

May 10, 2021

Dear Stanley M. Kaplan Essay Award Organizers,

Please find attached my essay, "Marketing Medicine for the Mind: Mental Hygiene, Neurasthenia, and Patent Drugs in Mid-1930s Shanghai," for submission to the Stanley M. Kaplan Medical Student Essay Award Contest.

I am a fourth-year medical student at Sidney Kimmel Medical College at Thomas Jefferson University, with plans to pursue residency training in psychiatry after medical school. My essay submission, which focuses on the history of psychiatry, offers a more comprehensive look at a topic that I first explored in two shorter, first-author essays. I published those two first-author essays in a journal within the past twelve months.

Thank you so much for considering my contest submission.

Sincerely,

Richard Zhang

**Marketing Medicine for the Mind: Mental Hygiene, Neurasthenia,  
and Patent Drugs in Mid-1930s Shanghai**

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## Introduction

Shanghai, 1935: Positioned at the mouth of the Yangzi River, this sprawling, bustling seaport was the fifth-largest city in the world.<sup>1</sup> Shanghai was a multiplicity of cities: China's most lucrative commercial hub for business elites and merchants; a lavish, cosmopolitan adopted home for expatriates from at least forty-eight different nationalities; and a chaotic concrete jungle for prostitutes, gangsters, and slum-dwellers in districts such as Zhabei.<sup>2</sup> The city's massive economic growth over the previous two decades of the Republican period had been accompanied not only by population growth, but also by the rapid expansion of mass media and medical services.<sup>3</sup>

These latter two industries were essential to a Shanghai whose business and political elites increasingly sought an image of modernity to the West through portraying their city as sanitary and mentally hygienic.<sup>4</sup> Media and medicine frequently intersected in the form of Shanghainese newspaper advertisements for clinics like those operated by Dr. Liang Junqing or Dr. Zhu Shaoyun, and for patent drugs like Huang Chujiu's Humane Elixir.<sup>5,6,7</sup> Furthermore, psychiatry, described by American psychiatrist Richard Lyman as the "[biomedical] specialty last to be recognized in China," saw its own proliferation of local advertisements for medications

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<sup>1</sup> Peter Harmsen. *Shanghai 1937: Stalingrad on the Yangtze*. Vol. 1. (Havertown, PA: Casemate Publishers & Book Distributors, 2015), 17.

<sup>2</sup> Ibid.

<sup>3</sup> Sei Jeong Chin. "Print Capitalism, War, and the Remaking of the Mass Media in 1930s China." *Modern China* 40, no. 4 (August 8, 2013): 393–425.

<sup>4</sup> Ruth Rogaski. "Weisheng and the Desire for Modernity." In *Hygienic Modernity: Meanings of Health and Disease in Treaty-Port China*, 1:225–53. Berkeley, CA: University of California Press, 2004.

<sup>5</sup> "梁俊青醫學博士診所." *Shen Bao*. January 1, 1934.

<sup>6</sup> "朱少雲醫生診所." *Shen Bao*. January 7, 1937.

<sup>7</sup> Sherman Cochran. "Marketing Medicine and Advertising Dreams in China, 1900-1950." In *Becoming Chinese: Passages to Modernity and Beyond*, 1st ed., 62–92. University of California Press, 2000.

and, eventually, for mental hospitals.<sup>8</sup> These mental health-relevant advertisements emerged in the twilight before the Second Sino-Japanese War, which disrupted the modernization of China's health care infrastructure.<sup>9</sup>

The mental health infrastructure of pre-war Republican Shanghai offers a rich case study in the global history of psychiatry. This is beneficial, given how essential it is for psychiatrists to recognize that their field has always been inextricable from social phenomena, whether culture, commerce, or coercion. The global history of psychiatry can help today's psychiatrists better understand that psychiatric concepts and technologies are not seamlessly translated across cultures, nor do they exert the same political impacts in different countries. In the case of Republican China, mental hospitals and clinics, apart from their benefits for patients and Chinese biomedicine, helped contribute to a more modern external image of China. This was important, especially given that Qing China's earlier international image of backwardness in public health—such as during the early stages of the 1911 Manchurian plague—had led to threats of “humanitarian” territorial occupation from powers like Japan and Russia.<sup>10</sup> To many Chinese, modern public health and medical technologies seemed integral to national survival.

