Looking Backwards:

The Classicist Revival, Imperial Bibliomania, and the Birth of a Medical Tradition in China

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In his magnificent history of medicine, the Roman author Celsus (ca. 25 BC- AD 50) opened with a remark about the universality of the craft. “Nowhere is this Art wanting,” he wrote, “For the most uncivilized nations have had knowledge of herbs, and other things to hand for the aiding of wounds and diseases.” While we might quibble with the choice of the term ‘uncivilized,’ Celsus’ gesture to the universality of medicine – and to the shared impulse to forestall the inevitable – has certain attractions.¹ The Romans, it would seem, were not so mired in ethnocentrism as to be unaware of the existence of medicine in other times and places. Yet Celsus’ assertion of universality belies the very historicity of his comments. Medicine (like the world’s oldest profession) may very well have been a part of man’s life since the dawn of history, but the preoccupation with tracing its roots may be less than universal. And indeed, to turn the problem on its head: Should we not ask how ‘medicine’ came to be glimpsed behind diverse techniques of healing and diagnosis? And what explains the impulse, as Nathan Sivin would say, “to canvas the past to map the progress of medicine”?²

This paper will undoubtedly fall short of answering the questions posed above, as I will limit my discussion to the early Chinese case. It is my hope, however, that my discussion

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will pave the way towards a broader reflection of the problem; and in the conclusion, I will return to the Greco-Roman case with suggestions for possible answers. Of my Chinese sources, however, I will ask two closely related questions: When did the Chinese begin to trace the line of transmission of the medical arts from antiquity? And why did they begin to do so? To put it more succinctly, when do we see the rise of a self-conscious medical tradition in China, and how do we explain such a development?

Before providing a roadmap of the arguments to come, it would be instructive to clarify my use of the term ‘tradition.’ Given that it has acquired some unsavory connotations over the course of the 1990s, I should be clear that I am not using ‘tradition’ in the sense of traditional, that is, an unchanging, primordial entity. Instead, I use ‘tradition’ in the current anthropological sense as ‘that which is transmitted.’ In this regard, the remarks of folklorist Howard Glassie are particularly instructive. For Glassie and others, traditions are marked by their genealogical efforts to forge connections between the practices of the present with those of the past, or the “linking the vanished with the known.” In addition, traditions are far from static; they are constantly made and remade in the image of their transmitters, who “fix upon this aspect or that, in accord with their needs or preoccupations, and leave us with a scatter of apparently contradictory, yet cogent, definitions.”

By medical tradition, I am thus referring to the proclivity of medical practitioners: to trace the connections between the curative and diagnostic techniques of their times with those of bygone ages. Such a proclivity

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expresses itself in various ways: through the recitation of the feats of exemplary practitioners of the past, and through the writing of genealogical accounts.

With such a clarification, let us outline the arguments to come. Our investigation of the making of a Chinese medical tradition will fall into three parts. As the Chinese medical corpus may be unfamiliar to the uninitiated reader, I provide an orientation of the major texts and chronologies. I then turn to the question when medical authors began to look back, or to provide a story about the history of medicine. Taking a close look at surviving medical works, I argue that our first signs of a self-conscious medical tradition are surprisingly late. Early medical authors discussed specific techniques of healing and occasionally mentioned exemplary figures of the past. Yet it is only in the late second century AD – four centuries after the earliest surviving medical manuscript – that we find the first efforts to think of disparate diagnostic and therapeutic techniques as an integrated art or to insert the practitioners of the past into a historicist narrative. Having demonstrated the fact that a self-conscious medical tradition emerged late in the Han dynasty (206 BC- AD 220), I then turn to the crux of the matter: what prompted medical thinkers such as Zhang Zhongjing (c. 150-219) to reflect on the history of medicine, especially when many of the legends incorporated into medical genealogies had circulated for centuries. After exploring a number of different explanatory scenarios, I show that the Seven Essentials 七略, a work produced by imperial bibliographer Liu Xin 劉歆 (ca. 50 BC- AD 23) in the wake of the consolidation of the imperial library in 26 BC, served as both the archetype and impetus for later medical genealogies. Consideration of the evidence thus suggests that the emergence of a medical tradition owed much to the new ways of engaging the past that accompanied the reorganization of the imperial collections.
Setting the Stage

Because the subject of this paper presents a number of challenges to the uninitiated reader, I provide a brief survey of the periods, sources, and major figures of this study. In addition, the present discussion aims to lay bare some of the author's basic assumptions about her sources.

Let us begin with the temporal scope of the paper. Our discussion will assume the contrast between the pre-imperial period and the early imperial period, with the imperial unification of the Qin in 221 BC being the conventional dividing line between the two. The early imperial period, in contrast, is generally thought to comprise the Qin (221-206 BC) and the Han (206 BC-AD 220).

While convenient, several points are worth noting about such chronological divisions. First, the contrast between the pre-imperial and early imperial periods can be overdrawn. Many of the features of the Qin and Han empire can be seen in the super-states of the late pre-imperial period. Most historians agree that after the sixth century BC, the aristocratic order in the sixth century BC began to be supplanted by the rise of centralizing regimes, bolstered by more efficient systems of counting people and extracting resources, new modes of warfare, and better technology. In addition, the unity and stability of the early empire can be exaggerated. The Han dynasty was really not a single dynasty. Scholars commonly divide the Han into two periods, the Former Han (206 BC–AD 9) and Later Han (AD 25–220), also called the Western and Eastern Han, respectively. The latter set of names derives from the location of the capital, with the Former Han ruling from Chang’an (modern-day Xi’an) as its capital and the Later Han ruling from Luoyang. The Han dynasty did not represent a period of unbroken rule by a single clan; there were also interregnums,
the most famous of which occurred at the end of the Former Han dynasty. During his self-styled Xin dynasty (9–23 AD), an imperial relative by marriage, Wang Mang (46 BC–AD 23), briefly overthrew the dynasty, which suffered low popularity. Wang’s usurpation was never fully accepted, and it was not long before a distant relative of the last Former Han emperor made use of the opportunity to further his own claims to the throne. Rallying support around his cause, this Liu relative eliminated the Wang clan and “restored” Han rule – or, more precisely, founded his own dynasty, known as the Later Han.

