

Fengli Lan
Metaphor

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Fengli Lan

Metaphor

The Weaver of Chinese Medicine

With an Introduction by
Friedrich Wallner

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Introduction

Metaphor: The Weaver of Chinese Medicine

I am very happy and proud about this book. Because with this book, we execute a radical change in the research on Chinese medicine. But this change inherits dangers of misunderstanding which can be fundamental and destroy the message of this book. Therefore I want to give some hints for correct understanding beforehand. There are two aspects you should consider right from the beginning: The philosophy of Constructive Realism and the role of language in classical China.

The Constructive Realism has shown that Western science is a special case of science. This means other scientific structuralisations are possible and have been already, more or less, realized: The emergence of a specific science is always dependent from a specific culture. Science is always a radicalization of the convictions and implicit presuppositions of a specific culture. The Chinese medicine is a perfect example for such a realization.

The approach of Constructive Realism to compare different sciences is guided by three main ideas: To consider the differences between those sciences, to express their typical way of thinking and to be aware of the peculiarities of these ways of thinking. These three ideas implicate that there are different ways of structuring our knowledge possible and that several already existing besides each other. Those different sciences have emerged out of different ways of thinking, each with their own peculiarities, presuppositions and methods (methodologies). Although incompatible they can coexist next to each other without at least one of them necessarily being wrong. The reason that this is possible can be found in the understanding of science Constructive Realism has developed. Especially in its ontology.

The term “ontology” refers in this context to the relation between science and its object. On the one hand we have scientific theories, which can be seen as proposition-systems. These proposition-systems do not describe their objects; they tell us how to handle the data we get about those objects. The data on the other hand is produced in accordance with the theory (not a specific theory, but the according parts of the theoretical background of the discipline at stake). In order to generate the data it is necessary to focus on certain qualities of the object and exclude others. Which qualities are relevant we are told by the proposition-systems (or theories). With theory and data microworlds – as Constructive Realism calls it – are constructed by re-

ducing the qualities of our world. This leads to the main dichotomy in Constructive Realism: that between “Wirklichkeit” and “Realität”. Realität is the dimension of the microworlds – which are constructed by the systematization of certain and the exclusion of other qualities. Wirklichkeit is what is presupposed in this process – the world we live in. The relation between Wirklichkeit and Realität is that of reduction and of reference as well. This understanding of science as a reductive reference is open to the possibility of several ways to refer to the world by selecting different qualities your microworlds are reduced to. This explains how sciences can differ from each other without contradiction.

The main method Constructive Realism has developed to compare these different sciences is strangification. It is based on the idea that scientific theories are systems of propositions which are based on presuppositions. These presuppositions mark the conditions under which the propositions are true. The presuppositions are not always explicit. In fact they rarely are. If we transfer propositions from one system to another the result will get absurd, because the presuppositions needed for these propositions to be true are not given in their new context. With this method we are able to identify the implicit presuppositions that a science is based on.

Only if we know both, these presuppositions, that are the conditions of truth of a scientific theory, and thereby know its epistemic limits, as well as know which qualities are reduced and not part of the microworld, and thereby know its limits of explanation, we can speak of knowledge, that goes beyond simple rule-following within the framework of the microworlds.

If we apply those ideas of Constructive Realism to Chinese medicine, the essential differences between Eastern and Western medicine, that explain their incompatibility, will become clear and possible misleads in researching Chinese medicine will be apparent to us, so we can avoid them. Those mistakes are:

- Looking for similarities. The differences are the key to understanding.
- Giving a scientific legitimation. Although it is possible, it is very destructive to a completely different way of thinking.
- Taking propositions from Chinese medicine out of their original context, without being aware doing so is performing a strangification. The results will very likely be absurd.
- Using terms loaded by Western science.
- Mistaking modern China for classical China.