This paper examines three advertisements with relevance to mental health and medicine in Shanghainese newspapers between 1935 and 1936. In chronological order of appearance, these commercial columns respectively promoted a neuropsychiatric hospital, a popular and locally produced brain tonic, and a similarly popular medication with German origins targeting

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<sup>8</sup> Emily Baum. “Choosing Cures for Mental Ills: Psychiatry and Chinese Medicine in Early Twentieth-Century China.” *Asian Review of World Histories* 6 (2018): 8–32.

<sup>9</sup> Michael Shiyung Liu. “Epidemic Control and Wars in Republican China (1935-1955).” *Extrême-Orient Extrême-Occident* 37 (2014): 111–39.

<sup>10</sup> Sean Hsiang-Lin Lei. “Sovereignty and the Microscope: The Containment of the Manchurian Plague, 1910-1911.” In *Neither Donkey nor Horse: Medicine in the Struggle over China's Modernity*, 1st ed., 1:21–44. The University of Chicago Press, 2014.

both brain and bodily health. It is worth noting, within the analysis of these advertisements, that “translation” does not merely refer to the re-expression of words from one language to another, but rather to the complex, friction-ridden series of negotiations and exchanges that inherently accompany one culture’s adoption of another culture’s—ultimately modified—ideas. These advertisements serve as points of reference to illuminate how Chinese elites of the mid-1930s selectively translated, incorporated, and hybridized mental health-relevant Western ideas and pharmaceuticals to contribute to an external image of Chinese modernity and thus liberation from Western framings of China as backwards.

I. “Opening of the Shanghai Puci Sanatorium for Nervous Diseases,” *Shen Bao*, September 20, 1935

This lengthy advertisement in one of Republican China’s most popular newspapers celebrated the recent opening of the Shanghai Puci Sanatorium (上海普滋療養院), which was to be later known in Western histories as The Mercy Hospital for Nervous Diseases (Figure 1).<sup>11</sup> The column described the Puci Sanatorium, headed by director Lu Bohong and vice-director Lu Yingeng, as treating both psychiatric and neurologic patients. The advertisement noted that the number of

Fig. 1: Written top-to-bottom and right-to-left, this lengthy September 1935 advertisement from the Shanghainese newspaper *Shen Bao* touted the newly opened Shanghai Puci Sanatorium for psychiatric and neurologic diseases, and welcomed appointments in advance for potential patient admissions.



<sup>11</sup> “上海普滋療養院專治精神神經病開診啟事.” *Shen Bao*. September 20, 1935.

Chinese afflicted with such conditions was rising, and that Shanghai had had very few institutions to care for such people prior to the sanatorium's opening. It lauded the sanatorium's restful environment for those trying to rehabilitate, which included gardens with a wide variety of flowers and trees. High-quality modern utilities such as telephones and electricity were available, and both Chinese and Western cooks prepared food for the sanatorium's residents. Patients could be admitted either as walk-ins or through appointments, and family members could visit and stay on site in designated lodgings there.

The advertisement also portrayed therapies and health care personnel at the sanatorium as modern and international.<sup>12</sup> For a variety of conditions such as neurasthenia (神經衰弱), which was associated with insomnia and fatigue due to mental overexertion, the commercial article lauded treatments at the institution as including the "latest medications" and as targeting the root causes of patients' symptoms. Referring to the partly religious inspiration behind the sanatorium, the advertisement further noted that both Roman Catholic monks and nuns from France, Germany, and the United States were included among the caregivers. It also mentioned a "Dr. F.G. Halpern" as director of the institution's medical affairs.

The Puci Sanatorium was remarkable for epitomizing Shanghai's international diversity and the selective, yet collaborative, elite incorporation of biomedical ideas during the Republican period. As noted by historian Wen-Ji Wang, the two most crucial figures behind the institution's founding and shaping, who had dramatically different but complementary backgrounds, made the mental hospital's existence possible through uniting diverse interests and strengths.<sup>13</sup> Prolific Chinese businessman, local philanthropist, and staunch Roman Catholic Lu Bohong

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<sup>12</sup> Ibid.

<sup>13</sup> Wen-Ji Wang. "An International Teamwork: Mental Hygiene in Shanghai During The 1930s and 1940s." *History of Psychology* 22, no. 4 (2019): 289–308.

