The Context of Personal Health Care from the mid 16th Century through the mid 17th Century

Mihoko KATAFUCHI

Received October 12.2004

Abstract

This essay clarifies the context of yojo (personal health care) from the mid 16th Century through the mid 17 th Century. Yojo was a field of medicine and was not popular in the 16th Century. Only medical practitioners and Army Generals who had learned yojo from the former had the knowledge of yojo. However, after the 18th Century yojo became popular and a kind of ethics. This situation was caused by a change in the perception of the value of life due to the ending of the war era and the new Togugawa era of peace.

Preface

Context of Taking Care of One's Body from the 16 th Century through the First Half of 17th Century. In the Edo era (1603-1867), especially, after the Genroku period (1688-1704) the care of one's body was popular. Many Japanese health and remedy books were published in the Edo era (1601-1868). There were more than one hundred titles, including some with unknown anonymous publishers1. The books contained not only information, but were didactic, as their title contained the term "Kun (sermon)". Health and remedy books in the Edo era discussed diet, how to drink alcohol, choosing doctors, caring for older people, raising children, sexual practices, good human relations and so on. These books provided value to life, gave priority to tranquility in daily life, and discussed taking care of one's body as a matter of ethics. What was this discourse derived from? Before the latter part of the 17th Century, there were few Japanese health and remedy books. The first health and remedy book published in the Edo era was Manase gensaku's, Enjusatsuyo (written in 1599, published after 1601). Indeed, Japanese health and remedy books were rare before the publication of Enjusatuyo. How did that change derive from yojo, or the persona health care? This essay presents a theory on what it was, how it was born, and how its historical context was. By examining such things, it will be also possible to clarify the birth of the yojo discourse in the theory of knowledge of the body.

1 Position of Yojo

1.1 Yojo as medical practice

I will trace briefly the history of the publication of Japanese health and remedy books before the Edo era². No copies of the oldest known health and remedy book, Mononobe Kousen's *Setsuyoyoketsu* (827) exists. The oldest surviving health and remedy texts are two volumes of *Ishinbou* (984), a work based on Taoist principles and edited by Tanba Yasuyori. Volume 26 is titled *Ennenho* and volume 27, Yojo. After Ishinbo was written, from the 12th Century to the latter part of the 16th Century, there were only about ten new health and remedy titles published. All the while, the yojo discourse was seldom found in health and remedy books, but was common in medical books.

At that time, articles about yojo were written by doctors. In spite of addressing some issues which also were addressed in medical science, yojo in the Edo era was not considered a part of medical science. In the books on vojo, especially after the 18th Century, vojo books gave version of a practical morality and prescribed self-evaluation, guidelines for simplicity and austerity in life, and good human relation. Kaibara Ekiken's Yojokun (1713) which was typical of health and remedy books in the Edo era, was a 'kun (sermon) about yojo as indicated by its title. However, in the 16th Century, yojo was not yet a practical moral system but a part of medical science. Nippo (Japanese-Portuguese) Dictionary edited in 1603, defined the term yojo as "care for a patient or paying attention to health. This term is not interpreted as a medicine for illness. It simply means cure"3. This text demonstrates that it did not yet exist as an ethic of paying attention to one's body in society.

It was the 16th Century that medical science and the techniques of medical practice developed, and many medical books were published. In addition, a number of physician works in the history of medicine such as -Sanki, Sanki, Manase Dosan, Manase Gensaku, Takeda Teika and so on—appeared in the 16th Century. Manase Dosan, for instance, established the medical school named Keichitsuin in Kyoto, while the lord of the Bungo region (present day Oita Prefecture), Otomo Sorin, established a clinic: Because of the publication of many medical books in the 16th Century, articles about yojo probably increased in number. However, the number of medical books published was still less than in the Edo era. The increase in medical practitioners and medical books in the 16th Century demonstrates the great interest in illness and care of the body. It seems that this great interest in illness and the body prepared for the popular of yojo books, which taught morals and described the techniques of taking care of one's body. However, yojo in the 16th Century was not an ethic for daily life; it did not yet include guidelines for simplicity and austerity, fidelity, and good relationships between married couples.

