

ANTOINE THOMAS, SI AS A «PATIENT» OF THE KANGXI EMPEROR (R. 1662-1722): A CASE STUDY ON THE APPROPRIATION OF THERIAC AT THE IMPERIAL COURT*

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ABSTRACT

In this article I shall concentrate on Antoine Thomas' illness and death (July 28, 1709) in Peking. This will serve as a case study to elucidate certain aspects of the role played by Jesuit medicine, i.e. Jesuit physicians and Jesuit drugs, at the court of the Kangxi emperor (r. 1662-1722), the first of the three great rulers of the Qing dynasty (1644-1911). As a first step the network of power, as reflected in the so-called medical palace memorials, will be presented in order to arrive at a more comprehensive evaluation of the medical involvement of the Jesuits, as practising physicians, suppliers of foreign drugs and as patients. It will be shown that the circumstances of Thomas' illness and death must be based on a political and social analysis of the role of court medicine as patronised by the Kangxi emperor. Secondly, the case study of Antoine Thomas will also allow us to reflect on the delocalisation and appropriation of theriac at the Chinese court - one of the foreign

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drugs in the supply of which Jesuits might have been participated. Last but not least, I shall introduce a number of references in archival documents which throw some additional light on Thomas' illness and death, and how they were perceived and dealt with in the imperial court.

KEY WORDS: Theriac. Kangxi emperor. Imperial Network. Court medicine. Court physicians. Jesuit physicians. Jesuit drugs. Western medicine. Power. Patronage. Medical palace memorials. Delocalisation. Appropriation. Medical diversity. Funeral ritual.

ANTOINE THOMAS, SI COMO «PACIENTE» DEL EMPERADOR KANGXI (R.1662-1722): UN ESTUDIO SOBRE LA APROPIACIÓN DE LA TERIACA EN LA CORTE IMPERIAL

RESUMEN

En el presente artículo me centro en la enfermedad y muerte de Antoine Thomas (28 de Julio, 1709) en Beijing. Lo cual servirá como estudio para aclarar ciertos aspectos del papel jugado por la medicina Jesuita, es decir, médicos Jesuitas y medicinas Jesuitas en la corte del emperador Kangxi (r. 1662-1722), el primero de los tres grandes emperadores de la dinastía Qing (1644-1911). Primero se presentará la red de poder, según se ve reflejada en los llamados memoriales de palacio de medicina, para poder llegar a una evaluación más profunda de la involucración médica de los Jesuitas, como médicos practicantes, proveedores de medicamentos extranjeros y como pacientes. Se demostrará que las circunstancias de la enfermedad y muerte de Thomas han de basarse en un análisis político y social del papel de la medicina de corte promovida por el emperador Kangxi. En segundo lugar, el estudio sobre Antoine Thomas también nos permitirá reflexionar sobre la deslocalización y apropiación de la teriaca en la corte china - uno de los medicamentos extranjeros en cuyo suministro posiblemente participaron los Jesuitas. Para terminar, presentaré numerosas referencias en documentos de archivo que arrojarán algo más de luz sobre la enfermedad y muerte de Thomas, y cómo fueron percibidas y tratadas en la corte imperial.

PALABRAS CLAVE: Teriaca. Emperador Kangxi. Red Imperial. Medicina de corte. Médicos de corte. Médicos Jesuitas. Medicamentos Jesuitas. Medicina occidental. Poder. Patrocinio. Memorias médicas de palacio. Deslocalización. Apropiación. Diversidad médica. Ritual funerario.

After An Duo 安多 [Antoine Thomas] came from the Western Ocean, he sincerely devoted his strength to matters of astronomy (*tianwen* 天文) and calendrical methods (*lifa* 曆法). Having heard now that he has already died this indeed fills my heart with great compassion.

Vermilion rescript of the Kangxi Emperor
KXMZ 24/6/48 [30/7/1709]²

² KXMZ 1449, p. 631.

[...] *Como en concha sutil perla perdida,
lágrima de las olas gemebundas,
entre el cielo y la mar sobrecogida
el alma cuaja luces moribundas
y recoge en el lecho de su vida
el poso de sus penas más profundas.*

Miguel de Unamuno

El mar ciñe a la noche en su regazo (Fragmento)

The arrival of the French Jesuit Mission in Beijing and its installation at the court of the Kangxi emperor in 1688, after the death of Ferdinand Verbiest, SI (1623-1688) activated a considerable propaganda machine, generated by members of the French Jesuit Mission in coalition with scholars of the *Académie des Sciences*.³ In spite of this flood of information, some episodes

³ The French Jesuit mission can be understood as an «enterprise» combining science and faith. It was an effort created by a triangular strategy established by the Royal Confessor, the Jesuit de la Chaise, the French king Louis XIV, and the members of the *Académie des Sciences*. The mission, known under the name of the «King's Mathematicians», and thus being conceived as scientific, succeeded in the establishment of French interests in China in breach of the stipulations established by the Treaty of Tordesillas, by which China was considered a zone of influence of the Crown of Portugal. Due to both its scientific roots and religious aims the French Jesuit mission produced an unprecedented output of publications edited by the Jesuits in Paris, with the *Académie* and the Church as main addressees. The overall scientific strategy of the mission, the selection of its members and the controversy over the violation of the boundaries set by the *Padroado* has been described in detail in Isabelle Landry-Deron (2002), «Les mathématiciens envoyés en Chine par Louis XIV en 1685», *Archive for History of Exact Sciences* 55.5: 426-430. The role played by the Jesuits as *correspondants* of the *savants* is treated by Antonella Romano (2000), «Entre collèges et académies: Esquisse de la place des jésuites dans les réseaux européens de la production scientifique (XVIIe-XVIII siècle)», in D.-O. Hurel and G. Laudin (eds.), *Académies et sociétés savantes en Europe*, Paris: H. Champion, pp. 387-407; id. (2005), «Les Jésuites entre apostolat missionnaire et activité scientifique (XVIe-XVIIe siècles)», in *Archivum historicum Societatis Iesu* 74: 213-236. For the Jesuit editors in Paris see Alexandre Brou (1934), «Les Jésuites sinologues de Pékin et leurs éditeurs de Paris», *Revue d'Histoire des Missions* 11: 556-563. In my Ph.D. thesis I have thoroughly investigated the selection and translation of medical information included by the Jesuits in their encyclopaedic works. See Puente-Ballesteros (2009), chapter 4. For an analysis of the mission's endeavours in the fields of mathematics and astronomy see Florence Ch. Hsia (1995), «French Jesuits and the Mission to China: Science, Religion, History», Ph.D. thesis, University of Chicago, UMI; id. (1999), «Some Observations on 'Observations': The Decline of the French Jesuit Scientific Mission in China», *Revue de Synthèse* 4.2-

of the Jesuit mission in China have remained somewhat obscure. One example, pointed out by Catherine Jami (2007), is the important work of a Jesuit of Belgian origin, Antoine Thomas, who was already in the court prior to the French mission.⁴ In recent years, although only a few European and Chinese researchers have investigated the life and work of Thomas, they have yielded exceptional results by analysing the dual role that Thomas performed as mathematician and geographer at the Kangxi court.

With regard to the state of the field in research into Antoine Thomas, we may distinguish a first phase marked by the general monographic works of Henri Bosmans, SI (1914) (1924), Anthony Florovsky (1951) and Yves de Thomaz de Bossierre (1977) which were based exclusively on European sources.⁵ In a second stage, with the discovery of new materials and by adopting a comparative approach to Western and Chinese sources, other researchers carried out an in-depth analysis of his scientific work performed at the Manchu court. Without going into the details of these individual investigations, I would particularly like to mention the invaluable work of Catherine Jami (2003) (2005) (2007) who aptly described Thomas as a *discreet mathematician*, due to the fact that his work had almost no impact on his contemporary European audience. Han Qi, together with Jami (2003) (2005), focused on Thomas' role as court mathematician, but by presenting new sources in

3: 305-333; and id. (2009), *Sojourners in a Strange Land: Jesuits and their Scientific Missions in Late Imperial China*, Chicago and London: The University of Chicago Press, pp. 93-110.

⁴ See Catherine Jami (2007a), «A Discreet Mathematician: Antoine Thomas (1644-1709) and his Textbooks», in Noel Golvers and Sara Lievens (eds.), *A Lifelong Dedication to the China Mission: Essays Presented in Honor of Father Jeroom Heyndrickx, CICM, on the Occasion of his 75th Birthday and the 25th Anniversary of the F. Verbiest Institute K.U.Leuven*, Leuven: F. Verbiest Institute K.U. (Leuven Chinese Studies; 17), p. 447. In fact, Antoine Thomas served as secretary of Ferdinand Verbiest, and was asked to draw up his necrology. Verbiest's death gave rise to the origin of the French Jesuit mission which was sent to the Chinese court in order to replace the scientific gap left by Verbiest. The necrology of Verbiest written by Antoine Thomas was transcribed by Henri Bosmans S.J. (1914), «La notice nécrologique de Ferdinand Verbiest, par son secrétaire, Antoine Thomas de Namur, vice-président effectif et président intérimaire de l'Observatoire de Pékin», *Annales de la Société d'Émulation de Bruges* 64: 102-133.

⁵ Yves de Thomaz de Bossierre, with a preface by Jacques Gernet (1977), *Un Belge mandarin à la cour de Chine aux XVIIe et XVIIIe siècles: Antoine Thomas 1644-1709; Ngan To P'ing-Che*, Paris: Les Belles Lettres (La Chine au temps des Lumières; 3); Anthony Florovsky (1951), «Maps of the Siberian Route of the Belgian Jesuit, A. Thomas (1690)», *Imago mundi* 8: 103-108; Henri Bosmans, S.J. (1924), «L'oeuvre scientifique d'Antoine Thomas de Namur, S.J. (1644-1709)», *Annales de la Société Scientifique de Bruxelles* 44: 154-181.

Chinese.⁶ Thomas' role as a geographer and historian in the service of the Kangxi emperor was described by Davor Antonucci (2007), Eugenio Lo Sardo (2003), and John W. Witek (2003).⁷ Beyond the analysis of the role displayed by Thomas as mathematician and geographer Claudia von Collani (2003) disclosed Thomas' participation in handling the daily financial matters of the mission and, especially, his role in the conflict arising from the «Rites Controversy» and the «disagreement» with the Pope's legate Thomas Charles-Thomas Maillard de Tournon (1668-1710).⁸

My contribution to the spectrum of research around the figure of Antoine Thomas is the description of Thomas as *malade*, or one might even say, «patient of the Kangxi emperor», particularly through the testimony provided by four documents, four medical palace memorials, three of them in Manchu (here in their Chinese translation) and one in Chinese.

The first aim of this article is to demonstrate that Antoine Thomas belonged to a privileged circle of ministers, advisors, officials, officers, relatives

⁶ Han Qi 韩琦 and Catherine Jami (2005), «Imperial Mathematics and Western Learning during the Kangxi Reign (1662-1722): Some New Evidence», in *Duoyuan wenhua zhong de kexueshi: Dishijie guoji Dongya kexueshi huiyi lunwenji* 多元文化中的科学史: 第十届国际东亚科学史议论文集 (History of Science in the Multiculture: Proceedings of the Tenth International Conference on the History of Science in East Asia), Shanghai: Shanghai jiaotong daxue chubanshe, pp. 3-11; Han Qi and Catherine Jami (2003), «Kangxi shidai xifang shuxue zai gongting de chuanbo: Yi An Duo he 'Suanfa zuanyao zonggang' de bianzuan wei li» 康熙时代西方数学在宫廷的传播: 以安多和《算法纂要总纲》的编纂为例 (The Circulation of Western Mathematics at the Court during the Kangxi Period: A Case Study of the Compilation of the *Suanfa zuanyao zonggang* by Antoine Thomas), *Ziran kexueshi yanjiu* 自然科学史研究 (Studies in the History of Natural Sciences) 22.2: 145-156; Han Qi (2003), «Antoine Thomas, SJ, and his Mathematical Activities in China: A Preliminary Research through Chinese Sources», in Willy Vande Walle and Noël Golvers (eds.), *The History of the Relations between the Low Countries and China in the Qing Era (1644-1911)*, Leuven: Leuven University Press, Verbiest Foundation, pp. 105-114.

