

West “imagined” rather than encountered China.

Her book is divided into five time periods, each examined under three key themes: “Racializing Chineseness”, “Religionizing the Chinese”, and “Medicalizing the Chinese”. To take “racialization” first: in the medieval period, Christian geography had made the Mongols and the Chinese (they were hardly distinguished at this period) associated with both heaven and hell, God and demons. From the sixteenth to the seventeenth century, western observers regarded the Chinese as “of our quality” and “almost as White of Complexion as the People of Europe” (p. 79), taking account especially of the high standard of Chinese civility and manufacturing skills. However, from the mid-eighteenth century to the mid-nineteenth century, white “Anglo-Saxon” people were classified as racially superior to all other human types. It was in this period that the Chinese were described as a distinct race with a particular trait of dishonesty.

As for “religionizing” the Chinese, it was based on the principles of Christianity, ignoring the alternative cosmology which underpins both Chinese religion and medicine. “For the Jesuit, God had taken a single form, in the person of Jesus . . . In contrast, from the Chinese perspective, if Heaven and Earth are of a single substance, then one can encounter the Way of Heaven, the Dao, in anything from a figurine to the most mundane reality” (p. 62). This cosmological difference produced many misunderstandings. Geomantic practice (fengshui) was condemned as mere superstition by western observers, who failed to grasp the radically interconnected nature of the Chinese cosmos. Fortune telling, exorcism and the search for the elixir of life were condemned by the Jesuits as inconsistent with the doctrines of Christianity.

Nor was Chinese medical theory better understood in the West. The Jesuits felt that *Qi*, “the psycho-spiritual-material stuff” (p. 21), was incompatible with the dualism of Christianity, which assigned to the body purely material properties, invoking a separate immaterial soul to animate it. Chinese body theory (zangfu), which is more about function, the transmission

and storage of *qi* activity according to yin-yang analysis and the Five Phases theory than about the physical structure of organs, was commonly seen as merely a primitive, inferior version of western anatomy. Moxibustion and acupuncture were interpreted as humorally and anatomically based surgical interventions, with no acknowledgement of the Chinese theory surrounding these practices.

Other authors have studied aspects of the relationship between China and the West. For example, in *Acupuncture, expertise and cross-cultural medicine* (2000), Roberta E Bivins reveals the distortions and deep misunderstandings within cross-cultural medicine and the reasons behind them, and focuses on how Chinese acupuncture was perceived and practised in the West from the seventeenth century, with an emphasis on how the interests of social groups impacted on and shaped medicine. But Barnes’s book is much broader in scope, investigating the whole story of how westerners imagined the Chinese and their healing traditions from the thirteenth century until 1848.

Furthermore, she highlights the importance of religion for understanding the fundamental differences between the two medical traditions. Barnes’s approach should not only be an inspiration to all who seek to take seriously the interpretative lenses through which western culture apprehends others; but also stimulate those interested in comparative history and philosophy of medicine to appreciate the philosophical assumptions behind Chinese medicine as a distinct philosophy radically different from its western counterpart, not merely an aspect of Chinese religion, and hence to understand Chinese medicine as it was.

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Nikolaj Serikoff, *Arabic medical manuscripts of the Wellcome Library: a descriptive catalogue of the Haddād collection (WMS Arabic 401–487)*, Sir Henry Wellcome Asian Series, vol. 6, Leiden and Boston, Brill, 2005,

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pp. xiii, 553, and CD, €175.00, \$236.00 (hardback 90-04-14798-5).

This is a catalogue of the Haddād Collection, which forms part of the Arabic manuscript collection in the Wellcome Library (London). Purchased in 1986 through Sotheby's, the manuscripts once belonged to the library of Dr Sami Ibrahim Haddād (1890–1957), a well-known Lebanese physician and historian of medicine. The eighty-seven codices described contain more than a hundred texts on various aspects of medicine and related subjects, ranging from the thirteenth to the twentieth century, all written in the Arabic language and script. The texts are works of the most renowned physicians of the medieval Islamic period including translated works of Galen and Hippocrates and numerous texts by less famous authors, some of whom are anonymous, which are important by virtue of their content.

The book is also a revised version of a less complete on-line edition of the same work, published on the Wellcome Library's website (<http://library.wellcome.ac.uk>). While the latter offers rather limited searchability, the printed publication, enlarged by fourteen appendices, provides a well-structured analysis of the collection. The addenda consist of numerous indices, lists, tables and concordances. Some of the descriptive bibliographical information, incipits and basmallahs for example, are entirely listed in Arabic, while indices of personal names and titles are found in both transliteration and the original script. In the last appendix the reader is presented with a thumbnail index of selected images from each manuscript, which can then be viewed in digital format from the CD enclosed in the book.

In a chapter on format, the author enlarges on the codicological descriptions used in the catalogue. Amongst terms such as *mistara* (the trace of a type of stencil used by the scribe as a tool to imprint lines onto the paper) and *catchwords* (the first word of a page written at the bottom of the previous one) the understanding of which the author takes for granted, the reader will discover the *pace*. This is a concept developed by the author and introduced as "a sequence of repeated

patterns which facilitate the description and identification of the hand and the layout of a whole page". Angles and ratios of repetitive features characteristic of a given Arabic script sample are measured with respect to the *density* of the text, which is calculated from the number of lines on the page and the number of *links* in a line. In one of the numerous appendices to this catalogue, brief instructions on how to calculate the *pace* can be found, followed by various *pace* tables for all eighty-seven manuscripts. No evaluation of this measure has however been produced, which is not surprising considering the limited number of texts and the diversity of their origin and history. Nevertheless, the reader is given the opportunity to experiment with the method, which is clearly based on much painstaking and lengthy work.

As for the description of the manuscripts' contents, this work is more than just a catalogue. It deserves to be called a research tool. The very detailed accounts of single chapters of the texts, comprehensive summaries of contents, distinctions between a genuine beginning of a work and the start of the manuscript, together with reproductions of textual fragments (without corrections), provide a solid foundation for investigating the manuscripts in the collection. In short, the catalogue is a major resource for medical historians, library professionals, and other scholars interested in the subject.

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Nils P Heebel, *Babylonisch-assyrische Diagnostik*, Alter Orient und Altes Testament, Band 43, Münster, Ugarit-Verlag, 2000, pp. xii, 471, €98.17 (hardback 3-927120-86-3).

JoAnn Scurlock and Burton R Andersen (translators and commentators), *Diagnoses in Assyrian and Babylonian medicine: ancient sources, translations, and modern medical analyses*, Urbana and Chicago, University of Illinois Press, 2005, pp. xxiii, 879, \$150.00 (hardback 0-25-02956-9).