

BOOK REVIEW

Soyoung SUH, *Naming the Local: Medicine, Language, and Identity in Korea since the Fifteenth Century*. Cambridge: Harvard University Press, 2017. 244 pages. ISBN: 9780674976962 (Hardcover). 39.95 USD.

Soyoung Suh's monograph, *Naming the Local: Medicine, Language, and Identity in Korea since the Fifteenth Century*, provides an introductory historical examination of medicine in Korea spanning the last five centuries. Intertwined with her historical study, Suh also makes two major interventions in the field of East Asian history. The first important intervention is to hit home the point that Korea matters in the history of medicine in East Asia. Scholars have for too long written on East Asia as if it could be understood by analyzing China and Japan while ignoring Korea. Suh brings some of the debates in the Korean-language scholarship to wider international attention. That contribution alone deserves our plaudits and gratitude. Suh's second contribution, related to the first, is to ask, through the lens of medicine, what it means to be a Korean, and especially in relation to larger players, such as China. Scholars such as JaHyun Kim Haboush, Sixiang Wang, and others have interrogated the fraught question of how Koreans understood themselves within the East Asian region. Suh adds to this conversation, but also intervenes in more heated debates that have taken place in the Korean language. Pushing back against Sinocentrism, but also careful to avoid a Korea-centric stance, it is here that Suh aims to inject nuance and ambivalence into the question of nationalisms in East Asia. Eschewing modern day categories of the nation state in framing her analysis, Suh seeks to provoke scholars to question their established views.

Chapter one examines the question of local medicinal botanicals during the Chosŏn period. The claim made by some Koreans that local botanicals were as valuable, if not more so, than Chinese botanicals was felt necessary as a way to give local meaning to a more universal medical knowledge. It was also a way of relating the local to the more authoritative system of Chinese medical knowledge, since Korean vernacular knowledge was often despised by Korean elites. Chapter two examines the uses of the term Eastern Medicine (*tongŭi* 동의). Writing social history, Suh traces changes in the valence of that term across five centuries. The question is important since it meant that medicine was understood differently in Korea than it was in China and Japan. Chapter three moves firmly into the Japanese colonial period in the twentieth century. Here Suh examines local knowledge production through the lens of colonial medicine. Chapter four examines how new medicinal products were framed and packaged to a new consumer public in Korea in the 1920s and 1930s. Using as her main source newspaper advertisements, Suh shows how Koreans adapted to the exigencies of colonial rule and sought ways to maintain the relevance of Korean medical knowledge. Chapter five makes a case study of the Korean culture-bound condition known as Fire Illness (*hwapyŏng* 火病). Suh's examination of this elusive term illustrates the ways in which a Korean

vernacular disease concept encompassing a range of ill-defined symptoms ranging from general unease to anger and distress crosses over, albeit tenuously, into the biomedical realm of psychological diseases.

Much of the historiography of the history of medicine in Korea has been shaped by the Japanese scholar Miki Sakae and his Korean student Kim Tu-jong. In short, they argued that Koreans mostly drew on Chinese medical knowledge. For Miki and Kim, Korea could only exist in a peripheral relationship with China. To counter the “Korea-as-suppliant” narrative, a new generation of scholars working in the Korean language has sought to reframe the field to reflect Korean agency. Simply put, Korean scholars, such as Kim Nam-il, Kang Yeonseok, and An Sang-u argue that medicine in Korea largely can be shown to be self-referential, with Korea as the center. Soyoung Suh’s overall approach sees some merit in the Miki model of Korea as peripheral, but also emphasizes the continual Korean quest for self-fashioning free of the yoke of Chinese intellectual dominance.

Soyoung Suh’s book ranges over selected aspects in medicine in Korea, mostly related to the writings of elite physicians. Although she does not specifically put it in these exact words, nevertheless, her concern lies mainly with the questions of what is Korean about Korean medicine and what is Eastern about medicine in Korea. She identifies a unique Korean anxiety regarding the issue of local knowledge production. The term she uses often in her descriptions of medicine in Korea is “periphery,” which is in essence her key point. For Suh, Korean physicians aimed for regional relevance and even importance, but were always peripheral in terms of medical, and medicinal, knowledge making.

