Acupuncture, as an important and unique part of traditional Chinese medicine, has played a major role in the health care of the Chinese people, occupying a significant place in the history of traditional Chinese medicine. This can be seen from the following four points:

1. **Acupuncture - One of the Earliest Healing Arts in China**

Many primary sources show that acupuncture, perhaps together with moxibustion, emerged as one of the earliest healing methods in the history of Chinese medicine. It has been arguably a foremost therapeutic method ever since its development. In the history of Western medicine certain legendary figures, in ancient Greece for example, have been cited as originators of the art of medicine. Similarly in ancient China, three legendary characters have been regarded as the founders of Chinese medicine. The earliest is Fu Xi, also called Bao Xi, a legendary tribe leader who was believed to have made many innovations, such as the production of nine kinds of needles. The second is Shen Nong, the Divine Husbandry Man, who was said to have taught the art of husbandry, and discovered the curative virtues of herbs by tasting a hundred different varieties. The third is Huang Di, the Yellow Emperor, who was said to have discussed medicine, including acupuncture, with his ministers and who, like Fu Xi, was credited with having made nine kinds of needles.

These legends reflect, to a certain extent, the historical facts of the early origins of Chinese medicine. We may think of the legendary figures as embodiments of ancient Chinese ancestors who, during their search for a livelihood, gathered medical experience and developed healing methods.

The description of the earliest figure, Fu Xi, is interesting, for it hints that acupuncture was probably the earliest known healing method in China, predating moxibustion and herbal medicine. Although fire may have been used by primitive people as a method for relieving pain, probably the first recorded use of the herb moxa (Artemisia vulgaris) for medical purposes appeared during the period of the Warring States (475-221BC). In the *Meng Zi* (Mencius) there is a passage, “Seek for mugwort of three years old, to cure a seven years' disease.” The use of moxa was not recorded in medical works, however, until the appearance of the *Shennong's Herbal* during the Western Han Dynasty (206BC-24AD). Thus it appears that the practice of using herbal medicine came later than that of acupuncture, for it would have taken longer for the ancients to learn and become familiar with the curative properties of herbs.

Although we do not know what kinds of needles were produced by Fu Xi, there is much documentary and archaeological evidence to show that, at least during the New Stone Age in China, a kind of polished and sharpened stone called “Bian Shi” (stone needle) was used for treating illnesses. Many pieces of Bian Shi” have been excavated from New Stone Age remains in various parts of China, and it has been recorded in many ancient Chinese documents. Valuable information about it exists in the *Shanhai jing* (Classics of Mountains and Seas), a book that appeared during the period of the Warring States (475-221BC). The book deals with ancient China’s geography, primitive customs, products, medicine, etc, and in the section “Dong Shan Jing” (Classic of the Eastern Mountains), it says that there was plentiful jade in the Mountain Gaoshi, and that at its foot there were ample supplies of needle stones. In another text, the *Shouwen jiezi* (Analytical Dictionary of Chinese Language), compiled by Xu Shen in the 1st Century AD, there is a clear definition of “Bian Shi”: “It is a kind of stone used for treating illnesses by pricking the body.” Other references
exist in the *Wushierbing Fang* (Prescriptions for the Fifty Two Kinds of Diseases), one of the earliest extant medical writings on silk fabrics, that was unearthed in 1973 from a 3rd Century BC tomb at the Ma Wang Dui Village in Hunan Province, South China. Here there are descriptions about using “Bian Shi” for treating illnesses such as haemorrhoids. More descriptions of its use in treating illnesses are seen in the *Huangdi Neijing* (The Yellow Emperor’s Internal Classic), the earliest and most comprehensive medical work extant in China. In here, as in the *Shanhai Jing*, it says that the “Bian Shi” came from the East part of China.

Quan Yuanqi, a physician and annotator of *Su Wen* (part of the *Neijing*, 5th-6th Century AD), pointed out that “Bian” was an ancient tool for external treatment and has three names: Zhen Stone, “Bian stone”, and Chan stone. Apart from “Bian”, quite a few bone needles have been found in various parts of China amongst remains from the Xia (approx 21st-16 Centuries BC) and Shang (approx 16th–11th Centuries BC) Dynasties. (Fig 1)

2. Acupuncture - An Indispensable Branch of Chinese Medicine

With the development of the Chinese culture and civilisation, from the time of the Spring-Autumn period (770-475BC) onwards, there appeared different schools of philosophical thought. It was during this period that the theories of Yin-Yang and Five Elements (Five Evolutive Phases) were applied to medicine.

Owing to the progress of metallurgy during the period of the Warring States (475-221BC), more types of metal needles were developed that gradually replaced “Bian Stone”. That metal needles were widely used in acupuncture is strongly supported by archaeological findings. In 1968, for instance, nine acupuncture needles were unearthed from the tomb of Prince Liu Sheng of Zong Shan and his wife, of the Western Han Dynasty. They had been buried in the year 89 BC.
113BC, in Mancheng, He Bei Province, North China. Of the nine needles, five silver ones were damaged, but four made of gold are still in perfect condition.17 (Fig 2)

Needless to say, the use of metallic needles greatly enhanced the effect and increased the indications of acupuncture.

