

ORIENTAL MEDICINES

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INTRODUCTION.

Medicine is the expression of a culture, perhaps the most complete and alive one due to its constant and multiple links with both Nature and society; we use Medicine to obtain information about what and how certain ancient societies thought and how they put that thought into practice. There have been cultures prior to what we call now Western cultures and whose Medicine constitute individualized practical-theory *corpus*. We cannot forget here the pre-Columbian Medicines, those from Asia Minor, and many others; the Eastern medical thinking and its implementation clearly represents those differentiated *corpus* which at present a non-negligible number of doctors recognizes and accepts in the Western world, where Medicine based on Western science and rationality – the Biomedicine- seems to possess even now the exclusive ethnocentric monopoly in order to explain and treat diseases.

Medicine was born with man and in Ancient times the art of healing was in the hands of priests and of philosophers as well, because theorize about philosophy was the previous step to any profession or activity; you had to study philosophy first to become a mathematician, a geometer, a doctor...As Roy Porter¹ says “religion and philosophy are products of the human endeavour to face body and soul, individually and collectively, to afflictions and death”.

Hippocratic was the concept of *vis naturae medicatrix*, the first truly natural therapy: the healing Nature. Allowing the body to express, to voice its complaints – symptoms viewed as defensive activity of the organism- and letting Nature correct, harmonize. The body tends to balance, to health because the organism is more than the sick body- which the doctor *momentarily* sees. To this doctor, when acting, health is

the basic concept which leads him or her. Without the notion of health the notion of sickness cannot be understood. Among other influences, naturalism- certain way of understanding Nature and whose explanations cannot be analyzed here- and its way of observation and analyzes gave birth to traditional Medicines among which Egyptian, Persian, Greek Roman, Indian, Chinese ones stick out as big conceptions of wisdom.

NATURAL THERAPIES

Therapy, the therapeutic, the treatment we are examining here is- to my view - a part and not the initial one, of a medical act; it is just a section non independent from the total process we call Medicine. We know that way before medical texts recorded on whichever material, there were healers, healers with apprentices (a good teacher when repeating the old is able to find something new in it)¹ therefore many of these techniques are the general result of empiricism that might find some shelter in repeated evidence although it is difficult to put on a same level as other therapies, being this a product of a reasoning whose theory focus is the base of the action. Therefore when we refer to therapies natural or not. Are we forgetting that any of them- according to current knowledge, has to belong to a system of thought that supports and at the same time explains itself? A therapy isolated from a global medical context lacks basis and without it, thinking of it as a healing chance is random and uncertain.

As H. Sigerist argued Medicine should be guided by a theory because if not medical doctrine cannot be transmitted from master to pupil² even though in biomedical training theorization is not specially highlighted. When teaching Medicine those subjects concerning philosophical formation should be recovered, taken into account again since they would help give foundation and explanation to the constant evolution of theoretical thinking paradigms.

Among natural therapies we can find undoubtedly effective Medicine modalities such as Homeopathy whose reasoning in an organicistic and mechanistic time, proposed an attitude where functionality and psychophysical corporal oneness of the patient is highlighted. Its remedies generally come from natural elements (vegetal, animal, mineral, all biologic components) partially or fully manipulated and diluted in

¹ Confucio VII,1. *Entretiens avec ses Disciples*. GF- Flammarion. Paris 1994, 36

³ H. Sigerist. *The Great Doctors: A Biographical History of Medicine*. Doubleday, New York 1912, 15

proportions which are inexistent or unable to be checked in Nature so can we say they keep their quality of being natural? This question does not attempt in any way to diminish the accomplishments of Homeopathy.

Same thing occurs with Acupuncture, one of the therapeutic variants of Chinese Medicine about which we should explain why placing a metal needle in a certain point in the skin is a *natural* way of treating diseases. This is not the case with moxibustion, Eastern as well, and whose natural core is accepted since it approaches different pathologies with no other intermediation but the heat coming from the combustion of dried and powdered leaves from a commonly used plant, however a diagnosis should be made and this treatment decided upon.

