

Miraculous Surgery in a Heathen Land: Medical Missions to Nineteenth-Century China

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Since the arrival of the Jesuit missionaries in the late sixteenth century, the practitioners of western medicine in China had always been associated with Christian missions. After the Sino-British Opium War, the Treaty of Nanjing was signed in 1843 opening five ports in China for commerce and the residence of foreigners. Since the issue of the imperial edict in 1724 that banned missionary activities in China, this was the first time that western missionaries could again extend their activities beyond Canton, the only trading port between China and Europe before the War. The Tianjing Treaty signed in 1860 that concluded the Anglo-French joint expedition led to the opening of more treaty ports, granted Chinese subjects the freedom to practise Christian forms of worship, and permitted European missionaries to travel to the interior of China. The missionaries soon realized that charitable medicine was one of the few effective means of attracting the Chinese. As a result, the number and activities of medical missionaries in China increased significantly.

This plate is a portrait of Thomas Colledge, a medical missionary and the Surgeon to the British Factory in China attending at his private Ophthalmic Infirmary in Macao, painted by the Irish painter George Chinnery. It contains several features of the medical missionary's self-presentation. In China, the medical missionaries often favoured the practice of eye surgery because it could produce the dramatic effect of restoring the vision, and hence it could facilitate the process of conversion. It also had the religious connotation of making a blind person see, of enlightening people. Behind the surgeon stood his Chinese assistant. The medical missionaries often trained young, bright native converts as their assistants, and the stories of loyal native assistants helping the missionaries when they were confronted with difficulties or dangers are a

common theme in missionary narrative. The Chinese boy, apparently the child of the woman, kneeled down and presented a letter of thanks to the surgeon. The child was barefoot which indicated that he was not from a rich family. What the surgeon had done was a charitable act of dispensing medicine to the needy.

An emphasis on surgery was common among Western medical men in China. In the 1830s and 1840s, the pioneering medical missionaries had already realized that surgery was a powerful means for advancing their cause. In 1846 the American medical missionary Peter Parker praised Chinese patients' endurance of pain and their ability to withstand shock. Another American medical missionary Robert Coltman also claimed that 'The Chinese bear surgical operations exceedingly well, and it is rare for high inflammation to follow operative interference'. This, the missionaries claimed, made Chinese people good surgical subjects. The medical missionaries were also very interested in patients suffering from huge tumours which they rarely saw in their home countries. The removal of large tumours often impressed the Chinese. The missionaries also favoured surgical treatment of bladder stone which could relieve the patients' pain dramatically. John G. Kerr in Canton was reputed to have operated on more cases of stone in the bladder than any living man at the time. Parker was proud that his successful performance of lithotomy 'arrested the attention of the people most powerfully'.

The medical missionaries knew well that their surgical practice was often perceived to miraculous by the Chinese. Coltman stated that 'A brilliant surgical operation is regarded by the Chinese as miraculous and is reported for miles away, increasing in the miraculous element with distance'. There were also theatrical aspects in missionary medicine. The medical missionaries often travelled around, and treated patients on the roadside. Coltman argued that 'A sure way to build up a fine practice and reputation in any given city is to itinerate through all the surrounding village, visiting and prescribing for the sick, drawing teeth, and performing minor operations, at the same time telling where you may be found in the city'.

However, in order to succeed in convincing the Chinese of the superiority of western medicine, the missionaries must acted with discretion. As Coltman said, 'Much care has to be exercised in the selection of cases for operation at first, as an unsuccessful or fatal operation in a

new field would have a very detrimental effect on not only the medical work, but all branches of missions work at that point'.

Another Medical practice that the missionary focused on was midwifery. Although the Chinese were reluctant to engage the services of foreign medical men, many British medical officers considered that a vast field of obstetric practice to be possible in China. Once the European medical man was summoned, he received great hospitality from the Chinese family. A. S. Dean, a British medical man, reported that '[w]hen the medical man enters the house of the better class Chinaman, he is received with the utmost civility'. After the practitioner delivered the woman, he was 'ushered to the door in the most courteous manner, and the friends of the patient thank him in the warmest terms for his assistance'. Some medical missionaries considered that the incompetence of the Chinese midwives provided a good opportunity for western medical men to overcome the prejudice of the Chinese people. They claimed that the reputation of European medical men was growing thanks to the difficult cases successfully delivered by them. There was every likelihood that western medicine would soon be accepted. What was at stake was not merely obstetric practice. Midwifery was in fact the Trojan Horse that could open the gate to the family. A western practitioner often had his first contact with a Chinese family by delivering the baby. Once he succeeded in doing that, he went on to attend the mother and the child, then secured the whole family as regular patients. Moreover, missionary work was often greatly facilitated after the medical missionary saved the life of the baby or the wife of local official or gentry.

