The intense experience of reading Shigehisa Kuriyama’s brilliant book reminded me of discovering, almost by chance, Richard Broxton Onians’ impossibly-titled Origins of European Thought about the Body, the Mind, the Soul, the World, Time, and Fate (Cambridge, 1951). In both works, what most stirs the literary reader’s gratitude is the nearness of their focus on the words, on ancient locutions of the body’s parts as the master code of its intimate transactions with the world. For Onians, the language is Homeric and classical Greek. The sweep of his coverage is indeed astonishing: atop each right-hand page of the book is a swift procession of running titles, “Sneezing, the Brain, Sacrificial Heads” (p. 105), “Gold on the Horns, APARCAI of Hair”, (p. 107), “Head and the Issuing of Life, Castration” (p. 109), and so forth. The work itself is an etymological discussion of the myriad references to anatomy and physiology in the classical canon, including both the dramatic and epic, the literary and scientific. The compilation is so densely textured that it not only justifies the book’s impossible title but rewards the attentive reader with an awesome corpus of knowledge about the holiness of the head in ancient Greek thought, for example, the sanctity of the beard, or the special privilege accorded the knees and how they are mysteriously connected to generation (the fluid of the knee-cap was thought to be the same as cerebrospinal fluid, itself equated with semen). And from the roots of these words, of course, grow our modern languages of the body.

Kuriyama’s method, though no less focused on words as the historian’s master code for recovering the deep structures of ancient habits of thought, is narratively much more graceful, rhetorically much wiser. This is indeed an eminently quotable book: “Once upon a time”, Kuriyama
intones near the end, “all reflection on what we call the body was inseparable from inquiry into places and directions, seasons and winds. Once upon a time, human being was being embedded in a world” (p. 262). To write with such simplicity for an academic audience bespeaks enviable fearlessness. Perhaps it comes from having a powerful knowledge and linguistic base in two ancient medical traditions that few can claim to share. Perhaps it comes from the pure centrality of the several topics Kuriyama has chosen to address—pulse, blood, colour, breath, muscle.

To an early modern cultural historian, Kuriyama’s comparative story of the body’s embeddedness in the world, like the etymological story Onians tells so meticulously, is one that intermixes continuity and discontinuity, convergence and divergence, not in equal, but in persuasive proportions. The ‘divergence’ between Greek and Chinese medicine in his title, he argues, increased over time from the less marked differences between the Hippocratic corpus and the early Mawanghui manuscripts to the almost complete incommensurability of the two diagrammatic bodies reproduced from Hua Shou’s 1341 Shiṣijīng fahui and Vesalius’s 1543 Fabrica (Figures 1 and 2, pp. 10 and 11). Certainly to be told that ancient Chinese medicine had no word for muscle (p. 8) is astonishing to the Western point of view. Yet although there is a great divergence between these two ancient traditions, both of which assume the body’s embeddedness in the world, there is at least as great a gulf between their shared sense of embeddedness and the dematerialisation of consciousness and objectification of the natural world that occurred during the Enlightenment and has dominated Western epistemology since. The embedded consciousness which Kuriyama finds so striking in both ancient traditions is still to be found in late sixteenth- and early seventeenth-century European texts. Whether we find more divergence between ancient Chinese and Greek medicine or between modern secular-scientific consciousness and everything that came before it will depend largely on which structures of the body or which systems in the natural world claim our attention at any given moment.

My own work on the cultural history of the body, for example, grounded in early modern English drama of the late sixteenth and early seventeenth century, proceeds from a conviction that bodily self-experience for Shakespeare’s contemporaries differed considerably from our own. This is true not because their lives were shorter and physically more difficult than most Westerners’, but because of what they knew about themselves: that blood did not circulate; that wriggling animal spirits delivered the organic soul’s instructions to the sentient flesh; that breast milk transmitted character traits from the nurse to the sucking child; that wombs (maybe) wandered; and that plethoric bodies got relief from a barber-surgical opening of the
veins. My conviction of their difference from ‘us’ has gathered strength as I have come to recognise the cultural effects of the great continuity between ancient Greek medicine and that of early modern Europe. Thus Galen in the second century defined muscle as “the organs of voluntary motion” (p. 144); his words are reproduced, almost verbatim, in 1615 in English royal physician Helkiah Crooke’s Microcosmographia: “a Muscle is the immediate organ of voluntary motion” (London: 1615, p. 739). If, as Kuriyama argues, “interest in the muscularity of the body was inseparable from a preoccupation with the agency of the self”, that preoccupation runs undiluted, if not exactly unchanged, from Hippocrates to Galen to Vesalius to Crooke to Descartes and beyond. The distinction between the voluntary and the involuntary—between what the soul wills the body to do, epitomised by the agency of the muscles, and what it does not (epitomised for Descartes by reflexes)—is one of the key variables in the great organising binaries of Western thought.

