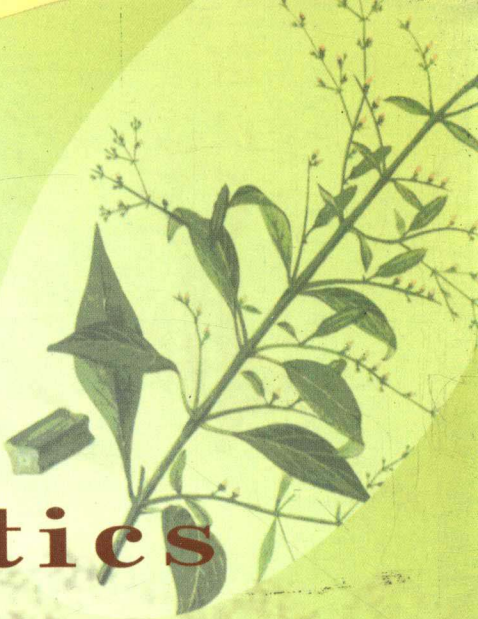


Practical English in Chinese Pharmaceutics



实用 中药英语

主编 万仁甫
范平
杨雄志

江西高校出版社

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序

中医中药学是中华民族和世界文化的宝贵遗产。随着我国加入 WTO, 中药如何走向世界, 越来越成为大家关注的问题。中药现代化、国际化、产业化是一项复杂的知识创新系统工程, 涉及的面很广, 有大量的工作需要我们去。尤其是中医中药外语表达的难度较大, 致使中医中药对外交流的速度一直不能令人满意。我从事中药教学、科研工作 50 多年, 一直希望中医中药能够全面走向世界, 为全人类的医药事业做出其应有的贡献, 更希望中药能够以它独特的疗效, 成为全人类防治疾病的有效工具。

江西中医学院的万仁甫、范平老师、浙江医药高等专科学校的杨雄志老师等主持编写的这部《实用中药英语》著作, 篇幅适中、简繁得当, 内容涵盖了中医学基础、中药学、中成药、中药科研与新药开发、中药商贸、中药文献等的英语教学内容, 其实用性正适合中药对外交流实际工作的需要, 值得广大中药工作者学习和参考使用, 是大学本科生、研究生不可多得的学习用书, 尤其适合只谙英语不识中文的留学生作为一部中药学的简明教材使用。该项工作属开创性的尝试, 工作量非常大, 编写难度亦超出了原先所预计的程度, 编写人员为此付出了多年的艰辛努力, 克服了种种困难。我作为一名中药工作者, 对他们取得的成绩, 深表敬佩!

我相信《实用中药英语》在中药对外交流、中药国际化教育和高等医药教材建设的道路上将会留下它深深的足迹。愿年轻的编著者们能够再接再厉, 虚心学习, 今后在实际教学过程中不断完善和修订, 逐步形成一部成熟的中药专业英语方面的专著, 为中药现代化、产业化和国际交流做出自己的贡献!

范崔生

2004.11.2

于江西中医学院

(范崔生教授, 系我国著名中药专家、国家食品药品监督管理局药品评审专家、全国高等医药教材建设指导委员会理事、江西省中医药科学技术专家委员会副主任委员)

Preface

Traditional Chinese Medicine is the precious legacy of Chinese Nation and the world culture. With China entering WTO, more and more people are concerned about how Traditional Chinese Medicine enters the world market. The modernization, internationalization and industrialization of Traditional Chinese Medicine are a complex system project of knowledge creation. It involves a lot and we have to do a lot of things. It's, especially, difficult to express the ideas of Traditional Chinese Medicine clearly in English so it is not satisfactory on foreign exchanges of Traditional Chinese Medicine. I have been engaged in teaching and research work of Traditional Chinese Medicine for more than 50 years and hoped that Traditional Chinese Medicine can be fully accepted and make contributions to the people all over the world. I also hope that Traditional Chinese Medicine can be an effective way for humans to prevent and cure diseases with its unique curative effects.

