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La Vertu administrative à l'œuvre :  
hommage à Pierre-Étienne Will

(2)

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## Éditorial

Nous avons le plaisir de proposer à nos lecteurs le second volet de « la vertu administrative à l'œuvre », hommage rendu par ses collègues dans le cadre de notre revue à Pierre-Étienne Will, professeur honoraire au Collège de France, à la suite des essais publiés dans le volume 2015-2. Cette seconde livraison sera plus nettement centrée sur des questions concernant l'histoire des Qing. Elle s'ouvre par une pièce de haute technicité due aux efforts conjugués de Mark Elliott, Cameron Campbell et James Lee. Le nombre total des combattants et non-combattants, mandchous et han, qui formaient la structure très originale des bannières, laquelle permit à la dynastie Qing d'asseoir son pouvoir sur la Chine au xvii<sup>e</sup> siècle, est une question historique dont l'importance ne fait aucun doute. Pourtant, les estimations de la démographie des bannières varient considérablement selon les auteurs s'étant penchés sur la question. Développant une nouvelle méthodologie, nos trois contributeurs s'attachent à montrer que des projections faites à partir de l'effectif militaire donné par les sources anciennes, pour peu qu'on tienne compte des taux de mortalité et de croissance de la population entre le milieu du xvii<sup>e</sup> siècle et les années 1720, permettent d'arriver à une fourchette beaucoup plus juste et précise que celles proposées dans les travaux précédents.

L'administration de la justice pendant le règne des Qing est au centre des trois articles suivants. Rendant hommage et mobilisant la bibliographie critique de la littérature administrative réalisée par Pierre-Étienne Will et son équipe, Jérôme Bourgon s'intéresse à un courant doctrinal particulier qui a exercé une influence dans les manuels pour fonctionnaires sous les Qing. Si son origine remonterait au xv<sup>e</sup> siècle, sa devise *shenxing* illustre la conception d'un usage modéré des châti-

ments. Faisant l'inventaire des traités doctrinaux qui invitaient à cette modération des peines, l'auteur s'attache à établir le noyau doctrinal de ce courant de pensée, montrant comment les pratiques judiciaires s'appuyaient sur des principes des Classiques. La dernière partie, consacrée à l'usage du *Livre des mutations* (*Yijing*) et des hexagrammes judiciaires qu'il contient, donne précisément à voir comment ceux-ci étaient utilisés pour établir des schèmes d'action de modération des peines et comment se construisait, de la sorte, une certaine conception du droit et du rôle de ses représentants.

La modération dans l'administration des châtimens n'est guère illustrée par la suite de notre volume. Les deux articles suivants sont en effet consacrés à deux retentissants procès s'étant terminés par l'exécution capitale de leur principal protagoniste.

Pierre-Henri Durand revient pour nous sur l'affaire Dai Mingshi, sur laquelle il travaille depuis de nombreuses années. Si l'on connaît la lettre séditeuse qui coûta la vie au grand lettré du début de l'époque Kangxi, on sait moins que ses juges l'incriminèrent aussi pour d'autres missives ainsi que pour des préfaces et commentaires à des œuvres littéraires. L'article s'attache à une lecture fine et attentive de ces textes, et propose des traductions de ces six « pièces peccamineuses », montrant comment l'étendue des accusations portées contre Dai allait changer durablement les possibilités d'expression des lettrés sous le règne mandchou.

La seconde affaire capitale dont ce volume traite nous emmène à l'autre extrémité de la dynastie, dans les années 1850. Le ministre mongol Bojun connut alors le douteux honneur d'être le fonctionnaire le plus gradé à avoir été exécuté pour son implication dans une affaire de tricherie aux examens mandarinaux. Luca Gabbiani, à partir de nouvelles sources tirées des archives, reconstitue le déroulement et le contexte de ce cas qui ébranla le monde bureaucratique pékinois, et suscita des rumeurs persistantes de complot. Il montre les liens étroits qu'entretint cette affaire avec les tensions politiques qui traversaient la haute administration Qing confrontée à de multiples crises à l'époque troublée de la guerre des Taiping.

La contribution d'Angela Ki Che Leung écarte de notre champ de vision le sabre du bourreau pour nous inviter à nous intéresser au moins

meurtrier scalpel du médecin. Elle montre comment, dans les années 1860, l'hôpital de Canton, sous l'égide du missionnaire-médecin américain John Kerr, tentait de gagner à la cause des pratiques médicales occidentales un public chinois réputé méfiant à leur égard. Se gardant d'attaquer de front la médecine chinoise, les publications en chinois de l'hôpital, notamment l'« Aperçu des cas médicaux extraordinaires » de 1866, qu'elle analyse en détail, jouaient avec pragmatisme sur le goût chinois pour les phénomènes étranges tout en vantant l'efficacité pratique des techniques chirurgicales amenées par les missionnaires.

Les deux dernières contributions nous entraînent enfin dans le champ, non encore abordé dans l'hommage, de l'histoire religieuse. Isabelle Ang dresse le tableau de l'enracinement dans les sociétés locales du culte du héros taoïste médiéval Xu Xun. D'abord honoré dans son pays d'origine, le Jiangxi, où son temple, le Palais des Dix Mille Longévités et de la Bienfaisance de Jade sut tisser autour de lui, au fil des siècles, un réseau cultuel aux ramifications nombreuses, le culte se propagea à l'époque des Qing en direction du sud-ouest. Un important développement de l'article reconstitue le réseau d'alliances territoriales et commerciales où s'inscrivit, au début des Qing, le culte du dieu dans la région de Chengdu et en direction des marches sud-occidentales du monde chinois le long de la « Route de la soie » du sud. Mais cette pièce d'histoire religieuse et sociale ne nous écarte pas tant qu'il n'y paraît de la violence de l'histoire : les immigrants du Jiangxi et du Hunan, nous rappelle l'article, n'auraient probablement pas trouvé une terre d'accueil au Sichuan et dans le grand Ouest sans les terribles guerres qui dépeuplèrent la région à la toute fin des Ming.

C'est sur une note plus apaisée, et non chinoise, que se termine notre hommage. Jean-Noël Robert, ancien collègue de Pierre-Étienne Will au Collège de France, traduit pour lui une sélection de poèmes ayant pour thème le *Sūtra du Lotus*, qui furent composés par le moine errant du <sup>xii</sup>e siècle Sagyô dans le Japon de l'époque de Heian.

Cette livraison d'*Études chinoises* se clôt, comme de règle, par une sélection de comptes rendus reflétant l'actualité éditoriale en matière d'études du monde chinois. La rédaction tient à renouveler ses remerciements aux traducteurs, relecteurs et évaluateurs anonymes ayant

contribué à ce numéro, et tout spécialement à notre collègue Esther Lin (comptes rendus en chinois) et à Emmanuel Veron pour ses talents de cartographe.

