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CHAPTER 1: A new, scientific and unified medicine.

Civil war in China and the new acupuncture, 1945-9 (pp. 14-29, 167-172)

This chapter describes the initial contact of the CCP with Chinese medicine during the desperate times of guerrilla warfare in the Civil War. It was the period when Chinese medicine came to be embraced into the Communist Revolution and this chapter describes the ensuing promotion of Chinese medicine, not so much at the hands of traditional doctors, but at the hands of Western medical doctors. Mao called for the 'co-operation of Chinese and Western medical doctors' in Yan 'an in 1944, but was not explicit as to how such a co-operation might be achieved. His slogan was interpreted as a general 'scientification of Chinese medicine and popularization of Western medicine'. In order to remove the feudalist and superstitious elements of Chinese medicine, some physicians attempted a rigorous transformation of the medicine according to the foremost precepts of the Communist Revolution, i.e. those of 'new', 'scientific' and 'unified'. Acupuncture came to represent this 'new' medicine largely because of its practical value during wartime. This chapter is based on the work of dedicated Party member Zhu Lian, who at the time was deputy director to the Yan 'an China Medical University. She published in 1951 a major work called *The New Acupuncture*, which embodied the political, social and economic circumstances of revolutionary China. The 'new acupuncture' was an unusual amalgam of Chinese medical techniques and politically correct scientific theories. A study of it demonstrates how the scope for intellectual freedom was significantly narrowed by Communist Party political guidelines, to the extent that medical efficiency was subordinated to Party criteria. This chapter will situate the 'new acupuncture' in the environment which created it and examine its unique medical theory.

The Civil War (1945-9) in China was the culmination of a twenty-year-long conflict between the Nationalist and Communist Parties in mainland China. It resulted in the unexpected triumph of the militarily inferior CCP, largely a result of a well-organized campaign and also a structured ideological framework that appealed to the peripheral but numerous elements of society, ostracized by the urban-based Nationalist Party. Much of this ideology was the product of Party leader Mao Zedong (1893-1976)'s unique concept of China's rightful place in global society and of its particular stage in the evolution of Communism. Much of his theorizing was carried out in the isolated reaches of Yan'an, the desert backwater where a much depleted but ever resilient core force of the CCP had arrived after relentless persecution from the Nationalist Party had forced them to embark on the many trials and tribulations of the Long March (1934-5). Here Mao was able to rethink the strategies of the CCP, if they were to succeed in leading China independently from the Nationalist Party. The CCP needed to convince the people in the base areas that they had a policy programme capable of guiding China to victory through the present state of war, and capable also of providing a strong and consolidated government in the future. Such a plan for the future was presented by Mao in his key

text 'On New Democracy' (xin minzhu zhuyi), published on 19 January 1940 in the debut edition of the CCP journal Chinese Culture (zhongguo wenhua).¹

In 'On New Democracy' Mao reaffirmed socialism as the Party's ultimate goal, and appealed to the wider public to join the Communists in their efforts to rebuild China. He defined China's revolutionary path and the role to be played by the Communist Party in this revolution. Mao stated that 'we want not only to change a politically oppressed and economically exploited China into a politically free and economically prosperous China, but also to change a China which has been ignorant and backward under the rule of the old culture into a China that will be enlightened and progressive under the rule of a new culture. In a sentence, we want to build up a new China'.² Mao was thus suggesting not merely political and economic reform, but an entire upheaval of cultural roots to produce a free-thinking and independent 'new democratic culture' which would transform Chinese society and give rise to an enlightened and prosperous new China.

In Mao's definition of this 'new democratic culture', he was to use three words which were to describe its development. These were 'new' (xin), 'science' (kexue) and 'unity' (tuanjie). The term 'new' implied free from superstition and the heavy links to a feudal past. Instead the components of the new culture would have to be forward-moving and enterprising. Mao advocated that such a change would be possible through the use of 'science'. By 'science' Mao was not so much referring to the science linked with the Western investigation of nature, but more to the Marxist ideal of science as the criteria for true knowledge. For Mao stated that 'this type of new democratic culture is scientific. It is opposed to all feudal and superstitious ideas; it stands for seeking truth from facts, it stands for objective truth and for unity between theory and practice'.³ 'Unity' was the third criterion in the building up of a new China. Everybody had to join together and fight for the same cause, and this included all classes of Chinese society, from the upper bourgeoisie to the peasantry, so long as their beliefs were not against those of the Party. It also implied a unity of knowledge, and this had particular implications for the revolutionary intellectual.

Four years after his 'On New Democracy' speech, Mao addressed the Shaanxi-Gansu-Ningxia border region with a speech entitled 'The United Front in Cultural Work (wenhua gongzuo zhong de tongyi zhanxian)' on 30 October 1944.⁴ In it, Mao's concept of 'unity' within the new democratic culture was expanded to include the traditional, folk aspects of the regions that the Communist Party was occupying. In this speech Mao pointed out that although work towards constructing a 'new democratic culture' had already begun in the revolutionary base areas, there were still many traces of feudalism remaining. He identified these traces of feudalism as those of 'illiteracy' (wenmang), 'superstition' (mixin) and 'unhygienic habits' (bu weisheng de xiguan). Identifying them as 'enemies' to the Communist cause, he complained that 'it is often more difficult to fight these enemies than to fight the Japanese imperialists. We must tell the masses that they should wage a struggle against their own illiteracy, superstitions and unhygienic habits'.⁵ And the main culprits of holding back the advancement of society in this way he singled out as the 'old style intellectuals (jiu zhishifenzi), old style artists (jiu yiren) and old style doctors (jiu yisheng)'. Mao's strategy to overcome these factors was to 'unite' with them, and 'remould' them, so that they could become part of the revolutionary movement, and not stand in the way of it. He said:

In the Shaanxi-Gansu-Ningxia border region the mortality rate of men and livestock is high, and still many of the people believe in witchcraft. In these circumstances, if we only rely on the new medicine (xinyi), we will not be able to solve our problems. Of course the new medicine is superior to the old medicine (jiuyi), but if they [the doctors of the new medicine] are not concerned about the sufferings of the people, do not train doctors to serve the people and do not unite with the thousand odd doctors and veterinarians of the old school in the border region in order to help them to improve, then they will be actually helping the practitioners of witchcraft by callously observing the death of a large number of men and livestock. There are two principles of the united front: one is unity (tuanjie) and the other is [comprises] criticism (piping), education (jiaoyu) and remoulding (gaizao). In forming a united front, capitulation is wrong, and sectarian intolerance and arrogance are also wrong. Our task is to unite with all the old style intellectuals (jiu zhishifenzi), old style artists (jiu yiren) and old style doctors (jiu yisheng) who can be used, and to help, educate and remould them. In order to remould them we must first unite [with them]. Only if we act appropriately will they welcome our help.⁶

This was one of the few speeches in which Mao addressed the field of Chinese medicine before Liberation.⁷ Croizier describes the speech as 'legitimizing at the highest level' the use of indigenous medicines,⁸ and yet we can clearly see how negative Mao's perception of traditional medicine at this time actually was. In his speech he referred to both 'old-style' doctors and veterinarians, as if they functioned on a par with one another. He never referred to the medicine as 'Chinese medicine' (zhongyi), yet used the derogatory appellation of 'old medicine' (jiuyi). This was in direct opposition to the 'new medicine' (xinyi), i.e. Western medicine.⁹ Clearly, the 'new medicine' was preferable to the 'old', but if resources were inadequate, then it was necessary to use the 'old'. Mao wanted a 'broad united front' and this in medical terms meant 'criticizing, educating and remoulding' the 'useful' parts of the 'old medicine' to produce a consolidated form of medicine that could satisfy the health needs of the nation.

Therefore this speech was not originally intended to promote the study of Chinese medicine; rather it was delivered to point out some of the conditions in the countryside that were hindering the development of the 'new democratic culture'. And Chinese medicine just so happened to be one of these 'hindering factors'. However, such was Mao Zedong's political standing at the time, and so fraught with revolutionary fervour were the base areas, that his few words were to have far-reaching consequences. These were the revolutionary guidelines which he presented to medical workers in Yan'an, and medical policy did not become any more specific until the mid-1950s. Yet these few words were to have a huge impact on those members of the Communist Party with a medical background.

Zhu Lian's 'new acupuncture'¹⁰

Shortly after Mao's 'The United Front in Cultural Work' speech, Yan'an regional government officials called for an informal discussion between Western and Chinese medical doctors of the

border region.¹¹ During this meeting the slogan, 'the scientification of Chinese medicine and the popularization of Western medicine' was formed (zhongyi kexue hua, xiye dazhonghua). This called for Chinese medicine to be better integrated with modern science, and for Western medicine to be brought down to the level of the people, such as in the implementation of basic hygiene and sanitation. At the meeting, folk healers, such as Ma Rulin (dates unknown) and acupuncturist Ren Zuotian (1886-1950), pledged their services to the Communist cause and offered to teach Western doctors their trade so that these Western doctors could better investigate acupuncture's curing properties.¹² The Chinese medical doctor Li Dingming (1881-1947), famous for healing Mao Zedong and other leading members of the CCP,¹³ led the way in calling for the 'co-operation between Chinese and Western medical practitioners' (zhongxiyi hezuo). This was the slogan which was to dominate Chinese medical policy for the next five years.

Several Western medical doctors signed up after the meeting, including Zhu Lian (1909-78). Of all the doctors who were to participate in this movement, Zhu Lian's resolve continued until well after Liberation. She was also one of the few to publicize the results of her work,¹⁴ and we are able to study her contribution to this period largely through her book *The New Acupuncture* (xin zhenjiu xue), first published by the People's Publishers, Beijing in March 1951.^{15,16} *The New Acupuncture* is invaluable to the modern history of acupuncture, for in her writings Zhu Lian goes into great detail, not only into the theory and application of the 'new acupuncture', but also into her motivation in researching this 'new acupuncture'. The ideas that she puts forward are not necessarily unique to Zhu Lian, but she can be credited with the role of propagator. Zhu Lian's political connections gave her quite a high profile in the early years of Liberated China, and while her work was later to be much criticized,¹⁷ she can be credited with creating something of the esteem in which Chinese medicine came to be seen by Communist leaders.¹⁸

Zhu Lian was a doctor trained in Western medicine who joined the Chinese Communist Party in 1935 and served the Party as deputy leader of the General Health Department of the 129th Division of the Eighth Route Army (balujun yierjiushi weishengbu). During the time of Yan'an (1935-47), Zhu Lian served as deputy director of the Yan'an China Medical University (yan'an zhongguo yike daxue), head of the General Health Department outpatient section of the Eighteenth Group Army in Yan'an (yan'an shiba jituanjun zongweishengbu), adviser on child welfare to the People's Government of the Shaanxi-Gansu-Ningxia border region, and acted as head of the People's Government Ministry of Health in the Shaanxi-Hebei-Shandong-Henan border region and director of the hospitals in this border region. After Liberation, Zhu Lian was to become deputy director of the Maternity and Child Hygiene Section of the Ministry of Health (weishengbu fuyou weishengsi). She was also to become deputy director of the Beijing Research Academy of TCM when it was set up in 1955,¹⁹ and head of the Acupuncture Research Centre at the same school. She held these positions until 1960 when she was transferred to the Guangxi Autonomous Region to work in the public health service.²⁰

