

Study on Knowledge, Attitude, and Practice Regarding TCM Preventive Treatment and Its Influencing Factors Among Community Residents in Guangzhou City: Post-print

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Abstract

Background With the transformation of disease spectra and the development of modern medical models, Traditional Chinese Medicine (TCM) plays a significant role in disease prevention, health care, and rehabilitation. It is imperative to further promote TCM “preventive treatment” services and vigorously develop the unique role of TCM in maintaining and promoting public health. However, the current status of popularization and education regarding the TCM “preventive treatment” concept among community residents remains unclear. **Objective** To investigate the overall awareness, trust, and adoption behaviors regarding TCM “preventive treatment” among community residents in Guangzhou, and to explore the factors influencing community residents’ trust in TCM “preventive treatment” services. **Methods** From April to August 2022, a stratified cluster sampling method was employed, considering geographical location (central urban area of Guangzhou, urban-rural fringe, suburban areas), economic factors, and other variables to select 652 community residents from 12 streets across 4 administrative districts of Guangzhou for interview-based questionnaire surveys. The survey content included basic demographic information, awareness of TCM “preventive treatment”, channels for obtaining TCM “preventive treatment” knowledge, trust in TCM “preventive treatment”, service demand, and utilization. An analysis of factors influencing community residents’ trust in TCM “preventive treatment” services in Guangzhou was conducted. **Results** Among the 652 community residents, 67.79% (442/652) were aware of TCM “preventive treatment”, 77.91% (508/652) trusted TCM “preventive treatment” services, 69.63% (454/652) had previously received traditional TCM physiotherapy, and only 6.59% (43/652) had received TCM “preventive treatment” services more than 4 times in the past year. Univariate correlation analysis revealed that

the main factors influencing community residents' trust in TCM "preventive treatment" services in Guangzhou were age ($\chi^2=9.218$), household registration type ($\chi^2=19.356$), marital status ($\chi^2=2.490$), occupation ($\chi^2=17.889$), and medical insurance payment method ($\chi^2=13.516$). Binary Logistic regression analysis indicated that household registration type (non-agricultural, agricultural-to-resident, non-agricultural-to-resident) was a factor influencing community residents' trust in TCM "preventive treatment" services (OR=2.646, 5.593, 10.502). Conclusion Community residents in Guangzhou demonstrate relatively high overall awareness (67.79%) and trust (77.91%) regarding TCM "preventive treatment", yet the actual frequency of service utilization is insufficient, indicating a phenomenon of separation between "knowledge, belief, and practice". Residents with non-agricultural-to-resident household registration exhibit higher trust levels, while those with agricultural household registration show lower trust levels. In promoting the TCM "preventive treatment" concept and service delivery, it is essential to fully utilize residents' preferred formats and intensify publicity efforts targeted at specific populations to foster the development of TCM "preventive treatment" health preservation habits among community residents.

Full Text

A Study on Knowledge, Attitude, Practice and Influencing Factors of "Preventive Treatment of Disease" in Traditional Chinese Medicine Among Community Residents in Guangzhou

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Abstract

Background: With the transformation of disease patterns and the development of modern medical models, Traditional Chinese Medicine (TCM) plays an important role in disease prevention, health care, and rehabilitation. It is necessary to further promote the development of TCM "preventive treatment of disease" services and vigorously promote the unique role of TCM in maintaining

and promoting people's health. However, the current status of popularization and education of the TCM "preventive treatment of disease" concept among community residents remains unclear.

Objective: To understand the overall awareness, trust, and adoption behavior regarding TCM "preventive treatment of disease" among community residents in Guangzhou, and to explore the influencing factors of community residents' trust in TCM "preventive treatment of disease" services.

Methods: From April to August 2022, a stratified cluster sampling method was used to conduct interview-based questionnaire surveys with 652 community residents from 12 streets in 4 administrative districts of Guangzhou, considering geographical location (central urban area, urban-rural fringe, and suburbs) and economic factors. The survey content included basic resident information, awareness of TCM "preventive treatment of disease", channels for obtaining knowledge about TCM "preventive treatment of disease", trust in TCM "preventive treatment of disease", and service demand and utilization. The influencing factors of community residents' trust in TCM "preventive treatment of disease" services were analyzed.

