

Reinterpreting the Concept of “Nursing” in the Korean Context

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Florence Nightingale acts as the threshold dividing “modern” nursing and “premodern” nursing. The history of modern Korean nursing is not exceptional. It is not surprising that the history of modern Korean nursing describes the advent of “Western” nursing as it was delivered from Western medical professionals. Although traditional Korean medical doctors, *Hanuisa*, largely practice at traditional Korean health clinics and hospitals, the nurses who work at these traditional Korean health clinics and hospitals are trained at the same nursing education programs as those who work in Western medical clinics and hospitals. The purpose of this study was to find a concept of “nursing” in the context of traditional Korean medicine, which traditional Korean nursing in modern era may inherit and expand upon, by reinterpreting the concept of nursing in terms of a philosophy that supports traditional Korean medicine. This article utilized a philosophical analysis of literature that is essential to the reinterpretation of this concept. In terms of core concepts, nursing and traditional Korean medicine share common features with each other. On the basis of these common features, cowork in practice should be more developed and articulated. This will add new characteristics to the history of Korean nursing. **Key words:** *Chinese philosophy, global legacy, history of nursing in Korea, nursing philosophy, traditional Korean medicine*

IT has been said that the history of nursing should be rewritten in global legacy,¹ but what does that mean? Since the history of “modern” nursing begins with Florence Nightingale,² she acts as the threshold dividing modern nursing and “premodern” nursing. The history of modern Korean nursing is not exceptional. It is not surprising that the history of modern Korean nursing describes the advent of “Western” nursing as it was delivered from Western medical professionals.

The exact time of the beginning of modern nursing in Korea is not certain, but many regard it as 1903 when a missionary nurse, Margaret J. Edmonds, and a missionary physician, Mary M. Cutler, established a nurse-

training program in the first women’s hospital, Bogu Yeokwan, in Korea.³ The early 1900s was the period of modernization in Korea during which the Western healthcare system was introduced. Similar to the United States, nursing education in Korea in this period was under the control of hospitals. The history of modern nursing cannot exist without the setting of modern healthcare based on the Western concept of clinics.

In Korea, the advent of modern medicine took place around the same time as the advent of modern nursing, and Western medicine became a mainstream aspect of the Korean healthcare system. The current national healthcare system in Korea is based mainly on Western medicine. For laypeople in Korea, “nurses” and “doctors” refer to those who practice Western nursing and medicine.

However, traditional Korean medicine is still largely practiced as alternative medicine in Korean society under the name of *hanuibak*. Those who practice traditional Korean medicine as their profession are called *hanuisa*, meaning “doctors practicing

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traditional Korean medicine." A "hanuisa" is a healthcare professional who has been licensed through a national examination for traditional Korean medical practice. Only graduates from traditional Korean medical schools may take the examination. For the last century, traditional Korean medicine has competed with Western medicine and has survived as an academic discipline. Moreover, as more people worldwide are interested in complementary and alternative medicine, research and practice in traditional Korean medicine have proliferated.⁴ The first traditional Korean medical school was established in 1953, and currently there are 11 universities nationwide. Fees for using traditional Korean medicine have been covered by the national health insurance system since 1987. Since that time, the total healthcare expenditure for traditional Korean medicine has grown rapidly.

However, compared to the increase in interest about Korean traditional medicine, Korean traditional nursing has been rarely discussed. Although traditional Korean medical doctors largely practice at traditional Korean health clinics and hospitals, the nurses who work at these traditional Korean health clinics and hospitals are trained at the same nursing education programs as those who work in Western medical clinics and hospitals. All nursing colleges in Korea educate students based on the Western nursing paradigm to make sure that their students pass national license examinations to become registered nurses. There is no special license for traditional Korean nursing. Nurses who want to work in traditional Korean medical clinics are trained at regular nursing colleges, which rarely include a traditional Korean nursing curriculum. Even if there are some classes about traditional Korean medicine, these are limited to just 1 or 2 introductory classes because the subject of traditional Korean medicine is not on the national examination for becoming a registered nurse in Korea.⁵

