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INDIVIDUAL ITINERARIES AND THE
SPATIAL DYNAMICS OF KNOWLEDGE
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IN CHINA, 17TH-20TH CENTURIES

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COLLÈGE DE FRANCE
INSTITUT DES HAUTES ÉTUDES CHINOISES

DIPLOMACY, EMPIRE AND MEDICINE: THE CONSTRUCTION OF FRENCH ACUPUNCTURE

Lucia CANDELISE

Introduction

In 1929, George Soulié de Morant and Paul Ferreyrolles published an article on Chinese acupuncture in the journal *L'Homéopathie française*.¹ At this time, the practice of acupuncture began to find a place in the French medical community, and within a few years it was practiced in some hospitals in Paris. This chapter aims to discuss the role of three figures in the construction of French acupuncture during the twentieth century. After presenting the work of a number of authors who were somewhat interested in Chinese medicine during their time in China or Indochina, I focus on the personal itineraries of two key figures: George Soulié de Morant (1878-1955) and Albert Chamfrault (1909-1969), while also evoking Roger de La Fûye (1890-1961), who was the former's student and the latter's teacher. The present contribution focuses on the ways in which their mobility and their official positions in governmental institutions contributed to the legitimization of the knowledge and practice of acupuncture in France between 1930 and 1969. Through this episode, I hope to shed light on the dynamics of what was perceived by the actors as "Chinese knowledge" beyond the boundaries of China's territory.

I. Between Colonial Tales and Medical Counter-Cultural Currents: Interest in Chinese Medicine up to the 1930s

1.1. Empire and the Representation of Chinese Medicine

If various practitioners and others in France had shown an interest in what they called "acupuncture" at the beginning of the nineteenth century,²

¹ George Soulié de Morant and Paul Ferreyrolles, "L'acupuncture en Chine vingt siècles avant J.-C. et la réflexothérapie moderne," *L'Homéopathie française* 6 (June 1929), pp. 403-417.

² These include Louis Berlioz (1776-1848), Jean-Pierre Abel-Rémusat (1788-1832), and

a new phase began at the end of that century. In fact, the publications of several French physicians and diplomats who had lived in China or Indochina and their opinions on the therapeutic and cultural value of Chinese medicine, on its interest for practitioners and French society, and its possible connections with Western medicine, were at the origins of the development of acupuncture in France. The first text to which French physicians and practitioners of the twentieth and twenty-first centuries make reference is the book published by Claude-Philibert Dabry de Thiersant (1826-1898) in 1863, *La Médecine chez les Chinois*.³ Ten years later, in collaboration with Jean-Léon Soubeiran, Dabry published *La Matière médicale chez les Chinois*.⁴

Dabry de Thiersant lived in China from 1856 to 1871 as Commissioner for the French Government at Tianjin and Chusan (the Zhoushan 舟山 Islands), and as Consul at Hankou 漢口 and later at Shanghai and Canton.⁵ Neither a physician nor a sinologist, Dabry compiled works on Chinese medicine among other texts dedicated to diverse Chinese practices such as fish farming and fishing. These texts, notable for the rigor of their contents and their sources, and for the concepts of Chinese medicine they introduced, were to be among the fundamental sources of information for the first practitioners in France some fifty years later.

Several decades later, three French physicians, Jean-Jacques Matignon (1866-1928), Jules Regnault (1873-1962) and Eugène Vincent (1843-1926) published works on Chinese or Annamese medicine in France. Matignon was a senior medical officer at large for the colonial army and a former attaché to the French Legation in Beijing who wrote about Chinese thought and civilization as well as on medicine. He was especially interested in the cultural aspects of what he called Chinese beliefs related to medicine,

Jean-Baptiste Sarlandière (1787-1838). See Frédéric Obringer, “Savez-vous tâter le pouls à la mode des Chinois? L’introduction de la médecine chinoise en France,” in Paul Ulrich Unschuld, ed., *Médecines chinoises* (Montpellier: Indigène éditions, 2001), pp. 120-131; Linda Barnes, *Needles, Herbs, Gods and Ghosts: China, Healing, and the West to 1848* (Cambridge, Mass.: Harvard University Press, 2007); Lu Gwei-Djen and Joseph Needham, *Celestial Lancets: A History and Rationale of Acupuncture and Moxa* (Cambridge: Cambridge University Press, 1980); and Ronald Guilloux, “Évolution de la ‘tradition’ dans la réception de l’acupuncture chinoise en France (1860-1980),” *Revue d’anthropologie des connaissances* 5, no. 1 (2011), pp. 13-40.

³ Claude-Philibert Dabry de Thiersant, *La Médecine chez les Chinois* (Paris: H. Plon, 1863). See Guilloux, “Évolution de la ‘tradition.’”

⁴ Claude-Philibert Dabry de Thiersant and Jean-Léon Soubeiran, *La Matière médicale chez les Chinois* (Paris: G. Masson, 1874).

⁵ See Frédéric Obringer, “Dabry de Thiersant,” in François Pouillon, ed., *Dictionnaire des orientalistes de langue française* (Paris: Karthala, 2008), pp. 251.

among other subjects, while always insisting on the lead that Western civilization held. More relevant for the content of his writings and the influence they had on Soulié de Morant and his successors was Jules Regnault, a physician and surgeon in military hospitals. Regnault lived in Tonkin between 1889 and 1900. When he returned to France, he wrote a series of articles on acupuncture and reflexotherapy, but he was especially known for his publications on Chinese and Annamese medicine. His book, *Médecine et pharmacie chez les Chinois et chez les Annamites*, is testimony to his observations in the field, compiled thanks to the study of a number of Chinese works.⁶ This book, like that by Dabry de Thiersant, would often be cited and sometimes plagiarized by physicians and practitioners in France who were later attracted to acupuncture. In 1915 Eugène Vincent published *La Médecine en Chine au XX^e siècle*, with a preface by Matignon, which was an interesting presentation of Chinese medicine, but probably less well-known at the time than the works of Dabry de Thiersant and Regnault.⁷

Dabry de Thiersant and Matignon, but especially Regnault, refer to knowledge and experience related to Chinese medicine gathered in China and in Indochina. Although they were assigned to China as physicians or diplomats, Dabry de Thiersant and Matignon had also traveled in Indochina.⁸ They both clearly expressed their colonialist stance, though with different arguments and different attitudes.⁹ While Matignon wrote:

The experience of centuries should have shown the Chinese all that these superstitions contained that was fake and ridiculous and even pernicious. But this is not the case.

Can one hope to free China from this tissue of superstitions that smothers its intelligence and opposes all progress? Falsehood, the absurd and the mysterious have such an attraction for the Chinese that I fear they will only abandon their beliefs with difficulty.¹⁰

⁶ Notably the sixteenth-century *Bencao gangmu* 本草綱目 (Compendium of materia medica); see Jules Regnault, *Médecine et pharmacie chez les Chinois et chez les Annamites* (Paris: A. Challamel, 1902), p. 6.

⁷ Eugène Vincent, *La Médecine en Chine au XX^e siècle: la vieille médecine des Chinois, les climats de la Chine, l'hygiène en Chine et l'hygiène internationale* (Paris: G. Steinheil, 1915).

⁸ In his works, Matignon frequently mentions his travels in Indochina, which is not surprising, especially after 1887 and the establishment of the colonial territories of French Indochina.

⁹ See Lewis Pyenson, *Civilizing Mission: Exact Sciences and French Overseas Expansion, 1830-1940* (Baltimore: The Johns Hopkins University Press, 1993).

¹⁰ Jean-Jacques Matignon, "Quelques superstitions médicales des Chinois," *Bulletins de la Société d'anthropologie de Paris*, IV-9 (1898), pp. 408-413.

Dabry de Thiersant asserted:

. . . well, I am happy to be able to say that it would be difficult to find another colony where the treasures were so abundant and which offers a greater future for the metropolis. . . Surrounded by almost completely inaccessible frontiers, the Kingdom of Annam, having become French territory, is called—under a skillful administration, which will know how to take advantage of the indigenous elements in managing them, and with the necessary assistance of capitalists organized into companies, in the future, for our commerce and our industry—a source of wealth.¹¹

This approach to the medical practices of the Chinese and the Vietnamese is transformed in the views of Jules Regnault, who assumed more moderate positions on the question of Western superiority in terms of science, thought and development, and who expressed himself more openly in favor of knowledge of Chinese therapeutics and its remedies. He positioned himself in relation to authors such as Dabry de Thiersant and Matignon (especially the latter) in arguing their points of disagreement.¹²

In the introduction and the conclusion to his work, Regnault argues for the interest that Chinese clinical approaches might have for Western society and especially for the medical field. According to Regnault, the interest of this medicine derives from its “antiquity”¹³ as well as its empirical character and the attention it gives to symptoms and, thus, to signs of illness in the patient. In the very last sentences of his book, he justifies the reasons for which it would be important for a European physician to know Sino-Annamese medicine:

The European doctor who possesses some idea of Sino-Annamese medicine understands better the disorders exhibited by indigenous patients; in addition, he can let it be known by a word or a question that he is aware of Chinese theories and medications and will thus rapidly gain prestige and greater confidence. We hope that our modest work will be of some use to those who try to achieve this two-part goal: to study the Sino-Annamese therapies and pharmacopeia to glean what is good in them; and to inspire the confidence of the natives in French physicians and by this even to expand French influence.¹⁴

¹¹ Dabry de Thiersant, *La Médecine chez les Chinois*, pp. vii-viii.

