Microhistory and Chinese Medical History: A Review*

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In comparison with the rich and colorful reality, history that we usually read is always dreadful and lack vitality. Perhaps this is partly because people generally prefer to record their rational findings and thoughts rather than the trivialities, emotions and experiences in their daily life.

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However, a more important reason probably lies in that history is always regarded as a component of science and the primary goal of which is to trace the track of human’s lives and represent the general (namely, homogenized) society and life experience through our ration. This kind of understanding of history is widely accepted by the public. However, since the 1970s and 80s, such history has evoked reflections and criticisms from historians for its lack of vivid lives. In this context, microhistory was born. Nonetheless, the emergence of microhistory was not isolated. Along with it, other frontier studies, such as new cultural history, history of everyday life and history of medicine, are blooming increasingly in the West and even around the globe. Microhistory has interactions and intersections with these studies, altogether they drive and pioneer the progress of international historiography in almost half a century. In regard to the relationship between microhistory, new cultural history and history of everyday life, there already have some discussions. Nevertheless, little attention has been paid to the connection between microhistory and history of medicine. In view of that, based on the historical writings of Chinese medical history, we shall explore the relation between microhistory and history of medicine, and reveal the significance and value of microhistory to our probe into the history of medicine in China.

1. What is Microhistory

In the early and middle twentieth century, the French Annales school

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had achieved remarkable success. It was and still is the most highlighted historical school. In particular, the historical conceptions of *longue durée* (long term) and *histoire totale* (total history) advocated by Fernand Braudel have not only dominated the historical writing in a period but also have profound influence. Though the Annales historiography have made fruitful achievements, it have inherent defects, such as putting too much weight on the quantitative statistics and other social scientific methods, exaggerating partially the decisive role of the long-term historical structure in the course of history, and its favor of the reconstruction of an “immobile history” while overlooking the emergencies in history, which had widely incurred doubts and criticisms in the Western academy in the 1970s and the 80s. People started to rethink how a “history without people and incidents” could be the real history that happened before (Iggers, 2005: 51-77, 101-102; Chen, 2002: 21; Zhou, 2012: 80-81; Magnússon & Szijártó, 2013: 1-11). With this reflection, a group of Italian historians, for instance, Carlo Ginzburg, Giovanni Levi, Carlo Poni, Edoardo Grendi, Marco Ferrari etc., turned to the subtle individuals and incidents, they adopted the word *microstoria* (microhistory) to define the approach that is “essentially based on the reduction of observation, on a microscopic analysis and an intensive study of the documentary material” (Levi, 2001: 99; see also Zhou, 2012: 81). After the 1980s, the influence of microhistory expanded increasingly. Soon it spread beyond Italy and deeply affected the both sides of the Atlantic. The *histoire de la vie quotidienne* (history of everyday life) and *histoire de la mentalité* (history of mentality) of French, the German and Austrian *Alltagsgeschichte* (history of everyday life), the British *case history* and the American *microhistory* are all closely related to the Italian *microstoria*. “To some degree, microhistory is the most important feature of
the contemporary Italian historiography. Today microhistory has been an international trend of historiography.” (Zhou, 2012: 81; see also Magnússon & Szijártó, 2013: 13-61)

Then what is microhistory? According to the latest comprehensive view of Sigurður Gylfi Magnússon, microhistory is the intensive historical investigation, conducted by historians who hold a microscope and not a telescope in their hands, of a relatively well defined smaller object, most often a single event, or a village community, a group of families, even an individual person (Magnússon & Szijártó, 2013: 4). In our point of view, microhistory at least has several basic characteristics as follows:

First and foremost, the subject of microhistorical examination is relatively small and concrete in most cases. The focal point of microhistory is not merely on specific small individual or event of the past, but also on the larger picture. It seeks to grasp and comprehend the culture and features of a place and time through the particular case. Nonetheless, it does not plan to explore the abstract individual, group or place, nor does it mean to represent the generalized and homogenized society and thoughts. In other words, though it does not reject the collective and general study of history, it would by no means sacrifice the diversity and vitality of lives of the past. Instead, it maintains that the general investigation could only be achieved by the in-depth analysis and interpretation that places the abstract individual in the specific historical event and context.

