the Religious and Benevolent Public on Behalf of a Proposal to Establish a Medical School for the Natives of China, in Connection with the Chinese Medical Mission at Hong-Kong ([s. l.]: [s. n.], 1846), pp.3-4.