¹² Regnault, *Médecine et pharmacie*, pp. 116-118.

¹³ Jules Regnault, *L'Art médical en Extrême-Orient* (Paris: Henri Charles-Lavauzelle, 1903), p. 1.

¹⁴ Jules Regnault, *Médecine et pharmacie*, p. 123.

We should draw attention to the fact that the work of this physician should be put in the context of a period of transition between the colonialist view toward Chinese medicine (Dabry de Thiersant, Matignon) and a practical interest in Chinese medical resources. In the implementation of his approach to the field, Regnault advanced a very specific mode of inquiry, stating:

. . . . we have sought to complete our studies by interviewing physicians and pharmacists and especially by having read and explained for us the theories and the principal practices of Chinese medicine by a very intelligent Chinese scholar who had long studied diverse medical treatises.¹⁵

An approach to Chinese medicine is outlined in the statements of these colonial physicians who began to gather a certain amount of knowledge and to transmit it to France from that time on, addressing an audience of doctors. Later, starting in the 1930s, the works of Regnault, like those of Dabry de Thiersant, would influence and shape the introduction of Chinese medicine and acupuncture as well as the work of practitioners in France.

1.2. *The Medical Context of the Introduction of Acupuncture in France in the 1930s*

What interest could this medical practice present at that time? To answer this question, we have to briefly examine how critical movements towards officially recognized scientific practice within the French medical world appeared and developed between the two World Wars. We will also pay attention to the ways in which these movements accompanied and stimulated the definition of medical knowledge and therapeutic technique derived from another civilization. Indeed, around the edges of official medicine between the two wars, medical counter-culture currents appeared which, despite everything, achieved undeniable influence and notoriety.¹⁶ In addition to vitalism, which included several medical approaches, homeopathy, neo-Hippocratism and even a trend of Christian medical humanism as well as, a little later, acupuncture, found niches in the French medical world.

In 1933, Maxime Laignel-Lavastine (1875-1953), professor of the history of medicine at the School of Medicine of the University of Paris, founded the journal *Hippocrate: Revue d'humanisme médical*.¹⁷ It was essentially

¹⁵ Regnault, *ibid.*, p. vii.

¹⁶ See Christopher Lawrence and George Weisz, eds., *Greater than the Parts: Holism in Biomedicine, 1920-1950* (Oxford: Oxford University Press, 1998).

¹⁷ The bi-monthly review *Hippocrate* was published between 1933 and 1951.

concerned with the history of medicine, open to all medical approaches; it informally became the vehicle of the neo-Hippocratic movement. French neo-Hippocratism developed mostly among homeopaths, among who were Marcel Martiny (1887-1982),¹⁸ Paul Ferreyrolles (1880-1955),¹⁹ and Georges Monod; they led the group called the “Carrefour de Cos.” They traced back to Hippocrates the assertion according to which “disease is produced by similars and it is by the administration of similars that patients regain their health.”²⁰ The entire neo-Hippocratic movement refers to a traditional image of medicine in contrast to medicine that is “specialized, technical and the fruit of the industrial era.”²¹ The conception of the neo-Hippocratics found justification by means of the re-appropriation of the “essence of the spirit of origins,” reclaiming Greek medicine and the Hippocratic school.²² These references and the opposition to or distancing from a modern medicine that was to become more and more specialized and institutionalized in the following years led to an interest in approaches from other sources, notably China. Naturopaths, medical writers such as Maxime Laignel-Lavastine (1875-1953) and Paul Desfosses (1869-1944), members of the Paris medical elite such as Professors Paul Carnot (1869-1957), Maurice Loeper (1875-1961), René Leriche (1879-1955), a Professor at the Collège de France, and professors in provincial institutions such as Pierre Delore (1896-1960) in Lyon, actively participated in neo-Hippocratic conferences.²³

This French medical circle’s interest in therapeutic practices coming from China corresponded to an attraction for this country that extended to a wider socio-cultural context. The fascination with exoticism²⁴ and the processes of “Orientalism,” in the sense later put forward by Edward Said,²⁵

¹⁸ Marcel Martiny was a homeopathic physician and president of the Société d’anthropologie de Paris. He is one of the best-known representatives of the French neo-Hippocratics and a founding member of the Carrefour de Cos.

¹⁹ Paul Ferreyrolles was a thermal physician who was interested in all non-conformist therapeutics which were not yet officially recognized. He was a member of the circle “Carrefour de Cos” along with Thérèse Martiny and Marcel Martiny.

²⁰ Marcel Martiny, “Histoire de l’homéopathie,” in Maxime Laignel-Lavastine, ed., *Histoire générale de la médecine, de la pharmacie, de l’art dentaire et de l’art vétérinaire . . .*, 3 vols. (Paris: Albin Michel, 1936-1949), vol. 3, pp. 563-578. See also n. 40 below.

²¹ Marcel Martiny, *Hippocrate et la médecine* (Paris: Librairie Arthème Fayard, 1964), p. 313.

²² *Ibid.*, p. 314.

²³ See George Weisz, “A Moment of Synthesis: Medical Holism in France between the Wars,” in Lawrence and Weisz, eds., *Greater than the Parts*, p. 83.

²⁴ See Victor Segalen, *Essai sur l’exotisme: une esthétique du divers*, Dominique Lelong, comp. (Paris: Fata Morgana, 1978).

²⁵ See Edward Said, *Orientalism* (New York: Pantheon Books, 1978).

were at play in France in this period, when Indochina was a distant French colony and China a land even more unknown.

II. How to Become an Acupuncturist in Paris in the 1930s

2.1. *George Soulié de Morant (1878-1955), a Multifaceted Life*

In 1927, George Soulié de Morant met Paul Ferreyrolles in La Bourboule (in the Auvergne region) when the former accompanied his daughter Evelyn during her treatment at the hot springs there. From this encounter was born a collaboration that lasted for several years and that allowed a particular practice of acupuncture—which I have termed “traditionalist French acupuncture”—to become established in the French medical community.²⁶ At the time, George Soulié de Morant had recently and definitively given up his diplomatic career, having spent nearly eight years in China as an interpreter between 1901 and 1909. The son of a bourgeois Parisian family, he was attracted by China at a very early age. It was his acquaintance with the family of the famous writer Théophile Gautier (1811-1872) that enabled him to begin his study of the Chinese language. At a relatively young age, he was employed as a secretary by the Compagnie du Sud-Est Africain and the Compagnie du Zambèze (1897 to 1899) and then the Compagnie Agricole et Industrielle de Madagascar (June 1901 to December 1902), becoming a secretary-interpreter of the Compagnie Impériale du Chemin de Fer Hankéou-Pékin, which sent him between December 1901 and September 1902 between Hankou (Wuhan) and Beijing.²⁷ At this point, he began his career as an interpreter, which would lead him to begin a diplomatic career and to reside in China.²⁸ He was appointed student-interpreter attached to the Consulate at Shanghai in July 1903, and he left for China in September. He remained in Shanghai until 1906, when he returned to France on medical leave. In August 1906 he was then appointed third-class interpreter and at the beginning of 1907 he joined the Consulate at Kunming, where he remained for two-and-a-half years (until June 1909). It was only during this stay that Soulié de Morant took up the responsibilities of a Vice-consul, even though he never received an official appointment from

²⁶ On “traditionalist French acupuncture,” see Lucia Candelise, “Construction, acculturation et diffusion de l’acupuncture traditionaliste française’ au XX^e siècle,” *Documents pour l’histoire des techniques* 16 (2008), pp. 76-88.

²⁷ Centre des Archives diplomatiques de La Courneuve, Personnel, Dossiers nominatifs, deuxième série 1900-1930 FRMAE 394QO, Dossier Soulié, Charles *Georges*, n° 1444.

²⁸ He also spoke English (his mother was American), Spanish and Italian. See Centre des Archives diplomatiques de La Courneuve, Dossier Soulié, Charles *Georges*, n° 1444.

the Ministry.²⁹ When he returned to France in 1909, he requested the appointment to Vice-consul but only received an appointment as second-class interpreter in January 1910 and was attached to the Consulate at Shanghai.³⁰ In fact, he never returned there, allegedly because of health problems.³¹ He probably returned to China in 1917 for a short mission.³² This mission, which would have been financed by the Ministry of Public Instruction and Fine Arts, seems, according to some sources, never to have taken place, or, according to others, to have taken place as a secret mission.³³ What seems certain, however, is that from this point on his diplomatic career drew to a close, against his wishes.