(alternatively transliterated as Lo Pa-Hong) collaborated with local government in Shanghai to fund a psychiatric institution that would be medically charitable, beneficial for public security, and partly evangelical in mission.<sup>14</sup> The Austrian Jewish, woman neuropsychiatrist Fanny G. Halpern, who had previously worked in Vienna alongside Nobel laureate psychiatrist Julius Wagner-Jauregg, and who worked in China by invitation of the National Shanghai Medical College's president, envisioned a vast "mental hygiene" network of mental hospitals, psychotherapy clinics, and special schools that would "correct social maladjustments" early on and treat "members of all nations and of all classes of society" suffering from psychiatric conditions.<sup>15</sup> As the learned neuropsychiatrist collaborated with the elite businessman, Dr. Halpern helped to convince the wealthy Lu Bohong to fund the creation of not another asylum solely for the severely mentally ill—like the already-existing Shanghai Insane Asylum—but rather a mental hospital that in theory could offer preventative and longitudinal psychiatry services as well as treat those with advanced mental health conditions.<sup>16</sup> Through collaborating with Dr. Halpern and Euro-American caregivers, Shanghainese elites like Lu Bohong worked towards realizing Shanghai's establishment of a biomedically modern, mental hygiene institution.

Mental hygiene (*xinli weisheng*: 心理衛生) was an originally Western concept that had just begun to be selectively translated into Chinese implementation by elites in the mid-1930s.<sup>17</sup> Elite interest in this modern-appearing concept was not unlike Chinese interest in public

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<sup>14</sup> Denise Austin. "Kingdom-Minded" People: Christian Identity and the Contributions of Chinese Business Christians. Vol. 1. (Leiden: Brill, 2011), 181-182.

<sup>15</sup> Wang. "An International Teamwork." 289-308.

<sup>16</sup> "上海瘋人院." *Shen Bao*. April 17, 1934.

<sup>17</sup> Emily Baum. "Healthy Minds, Compliant Citizens: The Politics of 'Mental Hygiene' in Republican China, 1928–1937." *Twentieth-Century China* 42, no. 3 (2017): 215–33.

sanitation, which had in large part arisen from decades of Europeans' condescending justification of military intervention in Qing China due to its perceived lack of sanitation hygiene and thus backwardness.<sup>18</sup> Mental hygiene as a concept had originated in the United States in the early 1900s, and promoted early, preventative, and systematic measures among Euro-Americans against risk factors for mental health conditions.<sup>19</sup> In the West it embodied two social impulses: humanitarian concern over the wellbeing of people with mental health conditions, and an authoritarian desire for public order and control.<sup>20</sup> Similarly, in Republican China, mental hygiene was supported by physicians and caregivers largely out of interest in humane treatment of the mentally ill, and by educators and social scientists as a means of advancing Chinese self-strengthening, political unity, and nationhood as a whole.<sup>21</sup> At a time when much of the burden of long-term care for China's mentally ill fell on family members, and when very few formal institutions—such as the Shanghai Insane Asylum and St. Joseph's Hospice—existed in Shanghai for treating the severely mentally ill, the Puci Sanatorium's founding represented an early landmark event for the city towards selectively incorporating mental hygiene and biomedical psychiatric treatments.<sup>22</sup>

Yet, the integration of mental hygiene into Republican Shanghai was not an uncontested, unmodified, unilateral, cross-cultural transfer of biomedical knowledge. This is illustrated by the fact that Dr. Halpern's vision of a mental hospital system relied on intersecting with powerful Chinese social reform and evangelical interests in order to be realized. It was also evident in the

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<sup>18</sup> Ruth Rogaski. "Health and Disease in Heaven's Ford." In *Hygienic Modernity: Meanings of Health and Disease in Treaty-Port China*, 1:48–75. Berkeley, CA: University of California Press, 2004.

<sup>19</sup> Thomas W. Salmon. "Mental Hygiene." In *Preventive Medicine and Hygiene*, 331–61. New York: D. Appleton and Co., 1916.

<sup>20</sup> Baum. "Healthy Minds, Compliant Citizens." 215-53.

