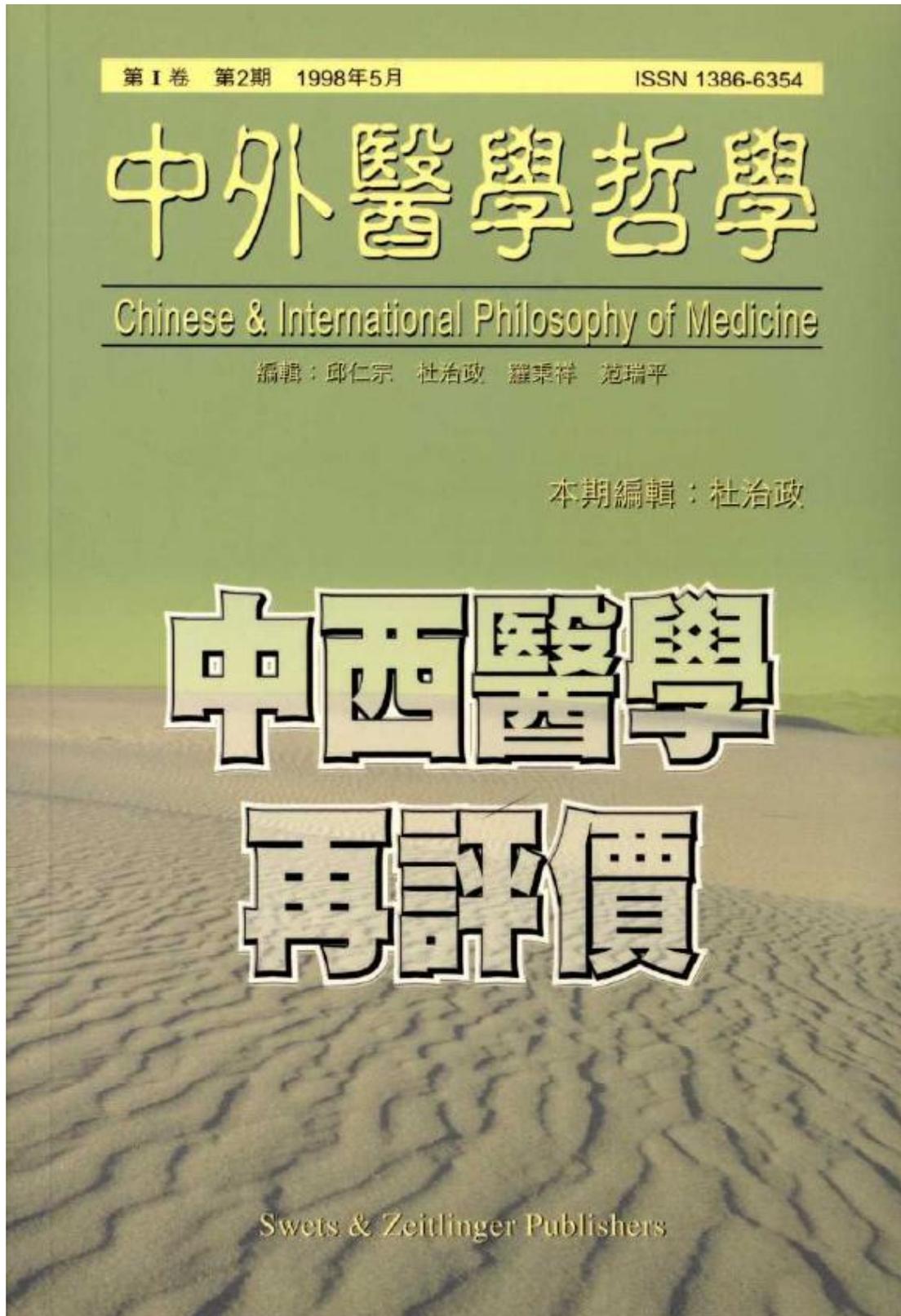


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Vol.1 No. 2 (05/1998)