Contrary to what several biographies state, George Soulié de Morant did not openly renounce his diplomatic career in 1917 but did so much later, after 1925.³⁴ Indeed, in 1917 he obtained an appointment as second-class Consul, but expressed “the intention to abandon an active career,” which corresponded in effect to a leave of absence.³⁵ Nevertheless, a few years later, he requested a reinstatement in the duties of the Ministry of Foreign Affairs.³⁶ This request was endorsed by significant support from the office of the Ministry of the Interior, the Ministry of Public Instruction and Fine Arts, from the President of the Republic and the Ministry of Foreign Affairs. Consisting of an honorary posting or a “consolation which assigned blame to no particular party,” as it was described in an unsigned letter sent to him in 1921, which was certainly a response to his letter of April 20, 1920 requesting reinstatement. Indeed, in 1925 his requests were probably brought

²⁹ George Soulié de Morant, “Notice sur le Yunnan,” July 1908, Centre des Archives d’Outre-Mer, Fonds du Gouvernement Général d’Indochine, dossier 19713.

³⁰ Letter from the Ministry, 18 January 1910, Archive, Ministry of Foreign Affairs, dossier Georges C. Soulié, n° 1444.

³¹ George Soulié de Morant, Correspondences, Archive, Ministry of Foreign Affairs, dossier Georges C. Soulié, n° 1444.

³² This was stated by his daughter, Evelyn Soulié de Morant, during interviews with the author, Paris, March 2004.

³³ See Paul Ferreyrolles, “George Soulié de Morant,” *Bulletin de la Société d’Acupuncture* 16 (1955), pp. 6-8; and see Thérèse Martiny, “George Soulié de Morant,” *Méridiens* 7-8 (1969), p. 8.

³⁴ See Wei Thiong Chan Way Tim, “George Soulié de Morant,” *Méridiens* 79 (1987); and see Janine Jacquemin, “George Soulié de Morant, sa vie, son œuvre,” *Revue française d’acupuncture* 42 (1985), pp. 9-31.

³⁵ Letter from the Cabinet du ministre, 22 February 1925, Archive, Ministry of Foreign Affairs, dossier Georges C. Soulié, n° 1444.

³⁶ Letter, 20 April 1920 to the “président du Conseil,” Archive, Ministry of Foreign Affairs, dossier Georges C. Soulié, n° 1444.

to a close by a note informing him that “the net result of his leave would be that he would receive the lowest official rank.”³⁷

Very shortly after giving up his efforts at recognition from the diplomatic world, he met Paul Ferreyrolles and, thanks to him, rapidly established contact with the circle of neo-Hippocratic physicians, who were interested in treatments coming from China. Within a few years from the beginning of his collaboration with Paul Ferreyrolles, George Soulié de Morant was acquainted with Marcel and Thérèse Martiny³⁸ and Charles Flandin.³⁹ Beginning in 1931, these physicians opened acupuncture clinics at several Parisian hospitals: the Hôpital Bichat, the Hôpital Léopold-Bellan, the Hôpital Saint-Louis and the Hôpital Saint-Jacques, as well as the Hôpital Hahne- mann⁴⁰ and the Hôpital Foch.⁴¹ George Soulié de Morant took part in these clinics in the role of expert in acupuncture. After having worked with Paul Ferreyrolles (together they published the first article on acupuncture in 1929⁴²), Soulié de Morant collaborated at length with Thérèse Martiny (d. 1979). He followed Thérèse Martiny’s treatments at the Hôpital Léopold-Bellan starting in 1932 and they certainly worked together until 1934. This collaboration and the respect in which Martiny held Soulié de Morant enabled the latter to pursue his practice as an acupuncturist to the end of his life. Collaboration with French physicians also turned Soulié de Morant into the first expert in clinical acupuncture in France and won him recognition as a key figure, who passed on Chinese medical knowledge and practice directly from China to the French and European medical milieu.

³⁷ Note, 25 January 1925. Archive, Ministry of Foreign affairs, dossier Georges C. Soulié, n° 1444.

³⁸ Thérèse Martiny followed the practice of her husband and was the physician closest to Soulié de Morant. Both husband and wife were members of the Société d’acupuncture and supported the spread of this therapy in France.

³⁹ Charles E. H. Flandin (1882-1955) was later president of the Société d’acupuncture and was in addition president of the Société française de dermatologie et syphiligraphie and of the Société des médecins de Paris. In 1952, he wrote the article “Propos sur l’acupuncture” in the journal *Monde médical*, where he defended the value of acupuncture.

⁴⁰ George Soulié de Morant, “Chine et Japon,” in Laignel-Levastine, ed., *Histoire générale de la médecine*, vol. 3 (See n. 20 for this 3-volume publication); reprint in George Soulié de Morant, *Acupuncture (Communications 1929-1951)* (Paris: Trédaniel, 1979), pp. 121-152; see esp. p. 152.

⁴¹ Marcel Martiny, “Éditorial,” *Méridiens* 3-4 (1968), p. 11.

⁴² Soulié de Morant and Ferreyrolles, “L’acupuncture en Chine vingt siècles avant J.-C.”

2.2. *Real or Constructed Life Itinerary? Questioning the Sources of Soulié de Morant's Career*

Soulié's itinerary and the details of his multifaceted life, as well as his training in Chinese medicine and acupuncture remain a genuine mystery. Soulié de Morant's statements concerning his training, the titles and honors he received in China, the observations made and the experiences undergone during the years spent there, as well as the texts brought back to France after his travels all need to be carefully checked. An examination of the documents in his diplomatic file at the Ministry of Foreign Affairs as well as personal archives, when compared with the biographies of Soulié de Morant, the recollections of his family⁴³ and his own writings, have enabled us to shed light on a few points of the path that led him to promote the practice of acupuncture in the French medical world in the first half of the twentieth century.

The analysis of the documents concerning his career in the Ministry of Foreign Affairs has shown that it was mostly that of an interpreter rather than of an actual diplomat. He never received the title of consul during his postings in China, but only at the end of his life. Florence Bretelle-Establet, in her work *Santé en Chine du Sud (1898-1928)*, does not describe Soulié de Morant as a consul (his interim appointment having been too brief); neither does she mention him as active in the French hospital at Kunming, which, starting in 1908, received provincial subsidies to treat the soldiers who were too numerous for the Chinese military hospital.⁴⁴

It would be reasonable to question his place in the Chinese society at the time when he was in China; this was in the wake of the Boxer Rebellion and during the last years of the Qing Empire, when the Chinese attitude toward foreigners was in general rather restrained if not outright hostile.⁴⁵ Beside

⁴³ I was able on several occasions to interview the daughter of George Soulié de Morant, Evelyn Soulié de Morant, in Paris, March 2004, when she was aged ninety; she dedicated an important part of her life to the defense of the role of her father as the founder of acupuncture in France, and of his works. With her brother, she took charge of the publication of *L'acupuncture chinoise*.

⁴⁴ Florence Bretelle-Establet, *Santé en Chine du Sud (1898-1928)* (Paris: CNRS, 2002), p. 159. Johan Nguyen emphasizes the fact that Soulié de Morant was not employed as a translator when there were attempts to establish training in Western medicine in Kunming after 1905. This might confirm his lack of interest in medicine during this period, contrary to what he later stated in his writings. See Johan Nguyen, *La réception de l'acupuncture en France: une biographie revisitée de George Soulié de Morant (1878-1955)* (Paris: L'Harmattan, 2012).

⁴⁵ See Nicole Bensacq-Tixier, *Histoire des diplomates et consuls français en Chine (1840-1912)* (Paris: Les Indes Savantes, 2008), pp. 475-500.

his writings on China and his own statements, there is no evidence of Soulié de Morant's integration into Chinese society, of his knowledge of the language and of the etiquette. How could he have fitted so well into Chinese society from the moment of his arrival in China?

Soulié de Morant was a very prolific author on a wide range of subjects concerning China and the Chinese world;⁴⁶ his first publication dates to 1903 (a grammar of Mongol), but it is striking that his bibliography up to 1929 includes no title on the subject of medicine. He justified this absence in several articles and in his 1957 book *L'Acupuncture chinoise*.⁴⁷ He asserted that he met many difficulties and suspicions from French publishers with regard to his writings on Chinese medicine and acupuncture.⁴⁸ Soulié de Morant put forward four elements on which his theoretical and practical knowledge on Chinese medicine rested: his training in China with Chinese physicians, his fieldwork in China and the direct observation of acupuncture and pulse diagnosis practiced there, the official titles that he had received as practitioner, and the books that he brought back from China—"medical treatises which are now almost impossible to find."⁴⁹

In the introduction to *L'Acupuncture chinoise*, Soulié de Morant stated that he had met Chinese physicians and studied with them: these included a certain Doctor Iang who taught him pulse diagnostic techniques during his stay in Beijing, and an acupuncturist named Tchang who introduced him to the principles of acupuncture in Shanghai.⁵⁰ It seems that neither his personal archives nor his publications contain any evidence of his relationships with either Iang or Tchang.⁵¹ Nevertheless the names of these two physicians are invoked among the proofs of his Chinese training in acupuncture and pulse diagnosis during his staying in China.

⁴⁶ See Lucia Candelise, "George Soulié de Morant, le premier expert français en acupuncture," *Revue de synthèse* 131, no. 3 (2010), pp. 373-399.

⁴⁷ George Soulié de Morant, *L'Acupuncture chinoise* (Paris: Éditions Jacques Lafitte, 1957; reprint, Paris: Maloine, 1985), p. 25.