<sup>21</sup> *Ibid.*

<sup>22</sup> Wang. "An International Teamwork." 289-308.



fact that later Shanghainese, mental hygiene-promoting “child guidance clinics”—inspired by Western childhood mental hygiene that encouraged cultivation of healthy minds among delinquent children—would target poorly behaving street and refugee children in particular, given that refugees and immigrants were popularly associated with criminal behavior in the city.<sup>23</sup> Furthermore, not all forms of psychiatric and psychological knowledge practiced by members of the Shanghai Mental Hygiene Association were well received by Chinese subjects; for instance, medical missionary Charles Hart Westbrook’s form of experimental psychology appealed to more subjects than did Dr. Halpern’s highly abstract Adlerian approach.<sup>24</sup> Biomedical knowledge filtered through selective Chinese interests in psychology and practical concerns, making its translation heavily locally contingent.

The Puci Sanatorium met many, though not all, of its aims in its several years of existence prior to the Second Sino-Japanese War, when it was damaged by Japanese bombs and afterwards transferred to foreign administration.<sup>25</sup> Due to surrounding political turmoil during the mid-1930s and shortage of outpatient care infrastructure, the hospital did not wholly fulfill Dr. Halpern’s vision of preventative psychiatry, and a greater-than-hoped-for proportion of patients were locals with severe mental illness brought in by police.<sup>26</sup> Yet, from its beginning, it treated a demographically diverse patient population, which included local Chinese as well as many Russian refugees and other Westerners. It offered to Shanghainese mental hygiene a sizeable patient capacity of many hundreds of beds. Furthermore, the sanatorium eventually offered four different classes of ward to patients based on severity of their conditions and social class. The sizeable capacity, specialized treatments, and international diversity of the sanatorium’s patients,

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<sup>23</sup> Ibid.

<sup>24</sup> Ibid.

<sup>25</sup> Austin. “*Kingdom-Minded*” *People*. 181-82.

<sup>26</sup> Wang. “An International Teamwork.” 289-308.

staff, and inspirations aligned with local elites' desire for a biomedical and globalist modernity in a truly cosmopolitan Shanghai.

## II. “Ailuo Brain Tonic,” *Tie Bao*, March 9, 1936

Throughout March 1936, this advertisement for the Ailuo Brain Tonic (艾羅補腦汁) was published multiple times in the Shanghainese newspaper *Tie Bao* (Figure 2).<sup>27</sup> This was far from the first time that the popular patent drug had been advertised in a newspaper, as it had been referenced in thousands of Chinese advertisements ever since media outlets like the *Xinwen Bao* and *Shi Bao* had respectively mentioned it as early as October and November of 1904.<sup>28,29</sup> However, this brief column now connected the popular tonic with another popular diagnosis, neurasthenia (神經衰弱), that was associated with deficiencies in sleep, energy, and mood. It lauded the Ailuo Brain Tonic as the “Number One Nerve Tonic” and as a “miracle drug” (特效藥) for neurasthenia. At the bottom, the column listed the vendor as “The Shanghai Sino-French Drugstore” (上海中法藥房).

The Ailuo Brain Tonic was a Chinese pharmaceutical marketed to Chinese who might be interested in Western-influenced solutions to poor health. It was owned and marketed by entrepreneur Huang Chujiu, who had trained in

Fig. 2: This March 1936 column in the Shanghainese newspaper *Tie Bao* advertised the Ailuo Brain Tonic as the “Number One Nerve Tonic” and as a “miracle drug” for neurasthenia.



<sup>27</sup> “艾羅補腦汁.” *Tie Bao*. March 9, 1936.

<sup>28</sup> “艾羅補腦汁功用錄.” *Xinwen Bao*. October 30, 1904.

<sup>29</sup> “艾罗补脑汁请看真正实验之保证书.” *Shi Bao*. November 10, 1904.

Chinese medicine but lacked biomedical training, and had his product created entirely out of Chinese medicine ingredients as formulated by pharmacist Wu Kunrong. Huang had explained his product in earlier advertisements in terms of Chinese medical theory and logic relatable to his consumers, and framed his product through classical notions of *yin* orbs and *yang* orbs.<sup>30</sup> Yet, he had claimed to have discovered an efficacious synthesis in the tonic between such *yin* orbs and Western medical theory, and also advertised the tonic under the clearly Western-sounding pseudonym of Dr. T.C. Yale—for which he would be sued in 1907 by, and win in court against a local Portuguese physician with the surname of Yale.<sup>31</sup> Huang had also given his business the explicitly cosmopolitan-sounding name of “Sino-French Drugstore,” as seen in this advertisement. This was possible thanks to the business’ headquarters’ location in the Shanghai French Concession, which existed because of the semi-colonial nature of Shanghai dating back to Qing loss of the First Opium War in the 1840s. Hence, though not biomedical in literal formulation, the hybridized Ailuo Brain Tonic carried powerful connotations of Western medical modernity that appealed to many Chinese elites.