⁷ Davor Antonucci (2007), «An Unpublished Manuscript by Antoine Thomas: The 'De bello Cam Hi imperatoris Tartaro: Sinici contra Tartaros Erutanos. Feliciter confecto anno 1697'», in Golvers and Lievens (eds.), *Op. Cit.*, pp. 15-28; Eugenio Lo Sardo (2003), «Antoine Thomas's and George David's Maps of Asia», in Vande Walle and Golvers (eds.), pp. 75-88; John W. Witek (2003), «The Role of Antoine Thomas, S. J. (1644-1709) in Determining the Terrestrial Meridian Line in Eighteenth-Century China», in Vande Walle and Golvers (eds.), *Op. Cit.*, pp. 89-103.

⁸ Claudia von Collani (2003), «Thomas and Tournon: Mission and Money», in Vande Walle and Golvers (eds.), *Op. Cit.*, pp. 115-135; and id. (1993), «Matteo Ricci in der Chronik der Ming-Dynastie: Der Bericht Joachim Bouvets S.J. an Antoine Thomas S.J. aus dem Jahre 1707», in *Monumenta serica* 41: 189-203.

and other *protégés* who received the special attention of the Kangxi emperor in the case of illness. Many members of this imperial network, no doubt, belonged to the political and military pillars of the rising and increasingly secure empire of the Manchu ruler.

Secondly, by taking Antoine Thomas' illness as a case study I shall discuss the appropriation of theriac at the Kangxi court. I shall show to what degree this drug was integrated into court medicine in practical and theoretical terms. What were the indications of this drug, when was it applied, and how complete was the process of its appropriation? This drug appears to have been controlled by the emperor, who seemingly was the main receiver and distributor of theriac. Thus, the Kangxi emperor, by means of his active intervention in the medical attention of his confidants or more specifically through the distribution of efficacious drugs not readily accessible to the general public, held in his hands an additional tool for reinforcing his eminent power over the elite selected by him.⁹

Thirdly, I shall consider the question of the possible Jesuit origin of theriac, which, via the prescription of a court physician, was distributed by the Kangxi emperor to Thomas, a member of the imperial network. This study of Thomas' illness is thus also a contribution to the history of the transmission of theriac to China, that is to the research carried out by Carla Nappi on its pre-Qing transmission as evidenced in pharmacopeias.¹⁰ In this case study I shall go a step further into it, as I shall analyse the delocalisation of theriac as a material object during the early Qing dynasty and especially — as mentioned above — the role of the Kangxi emperor therein. Who were the actors of this delocalisation, and through which channels did this drug arrive in China? I shall also introduce a description of the attempts at indigenisation carried out by the emperor, and will make a first approach to the question of how strict and pervasive was the emperor's control over the prescription and distribution of this drug.

Fourthly, I shall shed some new light on hitherto unknown aspects of the life of Thomas, on the last days of this Belgian Jesuit in Peking. I shall show him as a member of an imperial network which had been woven in the first person by the Kangxi emperor and which reveals that in many instances medicine, patriarchy and power spoke a similar language. I shall also briefly

⁹ Puente-Ballesteros (2009), chapter 2.

¹⁰ Carla Nappi (2009a), «Bolatu's Pharmacy: Theriac in Early Modern China», *Early Science and Medicine* 14.6: 737-764; and id. (2009b), *The Monkey and the Inkpot: Natural History and its Transformations in Early Modern China*, Cambridge, MA: Harvard University Press.

discuss the ritual precedents governing the funeral of Antoine Thomas, as a sign of imperial favour and appreciation, but also as a reflection of the strictly hierarchical structure and thus the limitations of the Jesuits' radius of action.

1. INSIDE THE IMPERIAL NETWORK: ANTOINE THOMAS, SI AMONG THE «PATIENTS» OF THE KANGXI EMPEROR

Before elucidating the events surrounding the death of Antoine Thomas, a few words need to be said about the sources available on the Chinese/Manchu side. For a proper contextualisation and thus fuller comprehension of the episode under discussion here, an understanding of the role and function of palace memorials in general and the so-called medical palace memorials in particular during the Kangxi period is fundamental.¹¹ The reason for this is that it was precisely through this means of communication that the illness and death of Antoine Thomas was reported to the emperor. Palace memorials were a private, confidential means of communication and control by the emperor, who in this way received first-hand information directly from his informants and thus circumvented ordinary bureaucratic routine and intervention.¹²

¹¹ For more details and a definition of «medical palace memorials» see: Beatriz Puente-Ballesteros (2011), «Jesuit Medicine in the Kangxi Court (1662-1722): Imperial Networks and Patronage», in *East Asian Science, Technology, and Medicine* n° 34, chapter 2 as well as Puente-Ballesteros (2009), section 2.1.

¹² Researchers in general agree on the private nature of the palace memorials of the Kangxi reign, and possibly also in the case of his successor, the Yongzheng emperor (r. 1723-1735). It was not until the Qianlong period (1736-1795) that this communication system became more bureaucratised, and its contents no longer enjoyed this exclusively private and confidential feature that had been characteristic of the closed network created by the Kangxi emperor. For a discussion of these issues see Silas H. L. Wu (1970), *Communication and Imperial Control in China: Evolution of the Palace Memorial System 1693-1735*, Cambridge, Mass.: Harvard University Press (Harvard East Asian Series; 51), p. 3; Jonathan D. Spence (1988), *Emperor of China: Self Portrait of K'ang-hsi*, New York: Vintage Books, p. 42; Pei Huang (1994), «The Confidential Memorial System of the Ch'ing Dynasty Reconsidered», *Bulletin of the School of Oriental and African Studies* 57.2: 335; Mark C. Elliott (2001a), «The Manchu Language Archives and the Origins of the Palace Memorial System», *Late Imperial China* 22.1: 46, note 65; Evelyn S. Rawski (2004), «The Qing Formation and the Early Modern Period», in Lynn A. Struve (ed.), *The Qing Formation in World-Historical Time*, Cambridge, Mass.: Harvard University Asia Center (Harvard East Asian Monographs; 234), pp. 221; Beatrice S. Bartlett (1985), «Books of Revelations: The Importance of the Manchu Language Archival Record Books for Research on Ch'ing History», *Late Imperial*

A striking point to be mentioned here is that palace memorials contain a substantial amount of information concerning the state of health of important officials, officers, imperial relatives and other persons most trusted by, or close to, the Son of Heaven.¹³ Why did the Kangxi emperor decide to use a private, confidential channel like the palace memorials for reports about matters of illness? The answer is quite obvious: For an emerging empire, as was the Kangxi emperor's (a foreign ruler over Chinese territory), illness or even death of these important actors could be interpreted as a sign of political or military weakness. Thus, illnesses of key ministers, advisers, officials and officers were not only a matter of personal crisis, as shown in the memorials' rhetoric demonstrating the closeness of the relationship between the emperor and some of «his patients», but often also constituted a political and administrative problem, insofar as they had to be made known in time to enable the ruler to find adequate replacements for these key positions, if necessary.

Two main categories of actors were involved in this imperial network: «informants» and «patients». «Informants» were men who had the right and privilege to submit palace memorials, and thus to report on such private and confidential matters as the illness of an official. «Patients» were those who were granted the favour of receiving the medical attention of the emperor himself. There can be no doubt that both informants and patients constituted a privileged elite, though not always for the same reasons. This is why I have defined the imperial network as having been composed of two different sub-networks. One was the «network of power» that comprised all those actors holding a high-level official position in the Qing government. This network becomes clearly manifest in the case of informants in both Chinese and Manchu palace memorials. In the case of patients mentioned in the Manchu palace

China 6.2: 27; and id. (1990), *Monarchs and Ministers: The Grand Council in Mid-Ch'ing China, 1723-1820*, Berkeley, Los Angeles: University of California Press, pp. 66-67; Pierre-Etienne Will (1972), «Transmissions secrètes et succession impériale à l'époque mandchoue», *T'oung Pao*, Second Series 58.1/5: 120-136.

¹³ My research was based mainly on an analysis of the two published series of Kangxi palace memorials, the one in Chinese (3,200 memorials) and the other in Manchu (4,297 memorials, available in Chinese translation). See *Kangxichao manwen zhupi zouzhe quan'yi* 康熙朝滿文硃批奏摺全譯 (Complete Translation of Imperially Rescripted Manchu Palace Memorials of the Kangxi Period), edited by the First Historical Archive, China, Beijing: Zhongguo shehui kexue chubanshe, 1996 (hereafter: KXMZ) and *Kangxichao hanwen zhupi zouzhe huibian* 康熙朝漢文硃批奏摺彙編 (Collection of Imperially Rescripted Chinese Palace Memorials of the Kangxi Period), edited by the First Historical Archive, China, Beijing: Dang'an chubanshe, 1984-1985 (hereafter: KXMZ).

memorials, a second sub-network was the «network of closeness». This was made up of a group of protagonists who did not hold an official position, but who shared some degree of closeness with the emperor. Among them we find female relatives of the emperor, eunuchs, female servants, retired officials as well as Jesuits and other Westerners. The distinction of these two sub-networks reflects the complexity of communication concerning medicine at the court.

The medical palace memorials show clearly that after having received information about the illness of his officials or other trusted or close persons the emperor did not remain as a passive observer, but actively intervened, especially by assigning physicians and drugs that were under his control and thus not easily accessible to other members of the empire's elite, let alone the common population. Among those drugs and physicians were Jesuit drugs and Jesuit physicians. No doubt the patronage and intervention of the Kangxi emperor within the framework of medical practice provided him with an additional tool for reinforcing his authority within the imperial network, especially by creating feelings of gratitude and indebtedness in the patients attended by him; and it thus contributed to the consolidation and legitimisation of his power as Son of Heaven at the top of the Qing political hierarchy.¹⁴

A quantitative analysis of the medical palace memorials¹⁵ highlights the clear Manchu (and other non-Han ethnic) identity of the imperial network of the Kangxi emperor, a Manchu ruler. We counted 377 medical palace memo-

¹⁴ This is a pattern that shows some similarities to, but also clear differences from, emperors of the Song dynasty, such as Taizhong (r. 976-997), Zhenzong (r. 997-1022) and particularly Huizong (r. 1100-1126). In the case of the Song emperors, they showed their personal interest in medicine not only through the distribution of remedies to their personal circle, but also through the promotion of institutions of public health, such as the Imperial Pharmacy and the system of Poor Houses. Moreover, these institutions fulfilled the Confucian ideal of caring for the people and spreading Imperial benevolence throughout the empire. But in the case of the Kangxi emperor, providing «his patients» with medical care showed his paternalistic attitude, and proved he was an ideal Confucian monarch, but directed only to «his public», his Imperial Network. Thus within his Imperial Network the Son of Heaven created bonds of gratitude, showing that patriarchy, medicine and power spoke a similar language. See Asaf M. Goldschmidt (2010), *The Evolution of Chinese Medicine: Song Dynasty, 960-1200*, London and New York: Routledge, pp. 20-25; and id. (2005), «The Systematization of Public Health Care by Emperor Song Huizong: Benefiting or Policing the Sick», in Jiang Xiaoyuan (ed.), *History of Science in the Multiculture: Proceedings of the Tenth International Conference on the History of Science in East Asia*, Shanghai: Shanghai Jiao Tong University Press, pp. 325-329.

¹⁵ I have differentiated the medical palace memorials in the following four ways: firstly there are memorials describing the episode of an illness of a patient or a group of patients, also

rials out of a total of 4,297 Manchu palace memorials, and 222 of them out of the 3,200 Chinese palace memorials. Although no great disparity exists in the number of Manchu and Chinese medical palace memorials, a great difference does arise when we consider the number of actors appearing in them as well as their ethnic origin. Thus, in the case of memorials in Manchu there is a total of 64 informants and 213 patients. These figures clearly contrast with the 28 informants in the Chinese memorials, and especially with the small number of only 34 patients. Regarding the ethnic origin of patients attended by the emperor 202 (197+5) were of Manchu or other non-Han ethnicity respectively, while only 45 (29+16) were Chinese.¹⁶ Whereas this pattern, beyond doubt, shows that the circle of power and closeness of the Kangxi emperor corresponded to the cultural diversity favoured by the emperor himself, at the same time it reveals a distinct Manchu identity.