GC, VDD & AM

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Angela Ki Che LEUNG\*

Strategies of a Biomedical Hospital  
in 19th-century Canton:  
Materiality Advertised in *Qizheng lüeshu* 奇症略述  
(Brief Account of Extraordinary Clinical Patterns), 1866

*Résumé – Dans cet article, nous essayons de comprendre comment les premiers missionnaires-médecins présents en Chine s'employèrent à attirer les patients vers les pratiques biomédicales occidentales en matière de chirurgie à une époque où celles-ci étaient encore en Chine marginales et en mal de reconnaissance. En prenant pour point de départ un texte méconnu, le *Qizheng lüeshu* (« Aperçu des symptômes extraordinaires »), le premier texte en chinois à avoir été publié par l'Hôpital de Canton à l'initiative du médecin américain John Kerr (1824-1901), alors directeur de l'établissement, l'article explicite la stratégie de Kerr pour gagner à la cause de ces nouvelles pratiques médicales des patients chinois aux yeux de qui elles restaient encore tout à fait étrangères.*

*Mettant en avant des descriptions illustrées, précises et crues, d'organes malades et d'instruments chirurgicaux « exotiques » concernant plus de 80 cas traités par l'hôpital entre 1858 et 1866, les auteurs du livre s'employaient à vaincre la méfiance du public cantonnais des années 1860 en flattant son goût supposé pour les prodiges visuels ou cognitifs.*

*L'ouvrage, s'abstenant de chercher à convaincre ses lecteurs de la supériorité théorique des pratiques biomédicales occidentales ou celle des institutions hospitalières qui les mettaient en œuvre, choisissait de les rendre attirantes en vantant simplement leur nouveauté et leur efficacité.*

\* Angela Ki Che LEUNG is Chair Professor of History, Hong Kong Institute for the Humanities and Social Sciences, University of Hong Kong. The author would like to thank Dr. Christina Wong for drawing her attention to *Qizheng lüeshu*, and an anonymous reviewer for his/her valuable comments and suggestions on an earlier version of this paper.

*Cette stratégie, qui veillait à ne pas contester la prééminence de la médecine traditionnelle chinoise, semble avoir été couronnée de succès, comme en atteste la nette augmentation des donations faites par des Chinois à l'hôpital à partir de 1867. Le Qizheng luèshu demeure le témoin d'une période remarquable, pendant laquelle médecine chinoise et biomédecine occidentale cohabitèrent innocemment, cohabitation qui devait être radicalement remise en cause par l'introduction de la théorie du germe invisible.*

The history of the reception of early biomedicine in modern China has mostly focused on the indigenization or “Sinicization” of this knowledge, especially anatomy, based mostly on Chinese translations of texts written in European languages and their impact on literati doctors in China from the early nineteenth century onward. Much emphasis has been placed on the translation of the works of Benjamin Hobson (1816-1873) in Canton and Shanghai, and rightly so.<sup>1</sup> Little,

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1. See Benjamin ELMAN, *On Their Own Terms. Science in China 1550-1900*, Cambridge (Mass.): Harvard University Press, 2005, pp. 286-295. CHAN Man Shing 陳萬成 uses the term “Sinicization” instead of translation to describe the rendition of Hobson’s work into Chinese, on which see CHAN et al., “Ming-Qing xi yixue de yishu: yi Xiyi luelun Fuying xinshuo liang ge gaoben wei li” 明清西醫學的譯述：以《西醫略論》、《婦嬰新說》兩個稿本為例 (Revisiting “Collaborative Translating” in Late Imperial China: the Draft Manuscripts of *Xiyi Luelun* and *Fuying Xinshuo*), *Zhongguo wenhua yanjiusuo xuebao* 中國文化研究所學報, 56 (2013), 243-292, and CHAN, “Sinicizing Western Science: the Case of *Quantixinlun*”, *T’oung Pao*, 98 (2012): 528-556. A more recent and comprehensive study on the topic is Li Shang-Jen 李尚仁, “Wan Qing lai Hua de xiyi” 晚清來華的西醫 (Western Medicine in Late Imperial China), in *Shengming yiliao shi yanjiushi* 生命醫療史研究室 (ed.), *Zhongguo shi xinlun: yiliao shi fence* 中國史新論：醫療史分冊 (New Interpretations of Chinese History, Volume on Medical History), Taipei: Zhongyang yanjiuyuan, Lianjing chuban shiye gufen youxian gongsi, 2015, pp. 527-567. Li in this paper highlights the frustration experienced by early medical missionaries in practicing surgery (see pp. 551-555). See also GAO Xi 高晞, *De Zhen zhuan: Yige Yingguo chuanjiaoshi yu wan Qing yixue jindaihua* 德貞傳：一個英國傳教士與晚清醫學近代化 (A Biography of John Dudgeon: A British Missionary and the Modernization of Late Qing Medicine), Shanghai: Fudan daxue chubanshe, 2009.

however, has been done on the way that its *practice* was promoted and received in China in the same period, since few historical sources provide relevant information on how such practice was implemented on the ground. This paper is an attempt to understand the ways that early medical missionaries working in China tried to lure Chinese society to the art of biomedical surgery in a period when it was still a new, marginal practice, struggling for recognition.<sup>2</sup> One has to bear in mind that biomedicine was very much the underdog of the late Qing medical landscape, whatever the military and political success of the Western states that were behind its institution. Based on a rare text that was not published for the purpose of teaching biomedical knowledge, as were Hobson's major works, this paper is about the strategies used by early medical practitioners to win over Chinese patients who were either unfamiliar with, suspicious, or thought to be suspicious of biomedicine. The text in question is *Qizheng lüeshu* 奇症略述 (Brief Account of Extraordinary Clinical Patterns), the first Chinese medical text ever published by the Canton Hospital, which came out in 1866 under the supervision of John Kerr (1824-1901), then director of the hospital. This text contains records on medical activities carried out over a key period in the hospital's history, 1858-1866, which shed light on its strategic integration into Cantonese society.

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2. Paul COHEN shows that the rise in missionary medicine in China only started in the 1870s, before which there were only ever a handful of medical missionaries; see Cohen, "Christian Missions and their Impact to 1900," in Denis TWITCHETT and John FAIRBANK (eds.), *The Cambridge History of China. Vol. 10: Late Ch'ing, 1800-1911, Part I*, Cambridge: Cambridge University Press, 1979, p. 574. The sharp rise of biomedicine in China was basically an early twentieth-century phenomenon. An important illustration of the marginality of biomedical practice in Chinese society in the 1870s is Tung Wah Hospital. Established in 1872 by local mercantile elites, the first public hospital to open its doors in Hong Kong was dedicated to *Chinese medicine*—a move that had the full support of the British colonial government, since, even after some thirty years of rule, the Chinese population remained suspicious of biomedicine as practiced in colonial hospitals since the 1840s. See Elizabeth SINN, *Power and Charity: The Early History of the Tung Wah Hospital, Hong Kong*, Hong-Kong: Oxford University Press, 1989.

