“Weilianshi yisheng hongse buwan yu yinghai ziji yaopian zai qi tonglei yaopin zhong zhan zuigao weizhi”
(“Dr. Williams’ Pink Pills and Baby’s Own Tablets are the Best Medical Products Around”), Liangyou, no. 73 (1933): n.p.
On October 7, 1905, the Dr. Williams’ Medicine Company suddenly found itself in a bit of trouble. Having amassed a sizable fortune selling its most popular patent medicine, the pleasantly alliterative but therapeutically questionable “Pink Pills for Pale People,” the company had finally run up against resistance. On that day, the weekly newsmagazine Collier’s released the first of seven investigative reports that aimed to expose the unscrupulousness of the entire patent medicine industry. The first exposé, which uniformly decried all patent medicines as either “harmless frauds or deleterious drugs,” was only a prelude of what was to come. Three months later, Collier’s went so far as to identify Dr. Williams’ Pink Pills by name, denouncing the company as a “swindler” that marketed a worthless product composed solely of “green vitriol, starch, and sugar.”

The reports naturally caused a stir. Less than a year after their publication, the United States government, sensing that food and medicine regulation was becoming a particularly trendy (and therefore electorally important) issue, was persuaded to push through the first of its Pure Food and Drug Acts. Soon thereafter, the American Medical Association also jumped on the whistle-blowing bandwagon with the release of its wildly popular Nostrums and Quackery: a volume which aimed not only to undermine the patent medicine trade, but to delineate in its stead the rightful jurisdiction of the trained medical professional.

Despite the fact that the American media, government, and medical community were all intent on halting the spread of Dr. Williams’ Pink Pills, the product soon proved to be an uncontainable scourge. Rather than receding quietly into the annals of medicines past, Dr. Williams’ instead redoubled its marketing efforts and thumbed its nose at its opposition by lodging a $100,000 libel suit against Collier’s. Most worrisome for patent medicine naysayers, however, was not simply the fact that Dr. Williams’ was unwilling to halt the production of Pink Pills in the United States; rather, what proved most concerning was the fact that the com-

3 Health by the Bottle: The Dr. Williams’ Medicine Company and the Commodification of Well-Being in Liangyou

EMILY BAUM
pany actually sought to *extend* its empire outward, plotting to plop Pink Pills down the throats of the sick and infirm across the farthest reaches of the globe. One of the locales toward which the company had set its sights was the heretofore-untapped market in Qing China. Having noted the alluring absence of patent medicine men in the East, Dr. Williams’ decided to set up shop in Shanghai in 1908.

It was, unarguably, a risky plan. Not only was the company facing legal woes, a crisis of confidence, and a massive managerial shakeup back home, but the new manager of Dr. Williams’ vastly underestimated the challenges he would soon face in the Chinese market: new laws, a new language, and an entirely different understanding of medicine and biological principles. Nevertheless, the Dr. Williams’ Medicine Company remained confident that the product they were promising to sell—cheap, quick, and “modern” health—was a product that the Chinese would scramble to buy.

The gamble proved to be a smart bet. Only a few years after its establishment in Shanghai, Dr. Williams’ was on course to becoming the largest patent medicine manufacturer in the entire East—one which would continue selling Pink Pills until Shanghai went “red” in the early 1950s. Advertisements for Dr. Williams’ products would become a mainstay in popular pictorials such as *Liangyou*, and were nearly as commonplace within the pages of the periodical as pictures of glamorous movie stars and kaleidoscopic montages of Shanghai’s bustling city streets. Given *Liangyou’s* tacit goal to provide a “companion” to readers as they made their way through the tumult of modern life, the consistent appearance of Dr. Williams’ advertisements in the pictorial seemed to signal that patent medicines had become a staple in the lifestyle of the modern man and woman: while being modern required the maintenance of good health, health similarly required the consumption of modern products. The perceived inextricability between a commodifiable wellbeing and a consumer-driven modernity led to the ascendancy of the Dr. Williams’ brand in both China and the West. Against all odds, and in spite of what conventional wisdom would have us believe, the Dr. Williams’ Medicine Company was to become a triumphant beacon of pharmaceutical success on two shores.

Perhaps it is opportune to pause at this moment to reflect on such an unlikely chain of events. While Dr. Williams’ Pink Pills were being exposed as a fraud and a sham by licensed medical professionals in the United States, they would nonetheless go on to become one of the highest selling medicines in both North America and China in the early twentieth century. In fact, Pink Pills would become so engrained in the cultural imaginary of both locales that the brand has continued to be invoked as a sign-of-the-times in fiction and memoirs long after the company ceased to exist. In spite of the fact that the patent drug was largely ineffective against many of the ailments it claimed to cure, Pink Pills somehow managed to finagle itself into both the medicine cabinets and the cultural vocabularies of its Chinese and American public. How, in an age that hailed rationality and science, was such a feat possible? By what process did a small pinkish pill, with little therapeutic power in its own right, garner such success in both the East and the West?

In order to answer these questions, it is first helpful to call attention to the ways in which histories of medicine in the early twentieth century have traditionally been approached in the academic literature. Historians of medicine in China have generally focused their inquiries on an imagined East/West dichotomy: one that sees little common ground between both regions’ experiences with health and healing. While Chinese medical practice is commonly characterized as stagnant or backward, nations like the United States are conversely envisioned as being home to a dynamic and progressive scientific medicine. Ralph Croizier, in his early study of Western medicine in China, characterized the Chinese experience with medicine as a “hoary, unscientific tradition” that “failed” to develop along a similar trajectory as Western modernity. While historians such as Croizier have been successful at revealing the *perceptions* of Chinese intellectuals in regards to two seemingly antithetical medical cultures, these histories may leave the
reader with a false impression as to the actual comparative state of Eastern and Western medicine at the time. Although it is not debatable that Western nations were indeed developing new scientific techniques for diagnosing and treating illness, it was not altogether the case that Western medicine was advancing along a strictly Whiggish trajectory of uncompromised “progress.” To the contrary, the West was also caught in the grip of two competing trends in the medical arena: that of professionalization and scientific expertise, and that of the quack and patent medicine maker.9

The Americans caught at the crossroads of these two competing trends were likely not cognizant of the fact that they were tottering on the brink of what was to become an historical divide between a passé and a relevant medical culture. Rather, their decision to either seek out a medical expert or to opt for the convenience of a patent medicine hinged more on questions of expense and expedience than on matters of ideology. The same could be said for the popular masses in China, as well. While some intellectuals trumpeted the necessity to shake off the yoke of Chinese medical tradition in exchange for modern scientific values, most Chinese consumers likely did not view the debate in terms of two opposed practices, but rather in terms of two mutually coexisting possibilities that could fulfill differing needs in an urbanizing context. This idea becomes evident as one flips through the pages of Liangyou. The East/West medical divide—rendered so urgent in much intellectual writing of the time and magnified in later histories of early twentieth-century China—barely appears as even a minor squabble in the pages of the pictorial. Due, perhaps, to the fact that the editors of Liangyou did not feel pressed to take a stance on the debate between Western and Chinese medicine, an assortment of medical possibilities were able to exist side-by-side throughout the issues of the magazine.

In this chapter, I will argue that the ways in which medical health was depicted in Liangyou reveal broader trends in the sociopolitical climate of early twentieth-century Shanghai: a climate that was not so different from its American counterpart of the same time. Similar to the United States at the turn of the century, “medical science” in China referred simultaneously to an academic method, an ideological orientation, and a commodifiable product. To be “healthy” thus entailed not merely the adoption of healthy habits, but the successful assimilation into a consumerist culture that upheld certain modes of healing as an integral part of the modern lifestyle. Popping patent medicines was one such manifestation of the modern consumerist turn in health. And as we will soon see through the depiction of medicine in Liangyou—in which East and West, tradition and modernity seemed able to logically coexist—the form of healing that consumers desired was less important than its ability to uphold certain ideals of the modern era: accessibility, efficiency, and inexpensiveness.