With such a description of chronology, let us turn to the medical texts that we will examine in this paper. Archaeological excavations undertaken in the last century have greatly increased our source of materials. Judging from such finds, we currently have medical manuscripts, mostly of a technical nature, that date from the Qin dynasty and first half of the Han. To date, archaeologists have published three sets of substantial manuscripts from the third- and early-second centuries BC, as well as a number of smaller fragments. The oldest set of manuscripts, Guanju 關沮, was discovered in 1993 by archaeologists working near Zhoujiatai (present-day Hubei). Based on forensic evidence, the manuscript dates no later than from the Qin dynasty (ca. 209-206 BC) and once belonged to a petty local officer. The local officer clearly had an interest in medicine, as archaeologists discovered several dozen formulas among the documents. The next oldest manuscript was recovered from the Zhangjiashan 張家山 site (ca. 187 BC) from a tomb in Hubei in 1983. This manuscript

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5 For a summary of most of these finds, see Li Jianmin, Sixiang zhi yu, pp. 7-12. In 2009, the Peking University Museum book a store of Han-dynasty strips from the Hong Kong antiquities market, which dates to the mid-Former Han period. According to the report released by the museum, the strips contain a large number of medical formulas, including one attributed to Bian Que, who is reported as Qin Yueren. See Beijing daxue chutu wenxian yanjiusuo, "Gongzuo jianbao," 2009.10:1-7; 7.

6 Wenwu 1999; the transcriptions are found in Hubeisheng Jingzhoushi Zhouliangyuqiao yizhi bowuguan ed., Guanju Qin Han mu jianju, pp.126-137.
contains two documents with medical content: the *Vessel Book* and the *Pulling Book*. Next in date are the medical texts found in a tomb in 1973 at the Mawangdui site, which had belonged to the noble Lady Dai (d. 168 BC) and her son. The contents of the Mawangdui tomb overlap with the manuscripts recovered from Zhangjiashan; Lady Dai’s tomb contained copies of texts closely related to the *Vessel Book* and the *Pulling Book*. In addition, the Mawangdui tomb also contains a formula book, *The Methods for the Treatment of the Fifty-two Illnesses*.\(^7\) While Lady Dai died in 168 BC, it is worth pointing out that most historians believe the manuscripts to be considerably older. Judging from the handwriting, eminent scholars such as Li Xueqin, Ma Jixing, and Liao Yuqun agree that the manuscripts were composed around the late third century BC.\(^8\) Aside from these manuscripts, archaeologists have discovered fragments of medical formulas, discussions of *medica materia*, and military records of medical consultation in sites from the Northwest and Southeast.\(^9\)

Aside from such manuscripts, my discussion will also draw from what scholars conventionally refer to as ‘received texts,’ or works that have been transmitted through the

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\(^7\) For a transcription of the Mawangdui manuscripts, see Mawangdui Han mu boshu zhengli xiaozu, ed. *Mawangdui Han mu boshu*. For transcription and annotations, see Ma Jixing, *Mawangdui guyishu kaoshi*. For a translation and description of its contents, see Donald Harper, *Early Chinese Medical Literature*. A transcription of the Zhangjiashan can be found in the Zhangjiashan 247 hao Han mu zhujian zhengli xiaozu, *Zhangjiashan Han mu zhujian*. A corrected transcription has recently been published by Cultural Relics Press (Wenwu) by the same title *Zhangjiashan Han mu zhujian* (2006); henceforth, I will cite the 2006 edition. A study and complete translation of the Zhangjiashan *Maishu* and *Yinshu* has been done by Vivienne Lo, “The Influence of Yangsheng Culture.”


\(^9\) For published fragments from the Tianchang site in Anhui, see *Wenwu* 2006.1; also see the site report for the Fuyang wanwu site. A complete list of fragmentary manuscripts from the Northwest can be found in Miranda Brown, *Many Faces of Early Chinese Medicine*, Appendix A: Medical Sources.
ages. As will be clear, the Han dynasty is often thought of as a seminal period in the
development of the classical medical tradition, as this was the period where many of the
classics of acupuncture were written. For the Former Han dynasty, we will discuss two sets
of such works. The first is the famous chapter in the *Historical Records* (ca. 110 BC),
which contains the joint biographies of two court physicians, the mythical Bian Que and Chunyu Yi, by Sima Qian (c. 145-86 BC). The
chapter is entitled the *Biography of Bian Que and the Master of the Granaries*. The
second is the medical compendium, the *Yellow Emperor's Classic*, appears first in
the *Seven Essentials* of Liu Xin.¹⁰

My discussion will also draw from works of the Later Han and early post-Han
period, for which three key texts will become important. These include: the *Disquisitions of
Cold Damage Disorders*, which is traditionally attributed to Zhang Zhongjing (also
known as Zhang Ji; the *Classic of the Pulse* of Wang Shuhe (also referred
to as Wang Xi; ca. 170-280); and the *AB Classic of Acupuncture and Moxibustion*

From Technical Literature to Medical Tradition

With such an orientation, our next order of business is to establish when a self-conscious
tradition of medicine emerged in China. No doubt, some readers will wonder whether the

point is moot. After all, the fact that the imperial bibliographer Liu Xiang (77-6 BC) was able to create a bibliography of all surviving medical texts between 32 and 39 BC, with the assistance of imperial Physician-in-Attendance Li Zhuguo, might be taken as a sign that the medical arts had long ago emerged as a recognizable body of knowledge with its own history. While such a view makes a certain degree of sense, our survey of the early corpus will reveal a surprising, if not startling, fact – to wit, medicine only came to be thought of as a single art with its own history in the late second century of our era.

We turn first to the early Chinese corpus of the late third and second centuries BC, which provide only isolated glimpses of the past. The manuals for vessel diagnosis mention the ancient sages, but say little else. Similarly, the copy of the Pulling Book mentions in passing a Pengzu, a figure renown for his longevity. Similarly, the famous sexual cultivation from Mawangdui texts open with comments from the Yellow Emperor and other mythical figures of high antiquity. Such glimpses are brief, and more to the point, they provide no account of how such individual figures were connected to the present, let alone to other exemplary personas of the past. As a result, we may argue that early manuscripts provide us with what might be thought of as genealogical data, but not with genealogies per se.