## The Canton Hospital (1835-1930)

The story of the Canton Hospital is a well-known episode in the history of Western medicine in late imperial China,<sup>3</sup> particularly as the institution developed into one of the major teaching hospitals in China by 1930.<sup>4</sup> The reasons for this missionary hospital's early success in a Chinese city provoked considerable discussion among missionaries and Chinese converts of the time,<sup>5</sup> but very few secondary works have tried to explain the process of the hospital's establishment in Canton.<sup>6</sup>

In the winter of 1835/36, Yale-trained Presbyterian medical missionary Peter Parker (1804-1888) set up the Ophthalmic Hospital in Canton, the only port open to foreign trade in the Chinese Empire before the Opium War. With the support of the Hong merchant Howqua, who lent Parker the building, the hospital opened amidst the foreign factories on San Tau Lan Street 新豆欄, near the Western Gate of the city wall.<sup>7</sup> Parker left the hospital in 1855 upon taking up his diplomatic career.

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3. See COHEN, "Christian Missions and their Impact to 1900," p. 575; LI, "Wan Qing lai Hua de xiyi," p. 529; Harold BALME, *China and Modern Medicine: A Study in Medical Missionary Development*, London: United Council for Missionary Education, 1921; Edward GULIK, *Peter Parker and the Opening of China*, Cambridge (Mass.): Harvard University Press, 1973.
  4. The Canton Hospital was later incorporated into Lingnan University as its medical school. This history is given in detail in William CADBURY & Mary JONES, *At the Point of a Lancet: One Hundred Years of the Canton Hospital, 1835-1935*, Shanghai: Kelly and Walsh, 1935, chapters II, and VIII; K.C. WONG, and L.T. WU, *History of Chinese Medicine: Being a Chronicle of Medical Happenings in China from Ancient Times to the Present Period*, Shanghai: National Quarantine Service, 1936, pp. 314-344.
  5. The complete set of annual reports from 1835 to 1930 is available in many libraries, notably at Yale and Sun Yat-sen University in Guangzhou.
  6. I have made a preliminary attempt to do so in LEUNG, "Jindai Zhongguo yiyuan di dansheng" 近代中國醫院的誕生 (The Birth of the Hospital in Modern China), in CHU Ping-yi 祝平一 (ed.), *Jiankang yu shehui: Huaren weisheng xinshi* 健康與社會：華人衛生新史 (Health and Society: A New History of Health in China), Taipei: Lianjing chubanshiye gufen youxian gongsi, 2013, pp. 41-68, esp. pp. 48-53, 60-62.
  7. This is recorded in Parker's first hospital report; see Cadbury & Jones, *At the Point of a Lancet*, pp. 37-38; WONG & WU, *History of Chinese Medicine*, p. 316.

John Kerr (Jia Yuehan 嘉約翰), also a Presbyterian medical missionary, was to succeed Parker in 1855, but he was held up upon his arrival in China by the death of his wife and the outbreak of the second Opium War, during which the hospital was burnt to ground.<sup>8</sup> Kerr only took over the Hospital in 1858, which was renamed Pok Tsai 博濟 (“Broad charity”) in Chinese and re-built in 1866 on newly purchased grounds in the neighborhood of the Western Gate at Kuk Fau 穀埠. The new hospital amalgamated that established in Kam-li-fau 金利埠 in 1848 by the aforementioned London missionary, Benjamin Hobson, who had left China in 1859.<sup>9</sup> John Kerr ran the enlarged Pok Tsai Hospital until 1899,<sup>10</sup> when he left to build the first mental hospital in China, also in Canton.<sup>11</sup> The years 1858-1866 covered by *Qizheng lüeshu* thus coincide with Kerr’s first working years in the Canton Hospital.

Developing thereafter from a relatively small missionary venture into a full-scale teaching hospital, the Canton/Pok Tsai Hospital was transferred in 1930 to the directors of Lingnan 嶺南 University—a Christian university, began as an American missionary college in 1888, then under a Chinese board of trustees.<sup>12</sup> Today, the Medical School of Sun Yat-sen University in Guangzhou considers itself a direct descendant of the 1866 Pok Tsai Hospital.<sup>13</sup>

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8. Carolyn McCANDLISS, *Of No Small Account: The Life of John Glasgow Kerr*, St. Louis (Mo.): Mausbaug Press, 1996.
  9. WONG & WU, *History of Chinese Medicine*, pp. 361, 372.
  10. The hospital first moved in 1858 to a building rented near southern city gate under the new name of Pok Tsai and, later, to its permanent address on purchased land in Kuk fau 穀埠 in 1866. See CADBURY & JONES, *At the Point of a Lancet*, pp. 116, 121.
  11. CADBURY & JONES, *At the Point of a Lancet*, p. 203.
  12. WONG & WU, *History of Chinese Medicine*, pp. 708-709.
  13. See “Zhongshan daxue yixue bowuguan jianjie” 中山大學醫學博物館簡介 “Brief introduction to the Medical Museum of the Medical School of Sun Yat-sen University” of the catalogue *Yixue Bowuguan* (醫學博物館 Medical Museum). Guangzhou: Zhongshan Daxue Yixue Bowuguan, 2009: 1-2.

### *Qizheng lüeshu* 奇症略述 as Publication

*Qizheng lüeshu* is a unique text: it was the only text written and published in Chinese, by and on the Canton Hospital, by 1866, and it is composed mainly of surgical cases performed in the hospital between 1858 and 1866, including illustrations of spectacular cases involving the extraction of tumors, bladder stones, dead bones, dead fetuses, bullets, etc. While such surgical cases were regularly described in the hospital's annual reports, written in English, they had not been publicized in the Chinese language prior to this book. The book is in two parts of equal length (nine pages recto-verso), both of which bear a preface signed by Kerr, one dated 1863, and the other 1866. Clearly, Kerr had originally planned to publish these as separate books before finally combining the two into a single volume. The book is a fine woodblock print with many striking illustrations, but with little care given to editing the text. There is no uniformity of font or character size, and there is no attempt whatsoever to harmonize linguistic styles. Elegant classical style was mixed with local Cantonese expressions, lending to the impression that the text originated from a mishmash of notes written by multiple writers.

