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# Interweaving Medical Traditions: Europe and Asia, 1600-2000

Report >  
 Asia-Europe

11-13 September 2003  
 Wolfson College,  
 Cambridge

European and Asian medical traditions are interwoven in much more complex ways than previously assumed.

By Sanjoy Bhattacharya

The workshop's participants tended to move away from the simplistic – but widely held – view that medical knowledge flowed only in one direction, from Europe to Asia, and that it was always imposed in the form originally intended by 'hegemonic' interests on compliant under-developed societies. Instead, the meeting's participants pointed to the existence of far more complex trends.

Frequent reference was made to the limited success of many healthcare reform initiatives launched by colonial regimes, international organisations and 'modernising' national governments. The ability of bureaucrats and civilian targets of health care schemes to undermine official immunisation campaigns and hospital regimes was stressed, as was the role of consumers in the commodification of medicinal products and the reformulation of competitive, ever-changing medical marketplaces. The continued presence of these trends was not attributed to supposedly culturally specific Asian mores. Ritualism, superstition and a willingness to justify opposition to organised medical interventions on religious grounds were, it was pointed out, prevalent both in Europe and Asia.

## Early contacts

The meeting began with papers on early contacts between Asia and Europe. Dominik Wujastyk described medical thought and practice amongst traditional physicians in India during the two centuries before British colonial power was established in India. Hal Cook's paper then discussed the significant role played by the Dutch East India Company (VOC) in the seventeenth century in seeking information and objects about the medicine and natural history of Asia and conveying them back to Europe. This was followed by Rethy K. Chhem's survey of the nature of Khmer medicine before the onset of French colonialism in Cambodia.

The next panel dealt with medical trends in nineteenth-century Asia. Jong-Chan Lee described the work of medical missionaries in Korea; Hormuz Ebrahimnejad the institutional and epistemological bases of the modernization of medicine in Qajar Iran. They were followed by Dr. Shang-Jen Li, who examined British Medical Research on Leprosy in nineteenth-century China.

## Colonial medicine

The final panel of the first day focused on medical trends in colonial Asia. Cristiana Bastos presented the results of her research on the complexities of epidemic disease control in nineteenth- and early twentieth-century Goa. Liesbeth Hesselink depicted the role accorded to indigenous midwives and doctors in the Dutch East Indies in the period 1850-1910.

The first panel of the second day con-



Small pox immunisation campaign poster from India, 1975-76

tinued to look at trends in colonial Asia. After Niels Brimnes discussed his research on popular resistance to variolation and vaccination in early colonial South India, Laurence Monnais described pharmaceutical and drug use in French Vietnam in the period 1860-1939. The next panel, which focussed on the role of voluntary medical organisations in Asia, opened with David Hardiman's paper on the attitudes of medical missionaries in nineteenth- and twentieth-century India to supernatural healing. Alex McKay spoke about British efforts to politicise the working of the Indian Medical Service's dispensary in Gyantse (Tibet) between 1905-1910, whose voluntary schemes were welcomed by Tibetan elites.

The post-lunch session dealt with medical trends in Asian contexts after the end of colonial rule. Kai Khiun Liew presented a paper on occupational health and safety in Singapore's shipbuilding industry, and Sanjoy Bhattacharya described the World Health Organisation's frequent lack of success, despite protracted efforts, in shaping public health and medical policy in independent India.

## Medical pluralism

The third day started with a panel dealing with medical pluralism in Europe. Lyn Brierley-Jones described the bitter medical debates that accompanied the spread of homeopathy in Britain and the rest of Europe. This was followed by Gunnar Stollberg's paper on the globalisation of Asian Medicine, which referred to the spread of acupuncture and ayurveda in Germany and in the UK. Vivienne Lo then discussed how the concept of 'deviant airs' was defined – and kept relevant – in 'traditional' Chinese medicine in different periods and socio-political contexts.

The final panel of the meeting, on medical pluralism in Asia, began with a presentation by Margaret Jones. This looked at official attitudes towards indigenous medicine in colonial Ceylon during the twentieth century and questioned the wisdom of pre-supposing the 'hegemony' of allopathy/scien-



Ethnic Chinese women selling medicines on the side of the road

ful from the point of view of opening up possibilities for future collaboration between European and Asian research institutions. Such links will without doubt result in important new research and a range of exciting publications that will take our understanding of medical history and medical anthropology further forward. <

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The workshop Interweaving Medical Traditions: Europe and Asia, 1600-2000 was organised by The Asia Europe Foundation, The European Alliance for Asian Studies and The Wellcome Trust Centre for the History of Medicine