To make her point of Korean marginality, Suh focuses on language as a problem for Koreans. Korean physicians aimed to demonstrate local mastery of medical concepts and medicinals, but when they would write in Korean, no one outside of Korea would take any notice. Thus, as Suh explains, if Korean physicians were to gain credence and universal attention, they needed to use languages such as Chinese in the Chosŏn period, Japanese in the colonial period, and English post-1945.¹ In other words, a paradox existed wherein Korean relevance often co-existed with Koreans’ use of non-Korean languages associated with external hegemonic power. Suh describes this difficult conundrum for Koreans as an irrevocable dualism. Koreans could only ever be peripheral in relation to another center, which changed from China to Japan in the first half of the twentieth century, and then to the west, particularly the United States, in the second half of the century.

For Suh, throughout the Chosŏn period, the Chinese stood at the pinnacle of medicine with Koreans making efforts to keep up. Her major case study to illustrate her point concerns the Chosŏn court’s project to map and record local botanicals. Suh argues that most of the herbs listed as local were actually Chinese, with licorice as her primary example. For Suh, the search for local relevance only

¹ Suh’s argument regarding the physicians’ use of Chinese language is complex. Her contention that the elite physicians’ use of Chinese script somehow compromised their claims of local knowledge production is interesting, but would be surprising to Chosŏn physicians, since Chinese was the premier written language of Chosŏn.

is salient for modern historians who yearn to argue for Korean relevance and ingenuity. Throughout the centuries, Koreans could only mostly follow Chinese medical knowledge. The idea that Koreans innovated and introduced medical concepts is thus largely a construct invented by twenty-first century Koreans.

Suh's chapters on medicine in Korea in the twentieth century continue the theme of marginality, but this time in the context of Japanese repression. Using newspapers and medical journals, she argues that the Korean physicians' adaptation to western medicine only reinforced their secondary status. Her final chapter discusses fire illness as a Korean culturally-bound medical condition. Here, Suh finally identifies local knowledge production. However, the problem for Suh is that the concept does not go beyond a strictly local setting. In short, Korean medical knowledge fails to travel outside of Korea.

Suh's work is best understood as an introduction to the topic of traditional medicine in Korea. Thus far, her work stands alone as the one scholarly book-length study in the English language of any discipline to focus on traditional medicine in Korea. That feat alone means her work will always stand as a significant contribution. In the field of the history of medicine, Korea deserves examination, not only for its population of seventy-five million in 2017, but more for its importance in East Asia. As discussed above, scholars are beginning to argue that a better understanding of East Asia falls short if Korea is overlooked or ignored. It is time to also bring that guiding methodology to the history of medicine. Suh has taken a first small step in showing that there is a Korean history worth knowing, but more importantly, her cases demonstrate that the centrality of China has, since the Chosŏn period at least, been challenged by Korean scholars and physicians. Suh's contribution is to show that political context matters in the history of medicine. Adopting the methodology of social history, Suh introduces a different model to the many Korean-language histories of medicine that list names and events with little or no social context. Even if her actors ultimately failed to achieve their aim of Chosŏn-centered medical knowledge, as she claims, readers are able to obtain a sense of the importance of larger social factors, including politics and a nascent national consciousness, in the history of medicine.

As a general introduction to traditional medicine in Korea, Suh's study spans five centuries, meaning she can only really touch the surface of the topic. She seems to be aiming to show that her argument of Korean marginality continues over the *longue durée*. However, the consequence of choosing to cover five centuries in one book is that she can only select a small sample of cases in each time period to support her argument.

Apart from the issue of lack of depth and breadth of her material, the central argument of Korea as periphery remains contentious. Whether a country is peripheral or not is not a fact, but an argument or an ideological position. Suh's discussion of an anxiety over relevance in relation to China focuses on claims of local knowledge making. Suh's claims of Korea being peripheral should be seen in the context of present-day anxieties among scholars about Korea's role in East Asia. In her efforts to correct a polemical position held by some scholars of Korea's centrality in the region and independent knowledge production, Suh could be accused of

overcompensating by leaning towards an apparent discounting of Korean agency. However, Suh's key point that providing historical analysis of medicine in Korea only makes sense if we aim to understand how Koreans understood themselves in relation to a larger international context stands as an important perspective.

Suh's book is a must-read for anyone interested in the history of knowledge production not only in Korea, but also East Asia. For too long, knowledge production regarding medicine in Korea has been regarded as outside the category of need-to-know. Moreover, Suh's study demonstrates that historical analyses of East Asia can no longer ignore Korea. The close examination of the Korean local gives us clues to understanding the mutually constitutive relationship of the local with the universal, with medicine as an important lens.

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