In the second place, in terms of the research approach, microhistory always chooses a particular individual that could be identified as its...
subject, however, it seldom pursues the representativeness of the subject and even believes that “there is no typical case, but the general relevant question there may be” (Levi, 2012: 128). Therefore, microhistorians prefer exceptional individuals and phenomena rather than those typical ones. Notwithstanding, this is not simply driven by their curiosity. Besides, they do not intend to restrict their discussion to the particular case. Instead, they aim to search for the “normal exceptions”. They suggest that on one hand these individuals and phenomena are deviant, however, on the other hand, they are normal. “Normal Exceptions” could only be uncovered by comprehending the unique individuals and phenomena in their specific historical context and illuminating the implications in the details of the historical sources intensively and minutely by means of what Ginzburg calls the evidential or conjectural paradigm (see Ginzburg, 1992: 96-125). The full meaning of evidential paradigm “includes the connotations of presumption, indication, and intuition” (Muir, 1991: 27). Ginzburg suggests that “unknown objects can be identified through single, seemingly insignificant signs, rather than through the application of laws derived from repeatable and quantifiable observations” (Luria, 1986: 86). In this way, microhistory goes beyond the pattern that previous historical studies usually fall into, which is applying the rigid causal analysis as well as the abstract, homogenous society and thoughts to represent the history. However, microhistorians do not question the existence of the historical reality, nor do they “reject the empirical social sciences in toto”. Instead, they emphasize “the methodological need of testing their constructs against existing reality on a small scale”. Thus, microhistory is “a rediscovery of culture and the individuality of persons and small groups as agents of historical change” (Iggers, 2005: 109-110, 112).
Furthermore, microhistorians prefer “narrative” in their historical writing because they reject the grand quantitative socio-scientific methods of the past and has abandoned the simplified causal analysis at the same time. However, they do not believe “narrative” could “reconstruct” the past as advocates of “narrative history” in the 19th century insisted. By contrast, they suggest that the representation of history could not and should not be separated from the observation and narrative of the event. Narrative, as they put it, is the best method. Its primary significance is not to reveal an “actual” history better, but to show its readers the tension between the research assumptions and the historical documents, as well as to reveal the standpoint, the inspiration and even the imagination of the investigator.

Last but not the least, the rise of microhistory, without doubt, has expanded the historical sources that the public and private archives, the folk literature and even the oral surveys are all included. Nonetheless, in terms of the utilization of historical materials, what really distinguishes microhistory from other investigations is its focus on the details and its intensive and minute interpretation of the limited records. With the awareness of being an outlier, microhistorian put effort to get immersed in the historical context as much as possible to explore both the literal and the connotative meaning of the historical texts. More specifically, it requires discovering various meaningful clues and details adeptly and decoding those clues and details to trace the “normal” and the larger whole.

In sum, by transferring the research subject, expanding the academic horizon and updating the ideas and methods, microhistory endeavors to remedy the defects of previous social scientific studies and to bring the individual’s role, the concrete life as well as the diversity and complexity of history to the historical writing. It goes without saying that this approach
is not omnipotent and problem-free. However, its value and significance should not be denied for it not only has profoundly affected the progress of historiography in recent decades, but also would guide the further historical survey.

2. Microhistory and the History of Medicine

History of medicine is an old discipline that has a long history whether in China or in the worldwide. Nonetheless, in a rather long decade, it was dominated by medical practitioners and researchers who studied it from the perspective of biography or history of science and technology. From 1920s and 30s on, researches on history of medicine from the social and cultural perspectives gradually appeared with more and more scholars without formal medical training joining in. Especially since the 1960s and the 70s, as the medical-social problems became prominent day by day, and along with the continuous development of medical sociology and anthropology as well as the progressive rise of post-modern history and new cultural history, the history of medicine began to gain increasing attention from historians, which gradually became a subfield of the mainstream social or cultural history in the West3).

Microhistory came into being a slightly later than the social or cultural history of medicine. The two studies were born separately and did not have intersections. At first, early researches on medical history hardly embodied the methods of microhistory, while those classic microhistories, for instance, the Cheese and the Worms by Carlo Ginzburg, Inheriting

Power: The Story of an Exorcist by Levi, Montaillou: Cathars and Catholics in a French Village by Emmanuel Le Roy Ladurie, the Return of Martin Guerre by Natalie Zemon Davis, seldom involved the issues of disease and medicine. However, as far as we can see, they actually could be combined together. Microhistory and medical history are categorized according to different criteria. For microhistory, it could be seen as a historical approach, the primary figure of which is the concreteness and relative minuteness of its subject, in another word, it is characterized by the size of its subject. By contrast, medical history is a research field which aims at exploring disease, medicine and other related issues in history, namely, it refers to the topic of the research. Therefore, the microhistorical approach could be used to survey the medical history and give birth to an intersection field.

