

Scientizing Traditional Medicine : Cho Honyong and Kim T'aejun's Debates in Newspapers on Traditional Korean Medicine in the 1930s

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Scientizing Traditional Medicine: Cho Hōnyōng and Kim T'aejun's Debates in Newspapers on Traditional Korean Medicine in the 1930s

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This paper explores the 'scientific' transformation of ideas on traditional Korean medicine focusing on Cho Hōnyōng and Kim T'aejun's Debates in newspapers in the 1930s. After confronting Western medicine, traditional medicine had been developing and institutionalized in different ways and shapes in East Asia. In this process, scientizing traditional medicine was the priority task. However, if traditional medicine had to confront and adjust themselves to so-called 'scientific' Western medicine, was it about the layer of methodology or even reach the theoretical layer? The debates between Cho Hōnyōng and Kim T'aejun show the hazy lines of this discourse. Kim set aside the *yin yang* theory from traditional medical practice and tried to absorb it to the 'scientific' theory and methodology, which means a materialistic view in his context. On the other hand, Cho didn't deny Kim's theory and methodology but rather tried to compromise traditional medicine thoughts and Western knowledge. Cho believed that it could be possible to explain and *yin yang* theory in a scientific method. Through the conversations between the two, the complex meaning of 'scientific' was revealed, and was possible to see the one side of the discussion of 'what is scientific' to traditional medicine. The scientization of traditional medicine in Korea was carried out in two areas, the theoretical and practical dimensions, respectively, or simultaneously. The series of debates between Cho and Kim can shed a light on the various ways of scientization and the different junctions where traditional medicine in East Asia headed after.

Keywords: Traditional Medicine, Korean Medicine, Debates over Eastern and Western Medicine, Cho Hōnyōng (1900–1988), Kim T'aejun (1905–1949)

I. Introduction

Traditional Korean Medicine¹⁾ is still accepted as one mainstream medical treatment in Korea,

1) Terminologies are complex and not unified in the history of medicine of Korea. This is important to clarify and is needed to discuss but in this paper, I will use five terms; 1) Traditional medicine refers to the traditional medicine in East Asia, which began in China and is widely spread in East Asia including traditional Chinese medicine, Japanese Kanpo, and Korean medicine. 2) Traditional Korean medicine (TKM) refers to Korean medicine which was written and studied in a classical methodology and language. 3) Korean medicine refers to a contemporary form of KM (*hanŭi* 韓醫), which is practiced as a medical treatment in South Korea. 4) Eastern medicine or Eastern doctor is borrowed expressions from the primary sources, which were widely

and Korean Medicine Doctors(KMD) are performing various treatments not only acupuncture but making a diagnosis, physical therapy, and prescript herbal medicine. Since Kwanghyewon(廣惠院, later Chejungwon), the first modern hospital, opened in 1885 by Horace N. Allen, many western medicine hospitals were established subsequently. The treatments and theories of traditional medicine were regarded as backward and unscientific medicine and considered as one of the old customs to be replaced by Western Medicine. Confronting with Western Medicine and the inner criticisms, enhancement, and development were the top priorities of the Eastern doctors. For this, traditional medicine doctors opened medical schools or training institutions, and Eastern medicine revivalists actively published articles in newspapers and also organized associations and published journals such as *A Bulletin of East and West Medicine* (*Tongsö ūihakbo* 東西醫學報), *East and West Medicine Research Society Monthly View* (*Tongsö ūihakyön'guhoe wölbo* 東西醫學研究會月報) *Eastern Medical Herbs* (*Tongyang ūiyak* 東洋醫藥), *Medicine of Ch'ungnam* (*Ch'ungnam ūiyak* 忠南醫藥), and so on. They built up the spaces of discourses on traditional medicine in journals (Suh 2013).

Researches on this were widely conducted by historians and Korean Medicine researchers. The institutional changes of TKM in the twenty century and the activities of Eastern medicine revivalists were examined by historians and the traditional medicine department²⁾. The comparison of traditional medicine in East Asia has been conducted mainly by anthropologists and medical science researchers (Yi and Kim 2018). In 2003, scholars of East Asian philosophy and Korean Medicine co-researched and published *East Asian Philosophy and Traditional medicine* (*Tongyangch'örhak kwa hanūihak*), which attempted the interdisciplinary approach to TKM (S. Park 2003). In Western academia, TKM has been researched as a peripheral part of traditional Chinese medicine or Asian studies, which is also not mainstream in the field of history of medicine (S. M. Kim 2010; Suh 2017).

