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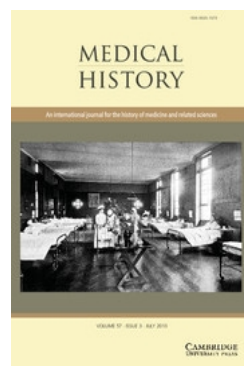
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**Volker Scheid, *Chinese medicine in contemporary China: plurality and synthesis*, Science and Cultural Theory series, Durham and London, Duke University Press, 2002, xx, 407, £18.50 (paperback 0-8223-2872-0).**

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## Book Reviews

several sources. There are also summaries of “Contents” for individual fragments. These are generally useful, especially for long pieces and intricate arguments, although some are repetitious and occasionally misleading. The commentary supplies an impressively rich network of parallels from the medical tradition prior to Diocles, especially the Hippocratic, whose selection is none the less discriminative.

I have one reservation concerning the presentation of the material. Along with the familiar “dubia” (“D”), the collection offers a class of “unnamed” fragments (“U”), where Diocles’ name is supplied either from a previous occurrence of the type “those listed above” or from an authorial formula which demonstrably includes Diocles, such as “the (four) ancients” of the Anonymous of Brussels. Creating a new category is felicitous: what recommends it is a frustrating problem of Dioclean scholarship, namely the collective, non-specific nature of a large part of the material. Views are often attributed to Diocles in groups of “typical ancients” comprising Hippocrates, Praxagoras, Herophilus, Plato, Aristotle and the Stoics. Since pointing out individual items in these collective creations cuts across all the kinds and degrees of uncertainty represented by “D”, “U” and doubtful attributions, it may have been even more felicitous to gather the “Collective” rather than the “Unnamed” testimonials in a separate class.

For a work of such complexity there are remarkably few misprints and errors. One could disagree on various details of translation and interpretation; object to the alternation of standard and small type, especially within one, two or three lines, or when the large print does not make sense without the small; or quibble about the thematic ordering of fragments where a “main theme” is hard to detect, or where provenance from Dioclean works—the criterion of Wellmann’s edition, wisely rejected by van der Eijk—still clashes with the thematic criterion. But eliciting comments and criticisms is proof of the book’s huge impact on the future of our studies, and the main point to be made is that from now on this will be the authoritative

reference edition of Diocles. Van der Eijk has produced an indispensable source-book for anyone working in ancient medicine which is a tremendous addition to the rapidly growing field of fragments literature.

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**Volker Scheid,** *Chinese medicine in contemporary China: plurality and synthesis*, Science and Cultural Theory series, Durham and London, Duke University Press, 2002, xx, 407, £18.50 (paperback 0-8223-2872-0).

Is inconsistency of practice and lack of systematization a sign of the inferiority of Asian medical systems? Is it a failure of contemporary practitioners to understand a more coherent ancient tradition, now shrouded by time? Or does the stunning array of modern and ancient theories and techniques available under the rubric of Chinese medicine allow creative freedom to the medical artisan, are they “flexible tools in the hands of skilled practitioners”? Working with some of the elders of Beijing’s medical community through the 1990s, Scheid brings his extensive experience as practitioner and medical anthropologist to a new analysis of the multiplicity of phenomena called Chinese medicine.

In six distinctive, yet interrelated essays Scheid explores many factors that have come to bear on the development of contemporary medical practice in China. With detailed and intimate description of such aspects of practice as case history writing, innovative theories and techniques, practitioner training and patient choice, Scheid places himself at the vanguard of a handful of researchers engaged in remedying the over-simplified portrayals of Chinese medicine inherent in common polarities: Western scientific theory versus Chinese pragmatic knowledge, tradition versus modernity or “holism” versus reductionism.

Arguing convincingly for the diverse nature of Chinese medicine and incorporating a concise

and lucid account of the synthesis of tradition and modernity in local practice, Scheid devotes the whole of his first section to methodology. Rather than perpetuate belief in the objectivity of these illusory polarities, he demonstrates how Chinese medicine is constantly reinvented; a complex negotiation of global and local pressures, simultaneously shaped by international standards of modernity, market forces, the Socialist State, respect for tradition and time-honoured forms of textual learning and evolving social networks.

In his insistence on describing each individual moment of practice as a unique event that contributes to shaping a new and contemporary Chinese medicine, Scheid acknowledges his intellectual debt to science and technology studies, and, in particular, Andrew Pickering's analytical tool, "the mangle of practice". Pickering used the mangle to describe how culture is constantly emerging through and in the process of practice. Scheid is in a privileged position to describe that process for Chinese medicine. As a participant observer, he took informal apprenticeship with one teacher and lived and worked as a physician in Beijing in a range of different settings. Unlike his predecessors in medical anthropology he was in a better position to create a "multi-sited ethnography". We are drawn into a number of historical and social contexts for medical innovation in the twentieth century, and more specifically vignettes of practice and the clinical encounter as they occurred in 1990s Beijing.

Moving from lofty discourse to remarkably particular accounts of the various infrastructures of practice, the six essays include a discussion of the role of the state in establishing new medical institutions and practices. To survive in a rapidly changing society and to defend themselves against a 1929 motion to prohibit the practice of "feudal and superstitious" medicine, local associations of practitioners came together with the common aim of modernizing "traditional" Chinese medicine. United in the face of opposition, they founded Western-style schools, colleges and hospitals, and began to produce learned journals.