In the Shi Ji (Book of History), the first great work in China of biographies arranged in chronological order by Sima Qian, there is another tale presenting the good effect of acupuncture. An itinerant doctor called Bian Que (Qin Yueren), who lived around the 5th Century BC in Middle-North China, arrived one day in the Kingdom of Guo to be told that the Prince had just died and that the funeral was being prepared. Having enquired about the cause of death and condition of the Prince, Bian Que announced that he could bring him to life. The King ordered him to do what he could. After taking the pulse, and examining the apparently lifeless body, Bian Que diagnosed that the Prince was suffering from “Shi Jue”, a state of deep coma. He instructed his pupil Zi Yang to polish a needle on a grindstone, and he then treated the Prince, starting with acupuncture by punctuating the point Bai Hui (San Yan Wu Hui). The Prince was restored to life.18 (Fig 3)

What is noteworthy in Bian Que’s story is that the term ‘Jing Luo’ (Channels and Collaterals) was recorded for the first time in Chinese medical history, although no detailed description of it exists in this tale.

A number of works on acupuncture appeared during this period,19 of which some remain. Two writings on silk, for instance, were found in the Han Dynasty tomb at the Ma Wang Dui Village. One is entitled Zubi Shiyimai Jiujing (Eleven Channels for Moxibustion of the Arms and Feet), and the other Yin Yang Shiyimai Jiujing (Eleven Channels for Moxibustion in the Yin and Yang Systems). They discuss pain, spasm, numbness and swellings along the Channels, and symptoms of the mouth and sense-organs, etc., that are amenable to moxibustion.20 Although acupuncture is not specifically mentioned, it is recognised that acupuncture and moxibustion have been sister therapies in China since ancient times. These writings help us to trace the development of the theory of Channels (Meridians).

The most important and influential work of this period is the Huangdi Neijing (Yellow Emperor’s Internal Classic), previously referred to in this text. Although it is said to have been written by the legendary Yellow Emperor, it was predominantly the work of a number of scholars and physicians living between the 5th and 1st
Centuries BC, with some sections being added by subsequent authors.

A large proportion of the Neijing deals with acupuncture and its related subjects, indicating that acupuncture had by this time developed into a special branch of Chinese medicine with its own sphere of learning.

The Neijing contains two parts, the Su Wen (Plain Questions) and the Ling Shu (Miraculous Pivot).

Of the 81 chapters of the Su Wen, 12-14 deal with therapies that include acupuncture, Bian stone, moxibustion, etc; 22-30 with internal organs, clinical use of Channels and Collaterals for the diagnosis and treatment of diseases; and 49-65 with acupoints, their names, locations, methods of manipulation of needles, etc.

Of the 81 chapters of the Ling Shu,21 about 4/5th deal with acupuncture, the theory of Channels and Collaterals, and other related subjects, viz: Chapters 1-9 with the nine kinds of needles, acupoints, methods of needling, etc; 10-18 with the human body's Channels and Collaterals, etc; 19-30 with the needling methods for many kinds of diseases; 42-46 with the Five Elements and the Five Shu, ways of needling, etc; 47-55 with important acupoints and contra-acupoints, etc; and 67-81 with more discussions on the nine kinds of needles, methods of manipulation of the needles, etc.

The Neijing adopted the natural philosophy then in vogue, of Yin-Yang and the Five Element theories, and expounded fundamental medical principles in holistic terms. It emphasises that the human body should be treated as an entity, that attention should be paid to maintain it in harmonious balance within itself and in relation to its external environment, and that a patient's condition and symptoms and signs should be analysed. The book also applies all of these principles to acupuncture.

In the Neijing, for the first time in the history of Chinese medicine, a systematic and significant description was recorded of the theory of Channels and acupoints, principles and methods of manipulation of needles, and the indications and counter-indications for the use of acupuncture. In addition, 295 points, 12 Regular Channels and 15 Main Collaterals were described in the human body.

As the Neijing says: “The twelve Channels are internally related to the viscera and externally linked with the limbs and joints.”22 It is through the Channels that the Qi and blood circulate, and there are points on the body surface where the Qi of the deep internal organs lies just below the surface. These points can be punctured to cure diseases by regulating the flow of the Qi and blood.

