

**Shin Dongwon, *Donguibogamgwa Dongasia Euihaksa*  
동의보감과 동아시아 의학사 [“*Treasured Mirror of  
Eastern Medicine*” and the History of East Asian Medicine]  
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The *Treasured Mirror of Eastern Medicine* (東醫寶鑑, 1613), also known as the *Donguibogam*, written by Heo Jun (許浚, 1539–1615) of the Joseon Dynasty (朝鮮, 1392–1910) of Korea, is one of the best-known medical textbooks in the history of Korean medicine. It has been very popular, in academic terms as well, throughout East Asian countries, and it is also the first medical textbook to have been included in the Memory of the World Register by UNESCO. This literature has been an interesting subject of study for medical historians because Heo Jun employed the term *Eastern medicine* (*Dongui*, 東醫) and because this term is intertwined with various theses, such as spatiotemporal aspects of knowledge, universality versus specificity, centrality versus peripherality, self-awareness of local agents, and the shaping of tradition. What, then, could be said about the characteristics and historical implications of this book? An answer to this question is provided in Shin Dongwon’s “*Treasured Mirror of Eastern Medicine*” and the History of East Asian Medicine (2015). A leading senior scholar in the history of Korean science, Shin has examined the *Treasured Mirror* for more than two decades. Shin’s book, an expanded version of his previous book, *Heo Jun of Joseon* (2001), is the culmination of his many years of research.

As the change in the title of the book—from “Heo Jun of Joseon” to “History of East Asian Medicine”—implies, Shin attempts to examine the traits of the *Treasured Mirror* within a larger context of East Asia, rather than understanding Heo Jun and his work as something limited to being Korean. Shin’s motivation for writing this book was that the *Treasured Mirror* had been published around six times during the Joseon Dynasty, more than thirty times in China (including nineteen times during the Ch’ing Dynasty and the Republic Period), and twice in Japan before the nineteenth century, and also had been cited in Vietnamese medical literature of the nineteenth century. In other words, the *Treasured Mirror* was not a piece that was appreciated solely by

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Koreans. Shin argues that the text had been able to gain such a wide readership because it displayed certain “East Asian features,” and he aims to unveil the book’s characteristics and values that international as well as Korean readers can appreciate. The book is divided into three parts, each addressing one of the following questions (presented in the reverse order): In what manners and to what extent was the *Treasured Mirror* popularized in the East Asian regions? What are the internal structure and originality of the book in its content? What were the sociocultural contexts and capacities that had enabled the birth of the book?

In narrating the background and processes that led to the birth of the *Treasured Mirror*, part 1 emphasizes that the completion of the volumes was not simply a personal accomplishment; rather, it was an achievement that ensued from the matured intellectual and cultural capacity of the early Joseon Dynasty (fifteenth to sixteenth centuries). The *Treasured Mirror* was a national academic project commissioned by the Joseon government and was completed at the turn of the seventeenth century, when it was at war with invading Japanese forces. Shin observes that the book emphasizes the “life nourishment” and the body, rather than the disease per se, and that it aims at something higher than simply accepting advanced civilization. Such features and objectives were, Shin argues, attributable to the medical and intellectual capacity that had been accumulated since the beginning of the Joseon Dynasty and to the spread of the life-nourishment culture among the literati and intellectuals during the early Joseon period.

Shin pays attention not only to Heo Jun, the de facto author of the text, but also to Heo Jun’s coworkers and King Seonjo (宣祖, r. 1567–1608), the initiator of this project. Contrary to the conventional heroic tale of Heo Jun himself, Shin highlights his familial, academic, and social networks of the literati and high-ranking officials, emphasizing that it was this exposure to the intellectual and cultural elites of sixteenth-century Joseon that nurtured Heo Jun’s talents and faculties as a physician and writer. Knowledgeable in many fields, including medicine, King Seonjo not only commissioned national projects but also gave specific lines of inquiry for the compilation of the *Treasured Mirror*. It was the cultural environment of the late sixteenth-century Joseon, the intellectually most prosperous era of the Joseon Dynasty, that provided the soil for King Seonjo and Heo Jun to flourish intellectually.

Part 2 delves into the objectives and internal structures of the *Treasured Mirror*. For its objective, Shin makes an interesting observation: although the phrase “Eastern Medicine” in the title of the *Treasured Mirror* denotes a regional specificity, the text had actually aspired to achieve the medical universality of the ancient medicine. King Seonjo and Heo Jun thought that Chinese medicine at the time was riddled with too many medical schools and therapeutic strategies, losing its connections to the principles of the ancient medical sages, and declared it to be in a state of chaos. The objective of the *Treasured Mirror* was, Shin argues, thus to recover the spirit and teachings of the ancient King Sages. Some modern readers accustomed to the idea of nation-state might ask, was the *Treasured Mirror* not an effort to secure a medical system indigenous to Joseon Korea but, rather, a project for adopting the *Chinese* ancient medicine? Shin’s argument is worth paraphrasing from the perspectives of those historical actors. They set their intellectual agenda as the sorting out of the messy and disordered medical enterprise. In a bid to initiate this project, they took a strategy of separating the then-contemporary medicine in China from the “ancient” medicine

of sage kings while placing Eastern medicine on a par with Southern and Northern medicine of China, below the ancient medicine. In so doing, they were able to lay out a framework within which they could appropriate the ancient medicine, the genuine epistemological center. In sum, the *Treasured Mirror* is not so much about proclaiming the Korean specificity as opposed to the geopolitical center “China,” or about assimilating the cutting-edge medical knowledge of Ming China; it is more about appropriating the universality of the ancient medicine.