Our discussion has thus far been confined to the excavated corpus, but we should look at the splendid chapter in the Historical Records of Sima Qian (ca. 90 BC), which arguably

12 Zhangjiashan 247 hao Han mu zhujian zhengli xiazuo, “Yin shu,” 171.
13 See, for example, Ma Jixing, Mawangdui guyishu kaoshi (Beijing: Wenwu chubanshe, 2006), 867.
evinces more of a genealogical impulse than early technical manuals. At the very least, we may say that Sima’s biographies are retrospective, for they relate the personal histories of the pair. The *Biography of Bian Que*, for one, explains Bian Que’s origins: his name, his master, and even his sources of diagnostic prowess. We learn, for example, that Bian Que became a famous physician after he encountered a divine being, who bestowed upon him a magical potent that gave him powers to see through solid objects, including bodies, and a set of formulas.\(^\text{14}\) In addition, Sima Qian refers to another ancient figure, Yufu 俞跗: “who was able to treat illnesses without the use of medicinal decoctions, sweet and warm wines, stone needles, raising and pulling exercises, massage therapy for calibrating the blood and vessels, or the application of heat and poisons.”\(^\text{15}\) Similarly, the biography of Chunyu Yi seems to express a genealogical impulse; it relates the physician’s connection to his two masters: the famous Gongsun Guang 公孫光 and particularly the reclusive Yang Qing 陽慶. By Sima’s account, Yang presented Chunyu Yi with his forbidden’ recipes and works of supposedly ancient provenance after verifying that Chunyu was in fact the “right person.” Yang thus represented Chunyu’s link to the distant past, or to the ancient sages. Chunyu Yi, finally, makes much of his connection to the sages, who he credits with creating an authoritative text called the *Model of the Pulse* (*Maifa* 脈法), which he used as the basis of his diagnoses.\(^\text{16}\)

Yet for all of its details about specific individuals, Sima Qian’s chapter about the two court physicians seems not to provide a history of medicine *per se* as much as a biography of two particular medics. As Taiwanese historian Jin Shiqi astutely points out, the title of the chapter, “The Biographies of Bian Que and the Master of the Granaries,” alerts us to the

\(^\text{14}\) *Shiji* 105.2785.
\(^\text{15}\) *Shiji* 105.2788.
\(^\text{16}\) *Shiji* 105.2813.
fact that medicine was not the main subject of concern. As Jin notes, Sima Qian chose not to entitle the chapter “The Biography of the Medics” even though both Bian Que and Chunyu Yi were famed court physicians. Making matters worse, the decision to entitle the chapter “The Biography of the Medics” would not have been out of character for Sima Qian; the Historical Records contains “The Biographies of the Diviners” and the “Biographies of the Literati.” For Jin, the choice of title reveals that Sima Qian rehearsed the personal histories of Bian Que and Chunyu Yi only to make a rhetorical point. As physicians had long been used as metonyms for worthy ministers in the larger discursive tradition, the two figures worked to express the Grand Historian’s personal dilemma – to wit, the perils of intervening in matters of state when dealing with tyrants.17

While I would resist the suggestion that the biographies should be read merely as allegory, Jin’s observations nevertheless point to the drawbacks of reading the chapter as a literal history of medicine. And indeed, Sima Qian does not offer anything by way of general reflections about medicine. Granted, the Grand Historian makes a passing comment about how all formulas are thought to come from Bian Que.18 Yet Bian Que and Chunyu Yi have yet to be inserted into a general historical narrative. Where do such figures, for example, stand in relation to the broader art? What relationship did they have to the sages of antiquity? For example, Sima Qian mentions Yufu in relation to Bian Que, but Bian Que denies any connection to Yufu and his followers. Similarly, Chunyu mentions works attributed to Bian Que, but as Donald Harper points out, Chunyu even professes to know nothing about their masters. As a result, it is impossible to trace several generations of

17 Jin Shiqi 金仕起, Zhongguo gudai de yixue, yishi, yu zhengzhi: yi yishi wenben wei zhongxin de yi ge fenxi 中國古代醫學,醫史,與政治:以醫史文本為中心的一個分析 (Taipei: Zhengda chubanshe, 2010), 92; FIND REST. 18 Shiji 105.2794.
continuous transmission, let alone reconstruct the relationship between Bian Que and Chunyu Yi. And indeed, neither of the biographies provides any information about the origins of medicine – the intermediate steps of transmission, the exemplary figures of the past, and even the initial impetus responsible for the creation of the art.

The lack of interest in the history of the medical arts is less surprising when we consider the absence of any single term for medicine in texts from the second and third centuries BC. Early medical authors, in fact, did not hypostatize the various techniques of diagnosis. Instead, such authors referred to healing in terms of specific techniques: the way of pulse diagnosis (xiangmai zhi dao 相脈之道),20 the poisons and medicaments (duyao 毒藥), moxa (jinbing 炎炳), stone needles (zhuanshi 砭石), acupuneture (zhendao 針道 or zhenfa 針法), and pulling and massage exercises (daoyin anqiao 引按蹻).21 The term yi 醫, which we now think of as an equivalent for medicine writ large, referred just to medical attendants or to the act of attending to the physical needs of others. As the famous primer, The Explication of Words 說文解字 (c. 121 AD) puts it, ‘yi were craftsmen who remedied ailments’ (zhibing gong 施石工).22 Yi, moreover, was not the only term that referred to those who healed; medical practitioners were described in a variety of ways, including those “fond of formulas” (haofang 好方)23 and those “fond of practicing the art of taking the pulse” (hao weiy mai 好為脈).24

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21 For the last six items, see, for example, *Huangdi neijing suwen jijie* 20/105.
22 *Hanshi waizhuan* 10/414.
23 *Shiji* 105.2806.
And indeed, we must wait until the *Yellow Emperor's Inner Classic* (late first century BC or AD) before we find a notion of a medical art. Chapter 75 mentions the “way of the yi” (*yidao* 醫道; *yi zhi dao* 醫之道) twice in passing. However suggestive, such glimpses are rare in the *Yellow Emperor's Inner Classic* – and indeed, in texts, such as the *Divine Husbandman's Pharmacopeia* 神農本草經 and the *Classic of Difficult Issues* 難經, which are typically dated to the first century AD. Most often, however, the authors of *Yellow Emperor's Inner Classic* kept with the earlier practice of referring to specific techniques. Chapter 12 presents one such example; it devotes a chapter to discussing the various forms of therapy (but not diagnosis): the administration of the medicaments, the application of heat and fire, needling, and pulling and massage. Interestingly, while all of the different techniques are mentioned together in the space of a chapter, the author emphasizes their diverse origins. The practice of using fine needles, for example, originated from the South, whereas the poisons (*duyao*) were inventions of the West, and so forth. Most tellingly, the word *yi* is not used here. And indeed, the final comment highlights the diversity of the methods of healing: “The sage combines what is *sundry* in treating, obtaining what is fitting for each case and in using different methods the ills are all cured.”