By proclaiming the tonic as efficacious for neurasthenia, the *Tie Bao* advertisement tied the drug to treating what had been a Western-originated diagnosis. Neurasthenia had been popularized in the West in 1869 by the American neurologist George Beard, and had possible symptoms including “dyspepsia, headaches, paralysis, insomnia, anesthesia, neuralgia,” and “mental depression, with general timidity.”<sup>32,33</sup> It had been tied to the purportedly mentally developed upper classes, who were seen as prone to “nervous exhaustion” especially given the

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<sup>30</sup> Cochran. “Marketing Medicine and Advertising Dreams in China, 1900-1950.” 62-92.

<sup>31</sup> *Ibid.*

<sup>32</sup> George Beard. “Neurasthenia, or Nervous Exhaustion.” *The Boston Medical and Surgical Journal* 80 (April 29, 1869): 217–21.

<sup>33</sup> George Beard. “Other Symptoms of Neurasthenia (Nervous Exhaustion).” *The Journal of Nervous and Mental Disease* 6, no. 2 (April 1879): 246–261.

psychic demands of capitalism placed on them.<sup>34</sup> Later regarded by biomedical physicians as vague diagnostically and vague in its explanation based on nervous weakness, neurasthenia had died out as a classification in the West by the 1920s, as expanding inquiry into endocrinology and psychotherapy offered new, powerful explanations and remedies for such symptoms.<sup>35</sup>

Yet, since the 1910s, neurasthenia had taken on new significance in China as a disease of upper-class modernity. Chinese elites during and well after the 1930s associated neurasthenia with many of the same symptoms of deficient sleep, energy, and mood as the diagnosis had been associated with in the West.<sup>36</sup> These Republican elites actively valued neurasthenia, like in the pre-1920s West, as a condition unique to intellectuals, businessmen, and other people like themselves who worked with their minds instead of their hands.<sup>37</sup> They thus largely excluded lower-class Chinese from being seen as capable of contracting neurasthenia. Chinese elites who accepted a new identity as neurasthenic often actively presented themselves as buyers of pharmaceuticals and thus of modern commodities, which in Shanghai had included numerous drug brands such as Dr. Jiang Shaosong's Pills and Esfar.<sup>38,39</sup> Prominent elites like progressive Chinese intellectual Lu Xun even recorded their bouts with neurasthenia.<sup>40</sup>

As with the translation of mental hygiene in Shanghai, the translation of neurasthenia was profoundly locally contingent. Neurasthenia gained widespread acceptance in large part because its notions of nervous exhaustion aligned with common notions of depletion in Chinese

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<sup>34</sup> Beard. "Neurasthenia, or Nervous Exhaustion." 217-21.

<sup>35</sup> David Schuster. "The Decline of Neurasthenia." In *Neurasthenic Nation: America's Search for Health, Happiness, and Comfort, 1869-1920*, 140-58. New Brunswick, NJ: Rutgers University Press, 2011.

<sup>36</sup> Hugh Shapiro. (2000, June). *Neurasthenia and the assimilation of nerves into China*. Paper presented at the Symposium on the History of Disease, Academia Sinica, Institute of History and Philology, Nankang, Taiwan.

<sup>37</sup> Emily Baum. "The Psychiatric Entrepreneur, 1920s-1930s." In *The Invention of Madness: State, Society, and the Insane in Modern China*, 86-110. Chicago: University of Chicago Press, 2018.

<sup>38</sup> 保康藥。"蔣紹宋醫師處方監製遺精丸。" *Xinwen Bao*. June 10, 1931.

<sup>39</sup> "爱斯法。" *Xinwen Bao*. October 30, 1933.