More importantly, microhistory and medical history could be linked because they share some common research interests. As mentioned above, microhistorians take pains to narrow the range of their research and put concrete individuals in the center of their study in order to reproduce the concrete and vivid life beings and their daily lives in history rather than to represent history via the abstract numbers, concepts, casual analyses and laws, In other words, microhistory aims at bring history to life, which is exactly the goal of medical history. As issues of disease and medicine refer directly to life, it is natural for scholars to associate medical history with life and even plainly take it as the “history of life” 4). And we believe that, as a study of disease, medicine and health that are directly related to life, history of medicine is supposed to concern life and represent the history of life

4) In 1990s, Taiwanese historians called the history of disease and medicine as the “history of lives of groups”. A recent work by Li Jianmin (2005) describes the figure of medical history as the "history of life."
beings. Undoubtedly, the “history of life” should be advocated. The core of “history of life” is to introduce the awareness of life to the historical studies, place health issues at its foci and bring history back to the lived world. What we investigate are the living lives who have reason and emotion, which calls for that apart from keeping an eye on material, institution, environment and other external affairs, we have to pay closer attention to the life experience, the cognition and expression of individuals and groups at the same time. Hence, as we shall see, the history of medicine echoes microhistory in bringing life to history. Furthermore, for medical history, the introduction of the ideas and methods of microhistory is also an effective way to realize the interests and pursuits of the “history of life”.

At the practical level, from the 1980s onwards, historical surveys on medicine from the perspective of microhistory are increasing and gradually develop into a remarkable trend. As early as 1990, in a review on the western historical writings of medicine in the 1980s, Judith W. Leavitt, a renowned American historian of medicine, had already acutely realized the value of microhistory and had spoken highly of relevant researches. Though she did not use the term of microhistory in her essay, she still, from the perspective of extending the base of investigation from elite physicians to include all healers and patients, introduced and put high value on several works that are in fact microhistories. She suggested that, Fasting Girls: The Emergence of Anorexia Nervosa as a Modern Disease by Joan Jacobs Brumberg (1988) was an ideal medical history that demonstrated the strategy of limiting the focus while broadening the analytical approach, as she put it, “the insight we gain through Brumberg’s sensitive gender analysis of the effects of culture on young women, the influence of their family situations on their bodies, and their physicians’ views and treatment
of them provides a standard we can apply in the study of other diseases” (Leavitt: 1990: 1481-1482). At the end of her review, Leavitt particularly introduced Laurel Thalcher Ulrich’s book, *A Midwife’s Tale: The Life of Martha Ballard, Based on Her Diary, 1785-1812* (1990), which could be accounted as a typical microhistory. Based on a dairy of a midwife, this work compares the dairy with large amounts of other sources and analyzes it intensively in the context of a specific community. Her approach strongly indicates that we can get access to the healing as well as its theory and practice from a singly text. Leavitt put forward that “Ulrich’s book reflects the trends in recent historiography identified in this review essay. It includes and values all groups of practitioners… the book points the way for historians of the coming decades, in its intricate weaving of textual narrative and contextual analysis.” (Leavitt: 1990: 1483-1484) Thereafter, similar works are increasing continuously. For instance, on the basis of 1816 statements of female patients recorded by a Germany physician Johannes Pelargiusi Storch from 1721 to 1740, Germany historian Barbara Duden delicately explores the experiences, feelings and understandings of ordinary Germany women on their own body at that time (Duden, 1991). As another example, with the narrative and careful analysis of the widespread story of “typhoid Mary”, Leavitt shows, successfully and concretely, the challenges of individual rights and social justice on the bacterial discourse of modern science and on the public health system as well as the conflicts and accommodation between them in America in the beginning of the twentieth century (Leavitt: 1996). In addition, with the conscious ideas of microhistory, the renowned American microhistorian Guido Ruggiero examines the strange death of an old lady from Venice, Italy, called Margarita Marcellini, he contextually and delicately reveals the
complicated relationship between disease, religion, popular culture and everyday life as well as represents the cultural interpretation of disease and body in Italy in the early seventeenth century (Ruggiero, 2001: 1141-1158). Relevant examples are rich that the latest comprehensive introductory work on microhistory, *What is Microhistory: Theory and Practice*, even uses a chapter to discuss health, disease, death and other issues in the everyday life of “little people” in Iceland in the nineteenth century, under the title of “the story of physician: life and death” in the beginning of the second part of the book which aims to demonstrate the figures and significance of microhistory through concrete cases (Magnússon & Szijártó, 2013: 79-104). As we can see, the microhistorical inquiry into history of medicine is of great importance and novelty, in regard to both medical history and microhistory.