With respect to muscles, Western thought seems quite continuous with itself from Hippocrates until our own time, at least as compared to Chinese tradition. But for some other key body parts and functions, the Enlightenment separates us so profoundly from our early modern forebears that they can sometimes seem almost as alien as the ancient Greek or Chinese texts do. Kuriyama insists upon differences between Hippocrates and Galen in order to show the increasing divergence between Greek and Chinese medical traditions. But, though the early moderns could not altogether overlook discrepancies between Hippocrates and Galen, they were much less important than the joint authority of their surviving texts. Thus when Kuriyama speaks of the “pneumatic character of life” (p. 240) expressed both in the Chinese texts and in the Hippocratic corpus, he might be glossing lines from Shakespeare or one of his contemporaries. “If after every tempest come such calms,” exclaims Othello on being re-united with Desdemona in Cyprus, “May the winds blow till they have waken’d death... If it were now to die, / ‘Twere now to be most happy” (2.1.185–190). The entirely conventional meteorological comparison between great storms and strong feelings derives ultimately from the Hippocratic corpus: as emotions stirred the body, causing its internal changes of mood and disposition, so too “winds foreshadowed change, exemplified change, caused change, were change” (p. 239). An even more evocative understanding of the pneumatic character of life lies behind the answer of the Bashaw in Marlowe’s Jew of Malta who, when asked “What wind drives you thus into Malta road?”, replies, “The wind that bloweth all the world besides / Desire of gold” (3.5.2–4). To read such language as merely figurative is tempting but ultimately anachronistic. These characters may seem epistemologically and phenomenologically
more like us than not, certainly more like us than like their unknown Chinese contemporaries. Yet, to judge by Kuriyama’s own reading of Chinese medical culture, the early modern Europeans and the pre-modern Chinese belong alike to a world organised by secret sympathies and evident correspondences, a world full of constant and dynamic change in which bodies—however differently understood and differently experienced in the two cultures—were fully ‘embedded in a world’. Like the Chinese, Othello and Marlowe’s Bashaw would have understood that “breaths blowing around the body were often presumed to be related to the breaths sustaining the life within”; like them too, they would have understood that “meditations on human life were once inseparable from meditations on the wind” (p. 236). We, says Kuriyama correctly, tend to forget this.

As with wind, so with colour. Kuriyama notes that “seeing in Chinese medicine entailed gazing upon color (swangse)” (p. 167). But early modern medicine had its own symptomatology of colour—the variously coloured urines brought to the physician for diagnosis, for example, or the red, yellow, black, or pale colours of the complexions that revealed a person’s disposition in Galenic humoralism. Without modern instruments of bodily detection and measurement, European doctors relied not only on patients’ histories but also on the colours presented to them by their patients’ bodies—colours whose significance they understood from visible correspondences to natural phenomena. It was the redness of wine, for example, as well as the spirits that it contained that made it a natural stimulant for the production of blood in a wounded or ailing body. Because the colour red warmed and moistened, the philosopher-physician Marsilio Ficino ordered scholars to gaze upon a pleasant landscape with red colours as a psycho-physiological antidote to the cooling and drying effects of too much thought: “I advocate the frequent viewing of shining water and of green or red color, the haunting of gardens and groves and pleasant walks along rivers and through lovely meadows” (Three Books on Life, I, x).