Then, to my understanding, it seems that we should clearly define what the term natural wants to imply so as to be able to differently name other healing practices which effectiveness and not efficiency is not being questioned but, we really reiterate the question about whether removing symptoms is healing. It is not wise to group techniques under the label of “natural therapies” as if they were similar therapeutic forms and not only similar but interchangeable ones since- in praxis- it is not unusual that if one fails then we use another one or we overlap techniques, this last one being a quite common practice which cannot be considered an integrative one. I believe it is not only a conceptual subject but a semantic one or about precision in the divulging vocabulary issue.

The adjective “natural” quite overused among us and, in my view, not clear enough to be used in Medicine has lead those doctors who prefer this professional variant over calling “naturist” the Medicine they carry out, and in doing so willing to differentiate themselves from other type of practitioners who call themselves “naturopaths” or having a degree in “naturopathy”, terms which is not clear whether they refer to natural diseases or to Nature ones? This statement suggests one question to me: is the current qualification of certain therapies as *natural* not lagging from post-renacentists schools in Modern Age, time of great breakthroughs in Botany and other natural sciences. It could also be thought that it is an attempt to separate them –almost underestimate them- from Biomedicine, realm where the drugs produced in laboratories, “artificially” if you will, is preponderant and enjoys an unbeatable social prestige and legitimacy.

CONFUCIUS AND SOCRATES.

All these reminds me that, since remote times, the proper adequacy between “names” and the “realities” they try to describe, is a Chinese civilization demand. At the end of the *Han* dynasty in II BC century as a legacy of the Confucius ethic endures the doctrine of the names *mingjiao* in which the interest was focused in the adequacy between the required functions and the innate ability to exercise them.

This Confucian ethics occurs in the well known answer Confucius gave to Jing the Duke of Qi a question on the art of governing. The Master answered “to rule is to persist in the righteousness.”³ where *zheng* rather than governing or managing suggests ordering the world like the doctor cares-cures a sick organism which restores its lost harmony in that way. This theory and then the required practice was named “name rectification” that is “that the sovereign acts like a sovereign, the minister as a minister, the father as father and the child as a child”⁵, this along with the previous postulate makes clear the necessity of certain adequacy between the name and the reality in a two-ways path, that is to say acting on the name to apply it just to the reality which represents it or deserves to do so and, at the same time, acting on the reality of the object in such a way it coincides with the recognized name.

This worry was not limited to Chinese history and philosophy; it is represented in the Greco Hellenic ancient times as well. In the *Cratilo*⁴ Dialogue, Socrates wished the words were in harmony with the things they designated although he recognized this was rarely accomplished, that the denomination is not only far from being perfect but also leaves a big part unjustified. A fragment of that Socrates dialogue has been preserved and he states:

”how realities are to be learned or discovered is, perhaps, too great for you or me to determine but it is worthwhile having at least reached to

³ *Analects of Confucius*.12/17 Translation and Notes by Simon Leys.W.W.Norton &Company.New York London 1997, 58

⁴ *ibidem*,12/11

this conclusion: that they are to be learned and looked for much better through themselves rather than through the names”⁵

This brief comparative recount between cultures helps me express my disagreement with the denomination “natural therapies” which names among technical practices of limited professional application other rather evolved Medicines, Medicine of ancient roots and which constitute in themselves individualized medical bodies, namely as an example in Far East the always alive and evolutive Indian and Chinese Medicines

EAST WEST.

The healing caring of the body is a cultural and civilization act, and so the initial medical stories from East and West show archetypal mythical components extracted from the observation of Nature (man in it) speculatively imagined in order to cover emotional or psychological targets seeking regularity: if a phenomenon was regularly repeated it could be controlled, anticipated, neutralized. That was the case with planetary movements, water, fire, predictable meteors, and even the unpredictable ones.