The first definitive sign that medicine had become a single art is found in the Preface to the *Disquisitions on Cold Damage Disorders*, a work attributed to Zhang Zhongjing. The *Disquisitions*, if it is indeed the work of a second-century figure, is noteworthy on several counts. To begin with, the text breaks with the earlier practice of speaking of healing in terms of specific techniques, preferring instead to conflate healing and diagnosis. For example, in one place Zhang rails against his contemporaries for “being unmindful of the

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25 *Huangdi neijing Suwen yijie* 黃帝內經素問譯解
26 *Huangdi neijing Suwen yijie* 12/107.
(arts of) healing and medicine” (yiyao 醫藥). The new status of yiyao is also evident from the Preface to the Classic of the Pulse, a work attributed to the imperial physician Wang Shuhe. While reflecting upon the risks of therapies, Wang wrote, “The deployment of the arts of healing and medicaments is tied up with matters of life and death.” As Wang was concerned here with the difficulties of pulse diagnosis, his reference to yiyao was broad enough to encompass diagnostic practices as well as therapy. The Preface to the AB Classic of Acupuncture and Moxibustion of Huangfu Mi furnishes us with a final example. In his opening sentence, Huangfu spoke of the ancient roots of the “way of the yi,” and then, in the next breath, goes on to explain the origins of the making of medicaments, pulse diagnosis, observations of the appearance, the boiling of decoctions, and the application of acupuncture needles.

Aside from thinking of diagnosis and therapy as a single art, our second and third-century authors began to look back at the history of medicine, a step that represented a crucial stage in the formation of a tradition. Zhang Zhongjing opens his monumental treatise by recounting the historical feats of exemplary practitioners, which he acknowledged not only as personal heroes but as ancestors. “Each time I reflect on how Bian Que entered the state of Guo to examine the crown prince or how he gazed at afar at the Lord of Qi and discovered his illness,” Zhang wrote, “I come away sighing with admiration for his talents.” In addition, Zhang went a step further and traced the history of the art, explicating his relationship to figures such as Bian Que. “In high antiquity there was the Divine Husbandman,” he wrote, “and the Yellow Emperor, Qibo, Bogao, the Lord of Thunder, Shaoyu, Shaoshi, and Zhongwen.” Many of these figures were fixtures in earlier texts, where

27 Duan Yishan et al., Yigu wen, “Shanghan lun xu,” 220.
28 Duan Yishan et al., Yigu wen, “Maijing xu,” 226.
29 Duan Yishan et al., Yigu wen, Jiayi jing xu, 229.
they figured in works such as the manuscripts recovered from the Mawangdui site and particularly the *Yellow Emperor's Inner Classic*. Yet in contrast to earlier works, Zhang Zhongjing proceeded to trace exemplars through the periods that separated high antiquity from the present to move squarely into the realm of first historical and then living memory. “In middle antiquity, there was Lord Changsang 長桑 and Bian Que,” he noted, “In the Han, there was Yang Qing, of the eighth order of nobility, and the Master of the Granaries [i.e., Chunyu Yi].”\(^{30}\) Admittedly, this lineup of exemplary practitioners looks incomplete in relation to later accounts. The *Lacuriant Blossoms in the Garden of Literature* 文苑英華 of the Tang dynasty (618-907), for example, retains the broad outlines of Zhang’s account and extends it to the present, but specifies how many generations of masters and teachers separated each of the figures in the genealogical sequence.\(^{31}\) Though bare, Zhang’s account, however, is noteworthy insofar as it furnished the prototype for many genealogies in the subsequent tradition.

The genealogical impulse is shared with medical authors of the third century. As with Zhang Zhongjing, Wang looked back to his ancestors with longing. He praised Bian Que and Physician He 醫和 (ca. 546 BC) for their subtle faculties (while noting that even they encountered difficult cases). He also singled out Zhang Zhongjing for his “clear-sighted” investigations of illness, and for his thorough diagnoses. “If there were the slightest modicums of doubt,” Wang added, “Zhang Zhongjing would investigate matters in search of verification.”\(^ {32}\) Aside from such remarks, other comments made by Wang reveal that he saw medicine as a continuous tradition that stretched from antiquity to the recent past. 

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30 Duan Yishan et al., *Yigu wen*, “Shanghan lun xu,” 220.
31 For this fragment, see in Okanishi Tameto 岡西為人, *Song yiqian yiji kao* 宋以前醫籍考 (Beijing: Xueyuan chubanshe, 2010), 96-97.
this time,” Wang declared, “I have selected and collected the works of thinkers from Qibo to Hua Tuo, their classics, discourses, essentials, and judgments, and combined them into a work of ten books.” As some of the figures mentioned by Wang may be unfamiliar, it is worth highlighting the divide that separate Qibo from Hua Tuo (d. ca. AD 208).

Presumably a contemporary of the Yellow Emperor, Qibo was a figure of high antiquity, whereas Hua Tuo was a recent personage, having died only decades before Wang composed the *Classic of the Pulse.*

With Huangfu Mi we come to the fullest genealogical account of the art of medicine. He begins with a story about the origins of medicine. Given its importance to our narrative, it is worth looking at an extended excerpt:

夫醫道所興，其來久矣。上古神農帝嘗草木而知百藥。黃帝咨訪岐伯、伯高、少俞之徒，內考五臟六腑…其論至妙，雷公受業傳之於後，伊尹以亞聖之才，撰《神農本草》，以為《湯液》。中古名醫，有俞跗、醫緩、扁鵠，秦有醫和，漢有倉公，其論皆經理識本，非徒診病而已。漢有華佗、張仲景，其他奇方異治，施世者多，亦不能盡記其本末。

It has been a long time since the way of the *yi* arose. In high antiquity, the Divine Husbandman began the practice of tasting the grass and trees and thereby learned of the hundred medicines. Together with the followers of Qibo, Qigao, and Shaoyu, the Yellow Emperor inspected the five viscera and six repositories within the body…Their analyses were of the utmost subtlety. The Lord of Thunder inherited this enterprise and transmitted it to his heirs. Possessing the abilities of a secondary sage, Yi Yin edited the *Pharmacopeia of the Divine Husbandman* to make decoctions.