Western medical resources available to the Communist Party were extremely limited during the Civil War. By 1945 there were five main medical teaching schools serving the CCP in the revolutionary base areas. These were the Yan'an China Medical University set up in 1940 in Yan'an, the North-East Pharmaceutical College (dongbei yao xueyuan) set up in 1942 in Yan'an, the

Shaanxi-Chahar-Hebei Bethune Hygiene School (jinchaji baiqiuwen weisheng xuexiao) set up in 1939 in the Shaanxi-Chahar- Hebei military region, the New Fourth Army Military Medical School (xinxijun junyi xuexiao) set up in 1945 in Shandong province, and the Yan'an Outskirts Medical College (yanbian yike zhuanmen xuexina) set up on the borders of Yantan in 1945.²¹ These medical schools all produced doctors trained in Western medicine to work in the revolutionary base areas. Between 1939-45 the Bethune Hygiene School trained 928 medical workers, only 386 of whom were army doctors.²² In order to supplement these numbers, short-term training programmes were set up in every military region; however the number of adequately trained doctors remained desperately small.²³ Hospital facilities were to be found dotted across the base areas, and Zhu Kewen, Gao Enxian and Gong Chun's, *A History of China's Military Medicine* (zhongguo junshi yixueshi) (Beijing: Renmin junyi chubanshe, 1996) gives a total of eighty-two Western medical hospitals serving the CCP in the five main military regions.²⁴ The first department of acupuncture to serve the Communist areas was opened in April 1945 at the Yan'an Bethune International Peace Hospital.²⁵ Zhu Lian stayed in Yan'an until 1947. On leaving, however, she took her personal mission with her. She moved to Pingshan county in the Huabei Military Region,²⁶ where she became the first deputy director of the Huabei People's Government's Ministry of Health (huabei renmin zhengfu weishengbu) and in the following year set up the Huabei Health School. Here she combined teaching with scientific research into acupuncture. Zhu Lian was generally known as a tireless worker, who despite frequent bouts of ill-health, would rarely take leave from work. She propagated acupuncture wherever she went.²⁷ The Huabei Health School offered short-term training courses including maternity and child hygiene, and midwifery. Each course included a class in acupuncture. Students with either Western or Chinese medical backgrounds had to have a minimum of three years' medical experience. Those taking a full-time course in acupuncture were also taught aspects of Western medicine such as the basics of anatomy and physiology, hygiene and sanitation, pathology and diagnostics.²⁸ The acupuncture classes were taught mainly by Zhu Lian. She had no teaching materials available, but worked from an outline she had provisionally compiled, and made notes as she taught. Together with a group of editors whom she lists in the preface to her book, Zhu Lian compiled *The New Acupuncture*, completing the final draft in the summer of 1949.

The military metaphor in Zhu Lian's description of the body

By the time *The New Acupuncture* was completed, the Communists had won the Civil War. From the inception of the concept of a 'new acupuncture' to its handing over in book form to the publishers, China was at war with itself. In fact, from the time the Communists were forced into the countryside in 1927 to their eventual triumph in 1949, there were twenty-two years of continuous military struggle. The first generation of leaders of the CCP were the generals of the People's Army in pre-Liberation China, and Mao Zedong rose to power in the Party from the time the Party began to rely on military tactics.²⁹ Thus the administration of war was integral to the administration of government across the revolutionary base areas. American political records note that 'the organization of the Chinese Communist Army is closely linked with the political organization of the Communist Party and the political organization of the territory controlled by the Communists'.³⁰ The Communist

Party's position during these years has been described as 'existing in significant measure as a soul or parasite in the body of the army'.³¹ However, the last four years of Civil War were especially intense, as the body of peasants involved in the CCP movement grew and radical social reforms caused conflict within the structure of villages in the border regions.

War was thus a part of life in the revolutionary base areas; to such an extent, in fact, that it was classified as 'work'.³² If war was such a major theme of life during the years 1945-9, then it would seem that much of society must have been affected by it, including medicine. Zhu Lian described acupuncture as a 'weapon' (wuqi) for 'launching' (kaibi) sanitation work in the countryside.³³ Her colleague Lu Zhijun used similar analogies to illustrate the medical battlefield in which acupuncture was on the offensive. He described acupuncture as a 'powerful weapon which combats disease' (tong jibing zuo douzheng de youli wuqi) and that we should 'rely on acupuncture to vanquish the difficulties of the shortages of both doctors and drugs' (kao zhenjiu zhansheng yiyao liangque de kunnan).³⁴ In this way acupuncture was portrayed as playing not only a revolutionary but also a militant role in the battle for Liberation.

The use of metaphor in medicine is widely acknowledged,³⁵ and probably most prevalent is the use of the military metaphor. Unschuld writes that 'China appears to have been first in applying militaristic notions to an explanation of health and illness' and goes on to explain how basic precepts of 'attacking' and 'invading' the body were to dominate popular perceptions of disease until various influences caused disease to be explained in terms of the theories of systematic correspondences.³⁶ Administrative metaphors, where the governing of the body reflects bureaucratic structure, are also very common. This is perhaps most famously illustrated in Chapter 3, Section 8 of the Basic Questions in the Yellow Emperor's Inner Canon (Huangdi neijing suwen) (c. 100), where internal body parts are ascribed a bureaucratic role in the functioning unit of the body, with the heart ascribed the role of ruler, the lung that of minister, and so on, in hierarchical order.³⁷ This tendency illustrates the way in which the perception of the body and the language used to describe it will reflect prevailing ontological concepts of a society. Shifts in these philosophical orientations will lead to shifts in the explanation of health and disease, and accordingly the medicine is reshaped to suit the values and customs of the new society.