The theory of Channels and Collaterals deals with physiological and pathological changes of the human body, and serves as a guiding principle of diagnosis and treatment for the practice of acupuncture. The Ling Shu says: “We must have a deep understanding of the Channels because, through them, life and death can be judged, diseases diagnosed, deficiency and excess regulated.”23 Other fields of Chinese medicine later adopted the basic principle of the Channels. Zhang Zong-jing (2-3AD), for instance, the Sage of Chinese medicine, initiated the doctrine of analysing and differentiating febrile diseases in accordance with the theory of the differentiation of Six Channels for the treatment of diseases. Zhang Yuansu, an outstanding physician of the 12th Century AD, established the doctrine of prescribing herbs in accordance with the theory of Channels.

It is likely that the discovery and formation of the theory of Channels was closely linked with the long term practice and development of acupuncture, and in particular with the observation of the phenomenon of propagation of the needling sensation.

The summary of the knowledge and techniques of acupuncture contained in the Neijing signifies that acupuncture had developed into a unique and indispensable therapy to Chinese medicine, playing a great role in the development of the Chinese medical fundamentals.

In or around the 1st Century BC there appeared a book that was a supplement to the Neijing. It is entitled Nanjing (Classic of Medical Catechism), whose authorship is ascribed to Qin Yueren. This book describes the concept of the Eight Extra-Channels, and puts forward the theory of the Eight Influential Points that were not included in the Neijing. It, together with the Neijing, exerted much influence upon the development of acupuncture in ancient China.

In another book, the Li Ji (Book of Rituals), there is a passage that says that one should not take medicines from practitioners not versed in three major works; the Yellow Emperor's book on acupuncture and moxibustion, the Shen Nong's herbal, and the Su Nu's book on pulsation.24 The Li Ji is one of the important classics of Confucianism. It contains a vast amount of historical material, collected by disciples of Confucius, on the social circumstances, systems
and rituals of ancient China, before the Qin (221-207BC) and Han (206BC-220AD) Dynasties. From this book we know that acupuncture was well established in Chinese medicine before the 3rd Century BC.

The history of Chinese medicine is littered with examples of outstanding doctors who were versed in acupuncture. Of these, Chunyu Yi (approx 205BC - unknown), a native of Lin Zi, now in Shandong Province, was particularly famous for keeping clinical case records. In one case he reportedly cured the Prince of Zi-Chuan's severe headache by puncturing a point on the Foot-Yangming Channel. He passed his learning in Channels and Collaterals, acupoints, methods of using Bian needles and moxibustion to Gao Qi and Wang Wu, two physicians attached to Prince Ji Bei. They later also became skillful acupuncturists.25

Fu-Wong, another popular doctor, who lived in the 1st Century AD in South-West (Sichuan) China, achieved immediate effect in patients he treated with acupuncture. He wrote a book entitled Zhen Jing (Classic of Acupuncture) which was unfortunately lost. His pupil, Cheng Gao, who was also skilled in acupuncture, trained another, called Guo Yu, who became a court physician, (89-105AD) and who enjoyed a reputation of achieving wonderful results with acupuncture.26

Zhang Zong-Jing (approx 150-219AD), the “Medical Sage”, a native of Nen-Yang, now in He Nan Province, was particularly well-known for his book Shanghan Zabing Lun (Treatise of Febrile Diseases), one of the most influential books in the history of Chinese medicine. As well as adopting the theory of Channels in differentiating febrile diseases, the author recommended the use of acupuncture in combination with herbal medicine.

Hua To (approx 108-203AD), the “Father of Surgery”, from Middle-South China, the Bo County, now in An Hui Province, was well-known for both his great skill in surgery, and for achieving remarkable results with acupuncture by puncturing no more than two points. It is said in his biography that when he was treating patients, he would tell them the direction of the propagation of the needling sensation and bid them inform him when it occurred. He successfully treated the severe headache of the notorious historical figure Cao Cao, then Emperor of the Wei Kingdom. He has been attributed with a group of 17 extra points called Huatuo Jiaji points, which are still used today. These points are for indications such as chronic illnesses of the internal organs, neurasthenia, and disorders of the spine, etc. His pupil, Fan E, was also noted in acupuncture.27

Ge Hong (284-363), a native of Ju Rong, now in Jiang Su Province, a well-known Taoist physician, who was also known for alchemy, included much information on acupuncture in his work, Zhouhou Beiji Fang (Handbook of Prescriptions for Emergency).

Chao Yuan-Fang (550-630), in his well-known book, Zhubing Yuanhou Zonglun (General Treatise on Aetiology and Symptomatology of Diseases) included over 100 indications for acupuncture.

Sun Si-Miao (581-682), “King of Medicine”, a native of the County Yao, now in Shan Xi Province, emphasised the special function of acupuncture in treating diseases. He included in his monumental work Beiji Qianjin Yaofang (The Thousand Golden Remedies for Emergency) three large size charts showing anterior, posterior and lateral views of the body, with the 12 Channels marked out in coloured lines, and the eight extra Channels in green. He also included many extra-channel points based on his clinical experience. He coined the term “A Shi Xue” (Oh Yes Point, Non-fixed point). He summarised about 400 of the acupuncture prescriptions of his predecessors for the treatment of various kinds of illnesses. He discussed various topics relating to acupuncture, such as types of needles for different illnesses, skill of manipulation of the needles, indications, contraindications, duration of treatment, etc. He also discussed two methods of handling the accidental breaking of needles inserted into the body; one using ivory water to smear the acupoint, and the other a piece of magnetite to extract it out.