By tracing the rise and fall of the Dr. Williams’ Medicine Company in China as seen through the pages of Liangyou, this chapter will aim to trace shifting trends in the urban Shanghai milieu and to delineate how those trends affected the growth and decline of a global patent medicine industry. In an era of increasing urbanization and social dislocation, wherein families were cut off from their regular social networks due to migration and new patterns in economic relations; in a time when visiting a hospital was not yet a part of the everyday medical arsenal, yet scheduling a house call was becoming impracticably expensive; in an economic era in which standardization, routinization, and mass production were becoming more and more commonplace; and in a social context in which the demands of a “modern” life were being showcased ubiquitously in the mass media, particularly in pictorials such as Liangyou, patent medicines were not only a reasonable option, but often the only option available to the modernizing consumer.

In the late nineteenth and early twentieth centuries, Shanghai was in the process of undergoing enormous change. Lured by the prospect of employment in China’s burgeoning economic center, migrants poured into the city in the hopes of attaining
capital, comfort, and the chance at a better life. In the half century following the Opium Wars, Shanghai’s population grew by a million people, and that number doubled again between 1910 and 1927 to reach a total population of 2.6 million—about 75 percent of whom were immigrants. Historian Bryna Goodman notes that the sudden influx of migrants disrupted Shanghai’s preexisting social, political, and economic networks. The social composition of the city also underwent a sudden period of diversification as the number of workers, migrants, and semi-employed sojourners skyrocketed. With capital flowing in and the need for labor rising, long-ingrained attitudes toward business and commerce slowly began to shift to fit the new socioeconomic environment.

While anti-mercantile sentiment had (at least rhetorically) been the norm among elites throughout much of China’s Confucian tradition, in the aftermath of the Opium Wars, a middle class began to emerge and take root in China’s economic hub of Shanghai. The growth of new economic relationships was accompanied by a discursive shift in how such relationships were viewed and discussed. As Yeh Wen-hsin points out in her study of Shanghai economic history, *Shanghai Splendor*, the business elite did not simply set up factories and businesses, but also “advanced the prestige and respectability of their pursuits” in order to give their economic activities a new “social legitimacy.” The transformative force of capitalism not only chipped away at Confucian social hierarchies, which had placed merchants and traders on the bottom rung of the social ladder, but also paved the way for new relationships to form among Chinese businessmen, compradors, and Western elites. Economic expertise was no longer solely a matter of gaining wealth, but of gaining respect; to become rich was to embody one social imperative of a capitalist modernity, wherein the wealth of the individual was bound up with the overall prosperity of the nation.

Although modernity was not simply about attaining a materially comfortable life, materiality certainly played a leading role. In periodicals and pictorials like *Liangyou*, the ideal of conspicuous consumption loomed large. Buying became a critical component of being, and the attainment of a modern identity was tied, in many ways, to the products one utilized in the midst of the everyday. Regardless of the all-encompassing nature of the capitalist imperative, one does not typically think of “health” as a product of capitalist culture. Yet in the context of early twentieth-century Shanghai, consumerism happened to intersect with a separate crisis in Chinese confidence: one that manifested itself in the language of science and healing.

In the aftermath of the May Fourth Movement, intellectuals began to confront the notion of Chinese national weakness with an increasing urgency. Although discourses on “national health” had been circulating in the Chinese political sphere since the late nineteenth century, the circumstances surrounding the end of the Great War thrust the issue back into the spotlight. Affirming the metaphor of national health—which became conflated with the perceived reality of Chinese corporal weakness—progressive intellectuals trumpeted the necessity of both physical and psychological self-strengthening if the nation was ever to recover from its position as the “sick man of Asia.” This viewpoint was deployed on the ground through the enactment of local public health campaigns. *Liangyou*, at the forefront of national trends, naturally captured the enthusiasm with which these campaigns were promoted throughout the country. In issues 38 (1929) and 48 (1930), the pictorial highlighted the excitement surrounding a public health parade in Beijing and a “baby health competition” in Nanjing. Featuring photomontages with plump children and their proud mothers, pictures of cheering bystanders, and a larger-than-life float depicting a healthy Chinese man “chasing out” the “sick devil,” *Liangyou* broadcast to its readers that “health” was not simply an individual desire, but a national imperative.

The perceived existence of a national health crisis was only distressing to certain reform-minded Chinese intellectuals, however. The entrepreneurial medicine men at Dr. Williams’, on the other hand, were tickled pink that the Chinese medical plight had opened a new avenue in which to peddle
Indeed, the Dr. Williams’ Medicine Company was one of the first foreign businesses to ride the fever pitch of “national health” to its lucrative crescendo. Having already perfected the art of patent medicine advertising in the United States, it seemed reasonable to assume that a similar outcome could be readily achieved in China.

In the Western world, Americans had long been in the throes of a proprietary medicine frenzy. Wary of the excessive “book learning” of their frequently ineffectual medical practitioners, they had turned to the pills, potions, and poultices that were known collectively to the public as “patent medicines.” Contrary to what its name proclaimed, patent medicines were not generally patented but simply trademarked (to patent would mean to disclose their often addictive ingredients, which frequently included such analgesics as opium, alcohol, and cocaine). Most consumers of these medications were ignorant as to their actual contents, and were instead drawn to the products as a result of how they had been marketed: as cheap, effective, and oftentimes exotic therapies. In fact, it would have been quite surprising for the Chinese of the nineteenth century to learn that “Chinese” nostrums were all the rage in the United States at the time. Dr. Lin’s Celestial Balm of China, Dr. Drake’s Canton Chinese Hair Cream, and Carey’s Chinese Catarrh Cure were but a few of the lotions that were marketed as if they had actually come from the Orient itself. Ironically, while Chinese intellectuals were looking West, the Americans were enchanted by the wonders and potentials of the East: not only for its mysterious ointments and salves, but also for the wide-open market it offered for the entrepreneurial patent medicine man.

The Dr. Williams’ Medicine Company, by deciding to establish a branch office in Shanghai in 1908, could be considered ahead of the curve. At the time of its establishment, only six foreign pharmaceutical companies were extant in Shanghai, and a scant 24 pharmacies sold foreign drugs, most of which were located inside the foreign concession. The limited availability of Western medicines was not due to lack of trying. At the time that Dr. Williams’ began to build its empire in China, there was simply no market for Western pharmaceutical products among much of the Chinese populace. That market had to be created.

Indeed, while intellectuals trumpeted the glories of foreign pharmaceuticals, the Chinese everyman remained obstinately skeptical in his evaluation of these unfamiliar medicines. Instead of having to be dug up in the form of a frost-covered root on the western face of a distant mountain, patent medicines could be easily—almost too easily—plucked from a shelf in a store; rather than being consumed as an offensively unpalatable broth or a drink, they could be swallowed whole in a round, powdery pill that was pleasantly glazed in a sugar coating; and instead of requiring the prescription of a Chinese medicine practitioner, they could be purchased by anyone at anytime for a wide range of disparate ills. The suspicious practicability of Western patent medicines made them seem improbably useless for matters as serious as one’s health. Most problematically for many Chinese minds, however, was the indisputable “fact” that Western medicine was simply incompatible with the Chinese body. Since Chinese medicines were derived from plants that grew in China, many believed that they were necessarily more suitable to the native stomach. Western medicine, in other words, simply would not work on the stomachs, lungs, and livers of the Chinese.

