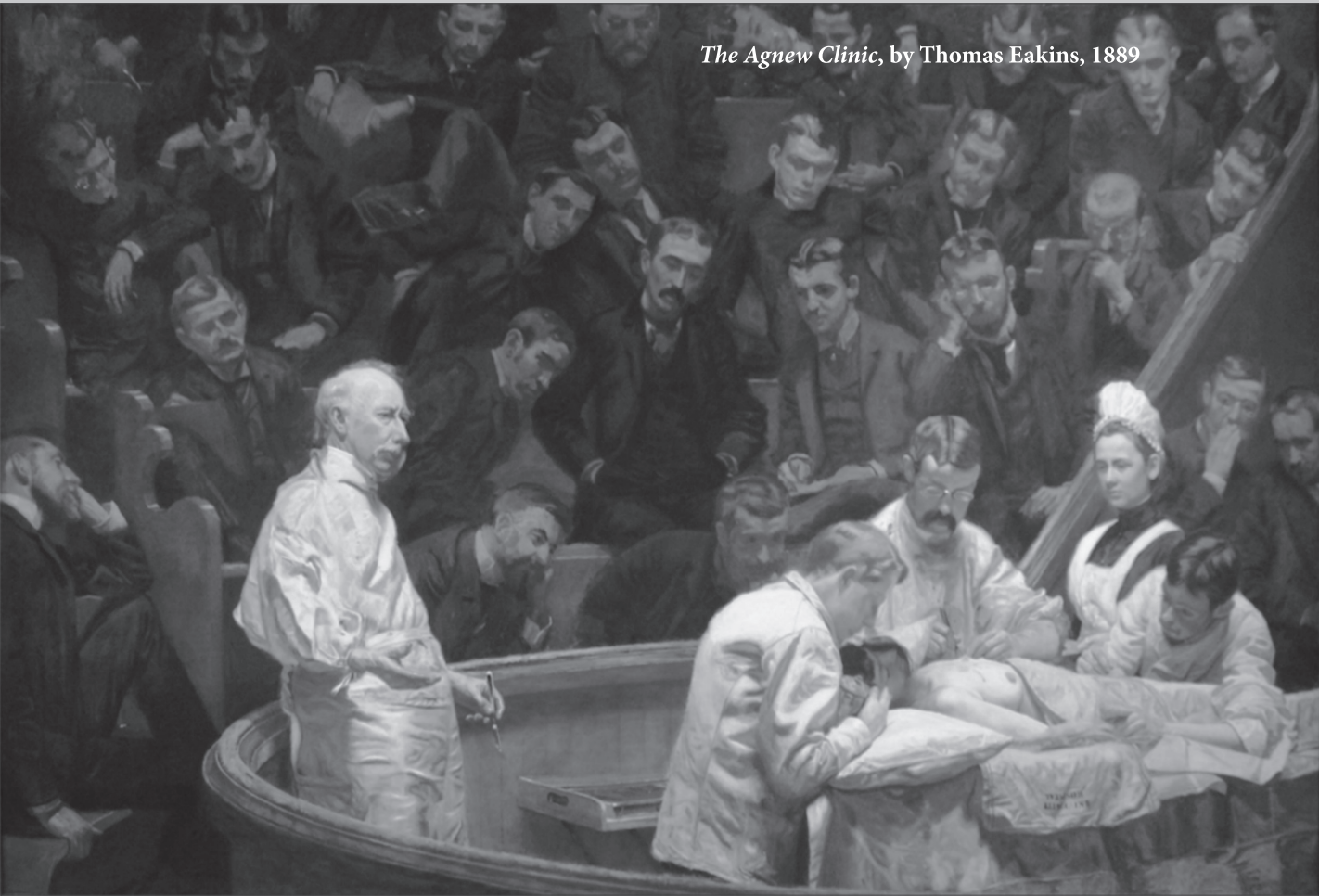


Unit **1** History of Medicine

We are not makers of history. We are made by history.
—Martin Luther King Jr.