3. Microhistorical Studies in Chinese Medical History

As the microhistory is rising and its influence is expanding, it has more and more intersections with studies on history of China. On one hand, since this century, in China, there have emerged some works that aims to introduce the theories and practices of microhistory\(^5\), while at the same time, some important microhistorical works of the West have been translated and published\(^6\). Especially American Chinese historian Wang Di has introduced the Western microhistories and further illuminated what inspirations it can offer to our probe into Chinese history (Wang,

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D., 2009: 126-140). On the other hand, microhistorical investigations also have appeared in the field of Chinese history. Though most of these works are written by scholars overseas, many of them have been translated into Chinese and published in China successively in recent years7).

Apart from The Man Awakened from Dreams by Henrietta Harrison, which briefly discusses health and disease in its third chapter (Harrison, 2005: 59, 65-68, 76-77), most of the representative microscopic surveys on history of China do not involve the issues of medicine and health (see footnote 9). In China, microhisctorical researches especially the empirical studies are, overall, extremely weak. At first glance, there is no microscopic investigation on Chinese medical history and there is no need to review. However, with a careful examination on the researches of Chinese medical history in recent twenty or thirty years, we would find out that as the emerging and cutting-edge study, Chinese medical history has pioneered the introduction and practice of the international newly emergent ideas and methods, such as the new cultural history, history of everyday life, material cultural history and global history, in the field of Chinese history8).

Though, at present, there is no one in the field of Chinese medical history has ever explicitly advocated the microhistory, its interests, ideas, and methods have already been practiced by some scholars. We shall start with Yu Xinzhong’s research.

Yu’s study on Li Bing, a renowned physician from Suzhou in the Qing Dynasty, could be accounted as a relatively typical microhistory, though

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7) For example, Spence, 2005; Wang, D., 2010; Harrison, 2013; Rowe, 2014.
8) This is perfectly reflected in the works of Taiwanese historian Jiang Zhushan (2012; 2015). It could also be demonstrated by the themes of two academic conferences on history of medicine that Yu Xinzhong organized in 2006 and 2012, on the topics and contents of the two conferences see the followings: Wang T., 2006: 20-22; Zhang R., 2013: 67-69.
he does not mention microhistory directly. In this paper, he examines delicately the medical career and the afterlife historical memory of Li in order to explore the medical service condition and the mechanism of the acquisition and spread of medical reputation at that time. With a meticulous interpretation of the limited historical records, the author tries to comprehend the medical practice and the mentality of Li in the specific historical context and social network. He finds out something against the popular view, that is Li only gained reputation after his death for some occasional causes, primarily his association with a renowned scholar Jiao Xun, to show gratitude who compiled Li’s book, which was luckily collected and published by Qiu Qingyuan, a famed modern physician. Whereas, the reason why Li could not recognized by his contemporaries, in the author’s eyes, should be attributed to his personality, that is, Li first and foremost, was an upright, responsible and bold person, at the same time, he was a proud, aloof and inflexible square-toes without sophistication and was not good at flattery (Yu, X., 2011: 142-152).

