Buddhism and Medicine: An Anthology of Premodern Sources, edited by C. Pierce Salguero. Columbia University Press, 2017. 728 pp.; Hb \$150. ISBN-13: 9780231179942.

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Anyone who knows anything about Buddhism knows that it is deeply intertwined with medicine. Such connections range from the Four Noble Truths which are set out like a medical diagnosis, via figures such as the legendary physician Jivaka or the Medicine Buddha (Bhaiṣajyaguru), all the way to the nowadays ubiquitous Buddhist-derived practice of mindfulness.

Buddhism and medicine have been intertwined not only doctrinally, but also in the ways they spread. Medical knowledge was transmitted together with Buddhism along its many paths of transmission from India into other parts of Asia and beyond, together with the technologies which enabled these transmissions. Under the general guise of what might be termed ‘Buddhist medicine’, we can observe processes of cultural differentiation, as medical knowledge moved with Buddhism throughout Asia. Buddhism and medicine have intertwined and interacted in myriad ways in the many cultural contexts where they have had an influence. Analysing the dynamics of cross-cultural transmissions and adaptations along the land and sea routes that traversed Asia is important not only for a better understanding of the global history of medicine and the history of Buddhism, but also within the emergent global approaches to the history of science. Yet still, this area of research within Buddhist studies has been relatively small — that is, until a few years ago. Recent years have witnessed a very welcome boom in this area of research. The present anthology is a major landmark within this new wave of research, providing excellent paths into the myriad ways in which Buddhism and medicine have intertwined throughout Asia.

The anthology under review includes sixty-two contributions from leading scholars across the Buddhological and Asian medicine fields, showcasing the connections between Buddhism and medicine. The collection is based on an impressive variety of sources: not only the more common references to Sanskrit, Chinese, Tibetan and Japanese sources, but it also includes Buddhist medical texts in Pali, Khmer, Thai, Burmese, Vietnamese, Korean and Mongolian. Each chapter includes a useful, short introduction to the text to be studied and its general topic, a selection of suggested further readings, and a translation of the chosen text. The texts themselves also vary in genre: from ‘canonical’ texts — deriving both from the Buddhist canons and medical canons — to recently discovered handwritten manuscripts, stone inscriptions and other genres.

The diversity showcased in the volume allows the reader to reflect on the very contours of what should be considered as ‘medicine’. Its thematic sections go beyond ones which have received more attention in the past, such as ‘Doctrinal Considerations’, or sources dealing with the connections between ‘Healing and

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Monastic Discipline’ or ‘Buddhist Healers’, to also include a rich variety of ritual interventions found in the Buddhist world (‘Healing Rites’) and an important section dealing with both the benefits and dangers of meditation (‘Meditation as Cure and Illness’). The last two sections (‘Hybridity in Buddhist Healing’ and ‘Buddhism in the Medical Traditions’) also call the reader to observe some of the porous contours of what Buddhism is. These sections discuss texts which are only ‘nominally Buddhist’ as Pierce Salguero, the editor of this anthology, puts it (p. xxv). As well, the influence of Buddhism on institutionalized medical traditions of premodern Asia is considered.

In bringing together a vast array of perspectives on the topic, one of the key advantages of this collection is that the sum of its contributions is far greater than its parts. Being able to access such a rich multiplicity of Buddhist traditions in one place allows the reader to observe how medical concepts and practices within Buddhism move and change across cultures and through time. The anthology can be read both thematically, as it is arranged, and geographically, aided by an appendix providing a geographical table of contents.

The volume will be essential reading not only for scholars of Buddhism and history of medicine, but will also serve as a very valuable tool for students in both of these fields. Chapter four, for example (C. Pierce Salguero’s ‘Understanding the *Doṣa*: A Summary of the Art of Medicine from the Sūtra of Golden Light’), could be very useful for a comparative look at humours/humouralism for students studying the history of medicine. Another chapter which could be of great interest for historians of medicine is one that examines a Cambodian king’s twelfth century network of hospitals. This is Peter Sharrock and Claude Jacques’s chapter, “‘The Grief of Kings Is the Suffering of Their Subjects’: A Cambodian King’s Twelfth-Century Network of Hospitals’ — a fascinating example not only for the history of hospitals, but also on how medicine played out within state-religion relations. The source includes a detailed description of how the hospital in question was run — including a breakdown of its ninety-eight(!) personnel and their roles, and a remarkably progressive declaration by the king in support of state-funded medicine for all (essential reading for some US legislators...).