Although traditional Korean medicine in the modern era inherited ways of provid-

ing healthcare from the premodern era depends significantly on the national healthcare system, and has developed as a discipline, traditional Korean nursing is meager both in the healthcare system and as a discipline. One reason that traditional Korean nursing has not been established well as a discipline or a profession might be that there was historically no professional position in traditional Korean healthcare compatible with the role of nurses in Western nursing. There has been some discussion about whether or not there was a healthcare provider, who we could call a nurse, in the premodern era in Korea. Some refer to *Uy Nyu*, "a female healthcare provider,"^{6(p266)} who was a well-known figure in the Chosun Dynasty (1392-1910), as a nurse. *Uy Nyu* assisted traditional Korean doctors but primarily provided care to female patients who could not receive care from male doctors because of the rules of Confucianism. So, *Uy Nyu* refers more to the gender issues surrounding Confucianism than to the role of the healthcare provider. Therefore, it is inappropriate to explore the concept of nursing in premodern era by exploring the role of the *Uy Nyu*. Hence, we look at a more basic level—the philosophy of traditional Korean medicine—to explore the concept of nursing in premodern era.

The purpose of this study was to find a concept of "nursing" in the context of traditional Korean medicine, which traditional Korean nursing in modern era may inherit and expand upon, by reinterpreting the concept of nursing in terms of a philosophy that supports traditional Korean medicine. Reinterpreting the concept of nursing in terms of how it interacts with traditional Korean medicine will be a meaningful starting point from which the history of Korean nursing, including premodern history of Korean nursing, will be written. To explore the history of healthcare before modern Western nursing was introduced in Korea will also be helpful in rethinking the world history of nursing as an aspect of its global legacy.

NURSING IN THE CONTEXT OF TRADITIONAL KOREAN MEDICINE

This article focuses on reinterpreting the concept of nursing in the context of traditional Korean medicine by utilizing a philosophical analysis of literature that is essential to the reinterpretation of this concept. To think about the concept of nursing in traditional Korean medicine, in which the nursing profession was not differentiated from other medical care professions, it is necessary to examine the major medical texts of traditional Korean healthcare. *Huangdineijing* (*Hwangjenaegyeong in Korean*)* and *Donguibogam* are the medical texts that provide the most fundamental conceptual framework and the foundation of medical practice for today's traditional Korean medicine. Both were written in classical Chinese, which was used by literati in premodern China and Korea. *Huangdineijing* is a text of traditional Chinese medicine written by several unknown authors in the Han Dynasty (BCE 202–CE 220) in China, and *Donguibogam* is a kind of encyclopedia of traditional Korean medicine written by a medical doctor in the court of the Chosun Dynasty (CE 1392–CE 1910) in Korea. These 2 texts are still mandatory for medical students and practitioners of traditional Korean medicine.

If the concept of nursing existed in the conceptual framework of traditional Korean medicine or in the practice of traditional Korean medicine, there might be the equivalent of the nurse's role in the Western healthcare system. If so, the clinical practice of traditional Korean medicine may be in need of nurses' participation. This article, however, does not discuss the clinical practice of traditional Korean medicine; rather, this article concentrates on the concept of nursing in

traditional Korean medicine on a theoretical level.

As mentioned, the concept of nursing will be discussed in relation to the conceptual framework of traditional Korean medicine. Because the modern concept of nursing does not exist in traditional Korean medicine as it does in Western medicine, its counterpart should be established for the purposes of this discussion. In this analysis, the concept of *yang* in traditional Korean medicine will be considered the counterpart of nursing.