If we search carefully we would discover that researches that could be accounted as microhistories are not rare, though they do not style themselves as microhistories. This could be best demonstrated by the researches of two Taiwanese historians, Chang Che-Chia and Li Shang-jen, For instance, two papers of Chang Che-Chia, “Dahuang misi: qingdai zhicai xiyang jinyin dahuang de celue siwei yu wehua yihan” (Myth of Rhubarb: The Strategic Rationale and Cultural Implications of China’s Prohibitions on the Export of Rhubarb to Britain and Russia in the Qing Period) and “Wei longti bamai: mingyi Li Jun yu Guangxudi” (Taking Emperor’s Pulse: Renowned Physician Li Jun and Emperor Guangxu), are both excellent microhistorical studies. “Dahuang misi” begins with an intriguing story of that in the 19th
year of the reign of Daoguang Emperor, in order to protest against the opium trade manipulated by the British Empire, the Qing government threatened to lay an embargo on the rhubarb exports. Then how could Chinese at that time believe rhubarb has such astonishing power which seems, in today’s eyes, counterintuitive? Keeping this question in mind, on the basis of ample historical records from various sources and with the help of a bit of imagination, Chang painstakingly finds every piece of the puzzle and puts them together into a whole picture just as what a detective does with a mysterious case. At the end, he delicately and convincingly comes into a conclusion that, behind the myth of rhubarb, there lay a worldview constituted by knowledge of four interrelated elements: drug, food, body and region (Chang, 2005a: 43-100). This study almost matches every basic characteristics of microhistory, such as the intensive study on a reduced scale, the ambition to tell a larger story, the narrative style, the preference to the abnormal, thus it could be served as a model of the Chinese medical-microhistory. While in his another essay, “Wei longti bamai”, based on the medical record of Li Jun, Chonglin yian (Medical Record of Chongling), Chang traces in great detail the treatment experience of Li for Emperor Guangxu, in particular, he puts great effort to explore the doctor-patient relationship reflected in this case. Chang proposes that, in the complex political context of the palace, it was basically due to the lack of valid communication skills of Li, which should be understood in the milieu of Li’s unique personal experience and distinctive medical opinions, that he failed to gain trust from Guangxu at last. Though abnormal as this case was, the author still believes it can shed a light on the reality of the general physician-patient relationship in the palace, for instance, as the author puts it, even powerful people like Emperor Guangxu sometimes would
yield to the medical authority for the sake of their own health (Chang,
2005b: 211-235). This special preference for extraordinary things can also
be observed from Li Shang-jen’s essay “Jiankang de daode jingji” (Moral
Economy and Health) with a discernible influence from microhistory. As
a matter of fact, Dudgeon did not make any remarkable achievements
in medicine, then what is the significance of study on such a person? Li
clearly expresses his inspiration from some microhistorical researches that
sometimes the exceptional individuals and phenomena in the history that
seem unimportant, are useful clues for historical studies, and by intensive
analysis and investigation we could get some valuable historical insights
which could not be achieved from the macro-analysis or the studies
on important people or events. In view of this, Li surveys Dudgeon’s
reviews on hygiene by placing them in his personal social background
and ideological context. Li argues that, Dudgeon’s eccentric medical ideas
actually reveal the interplay and tension between the metropolitan medical
theories and the overseas experiences of British doctors on the periphery
of the Empire (Li, S., 2005: 467-509). Moreover, in his latest work Diguo de
yishi: Wan Bade yu yingguo redai yixue de chuangjian (A Doctor to Empire:
Patrick Manson and the Founding of British Tropical Medicine), Li focuses
on a famed physician Patrick Manson, who was popularly entitled as the
“Father of Tropical Medicine”. Nevertheless, his ambition is not to write a
biography of a “great doctor”, but to put forward some innovative views
on the relationship between the British Medicine and bioscience, as well as
on the expansion of British Empire, the construction of medical knowledge
and the course of the introduction of Western medicine into China, via
the detailed survey of Manson’s medical work in the Great Britain and
its colonies. In this monograph, Li not only uses a wide variety of source
materials, including the letters, diaries and manuscripts of Manson, but also frequently starts from small detailed issues, which distinctly displays the characteristics of microhistory (Li, S., 2012). In addition, many other researches that focus on a single doctor or other related people or group, also show some figures of microhistory, though they are not that close to microhistory as the researches mentioned above.9)

As the subject of microhistory is frequently the individual from the past who has a name and a personality, it is natural for microhistorians to pay more attention to the collection and utilization of the private records, such as diaries and letters, as Li does in his researches. In turn, studies that mainly rely on these records frequently tend to display the characteristics and aims of microhistory. At present, such investigations that demonstrate the figures of microhistory are increasing in the field of history of medicine in China. For instance, based on the diary of Qi Biaojia and through the case of Qi’s family, Jiang Zhushan attempt to survey microscopically the medical activities and doctor-patient relationship of the gentry families in the cities of Jiangnan area from the view of the patient (Jiang, 2006: 181-212). The doctoral dissertation of Zhang Rui, “Jibing, zhiliao yu jitongxushi: Wanqing riji zhong de yiliaowenhuashi” (Disease, Medicine and Illness Narratives: A Medical Cultural History Based on Diaries in the Late Qing Period), restates the need of studying medical history from the perspective of the patient and emphasizes the value of the diary in historical studies of medicine. Zhang notes that, with diaries, we can see clearly “how medical activities are deployed in the concrete lives” from the point of view of the patient.