The analysis of memorials also throws light on the institutional positions held by relevant informants and patients in Qing government and bureaucracy. The network of informants was composed primarily of members of the Central Government in Peking,¹⁷ who submitted 272 memorials out of 377. In this category the imperial family is particularly prominent: its members are the main informants with a total of 184 memorials out of 272. In fact, it is principally Yinzhi 胤祉, third son of the Kangxi emperor, who handed in 48 memorials on his own, and another 85 together with his male siblings. This data

including a medical report drawn up by physicians and attached to the memorial. Secondly, there are memorials which show how the Kangxi emperor attentively monitored the course of a patient's illness, but which do not contain medical reports. A third group of memorials are those containing vermilion rescripts from the Kangxi emperor: that is, his isolated comments regarding a patient's affliction, his own state of illness, or in which he ordered doctors to visit a patient, changed the therapeutic measures, commanded the provision of drugs, or asked about a therapy or drug unknown to him, [among other matters relative to medical practice.] A fourth group comprises those memorials that informed the emperor about the arrival of drugs, physicians, and foreign or unknown therapies. These reports were mostly answers to questions previously addressed by the emperor to the memorialist.

¹⁶ See Table 1.

¹⁷ This does not mean that the «informants», as members of the Central Government, were always in Beijing; they might have been sent on a special mission or, they formed part of the court on horseback, namely accompanying the emperor on of his many tours and excursions. This also holds true to some extent for the «patients.» On the other hand, patients affiliated to the Dependencies or Territorial Administration might have received imperial care while staying in the capital. For a description on the Imperial tours during the Kangxi reign see Michael G. Chang (2007), *A Court on Horseback: Imperial Touring & the Construction of Qing Rule, 1680-1785*, Cambridge (Massachusetts) and London, pp. 75-87.

manifests not only the confidential, but also the private nature of the information contained in these archival documents. Confidentiality was enforced by the use of Manchu, while privacy finds its expression in the fact that this was information exchanged between father (the emperor) and son(s) (Yinzhi et al.).

In comparison to Manchu memorials, the group of informants in Chinese memorials was smaller. Moreover, while the Manchu informants were concentrated in the Central Government, the Chinese memorialists submitted their reports from the Territorial Administration, and thus from outside of the centre of power. However, in the case of Chinese memorials a substantial degree of privacy can also be observed. In fact, in contrast with the Manchu informants who were mostly sons of the emperor reporting about many different patients, the Chinese wrote to the emperor directly about their own illnesses or indirectly about those of their relatives.

The constellation of patients outlined in the Manchu palace memorials is partly similar to what we have seen in the case of the informants. Both groups were basically members of the Central Government and came mainly from the imperial family. At the same time it has to be emphasised that another important institution was strongly represented. This was the military, more specifically the Manchu Eight Banners, stationed in the capital, and even more particularly members of the emperor's personal guards, belonging to the Manchu Upper Three Banners (*shang san qi / dergi ilan gūsa*), comprising the Bordered Yellow Banner, the Plain Yellow Banner, and the Bordered White Banner.¹⁸ In most of these cases the informant was Yinzhi. The pattern of the centre-based network of informants mentioned above is replicated in a similar manner in the case of the network of patients. This kind of parallel can also be observed in the Chinese palace memorials, namely, that both informants and patients came from the Territorial Administration and thus represented a network of a much more peripheral dimension.

Let us now consider the role of Jesuit medicine within this imperial network as outlined above. First of all, it appears that the Kangxi emperor quite strictly controlled the reception and distribution of Jesuit drugs.¹⁹ This seems to have been especially true in the case of Jesuit drugs, as the Jesuits or other foreigners brought them to China only in limited quantities, a part of which

¹⁸ For the Manchu terms of the division of the Banners see Mark C. Elliott (2001b), *The Manchu Way: The Eight Banners and Ethnic Identity in Late Imperial China*, Stanford, California: Stanford University Press, p. 79.

¹⁹ I shall deal in a separate article with the question of how strict this control was, and to what degree Jesuit medicine, i.e. physicians and drugs, was available outside of the court.

they offered to the emperor as a gift.²⁰ The limited circulation of Jesuit drugs in the court becomes even more obvious from the fact that it was effectively only one type of informant, one of the emperor's sons, who reported about the assignment of Jesuit physicians and drugs. For the 21 patients out of a total of 32 treated with Jesuit drugs and/or by Jesuit physicians the informants are sons of the emperor, especially Yinzhi 胤祉, his third son, who reported alone or together with one or several of his brothers (among them Yinsi 胤祀 and Yinzhen 胤禛 in 20 cases). In the remaining cases of patients it was Yinreng 胤禎 who did so. Moreover, Yinreng 胤禎 and another of the emperor's sons, Yinyou 胤祐, memorialised not about patients treated with Jesuit medicine, but about Jesuit drugs per se, for instance their arrival in China. Another important conclusion of my research on the role of Jesuit medicine within the Kangxi emperor's medical intervention is that relevant testimony appears almost exclusively only in Manchu memorials (32 patients in Manchu memorials compared to 4 in Chinese memorials), directed mainly to Manchu patients or those of other ethnicities (31 patients versus 5 Chinese ones; see Table 1). From this we can conclude that Jesuit medicine was part of the highly confidential and private nature of the Manchu medical palace memorials, characterised, as we stressed above, by the use of Manchu and by the direct line of communication between the emperor as a father and his sons.

The patterns shown for the medical palace memorials in general also hold true in the special case of the disease of Antoine Thomas. Thomas' illness is reported in a medical palace memorial in Manchu, the informant being Li Guoping, who held a position in the Central Government, specifically in one of the Six Ministries. Moreover, it was the emperor himself who was requested by the Imperial Palace Physician Ru Huang 茹璜 to assign a Western

²⁰ We have very few testimonies informing of the drugs the Jesuits carried with them to China, but in each and every case where some data is offered it becomes clear that only limited quantities were involved. An example of this is cinchona which was part of a number of gifts that four Jesuits, namely Ji Li'an 紀理安 (Kilian Stumpf), Su Lin 蘇霖 (José Soares), Bai Jin 白晉 (Joaquim Bouvet), and Ba Duoming 巴多明 (Dominique Parrenin), offered to the Kangxi emperor for his sixtieth birthday. Among these gifts were two small bags of cinchona transcribed as *jinjina* 金幾那. See Ma Qi 馬齊 (1717), *Wanshou shengdian chuji* 萬壽盛典初集 (Profuse Rituals for the Emperor's Birthday, First Collection), in *Yingyin wenyuange siku quanshu* 景印文淵閣四庫全書 (The Photolithographic Edition of the Complete Library of the Four Treasuries of the Wenyan Pavilion), Taipei: Taibei shangwu yinshuguan, 1983-1986, 654: 55, f° 14. Further down we shall see that quantities of theriac mentioned in archival documents were also very small

drug, theriac, that was under the emperor's control and was presumably of Jesuit origin. This shows that the Belgian Jesuit was integrated into the imperial network and thus belonged to a privileged group of patients monitored by the Kangxi emperor. As mentioned above, most of the patients attended personally by the emperor, like high officials, advisors and military personnel, were part of the network of power which held the empire together in political and military terms. There was, however, also a number of other actors who belonged to this privileged circle of patients, but due rather to their closeness to the emperor than to their participation in the exertion of real political or military power. This was the case of such patients as female imperial relatives, the Kangxi emperor's wet-nurse, palace eunuchs, and servants, as well as guests from other parts of All-under-Heaven, like the Jesuit Antoine Thomas.

TABLE 1. ETHNICITY OF PATIENTS MENTIONED IN MEDICAL PALACE MEMORIALS OF THE KANGXI PERIOD. SOURCE: PUENTE-BALLESTEROS (2011), TABLE 1

	Han	Manchu and other Ethnicities
Patients in memorials in Manchu	16	197
Patients in memorials in Chinese	29	5
Grand Total Patients	45	202
Patients treated by Jesuit medical practise (included in the above sum of memorials in Manchu or Chinese)	5	31

Another important facet is that Jesuit medicine can be considered part of the policy of promoting cultural and scientific diversity as adopted by the Kangxi emperor. It is perhaps not too far-fetched to conclude that Jesuit medicine was included within the Kangxi emperor's patronage of Western Learning (*xixue* 西學), that is to say the scientific, technical, and medical knowledge and expertise brought by the Jesuits to China. One of the main Jesuit actors who participated in the transmission of Western Learning to the emperor was indeed Antoine Thomas, as Catherine Jami and Han Qi have demonstrated.²¹ In the following sections I shall analyse the four palace memorials

²¹ The Kangxi emperor's support of Western sciences as expounded by the Jesuits in general, and the French Jesuits in particular, has been intensively studied, especially in the areas of mathematics and astronomy, focusing on the interaction and transmission of Jesuit sciences

that bear witness to the illness and death of this important actor in the first intensive phase of Sino-Western intercivilisational encounters.

TABLE 2. GENERAL INSTITUTIONAL AFFILIATION OF PATIENTS IN THE MEDICAL PALACE MEMORIALS IN MANCHU, KANGXI PERIOD. SOURCE: PUENTE-BALLESTEROS (2011), TABLE 6

Administrative Divisions	Number Patients ²²	Administrative sub-divisions	Centre-Periphery	Number Patients	Administrative sub-sub-divisions	Number Patients
Central Government	64	Imperial Family		30		
		Eunuchs, female servants		2		
		Imperial Household Department		6		
		Grand Secretariat		11		
		Six Ministries		6		
Censorate	0					
Jesuits, Westerners	9					
Military	125	Eight Banners	Capital	117	Ranking Officers	17
					Bodyguard, Vanguard and Guard	79
			Garrisons	7	Others	21
		Green Standards		1		
Territorial Administration & Dependencies	21					
Grand Total	210					

to China and the Kangxi emperor's patronizing of Western Learning. The final aim of this sponsorship policy was to establish an alternative science vis-à-vis Solid Learning (*shixue* 實學), a system of knowledge that had been inherited from Ming China and thus was purely Chinese. Therefore, this shift in policy can be considered, at least partly, a means to legitimise the recently established Qing dynasty — a means that was designed by the Kangxi emperor, who played an important role as the patron in control of foreign knowledge. See especially Catherine Jami (2007b), «Western Learning and Imperial Scholarship: The Kangxi Emperor's Study», *East Asian Science, Technology and Medicine* 27: 154-170; Han Qi and Jami (2003), pp. 145-156. Cf. also in general Hashimoto Keizô 橋本敬造 (1988), *Hsü Kuang-ch'i and Astronomical Reform: The Process of Chinese Acceptance of Western Astronomy 1629-1635*, Osaka: Kansai University Press.

²² The total number of patients is 213, but in three cases the position is not mentioned, nor could it be found. This is the reason why the grand total is 210.

TABLE 3. GENERAL INSTITUTIONAL AFFILIATION OF PATIENTS IN THE MEDICAL PALACE MEMORIALS IN CHINESE, KANGXI PERIOD. SOURCE: PUENTE-BALLESTEROS (2011), TABLE 8

Administrative Divisions	Number Patients ²³	Administrative Sub-divisions	Center-Periphery	Number Patients	Administrative Sub-sub-divisions	Number Patients
Central Government	9	Imperial Family		3		
		Eunuchs, female servants		0		
		Imperial Household Department		0		
		Grand Secretariat		5		
		Six Ministries		0		
		Censorate,		0		
		Jesuits, Westerners		1		
Military	9	Eight Banners	Capital	1	Ranking Officers	0
					Bodyguard, Vanguard and Guard	1
					Others	0
			Garrisons	2		
	Green Standards		6			
Territorial Administration & Dependencies	13					
Grand Total	31					

* With regard to the categorisation into «Central Government», «Military» and «Territorial Administration» I have followed: Charles O. Hucker (1985), *A Dictionary of Official Titles in China*, Stanford, California: Stanford University Press, pp. 83-96. For the definition of Dependencies see: Hippolit S. Brunnert and V. V. Hagelstrom (1912), *Present-Day Political Organization of China*, Shanghai: Kelly and Walsh Limited, pp. 441-442.