This book—*Practical English in Chinese Pharmaceutics*, is supervised and edited by Mr. Wan Renfu, Mr. Fan ping and Yang xiongzhi. Its length is moderate and it's neither too simple nor too complex. It includes the teaching contents of Fundamentals of Traditional Chinese Medicine, Chinese Pharmaceutics, Chinese Patent Medicines, Scientific Research of Traditional Chinese Pharmaceutics and the Development of New Medicine, Business of Chinese Drugs, and Documents of Chinese Pharmaceutics. Its practicalities meet the needs of foreign exchanges on Traditional Chinese Medicine and it deserves to study and consult for those whose major is Chinese Pharmaceutics. It is a valuable book for both undergraduates and postgraduates. Those overseas students who do not know much Chinese can use it as a concise textbook on Chinese Pharmaceutics. It is a creative and trial job involving a lot of work and the difficulties to compile it are far beyond the expectations. The editors have spent several hard years on it and overcome all kinds of difficulties. As a professional worker on Traditional Chinese Medicine, I appreciate their achievements very much.

I believe *Practical English in Chinese Pharmaceutics* will leave a deep track on the way to the foreign exchanges of Traditional Chinese Medicine, the modernization of Traditional Chinese Pharmaceutics and the construction of textbooks on Chinese Pharmaceutics of higher education. I do hope the younger editors will make persistent efforts and study with an open mind in the future. Then they can make it a perfect English textbook on Chinese Pharmaceutics and contribute greatly to the modernization, internationalization and industrialization of Traditional Chinese Pharmaceutics.

By Fan Cuisheng

Jiangxi University of TCM

November 11, 2004

(Professor Fan Cuisheng, a famous expert on TCM in China, an evaluating expert on drugs of the State Foods and Drugs Administration, a director of the State Guide Committee of Construction of Textbooks on TCM of Higher Education, a Vice – chairman of the Scientific & Technological Committee on TCM in Jiangxi Province)

前 言

为进一步扩大中药在世界上的影响,提高中国传统药品在国际医药界的声誉,使更多的人能够了解中药,宣传中药,造福于人类,我们编写了《实用中药英语》这本书。该书共分四部分,选择各类有代表性的中药、中成药予以介绍,以点带面,重在精简得当,使学习者与使用者见一叶而知秋、窥一管而知全豹。中药是中华民族优秀文化遗产之一,当前世界各国人民对传统医学的学习和研究热潮日益高涨,为促进这种势头的发展,使中药能更好地为人类解除病痛服务,就必须促进中医中药在世界范围内的传播和交流,而要使这一传播和交流进行得更及时、更准确、更简易,就必须首先排除语言障碍。随着我国加入 WTO 后,中药产业的国际化、现代化的步伐加快,对外交流的日渐增多,编写一本简单易懂、繁简得当的关于中药英语方面的学习和参考书籍,供各高校中药类本科生、研究生及留学生们学习、研究中药时使用,已成为中药学教育界许多人士的迫切需要。

多年来,由于中药拉丁语表达在国内教育界占主导地位,中药英语表达在口语及书面英语的表达教育上一直是个薄弱的环节。为此,编写人员针对学习的需要,在调查大量中药英语表达的文献资料及现实中药贸易过程中用英语交流的主要用语的基础上,对中药英语表达从实用的角度作了较为系统和较为全面的研究,以适应中药对外传播交流及高校学生学习的需要。在本书的编写过程中,一直得到全国著名中药专家范崔生教授的指导,并欣然为本书做序,对我们这些编写人员是最大的鼓励。同时,还得到了江西中医学院中药系主任、博士生导师龚千锋教授的大力指导和教务处处长肖宏浩教授的大力帮助。江西高校出版社魏文清主任、施景皓先生为本书的审定付出了辛勤的劳动。同事王芳、研究生徐亚伟亦为本书做了不少校对工作,在此一并表示衷心感谢。

学海无涯,尽管编写者和出版者倾尽了心力,但仍不能保证本书的完美无瑕,谨请读者批评指正。

在此,愿中药能为世界人民的健康做出更大的贡献,并以此书献给江西中医学院校庆 45 周年。

万仁甫

2004.11.18

Introduction

In order to extend the influences of Traditional Chinese Medicine in the world and enhance the international prestige of traditional Chinese drugs, let more people know it, publicize it, and make it serve human beings, we edit this book—*Practical English in Chinese Pharmaceutics*. It is divided into four parts. In each part, we choose some representative Chinese medicines and Chinese Patent medicines to introduce, from which the readers can get general knowledge about Traditional Chinese Medicine. Traditional Chinese Medicine is one of the best cultural heritages in China. And nowadays, people all over the world are studying it with enthusiasm. To enhance its development tendency and make it serve humans better by relieve them from diseases, we must promote the spread and exchanges of Traditional Chinese. To make it more timely, more correctly, and more simply, language obstacles must be removed firstly. Since China has been a member of WTO, the process of modernization and industrialization of Traditional Chinese Pharmaceutics is accelerating, and the foreign exchanges of it are becoming more and more frequently. So it is desirable for many people teaching Traditional Chinese Medicine to compile and edit a simple and concise English textbook on Chinese Pharmaceutics for undergraduates, postgraduates, and overseas students to study and consult.

