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## Representations of Gender in Early Chinese Medicine: A Prehistory of *Fuke* 婦科\*

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Most existing research on the intersection between gender and Chinese medicine takes the *Huangdi neijing* 黃帝內經 (The Yellow Emperor's inner canon) as the starting point. This article examines the representations of gender and the human body in transmitted texts from early China and the excavated Mawangdui medical texts, showing that although *fuke* 婦科 was officially established much later, medicine specifically for women had emerged before the *Huangdi neijing* literature. I analyze seven ways in which gender functioned in early Chinese medicine: gendered patients, gendered medicines, gendered diseases, gender as embodiments of *yin* 陰 and *yang* 陽, gendered sexual partners, female as the mother, gendered healers and caretakers. Compared with early Western Han texts, late Eastern Han medical texts de-emphasized the role of the female as the cosmological *yin* and sexual partner, highlighting, instead, the female as the patient and the mother. These differences can be largely explained by the establishment of text-based, male-dominated technical medicine and some technical physicians' attempts to exclude other medical traditions, such as exorcism and "nourishing life" practices, from technical medicine. The emergence of technical medicine thus had profound impacts on the roles of women in Chinese medicine and the later development of *fuke*.

**Key Words:** gender, sex, body, medicine, early China

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## Introduction

Before the discovery of Mawangdui 馬王堆 medical texts in 1973, “Bian Que Canggong liezhuan” 扁鵲倉公列傳 (The Biographies of Bian Que and Canggong (Chunyu Yi)) in Sima Qian’s *Shiji* 史記 (Records of the Grand Historian) was the only piece of literature about Chinese medicine that dates to the early Western Han. This text records the medical activities of two famous doctors who lived in the Warring States period and early Western Han respectively, but it does not contain medical theories or recipes. Thus, Mawangdui medical texts have considerably enriched our knowledge of early Chinese medicine before the time of *Huangdi neijing* 黃帝內經 (The Yellow Emperor’s inner canon). The burial date of the male in Mawangdui tomb no.3 is 168 BCE, but most of the manuscripts are thought to have been copied nearer to 200 BCE than to the date of burial, and earlier editions of the texts must have circulated in the third century BCE.<sup>1</sup>

*Huangdi neijing*, the canon of traditional Chinese medicine, was a collective work dating roughly to the first century BCE, but it experienced the vicissitudes of textual transmission and variation. Today, the text is mostly preserved in its medieval recensions, the *Lingshu* 靈樞, *Suwen* 素問, and *Taisu* 太素.<sup>2</sup> Medical texts produced during the Eastern Han were largely inheritors of the *Huangdi neijing*, except that they were written by individual medical experts and are thus more homogeneous and systematic. The most representative ones are *Nan jing* 難經, *Shanghan lun* 傷寒論 and *Jingui yaolie* 金匱要略.<sup>3</sup>

Thanks to these texts from different time periods, it has become possible to trace certain changes in medical theories and practices in early China, as well as how these changes relate to later developments in Chinese medicine.

1 Donald J. Harper, *Early Chinese Medical Literature: The Mawangdui Medical Manuscripts* (London and New York: Kegan Paul International, 1998), 4.

2 Since *Taisu* was compiled by Yang Shangshan 楊上善 (c.a.575–670 CE) based on the *Lingshu* and *Suwen*, I will only cite *Lingshu* and *Suwen* in this paper. For a more detailed introduction of the transmission of *Huangdi neijing*, see Paul U. Unschuld, *Huang Di Nei Jing Su Wen: Nature, Knowledge, Imagery in an Ancient Chinese Medical Text* (Berkeley: University of California Press, 2003), 1–7.

3 *Nan jing* is aimed at answering difficult questions regarding *Huangdi neijing*. *Shanghan lun* and *Jingui yaolie* are two later recensions of the Eastern Han doctor Zhang Ji 張機’s *Shanghan zhibing lun*. *Shanghan lun* was edited by the Jin doctor Wang Shuhe 王叔和, and *Jingui yaolie* was found in the library of the National Academy in the Northern Song.

This paper examines how female roles were represented in Chinese medicine from the early Western Han (late Third Century BCE) to the late Eastern Han (early Third Century CE). Based on transmitted texts and the Mawangdui manuscripts, I demonstrate that an awareness of sexual differences in Chinese medicine appeared before the *Huangdi neijing* literature and that they were largely based on gender roles rather than biological differences. I will analyze the seven roles that gender played in early Chinese medicine: 1) gendered patients; 2) gendered medicines; 3) gendered diseases; 4) gender as embodiments of *yin* 陰 and *yang* 陽; 5) gendered sexual partners; 6) females as the mother; 7) gendered healers and caretakers. I show that over time, the significance of the female as the cosmological *yin* and the sexual partner became overshadowed by the female patient and the mother in medical literature. While these changes may be partly due to the limitation of sources available today, medical texts and historical records show that they were related to the establishment of a text-based, male-dominated technical medicine as well as to some technical physicians’ attempts to exclude exorcism, midwifery, and the “nourishing life” practices from technical medicine.<sup>4</sup>

Charlotte Furth’s classic work, *A Flourishing Yin*, has been widely cited by scholars working on the intersection between gender and Chinese medicine.<sup>5</sup> In her discussion of *fuke* 婦科 (the department [of medicine] for women) from the Song to the Ming, Furth starts with an ahistorical overview of “the Yellow Emperor’s body” as classical medical thought and places *fuke* in a learned medical tradition.<sup>6</sup> Jen-der Lee traces the origins of *fuke* to the Sui and Tang dynasties, especially to Sun Simiao 孫思邈’s *Qianjin fang* 千金方

4 I use the word “technical” in the usual sense of the English word, as defined in *Merriam-Webster’s Dictionary*: “having special and usually practical knowledge especially of a mechanical or scientific subject,” or “marked by or characteristic of specialization.” The second section of this article will provide more detailed explanations of the term “technical medicine.”

5 Charlotte Furth, *A Flourishing Yin: Gender in China’s Medical History, 960–1665* (Berkeley: University of California Press, 1999).

6 As Furth points out, *fuke* literally means “the department [of medicine] for women” and is today identified with obstetrics and gynecology. Furth, *A Flourishing Yin*, 2–3.

and *Furen fang* 婦人方.<sup>7</sup> I, however, concur with Robin Yates that medicine for women can be traced further back to the Han and pre-Han, even though the theorization of the gendered body appeared in the Sui and Tang.<sup>8</sup> Nevertheless, the main purpose of this article is not to determine the origins of *fuke* but to examine its prehistory and explain the patterns in early Chinese medicine that constituted the conditions for its later development. Highlighting the emergence of technical medicine and its differences from pre-existing medical traditions, I show how this transition influenced women's various roles within Chinese medicine and had a paradoxical relationship with the later *fuke*. On the one hand, the increasing emphasis on women's roles as the patient and the mother opened possibilities for more female-specific disease diagnosis and treatment; on the other hand, the ungendered model of the human body in vessel theory contradicted the gendered body in the *yangsheng* 養生 (nourishing life) tradition and perhaps delayed the theorization of gendered etiology.

## Seven Roles of Gender in Early Chinese Medicine

Donald Harper classifies Mawangdui medical literature into three groups. The first group is “maishu” 脈書 (vessel books), which contain systematic theories about the circulation of the eleven vessels, diseases affecting every

7 Jen-der Lee 李貞德, “Han Tang zhi jian qiu zi yifang shitan — jian lun fuke lanshang yu xingbie lunshu” 漢唐之間求子醫方試探——兼論婦科濫觴與性別論述, in *Zhongyang yanjiuyuan lishi yuyan yanjiusuo jikan* 中央研究院歷史語言研究所集刊 68.2 (1997): 283–367. Jen-der Lee's other relevant works include “Han Sui zhi jian de shengzi bu jü wenti” 漢隋之間的「生子不舉」問題, *Zhongyang yanjiuyuan lishi yuyan yanjiusuo jikan*, 66.3 (1995): 747–812; “Han Tang zhi jian yishu zhong de shengchan zhi dao” 漢唐之間醫書中的生產之道, *Zhongyang yanjiu yuan lishi yuyan yanjiusuo jikan*, 67.3 (1996): 533–654; “Han Tang zhi jian de nüxing yiliao zhaogu zhe” 漢唐之間的女性醫療照顧者, *Taida lishi xuebao* 臺大歷史學報, 23 (1999): 123–56; “Han Tang zhi jian yifang zhong de ji jian furen yu nü ti wei yao” 漢唐之間醫方中的忌見婦人與女體為藥, *Xin shi xue* 新史學, 13.4 (2002): 1–38; “Tang dai de xingbie yu yiliao” 唐代的性別與醫療, in *Tang Song nüxing yu shehui* 唐宋女性與社會, ed. Deng Xiaonan 鄧小南 (Shanghai: Shanghai cishu chubanshe, 2003), 415–46; “Zhongguo funü shi yanjiu zhong de yiliao zhaogu wenti” 中國婦女史研究中的醫療照顧問題, *Sichuan daxue xuebao (zhexue shehui kexue ban)* 四川大學學報 (哲學社會科學版), (2005.2): 86–93; *Nüren de zhongguo yiliao shi—Han Tang zhi jian de jiankang zhaogu yu xingbie* 女人的中國醫療史——漢唐之間的健康照顧與性別 (Taipei: Sanmin shujü, 2008).

8 Robin D.S. Yates, “Medicine for Women in Early China: A Preliminary Survey,” *NAN NÜ*, 7.2 (October 2005): 127–81.

vessel, and the treatment of diseases through moxibustion or lancing the corresponding vessel.<sup>9</sup> The vessel literature from Mawangdui largely overlaps with the vessel books discovered in Zhangjiashan 張家山, another early Western Han tomb. The second group concerns the theories and practices of *yangsheng* (nourishing life), including breathing exercises, pulling exercises, recipes for elongating life, as well as instructions for sex and gestation.<sup>10</sup> The third group of texts is the *Wushi'er bingfang* 五十二病方 (Recipes for fifty-two ailments), which aims to treat diseases through both medicine and exorcism. Although this text takes the form of recipes, it differs significantly from the recipes in *yangsheng* literature in terms of its lower-class and non-technical origins. These differences are indicated by the large number of dermatological diseases in its content, the fusion of magic and medicine in the treatments it offers, and a lack of reference to classics throughout the text.

