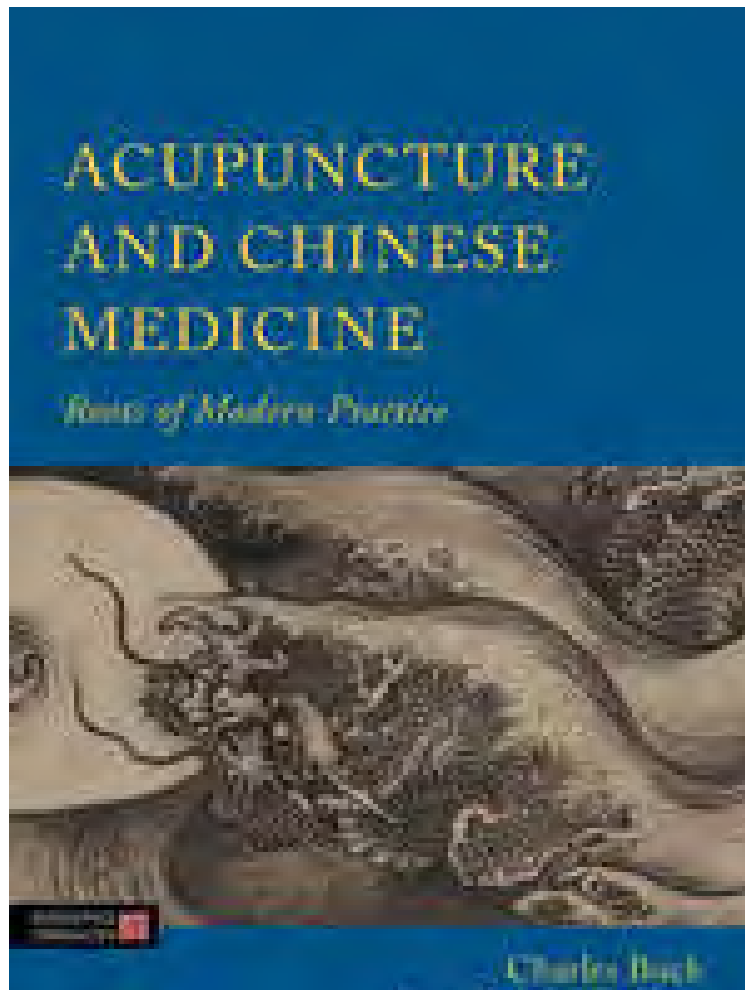




# Charles Buck

## Acupuncture and Chinese Medicine

### Roots of Modern Practice



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## MING DYNASTY

The Ming dynasty was founded in 1368 by a peasant called Hong Wu (Zhu Yuanzhang) who led an uprising that succeeded in defeating the Mongol rulers. Hong Wu instituted reforms that provided a new stable era, and this in turn allowed the second Ming emperor, Yongle (ruled 1403–1424), to inherit a prosperous state and to start spending copiously in an attempt to create an illustrious, powerful and lasting dynasty. He moved the capital from Nanjing to Beijing, and then proceeded to initiate crippling expensive projects such as building Beijing's Forbidden City, re-building the Great Wall and creating a large maritime exploration fleet headed by Admiral Zheng He. The teak forests of Vietnam were decimated by the need for hardwood for these ventures, and the country's financial reserves were almost exhausted by his profligacy. Eventually the dynasty succumbed to mounting threats, culminating in its overthrow by the Manchu after roughly two centuries.

Now that printing was commonplace, individual physicians in the Ming dynasty wrote and published many more books than previously and, because of their numbers, a much higher proportion of these writings have survived to the present day. Numerous *bencao* editions appeared, and many specialised medical texts were written that aided the progress of a whole range of medical specialisms; discussions on internal medicine (*nei ke*) were especially prolific. Acumoxa remained popular in the Ming dynasty, and scholar physicians paid more attention to improving this therapy; this interest resulted in the appearance of some major acupuncture texts in the Ming dynasty, some of which are outlined here. In addition, the legacy of the various styles of practice that had been founded in the preceding Jin-Yuan dynasty was carried forward, and this led to diverse schools of thought in medical practice co-existing and contending for popularity. This, too, is a theme for this chapter.

Imperial medical sponsorship of medicine and other areas of academic study continued sporadically through the Ming dynasty, with the general trend being increasingly away from state involvement. One notable official milestone in state publishing was the compilation of *Yongle Dadian* (Yongle Reign Great Compendium) in 1408, a monumental encyclopaedia that incorporated, among its numerous other subjects, history, medicine, mathematics and astronomy. Just a couple of years prior to this another big compilation had been published, *Pu Ji Fang* (Prescriptions for Universal Relief), which brought together over 70,000 medical prescriptions, more



than ever before. Compiled by Teng Hong, this ran to 426 volumes and included a significant amount of content on *acumoxa*.

## State medical education in the Ming

Under the Ming regime state control of medical education was allowed to decline sharply, and private medical study became once again the more usual route to professional scholarly practice. Previously the grand Tai Yi Su medical school had provided a well-ordered and high-level training; now it was Tai Yi Yuan imperial hospital that instead took on a training role. Here physicians could specialise in gynaecology, sores and ulcers, acupuncture, ophthalmology, dentistry, orthopaedics, *shang han* diseases, throat diseases, injury, massage and what were termed 'big formula' and 'small formula' departments (*da fang mai* and *xiao fang mai*), referring to paediatric and adult medicine respectively. Necromancy (*zhu you*) was also studied, which involved communicating with the spirits of the ancestors and, at this time, such study was seen as a dignified and serious career for a scholar specialist.