Chinese patients did not only look upon Western medicines with nagging suspicion, but also on the Western medical system as a whole. For native tastes, Western doctors were too “cold and impersonal”; in the words of one editorialist, Western doctors treated people like machines and tended to individual body parts as if they were some sort of alienated cog in a corporal engine. In contrast to Chinese medicine, which treated the person in his entirety, Western medicine only tended to the head for a headache or the ears for an earache. This approach, as any Chinese should know, was patently wrong. It was common knowledge—not just among Chinese doctors but among the general population,
from the farmer in rural Hebei to the comprador in bustling Shanghai—that illness was the product of an imbalance in the body as a whole. As the common saying went, “Only when yin and yang are in balance will the spirit be cured; when they depart from that balance, the spirit will do so as well.”

Western medicine obviously could not be trusted to return the body to its desired state of stasis when it did not even recognize the most fundamental principles governing health and sickness.

It was no surprise, then, that Western-oriented intellectuals were repeatedly frustrated in their attempts to thrust a more “scientific” medicine upon a disinterested public. Sun Yat-sen’s (Sun Zhongshan, 1866–1925) comparison of traditional Chinese medicine to being like “a boat without a compass” fell upon deaf ears; Yan Fu’s (1854–1921) proclamation that Chinese doctors were “wrong nine times out of ten” did little to dissuade the Chinese public from relying on their usual medical networks; and Lu Xun’s (1881–1936) admonition that Chinese medical practitioners were nothing but “intentional or unintentional swindlers” had little to no effect upon the desperately ill.

It was not merely a blanket Chinese “obstinacy” that prevented patients from seeking out Western care. Western-trained doctors were simply not available in most locations, and when they were, they were frankly not very good. Zhang Guanlian, a Christian middle-school student from the town of Fenzhou in Shanxi province, related the fact that all Western doctors in his city had only been “partly trained,” and were therefore largely ineffective. “Moreover,” he wrote, “they are [only] out for the money. Thus the whole class of Western doctors is badly compromised.”

In his small town of Liuhe in Jiangsu province, the quality of medical facilities was seriously jeopardized by poor equipment and negligent doctors. Since patients who went to Western-run hospitals in the region were rarely satisfied with the services they were given, they saw no need to ever return. Even if Chinese doctors could not provide immediate relief for patients’ suffering, they at least knew how to interact with the patient in a way that could put his mind at ease.

In short, the Western patent medicine companies were trying to build a clientele where a clientele did not immediately exist. This was not a simple question of progress versus stagnation, or of science versus irrationality. To gain confidence among the Chinese populace, Western medicine companies would have to speak to them in a language that was both appealing and intelligible: relying on the bombastic rhetoric of the intelligentsia simply would not do. The United States Bureau of Foreign and Domestic Commerce recognized the quandary that proprietary medicine men were facing in their attempts to establish a Chinese market. In a 1917 special consular report, the Shanghai consul general Thomas Sammons acknowledged the difficulty in establishing a patent medicine industry in China,
Yet remained optimistic about future prospects. Noting that the Chinese people lacked “efficient” native remedies and “competent” medical personnel, he declared that, “no country offers a richer field for the proprietary-medicine trade than China.”27 All that medicine men would have to do was advertise judiciously and persistently. After all, as Sammons pointed out, “well-planned advertising creates a demand... With sufficient advertising, anything at all within reason can in time be profitably introduced to the Chinese trade.”28

Nobody knew the merits of advertising better than the late George Fulford, the former owner, manager, and visionary behind the Dr. Williams’ Medicine Company. As Fulford was fond of saying, “Three things are essential [to selling a patent medicine]: first, you must have a good thing; secondly, you must advertise it cleverly; and thirdly, you must have lots of money to back it up with.”29 It is questionable whether Fulford truly believed in the actual “goodness” of Pink Pills. Having acquired the rights to the medicine in 1890 from the Canadian doctor William Frederick Jackson for the humble fee of $53.01, Fulford probably did not have the highest faith in the pure medical efficacy of the tablet. Indeed, given the fact that the leading ingredient in Pink Pills was sugar,30 it is highly doubtful that they functioned as anything more than a placebo in most cases. Nevertheless, Fulford (like any good businessman) treated the pills as if they were the best thing to happen to modern medicine since the validation of germ theory.

Throughout the Western world, Fulford’s approach to marketing Pink Pills involved money—and lots of it. In the last few years of the nineteenth century, he was reportedly paying up to $9,000 per month on advertising just in his native town of Brockville, Ontario, and would often purchase three years of advertising space at a time. He hired bicyclists to deliver pamphlets to rural dwellers, and sent out close to 1000 mailings a day praising the benefits of the product. By the turn of the twentieth century, the British periodical Chemist and Druggist estimated that he was spending over £200,000 per year in the British market, making him the “largest buyer of printers’ ink on earth.”31

Yet, it was not necessarily the quantity of advertising that distinguished the Dr. Williams’ Medicine Company from the vast hordes of patent medicines infiltrating the market. Rather, it was Fulford’s unique advertising tactics that made Pink Pills seem like a surefire bet for any range of illnesses: from dizziness, heart palpitations, acne, depression, scrofula, and rickets, to irregular menstruation, hysteria, memory loss, and even partial paralysis.32 Employing personal testimonies from actual consumers, Dr. Williams’ did not speak to its audience in the impersonal tone of a doctor, but in the friendly and comforting voice of one’s next-door neighbor.

Given the status of the American medical profession at the time, this made more than a little sense. At the turn of the twentieth century, the Western medical world was caught at the crossroads of two competing paths to health. On the one hand, the development of medicines based upon biologically scientific principles had given a healthy dose of legitimacy to the university-educated medical professional. On the other hand, most medical men continued to be viewed by the American public as little more than a bunch of ragtag quacks and get-rich-quick swindlers, with little medical expertise to offer outside of the usual arsenal of bleedings and purgings. Even the president of the American Medical Association bemoaned the fact that his venerated profession appeared “corrupt and degenerate,” open to anyone who wished to make a quick dime in the profitable trade in health.33

Thus, when American ads for Dr. Williams’ Pink Pills employed the trope of dissatisfaction with one’s family doctor, it was against this backdrop of medical malfeasance that the accusation found a largely sympathetic audience. “I had three doctors at different times,” Pink Pills consumer A. H. Brewen evidently wrote to the Dr. Williams’ Medicine Company. “One of them said my trouble was indigestion, the second said it was gastritis, and the third pronounced it cancer of the stomach.
None of them did me any good.” Mrs. Lizzie Wheeler, another grateful consumer of Pink Pills, concurred with Mrs. Brewen’s sentiment. “Doctors? Yes, I was treated by several very skillful ones, but they did not help me. I kept getting worse in spite of their medicine, and was in despair.” The only efficacious cure for these patients’ illnesses was Pink Pills: a “scientific” medicine developed by a certified doctor, but one that simultaneously thumbed its nose at the medical profession. The genius of Fulford’s ads could thus be located in the fact that they somehow managed to distance themselves from the suspicious connotations of the medical profession while not straying dangerously far from its newfound aura of legitimacy.