Thus administrative metaphors are also evident in the 'new acupuncture'. Zhu Lian describes the body as 'a unified and complete entity characterized by division of labour and leadership' (you fengong you lingdaode tongyi ti).³⁸ The New Acupuncture is also rich in terms such as 'division of labour' (fengong), 'leadership' (lingdao), to 'allocate' (zhipei), to 'regulate' (tiaojie) and to 'command' (zhihui). Thus Zhu Lian attributes a state of health to a physiological system which functions according to the governing principles of the CCP. Other examples are 'to appropriately allocate the working force' (heli zhipei laodong li) and Zhu Lian's 'to be allocated by the nervous system' (you shenjing xitong zhipei). In addition, her rather blatant comparisons between the 'highest level of the cerebral cortex' [which can be extrapolated to mean the Central Committee] and its links to the different systems of the body [i.e. different Ministries] via the nerves [i.e. Party members] show that a direct image of the CCP has been superimposed on her medicine.³⁹

More fundamentally, the description of the body itself in *The New Acupuncture* uses a large military and political vocabulary, which corresponds to the arrangement of society in the revolutionary base areas.⁴⁰ Zhu Lian divided the human body into 'sections' (bu), 'divisions' (qu) and 'lines' (xian). The 'sections' to which Zhu Lian referred was a term regularly used to refer to 'sections' of the army or government. For example, 'army troops' (budui), the 'department of health' (weishengbu), the 'inner section' (neibu) and the 'outer section' (waibu) of government. The term 'division' to which Zhu Lian referred abounded in military significance. There were the 'liberated areas' (jiefangqu), the 'military areas' (junqu) and 'border areas' (bianqu). The term 'lines', too, was part of military speech. There were the 'front lines' (qianxian), the 'united battle lines' (tongyi zhanxian), as well as the 'interior lines' (neixian) and the 'exterior lines' (waixian). The large proportion of military terms used in her writing can be interpreted as a result of the intensity of war in the revolutionary base areas in which she was located.

This literal interpretation of the body she then transfers directly onto the bodily landscape. In her diagrams, Zhu Lian presents the body in parts, and never as an integrated whole; a huge break from tradition, for Chinese medical principles are based on a holistic understanding and representation of the body. For each part of the body illustrated in *The New Acupuncture*, there are a series of pictures produced showing not only the positioning of the acupuncture points, but also the skeletal and muscle structures and nerve network of that region, thus reinforcing the importance of Western anatomy in her acupuncture.

Zhu Lian divides the body into eight sections; a head and neck section (tonjingbu), back and shoulder section (beibu ji jianjiabu), chest section (xiongbu), abdominal section (fubu), two lateral chest and abdominal sections (ce xiongfubu),⁴¹ upper limbs section (shangzhibu) and lower limbs section (xiazhibu). Located within these sections are the divisions and lines. In all, there are eight divisions - the eye division (yanqu), ear division (erqu), mouth and nose division (koubiqu), temple division (niequ), cheek division (jiaqu), front of the neck division (jingqianqu), back of the neck division (jinghouqu) and shoulder division (jianjiaqu) seven of which can be found in the head region. Within each division can be found a cluster of acupuncture points. For example, the temple division (niequ) contains the acupuncture points all found within the temple area. These are touwei (stomach 8), lugu (gall bladder 8), hanyan (gall bladder 4), xuanlu (gall bladder 5), xuanli (gall bladder 6), shangguan (gall bladder 3) and taiyang (point outside the tract version).⁴² The division as a feature of Chinese medicine is unique to *The New Acupuncture*, and strongly analogous to the spatial arrangements of the Communist revolutionary base area.⁴³

Those acupuncture points not arranged in divisions are then arranged on lines. And unlike the traditional routes of the channels, these are very straight lines, resembling the front lines of an army. The lines are labelled either according to their position in that particular section of the body or in relation to one another. The lines are not very long, being limited to the length of any one section and therefore never linking two sections together. In total Zhu Lian draws twenty-eight separate lines along the body. The head and neck, back and shoulders, chest and abdominal sections all contain a central line (zhengzhong xian) and three parallel front lines known as the first, second and third lateral lines (diyi, dier, disan cexian). The upper and lower limb sections contain anterior (qian) central

lines, external lateral lines, or internal lateral lines (zhengzhong xian, waice xian, neice xian), and vice versa for the posterior (hou). In addition there are also two lateral (ce) chest and abdominal lines (xiongfū xian) which run along the chest and abdominal sections.

The section which most vividly illustrates Zhu Lian's peculiar image of the layout of acupuncture points, and their connections to one another, is the head and neck section. As shown in Figure 1.1, the acupuncture points are arranged along or within four lines and seven divisions; a facial topography that imitates the organization of the guerrilla forces along successive, reinforcing battlelines and gathered protectively within enclosed base areas. The lines resemble the frontlines of an army, all neatly lined up from the centre radiating outwards. They are labelled the central line of the top of the head (toudingbu zhengzhongxian), the first lateral line of the top of the head (toudingbu diyi cexian), the second lateral line of the top of the head (toudingbu dier cexian) and the third lateral line of the top of the head section (toudingbu disan cexian). These lines and their points correspond roughly to the directing (ren), governing (du), bladder (pangguang) and gall bladder (dan) channels,⁴⁴ although it is evident that Zhu Lian has lined points on parallel lines up with one another. This was a deliberate attempt on her part to try to facilitate the study of the points in this section.⁴⁵

Figure 1.1 Head and neck section as shown in *The New Acupuncture* (1954).

[Diagram is not reproduced in this .pdf file: AcuCentre editorial note].

The acupuncture points Zhu Lian referred to as 'stimulation areas' (cijidian), and not with the conventional xuewei,⁴⁶ In her allocation of the points, at any rate, Zhu Lian appears to have been faithful to traditional Chinese medical knowledge. In *The New Acupuncture* she gives detailed information about 370 acupuncture points, the names of 360 of which correspond to the channel system. The extra ten belong to a vast array of points known as 'extra meridional points'. However, there is one point from the original channel system of 361 points which she does not include and this is meichong (bladder 3). It is unclear why she omits this point.