The core concepts of traditional Korean medicine are commonly found in a variety of East Asian medical traditions. The term *East Asia* often means the region covering China (especially, the region of the Han Chinese), Korea, Japan, and Vietnam (specifically, North Vietnam). Culturally, this region is characterized by the use of Chinese characters in their history. Chinese, Korean, Japanese, and Vietnamese are completely different spoken languages from each other and each of the 4 uses a unique set of characters now. However, China, Korea, Japan, and Vietnam have the common historical feature that Chinese characters were primarily used before modernization. Therefore, culturally, these 4 countries share common features with each other. The conceptual framework used in traditional medical practice is one of these features. Because each of these 4 countries consists of heterogeneous cultural areas, it is not the case that these common features always appear evenly everywhere in East Asia. The concepts introduced in this article may not be found in some parts of East Asia, and there may be differences in the ways that traditional medical practice is maintained. There are also various differences in traditional medicine among these 4 countries. However, generally speaking, it can be said that a common conceptual framework that includes the following concepts is used in traditional medical practices in East Asia: *gi*, *eum-yang*, and *the theory of the 5 elements*.

*Huangdineijing (黃帝內經) is a book known as The Yellow Emperor's Classic of Medicine. See Ni.⁸

Three concepts of traditional Chinese medicine

Gi, *eum-yang*, and the theory of the 5 elements represent the tripod of the conceptual framework of traditional Chinese medicine.⁷ These 3 concepts play a pivotal role in the East Asian medical tradition. Because traditional Korean medicine was largely influenced by traditional Chinese medicine (*Zhongyixue*), these 3 concepts will be discussed as significant aspects of traditional Korean medicine in this article.

If the most important concept for understanding the conceptual framework of East Asian medicine were chosen, it would be *gi* (氣) in Korean, which is pronounced *qi** in modern Chinese, *ki* in Japanese, and *khi* in Vietnamese. The term, *gi*, is translated as "energy." However, unlike energy, the existence of *gi* is not scientifically demonstrated. *Gi* is believed to be everywhere in the universe. *Gi* exists not only in a human being but also in things such as a mountain, a tree, and so on. *Gi* flows all over the human body. After a person is dead, *gi* leaves her body and disappears into nature. When a person's *gi* flows smoothly, she is healthy in general. If not, it is often the beginning of an unhealthy state. If the flow of *gi* is completely blocked, she will die. The concept of *gi* is often found in everyday conversation in East Asian society.

Chinese philosophy acts as the source of the conceptual framework in East Asian medicine. In Chinese medicine, understanding the dichotomy of *eum-yang* (陰陽: pronounced *yin-yang* in Chinese, *in-you* in Japanese, and *am-duong* in Vietnamese) and the concept of the 5 elements of the universe is the beginning of further study and actual practice. The concepts of *gi*, *eum-yang*, and the 5 elements play a crucial role in the construction of an individual philosophy, an important aspect of East Asian philosophy. These concepts are also commonly used in Confucianism, Buddhism, Taoism, and other religious traditions.

The dichotomy of *eum-yang* is usually explained as the dichotomy of minus-plus. *Eum* is equivalent to minus and *yang* is equivalent to plus. This dichotomy is applied to any kind

of dichotomy found in the universe. *Eum* is often interpreted as the moon, the earth, female, tranquil, passive, and so on, whereas *yang* is interpreted as the sun, the sky, male, vivid, active, and so on. Unlike what might be expected with these analogies, "minus" does not have any "negative" or "inferior" connotations and, by the same token, "plus" does not necessarily have positive connotations. In the pair of *eum-yang*, neither of the two is superior to the other and both exist independently of one another. The dichotomy of *eum-yang* creates kinetic energy and the balance of *eum-yang* is crucial to maintaining order. In traditional Chinese philosophy, the present state and change of anything in the universe are explained in terms of the dichotomy of *eum-yang*.

The 5 elements of the universe are also essential to the basic conceptual framework of Chinese medicine. The 5 elements are wood, fire, earth, metal, and water. These are better understood as symbols representing certain characteristics rather than actual materials constituting the universe. Whereas *eum-yang* is a dichotomy, the theory of the 5 elements is a kind of typology, which divides the characteristics of things into 5 categories.

Nursing in *Huangdineijing*

These 3 philosophic concepts are common in the East Asian tradition of medicine. The East Asian medical tradition based on these major concepts began to be formed during China's Han Dynasty, which was also the period in which *Huangdineijing* was written.⁸ *Huangdineijing* is the oldest known Chinese medicine text and provides the fundamental structure of East Asian medical knowledge.