Such lived differences between now and a host of earlier ‘thens’ are indeed a sub-theme of this wise and beautifully written book. As Kuriyama himself observes, “[t]he history of the body is ultimately a history of ways of inhabiting the world” (p. 236). My point in insisting upon the epistemological chasm that often seems to separate us even from Europeans living a mere four centuries ago—‘mere’ when compared to the millennia that separate us from the major texts and figures in Kuriyama’s book—is only to suggest that measurable differences of time and distance may matter less than qualitatively different habits of thought and attention. Early modern European men and women were powerfully and habitually
attentive to winds, breath, colours, and bloods because their rather porous humoral bodies were open to the immediate environment and because their passions were ontologically part of the natural order. If sometimes their bodily self-engagement seems continuous with, if not precisely equivalent to, our own, sometimes it certainly does not. In bodily practices, they are capable of being as foreign to us as the ancient Chinese.

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By Andrew Strathern and Pamela J. Stewart

In this work, Shigehisa Kuriyama takes on an ambitious task: comparing ancient Greek and Chinese ideas about the body, and in doing so raising fundamental questions about cross-cultural experience and interpretation. The author brings to this enterprise a close reading of texts and traditions, and a style both nimble and thoughtful in drawing out similarities and differences. Underlying the whole exposition is the question posed briefly in the epilogue: “what separates the living from the dead?” (p. 271). As Kuriyama goes on immediately to note, “Life’s presence is manifest to the senses, yet ever eludes the reach of our comprehension” (ibid.). Formulations of this kind themselves express the author’s aim of straddling different discourses, notably between anthropology and philosophy of science. On the anthropological side he writes: “I have stressed the inseparability of the body and conceptions of personhood” (p. 272). On the philosophical side he is concerned also to make an anthropological point: while we may think that the senses provide a universal background to thought and perception, the actual exercise of the senses and the meanings given to apparently similar concepts associated with sense experience can be culturally variable.

The comparison between Greek and Chinese medical traditions is intriguing in this context because these traditions have both been influential historically and have been studied quite intensively, but not as far as we know in a direct comparison. The traditions also show overlaps and possibly historical interconnections, making the idea of a comparison qualitatively possible, but, as Kuriyama deftly and patiently shows, there are basic differences that in turn reveal differences in concepts of life itself.
Kuriyama begins with the question of the pulse, and enters into an extended discussion of the Chinese concept of the *mo* and the Greek *sphygmos*. He points out that the ‘pulse’ has been for long considered a highly significant marker of health or sickness in both China and Europe, and in both instances the pulse has been felt with the fingers and therefore its identification and interpretation depend on haptic skills. Yet, for Chinese practitioners, these finger skills could describe twelve such ‘pulses’ and could indicate the condition of various internal organs such as the lungs and spleen, heart, or kidneys (p. 25). For ancient Greek, and subsequently European practitioners, the pulse meant rather the dilation of arteries in systole and diastole; but this, too, was an interpretation of sense data, not simply a report of them. Expounding Galen’s synthetic views on the matter, Kuriyama notes the struggle of generations of physicians in taking the pulse “to sort out genuine perceptions from inferences” (p. 35). Also noted is the great qualitative sophistication and complexity of the Chinese system and the contrary drive for quantification and precision of measurement in European ‘biomedicine’ over time. The case study is a paradigm for the holistic versus mechanistic/fragmented contrast in medical history, all concentrated on the act of holding the wrist. We can test our pulse rate and blood pressure on machines in pharmacies and doctors’ offices without reflecting on this long background of thought; but if we do reflect, it surely reveals the relativity Kuriyama conveys, compounded by awareness that machines themselves, just like humans, do not always function optimally and that what machines record is a transient state, influenced by complex circumstances.

Extending the comparative basis a little further here, it is possible to recognise that the haptic focus differs further in other cultural contexts. The peoples with whom we ourselves work in Papua New Guinea would not recognise the significance of ‘the pulse’ as something located at the wrist (except in the cases of health care workers who have been trained in Western biomedical practices to consider the taking of the pulse as a part of their work). On the other hand, they do recognise the existence of pulsation in the fontanelle of new-born babies as well as the beating of the heart itself. The Hagen people, for example, speak of the beating in the fontanelle as *pung-pung tenem*, ‘it makes pung pung’, an onomatopoeic expression, and they refer to the heart organ (*muntmong*) as ‘working’ (*kongon enem*). Both of these are signs of life and of the inchoate existence in the body of the ‘soul’ (*min*). They would not, however, in their own system of thought, imagine themselves testing or counting the pulse as a marker of physical well-being. To combat sickness they traditionally would conduct divination, discuss emotional states such as ‘anger’ (*popokl*), kill pigs in sacrifice, hire experts to recite spells and administer...
concoctions or apply actions to the skin in order to draw out ‘poison’ (*konga*). As I have described in a number of my own writings, their haptic traditions involve palpating or massaging the abdomen or other parts to remove poison (sorcery substance)—in other words, as hands-on therapy rather than hands-on diagnosis. They would, nevertheless, acknowledge the basic problem, how to relate empirical evidence to interpretation, that exercised the Greek and Chinese physicians, and, incidentally, exercises ethnographers also in their business of writing.