中西醫學再評價
Reevaluating Traditional Chinese vs. Modern Western Medicine

本期編輯：杜治政
Issue Editor: Du Zhizheng

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為什麼醫學不可能是一門科學？

Ronald Munson

摘要:

我的論點是，儘管醫學是科學的，但它並不是也不可能成為一門科學。試圖說明醫學已經是一門科學的論證是有缺陷的，我將拒絕這種論證。我將證明，比較一下一些基本的明確特點如內在的目的、成功的標準以及調節事業的原則等，就會顯示出醫學與科學是根本不同的。然後我將論證，雖然醫學的認知內容也許有可能還原為生物學，但醫學本身是不可還原的，因為作為一項事業它具有一些特點，這些特點使它成了一種不適用於還原的學科。在認識到醫學與科學本質上是不同的之後，我將用從這一認識中得出的四種結果來結束本文。

目錄

中西醫結合述評

呂維柏

摘要:

中西醫結合包含中醫和西醫之間的團結合作，但更重要的是中醫學和西醫學之間的互相結合。在世界上對傳統醫學曾有過三種方針，即“否定”，“容忍”和“平行”的方針，均不能充分發揮傳統醫學的作用和潛力。中國採取“結合”的方針，較好地解決了這一問題，不僅滿足當前醫療工作的需要，更重要的是在科學研究中，強調創新，兩種醫學的觀點、方法、優勢互補，獲得大量新的研究成果，如針刺原理和針麻研究，青蒿素的發現，瘀血證研究等。雖然現代醫學是主流醫學，但尚不足以解決所有問題，如慢性病，老年病等。用結合的思想可以更好地解決各種難題，使醫學科學更快地向前發展，造福於人民。

目錄

摘要：

本文回顧總結了近幾年中國本土中醫現代化研究的基本狀況和學術焦點，認為邏輯實證只是中醫現代化研究的一個主流方面，中醫還需要證偽。去偽存真是不可分割的兩面。目前許多爭議與分歧源出民族文化的自尊和認知偏見，確立一種公正的文化比較觀和認知方法對於糾正中醫現代研究中的那些“唯科學主義”和民族偏見都是至關重要的。中醫現代化研究的重新定位是走向後現代的思維。

目錄

摘要：

本文簡要介紹針灸學現代化研究的三個成就：交叉學科全息生物醫學、現代時間針灸學和現代針灸學的產生；針刺信號的傳導通路和針刺鎮痛的生理學基礎；經絡實質的重新認識。在此基礎上，本文對相關的理論探索和發展進行討論和評價。

目錄

溝通臨床距離：已有知識的再發現

Richard J. Baron

摘要：

我在本文中提出，現代醫學的疾病觀在描述疾病時通常排斥直觀知識，由此而造成一種從機能上說給人印象深刻的然而從人的角度說沒有什麼根據的醫學。受過技術化了的解剖病理學疾病觀訓練的醫生們，脫離了過去已知的大部分有關疾病的知識。他們不僅缺少一種嚴密的或規範的方法去面對醫學實踐中的那些非技術的方面，而且，許多人甚至看不見醫學的動機和目的。在此，我力主一種以直觀為基礎的、以人自身為根據的疾病本體論。這樣一種本體論以理解和把握病人的經驗而不是對病狀的所謂“客觀的”描述作為自己的出發點。只有通過一門活生生的病症科學，人們才有可能達致一種真正的人本主義醫學。

目錄

經絡現象研究的沉寂與出新

劉澄中

摘要：

經絡現象主要指循經感傳。它的表現形式是當向人體上施加一點刺激時，其所產生的定位覺會緩慢地移動走行，或者走行到軀體的病灶處，或者走行到頭頂。它的走行軌跡呈現為特殊的分佈形式，在中華醫學中被稱為經絡。從現代醫學的角來看，循經感傳的科學稱呼應該是移動定位覺或知覺延伸。這是一個很常見但卻不被人們所認識的高等臨床神經現象。