Somewhat similar to the West, China was also stuck at the intersection of two competing medical paths: the development of “scientific” medicine, and the persistence of traditional modes of care. The tension between these two coexisting modes of medical practice is reflected in Liangyou’s treatment of modern medicine. Even though Liangyou’s emphasis on public health campaigns seemed to underscore the integrality between health and modernity, the pictorial nevertheless remained ambivalent about its support of either Western technologies or traditional practices. For example, in a 1936 issue of the pictorial, Liangyou featured a two-page spread on traditional Chinese medicines that showcased the diversity of indigenous herbs that the skilled Chinese physician could incorporate into his therapeutic arsenal. Yet, juxtaposed next to this spread were two advertisements for modern features of twentieth-century urban life: Kodak film and telephones (fig. 3.2). And throughout the rest of the issue, Western products such as oatmeal, skin creams,
and laxatives proclaimed that the true way to achieve health was through the use and consumption of imported (and therefore “modern”) goods. The juxtaposition of the old with the new showcased the idea that, for the modernizing Shanghaiese, the pursuit of health could involve a hodgepodge of both imported and indigenous practices.

If Liangyou was sending mixed messages, it was only mirroring the mixed sentiments of the Chinese people in regards to their health. As already discussed, many Chinese in the early twentieth century were reluctant to give up their traditional medical networks in exchange for the cold and impersonal treatment they would receive at the hands of Western-trained doctors. However, the fact that some patients were skeptical of new medical practices did not mean that everyone was uniformly blind to the inadequacies of traditional Chinese medicine. In reality, at the same time that certain Chinese patients trumpeted their suspicion of Western techniques, many educated and progressive social critics bemoaned the often ineffectual and increasingly expensive state of traditional medical care.

A 1926 essay competition on “Old Style” versus “Modern” medicine in China underscored the increasing dissatisfaction, particularly among the educated youth, of the Chinese people toward their native system of medical practice. The middle school student Zhang Zongliang castigated traditional Chinese medicine as a “fool’s philosophy” that involved only “charms, incantations, and magic or disgusting concoctions,” and the university student Liu Lang pointed out that if one invited “six Chinese doctors” to diagnose an illness, they would unquestionably give “six different diagnoses” and no worthwhile treatment. Indeed, all the winners of the essay competition—reflecting, perhaps, the bias of the selection committee—found more drawbacks in Chinese medicine than benefits. It was unscientific and metaphysical; it relied only on the experience of its practitioners rather than on set experimental laws; it was prescriptive rather than preventive; and its mysterious nature had garnered the ignorant respect of the Chinese masses when they should have been bowing down at the pedestal of Western medical science.

Even in spite of these seemingly damning statements, the most pressing challenge facing the Chinese medical community was not simply the disputed effectiveness of traditional modes of healing, but rather the fact that Chinese medicine was becoming both increasingly expensive and highly impractical in the urbanizing context of 1920s Shanghai. In the 1927 short story “Fuqin de bing” (“Father’s Illness”), written by the progressive intellectual Lu Xun, the author tackles both of these issues head-on. It is worth noting that Lu Xun had a vested interest in the triumph of Western medicine in China. Having himself trained to become a doctor, he understood the benefits that “scientific” medicine could bring to his country. However, the fact of Lu Xun’s Western leanings does not necessarily undermine his observations on the state of contemporary Chinese medicine. Indeed, the biographical nature of “Father’s Illness” highlights the author’s first-hand frustration with the inadequacies of medical practice in early twentieth-century China.

At the start of “Father’s Illness,” Lu Xun describes the increasingly onerous financial burden of the doctor’s visit. In the past, he writes, a house call from a doctor had only cost about 1.4 yuan; by the first two decades of the twentieth century, the cost had ballooned to ten, and this was only the fee for a standard daytime visit. If an illness happened to strike at night, a doctor would not have been out of line in charging twenty yuan. And if the unlucky patient had the further ill fortune of living outside the city walls, he could expect a bill of up to 40 yuan for a single house call—a sum equivalent to four times the average monthly salary of an unskilled worker in early twentieth-century Shanghai.

Throughout the tale, Lu Xun documents his family’s increasingly unsatisfactory experiences with the community’s best and most trusted doctor. Having gained a decent reputation for his curious and unconventional prescriptions, this doctor had developed such a following in the community that he could afford to charge 100 yuan for a single visit by the time of his retirement. Unfortunately for Lu Xun, the “unconventional” nature of the
doctor’s prescriptions often meant that Lu would be forced to spend numerous hours in search of a rare herb or root in order to fill the medical “supplement” that the doctor prescribed. These supplements were never ordinary ingredients like ginger or bamboo. Instead, this doctor only prescribed the rarest of medicines: reed root grown at a river’s edge, sugarcane that had been watered with three consecutive years of frost, the leaf of a phoenix tree… And after days of searching, even if the ingredients could somehow be located, they often were found to be completely and utterly useless.41

While “Father’s Illness” likely represented a purposely exaggerated caricature of traditional Chinese physicians, it nevertheless pointed to a series of very real inconveniences facing traditional Chinese medical practice. In the urbanizing and fast-paced environment of early twentieth-century Shanghai, it was no longer practical to expect a person to spend copious amounts of time and money in the pursuit of wellness. Health had become a commodity: one that demanded an immediate and readily accessible cure. And while this demand may not have boded well for the traditional Chinese practitioner, it was a godsend for the patent medicine industry. In the intersection between a cold, impersonal, and unfamiliar “scientific” medicine and an expensive, inconvenient, and unreliable Chinese practice, a space had been opened for the ready and waiting patent medicine man—particularly one who had the wherewithal to capitalize on the increasing demand for cheap, available, and convenient access to health.

Luckily for the Dr. Williams’ Medicine Company, a tried and true advertising technique had already been established in the Western market. Given the fact that similar dissatisfactions plagued both Western and Chinese patients, all that remained for the Shanghai branch of Dr. Williams’ to do was to find a suitable platform upon which to showcase their products. Although Dr. Williams’ advertised its medicines in many Chinese and English-language publications in China, it focused a large percentage of its advertising dollars on the popular pictorial Liangyou. To even have an ad placed within the hallowed pages of Liangyou was a feat unto itself. Not only was page space pricey (a quarter page ad cost upwards of 100 dollars by the 1930s),42 but the editors of Liangyou were also notorious for their discriminating taste in advertisements. In a memoir by one of the pictorial’s editors, Ma Guoliang recalls the strict criteria he and his staff employed in choosing which advertisements to accept and which to reject. Most plugs for products, he relates, were “politely declined” either due to the fact that the product was deemed unreliable or because of the nature of the ad itself. And because the editors wanted their publication to remain reader-friendly, they only printed a small number of advertisements in each issue so as to not detract the reader’s attention from the pictorial’s edited content.43

What first strikes the reader upon viewing a Dr. Williams’ advertisement is that the ad is not clearly differentiated from the news articles surrounding it. Unlike most ads for Western products in Liangyou, which mainly featured large graphics and very little text, Dr. Williams’ employed the exact opposite tactic. Relying mainly on users’ testimonials, advertisements for Pink Pills and other Dr. Williams’ products emphasized text over imagery and the reliability of the written word over the frequently caricatural use of cartoons and photographs. As figure 3.3 shows, often the only clue that the reader was given as to the advertorial nature of the text was the fact that the advertisement was separated from the rest of the page by a thin outline. Furthermore, the pictures that Dr. Williams’ employed fit in well with the diverse ways in which Liangyou portrayed men and women in both modern and traditional dress (see Hongjian Wang’s chapter for a more detailed discussion of Liangyou’s multi-faceted portrayal of masculinity).

