Tracing the Development of Medicine in Vietnam

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In Vietnam, medical texts because until the 13th century because the highly humid climate and perpetual war resulted in the loss of books. Therefore, I have explored the existing medical texts from the Tran 陳 Dynasty (1225–1413) and the Hau Le 後黎 dynasty (1428–1789) to document the characteristics of and the developments in Vietnamese medicine in more than 500 years of history.

Firstly, the Vietnamese developed medicine suitable for their environment, disease structures, and their constitutions. The earliest existing book, Yhoc YeuGiai TapChu DiBian 醫學要解集註遺篇 from the 14th century, includes unique formularies for fevers and chills. One of the characteristics of Vietnamese medical books is the focus on treating acute diseases such as malaria, food poisoning, summer cold, influenza, and cerebral apoplexy. In YTong TamLinh 醫宗心領 (compiled 1770–1780), the author discusses about the Vietnamese environment and its constitutent predisposition and concludes that Ephedra Herb and Cassia Bark should not be used for Shanghan 傷寒. This book also contains many unique formularies for compensating a loss of body fluid in patients with the application of Vietnamese local herbs or Nam Duoc 南藥 advocated by Tue Tinh 慧靖 (1330–1385–?). Moreover, his influence on local herb application is found in several other medical books. This type of expansion, in which the influence of an author is found in several books, can be considered as another characteristic of Vietnamese herbal medicine. The development and application of Nam Duoc, which is extended to acknowledge medical benefits of peculiar Vietnamese food, promote Nam Duoc Materia Medica and food Materia Medica. Vietnamese physicians not only expanded the development of the treatment for various endemic diseases, such as malaria and fever epidemics, but also wrote books that elaborated on the treatment methods for domestic animals. Literature on military medicine also emerged. As a measure against a successor problem, they developed fertility improvement, gynaecology, and paediatrics. Even the empirical collections of formulae were compiled by the court officials. The third characteristic is the epic poem style of writing, which began with Tue Tinh’s NamDuoc QuocNgu Phu 南藥國語賦 and TrucGiai ChiNam DuocTinh Phu 直解指南藥性賦. This style of writing spread in China in the Yuan dynasty and was propagated in the Ming dynasty; it influenced Korea and Japan as well. However, the fact that this style was adopted in a large number of medical books in Vietnam is
remarkable; this was probably the result of the oral tradition of recitation and narration. In Vietnam, it is presumed that commercial publications of medical books did not appear until the end of the 19th century. The background that this writing style was widely accepted and is associated with the characteristics of the social economy and the oral culture of this country. The fourth characteristic is that the oldest medical books, which are being transcribed until today, were compiled by metropolitan graduates (進士) or their families, in line with the metropolitan graduate system. However, although China and Korea also implemented a similar system, medical books written by Chinese and Korean graduates were not spread or passed down from generations as widely as in Vietnam. This suggests the unique relationship between Confucianism and medicine. For writing books in Vietnam, authors referred to vast and expensive Chinese medical books, which were not available as references for ordinary physicians. Moreover, they were able to refer to the relatively smaller medical books, which ordinary physicians find difficult to access, without big time lag. This factor indicates that their medical books were passed on and quoted from the earlier generations. The fifth characteristic is the appearance of Le HuuTrac’s 黎有倬 Tong TamLinh with 28 chapters in 66 volumes (1770–1780). The contents of his book cover all the above-mentioned characteristics. On top of that, he has systematically and logically organized these characteristics. It would not be an exaggeration to say that the system described in this book forms the distinct identity of Vietnamese medicine. Consequently, Le HuuTrac is regarded as the person with greatest medical achievements in Vietnamese history. On the basis of the above-mentioned description, it can be confirmed that Vietnamese medicine had already achieved its localization in the 14th century under the influence of Chinese medicine and in the 18th century, it had formed its own identical system with various distinct characteristics.

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