1 . 2 Army Generals in the Warring State Period and Yojo

Who read about yojo in medical books in the 16th Century? Of course, physician monks and the generals in the Warring State Period practiced yojo as personal health care not as a moral code. The generals consulted physician monks and learned medical theory and practice from them. The generals' men often were injured in battle and suffered from epidemics during wars and while camped. The need for cures in such situations was likely one of the reasons why the generals wanted to learn medical science and practice. They had inherited Kinso medicine (surgery or healing a wound) as it had existed from the latter part of the Heian era (798-1192). Kinso medicine became most popular during the 16th Century. In addition to Kinso, some army generals were versed in general medicine and they had a good knowledge of pharmacy. For example, Tokugawa Ieyasu, the first shogun in the Edo era, was knowledgeable about medicine. Manase Dosan, the pioneer of Rishu-medicine which would become the most popular in the Edo era, taught medical science and yojo to army generals and their court physicians. According to historian Miyamoto Yoshimi, another general, Murakami Yoshiaki, appealed for the knowledge of yojo to Manase Dosan and it recorded in poetic form of yojo in the book entitled Tanka Poetry of Yojo in 1586.5. Mori Motonari was also taught the nine main points about yojo and was to a book titled Suchikukai gonjo mokuroku (The List of Suchikusai's Statement). Army generals in the Warring State Period often made tanka poetry about yojo, which prescribed dietary and sexual practices. On the other hand, after the 18th Century, the vojo discourse taught control of the emotions, guidelines for simplicity and austerity, avoidance of discord, and rules for good human relationships. However, the army generals' yojo discourse in the 16th Century made no mention of these themes. To be sure, army generals paid attention to their own bodies. But this practice of personal health care did not derive from yojo as a moral code. In Warring Stete Period in the 16th Century, it was necessary to be healthy in order to survive indeed, but Army generals, needed knowledge, wisdom and bravery more. In other words, they were not concerned that being wounded or contracting illness was inimical to loyalty, but simply interested in avoiding illness and other health conditions.

2 Less attention of Personal Health Care

2.1 Discourse of Personal Health Care

In contrast to the increase of the yojo discourse after the Genroku period (1680-1709), the appearance of yojo in 16th Century the medical books is rare. What brought about this increase? As Tsukamoto explained, there was a demand for of the knowledge of "new" foods in the 17th Century Edo⁶ and a change of literary culture, an increase in the literacy rate and the factual content of books, as well as the development of new publishing techniques7. However, this essay focuses on the changing concept of the body as the historical context of development of yojo. The increasing number of health and remedy books after the 17th Century resulted from the growing popularity of the idea of yojo and the attention paid to the body up to that time. The evidence for the lack of the idea of yojo until the middle of the 17th Century is at least threefold. First, there is little discourse on long life and paying attention to the body. Second, the idea of yojo was restricted to a small circle of people. Third, the practice of vojo was not popular in those days. That is because, from the mid 16th Century to the beginning of the 17th Century, description of vojo or the hope of being healthy had rarely been written into the family moral codes of the army generals. Japanese health and remedy books often contained knowledge of food science (shokumotsu honzo), which was information about the sources of foods and their effects on health. Food science was similar to yojo in that both paid attention to diet. While food science books were hardly published in the 16th Century, they had become popular after the 1620's, and even more, famine survival books become popular in the latter part of the 18th Century. These books demonstrated how to cultivate fields and described and which plants were edible to eat during famines. However, few famine survival books were published in the 17th Century. The books of yojo were composed as part of the family moral codes of army generals in the Edo era. Yojo was also one of the important areas in the moral precepts for feudatories and descendants.