多年來，誤認為循經感傳的軌跡是一個有結構的管道，曾經投入大量的人力與財力企圖找到它的實物或物質基礎，但卻是連遭失敗，使中國的經絡現象研究陷入沉寂。

《臨床經絡現象學》與《高等臨床神經學》兩本書的出版；季鍾樸學術思想的成熟與彰明；以經絡現象為研究對象與「透過現象看本質」的正確路線的被承認；經絡研究新一輪五年計劃的啟動。中國的經絡現象研究正在走向出新。

目錄

摘要：

本文試圖綜合本期各篇文章的主要觀點，依據“目的”、“體驗”和“價值”三條線索來對傳統中醫和現代西醫做一初步的評價。由於醫學的內在目的在於防治疾病、維護健康，而不是追求真理、認識世界，因而中醫與西醫都可以發揮作用，現代化研究與傳統式探索也可以並行不悖，只要有助於醫學的目的即可。此外，西方醫學從傳統走向現代的過程，乃是從重視病人的親身感受轉向注重病理解剖事實的過程，而中醫學體系提供了一種不同臨床現象學。最後，醫學是負荷着價值和意識形態的人類活動，應當超越當前的技術烏托邦傾向，成為良好生活方式的一個和諧部分。

The Integration Between Traditional Chinese and Modern Western Medicine: History and Appraisal

Lu Weibo

Abstract

What attitude should we take toward traditional medicine? There have been three types of policies in this regard all over the world. First, the excluding policy prohibits practicing any traditional medicine. Traditional physicians are not qualified to possess the title of physician, and their practice is illegal. Second, the tolerating policy does not make illegal traditional medical practice, but it does not formally affirm the practice. Third, the paralleling policy allows both traditional and modern medical practices, but their use may not overlap. For example, traditional physicians may not use modern medical facilities.

Since the establishment of the People's Republic of China in 1949, a unique policy of integration has been adopted in China. This policy assumes that both traditional Chinese medicine and modern Western medicine have strengths and weaknesses. It requires that both types of medicine be integrated so as to develop more effective methods in treating diseases and preserving health.

There are two senses of the integration of traditional Chinese and modern Western medicine. The first sense refers to the integration of the two types of the physicians, i.e., the cooperation between traditional Chinese practitioners and modern Western medical professionals. The second sense refers to the integration of the two disciplines; i.e., to use both traditional Chinese and modern Western medical theories and practices to create new forms of diagnostic and therapeutic approaches and means. The hope was to have the perspectives, methods, and solutions of both types of medicine complement each other.

Under the integrating policy, traditional Chinese medicine has been developed tremendously in mainland China. 30 traditional Chinese medical colleges, 2457 traditional Chinese medical hospitals, and 170 traditional Chinese medical research institutions have been established. A number of well-known medical achievements, such as acupunctural analgesia and anesthesia, the discovery of a new type of anti-malaria drug - Qinghaosu (artemisinin), and the study of blood stasis syndrome, have been made by following the integrating strategy.

With the rapid growth and development of the diagnostic and therapeutic technologies in modern Western medicine, some individuals are doubtful of the prospect of traditional Chinese medicine and of the necessity of China's integrating strategy. However, no matter how advanced modern Western medicine as a form of

medicine has become, it will not be able to handle all diseases or medical problems effectively and appropriately. The human body and medical reality are too complicated to be fixed by modern medicine once and for all. For instance, in the present time, chronic and geriatric diseases pose perplexing challenges to modern medicine. Possibilities are always open for traditional Chinese medicine as well as the integrated traditional Chinese and modern medicine to make their valuable contributions.

Table of Contents

Abstract

Most contemporary research concerning modernizing traditional Chinese medicine is aimed at confirming the effectiveness of certain traditional doctrines, methods, and treatments through scientific experiments designed in terms of modern scientific theories and approaches. This paper argues that such research should also consider the issue of falsification. Not everything in traditional Chinese medicine can be confirmed. We need a complete mechanism through which to reject the false and maintain the true.

