

## A STORY BEHIND A GIFT

### Chinese medical practice in early rural Gippsland

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A GIFT TO the Medical Library Special Collections in 1994, from the descendants of Thomas Chong (1877–1950), links the University of Melbourne School of Medicine to the early history of Chinese Traditional Medicine (TCM) in Victoria. The donation consisted of Thomas Chong's professional library of around 300 medical texts and several hundred paper records, believed to be prescriptions for patients from his Bairnsdale practice dating from the 1920s to 1930s.

Apart from the information they contain, the small, compact bundles, neatly bound together with string, are attractive artefacts. They are recorded by hand in the classical form of Chinese used before the language reforms of the Cultural Revolution.<sup>1</sup>

The characters are inscribed vertically on the sheet in the traditional manner, using black ink and brush on fine cream rice paper, and indicate the care and pride taken by this professional man. The prescriptions have survived their eighty-odd years in fine condition, and would be clearly legible to the translator of classical Chinese.

The collection of books is of great value and includes some of the ancient classic texts of TCM, and handbooks and texts of the late nineteenth and early twentieth centuries. The text books are all printed in Chinese, probably in both the early and modern forms, some with paper covers bound simply in the traditional Chinese manner. A few contain fine woodcuts illustrating the various plants from which herbal preparations were made for specific patient needs, like the early 'herbals' or *materia medica* of western medicine when pharmaceuticals were also prepared individually by hand. There are examples, too, of anatomical texts with illustrations of bones marked with their muscular attachments, familiar to the student of western medicine to this day.

Obviously regarded as well qualified by the standards of his time, Thomas's library reflects his lifelong interest in the study of medicine. The books on western medicine, in particular, indicate that he acquainted himself with aspects of western theory and practice.<sup>2</sup>

Thomas Chong's life is best understood within the context of the then hostile attitude of western practitioners towards TCM and the racial prejudice experienced by the Chinese in general in Australia up to the mid-twentieth century. These were difficulties he dealt with in carrying out his work and raising his family.

Thomas's father, Ong Chong, arrived in Australia from Canton as a youth in 1857 and by the 1870s had become a highly successful shipping merchant in Sydney. With his own fleet of sailing, then steam, ships, docks and warehouses he was involved with the distribution of goods from around the Pacific to Australia, including the shipping of superphosphates from Nauru.



Thomas Chong, aged about twenty-four years.  
Photograph courtesy of Dr Dorothy Lau OAM, daughter of Thomas Chong.

Whilst the NSW *Chinese Restriction Acts 1888* (and earlier legislation in the 1850s and 60s) had prevented Chinese naturalisation, many Chinese did settle in Australia before the White Australia Policy came into effect in 1901. Applications for naturalisation were made by Chinese wanting to make their farm titles legal, or by those whose business interests were limited by their alien status. Ong, as a man of means, who had no doubt contributed to the commercial growth of the city and colony, was amongst the successful and gained his naturalisation certificate in 1876.

Thomas, the youngest of Ong's children, was born and raised in Sydney, until he was sent to China (Canton), at the age of twelve, to be educated and trained in TCM. His training was conducted under the traditional apprenticeship system (not long abandoned by western doctors for university training), where he worked and studied under a master for a number

of years, gaining knowledge of diagnosis and treatment with herbs and other therapeutic products. He graduated from the clinic-dispensary of Huang Jy Shen, at Qi Sha, Zhen Jiang, Guangdong in 1889, not returning to Australia until 1908. During his absence, the White Australia Policy had been enacted and racism, which had surfaced periodically in Australia since the gold rushes, had now become institutionalised. Thomas was subject to its discriminatory powers on re-entering Australia, when he was interrogated and fingerprinted despite being Australian by birth—an indignity he strongly resented. Upon his return to Australia, Thomas commenced practice in Nicholson Street, Melbourne, and married Florence Sam, of Irish-Chinese descent.

Thomas would also have become aware of the uneasy peace that existed between registered doctors and the Chinese 'herbalists' (as they were becoming known). This relationship was evident from time to time in the pages of the *Australian Medical Journal* where prosecutions of Chinese using the title of 'doctor' were urged or reported. Cases of malpractice were recorded there too, and comments made on herbalists' thriving businesses (increasingly expressed in racial terms), which no doubt reinforced the existing prejudice.<sup>3</sup>

Chinese practitioners shared this critical attention with other practitioners—the pharmacists and British herbalists, the unregistered medical practitioners and quacks—who all gave consultations and offered treatment, and who were felt by the medical profession to be in direct competition with themselves. Thomas would have felt the threat of the powerful lobby group of doctors, who in 1905 had seen a bill brought into the Legislative Assembly which, had it been successfully passed, would have prevented anyone but a registered doctor from prescribing or dispensing medicine, or giving medical advice.



Herbal prescriptions recorded by Thomas Chong in the traditional Chinese manner, 1920-30. Courtesy Medical History Museum.

On his return from a later trip to China, Thomas was active in the fight against a further bill (in 1925) to amend the *Pharmaceutical Chemists Act* by limiting the right to dispense medicinal herbs to pharmaceutical chemists. Had herbalists not mounted an intense public campaign, the success of the bill would have put them out of business. Thomas was among forty-six Chinese and European herbalists who proposed their own amendment, supported with a petition signed by 6800 people, to allow some already in practice to continue their business. In the face of such

substantial opposition, this bill too was withdrawn.

However, the herbalists' request, that they be made subject to certain training and practical requirements and registered, was ignored. Had registration of those with professional training been granted, it would have raised the status of and respect for their practice and hastened the reputation of TCM as a complementary medicine rather than its 'alternative' reputation, which lingers to this day.