A passionate teacher of medicine, John Kerr started a teaching program in the hospital for Chinese students soon after he took over the Canton Hospital in 1858. By 1868, he claimed that he had twelve pupils in the hospital, and that "the establishment of a regularly organized medical school in connection with the hospital is only a question of time."<sup>14</sup> From the beginning he realized that "the want of textbooks is an obstacle" for his teaching program and began the hospital's publication series. Two of the first translated text books were on chemistry and *materia medica*.<sup>15</sup> Plans to publish or translate

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14. J. KERR, "Report of the Medical Missionary Society's Hospital in Canton for the year 1868", in *Report of the Missionary Society in China for the Year 1868* Hong Kong: De Souza & Co., 1869 : 11

15. J. KERR "Report of the Medical Missionary Society's Hospital in Canton for the year 1869" in *Report of the Missionary Society in China for the Year 1869*, , Hong Kong: De Souza & Co. 1870:17. These two works were the first listed textbooks translated in Chinese and published by the Hospital, see note 17.

more textbooks for teaching purposes continued to fill the subsequent annual reports, and by the early twentieth century, the hospital had published close to thirty such textbooks.<sup>16</sup> A first list of the hospital's publications appeared in the annual report of 1885 on the occasion of the hospital's semi-centennial celebration. The list, in chronological order, included thirteen Chinese translations of biomedical texts from 1871 on, and two English-language texts authored by Kerr himself in 1859.<sup>17</sup> *Qizheng lüeshu* was not included in any such list circulated by the hospital, despite the fact that, as indicated on its cover, it was unquestionably a Pok Tsai Hospital publication. The most likely reason for this omission is that this text was not intended to be a medical

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16. See J. KERR "Report of the Medical Missionary Society's Hospital in Canton for the year 1870" in *Report of the Missionary Society in China for the Year 1870*, Hong Kong: De Souza & Co. 1871: 3, 6; "Report of the Medical Missionary Society's Hospital in Canton for the year 1871" in *Report of the Missionary Society in China for the Year 1871*, Hong Kong: De Souza & Co., 1872:3; "Report of the Medical Missionary Society's Hospital in Canton for the year 1872" in *Report of the Missionary Society in China for the Year 1872*, Hong Kong: De Souza & Co. 1873: 23 etc. A full list of the hospital's twenty-six Chinese-language publications from 1869-1901 can be found in Cadbury & Jones, *At the Point of a Lancet*, appendix B: pp. 280-283.
  17. The earliest publications were Kerr's English texts of 1859, *Tract on Vaccination* and *Tract on Hernia and Intermittent Fever*, neither of which were translated into Chinese. The translated texts include, chronologically in 1871 *Materia Medica* (by Kerr) *Xiyao lüeshi* 西藥略釋; *Treatise on Diseases of the Eye* (by Kerr) *Yanke cuoyao* 眼科撮要; Gross, etc., *Manual of operative surgery* (by Gross, etc.) *Ge zheng quanshu* 割症全書; *Treatise on Inflammation* (by Kerr) *Yan zheng* 炎症; *Principles of Chemistry* (by Kerr) *Huaxue chujie* 化學初階; 1872, *Essentials of Bandaging* (by Kerr) *Guoza xinbian* 裹札新篇; *Treatise on Syphilis* (by Kerr) *Hualiu zhimi* 花柳指迷; *Treatise on Hygiene* (by Kerr) *Weisheng xinbian* 衛生新篇; 1873, *Symptomatology* (by Kerr) *Neike chanwei* 內科闡微; *Diseases of the Skin* (by Kerr) *Pifu xinbian* 皮膚新編; 1883, *Theory and Practices of Medicine* (by Kerr) *Neike quanshu* 內科全書; 1884, *Manual of Physiology* *Tiyong shizhang* 體用十章 (four volumes by Muxley, Youman); *Anatomical plates* (by Miller, with Kerr's explanations) *Tizhi qiongyuan* 體質窮源. See "Appendix. Semi-Centennial Celebration of the Medical Missionary Society's Hospital in Canton, China in the Preston Memorial Church. December 31<sup>st</sup> 1885", in *Report of the Medical Missionary Society in China for the Year 1885*. Hong Kong: China Mail Office, 1886: 35-37.



textbook, as were those officially listed. The unpolished nature of this text, as a loose collation of raw data on medical cases, suggests that even though its original intent may have been didactic, the lack of a unifying theme and the incomplete pedagogical form probably disqualified it as a useful textbook. Its publication in 1866, unlike the later medical text translations, was not for teaching purposes.

This book, for Kerr, seemed rather to serve the purpose of showcasing the hospital's successful surgical practice to Chinese readers. In Kerr's first preface, dated 1863, he briefly outlines the history of Canton Hospital and lists the different kinds of surgery that had been performed there since, claiming that

"the medical methods of this hospital are not to be kept secret. What this book records, and the several illustrations of the patients are not to show off our intelligence or the dexterity of our hands, but to let the world believe [in our methods] by providing evidence."<sup>18</sup>  
 本局醫法, 不欲秘弗宣。茲編所載, 略將病者形繪出數幅, 非欲自矜心靈手敏, 實欲世人信而有徵

Three years later, in the preface of 1866, Kerr provides more details on the early history of the hospital under Peter Parker and praises Benjamin Hobson for his first Chinese translations of medical texts. Kerr then explains the motive behind the publication:

The [pathological] states of the patients are sketched to illustrate that each of the extraordinary and difficult clinical patterns is treated with a specific therapeutic method and medicine. If the treatment and medicine is correct, the illness can be eliminated. If not, [the patient] will die. Thus [our] technique becomes increasingly precise due to research (*kaojiu* 考究), and our method more prevalent due to promotion (*tuixing* 推行)... For those who want to come to learn, I will surely teach without any reservation to ensure the spread of this learning.<sup>19</sup> 茲略將病者, 形圖繪出, 俾知世間奇難之症, 此病必以此藥法治之, 治得其藥則病可立除, 不得其法, 則坐以待斃, 往住然矣。夫技以考究而日精, 術以推行而愈廣... 有願來學者, 余必不吝訓誨, 冀以廣斯之傳

18. *Qizheng lüeshu* (QZLS), preface, 1b.

19. QZLS II: preface 3a-b.

This well-illustrated medical casebook was obviously conceived as a promotional pamphlet to lure the Cantonese population into learning more about biomedical surgical practices. To do so, Kerr and his Chinese pupils highlighted the tangible and material over the theoretical aspects of biomedicine. They highlighted theatrical surgical performance, body parts and instruments in the conviction that these, more than anything else, would capture the curiosity and interest of their intended audience who were also potential financial supporters of this foreign institution.