Three physicians of the 11th and the 12th Centuries, well known for their study of febrile diseases, paid much attention to acupuncture, and acupuncture in combination with herbal medicine, for the treatment of febrile diseases.

One of them, Zhu Hong (11th Century AD), a native of Wucheng, now Wuxing, Zejiang Province, held that in treating febrile diseases, one had to know Channels and Collaterals. In the year 1118 he compiled a work entitled Neiwai Jing Tu (Illustrations of the Internal and External Images of the Body).

The second physician, Xu Shuwei (1080-1154), a native of Zhenzhou Baisha, now Yizheng, in Jiangsu Province, not only adopted Zhang Zongjing's principle of using herbs, but also
succeeded and developed his method of using acupuncture for treating febrile diseases. He was the first physician to compile in verse recommendations on the suitability of acupuncture for treating febrile diseases.

The third, Guo Yung (1104-1187), originally a native of Luo Yang (He Nan Province), who later moved to Xiazhou, now Yichang, Hubei Province, revised and made supplements to Zhang Zongjing’s work on the treatment of febrile diseases with acupuncture.

The renowned representatives of the Four Schools of the Jin (1115-1234) and Yuan (1271-1368) periods, Liu Wansu (1120-1200), Li Gao (1180-1251), Zhang Congzheng (1156-1226), and Zhu Zhen-Heng (1282-1358), all adopted acupuncture, apart from herbs, in treating diseases.

Liu Wan-Su, for instance, concentrated on the Wushu Xue (Jing, Rong Shu, Jing and He), the five points located along each of the Twelve Channels from the distal ends of the limbs to the elbow or knee. He applied acupuncture in the treatment of illnesses based on his theory of “purging the heart of pathogenic fire” and “nourishing the kidney”.

Li Gao reported many cases that he had treated successfully with acupuncture, including anorexia, difficulty in swallowing (often caused by cancer of the oesophagus), vomiting, etc.

Zhang Cong-Zheng, in his book Rumen Shi qin (Confucius’ Duties to Their Parents), cited many cases that he had treated successfully with acupuncture, including malaria, long-standing intermittent headache, inflammation of the throat, sudden loss of vision, numbness of the arm, etc.

The Ming (1368-1644) and Qing (1644-1911) Dynasties also saw physicians who paid attention to acupuncture. Wu Kun (1552-1620), a native of the County Xi, An Hui Province, emphasised that a good doctor should combine acupuncture and herbs in his practice. Among his works, the Zhenfang Liuji (Six Volumes of Acupuncture and Herbs, 1618), includes comprehensive discussions on fundamental issues about acupuncture. In it, Wu Kun compares the relative benefits of acupuncture and herbal medicine by saying: “Up to now there are 1892 kinds of herbs that have been recorded in the herbal work. How complicated they are! As for needles, there are just nine. How few they are! There are people who have been taking herbal medicine for years without effect but improved immediately after being treated with acupuncture. With the treatment of acupuncture, those who had been confined to bed were able to stand up, and those who were crippled could walk upright. This is what we say that the large quantity of herbs may not be better than a few needles. However, acupuncture can easily treat cases of excess type, it is difficult to treat cases of deficiency type with needles. Cases of weakness and feebleness have to be treated with herbs of sweet nature. This is because the tonic effect of acupuncture is no better than that of herbs.”

3. Acupuncture - An Officially Recognised Special Branch of Chinese Medicine

From the 3rd Century AD onwards, acupuncture became a more specialised discipline in China with many outstanding specialists, and numerous valuable books devoted exclusively to acupuncture.

The first extant book devoted exclusively to acupuncture is the Zhenjiu Jiayi Jing (A Classic of Acupuncture and Moxibustion) compiled by Huangfu Mi (214-282) between 259 and 260. A native of Anding Chaona, now in Pingliang, Gansu Province in North-West China, Huangfu Mi was originally a literary man, who developed arthritis, and in an attempt to treat himself, began to study medicine, particularly acupuncture. As a result he became a well-known acupuncturist and compiled his book by summarising the accomplishments of his predecessors in association with his own clinical experiences.

In this book, the name and number of points of each Channel and their exact locations are defined and systematised, and the properties and indications of each point and the methods of needling are presented in great detail. The acupoints of the four limbs are arranged according to the Three Yin and Three Yang Channels of the feet and hands. The acupoints of the head and the trunk are described and discussed in relation to the head, face, chest and abdomen. The number of acupoints is increased from the 295 listed in the Neijing to 349. The treatments for over 160 internal, surgical, gynaecological and paediatric diseases are listed, including, as we understand from the descriptions in his work, febrile diseases, pain of various parts of the body, diarrhoea, vomiting, carbuncles, malaria, cholera, dysentery, goitre, insanity, manic depression, amenorrhoea, menorrhagia, and infantile convulsions. Huangfu Mi’s book exerted much influence in later times and was used as a required textbook for students.