Among the three groups of Mawangdui medical literature, the vessel books are the most silent on the issue of gender differences. In these texts, the vessels are treated as a universal system that exists in all human bodies. By contrast, the *yangsheng* literature closely relates to gender. This group of texts treats women and men, or female and male, as representative of *yin* and *yang* forces that abound in the whole universe. Under this view, sexual intercourse was considered a means of perfecting one's body by supplementing it with *yin* or *yang*. The *Fifty-Two Ailments* lies in the middle: It does not explicitly refer to gender or sexual differences in most recipes. In a few recipes, however, gender differences are given attention in three ways — gendered patients,

9 Vessel literature from Mawangdui includes the following texts (I follow Donald Harper on these Roman numbers and translations of text titles): MSI.A “Zubi shiyi mai jiujiing” 足臂十一脈灸經 (Cauterization canon of the eleven vessels of the foot and forearm); MSI.B “Yin Yang shiyi mai jiujiing,” *jiaben* 陰陽十一脈灸經甲本 (Cauterization canon of the eleven Yin and Yang vessels, ed.A); MSII.B “Yin Yang shiyi mai jiujiing,” *yiben* 陰陽十一脈灸經乙本 (Cauterization canon of the eleven Yin and Yang vessels, ed.B); MSI.C “Maifa” 脈法 (Model of the vessels); MSI.D “Yin Yang mai sihou” 陰陽脈死候 (Death signs of the Yin and Yang vessels). For more details of these texts, see Harper, *Early Chinese Medical Literature*.

10 The second group of texts includes: MSII.A “Quegu shiqi” 卻穀食氣 (Eliminating grain and eating vapor); MSII.C “Daoyin tu” 導引圖 (Drawings of guiding and pulling); MSIII “Yangsheng fang” 養生方 (Recipes for nurturing life); MSIV “Zaliao fang” 雜療方 (Recipes for various cures); MSV “Taichan shu” 胎產書 (Book of the generation of the fetus); MSVI.A “Shiwen” 十問 (Ten questions); MSVI.B “He Yin Yang” 合陰陽 (Conjoining Yin and Yang); MSVII.B “Tianxia zhidao tan” 天下至道談 (Discussion of the culminant way in under-heaven); MSVII.A “Zajin fang” 雜禁方 (Recipes for various charms. Elsewhere 禁 is ‘secret’ and ‘prohibitions’).

gendered medicines, and gendered diseases.

Medical texts written after the time of Mawangdui present a rather different picture. As major recensions of *Huangdi neijing*, *Lingshu* and *Suwen* present a view of the body that is based on vessel theory and correlative cosmology. In these two texts, the terms *yin* and *yang* are much less associated with gender differences than with the two types of vessels or two parts of a person's body. Gender differences are noted only when the medical situations are specific to the female body's reproductive functions, such as menstruation and pregnancy.

Based on the model of *Huangdi neijing*, the late Eastern Han medical texts *Nan jing*, *Shanghan lun*, and *Jingui yaolüe* contain more content about women's diseases and gender differences than *Lingshu* and *Suwen*. For example, the author of *Nan jing* argues that the positions of vessels are different in male and female bodies, and that a wrong position is an indication of illness.

In the rest of this section, I will discuss seven ways in which gender functioned in early Chinese medicine, highlighting how different medical texts represent each of these roles differently.

### 1. Gendered Patients

Although the majority of recipes in *The Fifty-Two Ailments* do not specify the gender of the patient, among the recipes for curing urine retention ailment (*long bing* 癰病) are two recipes for treating female urine retention with herbs.<sup>11</sup> In addition, an incomplete recipe under the title "to make a person ailing from the horse not have spasms" (*ren bing ma bu xian* 人病馬不癰) mentions "if the ailing person is a woman.....and if a man.....", although the part on the treatment for female patients is illegible.<sup>12</sup>

Another disease, infant-cord rigidity (*ying'er suoqing* 嬰兒索癭), might be a postpartum female disease or, more probably, an infant disease.<sup>13</sup> If we interpret this disease as an infant disease, then there is no gynecological disease in *The Fifty-Two Ailments*. There are, however, diseases specific to

11 Ma Jixing 馬繼興, *Mawangdui gu yishu kaoshi* 馬王堆古醫書考釋 (Changsha: Hunan kexue jishu chubanshe, 1992), 467.

12 Idem, 441–42. Harper, *Early Chinese Medical Literature*, 251.

13 Ma Jixing, *Mawangdui gu yishu kaoshi*, 368. Harper, *Early Chinese Medical Literature*, 231–32.

male patients: "swollen scrotum" and "intestine inguinal swelling."<sup>14</sup>

Two recipes that involve incantation relate the number seven to male patients and twice seven to female patients. The one for treating warts suggests that male patients place seven clods on the ground and female patients twice seven.<sup>15</sup> The one for a rash caused by lacquer instructs the healer to spit seven times on the male patient and twice seven on the female patient.<sup>16</sup> The use of the number seven in incantations may be related to its cosmological significance, while the question of why seven for men and twice seven for women can be explained in terms of gender. In *yin-yang* theory, even numbers are *yin* and odd numbers are *yang*; women are *yin* and men are *yang*. Although the terms *yin* and *yang* only appear once in *The Fifty-Two Ailments* referring to the Great *Yin* and Great *Yang* vessels, *yangsheng* literature from Mawangdui shows that *yin-yang* theory had been associated with gender at the time.

*The Fifty-Two Ailments* contains dozens of recipes that instruct treating diseases with incantation and some of the incantation processes are gendered. In the section "various wounds" (*zhu shang* 諸傷), an incantation aiming to stop bleeding differentiates between male and female, although it is uncertain whether the male and female refer to the patient or demonic beings.<sup>17</sup> Several other incantations in *The Fifty-Two Ailments* mention "father" and "mother", which clearly refer to demonic beings.<sup>18</sup> Another incantation appeals to spirit maids to repel the fox believed to have possessed the patient.<sup>19</sup>

Two recipes in *The Fifty-Two Ailments*, one for "mad dog bites a person" and one for "intestine inguinal swelling," mention that "women use the same medicine" or the medicine is "allowed for men and women."<sup>20</sup> The first case indicates that the author of the recipe had written primarily for male patients but then added a sentence to expand the applicability of the recipe. The second case suggests that a substantial number of existing recipes were gender-specific

14 Harper, *Early Chinese Medical Literature*, 258–69. Ma Jixing, *Mawangdui gu yishu kaoshi*, 472–99.

15 Harper, *Early Chinese Medical Literature*, 244–45. Ma Jixing, *Mawangdui gu yishu kaoshi*, 421.

16 Harper, *Early Chinese Medical Literature*, 294. Ma Jixing, *Mawangdui gu yishu kaoshi*, 602. The object in the sentence *ji tuo zhi* 即唾之 (then spit on it) is not clear. Ma interprets *zhi* (it) as the patient, but it can also refer to the lacquer tree or the lacquer spirit. Donald Harper translates the sentence as "then spit on it."

17 Ma Jixing, *Mawangdui gu yishu kaoshi*, 337–38.

18 Harper, *Early Chinese Medical Literature*, 239, 242, 263.

19 Idem, 262.

20 Idem, 235, 268. Ma Jixing, *Mawangdui gu yishu kaoshi*, 382, 493.

at the time it was written, or it would be unnecessary to emphasize that this recipe applies to both men and women.

In contrast to *The Fifty-Two Ailments*, the vessel books from Mawangdui are rather neutral on the issues of sex and gender. The authors of these vessel books describe the human body according to a universal model of eleven vessels without any reference to sexual difference. The lack of gendered terms in the Mawangdui vessel books, however, does not mean that Western Han doctors trained in vessel theory were unaware of sexual differences in their medical practices. Examples of treating female patients with vessel theory are found in the received text, “The Biography of Chunyu Yi,” in *Records of the Grand Historian*, which was written during roughly the same period with Mawangdui texts or slightly later.<sup>21</sup> In the biography, the female patients who were cured benefited from vessel theory as well as treatments such as potions or cauterization. Two of the diseases mentioned in these cases are specific to female patients: One of the patients was pregnant but could not give birth; the other suffered from amenorrhoea caused by unsatisfied sexual desire.<sup>22</sup> Therefore, a possible reason why Mawangdui vessel books lack gendered terms is not that vessel theory conflicts with awareness of sexual differences, but that these texts are highly theoretical works that contain no specific medical cases.

Like the Mawangdui vessel literature, the *Huangdi neijing* literature is grounded in the vessel, the Yin-Yang, and the Five Agents theories. I found

21 Several scholars have analyzed the historical context and textual heterogeneity of Sima Qian’s “Biography of Canggong.” Elisabeth Hsu argues that “the first ten cases of the Granary Master’s records can be seen as a mirror of medical knowledge in Chunyu Yi’s day, that is, between 180 and 177 BC” and that the rest of the response should be regarded as later additions that Sima Qian may have edited. Miranda Brown argues that “a distinction should be made between the figure represented in a text of the first century BC and the actual personage of the second century BC,” and that the persona in the biography wrote like an official making legal decisions. Regardless of the exact dating of textual layers and the identity of the healer, we can still use the biography as a source of medical history from the early to mid-Western Han. It is thus contemporary or slightly later than the Mawangdui and Zhangjiashan medical texts, and earlier than the *Huangdi neijing*. See Elisabeth Hsu, *Pulse Diagnosis in Early China: The Telling Touch* (Cambridge: Cambridge University Press, 2010), 58; Miranda Brown, *The Art of Medicine in Early China: The Ancient and Medieval Origins of a Modern Archive* (New York: Cambridge University Press, 2015), 63–86.