### “Extraordinary” Surgical Performance, Body Parts, and Instruments

The main idea that knits the *Qizheng lüeshu* together as a book is encapsulated in the title: *qi* 奇, “the extraordinary.” John Kerr and his pupils were highlighting, first, the extraordinary medical conditions lived through by their patients and, second, the ways that these were treated by extraordinary surgical methods. Most of the eighty-seven surgical cases from 1858-1866 described in this book are described with physical details: readers are given precise descriptions of either the ailments (tumors, cataracts, bladder stones, stillborn fetuses, dead bones, swollen limbs, etc.) or the instruments used for treatment (knives, needles, tongs, forceps, bandages, etc.). Descriptions of surgical procedures are succinct but graphic, meant to shock and impress readers. Immediately after the preface of part 1 is an open invitation for readers to visit the hospital where

Big tumors, breast lumps, bladder stones, bullets, and corrupted bones extracted during extraordinary and difficult surgeries for strange cases are displayed in porcelain containers. We also have a complete set of human skeleton, with the four limbs and all body parts. For those who study medicine, you are welcome to come and share our interest in studying human bones, joints, and ligaments.<sup>20</sup> 大肉瘤、乳癰、沙淋石、砲傷彈子及一切腐骨，現將磁罐

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20. QZLS I: 1a.

收藏。又有人骨成副，四肢百體，無不全備，諸君學醫，欲將骨幹筋考較詳明，請到本局便得概見。

The book thus begins by presenting the hospital was an exciting museum of body parts for a public that was thought to be unfamiliar with the “real” anatomical structure of the human body and surgical technology designed to treat it. In the same spirit, Kerr in this period openly practiced post-mortem dissections in the hospital yard. For him, doing this “without any attempt at secrecy, the public mind may be gradually familiarized with dissection as an essential part of medical education.”<sup>21</sup>

Bladder stones are the main “extraordinary” objects on display in the *Qizheng lüeshu*. Samples of stones extracted are given precise information on their shape, weight, and quantity, as well as the name, sex, age, together with native place of the patient. The very first case, for example, documents a 61-year old man, Li Yaxiang 黎亞向 from Zengcheng, 增城 who underwent surgery on the 24<sup>th</sup> day of the 6<sup>th</sup> month of 1863: “His bladder was cut open with a sharp knife and seven stones were extracted with forceps, with total weight of two *liang* 兩, one *qian* 錢, and six *fen* 分. (75 grams)”<sup>22</sup> The description is illustrated with a sketch of the seven stones (Figure 1). “Big tumors,” however, are the objects of the most striking illustrations. One finds, for example, a full-page illustration of a breast tumor “shaped like a pig-head,” and weighing 7 *jin* (1.2 kg), extracted from a 38-year old woman — Liao 廖 from Canton city — in the 9<sup>th</sup> month of 1863 (Figure 2).<sup>23</sup> Kerr is also keen to show his readers the skillful extraction of “dead bones” (枯骨 *kugu*), such as the piece removed from the right arm of a 15-year old boy, which he illustrates with a detailed sketch.<sup>24</sup> The illustrations of grotesquely swollen limbs (Figure 3), on the other hand, are more for the purpose of rousing readers’ curiosity than of showcasing the

21. F. WONG “Report of the Medical Missionary Society’s Hospital in Canton for the Year 1867”, in *Report of the Medical Missionary Society in China for the Year 1867*. Canton, 1868: 16.

22. QZLS I: 1b-2a.

23. QZLS I: 3b-4a.

24. QZLS II: 11b.

hospital's therapeutic successes, as the book admits that "only 20 or 30% of [these] cases could be cured."<sup>25</sup>

Graphic textual descriptions of "extraordinary and difficult" surgeries could shock even more than illustrations, as demonstrated by the case of a woman who had struggled for two days with a difficult birth:

The baby's face was visible but its head was stuck between its shoulders... in a strange position... [After a good while] the baby did not budge, and the condition of the mother was critical... [There being nothing else that we could do, we] introduced scissors and forceps into the birth gate, drilled a hole on the baby's head to let out its brains, and pulled out the body by holding the head with the straight iron forceps. The mother was fine after the operation<sup>26</sup> 見兒面向出...其頭反昂貼在兩肩之間, 睹其勢異...兒仍不動, 此時產婦勢在危急. 細思別無他法...乃用剪鉗探入產門, 在兒頭上鑽一孔(sic. the correct character should be 孔), 使兒腦流出後, 用鐵直夾, 將兒頭夾住取出. 其母遂安存無恙

Yet another case, which involved sewing back the ear of a 28-year-old woman who was cut by her husband, demonstrates the sort of domestic violence witnessed by the hospital in Canton and, importantly, the surgical skill of the doctor, who could boast that "no traces of cutting are visible after the operation."<sup>27</sup> 此耳如常人一般, 並不見有割斷形迹.

Another feature of these case descriptions is the emphatic mention of the instruments used. The compilers always specify the instruments used in the operations, be they needles, knives, scissors, or forceps. Though in Chinese the verb *ge* 割 "cutting" implies a knife, the *Qizheng lüeshu* inevitably mentions "a sharp knife" in connection with "cutting," as if this redundancy was necessary. The case of a 13-year old boy suffering from bladder stones in this regard:

[He] had been suffering for six years from bladder ailment with extremely painful urination. He came for treatment on the 11<sup>th</sup> day of the 4<sup>th</sup> month of the first year of Tongzhi (1862). On the 28<sup>th</sup> of the month, [we] used a sharp knife to cut open his bladder, and extracted with forceps a big piece of stone weighing two *liang* sharp (64 gr). He recovered on the 27<sup>th</sup> day of the 5<sup>th</sup> month and returned

25. QZLS II: 16a, 17a-b.

26. QZLS I: 4b-5a.

27. QZLS II: 13b.

home.<sup>28</sup> 染砂淋症,小便甚痛,起有六年。於同治元年四月十一日到本局就醫。至四月廿八日,用利刀在膀胱上割開鉗出砂一大粒,重二兩無零。至五月廿七日全愈回家。

Other instruments are mentioned in more minute detail, such as the silver catheter used to detect bladder stones, the dental forceps used to extract teeth, the needles used to treat cataracts, and the long and narrow bandages used for “the tight fastening” of swollen limbs.<sup>29</sup> Kerr and his pupils were also keen to illustrate the latest “extraordinary” instruments they were using in various operations, such as the steel ring clip for keeping the small intestine in place for hernia patients (Figure 4)<sup>30</sup> and the obstetrical forceps used for pulling out dead fetuses during difficult childbirths (Figure 5).<sup>31</sup>

Clearly the authors of this book knew exactly what was of visual and cognitive interest to Cantonese readers in the 1860s: things that would capture their attention and imagination. This text does *not* showcase, for instance, the instruments or materials related to the Jennerian vaccination that the hospital continued to provide after its introduction in Canton in the first decade of the nineteenth century,<sup>32</sup> and this is perhaps because its commercialization and popularization by indigenous vaccinators had since stripped it of its novelty by the 1860s.<sup>33</sup> In the eight-page English-language *Tract on Vaccination* of 1859, Kerr indeed tells us that, to the American doctor, this routinized technique still required proper teaching to his pupils but that it was no longer a symbol of the novelty of Western medical technology capable of fascinating a Cantonese readership.<sup>34</sup>

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28. QZLS I: 6a.