For a long time, Latin is dominant in expressing on teaching Chinese herbs in China, so English expressing on teaching Chinese herbs is weak both in oral and written. The editors have looked up lots of English materials about Chinese Pharmaceutics and read many books about trades on Chinese Pharmaceutics, and studied the English expressions systematically and in details to compile this textbook to meet the needs of the spread and foreign exchanges of Chinese Medicine and university students. During the course of editing the book, we have been under the guide of the national famous expert on Chinese Medicine – Professor Fan Cuisheng. And now, he is happy to write the preface for this book. It honors us and greatly encourages us. At the same time, we have got the guide and help from Professor Gong Qianfeng, the dean of the Department of Chinese Pharmaceutics, tutor of doctors, and Professor Xiao Honghao. The editor Mr. Wei Wenqing and Mr. Shi Jinghao have spent a hard time in editing this book. My colleague Miss Wang Fang, and a postgraduate called Xu Yawei also have done a lot to proofread. I'd like to say thanks to all of them here.

It's endless to learn. Although the editors and the publishers have tried our best, we still can't guarantee it is perfect. Any criticism is welcome.

We hope that Chinese Pharmaceutics can make great contributions to all human beings and we present this book to the 45th anniversary of Jiangxi University of Traditional Chinese Medicine.

Wan Renfu

November 18, 2004

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Part 1 An Introduction to Chinese Medicine

Chapter 1 Classical Chinese Medicine

If you want to develop acupuncture, if you want to make it grow and spread, you have to be very strict in the way that you learn things, rigorous or strict in the way that we learn the words. If we employ words which are not accurate, we are not going to learn anything. Because in Chinese medicine, every single word has a deep meaning, and if we don't use them correctly, we may end up making errors. And if there are errors in comprehension we cannot help our patients, we cannot get results. And a medical science where there are no results is a science that has no future. That is why we are very strict about the terminology.

Obviously, there are many very fine books available these days by authors who have dedicated many arduous hours to true academic inquiry. But, perhaps not so obviously, there is replication of information, book after book regurgitating the same information: 12 Channels; 8 Curious Vessels; Pulses, Points and Pathologies — yet each often has differing nomenclature systems and terms, making the field all the more confusing, not only to beginners but also to professionals inside and outside the field.

More dangerous, though, is that too often books are published by inexperienced authors either with a shallow understanding or perhaps merely a need for notoriety. Worse still, are books aping scholarship yet based on the authors' misinterpretations and ideas literally made up off the tops of their collective head. Finally, and by far the worst offenders, are those who alter the classical precepts in order to produce unique, exclusive, trademarkable “new original information”.

INTEGRITY IN ORIGINAL PHILOSOPHY: “SCHOOLS OF THOUGHT”

Before we examine some common misunderstandings of classical concepts let us address the notion of “different schools of thought”, the primary alibi used to excuse and defend conflicting theories, philosophies and methodologies.

As in any field, many professionals gravitate to and employ techniques with which they personally resonate. Physicists, for instance, sometimes engage exclusively in work with particle accelerators. Some others may be deeply interested in fluid dynamics or astrophysics or purely theoretical physics. This does not change the laws of physics. This does not produce different universes with different physical laws based on differing “schools of

thought”.

I paraphrase Einstein: For laws of physics to be valid, they must be true for everyone in every part of the universe. The observations of individuals may vary depending on their point of view however, — even though the observations are as valid as is their individual point of view — this still does not change the laws of physics.

Chinese medicine was and is not immune to this phenomenon. Ancient masters of Chinese medicine also engaged in this kind of “specialization”. Tung’s Acupuncture is a prime example. Tung, a fine acupuncturist in his own right, traveled throughout China recording the favorite techniques and “tricks” of the best doctors in the land. This resulted in a work entitled “Tung’s Acupuncture”, a compendium of classical and non-classical points and techniques for which he developed a separate nomenclature and numbering system in order to tie these “tricks” together in a coherent, understandable and usable system.

