

[Japan Society-New York: Documents Project. (1800-1890, Intellectual Life)]

Document 19: “I would like to read this book.” *Rangaku kotohajime* (The beginnings of Western learning), Sugita Genpaku, 1815.

I. It is really surprising that “Dutch learning” has gained such great popularity lately. Far-sighted intellectuals study it with enthusiasm while the ignorant praise it in glowing terms. This pursuit of Dutch learning was casually started by us—very few of us—about fifty years ago. We never expected that it would come into such a great vogue.

The way Chinese learning was begun and promoted was quite different. In old Japan, envoys were sent to Tang China (618-906), and some great Buddhist monks were sent there to pursue their studies under the direct tutelage of Chinese scholars. On coming back, these men were commissioned to educate the Japanese, high and low, in Chinese learning. It was natural, therefore, that the Chinese learning was gradually diffused among the people.

Nothing like this happened with Dutch learning. Yet it has come into such popularity which makes me wonder what made it so. . . .

XIII. In 1771, as I remember, Jun-an visited the hotel where some Dutchmen were staying, and he was shown . . . two illustrated books on the internal structure of the human body; the *Ontleedkundige Tafelen* and Casparus Bartholinus’s *Anatomia Nova*. . . .

Not a word in them could we read, but the structures of internal organs and the skeletal frames illustrated in them appeared very different from those we had seen in books or had heard of in the past. We concluded that these must have been drawn from the real things. And somehow a strong desire to possess them arose in me. . . .

XV. It was, as I remember, on the night of March 3, 1771, I received a letter from Manbei Tokunō, a retainer of the Town Magistrate of Edo, . . . kindly inviting me to be present at a dissection held by a certain doctor on the following day at Kotsugahara, Senju.

There was a man called Genteki Kosugi, a fellow doctor who once told me the following story. When he was studying medicine under Tōyō Yamawaki of Kyoto, he attended a dissection sponsored by his teacher. Judging from what he saw, he found . . . all the knowledge handed down by ancestors [sic] entirely wrong; they were all empty fabrications. Also, I had heard that the traditional theory of “nine viscera,” later renamed “five viscera and six entrails” was most inaccurate. . . .

Therefore, . . . I was happy to have the opportunity of determining for myself which was true to fact, the traditional or the Dutch. I was rejoiced beyond description, and was restlessly looking forward to the appointed time. . . .

XVII. All of us together arrived at the designated place in Kotsugahara. The executed body to be dissected was of a female criminal about 50 years old who, born in Kyoto, had earned herself the nickname of “Aochababa (Green Tea Hag).” She had committed a heinous crime, we were told.

Toramatsu, an Eta and a skillful dissector, was expected to perform the task, but he failed to appear on account of a sudden illness. His 90 year old grandfather, a sturdy-looking man, took his place. He said that he had performed a number of dissections ever since his youth. In dissecting the human body, the custom till then was to leave everything to such outcast people. They would cut open the body and point out such organs as the lungs, the liver and the kidneys and the observing doctors simply watched them and came away. All they could say then was:

“We actually viewed the inwards of a human body.” With no sign tag attached to each organ, all they could do was to listen to the dissector’s words and nod.

On this occasion too, the old man went on explaining various organs such as the heart, the liver, the gall-bladder and the stomach. Further, he pointed to some other things and said; “I don’t know what they are, but they have always been there in all the bodies which I have so far dissected.” Checking them later with the Dutch charts, we were able to identify them to be the main arteries and veins and suprarenal glands. The old man also said: “In my past experience of dissection, the doctors present never showed puzzle or asked questions specifically about one thing or another.”

Comparing the things we saw with the pictures in the Dutch book Ryōtake and I had with us, we were amazed at their perfect agreement. There was [sic] no such divisions either as the six lobes and two auricles of the lungs or the three left lobes and four right lobes of the liver mentioned in old medical books. Also, the positions and the forms of the intestines and the stomach were very different from the traditional descriptions. . . .

After the dissection was over, we were tempted to examine the forms of the bones too, and picked up some of the sun bleached bones scattered around the ground. We found that they were nothing like those described in the old books, but were exactly as represented in the Dutch book. We were completely amazed.

XVIII. On our way home, three of us . . . talked of what a startling revelation we had seen that day. We felt ashamed of ourselves for having come this far in our lives without being aware of our ignorance. . . .



Thus we talked and sighed. . . . I broke the spell saying, “Even this one volume of *Ontleedkundige Tafelen*—suppose we translate it. . . . I would like, by some way or another, [to] read this book without the aid of a Nagasaki interpreter.”

Source: Genpaku Sugita, *Dawn of Western Science in Japan (Rangaku kotohajime)*. Ryōzō Matsumoto, trans. Tokyo: Hokuseido Press, 1969, 1-2, 24, 26-27, 29-32.

Context.

Sugita’s dissection discovery marked an early milestone in Japan’s movement from traditionalism to modernity. For centuries, Chinese approaches to medicine—indeed, to most fields of knowledge—had been orthodox in Japan, meaning that ideas about the human organs were rooted in theories rather than in observation, since the Chinese did not cut bodies. When Sugita, intrigued by the sketches he had found in a prominent Dutch anatomy book, was given the opportunity to watch a dissection, he jumped at it. And when he and fellow physicians found the Dutch book’s illustrations correct, they decided to translate the work, even though they did not know Dutch. In that audacious decision lay one of the key beginnings of early modern Japan’s study of Western things, a study that would prepare the way for changes in all areas of national life during the 19th century.



Questions.

1. What attitudes about the human body are revealed by the Chinese theories and the Japanese doctors' ignorance of internal organs?
2. What does Sugita's account suggest about the importance of international exchange in the development of human knowledge? Does it have anything to say about how Americans should regard knowledge in other parts of the world?

Terms.

Dutch Learning. The name given to all study of European and American knowledge in the 18th and early 19th centuries. Such knowledge was considered "Dutch" because Dutch traders at Nagasaki were the sole Westerners allowed to reside in Japan under the Tokugawa government's strict seclusion policies.

Jun-an and Ryōtaku. Nakagawa Jun'an and Maeno Ryōtaku, fellow physicians, joined Sugita in translating *Ontleedkundige Tafelen* and propagating Dutch Learning.

Viscera, entrails, lobes. All of these refer to various Chinese descriptions of the body's internal structure, descriptions based on observation of outward symptoms and medical theory rather than on concrete study of the organs themselves.

Eta. The *eta* class were untouchables in premodern Japan, people who engaged in "unclean" work such as butchering, leatherwork, and burials—i.e., anything connected with blood. They were segregated and widely discriminated against.

Tōyō Yamawaki. Even more of a pioneer physician than Sugita (though less famous), he had had Japan's first officially sanctioned dissection performed in 1754, 17 years before the episode described here.