The Agnew Clinic, by Thomas Eakins, 1889



Part 1 Academic Horizon

An Introduction to the History of Medicine^①



Medicine touches us all at some stage in our lives. Whether we live in a crowded high-tech industrialized society that uses the diagnostic and **therapeutic** tools of modern bioscience or in an isolated rural community where health care is perhaps less formal, less **intrusive** and less commercial, it is arguably medicine, rather than religion or law, that **dictates** the manner in which we are born, the quality of our lives, and the ease and speed of our deaths. Indeed, although modern populations are increasingly struggling to **cope with chronic** conditions, such as cancer, heart disease, **arthritis**, obesity and depression, we have come to rely heavily on the ability of medicine to help us live relatively happily, healthily and productively well into our eighties.

Given the extent to which it **penetrates** the physical, psychological and even spiritual **dimensions** of human existence, it is no surprise that medicine constitutes a vast **territory**. In the early 21st century, the practice of medicine **incorporates**, among other things, the **preservation** of health and the prevention of illness, the discovery and application of **pharmacological** tools to **combat** mental and physical disease,

New Expressions

therapeutic /ˌθerəˈpjʊ:tɪk/ *adj.* 治疗的；医疗的；治病的

intrusive /ɪnˈtru:sɪv/ *adj.* 侵入的；闯入的；侵扰的；烦扰的

dictate /ˈdɪkteɪt/ *v.* 支配；摆布；决定

cope with 处理；应付

chronic /ˈkrɒ:nɪk/ *adj.* 长期的；慢性的；难以治愈（或根除）的

arthritis /ɑːrˈθraɪtɪs/ *n.* 关节炎

penetrate /ˈpenətreɪt/ *v.* 渗透，打入（组织、团体等）

dimension /daɪˈmenʃn/ *n.* 方面；侧面；维度

territory /ˈterətɔːri/ *n.* 领土；版图；领地

incorporate /ɪnˈkɔːpəreɪt/ *v.* 将……包括在内；包含；吸收；使并入

preservation /ˌprezəˈveɪʃn/ *n.* 保护；维护；保存

pharmacological /ˌfɑːrməˈkɒlədʒɪkl/ *adj.* 药理学的

combat /ˈkʌmbæt/ *v.* 防止；减轻

① The text is adapted from the following source: Jackson, M. 2014. *The History of Medicine: A Beginner's Guide*. New York: Simon and Schuster.



the development of novel diagnostic and **surgical** techniques to identify and remove **tumors**, heal broken bones or restore blood-flow to **ailing** hearts, the **formulation** of policies designed to protect national and global public health, the use of **psychotherapy**¹ to reduce depression and anxiety and to **promote** happiness, the **delivery** of welfare services and medical support to mothers and their children, and the **alleviation** of pain and **disability**.

In the past, the **contours** of medicine have been even more **expansive**. In both Eastern and Western cultures, medicine has embraced religion, magic, **alchemy** and **astrology**, as well as the application of **herbal remedies**, the use of **healing rituals**, sacrifices and offerings to the gods, and the relief of poverty. Health care has been dispensed not only in **specialist** institutions, including hospitals, **workhouses**, **monasteries** and **hospices**, but also regularly in the community, on the battlefield and at home. Within these diverse environments, advice and **treatment** were delivered by a range of practitioners often trained in quite different ways and **possessing** different, although usually **complementary**, skills and knowledge. In sickness and in health, patients sought the services of **shamans**, **diviners**, **priests**, **midwives**, nurses, **physicians**,