According to *Huangdineijing*,^{8,9} *gi* is the most appropriate counterpart of "health" in Western medicine although their literal meanings and definitions are different from each other. The healthy state means the state in which "the lively *gi* is flowing smoothly."^{*}

*The *pinyin* system is used in this article to indicate Chinese pronunciation.

*The phrase *saenggittongcheon* (生氣通天) in *Huangdineijing* literally means "the lively *gi* flows up to the sky."

When a person's health is in the state in which the body is full of bad *gi* instead of lively *gi* or the flow of *gi* is blocked, she is considered unhealthy. Likewise, health and the concept of *eum-yang* are related in *Huangdineijing*. It is written in *Huangdineijing* that if a person follows the logic of *eum-yang* she will be alive; but if she betrays it, she will be dead.* According to a further illustration in *Huangdineijing*, there is the logic of *eum-yang* in regard to how a person should behave during each of the 4 climactic seasons. The 4 seasons and appropriate corresponding behaviors are characterized in the *Huangdineijing* as small-yang in spring, large-yang in summer, large-eum in autumn, and small-eum in winter (*tae-yang*, *tae-eum*, *so-yang*, and *so-eum*). The word *tae* means "large" and *so* means "small". If a person's *eum-yang* is not harmonized with the logic of *eum-yang* in the natural environment, she will be considered to be living in an unhealthy state.

In *Huangdineijing*, the 5 elements are explained as follows. First, the characteristic of "wood" is related to the liver and the gall-bladder in the human organs, sourness in flavor, the color blue, the eyes in the human face,[†] the wind as a source of disease, the muscles that contribute to bodily structure, anger in the mental state, the direction of east, the season of spring, and benevolence in morality. Second, the characteristic of "fire" is related to the heart and the small intestine, bitterness in flavor, the color red, the tongue, heat as a source of disease, the blood vessels, the mental state of delight, the direction of south, the season of summer, and the moral attitude of propriety. Third, the characteristic of "earth" is related to the spleen and the stomach, sweetness in flavor, the color yellow, the lips, humidness as a source of disease, the flesh, the mental state of anxiety, the direction of the center, the season of Indian summer, and the moral attitude of faith.

Fourth, the characteristic of "metal" is related to the lungs and the large intestine, spiciness in flavor, the color white, the nose, dryness as a source of disease, the skin, the mental state of sadness, the direction of the west, the season of autumn, and the moral attitude of righteousness. Finally, the characteristic of "water" is related to the kidney and the bladder, saltiness in flavor, the color black, the ears, coldness as a source of disease, the bones, the mental state of fear, the direction of north, the season of winter, and the moral attitude of wisdom.

These 5 elements are related to each other and, according to Chinese philosophy, cause changes in the universe. It is believed that fire comes from (depends on) wood, earth comes from fire, metal comes from earth, water comes from metal, and wood comes from water. However, wood overcomes (breaks out of) earth, earth overcomes (blocks the flow of) 'water, water overcomes (extinguishes) fire, fire overcomes (melts down) metal, and metal overcomes (cuts) wood.

The concept of the 5 elements in *Huangdineijing* is based on the idea that a human being is part of nature and, therefore, a person's health is directly linked to the natural environment. According to *Huangdineijing*, the relationship between a person's health and the 4 seasons is as follows:

Spring is the season of sprouting. Therefore, a person should be relaxed because this is the way in which the human *gi* is harmonized with the season. If she does not relax herself, her liver will be hurt and she will suffer from coldness. One of the reasons for this is if the characteristic of "wood" in a person's body is damaged, the characteristic of "fire" cannot be activated. Summer is the season of prosperity. Therefore, a person should face the sun and absorb its energy, which is the way in which a person harmonizes herself with the season. Otherwise, her heart will be hurt. The reason for this is that because summer is the season of "fire", damaging the characteristic of "fire" directly influences the health of the heart. Autumn is the season of harvest. Therefore, a person's mental state should be peaceful and she should be generous to others. If not, her lungs will be hurt. The reason for this