However, the discourse of Eastern and Western medicine during the early 20th century in Korea was mainly focused on the dichotomic relations among them. In this context, Western medicine is regarded as one counterpart of traditional medicine. This paper, however, starts with the question 'What is scientific medicine?' and aims to decompose the perceptions of Western medicine. If traditional medicine had to confront and adjust themselves to so-called 'scientific' Western medicine, was it about the layer of methodology or even reach the theoretical layer? The debates between

used as a counter term against Western medicine/doctor in the modern period. This is a synonym of TM or TKM depends on the context. 5) Western medicine is a translation of 'Sōui 西醫' and which the medical knowledge and practice adapted from Europe and North America. It is also used as a relativized term of traditional medicine. For more discussion on the terminology, please refer to Sonja M. Kim (2010), "In the Margins: Writing on Medicine in Korea After 1876," and Volker Scheid (2002), *Chinese Medicine in Contemporary China: Plurality and Synthesis*.

2) Please refer to the series of Kim Namil, Shin Donwon, Park Yunje, Jung Jihun, and Hwang Youngyuan's works.

Kim T'aejun and Cho Hōnyōng show the hazy lines of this discourse. This implied that the transformation of traditional medicine was not headed one way but had been merged and developed in different directions with various ideas. Regarding colonial Korea as a sphere where could see the transformation and cluster of conflicts ideas from the West, Japan, and China, these multifaceted developments of traditional medicine during the colonial period could explain the background and the current existence of traditional medicine in East Asia.

II. A Brief History of Traditional Medicine in Modern Asia

When Western medicine entered East Asia with its scientific method, traditional Medicine was questioned, suppressed, and faced to reform themselves. TKM had to overcome a drastic fall in status for traditional medicine in Korea at the end of the nineteenth century and the first half of the twentieth (Baker 2006, 148). In the case of Japan, several Western physicians came to Japan already in the early 17 century. In Early 1874, the Meiji government established the Department of Medicine in the Ministry of Culture and required all doctors to pass an examination in six Western-medical subjects from 1875 (Andrews 2014, 76). In 1879, the 'Medical License Examination Regulations' were promulgated, establishing a system whereby only candidates who had studied Western medicine were eligible for a license to practice medicine (*Japan's Experiences in Public Health and Medical Systems: Towards Improving Public Health and Medical Systems in Developing Countries* 2005, 15). As the result, there is no licensed traditional doctor in contemporary Japan, but the (Western) doctors can perform all kinds of medical treatment including traditional medicine (Sōng and Shin 1997a).

In Korea, Japan promoted its 'advanced' Western medicine after the Kanghwa treaty in 1876. On the other hand, the first modern hospital, Kwanghyewon opened in 1885 by Horace N. Allen. Followed by these two events, many western medicine hospitals were established in Korea subsequently. Korean empire government promulgated 'Medical License Regulation' in 1900 which embraces both Eastern and Western doctors (I.-S. Yeo et al. 2002). After 1910, the Japanese Government-General of Korea tried to take a unicameral medical system based on Western medicine and promulgated a 'Ūisaeng Regulation' in 1913, and degraded traditional Korean medicine doctors to an 'apprentice of medicine' (ŭisaeng 醫生). It seemed that TKM was in danger of existence after the implant of Western medicine. However, TKM was not disappeared but rather expanded in some aspects. The competition between Eastern and Western doctors was intensified in the 1930s. Traditional medicine doctors, enhanced and developed their medical theory and practice confronting with 'scientific' knowledge of Western medicine. While going through the period of the liberation and Korean War, the two Koreas headed in different directions. In South Korea, the 'National Medical Act' was introduced in 1951, September 9, and adopted the bicameral medical system, which

includes traditional and Western medicine. Though traditional medicine had to face several crises of existence but had kept its status in the field of medicine in South Korea. In the case of North Korea, Kim Ilŏng insisted on research and promoting traditional medicine at the 3rd Labor Party Conference in April 1956, and traditional medicine was approved as a part of national medicine. Now the traditional medicine, *Koryŏ ūihak* 高麗醫學 in North Korean term, is taking the largest part of the medical field in North Korea (D. Shin 2003).