New Expressions

surgical /'sɜːrdʒɪkl/ <i>adj.</i> 外科的; 外科手术的	specialist /'speʃəlɪst/ <i>n.</i> 专家; 专科医生
tumor /'tu:mər/ <i>n.</i> 瘤; 肿瘤; 肿块	workhouse /'wɜːrkhaʊs/ <i>n.</i> (英国旧时的) 济贫院, 劳动救济所
ailing /'eɪlɪŋ/ <i>adj.</i> 有病的; 体弱的	monastery /'mɑːnəstri/ <i>n.</i> 隐修院; 修道院; 寺院
formulation /ˌfɔːrmjuˈleɪʃn/ <i>n.</i> (政策、计划等的) 制定, 制订	hospice /'hɔːspɪs/ <i>n.</i> 临终安养院
promote /prə'moot/ <i>v.</i> 促进; 推动	treatment /'tri:tmənt/ <i>n.</i> 治疗; 疗法; 诊治; 护理
delivery /drɪ'lɪvəri/ <i>n.</i> 传送; 递送; 交付	possess /pə'zes/ <i>v.</i> 有; 拥有
alleviation /əˌliːvi'eɪʃn/ <i>n.</i> 减轻; 缓和; 缓解	complementary /ˌkɑːmplɪ'mentri/ <i>adj.</i> 互补的; 补充的; 相互补足的
disability /ˌdɪsə'bɪləti/ <i>n.</i> (指状态、身心、学习等方面的) 缺陷, 障碍	shaman /'ʃɑːmən/ <i>n.</i> 萨满 (据信能和善恶神灵沟通、能治病的人)
contour /'kɑːntʊr/ <i>n.</i> 外形; 轮廓	diviner /drɪ'vaɪnə/ <i>n.</i> 预言者; 占卜者; 推测者
expansive /ɪk'spænsɪv/ <i>adj.</i> 广泛的; 全面的	priest /priːst/ <i>n.</i> (天主教、圣公会、东正教的) 司祭, 神父, 司铎
alchemy /'ælkəmi/ <i>n.</i> 炼金术	midwife /'mɪdwaɪf/ <i>n.</i> 助产士; 接生员; 产婆
astrology /ə'strɔːlədʒi/ <i>n.</i> 占星术; 占星学	physician /fɪ'zɪʃn/ <i>n.</i> 医师; (尤指) 内科医生
herbal /'hɜːrbl/ <i>adj.</i> 药草的	
remedy /'remədi/ <i>n.</i> 疗法; 治疗; 药品	
healing /'hiːlɪŋ/ <i>n.</i> 康复	
ritual /'rɪtʃuəl/ <i>n.</i> 程序; 仪规; 礼节; (尤指) 宗教仪式	

surgeons, **apothecaries**, and a **miscellany** of **itinerant** practitioners, **charlatans** and **quacks**. Historically, medicine has never constituted a **monolithic** system of knowledge and practice but has always been marked by a **vibrant** sense of diversity and **pluralism**. The task of **unraveling** the history of medicine is further complicated by the fact that medical theory and practice, as well as the **distribution** and patterns of disease, have been so deeply **embedded** in social contexts that the boundary between medicine and society has been **indiscernible**. In all ages and all cultures, the appearance, spread and control of both infectious and non-infectious diseases have been dictated by social, economic and cultural factors. At the same time, the practice of medicine has been a social **endeavor**, not only reflecting the norms and expectations of patients and politicians alike but also influencing the beliefs, **customs** and hopes of the sick, the healthy and their healers. Even in the modern era of **biomedicine**², when science appears to offer a more objective perspective on health and illness, scientific knowledge, clinical practice and health care policies continue to be determined by social and cultural factors as well as economic and political **expediency**.

There has been a tendency in recent times to **distinguish** rather deliberately between science and the humanities, as if they possess entirely different agendas and methods or **constitute** entirely different intellectual cultures. While science and medicine appear to offer more reliable **accounts** of the natural world and its problems, the

New Expressions

apothecary /ə'pə:θəkeri/ *n.* (旧时制药兼售药的) 药剂师, 药商

miscellany /'misələmi/ *n.* 杂集; 混合体

itinerant /ai'tinərənt/ *adj.* 巡回的; 流动的; (尤指为找工作) 四处奔波的

charlatan /'ʃɑ:rlətən/ *n.* 假充内行的人; 骗子

quack /kwæk/ *n.* 江湖郎中; 冒牌医生; 庸医

monolithic /'mɑ:nə'liθik/ *adj.* 整体的

vibrant /'vaɪbrənt/ *adj.* 充满生机的; 生机勃勃的; 精力充沛的

pluralism /'plʊərəlɪzəm/ *n.* 多元化, 多元性 (不同种族、不同政治或宗教信仰的多种群体共存)