Due to the fact that Dr. Williams’ relied heavily on textual advertising in Liangyou, it stands to reason that its early ads were mainly focused on the educated upper or middle-class. Indeed, as mentioned earlier, it was generally the Chinese elite who were first attracted to Western medical trends and who were frustrated at the inflexibility of the lower class in regards to traditional medical care. Dr. Wil-
Williams’ ads in *Liangyou* thus sought to break into the Chinese market by aiming its products at those most predisposed to using them. This is not to say, however, that Pink Pills simply piggybacked on the intelligentsia’s glorification of Western science. Although ads for Dr. Williams’ products certainly played on elite desires to participate in a modern scientific medical culture, they simultaneously sought to degrade the medical profession itself. Similar to the company’s advertising tactics in the United States, Dr. Williams’ ads in China straddled the line between praising the principles of modern medicine (upon which it based its own legitimacy) and fueling suspicion of Western medical practitioners (who were deemed unreliable and untrustworthy).

A testimonial from a certain Mr. Chen, residing at number 96 Sichuan Road in Shanghai, attested to the ways in which Dr. Williams’ encouraged skepticism of both Chinese- and Western-trained doctors. “I was weak at the time I was in school due to the fact that I worked excessively hard… Over the course of a year I tried everything the doctors gave me: all types of cod liver oils and blood nourishing medicines. But my illness always returned and [the medicines] proved to have no effect.”

Liu Botang’s testimony concurred. “My suffering was indescribable, and had persisted for over a year. Although I had gone to see both Chinese and Western doctors, their cures were not effective. Finally, my friends urged me to try Dr. Williams’ Pink Pills.”

Even doctors trained in the principles of modern science, these ads underscored, were impotent in the face of recurring illness.

Nevertheless, while ads for Dr. Williams’ products underscored the ineffectiveness of Western doctors’ prescriptions, they simultaneously upheld
the “scientific” nature of modern medicine. “In modern society,” one particularly lofty text began, “science is developing and all things are reforming… When talented doctors and pharmacists employ scientific methods, they are able to create new medicines that are much more effective than the old kind.” Dr. Williams’ Pink Pills, the ad proclaimed, relied upon scientific formulas to achieve “maximum results.” In other words, although doctors themselves had been shown to be unreliable, “science” had emerged as universally trustworthy. Dr. Williams’ Pink Pills cleverly managed to find a way to position itself between the two in such a way as to not seem contradictory; in both the East and the West, Dr. Williams’ products showcased the best that modernity had to offer while bypassing the corruption and ineptitude of the human physician.

In spite of the fact that Dr. Williams’ emphasized the universally scientific basis of its products, its advertisements still explained sickness in a distinctly Chinese vocabulary. In one ad for Pink Pills, an elderly woman described her poor state of health as stemming from weak qi and thin blood, and in another, a Western-educated Chinese doctor named Shi Junling claimed that sickness derived from weak blood and bad circulation. Dr. Williams’ ads not only played into long-held Chinese ideas on the source of illness and health, but also referenced ubiquitous cultural texts that would have been identifiable to any member of the literate public. In one ad that grandiosely proclaimed that, “Beiping’s reconstruction depends on the contributions of Dr. Williams’ Pink Pills,” the writer made reference to the well-known Confucian text Daxue (The Great Learning):

Parents and children make a family, and families make a nation. If we wish to speak of building up the nation, we must first start with the family. When mothers, fathers, and children are healthy, then the family can be strong. And when no family is weak throughout the whole nation, then no single person in that nation can be weak either. This, then, is the basis of national construction. Dr. Williams’ Pink Pills can be considered the most sage-ly medicine (shengyao) under heaven. At the same time that tradition could be invoked, however, tradition could also be relegated to the past. An advertisement for another Dr. Williams’ product, Pinkettes laxatives, stated that, “In olden days, women were told to be virtuous and to not cultivate talent. But in the progressive world of today, that type of thinking has already become passé.” Just like old dictums, the ad continued, old medicines no longer had a foot to stand on. Through a process of natural selection (taotai), traditional thinking and traditional medical care had been replaced by science.

When taken as a coherent whole, the entire collection of Dr. Williams’ ads in Liangyou was largely self-contradictory. They lauded science, yet pandered to medical tradition; they spoke of progressivism, but did so through allusions to ancient texts and past cultural stereotypes; they were clearly foreign, yet gained traction in the community on account of their familiarity. In order to introduce the new, Dr. Williams’ first had to bolster a past that had not quite passed. By relying on the subtle fictions of Western science and Chinese tradition, the Dr. Williams’ Medicine Company positioned itself at the interstices of two separate worlds while avoiding the alienating effects of the foreign and unknown.

Of course, the consumer remained largely blind to such contradictions. What caught the buyer’s eye instead was the fact that Dr. Williams’ products were made to seem like an integral part of the modern consumer’s lifestyle. Although the Chinese had managed to survive for multiple millennia without the help of laxatives and lozenges, the attainment of a full and happy life in the context of 1920s Shanghai somehow seemed to require the regular purchase of mass manufactured medicines. In one ad for Pinkettes, for example, readers were asked if they and their spouses argued over miniscule matters, or used swear words for no reason at all. “Countless families have been broken up over small issues such as these,” the ad asserted. One way to prevent such unnecessary irascibility was to use Dr. Williams’ Pinkettes to maintain digestive regularity; indeed, the modern nuclear family required such medical supplements to maintain familial harmony.
Another ad for Dr. Williams’ Baby’s Own Tablets featured a cartoon of a mother, father, and child gathered together in the kitchen. The mother, holding up a plate of fish, remarks that the hot weather has made the fish spoil. “Best to go buy another,” the father responds. “Our health and the health of our child must be a top priority.” In the consumer culture of modern Shanghai, health, like food, had become a commodity. Achieving good health was not simply a matter of luck or good fortune, but of proactivity and scientific knowledge (see Hayoon Jung’s chapter on the development of scientific motherhood). In contrast to former modes of healing—which included the mysterious and exclusive knowledge of medical practitioners—modernity entailed the democratization of health. With the right tools and a bit of know-how, anyone could buy the products that would allow him to function at his best.

Nowhere was this more evident than in advertisements for Dr. Williams’ products, such as the one featured in figure 3.4. In the cartoon below, a mother worries over her sick child in the family’s modern Shanghai apartment, which boasts such amenities as an electric lamp and a clock. Her husband, meanwhile, decides to take matters into his own hands. Walking down the street to the nearest neighborhood pharmacy, he is able to buy a packet of Baby’s Own Tablets. The whole process does not require a doctor’s visit or a prescription; all it demands is knowledge of modern patent medicines. And the fact that Dr. Williams’ products were both inexpensive (Pink Pills cost 1.5 yuan a box and Baby’s Own Tablets were only 70 cents a bottle) and always available (if a person did not have immediate access to a pharmacy, he could mail a request to the Dr. Williams’ Shanghai branch with no postage required) further served to make Dr. Williams’ products not simply a “perk” of modern life, but an integral and indispensable component of it (fig. 3.4).

With Dr. Williams’ clever marketing strategy in popular magazines such as Liangyou, the company found a ready public in readers looking for a cheap, efficient, and easily accessible path to health. Although comprehensive data is lacking on the amount of patent medicines that Dr. Williams’ imported throughout its 45 years in Shanghai, we do know that by the second decade of the twentieth century, Pink Pills were being shipped to China at a rate of eight times that of its closest patent medicine competitor. Between 1912 and 1914 alone, Dr.
Detail of an advertisement for Baby's Own Tablets in Liangyou. “Changbei yinghai ziji yaopian yi fang buce” (“Always be Ready with Baby’s Own Tablets in Order to Avoid Mishaps”), Liangyou, no. 58 (1931): 38.
Williams’ yearly imports for Pink Pills jumped from 53,048 liang to 93,913 liang, and between 1920 and 1925, Dr. Williams’ was importing an average of 115,800 liang (about six and a half tons) per year in Pink Pills alone.

