

C. Michele Thompson, *Vietnamese Traditional Medicine: A Social History*

Singapore: National University of Singapore Press, 2015. 248 pages. Paperback, \$34.00. ISBN: 978-9971-69-835-5 (paperback).

As the title suggests, this short book is about the social history of traditional Vietnamese medicine. However, Thompson's account focuses mainly on the introduction of the smallpox vaccine during the early 1820s and subsequent events. Circling around this medical event, the book asks certain questions concerning the Vietnamese and Chinese medical responses to smallpox for the purpose of understanding Vietnamese traditional medicine's relationship to Chinese and European medicine. The study also focuses on the politics of scripts of Vietnamese medical texts. Her study is based on the analysis of Vietnamese medical scripts written in both *Nôm* and later *Quốc ngữ* scripts, as well as Chinese scriptural sources.

Thompson tells us that although Chinese medicine influenced Vietnamese physicians for more than a thousand years, the latter were not always ready to adopt Chinese therapeutic techniques or etiological theories. Instead, Vietnamese physicians developed their medical tradition in opposition to the Chinese tradition. The Vietnamese called Chinese medicine "Northern Medicine" and their own "Southern Medicine." The analytical method Thompson uses to understand the relationship between Chinese and Vietnamese medical traditions is to first isolate the two types of medicine and then to examine the elements that the traditions have contributed to each other at their points of convergence.

Thompson uses smallpox treatment as her case example. She notes that both Vietnamese and Chinese medical writers observed the same disease yet their explanations differed, and this discrepancy is a starting point in understanding the relationship between the two traditions. The treatment the Chinese physicians gave for smallpox was variolation. Variolation did not entail incising the skin but insuflation. In this treatment, a lymph or dried powder scab from the pocks of a patient who had survived a mild case of smallpox was placed in the nasal passage of the person being variolated. The aim was for the second patient to develop a mild case of smallpox from which they could develop immunity to the disease. The Vietnamese had their own treatment for dealing with smallpox based on similar principles. One practice entailed inviting a child, who had not yet contracted smallpox, to sleep in the bedding of a child who had recently survived a mild case of the disease. Although the underlying logic for this

treatment was similar to Chinese variolation, the Northern physicians defined these practices as traditional folk medicine. Thompson uses this fact to assert that medical procedures suffer being denigrated as folk medicine by the medical polity if they are not written in a literate format and approved by medical practitioners.

In the early nineteenth century, the newly developed European treatment for smallpox was vaccination in which a bacillus from an infected cow rather than another human being was injected into the body of the patient by breaching the skin. Comparatively speaking, this procedure was at the time less hygienic than the Chinese variolation method.

In 1821, Emperor Ming Mang sent four physicians, Nguyen Phuc Auh, Nguyen Phuc Dam, Jean Marie Despiau, and Phillipe Vannier to Macau to bring back the smallpox vaccine. From the start of the book, Thompson's account focuses on this event and its aftermath in detail. The vaccine was transported from Macau via two children who served as live carriers. Despiau then vaccinated the Emperor's children.

What Thompson finds unusual is that the Vietnamese were eagerly willing to adopt the European method even as they would have been reluctant to accept the medical procedures that made incisions in the skin. At the same time, they rejected the Chinese method of variolation, which was closer to their own traditional procedures and did not entail skin incisions. Thompson sees in this discrepancy an opening to understanding the approach of traditional Vietnamese medicine to disease. She argues that the evidence suggests that what made the Vietnamese physicians open to European vaccination was the explanation they received about how it worked. She suggests that when the Vietnamese physicians read the Chinese texts about variolation, they encountered factors which Carol Laderman called "dissonance." The Vietnamese physicians rejected the Chinese variolation method because they did not accept the etiology of the disease on which the method was based. The Chinese etiology held to the fetal poison theory of smallpox, which assumed the cause of the disease was obtained at birth and therefore the infection was internal to the body. The Chinese medical explanation assumed that variolation brought out the causative agent of the disease. On the other hand, Vietnamese physicians considered diseases to be caused by the intrusion of external forces as well as other environmental forces such as the weather and differing temperature. The European etiology was more congruent with the Vietnamese ideas, as it also reckoned the cause of the disease to be external to the patient. It would seem that in the end the Vietnamese developed a treatment that combined both the Chinese and the European method. The Vietnamese variolater placed the dry inoculum (Chinese method) in a small incision cut in the upper arm (European method).

Chapter 4 explores the types of Vietnamese medicine according to the script used to write about them. It also discusses types of medicines in relation to the social hierarchy of Vietnamese physicians existing during the nineteenth to twentieth century. Another theme is the shift of scripts used to write about Vietnamese medicine. Although *Nôm* (Southern Script) was and still is used to write about traditional medicine, the script of modern medicine became the Romanized *Quốc ngữ*. Thompson's account also focuses on the politics behind the shift from one script to the other and its effects on traditional Vietnamese medicine.

Thompson's argument for the etiological congruency between the European and Vietnamese theories of smallpox causation and the rejection of the Chinese explanation is interesting. It suggests that scholars of traditional medicines should explore the

role of dissonance in the relationship between medical traditions that have influenced each other. However, her argument is not convincing enough that “dissonance” is the reason for the acceptance of the former and rejection of the latter. For example, although Thompson stresses that the Vietnamese, and particularly the general public, would have viewed the European method of breaching the skin as repugnant, she does not explain why the physicians did not experience “dissonance” with European medicine in this respect. Instead, another explanation could suggest that European vaccination entered Vietnamese society via the Imperial pathway above the heads of the physicians, and not through the traditional pathways of face-to-face exchange of *materia medica* that existed between China and Vietnam. This imperial pathway would have given far more incentive for local physicians to follow up on the Emperor’s interests in the new medical treatment and adopt and develop them to their own setting.

Another problem with her account is that the focus of the book becomes clearer only in the later chapters. Thompson explains her method of analysis and its purpose in the final chapter when it should have been mentioned at the beginning of the book. It is also not all that clear what the Vietnamese position is on variolation until later on in the book. Finally, although the book provides interesting details about its particular subject matter, the title seems to be mismatched with the actual content as the focus of the book is mainly on one disease and its treatment, a discussion on some terminology, and some other social issues (example: change in script). The book’s importance lies more in it presenting an approach for further historical research. *Vietnamese Medicine* is an important contribution to its subject matter, and will be of particular interest to the study of traditional medicines and the history of inoculation and disease eradication in Asia. It is also a book that stimulates further research in line with the methodological approach the author takes.

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