■ Includes patients treated by Jesuit medicine (Jesuit drugs and/or Jesuit physicians)

2. ANTOINE THOMAS' DISEASE: APPROPRIATION OF THERIAC IN THE IMPERIAL COURT

The death of Antoine Thomas took place in Beijing on July 28, 1709, as reported by Giampaolo Gozani, SI (1659-1732), Visitor in China, in his letter to the Father General in Rome on October 21, 1709.²⁴ Gozani explained

²³ The total number of patients is 34, but three of them have not been included because in two cases the positions are not known, while in one case, Gao Shiqi 高士奇, it is a case of a retired official.

²⁴ «Le 28 juillet 1709, après une longue maladie de plusieurs années supportée avec un patience de tous les instants, longanimité et admiration de tous, rempli des mérites, et muni

that Thomas suffered a long illness before his death, but without describing the course of the disease itself. At the same time Gozani underlined Thomas' efforts to support the mission for the advancement of the Christian faith in China. He also stressed the missionary's work as a great mathematician and the Kangxi emperor's appreciation of him as shown in the organisation of Thomas' funeral. Indeed, this funeral ritual was ordered to follow the precedent of that of another Jesuit formerly installed at the court, the Portuguese Tomé Pereira, SI (1645-1708).²⁵ We can also obtain corroborative evidence for what was mentioned by Gozani from the sources on which we have worked for this article, namely four palace memorials that I shall discuss and analyse in this article.

A first palace memorial was submitted by the Chinese official Li Guoping 李國屏, a Ministry Vice-director, on the 21st day of the sixth month of the year 48 of the Kangxi reign [27/7/1709]. In this document Thomas' (An Duo 安多, Chinese transcription of his name) illness is briefly described by Ru Huang 茹璜, physician of the Imperial College of Medicine, whose words are quoted by Li Guoping.²⁶ A second memorial written in Chinese by the physician Ru Huang himself on the 20th day of the sixth month of the year 48 of the Kangxi era [26/7/1709] or very shortly thereafter is attached to Li Guoping's Manchu memorial, in which Ru Huang gave a detailed description of Thomas' medical case. Because details about the illness are lacking in the report of Gozani, this medical report provides invaluable additional information. In the third palace memorial it was again Li Guoping, on the 24th day of the sixth month of the year 48 of the Kangxi era [4/7/1706], who reported Thomas' death to the Kangxi emperor, thus perfectly agreeing with the information given in Gozani's letter. As to the fourth memorial, the informants were Li Guoping and another official, Wang Daohua 王道化,²⁷ who repor-

des sacrements de la Sainte Église, a expiré doucement dans le sein du Seigneur, le Père Antoine Thomas, Recteur du Collège.» See ARSI Jap. Sin. 173, f° 173; translated from Latin to French by de Thomaz de Bossierre (1977), p. 142.

²⁵ Gozani's letter focuses on Thomas' efforts in spreading the faith in China, but does not include any mention of the importance of his mathematical work. His expertise in this field was indeed explicitly mentioned in the same letter as follows: «Petit ex universa Societate uiros P insignes praesertim in practica Mathematica.» See ARSI Jap. Sin. 173, f° 173v.

²⁶ See KXMZ 1445, p. 629. Because we do not have the original palace memorial in Manchu we cannot give his name in Manchu transliteration. However, in the Chinese palace memorial written by the physician Ru Huang the Chinese name of Thomas is An Duo.

²⁷ It is quite probable that Wang Daohua was the Chinese name of the Manchu official He-shi-heng, also called Wang laoye 王老爺. However, more research has to be done in this

ted on the 3rd day of the seventh month of the year 48 of the Kangxi era [8/8/1709] in more detail about the imperial sponsorship of Thomas' funeral. This information, too, is in exact agreement with Gozani's account.

In this section I shall focus on the first two memorials in order to analyse the process of appropriation of theriac in the Kangxi court. In the first memorial, Li Guoping reported the following, one day prior to Thomas' death, as recorded in Gozani's letter:

Li Guoping respectfully submits a Palace Memorial stating:

[...] Besides, on the 20th day of this month I received a report from the people of the Western Lands [Westerners], Su Lin 蘇琳 (José Soares, SI) and Ji Li'an 吉利安 (Kilian Stumpf, SI), as follows: «[Because] the state of An Duo's (Thomas') health is very serious, a [court] physician is requested.» I, your bondservant, and others have sent for a [court] physician to make a diagnosis. [Subsequently], the physician Ru Huang reported to us saying: «[Because] An Duo's illness is very serious, I now wish to request for *deliyage* and to use it with a variable quantity of *Lizhong tang* for medical treatment.» Together with the Chinese palace memorial of Ru Huang I respectfully submit this in a palace memorial in order to inform [the Emperor].²⁸

In the second document, the medical report of the Imperial Physician Ru Huang, we can read the following:

I, Ru Huang, physician from the Department for Prescriptions for Adults of the Imperial College of Medicine, respectfully report in a palace memorial: On the 20th day of the sixth month of the year 48 of the Kangxi reign-period [26/7/1709], the [Ministry] Vice-director Li Guoping sent for me to inspect the illness of the Westerner An Duo. His symptoms are insufficient *zhongqi* 中氣 (Middle Triple-Warmer), and spleen and stomach being depleted and weakened, with the result that he often suffers from hiccups, the *qi* of his four extremities [arms and legs] is reversed because of cold, his faeces are liquid and wet, his muscles are decreasing and becoming thin, and he has no appetite for drink or food. As the Six Veins [as shown by pulse diagnosis] are depleted and thin, his illness must be very serious. I, the physician, [therefore] request the Sagely Drug (*shengyao* 聖藥) *deliyage* 德里鴉嚙 to use it together with a variable quantity of *Lizhong tang* 理中湯 to save and cure him. Respectfully I report this in a palace memorial.

respect. See Antonio Sisto Rosso (1948), *Apostolic Legations to China of the Eighteenth Century*, South Pasadena: Perkins, pp. 286-287 and 305. See also Claudia von Collani (2005), *Joachim Bouvet, S.J.: Journal des voyages*, Taipei, Taiwan: Taipei Ricci Institute (Variétés Sinologiques New Series 95), p. 40, footnote 150 and p. 101, footnote 224.

²⁸ KXMZ 1445, p. 629.

[Ingredients of] variable proportion of *Lizhong tang* 理中湯: *fuling* 茯苓 (*Poria cocos* (Schw.) Wolf.), one *qian* 錢 and five *fen* 分; *baimu* 白朮 (*Shirakia japonica* Hur.), stir-fried with earth [*tuchao* 土炒?], two *qian*; *hezirou* 訶子肉 (*Terminalia chebula* Retz), kernels removed, one *qian* and five *fen*; *wuweizi* 五味子 (*Schisandra chinensis* (Turez.), Baill.), one *qian*; *baojiang* 炮薑 (baked ginger), eight *fen*; *rougui tan* 肉桂炭 (*cassia* charcoal),²⁹ eight *fen*; processed [?] *fuzi* (*fuzi zhi* 附子制; *Aconitum carmichaeli* Debx.), six *fen*; *zexie* 澤瀉 (*Alisma plantago-aquatica* L. var. *orientale* Sam.), eight *fen*; *mutong* 木通 (*Akebia quinata* (Thunb.) Decne.), one *qian*; ten *lianci* 蓮子 (lotus seeds), with the cores removed, used as a vehicle [for all the previous ingredients]; one slice of roasted ginger.³⁰

In the vermilion rescript to Li Guoping's palace memorial the emperor stated the following: «After you have received this document, I [the Emperor] order you, in obedience to this rescript, to go to see An Duo personally.»

The process of appropriation is clearly described in these two palace memorials that Li Guoping and Ru Huang respectively addressed to the Kangxi emperor. In the first memorial Li Guoping reported to the throne that he had sent a Chinese physician of the Imperial College of Medicine to attend Antoine Thomas in response to the request of two Jesuits, José Soares, SI (1656-1736) and Kilian Stumpf, SI (1655-1720). The seriousness of Thomas' health condition was beyond doubt, because, as a matter of fact, Thomas died the next day. In the second memorial, the physician Ru Huang asked the emperor for theriac in order to use it in Thomas' treatment. This shows that the emperor's intervention in court medical practice not only consisted in making available court physicians, whose service centred on the imperial family, but also in exerting control over the distribution of theriac as a kind of imperial prerogative.³¹ Indeed, Ru Huang explicitly asked the Kangxi emperor for theriac,

²⁹ The KXMZ has *neigui tan* 內桂炭, which in all probability is a misprint.

³⁰ See KXMZ 1445, p. 629. 1 *jin* 斤 = 16 *liang* (ca. 596.8 g); 1 *liang* 兩 = 10 *qian* (ca. 37.3 g); 1 *qian* 錢 = 10 *fen* (ca. 3.73 g); 1 *fen* = 10 *li* (ca. 0.373 g). Cf. Qiu Guangming 丘光明, Qiu Long 丘隆 and Yang Ping 楊平 (2001), *Duliangheng juan* 度量衡卷 (Volume on Weights and Measures), in Lu Jiayi 卢嘉锡 (ed.), *Zhongguo kexue jishushi* 中国科学技术史 (A History of Science and Technology in China), Beijing: Kexue chubanshe, p. 430.

³¹ The role and function of physicians of the Imperial College of Medicine is a field still largely unexplored. That this institution had originally to serve the imperial family is made clear by Chen Yongsheng 陈永生 and Zhang Sumeng 张苏萌 (1997), «Wan Qing xi yixue wenxian fanyi de tedian ji chuban jigou» 晚清西醫學文獻翻譯的特點及出版機構 (Characteristics of the Translations of Western Medical Works and their Publishers during the Late Qing Dynasty), *Zhonghua yishi zazhi* 中华医史杂志 (China Medicine History Magazine) 27.2: 76-77. For a first approach to Jesuit medical activities at the Kangxi court see Guan

and it is he, the ruler, who will assign it. In Ru Huang's memorial theriac is called *shengyao* or «Sagely Drug». The adjective sagely may have been used in two meanings. One the one hand it may have referred to the emperor and the drugs dispensed by him, as the Son of Heaven was also called the «Sagely Father» (*shengfu* 聖父). On the other hand, it may have connoted the «surprising» effectiveness of such drugs as theriac or the well-known Jesuit drug cinchona, which in palace memorials is also called by the same name, «Sagely Drug».³²

The palace memorial submitted by the court physician Ru Huang makes it clear that theriac had been almost completely appropriated by the Chinese side. Three arguments can be adduced for this: First, it was a Chinese physician of the Imperial College of Medicine who prescribed it, and none of the Jesuits, Jesuit physicians or Western physicians who already had been installed at the court and had participated in the prescription of this or other foreign drugs.³³ This was no isolated case, and hence shows that for the Chinese or Manchu side theriac did not have a specific Jesuit or Western identity. Second, the prescription of theriac was prompted by a Chinese type of diagnosis, in accordance with symptoms corresponding to the Chinese pathophysiology of spleen and stomach deficiencies: «His symptoms are insufficient *zhongqi* (Middle Triple-Warmer), and spleen and stomach being depleted and weakened, with the result that he often suffers from hiccups, the qi of his four extremities [arms and legs] is reversed because of cold, his faeces are liquid and wet, his muscles are decreasing and becoming thin, and he has no appetite for drink or food.» Here is not mentioned what was considered to be one of the main indications for the use of theriac, namely as a medicine against poisoning, as indicated in all European pharmacopeias. Moreover, the diagnosis also followed the well-known Chinese pulse diagnosis (*liumai* 六脈): «As the Six Veins [as shown by pulse diagnosis] are depleted and thin, his illness must be very serious.» Third, the drug is prescribed together with another

Xueling 閔雪玲 (1994), «Kangxichao gongting zhong de xiyang yishi huodong» 康熙朝宮廷中的西洋醫事活動 (Western Medical Activities at the Kangxi Court), *Gugong bowuyuan yuankan* 故宮博物院院刊 (Palace Museum Periodical) 1: 99-111; Dong Shaoxin 董少新 (2008), *Xing shen zhi jian: Zaoqi xiyang yixue ruhua shigao* 形神之間: 早期西洋醫學入華史稿 (Between Body and Spirit: A History of the Introduction of Western Medicine in China in its Early Period), Shanghai: Shanghai guji chubanshe, pp. 216-234.

³² See, for instance, KXHZ, 1154, vol. 4, p. 325.

³³ For an overall picture of the physicians installed at the court see footnote 61 in this article.