Among the famed *yi* of middle antiquity were Yufu, Physician Huan, and Bian Que. In the Qin state, there was Physician He, and during the Han dynasty there was the Master of the Granaries (i.e., Chunyu Yi). Their analyses grasped the basic principles of [the body], and thus their followers did more than just examine the sick. During the Han, there was also Hua Tuo and Zhang Zhongjing, both of whom used extraordinary formulas and outstanding treatments. Although there were many who disseminated their teachings to the world, the works of these figures have not been recorded completely.

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33 Duan Yishan et al., *Yigu wen,* “Maijing xu,” 226.
34 Duan Yishan et al., *Yigu wen,* “Jiayi jing xu,” 229.
The excerpt presents several points of interest. More so than Zhang Zhongjing and Wang Shuhe, Huangfu Mi emphasizes the venerability of the art. The Way of Medicine, he tells us in so many words, has roots in deep antiquity. In addition, the picture of medicine has been elaborated since Zhang’s earlier account. Fourteen figures, most of whom date from the highest antiquity, are adduced. What is more, we learn how medicine changed and developed over time: The Divine Husbandman was responsible for discovering the power of medicinal herbs, the Yellow Emperor and his interlocutors were credited with discovering the key features of the human body, a discovery necessary for acupuncture, and Yi Yin was extolled for his authorship of the Divine Husbandman’s Pharmacopeia. In this way, Huangfu provided specific connections between figures, figures separated in time and space and associated with diverse textual corpuses. Finally, Huangfu’s emphasis on transmission suggests that medicine was conceived of as a full-blown tradition. Whereas earlier authors were content to just list figures in a loose temporal sequence, Huangfu took pains to specify the lines of transmission. The Yellow Emperor and his interlocutors had disciples who produced disquisitions that were transmitted to the Lord of Thunder, who in turn imparted such knowledge to his “heirs.” Worth marking here is the reference to “heirs” or “successors” (hou 后), as this was a term that was used not only in referring to legal heirs, but also to the men responsible for carrying out the sacrifices in ancestral worship.

Taken together, the three prefaces set the subsequent pattern of medical writing for the next two millennia. From the Tang to the end of Qing, classical medical writings were characterized by a high degree of self-consciousness. Few medical works, in fact, omit the preface, which reinforced the sense of medicine as a coherent tradition. As with Zhang Zhongjing, future authors would most often situate their contributions within a broader tradition that stretched back to the dawn of time. He would rehearse the history of the art:
the lines of transmission that connected the author to the great figures of the past, the acts and contributions of the practitioners that spanned the intervening centuries, and the texts and formulas that marked the stages of development in the Way of Medicine. And indeed, when the first modern historians of medicine scoured the historical record for clues with which to build a medical genealogy worthy of China’s status as the “world’s oldest continuous civilization,” they found that much of their work had already been done.35

Timing

Our foregoing discussion brings us to the following question: How do we account for the fact that Zhang Zhongjing, and not Chunyu Yi, would have spoken of healing in terms of a continuous tradition? In order to answer this question, we will need to investigate the structural and historical conditions that enabled Zhang Zhongjing, rather than his earlier predecessor, to produce genealogical accounts of the history of medicine. Towards this end, we will review a number of different explanatory hypotheses before settling on the most plausible scenario – to wit, the belated arrival of a medical tradition owed much to the reorganization of the imperial library in 26 BC, an event that not only ushered profound changes in conceptions of textuality, but also enabled medical authors to bring together diverse techniques and disparate figures in a single genealogical narrative.

Of course, the skeptic might ask whether we can be sure that Chunyu Yi and other earlier practitioners were incapable of thinking of a medical tradition. Suppose that Chunyu Yi had written some treatise, to which he affixed a preface where he recounted, like Zhang Zhongjing, the feats of exemplary practitioners, but that preface has not survived. And indeed, there are reasons to suspect that the memorandum presented in the *Historical Records* does not represent the totality of Chunyu Yi’s lifetime production. As Elisabeth Hsu points out, the *Biography of the Master of the Granaries* reveals signs of Sima Qian’s editorializing hand. Sima clearly drew from a larger corpus of legends and texts associated with the court physician, a corpus that he selected so as to create a coherent narrative.\(^{36}\) To put it differently, the impression that reflections on the medical tradition only began in the second century AD may very well owe more to accidents of survival than to any real historical shift.

And indeed, the skeptic may point to the fact that the sources that Zhang and later medical authors drew upon for genealogical accounts already existed in Chunyu Yi’s own time. The stories about Physician He of the state of Qin, highlighted by Wang Shuhe and Huangfu Mi, were old; they were recorded in the *Commentary by Zuo* (fourth century BC) and the *Discourses of the States* (third century BC).\(^{37}\) In addition, the tales about Bian Que were nothing new to the second century AD; they were found already in the *Historical Records* of Sima Qian, a text that drew upon sources dating to the third century BC.\(^{38}\)

While many of the ingredients for genealogies existed long before Zhang Zhongjing; there are however reasons to believe that Chunyu Yi and other early medical authors were not in the position to write histories of the art. To begin with, most of the reflections on the

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\(^{36}\) Elisabeth Hsu, *Pulse Diagnosis in Early China*, 50, 52-58; 60.

\(^{37}\) See Brown, “Who Was He: Reflections on China’s First Medical Naturalist.”