The section ‘Meditation as Cure and Illness’, includes reminders that meditation, although obviously held in high regard, is far from its current cure-all reputation, and has also been seen as potentially dangerous. Eric Greene’s contribution (‘Healing Sicknesses Caused by Meditation’), translating an excerpt from a meditation manual of unclear origin, possibly composed in the Central Asian oasis of Turfan, the *Secret Essential Methods for Curing Meditation Sickness*, is a reminder that meditation also has its risks, a point that is important to emphasize in the current era, when meditation is so widely prescribed, occasionally without due care to more vulnerable meditators. The section ‘Hybridity in Buddhist Healing’ presents some interesting examples of medical knowledge which moved across the Buddhist world, and provides some excellent starting points to think about *how* and *why* such processes of knowledge movement took place. Michael Stanley-Baker and Dolly Yang’s chapter ‘Dung, Hair, and Mungbeans: Household Remedies in the Longmen

Recipes' (chapter 46), for example, provides a translation of recipes engraved on the walls of one of the Longmen Caves. These recipes, an example of a type of knowledge which travels easily, in this case most likely via Buddhist pilgrims, also appear amongst the Dunhuang manuscripts. Focusing on mnemonic illustrations, Marta Hanson's chapter on illustrations of Buddhist hand mnemonics from Dunhuang (chapter 47) brings to light how this form of Buddhist visual culture served as a method of knowledge transmission.

What makes a medical text 'Buddhist' is a question that receives a myriad of answers in this collection. Most varied are the ones presented in the last section, 'Buddhism in the Medical Traditions'. One answer, for example, is the centrality of compassion in Nathan Sivin's chapter 'Sun Simiao on Medical Ethics' (chapter 53). Another aspect is presented in a chapter dealing with the Japanese Buddhist practice of cataract surgery using a golden needle, which appears to have come via Indian Buddhists to China and then to Japan. This is examined in Katja Triplett's chapter 'Using the Golden Needle: *Nāgārjuna Bodhisattva's Ophthalmological Treatise* and Other Sources in the *Essentials of Medical Treatment*' (chapter 54). Tackling the complex question of whether a karmic illness is treatable, and indeed the very categorisation of 'karmic illnesses', is discussed in Andrew Goble's chapter 'Determining Karmic Illness: Kajiwarra Shōzen's Treatment of Rai/Leprosy in *Book of the Simple Physician*' (chapter 56) and in other chapters throughout the book. Finally, Janet Gyatso's chapter presents a discussion of whether the Tibetan *Four Treatises* (*Gyushi*) can really be counted as *buddhavacana* (the Buddha's word) in the chapter 'Did the Buddha Really Author the Classic Tibetan Medical Text? A Critical Examination from *The Lamp to Dispel Darkness*' (chapter 62).

This volume focuses primarily on pre-modern sources. Pierce Salguero, who has so ably edited this volume, has recently published a second volume, dealing with modern and contemporary sources (Salguero, C. Pierce (ed.). *Buddhism and Medicine: An Anthology of Modern and Contemporary Sources*. New York: Columbia University Press, 2020). A third volume, based on the sources of these two anthologies and providing a general overview of Buddhism and medicine, is currently in preparation. These three volumes together will become not only staples of teaching, but also have the potential to inspire scholars of Buddhism to think about Buddhism and medicine in themes, ways and languages they have not considered before.

Much editorial care has been put into making the volume a scholarly sound yet accessible source for a wide readership. Considering the inherent difficulty in achieving this goal, the volume has managed to be both valuable and readable for scholars and students of both Buddhism and history of medicine. My only minor caveat in this regard is that the index could be more user friendly for non-Buddhologist historians of medicine and their students. Other than this minor comment, this volume is a remarkable achievement, for Buddhist studies and Asian studies, as well as for proselytising Buddhist medicine to historians of medicine.