The increasing demand for patent medicines is further reflected in the proliferation of Western pharmacies in Shanghai throughout the first few decades of the twentieth century. Although only 24 Shanghai pharmacies were selling imported medicines in 1911, fifteen years later that number had risen to 75. Western pharmaceutical companies were also on the rise. Between 1918 and 1924, the number of medical manufacturers in Shanghai ballooned from 22 to 93. And by 1936, one year prior to the outbreak of the Sino-Japanese War, medical imports accounted for close to a quarter of all imports coming from the West, with medicine manufacturers raking in an average of 2,890,000 yuan a year just from sales in the Shanghai market.

Not everyone was thrilled by the growth in the Chinese patent medicine trade. Following the publication of the Shanghai special consular report of 1917, which urged American patent medicine companies to bring their business to China, the National Tuberculosis Association (NTA) published an article in the American Journal of Nursing expressing great concern over the expansion of the patent medicine industry. Imploring the United States government not to support the sale and manufacture of patent medicines abroad, the NTA pointed out that “China had not yet recovered from the effects of the opium habit which was foisted upon it by Western civilization” and so it was “particularly undesirable to foist upon it this new evil.” What particularly enraged the NTA was the American government’s blatant hypocrisy when it came to the matter of patent medicines. While the American consul general was prodding patent medicine makers to try their hand in the Chinese market, the United States government, backed by an increasingly powerful American Medical Association lobby, was trying its best to curb the sale of patent medicines domestically. As part of the American government’s incipient fight against bogus patent medicines, the Pure Food and Drug Act—a forerunner to the Food and Drug Administration (FDA)—prohibited false or fraudulent advertising and the addition of harmful or addictive ingredients in patent medicines. If a patent medicine was found to be in violation of the Act, its manufacturer could be sure to expect a knock on the door and the prompt delivery of a court order.

And so it was with the Dr. Williams’ Medicine Company. In the spring of 1916, ten years after its feud with Collier’s had drawn to an anticlimactic close, Dr. Williams’ suddenly found itself thrust back into the courtroom. The charge against Dr. Williams’ centered on the fact that packages of Pink Pills had been labeled with intentionally hyperbolic claims as to the curative scope of the drug. “Cases diagnosed as locomotor ataxia and as partial paralysis,” the label proclaimed, “have shown beneficial results under this tonic treatment, and in the cases under observation the resulting improvement has been lasting.” In plain English, Dr. Williams’ was baldly asserting that Pink Pills were capable of permanently curing paralysis. To the medical professional, surely this assertion sounded nothing short of ridiculous. But while similar previous claims from Dr. Williams’ had barely elicited so much as a shrug from American politicians—indeed, the Pure Food and Drug Act had been in existence for an entire decade before a lawsuit was finally brought against Pink Pills—the expanding responsibilities of the United States government, coupled with increasing pressures from the American Medical Association lobby, suddenly demanded that prompt action be taken.

Charging Dr. Williams’ with violating the terms of the Pure Food and Drug Act, the United States government brought the case to court in May 1916. As if embodying a veritable microcosm of early twentieth-century medical tensions, the two sets of testifiers in the case included “physicians of proven ability, knowledge, and experience” pitted against representatives of the Dr. Williams’ patent medicine company. To the former, there was no logical way that a glorified sugar tablet such as Pink Pills could have had any sort of curative effect on cases as
severe as full-blown paralysis. To the latter, however, this sort of underhanded accusation merely reflected the “personal opinion” of the testifying doctors. In the end, the jury found the verdict in favor of the United States, and all shipments of Pink Pills with fraudulent labeling were ordered destroyed.64

Similar charges would later be brought against Dr. Williams’ in China as well. Beginning in the late 1920s, questions as to Dr. Williams’ legitimacy began to be raised by the Chinese public. After a number of Liangyou readers complained that they had seen their names and addresses being used in Dr. Williams’ ads without their permission, the periodical Yixue zhoukan (Medical Weekly) launched an investigation into the credibility of Pink Pill advertisements by asking readers to detail their personal experiences with the brand. Zhang Guohua, a doctor from the small town of Shuangcheng, submitted a letter to the journal describing his surprise at finding his own photograph in a plug for Pink Pills. “I never gave the company my picture,” he related. “Dr. Williams’ must have gotten it from a photo developer instead, and then fabricated my testimonial.” The article ended with a plea from Medical Weekly for readers to be on the lookout for their own names making a surprise appearance in Dr. Williams’ advertisements.65

Medical Weekly’s investigation was not constrained solely to this one incident. In three separate issues, the journal featured whistle-blowing testimonies that chipped away at the credibility of the Dr. Williams’ brand. The articles must have had some impact on the newspaper world; according to Medical Weekly, “reputable” newspapers had already ceased printing Dr. Williams’ ads, conceivably in response to the journal’s investigative reporting. Indeed, when flipping through the pages of Liangyou between the years of 1933 and 1939, one notices the sudden absence of Pink Pill ads—once a staple of the popular pictorial. Although it seems unlikely that Medical Weekly’s reporting could have single-handedly undermined the Dr. Williams’ empire in China, the publication of Medical Weekly’s testimonials happened to correspond with two simultaneous developments in the late 1920s and early 1930s, both of which served to reduce the power of the foreign patent medicine industry in China: the introduction of government regulation, and the advent of competition from Chinese patent medicine makers.

While favorable government legislation was finally allowing professional physicians to make inroads against the patent medicine community in the United States,66 similar examples of jurisdictional maneuvering were also taking place in China. In the late 1920s, the Nationalist government (perhaps taking a cue from the establishment of the FDA in 1927) also decided to get its hands dirty in the skirmish over patent medicine regulation. The Nationalists’ first attempt to regulate the manufacture and sale of patent medicines came in 1929, with its proclamation of the “Regulations for the Management of Patent Medicines” (“Guanli chengyao guize”) and the “Regulations for the Management of Pharmacies” (“Guanli yaoshang guize”). The articles contained in these regulations not only aimed to curb the amount of fraudulent medicines being sold, but also sought to centralize government control over the production and sale of all medicines.

Under the second article of the Patent Medicine Regulations, anyone wishing to engage in the patent medicine industry would first have to apply with the Nationalist Ministry of Hygiene (Weisheng bu). The application itself required a fee of two yuan plus tax, as well as an additional fee for the investigation of the product. After pharmacists and chemists employed by the Ministry of Hygiene deemed the product safe, the approved applicants would be given a license to sell their wares.67 In order to further clamp down on sales of fraudulent medical products, the Pharmacy Regulations stipulated that all those wishing to engage in the sale of Western medicines must employ a full-time licensed pharmacist, and that anesthetics and other narcotic drugs could not be sold without a written prescription from a doctor.68 The regulation of medicines additionally allowed the Nationalist government to assert its opinions on questions of morality. In article nine of the Patent Medicine Regulations, the Ministry of Hygiene warned that any advertise-
ments or packages containing dirty or scandalous wording could be banned and the company fined. The article further went on to add that the sale of abortifacients was prohibited; if products so much as hinted at their abortifacient properties, they would have their license revoked immediately.69

From a medical perspective, these rules were not particularly controversial. With patent medicines springing up like mushrooms—some innocuous, others poisonous—the Nationalist government was indeed justified in doing something about the profusion of poultices that threatened to undermine public health. Yet, arguably, the corporal and moral wellbeing of the Chinese people was not the Nationalists’ singular concern in propagating its medical regulations. Much like the American Medical Association—which was trying desperately to challenge patent medicine men by working hand-in-hand with the United States government—the Nationalist government attempted to cement its own legitimacy through the implementation of laws aimed at protecting its people. In a 1931 declaration of the Patent Medicine Regulations, a spokesperson for the Ministry of Hygiene affirmed that “the previous government never regulated any issues concerning patent medicines, nor did they conduct proper laboratory testing. As a result, one could never know whether medicinal products were harmful or advertisements were misleading. They simply did not care about the lives of the people at all.” By contrast, the current Ministry of Hygiene “has deeply considered these problems and has therefore completed a draft of the Patent Medicine Regulations, which has been sent to the Executive Yuan for approval.”70 The regulation of patent medicines and the licensing of patent medicine dealers were therefore not simply matters of concern over China’s corporal welfare; these regulations were also tied up in issues of governmental and professional legitimacy.