⁴⁸ This seems to be confirmed by the analysis of letters written when he was looking to publish the second volume of his *Précis de la vraie acupuncture chinoise: Doctrine, diagnostic, thérapeutique* (Paris: Mercure de France, 1934). See Soulié de Morant's letter to Monsieur Bernard, 3 March 1936, and a letter to an unknown recipient, dated 2 February 1940, held in the private archives of Paul Unschuld.

⁴⁹ Soulié de Morant, *L'Acupuncture chinoise*, p. 25.

⁵⁰ *Ibid.*

⁵¹ In the archives of the Soulié de Morant family, I have seen two photos of George Soulié de Morant in the Jardin du Luxembourg in Paris, accompanied by Chinese people. On the back of one of the two photos is the note "1948, 1^{er} novembre, Dr Leson, Dr John Tcheng, Dr Tchan." This only demonstrates later relationships with Chinese physicians without confirming his training with Chinese practitioners in China.

Moreover, a fundamental question arises concerning the therapeutic method that he claimed to have observed and studied during his trips to China. How was it possible to observe and learn acupuncture in isolation when at that time the remedies from the Chinese pharmacopeia were generally more widespread than treatment using needles?⁵² Among his papers, there exists a manuscript dictionary of medical terms in which remedies from the pharmacopeia appear; however he never made any reference to the Chinese pharmacopeia in his writings after 1929.

As for the official titles and the degrees that he claimed to have received, the Soulié de Morant family seems not to have preserved any proof of such official recognition. In particular the award of the “carved red coral bead that confers the rank of academician” can only have been an invention by Soulié de Morant to assert his position as a practitioner or so-called “Chinese doctor” recognized in China. Indeed, the practice of medicine in China at this period, and particularly in Yunnan, was hardly professionalized, a fact which caused great surprise to the French physicians sent to these regions at the beginning of the twentieth century.⁵³

Soulié de Morant also stated he had brought back from China “medical treatises which are now almost impossible to find.”⁵⁴ In his private archive he kept several texts and books on Chinese medicine considered as some of the “classics of Chinese medicine;” some of them were quoted as his sources in his posthumous book, *L'Acupuncture chinoise*.⁵⁵ However we have no idea when he acquired these books or from whom.⁵⁶ The circulation or movements of individuals who transmit specialized knowledge is not necessarily the same as that of books. Soulié de Morant accounted for his knowledge of Chinese medicine by claiming that he had brought back from China medical texts then not found in Europe. Nevertheless, he could have also acquired the texts he cited after his return from China. Indeed, we need to ask what were the origins of the knowledge and skills that he claimed to possess. How was Soulié de Morant able to defend his half-truths, and how did he legitimize his authority in acupuncture? How could he ultimately

⁵² See Paul Unschuld, *Chinese Medicine: A History of Ideas* (Berkeley: University of California Press, 1985).

⁵³ Bretelle-Establet, *Santé en Chine du Sud*, pp. 80-105.

⁵⁴ Soulié de Morant, *L'Acupuncture chinoise*, p. 25.

⁵⁵ *Ibid.*; see also n. 59 below.

⁵⁶ In Kunming, at the Yunnan University of Traditional Chinese Medicine (Yunnan Zhongyi xueyuan 雲南中醫學院), I also found several books from Soulié de Morant's private archive, including the *Zhenjiu dacheng quanshu* 針灸大成全書, *Chongding yanfang xinbian* 重訂驗方新編, *Jiaozheng zengtu yixue rumen* 校正增圖醫學入門, *Jieti fameng* 解體發蒙, *Shengli jiepou tushuo* 生理解剖圖說, as well as the Japanese text *Shinkyū keiketsu iten* 鍼灸經穴醫典. None of these are particularly rare books.

construct a discourse and a practice that would be generally accepted in French society?⁵⁷

The works of his predecessors, physicians and diplomats in China who observed and studied Chinese medical practices in the field, men such as Dabry de Thiersant and Regnault, are cited in Soulié de Morant's books, in the same way that he cites the very first experiments, made by Jules Cloquet (1790-1883) or Louis Berlioz, for example, in the period from 1815 to 1825.⁵⁸ These authors are presented as his precursors but never as the sources of his knowledge. He must have acquired the Chinese texts that he cites in his "introductory statement" to *L'Acupuncture chinoise* between 1927 and 1935-1940: the editions to which he seems to refer in this book almost all date to after his return from China.⁵⁹ Along with these, he also cites two Japanese texts for which the editions are slightly older.⁶⁰ Starting from the knowledge transmitted by his predecessors (Dabry de Thiersant and Regnault, Berlioz and Cloquet), Soulié de Morant must have continued his clinical experiments with Paul Ferreyrolles until the early 1930s, and later with Thérèse Martiny. His manuscripts include an enormous quantity of annotations concerning clinical cases, written down and corrected during these years.

Based on the two Japanese books mentioned above, but also on the book that Soulié de Morant jointly published with a certain T. Sakurazawa in 1934, *Acupuncture et médecine chinoise vérifiées au Japon*, that Johan Nguyen has put forward a well-argued hypothesis concerning one source of George Soulié de Morant's knowledge.⁶¹ Nguyen suggests that Sakurazawa

⁵⁷ See Candelise, "George Soulié de Morant," pp. 373-399.

⁵⁸ See Obringer, "Savez-vous tâter le pouls à la mode des Chinois?"; and see Barnes, *Needles, Herbs, Gods and Ghosts*.

⁵⁹ For the Chinese texts, here are the authors, the transliterations and the translations used by Soulié de Morant with the pinyin and the Chinese characters, the date of the original publication and the edition in Soulié de Morant's collection: Yang Jishi 楊濟時, *Tchenn tsiou ta tchreng* (Grande perfection des aiguilles et de moxa) (*Zhenjiu dacheng* 針灸大成, 1601, reprint 1929); Li Shouxian 李守先, *Tchenn tsiou i sio* (Étude facile des aiguilles et des moxas) (*Zhenjiu yixue* 針灸易學, 1798, reprint 1918); author unknown, *Tchenn tsiou i tche* (Connaissance facile des aiguilles et des moxas) (*Zhenjiu yizhi* 針灸易知, 1919); and Li Chan 李樾, *I sio jou menn* (Porte d'entrée des études médicales) (*Yixue rumen* 醫學入門, 1575, reprint n.d.).

⁶⁰ The references to these texts are given by Soulié as Tama-Mori no Suké, *Tchenn tsiou tsing tsiue i tienn* (Répertoire médical des points avec explications et dessins, 1906), which can be identified as Tamamori Teisuke 玉森貞助, *Shinkyū keiketsu iten*, 鍼灸經穴医典, and *Trou tsié tsing tsiue soi, Tatse-i*, 1908, which I have not yet been able to identify.

⁶¹ Tyotoku Nakayama, *Acupuncture et médecine chinoise vérifiées au Japon*, T. Sakurazawa [Georges Ohsawa] and George Soulié de Morant, trans. (Troyes: Grande Imprimerie;

himself passed on to Soulié de Morant precise knowledge of the art of treatment with needles. T. Sakurazawa appears to have been in fact Georges Ohsawa (1893-1966), known as the founder of macrobiotics in Europe.⁶² Trained in traditional medicine in Japan, he had a truly eclectic career. Living in Paris between 1929 and 1931, he was in a position not only to help Soulié de Morant with the translation of *Acupuncture et médecine chinoise* but also to instruct him in the practice of acupuncture. Nguyen's hypothesis rests on the observation that Soulié de Morant's techniques of acupuncture were unique, and very unusual in China during the twentieth century.⁶³ Soulié de Morant used gold or silver needles, which are distinguished by their properties ("strengthening" or "dispersive," according to the metal); he inserted the needle only to a shallow depth.⁶⁴ The different metals and the shallow depth as well as his particular method of taking the pulse could have come directly from Ohsawa's teachings.⁶⁵ According to Nguyen, Soulié de Morant, taking advantage of a bogus Chinese training, thus introduced into France, under the name of "authentic Chinese acupuncture," a modern form of Japanese acupuncture.⁶⁶

This influence from the practice of acupuncture coming from Japan could also explain the frequent citations of and references to Japanese techniques in Soulié de Morant's first book, the *Précis de la vraie acupuncture chinoise* (1934), where he stated that he was providing information on the principles of the "true acupuncture" coming from China.⁶⁷ In any case, the book *Acupuncture et médecine chinoise vérifiées au Japon* and the possible contribution of Sakurazawa (or Ohsawa) to Soulié de Morant's initial training has long been ignored. The reason for this silence may be found in the importance given to the question of the "authenticity" of Soulié de Morant's medical knowledge.⁶⁸ Undeniably his experience in China and his training there would be the only way he could be recognized as an "expert" in Chi-

Paris: Éditions Hippocrate, 1934). See Nguyen, *La réception de l'acupuncture en France*, pp. 127-169.

⁶² See Joichi Ōsawa [Georges Ohsawa, a.k.a. T. Sakurazawa], *Le Principe unique de la philosophie et de la science d'Extrême-Orient* (Paris: J. Vrin, 1931).

⁶³ See Lu and Needham, *Celestial lancets*.