Zhu Lian also 'discovered' two acupuncture points of her own which are described in her book. These points are recorded in Li Jingwei's *Chinese Medical Dictionary* (1995) as originating from *The New Acupuncture*,⁴⁷ yet they have not been included in later standardized textbooks of acupuncture.⁴⁸ The two new points are labelled xinjian and xinshe. Just as loci named in the *Huangdi neijing* and *Mawangdui* medical manuscripts can be linked to the landscaping of the body at the time, such as the 'sea of qi' (qihai) and the 'gushing spring' (yongquan) the names given to these two points also clearly mark the period during which they were discovered. Both start with the prefix xin, meaning 'new'. Both words are similar in meaning and, in fact, the two suffixes, when put together form one word jianshe which means to 'build, construct', as one would build and construct a new society.⁴⁹ The first one means 'the new construction' and the second one means 'the new establishment'. All very suitable names for acupuncture points in a medicine which was aiming to be part of the 'new democratic culture'.

A new, scientific and unified medicine

To be part of the 'new democratic culture', Zhu Lian's medicine would have to follow Mao's criteria of new, scientific and unified. Just how she applied these conditions to her medicine depended upon her interpretation of Mao's words. Zhu Lian's acupuncture was 'new' in that she did not identify it with the acupuncture currently being practised in the countryside. Zhu Lian complained that, 'ordinary acupuncturists of today when practising acupuncture do not stress cleanliness and sterilization and many inject through clothes; they do not understand physiology and anatomy, some of them are not even sure how to find acupuncture points, to the degree that they do not pay attention to acupuncture points, and they randomly [place the] needles and moxa'.⁵⁰ Acupuncture was not the only form of Chinese medicine available at the time, but Zhu Lian felt that acupuncture had the right qualities to serve the needs of the Communist Party in wartime China. She emphasized just how self-sufficient the system of acupuncture could be. All you needed were needles, alcoholic spirits, cotton-wool, moxa and an explanatory handbook! Acupuncture was cheap, effective, very portable and, if the instructions in her book were followed carefully, it was a very safe form of treatment as well. In the face of the existing medical conditions in the countryside, Zhu Lian believed that acupuncture could help.

Zhu Lian pointed out that 'the sanitation and medical problems of China's population of six hundred million are not going to be solved by a handful of Western medical doctors'⁵¹ and she thus proposed that a large number of middle-level public health workers should be trained. She thought that acupuncture could be learned quickly by 'people of a low cultural level' and she suggested that, 'if we could at the same time send some adequately trained doctors down to the factories and countryside to teach, research, diagnose and treat complicated illnesses, in this way, it would indeed enable medical prevention work to gradually improve on a universal basis. This also conforms with the present day needs of the broad masses of workers and peasants and our cultural and financial conditions'.⁵² This medicine was therefore meant to be used by the masses to serve the masses. Zhu Lian's task was to simplify it and present it as an easily digestible whole. It would be a medical textbook presented in colloquial speech (baihua E) and laid out with clearly defined chapters, to allow the uninitiated to help alleviate the dearth of trained medical personnel in wartime China.

In this way, the CCP keyword of 'unification' was stressed in her medicine, for not only was the 'new acupuncture' to work to build a united front between Western and Chinese medicine, it was also to unite with the peasants and in this way allow it to more easily penetrate the countryside and facilitate sanitary health care movements. Zhu Lian wrote that 'experience has proven that the masses are accustomed to acupuncture, [and] it is the cheapest [of medical treatments]. Due to its welcome among the broad masses of the people, through the use of acupuncture as a curing method, we can quickly gain the trust of the people, and in this way can successfully further develop mass sanitation movements'.⁵³ In the same way, 'the Chinese medical doctors in the countryside, on seeing that we are competent in this technique, will be happy to approach us and we can learn from each other. This will also enable work on the Chinese and Western medical united front to develop smoothly'.⁵⁴

Unification was to be a key process in the upgrading of acupuncture and its dissemination through the rural areas.

the regulating of the pancreas, and considered the cerebral cortical control of the nerves to rely on the processes of inhibition and excitation.⁵⁹ Zhu Lian also linked acupuncture with the Soviet scientist's creation of tissue therapy (zuzhi liaofa).⁶⁰ She saw the removal of a small section of human tissue in researching a regulatory function of the nerves as similar to scarring moxibustion and piercing acupuncture.⁶¹ Soviet influence was to become stronger in the years after Liberation, as ties between the two nations strengthened, and the second edition of Zhu Lian's book placed even more emphasis on research by Russian doctors on the role of the nervous system in health regulation.⁶²

If Soviet science was being lauded in China at this time as the path to follow, one path which was being actively discouraged was that of the Japanese. The Japanese had been carrying out significant scientific research on acupuncture since the beginning of the century and earlier reformers of Chinese medicine such as Cheng Dan'an (1899-1957) had been keen to incorporate Japanese science into their medicine.⁶³ However, ice-cold relations resulting from the atrocities of the second Sino-Japanese War (1937-45), from which China had only just emerged, put an end to this trend. Japanese doctors appear to have concentrated in particular on the therapeutic effects of moxibustion⁶⁴ but they too had taken steps towards simplifying the complexities of the canonical medical literature.⁶⁵ Zhu Lian criticized their analysis of acupuncture, saying that it 'still lacked the medical outlook of materialistic dialectic' and added that, 'it is also thought that its effects on the regulating and controlling of the higher function of the nerves in the internal body is not enough'.⁶⁶ Thus Soviet science was to dominate her medicine.