Given that taking care of the body, in whichever manner, is a cultural act, it is not appropriated to reduce its study or explanation to a mere catalogue of healing acts or exercises whether they are either spontaneous or deliberate. Every dynamism or movement comes from an intention, the same act can result in different intentions which should be interpreted through, and according to the life style each culture shows. Nowadays it is easy to access to all of them given the possibility of sharing and interchanging modern life allows. The great Eastern options, pre-cartesians, according to which body and soul are inseparable, still stand for themselves, therefore both conceptual positions diverge: one that considers the expansion of the human body (*athletics*: the Socratic ideal of considering the best man that one who manages to be good and beautiful: *kalós kai agathós*) as a necessary model that satisfies by itself and another one that states that material development is a hindrance for spiritual progress (*ascetics*). Both lead to different definitions of the concept of health although the training and exercising of the body is a comprehensive, natural therapeutic way, which

⁵ T.V. Smith. *De Tales a San Agustín*. Ediciones Peuser. Buenos Aires 1955, 147

in these two cases and by different motivations leads to different attitudes as well. Except among Stoics, ascetics had little evolution in the Greek Latin civilization, but its role has been relevant as a supportive base for the great ancient religions, Christianity being one of them. In the East simple acts such as dance, games, baths, meals, have had a sacred origin even though they are considered laical or secular nowadays due to the losing of their ascetic character, even though they are still carried out in a search which is very similar to the Western “*mens sana in corpore sano.*”

For the Chinese thought the body, unit of functions and constant transformations with clear patterns, doing and undoing itself (analogue and incipient concept of metabolism because what supports them are different concepts) this notion is also valid for other disciplines, for example mathematics, about which Chinese thought they could not strictly represent a world which evolves imperceptibly and constantly⁶ ; which is to say that they were able to capture the limit of the abstraction as a tool of knowing, useful for the technical matter but not for the essence being this one pure dynamism.

This dynamic idea of the development of the body which Chinese and Indian culture share, perhaps much later served as a base for the German *Naturphilosophie* that considers the organism as “ productivity and at the same time product through its intimate becoming “as well explains Montiel⁷ when saying that the pathology obtained from the observation of the patient (valuable in itself) cannot be the only starting point of the medical theory, Physiology, that is to say health, must be conceptually taken into account.

FEATURES.

Western and Eastern Medicine differ, as sample and example, in something as basic as the approach to the body constitution and the speculations about its functioning emerging from philosophical elements which might have been similar in the beginning to later evolve in a very different way in one hemisphere or the other.

Following Suzuki, we cannot forget that Eastern people love their so close Nature so much that they feel one with it and that Western people tend to draw away from it because they think it does not have much to do with human being except when it

⁶ J.C. Martzloff. *Les Mathématiques Chinoises*. En *Aperçus de Civilisation Chinoise. Les Dossier du Grand Ricci*. Desclée de Brouwer Instituts Ricci. Paris 2003, 479-484

⁷ Luis Montiel. *Filosofía de la Ciencia Médica en el Romanticismo Alemán. La propuesta de Ignaz Dollinger (1770-1841) para el Estudio de la Fisiología*. Medicina e Historia N70-1997

is to use this Nature in its desirable aspects or to modify those aspects deemed undesirable.⁸

Medicine in India is a complex of healing practices which origin can be traced back to 1500 BC. when the Arian invasion of Hindustan was registered.⁹

From those times come the texts which allow us to get to know the Ayurvedic Medicine (*veda* knowledge and *ayus* span of life) From religious ascetic books and from purely medical other ones we get the Vedic rites which teach us how we can optimally use that span of life given by Nature, how to behave in both private, and public life. *Ayurvedic* as such, is applied basically to medical issues; therefore it is justified to talk about *Ayurvedic Medicine* which would have more of the *diaita*-Greek diet than of modern Medicine.¹⁰

I stress the fact about respect for ancient times so as to describe the significance of using these long standing basic notions which are still in force. On the one hand we have the *Traditional Chinese Medicine* based in past times, in tradition, the best of which was figuratively already obtained, figuratively because what is transmitted *through* tradition is timeless and on the other hand, the Western Medicine which being devoted to progress still thinks that its golden days are still to come¹¹. We need to remember that tradition is not made of uses and customs, tradition is related by definition with *arche*, the principle.