The differences are:

- The concept of experience. The Western way is to eliminate subjectivity. The Chinese way is to embrace subjectivity. For instance it is common to always refer to the master who offers the experiences.
- The role of generality. In Western science generality is an important quality feature of a theory. The more general, the better. In languages this leads to the idea of universals – the most general concepts that are covering everything. In Chinese language generalizing is unusual. They have something different.
- Intermobilities (if you allow us to introduce this term in lack of fitting vocabulary). They do not abstract terms to more general terms, they connect aspects. It means to connect an object with different qualities and objects in order to achieve a better understanding.
- In China they do not have the body-mind problem.
- The concept of nature. The (historical and intellectual) basis of Western science is that the world has a beginning, that it was constructed, in the sense that it is working according to a construction plan, which means that it has rules. These convictions grew historically. In China they have developed a different concept.
- Holism. We have holism in the Western world, so its mere existence is not enough to pose a difference, but ours is of a different kind. It is the product of our way of reasoning. We are using inductions and go from single experiences to more general experiences. For Chinese medicine holism is the condition of thinking.
- Inductions are unusual in Chinese medicine.

These insights enable us to give you the following useful advices:

- Do not ask for theory, ask for networks.
- Look at the differences.
- Do not generalize.
- Look for examples instead of explanations.
- Try to reduce your position to an observer.

The Chinese medicine is the best historical example for the ideas and convictions of Constructive Realism. In difference to the Western medicine, which follows the concept of analyzing explains the parts. The Western science trusts more the last elements, while classical Chinese thinking is more con-

centrated to understand the whole. The search for the “last or indivisible elements” seems for the Westerner most important, in Chinese thinking the whole (which must not be identified with system or totality), is represented by a metaphor. Chinese medicine is based on pattern recognition. Looking for the essential the Western science loses the essence.

If you understand the word “metaphor” as we understand it in the Western world, then you have already lost the possibility to understand this book. In our world metaphor can be understood and used in a manifold way: poetical, didactically, indicating what cannot be said or explained (for example pain). In all these cases the use of a metaphor shows the borders of language. In our consciousness there is a contra position between language and reality. Language is somehow arbitrary, can be used like a game, can be easily changed or reformulated. The reality on the other hand we think as unavoidable, serious and solid. Language and reality are strictly divided in our common thinking and unreflected behavior. In classical China language and reality are in a specific way interwoven. They do not contra pone phenomena and reality; The reality does not become the judge for the truth of phenomena, but what is true, what is important and even what is real is decided in the frame of language. Reality appears in language.

The core method in Chinese medicine is *Qu Xiang Bi Lei*, which is completely different from Western thinking. Instead of causal connections the relations it forms can be seen as a type of phenomenology. Just by stating this, before even explaining what *Qu Xiang Bi Lei* is, it becomes evident that Chinese medicine and Western medicine are incommensurable. From what is said above we can add that they are so in four aspects: the methodology, the ontology, the concept of experience and their theoretical structure. As for the methodology *Qu Xiang Bi Lei* is, as we have just said, similar to the position of phenomenology. Instead of induction and deduction it lets the things come for themselves. So on the ontological level, where in the West we have ontological analysis, synthesis and abstraction, Chinese medicine leaves everything as it is. This leads to a different concept of experience. While to Western science it is crucial to keep subjectivity out of your work, traditional Chinese thinking is based on a unification of subjectivity and objectivity. And while the theoretical structure of Western science is that of rules and laws, Chinese science works via pattern recognition and interpretation. It is necessary to keep that in mind in order to understand the following explanation of *Qu Xiang Bi Lei*.

Xiang means image, imagining and elephant. Do not think about elephants, they are not the important point here. This puzzling combination of meanings has historical reasons. The essential point is that image and imagination are the same. In our culture's epistemology the subject is in opposition to the objects and therefore it is necessary to differ between what is really seen in an image and what is just imagination. In Chinese medicine this separation does not exist. Phenomena and Noumena are not divided. What can be seen is already real, not just possible reality. In Western thinking the classic question is about the reality behind what is seen, in classical China there is nothing behind the image. *Xiang* is not representation, it is (an offer of) reality. In Western thinking this would be unthinkable. The picture cannot replace the thing. In Chinese thinking it is the thing.

Let us continue with the explanation: *Qu Xiang* means taking image. It is based on direct experiences gained by observation. An image from the world is taken with the symbols it can bear, to reason from analogy in the way of a metaphor. Relationships between the objects are thereby expressed. *Qu Xiang* means observing *Xiang* and taking *Xiang*. *Bi Lei* means analogizing or reasoning from analogy. It is a process of thought that compares different things and finds the similarities between them, so that it is possible to infer knowledge from one to another.