\(^{38}\) Bian Que’s story about Lord Huan can be traced back to the *Master Hanfei jijie*, “Yulao,” 7/21. 161; on this point see Brown, *Many Faces of Early Chinese Medicine*, Chapter 2.
origins and evolution of medicine appear in prefaces. It was in prefaces that medical authors from Han to Qing looked back to the past and situated themselves within a broader tradition. Yet prefaces – which were linked to the rise of notions of authorship – were uncommon before the end of the first century BC. It was Yang Xiong (楊雄 53 BC - AD 18), sometimes described as the first self-conscious Chinese author, who wrote a preface to his Modeled Sayings 法言. From this time, authors commonly situated their work within a personal context, expressing their hopes for a good reputation with posterity.\textsuperscript{39}

Making matters worse, Chunyu Yi and earlier medical authors would have had difficulty getting their hands on texts with information about pre-imperial figures. To put it bluntly, the Historical Records, which appears to have been an important source of information for Zhang Zhongjing, did not circulate widely. Deposited in imperial archives for the perusal of rulers and their trusted advisors, the Historical Records languished away, largely unknown to the larger literate elite.\textsuperscript{40} The case of the Historical Records was far from an isolated occurrence. As Nylan explains, many of the texts, which contain information about earlier figures such as Bian Que and Physician He, had limited circulation. Before the late first century BC, many pre-imperial manuscripts were deposited in the personal libraries of Han princes and rulers. The uncle of the martial emperor, Wu 武 (r. 141-87 BC), held a library that boasted not only the best textual experts but also the best editions of older texts, an example that spurred his nephew to follow in his footsteps. Yet the existence of such libraries did little to broaden the

\textsuperscript{39} Need to cite Taniguchi.
\textsuperscript{40} Michael Nylan, “Textual Authority in Pre-Han and Han,” Early China 25 (2000): 205–58; 240-1.
horizons of elite readers such as Chunyu Yi. The emperor was known to guard access to his collection, even going so far as to deny entry to an imperial prince. 41

Aside from the problem of access, the medium in which ancient texts were written made it highly unlikely that figures as Chunyu Yi would have been able to get a hold of them. As is well known, paper made a late appearance in China. Purportedly invented in the first century AD by the court eunuch Cai Lun 蔡倫, paper technology was slow to be refined, and only became widely used in the post-Han period. 42 Prior to this, manuscripts tended to be recorded in bamboo, silk, and wood. Needless to say, such mediums were not only expensive (particularly in the case of silk), but also quite impractical to transport. The Historical Records, as a bamboo manuscript, for example, would have weighed too much to be routinely transported, let alone easily shared. 43 Given the situation, it is unsurprising that manuscripts tended to circulate within relatively small, tight-knit communities consisting of fathers and sons, or masters and disciples. What is more, the difficulty and expense of copying (and memorizing texts) discouraged casual collecting and reading. “Given the slow pace of copying and memorizing in a manuscript culture largely dependent upon oral instruction,” Nylan writes, “the final authority of even the most renowned model and his writings could be trusted only insofar as circles of admirers committed themselves to preserving and transmitting their favorite texts.” 44

Besides, even had Chunyu Yi had access to old manuscripts, it is far from a foregone conclusion that he would have culled through such works for clues about the origins of medicine. As Michael Nylan shows, at the end of the first century BC, even court-appointed

41 Michael Nylan, Yang Xiong and the Pleasures of Reading and Classical Learning in Han China (Forthcoming), “Playing with Manuscripts.”
42 Nylan, “Textual Authority,” 252.
43 Nylan, “Textual Authority,” 244.
44 Nylan, Yang Xiong, “At Play with the Ancients.”
classicists – the most educated members of the realm – were less than sanguine about their ability to decode old texts, particularly those written in the strange, archaic scripts of the pre-imperial period. Indeed, most educated members of the early Han elite believed that an understanding of ancient texts required the guidance of a master. In this regard, medical authors were no exception. By his own admission, Chunyu Yi only became a successful healer once he found a master who could explain the larger import of medical texts, and indeed, the Biography reveals that the master’s explanations (yan 言) were crucial for grasping the proper applications of formulas and other techniques. As Nathan Sivin explains it, the Biography betrays the belief that “the truths were too deeply embedded in these texts” and that “in the degenerate present only those initiated by a master could hope to comprehend them.”

Our foregoing discussion leads us to the question what changed in the centuries that elapsed between Chunyu Yi and Zhang Zhongjing? As I will outline below, several developments facilitated the making of the medical tradition: the rise of a classicist revival, or what has been called the “fondness for antiquity” (haogu 好古) movement in the late first century BC; and the reorganization of the imperial collection in the capital of Chang’an.

We start with the classicist revival, which gave later medical authors as Zhang Zhongjing not only the sense that the distant past could be known, but also many of the tools with which to interpret old texts. In the first century BC, two of its leading proponents, the imperial bibliographer Liu Xiang and his protégé Yang Xiong, promoted the idea that it was possible for men of the present to bypass the oral traditions to interpret directly the

45 Nylan, Yang Xiong, “Playing with Manuscripts.”
textual remnants of the sages. For Liu and Yang, such oral traditions contributed to the degeneration and mingling of text and commentary. Aside from promoting the idea that ancient texts could be interpreted directly, such figures made possible such endeavors.47 Liu Xiang and his circle devoted their energies to restoring and creating critical editions of pre-imperial texts, including the Intrigues of the Warring States, a text with some of the earliest surviving accounts of Bian Que.48 As court favorites with privileged access to the imperial archives and libraries, the figures associated with the classicist revival were well positioned for such a task. Equally impressively, they aided the research of later scholars by developing word lists and lexicons, which could facilitate the deciphering of unfamiliar texts, including those written in regional dialects or in archaic scripts. Finally, such figures, particularly Yang Xiong, were instrumental in bringing attention to important recent works. Yang’s admiration of the Historical Records led him to promote the text as a model of writing, which increased the visibility and influence of a work that had been hitherto largely unknown.49 All this contributed to calling Zhang Zhongjing’s attention to the Historical Records, a text which he clearly drew upon in his Preface).

And indeed, if we turn to the medical prefaces of the second and third centuries, the influence of the classicist revival is evident; the medical authors of the late Han and early post-Han periods not only believed that they could reconstruct old texts, but also felt the urgency to do so. Zhang Zhongjing, for one thing, expressed confidence that he could bypass the technical traditions of individual households (jiaji), which he claimed obscured, rather than illuminated, the “larger import” of the classics (jingzhi). His

47 Nylan, Yang Xiong, “At Play with the Ancients.”
48 For anecdotes in the Zhanguo ce about Bian Que, see Zhanguo ce (Han yu 2) 28/5a; Zhanguo ce (Qin yu 2) 4/4a.
49 Nylan, Yang Xiong, where?
efforts to compile and collect the “traces of the ancients” suggest that he took to heart the lessons of Liu, Yang, et al. “I have exerted myself in seeking the teachings of the ancients, selecting widely from the multitudes of formulas,” Zhang wrote. “Consequently, I have selected from the Basic Questions, the Nine Chapters, the Eighty-One Difficulties, the Great Disquisitions of the Yin and Yang, the Record of the Medicine for the Developing Fetus and Head, as well as the [techniques] for differentiating the pulse and indicators.” Wang Shuhe, in turn, saw his contribution in terms of a larger project of textual restoration. To be sure, he followed earlier figures in complaining about the abstruseness of medical classics. As he succinctly put it, “The texts transmitted from the sages are mysterious, and so over the ages few practitioners have been able to employ them.” Wang’s remarks about the difficulty of bringing coherence to what was a corrupt textual tradition should be taken with a grain of salt. While the challenges of interpreting a fragmentary textual record can be appreciated, such comments mask Wang’s strident confidence. Wang clearly believed that by comparing different editions of texts, he could secure for himself a place in “the line of ancient worthies.”