<sup>40</sup> Baum. "The Psychiatric Entrepreneur, 1920s-1930s." 86-110.

medicine.<sup>41</sup> Chinese medicine had long explained illnesses as broadly related to imbalances or disruptions in bodily circulation of the vital energy-force, *qi* (氣). In turn, neurasthenia was literally re-interpreted by many Chinese as resulting from pathologic *qi* depletion in the body. This was evidenced by health-related columns in Republican newspapers mentioning “neurasthenic *qi* deficiency” (神經衰弱氣虛) and the fact that some Chinese medicine practitioners who relied on *qi*-based explanations of illness as well as biomedical practitioners treated neurasthenia during this period.<sup>42,43,44,45</sup> Thus, similar to the Chinese-made but Western-appearing Ailuo Brain Tonic, neurasthenia was a hybridized concept in Republican China. The intersection of the tonic with neurasthenia in the Shanghainese *Tie Bao* advertisement broadly illuminates how Chinese elites valued an outward image of Western scientific modernity, but had substantial agency in selectively incorporating concepts and framings of disease from the West.

The Ailuo Brain Tonic offered a fascinating contrast to the Puci Sanatorium. The former drug was entirely Chinese in formulation, and had a creator who aspired to make his product appear Western. The latter institution incorporated originally Western notions of mental hygiene in its design and mission, but served a patient base that was predominantly, though not entirely, Chinese. The Ailuo Brain Tonic had a primary purpose of providing its entrepreneur creator with profit, while the Puci Sanatorium had intersecting missions of strengthening Shanghainese health and public order, becoming a model for Chinese mental hygiene, and aiding the image of

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<sup>41</sup> Laurence Monnais. “Colonised and Neurasthenic: From the Appropriation of a Word to the Reality of a Malaise de Civilisation in Urban French Vietnam.” *Health and History* 14, no. 1 (2012): 121–42.

<sup>42</sup> “腎虛身弱.” *Shen Bao*. November 19, 1915.

<sup>43</sup> “天下馳名第一靈藥維育麟名貴實驗.” *Shen Bao*. June 13, 1933.

<sup>44</sup> “壽爾康.” *Shen Bao*. December 8, 1933.

<sup>45</sup> Wen-Ji Wang. “Neurasthenia and the Rise of Psy Disciplines in Republican China.” *East Asian Science, Technology and Society* 10, no. 2 (2016): 141–60.

Christianity in China. Both the patent tonic and the sanatorium, however, contributed towards an image of a mentally healthy and modern Republican Shanghai.

III. “For Greater Strength and Health, Take Sanatogen Now,” *Shen Bao*, October 25, 1936

Like the earlier article that extolled the opening of the Puci Sanatorium, this advertisement for the patent drug Sanatogen was published in the Shanghainese *Shen Bao* (Figure 3).<sup>46</sup> The advertisement itself was an intriguing translation of a foreign pharmaceutical, a shrewd adaptation to elite Chinese interests, and a small window into how Chinese elites envisioned a culturally hybridized modernity in the household. In the first place, the commercial article transliterated Sanatogen into “*sanna tujin*” (散拿吐瑾), preserving the Western sound of the name for a consumer base interested in Western pharmaceutical products. The image in the advertisement contained what appeared to be a model family, with cheerful parents wearing Chinese clothes—and the mother donning a



Fig. 3: This October 1936 advertisement in the *Shen Bao* lauded the benefits of the German-made medicine Sanatogen for families and people of all ages.

<sup>46</sup> “如欲新精力與新健康請即服。” *Shen Bao*. October 25, 1936.

fashionable *qipao* dress—while their similarly cheerful children played with toy models of Western-originated, modern technologies: an automobile, an airplane, and a train. Furthermore, the drug was identified beneath the promotional text as owned and produced by a Chinese branch of a German pharmaceutical company.<sup>47,48</sup>

Lavishly praising its product's efficacy for both mind and body, this advertisement touted Sanatogen as being “popular all over the world for thirty years [by then],” and a product that could improve an entire family's strength and happiness. It noted that the medicine contained a phosphate-containing compound that was neuroprotective, as well as proteins that could boost blood cell production. This combination purportedly made it effective for helping consumers recover faster from anemia, neurasthenia, and symptoms of poor appetite, fatigue, and amnesia. Beyond its nerve benefits, the advertisement further boasted that in children, Sanatogen could boost bone growth; in the elderly, it could restore youthfulness. Claiming that over 25,000 physicians worldwide had endorsed Sanatogen, the advertisement assured the reader about the drug's efficacy.

Interestingly, while lauding the brain-healthy effects of the drug, the promotional article exclaimed, “Everyone knows the brain controls the body.” Decades earlier, the notion that the brain dominated mental functions and physical activity had not necessarily been dominant among Chinese. Classical Chinese medicine, unlike biomedicine, did not regard the brain as a central, pivotal organ. The brain had been seen largely as a reservoir of bone marrow.<sup>49</sup> Emotions and mental functions had been associated with several organs, especially with the heart, but not

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<sup>47</sup> Ibid.