*從陰陽則生 逆之則死

[†] Face is especially important in Chinese fortune telling as well as in Chinese medicine.

is that both autumn and the lungs are related to the characteristic of "metal". Winter is the season of closing.^{8(pp1863-1864)}

This explanation in *Huangdineijing* illustrates how *gi*, *eum-yang*, and the 5 elements are interrelated and influence a person's health. In South Korea, the theory of the 5 elements is largely used by people in geomancy, fortune telling, and various religious rituals as well as philosophy and traditional medicine.¹⁰

Because *gi*, *eum-yang*, and the theory of the 5 elements are the basic elements used to explain the concept of health in *Huangdineijing*, the concept of nursing in *Huangdineijing* should be related to those concepts. In short, the concept of nursing as represented in *Huangdineijing* is summarized as the word *yang* (養), which means nurturing or nursing. As mentioned, *gi* is the most essential element in a person's health. A person is considered healthy if she has plenty of good *gi*. In *Huangdineijing*, "*yang gi*" means "nurturing *gi*." However, there is bad *gi* as well as good *gi*. Good *gi* is *saeng gi* (lively *gi*: 生氣) and bad *gi* is *sa gi* (deadly *gi*: 死氣). Therefore, the art of nursing aims at "nurturing lively *gi* (*yang saeng gi*)."

Yang saeng (養生) has become an idiom, meaning healthcare in traditional Chinese medical philosophy and practice.* The method of nursing lively *gi* varies. *Huangdineijing* is one of the first texts that proposed the logic of *yang saeng* and the practice itself. According to *Huangdineijing*, the way of *yang saeng* is represented by one's being in harmony with her external environment, including the natural environment. For example, in spring, being in harmony with spring's *gi* is the way of *yang saeng*.† If a person behaves in such a way that she is against spring's *gi*, it means that

she behaves against the theory of the 5 elements and, therefore, her behavior harms her health.

Nursing in *Donguibogam*

A similar logic has been found in a text on traditional Korean medicine, *Donguibogam*, which was written by a Korean. *Donguibogam* has been the basic text of traditional Korean medicine since it was first published in 1613. Heo Jun (1546-1615), who served as a doctor for the king in the court of Chosun Dynasty (1392-1910), Korea, wrote this book as an encyclopedic compilation of Chinese and Korean medicine. The conceptual framework in *Donguibogam* is not different from those of other Chinese texts in general. In *Donguibogam*,¹¹ the concept of *gi* is explained as the origin of life, whereas "disease" is the state in which *gi* is unbalanced. According to *Donguibogam*, the balance between the *gi* of *yang*'s characteristic (*yang gi*) and *eum*'s (*eum gi*) is important for a good health. Balance, and thus a state of optimal health, is achieved when a person preserves *yang gi* well and keeps *eum gi* evenly. The 5 elements are also mentioned in this text. For example, in pharmacy, the theory of the 5 elements is incorporated with the concepts of *gi* and *eum-yang* in classifying the ingredients of medicine and determining prescribed medicines for particular illnesses and ailments.

In *Donguibogam*, in terms of *yang saeng* or nursing lively *gi*, the term "*jeong gi*" (精氣) or "essential *gi*" appears important. In *Donguibogam*, nursing lively *gi* (*yang saeng*) focuses on how to nurture essential *gi* (*jeong gi*). According to *Donguibogam*, nursing essential *gi* is the "way of longevity."¹² However, the term "essential *gi*" is not fundamentally different from the term "lively *gi*" or "*gi*" itself. As lively *gi* is another expression of good *gi*, essential *gi* is also the expression of highlighting the characteristic of *gi* that is essential to life. The words "essential" and "lively" function as

*The term *yang* appears throughout *Huangdineijing*. The term *yang saeng* (養生) has been understood as one of the typical Chinese methods of maintaining health. It is often referred to in Taoist traditions of healthcare. Therefore, its interpretation varies in different traditions.