Chinese thinking does not assume the difference between representation and reality, thus different possibilities of reality are reflected in *Xiang*. The linguistic counterpart of the image (*Xiang*) is the metaphor. At this point then importance of the metaphor in Chinese medicine becomes apparent. It is where reality appears. Like an image and unlike simple propositions a metaphor can offer more than one or two possibilities. If we have a variety of possibilities there must be a way to choose from them. This choice is determined by the intention of acting and the conditions to act out of. *Qu Xiang* is always bound to the possibilities of action. Chinese Medicine is not structured by causality, but by functionality.

Vienna, August 2014

Friedrich G. Wallner

Author's Foreword

Wide-ranging heated debates between Chinese medicine and Western medicine, the rise of “Integrative Medicine with Chinese at Heart but Western Where Appropriate 医学衷中参西” in the early 20th century, and queries on validity and scientificity of Chinese medicine from some scholars in the world of today, as well as long-term application of Western scientific standards on judging Chinese medicine, all result in that “science” and “Chinese medicine” can not be mentioned in the same breath. Actually whether Chinese medicine is scientific or not depends on how you define “science”. Be aware, science originally means “knowledge of any kind”. Is Western science the only possible “scientific” approach? Does Chinese medicine have its own claim for truth?

It is not difficult to understand - the possibilities of perceiving the world are manifold, so there are many possible ways of selecting, excluding, and reducing the certain aspects of the analyzed object based on different cultures, and thus many corresponding resolutions. A scientific system can be considered as an artificial and constructed system of data and propositions, a constructed “microworld”, a world that selects and reduces qualities of the object in certain aspects. Thus Chinese medicine also has a legitimate claim for truth without getting into contradiction with other different systems like Western medicine. It can also be incompatible with Western medicine for both have different ways of constructing their microworlds.¹

Chinese medicine can be roughly classified into two parts: one part is the “Dao 道 or Way”, i.e. the way of constructing the knowledge system, which needs to be understood based on its culture and philosophy; while the other is the “Shu 术 or Skill”, i.e. its clinical application, which can be proved in rational ways and by proper methods. As the title goes, this book discusses Dao or Way of Chinese medicine: Metaphor as the weaver of Chinese medicine.

Qu Xiang Bi Lei 取象比类 or Taking Image and Analogizing is the core methodology of Chinese medicine. Its procedure as recorded in *The Book of Changes* – “Observing Object 观物 – Taking Image 取象 – Com-

1 Wallner, Friedrich. How to Research TCM. In Wallner F. G., Kubierna G., Jandl M.J. (eds). 2009: 22-45.

paring and Analogizing 比类 – Understanding Dao 体道” runs through almost all the aspects of Chinese medicine from forming its fundamental concepts, elaborating its theories, to developing its clinical explorations, and thus embodying the three key processes/elements of classical Chinese metaphor studies, i.e., “Imaging/Image 象 – Analogizing/Analogy 比 – Metaphorizing/Metaphor 喻”, finally forming metaphors in Chinese medicine, guiding clinical practice, and developing Chinese medicine in both theoretical and clinical explorations. Based on these three key processes/elements, the author advances that *Qu Xiang Bi Lei* is the metaphorizing process and the way of forming metaphors in Chinese medicine, Chinese medicine is a linguistic knowledge system with metaphor as its deep structure, and that metaphor is the weaver of Chinese medicine.

In the recent years, studies on the essence, characteristics, methods, and principles of metaphors in Western scientific discourses have achieved important progress and gratifying outcome², but studies on metaphors in discourses of classical Chinese philosophy and science, which originated from *The Book of Changes*, are rarely seen. The significant difference of metaphors in discourses of Western science and Chinese medicine lies in that:

What Western scientific discourse has always been seeking is objective description, Western science takes deduction and induction as its core methodologies, and the functions of metaphors in scientific cognition and exploration has always been in a marginal position in Western science although metaphors can be seen almost everywhere in seemingly objective scientific discourses³ and metaphors play an absolutely necessary role in scientific exploration and dissemination of scientific thoughts;⁴

While Chinese medicine takes *Qu Xiang Bi Lei* or Taking Image and Analogizing as its core methodology, and is metaphorical from the formation of its concepts, construction of its theoretical framework, to the development of its clinical explorations, and even to the whole system. In other words, the functions of metaphors in scientific cognition and exploration have always been in the core position in Chinese medicine.

2 Guo Guichun. *Metaphor, Rhetoric, and Scientific Interpretation* [M]. Beijing: Science Press, 2007.

3 “Scientific discourses” here refer to “discourses of Western science”.