In the 1950s Mao Zedong added his voice to the campaign. At a time when China was moving away from the Soviet Union, all things native, self-reliant, and cheap fitted the political agenda, and traditional medicine adapted for service of "the masses" became a source of national pride. By the end of the decade there were many new colleges devoted to developing a modern, scientific form of Chinese medicine that could integrate with Western medicine. Scheid articulates the process of standardization and systematization of tradition across a number of fields. Pivotal to this transition, he claims, is a new emphasis on differential diagnosis where tradition was mined for a set of disease patterns that could not only offer an alternative to the "apparently objective patterns of Western medicine" but was also capable of slowly absorbing Western medical ideas.

Post-Cultural Revolution, the new socialist path embraced economic liberalization and a new medical marketplace based on technological advances and in urban hospitals. Thus the decade of the 1980s saw Chinese medicine legally instituted as part of a plural health care system. And since the 1990s, the Chinese government has become acutely aware of the economic potential of the globalization of Chinese medicine. As a consequence of limited state provision, the emerging private health care provisions are increasingly independent of ideological and professional control and offer a range of alternatives largely shaped by the demands of the new consumers.

In a series of detailed narratives highlighting the care with which individual patients weigh up their options, Scheid takes us beyond the simple idea that patients choose between clearly defined modern and traditional treatment options. The course of Mr Ke's treatment for nephritis, for instance, is as much defined by the affiliation of his unit to a particular institution, the strictures imposed by his medical insurance policy, by continued therapeutic failure, personal recommendations, and the reputation of departments and individuals as it is by belief in the efficacy of one system or another. In his discussion of teaching, Scheid demonstrates how traditional forms of learning

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have also adapted to the new institutions; the art of networking in China remains critical to becoming an apprentice to an acknowledged master; diagnostic tests, case histories, needling techniques are all cited as evidence for unique syntheses of a plurality of medical systems and traditions.

There is no doubt that Scheid's work has altered the face of anthropological research into Chinese medicine. He also has a serious message for those practitioners of TCM representing (Scheid's emphasis) traditional medicine in the modern world. "What, ultimately, can be gained from restraining Chinese medicine by means of a rationality blind to its own irrational constitution, and gained for whom?" What does an enhanced appreciation of the nuances of Chinese medicine teach us but the value of the art of synthesis in medical practice?—a lesson not just appropriate to Asian medicine. But will his message be heard? Mindful of the difficulties of writing for several audiences he tries to guide the reader to appropriate chapters according to their interest. Here he may well have overestimated the power of the written word. Even the most reflective practitioners of Chinese medicine may find obtuse and irrelevant the discourses of contemporary anthropology, despite their unanimous dedication to the "agency of *qi*".

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**Jeanette C Fincke,** *Augenleiden nach keilschriftlichen Quellen. Untersuchungen zur altorientalischen Medizin*, Würzburger medizinhistorische Forschungen 70, Würzburg, Königshausen & Neumann, 2000, pp. xxxvii, 342, €44.00 (paperback).

Recent years have witnessed a number of happy events in the study of Ancient Near Eastern medicine. One of these was the publication of the book under review, which is a comprehensive investigation of the status, nomenclature, pathologies, and treatments of the eye according to sources written in the

cuneiform script. The bulk of these stem from Mesopotamia (ancient Iraq) and are in Babylonian, but a small number, from Anatolia (ancient Turkey), are in Hittite.

The author, a meticulous and versatile scholar, has digested a large body of relevant scholarly literature, done extensive philological work on primary texts, and also sought to integrate the evidence of the ancient sources with modern medical knowledge. In this, she wisely sought the assistance of the medical profession. The result is impressive, and its value enhanced by the care taken to make the discussion accessible to readers with no previous acquaintance with the civilizations examined. Sources are normally quoted in translation in the main text, and in the original language in the footnotes.

Alongside the medical identifications (which must sometimes be tentative, and may generate debate), the book contains many other valuable thoughts and suggestions, e.g. the idea that the ancients thought coloured vision to derive from the presence of colour in the iris (p. 22). Its discussions of eye-related topics can also be of wider interest. For example, it is shown that Mesopotamians knew an infection could arise from touching the eyes with unwashed hands (p. 48). Further, this is one of the few recent books that tackles Mesopotamian therapeutics, so readers can turn to it for useful information on that topic. The collection and nuanced discussion of evidence for eye operations, a controversial topic, will be read with particular interest. More generally, Fincke's work would constitute an ideal companion to textual editions (which are hitherto lacking), so it is to be hoped that she will publish hers soon.

Throughout, the book has a strong lexicographical bent. In the longest chapter (III), for example, the Akkadian phrases denoting pathological conditions of the eye are examined in alphabetical order (there are roughly 180 of them). Each is translated, discussed, and, so far as possible, equated with modern medical terms. This systematic approach is praiseworthy. Although, inevitably, it involves duplication of the contents of the standard dictionaries of Akkadian, this duplication is fully justified: parts