22 Sima Qian 司馬遷. “Pien Ch’üeh and Ts’ang-kung, Memoir 45,” Trans. by William H. Nienhauser, Jr. in *The Grand Scribe’s Records (Volume IX)*, ed. William H. Nienhauser, Jr., trans. J. Michael Farmer et al. (Bloomington: Indiana University Press, 2010), 1–88. Especially see 53–54, 59–60.

only two instances in *Lingshu* about diseases that occur only in females. The first passage appears in the “Obstruction and Impediment Illness” chapter, saying that “Destructive macula is a women’s disease.”<sup>23</sup> The second passage is in the chapter “The Five Prohibitions”, where massive bleeding following delivery is written as the fifth of the five “pillages that injure the body.”<sup>24</sup> Likewise, *Suwen* contains limited content about women’s diseases, mainly amenorrhoea,<sup>25</sup> but also abdominal swelling.<sup>26</sup> A passage says that “the same [disease and therapy] apply to women,”<sup>27</sup> echoing the ungendered, universal theory of the body in vessel books. But another passage about diseases on the conception vessel (*ren mai* 任脈) and superintendent vessel (*du mai* 督脈) differentiates between the ends of vessels in male genitalia and those in female genitalia, as well as between the diseases in male patients’ and female patients’ vessels.<sup>28</sup>

While the *Huangdi neijing* literature contains very limited content about gender difference, certain passages in *Suwen* remind doctors to note the patient’s sex, suggesting that male and female patients respond to the same treatment differently and their pulses reflect their bodily functions in different ways. For instance, a passage in *Suwen* states that after needling on a certain vessel, the symptoms will disappear immediately in male patients, whereas those in women will not disappear until some time has passed.<sup>29</sup> Doctors are also advised to combine the information of pulses and that of the patient’s sex during diagnosis and treatment.<sup>30</sup> Likewise, *Nan jing* states that the location of men’s pulse is on the upper side of the *guan* 關 joint, whereas women’s is on the lower side; the *chi* pulse (*chi mai* 尺脈), which is one part of the wrist

23 The original sentence reads: 敗疵者，女子之病也。

24 Paul U. Unschuld, *Huang Di Nei Jing Ling Shu: The Ancient Classic on Needle Therapy, The Complete Chinese Text with an Annotated English Translation* (Oakland: University of California Press, 2016), 562.

25 Zhang Zhicong 張志聰 et al. eds. *Huangdi neijing suwen jizhu* 黃帝內經素問集注. *Zhongguo yixue dacheng* 中國醫學大成 edition (Shanghai: Shanghai kexue jishu chubanshe, 1990), 1.20, 5.16, 5.46.

26 Idem, 5.96.

27 Idem, 2.7.

28 Idem, 7.20–21.

29 Idem, 72.44.

30 Idem, 9.11.

pulse, is always weak on men and strong on women.<sup>31</sup> This difference between the female and the male is explained by *yin* and *yang*.

Compared with authors of Mawangdui and *Huangdi neijing* literature, medical authors of the late Eastern Han demonstrated more knowledge of female-specific diseases and treatments. *Jingui yaolüe*, which is part of the late Eastern Han text *Shanghan zabing lun*, provides systematic content about women's diseases. Chapters 20, 21, and 22 are exclusively devoted to women's diseases: Chapter 20 is about women's diseases during pregnancy, Chapter 21 about postpartum diseases, and Chapter 22 about women's miscellaneous diseases.<sup>32</sup> These gender-specific diseases are not limited to those in women's reproductive organs. In several other chapters of the same book, such as the chapter for consumptive disease and the chapter for dietary prohibitions, the sex or gender of the patient is specified as "male" (*nan zi* 男子) or "female/women" (*nü zi* 女子 / *fu ren* 婦人).<sup>33</sup>

However, *Shanghan lun*, which is the other part of *Shanghan zabing lun*, offers very little gendered information about patients. The only statement about female patients is that the situation will be worse for children and female patients if the diagnosis and treatment are delayed, implying that the body of a child or a woman is naturally weaker than that of a man.<sup>34</sup> The focus on women's diseases in certain chapters of *Jingui yaolüe* shows a tendency to separate this branch of medicine from the others. In this sense, although *fuke* was institutionalized much later, some of its characteristics can be traced back to the Han.

## 2. Gendered Medicines

In *The Fifty-Two Ailments*, several medicines made from animals are gendered. For example, several recipes require a male chicken, a male pig, or a

31 Xu Dachun 徐大椿 annot., *Nan jing jing shi* 難經經釋 in *Xuxiu siku quanshu* 續修四庫全書, ed. Xuxiu siku quanshu bianzuan weiyuan hui 《續修四庫全書》編纂委員會 (Shanghai: Shanghai guji chubanshe, 1995), 983: 707–43, 718–19.

32 Unschuld, *Huang Di Nei Jing Ling Shu*, 599. Zhang Ji 張機, *Jingui yaolüe* 金匱要略, ed. Zhang Zhicong 張志聰, in *Xuxiu siku quanshu* 續修四庫全書 ed. Xuxiu siku quanshu bianzuan weiyuan hui 《續修四庫全書》編纂委員會 (Shanghai: Shanghai guji chubanshe, 1995), 983: 151–360, 332–56.

33 Zhang Ji, *Jingui yaolüe*, 207–10, 270, 283, 357, 359.

34 Zhang Ji, *Shanghan lun* 傷寒論, ed. Zhang Suichen 張遂辰, in *Xuxiu siku quanshu* 續修四庫全書, ed. Xuxiu siku quanshu bianzuan weiyuan hui 《續修四庫全書》編纂委員會 (Shanghai: Shanghai guji chubanshe, 2002), 985: 261–440, 303..

male rat to be used in medicines. A black male chicken is used for treating *gu*.<sup>35</sup> A recipe for treating female hemorrhoids tells the patient to eat a grilled yellow female chicken and then use its feathers to fumigate the affected area.<sup>36</sup> Male rats cooked in human urine are also used for fumigating female hemorrhoids.<sup>37</sup> Likewise, the fat of a male pig is used for treating bug bites,<sup>38</sup> and the fat of a castrated male pig is recommended for curing shin burns.<sup>39</sup> In addition, some recipes say that fumigating with the feces of a male chicken is effective for treating bug bites,<sup>40</sup> that external applications of the burned feces of male rats can be used to treat scabies,<sup>41</sup> and that external applications of the feces of a black male goat saturated in children's urine is able to cure scabies.<sup>42</sup>

Some human materials in the recipes are also gendered. One recipe suggests treating scabies externally with the urine of a boy, a medicine quite common in later Chinese medical texts.<sup>43</sup> Another recipe suggests that the external application of men's slime, which refers either to semen or snot, can prevent the formation of scars.<sup>44</sup> Another recipe for treating skin burns requires a man's muck (*nan zi e* 男子惡) as an external medicine. Here the word *e* refers to either a man's feces or semen.<sup>45</sup>

Most of the substances mentioned above were recorded in later Chinese

35 Ma Jixing, *Mawangdui gu yishu kaoshi*, 633–34. *Gu* 蠱 refers to diseases that people believed to have been caused by magical bugs, either from nature or cultivated by a human. The symptoms might correspond to a variety of diseases diagnosed through modern medicine, such as parasite infection, diseases of the urinary system, sexual diseases, etc. (Ma Jixing, *Mawangdui gu yishu kaoshi*, 631). By extension, *gu* refers to demonic evil and to black magic in general (Harper, *Early Chinese Medical Literature*, 300–1). A passage in *Zuozhuan* 左傳 about the disease of the ruler of Jin indicates two denotations of *gu*: the bugs that are generated from grain, and delusions arising from female seduction (*Zuozhuan*, Zhao 1, 41.13b, *Shisanjing zhushu* 十三經注疏 edition). Han accounts often associate *gu* with female witchcraft and with the use of voodoo-like objects to harm victims. See Michael Loewe, *Crisis and Conflict in Han China* (London: George Allen and Unwin, 1974), 81–90.

36 Ma Jixing, *Mawangdui gu yishu kaoshi*, 520.

37 Idem, 526.

38 Idem, 608.

39 Idem, 562.

40 Idem, 609.

41 Idem, 580.

42 Idem, 569.

43 Idem, 584.

44 Idem, 339–40. Harper, *Early Chinese Medical Literature*, 225–26.

45 Ma Jixing, *Mawangdui gu yishu kaoshi*, 556–57. Harper, *Early Chinese Medical Literature*, 282–83.

medical literature, although their uses and the diseases they treated varied. It is unclear why these medicines must come from animals or humans of a specific sex. Given that the majority of recipes do not specify the sex of medicines, the sex of these animals or humans could be related to their healing effects as well as the characteristics of the diseases they are used for treating.

Women's menstrual cloth appears as medicine in *The Fifty-Two Ailments* seven times.<sup>46</sup> One of the recipes requires that it be the first menstrual cloth used by a female. Another recipe requires the menstrual cloth of a virgin.<sup>47</sup> The diseases for which menstrual cloth is used are quite diverse, including spasms caused by horses, intestine inguinal swelling, female hemorrhoids, burns, and *gu*. The methods of using it also vary from drinking the potion cooked from it, to applying it externally, to fumigating the affected area with a burned menstrual cloth. As a medicine, menstrual cloth continued to appear in medical texts after the Han. For example, *Qianjin yaofang* 千金要方 records that it can cure cholera and burns caused by hot water or fire; *Bencao shiyi* 本草拾遺 writes that it can be used externally to stop bleeding, treat wounds caused by tigers and wolves, and treat arrow wounds; *Mei shi fang* 梅師方 states that it can cure the pain caused by the scrotum contracting into the intestines.<sup>48</sup>

Most of the recipes using menstrual cloth in *The Fifty-Two Ailments* can be explained by its medical effects recorded in later texts. The uses of menstrual cloth in *The Fifty-Two Ailments* show that the effective ingredient is menstrual blood. Although the origin of its medical use is unclear, studies in religious anthropology indicate that menstrual blood is regarded as pollution and is thus of magical power in many societies.<sup>49</sup> Like the use of animal feces, the healing effects of menstrual blood probably came from the power of pollution.<sup>50</sup> Exorcisms required to treat *gu* relied on the polluting power of menstrual cloth, as explained by Ma Jixing.<sup>51</sup> Given the association of *gu*

46 Ma Jixing, *Mawangdui gu yishu kaoshi*, 441, 478, 498, 516, 555, 632, 634.

47 Idem, 441, 634.

48 Idem, 442, 555.

49 Charlotte Furth and Ch'en Shu-yueh, "Chinese Medicine and the Anthropology of Menstruation in Contemporary Taiwan," *Medical Anthropology Quarterly*, New Series, Vol. 6, No. 1 (March, 1992), 27–48; Emily M. Ahern, "The Power and Pollution of Chinese Women," in *Women in Chinese Society*, eds. Margery Wolf and Roxane Witke (Stanford: Stanford University Press, 1975), 193–214; Arthur Wolf, "Gods, Ghosts, and Ancestors," in *Religion and Ritual in Chinese Society*, ed. Arthur Wolf (Stanford: Stanford University Press, 1974), 131–82.