In addition, the paper also pays close attention to the illness narrative of

9) For related studies see the followings: Chu, 1993: 165-201; Pi, 2008; Lei, 2010: 199-284; Liu & Kuo, 2012: 141-205; Lee, J., 2005: 95-151; Wang, M., 2012; Minden, 1994, etc.
the patient. With detailed and incisive analysis of illness narratives, the author successfully displays the inner world of the patients which coincides with the approach of microhistory. Undoubtedly, the stress on the illness narrative opens up a new way for microhistorical probe (Zhang, R., 2014). A number of similar researches could be found, no matter how different the capacities and levels of microscopic analysis of the authors, these researches more or less share some figures with microhistory.\(^\text{10)}\)

Apart from the studies of an individual person or a medical group, some medical historical surveys on a single object or event, a particular institution, a specific research or concept, also display the basic characteristic of microhistory, that is, the intensive study on a small scale. For example, Lei Sean Hsiang-lin’s research on changshan, a former traditional Chinese drug, examines the process of the “discovery” of changshan as a new anti-malarial drug. Based on that, he reviews the program of “the scientific research on Chinese domestic drugs” and comes to a conclusion that this program aims at re-networking Chinese drugs and excluding traditional doctors from the new network (Lei, 2008: 339-383). Chang Ning Jennifer focuses on aspirin, the most important and popular drug in the twentieth century. She traces at length the history of Bayer, a Germany chemical and pharmaceutical company, the born of aspirin and its introduction into China, and especially the endless trade mark disputes over aspirin between Chinese pharmaceutical industry and Bayer. By exploring the history of aspirin in China, the author attempts to search answers for a series of bigger questions, such as the role and impact of the state, the relationship between the medical industry and the pharmaceutical industry, the self-

\(^{10)}\) For example, Fan, 2008: 731-789; Wang, W., 2013: 65-100; Zhang, X., 2012: 12-18; and etc.
position of the new medicine association, the reason of the assimilation of
today’s global drugs and etc (Chang, N., 2008: 97-155). In addition, “The
Pathological Body: Lam Qua’s Medical Portraiture” by Larissa N. Heinrich
makes use of Lam Qua’s medical portraiture for the patients of the medical
missionary Peter Parker from 1836 to 1855. Through a detail analysis of
the backgrounds, techniques and contents of these paintings, Heinrich
examines how the messages of pathology and Chinese identity spread and
evolved in the textual and visual culture in the early nineteenth century11).

As a research on a certain group of people, Sihn Kyu-hwan’s latest work,
Nightsoil Workers in Beijing: The Everyday Life and Reform of the Chinese
Workers (2014) provides us with an inspired example of microhistory from
the perspective of history of everyday life. This book begins with the oral
account of an investigator, who was assigned by the Beijing municipality
in 1950 to take a special inquiry into some members of the nightmen’s
group of Beijing. Focusing on the daily life of the nightsoil workers, Sihn
explores how these workers and other city residents accepted the hygienic
reform under the power of the state, and based on which, he further
examines the close relationship between the hygienic administration and
the spatial structure of the city of Beijing at that time. Unlike many previous
researches which see workers or other ordinary people as passive objects
of the political rules, this work takes everyday life as a lived space which
is not always ruled by the political power. In light of the delicate narrative
style of the work, a latest review calls it “a ‘novel’ reconstructed on the
academic research of the author” (Kim, 2014: 227-232). Starting from

11) Heinrich, 2007: 185-216. Moreover, there are some other similar researches that
demonstrate the figure of microhistory, for example, Chang, N., 2011: 1-40; Zhang, Z.,
2007: 89-136; Hsu, 2005: 113-174; Rogaski, 2010: 132-158; Lee, 2011: 143-172; and etc,
the historical evolution of the concepts of hygiene, his another research, comprehensively and intensively surveys the health administrative reforms of Beiping (now Beijing) municipality and its relationship with the state medicine in the 1930s from three main aspects, namely, the modern administration of the birth and death as well as the hygiene education, the municipal control over contagious diseases and space, the environment of city and the environmental reforms (Sihn, 2008). Its salient characteristic is offering an in-depth and delicate survey on the genuine and concrete situation of the application of sanitary administration in a rather limited time and space, which corresponds with the figures of microhistory.