<sup>48</sup> Pei-yin Lin, and Weipin Tsai. *Print, Profit, and Perception: Ideas, Information and Knowledge in Chinese Societies, 1895-1949*. Vol. 1. (Leiden: Brill, 2014), 131.

<sup>49</sup> Nai-Shin Chu. “Chapter 46: Neurology and Traditional Chinese Medicine.” In *Handbook of Clinical Neurology*, edited by Michael J. Aminoff, François Boller, and Dick F. Swaab, 95:755–67. History of Neurology. Elsevier, 2009.

with the brain.<sup>50</sup> Only since the mid-1800s had some Chinese physicians such as the cadaver-dissecting Wang Qingren (1768—1831) and medical missionaries like Benjamin Hobson (1816—1873) and Peter Parker (1804—1888) began to noticeably impact popular Chinese discourse over the brain by emphasizing the organ’s role as the seat of the body.<sup>51,52</sup> During the early twentieth century, Chinese students who studied abroad in Japan had brought back translations of scientific knowledge originating in the West, further contributing to notions of the brain as pivotal to the body.<sup>53</sup> Thus, it was only within the few decades preceding the *Shen Bao*’s advertisement of Sanatogen that the brain had gained acceptance among most Chinese as controlling the mind and bodily movements.

Clearly, in contrast to earlier advertisements for the Ailuo Brain Tonic that expounded on its benefits in classical Chinese medical terms, the Sanatogen article avoided any references to *yin* or *yang* orbs, and more explicitly extolled the brain’s central role in the body. Both drugs appealed to elite Chinese tastes for outwardly Western products, but through their different framings of drug mechanism were representative of the pluralism of medical epistemologies that existed in China at the time. As explained by historian Sean Hsiang-Lin Lei, Chinese medicine as a movement survived the Republican period through a complex combination of political maneuvering and self-advocacy, as well as reconciling itself with parts of biomedicine, such as germ theory and laboratory research techniques.<sup>54</sup> As biomedicine and Chinese medicine

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<sup>50</sup> Kaoru Sakatani. “Concept of Mind and Brain in Traditional Chinese Medicine.” *Data Science Journal* 6 (April 7, 2007): S220–24.

<sup>51</sup> David B. Baker. *The Oxford Handbook of the History of Psychology: Global Perspectives*. Vol. 1. (Oxford: Oxford University Press, 2012), 91.

<sup>52</sup> Zhao Hongjun. “Chinese Versus Western Medicine: A History of Their Relations in the Twentieth Century.” *Chinese Science* 10 (1991): 21–37.

<sup>53</sup> Lydia H. Liu. *Translingual Practice: Literature, National Culture, and Translated Modernity—China, 1900–1937*. Vol. 1. (Stanford: Stanford University Press, 1995), 302–342.

<sup>54</sup> Sean Hsiang-Lin Lei. *Neither Donkey nor Horse: Medicine in the Struggle Over China’s Modernity*. Vol. 1. Chicago: The University of Chicago Press, 2014.



coexisted in Republican China, albeit uneasily, many Chinese still subscribed to at least some classical Chinese medical concepts such as *qi*.<sup>55</sup> Chinese medico-scientific modernity not only hybridized Chinese and Western ideas and interests, but also maintained a society-wide plurality of ways of conceptualizing mental health and medicine.

Sanatogen also offered a rich comparison with the Puci Sanatorium. While the sanatorium had more intersecting missions behind it than did the mainly profit-inspired Sanatogen, both involved originally Western medical technologies being translated carefully into local Chinese contexts. The religious overtones of the Roman Catholic-led Puci Sanatorium also aligned with the model family values espoused by the Sanatogen advertisement. Both were agreeable with the socially conservative, virtuous living called for by the contemporaneous and nationwide New Life Movement sponsored by Chiang Kai-shek's Nationalist government.<sup>56</sup> Furthermore, as both Sanatogen and the sanatorium were advertised in the *Shen Bao*—whose masthead and high quality of reporting indicated that the newspaper aspired to be more national than a “local hometown paper”—they carried lengthy advertisements and had been respectively deemed as a model pharmaceutical and model mental hygiene institution for China as a whole.<sup>57</sup>

## Conclusion

The three newspaper advertisements described show that many literate and educated Shanghainese of the mid-1930s valued mental health-relevant ideas and materials, whether mental hygiene or the neurasthenia-treating Sanatogen, as tools for advancing an image of

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<sup>55</sup> Angela Ki Che Leung, and Izumi Nakayama. *Gender, Health, and History in Modern East Asia*. Vol. 1. (Hong Kong: Hong Kong University Press, 2017), 172.