For medical missionaries, the use of medicine was not limited to the cure of disease. Medical missions could, Parker said, 'enlighten the empire of China in the sciences of physic and surgery; andspread amongst the vast population of that country, the blessing of Christianity'. Moreover, they could also 'promote between them and Europeans an amicable and profitable system of commerce'.

However, in a strongly xenophobic country, the miraculous dimension of missionary medicine also caused unexpected backlash. The Chinese often identified the missionary medics as witch doctors. The Chinese anti-

missionary propaganda often claimed that the missionaries gouged out the eyes of the Chinese for their practice of alchemy, and took away the organs of the natives to produce magic pills and opium. Indeed the first year Manson arrived in Amoy there was rumour accusing the foreigners of dispensing magic, poisonous pills to the Chinese. Those who swallowed the pill could only be cured by the Missionary Hospital. Manson claimed that it was his successful treatment of patients suffering from elephantiasis that helped the Hospital regain its popularity. Many similar incidents were reported by the medical missionaries. Moreover, a few western men had been attacked by angry mobs when they tried to perform post-mortem on their deceased Chinese patients.

Historians such as Paul Cohen have pointed out that in nineteenth-century China, the Chinese gentry held strong anti-Christian sentiment, and most of the anti-missionary riots were instigated by the members of this class. There were various factors that contributed to the Chinese gentry's opposition to Christianity and missionary activities. As an educated class, the gentry was deeply immersed in Confucianism and considered themselves as the defenders of Chinese orthodox.

The Christian mission that preached against ancestral worship and other traditional Chinese customs was considered by the gentry as a threat to the Chinese tradition. Moreover, the social status of Chinese gentry was regarded as equal to local officials and they often acted as mediator between the local governments and the commoners. The foreign missionaries, who enjoyed extraterritoriality and other privileges, often behaved as equal to the gentry and the local officials. They often intervened on behalf of the Chinese converts in lawsuits and other disputes. Hence the missionaries became a competitor to the Chinese gentry, and threatened the latter's prestige and social status. As a result, many Chinese gentry resented the missionaries vehemently. The Taiping rebellion in the mid-nineteenth-century was another reason that the Chinese considered Christianity suspicious. The leader of the Taiping was influenced by Protestant missionaries and their religious tracts. In his dream, he had a vision that he was God's second son, the younger brother of Jesus Christ and his mission was to establish an Heavenly Kingdom in China. It is estimated that at least twenty million people died because of the Taipings' eleven-

On the other hand, not all the western medical men in China were happy with missionary medicine. Patrick Manson's criticism was representative. Manson was the founder of the London School of Tropical Medicine, and served as the medical advisor to the Colonial Office in his late career. He spent his early career in China as a medical officer of the Chinese Maritime Customs which was administered by British officers after 1860. At the treaty port Amoy, Manson worked at a Hospital supported by the Baptist missionaries and the European merchants. There he conducted his famous study of elephantiasis, and discovered that this disease was caused by filarial worms whose intermediate host was the mosquito. The details of Manson's filarial research need not concern us here. It is sufficient to point out that Manson was also a talented clinician and surgeon. He had very successful clinical practice in Amoy, and later in Hong Kong and London. Manson criticized the theatrical aspects of missionary medicine, suggesting that they only impressed the ignorant and failed to convince the educated Chinese. Manson stated: "We heal by working with nature. What is wanted for rapid and general conversion is a miracle. Something theatrical as the removal of a bladder stone from the bladder, the excision of a tumour and such like proceedings impress the ignorant more than something infinitely more difficult and wonderful, such as the elaborate diagnosis of some internal disease". Moreover, Manson was dissatisfied with the types of patients attracted by missionary medicine. In his hospital report in 1874, Manson lamented that although nearly 10,000 patients had received advice and medicine at the Hospital during the last five years, it still failed to convince the Chinese community of the superiority of western medicine. He blamed this on the practice of dispensing medicine for free. Manson argued that gratuitous medicine only attracted the native poor while making European medicine disreputable in the eyes of the Chinese gentry. He complained that "coolies, opium smokers, soldiers, peddlars, farm labourers, prostitutes, sailors, beggars, waifs and strays form the staple of our practice".

Similar criticism was voiced in Britain by the Lancet. In 1837 the Lancet already showed a sceptical attitude towards the London Missionary Society's appeal for sending more medical

missionaries to China. In an editorial entitled 'Medicine independent of Theology', published in 1855 the Lancet made clear the worry that the medical mission might again render medicine the handmaid of religion and revive theology's dominance over medicine. Manson's biographers accused the missionaries in Amoy of being "the rigid mouth-piece of dogmatic theology" and claimed that "it was a missionary of Western Medicine that Manson accepted himself". For secular medical men such as Manson and those who agreed with the Lancet, their mission was to establish the practices of European scientific medicine in China, and they modeled their professional identity upon that of their metropolitan counterparts. They intended to rid western medicine of the marvelous features and religious meaning which, from their point of view, was harming the western medical enterprise in China.