As a special profession, acupuncture was often handed down through the generations. In the Xu
family, for example, acupuncture started with Xu Xi, who flourished in the early 4th Century AD, and continued to his descendent Xu Min-Qi in the 7th Century, all well-known acupuncturists. Similarly the Xi family all enjoyed good reputations as acupuncturists, starting with Xi Hong (probably 11th Century) and continuing to the family’s twelfth generation.

Historical documents support the contention that, probably due to its wide therapeutic range and good results, acupuncture was popular with all social classes, including high government officials and the imperial court. The annals of the Tang Dynasty contain stories about Zhen Quan (541-643), a well-known physician and acupuncturist, who cured the governor of Lu Zhou (now in Shandong Province) of severe shoulder trouble that so much affected his arm he could not draw a bow. When Zhen Quan was summoned, he told the governor to face the target with bow and arrows in hand and try to shoot. As the governor did so, Zhen Quan punctured the Jian Yu point on his shoulder and instantly the arrow hit the target.

Zhen Quan also treated another prefecture governor called Cheng Jun-Chou at Shen Zhou (now in He Bei Province), who suffered from an acute swelling of the neck and inflammation of the throat, and who had not been able to swallow food or drink for three days. When Zhen Quan punctured the Shang Yang point at his right hand he rapidly felt much relieved and was able to take food and drink as usual the next day. Zhen Quan was so famous that, in the year 643, the Emperor Tai Zong paid a visit to his house and made him a high official. He was also appointed by the government to check and revise the acupuncture atlas. He wrote several books on acupuncture, which are now unfortunately lost.

Another story tells of a court physician, Qin Minghe (early 7th Century AD), who, in the year 683, was summoned to treat the Emperor Tang Gaozhong’s headache, which was so bad that the Emperor was having trouble with his vision. Qin Minghe diagnosed that the case was due to a wind devil that attacked the Emperor’s head, and declared that it could be cured by causing some bleeding of the head with acupuncture. The Queen shouted from behind a curtain that the physician should be beheaded, for the head of the Son of Heaven should not be bleeding. The Emperor said that the medical man should not be persecuted when he was discussing medical problems, and that the heavy feeling of his head was unbearable. He ordered Qin Minghe to carry out the treatment. Qin Minghe then cured the Emperor by puncturing the Bai Hui and Nao Hu points in his head.

As a result of its development and popularity, acupuncture was officially recognised by the Imperial Medical Bureau of the Tang Government, founded in the year 618, as an independent speciality. Among the four medical departments attached to this Bureau was a department of acupuncture with a professor, an assistant professor, 10 acupuncturists, 20 demonstrators and 20 students. This was the first official establishment for training acupuncturists in the history of Chinese medicine. Governments of later generations maintained the department, although it was recognised that most acupuncture training took place through apprenticeships and family teaching.

Chinese medicine and acupuncture was first introduced into neighbour countries in the 6th Century AD. In the year 552 the Chinese Emperor Wen, of the Liang Dynasty, presented to the Japanese Emperor Qin Ming an acupuncture book Zhen Jing. In 562, a Chinese man, Zhi Cong, originally a native of Wu (Jiangsu), brought Ming Tang Tu (Illustrations of Channels and Points) and other medical works to Japan. In 608, two Japanese monk pharmacists Hui Re and Fu Yin went to China to learn medicine. The health service regulations proclaimed by the Japanese government in 701, 702 and 718 were fundamentally based on the Chinese systems that had been stipulated by the Tang Dynasty, in which students of acupuncture were required to study Chinese medical classics, including the Zhen Jing.

The official attention paid to acupuncture in China and Japan, as well as other neighbouring countries, strengthened its position as an important and indispensable medical discipline, and promoted its development and spread to other countries of the world.