†春氣之應 養生之道

*養其精氣則 性命長存矣

adjectives to stress certain characteristics of *gi*. The term *jeong* is often translated as "essence." Beal interprets *jeong* (pronounced jing in Chinese) as "the material basis of ch'i (*gi* in Korean)."^{11(p77)} However, in the context of *Donguibogam*, if *jeong* is the material basis of *gi*, it is incompatible with the notion that *gi* is the beginning of the human body. In the context of *Donguibogam*, *gi* cannot have any material basis. Therefore, when the word *jeong* is used with *gi*, *jeong* functions as an adjective and highlights a certain characteristic of *gi* such as *gi*'s characteristic of "becoming the essence of things."

NURSING IN THE KOREAN CONTEXT

In short, the ultimate goal of medical practitioners in traditional Korean medicine is "nurturing good *gi*" so that a person can maintain good health. According to the texts, "nurturing good *gi*" also encompasses the interrelated concepts of *eum-yang* and the theory of the 5 elements. The traditional Korean medical practitioner's practice aims at guiding a person to living her life according to the logic of the 5 elements and, as a result, her *eum-yang* will be well-balanced and her *gi* will be flowing smoothly.

Through reviewing the core concepts of *Huangdineijing* and *Donguibogam*, we found that the basic theory of traditional medicine is different from Western medicine and focuses more on "nurturing" a person's good health and balance. Nurturing lively *gi* (*yang saeng*), one of the main concepts of traditional Korean medicine, is in line with Nightingale's notion of "Nursing was to be designed to assist nature in healing the patient."^{12(p21)} She differentiated nursing from medical knowledge by suggesting that nursing is broader than medical knowledge that focused on "cures" and that nursing has the goal of assisting in the healing process of the patient. Moreover, the concept of nurturing lively *gi* is congruent with the notion of Mary E. Levine about nursing that nursing intervention is "to maintain a state of wholeness" and "to promote adaptation that contributes to health and restoration of health."^{12(p44)} This may infer that there are lots of possibilities

for nursing to build its knowledge in the context of traditional Korean medicine. Nurturing lively *gi*, the core concept of traditional Korean medicine, is closer to the modern Western concept of nursing, suggesting a discipline related more to caring and healing than to medicine.

In each traditional culture, there has been a local tradition of medicine before "modern" medicine became the predominant method of medical practice. In some cultures, there are more than 1 traditional method competing and cooperating with each other. In many Western countries, there were local traditions of medicine that existed before the modern era of medicine. In each local tradition of medicine, the way of interpreting and treating symptoms is different.

Since the knowledge and practice of modern Western medicine began to be "the medicine" in the world, other kinds of medical traditions have defined themselves in terms of how different or similar they are from or to "the medicine." Whereas nursing positions itself as a different discipline from modern Western medicine, other local knowledge and healthcare practices are categorized as "alternative" medicine. In other words, modern Western medicine is positioned in the center of the world of healthcare and other kinds of knowledge and practice are positioned around it. Except for modern Western medicine itself, other knowledge and practice of healthcare defines itself by explaining its relationship with modern Western medicine but does not always explain its relationship with each other.

South Korean society currently has 3 major categories of healthcare: medicine (modern Western medicine), alternative medicine, and nursing (modern Western nursing). Western medicine is in the center of the medical care system. Traditional Korean medicine called *hanuibak* encompasses the largest part of "alternative medicine," especially in South Korea. Whereas Korean nursing defines itself in terms of its close relationship with modern Western medicine from the beginning, it does not define itself in relationship to

traditional Korean medicine. Neither nursing scientists nor researchers in traditional Korean medicine realize the great importance of having an interest in each other.

Recently, interdisciplinary practice between modern Western medicine and traditional Korean medicine began to be established in the traditional Korean medical sector. Traditional Korean medicine hospitals and clinics need nurses' help for their medical care. However, research on nursing

in relation to traditional Korean medicine is relatively rare.

This article is a pioneer work to consider the discipline of nursing in relation to traditional Korean medicine. In terms of core concepts, nursing and traditional Korean medicine share common features with each other. On the basis of these common features, cowork in practice should be more developed and articulated. This will add new characteristics to the history of Korean nursing.

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