Regarding denominations, by and by we are accepting that the adjective “traditional” which still qualifies the Chinese Medicine is losing supporters and reasons for it, even inside China where, for example, in Beijing the *Beijing University of Traditional Chinese Medicine* shortened its name to *Beijing University of Chinese Medicine*¹² It is clear that because of routine, ignorance, comfort, vested interests or due to differentiating arrogance - the only Medicine is the Western Medicine- the West is trying to keep the term “traditional” to name Chinese Medicine even though we cannot find any other Medicine *from* or *in* China other than the one that is practiced and exported today, which includes everything we currently know and everything that has

^{8 9} Daisetz T. Suzuki. *Conferencia sobre Budismo Zen en Budismo y Psicoanálisis*. México FCE 1982, 9-19

⁹ Jayanta Bhattacharya. *The Knowledge of Anatomy and Health in Ayurveda and Modern Medicine: Colonial Confrontation and its Outcome*. ea journal Vol.1Nº1 August 2009, 2

¹⁰ P. Lain Entralgo. *El Cuerpo Humano. Oriente y Grecia Antigua*. Espasa Universidad. Madrid 1987, 101

¹¹ Paul Unschuld. *Chinese Medicine*. Paradigm Publications. Brookline, Massachusetts. 1998, 84

¹² Ju-Yi Wang, Jason D. Robertson. *Applied Channel Theory in Chinese Medicine*. Eastland Press, Seattle 2008, 661

endured down the years. Anyway, Biomedicine also roots itself in long ago established traditions, relegated now though.

ENCOUNTER BETWEEN EAST AND WEST.

What the West found in the XIX century in its expedition towards the East, was the remainings of a multitude of techniques, practices, beliefs, superstitions, the whole based on an amazing array of medical concepts already registered since hundreds of years before in very explicative texts. These texts were quite similar to their Greek Roman contemporaries in the description of sufferings and the answers given to them, therefore it is difficult to understand the dichotomy, the opposition, the given “alternative” of being just complementary which intended to be established between Western and Asian Medicine both in the past and in present times, and the attempt to “integrate” Chinese therapeutic criteria in Western diagnosis modes.

Medicine is a word derived from Latin term *mederi*: to heal, to care, which is what Chinese, Japanese, Korean and Indian doctors do as well.

It is true that there is a quite spread stream in China which attempts to integrate both medical ways with texts where this possibility of interchange and technical combination is indicated, even though at the same time they make it clear that Chinese Medicine comes from a holistic concept of the body as a whole unit harmonious with the environment in contrast to the Western contribution, deeply related with the modern knowledge of science and technology.¹³

As an example I would say that the concept of *void* in the East is just crucial. Greeks described and accepted the notion of void as a dialectic of reality which explained the movement in the being/self, but in the West then and to the present day and in many different ways void is assimilated with nothing, being this latter concept horrifying in Nature, an inheritance from the Christian explanation according to which the Supreme Maker could not have left places without *creation* in them, everything was planned then, then, what about void, the nothingness?

For Chinese and Indians and for cultures related to both of them, the void is the engine, the motor of energies, the space-origin where everything that is possible flows,

¹³ Junwen Zhang, Yongquan Bai, Longshun Chen. *Integrating Chinese and Western Medicine. A Handbook for Practitioners*. Foreign Languages Press. Beijing 1993.

the point to come back to in order to rebirth. Without void there is no movement, there is no space available to conceive, to create, to be born, to grow. The four elements which according to Indians form the body: earth, water, fire, and wind have no real existence for Buddhists; we depend on them but they do not belong to us, everything is void including these four elements... That which Indians call wind, is in China called *qi*, breath, energy, it might be something material but lacking a specific visible form.