50 Ma Jixing, *Mawangdui gu yishu kaoshi*, 609, 556.

51 Idem, 632, 634.

with magic and female seduction in early Chinese records, this is a convincing explanation.

In late Eastern Han medical literature, the use of female body parts as medicine went beyond menstrual blood. In *Jingui yaolie*, human milk is used as a medicine for patients poisoned by eating snakes or beef.<sup>52</sup> In *Shanghan lun*, it is said that the part of women's pants that is close to the private parts can be burned and concocted into medicine to treat men's difficulty with urinating, and that the same area of men's pants works for women who have difficulty urinating.<sup>53</sup> According to Jen-der Lee's study of medical texts from the Han to the Tang, not only female pubes and female undergarments but also the entire female body was considered medicine in the "nourishing life," *ars erotica*, and Daoist traditions.<sup>54</sup> Male practitioners of these traditions believed that female essence could help them strengthen the body, elongate life, and even achieve immortality. The role of the female as medicine is thus connected with the roles of the female as the sexual partner and the *Yin*.

### 3. Gendered Diseases

By "gendered diseases," I do not mean the diseases that only afflict men or women, which have been covered in the section "gendered patients." Instead, I refer to the phenomenon of a disease being divided into the male type and the female type.

In *The Fifty-Two Ailments*, the recipes for curing hemorrhoids are separated into two parts: "male hemorrhoid" (*mu zhi* 牡痔) and "female hemorrhoid" (*pin zhi* 牝痔). According to the descriptions of these recipes, male hemorrhoids protrude from the anus, and to cure them usually requires excision. Female hemorrhoids are located inside the anus, and the treatments often involve fumigating the affected area. Both types of hemorrhoids may have holes with blood or worms coming out of them. As Ma points out, similar names were used in later medical texts for different types of hemorrhoids, such as *xiong zhi* 雄痔 (male hemorrhoid) and *ci zhi* 雌痔 (female hemorrhoid), or *gong zhi* 公痔 (male hemorrhoid) and *mu zhi* 母痔 (female hemorrhoid).<sup>55</sup> In the Chinese language, *xiong*, *ci*, *gong*, and *mu* are used to describe the sex of animals but not humans.

Likewise, in a recipe for treating facial pustules (*ma* 癩), the following

52 Zhang Ji, *Jingui yaolie*, 357.

53 Zhang Ji, *Shanghan lun*, 426.

54 Jen-der Lee, "Han Tang zhi jian yifang zhong de ji jian furen yu nü ti wei yao," 17–24.

55 Ma Jixing, *Mawangdui gu yishu kaoshi*, 500–526.

explanations appear: “There are female and male types of facial pustules. In the male type, the skin swells. The female type has a hole.”<sup>56</sup> In both the hemorrhoid and facial pustules cases, the type of growth that protrudes from the skin is called the male type, and the type that grows inside the skin with a hole is called the female type.

Although no explicit explanation is provided in this text, one can easily associate this taxonomy with the structures of male and female genitalia. Just as the conception of the human body benefits from the observation of the cosmos, the human body can also serve as metaphors for other realms. For the ancient Chinese, the male and female offered a binary conceptual framework for classifying diseases.

#### 4. Gender as Embodiments of *Yin* and *Yang*

At least since the Spring and Autumn period, the concepts *yin* and *yang* have been used to construct a relational system consisting of two forces that oppose and supplement each other, binding a wide range of phenomena such as day and night, heaven and earth, male and female.<sup>57</sup> By the time Mawangdui medical literature was produced, the association of the female with *yin* and the male with *yang* had been established. The Mawangdui text *He yin yang*, which discusses the method of having proper sex, clearly refers to the female as *yin* and the male as *yang*. The author of *Yin yang zhidao tan* expresses the connection between gender and *yin-yang* as follows:

Therefore, what is masculine belongs to the category male and is *Yang*; and what is *Yang* is external. What is feminine belongs to the category female and is *Yin*; and what is *Yin* is internal. Everything belonging to the category male is rubbed outside; everything belonging to the category female is rubbed inside. This is called the calculation of *Yin* and *Yang*, and the intrinsic pattern of female and male. If when having intercourse he is unsuccessful, the blame can be placed entirely on haste.<sup>58</sup>

是以雄牡屬為陽，陽者外也；雌牝屬為陰，陰者內也。凡牡之屬摩表，凡牝之屬摩裏，此謂陰陽之數，牝牡之理，為之弗得，過

56 Harper, *Early Chinese Medical Literature*, 304.

57 Many scholars have written on the concepts of *yin* and *yang*. For an introduction of *yin-yang*, other related concepts, and correlative cosmology, see Michael Nylan, “*Yin-yang*, Five Phases, and *qi*,” in *China's Early Empires: A Re-appraisal*, eds. Michael Nylan and Michael Loewe (Cambridge: Cambridge University Press, 2010), 398–414.

58 Idem, 438.

在數已。<sup>59</sup>

The female and *yin*, or the male and *yang*, were believed to generate each other. According to *Tai chan shu*, after childbirth, if the mother who always has boys wants a girl next time, the afterbirth should be buried on the *yin* side (the shady side) of the wall; if the mother who always has girls wants a boy next time, the afterbirth should be buried on the *yang* side (the sunny side) of the wall.<sup>60</sup> In *Yangsheng fang*, some recipes aiming at strengthening a male's sexual ability or curing a lack of semen are based on male animals, such as male chickens, black male chickens, and black male dogs.<sup>61</sup> These animal medicines clearly correspond to the gender of the patient. These examples reflect the model of a cosmic body, one that materializes the *yin-yang* forces and constantly exchanges energy with the *Yin-Yang* that exists elsewhere in the cosmos, even before the body takes shape.

By contrast, in the Mawangdui medical literature, the term *yin* does not always refer to the female. *Yin* also denotes the lower part of the body, or the essence of the earth. The multiple usages of *yin* and *yang* were inherited and expanded in later medical literature. In *Lingshu* and *Suwen*, *yin* and *yang* are much less related to gender than with the two types of vessels and the two parts of a person's body. They were also used more broadly to refer to cosmological forces or the overall tendencies of individual bodies. *Lingshu* briefly mentions that “heaven has *yin* and *yang*; man has husband and wife”.<sup>62</sup> It is also said in *Lingshu* that “for males the *yin* [walker conduit] and for females the *yang* [walker conduit] are prohibited from being used by good practitioners.”<sup>63</sup> There are also passages that associate the female with *yin* in *Suwen*. In two passages, women are associated with the right, which are both *yin*, and men are associated with the left, which are both *yang*;<sup>64</sup> the woman's womb is considered one of the six stable organs generated by the *qi* of the earth and restored in the *yin*.<sup>65</sup>

The author of the late Eastern Han text, *Nan jing*, aimed at answering questions about the *Huangdi neijing*. Therefore, passages concerning gender

59 Ma Jixing, *Mawangdui gu yishu kaoshi*, 1071.

60 Idem, 805.

61 Idem, 667, 689, 718.

62 Unschuld, *Huang Di Nei Jing Ling Shu*, 639.

63 Idem, 661.

64 Zhang Zhicong et al. eds. *Huangdi neijing suwen jizhu*, 3:3, 5:87.

65 Idem, 2:8.



in *Nan jing* are a little more detailed than those in *Huangdi neijing* literature. One passage explains that the attributes of male vessels and female vessels are in opposition, like *yin* and *yang*, and that the violation of this rule indicates irregularity in bodily functions.<sup>66</sup> Another passage associates the male with the outside and the female with the inside.<sup>67</sup> Nevertheless, like in *Lingshu* and *Suwen*, sections related to gender still constitute a very small part of *Nan jing*. Compared with the early Western Han texts, the late Eastern Han medical literature thus shows declining interest in associating the male with *yang* and the female with *yin*, and the growing prominence of an abstract, ungendered model of the human body.

### 5. Gendered Sexual Partners

In the sex instruction manuals of the Mawangdui *yangsheng* texts, including *Shi wen*, *He yin yang*, and *yin Yang zhidao tan*, the male clearly plays more active roles than the female. The female sexual partner is considered helpful for the “nourishing life” practices of the male. These texts suggest that cultivating essence during sex is one way of elongating life, among others, such as breath cultivation and stretching exercises. At the same time, while it is arguable that the male satisfies the female mainly for his own benefit, the pleasure of the female is given serious attention. The concern over women’s pleasure in early *yangsheng* literature is therefore different from the attitude of the later Inner Alchemy followers, who utilized the female sexual partner as a “stove” of “inner elixir.”

In a dialogue format, the author of *Shi wen* states that refraining from ejaculation during sex can bring many benefits to the male, and that the benefits increase every time he does so:

In the way of coitus with *Yin*, stay the heart, settle and secure it; and the form and vapor secure one another. Thus it is said: at the first arrival without emission, ears and eyes are perceptive and bright; at the second arrival without emission, the voice’s vapor rises high; at the third arrival without emission, skin and hide glow; at the fourth arrival without emission, spine and upper side suffer no injury; at the fifth arrival without emission, buttock and ham can be squared; at the sixth arrival without emission, the hundred vessels pass clear through; at the seventh arrival

66 Xu Dachun annot., *Nan jing jing shi*, 718–719.

67 Idem, 741.

without emission, your entire life is without calamity; at the eighth arrival without emission, you can have a lengthy longevity; at the ninth arrival without emission, you penetrate spirit illumination.<sup>68</sup>

接陰之道，必心塞葆。形氣相葆，故曰：壹至勿瀉，耳目聰明；再至勿瀉，音氣高揚；三至勿瀉，皮革有光；四至勿瀉，脊肱不傷；五至勿瀉，尻髀能壯；六至勿瀉，百脈通行；七至勿瀉，終身失殃；八至勿瀉，可以壽長；九至勿瀉，通於神明。<sup>69</sup>

Similar versions of this paragraph appear in other “nourishing life” texts like *He yin yang* and *Tianxia zhidao tan*, as well as post-Han medical texts like *Yi xin fang*.<sup>70</sup> Another expression of the same idea in *Shi wen* is “you must be joyful, but do not allow emission.”<sup>71</sup> *Yangsheng* and *fangzhong* (*ars erotica*) practitioners emphasized the necessity of avoiding ejaculation, believing that the saved semen could not only cure diseases but also elongate life. Therefore, the female sexual partner is the indispensable companion in these practices even when she is not explicitly mentioned.