In addition, some other works that could not be categorized as microhistory, strictly speaking, may demonstrate similar objectives and interests with microhistory in some aspects. For example, Yang Nianqu’s monograph, Zaizao bingren: Zhongxiyi chongtu xia de kongjian zhengzhi, 1832-1985 (Remaking “Patient” – The Politics of Space under the Conflicts between Chinese Medicine and Western Medicine, 1832-1985) attempts to find answers for some macroscopic questions in a long time span, notwithstanding if we examine the concrete contents of each chapter, we can discover its similarities with microhistory. On the one hand, each chapter generally centers on a relative small topic, and the related issues are, by and large, introduced by interesting case stories of concrete individuals. On the other hand, Yang surely is a brilliant story teller and what presented in his writing are the vivid narratives rather than the traditional stiff structural analyses. Beyond that, he takes advantage of many subtle personal confessions and reports in the archives. These are all in accordance with the methods of microhistory (Yang, 2006).

Moreover, some oral historical studies deserve special attention, for
instance, Yu Chien-ming’s compilation and research on the oral materials of Veterans General Hospital in Taipei and Taichung (Yu, C., 2011; 2012; 2014). Though these researches put emphasis on the collection and compilation of the historical sources, the historical materials they produce without doubt would open up more possibilities for the microhistorical studies.

From analysis above, we can deduce that there are several figures of microhistorical studies on medicine in China as follows:

First of all, the microhistorical approach has been practiced to a certain extent in the historical writings on medicine in China, however, few researches have been carried out clearly under the heading of microhistory. As shown above, though in the field of Chinese medical history, researches that display the characteristics of microhistory are not rare and already involve a rather wide range of issues, only few researchers, such as Sihn Kyu-hwan and Li Shang-jen, notice microhistory occasionally in their works, yet none of these scholars identify their researches as the specialized microhistorical studies. As a matter of fact, most of these researches are practiced from the perspectives of the new cultural history, history of everyday life or the case history, which nonetheless happen to coincide with the ideas and methods of microhistory and somehow turn out to show more or less figures of microhistory.

In the second place, microhistories in the field of medical history at present are the offspring of the unceasing pursuit and practice of the ideas and methods of “new history” in today’s historical scholarship. No matter how diverse and complicated of nowaday trends in historiography, they share two distinct figures. One is that historian are no longer fascinated about the grand narrative especially the grand and empty analysis, instead,
they often choose small and concrete issues as the subjects of their study which makes case studies quite common. The second is that in historical studies, the impact and influence of “post-modernism” are growing. The gradual emergences of microhistory, history of everyday life, new cultural history, global history and material cultural history since 1970s and 80s could be seen as the products of the impact and influence of “post-modernism”. Even though the emphases of these historical currents are different, they all focus on the concrete, not abstract, individual lives while reflecting on the socio-scientific approaches and seeking to deconstruct “modernity”. Because of the combination of these two figures, some researches which are not carried out consciously in the horizon of microhistory, are in fact practicing the ideas and methods of microhistory. As the frontier field of “new historiography” in China, it is inevitable for historical studies on medicine to show such phenomenon.

Last but not the least, in the field of Chinese medical history, microhistory is an undercurrent that is about to emerge. As mentioned above, microhistory has not yet become a research category with a clear label in the historical writings of medicine in China, thus it is self-evident to call it an “undercurrent”. Nevertheless, there are several reasons that we take it as an emerging trend. 1. The charm and influence of microhistory is expanding that it has become an important component in the international scholarship of medical history. 2. Microhistory and history of medicine share some ideas and interests, such as focusing on the concrete lives, bringing life to history and bringing history back to the lived world. 3. In the field of Chinese medical history, there have appeared some works that could be accounted as microhistories, while quite a part of the researchers are mid-aged or youth scholars who play important roles in today’s scholarship of
medical history or even in the field of Chinese history. As a burgeoning frontier study, history of medicine has lead the pursuit of new intellectual currents, whether in theory or in practice.

In sum, concentrating on an individual person, a single event, a particular drug or a specific concept, these studies conduct intensive historical investigation on a small scale. Strictly speaking, many of these researches could not be regarded as real microhistories. They do not practice microhistory consciously and they have a long way to go to improve the delicacy of the analysis, to reinforce the narrative style and to grasp the social context of the individual or the event (the link between micro and macro levels). However, these studies have indicated the invisible influence of microhistory and have paved a way for the future microhistorical investigations on medicine.