Kuriyama’s demonstration of relativity with regard to ‘the pulse’ is followed by similar expositions on muscularity and identity, on colours, on blood and life, and on wind and self. Throughout, the theme of the book’s title, on the expressiveness of the body, is developed and applied as an analytical tool assisting the interpretive process. The question of what the body expresses is answered in different modalities in the two traditions. That it is expressive both of its physical state and of the lived culture to which every body belongs, is a constant. Kuriyama’s early discussion of the *mo* is paralleled here by his treatment of the Chinese concept of *se*, ‘face’, linked to the *yang* as *mo* was to the *yin*. *Se* was assessed partly by colour as determined by the “gaze” (p. 170), so here we are in the realm of vision, not touch. But ‘face’ is not something superficial, external. Like the *mo*, it reveals inner states of being. Filial piety, for example, was not to be measured simply by taking on work or giving food, rather it was a matter of the “expression on one’s face” and this in turn was a product of the inner spirit with which acts were done (p. 183). Here, as in a number of places, the observations also transcend the relativity of the case in hand, recalling for example the dialectic between faith and works in the Christian tradition and the Hagener’s insistence on the significance of the *noman* (‘mind’) for action.

It is in regard to the last two chapters, on blood and on mind, that further contrasts and parallels can be drawn with New Guinea materials, taking off from Kuriyama’s own elegant and informative constructions. On blood, he contrasts, for example, Galen’s exposition on plethora and inflammation as a reason for blood-letting with the Chinese stress on acupuncture that developed by the time of the late Han dynasty (p. 198). Both traditions used blood-letting to relieve pain at one time, but they subsequently diverged markedly (p. 206) as Greek medicine from Hippocrates to Galen became more and more concerned with the problem of excess blood. The comparison with Mount Hagen in New Guinea that comes to mind here is that the Hageners, both men and women, have historically been concerned with the problem of too little blood, not too much. *Nanga mema pora nimin*, ‘my blood is finished’, is a common complaint of the sick, tired person. People seek nourishing foods and rest
as treatment for this condition. Letting out blood would be anathema to
them. Perhaps they perceive that their diet of mostly tubers and their
susceptibility to fevers such as malaria do indeed affect their health.
Instances of this sort pose further comparative problems of explanation
following exposition.

Kuriyama’s final chapter, on wind and self, also contrasts the Greek
and Chinese cases—external wind and its potentialities to bring sickness
and health for the Greeks, and the dangers of internal penetration of wind
into the body for the Chinese. Feelings within were like winds also (p. 245).
Hageners would assent to both traditions here. External winds are seen by
them also as bringing sickness, which comes at a nggi, a specific time or
sticking point. But internal emotions also may be like winds, for example
people’s thoughts can be like nde kaepa kulya, the swaying tops of a
casuarina tree blown by wind, i.e. fickle and uncertain.

Kuriyama has given us a book full of thoughts, wearing scholarship
lightly and writing elegantly. In two arenas we could perhaps ask for more:
the realm of sociological explanations, and the discussion of moral and
political correlates of sickness diagnosis (see for example Suzanne and
James Hatty, *The Disordered Body: epidemic disease and cultural transforma-
tion*, New York, 1999). These topics do appear in the text, indeed. From
an anthropological viewpoint we might look for even more on them.
Kuriyama has chosen another pathway, however: the sensitive and
persistent explication of how things were, from which an understanding
of why they were so may also be cultivated and grow.

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Author’s Response

By Shigehisa Kuriyama

How can Reality Appear so Different?