By the time of the Song Dynasty (960-1127) printing had developed in China, and engraved and typographic printing methods were used to print medical works. In 992 a 100-volume medical work, the Taiping Shenhui Fang (The Peaceful, Holy and Benevolent Prescriptions), was published. In 1057 the Song government established the Bureau for Revising Medical Works, which collated and published some of the medical classics like the Neijing, Zhen jiu jia Yi Jing, etc. Between 1111 and 1117 the Song Government published a monumental work, the Shengji Zunlu (General Collection for Holy Relief).
In 1023 the Song government ordered a court physician, Wang Weiyi (approx 987-1067), to revise and compile a work on acupuncture to verify acupoints and Channels. He spent three years on the task, and in the meantime had two life-size bronze acupuncture figures cast and inscribed with Channels and points. The book was entitled *Tong Ren Shu Xue Zhen Jiu Tu Jing* (Illustrated Classic of Acupuncture and Moxibustion Points as Demonstrated on the Bronze Figure), and it discussed the acupoints in detail and marked out a total of 359 points, clearly arranged on the fourteen Channels on the human body. It also described the depth for puncture of each point and the indications for its use. Wang Weiyi’s work did much to clarify a number of confusions that had arisen before the 11th Century about the points and Channels. Shortly after it was published in 1026, the work was distributed to every prefecture of the country as an official text and the contents of the book were engraved on two enormous stone tablets erected in the Song capital for all students to see and follow. The bronze acupuncture figures were used for teaching and examination of students. Students were asked to puncture certain points on the figure, which was filled with water and coated with wax. The accuracy of the student’s needling was thus easily determined by whether or not the water leaked out.

The popularity of acupuncture, and the attention paid to it at this time by the Chinese elite and the ruling class, is illustrated in the case of the Emperor Ren Zong. In the year 1034, the Emperor was sick and imperial doctors were having no success in treating him. A doctor named Xu Xi, a native of Kai-Feng, Central China, was recommended and summoned. He examined the Emperor and announced that he could cure him if he were allowed to insert needles between the external membranes below the Emperor’s heart. Court physicians thought the procedure extremely dangerous. Some of them, together with the court eunuchs, were obliged to test the method first on their own bodies. When it was observed that no harm was done, Xu Xi was allowed to proceed. The Emperor recovered. Xu Xi was handsomely rewarded and was appointed medical officer of the Imperial Medical Institute.

Regard for acupuncture reached new heights during the Ming Dynasty (1368-1644) when acupuncture and moxibustion were included in the 13 medical departments of the Imperial Medical Academy. In 1443 the Ming government recast the bronze acupuncture figure of the Song Dynasty, and renewed the engraved stone tablets of acupuncture. In 1406 Teng Hong et al compiled a 426 volume medical work under the patronage of Prince Zhu Su (unknown - 1425), the fifth son of the Emperor Zhu Yuan-Zhang. The work was entitled *Pu Ji Fang* (Prescriptions of Universal Relief). Within it a special section dealt with acupuncture and moxibustion. It summarised a vast amount of material on these subjects from related works of past dynasties.

Further evidence of official attention paid to acupuncture can be found in the preface of a
book, the *Shenying Jing*, written in 1425. The book was written by a well-known acupuncturist called Chen Hui of the early Ming Dynasty (14th Century), and was revised by his pupil Liu Jin under the patronage of the Prince Zhu Hong. The preface to the book was written by Prince Zhu Quan (1378-1448), the 17th son of the Ming Emperor Zhu Yuanzhang. It says:

"Since time immemorial, when medicines were not available, only stone needles and moxibustion could be used to relieve the people, and these were really the great way of medicine... I think although there are many kinds of good medicines, there is no quicker way for the treatment of diseases than acupuncture. Medicines treat disease by their nature and taste and their effect of smoothing the Channels and Collaterals progresses slowly, while acupuncture can promote the circulation of the blood and Channels in a quicker way... When one has contracted a minor illness in the night or during a journey when medicines are not available, acupuncture and moxibustion can be the only methods to meet an urgent need. This must not be ignored by the intelligentia of this world who want to relieve life."  

The main features of the works on acupuncture during the Ming Dynasty are:

a. Many are rich in references from related sources of the past, such as *Zhenjiu Daquan* (A complete book on Acupuncture and Moxibustion) by Xu Feng (15th Century); *Zhenjiu Juying Fahui* (Elaborated Collection of Essentials of Acupuncture and Moxibustion) by Gao Wu in 1529 - a compendium of the theories and experiences of various authors before the 16th Century combined with his own clinical experiences; *Zhejiu Dacheng* (Compendium of Acupuncture and Moxibustion) by Yang Ji-Zhou in 1601, which contains copious references of the past, annotations, commentaries on Channels and acupoints, and personal experiences of combining acupuncture with medicine. Because of its rich content it has been published 45 times since its first edition and translated into Japanese, as well as several Western languages, including German, French, and Spanish.

b. More works devoted exclusively to Channels and Collaterals, such as *Ling Shu Jing Mai Yi* by Xia Ying, *Jing Xue Hui Zun* by Ling Yun, etc.

c. Many more works in verse style on Channels, methods of needling manipulation, selection of acupoints, etc., which helped students to memorise the fundamentals.


In the early 17th Century a trend appeared among quite a few scholarly doctors whereby acupuncture, together with surgery, was regarded as an insignificant and petty skill that was inferior to herbal medicine.