Thomas appears to have found life in Melbourne unsatisfactory and at intervals made trips into Gippsland before settling in Grant Street, Bairnsdale, where he raised his family and ran his practice. His patient record book (held by the family) for the years 1936-38, examined and translated into western medical terminology and English by Dr Qi Li-yi, yields interesting information about Thomas Chong's practice.<sup>4</sup> In this twenty-eight month period, he treated 1204 patients including men, women and children. (Readers will no doubt be fascinated to learn that, amongst these patients, on 11 March 1938, was a young Bairnsdale boy by the name of Lance Townsend, who later became a professor in Melbourne's medical school).

Thomas Chong's practice covered 10,800 square kilometres, extending from Sale and Maffra in the west, to Mallacoota in the east, and Delagate in the north. As was the Chinese custom (and unlike his western counterparts), he did not make house calls and many of his patients travelled hundreds of kilometres to be treated. For those unable to travel, he provided an extensive mail order service whereby individually prescribed herbs were posted to them. Patients' names were mostly of British origin, with only a few Chinese, reflecting both the cross-cultural acceptance of his practice and the efficacy of the White Australia Policy, and they came from a wide range of socioeconomic backgrounds.

The range of conditions, in order of those most commonly treated in the 1936-38 period, were lower back pain, hepatalgia and headache (around 100 cases each); rheumatic arthrodynia and gastralgia (around forty-five each); irritability, insomnia, enteritis and exanthema (around thirty each); broncho-pneumonia and cough; and pain on urination (around twenty-four cases each). Historian, Morag Loh, points out that some of these conditions were those for which western medicine had a low success rate and others resulted from poor hygiene which greatly improved with raised living standards. In time also, with the advent of the so-called 'wonder drugs' and advances in surgery, some herbal treatments gave way to these more effective solutions, and later, to the growing use of acupuncture as a significant part of TCM practice. Today we find an easier co-existence between the practices of eastern and western medicine, exemplified by patients who visit practitioners of both traditions for different complaints. There are also instances now, of practitioners like Dr Qi, who are registered with qualifications in both spheres of medicine.

Thomas Chong worked seven days a week, averaging twenty-four to thirty consultations a week. Although his income was considerably lower than a local GP of the same period, his workload was less demanding. He did not have the emergency night calls or deliveries to attend, nor the long distances to travel to patients over rough country roads. His children were able to live a modest but comfortable middle-class life, and recall having a 'typical Australian country childhood'.

Thomas Chong's papers reveal the successful and stable practice of a medical man who was far from being a marginal figure in health care in the east Gippsland area.

### Thomas Chong's medical descendants

Thomas Chong's very scholarly life, spent reading and studying when he was not working, provided both example and milieu in which his six children grew up, most of whom pursued careers in medicine or the medical sciences at Melbourne University or the Melbourne College of Pharmacy.

#### Children of Thomas Chong

- Raymond Victor Chong, born 1917, MB BS (Melb) 1941.
- Albert (Bert) Chong, born 1919, graduated Victorian College of Pharmacy, Melbourne c.1943.
- Dorothy Laurel Chong, born 1922, MB BS (Melb) 1948 (following training as a teacher), was awarded an OAM in 1997 for service to the community and medicine in general practice, particularly in caring for the elderly.
- Norman Chong, born 1925, graduated Victorian College of Pharmacy, Melbourne 1942.
- Gilbert Chong, born c.1926, graduated in chemical engineering, RMIT, Melbourne, c.1945.
- Jeffrey Chong, born 1928, graduated BDS (Melb) 1949.

#### Grandchildren of Thomas Chong

- John Gooley, MB BS (Melb) 1980, (son of Dorothy Chong) is now an associate professor and surgeon, practising and lecturing in otolaryngology in Boston, USA.
- Alyson Christine Lau, MB BS (Monash) 1985, (daughter of Dorothy Chong) is a Melbourne general practitioner.
- Alan Chong, MB BS (Melb) 1977, (son of Albert Chong).

As a postscript to this substantial family tree in medicine, two of Thomas's great grandchildren are currently undertaking science courses at the University of Melbourne.

<sup>1</sup> By 1917 it was recognised that China needed a living 'democratic' medium of expression, and the archaic form of Chinese was abandoned in favour of the Peking vernacular dialect as the national language.

<sup>2</sup> When Thomas Chong's children were studying medicine at the University of Melbourne, he always showed an interest in what they were being taught and how they were being trained to use their knowledge in practice. See Morag Loh, 'An Outpost of the Chinese Medical Tradition', *Gippsland Heritage Journal*, 1995, 18:6.

<sup>3</sup> See for example *AMJ* October 1874.

<sup>4</sup> For this information and other aspects of this paper I am indebted to Morag Loh, and Dr Qi Li-yi of the Academy of Traditional Chinese Medicine, Beijing, and Hammersmith Hospital, who is qualified in both western medicine and TCM. Morag Loh, is an historian who has researched and published on the experience of the Chinese in Victoria, and on the practice of Thomas Chong in particular (see 'Western and Chinese Medicine', *RHSV Journal* 1985, 56(3):38-46, and 'The Practice of Thomas Chong at Bairnsdale', *Gippsland Heritage Journal* 1995, 18:2-7. Both have had the opportunity not only to examine the library, but also Chong's patient records from Aug. 1936 to Dec. 1938, which remain with the family. I am most grateful for the work of these two scholars, who with family members, have provided much of the material which now enhances the significance of the material held in the medical history collections, to the benefit of future researchers.