Chinese recipe, *Lizhong tang*, whose ingredients of Chinese origin Ru Huang detailed in his memorial, including the quantities of each of them.

The appropriation of theriac, however, was not total. This is made evident by the Chinese and Manchu names that were assigned to this drug, the Chinese name being *deliyage*.³⁴ This was a phonetic transcription of the foreign name of this drug, and thus marked it unmistakably as a substance of non-Chinese origin coming from foreign regions.

To sum up, in Ru Huang's memorial theriac can be identified as a foreign drug prescribed for the treatment of a foreign patient, Antoine Thomas. It was a drug which was under the control of the Kangxi emperor, and was prescribed by a Chinese court physician, who applied it on the basis of Chinese medical theory in accordance with pathological symptoms and pulse diagnosis. It was a drug that was prescribed together with another Chinese recipe, and, presumably, was not the first choice in a therapeutic itinerary, but a last resort when the illness reached a degree of utmost crisis. Its character as a last resort finds its corroboration in the death of Thomas shortly after his case had been mentioned in the relevant palace memorials, which indicates that his illness was already in a very serious stage. From all of this further questions arise: Where did the theriac assigned by the emperor come from? Who were the agents of the delocalisation of theriac? And were the Jesuits themselves (de-localised) agents in the transmission of theriac?

3. DELOCALISATION OF THERIAC: MEDICAL DIVERSITY AND ATTEMPTS AT INDIGENISATION AT THE IMPERIAL COURT

The case study of the illness and death of Antoine Thomas proves that theriac was imported to China during the Qing dynasty, starting in the Kangxi period at the latest. Besides the case of Thomas, theriac was assigned by the emperor to many other patients who belonged to his imperial network.³⁵ Theriac was a drug which, during that time, was possibly of Jesuit origin, but which was clearly overshadowed by Jesuit propaganda for another drug. Members of the French Jesuit mission especially praised cinchona by under-

³⁴ Only the Chinese translations of the Manchu palace memorials were at my disposal, but following the Chinese transcription *deliyage* would probably be written in Manchu as: 

³⁵ Cf. Puente-Ballesteros (2009), pp. 257-261.

lining the imperial favours received at the court for having used it for healing the Kangxi emperor.³⁶

The analysis of the medical palace memorials clearly demonstrates that theriac was prescribed more often than cinchona, both being assigned by the Kangxi emperor.³⁷ The application of these two drugs in China can be considered a phenomenon of the era of the emerging global economy, in which the Jesuits participated as transmitters of drugs from South America to Europe and beyond. But while in the case of cinchona the Jesuit background is well-known and this drug even bore the nickname «Jesuit bark»,³⁸ this is much less clear in the case of theriac, even though there was a sort of theriac which was known as *triaga brasilensis* and was produced in Brazil in the Jesuit College of Bahia.³⁹ Moreover, Jesuits are also mentioned as producers of other types of theriac in Europe which were dubbed *theriaca andromachi*. The formula was described in detail in a manuscript dated 1646 and now stored in the Jesuit Roman College.⁴⁰ According to Sabine Anagnostou the main agency distributing theriac produced in Brasil, but also European kinds, such as *theriaca andromachi* or Roman theriac, to other Jesuit pharmacies was the pharmacy of the Collegio Romano in Rome.⁴¹ Indeed, according to the Roman College's account books covering the years from 1622 to 1697 and from 1823 to 1848, theriac was a frequently prescribed medicine.⁴² As made clear by histo-

³⁶ See my forthcoming publication on the role of Jesuit drugs at the Kangxi court. This topic is also discussed in my Ph.D. thesis. See Puente-Ballesteros (2009), chapter 3.

³⁷ Puente-Ballesteros (2009), pp. 249 and 257-261.

³⁸ Research carried out on chinchona is abundant. See, e.g., Mauricio Nieto (2006), *Remedios para el imperio: Historia natural y la apropiación del Nuevo Mundo*, Colombia: Universidad de los Andes, p. 191; Londa Schiebinger (2004), *Plants and Empire: Colonial Bioprospecting in the Atlantic World*, Cambridge, Massachusetts, and London, England: Harvard University Press, pp. 214-215; Michael Worboys (1996), «Germs, Malaria and the Invention of Mansonian Tropical Medicine: From 'Diseases in the Tropics' to 'Tropical Diseases'», in David Arnold (ed.), *Warm Climates and Western Medicine*, Amsterdam-Atlanta: Rodopi, pp. 183-184.

³⁹ Cf. Nuno A. Pereira (1996), «Triaga Brasilica: Renewed Interest in a Seventeenth-Century Panacea», *Toxicon* 34.5: 511-516.

⁴⁰ BnI FG Ms. 1382.

⁴¹ Sabine Anagnostou (2003), «Vom römischen und brasilianischen Theriak», in C. Friedrich and S. Bernschneider-Reif (eds.), *Rosarium litterarum: Beiträge zur Pharmazie- und Wissenschaftsgeschichte. Festschrift für Peter Dilg zum 65. Geburtstag*, Eschborn: Govi, pp. 17-32; id. (2005), «Pharmazie auf internationaler Ebene: Die Apotheke des Collegio Romano vom 16. bis 18. Jahrhundert», *Geschichte der Pharmazie* 57: 57-63.

⁴² ARSI, FG 1143; ARSI, FG 1069.6.

rical incidents, theriac was a medicine administered by Jesuits with the justification that the benefits obtained by producing and selling it were in support of the poor strata of society. Several historical testimonies, particularly of the seventeenth century, exist revealing the conflicts between Jesuits and French pharmacists arising from competition over the production and distribution of theriac.⁴³

While it is clear that the Jesuits acted as transmitters of cinchona to the Kangxi court, this is less obvious in the case of theriac. However, it is quite probable that the role of the Jesuits as transmitters was also very important in the case of theriac—a drug which caught the medical interest of the Kangxi emperor, was integrated into court medical practice, and was eventually also prescribed to Antoine Thomas. So could it be that we are dealing with a medicine of possible Jesuit origin which subsequently fell under the emperor's prerogative of assignment, so that the Jesuits themselves had in turn to request it from the emperor for use in their own treatment? In order to answer this question, a brief account of the history of theriac in China is first given, followed more specifically by a presentation of the evidence of the ways of its transmission and the actors involved during the Kangxi reign.

The history of theriac began in ancient Greece, where it responded to the need for compounding a drug to treat poisoning, but which was later prescribed as a general tonic.⁴⁴ It was clearly related to court physicians, and this-

⁴³ Cf. J. Bernard (1893), *Les médicaments oubliés: La thériaque, étude historique et pharmacologique*, Paris: Libraire J.-B. Baillière et fil, p. 94. Bernard described how Pierre Dionis (1643-1718) in his well-known work *Cours d'opérations* (1707) denounced the Jesuits in the following way: «In Lyon, the surgeon P. Dionis says, physicians engaged in ruining the pharmacy, send everybody to purchase drugs prescribed by them to the Jesuit Fathers, who have a famous apothecary, and the same physicians established seven or eight years ago charity sisters in the hospital, who make and sell all kinds of formulas. The pretext they use to authorise this novelty is that, they say, the poor profit from the sale of these drugs.» («A Lyon, dit le chirurgien P. Dionis, les docteurs ayant comme entrepris de ruiner la pharmacie, envoient tout le monde acheter les médicaments qu'ils ordonnent, chez les Pères Jésuites, qui y ont une fameuse apothicairerie; et les mêmes médecins ont encore depuis sept ou huit ans établi des soeurs de charité a l'hôpital, qui font et débitent toutes sortes des compositions. Le prétexte qu'ils ont pris pour autoriser cette nouveauté, c'est que par ce moyen, disent-ils, les pauvres profitent du gain que l'on fait à la vente de ces drogues.»)

⁴⁴ The etymology of the word «theriac» goes back to the Greek word *theriake*, meaning «related to wild beasts». Other interpretations state, however, that the term is composed by two words, i.e. *tyrya* or «poisonous animal» and *qâ* or «lethal plant», thus referring to the prescription of theriac against all kinds of poisonous beasts and plants. See Dusanka Parojcic, Dragan Stupar, and Milica Mirica (2003), «La thériaque: Médicament et antidote», *Vesalius* 9: 28.

much later found its parallel in the interest of the Kangxi emperor and the physicians from the *Taiyiyuan* 太醫院 (Imperial College of Medicine) in this drug.⁴⁵ Theriac was a medical concoction, composed of various ingredients changing in number in various formulas during different periods. The theriac ascribed to Mithridates VI (King of Pontus 120-63 BC), under the name *Mithridaticum*, was composed of 41 ingredients, while *Galene* (a combination of *Mithridaticum* with snake meat) of Andromachus (*floruit* AD 68), Nero's physician, had 64. Marcus Aurelius' physician Galen (130-200) even proposed a sort of theriac with more than 77 components. The first to write extensively on theriac was Galen, to whom are attributed three books on this topic.⁴⁶

During the seventh century the Arabs came into contact with the Hellenistic medical tradition through various channels. First, the Hellenic tradition was still taught in Egypt by the School of Alexandria, which incorporated the Arabian and Indian traditions into the Hellenistic one. In addition, a large amount of literary and scientific Hellenistic texts were translated into Arabic, starting under the Umayyad dynasty (661-750) and continued by the Abbassids (750-1258), a period in which Baghdad became the capital of an empire that stretched as far as India and Spain. The works translated included those of Hippocrates (ca. 460-ca. 370 BC), Dioscorides (ca. 40-90 AD) and Galen, which were enriched with commentaries added by the Arabic physician-translators. Among the translations of medical books was the «The Book of Theriac», known also as the «Book of Antidotes», by Averroes (980-1037) which was based on Galen's work.⁴⁷ Second, medical practice itself became a

⁴⁵ See my forthcoming publication on Jesuit drugs at the Kangxi court.

⁴⁶ See Alberico Benedicenti (1951), *Malati, medici e farmacisti: Storia dei rimedi traverso i secoli e delle teorie che ne spiegano l'azione sull'organismo*, Milan: Editore Ulrico Hoepli, vol. 2, p. 905; Adrienne Mayor (2009), *The Poison King: The Life and Legend of Mithridates, Rome's Deadliest Enemy*, Princeton: Princeton University Press, p. 246. For an overall introduction see Vivian Nutton (1997), «Galen on Theriac: Problems of Authenticity», in Vivian Nutton (ed.), *Galen on Pharmacology: Philosophy, History and Medicine*, Leiden: Brill, pp. 133-151; George W. Corner (1912), «Mithridatium and Theriac, the Most Famous Remedies of Old Medicine», *The Johns Hopkins Hospital Bulletin* 26.292: 222-226; Michael Stein (1997), «La thériaque chez Galien: Sa préparation et son usage thérapeutique», in Armele Debru (ed.), *Galen on Pharmacology*, Leiden, New York: Brill, pp. 133-151; J. Flahaut (1998), «La Thériaque Diatessaron ou Thériaca des Pauvres», *revue d'Histoire de la Pharmacie* 46.318: 173-182.

⁴⁷ Benedicenti (1951), vol. 2, p. 906; J. Moulierac-Gagniere (1987), «De Galien à Djalinus: Un manuscrit arabe de la theriaca», *Bulletin de Liason de l'Association des Amis du*

way of diffusing this drug. The most striking instance known is that of the Byzantine physician Paul of Aegina (c. 625-c. 690), who practiced in Alexandria, and who used theriac, *Mithridatium* and *Galene* and was then succeeded by Rhazes (865-930) in this practice.⁴⁸ Via these different routes theriac became well-known and was included in Arabic pharmacopoeias, which called these drugs *tiryaaq*. It was a medicine used by caliphs and members of the rulers' families and prescribed in cases of chronic diseases. This pattern was basically repeated in Europe, where theriac became a court drug prescribed by court physicians for the families of the rulers.