2.2 Practice of Personal Health Care

The evidence that the concept of vojo was more common than before the middle of the 17th Century was not only an increase in the number of the discourse on long life and paying attention to one's body. Other evidence is the popularization of proprietary medicines, doin (similar to taichi) 8, acupuncture, walking for keeping good health, and so on. For instance, the famous medicine named Hankontan produced in Toyama was developed and became popular from the latter part of the 17th Century9. Ginseng being a typical medicine in the Edo era had been popularized after the 18th Century. The unknown author of Mukashimukashi monogatari (Tales from Long Long Ago) 10 shows us the customs of those days, mentioning the popularization of ginseng. 'A long time ago' at Mukashimukashi monogatari (Tales from Long Long Ago) written in the beginning of the 18th Century, refers to the middle of the 17th Century,

A long time ago, it was rare that patients took ginseng. People who were not of high rank could not take ginseng, even though they had a serious illness. Even high ranking dying were given only a little bit of it. Nowadays, people having a mild illness take ginseng readily¹¹.

This book, *Mukashimukashi monogatari* (*Tales from Long Long Ago*) refers to the development of old medical habits into those of the 18th Century. Accord-

ing to this book, ginseng was not taken as medicine, even if people had serious illnesses. However, ginseng was not very expensive and its purchase and procurement were not difficult in the middle of the 17th Century. Daidouji Yuzan's *Ochiboshu* (1727-1728) describes manners and customs in the beginning of the Edo era that suggest the ease of acquisition of ginseng. Yuzan said that when he was young, ginseng had not been expensive or rare¹². There is the possibility that one of the reasons for the increase in the price of ginseng and the demand for it was the increasing interest in long life.

An Example of this interest includes the popularization of acupuncture and the birth of Hososhin (the folk god of smallpox and its traditional worship). After Manase Dosan's finding of Keiraku (lines of power) 13, acupuncture started becoming popular. Acupuncture was one of the popular medical practices in the Edo era. Kaibara Ekiken's Yojokun written in the beginning of the 18th Century is typical of health and remedy books in the Edo era. Ekiken criticizes the over-dependance on acupuncture. The birth of Hososhin (the folk God of smallpox) in the middle of in the Edo era suggests a development of interest in illness. Interest in light exercise, bathing, sleeping and selection of medical practitioners was rare in the beginning of the 17th Century because the main contents of yojo were diet and sexual practice at least until the end of the 16th Century. Yojokun recommends readers walking for keeping healthy. However, walking in the latter part of the 16th was not considered a practice of voio. Lewis Frois who came to Japan in the latter part of the 16th Century as a missionary said in his book European Culture and Japanese Culture,

We think that taking a walk is efficient for being healthy and for relaxing. However, Japanese peoples never take a walk for health or relaxation. They rather doubt our thinking about walking and think the aim is part of a job or for repentance¹⁴.

According to Frois' statement, it seems that walking for health did not exist in the latter part of the 16th Century in Japan. After that, walking was thought good for being healthy. Kaibara Ekiken's *Yojokun* (1713) describes taking a walk as yojo. "Please take a walk three hundred paces after every meal. Taking a walk of five or six cho is much better" 15. The difference between Frois's statement and Ekiken's

suggests a transition in the meaning of yojo and it's increasing popularity.

3 Cruelty and Violence

3.1 "Japanese peoples are executioners"

The scarcity of the concept of yojo and the prevalence of violence in the 16th Century were compatible. If there is no belief in the value of life and life long physical health and the stability, there is less sensitivity to the violence and killing lives. Statements of Catholic missionaries who came to Japan in the 16th Century reported a Japanese insensitivity to violence at that time. They could not help being surprised at Japanese cruelty. Alessandro Valignano visiting Japan at the end of the 16th Century, mentioned the character of the Japanese people.

The fourth characteristic is that they kill extremely cruelly and readily. Even if the reason for their killing is unimportant, they kill vassals. Moreover, they cut through the neck and waist as if they were killing pigs. They do not think their own acts of killing to be serious. That is why many of them kill someone they encounter to test the quality of a new sword, if they do not fear retaliation. They set private houses and even temples on fire. They commit suicide readily in order to demonstrate their anger to avoid losing their honor or being captured by enemies¹⁶.

Allessandro Valignano thought that the medieval Japanese killed someone or committed suicide even if they did not have serious or important reasons. Avila Giron said of the Japanese whom he had met

They are extraordinarily ungrateful. Even though they require privilege, they forget it immediately. Moreover, they require more privilege. Generally, they are cruel, cold-blooded, insatiable and miserly. All their habits are snaky, dishonest, extreme and disordered. Their acts change easily¹⁷.