We speak of ‘the human body’, and we betray by this phrase a faith in something universal and unchanging, a natural given that is essentially the same among human beings of any continent, and which does not much differ today from what it was two or three millennia ago. Yet we know that conceptions of this ‘same’ reality—beliefs about the constitution and workings of the body, the nature of its afflictions and the proper way to care for it—have differed radically with place and time. Tenets and practices that to people of one place or time seemed absolutely clear and certain, can often appear, to people of other lands and eras, exotic, baffling, even nonsensical.

The Expressiveness of the Body asks: What should we make of such diversity? How can a reality as basic and intimate as the human body be perceived so differently? The book thus has a double aim. It is, on the one hand, a comparative study of conceptions of the body in ancient Greek and Chinese medicine. It spotlights how entities thought so basic as to be taken for granted in one tradition—the body’s muscularity in Ancient Greece, or acupuncture conduits in China—often passed completely unnoticed in the other, and explores the nature and implications of such disparities. But the work also probes (though mostly implicitly, through scrutiny of telling examples, rather than by explicit theorizing) broader questions about culture and embodied knowledge. It looks hard at exactly how conceptions of the body differ.

Three broad contentions frame this book’s analysis. The first is that the contrast between Greek and Chinese medicine cannot be resolved into bald oppositions of the true versus the false, and that we must be wary, too, of mistaking for natural what is merely more familiar. Significant aspects of the Greek approach—such as the emphasis on muscles and on dissection—still powerfully inform our own approach to the body, and thus tend to appear to us obvious, even inevitable. Expressiveness, however, queries the insistence on anatomical seeing as a bias no less puzzling than the Chinese belief in invisible needling sites and conduits.
A second contention has to do with the importance of historical perspective. This is the intent of the title word ‘divergence’. The distances separating Greek and Chinese medicine, *Expressiveness* urges, should not be construed as timeless, fixed oppositions, but as differences that widened and crystallised in history. One cannot comprehend the contrasts between Greek and Chinese conceptions of the body without first appreciating the similarities that they once shared, and recognising the major changes that each tradition underwent over the course of antiquity.

Finally, *Expressiveness* argues that the contrasts that eventually did emerge were not merely conceptual, not just a matter of different ideas, but also perceptual and experiential. Studies of alternative ‘ways of thinking’ must be accompanied by parallel inquiries into alternative ways of touching, seeing, and being. This is the pivotal thesis to whose elaboration most of the book is devoted. *Expressiveness* seeks above all to elucidate, by examining specific practices such as pulse-taking, and anatomy, and blood-letting, what is involved, concretely, in touching and seeing, to say that Greek and Chinese doctors literally grasped, and saw, and felt the body differently.

*In Response to the Reviews*

The reviews by Gail Kern Paster and by Andrew Strathern and Pamela J. Stewart seem to me balanced and judicious, and I feel fortunate to have readers so attuned to my aims. Their commentaries blend two strategies: on the one hand, they relate what the book is about, and on the other, they compare what I find in ancient China and Greece with what is found in medicine in other lands, at other times. Let me discuss each separately.

Paster and Strathern and Stewart portray *Expressiveness* in an insightful and generally faithful manner. In a few places, however, their summaries run counter to my intent. I am uneasy, for instance, about Strathern and Stewart’s characterisation of the differences in Chinese and Greek pulse-taking as “a paradigm for the holistic versus mechanistic/fragmented contrast in medical history”. The formula is not one that I use, and is indeed just the sort of dichotomy that I explicitly eschew. *Expressiveness* declares from the outset that Chinese and Greek conceptions of the body neither can nor should be distilled to “bare formulas like holism vs. dualism, organismism versus reductionism” (p. 13); the project of the book is to elucidate richer, more supple schemes of comparison.