In a similar vein, Zhu Lian did not approve of recent innovations in the Western medical science of cell pathology (xibao bingli xue) as an alternative scientific explanation for acupuncture. Western science, too, was not politically in favour in China; the Communists were at this time condemning the Americans for assisting the Nationalists in the Civil War, and the animosity was to be exacerbated with the onset of the Korean War (1950-3). Cell pathology was thus linked with the capitalist (ziben zhuyi) West and it was only after the end of the Cultural Revolution in 1979 that this theory was able to be applied freely to the medicine. Zhu Lian wrote that

cell pathology does not emphasize enough the effect of the nerves within the body; it believes that all pathological phenomena are due to certain stimuli (e.g. bacterial toxins, or stimuli from chemistry or physics) which cause harm to the cells. Therefore, in pathology, the main research is on every aspect of change in cell organization (e.g. denaturation of fats, protein, and tissue, inflammation, sores with pus, ulcers etc.). They believe that these changes are the direct result of stimulation to the cells. This is a biased and isolated outlook which only sees the outer appearance and does not see the inner essence.⁶⁷

Zhu Lian's attitude can be identified with a Communist device of not putting the emphasis on the individual (such as the individual cell (xibao)), but rather on the group (such as tissue structures). The Chinese term here for 'tissue' is zuzhi, which also means 'organization' and was used in Communist political language to describe group gatherings.

To validate her medicine during these politically sensitive times, Zhu Lian placed great emphasis on the Soviet medical system. However, in the actual diagnosis and categorization of illnesses, Zhu Lian utilized standard Western medicine. In fact, the majority of disease categories with which Zhu Lian dealt were in fact Western medical disease labels. She dealt with infectious diseases such as relapsing fever (huiguire),⁶⁸ a typical wartime disease caused by insanitary conditions yet one without Chinese medical precedent, and Western medical concerns such as diabetes (tangniao bing).⁶⁹ For the treatment of disease, she prescribed very few Western medical drugs but utilized almost exclusively the techniques of acupuncture and moxibustion. But curing a Western medical disease with Chinese medical acupuncture points inevitably gives rise to conflicting theories of the causation of disease. Zhu Lian dealt with this 'problem' by keeping the Chinese medical content in her medicine to a minimum - the hand techniques of acupuncture and moxibustion, and the location of the acupuncture points. Zhu Lian then listed individually the therapeutic values of each acupuncture point, and illnesses were to be addressed in this way. Consequently, in *The New Acupuncture*, Zhu Lian used an unusual amalgam of Chinese medical techniques within a Western medical framework according to Soviet scientific principles.

Zhu Lian described her acupuncture as being 'effective' (you xiao) in the treatment of most diseases. In fact, in the majority of cases, acupuncture was used to alleviate symptoms (jianqing zhengzhuang). In *The New Acupuncture* acupuncture points were chosen to relieve pain (zhen tong), reduce swelling (xiao yan), boost the immune system of the patient (zengqiang dikangli), promote blood circulation (cujin quansheng xuexing), stop vomiting (zhi tu), and so on. Such a superficial approach to disease is generally seen as a Western medical trait. In China today it is still considered that Western medicine cures the symptoms while Chinese medicine cures the root of the disease (xiyi zhi biao, zhongyi zhi ben).

To summarize, the new acupuncture of Zhu Lian was an instrument of the new, scientific and unified medicine created to satisfy the conditions of war in the Communist rural base areas. Zhu Lian followed Mao's guidelines of 'new', 'scientific' and 'unified' to produce a medicine which was shaped by Party criteria, wartime conditions, and the practicalities of healing. Certainly, as this chapter has attempted to show, social influences played a key role in determining which elements could be accepted into the 'new acupuncture'. This encompassed everything from terminology used within the medicine, to the physical portrayal of the body, and to the degree of foreign input into its medical theory. But it was thanks to these extraordinary efforts that Chinese medicine came to be firmly, and as we shall see, indelibly, placed on the CCP political map.

The CCP was the first ruling government in China to recognize officially the medical discipline of acupuncture in over a century. Yet once the Communist Party moved into Beijing and took over a Western-medicine-based health care system, Zhu Lian's 'new acupuncture' lost the social structure in which it had been created. It became an anachronism in post-Liberation China, ill-suited to the urban hospital. With the official sanction of Chinese medicine by the newly established government, many more players came into the game, responding to the government's encouragement for Chinese medical practitioners to work within the national health care system. In order to do this, it became standard practice for Chinese medical doctors to undergo a short training programme in basic Western

medicine in order to be 'properly' qualified. The goalposts shifted from the 'co-operation of Chinese and Western medicine' to the 'unification of Western and Chinese medicine', and a different set of doctors took on the task of producing the medicine China now required. The 'new acupuncture' was already out of date.

Kim Taylor's Footnotes (pp. 167-172)