unravel /ʌn'rævl/ *v.* 阐释; 说明; 澄清; 变得清楚易懂

distribution /ˌdɪstrɪ'bju:ʃn/ *n.* 分配; 分布

embedded /ɪm'bedɪd/ *adj.* 被牢牢地嵌入 (或插入、埋入) ……中

indiscernible /ˌɪndɪ'sɜ:rnəbl/ *adj.* 隐约的; 依稀的; 不明显的

endeavor /m'devər/ *n.* (尤指新的或艰苦的) 努力, 尝试

custom /'kʌstəm/ *n.* (个人的) 习惯, 习性, 惯常行为

expediency /ɪk'spi:diənsi/ *n.* 权宜之计

distinguish /drɪ'stɪŋɡwɪʃ/ *v.* 区分; 辨别; 分清

constitute /'kɒnstətʊt/ *v.* 组成; 构成

account /ə'kaʊnt/ *n.* (思想、理论、过程的) 解释, 说明, 叙述



humanities seem to deal only with subjective, and often **unverifiable**, aspects of personal and public life. As a result, historical, philosophical or **literary** studies of medicine and science have often been **divorced** from the pursuit of clinical knowledge, improved health policies and better treatments. For a number of reasons, it is a mistake to impose a **distinction** between medicine and history in this way. In the first instance, the **notion** of history has always been **integral** to clinical methods. From ancient to modern medicine, students have been taught to consider the patient's history from various perspectives: the history of current symptoms; the patient's past medical, **occupational** and social history; and the family (and increasingly this means **genetic**) history. Personal and biological, as well as collective and **psychosocial**, histories have thus been central to the processes of accurately diagnosing disease and formulating appropriate treatments and policies. Second, as both historians and doctors have pointed out, history also constitutes a **vehicle** for educating, inspiring and humanizing medical and nursing students who might otherwise **succumb** to the **brutalizing** effects of regular **exposure** to disease and death.

Perhaps more **contentiously**, research in the **medical humanities**³ allows us to recognize the power and limits of medicine and to **acknowledge** the cultural, social and political, rather than merely technical, obstacles to **health promotion**⁴ and disease prevention. By exploring the human aspects of medicine and tracing the development of medical theories, policies and institutions across time, medical history can reveal the manner in which medicine reflects and shapes far wider historical currents and the extent to which experiences of health and disease structure our lives. More

New Expressions

unverifiable /ˌən.verə'faɪəbl/ <i>adj.</i> 无法核实的；无法检验的；不能证实的	vehicle /'vi:əkl/ <i>n.</i> (赖以表达思想、感情或达到目的的) 手段，工具
literary /'lɪtərəri/ <i>adj.</i> 文学的	succumb /sə'kʌm/ <i>v.</i> 屈服；屈从；抵挡不住（攻击、疾病、诱惑等）
divorce /dɪ'vɔ:rs/ <i>v.</i> 使分离；使脱离	brutalize /'bru:təlaɪz/ <i>v.</i> 使丧失人类情感；使变残忍
distinction /dɪ'stɪŋkʃn/ <i>n.</i> 差别；区别；对比	exposure /ɪk'spəʊʒər/ <i>n.</i> 面临，遭受（危险或不快）
notion /'nouʃn/ <i>n.</i> 观念；信念；理解	contentiously /kən'tenʃəsli/ <i>adv.</i> 可能引起争论地
integral /'ɪntɪgrəl/ <i>adj.</i> 必需的；不可或缺的	acknowledge /ək'naɪlɪdʒ/ <i>v.</i> 承认（属实）
occupational /ˌɔ:kju'peɪʃənəl/ <i>adj.</i> 职业的	
genetic /dʒə'netɪk/ <i>adj.</i> 基因的；遗传学的	
psychosocial /ˌsaɪkou'səʊʃl/ <i>adj.</i> 社会心理的（指社会环境影响下的个人心理变化）	

broadly, while science can uncover many of the **mechanisms** underlying patterns of health and disease, it is the humanities that can more effectively reveal the meanings of our experiences of pain and suffering. Medical history and the wider humanities, like the **biomedical** sciences, should therefore be integral to our search for health and happiness.