I am also uncomfortable with Paster’s remarks on the continuity in Western muscle-consciousness between Hippocrates and Galen. That there was remarkable continuity in muscular discourse after Galen, there is
no doubt; and it is also true that a long tradition of commentators (beginning with Galen himself) have often sought to harmonise—or simply ignore—the differences between Hippocratic and Galenic teachings. But one of my aims in Expressiveness was precisely to question this long-standing emphasis on continuity, and to urge more attention to the startling changes that transformed ancient Greek medicine. The post-Hippocratic birth of the new technique of pulse diagnosis, in my account, is inseparable from the novelty of post-Hippocratic muscle consciousness. Still, these are reservations about details. Overall, as I say, the reviewers reliably spot many of the book’s key concerns. To Strathern and Stewart I am grateful most notably for highlighting the leitmotif of ‘expressiveness’. They discuss the theme chiefly with reference to my discussion of the expressive face. I would like further to cite, by way of clarifying why this theme occupies the heart of my approach to the history of the body, the more general explanation in the book’s epilogue:

[I]f by the body we mean something directly accessible to sight and to touch, then, in the history of medicine, the body was no more the real object of knowledge than individual printed letters are the final object of reading. Just as letters interest the reader mainly as sensible bearers of insensible meaning, so in taking the pulse or feeling the mo, in dissecting muscles or scrutinizing color, doctors strove above all to comprehend what the body expressed. They sought to know the invisible, inaudible, intangible truth of living beings through bodily expressions that could be seen, and heard, and touched (p. 271).

Greek and Chinese doctors, I argue, perceived different bodies because they diverged in their interpretation of these expressions—differing most immediately in what they perceived as expressions, but ultimately differing too, in their intuitions of how bodies expressed. The latter point is especially critical, and is underscored by the titles of the book’s three subsections: “Styles of Touching”, “Styles of Seeing”, and “Styles of Being”. Guiding my analysis of expressiveness is the focus on the notion of style.

Styles of touching, styles of seeing, styles of being—and styles of listening. Implicit in the phrase ‘bodily expressions’ is its more familiar complement, verbal expressions. As Paster rightly stresses, Expressiveness is vitally concerned with words. Generously suggesting parallels with Richard Onians’ masterful work, she points out how my analysis makes much of the nuances and history of key terms. But I think it important to add that I do not rest there: my conclusion is that we must, in the end,
advance beyond lexical comparisons. We cannot stop at just scrutinising which terms are used in each culture and with what meanings; we must probe as well the history of how words are used. The differing styles of touching and seeing that made Greek and Chinese conceptions of the body so different were, I hypothesise, inseparably entwined with alternative styles of speaking and listening. “The history of conceptions of the body must be understood in conjunction with a history of conceptions of communication... In seeking to understand people doctors in each tradition often felt with their fingers in much the same way that they listened with their ears” (pp. 107–108).

**Comparative Histories**

Strathern, Stewart, and Paster unfold their readings of Expressiveness within a comparative frame. Discussions of how ancient Greek and Chinese ideas and techniques coincide or contrast with medicine in contemporary New Guinea and in Renaissance Europe loom large. What do these comparisons teach us? Introduced in a short book review, and hence by necessity cited only briefly and in isolation, they offer mere tantalizing hints whose significance is hard to assess. How should we interpret, for example, the opposition between the Greek preoccupation with plethora and the Hagen complaint of insufficient blood? Is a similarity such as that between ancient and Renaissance perceptions of wind an idle, surface coincidence, or does it reflect a deeper commonality of values and concerns? My reviewers gesture toward a vast realm of unexplored questions. It is a valuable gesture, though. For it reminds us of how little we actually know about medical history around the world. Yes, we have an ever-increasing library of accounts detailing theories and practices in different eras and traditions. But as yet we have only the vaguest and most fragmentary notions of how these diverse eras and traditions might relate to each other—of how to situate them vis-à-vis one another on a map of the medical imagination. We do know, however, and my reviewers reinforce this point admirably, that the geography involved is rather more complex than it was once believed. If, in certain respects, the beliefs of ancient Chinese doctors seem to neighbour those found in twentieth-century New Guinea, in other respects they seem surprisingly close to the cosmos of Renaissance Europe. Broad-stroked oppositions of Western versus non-Western realms are clearly too crude.

How might we chart a subtler vision? Expressiveness suggests that the beliefs and practices surrounding blood and breath afford a window—one among many to be sure, but an exceptionally revealing one—onto the fine
shades that make Greek and Chinese conceptions of the body seem at once so similar and yet irreducibly unalike. The observations of Paster and of Strathern and Stewart hint at how comparative surveys of the imagination of blood and breath may help us equally to map worlds far removed in time and space from ancient Greece and China.

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