In China, some radicals argued that they have to throw all the traditional culture for modernization, and denied the *yin yang wu xing* theories which were the core of traditional medicine, and treated them as absurd feudalism and unscientific (R. R. Wang, n.d., 16). In 1922, the Chinese government promulgated the 'Ministry of Internal Affairs enacts provisional regulations governing physicians regulation' in contradistinction to Western doctors, TCM doctors were designated as medical scholars (*Yishi* 醫士), which was a differentiated word in status. Some TCM supporters insisted to integrate or combine two medicines, and the voice of scientization of TCM arose after the May Fourth Movement in 1919 (F. Wang 2021, 17). After the founding of the People's Republic of China, the view and uses of TCM had been changed. They emphasized the cooperation between Eastern and Western Medicine, and TCM was re-examined. The new provincial Chinese medical hospital was opened in April 1954 and medical schools were also established such as Jiangsu Province Chinese Medical School and School for the Further Education of Trainee Teachers in Chinese Medicine (Taylor 2004). TCM was led by the government and was standardized (Yi and Kim 2018, 50).

In Taiwan, the Japanese Government-General in Taiwan applied the same regulation on doctors as they did in Japan mainland and Korea. As the result, the number of traditional medicine doctors was only ten after the liberation. However, the Taiwan government started to focus on traditional medicine in the 1970s; it was controlled by the Taiwan Centers for Disease Control and published a TCM doctor license who passed the national examination (Sŏng and Shin 1997b).

Through this transformation, traditional medicine is performed as a medical practice and cooperated with the national health care system in mainland China, Taiwan, and Korea, and as an absorbed form in Japan.

III. The Debates between Eastern and Western Medicine

In the late 19th and the early 20th centuries, TKM was compared to Western medicine and was criticized by intellectuals who adapted Western knowledge and civilization. However, major traditional intellectuals were regarded two different medicine as contrasting ones (I. S. Yeo 2007, 163). The main criticisms of TKM were on the lack of anatomic knowledge and misuses of acupuncture treatments including the sanitary problem. Regarding these criticisms, many people

who worked for TKM understood the necessity of innovation and adaptation Western medicine knowledge, they were rather receptive to adopting some Western medicine knowledge. Not many but a few Western medicine doctors also tried to accept and develop TKM such as Chang Kimu and Pang Hapsin. The rivalry among them visibly appeared in newspapers in the 1930s, so-called 'Debates over Eastern and Western Medicine.'

This series of debates broke out when Chang Kimu (1886-?) published three articles "The Scheme of Revival Traditional Medicine" 1-3 on *Chosŏn Ilbo* in February 1934. Western medicine doctor Chōng Kūnyang reacted and criticized Chang's writing, and argued that traditional medicine should not be institutionalized independently. Later Lee Ūlho(1910-1998) and Cho Hōnyōng were involved and supported TKM in these debates. These debates changed the geography of medicine in Korea and TKM was revived after its long recession since 1910 (Yunjae 2018). Another series of debates between Eastern and Western medicine was conducted between Kim Chakang and Yu Hanch'ol in the early 1940s(Yunjae 2018). Through those debates, Eastern medicine revivalists had reconstructed the identity of Eastern medicine to overcome the negative identity of traditional medicine, which was created in the dichotomy of pre-modern/modern, non-science, etc., and to ensure that Eastern medicine sits side by side with Western medicine (Jeon 2011, 87). Jeon estimated that the discourse created in the debate played a role in justifying the existence of traditional medicine workers who had not established their identity in a mixture of traditional medicine and Western medicine.

Between the two debates, however, there was another debate on Eastern and Western medicine in the mid-1930s: Cho Hōnyōng and Kim T'aejun's debates in newspapers. This was not popular compared to the previous debates and has been not discussed in the research on the 'Eastern and Western Medicine Debates.' One reason is that there was a time interval between Cho's writing and Kim's replies. Secondly, both Kim and Cho were not doctors in TKM nor Western. Kim was a scholar who studied Chinese literature and Cho studied English literature but later devoted himself to study on TKM. Precisely, Cho could be labeled a TKM scholar. In this sense, it seems bizarre that Cho and Kim had debates in the newspaper. However, this is important to see the different development and perceptions of TKM and will shed a light on understanding the traditional medicine in East Asia.