Avila Giron's opinion is that the medieval Japanese did not put limits against violence and destruction, including their violent emotion. He said that the Japanese people seemed to be executioners.

I witnessed such cutting through the waist by sword. This sword cutting is extremely cruel. In case of killing someone for punishment, they first break the neck as if it were not made of skin, flesh, nerve and

bone but made of soft stalks. This breaking was done by the hand, not a sword. Thus cruel executioners are very skillful in killing someone. Moreover, not only cruel executioners but also all Japanese have cutting skill. That is why we can say that the Japanese people are executioners. After breaking the neck, they cut body in many parts very cruelly and sew these parts of body together again. They cut the uninjured part of the body in order to test the quality of a new sword¹⁸.

Lois Frois thought that army generals in those days would rather become an executioner than thought to hesitate. "Becoming an executioner is the most ignominious for us. But, even noble persons do executions and they are proud of it¹⁹".

3.2 Desertion and Killing of Their Own Children

Although, yojo discourse had included the value of long life and of the stability of daily life, the value of life caused by the yojo discourse was relatively lower in the 16th Century when yojo discourse was rare. For instance, there was no attention paid to the care and maintain of children. That caused daily desertions and killing of children at that time. The historian, Tsukamoto Manabu has indicated

I am sure that the sense of guilt for deserting and killing children had spread and intensified gradually on account of government prohibition in the latter part of the 17th Century²⁰.

Considering this sense of guilt for deserting and killing children from a different angle, probably, people did not have this sense very much from the 16th Century to the middle of the 17th Century. Many prohibitions against deserting and killing children in the Genroku Period (1688-1704) were not caused by a great increase in the number of children deserted and killed but by a change in the view of the value of life. Alessandro Valignano missionary said, "the cruelest and most disorderly were mothers that often killed their own babies, took medicine in order to induce an abortion, they suffocate their own babies by putting a foot on their necks after birth²¹". The reader may imagine that parents who deserted a child were anxious that their children would be helped and then manage to survive. There was little difference between deserting children and killing children because there was a great possibility that dogs would attack and eat deserted children. When deserted children were attacked and

eaten by dogs, what was going on? Children's bodies would be broken and their bowels would pull apart. After being eaten by dogs the remains of bodies would be decomposed and then be reduced to a skeleton. In those days, sometimes people saw of bodies that were decomposed and reduced to skeletons. That they cut bodies into many parts very cruelly, sewed these body parts together again, and then cut the uninjured parts of the body in order to test the quality of a new sword, which is evidence of the lack of value for life in the 16 th Century. And the disregard for long life was related to a lack of interest in paying attention to the body.

4 Toward Japanese Health and Remedy Books in the Edo era.

The notion of attention paid to the body, the yojo discourse and the popularity of cruelty and violence had changed from the 16th Century to the 17th Century. The yojo discourse had become much commoner in health and remedy books after the 17th Century. Food science books were concerned with diet, which had been one of the two main yojo themes, were first published in the beginning the 17th Century. These food science books were first read in the latter part of the 17th Century. Moreover, the testing of new swords became rare because of a new sense that the practice was cruel. The yojo discourse distanced itself from the field of medicine. As it diverged from medical care, the yojo discourse started suggesting the value of 'life' and 'Mi22' and teaching morals in daily life in the beginning of the 17th Century.

I would like to demonstrate the development of a divergence between the latter part of 16th Century to the beginning of the 17th Century. Paying attention to the body became expected for everyone, not just the elite; in other words, yojo became popular. There was no expectation for popularizing the yojo discourse that Army generals exclusively had learned from medical monks. Entering the 17th Century, however, popularization of the practice and the knowledge of yojo were expected in the health and remedy books. Manase Gensaku expressed hope for popularization of yojo in his book Enjuyatsuyo. "I do hope that everyone enjoys a long life, having stability of life, knowing this moral code and practicing it constant²³". By the beginning of 18th Century, yojo was taken for granted. The discourse that required yojo in order to keep healthy or avoid illness had disappeared.