4. Conclusion: Prospects and Solutions

From the discussion above, we can tell that even though there is no work on Chinese medical history label itself as microhistory, some of them are in fact excellent microhistories. Furthermore, this kind of historical writing is increasing. Microhistory has become a promising and vital undercurrent in the field of Chinese medical history and we believe that in the near future it would be a remarkable trend. On account of that, in order to promote microhistory in today’s inquiry into Chinese medical history, we should target on several issues as follows:

First and foremost, we should, promptly and strongly, advocate and promote the self-conscious microhistorical investigation to make it a dominant trend rather than an undercurrent.
Secondly, the update of the ideas and methods of microhistory is of great importance. In terms of the research ideas, it is essential to pay full attention to two points. On the one hand, we should realize that microhistorians would never content themselves with solely examining the tiny concrete object itself. Though the subject of microhistory is concrete and subtle, microhistory is, by no means, in favor of the fragmentation of history. What microhistorians really want is to uncover the “common knowledge” of a particular time and place by capturing the “normal exceptions” in the case. On the other hand, we should keep it in mind that case study should not be equal to microhistory. The fundamental goal of medical microhistory is to bring concrete life to history and bring history back to the lived world while focusing on the health. Those case studies on an individual doctor, a certain medical text or a specific epidemic should not be accounted as microhistories if they remain adopt the analytical methods of the traditional social history, rather than microhistorical ideas, while focusing on the general and abstract thoughts and affairs that are external to life. In regard to the research approach, we should change our traditional superficial and rough way of the utilization of historical sources. Not only should we read key historical materials in great detail and in depth, we should also shed a light on the materials in their historical context and in the concrete historical time and place through sympathetic understanding and reasoning. Not only should we figure out the literal meaning of the text, but also should we pay attention to the background and the process of the making of the text, the standpoint of the writer and the messages hidden in the words. What’s more, we should always link the events and objects of the past to the concrete lives. Only in this way, can we make the concrete case study a microhistory and endow life and humanity to our historical writing.
Obviously, it is the right time to summarize and advocate the medical microhistory. Its rise would not only display the value and significance of microhistory in a better way, but also would help medical history to practice its core idea of history of life. As we can see, it would definitely propel the healthy and in-depth progress of our inquiry into the history of medicine in China.

**Keywords:** microhistory, medical history, humanistic historiography, frontier historical studies in China

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Microhistory and Chinese Medical History: A Review

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With a reflection on the grand quantitative analysis in previous historical investigations, microhistory came into being in Italy in the 1960s and the 70s. Microhistory is, in principle, the intensive historical investigation of a relatively well defined smaller object. Notwithstanding, it still has the ambition to draw a larger picture of the history. Microhistory is also characterized by its preference to the exceptional individuals or phenomena, its “narrative” style and the delicate way it deals with historical sources. Essentially, microhistory endeavors to bring the individual’s role, the concrete life as well as the diversity and complexity of history to the historical writing.

At first, microhistory did not have intersection with the medical history. Nevertheless, the history of medicine echoes microhistory in bringing the concrete and vivid life beings to history. Mainly due to this similarity, historical surveys on medicine from the perspective of microhistory are

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increasing and gradually develop into a remarkable trend in the international historical academy from the 1980s onwards.

As the microhistory is rising and its influence is expanding, the microhistorical approach has been practiced to a certain extent in the historical writings on medicine in China. Concentrating on an individual person, a single event, a particular drug or a specific concept, there already have some studies conduct intensive historical investigation on a small scale. A small part of these researches, for example, those of Chang Che-Chia, Li Shang-jen and etc. could be regarded as perfect examples of microhistory. However, no relevant research is carried out explicitly under the heading of microhistory, instead, they are the offspring of the “new history”. Besides, most of these researches could not be regarded as real microhistories, strictly speaking. They do not practice microhistory consciously and they have a long way to go to improve the delicacy of the analysis, to reinforce the narrative style and to grasp the social context of the individual or the event (the link between micro and macro levels). Nevertheless, these studies anyway indicate the invisible influence of microhistory and have paved a way for the future microhistorical investigations on medicine. We believe that microhistory is an undercurrent about to emerge in the field of Chinese medical history. It is the right time to advocate and promote the self-conscious microhistorical investigation, promptly and strongly, while updating the ideas and methods of it to make it a dominant trend rather than an undercurrent in the studies of Chinese medical history. Its rise would not only display the value and significance of microhistory in a better way, but also would help medical history to realize its core idea of history of life, therefore to propel our inquiry into Chinese medical history.

**Keywords:** microhistory, medical history, humanistic historiography, frontier historical studies in China