The importance given in this summary account to the process of transmission of theriac from the Hellenistic to the Arabic tradition lies in the fact that the spread of theriac to China took place as a result of the interaction between the Chinese and Arabic cultures. It was Edward H. Schafer who long ago pointed out that the knowledge of theriac in China can be traced to the Tang Dynasty (618-907), more specifically to the exchanges that took place along the Silk Road. Theriac was one of the gifts which the Byzantine embassy in 667 presented to emperor Gaozong (r. 650-683).⁴⁹ Moreover, Schafer demonstrated that theriac was mentioned in a number of Chinese texts.⁵⁰ Scha-

Musée de la Pharmacie 12: 24. Cf. Joëlle Ricordel (2000), «Ibn Djuldjul: 'Propos sur la Thériaque'», *Revue d'Histoire de la Pharmacie* 48.325: 73-80, and id. (2000), «Le traité sur la thériaque d'Ibn Rushd (Averroès)», *Revue d'Histoire de la Pharmacie* 48.325: 81-90.

⁴⁸ Gilbert Watson (1966), *Theriac and Mithridatium: A Study in Therapeutics*, London: Wellcome Historical Medical Library, p. 97.

⁴⁹ Edward H. Schafer (1963), *The Golden Peaches of Samarkand: A Study of T'ang Exotics*, Berkeley: University of California Press, p. 184.

⁵⁰ See Schafer (1963), pp. 184-185. The transmission of theriac to Tibet and Japan was studied by Christopher I. Beckwith, as well as by Teruko Nakamura and Jiro Endo. See Christopher I. Beckwith (1980), «Tibetan Treacle: A Note on Theriac in Tibet», *The Tibet Society Bulletin* 15: 49-51; id. (1979), «The Introduction of Greek Medicine into Tibet in the Seventh and Eighth Centuries», *Journal of the American Oriental Society* 99.2: 297-313; Teruko Nakamura and Jiro Endo (2001), «The Introduction of Theriac into Japan», *Journal of the Japan Society of Medical History* (Nihon Ishigaku Zasshi) 47.3: 512-513. Nakamura and Endo also made a first approach to the introduction of theriac into China. See Teruko Nakamura and Jiro Endo (2000), «The Introduction of Theriac into China», *Journal of the Japan Society of Medical History* (Nihon Ishigaku Zasshi) 46.3: 358-359. Chen Ming, based on the book *Haiyao Bencao*, and Paul Buell based on *Huihui yaofang*, analysed medical exchanges between China and Western countries in Song and Yuan China, but do not mention theriac. See Chen Ming (2007), «The Transmission of Foreign Medicine via the Silk Roads in Medieval China: A Case Study of Haiyao bencao», *Asian Medicine: Tradition and Modernity* 3: 241-264; Paul D. Buell (2007), «How Did the Persian and Other Western Medical Knowledge Move East, and

fer's research was continued by Carla Nappi, who in the framework of her study on natural history and its transformations in early Modern China undertook an in-depth study of the sources so far known.⁵¹ Wang Jichao contributed to the discussion insofar as he found out that theriac had already been introduced into China during the Sui dynasty (581-618), with Indian ophthalmology probably serving as a medium.⁵² All these authors dealt with the history of the transmission of theriac to the Middle Kingdom during the Chinese middle ages, as a result of Sino-Arabic interactions and encounters on the Silk Road.

Theriac thus left its traces in relevant Chinese pharmaceutical texts. Both Schafer and Nappi asserted that Su Gong 蘇恭 (656-660) and his collaborators were the first pharmaceutical authors to mention theriac or *diyējia* 底野迦, a name obviously derived from the phonetical transcription of the Arabic term *tiryāq*. The work in question is entitled *Xinxiu bencao* 新修本草 (Materia Medica Newly Revised), also known as *Tang bencao* 唐本草 (Tang Materia Medica),⁵³ a work of crucial relevance as it was quoted once and again in later pharmaceutical treatises. Furthermore, T. H. Barrett is of the opinion that the legitimisation of theriac took place by its subsequent inclusion in the *Bencao gangmu* 本草綱目 (Materia Medica Arranged according to Drug Descriptions and Technical Aspects) of Li Shizhen 李時珍 (1518-1593), published in 1596.⁵⁴ This inclusion had already been mentioned by Schafer and was further investigated by Nappi, pointing out that theriac was listed in the *Bencao gangmu* under the «category of beasts» (*shoubu* 獸部), in the same way as this had been done in the *Xinxiu bencao*.⁵⁵ Eventually, both Nappi and Wang Jichao give prominence to the inclusion of theriac in the imperially commissioned sixteenth-century pharmaceutical work *Yuzhi bencao pinhui jingyao* 御製本草品彙精要 (Materia Medica, Written on

Chinese West? A Look at the Role of Rashid al-Din and Others», *Asian Medicine: Tradition and Modernity* 3: 279-295.

⁵¹ Nappi (2009a), 737-764; and id. (2009b).

⁵² Wang Jichao 王紀潮 (2006), «Diyējia kao: han yapien hefang shi chuan Zhongguo de wenti» 底也迦考: 含鴉片合方始傳中國的問題 (A Study of Theriac: Was [Theriac] Transmitted to China in Opium Formulas?), *Ziran kexueshi yanjiu* 自然科學史研究 (Studies in the History of Natural Sciences) 25.2: 139-140.

⁵³ Schafer (1963), p. 243; Nappi (2009a), p. 746.

⁵⁴ See T. H. Barrett (2002), «Buddism, Taoism and the Eight-Century Chinese Term for Christianity: A Response to Recent Work by A. Forte and Others», *Bulletin of the School of Oriental and African Studies* 25.3: 560.

⁵⁵ Nappi (2009a), p. 753 and note 40.

Imperial Order Containing Essential and Important Material Arranged in Systematic Order; 1505).⁵⁶ This treatise contains an illustration depicting the process of delocalisation of theriac. The protagonist is an Arab who, on his knees, offers theriac to a Chinese. At the top of this plate we find the phonetical transcription of theriac, *diyējia* 底野迦, written as in earlier treatises and thus a Chinese transliteration of the originally Arabic term *tiryāq*.

From the above it follows that theriac, under the name of *diyējia*, was known in China through pharmaceutical works from the seventh to the sixteenth centuries. The case of the *Yuzhi bencao pinhui jingyao* is particularly relevant for our study, since this work was edited and expanded during the reign of the Kangxi emperor.⁵⁷ Thus, it is very probable that the emperor himself as well as the court physicians were aware of the virtues and uses of theriac. Nonetheless, it could well be that the transmission of this drug differed from earlier periods, even if the material object, the drug itself, was more or less the same. This is, for instance, suggested by the different phonetic transcription, *deliyage* 德里鴉葛, which is used in the memorials and, as we shall see later, points to another origin than the Arab one (i.e. *diyējia* 底野迦).

Our question then is how theriac was transmitted to early Qing China. An important insight into the transmission of this drug as a material object is provided by the testimonies of the illness and death of Antoine Thomas. Other sources add to our knowledge by describing the various agents, among them Jesuits, involved in the delocalisation of theriac in early Qing China, especially during the reign of the Kangxi emperor. Thus, based on the case study of Thomas and the investigation of other unknown historical incidents my research will contribute to the knowledge of theriac transmission to China which so far has concentrated on the pre-Qing period.

Already prior to Thomas' case theriac can be found in Jesuit writings related to China. Giulio Aleni, SI (1582-1649) in his work *Zhifang waiji* 職方外紀 (Geography of Countries Foreign to China) included a description of theriac, defining it as a very strong drug produced in Damascus and as being efficacious against any kind of illness and poisoning. The Chinese transliteration of theriac given by Aleni is *diliyajia* 的里亞加, and is thus very similar to that given in our palace memorials.⁵⁸ In addition Philippe Couplet, SI

⁵⁶ Wang Jichao (2006), p. 147; Nappi (2009a), p. 753.

⁵⁷ Paul U. Unschuld (1986), *Medicine in China: A History of Pharmaceuticals*, Berkeley: University of California Press, p. 145.

⁵⁸ I would like to thank Dr. Noël Golvers for having brought this to my attention. This reference can be found in Paolo De Troia (trans.) (2010), *Geografia dei paesi stranieri alla*

(1623?-1693) in his letter sent from Macao on February 4, 1659, itemised theriac among the products brought by him to China.⁵⁹

Another type of Jesuit reference to theriac in relation to China concerns the existence of some kind of indigenous product. Thus, François-Xavier Dentrecolles, SI (1664-1741) described a sort of «Chinese theriac». He stressed that the manufacture of this kind of theriac there was accompanied by a ritual similar to that in Europe. Moreover, he underlined that this medicine was offered to the emperor and the empire's elite, though it is not clear to exactly which emperor he referred. The preparation of a kind of Chinese theriac, no doubt, represents an attempt at indigenisation, inherently made possible by the different ingredients in various formulas found under the name of theriac. This was a main difference from cinchona, the latter not being a compound, but a drug that could not easily be indigenised. The episode involving «Chinese theriac» is described in Dentrecolles' letter to the *Academia Curiosorum Naturae* dated January 1729:

... he says it is a Chinese theriac, which is prepared there with the same notoriety as the theriac of Venice, that the mandarins attend its composition with doctors, and that on it is affixed the Emperor's seal. The favourable aspects of the constellations are taken into account, and one always carries it with one for the needs that may arise.⁶⁰

Indeed, already in an earlier letter Dominique Parrenin, SI (1665-1741) had described the Kangxi emperor's interest towards European theriac as well as the knowledge he had of it. The type of European theriac mentioned by Parrenin was the *theriaca andromachi* which was one of the most common,

Cina Zhifang waiji 職方外紀: Traduzione, introduzione e note di Paolo De Troia, Roma: Fondazione Civiltà Bresciana, Centro Giulio Aleni (opera omnia, vol. 1), p. 76n54. De Troia does, not, however, provide further information regarding the circulation and impact of this book in China. Thus it is unclear to which degree this work was taken into account by the Kangxi emperor or the imperial physicians.

⁵⁹ Again I would like to express my gratitude to Dr. Golvers for this reference. The source is: «Le P. Couplet à un Père inconnu», Macao, 4 février 1659, in *Analectes pour servir à l'histoire ecclésiastique de la Belgique* 9, 1872, p. 17. Theriac is called there *theriacam*.

⁶⁰ «... il dit que c'est la thériaque de la Chine, qu'on l'y compose avec la même célébrité que la thériaque à Venise, que les mandarins assistent à cette composition avec les médecins et qu'on y appose le sceau de l'Empereur, qu'on a égard aux aspects favorables des constellations, qu'on en porte toujours sur soy pour les besoins qui peuvent survenir.» See BnF, Fr. Mss. f° 166. This document was transcribed by Yves de Thomaz de Bossierre (1982), *François Xavier Dentrecolles (Yin Hong-siu Ki-tsong) et l'apport de la Chine à l'Europe du XVIIIe siècle*, Paris: Les Belles Lettres, p. 165.

and which the Jesuits had probably conveyed to the Son of Heaven, although we do not know the exact composition of this drug. The relevant episode was recounted by Parrenin in his letter addressed to the *Académie des Sciences* on July 7, 1723. In this letter Parrenin related how the Kangxi emperor had Jesuits, accompanied by Chinese «botanists» and Chinese officials, search for the ingredients that made up the formula of theriac, but that eventually that mission did not succeed. This can be understood as an attempt of the Kangxi emperor at the indigenisation of theriac. In the words of Parrenin we read in his *memoirs* as follows:

Twenty-seven or twenty-eight years ago the Emperor Kangxi, who knew the effects of theriac of Andromache, wanted to have it prepared. It was necessary to find vipers and some plants that were not in his storehouses, among others gentian and *impératoire*. He nominated for this father Gerbillon, French; father Stumpf, German; father Ozorio, Portuguese; brother Baudino, Piemontese and a skilled chemist and botanist. They were joined by the most learned Chinese botanists, in the belief that people from different realms could more easily discover the plants that resembled those of their country. The Emperor had them accompanied by mandarins to the neighbouring mountains, the banks of rivers and other places where they hoped to find the plants they wanted. Their efforts were futile; they did not even find any vipers.⁶¹

The emperor's interest in European theriac, as indicated in Parrenin's letter, is corroborated by Chinese and Manchu palace memorials. One is a Manchu palace memorial revealing the emperor's request for theriac from the Pope's legate Charles-Thomas Maillard de Tournon (1668-1710). This memorial also relates that one of the routes to supply the missions with drugs was via the Philippines and, more specifically, through the port of Canton. This was information provided by Maillard de Tournon, quoted under a Man-