29. QZLS II: 4a; 12a; 13a; 16a.

30. QZLS I: 7a.

31. QZLS II: 8a.

32. Vaccination, though a much celebrated Western technology introduced in China since the first decade of the 19<sup>th</sup> century, is mentioned as one of the hospital's regular services, but only briefly in the first of the book's prefaces. It was clearly no longer the “selling point” of the hospital.

33. Angela Ki Che LEUNG, “The Business of Vaccination in Nineteenth Century Canton,” *Late Imperial China*. 29.1 Supplement (2008), 7-39.

34. Kerr's *Tract on Vaccination* is listed together with a six-page tract of the same year on hernia and intermittent fever by the same author in the 1885 Annual report of the hospital, p. 35 See note 17.

## Redressing Immorality

Another of the Canton Hospital's services highlighted in the *Qizheng lüeshu* is the treatment of the ailments of debauchery, which also qualify as "extraordinary." The preface to part 2 provides a list of such clinical patterns as wasting (*gan* 瘡) and deep-rooted boils (*ding* 疔) caused by syphilis, various somatic damage due to leprosy, alcoholism, and opium addiction, as well as external wounds caused by violent behavior.<sup>35</sup> Of these, the treatment of syphilis and opium addiction stood out in particular for their moral implications. The hospital, for example, had to amputate half the penis of a 47-year old syphilis patient in the 3<sup>rd</sup> month of 1865, as the year-old boil developing on the glans could not be cured. John Kerr later published an entire monograph in Chinese on the ailment, using it to propagate his own religious convictions as concerned monogamy and sexual restraint.<sup>36</sup> More complex still were the moral implications of opium addiction. The authors of *Qizheng lüeshu* first address the issue of opium importation by justifying it as a normal activity of global trade, placing the blame of addiction on the consumer:

As China already knows that opium is harmful, why is it that it buys this harmful product with such enthusiasm? ... The harm of opium is thus brought to China by the Chinese themselves, and not by Westerners. ... We Westerners have repeatedly advised Chinese not to get addicted, and yet they fail to do so. Why is that so? Those who want to undergo detoxification are few ... We wish that people will not give up and come to our hospital for detoxification.<sup>37</sup> 中國既知烟能害人,何以偏向害人之貨,爭先售買?...是鴉片之害,乃中土人之自害而非西人之故害,可知矣...吸食鴉片之患,我西國人屢屢

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35. QZLS II:1a-b.

36. QZLS II: 11a. Syphilis seems to have been one of the major ailments treated by the hospital, despite the small number of cases reported in this *Qizheng lüeshu*. On p. 8 of the 1863 Hospital Report, Kerr clearly shows concern for the number of syphilis patients who had obstinate ulcers. Kerr eventually published *Hualiu zhimi* 花柳指迷 (Treatise on Syphilis) in 1872, a Chinese-language monograph, with full illustrations, expounding the importance of monogamy and sexual restraint.

37. QZLS II: 14a, 15a-b.

為中土人言之...而人卒不肯戒, 何也? 即有願戒者為數亦甚寥寥...吾願人不甘自棄, 早到本局斷除斯害也。

The text then cites five successful cases of opiate detoxification treated with unspecified medicines provided by Canton Hospital, the majority of which are said to have taken less than a month.<sup>38</sup> By justifying the global opium trade as legal business, blaming Chinese addicts for their moral weakness, and providing a cure for their addiction, the hospital was clearly attempting to address this sensitive political and moral issue while at once justifying its very existence in Canton after the two Opium Wars.

### “Innocent” Coexistence of Two Medical Traditions

Though its purpose was to showcase the “extraordinary” methods and results of biomedicine, *Qizheng lüeshu* demonstrates a clear tolerance of indigenous practices that continued to play a role in Canton Hospital. We know that Peter Parker, its founder, allowed his patients to continue to see “native doctors” and take Chinese drugs, and he even studied their prescriptions.<sup>39</sup> John Kerr, despite his enthusiasm in promoting the art of biomedical surgery, more or less continued Parker’s policy of accepting Chinese medicine even inside the hospital. Some of the cases were even diagnosed with Chinese methods, as seen in the aforementioned case of swollen limbs. In *Qizheng lüeshu*, the cause of this ailment is given as “stagnancy of Wind (*feng* 風) and Cold (*han* 寒), with wet phlegm (*tan* 痰) immobilizing Qi (氣) and Blood (*xue* 血) such that they cannot flow freely,” which is a typically Chinese diagnosis of a clinical pattern; the treatment, however, is mainly external: bandaging the limbs tightly, with regular application of both internal and external medicines.<sup>40</sup> The case description shows that Kerr was not the only doctor treating and documenting patients. He allowed

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38. QZLS II:14b

39. “P. Parker “Ophthalmic Hospital at Canton: 9<sup>th</sup> Report, being for the quarterly term ending December 31<sup>st</sup>, 1838” in *Chinese Repository*. Canton: Printed for the Proprietors 1832-1851. Volume 7 (1838/1839): 573.

40. QZLS II:16a.

local pupils studying at Canton Hospital to use both indigenous and biomedical methods learned there to diagnose and treat patients.

This strategy was probably a natural consequence of the fact that many of Kerr's students already had training in Chinese medicine when they came to study with him. He mentions in particular in 1863 that one of his students was a "native practitioner desirous of acquiring some knowledge of the foreign art of medicine."<sup>41</sup> By 1869 there were also several pupils who were sons of native doctors. With an increasing number of such students, local craftsmen began to make surgical instruments for use in the hospital.<sup>42</sup> In the second preface of *Qizheng lüeshu*, Kerr proudly mentions the star local doctor, Kwan Ato (Guan Tao 關韜 1818-1874), the most famous Cantonese doctor trained in the hospital since the time of Peter Parker,<sup>43</sup> as "knowledgeable in both Chinese and barbarian medicine" 唐番醫學皆通曉. Kerr continues to praise his pupils, saying that "after years of studying Chinese and barbarian medicine, they have acquired the methods of distinguishing clinical patterns (*bianzheng* 辨症) and prescribing medicine (*fayao* 發藥)."<sup>44</sup> *Bianzheng* is of course the Chinese method and term for diagnosis, and the use of this word was clearly a choice made on the part of Cantonese pupils well versed in Chinese medicine.