4 Dong Hongle. 2005: Synopsis.

I think that is the fundamental difference in between Western science and Chinese medicine, and that studies on metaphors in Chinese medicine can reveal true values of classical Chinese medicine, bridge the gap between Chinese medicine and Western medicine, promote and realize the integration of the two medical systems.

Along with the formation of a worldwide aging society and the significant variations in disease spectrum, it has become thus clear that Chinese medicine is a real gem worth to cherish and to carry on in the unending quest for human health, well being, and a long life. Then, how to carry on Chinese medicine? *Qu Xiang Bi Lei* 取象比类 or metaphorizing should be one of the most significant approaches to develop and modernize Chinese medicine since it is the core methodology of Chinese medicine.

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“Language is the outcome of a culture. Language of a nation is the general reflection of the culture of the nation; but we can also say that language is a part of the culture ... and that culture and language have developed together for thousands of years.”

- Claude Levi Strauss⁵

We should not content ourselves to the present state of language. We have to trace back to the origins of words if we want to discover the ties which link the words and their references. ... Etymology has thus become not only the heart of linguistics, but also the foundation stone of philosophy of language.

- Ernst Cassirer⁶

Western medicine is an applied medicine based on achievements of modern Western science and technology, while Chinese medicine roots in classical Chinese philosophy and culture, e.g. Daoist School, and thus goes closer to humanities. But both aim to heal the same being, which is composed of body and mind.

- The Author

1 Cultural Differences between Chinese Medicine and Western Medicine

Both transmission of Chinese medicine to the West and dissemination of Western medicine in China started in the Ming dynasty (16th-17th centuries). Some missionaries taught and spread Christian or Catholic religion by practicing Western medicine; meanwhile, they introduced Chinese medicine curiously, esp. their own experiences in Chinese medicine to the West. Over 300 years passed by. At present, Chinese medicine and Western medicine actually coexist no matter in China or in the West. So, Chinese medicine is not only a special medical system with distinctive national features of China, but also a medical system for the humankind of the whole world.

5 Translated from Chinese. Quoted from a secondary source: See He Yumin. 1990: 149.

6 Translated into English from Chinese. Gan Yang, Translator; Ernst Cassirer, Author. 2004: 158. Its Original Version is: *An Essay on Man: An Introduction to a Philosophy of Human Culture* [M]. New Heaven: Yale University Press, 1944.

Chinese medicine and Western medicine share at least 3 common features: 1. the same object - life processes of the human being; 2. the same goal – To prevent and treat diseases; and 3. both are members of “scientific systems”, which depends on how you understand “Science”. But, Chinese medicine bears strong humane characteristics, and thus goes closer to humanities; while Western medicine, esp. modern Western medicine, is an applied medicine based on achievements of modern Western science and technology, and thus has typical features of modern Western science. What are the cultural differences between the two medical systems? I think that clarifying these differences will be very helpful for you to understand Chinese medicine.

1.1 Chinese Medicine Going Closer to Humanities Rather than Natural Science

There is no breakthrough but only development and enrichment in Chinese medicine since the establishment of its knowledge system about 2,000 years ago; and there is even no real development since the establishment of standardized transmission of Chinese medicine in 1956. Why?

Chinese Medicine has formed a self-contained fruitful paradigm, so can be enriched and developed in the same framework – *Qu Xiang Bi Lei* or Taking Image and Analogizing guided by *Tian Ren He Yi* or The Unity of Heaven and Humankind established about 2,000 years ago, and survives up till today. For example, the theory of Visceral Manifestation embodies the holistic approach of “Four Seasons – Five *Zang* Organs – Yin-Yang – Five Phases” and “The Unity of Heaven and Humankind”. While based on reductionism, mechanism and dichotomy, Western medicine takes an analytical approach, and has been continuously refreshing itself because of the application of advanced modern scientific technology and instruments (tools) to develop itself.

In contemporary China, Chinese medicine is classified as a discipline of natural science by the government of China since 1956. For example, there are two major national foundations in China, one is National Natural Science Foundation of China (NNSFC) for sponsoring research projects in the field of natural science, where Chinese medicine is included; the other is National Funds for Social Science for sponsoring research projects in the field of social science, where Chinese medicine is excluded. That is to say, researches on Chinese medicine have to be performed by applying Western