What brought about this popularity? One of the answers is the change of perception of life. As I

already mentioned in section three, the disregard for life, that is, readily injuring and killing in the 16th Century, was related to a lack of interest in paying attention to the body. That yojo became popular meant that injuring the baby and killing body was avoided; the attitude of paying attention to elder people and children was required. The reason for paying attention to elderly people and children is that elderly people have little time to live and children have a long time to live. That is why elderly people and children were cared for. Then, the discourse of condemning deserting and killing children appeared.

The yojo discourse that army generals knew was based on the medical. On the other hand, the yojo discourse after the 18th Century was the teaching of moral codes for daily life. Yojo became one of the ethical practices; in other words, in addition to keeping the body healthy, it was a way of controlling the mind. Other than physician monks, only army generals knew and practiced yojo at first. In a peaceful period after the beginning of the 17th Century, these generals presented themselves as Bushi who had excellent morals including yojo. In the Edo era, the principle of government was that the elite having strong morals had ascendancy. I could suggest a new perspective, known as the genealogy of morals, that Bushi made yojo become the moral code. When yojo became morality, the body that was attended to became the object of the practice of vojo. As a result of the new value for life, even the lives of children and the elderly were respected, and yojo was transformed from merely paying attention to the body to an ethical practice.

Notes

- 1. Kabayama Koich, Renaissance Shuko, (Tokyo, 1970) p.170.
- For publication of Japanese healthy and remedy books, see Takizawa Toshiyuki, Kindai nihon kenko siso no seiritsu (Tokyo, 1993).
- 3. Trans Doi Tadao, Morita Takeshi and Nagaminami Minoru, *Japanese- Portuguese Dictionary*, (Tokyo, 1980) p. 826.
- 4. According to Sakurai Kensuke, Tashiro Sanki as an important doctor in the 16th Century was in fact two men whose names were same, Sanki and Sanki and these two doctors (Sanki and Sanki) have been confused.
- Miyamoto Yoshimi, Sengoku busho no kenkoho, (How to be Healthy on army generals) (Tokyo, 1982) p.29.
- 6. Present day Tokyo.
- 7. See Tsukamoto Manabu, *Inaka to tokai* (Country and City), Tokyo, 1991).
- δ . Kind of exercises for good health deriving from Taoism.
- 9. See Tamagawa Shinmei Hankontan no Bunkashi (Cultural

- history on Hankontan), (Kyoto, 1979).
- 10. Birth of this book is thought in between 1732 to 1733. Kumakura Isao 'Mukashimukasi monogatari kaidai' Edit Harada Tomohiko, Takeuchi Toshimi and Hirayama Toshijiro *Nihonshomin seikatsu shiryo shusei vol.*8. (Tokyo, 1969), p.388.
- Kumakura Isao 'Mukashimukasi monogatari kaidai' Edit Harada Tomohiko, Takeuchi Toshimi and Hirayama Toshijiro *Nihonshomin seikatsu shiryo shusei vol.*8. (Tokyo, 1969), p.403.
- 12. Daidoji Yuzan Ochiboshu, (Tokyo, 1967) p.243.
- 13. Concept of lines of power on the body on herbal medicine.
- 14. Luis Frois (trans Okada Akio) Europe Culture and Japanese Culture, (Tokyo, 1991), p.27.

- 15. Kaibara Ekiken *Yojokun and Wazokudoujikun*, (Tokyo, 1991), p.44. Cho is traditional scale of distance in Japan.
- Alessandro Valignano, (trans Matsuda Kiichi and others),
 Nihon junsatsuki, (Tokyo, 1973), p.19.
- Giron Avila (trans Sakuma Tadashi and Aida Yu) Nihon okokushi, (History of Japan Kingdom) (Tokyo, 1965), pp. 61-62.
- 18. Ibid., p. 64.
- 19. Luid Frois, op. cit. p.43.
- 20. Tsukamoto Manabu *Shorui o meguru seiji* (*Politics on creatures*), (Tokyo, 1993), p.258.
- 21. Luid Frois, op. cit. p.19.
- 22. or self.
- 23. Manase Gensaku Enjusatsuyo, (Tokyo, 1978), p.4.