Preface

Over the last five decades, attempts have been made in the People's Republic of China to distill all that is valuable amid the vast mass of traditional medical literature into a systematized body of knowledge. This is the inevitable outcome of the challenge by Western medicine and the Western sciences. Throughout the Chinese-speaking world, Western medicine has established itself as the mainstream medicine; scientific values dominate all fields of learning, and education is based very closely on Western models. Despite this, there are hopes in China that by discovering its scientific bases, traditional medicine will evolve into a scientific discipline that can be integrated with modern medicine. So far, however, such efforts, valid and necessary though they may be, have been unable to escape the fact that Chinese medicine, rooted in the past, has for centuries looked back to its formative period as a golden age, and that even today a sound knowledge of the classics is still needed to gain a firm understanding of Chinese medicine.

The impressive array of Chinese medical literature now available in English largely derives from the recent Chinese effort to distill what is valuable from the knowledge of the past. In content and presentation, English textbooks of Chinese medicine are English versions, for the most part simplified, of the primers used in China. Nevertheless, the lamentable fact that remains is that while traditional approaches to Chinese medicine are still accessible to modern Chinese people, they are unavailable to Westerners without linguistic access to the wealth of Chinese texts. Anyone who, penetrating the language barrier, engages in the study of Chinese texts, and goes to China to witness the teaching and practice of Chinese medicine in the Chinese-language environment soon realizes that the classical literature continues to provide an invaluable source of information for advanced students. The sheer volume of Chinese medical thought makes its complete transmission to the West almost impossible. Nonetheless, until the seminal classical texts and traditional commentaries are translated and widely read, Chinese medicine as transmitted to the West will continue to lack an essential element that it has on its home soil.

The earliest classics generally deemed to be the greatest seminal works of Chinese medicine are the Nèi Jīng, the Nàn Jīng, and the Shāng Hán Lùn. Of these, the Shāng Hán Lùn "On Cold Damage," attributed to Zhāng Jī (张机, style 仲景 Zhōng-Jīng), who lived about 150-219 C.E., is undoubtedly the text of greatest
clinical relevance to the majority of those Chinese practitioners who use medicinal therapy rather than acupuncture as their principal method of treatment. While the Nèi Jīng and the Nàn Jīng are studied for the theoretical elements that were considered important by successive generations of physicians, the Shāng Hán Lùn is studied very much for its clinical value. Not only was the Shāng Hán Lùn the first comprehensive and detailed treatise on externally contracted disease, it was also the first attempt to incorporate medicinal therapy, previously practiced with a minimum of theory, into the medicine of systematic correspondences and the channels and network vessels. It is a seminal work in the development of a holistic understanding of disease conditions that considers not only the offending disease evil but also the patient’s resistance to it; that is, an understanding of disease in which the focus is on patterns (jiě zhēng)—groups of related symptoms—rather than specific “diseases.” The Shāng Hán Lùn was far ahead of its time in both theory and practice, and, not surprisingly therefore, the medicinal formulae it contains constitute an important part of the modern formulary. Given the Western interest in the clinical application of Chinese medicine rather than the historical evolution of medical thought in China, the Shāng Hán Lùn, of all the classical texts, is without doubt the one that stands the greatest chance of evoking interest among Westerners, at least those interested in Chinese medicinal therapy.

Despite the clinical interest that it attracts, the Shāng Hán Lùn, as indeed other ancient texts, is not easy reading—even for Chinese students. It is an ancient text whose original form in the Shāng Hán Zá Bìng Lùn (On Cold Damage and Miscellaneous Diseases) has been lost. The exact order of the original lines is no longer known, and their content may have been changed through mistranscription and possible deliberate reworking. Material is not presented as systematically as in modern literature; there are many ambiguities that have given rise to endless annotation and commentary over the centuries. Nonetheless, a rich body of commentary that has appeared over the last millennium, now as much a part of Shāng Hán Lùn thought as what survives of the original text itself, constitutes valuable reading matter for the present-day student.