Intentions aside, it is clear that the Nationalists took the responsibility of curbing the sale of fraudulent elixirs and serums seriously. Hundreds of documents remain that showcase the actions taken by the Ministry of Hygiene to punish medicine manufacturers who flouted the articles of the Regulations. As just one example, in memorial (pi) 106 of the Ministry of Health, the Nüjie fu yaopin (Female Happiness Medicine Company) was found guilty of breaching advertising standards by exaggerating claims of what its product could achieve. The company’s license was suspended until their advertisements were deemed to be in accordance with Ministry of Hygiene regulations, and the company was further charged two yuan for processing fees and one yuan as tax.71 Even foreign manufacturers of patent medicines were not exempt from the new rules. After its mysterious six-year absence from Liangyou, advertisements for Dr. Williams’ products again made a surprise appearance in one edition of the pictorial. This time, however, they were accompanied by small print testifying to the company’s compliance with the Nationalist government’s patent medicine regulations. In issue 144 (1939), Pink Pills proudly brandished the fact that it had been granted license number 625 from the Nationalists, Pinkettes had obtained license number 626, and Baby’s Own Tablets was given license number 627.72

Regardless of their new legal stature, however, advertisements for these medicines remained as exaggerated as ever. In the 1939 ad for Pink Pills in Liangyou, the text still claimed that the medicine worked as a cure against all types of women’s problems, ranging from the distinctly modern “disease” of neurasthenia (shenjing shuairuo), to insomnia, anemia, alimentary disorders, gout, gauntness, and even shyness.73 Indeed, the extent to which the Nationalists’ regulatory measures were truly functional was a questionable matter. In the two-month period between October and December 1936, the Hygiene Bureau either issued licenses to or investigated over 150 new patent medicine brands.74 In spite of government regulation—or perhaps because of the seeming legitimacy it bestowed—the patent medicine industry continued to skyrocket in China well into the 1930s.

Yet, a key difference between the Chinese market that Dr. Williams’ had entered in 1908 and the market of the late 1920s was the fact that, in the
later years of the Republic, foreign brands could no longer enjoy a monopoly on the patent medicine industry. Recognizing the profitability in the health trade, Chinese entrepreneurs had also begun to develop their own brands of patent medicines in the hopes of appealing to a nationalistic Chinese clientele. It was well known among the friends of Huang Chuju, for example, that the Shanghai pharmacy magnate and developer of the first Chinese patent medicine, “Ailuo’s Brain Tonic,” had decided to go into the medicine business as a means of undermining Western patent medicine companies—specifically Dr. Williams’. Due to Huang’s deep-seated “patriotism,” a friend recollected in a later memoir, the medical millionaire had one day decided to create a Dr. Williams’ knock-off in order to “benefit the Chinese nation” by redirecting sales away from the popular American brand. In the late 1920s, Huang began manufacturing a medicine called the “Pink Spirit Pill” (hongse jingshen wan). In order to create the largest possible market for his product, he decided to use the trademark “First President” (diyi zongtong) on the label, featuring an enthusiastic image of Sun Yat-sen. When Huang’s pharmaceutical company began producing the “First President” brand of “Pink Spirit Pills,” representatives for the Dr. Williams’ Company were reportedly none too pleased.75

Even if Chinese patent medicine makers aimed to play off of nationalistic sentiments, this did not mean that they completely forsook the legitimacy that Western-sounding products seemed to offer. In fact, most Chinese patent medicines attempted to appear “Western” by adopting foreign-sounding names and used English on their labels. Huang purposely gave his “Ailuo Brain Tonic” (Ailuo bu-naozhi) a name that would sound Western to Chinese ears, and this misconception was further bolstered by the fact that the medicine’s label claimed, in English, that the product had been invented by “Dr. T. C. Yale.”76 The Japanese-educated Yu Yunxiu, who, ironically, would later become a council member in the Nationalist government’s Ministry of Hygiene, also could not resist creating his own patent medicine. “Dr. Yu’s Antiflammin” took an English name, but was promoted as a domestically manufactured product.77

The Dr. Williams’ Medicine Company was well aware of the ongoing efforts to detract from sales of its own products. In spite of the fact that Chinese patent medicine companies did not generally take out advertising space in such fashionable periodicals as Liangyou, the sheer existence of such a multitude of knock-offs undoubtedly served to put a dent into the projected earnings of Pink Pills. Unwilling to turn a deaf ear to the clatter of coins filling somebody else’s pocket, Dr. Williams’ decided to take active measures to warn its customers against fakes and frauds. In the final year that Pink Pills consistently appeared in the pages of Liangyou, advertisements for the product prominently warned all consumers to avoid any medicine that lacked the Dr. Williams’ seal of approval (fig. 3.5). In one 1932 announcement in Liangyou, for example, the Dr. Williams’ Company revealed that an important matter had been brought to their attention: someone, evidently, had been selling individual pink pills using the Dr. Williams’ name. “We want everyone to know,” the announcement intoned, “that the real Dr. Williams’ would never, under any circumstances, sell individual pills.” Authentic Pink Pills were only sold by the bottle “in order to protect our customers from swindlers and frauds.” Before buying any medication, consumers were therefore warned to check the label for the red Dr. Williams’ insignia.78

The advent of government regulation, combined with an increasingly nationalistic Chinese public, which jumped at the possibility to buy domestic patent medicines, reined in the latitude with which the Dr. Williams’ Medicine Company had previously operated in the Chinese market. Although the exact reasons why Liangyou eventually decided to cut Dr. Williams’ advertisements from the pictorial will remain a mystery, it seems fair to assert that in the 1930s, the tide was beginning to turn against the foreign brand. Reflecting, perhaps, the attitudes of its readers (and wary of publishing advertisements that did not square with Nationalist regulations for patent medicines), the editors of Li-
angyou evidently decided that its marketing space would be more effectively used for products other than Pink Pills.

And yet, what is noteworthy about the development of Chinese patent medicines is the fact that neither the makers nor the consumers of the drugs seemed to challenge the effectiveness of the foreign form of the medicine; they simply desired a Chinese origin. Indeed, while Chinese consumers may have begun to direct their dollars toward domestic brands, their uniform desire for a cheap and easily accessible means of achieving health—a key component of a burgeoning global modernity—did not ever seem to be a point of contention. Unlike the simple East/West dichotomy that portrays Chinese medicine as being at odds with Western modes of healing, the advent of Chinese patent medicines demonstrates that Chinese nationalism could coexist with global trends in health. And it was this compromise—between adopting a foreign form but injecting it with a domestic meaning—that ultimately came to define the history of the patent medicine industry in the East.