⁶¹ «Il y a environ vingt-sept à vingt-huit ans que l'Empereur Canghi, qui connoissoit les grands effets de la thériaque d'Andromaque, souhaita qu'on en fit la composition. Il fallut chercher des viperes, & quelques plantes qu'on ne trouvoit pas dans les magasins, entre autres la gentiane & l'impératoire. Il nomma pour cela le pere Gerbillon, François: le pere Stumpf, allemand; le pere Ozorio, Portugais; le frere Baudin, Piémontois, Apothicaire & Botaniste habile. Il leur joignit les plus savans Botanistes Chinois, se persuadant que des gens de différens royaumes remarqueroient plus aisément les plantes qui feroient plus aisément les plantes qui soient semblables à celles de leur pays. L'Empereur les fit conduire par des Mandarins dans les montagnes voisines, sur le bord des rivieres, & dans les autres lieux où il y avoit espérance de trouver les plantes que l'on cherchoit. Leurs peines furent inutiles; ils ne trouverent pas même de viperes.» See Bib. Inst. Mss. 2698, ff. 10v-11. This fragment was edited in *Lettres édifiantes*, LEC, vol. 19, p. 315.

chu name which corresponded to the transliteration of his Chinese name, Duoluo 多羅. In this memorial He-shi-heng 赫世亨, Work Superintendent in the Imperial Printing Office in the Hall of the Military Glory, on the 24th day of the fifth month of the year 45 of the Kangxi era [4/7/1706], related the following: «Duoluo [Maillard de Tournon] has given me two boxes of *deliyage* (theriac), gross weight 5 *qian* and 4 *liang*...»⁶² In the same memorial is mentioned the Jesuit physician Giuseppe Baudino, SI (1657-1718), who was installed at the court and had also been involved —as described in Parrenin's letter— in the search for the ingredients of theriac. In the palace memorial under consideration here he answered a series of questions addressed to him by the emperor, though regarding another drug. Doubtless, in this case Maillard de Tournon was the agent of the delocalisation of theriac, an episode also reflected in European sources. In fact among the gifts that Maillard de Tournon decided to bring with him to China and to offer to the Son of Heaven was also theriac, namely a sort named «theriac of Venice».⁶³

But the Jesuits themselves also brought theriac with them to China, and thus acted as (delocalised) agents in this drug's transmission. They used it for their own treatment, for which evidence can be found in their letters. For instance, Joachim Bouvet, SI (1656-1730) applied theriac to neutralise the sting of a scorpion. There was no physician prescribing it for him, but it was he himself who decided to administer it.⁶⁴ In a second example we can find a very similar pattern. In this case it is Jean-Baptiste Belin de Fontaney, SI (1653-1715) who prescribed himself theriac. In his letter of January 15, 1703, addressed to François de la Chaise (1624-1709) he wrote that after an infidel had attempted to poison him, he decided to administered himself theriac, the remedy par excellence against such evils:

I had a very bad night, and in the morning I felt great stomach pains that continued all day and the next night until two in the morning when I got up, unable to rest. I then suffered very violent vomiting, which caused me much suffering, and

⁶² KXMZ, 869, p. 418.

⁶³ See Claudia von Collani (2008), «Mission and Medicine in China: Between Canon Law, Charity and Science», in Staf Vloeberghs et al. (eds.), *History of Catechesis in China*, Leuven: Ferdinand Verbiest Institute (Leuven Chinese Studies; 18), SF Vol. 6, p. 266.

⁶⁴ See Claudia von Collani (2008), «Mission and Medicine in China: Between Canon Law, Charity and Science», in Staf Vloeberghs et al. (eds.), *History of Catechesis in China*, Leuven: Ferdinand Verbiest Institute (Leuven Chinese Studies; 18), p. 59.

what I have ejected appeared to me the taste of a veritable poison. I took theriac and was instantly relieved.⁶⁵

Theriac was also one of the gifts that the Jesuits and other Westerners offered on their own initiative to the Kangxi emperor, unlike the case of Maillard de Tournon, where its supply had been especially ordered by the ruler. As for the Jesuits, a Chinese palace memorial by Lang Tingji 郎廷極, Provincial Governor of Jiangxi (*Jiangxi xunfu* 江西巡撫) of the 26th day of the third month of the year 48 of the Kangxi reign [5/5/1709] disclosed how Antonio da Costa (Bi An 畢安), SI (1662?-1734) belonging to the Church (*Tianzhutang* 天主堂) in the prefecture of Ganzhou 贛州 (Jiangxi province), presented the emperor with one box of theriac, called *deliyaerga* 德利亞爾噶.⁶⁶ Another example is provided by von Collani, who mentions that theriac was one of the drugs Bouvet presented to the Kangxi emperor, together with other drugs such as cinchona and a medicine called «remède des pauvres.»⁶⁷

Further cases of theriac being presented to the emperor as a gift can be found in Western sources. On 14th July 1712 the Franciscan Bernardino della Chiesa (1644-1721) proposed to the Jesuit Killian Stumpf, SI (1655-1720) that they should take theriac with them in order to offer it as a gift to the Kangxi emperor.⁶⁸ A few months later, on 14th October, della Chiesa offered the same to the fourteenth General of the Society of Jesus, Michelangelo Tamburini (1648-1730).⁶⁹ Other Westerners, whose names were not mentioned but who definitely were not Jesuits, offered the emperor two small boxes of theriac on his sixtieth birthday. The name by which it was called in the relevant document is *deliyage* 德里亞亞格.⁷⁰ This was another transcription of theriac in Chinese, more or less of the same phonetic characteristics as

⁶⁵ «J'eus une très-mauvaise nuit, & le matin je sentis de très-grandes douleurs d'estomac, qui continuerent tout le jour & nuit suivante jusqu'à deux heures du matin, que je me levai, ne pouvant prendre au repos. J'eus alors de violens vomissemens, qui me firent beaucoup souffrir, & ce que je rejettois me paroissoit au goût un veritable poison. Je pris de la thériaque, & fus promptement soulagé.» See LEC, vol. 17, p. 332.

⁶⁶ KXHZ, vol. 2, 475, p. 386.

⁶⁷ Cf. von Collani (2008), p. 54. Here the sources are *Lettres edifiantes* and Bouvet's diaries, which, however, do not inform on the location of this event. As cinchona was also called «pâtes des pauvres», I assume that this could have been one and the same drug. See APF, *SC Indie Orientali, e Cina*, Miscellanea 2, ff. 425v-426.

⁶⁸ SF VI, p. 704.

⁶⁹ SF VI, p. 707.

⁷⁰ Ma Qi (1717), f°13.

the others mentioned above. In addition Bouvet related that around 1690 a group of merchants from the King of the Eleuths presented two small boxes of theriac to the Kangxi emperor.⁷¹

Finally the Kangxi emperor could also have learnt about the properties and efficacy of theriac through medical literature in Manchu. Such information was made available by Parrenin through the translation of Western anatomical works in the so-called Manchu Anatomy.⁷² This work, according to Watanabe Junsei, included the Manchu transliteration of theriac as *deriyaga*.⁷³

To summarise, a comparative analysis of Chinese, Manchu and European sources shows that different agents participated in the transmission of theriac to the Chinese imperial court, among them the Jesuits. In addition, the testimony of Dentrecolles demonstrates that an attempt at indigenisation took place, as the missionary speaks of «Chinese theriac». This is corroborated by Parrenin who described the personal interest of the Kangxi emperor in producing theriac by himself. Another important facet concerns the phonetic transcriptions of theriac as *deliyage* 德里鴉葛, *deliyage* 德里亞格 and *deriyaga* in Manchu (of which I do not have the original Manchu script), which all are near to the pronunciation of «theriaque» used by the French Jesuits in their letters. These transcriptions tally far less with the name *diyējia* 底野迦 under which theriac was mentioned in the pharmaceutical treatises. This all prompts us to hypothesise that the theriac used in the palace was predominantly of Western origin, and that the transmission can very probably be attributed to the Jesuits, due to their eminent position at the court. No doubt theriac is another example of the medical diversity promoted by the Kangxi emperor, a result of the «multicultural» stance supported by him within the boundaries of his empire.

⁷¹ Von Collani (2008), p. 59.

⁷² *Dergici toktobuha Ge you ciowan lu bithe* (Complete Record of the Human Body, Imperially Commissioned). For the Manchu transcription and translation of the title I have followed Marta E. Hanson (2005), «The Significance of Manchu Medical Sources in the Qing», in S. Wadley, C. Naeher and K. Dede (eds.), *Proceedings of the First North American Conference on Manchu Studies (Portland, or, May 9-10, 2003)*, vol. 1: *Studies in Manchu Literature and History*, Wiesbaden: Harrassowitz, p. 145.

⁷³ See Watanabe Junsei 渡辺純成 (2005), «Manshūgo igakusho 'Kakutai zenroku' ni tsuite» 滿洲語医学書『格体全録』について (Regarding the «Complete Anatomical Book» Written in Manchu), *Manzokushi kenkyū* 滿族史研究 (Research on the History of the Manchu People) 4.6: 107. *Deriyaga* would probably be written in Manchu as: 𑮘𑮓𑮔𑮕

4. THE DEATH OF ANTOINE THOMAS: BETWEEN RITUALS AND CONDITION HUMAINE

The Manchu palace memorial submitted by Li Guoping on the 24th day of the sixth month of year 48 of the Kangxi era [30/7/1709] elaborates on what we already mentioned briefly at the beginning of this article, namely the death of the Jesuit missionary after a last attempt at healing him by using the «Sage-ly Drug» theriac. The date of this document is two days later than the day of Thomas' death (28th July, 1709), as reported in the letter of the Jesuit Gozani of 21st October, 1709. This third palace memorial analysed in this article runs as follows:

In the morning of the 22nd day of this month, An Duo died of an illness. In the night of the 23rd day I received an Imperial Rescript [stating the following]: «After you have received this document, I [the Emperor] order you, in obedience to this Rescript, to go personally to see An Duo. Respect this!» [However,] because An Duo was already dead, your bondservant went [instead] to the Church of the Heavenly Master to promulgate the Imperial Rescript to the people from the Western Ocean. When Su Lin (Soares) and others [listened to it], they kneeled down and said: «We all [are] people that came from far away and resemble [i.e. are as worthless as] ants. When An Duo suffered [this] illness, he received the condescending attention of the Sage's Heart [i.e. the Emperor], and the Emperor from his temporary abode [on his tour] sent —by a specially promulgated Rescript— him [i.e. Li Guoping] to see him [An Duo]. Not only would the already deceased An Duo have been unable to honour this [Imperial] Favour, but we also are not able all to express our feelings of gratitude to the fullest. Even if we exerted all our strength to a life-threatening degree and even if we, jaded horses, did all our best, this would not be enough to repay [the Emperor] even only an infinitesimal part [of the favour granted to us].» After their speech they all expressed their gratitude for this favour. Moreover, when An Duo was still alive, he had written a palace memorial. I now ask permission to submit this memorial in his place. Together with the memorial of An Duo as well as with the death report of An Duo which has been submitted by the physician Ru Huang I respectfully submit this in a palace memorial in order to inform [the Emperor].

[Vermilion rescript:] After An Duo came from the Western Ocean, he sincerely devoted his strength to matters of astronomy (*tianwen* 天文) and calendrical methods (*lifa* 曆法). Having heard now that he has already died this indeed fills my heart with great compassion. I order Li Guoping and Wang Daohua to attend to his funeral in accordance with the precedent of the funeral of Xu Risheng 徐日升 (Tomé Pereira, SI).⁷⁴

⁷⁴ KXHZ 1449, p. 631.

The wording of Li Guoping as well as that of Soares and other Jesuits who are quoted by him allows us to conjecture what can be considered to be the real meaning of the Kangxi emperor's intervention in Thomas' disease: firstly, the concern shown by the emperor or the «Sage's Heart», as he is called by the Jesuits, in treating Thomas' disease and sending theriac was a means for the emperor to strengthen his control over the Jesuits, who in this way were included in a network of indebtedness and gratitude. This is clearly seen in the rhetoric of the following excerpt: «We all [are] people that came from far away and resemble [i.e. are as worthless as] ants. When An Duo suffered [this] illness, he received the condescending attention of the Sage's Heart [i.e. the Emperor]» As demonstrated by my previous research, this rhetoric was identical with that used by other Chinese and Manchu officials when expressing their appreciation of receiving the medical attention of the Kangxi emperor.⁷⁵ Thomas is thus another example highlighting the degree of control the Kangxi emperor exerted over his officials and advisers by staying abreast of their state of health and intervening in their therapy, in order to keep his elite in the best possible physical shape. Secondly, through this attitude the Son of Heaven reinforced his legitimacy as an emperor by patronising knowledge, expertise and the prescription of rare efficacious drugs, and by making them available to only a very restricted circle of selected patients. This created bonds of gratitude, as is made plain by the rhetoric in the palace memorial adduced above.