Kim T'aejun(1906-1949) was a Koreanist during the colonial period. He majored in Chinese language and literature at Keijō Imperial University and taught Korean literature there later. Though his speciality was Chinese language and literature, Kim devoted himself to studying Korean literature and wrote *History of Classic Korean Literature* in 1931 and *History of Korean Novels* in 1933. In ten odd years, he left 110 writings including articles, essays, and contributions to newspapers (C. Kim 1988). He wrote about not only Korean literature but also Korean classics in general. He was a socialist, and his works also contained the socialistic method and thoughts.

Cho Hōnyōng(1900–1988) was born in Kyōngbuk province and originally studied English Literature at Waseda University in Japan. He started to study TKM in his 30s. Cho provoked to establish the journal *East-West Medicine* in 1934 and became the editor and publisher. Cho is famous as the main debater of ‘Eastern and Western Medicine Debates’ in the 1930s. Cho Organized the research society of Eastern and Western in 1936 and promoted a lecture series “A Popular Traditional Medicine,” and published *The Theory of the Popular Traditional Medicine (T’ongsok Hanūihak Wōllon)* in 1934. During Korean War, Cho was kidnapped to North Korea, and worked as a professor of the Traditional Medicine Department at Pyongyang University.

The beginning of this series of debates was Kim’s article in *Dong-A Ilbo*. Kim published his essay “Random Thoughts by Reading Through Classics(*Kojōnsōmnyōpsugam*)” 1~7 serially in 1935. Kim used his penname ‘Ch’ōt’aesanin’ here. As the title implies, Kim freely and randomly discussed many things and subjects he was interested in. In the second article on 13 February, Kim criticized the *yin yang wu xing* theories of traditional medicine:

What leads us to make a bitter smile, it could be the influence of the clamor for the religious revival, is that traditional Korean physicians have started to reclaim the *yin yang wu xing* theory. Though Guo Moruo and Hu Qiuyuan’s studies on *yin yang wu xing* theories have been overthrowing traditional Chinese medicine, it is desperately a sensational issue that a young student like Cho Hōnyōng converted from the scientific world to the mystic world. I do not neglect the treatment and taking the herbal medicine itself, but aimed to cut and remove the *yin yang wu xing* theories which were the foundation of its philosophy from the basis. (T. Kim 1935)

It seems Kim was following the ‘Debates over Eastern and Western Medicine’ in 1934. It can be interpreted Kim had a dichotomous idea of ‘Traditional knowledge=old and unscientific’ and ‘Western knowledge=scientific’ by seeing his writing above. Among other Eastern medicine revivalists who attended the debates in 1934, only Cho was designated. It is because, in this schematic, Cho who had studied Western knowledge but supports TCM was a heterogeneous one to Kim. Cho replied these provocative words from Kim; A few weeks later, Cho wrote six articles with a provocative title “To Enlighten Ch’ōnt’aesanin’s Inanity” in *Dong-A Ilbo*, and said, “I felt a responsibility to say a word against the (Kim’s) irresponsibly commenting on the *yin yang wu xing* theories in traditional medicine, for the authority of oriental studies, for the development of traditional medicine, and the health of human.” (Cho 1935a) Cho strongly denied the idea of Kim, which to remove *yin yang wu xing* theories from traditional medicine and asked back what is ‘scientific.’

There is no traditional medicine theory apart from the *yin yang wu xing* theories, and there is no Eastern medicine treatment regardless of traditional medicine. However, it is certainly reckless to try to deny only the theories of traditional medicine but cannot deny the effectiveness of traditional medical treatment. ... What does Ch'ōnt'aesanin know is scientific and what does not Ch'ōnt'aesanin know is unscientific and mysterious? Are they scientific what comes from German or English original texts and others are mysterious? ... Therefore, I will try to pioneer the part that we do not understand now as the subject of research, and another part we can understand now should be further developed theoretically. (Cho, 1935c)

The first four articles of "To Enlighten Ch'ōnt'aesanin's Inanity" are focusing on the refutation of Kim's writing. The last two articles are explaining the *yin yang wu xing* theories compared with dialectic and Western medicine. Interesting thing is that Cho didn't deny Kim's but tried to embrace the dialectics in ying yang theory. Cho insisted thesis-antithesis-synthesis formula can be explained by yin yang theory (Cho 1935c). In the last article, he spread his compromising theory between Eastern and Western medicine: 'Modern Medicine and *Ying Yang* Theory,' '1. Biochemistry and *Ying Yang* Theory,' '2. Biophysics and *Ying Yang* Theory,' '3. Physiology and *Ying Yang* Theory,' and '4. Organs and *Wu Xing* theory.'