The point is there is no such thing as Tung’s Acupuncture. It should more properly be called “Chen’s and Ching’s and Ping’s and Cheng’s and Zhen’s and Zhao’s, (etc.) Acupuncture: A Book Of Techniques Based On A Complete Coherent System That Is Called Chinese Medicine, Compiled By Ching-chang Tung”. Other examples are: Korean Hand Acupuncture, Craniopuncture, Auriculopuncture, the Japanese Systems, American Acupuncture, Constitutional Acupuncture, Energetic Layer Types, Trigger Point Therapy, “Various” Kinesiology, Microsystems — the list goes on and on as if there were a different “biology” for each system. There are not different biologies that respond to different systems.

The message that must be taken here is — Chinese medicine is a complete coherent, integral, interdependent and independent system of health care that must be understood within its own context, in whole, not in part, if it is to be mastered. It was born out of Daoist philosophy, which is at the heart of Chinese medicine and contains the original, guiding ideas that nurtured it into existence. Anything else is merely a fragment, no matter how elegant or seductive it may seem, it is only a specialty that, when studied in a vacuum, is merely a facet that will not reveal the jewel that produced it.

As stated, since there are already many introductory books, our purpose in this work is not to present the entire field of Chinese medicine. In fact, we shall be at pains to avoid any redundancy. Instead, we will attempt to fill the gaps, supply the missing pieces, restore the guiding ideas and, where ever possible, correct misinformation when certainty about the error is assured.

SYMBOLS AND OBJECTS

To be faithful in the small is to be faithful in the large. What does this mean? It means if we are going to represent Chinese medicine faithfully and accurately, in order to gain and keep the respect the field rightfully deserves, we must look after the smallest details. We must be certain of what we say. We must be certain that there is consistency, continuity and integrity in the laws, rules, philosophy and even in the symbols we use to portray these ideas and concepts. (Lest you think I'm "nitpicking" consider what one might think of the other scientific disciplines if they were inconsistent with their symbols, say, physics equations or electronic schematics. c.f. Tran's quote at the introduction).

Lets look at some examples:

Nothing is more familiar, even to the non-student of Asian thought, than the Taijitu. Although he may not be able to name it he can certainly recognize it as familiar. But which of the following best represents the philosophical idea it is supposed to portray? Indeed, what is the philosophical idea it is supposed to portray?



Figure 1 seems to represent a clockwise flowing motion with the yang portion ascending and the yin portion descending; Figure 2 is similar but implies an anti clockwise motion; in Figure 3 it appears yang is descending, yin is ascending and the flow is anti clockwise.

The answers: firstly, none of them. Secondly, regarding what it does represent, let's digress slightly to the original meanings of yin and yang.

Antedating any philosophical connotation to yin and yang were their original reference only to the shaded side and sunlit side of a hill or mountain. They later took on more metaphysical and emblematic usages in the hands of the Daoists.

Since Daoist science is a product of the direct observation of the universe it didn't take long for these handy terms to provide symbols for all polar opposites. Neither was there any resulting contradiction to other natural phenomena or philosophical discussion of such, e.g. at its maximum, yin can transform into yang and yang into yin; simply watch the sun traverse from the sunny side to the shaded side, and at noon, they reverse.

The notion that any qualitative symbol of Daoist science was “thought up” and these priests went scurrying about trying to find phenomena to fit them is decidedly a Western problem. For those thoroughly inculcated with the Greek/Western model this epistemological mode continues to be the stumbling block preventing any logical or useful grasp of Chinese medical science as a whole.

The process of Western science looks something like this:

Hypothesis/theory (guess) → experiment (experience) → Laws. (Quantitative)

Whereas the process of Eastern science follows thusly:

Natural phenomena (laws) → experience (experiment) → Thesis. (Qualitative)

Both yield highly accurate information about totally different aspects of reality. The point is — Eastern science never created terms in hopes of finding natural events to fit them to. Natural events were observed and fitted themselves quite “naturally” into qualitative standards of logically stringent categories (Yinyang and Wuxing).