It is not the breath in respiration or in atmosphere but the strength manifested in daily life due to its power and effectiveness.¹⁴ As an example let us say that the acupuncturist Chinese doctor encourages the patient to remove all that presses or compresses the flowing of *qi* in his/her body and therefore prevents the void: wrist watch, socks, and belt. Because otherwise how can the doctor manipulate the circulating energy?

Therefore, if the initial knowledge obtained through the direct uptake of the human organism is elaborated in a different way, it is not surprising that the conceptual consequences before pathology-illness are also diversified. Both of them see and perceive the same but they process that which was seen and perceived according to their own culture so it becomes the same and the other at the same time. Acupuncture is a clear example of this, it gives us something almost amazing, being able to diagnose and treat internal disorders through actions taken on the external –skin, flesh- successfully moving into practice the theoretical conception of the body, whether healthy or sick, as a constant flow of inside-outside-inside relations.

Eastern scholars did the same as the Greek did and in the same coeval times that originated the naturalist thought (allegedly naïve in many aspects) they based their Medicine on: they watched the daily life of heaven and earth and translated the knowledge thus learned to the every day of human beings, both individually and socially. The concept originated there and now was also product of the influence of other cultures and notions survived or died according to their adequacy or lack of it, to the various and different schools of thoughts which allow the understanding of history, since they translate in their own particular way the conflicts from that time. During all times, social, material and legal conditions have had their influence on the different expressive forms, and the personal circumstances and characteristics of each thinker

¹⁴ Nan Huai-Chin. *Yi King Sagesse & Santé*. Gut Trédaniel Éditeur. Paris 1994, 93

have great importance for this matter: a speculative temperament is not the same as the one from a man of action: Galen was no Plato nor Confucius was Zhuang Zi.

The variation was in how they interpreted what was watched, what they looked for, which conclusions they came to, which of them were accepted and prospered and which were discarded and why. One example will clarify this point: Anaximenes of Miletus, versed on the influent Indo-Iranian culture of the times, along with Anaximander talks about a material principle which dominated *aer* (air) and which contained all the qualities of the mysterious *to apeiron* although it was not exactly our air, but rather a vapour-steam perceived when moving or felt as cold or hot. This eternal vapour is extended all over the universe and its capacity to move and change things is infinite, it is inexhaustible because *aer* is for the world as the breath is for the human being: vital, vivifying. This concept of air as a participant matrix in all things was unsuccessful among the Greek naturalism and also in its somehow derived *pneuma*, this latter notion was much more limited and was just applied to the human physiology and long survived in the Western medical thought.

This Greek *aer*, global and comprehensive notion of diffuse application in macro and micro cosmos was called *qi* in China, ideograph formed by *steam* and *food*, etymology similar to that for *physai ek ton perittomaton* (vapours from food) but the paths followed by both notions differed in many aspects. *Pneuma* left traces in Pneumology medical speciality which studies the pulmonary pathophysiology but in China *qi* continues today explaining the movements and biological dynamism in the whole universe: the energy, the vapour, the breath, the breathing, basic concepts to the human being existence from its conception as an individual being. In Chinese Medicine texts, written in Spanish, the *qi* notion that has permeated due to its conceptual roots the whole Chinese thought along the centuries, is used without translating once its meaning has been explained, as many other terms with difficult or impossible translation into Western languages.

The *qi* movements are biased in relative *yinyang* gradations that are complementary because they are opposite forces: there is no above without below. *Yinyang* represents the gradual developments of start-beginning, fullness and decadence and extinction in all aspects; from the most simple and obvious ones such as

the course of the Sun along the day or the year to more subtle dynamisms not immediately seen such as the ageing process.