Although the image of the female sexual partner in *yangsheng* literature is relatively passive, these texts do not only describe the health and pleasure of men. In *He yin yang* and *Tianxia zhidao tan*, there are detailed directions for foreplay aimed at arousing the female partner’s desire; instructions about sexual positions, moves, speed, timing; as well as descriptions of the vocal and postural signs that indicate the female’s pleasure. *He yin yang* and *Tianxia zhidao tan* stress that sexual partners should first flirt with each other until desire is aroused.<sup>72</sup> They also mention that if the skillful man conducts sex that is “slow and prolonged,” and “light and sustained,” “the woman then is greatly delighted”; “if only he can be slow and prolonged, the woman then is greatly pleased. She treats him with the closeness she feels for her brothers and loves him like her father and mother.”<sup>73</sup> These descriptions indicate that the author, despite writing for a male audience, cared about the feelings and responses of the female sexual partner.

The essential difference between the Mawangdui *yangsheng* literature and the later Inner Alchemy tradition is manifested in *He yin yang*. This text

68 Harper, *Early Chinese Medical Literature*, 391.

69 Ma Jixing, *Mawangdui gu yishu kaoshi*, 892.

70 Idem, 896.

71 Harper, *Early Chinese Medical Literature*, 400. Ma Jixing, *Mawangdui gu yishu kaoshi*, 920.

72 Harper, *Early Chinese Medical Literature*, 415. Ma Jixing, *Mawangdui gu yishu kaoshi*, 1039.

73 Harper, *Early Chinese Medical Literature*, 437–38.

makes it explicit that sex is not just about the male benefiting from the female; instead, the male also nurtures the woman's essence with his own essence, and by doing so, he is able to "open blockage and penetrate obstructions" in his own body.<sup>74</sup> At the same time the woman achieves orgasm, the man reaches a state of spiritual illumination.<sup>75</sup> At the end, both parties acquire instant pleasure and long-lasting health benefits.

Further, a case in "The Biography of Chunyu Yi" in *Records of the Grand Historian* demonstrates that the sexual pleasure of females was a medical concern. By examining a female attendant's pulse, Chunyu Yi draws the conclusion that she was sick because she desired sexual relations with a man but did not have a partner.<sup>76</sup> This biography, and the aforementioned Mawangdui texts, both dating to the early Western Han, suggest that female sexual desire exists and benefits both the woman and her male partner's health.

On the other hand, the idea that excessive sex is dangerous for men occasionally appears in Mawangdui medical texts. A recipe in *The Fifty-Two Ailments* for treating abscesses prohibits the patient from having sex with women.<sup>77</sup> *Yangsheng fang* and *Tianxia zhidao tan* contain the same sentence: "what assists life is eating; what diminishes life is lust."<sup>78</sup> This idea was further elaborated upon in medical texts after the Western Han. In the *Huangdi neijing* literature, having too much sex with women is more explicitly referred to as an etiology for men. Excessive sex is considered one of the two factors leading to muscular atony and spermatorrhea.<sup>79</sup> Fainting caused by heat is attributed to having sex after being drunk and full.<sup>80</sup> Likewise, in the late Eastern Han medical text, *Jin gui yao lüe*, a type of jaundice is ascribed to excessive sex with women.<sup>81</sup>

The ambivalent attitudes towards sex in these medical texts can be understood as reflective of imbalanced gender relations. Whereas male patients' diseases were increasingly explained by excessive sex with women, female patients' afflictions were attributed to unsatisfied sexual desire. The

74 Idem, 420.

75 Idem, 422.

76 Sima Qian, "Pien Ch'üeh and Ts'ang-kung, Memoir 45," 59–60.

77 Ma Jixing, *Mawangdui gu yishu kaoshi*, 596. Harper, *Early Chinese Medical Literature*, 293.

78 Ma Jixing, *Mawangdui gu yishu kaoshi*, 740, 1046. Harper, *Early Chinese Medical Literature*, 356. The original sentence reads: *Yi sheng zhe shi ye, sun sheng zhe se ye* 益生者食也，損生者色也。The word *se* 色 refers to lust or to women with whom a man has sexual relations.

79 Zhang Zhicong et al. eds. *Huangdi neijing suwen jizhu*, 5:68.

80 Idem, 5:72.

81 Zhang Ji, *Jingui yaolüe*, 297.

intended audience of most medical writings was elite males, who often had access to multiple female sexual partners in their households. By contrast, a female usually had either zero or one male partner who did not need to be sexually loyal to her. In this context then, the abstract male who both benefits from and nurtures his abstract female partner in the *yangsheng* literature was gradually superseded by the male whose energy was consumed by female sexuality in a concrete social setting. In other words, social context seems to have helped shape these texts.

## 6. Female as the Mother

The *Tai chan shu* from Mawangdui *yangsheng* literature is the earliest extant handbook of pregnancy in China. It discusses in detail the mother's physical health, her mental state, and the proper rituals ensuring the health and propriety of the child. The natural and artificial environment was believed to affect the shape and virtue of the child. Thus, the mother was expected to meet virtuous, erudite, and good-looking people; to follow different diets during different months and to avoid certain foods; to stay in appropriate room conditions; and to manage her emotional state. Similar ideas about the environment's influence on the fetus can be found in Warring States and early Western Han texts, such as Jia Yi's *Xin shu* and *Da Dai li ji*.<sup>82</sup>

The *Tai chan shu*'s structure follows the order of the fetus' growth stages. All the measures and prohibitions in this text are aimed at ensuring the well-being of the fetus. It contains no specific advice for the health of the mother except for an ambiguous sentence that may refer to the health of the mother and child altogether: "for a boy there must be no exertion, lest the hundred joints all ail".<sup>83</sup>

The influence of the mother's health on the child remained an important concern for authors of the *Huangdi neijing*. In a chapter of *Suwen*, epilepsy in the newborn is attributed to the mother being frightened during pregnancy.<sup>84</sup> On the other hand, the mother's well-being during pregnancy gained much more attention in the *Huangdi neijing* than in *Taichan shu*. A central idea in

82 Jia Yi 賈誼, *Xinshu* 新書 in *Han Wei congshu* 漢魏叢書, ed. Cheng Rong 程榮 (Changchun: Jilin Daxue chubanshe, 1992), vol.10. Dai, De 戴德. *Da Dai li ji* 大戴禮記 in idem, "Bao fu" 保傅 chapter.

83 Ma Jixing, *Mawangdui gu yishu kaoshi*, 785. Harper, *Early Chinese Medical Literature*, 379. The original sentence reads: *Nan zi wu lao, bai jie jie bing* 男子勿勞，百節皆病。The subject of the sentence can be interpreted as the male fetus or the mother carrying a male fetus.

84 Zhang Zhicong et al. eds. *Huangdi neijing suwen jizhu*, 5:84.

the *Huangdi neijing* literature on the issue is that pregnancy emaciates the mother. The *Lingshu* chapter, “Discussing Illness; Examining the Foot-long Section” (*Lun ji zhen chi* 論疾診尺) contains the sentence: “women with an extreme movement in the hand minor *yin* vessel are pregnant,” suggesting that pregnancy is a kind of disease or disorder. *Suwen* includes a few sentences about diagnosing pregnancy by taking pulses,<sup>85</sup> which are situated among the diagnosis of various diseases. One passage explicitly refers to pregnancy as a disorder:

[Huang] Di: “Good! How does one know that a pregnant [woman] will soon give birth?” Qi Bo: “The body has a disease, but there is no evil [movement in the] vessels.”<sup>86</sup>

帝曰：善。何以知懷子之且生也。岐伯曰：身有病而無邪脈也。<sup>87</sup>

In other passages, whether pregnancy is considered a disorder is more ambiguous. When discussing the disease that pregnant women are becoming mute in the ninth month, the author of *Suwen* holds that no additional therapies are needed because the woman’s body will restore itself to the normal state after delivery. He also believes that emaciated patients should not be cauterized, and that drainage needling should not be applied to pregnant women, because the therapies will bring disease (*zhen* 疹) and worsen the situation.<sup>88</sup> Here, pregnancy is regarded as a state somewhere between a normal condition and a disease. In either case, whether categorized as a disease or not, pregnancy is thought to weaken the mother.

*Jingui yaolüe* includes dozens of recipes for diseases that occur during pregnancy, as well as for postpartum diseases in chapters 20 and 21. Instead of focusing on the child’s health, most of these recipes are centered on the mother’s health, suggesting that these mothers were treated by doctors not just as reproductive tools, but as full human beings. From the early Western Han *Tai chan shu* to the late Eastern Han *Jingui yaolüe*, the focus of reproductive

85 Idem, 2:23, 3:26.

86 Paul U. Unschuld and Hermann Tessenow, trans., *Huang di nei jing su wen: Annotated Translation of Huang Di’s Inner Classic—Basic Questions* (Berkeley: University of California Press, 2011), 1:610. *Suwen* commentators have interpreted the passage differently. According to Wang Bing, “disease” is to say that menstruation is blocked. Zhang Jiebin and Wu Kun explain “disease” as some unrest in the body. Wu Kun and others interpret 生 as to survive. See footnotes 44 and 45 on the same page.

87 Zhang Zhicong et al. eds. *Huangdi neijing suwen jizhu*, 5:49.

88 Idem, 5:80.

medicine shifted from the fetus to the mother, showing increasing attention to the mother’s body. This trend echoes the social context studied by Miranda Brown, wherein celebrations of mothers proliferated among Eastern Han elites. That is, they mourned their mothers with rituals far exceeding those prescribed in classic rituals and they emphasized the emotional attachment between mother and son.<sup>89</sup>

## 7. Gendered Healers and Caretakers

Medical practice in early China involved incantation and caretaking in large part and female practitioners were fairly active in these areas. There were also female doctors who practiced medicine outside their households.