⁶⁴ George Soulié de Morant, *Précis de la vraie acupuncture chinoise: Doctrine, diagnostic, thérapeutique* (Paris: Mercure de France, 1934), pp. 62-70; and Soulié de Morant, *L'Acupuncture chinoise*, pp. 196-203.

⁶⁵ George Soulié de Morant, *Précis de la vraie acupuncture chinoise*, pp. 44-55; and Soulié de Morant, *L'Acupuncture chinoise*, pp. 82-96.

⁶⁶ Nguyen, *La réception de l'acupuncture en France*, pp. 152-153.

⁶⁷ George Soulié de Morant, *Précis de la vraie acupuncture chinoise*.

⁶⁸ See Volker Scheid, *Currents of Tradition in Chinese Medicine 1626-2006* (Seattle: Eastland Press, 2007).

nese medicine and acupuncture in France. However, for what interests us here, the link with Ohsawa renders significantly more complex the map of the circulation of medical knowledge in the case of Soulié de Morant.

It is plausible that physicians such as Paul Ferreyrolles, Marcel and Thérèse Martiny, and Charles Flandin, who closely followed the experiments in acupuncture and the instruction given by Soulié de Morant, retained their confidence in the story he told, or at least concealed their doubts so as not to lose the source of a knowledge to which they thought they had no other access. The “true Chinese acupuncture” practiced in Paris, which in fact came in part from Japan, was not the result of the sole efforts of George Soulié de Morant; rather, these efforts met the demand from a group of physicians and their patients at an opportune moment in the history of medicine and of the Parisian society.

2.3. *The Discourse of Self-Legitimation*

Soulié de Morant felt obliged to answer questions concerning his legitimacy as an expert in acupuncture within the Parisian medical community interested in the practice at this period by emphasizing his role as the person who had brought knowledge and techniques of acupuncture from China to France. He clearly stated that he had learned acupuncture during his years of residence in China and observed its practice in the field. In his 1934 *Précis de la vraie acupuncture chinoise*, he recounted:

Our doctors sent to China to teach our methods do not know Chinese. They are there to teach and not to learn. Could they, without “losing face” . . . and prestige, become the students of an indigenous master, should one consent to teach them?

It was further necessary that, introduced by the missionaries to whom the hospital that I visited belonged, I saw genuine miracles performed before my own eyes. The Chinese doctor agreed to teach me and to find me the necessary books. Later, as judge of the international Mixed Court of Shanghai, I found, in the Public Health Department, an excellent acupuncturist who succeeded in instructing me. And thus it is that, as a sinologist, I was able to exercise in China and can now transmit to French science a kind of reflexotherapy that it had not yet studied.⁶⁹

⁶⁹ Soulié de Morant, *Précis de la vraie acupuncture chinoise*, pp. 11-12. With one French and one Chinese judge, the international Mixed Court mediated between foreign and Chinese citizens.

Here are, in just a few lines, the elements on which George Soulié de Morant was able to establish his expertise and legitimize his position, his knowledge and his practice to the French medical community of the 1930s. In the posthumous edition of his treatise *L'Acupuncture chinoise*, he went into more detail, giving the names of his “masters” and claiming new qualifications for himself:

When, in 1901, I arrived in China, I spoke and read Chinese fluently, and the complex etiquette was familiar to me. . . . At the time, a serious cholera epidemic was raging in Beijing. . . . Passing through the rooms, I saw a Chinese doctor stop, in a matter of moments and without recourse to European medicine, the terrible cramps, the vomiting and diarrhea of which I already knew the significance. I was able, thanks to the authorities who introduced me and to my knowledge of the language and etiquette, to gain permission from this doctor, Dr. Jang, to study, along with the essential principles of the method, the most important points and aspects of the pulses. He procured for me medical treatises which are now almost impossible to find. Two years later, having been appointed judge in the French Mixed Court in Shanghai, I found as a [physician and] legal medical advisor and secretary of the court an excellent acupuncturist, one Dr. Tchang. He continued my education, helping me to complete my dictionary and understand the fundamental data of the method. And then later, as the Consul delegated by the Ministry of Foreign Affairs in Yunnan fu [Kunming], I took a keen interest in our small French hospital and I was able, thanks to the friendship of the Viceroy, to maintain contacts with Chinese acupuncture physicians and came to receive official recognition as a Chinese doctor, the carved red coral bead that confers the rank of academician.⁷⁰

In the posthumous biographies of Soulié de Morant, mostly written by the physicians who were close to him when acupuncture appeared in his career, one finds statements such as the following:

In 1927, in La Bourboule, he met Dr. Ferreyrolles who took charge of the treatment of his daughter. He told him of the methods of Chinese physician-acupuncturists with whom he was friendly and who allowed him to work with them.⁷¹

Or else:

This encounter [with Ferreyrolles] was necessary in order that George Soulié de Morant should become aware that this Chinese medicine, acupuncture, which he

⁷⁰ Soulié de Morant, *L'Acupuncture chinoise*, p. 25.

⁷¹ Thérèse Martiny, “George Soulié de Morant,” p. 8.

had learned and practiced as one field among others in Chinese culture, was also knowledge that he had to transmit. . . .⁷²

And even:

Appointed Consul of France to Shanghai and sent to Yunnan fu, he realized with “stupefaction,” during a cholera epidemic, that the patients recovered better under the treatment with needles than from the effects of the medications they had at that time. He studied this new therapy very closely, as well as Chinese history, art and literature.⁷³

Such testimony, for the most part hagiographical, repeated what Soulié de Morant had written years earlier concerning his knowledge of Chinese medicine, his training and the marvels of acupuncture, along with his past as a diplomat and Chinese practitioner. In addition, his family as well as other biographers also mention a painting on silk inscribed with the signatures of the patients treated by Soulié de Morant in China.⁷⁴

2.4. The Calling into Question: the Reassessment of the Institutional Legitimacy of Soulié de Morant's Practice

What George Soulié de Morant tells of himself in relation to his career in China and his knowledge of Chinese medicine at the beginning of his career as an acupuncturist, and what others claimed after his death would seem to be, at least partially, a personal fabrication intended to legitimize his position as an authority and expert on acupuncture in France. Thanks to this fabrication and to the attractiveness of acupuncture for neo-Hippocratic physicians, he ensured that acupuncture found a place in their medical circle.

Around 1935 George Soulié de Morant began, or expanded, to give acupuncture treatments at his own house in Neuilly-sur-Seine, making them known to the public. Until 1950, he received there prominent members of the Parisian intelligentsia of the period; Maurice Ravel, Jean Cocteau, Antonin Artaud, Colette and Marie Bonaparte were among his patients. If, up until that time, he was considered a “researcher,” “an expert in acupuncture,” or “a sinologist,” at the end of his career he became a practitioner.⁷⁵

⁷² Jean Choain, “George Soulié de Morant,” *Méridiens* 43-44 (1978), pp. 13-31, p. 24.

⁷³ Marcel Martiny, “Éditorial,” p. 9.

⁷⁴ “This [diploma] of George Soulié de Morant was a painting on silk some five meters high by three meters wide bearing on its face the signatures of one hundred persons certifying that they had been cured by him of a ‘disease that was not cured on its own.’” See Wei Thiong Chan Way Tim, “George Soulié de Morant,” p. 53.

⁷⁵ Lucia Candelise, “George Soulié de Morant.”

The gradual recognition of acupuncture in the medical world, followed by the regulation of its practice, only increased his visibility. However, they almost brought about his downfall.

In 1950, George Soulié de Morant was accused by the Syndicat National des Médecins Acupuncteurs de France and by its president, Roger de La Füye, of illegal practice of medicine. La Füye was one of those present as an observer-student during some acupuncture sessions at the clinic that Thérèse Martiny conducted under the supervision of Soulié de Morant. This legal action he undertook, which was long considered among the physicians close to Soulié de Morant as treason by a student toward his master, was in accordance with the process of the professionalization of medicine that took place from the end of the nineteenth century. Pierre Darmon, who has shown that the founding of the first medical *syndicat* (trade union) dates back to 1892,⁷⁶ has also demonstrated how both degreed physicians and “charlatans” continued to be active in the same field for several decades, at least until the First World War. It was only after the 1920s that the efforts toward the institutionalization as well as the regulation of the medical profession intensified. They resulted in the establishment of the Conseil de l’Ordre des Médecins (French Medical Council) in 1941, followed several years later (around 1950) by the institutionalization of medical specialties.⁷⁷ In this context, the practice of acupuncture by someone who was not a degreed physician during “special sessions”⁷⁸ in Parisian hospitals under the supervision of a degreed physician could be accepted around 1930. But this was no longer the case when, between 1935 and 1950, George Soulié de Morant established a private practice at his own home.

This legal action, which ended in a dismissal of the case, did not put an end to the career of Soulié de Morant as a practitioner. Nevertheless, it marked the beginning of a period of the defense of acupuncture as a medical treatment on the part of the physicians who practiced it, along with efforts at institutionalization and legalization, and of widespread national and international dissemination and organization of its instruction.

⁷⁶ Pierre Darmon, *Le Médecin parisien en 1900: la vie quotidienne* (Paris: Hachette littératures, 2003), p. 139.