In 1601 Yang Jizhou wrote a book, *Zhenjiu Da Cheng*. The preface to this book was written by Zhao Wenbing, a Supervising Censor of the Shan Xi Province, who had had a protracted case of "Wei Bi" (arthralgia-flaccidity syndrome), which, after having been treated by many doctors with medication of pills to no good effect, was cured by Yang Jizhou with just three treatments of acupuncture. In the preface Zhao Wenbing’s expressed his concern about the gradual loss of the tradition of the art of acupuncture over the past generations. He said: "All the ancient well-known physicians would, in the first place, use acupuncture to treat patients, and the Yellow Emperor’s work (*Neijing*) contains particularly detailed knowledge of this art. Those who are good at it can immediately cure difficult cases with quicker effect than that of medication. It is really a great pity to see that in recent years the art of acupuncture is becoming lost."

Xu Dachun (1693-1771), a well-known Confucian-scholar physician, in his book, *Yixue Yuanliu Lun* (On the Origins and Source of Medicine, 1757) regretted the loss of the tradition of the art of acupuncture and moxibustion. He said: "In their fully detailed discussion of the viscera, Channels, points, illnesses and other topics, the two classics, *Ling Shu* and *Su Wen* refer to acupuncture seven or eight times out of ten, whilst they refer to prescriptions and medicines only two or three times out of ten. This shows how much the ancients valued acupuncture. However, the practice of acupuncture is difficult, whilst the practice of herbal medicine is easy. And the patients prefer taking herbal medicines, and feel suffering from taking acupuncture. This is why in later times, the practice of herbal medicine has become popular and few people like to talk about acupuncture."  

Another noted acupuncturist, Li Xuechuan, in the preface of his work, *Zhenjiu Fengyuan* (Acupuncture with Easy Reach, 1817) expressed deep regret for the trend of paying attention only to herbal medical prescriptions and regarding
acupuncture and moxibustion as insignificant manual skills.

Nevertheless, during the early years of the Qing Dynasty (1644-1911), acupuncture and moxibustion were still included as an independent department in the 13 departments of the Imperial Medical Academy. And in 1742, in compliance with an imperial order issued by the government, acupuncture and moxibustion occupied a special section in the Yizong Jinjian (Golden Mirror of Medicine), a 90 volume work headed by Wu Qian and compiled by 80 staff. Being a good summary of the knowledge of acupuncture of all ages before the Qing Dynasty, this book was later used as a textbook for the students of the Imperial Medical Academy and enjoyed great popularity.

Unfortunately, in 1822 Emperor Dao Guang, in the second year after ascending his throne, issued an imperial edict stating that acupuncture and moxibustion were not suitable forms of treatment for a monarch, and should be banned forever from the Imperial Medical Academy. 48

There are no explanations for the Emperor’s edict. After considerable research, and judging by the social and political situation of the Qing Dynasty at that time, my primary view is that the edict was issued just for the Emperor’s personal safety.

Since the early 18th Century, during the reign of the Emperor Jia Qing (1796-1820), because of the feudal dictatorship and corruption of the Qing government, there had been a series of uprisings against the Qing monarchy. These uprisings had been organized in many parts of China by peasants of the Han nationality. The rebellion against the Qing government spread like a raging fire. In 1812 a religious sect called Tianli jiao established ties with members of the court, in order to make an attempt to capture the capital, Beijing. Eventually, two hundred peasants of the Tianli jiao were able to break into the Forbidden City, some of whom fought their way into the inner palace. The second son of the Emperor, Prince Dao Guang (whose name was Wen Ning), then a 31 years old man, joined the fighting with the palace guards and shot dead two rebellious peasants with his fowling piece. After fierce fighting the rebellion was defeated. 49 Nevertheless, the struggle against the Qing monarchy continued in many parts of China, both before and after Dao Guang came to throne. In 1803 Emperor Jia Qing had been attacked by an assassin. The assassin was a Han nationality cook who had slipped into the palace. The Qing monarchy was a minor nationality in China, and most of the doctors in the Imperial Medical Academy were of the Han nationality. It can be imagined, then, what state of fear, sensitivity and suspicion existed by the time the new Emperor Dao Guang came to the throne. It is likely that, for his personal safety, the Emperor was very suspicious of the use of needles, which were much thicker than the needles of our present time, and of moxibustion with fire, or of any treatment carried out by Han doctors. That is most likely the reason why he banned the practice of acupuncture and moxibustion from the Imperial Medical Academy.