1. Reprinted in Mao Zedong, *Selected Works of Mao Zedong Vol. 2* (Beijing: Renmin chubanshe, 1952): 633-82. Wylie describes 'On New Democracy' with the words 'as great a work as any Mao was to produce in the future. . . It was offered in 1940 as a polished, comprehensive synthesis of Mao's thinking on the Chinese revolution, and it had a dramatic impact at the time on both Chinese and foreign audiences'. In Wylie, Raymond F., *The Emergence of Maoism: Mao Tse-tung, Ch'en Po-ta, and the Search for Chinese Theory 1935-1945* (Stanford: Stanford University Press, 1980): 159-60. Schram mentions that 'On New Democracy' was used as a basic study material in political education classes during the early 1950s. In Schram, Stuart, *The Thought of Mao Tse-tung* (Cambridge: Cambridge University Press, 1989): 101.
2. XX, 'On New Democracy' (19 January 1940). In Mao Zedong (1952): 634.
3. XX, 'On New Democracy' (19 January 1940). In Mao Zedong (1952): 679.
4. Reprinted in Mao Zedong, *Selected Works of Mao Zedong Vol. 3* (Beijing: Renmin chubanshe, 1953): 1031-3.
5. XX, 'The United Front in Cultural Work' (30 October 1944). In Mao Zedong (1953): 1031.
6. Ibid, 1032.
7. He referred to the problem of 'old-style' cultural elements again on 24 April 1945 in his speech 'On Coalition Government', but along much the same lines. This speech can be found in Mao Zedong (1953): 1051-123 and is mentioned on p. 1107.
8. In Croizier, Ralph C., 'Chinese Medicine through the Ages: Traditional Medicine as a Basis for Chinese Medical Practices'. In Quinn, Joseph R. (ed.), *Medicine and Public Health in the People's Republic of China* (Washington, DC: US Department of Health, Education and Welfare, 1973): 9. The importance of this speech is also discussed in Croizier (1968): 156-7, where he points out that it was evident that Chinese medicine was not meant to function at a level with modern medicine as yet.
9. The adoption of the adjectives 'old' (jiu) and 'new' (xin) was a relatively new development and stemmed from doctors of Western medicine's objection to being labelled doctors of 'Western medicine' (xiyi). As Lei has put it, 'at a time of heightened nationalism, 'Western' was a dirty word with which no one wanted to be associated', in Lei (1999): 108. They lobbied to be called doctors of 'national medicine' (guoyi), but the Chinese medical doctors had already successfully won that title. Thus, in the mid-1930s, there was a national debate as to whether to call themselves doctors of 'scientific medicine' (kexueyi), 'modern medicine' (jinshiyi) or 'new medicine' (xinyi). In the end the latter term prevailed. Details of this dispute are given in Lei (1999): 108 10.
10. I have translated the term zhenjiu according to its literal sense of 'acupuncture and moxibustion'. However, in many cases, in order to avoid phrases which are too lengthy and clumsy, I have simply referred to zhenjiu as 'acupuncture'. The use of moxibustion should be considered as closely

combined with that of acupuncture, and when either technique is solely used, I have specified this.

Some researchers have chosen to translate zhenjiu as 'acumoxa'. I have decided against adopting this term for two reasons. One, I find the term evokes an image of twentieth-century new-age medicine, whereas the term 'acupuncture' has been in use for much longer and, as such, I feel, gives more weight to the translation. And two, because the term 'acumoxa' accords moxibustion equal status with acupuncture, and I view acupuncture as the dominant technique.

11. I refer to 'Western medical doctors' as doctors of Chinese nationality who have been trained in Western medicine. This is possible since this story is almost exclusively based in mainland China with Chinese nationals as the main actors. I have also chosen to refer to the two bodies of medicine that feature in this history as simply 'Chinese' and 'Western'. Where appropriate, I distinguish between 'Chinese medicine', 'traditional Chinese medicine' and 'Traditional Chinese Medicine'. For Western medicine, however, I make no distinctions. This implies that any form of medicine originating outside of China's borders can be interpreted as Western. While I acknowledge this to be a gross over-simplification of the complexity of the history of science, Western medicine in this history acts mainly in direct opposition to that of Chinese medicine. Chinese-language terminology faithfully maintains this dichotomy and I accordingly follow suit.

12. Guo Shiyu (ed.), *The History of Chinese Acupuncture* (Tianjin: Tianjin kexue jishu chubanshe, 1989): 292.

13. Ma Boying, Gao Xi and Hong Zhongli, *The History of Inter-cultural Medicine Communication between China and Foreign Countries* (Shanghai: Wenhui chubanshe, 1993): 574-5.

14. A colleague to Zhu Lian, Lu Zhijun (1911-99), was the head of the Bethune Memorial International Peace Hospital in Yan'an. He is accredited in her preface with being a strong motivating force in her decision to begin studying acupuncture. Also originally a Western medically trained doctor, Lu Zhijun published the *Newly Revised Acupuncture* in July 1950. By June 1956 it was in its fourteenth edition. However, he includes a minimum of medical theory in his book, and therefore is only a peripheral figure in this study of the medicine of the revolution. Few other participants in this new acupuncture movement are recorded in Chinese medical histories of this period. See for example, Xiao Shaoqing, *A History of China's Acupuncture* (Yinchuan: Ningxia renmin chubanshe, 1997): 521-4.

15. I have only had access to the second edition of her book, published by the People's Medical Publishers in 1954, and therefore quotes from her work all refer to this second edition. However, the prefaces to the first edition, plus the unique theoretical content of her book, were published in two separate articles in the *People's Daily*. These were 'Myself and Acupuncture' (14 March 1949) and 'The Importance of Acupuncture Therapeutics and its Principles' (17-18 February 1951). All quotes given here have been double-checked with these parallel publications and are thus verbatim with the first edition, unless otherwise stated. In addition, a student of Zhu Lian's promoted her work by producing an annotated edition of *The New Acupuncture*. This was Tang Xuezheng, *A Study of the New Acupuncture* (Beijing: Xinhua shudian, 1951). His details, however, cannot be found in modern medical biographies and it would appear that his status as a disciple of Zhu Lian did not enhance his later career.