⁷⁷ See George Weisz, *Divide and Conquer: A Comparative History of Medical Specialisation* (Oxford: Oxford University Press, 2006).

⁷⁸ Soulié de Morant, letter to Monsieur Bernard, 3 mars 1936. Private archives of Paul Unschuld; see also n. 48.

III. Roger de La Fÿye (1890-1961): Between George Soulié de Morant and Albert Chamfrault

Roger de La Fÿye's action is notable in the adoption of acupuncture in French medical circles between 1940 and 1960. His publications and his work for the acceptance of acupuncture as a medical therapy monopolized by physicians make him a crucial link of this story, formed for the most part by individual actions or actors.

Roger de La Fÿye was a homeopathic physician most likely inspired, at least at the beginning of his career, by the neo-Hippocratic movement.⁷⁹ As a very young man in 1914, during a trip to Honolulu and Japan, he claims to have seen "Asians" working with acupuncture. In France, some twenty years later, he discovered an interest in this therapy, which he began to practice in 1934.⁸⁰ He was present at the acupuncture treatments performed by Soulié de Morant in the clinic of Thérèse Martiny at the Hôpital Léopold-Bellan between 1931 and 1933.⁸¹ He then became the promoter of "modern acupuncture," quickly monopolizing national and international attention. Marcel Martiny, who had always supported and protected Soulié de Morant, spoke of La Fÿye in an editorial of the journal *Méridiens* in 1968:

[O]ne name among others appears throughout, that of Roger de la FUYE. He had a marked personality, a positive imagination, and a remarkable sense of organization. . . . [W]ithout him, acupuncture would not have had a European audience and the work of diverse French groups would not have been so clearly distinguished. . . . [H]owever, in this domain [contacts with the political, intellectual and social powers that be], Roger de la FUYE, fortunately, I would say, was completely daring and totally assertive. We should not be silent on the subject of his great clear-sightedness and his enthusiasm.

His dissent from the group around George Soulié de Morant began very early and he, like other authors [who also criticised Soulié de Morant], revealed their common source. Like some others, he repeated the various errors of translation and interpretation of the great Master. . . . Like some others, he claimed to have previously had secret contacts with other masters in the Far East.⁸²

⁷⁹ Maxime Laignel-Lavastine wrote the preface for La Fÿye's book *L'Acupuncture chinoise sans mystère: Traité d'acupuncture, la synthèse de l'acupuncture et de l'homéopathie, l'homéosiniatrie diathermique* (Paris: E. Le François, 1947), and asked him to become the honorary president of the Société Française d'Acupuncture.

⁸⁰ Roger de La Fÿye, "Les origines de l'acupuncture et son explication par les théories biopsychochimiques les plus modernes," *Revue internationale d'acupuncture* 3 (July-Sept. 1955), p. 359; see also La Fÿye, *L'Acupuncture chinoise sans mystère*.

⁸¹ Marcel Martiny, "Éditorial," p. 14.

⁸² *Ibid.*, pp. 13-14.

La Fūye's organizational skills led him to register the statutes of the Société Française d'Acupuncture, which he had created in 1943, becoming its president. In 1946 he founded the Société Internationale d'Acupuncture, and in 1947 the Syndicat National des Médecins Acupuncteurs de France. He was elected president of all three organizations and served until his death in 1961. He also founded the Institut du Centre d'Acupuncture de France for the teaching and diffusion of acupuncture among physicians, and, in 1949, the *Revue Internationale d'Acupuncture*. He played a major role in the decision made in 1953, when the Académie Nationale de Médecine and the Ministry of Health asserted that acupuncture was a medical practice and was thereby reserved to practitioners who had obtained a doctorate in medicine.

La Fūye's importance in the history of the adoption of acupuncture by the French medical community rests upon his activities in the foundation of organizations working for the legal and institutional recognition of acupuncture and for the establishment of a place of instruction where an important number of acupuncturist-physicians would be trained during the following decades. It is in this context that his path crossed those of George Soulié de Morant and Albert Chamfrault. The latter was trained in acupuncture at the Institut du Centre d'Acupuncture de France and succeeded La Fūye as the President of the Association Française d'Acupuncture, formerly the Société Française d'Acupuncture, which La Fūye himself had created.

IV. The Changing of the Guard: George Soulié de Morant and Albert Chamfrault

4.1. Albert Marie Pol Chamfrault (1909-1969), a Military Acupuncture Physician

In 1954, one year before George Soulié de Morant's death, the first volume of a *Traité de médecine chinoise* was published. Its author, Albert Marie Pol Chamfrault, was a military physician who, after spending two years in Tonkin, returned to France with documents and data that he restructured in order to publish them; they made up six volumes, which came out between 1954 and 1969.

Chamfrault was born in Verdun on 8 August 1909. After the death of his father, Georges Victor Edmond Chamfrault, during the First World War, his family moved to Paris, where Albert began his studies. His mother, Jeanne Joséphine Biron, was then remarried to a homeopathic physician; it was his stepfather who pointed Albert toward medicine. He agreed to begin his training in medicine on the condition of being able to travel. He enlisted in the army in 1931 and was admitted to the École Navale at Bordeaux. In 1935 he received his degree as a medical physician.

It is likely that his stepfather acquainted him with homeopathy, and that it was through this therapy that he became interested in acupuncture. He took courses at the Institut du Centre d'Acupuncture de France, located in Paris, which was the most popular school of acupuncture open to French physicians during this period.⁸³ This Institute, and the Société Française d'Acupuncture which housed it, were both under the direction of Roger de La Füye from 1943 until 1961. We do not know the details of Chamfrault's medical practice during his military career. He completed the school of acupuncture in 1942, but he never worked as an acupuncture-physician in private practice until after his retirement from the army in 1955. He took part in the Second World War as a surgeon major—a rank awarded in 1944 after he joined the Forces Françaises de l'Intérieur; in 1946, he was made a Knight of the Légion d'Honneur. In 1950, the Ministry of Defense sent him to the naval base at Haiphong. He was in charge of the Medical Service of the navy in Tonkin during the years 1951 and 1952; he especially distinguished himself during the Battle of the Day River (May-June, 1951) and during the Battle of Hoa Binh (November 1951-February 1952). This earned him the Croix de Guerre des Théâtres d'Opérations Extérieures with a Silver Star.⁸⁴ He remained in Indochina for three years. On his interest in acupuncture, he wrote:

I had, before arriving in the Far East, several years' practice in Acupuncture and had, very clearly, the impression that there was a great deal more to learn for a doctor who wished to study this curious science in the field.⁸⁵

During the period he spent in Tonkin, trying to better understand this "curious science," he became acquainted with a scholar from the Chinese community, Ung Kan Sam.⁸⁶

After three months of research, I had the incomparable good fortune to meet a Chinese scholar, a Mr. Ung Kan Sam, who taught our language to young Chinese. Not only did he know our language, but he also admired our literature. I

⁸³ In 1946 the physicians close to George Soulié de Morant created the Société d'Acupuncture, in part in opposition to the Société Française d'Acupuncture created by Roger de La Füye. The two Societies organized training courses in acupuncture (the Société Française d'Acupuncture under the aegis of the Institut du Centre d'Acupuncture de France).

⁸⁴ Dossier Albert Chamfrault, Service historique de la Défense, Section Marine, Vincennes.

⁸⁵ Albert Chamfrault, *Traité de médecine chinoise*, vol. 1, *Acupuncture, moxas, massage, saignées* (Angoulême: Coquemard, 1954), p. 7.

⁸⁶ Jaki Chamfrault, "Biographie du Dr Chamfrault," *Revue française d'acupuncture* 90 (April-June 1997), pp. 55-59.

was truly astonished to see him appreciate Baudelaire and Rimbaud, admire and comment upon Paul Valéry, whose *Le Cimetière marin* he lent me and which I had the great pleasure to re-read, thanks to him, so many thousands of kilometers away from the place where it was created.⁸⁷

Chamfrault also recounts that during these years he spent evenings, even entire nights, with his Chinese friend in order to translate the texts that would later serve as the draft of his works in the French language.

All the while speaking of Claudel, savoring a Chinese soup of swallows' nests or of bamboo shoots, we set to work during many long months. It is thus that the essential works on Chinese medicine—the “Nei King” and the “So Ouenn”—were translated.⁸⁸

After his stay in Tonkin, Albert Chamfrault returned to France with the materials that served as the basis for the vast work on Chinese medicine that he published in the following years. Having retired from the Army in February 1955, he opened a practice in acupuncture and homeopathy in Angoulême, where he continued to exercise his profession until his death. He also undertook the compilation of a work on Chinese medicine which contained passages translated from the *Huang di neijing* 黃帝內經. Chamfrault stated that he translated the *Suwen* 素問, the *Nanjing* 難經, and the *New Studies of Acupuncture* (the *Xin zhenjiu xue* 新針灸學) by Zhu Lian 朱璣 (1909-1978).⁸⁹ The six volumes of his *Traité de médecine chinoise* dealt with acupuncture and moxibustion, pharmacopeia and other domains of Chinese medicine, but also with astronomy insofar as he regarded it as relevant to Chinese medical theory and practice.⁹⁰

⁸⁷ Chamfrault, *Traité de médecine chinoise*, vol. 1, p. 7.