<sup>56</sup> Arif Dirlik. “The Ideological Foundations of the New Life Movement: A Study in Counterrevolution.” *The Journal of Asian Studies* 34, no. 4 (1975): 945–80.

<sup>57</sup> Roberta Wue. “The Profits of Philanthropy: Relief Aid, Shenbao, and the Art World in Later Nineteenth-Century Shanghai.” *Late Imperial China* 25, no. 1 (August 26, 2004): 187–211.

Chinese medico-scientific modernity. This desire for modernity coincided with translation, and not a simple transfer, of knowledge. As with cross-cultural translation of scientific knowledge in other parts of the world, the translation of psychiatric and medical knowledge into Republican Shanghai was a creative, selective, and deeply locally contingent process.<sup>58</sup> The Ailuo Brain Tonic could both be a systematically-manufactured patent drug and be explained in terms of *yin* and *yang*. Neurasthenia could simultaneously be a disease associated with insomnia, pains, and depressive symptoms among intellectuals and businessmen, as well as be associated with *qi* deficiency. These unique translations contributed to hybridity—even if outwardly aspiring towards Western technoscience—in the pluralistic medical marketplace of Shanghai and China as a whole.

Key differences can also be seen among the three advertisements. Both Shanghainese mental hygiene and Sanatogen relied on predominantly Western approaches to work—in one case infrastructural, and in the other case biochemical—despite being translated for Chinese subjects, but the Ailuo Brain Tonic was designed by a non-biomedically-trained Chinese entrepreneur who made superficial though well-received references to Western mechanisms and Western-originated diseases like neurasthenia. Furthermore, while both Sanatogen and the Ailuo Brain Tonic both primarily offered profit to their vendors and promises of better health and modernity to their consumers, the Puci Sanatorium had a richly complex range of motivations behind its founding, including improving Shanghai’s image as modern and mentally hygienic, strengthening public security, and enhancing the charitable image of Christianity in the city.

This examination of the three advertisements highlights psychiatry not only as an institution capable of improving individuals’ wellbeing, but also as a powerful social force

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<sup>58</sup> Marwa Elshakry. “Introduction.” In *Reading Darwin in Arabic, 1860-1950*, 1:1–23. Chicago: University of Chicago Press, 2013.

whose influence is nonetheless also bound by political, cultural, and other social forces. With this historical insight, psychiatrists might consider how today's biomedical psychiatry is shaped by and shapes its sociopolitical context. Whether they be outpatient psychotherapists, pharmaceutical manufacturers, or wet lab neuroscientists, myriad agents today directly or indirectly influence the practice of psychiatry on an everyday level. Republican-era Shanghai offers a distinctly non-Western and pre-DSM setting for psychiatrists to reflect on how such influences have historically always been present and connected to their field, albeit in different forms.

Shanghai during the Second Sino-Japanese War would become the site of a fierce battle between August and November 1937.<sup>59</sup> It would change hands among Nationalist Chinese, Imperial Japanese, and Communist Chinese forces between then and 1949, and regain status as an industrial center under the Chinese Communist Party, although for decades not as a cosmopolitan seaport as it had been before. Given the stark brevity of the nascent, Republican Shanghainese mental hygiene system that included the Puci Sanatorium as a facility, and the sheer popularity of brain health-promoting pharmaceuticals in local newspapers, one may wonder how mental health infrastructure and technologies might have developed in a Shanghai that remained war-free beyond 1937. One may wonder as well, given the profound intertwining of Chinese and Western thought that created such phenomena as the Puci Sanatorium and a Chinese-catered *sanna tujin*, the kinds of fascinating, Sino-Western psychiatric collaborations that could have further emerged in such a war-free, modernizing Shanghai.

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<sup>59</sup> Harmsen. *Shanghai 1937: Stalingrad on the Yangtze*. 9-11.