The story of the Dr. Williams’ Medicine Company does not end here, however. In spite of unfavorable government legislation and declining popular support, Dr. Williams’ continued to be a mainstay in China until the early 1950s. Following the start of the Pacific War in 1941, the company was bought out by the Japanese-run Wutian yaopin zhishi huishe (Takeda Pharmaceutical Company) and continued to operate from inside the Shanghai concession—although, understandably, a Dr. Williams’ ad was never again seen in the pages of Liangyou from hereon. After the end of the war, Takeda relinquished the company to the Nationalist government, and it was not until the Chinese Communist Party took over Shanghai that the Pink Pills brand finally packed up and returned home.79 Perhaps more surprising is the fact that Dr. Williams’ did not go into receivership in the United States until the staggeringly late date of 1989. Throughout the tumult of lawsuits and increasingly stringent feder-
al regulations, the Dr. Williams’ Medicine Company managed to emerge relatively unscathed on both sides of the East/West divide.

To return to our original question of how such a feat was accomplished on two seemingly disparate shores, it is helpful to reassess our conventional understanding of the development of medical science: an understanding which not only espouses a linear and uncompromised trajectory of medical progress throughout the twentieth century, but one which also equates this progress solely with the uninhibited pursuit of health. What is striking about the history of Dr. Williams’ in both China and the United States is the fact that, throughout much of the early twentieth century, the medical effectiveness of Dr. Williams’ products was rarely called into question. In both locales, rather, the central debates on patent medicines seemed to center less on the therapeutic value of the drugs than on related questions of professional jurisdiction, political authority, and (particularly in China) nationalistic sentiment. To sell “health” was to sell a range of associated meanings and goals. And irrespective of which side of the patent medicine debate a person happened to fall on, it was almost certain that the patient’s wellbeing was not the only issue at stake.

Of course, this is not to say that the development of medical regulation lacked all possibility of public spirit. Indeed, it would certainly seem cynical to argue that the politicians who promoted the Pure Food and Drug Act in the United States and the Patent Medicine Regulations in China did not care at all about the health of their nation’s citizenry. But when placing the history of patent medicines in its larger context, one begins to see that the major topics of concern were not solely constrained to discussions of medical effectiveness. Particularly in China, where conventional wisdom would lead us to believe that the growth of the patent medicine industry was based strictly on a criterion of Western scientific efficacy in the face of superstitious Chinese practices, one instead finds that the decision to incorporate patent medicines into a preexisting medical arsenal was more nuanced than an objective intellectual calculation based upon two seemingly oppositional choices.

As evinced by the ways in which Liangyou presented matters of medicine and health, it becomes clear that the expansion of the patent medicine industry in China was not simply attributable to an ideological orientation which uniformly privileged Western “science,” but rather to a larger sociopolitical context in which consumerism, efficiency, and easy accessibility had become the mot clés of the modern era. Within the pages of the pictorial, Chinese medical tradition and Western scientific modernity were rarely explicitly juxtaposed. Instead, they seemed to coexist in a certain uneasy simultaneity that mirrored readers’ desires for new, yet familiar, modes of achieving health in a modern context. Even the ostensibly nationalistic Chinese patent medicine makers did not seek to overturn the form or supposed functionality of Western modes of healing, but rather injected their own national idioms into an already accepted foreign product.

The absence of reasonable medical alternatives, combined with the fast-paced, urbanizing, and often socially alienating context of early twentieth-century Shanghai, led to the momentary triumph of the patent medicine. And while such a triumph appears curious in retrospect, at the time of Dr. Williams’ ascendance, the specific demands of the era had coalesced to thrust the patent medicine industry into the medical spotlight. The popularity of these products thus reflected their status as a symbol of a globally achievable modernity: one that depended less on the perpetuation of an East/West dichotomy than on the universal desire to attain, with as much ease as possible, the prospect of a healthful future.
Notes
6 Shortly after the first Collier’s report was released, George Fulford died in a car accident. He was replaced by his business partner, W. T. Hanson.
8 Ralph Crozier, Traditional Medicine in Modern China (Cambridge, MA: Harvard University Press, 1968), 16 and 32.
10 Bryna Goodman, Native Place, City, and Nation (Berkeley: University of California Press, 1995), 2.
11 Ibid., 53.
12 Wen-hsin Yeh, Shanghai Splendor (Berkeley: University of California Press, 2007), 2.
14 Chinese pharmacies such as Tongren Tang had operated since the seventeenth century, but medicine men did not begin actively “marketing” their products until the early twentieth century. See Sherman Cochran, Chinese Medicine Men: Consumer Culture in China and Southeast Asia (Cambridge, MA: Harvard University Press, 2006).
16 As cited in Young, The Toadstool Millionaires, 173.
17 Yu Siqing, ed., Shanghai yiyao zhi (Shanghai Medical Records) (Shanghai: Shanghai shehui kexue yuanchubanshe, 1997), 64, 124.
19 “Zhongyi he xiyi” (“Chinese and Western Medicine”), Xiandai pinglun 5, no. 114 (February 12, 1927): 199.
20 Gui Zixiao, Zhongguo gudai yiyao weisheng yu xiandai yixue (Medical and Hygiene in Ancient China) (Taipei: Taiwan shangwu yinshu guan, 1994), 20–21.
23 Yang Nianqun, ”Difang gan’yu xifang yiliao kongjian zai zhongguo de queli” (“Sense of Place and the Establishment of Western Medical Spaces in China”), Diguoyu xiandai yixue (Imperialism and Modern Medicine), ed. Li Shangren (Taipei: Liangjing chuban yishu, 2008), 378.
26 Zhang Guanlian, in “Wo jiaxiang de weisheng,” 38.
27 Thomas Sammons, “Proprietary Medicine and Ointment Trade in China,” Special Consular Report for the

34 “Doctors Disagree: Each Gave Mrs. Brewen’s Trouble a Different Name,” in The Meaning of Dreams, 4.


38 Liu Lang, in “Zhongxi yili,” 28.

39 See Zhang Gui and Zhou Delin’s essays in “Zhongxi yili.”


41 Lu Xun, “Fuqin de bing” (“Father’s Illness”), Zhaohua xishi (Dawn Flowers Picked up in the Dark) (Beiping: Beixin shuju, 1927).

42 Liangyou, no. 121 (1939): 43.


45 “Nüzi wucai bianshi de: cizhong bixu dadao er gexin zhi” (“Untalented Women Are Virtuous: This Type of Old Thinking Should Be Wiped Out and Replaced”), Liangyou, no. 70 (1932): n.p.

“Weilianshi hongse buwan zhengming shu zhi heimu”
(“The Back Story Behind Dr. Williams’ Pink Pills Testimonials”), Yixue zhoukan, no. 4 (September 30, 1931): 302.


68 “Guanli yaoshang guize” (“Regulations for the Management of Pharmacies”), Neizheng nianjian (August 24, 1929).


71 “Weisheng bu pi, 106 hao” (“Memorial 106 of the Department of Hygiene”), Weisheng gongbao, no. 7 (June 18, 1930).


73 “Weixiu wangwang shi naoruo zhi xiangwei; you buxue er jiannao” (“Shyness is Always a Manifestation of a Weak Mind; Fortify Your Blood and Strengthen Your Mind”), Liangyou, no. 144 (1939): n.p.


76 Cochran, Chinese Medicine Men, 39.

77 Yu Yunxiu, Yixue geming lun erji (Theory of Revolutionary Medicine, second volume) (Shanghai: Shanghai shehui yibao guan faxing, 1933).


79 Wang Chuifang, Shanghai yanghmqm shi 1843-1956 (History of Foreign Companies in Shanghai) (Shanghai: Shanghai shehui kexue yuan chubanshe, 2007), 282.