Presenting classical literature to a clinically oriented Western reader is not an easy task. The difficulties in translating an ancient text containing numerous ambiguities is the least of the problems. The greatest is providing notes and commentaries that make the text interesting and relevant to the modern Western student and practitioner. In the past, translators have erred on the side of insufficient commentary. With the sole exception of Paul Usscheld’s translation and commentary of the Nàn Jīng, no complete translation of any Chinese medical classic provides any commentary sufficiently comprehensive to enable the Western reader to understand the issues that have traditionally surrounded texts. Other translations of classic texts provide an idea of the contents of the original texts, but fail to enable the Westerner acquainted with Chinese medicine to make full sense of the work. Many of these translations eliminate all the original ambiguities, while the commentaries on the one hand are scant and fail to explain the underlying theories in terms of current Western understanding of Chinese medicine, and on the other hand offer overly simplified explanations that obscure the variety of traditional interpretation.

The aim of our present volume is to enable the modern Western student and practitioner to gain access to a classical text written eighteen hundred years ago
and to the corpus of medical thought to which it gave rise. To that end we have translated the original text with commentary, both modern and classical. Our translation of the text is intended to be an accurate reflection of the original. It is highly literal and avoids any idiomatic English paraphrasing that might obscure any facet of meaning of the original text or enshrine in the translation any one interpretation at the expense of all others. Although this may make reading more difficult in certain places, we felt that it was the most appropriate approach to take with this type of text. Difficulties that the reader may have in an initial literal understanding of any line of the text, such as those posed by technical terms, are dealt with in text notes that follow it. The commentaries consist of two different types of information: a compilation of textual interpretations from the modern literature, and direct translations of classical commentary. The modern material is not a direct translation of any one source, but an attempt to present the major schools of thought that one finds in current textbooks. The classical commentary is translated directly to allow the reader to gain some understanding of the complexity of material present in the related literature. In the commentaries we explain the technical significance of each line, discussing textual problems in greater depth and major differences of interpretation among scholars. Yet since our aim has been to reach the modern Western student and practitioner of Chinese medicine, we have not dwelt excessively on the minutiae of traditional debate that might only interest the medical historian, and have concentrated our main effort on detailed explanation of widely recognized interpretations.

Neither the original text of the Shāng Hán Zá Bìng Lún nor Wáng Shū-He’s original text of the Shāng Hán Lún survives. Consequently, the sequence of the lines is subject to considerable doubt. The Sòng version became the standard version up until the modern era. Modern scholars, as indeed scholars of the past, doubt the reliability of the Sòng order, and have attempted a new order based on the logic of the treatments. This order makes much greater clinical sense of the text than the Sòng order. Although it separates some lines containing references to foregoing lines that are not separated in the Sòng version, and therefore cannot be regarded as a reliable historical reconstruction of the original text, it presents a clinical understanding of the Shāng Hán Lún that encourages modern readers to appreciate the value of this work. Since our intended readership is one for whom the clinical relevance is of greater interest than historical detail, we have—albeit somewhat hesitantly—chosen the modern order for this volume. We nevertheless include the text in the Sòng order in Appendix I.

The choice as to whether to set the Chinese text in the traditional complex characters or the simplified form recently adopted by the PRC was difficult. Even in the PRC there is a continuing tendency to typeset ancient classics in complex characters, in order to preserve for the modern reader the original form of the text. Nevertheless, since most Western students studying Chinese learn the simplified characters first, we have set the Chinese text of each line in the main chapters of the book in simplified characters, but have set the Sòng version in Appendix I in complex characters.

We have taken every opportunity to help the growing number of people who recognize the need to learn Chinese in order to gain access to primary literature. In addition to including the original Chinese text of each line and its Pinyin transcrip-
tion, we have also included in Appendix 2 an analysis of the grammatical structures and the vocabulary used in the text. Students possessing a rudimentary knowledge of basic Chinese characters and their components should find this material helpful in approaching the original Chinese text.

The English terminology used in the present volume is, with few exceptions, that appearing in *A Practical Dictionary of Chinese Medicine* (Wiseman and Feng, Paradigm Publications, 1998), in which Chinese terms are given largely literal equivalents that can be used in the various senses in which the Chinese terms are used, or have been used, over the centuries. Readers should note, however, that certain terms appearing in the *Shāng Hán Lùn* are used in senses that may not have been recorded in *A Practical Dictionary*.

Although this present volume neither represents the full body of knowledge relating to the *Shāng Hán Lùn*, nor offers any fresh insights into it, we are nevertheless confident that it will facilitate access to the original text and foster understanding of its clinical value.