It was indeed common practice in the Canton region to claim expertise in both Chinese and Western medicine up till the early twentieth century. Take for instance Sun Yat-sen (1866-1925), the founder of the Chinese Republic, who studied with Kerr at the Hospital in 1886-1887 and finished his medical studies in Hong Kong in 1892. Sun named his first private clinic in Macao the "China-West Drugstore" (Zhong-Xi yaoju 中西藥局, 1893-1894) and his second, in Canton, the "East-West Drugstore" (Dong-Xi yaoju 東西藥局, 1894) despite his having been

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41. J. KERR "Report of the Medical Missionary Society's Hospital in Canton for the year 1863" in *Report of the Medical Missionary Society in China for the year 1863*. Hong Kong: Shortrede & Co. 1864: 23

42. J. KERR "Report of the Medical Missionary Society's Hospital in Canton for the year 1868" in *Report of the Medical Missionary Society in China for the year 1868*. Hong Kong: De Souza & Co, 1869: 9-10.

43. QZLS II: 1b. On the life of Kwan Ato, see WONG & WU, *History of Chinese Medicine*, pp. 317-318; CADBURY & JONES, *At the Point of a Lancet*, pp. 50-52.

44. QZLS II:3a-b.



trained exclusively in Western medicine.<sup>45</sup> The Cantonese curiosity for all things foreign had been part of the region's cosmopolitanism from the eighteenth century on, and it probably facilitated the working relations between the first medical missionaries and their pupils, not to mention the early local appreciation of biomedical surgery.<sup>46</sup>

Kerr's most trusted collaborator was also a native Cantonese who had some knowledge of Chinese medicine: Wong Foon (Huang Kuan 黃寬 1829-1878), the first Chinese to have studied medicine in Europe (Edinburgh), and the only Chinese doctor employed by the Imperial Maritime Customs Service. It was Wong who was called upon when Kerr was at a loss facing the difficult child birth, cited above; and it was Wong who saved the life of the mother by extracting the dead fetus.<sup>47</sup> In 1867, when Kerr was absent for a short while, all the surgeries at the Canton Hospital were performed by native doctors such as Wong Foon.<sup>48</sup>

The innocent coexistence of Chinese and Western medicines in the collaboration of Western and native doctors in the 1860s would seem to have developed out of necessity and mutual curiosity without deep questioning on the compatibility of the theoretical premises of the two medical systems. Kerr was fully aware that Cantonese society remained suspicious of biomedicine for more serious illnesses. He

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45. HUANG Yuhe 黃宇和, *Sanshi sui qian de Sun Zhongshan* 三十歲前的孫中山 (Sun Yat-sen before thirty), Hong Kong: Zhonghua shuju, 2011, pp. 498-513. Sun studied with Kerr at the Hospital in 1886 before he moved to Hong Kong to study at the Hong Kong College of Medicine for Chinese, where he graduated in 1892.

46. Two recent works on Cantonese trade illuminate the cosmopolitanism of the Cantonese region: Paul Arthur VAN DYKE, *Merchants of Canton and Macao: Politics and Strategies in Eighteenth-century Chinese Trade*, Hong Kong: Hong Kong University press, 2016, and John WONG, *Global Trade in Nineteenth Century: The House of Houqua and the Canton System*, Cambridge: Cambridge University Press, 2016.

47. QZLS I: 4b-5a. For the biography of this important Cantonese biomedical doctor, see Wong & Wu, *History of Chinese Medicine*, pp. 372-373; Cadbury & Jones, *At the Point of a Lancet*, pp. 116-117.

48. J. KERR "Report of the Medical Missionary Society's Hospital in Canton for the year 1867" in *Report of the Medical Missionary Society in China for the year 1867*. Canton, 1868, p. 15.

wrote in the hospital report of 1865 that the hospital had to focus on chronic diseases, since “acute cases of disease are seldom brought to treatment, and febrile and inflammatory diseases are treated by native physicians, because the people have much more confidence in their own practice for what are called internal diseases.”<sup>49</sup> The Canton Hospital thus found itself a safe niche by specializing in surgical arts of proven efficacy as a complement to Chinese internal medicine. The spectacular theatrical performance of surgical art and the publication on its procedures by the Canton Hospital did not seriously challenge the premises of indigenous medicine. Indeed, before the theory on “invisible” germs was introduced into biomedicine much later in the nineteenth century, negotiations between the two medical traditions in China were conducted on very different premises.

## Untamed Language

In *Qizheng lüeshu*, one sees a rather free use of medical language, e.g. the use of *fan* 番 “barbarian” to describe Western medicine, and the inclusion of Chinese diagnostic terminology and methods. This may be an indication of the limited involvement of Kerr in its compilation, or of the agency of his Chinese disciples in the running of the Canton Hospital. One furthermore sees a sporadic use of the Cantonese dialect, such as *kui* 佢 for *ta* 他 or *qi* 其 (“he/him”) and *talei* 打理 or *fuksi* 服事 for *zhaogu* 照顧 and *cihou* 伺候 (“care”).<sup>50</sup> This is not in keeping with “proper” written Chinese, and it shows the varying literacy levels of Kerr’s Cantonese pupils. These Cantonese terms are used mostly in the descriptions of the care received by patients undergoing surgery. Kerr seemed to attract not only literati doctors to study with him, but also local pupils with little training in the classical language. These reflections of everyday life at the Canton Hospital in the 1860s are conspicuously absent from the medical textbooks published by the same hospital.

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49. J. KERR “Report of the Medical Missionary Society’s Hospital in Canton for the year 1864”, Hong Kong: Shortrede & Co., 1865: 6.

50. QZLS I: 8a.

## Conclusion: a Strategy of Necessity?

It takes a lot of imagination, faced with the current global domination of biomedicine, to understand the challenge faced by early biomedical practitioners in late imperial China. For the Chinese, the emotional controversy surrounding the denunciation of Chinese medicine as unscientific in the 1920s and 30s occupies a central place in the historical memory of medical development in modern China.<sup>51</sup> *Qizheng lüeshu* reminds us however of the very different position in which biomedicine found itself in an earlier period in Chinese history—it reminds us of all the social and financial challenges that it faced despite the inroads it had already made. John Kerr's postface to the *Qizheng lüeshu* summarizes the situation of the Canton Hospital by 1866: during the eight years of Kerr's directorship, beginning in 1858, the hospital was treating, rich and poor, 10,000 to 20,000 patients per year. The increasing number of patients exerted great financial pressure on the hospital, and Kerr thus implored "charitable merchants, and benevolent ladies and gentlemen" to donate money to make this philanthropic enterprise sustainable. Written in Chinese, the target audience of this text was undoubtedly the potential Chinese donor.