Historians have approached the history of medicine in different ways. Some scholars have focused on **narrating** and celebrating great discoveries made by **pioneers** in the field or on the health and illnesses of key historical figures. In these stories of **progressive innovation**, the achievements of Hippocrates⁵, Galen⁶, Ibn Sina⁷, Ambroise Paré⁸, Andreas Vesalius⁹, William Harvey¹⁰, Edward Jenner¹¹, John Snow¹², Ignaz Semmelweis¹³, Florence Nightingale¹⁴, Joseph Lister¹⁵, Louis Pasteur¹⁶, Robert Koch¹⁷, Alexander Fleming¹⁸ and many others have taken center stage. Such tales of success are not without **merit**: They highlight the extraordinary contributions of doctors to the history of humankind and bring the drama and significance of medicine to the **fore**. At the same time, however, they often give **precedence** to the **accomplishments** of men over women, the traditions of the West over the East, and the importance of biological and technological, rather than social and cultural, factors.

By contrast, social historians have recently moved away from telling stories of **triumphal** progress towards an approach that emphasizes the historical **contingency** of medical knowledge and the cultural specificity of experiences of health and illness. In these histories, there is no **fundamental** or enduring truth waiting to be unearthed by **enlightened** scientists and doctors; rather, knowledge and practice are regarded as always

New Expressions

mechanism /'mekənɪzəm/ *n.* 方法; 机制

biomedical /ˌbaɪəʊ'medɪkl/ *adj.* 生物医学的

narrate /'næreɪt/ *v.* 讲 (故事); 叙述

pioneer /ˌpaɪə'nɪr/ *n.* 先锋; 先驱; 带头人

progressive /prə'ɡresɪv/ *adj.* 进步的; 先进的

innovation /ˌɪnə'veɪʃn/ *n.* (新事物、思想或方法的) 创造; 创新; 改革

merit /'merɪt/ *n.* 优点; 美德; 价值

fore /fɔːr/ *n.* 变得重要 (或突出); 起重要作用

precedence /'presɪdəns/ *n.* 优先; 优先权

accomplishment /ə'kɑːmplɪʃmənt/ *n.* 成就; 成绩

triumphal /traɪ'ʌmfl/ *adj.* 庆祝成功 (或胜利) 的; 凯旋的

contingency /kən'tʌndʒənsi/ *n.* 可能发生的事; 偶发 (或不测、意外) 事件

fundamental /ˌfʌndə'mentl/ *adj.* 基础的; 基本的

enlightened /m'laɪtnd/ *adj.* 开明的; 有见识的; 摆脱偏见的



shifting, and **contested**, products of socio-cultural and political forces. While such accounts of medicine and disease in the past effectively reveal the social **determinants** of health and healing, they tend to lose the sense of theater and urgency embedded in the practice of medicine and to ignore the extent to which both past and present populations have routinely depended on medicine to forge a better world.

History not only reveals elements of continuity and change in medical theory and practice but also **exposes** the close relationship between personal experiences of illness, scientific knowledge of bodies and minds, and the broader social factors that influence our understandings of health and disease. In addition, historical research clearly **demonstrates** shifting attitudes to the complex interactions among patients, doctors and disease.

The changing successions of errors and victories constitute the very **essence** of our history, which leads us, by paths that are sometimes **luminous** and at other times barely **discernible**, to laws that today seem **impregnable** and yesterday seemed **vague** and distant; to doubts that yesterday were **dogmas**, to hypotheses that perhaps tomorrow will be truths. To study this process of evolution in medicine; to **scrutinize** the distant origins and structure of our knowledge, formed slowly and painfully through so many and such different paths; to recognize after strict analysis the part that was played in the formation of medical thought by **instinct**, fear, hope, and faith, and the influence on this thought of the great events of political and social history; to measure the effect of medicine, on its side, in determining the direction of the history of culture, art, politics, social life; to endeavor finally to tie the present logically and **harmoniously** to the past—this should be the program of the history of medicine.