*Wushi’er bingfang* 五十二病方 mentions the female shaman (*wu fu* 巫婦) in an incantation recipe that deals with child sprite (Harper 1998:302). Although the healer or the caretaker’s gender is not specified in the text, most of the recipes in *Wushi’er bingfang* do not require the practitioner’s expertise and thus can be used by female members of the patient’s family. Non-medical texts found in Mawangdui also attest to the fact that female healers were not uncommon at that time. The “Day Book” (*ri shu* 日書) from Mawangdui mentions that a female born on a certain day is destined to become a doctor. In a legal case detailing two women fighting, one of whom miscarried as a result, a female doctor was summoned to examine the body of the victim.<sup>90</sup>

Some accounts in official histories also mention females as medical practitioners. Famous examples are Yi Xu 義姁 and Chunyu Yan 淳于衍, who both served the royal family.<sup>91</sup> The “Biographies of *fangshu* 方術”<sup>92</sup> Practitioners” in the *History of the Later Han Dynasty* 後漢書 records the story of a transgender person named Xu Deng 徐登, saying that he was originally

89 Miranda Brown, *The Politics of Mourning in Early China* (Albany: State University of New York Press, 2007), 65–84. Also see Mark Edward Lewis, “Mothers and Sons in Early Imperial China,” in *Extrême Orient, Extrême Occident*, vol. hs, no. 1(2012): 245–75.

90 Shuihudi Qin mu zhujian zhengli xiaozu 睡虎地秦墓竹簡整理小組 eds. *Shuihudi Qin mu zhujian* 睡虎地秦墓竹簡 (Beijing: wenwu chubanshe, 1978), 204–5, 253.

91 Yi Xu is recorded in “The Biographies of Harsh Officials” (*Ku li lie zhuan* 酷吏列傳) in *Shiji* and *Hanshu*. See Sima Qian, *shiji* (Beijing: zhonghua shuju, 1959), 3144–45; Ban Gu 班固, *Hanshu* 漢書 (Beijing: zhonghua shuju, 1962), 3652–53. Chunyu Yan appears in “The Chronicle of Emperor Xuan” (*Xuan di ji* 宣帝紀), see Ban Gu, *Hanshu*, 251.

92 *Fangshu* includes various arts such as necromancy, astrology, and medicine.

a female but turned into a male, and that he was good at sorcery.<sup>93</sup> Xu and his disciple Zhao Bing 趙炳 treated diseases with their sorcery skills, but Zhao was finally executed by the local government for the crime of bewildering the masses (*huo zhong* 惑眾).<sup>94</sup> The overlap among sorcery, Daoism, and medicine was commonly found in other historical figures in the same set of biographies; the authorities' suspicions about them were also common. As Jen-der Lee has pointed out, female healers and caretakers included women of various occupations, such as shamans, Daoist priestesses, midwives, and nurses, but many of them did not identify as doctors.<sup>95</sup>

Despite the existence of female healers, there is no trace of female doctors in the *Huangdi neijing* literature or in late Eastern Han medical texts. This is not surprising given that understanding these texts required advanced literacy and that they were only transmitted within small circles. Thus, limited access to educational and social opportunities suggests that most female doctors must have acquired their knowledge from family members, as will become clearer in the next section.

## The Establishment of Technical Medicine in the Han

Like other theories and practices, medicine must be understood as a system of power intertwined with culture. Power relations affected what could be considered medical knowledge, who were included or excluded from practicing medicine, and how medical authority was established. In this section, I show that the shifting significance of different female roles in early Chinese medicine were linked to the rise of technical medicine during the Han.<sup>96</sup>

Technical medicine in the Chinese context is characterized by several

93 The original text reads: *Ben nü zi, hua wei zhang fu. Shan wei wu shu.* 本女子，化為丈夫。善為巫術。

94 Fan Ye 范曄, *Hou Han shu* 後漢書 (Beijing: zhonghua shuju, 1965), 2741.

95 Jen-der Lee, "Han Tang zhi jian de nüxing yiliao zhaogu zhe," 147.

96 I use the term "technical medicine" instead of "classical medicine" or "literate medicine" because I think it is more precise than the other ones and better distinguishes the medical tradition based on vessel theory from other medical traditions, especially *yangsheng*. "Classical medicine" and "literate medicine" point out this medical tradition's association with classical texts and ancient sages, but the *yangsheng* and pharmacopeia traditions also require literacy, so these terms cannot distinguish technical medicine from other medical traditions. The term "technical" also better describes the specialization of a group of physicians.

features. First, technical medicine is a text-based medical tradition. Technical physicians' claims to healing power were largely grounded in their knowledge of written texts. The authority of *Huangdi neijing* derives from the Yellow Emperor and other ancient sages mentioned in the text. *Wushi'er bingfang*, for example, does not qualify as technical medicine because it does not reference ancient figures to justify its textual authority. Instead, it bears a close relevance to sorcery and popular religion.

Scholars of medical history speak of a scholarly medical tradition based on written texts in both Western and Eastern societies, but also point out significant differences between the scholarly medical tradition in ancient Greece and that in early China. Some have referred to the Chinese tradition as "gnostic," meaning that "knowledge gets much of its status from the person who knows it," while characterizing the Greek tradition as "epistemic," meaning that "the known gets much more of its status from the knower's capacity to justify it in terms of other knowns."<sup>97</sup> Indeed, Chinese technical medicine's references to classics and its reliance on intellectual authority distinguished it from other medical traditions. This emphasis on classical texts naturally disadvantaged female healers, caretakers, and patients who enjoyed fewer educational opportunities than male physicians.

Another difference is that the scholarly physicians in ancient China stressed the disciples' qualifications and the procedures by which they transmitted their medical knowledge. Consequently, there was a wide gap between "the relatively few literate, well-born physicians who left the enormous written record" and "the plebeian practitioners of every stripe, generally illiterate for most of Chinese history, who cared for the overwhelming majority of the population."<sup>98</sup>

Second, the aforementioned distinction is related to the relative exclusivity of technical practitioners along with the esoteric transmission of medical knowledge. This phenomenon was accompanied by the rejection of shamans and family caretakers from the technical physicians' group. Several passages in *Shiji* and in *Huangdi neijing* reveal critical information about the transmission process.

The biographies of Bian Que and Chuyu Yi in *Shiji* present their sources of medical knowledge as esoteric. According to the biographies, a mysterious

97 Donald G. Bates ed., *Knowledge and the Scholarly Medical Traditions* (Cambridge: Cambridge University Press, 1995), 3.

98 Nathan Sivin, "Text and experience in classical Chinese Medicine," in *Knowledge and the Scholarly Medical Traditions*, 177–204, 199.

guest recognized that Bian Que was not an ordinary man and began visiting him on occasion for more than ten years. Finally, the guest said to Bian Que, “I have a secret [medical] formula. I am growing old and would like to hand it on to you, Sir. You must not disclose it.”<sup>99</sup> When Bian Que had promised, the guest left him the books and some medicine to drink, and suddenly disappeared, showing that he was a supernatural being. After drinking the medicine for thirty days, Bian Que acquired the ability to see through his patients’ bodies.

The biography of Chunyu Yi claims that Chunyu Yi learned his medical knowledge from Gongsun Guang and Yang Qing. Gongsun Guang said to Chunyu Yi: “These are the wonderful formulae that I received when I was young. In their entirety, I have given them to you. Do not teach them to anyone else.”<sup>100</sup> After some time, Gongsun Guang confirmed Chunyu Yi’s medical expertise through a conversation. He then recommended that Chunyu Yi learn from Yang Qing. When asked where Yang Qing had learned his teachings, Chunyu Yi reported,

I do not know the teacher whence he received [them]. Ch’ing’s family was wealthy. He was good at doing medicine, but was unwilling to treat illness for other people. It must be for this reason that he was not well-known.<sup>101</sup> Ch’ing, moreover, formally announced to your servant, Yi: “Beware not to let my sons and grandsons know that you have studied my formulae.”<sup>102</sup>

The exclusiveness of the medical practitioners’ group is stressed in *Huangdi neijing* as well. Two passages in *Lingshu* indicate that medical knowledge had been transmitted orally by the teacher to the student in ancient times.<sup>103</sup> Another two passages demonstrate that the transmission of medical

99 我有禁方，年老，欲傳與公，公毋泄。Sima Qian, “Pien Ch’üeh and Ts’ang-kung, Memoir 45,” 3.

100 是吾年少所受妙方也，悉與公，毋以教人。Sima Qian, “Pien Ch’üeh and Ts’ang-kung, Memoir 45,” 78.

101 Nienhauser’s translation of this sentence is: “He was fond of doing medicine but unwilling to treat illness on behalf of other people. It must be for this reason that he was not known among them.” However, judging from the context, I translate *shan* 善 as “good at”, *wei* 為 as “for”, and *wen* 聞 as “well-known.”

102 不知慶所師受。慶家富，善為醫，不肯為人治病，當以此故不聞。慶又告臣意曰：「慎毋令我子孫知若學我方也。」Sima Qian, “Pien Ch’üeh and Ts’ang-kung, Memoir 45,” 77.

103 Unschuld, *Huang Di Nei Jing Ling Shu*, 327, 341.

knowledge required a blood oath.<sup>104</sup>

The same passages show that the acquisition of technical medicine often involved traveling and interaction with experts outside a person’s family. This learning process created difficulty for women whose sphere of activity was largely limited to the household. Therefore, as Jen-der Lee explains in her paper on female caretakers, the few female doctors were likely to have acquired their medical knowledge from their family members.<sup>105</sup> Thus, as technical medicine and its medical knowledge and practice became mainstream, female healers were inevitably marginalized. Female shamans were common healers during the time the Mawangdui texts were written, but with the specialization of medical knowledge, incantation was gradually excluded from technical medicine, and female shamans were no longer considered serious healers by technical experts.<sup>106</sup> Therefore, the role of the female as healers became less and less visible in technical medicine, although female caretakers continued to play essential roles in the household.

Further, to build their authority as medical experts, some technical physicians made an effort to discredit shamans and midwives. Doctors of technical medicine, from Bian Que to Sun Simiao, warned others not to rely on shamans to treat diseases.<sup>107</sup> Between the Han and the Tang, conflicts between male doctors and female caretakers frequently happened when a patient encountered difficulty during delivery, because the male doctors believed that female caretakers lacked medical knowledge and had taken inappropriate measures on the patient.<sup>108</sup> This distrust of shamans and midwives reveals the competition between technical medicine and other medical traditions.