In the sixteenth century, a number of comprehensive medical textbooks had emerged in China trying to organize the vast amount of medical theories and therapeutic formulas. What is the originality or uniqueness of the *Treasured Mirror* compared with these texts? After a close comparative analysis of their internal structures, Shin summarizes the distinctive characteristics of the internal structure of the *Treasured Mirror*:

(1) The emphasis of “life nourishment” over disease treatment, and as a corollary, the prioritization of the human body over the illness itself. For example, the book opens with a section on the body (which is divided into the internal landscape and the external appearance), followed by a section on illness (which is titled “Diseases as *Miscellanies*”). Next comes the medicinals section (which is classified according to natural philosophy, not anthropocentric categories). Is this distinctive and worth noting? Shin stresses that the *Treasure Mirror* was indeed the first book since the *Inner Canon* (黃帝內經) of the Han Dynasty that comprehensively embodies the precepts of the life-nourishment-centered preventive medicine of ancient medical sages in the organization and compilation of the medical text.

(2) The systematic synthesis of the overall received medical knowledge along with this novel way of compilation. Following the dictum “to explicate yet not author it,” the *Treasured Mirror* has synthesized even the comprehensive medical textbooks that claim to synthesize the medical knowledge, while inheriting the ancient medicine tradition. This process brought out a new medical exemplar. A highly applicable and practical set of knowledge had been reproduced. This sort of account is confirmed by the ways the *Treasured Mirror* has been received by later generations across borders.

In part 3, Shin looks into the social phenomenon of the *Treasured Mirror* having attracted popular attention in China, Japan, and Korea. He convincingly demonstrates that the *Treasured Mirror* rose as a competitive medical textbook in China, enjoyed its good share of popularity in Japan, and was held in such high regard as a medical textbook in Korea, which reminds us of how wide the book’s range of readership had been. The key reason for the *Treasured Mirror*’s success was, according to Shin, because it could be taken as a new standard textbook that has illuminated the scopes and systems of the medical enterprises. Interestingly, under the different sociocultural contexts, the local agents, Shin adds, sometimes interpreted the same text in slightly different manners. For instance, the Chinese had particular regard to the fact that most of the sources of the text were Chinese, and some of the Japanese paid more attention to the medicinal herbs of the text from commercial perspectives. In Korea, scholars and doctors developed their own medical practices on the basis of the *Treasured Mirror*, which became the medical paragon in Korea. As Shin emphasizes, the fact that the *Treasured Mirror* had gained widespread popularity over time and across East Asian regions strongly questions the conventional framework in which medical

knowledge is unidirectionally disseminated and spread from center to periphery to be adapted and assimilated in the margins.

Of many interesting topics advanced by Shin, I feel that the concept of “Eastern medicine” remains to be more explicated. How can we understand the paradoxical tension between the regional specificity implicated in the term *Eastern medicine* and the universality of “East Asian features” that the *Treasured Mirror* seeks? (*East Asian features* or *East Asianness* refers, in short, to the seeking of principles of ancient medical sages while organizing East Asian medical knowledge across the board.) Shin considers the “East Asianness” of the *Treasured Mirror* to prescribe the regional specificity of Joseon and the characteristics of Eastern medicine, and he makes some intriguing points in this regard, such as center-periphery reversal. If that is the case, how was this concept of Eastern medicine taken by following generations? The intellectuals of East Asia received and acclaimed the text because of its rich content, systematic organization, and select recipes, but they seemed to hold back when it came to the discourse, or the paradox, of Eastern medicine.

In the late Joseon period (seventeenth to early twentieth centuries), the *Treasured Mirror* indeed functioned as an exemplar on the basis of which a lot of Korean doctors and scholars were developing their own practices and medical tradition, but one can hardly find any literature dealing with the discourse of “Eastern medicine” except in the cover title of *Eastern Medicine for Prolonging the World and Preserving People* (東醫壽世保元, 1894) by Lee Jema (李濟馬, 1837–1900). A simple question arises: when we distinguish the discursive tradition of Eastern medicine from the textual tradition of the *Treasured Mirror*, what is the tradition of Eastern medicine after Heo Jun, and where on earth is it? In this regard, both Lee Jema and Heo Jun merit further research.

All in all, Shin’s book did demonstrate fairly well how medical knowledge was reproduced, historicized, transmitted, reinterpreted, and consumed across times and borders. Effectively drawing on both existing scholarship and empirical evidence, Shin convincingly advanced his argument. Among lots of research papers and monographs that explored the *Treasured Mirror*, Shin’s book undoubtedly stands out in terms of approaching those intriguing subjects from the historical perspective of East Asian medicine and clearly presenting a thought-provoking argument. A comparative study of related regions and fields also would enhance our understanding of the history of science and medicine in East Asia. The Vietnamese, for example, hold in high esteem *Mind-Heart Appreciation of Medical Fundamentals* by Hai Thuing (海上醫宗心領, 1770), a comprehensive medical textbook written by Le Huu Trac (黎有暉, 1720–91). This textbook is known to have a historical background very similar to that of the *Treasured Mirror*. In the field of the astronomy, calendrical system, and mathematics of the Joseon Dynasty, the problem of “China” (the geopolitical center) constitutes a delicate yet interesting issue in the history of Korean science. Shin’s book is sure to serve as an important and authoritative literature for the future studies related to these topics.

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