Kim had been in silence for years and didn't respond to Cho's arguments. It seemed Kim learned from Cho and accepted his ideas on traditional medicine. In 1936, Shin Kilgu(1894-1974) summarized this series of debates and commented that Kim's critics on traditional medicine were "a slip of a wise man" and this wouldn't be happened "if Chont'aesanin appreciated the theories in *The Yellow Emperor's Inner Canon*." Continually Shin mentioned Cho's responses to Kim and it will be helpful to "Chont'aesanin as well as people who are shortage of understanding in traditional medicine" (K. Shin 1936). Kim, however, broke two years of silence and finally replied with four articles of "A Review on Five Elements Theory" in the newspaper *Chosŏn Ilbo*, November 1937. Kim raised the relationship between wu xing theory and the four elements theory in India and in the final article, he put a subtitle 'To tell to a traditional medical researcher' and replied to Cho.

However, the reason why Eastern medicine can be criticized is that Eastern medicine is also an academy that has one unifying principle. It would be said scientific method which was discovered in modern times, even if I didn't study that subject deeply but can criticize the basic principles of that subject. ... Of course, I also believe that the *yin yang wu xing* theories, which naturally grew ancient oriental materialism, are not unscientific or mysterious by themselves. ... The theory of pseudo-*wu xing* theory of Europe is reaching the best materialism again. If we borrow the methodology, we can easily solve all the mysteries of oriental studies and advance them in a new direction. (T. Kim 1937)

Kim framed traditional medicine as one academic subject and regarded that it could be reconstructed within 'scientific' methodology, which means a materialistic view in his context. Doing so, he believed that traditional medicine could be reformed again as a scientific subject from the 'mysterious' oriental studies. Cho didn't answer this. He might don't know the existence of these writings or might find the unfillable gap between Kim and him.

IV. What is scientific medicine?

The 'West' in Western Medicine mainly refers to Europe and North America, and Western modern medicine can be defined as a positive, scientific, and annalistic medicine (Kwön 2004). However, the perceptions of 'scientific' were not the same in the debates of Cho and Kim. As we have seen above, the discourses went in parallel lines. Kim criticized Cho for "cannot understand this(scientific) methodology and misinterpreted" (T. Kim 1937). What does Kim's 'scientific methodology' mean? There are controversial evaluations on Kim T'aejun in Korea: A positivist or a materialist. Chun argued that Kim was evaluated as a positivist because he learned positivism at Keijō Imperial University but positivism was a methodology of his works and regarding his ideological tendency, he should be evaluated as a scholar based on socialism as the historical view of literature (Chun 2004). Yi argued that positivism and materialistic attitude are only parts of Kim's academic methodology and attitude (Beom 2014).

Kim criticized the theories of traditional medicine based on Chinese scholar, Guo Moruo(1892-1978). His monography *Researches in Ancient Chinese Society* overturned the world of traditional Confucian structures and presented a new ancient history of China based on the materialistic view of history (Beom 2014). Kim was heavily influenced by his work and quoted his book many times in "Random Thoughts by Reading Through Classics." In this regard, Cho clearly understood that the methodology and main thoughts of Kim's criticism of traditional medicine are based on Guo's. He doubted Guo's logical structure and comment they are 'lost his fair and cold attitude' and 'erroneous.'

Another thing to think about is that Guo is both a Marxist scholar and an enthusiastic social revolutionary who led the army from an actual war camp. ... Therefore, it is undeniable that Guo's research on Chinese classics has already lost his fair and cold attitude at the starting point, so the consistent spirit in the book has made efforts to reduce the value of China's unique culture. Of course, there are many theoretically justified criticisms, but none of them have understood the nature of oriental studies (although he may have consciously done) and have made erroneous conclusions that disparage oriental studies. ... Therefore, we cannot fully admit Guo's criticism of oriental studies uncritically. (Cho 1935b)

Nevertheless, as we have seen above, Kim's perspective had not been changed. For Kim, the fundamental theories of traditional medicine can be apart from the medical practice and can be replaced by the 'scientific theory,' which is materialism. The thinking to divide the theories and practice of traditional medicine, and should adapt only scientifically approved medical practice, mainly herbal medicine, were not only Kim's ideas but also discussed by Western medicine doctors and even inside of Eastern medicine revivalists (Y. Park 2007). However, we should remember that Kim also aimed to 'cut and remove the *yin yang wu xing* theories' from traditional medicine in 1935, but he changed his attitude after the debates. In 1937's writings, he tried to reform the *yin yang wu xing* theories based on the materialistic view of history and adapt and develop the medical practices based on positivism.