16. The publication of *The New Acupuncture* was announced in *People's Daily* (15 April 1951): 6.
17. See Zhao Rong, 'A Few Comments on Zhu Lian's [The New Acupuncture]', *Chinese Medical Journal* (1956) and Zhao Qinxuan, 'I also Comment on [The New Acupuncture]', *Guangdong TCM* (1957). Both articles taken from Guo Aichun (ed.), *Existing Acupuncture Medical Records* (Changsha: Hunan kexue jishu chubanshe, 1987): 325-6 and 328-31.
18. One of her more influential allies was Dong Biwu (1886-1975), chairman of the Finance and Economic Committee of the Huabei People's Government (1948-9), who encouraged her to take her manuscript to Beijing for publication (see second preface in *The New Acupuncture*). Dong Biwu also penned an introductory preface to her book, praising her research work on acupuncture.
19. Lu Zhijun was at the same time to become director of the Beijing Research Academy of TCM. This position appears to have been granted more for his political leanings than his medical prowess, for his education in Chinese medicine was informal and he was not a prolific writer.
20. These details are taken from Li Yun (ed.), *Biographical Dictionary of Chinese Medicine* (Beijing: Guoji wenhua chubangongsi, 1988): 172, and Huang Wendong (ed.), *Skilled Experience from Famous Chinese Medical Experts* (Changsha: Hunan kexue jishu chubanshe, 1983): 260-1. It would appear that she was transferred to Guangxi province to accompany her husband Tao Xijin (1908-92), who was at that time appointed as deputy director to the science and technology committee of Guangxi Zhuang Autonomous Region
21. Zhu Chao and Zhang Weifeng (eds), *A History of Medical Education in New China*, (Beijing: Beijing yike daxue and Zhongguo xiehe yike daxue, 1990): 2-4.
22. Liu Liangfu, *A History of the Bethune Medical University* (Chongqing: Sichuan renmin chubanshe, 1989): 36.
23. Details of the CCP's health care administrative programme in the Shaanxi-Gansu-Ningxia border region from 1941 are given by Hsia, Tao-tai, 'Laws on Public Health'. In Quinn, Joseph R. (ed.), *Medicine and Public Health in the People's Republic of China* (Washington, DC: US Department of Health, Education and Welfare, 1973): 109-35. A more general account is given by Minden, Karen, 'The Development of Early Chinese Communist Health Policy: Health Care in the Border Regions, 1936-1949', *American Journal of Chinese Medicine* 7 (4 1979): 299-315.
24. Zhu Kewen, Gao Enxian and Gong Chun (eds), *A History of China's Military Medicine* (Beijing: Renmin junyi chubanshe 1996): 335.
25. Guo Shiyu (1989): 292.
26. This coincided with the move of the Military Health Section to the city of Xibopo in Pingshan county in Hebei province. The Huabei military region was a new North China Liberated Area, formed from the amalgamation of the two border regions, the Shaanxi-Chahar-Hebei region and the Shaanxi-Hebei-Shandong-Hebei region in May 1948. This became the new centre, after the flight from Yan'an, for the Communists' military, governmental and Party organs in North China. Taken from Zhu Kewen et al. (1996): 315-18.
27. Professor Li Jingwei, interview, 1 December 1997 in Beijing.
28. Zhu Lian, *The New Acupuncture*. (Beijing: Renmin weisheng chubanshe, 1954): xvii.

29. Saich points out that military leaders were the first to support Mao and propel him up the Party ranks. Their support came through their identification with, and approval of, Mao's military strategies. In Saich, Tony (ed.), *The Rise to Power of the Chinese Communist Party* (Armonk: M.E. Sharpe, 1996): xliii.
30. van Slyke, Lyman P. (ed.), *The Chinese Communist Movement: A Report of the United States War Department, July 1945* (Stanford: Stanford University Press, 1968): 182.
31. Schram (1989): 44.
32. Schurmann, Franz, *Ideology and Organization in Communist China* (Berkeley: University of California Press, 1966): 425.
33. Zhu Lian (1954): xviii.
34. Lu Zhijun, 'Postscript by Lu Zhijun'. In Guo Aichun (1987): 323-5.
35. For seminal work on this topic, see Sontag, Susan, *Illness as Metaphor* (London: Allen Lane, 1979).
36. In Unschuld, Paul U., 'Plausibility or Truth? An Essay on Medicine and World View', *Science in Context* 8 (1 1995): 9-30, esp. p. 13.
37. For detailed discussions of how the microcosm of the body came to reflect the structure and values of the macrocosm of society and state in early China, see Unschuld (1985): 51- 00 and Sivin, Nathan, 'State, Cosmos and Body in the Last Three Centuries BC', *Harvard Journal of Asiatic Studies* 55 (1 1995): 5-37.
38. Zhu Lian (1954): 11.
39. Ibid.
40. Saich writes that 'the military nature of the Chinese revolution has deeply affected the language of the CCP. While Marxism . . . is punctuated by the language of struggle, particularly that of class, the terminology of the CCP is one of war'. In Saich (1996): xliv.
41. The term ce is also a specialist military term meaning 'flank', such as ceji, 'to make a flank attack'.
42. Such a numbering system complies with a later international standardization of acupuncture points and can be found, for example, in Zhenjiuxue gaiyao bianji xinzuo (ed.), *Outline of China's Acupuncture* (Beijing: Renmin weisheng chubanshe, 1964).
43. The base area has been described by Selden as, 'central to the Chinese approach to rural revolution and guerrilla warfare'. In Selden, Mark, *The Yen-an Way in Revolutionary China* (Cambridge, MA: Harvard University Press, 1971): 59.
44. For the positioning of the head points see Heilongjiang province national medical research centre (Heilongjiangsheng zuguo yiyao yanjiusuo) (ed.), *Teaching Edition of the Great Compilation of Acupuncture* (Beijing: Renmin weisheng chubanshe, 1995): 828-9.
45. Zhu Lian (1954): xxii. This further simplification is unique to the second edition.
46. Accordingly, I translate xuewei as 'acupuncture point', and not as 'loci' or 'holes'. I refer to xuewei purely as areas where the techniques of acupuncture or moxibustion can be applied, and do not wish to include any broader connotations.
47. Li Jingwei (1995): 1636.

67. XX, *ibid.*, 14.

68. *Ibid.*, 326.

69. *Ibid.*, 296-7.