⁸⁸ Ibid.

⁸⁹ “Après avoir traduit ces ouvrages anciens [*Neijing*] qui représentaient déjà plus de six cents pages de manuscrit, nous attaquions des auteurs plus récents, la ‘Collection de la médecine chinoise’ de TCHENN TSUENN YAN, des articles parus dans diverses revues, et enfin un ouvrage tout récent, ‘La Nouvelle Science de l’Acupuncture et des Moxas’, du Dr TSOU LIENN, paru à Peking en 1951, et que le Révérend Père Cassian m’avait aimablement procuré via Hong Kong.” Chamfrault, *Traité de médecine chinoise*, vol. 1, p. 8. See the following note. Chinese traditions support the identity of the texts as cited by Chamfrault; more modern scholarship notes that the *Suwen*, along with the *Lingshu* 靈樞, is one of the two texts that together make up the *Huangdi neijing* or *Neijing*. *Nanjing* is a short title for the *Huangdi bashiyi nanjing* 黃帝八十一難經.

⁹⁰ The volumes include *Traité de médecine chinoise*, vol. 1, *Acupuncture, moxas, massage, saignées* (Angoulême: Coquemard, 1954); vol. 2, *Livres sacrés de médecine chinoise* (1957); vol. 3, *Pharmacopée* (1959); vol. 4, *Formules magistrales* (1961); vol. 5, *De l’Astronomie à*

This work, which remained one of the fundamental texts for French physician acupuncturists for several decades, once more changed the landscape of knowledge and practice of French acupuncture that, until 1950, was completely bound to the work of George Soulié de Morant. The two practitioners, Soulié de Morant and Chamfrault, key actors in the definition of Chinese medical knowledge in France, enter and leave the stage as in a theatrical production, one handing over to the other, both exchanging a few words of appreciation at just the right moment. Chamfrault sent a copy of the first volume of his work to Soulié de Morant. The latter responded in a letter written with his left hand (since 1951 he had been stricken by hemiplegia that paralyzed his entire right side), congratulating him on his work—while pointing out to what he saw as the limitations of Ung Kan Sam's competence:

[A]ll my thanks for your vast work. What an effort! And what luck to have found Mr. Ung, who, even while not completely knowing the Method of the Needles and moxa (and who will ever completely know it?), and even though he mixed Cantonese words with Mandarin, was still able to help you in your task.⁹¹

4.2. *The Value of the Translation*

The published work of Albert Chamfrault is thus characterized by his attention, his devotion to the translation of texts. He underlined the difficulty it posed in an article published in the *Bulletin de la Société d'Acupuncture*:

If I have insisted at length on the difficulties of the translation, it is because they will make clear, I think, the reasons for the innumerable errors that exist in the texts translated into French. It is indeed essential that whoever records the translation be a doctor, to be able at the same time to indicate the precision of the conventional medical terms in Chinese and French. It was because these conditions had not been met that until this point the study of the pulse, which is contained in the *So-Ouen* and the *Nei-King*, could never be translated nor even clearly understood. From this comes the explanation of the fact that non-medical translators, such as Mr. Dabry and Soulié de Morant, preferred to resort to much later works which included almost no medical knowledge. They proceeded in the same way in everything that concerned the study of symptomology: rather than publish incomplete or obscure texts filled with errors, they preferred to leave them aside. That is why, in these works, we find exact citations of the *So-*

la médecine chinoise (1963); and vol. 6, with Nguyen Van Nghi, *L'Énergétique humaine en médecine chinoise* (Angoulême: Imprimerie de la Charente, 1969).

⁹¹ George Soulié de Morant, "Letter to Albert Chamfrault," reproduced in *Revue française d'acupuncture* 90 (April-June 1997), p. 73.

Ouen and the *Nei-King* inasmuch as it is only a question of generalities on doctrine, and never when we enter into the purely technical domain.⁹²

Thus Chamfrault underlined the importance of producing complete translations of medical texts and thus of the work that he had undertaken. It is equally interesting to see how he defended his methodological stance in the translation of these texts. He emphasized the importance of a translation effected under the direction of a physician (the one who “records the translation”) so that the translation from the Chinese language into the French language should remain faithful to the Chinese version all the while allowing for a correct understanding in French.

In the Foreword to the second volume of Chamfrault’s work, Ung Kan Sam stated:

The text of the *Nei King* is practically untranslatable, its content is abstruse, its style is extremely terse, and the interpretations by the annotators are not always in accord with each other. Furthermore, the work was not composed by a single hand, and the ideas presented are sometimes contradictory. . . . [The] French language has a rich vocabulary, but it is often difficult to find words that have the same nuances as ours. The spirit contained in the *Nei King* captured the interest of Dr. Chamfrault; he absolutely wanted to produce a complete translation and have it published in France. I am personally very flattered, but I doubt that our primitive medicine could interest European physicians who are so advanced.⁹³

Ung Kan Sam clearly understood the obstacles encountered in the translation of Chinese medical works, and also the fascination of a French physician for these Chinese works, all the more so given that, perhaps out of courtesy, Ung Kan Sam defined Chinese medicine as a “primitive medicine” devoid of interest for an audience of Western physicians. In fact, what he characterized as primitive to him became an “ancient” learning, “traditional” and thus precious, rich in wisdom and learning for the French acupuncturist-physicians of the second half of the twentieth century.⁹⁴

⁹² Albert Chamfrault, “Quelques vérités révolutionnaires sur la médecine chinoise,” *Bulletin de la Société d’Acupuncture* 19 (February 1956), p. 9.

⁹³ Ung Kan Sam, “Avant-propos,” *Traité de médecine chinoise*, vol. 2, pp. 14-15.

⁹⁴ “For myself, I shall retain, in any case, the great joy of ending my preface, in finishing my delicious Chinese soup and the glass of light tea that accompanies it, in thinking of those delicious hours spent in the company of Mr. Ung Kan Sam, during which I saw, little by little, a charming world opening up to me, full of wisdom and gentleness. My last wish would be that the reader might feel, if only for a moment, a pleasure equal to my own.” Albert Chamfrault, “Préface,” *Traité de médecine chinoise*, vol. 1, p. 9.

Here we are at the heart of the issue of the “faithful” translation of these texts (as for all Chinese texts). From the second half of the 1950s until the beginning of the 1990s, French physicians such as Chamfrault were very much interested in the translation, revision and interpretation of Chinese texts in order to construct knowledge and medical practice based entirely on this work of exegesis. Contacts with China and the practice of Chinese medicine there, on the contrary, were established relatively late and sometimes with reluctance.

The case of Albert Chamfrault and Ung Kan Sam, in which a collaboration was carried out between a French physician or practitioner and an educated Chinese in the translation of medical texts, is not the only one we have encountered. Authentic or fictitious, claims to collaboration between Western practitioners and scholars who hold the key to the interpretation of Chinese texts had been made before. Regnault had recourse to a Chinese scholar-interpreter for his observations, Soulié de Morant claimed that he had worked with Chinese doctors (Iang and Tchang) to complete a medical dictionary; La Fûye also claimed to have worked with a Chinese doctor. The primacy of the translation, analysis and interpretation of medical texts characterized and defined French acupuncture in the twentieth century.

The considerable interest that French acupuncturist-physicians had in research on ancient Chinese medical texts led to the creation of a style of acupuncture quite specific to France that we have defined as “traditionalist French acupuncture.”⁹⁵ Albert Chamfrault, like subsequent traditionalist French acupuncturists, conceived of an approach to Chinese medicine as well as to the contents of these medical texts that was, first of all, intellectual. In so doing, he set himself apart from previous authors, such as Regnault or even Soulié de Morant, who claimed to have been in the field and to have seen Chinese medicine practiced in China or Indochina. This aspect of Chamfrault’s approach is in accordance with the general attitude of French physicians in Indochina, as characterized by Laurence Monnais:

[F]rench colonial agents and physicians did not only relegate pre-colonial medical practices . . . [t]o a denigrated role. They also, at least some of them, played an ambiguous and complex role—not necessarily consciously, much less voluntarily or intentionally, at least at first—in the revival of local medical traditions and particularly in the invention of Vietnamese medicine.⁹⁶

⁹⁵ See Candelise, “Construction, acculturation et diffusion,” pp. 76-88.

⁹⁶ Laurence Monnais, “Traditional, Complementary, and Perhaps Scientific? Professional Views of Vietnamese Medicine in the Age of French Colonialism,” in Laurence Monnais et al., eds., *Southern Medicine for Southern People: Vietnamese Medicine in the Making* (Newcastle upon Tyne: Cambridge Scholars Publishing, 2012), p. 78.

However, Chamfrault was not interested in the invention of Vietnamese medicine, nor in any local knowledge. Already having some knowledge of Chinese medicine before his arrival in Tonkin, he used a Chinese scholar in order to draw upon knowledge labeled as Chinese, but only accessible to him in Indochina.