The publication of the *Qizheng lüeshu* with its many vivid illustrations of theatrical surgical procedures involving body parts and medical instruments, coincides, as it so happens, with an increase of private Chinese donations in the following year. The Hospital Annual Report of 1866 records a total of \$90 given by three "Chinese subscribers" including a patient;<sup>52</sup> and while there is no data for 1867, one notes that the 1868 report shows 78 "Chinese subscribers" giving a total of \$1,112.32.<sup>53</sup> These Chinese donors include a wide range of Cantonese

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51. For a recent, authoritative study of this controversy, see Sean Hsiang-Lin LEI, *Neither Donkey nor Horse: Medicine in the Struggle over China's Modernity*, Chicago: University of Chicago Press, 2014.

52. J. KERR "Report of the Medical Missionary Society's Hospital in Canton for the Year 1866" in *Report of the Missionary Society in China for the year 1866*. Canton 1867: 25

53. J. KERR "Report of the Medical Missionary Society's Hospital in Canton for the Year 1868" in *Report of the Missionary Society in China for the year 1868*. Hong Kong: De Souza & Co. 1869: 30-31.

social actors from high provincial and municipal officials and local leading merchants and trading groups down to individual men and women, and local shops and businesses. It would seem that Kerr and his missionary colleagues undertook a major fundraising campaign in 1867, following the publication of *Qizheng lüeshu*, because donations from Western subscribers in 1868 likewise increased from \$2,470, in 1866, to \$2,808.68.<sup>54</sup> By means of comparison, Chinese donors from 1862 to 1866 only ever accounted for around less than a hundred to a few hundred dollars per annum.<sup>55</sup> The great fundraising success in 1868 may indeed have something to do with the strategic promotional efforts on the part of Kerr and his colleagues as illustrated by *Qizheng lüeshu*.

By visualizing the practical and material aspects of biomedical surgical technology as novel, spectacular, and effective, by involving practitioners versed in the indigenous medical tradition, and by speaking the local dialect, the Canton Hospital seems to have captivated the curiosity and gained the confidence of post-Opium War Cantonese society. For some eighty years after the establishment of the hospital in 1835, increasing numbers of Cantonese came to have their chronic illnesses treated by these “extraordinary” surgical techniques, and the Cantonese public grew increasingly convinced of the potential of Western anatomy and surgery to supplement weaker aspects of (a still superior) Chinese medicine. The use in this text of the term “*Tang Fan yixue*” marked a period of innocent and uncontested coexistence of the two different medical systems. Half a century later, however, this coexistence would be critically challenged and fiercely negotiated by both biomedical and Chinese traditional doctors, when the Chinese started to consider having their acute, more dangerous febrile and inflammatory diseases also to be treated by Western doctors, now that

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54. J. KERR “Report of the Medical Missionary Society’s Hospital in Canton for the Year 1868” in *Report of the Missionary Society in China for the year 1868*. Hong Kong: De Souza & Co. 1869: 30-31.

55. Donations from Chinese subscribers for the year 1862, \$216; 1863, \$245; 1864, \$527; 1865, \$ 493; 1866, \$90 (See hospital reports for the year 1862: 25-26; for the year 1863: 30-31; for the year 1864: 30; 1865: 40-41; 1866: 25)

“invisible” germs appeared to be the main culprit of such diseases.<sup>56</sup> From then on the “coexistence” of the two systems in China would no longer be taken for granted but became the cause of a major protracted political and epistemological battle that is still being fought, albeit on changing ground.

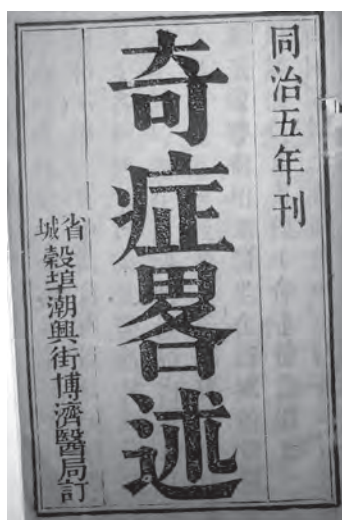


Illustration: Book cover



Figure 1: These 7 bladder stones are extracted from one single patient

56. For this later shift, see Angela Ki Che LEUNG, “The Evolution of the Idea of *Chuanran* Contagion in Late Imperial China,” and Sean Hsiang-Lin LEI, “Constituting Notifiable Infectious Disease and Containing the Manchurian Plague (1910-11),” in Angela Ki Che LEUNG and Charlotte FURTH (eds.), *Health and Hygiene in Chinese East Asia*, Durham: Duke University Press, 2010, pp. 25-50 and 73-108.



Figure 2: Extraction of a 7-jin breast tumor on the 11th day of the 9th month.



Figure 3: This ailment is called "Swollen leg" "da sha ti"

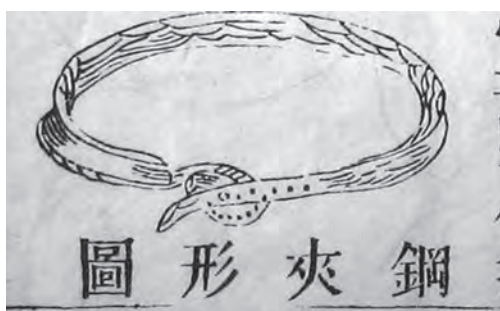


Figure 4: Steel ring (for treating hernia)

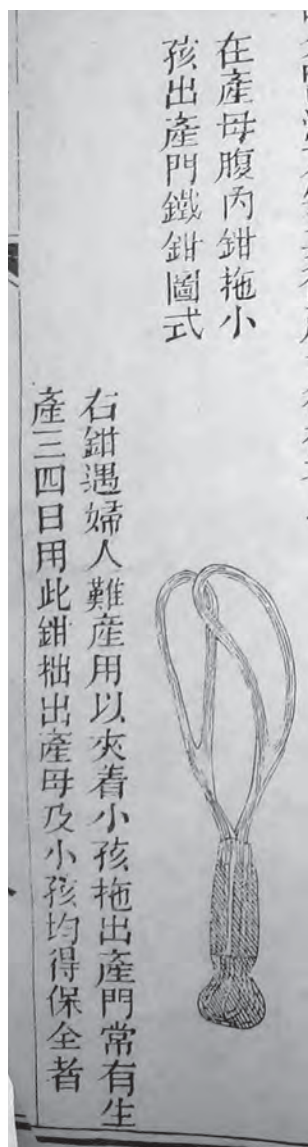


Figure 5: Forceps for pulling out fetuses during difficult childbirth

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