The egalitarian, but in practice unworkable, Song dynasty 'access-for-all' principle was now abandoned, and entrants to education at Tai Yi Yuan in the first part of the Ming dynasty were again drawn mainly from the well-connected sectors of society such as sons of famous physicians. A more easy-going attitude to medical education can be seen from the fact that trainee physicians were allowed to choose their own teachers. Nonetheless, medical students were subject to formal examination of their knowledge and skill, and those who failed were expelled. As the Ming dynasty progressed, additional selection and teaching procedures were established, and by 1527, a set curriculum with quarterly exams was in place. A few years later, regular testing of everybody working in the imperial hospital was introduced, with the results submitted to the regulatory authorities. Those who were deemed to be performing inadequately suffered proscribed penalties such as suspension of their monthly food allowance, and any who attempted to avoid exams were also subject to set punishments. Students who had successfully completed three years of study sat a final examination that was overseen by the medical officers in the imperial hospital, and on the basis of their scores graduates were divided into three grades. Those graduating with the highest grades were assigned to work as physicians in the imperial pharmacy, those with middle grades were awarded 'yellow hat ribbon' (*guan dai*) official status, and low-grade graduates were sent back to the imperial hospital to perform mundane medical duties. Outside of the select confines of the imperial court, though, the Ming government had largely abandoned the ideas of official concern for public health and welfare that had been such an important ideal of the Song. The era of government benevolence was in decline.

Partly because of this hands-off approach and partly because of the wide availability of affordable printed medical texts for self-study, medical scholars in the country at large found local mentors, and many diverse styles of medical practice contended for dominance. Most commonly, these styles were derivations of the

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*Yao* – Essentials in Four Characters) reprinted the pulse writings of his father, Li Yan-wen, that in turn were based on Cui Jia-yan's *Mai Jue*.

For each pulse image in *Bin Hu Mai Xue* Li Shi-zhen first summarised the classic historical opinions. Then, under columns headed 'body shape rhyme', 'similarity rhyme', 'illness governing rhyme' or 'body shape similarity rhyme', Li discussed the characteristics, identification and associated illness of each pulse type. By using rhymes to describe the 27 pulse images, Li made it much easier for beginners to study, understand, recite and recall the information. This lucid and user-friendly style meant that it was very widely read.

## Acupuncture in the Ming

The popularity of acupuncture continued in the Ming dynasty, and there was some official support of acupuncta practice. In 1443 the Imperial Medical Bureau commissioned some specially appointed specialists to make new castings of one of the provincial bronze acupuncture figures that had survived from the Song dynasty because the 400-year-old original was now worn out. A copy of a Song dynasty stone acupuncture sculpture was also made. Both these figures are now in the San Huang Temple in Beijing.

Many more texts on acupuncta appeared in the Ming dynasty than had been written in all the previous dynasties, although these were mostly either re-compilations of earlier works or previous writings re-worked into songs and rhymes. The best-known Ming texts on acupuncta are discussed next.

### *Zhenjiu Da Quan (Acupuncta Encyclopaedia, 1439)*

The six-volume *Zhenjiu Da Quan* was compiled by Xu Feng (aka Yang Rui) of Jiang Xi province and published in 1439. Volume one presents the basic acupuncture knowledge in songs and rhymes.

As was usual, large sections of the *Encyclopaedia* were pasted in from other texts. The *Liu Zhu Zhi Wei* rhyme section, for example, is the *Liu Zhu Zhi Wei Fu*, a chronobiology text that had been written by He Ru-Yu in the Jin dynasty. *Tong Xuan Zhi Yao Fu* (Essential Points for Penetrating the Mystery) and *Ling Guang Fu* (Sanctification Light) were also borrowed from elsewhere.

#### ZHENJIU DA QUAN VOLUME 1 CONTENTS

Acupoints in rhyme  
Rhyme of the 12 channels  
Rhyme of the 15 collaterals  
Rhyme of the *qi* blood balance in the channels  
Rhyme of acupoints forbidden to needle  
Rhyme of acupoints forbidden to moxa  
Rhyme of acupoints forbidden to bloodletting  
Rhyme of the four seas points  
Rhyme of the 11 *qian jin* acupoints  
Rhyme of the 11 rules of treating disease  
Rhyme of *Liu Zhu Zhi Wei Fu* chronobiology  
*Tong Xuan Zhi Yao Fu*  
*Ling Guang Fu*

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– *Nigel Ching, author and principal teacher at the Acupuncture Academy, Copenhagen*

'Charlie has managed to compile in an easy-to-read form a comprehensive and extensive journey through the history of Chinese medicine, herbs and acupoints. It is a combination of well-researched information from a range of texts in Chinese and English (a really useful bibliography is given) interspersed clearly with his own considerations developed over years of practice.'

– *Felicity Moir, Chinese Medicine Course Leader, University of Westminster, UK*



**Charles Buck** is widely respected as a practitioner, educator and author in the field of acupuncture and Chinese medicine. Originally from a medical science background he became one of the first to practise and teach Chinese herbal medicine in the UK over 30 years ago. He has since gained respect for his knowledge and insight and has made significant contributions to its development in the UK and Europe. Charles is currently Chairman of the British Acupuncture Council.



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