By investigating several major academic journals in the field published in mainland China, we find that there have been several different types of research concerning modernizing traditional Chinese medicine. First, the modern Western pattern of clinical trial has been used to test the effectiveness of traditional Chinese drugs. Second, modern Western medical ways have been employed in administering traditional Chinese drugs to patients. Third, modern scientific experiments have been designed to analyze the chemical components of traditional Chinese drugs and disclose their functional mechanisms at the micro-level of the body. Fourth, efforts have been made to explain and reformulate traditional Chinese medical theories and clinical experiences in terms of modern scientific and medical theories. Finally, modern medical methods and technologies have been chosen to test particular traditional Chinese clinical doctrines and principles. All of this research has been very helpful for us to understand traditional Chinese medicine in terms of modern science and technology.

However, some scholars are worried that such research has abandoned the identity of traditional Chinese medicine as a peculiar medical system. They doubt that the diagnostic and therapeutic doctrines and approaches of traditional Chinese medicine can be subject to the investigation and test of modern scientific theories and methods without destroying their very characteristics. However, these scholars fail to see a crucial role played by the method of experimental research in selecting scientific hypotheses and theories. Traditional Chinese medicine, as a medical system, ought to be open to the test of experimental research to confirm its useful parts and falsify its false components. Only through this process of differentiation can traditional Chinese medicine become a real scientific system in the modern sense.

Abstract

This essay introduces and assesses some major achievements that have been made in scientific research concerning modernizing acupuncture, a main discipline of traditional Chinese medicine. These achievements include the development of interdisciplinary subjects such as holographic bio-medicine, modern tempero-acupuncture, and modern acupuncture; the account of the propagating route of the signs caused by acupunctural stimulates and the physiological basis for acupunctural analgesia; and the new thought on the essence of *jingluo* (channel).

There are some special acupunctural points in the body, such as the points in the ear, hand, and foot, which cannot be accounted for through the traditional Chinese medical theories. Unlike general acupunctural points, these special points in a particular location (like the ear) reflect the situation of the whole body. They are like miniature of the body. Only the new theory of holographic bio-medicine can appropriately account for physiological and pathological phenomena of these special points. Moreover, it has long been found that stimulating the same points at different time of the day generates different effects. This fact is also confirmed by contemporary research. The development of modern tempero-acupuncture attempts to discover rules in employing acupunctural treatment to the patient in the best time.

For many years Chinese researchers have been trying to find a basic anatomical structure for acupunctural channels. They had confidence in the belief that "structure determines function." For them, this means that if there is a particular function, there must be a specific structure "behind" it to make this function possible. However, the series of efforts in disclosing a specific structure for the channel have failed one after another. The failure indicates the defect of the claim that a particular structure determines a particular function. From an epistemic perspective, it may well be the case that function suggests structure. The channel system in traditional Chinese medicine may be a supra-anatomical structure; in other words, it is not sustained directly by any particular anatomical structure, but by a network of the whole body in relation to a number of anatomical aspects.

Abstract

Channel-phenomenon (or *jingluo* phenomenon, in Chinese) is a special sensational phenomenon discovered by traditional Chinese medicine over two thousand years ago. When stimulating certain points on a patient's skin, the patient will have a sensation moving along specifiable routes, terminating at the location of disease or the top of the head. With a definite distribution pattern on the human body, such specifiable routes are named *jingluo* by traditional Chinese medicine and constitute the theoretical and practical basis for the treatment of acupuncture. In modern medicine, this propagated sensation along channels can be called "moving topesthesia" or "perceptual extension."

For many years researchers on channel-phenomenon had concentrated their efforts on attempting to discover a concrete tubing structure below the specified routes. They wanted to find an observable anatomical structure or particular physical basis so as to ground the channel-phenomenon on a solid basis. According to their understanding, the essence of channel-phenomenon had to lie in particular anatomical tubes as a physical basis. Without such a physical basis, the channel-phenomenon could not have real objective existence. However, although tremendous amount of labor and energy were invested in the hope of finding particular anatomical tubes for channels, it was done in vain. Consequently, Chinese intellectual research on channel-phenomenon came to silence.