New Expressions

shifting /'ʃɪftɪŋ/ *adj.* 移动的；狡诈的
contest /kən'test/ *v.* 争辩；提出异议
determinant /dr'tɜːrminənt/ *n.* 决定因素；决定条件
expose /ɪk'spəʊz/ *v.* 暴露；显露
demonstrate /'demənstreɪt/ *v.* 证明；证实；论证；说明
essence /'esns/ *n.* 本质；实质；精髓
luminous /'luːmɪnəs/ *adj.* 夜光的；发光的；发亮的

discernible /dr'sɜːrnəbl/ *adj.* 可识别的
impregnable /ɪm'pregnəbl/ *adj.* 坚不可摧的；牢不可破的
vague /veɪg/ *adj.* 不清楚的；模糊的；朦胧的
dogma /'dɒɡmə/ *n.* 教义；教理；信条；教条
scrutinize /'skruːtənaɪz/ *v.* 仔细查看；认真检查；细致审查
instinct /'ɪnstɪŋkt/ *n.* 本能；天性
harmoniously /hɑːr'məʊniəsli/ *adv.* 和谐地

1. **psychotherapy:** 心理治疗。心理治疗是心理学术语，指通过与精神科医生、心理学家或其他心理健康从业者交谈，以治疗心理健康问题。During psychotherapy, clients learn about their conditions, moods, feelings, thoughts and behaviors.
2. **biomedicine:** 生物医学。生物医学强调通过生物学研究验证的标准化、循证治疗方法，由经过正规培训的医生、护士和其他执业医师进行治疗。近一个世纪以来，生物医学一直是西方的主导医学体系。Biomedicine is a branch of medical science that applies biological and physiological principles to clinical practice.
3. **medical humanities:** 医学人文。医学人文学科使用跨学科研究来探索健康和疾病的体验，通常侧重于主观的或无形的体验。这种跨学科的属性使该领域具有多样性，并鼓励创造性的“认识论创新”。Medical humanity is an interdisciplinary field of medicine which includes the humanities (philosophy, ethics, history, comparative literature and religion), social sciences (psychology, sociology, anthropology, cultural studies and health geography) and the arts (literature, theater, film and visual arts) and their application to medical education and practice.
4. **health promotion:** 健康促进。根据世界卫生组织（WHO）的建议，健康促进是指促使人们维护和改善其自身健康的过程。Health promotion is the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.
5. **Hippocrates:** 希波克拉底，公元前 460—前 370；古希腊医生，被称为“医学之父”。希波克拉底订立的医师誓言成为后世医师的道德纲领，传至今日。Hippocrates of Kos was a Greek physician of the classical period who is considered one of the most outstanding figures in the history of medicine. He is traditionally referred to as the “father of medicine” in recognition of his lasting contributions to the field, such as the use of prognosis and clinical observation, the systematic categorization of diseases, and the formulation of humoral theory.
6. **Galen:** 盖伦，129—199（对其卒年存在争议，此仅为一种说法）；古罗马医学家及哲学家。盖伦全名为克劳迪阿斯·盖伦（Claudius Galenus），也被称作“佩加蒙的盖伦”（Galen of Pergamon）。其医学理论与希波克拉底相近，对西方医学影响巨大。Galen was a Greek physician, surgeon and philosopher in the Roman Empire. Considered to be one of the most accomplished of all medical researchers of

antiquity, Galen influenced the development of various scientific disciplines, including anatomy, physiology, pathology, pharmacology, and neurology, as well as philosophy and logic.