Now let us turn to the emperor's vermilion rescript, by which the emperor ordered that the funeral for Thomas should be carried out according to the precedent already adopted for Tomé Pereira, SI (1645-1708). This was also mentioned in Gozani's letter. As we know from Ferguson, the emperor also issued an imperial edict in Chinese with a content similar to the vermilion rescript.⁷⁶ This means that the contents of the confidential vermilion rescript

⁷⁵ The rhetoric of power, patronage, secrecy and closeness of the medical palace memorials has been analysed in my forthcoming publication. See Puente-Ballesteros (2011), chapter 4. For preliminary results on this topic see Puente-Ballesteros (2009), section 2.2.

⁷⁶ Thomaz de Bossierre cited Ferguson's translation of imperial edicts, among them one devoted to Thomas' death. See Thomaz de Bossierre (1977), p. 143, quoting Ferguson (1933), «Imperial Edicts», *Collectanea Commissionis Synodalis* 6: 35: «Since the time of his arrival from a foreign country, Antoine Thomas has rendered good service in astronomical observations and in the preparation of almanachs. It is with deep regret that I have heard of his passing. As in the case of the death of Thomas Pereira, I present him with taels 200 and ten bolts of satin to show my special regard for a minister from a distant land. Li Kuo Ping and Wang Tao Hua are hereby ordered to send these presents to him.» Ferguson did not attach the origi-

included in Li Guoping's memorial was later made public. In the Chinese edict the emperor proclaimed that he had sent two of his officials to participate in the funeral and had, moreover, supplied 200 taels of silver and 10 bolts of satin. Though this data is absent in the rescript that we translated above, it can be found in Li Guoping and Wang Daohua's⁷⁷ reply to the Kangxi emperor in a palace memorial from the 3rd day of the seventh month of the year 48 of the Kangxi reign [8/8/1709]. The fourth document I have investigated says the following:

Li Guoping and Wang Daohua respectfully report in a palace memorial:

We [venture to say] that on the night of the 2nd day of this month we—in response to the palace memorial submitted by us—received a Vermilion Rescript: «After An Duo came from the Western Ocean, he sincerely devoted his strength to matters of astronomy (*tianwen* 天文) and calendrical methods (*lifa* 曆法). Having heard now that he has already died this indeed fills my heart with great compassion. I order Li Guoping and Wang Daohua to attend to his funeral in accordance with the precedent of the funeral of Xu Risheng 徐日升 (Tomé Pereira). Respect this!» According to the precedent [of Tomé Pereira] we prepared 200 taels of silver, ten bolts of satin, tea and wine to be sent by [us] Li Guoping and Wang Daohua. Moreover we promulgated the imperial edict to Su Lin and others. Su Lin and the others, full of tears, knelt down and kowtowed saying: «The Emperor is nourishing us people from the Western Ocean. The Imperial Favours conferred on us cannot be counted by numbers and expressed by words. We have now learned that upon An Duo's death, the Sagely Heart of the Emperor was filled with great compassion. He [even] issued a benevolent edict and moreover granted rewards according to the precedent of Xu Risheng [Tomé Pereira, SI]. Not only does the already deceased An Duo receive glory, but we, too, would like to express our deep gratitude for this tremendous favour. As we do not find words for writing this in a palace memorial, we can only kneel down in front of the Heavenly Master [*tianzhu* 天主, i.e. God] and pray for ten thousand years [of life] for the Emperor.» After their speech they all expressed their gratitude for this favour. Because of this I respectfully submit a palace memorial in order to inform [the Emperor].

[Vermilion rescript:] Noted! Is there news from the Western Ocean?⁷⁸

nal Chinese text, but it is clear that his translation is of the same wording as the imperial edict which is reproduced on Thomas' tombstone in the Zhalan Cemetery in Beijing. For Thomas' tombstone inscription cf. Edward J. Malatesta, S.J. and Gao Zhiyu (eds.) (1995), *Departed, Yet Present: Zhalan: The Oldest Christian Cemetery in Beijing*, Macau: Instituto Cultural de Macau, Ricci Institute, University of San Francisco, pp. 162-163.

⁷⁷ See footnote 27.

⁷⁸ KXHZ 1455, p. 633.

As has been shown by Nicolas Standaert, the funeral ritual the emperor ordered for the Jesuits followed a prescribed pattern. As a matter of fact, the gifts and amounts contributed by the emperor remained more or less the same.⁷⁹ For example, in the funeral organised for the Jesuit surgeon Pierre Frapperie, SI (1664-1703) installed at the court of the Kangxi emperor, the ruler ordered the funerals of the Jesuits Ferdinand Verbiest, SI (1623-1688), Ludovico Buglio, SI (1606-1682), and Gabriel de Magalhães, SI (1609-1677) to be taken as reference. Moreover, just as in the case of Thomas' funeral, the emperor sent 200 taels of silver and 19 bolts of satin.⁸⁰ Thus although the information in the third and fourth documents tallies with the description in Gozani's panegyric letter after the death of Thomas, Gozani's intention was totally different from that of the Chinese informants. For the Chinese officials, the preferential treatment received by Thomas during his illness and the funeral rituals ordered by the emperor were in conformity with a strict bureaucratic and hierarchical procedure. All this reflected a certain degree of imperial favour granted by the ruler to his subordinates, in this case the Jesuits, in accordance with their services and status at the court. But while the Jesuits were praised for their services to the emperor, at the same time they were assigned to their appropriate rank within a strict hierarchy, without ever having an influence on important policy matters. It is clear that the Jesuits attempted to make use of this ritualized relationship. On the one hand, in China itself, they tried to use their standing at the court to strengthen their position within the imperial network to which they belonged. Towards the outer world, on the other hand, they presented a different version of events, such as the way Gozani did, in order to praise the achievements of the China mission and to stress its purported influence on the Kangxi emperor.

⁷⁹ This information is contained in an Imperial Order (*Shangyu* 上諭) maybe copied by the Jesuits and attached to a letter sent by Jean Domenge, SI (1666-1735) in 1 January 1704 from *Singanfu* (Xi'anfu 西安府 in Shaanxi province) to Jean Basset, MEP (1662-1707) vicar of Sichuan. See MEP 407, f. 409.

⁸⁰ MEP 407, f. 409.

5. CONCLUSIONS

The nucleus of the cosmic egg —the vital vermeil core— Distills the purple exudate that feeds me even more. This quintessential theriac, which also heats the sun, will cure me of mortality: my final goal is won.

‘Wu Yun, Cantos on Pacing The Void’⁸¹.

In his vermilion rescript, as well as in his edict, the Kangxi emperor showed his compassion for the late Antoine Thomas, whom he had appreciated for his qualities as a mathematician. In fact the emperor was mourning the loss of one of the participants in his imperial network. Together with the emperor’s relatives, officials, officers and advisers, Thomas was a member of this network, fostered by the Son of Heaven, not only due to his scientific knowledge, but also because of the «multicultural» identity promoted by the Kangxi emperor within the boundaries of his empire. As has been asserted by Rawski, Crossley, Bartlett, and Elliott, this was a policy aiming at creating a specific Qing identity as an alternative to that of the Han. Through both his confidential and public statements the emperor made it clear that the Jesuits, or in this case more specifically Antoine Thomas, belonged to a group of people under his patronage. These people were privileged insofar as they were favoured, attended and supported by the emperor who was promptly informed if one of them became seriously ill. Moreover, the supreme ruler himself took personal action in attempting to preserve their health, which in turn provided him with an additional tool for strengthening the legitimacy of his imperial power.

The illness and death of Antoine Thomas provide material for an inspiring case study on the phenomenon of the delocalisation and appropriation of a foreign drug during the early Qing dynasty. It is thus a contribution to the research undertaken by Carla Nappi, who, by centring mostly on pharmacopeias, traced the transmission of theriac in early modern China. I have shown that theriac was a drug of difficult access for the general public. At least at the court, its distribution was subject to the control of the Kangxi emperor, who obtained it within the framework of a tribute and gift-exchange relation. The emperor personally prescribed it to members of the elite in cases of urgency. This prerogative doubtlessly accentuated the emperor’s image as a fatherly

⁸¹ Edward H. Schafer (1981), «Wu Yun’s ‘Cantos on Pacing The Void’», *Harvard Journal of Asiatic Studies* 41.2: 414.

figure endowed, as the Jesuits (in the words of Li Guoping) and others called it, with a «Sagely Heart»⁸².

But what about the possible paradox that the theriac that was used to treat the Jesuit Antoine Thomas may have been a product of Jesuit origin? Could it be that, given the prerogative of the ruler, the emperor became the distributor of this drug to its original suppliers? Almost certainly the emperor's control was not all-encompassing. This is suggested by the case of Joseph Premare SI who sent the emperor theriac from Jiangxi, meaning that in that area far away from the palace the Jesuits held some stock of theriac and could thus act as distributors of this drug. Do we have to assume that the Jesuits delivered all their available theriac to the emperor? Probably not, as is indicated by the cases in which Jesuits treated themselves with theriac. Hence it may well be that the attention paid by the emperor to Antoine Thomas the day before his death responded only to a ritual, in which the Jesuits enjoyed the privilege of being attended by the emperor and consequently participated in this «game of gratitude».

All this leaves open the question of whether the palace memorials convey a real picture of what really happened at the patient's bedside. The replies of the Jesuits were not transmitted by themselves but only via the memorialists. Moreover, we have here a complex amalgam of different actors, using different strategies of rhetoric and ritual according to their status in the hierarchy of power. The actors involved in these events were the emperor, a Chinese physician, a Jesuit patient, and four informants, i.e. one Chinese, one possibly Manchu and two Jesuits, who reported in Manchu to the emperor. What is, however, remarkable over and above the question of whether the emperor's theriac was of Jesuit origin or not is the fact that theriac was another example of the medical diversity promoted by the Kangxi emperor, as a natural consequence of his general support of cultural diversity. This provided an ideal

⁸² Elliott (2001a), p. 44, remarked that the Manchu written language, even when used by the emperor, had a more conversational and informal tone than Chinese. Thus, the rhetoric in the Chinese translations may differ from that of the Manchu originals. In order to deal with this caveat, I shall endeavour to analyse the discourse and rhetoric of patronage and power that the emperor used for the assignment of physicians and the prescription of drugs on the basis of the Manchu originals. This might then allow us to achieve better fine-tuning in the elucidation of the hierarchical status and power structure during selected periods of the Kangxi reign. However, it has also to be stressed that the authors of the three Manchu memorials were Chinese officials, mainly, Li Guoping. This could mean that in this case the rethoric of the Manchu was patterned according to the Chinese, so that there would be no great difference. In the absence of a comparison with the original Manchu memorials, however, this remains a hypothesis.

scenario for the transmission of Western drugs, among them those of Jesuit origin.

Now, turning to the European source, we see that although Gozani's testimony tallies in most points with the information provided by the palace memorials, an important difference can be noted precisely in Gozani's specific presentation of the events. While for the emperor and his officials bureaucratic routine played an important part in the regulation of Thomas' funeral, Gozani, in his endeavour to legitimize and strengthen the Jesuit mission in China, made use of these events to write a panegyric of Thomas in which the funerary regulations of the emperor were presented as a sign of the ruler's distinctive appreciation of the «great mathematician».

Apart from the more general issues discussed above, in this article I have analysed in detail four palace memorials reporting the illness and death of Antoine Thomas in Peking. This allows us to obtain some glimpses of his personal life beyond his role as a mathematician, astronomer and geographer. In these documents, this Jesuit of the China mission is shown as a patient and as an individual subjected to the inevitable cycle of life and death de la *condition humaine*. It is in this respect that this essay can also be considered as a contribution to the research on the biography of this important Belgian missionary.

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