This complementary opposites synthesized in the *yinyang* dynamism are not exclusive to Chinese philosophy, because India Yoga Schools as well also describe the *dvandva* opposite pairs among which the balance is sought. And so are formed pairs or couples constantly held by its dual relationships since they have something from earth and something from heaven (both matrix elements) and because every single thing arises due to the duality effect. Thus making evident some of the conceptual differences the East stands before the Western logic thinking for which opposites or differences are excluding. Western metaphysics points out that a phenomenon either exists or does not exist, nothing could be what it is and its contrary, antithesis are rigid: either healthy or sick and the Chinese consider that health-sickness is not an antithetic pair but a gradual expression of a process since each state, each thing, each phenomenon contains the kernel of *yin* or its contrary complement, the one from *yang*.

CONCEPTUAL CONTRASTS.

Consequences of this conceptual position, deeply rooted in the Eastern knowledge, applied in our case to Medicine, determine as an example that a disease will not be seen as the effect of a cause which took place in the past because each event is considered as the interaction of an active *yang* force and of a structuring-constructive *yin* whose predominant individual characteristics determine the Nature of the event. In this way the fact explained in the West as a product of a cause prior to it, in China it is thought as the interaction of the two opposite and complementary forces of the energy principle which concurs in the moment. That which among us is designed as object or thing in the East will be considered as the consummation of a series of past *actions* or *effects* that can only be found in the past: changes in the human body are the result of long standing functional or pathological developments¹⁵. Everything is interacting dynamism, interactive; *change is the only permanent thing*. The same energy can manifest itself by means of several different effects depending on its interaction with an

¹⁵ Manfred Porkert with Christian Ullmann. *Chinese Medicine*. Henry Holt and Company. New York. 1982, 68

object: the sun illuminates, evaporates, dries up, heats up, makes fruit ripe, darkens the skin, facilitates plants photosynthesis, i.e. it is the particularity of the object what defines the Nature of the interaction.

Our ancient Western thinkers, or nearly Western given the multiple and big influences that Greek and Helens received from Egypt, Asia Minor and from India as well had these reasonings and knowledges that over the centuries were changing their paradigms, their epistemology, from the Medicine by the patient bed side towards Hospital Medicine (anatomopathology, necropsies) up to the present laboratory (chemical and radiological) techno Medicine which turned allopathic doctors away from the initial naturalistic roots.

Somehow, Eastern Medicines keep the bidimensional scheme symptom→disease which occur at the same level since the diagnosis is based on the medical record without searching for a precise location of the diseases *inside* the body because organic pathology was not known, in any case the "pathological" ones in terms of quality or quantity were the energies. This may be one of the reasons why the Chinese did not develop surgery techniques, nor did the Indians and perhaps in this culture social issues such as castes system were added. In both civilizations philosophical or religious influences also set the pace of medical caring: Confucianism in China teaches that the body we were given by our parents should return *clean and whole* to the very much respected realm of death.

In India the pure/impure concept of Brahmanism (any contact with the body whether dead or alive was a transgression) structured the rites, sacrifices, and distinctions between communities and classes which is why outside the religious-elitist circles doctors-healers and ascetics coincided in the transmission of a practical knowledge over time.

The arrival in India of British Colonist (XVII century) led to a hospital and laboratory Medicine and began a search for a third dimension which added to the symptom-disease scheme the search for a sign, that is to say the pathology *inside* the body¹⁶. Sick people were no longer seen, instead sickness was seen.

¹⁶ Jayanta Bhattacharya. *The Knowledge of Anatomy and Health in Ayurveda and Modern Medicine: Colonial Confrontation and its Outcome*. ea journal Vol. 1N°1 August 2009, 8

MEDICINE: WESTERN-EASTERN.