Third, technical medicine centered pathology instead of longevity.<sup>109</sup> In other words, it focused on diseases rather than on healthy daily habits, such as diet and exercise, which fall under the category of *yangsheng*. Correspondingly, it relied on the doctor’s expertise instead of self-care, which required a low threshold. In Mawangdui medical texts, discussions of

104 Idem, 156, 466–67.

105 Jen-der Lee, “Han Tang zhi jian de nüxing yiliao zhaogu zhe.”

106 Idem, 147.

107 Ibid.

108 Jen-der Lee, “Han Tang zhi jian yishu zhong de shengchan zhi dao”, 533–654.

109 Vivienne Lo has pointed out this distinction but also discussed the *yangsheng* tradition’s influence on technical medicine that centered on the *mai* (translated as vessel or channel). See Vivienne Lo, “The Influence of Nurturing Life Culture on the Development of Western Han Acumoxa Therapy,” in *Innovation in Chinese Medicine*, ed. Elisabeth Hsu (Cambridge: Cambridge University Press, 2001), 19–50, 22.

diseases are balanced with those about *yangsheng* practices, such as pulling and breathing exercises. By contrast, in *Huangdi neijing* literature there is little information on daily self-care. *Shanghan lun* and *Jingui yaolüe* were also written from the perspective of technical physicians and centered on the diagnosis and treatment of various diseases.

Corresponding to this distinction between *yangsheng* and technical medicine, the *yangsheng* tradition is participatory and relatively egalitarian between partners, whereas in technical medicine, the patient defers to the authority of the physician. In the words of Vivienne Lo, the *yangsheng* tradition is “a medical tradition led and shaped by bodily experience, rather than clinical observation.”<sup>110</sup> The practitioners of the *yangsheng* tradition actively practiced it, whereas the patient in technical medicine is passively observed by the physician as part of the clinical encounter, regardless of the social status of the two parties.

Just as Foucault’s analysis that the proliferation of discourses on sexuality does not mean its liberation in real life but a desire to label and diffused power of control,<sup>111</sup> the increased discussion of women’s diseases in technical medicine did not mean that women became more prone to disease or that women received more medical care. Rather, these changes were primarily the result of technical physicians’ interest in classifying and labeling diseases. Their concentration on pathology is also reflected in their views toward sex. As I previously discussed, technical medicine texts almost always mention sex as etiology. Moreover, since technical medicine associates pregnancy with disease or disorder, technical physicians regard the mother, more or less, as a patient.

The consequence of all these changes is that the female’s primary role became that of the patient, echoing the central position of disease in technical medicine. The centering of women’s role as the patient partly explains why *Jingui yaolüe* included more recipes for female-specific diseases than Mawangdui medical texts, in which the concern for diseases was diluted by other concerns. Later medical works on women’s diseases, such as Sun Simiao’s *Furen fang* and *fuke* literature after the Song, developed along the same lines. As technical medicine flourished, female roles as the cosmological *yin* and the sexual partner partly merged with Daoist practices and became less

110 Vivienne Lo, “The Influence of Yangsheng 養生 Culture on Early Chinese Medical Theory” (Ph.D. diss., University of London, 1998), 3.

111 Michel Foucault, *The History of Sexuality, Volume 1: Introduction* (New York: Vintage Books, 1990). Michel Foucault, *The Order of Things: An Archaeology of the Human Sciences* (New York: Vintage Books, 1994).

conspicuous in technical medical texts, such as *Huangdi neijing* and *Shanghan zabing lun*.<sup>112</sup>

## Models of the Human Body and Gender-Specific Medicine

Many feminist and postmodernist scholars have argued that the belief in profound biological differences between the sexes was constructed by modern Western biomedicine. They have also challenged the belief that gender is constructed on the basis of the biological differences between two types of bodies.<sup>113</sup> As in many other premodern societies, early Chinese medical authors presented non-binary models of gender that were not determined by biological differences. While gender differences were usually framed as *yin* and *yang*, *Huangdi neijing* indicates there are not only *yin* persons and *yang* persons:

There are major *yin* type persons and minor *yin* type persons, major *yang* type persons and minor *yang* type persons, and there are persons with harmonious, even shares of *yin* and *yang*.<sup>114</sup>

As scholars have pointed out, although early Chinese medicine recognized biological differences between sexes, it considered these distinctions to be neither predetermined nor fundamental. However, despite the continuities in Chinese medicine and the overlap among different medical traditions, the rise of technical medicine introduced new models of the human body compared with the preexisting *yangsheng* tradition. In this section, I discuss the theoretical models of the human body before and after the rise of technical medicine, as well as these models’ implications for the development of gender-specific medicine.

The Mawangdui *yangsheng* literature emphasizes the cosmological body, the body that exists as part of the cosmos and exchanges energy with it. Gender

112 For Daoist *yangsheng* texts and Daoist medicine for women, see Robin D.S. Yates, “Medicine for Women in Early China: A Preliminary Survey,” 159. For a survey of gender relations in Daoist sexual practices, see Yao Xinzong, “Harmony of *Yin* and *Yang*: Cosmology and Sexuality in Daoism,” in *Sexuality and the World’s Religions*, eds. David W. Machacek and Melissa M. Wilcox (Santa Barbara, Calif: ABC-CLIO, 2003), 65–100.

113 Charlotte Furth, “Ming-Qing Medicine and the Construction of Gender,” *Jindai zhongguo funü shi yanjiu* 近代中國婦女史研究, 2 (1994): 229–50.

114 Unschuld, *Huang Di Nei Jing Ling Shu*, 648. The original text reads: 蓋有太陰之人，少陰之人，太陽之人，少陽之人，陰陽和平之人。

differences are thus explained mainly by the yin and yang forces. By contrast, the Mawangdui vessel literature deemphasizes gender differences based on an abstract, universal model of the body. As Charlotte Furth has discussed, the *Huangdi neijing* encompasses both: it sometimes presents the body based on correlative cosmology, but other times follows the model of the abstract, ungendered body.<sup>115</sup>

The Mawangdui *yangsheng* literature regards the biological differences between the male and the female as malleable by social and cosmological forces within a formative period. The handbook on pregnancy, *Tai chan shu*, shows that the authors believed the sex of the fetus was not yet fixed during the first three months of pregnancy and could be altered by medical recipes and the surrounding environment. This idea implies that sex differences are not predetermined, but rather shaped collectively by food, social interactions, and cosmological forces. Moreover, the author believed that the expected gender of the fetus would affect its biological form. *Tai chan shu* proposes several methods of influencing the fetus' sex. According to this text, during the third month of pregnancy, the gender of the fetus is shaped by the objects it contacts. Therefore, if the mother wants a boy, she should place bows and arrows nearby, eat<sup>116</sup>(?) male chicken, ride male horses, and watch male tigers. If she wants a girl, she is advised to wear female ornaments.<sup>117</sup> It is also recommended that the mother eats caterpillars, bees' eggs, and dog genitals to have a boy, and that she eats black female chicken to have a girl.<sup>118</sup> The logic seems to be that these recommended foods correspond to *yin* or *yang*, whichever fits the desired gender of the fetus.

While the authors of the Mawangdui *ars erotica* texts took the male body and the female body to be opposite and supplementary to each other, they saw this difference not as primarily biological but as the embodiment of *yin* and *yang* cosmological forces. This is why the text teaching sexual intercourse is named “He *yin yang*” 合陰陽 (Conjoining *yin* and *yang*), and why the text that combines the contents of nourishing life and those of *ars erotica*

115 Charlotte Furth has noted the contradictions and ambiguities in *Huangdi neijing*. In her words, “from one aspect male and female bodies are identical or homologous and gender difference is a relativistic and flexible aspect of the body. From another aspect the bodily powers associated with sexuality and generation participate in the gendered hierarchical ordering of the human microcosm and the macrocosm of Heaven and Earth.” Furth, *A Flourishing Yin*, 48.

116 This character is incomplete in the original manuscript.

117 Ma Jixing, *Mawangdui gu yishu kaoshi*, 786.

118 Idem, 807, 809, 811.

is named “Tianxia zhidao tan” 天下至道談 (Discussion of the culminant way in under-heaven). Sexual intercourse between a male and a female is considered a form of interaction between *yin* and *yang*, and also a part of the cosmological dynamics of *yin* and *yang*. Thus, the female archetypes in these texts participate in the construction of gender relations and experience cosmic gender dynamics. They are not objects to be examined and taken care of by physicians during clinical encounters.

By contrast, the authors of the Mawangdui vessel books present an abstract, theoretical model of the human body consisting of vessels. Since this theoretical body does not refer to any concrete, corporeal body, it is ungendered. This model corresponds to a Western Han figurine discovered in Sichuan that displays all the vessels in the human body, in which the genitals are omitted, and the sex is ambiguous.<sup>119</sup> This model is also characterized by a focus on the interior of the body, despite the fluid boundary between the interior and the exterior.<sup>120</sup>

The authors of *Huangdi neijing* synthesized the cosmological thought from *yangsheng* literature and the abstract, ungendered model of the body from vessel literature. The corpus frequently invokes correlative cosmology, mapping the human body onto the cosmological categories of *Yin-Yang* and Five Agents. On the other hand, only a small part of the *Yin* and *Yang* mentioned in *Huangdi neijing* refers directly to the female and the male. Most often, the *Yin* and *Yang* in the corpus denote the *yin* vessels and *yang* vessels, or the lower body and the upper body in the same person. Moreover, the *Huangdi neijing* literature tends to explain the biological differences between male and female based on the abstract, universal model of the body.

The *Huangdi neijing* and its explanatory text *Nan jing* acknowledge the biological differences between the male and the female but explain these differences as secondary and derivative of the circulation of *qi* and blood inside the body. The authors of *Huangdi neijing* were clearly aware of the anatomical differences between the male body and female body but regarded these differences as secondary to the interior flow of energy and also explained them through the interior circulation in the vessels. For instance, one passage in *Lingshu* explains that women have no beards because fine hair grows out

119 He Zhiguo and Vivienne Lo, “The Channels: A Preliminary Examination of a Lacquered Figurine from the Western Han Period,” *Early China*, 21 (1996): 81–123.