However, it is mistaken to believe that the essence of channel-phenomenon has to lie in a particular physical basis. The propagated sensation along channels as a phenomenon has been there for thousands of years and continue to be confirmed by patients in the present time. Why must research on channel-phenomenon be separated from patients' vivid experiences and instead be focused only on looking for special anatomical structures? On reflection, it happened that some had held a very narrow-minded and simplified notion of objectivity. Indeed, objectivity does not always require a particular physical basis. Patients' experiences and feelings are equally objective facts for intellectual research.

Fortunately, as we can learn from the lessons and experiences we had in the past, we will readjust our research orientation. With the recent publication of the two new books about higher clinical neurology in the field, it looks that the research on channel-phenomenon will encounter its renaissance.

Beyond Technological Utopia: Reevaluating Traditional Chinese vs. Modern Western Medicine

Fan Ruiping

Abstract

The contemporary world is characteristic of science-fetishism and technological utopia. Every social issue is explored in the name of science, and all difficult problems are to be resolved by renovated technologies. This is even more so in modern China than in the West. The people attempt to modernize their lives in all respects. For many of them, everything old needs to be weighed on a modern scientific scale and anything unscientific must be rejected. This constitutes the context in which traditional Chinese medicine is generally evaluated. This essay argues that this context is misleading. It intends to reevaluate traditional Chinese versus modern Western medicine in consideration of the internal aim of medicine, patients, experiences, and ideologies and values.

There has been a long-standing debate in China in this century regarding whether or not traditional Chinese medicine is a science. Both sides of the debate, ironically, agree that if traditional Chinese medicine is not a science, it should be abandoned. However, this debate is non-sensical. Medicine as medicine, whether it is a traditional medicine or a modern medicine, is not a science. Medicine is not a science because its internal aim differs from the aim of science. While the internal aim of science can be identified as pursuing truth and knowing the world, the internal aim of medicine consists in maintaining health as well as treating and preventing diseases. Undoubtedly, modern Western medicine is scientific. Its theories and practices are based upon typical modern sciences such as physics, chemistry and biology. But medicine as medicine does not have to be scientific. Given the internal aim of medicine, as long as a practice or method contributes to the treatment of disease or the promotion of health, it is legitimate. The existence of varieties of non-scientific alternative medicine and faith medicine in the US where modern science and technology are most advanced, is a good example of this. To put it in a famous Chinese saying, "whether it is a white cat or a black cat, as long as it catches the mouse, it is a good cat.

No one can deny the tremendous achievements that modern scientific medicine has made in fighting diseases. However, focused on a technologized anatomico-pathologic view of the body and diseases, contemporary medicine discounts the significance of patient complaints and it is naturally easy to lose sight of the non-technological aspects of medical practice, especially the experience of the sick

person. Traditional Chinese medical theory and practice provide a heuristic alternative. By viewing the essence of illness as symptom-complex rather than anatomico-pathological lesion, by identifying imbalanced climate and emotional factors rather than disease entities as the sources of illnesses, by using ordinary contacts rather than complicated lab and mechanical investigations as medical examining tools, by focusing on the experience of being sick rather than on pathological anatomy, by following balancing rather than curing as the treatment principle, and by emphasizing prevention rather than treatment, traditional Chinese medicine offers a systematic medical phenomenological system in which a patient's life experience and intuitive knowledge of the body is the center of clinical practice.

Finally, medical theory and practice are value-laden. "Our ideologies and expectations concerning the world move us to select certain states as illnesses because of our judgment as to what is dysfunctional or a deformity and to select certain causal sequences, etiological patterns, as being of interest to us because they are bound to groups of phenomena we identify as illnesses" (Engelhardt). Our ideologies and expectations also move us to select certain modes of medicine and therapeutic methods as most useful and promising because of our judgments about the appropriateness and efficacy of practical instruments. Accordingly, practicing and accepting medicine is part of a way of life. As people accept different value systems and life expectations, they must be careful about what medicine and technology they want to accept and develop. We must reflect on the contemporary ideology of technological utopia that intends to resolve all problems by newly developed complicated technologies. Not all conflicts and tensions of life can be resolved by technologies. What is worse, the overwhelmingly powerful incentive to develop high-tech medicine in the third-world countries would drain on their scarce health care resources, which would significantly harm most people in those countries.

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