7. **Ibn Sina:** 伊本·西拿, 980—1037; 其阿拉伯名为阿维森纳 (Avicenna), 是11世纪的大医学家、诗人、哲学家、自然科学家, 被称为“世界医学之父”。Sina was a Persian polymath who is regarded as one of the most significant physicians, astronomers, philosophers, and writers of the Islamic Golden Age. He was a Muslim Peripatetic philosopher influenced by Greek Aristotelian philosophy.
8. **Ambroise Paré:** 安布鲁瓦兹·帕雷, 1510—1590; 法国外科医生, 被誉为“现代外科之父”, 因对枪炮火药伤的温和处理和截肢中的结扎动脉止血法而闻名。Paré is considered one of “the fathers of surgery and modern forensic pathology” and a pioneer in surgical techniques and battlefield medicine, especially in the treatment of wounds. He was also an anatomist, a member of the Parisian barber surgeon guild and invented several surgical instruments.
9. **Andreas Vesalius:** 安德烈·维萨里, 1514—1564; 法国著名的医生、解剖学家, 近代人体解剖学的创始人, 于1543年出版《人体构造》(*De Humani Corporis Fabrica Libri Septem*)一书, 与哥白尼齐名, 是科学革命的两大代表人物之一。Vesalius was a 16th-century anatomist, physician, and author of one of the most influential books on human anatomy, *De Humani Corporis Fabrica Libri Septem (On the Fabric of the Human Body in Seven Books)*. He is often referred to as the founder of modern human anatomy.
10. **William Harvey:** 威廉·哈维, 1578—1657; 英国著名的生理学家和医生, 他发现了血液循环的规律, 奠定了近代生理科学发展的基础。Harvey was an English physician who made influential contributions in anatomy and physiology. He was the first known physician to describe completely, and in detail, the systemic circulation and properties of blood being pumped to the brain and the rest of the body by the heart.
11. **Edward Jenner:** 爱德华·詹纳, 1749—1823; 英国医生、医学家、科学家, 以研究及推广牛痘疫苗、防止天花而闻名, 被称为“免疫学之父”。他为后人的研究打开了通道, 促使巴斯德、科赫等人针对其他疾病寻求治疗和免疫的方法。In the West, Jenner is often called the “father of immunology”, and his work is said to have “saved more lives than the work of any other human”.
12. **John Snow:** 约翰·斯诺, 1813—1858; 英国麻醉学家、流行病学家, 被认为是麻醉医学和公共卫生医学的开拓者。他最早提出预防霍乱的措施, 对1854年伦敦

西部西敏市苏活区霍乱爆发有突出贡献，被认为是流行病学研究的先驱。Snow is considered one of the founders of modern epidemiology, in part because of his work in tracing the source of a cholera outbreak in Soho, London, in 1854, which he curtailed by removing the handle of a water pump. His findings inspired the adoption of anesthesia as well as fundamental changes in the water and waste systems of London, which led to similar changes in other cities, and a significant improvement in general public health around the world.

13. **Ignaz Semmelweis:** 伊格纳兹·塞麦尔维斯，1818—1865；匈牙利产科医师，证明产褥热是由医生手部不清洁造成的，并率先提出了相关预防措施。Semmelweis is now known as an early pioneer of antiseptic procedures, described as the “savior of mothers”.
14. **Florence Nightingale:** 弗洛伦斯·南丁格尔，1820—1910；英国护士和统计学家。作为世界上第一个真正的女护士，她开创了护理事业。Nightingale came to prominence while serving as a manager and trainer of nurses during the Crimean War, in which she organized care for wounded soldiers at Constantinople. She gave nursing a favorable reputation and became an icon of Victorian culture, especially in the persona of “The Lady with the Lamp” making rounds of wounded soldiers at night. Recent commentators have asserted that Nightingale’s Crimean War achievements were exaggerated by the media at the time, but critics agree on the importance of her later work in professionalizing nursing roles for women.
15. **Joseph Lister:** 约瑟夫·李斯特，1827—1912；英国外科医师、外科消毒法的创始人及推广者。Lister promoted the idea of sterile surgery while working as a surgeon at the Glasgow Royal Infirmary by successfully introducing phenol (then known as carbolic acid) to sterilize surgical instruments, the patients’ skin, sutures and the surgeons’ hands. His work led to a reduction in post-operative infections and made surgery safer for patients, distinguishing him as the “father of modern surgery”.
16. **Louis Pasteur:** 路易斯·巴斯德，1822—1895；法国微生物家、化学家，因发现疫苗接种、微生物发酵原理及巴氏杀菌法而闻名，被誉为“细菌学之父”和“微生物学之父”（与罗伯特·科赫并称）。Pasteur’s research in chemistry led to remarkable breakthroughs in the understanding of the causes and preventions of diseases, which laid down the foundations of hygiene, public health and much of modern medicine.
17. **Robert Koch:** 罗伯特·科赫，1843—1910；德国医生、微生物学家，是结核病、霍乱和炭疽等传染病病原体的发现者，也是现代细菌学的主要创始人之一，被称为“微