120 Mark Lewis has discussed the fluid boundaries between the interior and the exterior of the body as well as the interfaces between the two. See Mark Edward Lewis, *The Construction of Space in Early China* (Albany: State University of New York Press, 2006), 61–76.

of the throughway and controller vessels when both blood and *qi* abound. Although “women have a life-long surplus of *qi*,” “their blood is insufficient since they frequently lose blood.” Therefore, neither of these two vessels ‘can’ supply enough blood and *qi* to the mouth or the lips, hence a beard does not grow.<sup>121</sup>

The existence of different organs in males and females is also explained according to a universal pattern of the human body. Two passages in *Nan jing* mention that both males and females have a second kidney, which is the vital gate (*ming men* 命門); it is where the male stores his semen and where the female attaches her womb.<sup>122</sup> The idea that a certain part of the male body corresponds with a part of the female body shows the intention to explain the anatomical difference by placing them in the same cognitive category and by stressing their functions.

Likewise, the authors of *Lingshu* described the biological differences between the male and the female through a uniform pattern, seeing the female’s womb as an equivalent of the male’s genitals:

Heaven has ten [stems counting the] days; man has ten fingers. [The earth branches beginning with] *chen* are twelve; man has ten toes, the stalk, and the pendant to correspond to them. Women lack [the latter] two parts. This way they can carry [an additional] human body within them.<sup>123</sup>

The passages in *Lingshu* regarding the female body usually concern menstruation, pregnancy, delivery, and the loss of blood caused by menstruation or delivery. In line with the overall idea that a healthy body relies on the circulation of *qi*, the author of *Lingshu* explained menstruation as the evidence for and result of *qi* forming knots inside the body.<sup>124</sup> Again, this explanation admits sexual differences on the biological level but dismisses it on the fundamental level.

A systematic comparison of life cycles between males and females appears in the first chapter of *Suwen*. In order to explain why humans are unable to reproduce after a certain age, the character Qi Bo 岐伯 divides the life cycle of women by seven years and that of men by eight years. For the female, she grows teeth and hair at seven; she starts having menstruation at

121 Paul U. Unschuld, *Huang Di Nei Jing Ling Shu*, 599.

122 Xu Dachun annot., *Nan jing jing shi*, 725, 727.

123 Unschuld, *Huang Di Nei Jing Ling Shu*, 634–635.

124 Idem, 531.

fourteen and thus can have children; at twenty-one her real teeth grow; at twenty-eight her body is the strongest; at thirty-five she begins to age; at forty-two her hair starts to turn gray; at forty-nine she cannot have children. The male experiences similar stages of growth, aging, and changes in reproductive abilities, but every stage takes eight years.<sup>125</sup> In this view, the male body and the female body follow the same cycles of change, although the timing and specific body functions differ.

How do these early medical traditions relate to the later *fuke*? At first sight, it may seem that gender-specific medicine developed directly from the highly gendered, cosmological body in *yangsheng* literature and challenged the model of the abstract body in vessel literature. However, from another perspective, the participatory nature of the *yangsheng* tradition assumes a healthy female and hinders the female body from being pathologized, whereas technical medicine encourages the clinical examination of the female body. Moreover, because the vessel theory follows the ungendered model and offers the same medical treatments for men and women, it in turn necessitates the establishment of a separate department for female-specific diseases. Therefore, it is not surprising that *fuke* drew heavily from the technical medical tradition.

As I have discussed earlier in the subsection of “The Gendered Patient”, gender-specific treatments had appeared earlier than *Huangdi neijing*. In *Wushi'er bingfang* there are a few recipes designed specifically for male or female patients. Yet early technical medicine, including the Mawangdui and Zhangjiashan vessel books, “The Biography of Chunyu Yi”, and the *Huangdi neijing*, contains little information about gender-specific treatments, with a few exceptions regarding sexuality and birth. As Lisa Raphals has noted, Chunyu Yi treats the bodies of his female patients and male patients as roughly identical, using the same treatments on women and men with the same diseases.<sup>126</sup> This phenomenon is consistent with the overall indifference toward gender in *Huangdi neijing*.<sup>127</sup>

In the Eastern Han technical medicine, the content on women’s reproductive functions expanded considerably compared with *Huangdi neijing*.

125 Zhang Zhicong et al. *Huangdi neijing suwen jizhu*, 1 :5–8.

126 Lisa Raphals, “The Treatment of Women in a Second-century Medical Casebook,” *Chinese Science* 15 (1998): 7–28.

127 In her book *Sharing the Light*, Lisa Raphals also argues that the Mawangdui medical texts, “The Biography of Chunyu Yi,” and the *Huangdi neijing* all treat women and men as medically identical. See Lisa Raphals, *Sharing the Light: Representations of Women and Virtue in Early China* (Albany: State University of New York Press, 1998), 169–93.



I have mentioned earlier that Zhang Ji's *Jingui yaolüe* contains separate chapters for pregnancy, postpartum diseases, and women's miscellaneous diseases. Nevertheless, as Robin Yates has noted, "when he discusses the general origin of women's disorders, he does not gender them. Rather he states that they arise from depletion as a result of an accumulation of Cold inhibiting the flow of *qi* through the circulation tracts, although he also pays considerable attention to the emotions as factors causing illness in women."<sup>128</sup> This observation points to *Jingui yaolüe*'s continuity with *Huangdi neijing*: acknowledging anatomical sexual differences but explaining etiology based on an ungendered model of vessels, *qi*, and blood.

Meanwhile, recipes for women continued to accumulate throughout the Han, indicating the existence of a third medical tradition. Robin Yates has discussed the "tradition of pharmacopeia for women" based on excavated slips from the Qin and the Eastern Han, which prescribe different amounts of medicine for women from men or unguents specifically for women. Yates associates these excavated recipes with two medical works recorded in the "Treatise of Literature" (*yi wen zhi*) in *Han shu* — *Furen ying'er fang* 婦人嬰兒方 (Prescriptions for women and infants) and *Shennong Huangdi shijin* 神農黃帝食禁 (The Divine Husbandman's and the Yellow Emperor's food prohibitions).<sup>129</sup> Although neither of the two books survived, the titles suggest that they likely contain content similar to the recipes from Mawangdui and the other excavated recipes mentioned above, but it is doubtful whether the recipe books include any theoretical constructions of gender.

In this long-term view, the Tang physician Sun Simiao's theorization that women's body is systematically different from men's and needs "separate prescriptions" was indeed an important innovation in the history of *fuke*.<sup>130</sup> While the idea that women's body is always in lack of blood and is thus weaker than men's can be traced back to *Lingshu* and *Jingui yaolüe*,<sup>131</sup> this difference was taken as a matter of degree rather than a systematic difference in the Han texts. It is fair to say that the Tang-Song development of *fuke* not only inherited certain parts of the *yangsheng* and pharmacopeia traditions but also invented a theoretical model of gendered human body based on the

<sup>128</sup> Robin D.S. Yates, "Medicine for Women in Early China: A Preliminary Survey," 142.

<sup>129</sup> Idem, 135–39. Ban Gu, *Hanshu*, 30.1777.

<sup>130</sup> Charlotte Furth, *A Flourishing Yin*, 51. Jen-der Lee, "Han Tang zhi jian qiu zi yifang shitan — jian lun fuke lanshang yu xingbie lunshu," 313–17. Robin D.S. Yates, "Medicine for Women in Early China: A Preliminary Survey," 130.

<sup>131</sup> Unschuld, *Huang Di Nei Jing Ling Shu*, 599. Zhang Ji, *Jingui yaolüe*, 303.

technical medical tradition.

## Conclusion

The diverse roles that the female played in early Chinese medical literature, whether actively or passively, show that sex and gender awareness had a long history in Chinese medicine before the formal establishment of *fuke*. Despite the continuities in Han medical literature, the Eastern Han technical medicine deemphasized the female roles of the cosmological *yin* and the sexual partner, while centering the roles of the patient and the mother, showing distinct views toward gender from those in the Mawangdui *yangsheng* literature. Meanwhile, female shamans figured prominently in Mawangdui medical texts but were marginalized in technical medicine. Although women continued to play important roles in medical care, in the technical medical texts represented by the *Huangdi neijing*, the female's voice was very weak.

The different roles of the female in different medical traditions echoed the growing significance of technical medicine, which competed for medical authority with other medical traditions including exorcism, nourishing life, and midwifery. While other medical traditions continued to exist as important parts of Chinese medicine and religions, the rise of technical medicine transformed the structure of the medical field, standards of medical authority, and the ways of theorizing the human body. This important change had a paradoxical relationship with the later medical branch of *fuke*, which both questioned the ungendered body in Han technical medicine and inherited technical medicine's emphasis on etiology, as well as incorporated gendered treatments from other medical traditions including *yangsheng* and pharmacopeia.

It is possible that the changes in women's roles in early Chinese medicine were not entirely chronological changes but also changes in the representations of different medical traditions in available sources. The scarcity of transmitted and excavated medical texts from early China limits our ability to explore this hypothesis, but hopefully future archaeological findings will bring new sources and fresh perspectives. Based on existing evidence, I will cautiously conclude that the rise of technical medicine in the Han left profound impacts on the roles of women and the conceptualizations of gender in Chinese medicine.

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# 早期中醫的性別表述：婦科的前史

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現有關於性別與中醫的交叉點之研究大多以《黃帝內經》為起點。本文考察了早期中國傳世文獻與馬王堆出土醫書中對性別與人體的論述，論證儘管婦科的正式成立更晚，專門針對女性的醫藥在《黃帝內經》之前已經出現。本文分析了性別在早期中國醫學中發揮作用的七種方式：性別化的病人、性別化的藥劑、性別化的疾病、作為陰陽的具象化的性別、性別化的性伴侶、女性作為母親、性別化的醫者與照顧者。與西漢初期的文獻相比，東漢末年的醫學文獻弱化了女性作為宇宙論的「陰」和性伴侶的角色，而強調女性作為病人和母親的角色。這些差別很大程度上可以解釋為基於文本、男性主導的技術醫學在漢代的建立，以及一些技術醫師試圖將其他醫學傳統，諸如巫術和「養生」實踐，從技術醫學中排除的嘗試。技術醫學的出現因此對女性在中醫中的角色和後來婦科的發展產生了深遠影響。

**關鍵詞：**社會性別 生理性別 身體 醫療 早期中國