It is not about comparing the origin-evolution of allopathic Medicine with the Eastern Chinese and Indian Medicines, without forgetting the very prominent Japanese, Korean and Tibetan (derived from Chinese one) Medicines. There were many points in common between them both in the philosophical and practical background which have been disappearing for all kind of reasons. For the Eastern practices the geoclimate differences mark the variants, apart from the undeniable mutual interinfluence of these aspects and therefore I do not wish to nor would it be truth, to present these Medicines from the East as a unity because although they share many approaches and -“de-approaches”-the assessment which can be done nowadays after long evolution and influences differ from one to the other. They are alive; their bases are still being interpreted both within each country and by scholars from other latitudes, which lead to considerate them as more or less successful autonomous medical *corpus*.

It is due to certain rigidity that it's not easily understood in the West that neither Chinese nor Ayurvedic Medicine –the most widespread among us- would deploy anatomical knowledge like the Westerns. As we said before, their formulations before a persona and its diseases are culturally different before Biomedicine, which isolates the health psychic and physical components as elements independent one from the other, since Western Medicine conceives the body as solid and self confined while in East Asia the body is fluid and penetrable, engaged in a continuous exchange with the natural and social environment.

The body-spirit duality is, in the Far East, a triad: body, soul (breath) spirit (consciousness) and the body is assumed to be a micro cosmos in harmony with the universe-macro cosmos. Yogis say that rather than having a body we *are* in a body. Thus explaining diseases (as Greeks did) through humours and organic halite and their way to combine with the outside and with the inside. And as Edelstein would state it is clear that such approach makes it unnecessary to take into account inner organs or their forms or characteristics¹⁷.

The human being interacts with Nature, and thus Chinese assimilate the energy from organs to that one of a natural component: the liver to wood, the heart to fire, the

¹⁷ L. Edelstein. *Ancient Medicine*. Temkim O. Temkim.L Editors. Baltimore and London The Johns Hopkins University Press 1987,248

spleen to earth, lungs to metal and kidneys to water. It is clear that in order to get to this during a long time there were many steps both conditioned and disputed by the already mentioned theoretical postulates from each school, by politics which wouldn't accept for example that certain dynasty has the fertilizing but at the same time flooding water element as a symbolic banner, instead of the fire element that illuminates although it scorches everything...

Same thing can be said about Ayurvedic Medicine, canvas on which all explanations and all battles among the different dissident schools are registered and where an influential religious aspect is added.¹⁸

These Medicines do not have the modern scientific sense, they are discourses on health, interpretative schemes on the relationship between man and universe¹⁹. It cannot be assured that they did not have a pre-scientific bias because as for the Greeks, their conceptions, as research topics, came from a repeated observation of nature and the order in it and from this observation they concluded that nature phenomena repeated themselves under the same conditions and without changes. The human spirit must conform to the experience to be able to mentally capture phenomena²⁰.

We have previously announced that the Eastern human body is not conceived in any likeness to the Western one... It is much more than structures, separated although linked the ones to the others by mechanical means which by facilitating its interfunctioning composed the Greek *soma*. The physical conception and the body approach in the East is a result of a difficult understanding among bio doctors who, many times before the comparative approach, capture and analyze and even “discover” their own anatomic concepts as if it were the first time. They teach us Bio Medicine – which is not only Anatomy even though from its conception other aspects of medical duty are derived- self limiting knowledge, with little openness and conceptual flexibility; and since we are beforehand predisposed to think that “we are right and our thing is the best one” when in the same faculties/schools it is intended to teach other Medicines, the student finds difficulties in reconciling both notions. An example: the liver, linked to the gall bladder is a viscera located in the right hypochondrium although for the Taoist Chinese *conceptually* and due to consistency with the philosophical

¹⁸ Jayanta Bhattacharya. 2009, 4

¹⁹ André Prost. Prefacio en Brelet, Claudine *Médecines du Monde*. Robert Laffont. Paris 2002, xvi