Although the ban against acupuncture and moxibustion was limited to the court, by the second half of the 19th Century the general study and practice of acupuncture was at a low ebb. Acupuncture suffered a further set back when modern Western medicine began to be introduced into China, for many Western doctors, and most of the Chinese doctors trained in Western medicine, either ignored or looked down on traditional Chinese medicine, including acupuncture. Some Western doctors even described acupuncture as “the deadly needle, which is the favourite Chinese instrument of professional torture” and “the cold needle is a much more deadly weapon”. 48

By this stage, however, acupuncture and moxibustion had already arrived in Europe and the West. It was first introduced through reports by Jesuits in the 17th Century, and later by men like Willem Ten Rhine 44 and Engelbert Kaempler, both physicians working for the Dutch East India Company, who described their witness, by Japanese practitioners, of the practice of acupuncture and moxibustion. 45 From the 18th Century onwards, more doctors gradually paid attention to acupuncture, and thus it spread slowly though the West. In England, James Morris Churchill began to use acupuncture for pain control and published two books on acupuncture. 46 Also, Sir William Osler, a well-known Western physician, who held a positive attitude towards acupuncture, recommended in his work, The Principles and Practice of Medicine, the use of acupuncture in the treatment of lumbago. He wrote:

“For lumbago acupuncture is, in acute cases, the most efficient treatment. Needles of from three to four inches in length (ordinary bonnet-needles, sterilised, will do) are thrust into the lumbar muscles at the seat of pain, and withdrawn after five or ten minutes. In many instances the relief is immediate, and I can corroborate fully the statements of Ringer, who taught me this practice,
as to its extraordinary and prompt efficacy in many instances. The constant current is sometimes very beneficial."

Sir James Cantlie, the second British Dean to the Hong Kong medical school for the Chinese, after having tried acupuncture, published, in 1916, an article in the China Medical Journal. In it he expressed his view that "the benefit of this treatment was apparent, and its repetition still further continued to do good", and that "there can be no doubt that as a rational treatment it has much to recommend it."33

Unfortunately, acupuncture was further rejected by the ruling elite and officials in China when a series of proposals were passed by the government in 1914 and 1929, trying to ban all forms of traditional Chinese medicine.34

Over the past 50 years in China, acupuncture, together with the whole system of traditional Chinese medicine, has been designated a national cultural heritage. Since the 1950s Chinese official policy has been to encourage the study of traditional Chinese medicine and the integration of the two medical systems, traditional Chinese medicine and Western medicine. The policy recommends that the two systems work together to develop and integrate the best of each to offset their respective weaknesses. Many new and promising achievements have been made in the scientific research of acupuncture.

Looking back on the long history of Chinese medicine, we see that the decline of acupuncture was temporary and short lived. As a well tried branch of traditional Chinese medicine, acupuncture's roots are deep and vital. Since the 6th Century AD, the knowledge and practice of acupuncture has been increasingly disseminated through various means of international communication. From its deep and vital roots, acupuncture has been able to bear more and more beautiful flowers and fruits, not only in China, but throughout the world.

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10. Su Wen: Yifa Fangyi Lun, Notes by Quan Yuanqi.
14. This book is also entitled Chunquoxuexuan, or Zuo's Chunqu, and was originally attributed to Zuo Quoming, a court historian (5-6BC) of the Lu Kingdom, but recent scholars hold that it was compiled by some unknown authors in the early Warring States (5BC). The book offers commentaries on the Chunqu, which was compiled by Confucius and contains a great deal of historical material.
16. Evidence of the appearance of medical profession is also seen from the Zhou Li: Tian Guan, in which physicians and witches are listed in different categories.
19. There appeared during this period several books dealing with acupuncture which have been lost, such as Jiu Zhen (Nine Kinds of Needles), also entitled Zhen Jing (Classic of Needles), which is mentioned 13 times in the Huangdi Neijing; Cia (Methods of Needling), and four times in the Neijing.
21. According to the studies on the origin of the Ling Shu by many scholars, a conclusion is generally accepted that it was originally called Jiu Zhan (The Nine Volumes), or Zhen Jing (Classic of Needling), or Jiujing Jing (The Nine Miraculous Classic), or Jiujing Jiujing (The Nine Miraculous Classic). These titles were recorded in quite a few ancient texts. For instance, in the Shanghuan lun by Zhang Zhongjing, it is called Jiu Zhan, in the Zhenjiu Jiayi Jing by Huangfu Mi, it is called Huangdi Zhenjing.
22. Ling Shu Jing, Hai Lun 33, proof-read edition, Hebei College of Traditional Chinese Medicine, Renmin Weishen Chuban She, Beijing, 1982, p. 511.
23. Ibid., Jing Mai, 10, p. 219.
25. See reference 17.
30. Chen Hui, Shenying Jing, preface 1477.
32. Ibid.
33. Ibid., vol. 76, pp. 2474-2477.
34. Ibid., vol. 47, Bai Guan Zhi, 129, pp. 1244-1245.
36. Ibid.
37. Ibid.
40. Wang Yinglin, Yu Hai, vol. 63: Yiven Yishu; see also the Preface written for the Tangren Zhenju Shuxue Tujing by Xia Song, 1026.
41. Ibid. See also Zhou Mi, Qidong Yeyu: Zhen Bian.
42. Ouyang Xuan et al. Song Shi, vol. 462: Xu Xi Zhan.
44. Chen Hui, Shen Ying Jing, Preface, 1435.