The influence of the classicist revival is perhaps clearest in the works of Huangfu Mi, a highly-regarded classicist, recluse, and probable drug addict. As with most early third-century figures, Huangfu emphasized the corrupt state of the textual record. “At present there is the Classic of the Needle, in nine chapters and two hundred and ninety-eight chapters, which make up the Inner Classic, he notes. “In addition, there are parts that have been lost,” he added, “And so although the analyses are far-reaching and relate a great many things,

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50 Duan Yishan et al., Yigu wen, “Shanghan lun xu,” 220.
51 Duan Yishan et al., Yigu wen, “Maijing xu,” 226.
52 This is not the only reading possible; the Zhonghua edition argues that xiayuan 亷遠 is made up of two characters that mean the same thing, and so the phrase could mean ‘wrong.’
they are of little practical use; and much of the text is furthermore out of sequence.”

Problems of corruption notwithstanding, Huangfu asserted that by sifting through the textual remnants of the sages, the original sequence and wording of the classics could be restored. As the form as well as the content of such texts embodied the sage’s understanding of the body, Huangfu believed that such efforts would give the exegete a grasp of the underlying principles of medicine.53

The reorganization of the imperial collections in 26 BC also proved instrumental in the formation of a medical tradition in China. As such a reorganization may be unfamiliar, it is worth saying a few words about the circumstances behind it. The consolidation of the library was headed by a father-son pair, Liu Xin and Liu Xiang, the rivals and patrons of the literatus Yang Xiong.54 The two, relatives of the emperor, were polymaths; their works touched on subjects ranging from astrology to classical scholarship to philosophy. In addition, the consolidation took place at a time when the Han dynasty had reached a low point in its finances and legitimacy (Emperor Cheng’s dalliances with a sing-song girl and her sister undoubtedly did not help matters). As a result, the cash-strapped Han emperor was looking for less expensive ways of shoring up dynastic legitimacy than military campaigns. So father and son were given the task of supervising, editing, cataloguing, and categorizing all known texts of importance.55 The achievements of the pair were considerable. Not only did Liu Xiang and Liu Xin create definitive editions of the technical literature (shu 部), as well as what would later be known as the Five Classics and other important pre-imperial works, but they also created a catalogue arranged by taxonomy.56

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53 Duan Yishan et al., Yigu wen, “Jiayi jing xu,” 229.
54 Nylan, Yang Xiong, “Playing with Manuscripts.”
55 Ask Michael Nylan.
56 Nylan, Yang Xiong, “Playing with Manuscripts.”
The consolidation of the medical corpus (yiijing 医經) appears to have been one immediate consequence of the reorganization. Assisted by the imperial physician in attendance, Liu Xiang collected and catalogued various works concerned broadly with diagnosis and therapy. Judging from surviving fragments of the Seven Essentials, which Liu Xin wrote based on his father’s earlier work, such an effort resulted in a list of major works of medicine, including a number of titles that no longer survive.57

In the process of categorizing the contents of the imperial collections, the father and son pair arrived at a standard definition of the medical corpus, which no doubt contributed to the expanding scope of the term yi, discussed in the previous section. Granted, formulas (fang 方), which probably included immortality elixirs (rumored to have been a special interest of Liu Xiang),58 were put in another category in the Seven Essentials, along with the techniques for the inner chamber.59 Still, the fact that yi has acquired the general sense of all techniques of medical and diagnosis is evident here:

The various classics of medicine investigate the blood and vessels, bones and marrows, yin and yang, and the inner and outer regions of man; they illuminate the roots of the myriad illnesses and the boundaries between life and death so as to enumerate the proper applications of the stones, needles, decoctions, and heat; and to calibrate the proper mixtures of the hundred medicaments and dosages.60

The passage presents several points of interest. For a start, we notice that for the first time, all of the disparate therapies have been brought together under a single name, yi. What is

57 Liu Xiang and Liu Xin, Qilüe bielu yiwen, qilüe yiwen, ed. Deng Junjie (Shanghai: Shanghai guji, 2008), 184–85.
59 Liu u Xiang and Liu Xin, Qilüe bielu yiwen, qilüe yiwen, 106-107.
60 Liu Xiang and Liu Xin, Qilüe bielu yiwen, qilüe yiwen, 106.
more, the Lius assert that the *yi* corpus, in spite of its diversity, was united in terms of its
contents and aims.

The imperial reorganization was also responsible for producing the earliest genealogical
account that survives. In this connection, let us turn to another excerpt from the *Seven
Essentials*:

In high antiquity, there was Qibo and Yufu; in middle antiquity, there was Bian
Que and (Physician) He of Qin, whose analyses of illnesses had implications for
the state and who examined the body to learn of the circumstances of
governance. And since the founding of Han, there was the Master of the
Granaries (i.e., Chunyu Yi). At present, the arts have fallen into obscurity, and
so for this reason, we have analyzed the documents, ordering the arts into four
kinds. 61

Worth marking here is the broad outlines of a genealogy. The account charts the progress of
medicine from high antiquity to the present, through the middle period of the Spring and
Autumn, to the recent past. Naturally, Liu Xiang was not the first to mention such figures; as
we saw above, earlier works contain isolated references to historical practitioners, such as
Yufu or Bian Que. In contrast to earlier works, which make only isolated references to
exemplary figures, the *Seven Essentials* brings different strands of legend and figures together
in a single narrative that traces a larger story about medicine.

The fact that Liu Xin’s genealogical account drew from a wide range of sources,
including historical chronicles, deserves further mention. Consider, for example, the
reference to Physician He. As I have argued elsewhere, this personage was entirely absent
from any surviving medical work before Liu Xin; the first references to him are found in
historical chronicles of the pre-imperial period that used the analogy between physician and

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minister to illustrate political and moral lessons.\textsuperscript{62} As such, it is unlikely that anyone other than the Lius would have connected the medical tradition with this figure or others that appear in chronicles. Not only did the Lius have privileged access to the imperial collection of ancient manuscripts and earlier classics of statecraft, but the broad exposure to the textual record gave them a perspective that was unavailable to even educated men such as Chunyu Yi.