²⁰ Paul Unschuld. *Huang Di Nei Jing Su Wen*. University of California Press. Berkeley Los Angeles London. 2003, 323

foundation they are based on, the liver whose function is perceived throughout the whole body, is ideally located in the left hypochondrium; therefore it is difficult to understand certain organic functions which, being abstract, are also exchanged with those from other viscera. Both in the West and in the East, kidneys and liver are obviously and respectively related to the bladder and the gall bladder, but how can we accept, as the Chinese Medicine claims, that the heart is paired up with the small intestine and the lungs with the large one? However, we accept -with a condescending gesture though- that the ancient Greek Roman Medicine related organs because the concept of basic elements was not enough to explain the organicity and its interrelationships (not everything was structural matter) so it conceived various *dynameis* linked to the elements. And it also paired up the humours: blood with dark bile, phlegm with yellow bile because each humour had the quality of one of the elements of the *physis*: air, earth, water, fire²².

The Chinese doctor in order to research, understand and know philosophy, pathology and to take therapeutic decisions and evaluate its results uses:

a) the medical history in which it is relevant the time of the year and the weather both currently and when the discomfort started; b) general observation of the patient and specially of the tongue; c) palpation of pulse, thorax and abdomen and d) in the case of Acupuncture the palpation of points and meridians as well to precisely discern the quality and the quantity both of the patient and also of the disease *yinyang* because everything is increasing-decreasing dynamism, flowing, mutation, transformation, nothing stops in the Universe nor it does in the human being or in the dialectically qualified *yin or yang* processes, everything is dynamic. So we understand that inside the organism fluxes, gradations from most to least, from least to most, from inside to outside and from outside to inside are established. The same diagnosis is valid to treat with different methods, deeply interrelated and based on the same principles: herbs, other biological products, *qigong*, acupuncture, *tuina*, dietetics...

This description of a medical Chinese act does not seem complementary to one of allopathic Medicine but simply another way of approaching physiology which will consistently derive in its consequence: another therapeutic form.

It can't be ignored that part of the success and global diffusion of Chinese Medicine is due to the existence of diagnosis and therapeutic hiatus or voids for which

Medicine has no answers yet and it is understandable that necessity indicates and also allows paths so that therapies can introduce themselves through those voids, therapies that because of the instability and hesitations produced in qualifiers, are given adjectives like: “unconventional, complementary, alternative, natural, soft, sweet...” It should be noted that apart from the public acceptance of the so called natural, it is constantly increasing the quantity as well as the quality that enshrined scientific areas dedicate to investigation of the medical reality that other health-disease approaches offer with likewise different solutions. The results are becoming more and more encouraging because they facilitate the disappearance of pre-judices, the subject requires it.

I also have to mention that in our country the training deficiencies of those who practice natural therapies without a degree or qualification in the health field are slowly being corrected. Those who instruct this community are noticing that training must provide theoretical foundation so that the students are able to understand the basis of what they are doing and they have between their hands thus their curricula are incorporating subjects of both technical and ethical relevance. Because of everything here said, we think that the hierarchical rating of other medical forms different from Biomedicine is going to be fading away at the same pace we accept the latter is not the only valid one, because having scientific knowledge which explain the development of other forms of thinking about Medicine, it will get enriched by incorporating other methods. This imposes the inclusion in the various sanitary branches of academic teaching planning of all concepts and practical applications of that which, even without any justification, is unitarily presented as natural therapies. Natural Therapies which are, in essence, medical acts based on documented professional knowledge that gives responsibility- in all senses- to those who practice them. And thus it won't be necessary to look for appellatives, denominations, calificatives, because everything will be Medicine and its variants, since all things considered, there is no such thing as “no natural” Medicine; the singularity and specificity of Biomedicine lies in the method by which it produces knowledge, because its object is as natural as that from acupuncture or homeopathy.

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