To Cho, however, it is impossible to divide the theory and practice, but he believed the yin yang theory can embrace and adjust the scientific knowledge, both theoretically and practically. According to Cho, traditional medicine was a deductive knowledge that sublimated the thousands of years of human experience into the law of the universe (Y. Park 2007) and he adopted this principle to explain the relationships of body and mental, nature and human, personalities, and many others. He believed that the relationship between Western theories and medicine also can be explained with this principle, and he insisted the reason that it was misunderstood as unmodern or unscientific was the improper method of explanation or ignorance of people (Cho 1934).

Looking at the results, traditional medicine achieved a certain reorganization in many East Asian countries. In Schied's book, *Chinese Medicine in Contemporary China: Plurality and Synthesis*, it can be found the result of the association of Marxian dialectic materialism and traditional medicine, in the field of contemporary TCM.

Contemporary applications of formulas from the *Shanghan lun*, for instance, are derived not from direct readings of the original text but from the interpretations of later scholar-physicians who are today remembered collectively as the Cold Damage scholarly stream (*shanghan xuepai* 伤寒学派). ... the shanghan tradition is its reconciliation with dialectical materialism in which ghosts and demons no longer exist. While this particular historical vision is firmly rooted in Marxian dialectic materialism and associates medical practices and ideas with specific social formations, it never surrenders to an entirely Western modernism in which the older is consecutively replaced by the newer. The old can still possess value within the new, and modern physicians, therefore, must continue to study the work of ancient masters. (Scheid 2002)

The different forms and existence of traditional medicine in East Asia can be explained by the different policy and social structures, but it is also necessary to reconsider the aspect of

convergence and transformation at the theoretical level. Cho and Kim's debates could provide a meaningful point of view for examining the transformation of modern and contemporary traditional medicine in East Asia.

V. Conclusion

Traditional medicine including TKM had to confront Western medicine in the modern era. The tension between traditional medicine and Western medicine was significant in the late eighteenth centuries and early twentieth centuries in East Asia and each country. To correspond and react to these changes, scholars and doctors attempted to adapt the 'scientific method' to TKM, to reform themselves, and to insist on the traditional values of TKM. It was argued as one-to-one correspondence: Western 'scientific' medicine and Eastern 'unscientific or to-be scientific' medicine. However, traditional medicine was questioned by various Western ideas and transformed in different directions. Recognizing that scientization of medicine was an important task, it has been recognized as if there was only a single direction in scientization, and it has not been fully discussed what the directions were. However, depending on how you accept the word 'scientific,' the point of view of traditional medicine varies, and this is connected to the future forms of transformation in traditional medicine.

The dichotomic view on traditional medicine and Western medicine made us easily forget or simplify the various directions where traditional medicine walked. The parallel debates of Cho and Kim's imply the margins we have been missing. Some scholars in the modern era deconstructed traditional medicine and partially selected and absorbed the Western theories or methodology like pieces of a puzzle. To think about the transformation of traditional medicine, it was not a single subject but was divided into many parts.

Kim was materialist and socialist theoretically but was positivist in methodology. In the first writing, he insisted on the removal of *yin yang* theory from traditional medicine, but he resorbed the *yin yang* theory and insisted to reform it under the materialistic theory after the debates. On the other hand, Cho tried to compromise traditional medicine thoughts and Western knowledge, and he believed that it could be possible to explain and *yin yang* theory in a scientific method. Through the conversation between the two, the complex meaning of 'scientific' was revealed, and was possible to see the one side of the discussion of 'what is scientific' to traditional medicine. The scientization of traditional medicine in Korea was carried out in two areas, the theoretical and practical dimensions, respectively, or simultaneously.

Traditional medicine is widely performed in East Asia in various forms. In many cases, the doctors have the same status as Western doctors have. In Korea, however, the translation of the KM into the scientific language is still an unsolved matter and attempted contemporary KM field

(J. Kim 2007). On the other hand, in China, TCM is attempted at professional unification in the face of threats posed to the existence of Chinese medicine by proponents of Western science from the 1920s onward and standardized (Scheid 2002, 32). Going back to the first question and re-ask, 'what is scientific medicine?' The series of debates between Cho and Kim can shed a light on the various ways of scientization and the different junctions where traditional medicine headed after.

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