Five phase symbology (may we please drop the terms “theory” and “element”) is a perfect example of this irritating tendency to “alter to make fit” or “rephrase to make sense”. This is also why many writers and practitioners find the five phases so stubbornly resistant to Western “scientification” and so, frustrated, abandon it (except in the very few cases where it behaves physiologic quantification). In doing so they have thrown out the baby and kept the bath water. Five-phase science is not “too rigid” to be useful, the rigidity is in the minds of the cerebral stenotics that won’t expand to include it, to understand it within its own context. To quote Vartan Gregorian quoting Sheraton “in looking for predigested ready-made answers, they have failed to undergo the fatigue of judging for themselves”.

One can read in the introductions of the various textbooks, the authors’ stating the problem...

“Westerners, brought up in modern scientific tradition, often have difficulty in grasping the concepts of Chinese medicine... Much of English literature, including that produced in China, omits the apparently irrational, while reformulating in inexact Western medical terminology much of what is acceptable...”

Then, in the body of the very same textbook, go on to state:

“Conspicuous shortcomings are also to be found in five-phase theory... certain aspects... provide valuable guides... other aspects are unclear and are therefore incompatible with modern medicine... the accurate aspects must be preserved, and the

inaccurate ones eliminated.”

They have fallen prey to their own caveat. Polarized in the Western mode, they omit the “apparently irrational” and state “inexactly” the remaining bits after a thorough cleaning with Occam’s razor.

We won’t have that problem. We will present Chinese medicine whole and in the Daoist context — the only way in which it can be understood.

But nor can we rely on the books from China, as stated by the above authors, and as evidenced by the quote below in the definition of “Jing”:

“Owing to this jing qi (whether it be generated right in the Kidneys themselves, or otherwise extended to these), Kidneys are somehow involved in, or even responsible for, the process of Reproduction.

Finally, Kidneys are believed to even possess mental aptitude, affecting such feats as memory, temperament, behavior, fright, fear and other emotions.

REMARKS — Despite their acknowledged importance, even versatility, it can be readily discerned that this notion of mental aptitude is even more farfetched than the notion of effecting or influencing Reproduction.”

Even the marginally informed acupuncturist has an understanding of the tremendous responsibility Kidney energetics have with reproduction and mental states.

Just as absurd as tossing out all or part of the five phases is the assumption one can practice only “five-element acupuncture” or “jing-luo” or “zang/fu” acupuncture. These concepts simply don’t make any sense. They come from the ubiquitous Western habit of reductionism i.e. cardiology, neurology etc. In the individual patient, one cannot treat an aspect in isolation of the whole. This even goes beyond the level of the individual. I am in no way making a metaphysical statement when I say the biota is contiguous with the cosmos... the flapping of a butterfly’s wings will affect the weather of the world, the weather of the world inductively blends with the health of the biota. We are a “piece of the action”.

OBJECTS OUT OF SYMBOLS — MATTER OUT OF ENERGY

Pick your favorite translation of the Daotejing... verse 21.

My “cut-to-the-chase” translations:

1) Qualitative translation:

Things only come into existence according to the laws of Dao.

The Dao is elusive and intangible,

from within the Dao comes the image (xiang),

from within the image (xiang) comes the object (wu).

How do I know this is so? Because it is so.

2) Quantitative translation:

As we say in the west,

$$E=Mc^2$$

Examining these terms (xiang and wu) yields some fascinating insights. Xiang, the same term used in the Chinese composite for “energetic anatomy” (zangxiang, internal organ image) is also the term used to describe the symbols (bagua, eight divinatory symbols) of the “I Ching”. The xiang of the I Ching are, in turn, made up broken and solid lines (xiao) representing various combinations of yin and yang. Xiao means likeness or resembling (like the taijitu, these xiao are other symbols for yin and yang).

Xiang itself refers not only to the symbolic representation of an object but includes the object itself as well. Interesting term.

Wu means matter, the real thing, substance.

We can easily define separately the words: concepts, shapes, fields, functions and structures, energy and matter. But finding hard boundaries between them in physics and Chinese medicine is at best useless if at all possible. The notion that matter even exists (as such) is rapidly becoming unpopular in modern physics. I recently heard that quarks, for instance, can now spontaneously turn themselves into electrons and vice versa.

Clinically there is no useful distinction between an organ, its field or Bao (energetic envelope), its structure, its channels, its sphere of influence or for that matter, its symbols, its xiang and wu...

Ancient Daoist philosophy: “Yin creates yang, yang activates yin” — modern Einsteinian physics: “Matter tells space how to curve, space tells matter how to move”.