4.3. *Albert Chamfrault's Contribution to the Evolution of the Medical Theory and Practice of Acupuncture in France*

In his first volume, Chamfrault does not provide the direct translation of the Chinese texts that he had studied with the help of Ung Kan Sam, but, as he himself states,

I have assembled for each subject treated here the ideas scattered throughout the same work or in several works so that all the sources may be before the reader's eyes.⁹⁷

This description of the structure of this first volume is somewhat reminiscent of the anthologies produced by Chinese medical practitioners.⁹⁸ Three years later, in keeping with his advocacy of the importance of access to the classical texts of Chinese medicine, Chamfrault published a work that contained translations from the *Huangdi Neijing* 黃帝內經 corpus that he had carried out with Ung Kan Sam. He introduced it by stating:

The first volume was in some ways a personal interpretation based on the readings of the original. It would be dishonest not to allow kindred spirits and researchers to draw upon the same sources and to draw other interpretations from them.⁹⁹

Chamfrault's contribution to the practice of acupuncture at the time did not stop at a simple translation of Chinese medical texts. After his work, the medical theory underlying the practice of acupuncture in France was enriched by a new theory that would grow in importance in France and Europe between the years 1960 and 1980 and which would strongly contribute to the definition of traditionalist French acupuncture. This is the theory of the Five Phases (*wu xing* 五行) or "the five elements", which proposed a vision of human physiology and pathology integrated into a general cosmology.

⁹⁷ Chamfrault, *Traité de médecine chinoise*, vol. 1, p. 9.

⁹⁸ See Florence Bretelle-Establet's contribution to the present volume.

⁹⁹ Chamfrault, *Traité de médecine chinoise*, vol. 2, p. 7.

The contributions of Albert Chamfrault in no way oppose the notions introduced by Soulié de Morant. Instead they represent a continuation of efforts at interpreting Chinese texts. In the presentation of the “fundamental basis of Chinese therapeutics,” the former stated:

[W]e must first of all understand the Far Eastern philosophical concepts according to which medicine is not an autonomous science but part of a whole; it is a microscopic application of macrocosmic structural principles. It is an absurdity to try to separate—and thus to consider man as a being detached from the universe that surrounds him.¹⁰⁰

Here we see an approach very different from that adopted by Soulié de Morant and still further from that of La Fūye.¹⁰¹ Each of these two had, in his fashion, promoted the diffusion of a modernized acupuncture, searching for any discourse that could support its scientific nature. On the contrary, cosmology, the Chinese conception of space and time, is the starting point for the theories put forward by Chamfrault, who drew upon Marcel Granet in his work.¹⁰²

Another important aspect of Chamfrault’s work comes into play, in 1966, at the end of his career, when he accepted the presidency of the Association Française d’Acupuncture, which was supposed to bring together in one institution the different factions into which French acupuncturists were divided. Toward this end, in 1957 he already wrote:

¹⁰⁰ Albert Chamfrault, “Quelques vérités révolutionnaires sur la médecine chinoise,” p. 9.

¹⁰¹ In 1956, in one of his lead articles in the *Revue Internationale d’Acupuncture*, Roger de La Fūye launched a well-documented attack on Albert Chamfrault’s article cited above. He accused “this eminent physician, whom I had the pleasure myself to initiate into Acupuncture in 1950” of not having been the only one to have translated the classical Chinese texts with the help of a Chinese scholar. Indeed, he claimed to have done so himself. In addition, he asserted the uselessness of the theory of the “five elements” that Chamfrault sought to introduce with his works, adding: “He will allow us, then, to say that there is no need whatsoever to know the influence of Mars, the Heart, the South, the Chicken, the Bean, and the Apricot to understand, for example that the stimulation of the cardiac function takes place at the ninth point of the Heart, situated at the level of the corner of the external auricular nail for the symptom of ‘cardiac weakness.’” And he closed by saying, “Let us then leave to the Far Easterners of Antiquity the fantastical hypotheses that have served them as attempts at an esoteric explanation of Chinese Acupuncture, and let us remain steadfast to Modern Acupuncture, definitively stripped of the mists of Antiquity.” See “Quelques vérités révolutionnaires sur la médecine chinoise,” *Revue Internationale d’Acupuncture* 35 [January-March 1956], pp. 1-4.

¹⁰² Marcel Granet, *La Pensée chinoise* (Paris: A. Michel, 1950).

I believe that the study of these books, with the amount of work that it entails, with the development of the spirit that can result from it, will form a genuine community of traditionalist physician-acupuncturists. I hope that one day all those who are immersed in these studies, in this Far-Eastern philosophy, will join in friendship, rejecting the stereotypes, the quibblers and the mockers to create a living, spiritual community.¹⁰³

With these words, he advocated what he undertook several years later when as president of the Association Française d'Acupuncture he played a central role in the creation of a peculiar French style of acupuncture that openly define itself as "traditional."¹⁰⁴

Conclusion: Three Figures and Three Links in the History of the Appearance of Acupuncture in France

The efforts of Soulié de Morant, La Fûye and Chamfrault are all linked, and the contributions of each of them constitute a link in the establishment of acupuncture as it was defined in France during the first seventy years of the twentieth century. "Traditionalist French acupuncture," the practice of which is carried out in relation to the so-called "Chinese tradition," is still today at the basis of acupuncture as practiced in France. The emphasis put by Soulié de Morant and Chamfrault in the interpretation of the classics of Chinese medicine contributed to the construction of a formal medical theory that referred to a past that was highly valued both for its antiquity and for the fact that, having evolved historically, it was therefore considered indisputable. This brings us to characterizing "French traditionalist acupuncture" as an invented tradition, as in the sense proposed by Eric Hobsbawm and Terence Ranger.¹⁰⁵ The grounding of French acupuncture in Chinese tradition became the basis both of its legitimation and of its otherness, by contrast with dominant institutional medicine.

In the process of invention and construction of this medical knowledge, we are dealing with a tradition all the more complex as it was not native to France: it was labeled "Chinese," although it was transmitted mainly via Japan and Indochina. The careers of Soulié de Morant and Chamfrault only partly reflected these paths of transmission. Both based their authority and

¹⁰³ Chamfrault, "Quelques vérités," p. 10.

¹⁰⁴ See Guilloux, "Évolution de la 'tradition'"; and see Candelise, "Construction, acculturation et diffusion." In this field as in others, historians and practitioners use the word "tradition" in different ways.

¹⁰⁵ Eric Hobsbawm and Terence Ranger, *The Invention of Tradition* (Cambridge: Cambridge University Press, 1983).

the legitimation of their knowledge on their experiences—whether actually lived or invented—in China for the former, in Indochina for the latter. Although Roger de La Füyé also mentioned travelling to East Asia in his youth, his contribution to the acceptance of acupuncture in France related to its recognition and legalization rather than to the circulation of knowledge and the construction of theory and practice. It is his institutional rather than geographical itinerary which is relevant here. Soulié de Morant and Chamfrault partook in the development of intercultural encounters, becoming actors in the transmission, the interpretation and the adoption of a so-called Chinese knowledge that has remained specific to French medicine and society. Some similarities between the two men's itineraries can be highlighted. Both their itineraries in Asia were determined by careers related to French interests, rather than planned for the purpose of acquiring knowledge. Thus French colonialism was the historical condition for the emergence of acupuncture in the French medical community in the seventy years of the twentieth century. On the other hand, it is also revealing to focus on the differences in professionalization and training between these two men. Soulié de Morant knew Chinese, but he was not a physician; he had to put special effort into the legitimation of his knowledge of acupuncture vis-à-vis the community of French medical doctors. The knowledge, and his whole work, were consistent with the medical language and theories of this period. Chamfrault, who at least at first did not know Chinese, was a physician who strove to understand and translate the ancient Chinese medical texts that he could find in Indochina; the knowledge he constructed was as much as possible linked to the ancient Chinese medical tradition. While the two men's approaches were opposed, their respective itineraries and attitudes met the needs of the time when they produced and published their works in France. Moreover, they derived their authority from one common feature—real in Chamfrault's case, apparently imagined in Soulié de Morant's—of their itineraries: the sojourn in a land where “Chinese medicine” was practiced, during which they acquired their expertise from locals.

Kim Taylor has shown how the “westernization” of Chinese medicine that took place in China in the second half of the twentieth century was influenced by the “Western” perception of Chinese medicine.¹⁰⁶ She has also underlined how this “modernized” Chinese medical knowledge gave rise to what is known today in Europe and America as “Traditional Chinese Medicine” (TCM). One can argue that in France a body of Chinese knowledge

¹⁰⁶ Kim Taylor, “Divergent Interests and Cultivated Misunderstandings: The Influence of the West on Modern Chinese Medicine,” *Social History of Medicine* 17, no. 1 (2004), pp. 93-111.

and medical practice was set up before the creation of TCM. Following the efforts of these three individuals—and many others—today acupuncture is part of the medical landscape in France, as the result of an appropriation of knowledge and of its adaptation to the French medical context. Thus, this particular practice and transmission of acupuncture on which we have shed light remain specific to France. Today, French acupuncture physicians still uphold what they regard as their fidelity to the “ancient Chinese tradition.” In their eyes, its authenticity is guaranteed by the interpretation of ancient classical texts and the priority given to textual knowledge.