And indeed, later medical authors, such as Zhang Zhongjing, show clear signs of having been influenced by the genealogical account found in the \textit{Seven Essentials}. The Liu’s genealogy, which separated time into three different stages of high antiquity, the middle ages, and the recent past, represented the prototype of the three genealogical accounts. As Table I reveals, Zhang Zhongjing, Wang Shuhe, and Huangfu Mi closely followed and elaborated on Liu’s earlier account. Huangfu Mi, in fact, even acknowledged explicitly his debt to the Lius: “I have followed the text of the \textit{Seven Essentials}, \textit{The Treatise on the Arts and Writings}, and the eighteen chapter-version of the \textit{Yellow Emperor’s Inner Classic}.”\textsuperscript{63} What catches the eye here are the references to Huangfu’s sources. The \textit{Seven Essentials}, of course, was the work that Liu Xin authored, and the \textit{Yellow Emperor’s Classic} the compendium that was catalogued by Liu Xiang and the imperial physician.

\[\text{[INSERT TABLE ONE ABOUT HERE.]}\]

\textbf{Conclusion and discussion}

\textsuperscript{62} See Miranda Brown, “Who Was He?”
\textsuperscript{63} Duan Yishan \textit{et al.}, \textit{Yigu wen}, “Jiayi jing xu,” 229.
In this paper, I have set out to answer a simple question – to wit, how do we explain the rise of a medical tradition in the second century of our era. By medical tradition, I am referring to a particular habit of tracing the origins and evolution of healing through time, and the sense of participating in an art or “way” that connected the men of the present with those of the past. As we have seen, while early medical authors were in the habit of writing about medical techniques for centuries, before the second century of our era, they did not articulate how such techniques provided continuity with an earlier time. As I have argued above, the catalyst for the formation of the medical tradition was largely external, the crucial event being two linked events, the larger classicist revival at the end of the first century BC and the reorganization of the imperial library. The former furnished medical thinkers such as Zhang Zhongjing and Huangfu Mi with not only the confidence but also the means with which to reconstruct the history of medicine from textual remnants. The latter contributed to the formation of a tradition in several ways. In collecting and cataloguing all existing medical texts, Liu Xiang and Liu Xin were responsible for creating the very category of medicine. In so doing, the Lius brought together disparate texts and techniques under the single rubric of 藥, a term that had previously referred to attendants. In addition, Liu Xiang and his team were responsible for creating the first medical genealogy, a genealogy that represented the prototype for all subsequent accounts of the history of medicine.

More generally, my findings reveal that the formation of a Chinese medical tradition was hardly inevitable. As we have seen, the self-conscious sense of a tradition did not follow developments in technology. On the contrary, medicine in China had acquired a high level of theoretical sophistication without healers ever feeling the need to articulate a shared sense of community or common history. And indeed, if we look more broadly at the history of medicine in China, healers – who represented a motley bunch ranging from court physicians
to private gentlemen to itinerant medics – we find few efforts to articulate any sense of shared identity before the Song dynasty.\textsuperscript{64} If anything, our investigation reveals that the making of scientific traditions owes much to external and contingent factors.

Our discussion brings us to the following issue: If the formation of medical traditions is hardly inevitable, when did Greco-Roman physicians begin to produce retrospective accounts of the art? To be sure, the Greco-Roman case does not provide an exact analogy to that found in China. In this sense, the Greeks appear to have had a lead on the Chinese, as the notion of a unified medical art emerged long before the end of the first century BC. Differences aside, there are signs of an analogous process in the classical Mediterranean, as the habit of looking backwards and reflecting on the history of the art appears to have emerged relatively late in the game. Indeed, we must wait until the Alexandrian period, the third century BC, for the first genealogical accounts. As Heinrich von Staden points out, the first history of medicine can be traced back to a work called “Against Common Opinions,” by Herophilus of Chalcedon, a physician best known for his dissection and vivisections.\textsuperscript{65} Such a tradition, which included authors such as Andreas, Bacchius of Tanagaram, and Heraclides of Erythae, came to influence the Roman thinker Celsus, with whom we began this essay.\textsuperscript{66} As with their Chinese counterparts, such Mediterranean authors produced genealogical accounts of the tradition. Herophilus, for example, traced the transmission of Hippocratic learning over time, while Celsus investigated


\textsuperscript{65} Von Staden, “Rupture and Continuity: Hellenistic Reflections on the History of Medicine,” in Philip J. Van Der Eijk, \textit{Ancient Histories of Medicine: Essays in Medical Doxography and Historiography in Classical Antiquity} (Leiden: E.J. Brill, 1999), 143-88; 145.

\textsuperscript{66} Von Staden, “Rupture and Continuity,” 144.
the rise and fall of doctrines and schools. While modern scholars question whether such accounts provide histories in the modern sense—von Staden, for instance, points to the selective nature of Celsus’ account—57 the very act of looking back, I would argue, reveals much about the importance that time played in the transformation of an art into a proper tradition.

Scholars of Greco-Roman history have yet to explain the timing of the emergence of a medical tradition. While such a question no doubt lies outside of the scope of this paper, I would like in closing to suggest how the Chinese case illuminates possible avenues of further exploration. Interestingly, the career of Herophilus coincided with the establishment of the Library in Alexandria around 300 BC. The Greek ruler, Ptolemy, much like Emperor Cheng, endeavored to acquire a copy of all known works of the time. Not coincidentally, scholars believe that the establishment of the Library was responsible for the formation of the Hippocratic corpus.68 It was precisely at this time that Herophilus, whose career was closely linked to the Alexandrian court, inaugurated the practice of looking back at the history of medicine.69 No doubt, much work remains to be done before we can establish that the habit of looking backwards in the classical Mediterranean owes as much to the efforts of royal bibliographers as it did in Han China.

67 Von Staden, “Celsius as a Historian?” In Van Der Eijk ed., Ancient Histories of Medicine, 251-94; 294.
68 See Nutton, Ancient Medicine, 130.
69 Von Staden, “Hellenistic Reflections on the History of Medicine,” 144-49.
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