Results: Among the 652 community residents, 67.79% (442/652) understood TCM "preventive treatment of disease", 77.91% (508/652) trusted TCM "preventive treatment of disease" services, 69.63% (454/652) had received traditional TCM physiotherapy, and only 6.59% (43/652) had received TCM "preventive treatment of disease" services more than 4 times in the past year. Univariate correlation analysis showed that the main influencing factors of community residents' trust in TCM "preventive treatment of disease" services were age ($\chi^2=9.218$), household registration type ($\chi^2=19.356$), marital status ($\chi^2=2.490$), occupation ($\chi^2=17.889$), and medical insurance payment method ($\chi^2=13.516$). Binary Logistic regression analysis showed that household registration type (non-agricultural, agricultural-to-resident, and non-agricultural-to-resident) was an influencing factor of community residents' trust in TCM "preventive treatment of disease" services (OR=2.646, 5.593, 10.502).

Conclusion: The overall awareness (67.79%) and trust (77.91%) of TCM "preventive treatment of disease" among community residents in Guangzhou are relatively high, but the actual frequency of service utilization is insufficient, indicating a phenomenon of "knowledge-attitude-practice" separation. Community residents with non-agricultural-to-resident household registration have higher trust, while those with agricultural household registration have lower trust. In promoting the concept and services of TCM "preventive treatment of disease", it is necessary to fully utilize residents' preferred formats and increase publicity efforts for specific groups to promote the cultivation of health maintenance habits using TCM "preventive treatment of disease" among community residents.

[Key words] Traditional Chinese Medicine; Preventive treatment of disease; Knowledge-attitude-practice; Surveys and questionnaires; Guangzhou

“Preventive treatment of disease” is the theoretical core of Traditional Chinese Medicine (TCM), encompassing three aspects: prevention before illness occurs, preventing deterioration after illness onset, and rehabilitation after illness [1]. It represents a preventive philosophical concept that covers the entire process of TCM health care, prevention, wellness, medical treatment, and rehabilitation, embodying the distinctive characteristics of TCM in preventive health care [2]. TCM preventive treatment focuses on identifying the root causes of diseases and is more suitable for managing increasingly diverse health issues [3]. Traditional Chinese medicine in China possesses the features of being “simple, convenient, inexpensive, and effective,” which can also help alleviate the current shortage of health resources and the problems of “difficulty and high cost of accessing medical care” for the general population. Therefore, TCM “preventive treatment of disease” health services represent a health management model that aligns with China’s current socio-economic development level and meets residents’ health management needs.

Currently, TCM “preventive treatment of disease” has formed a “trinity” operational model comprising constitution identification, health consultation and adjustment, and traditional therapies [4], serving a wide range of populations including high-risk groups for chronic diseases, women, children, and the elderly. However, there are still many problems in management and operation: insufficient government financial investment; lack of systematic service protocols and comprehensive service networks; insufficient staffing of relevant categories of physicians in community health service institutions, limiting service capacity; inadequate popularization of the TCM “preventive treatment of disease” concept, with community residents’ awareness and recognition of preventive health consciousness needing improvement [2,4-5]. These issues significantly hinder the advancement of the TCM “preventive treatment of disease” health project.

At present, the status of popularization and education of the TCM “preventive treatment of disease” concept among community residents remains unclear. The Knowledge-Attitude-Practice (KAP) theoretical model is a commonly used theoretical framework for comprehensive evaluation of health education and health promotion both domestically and internationally [6]. This study employs questionnaire surveys to understand and investigate the current status of knowledge, attitude, and practice regarding TCM “preventive treatment of disease” among community residents in Guangzhou, and to explore factors currently influencing community residents’ trust in TCM “preventive treatment of disease”, providing a basis for optimizing TCM “preventive treatment of disease” service plans, formulating intervention strategies, deeply advancing the TCM “preventive treatment of disease” enhancement project, and constructing a closed-loop management system with Guangzhou characteristics.

Methods

1.1 Study Subjects

A stratified cluster sampling method was employed. Considering geographical location (central urban area, urban-rural fringe, and suburbs of Guangzhou) and economic factors, four administrative districts in Guangzhou were selected as survey areas: Liwan District, Tianhe District, Baiyun District, and Huadu District. Three streets were randomly selected from each district for investigation, with approximately 50 people surveyed per street. The inclusion criteria for study subjects were: (1) permanent residents within the target communities; (2) residents capable of independently completing the questionnaire and clearly expressing their thoughts; (3) aged 20 years or above. Exclusion criteria were residents unwilling to accept the questionnaire survey. The final actual number of residents surveyed was 652, as shown in Table 1 .

Table 1 Information on TCM “Preventive Treatment of Disease” Questionnaire Survey for Community Residents in Guangzhou (persons)

Administrative District	Community Resident Survey Location
Tianhe District	Qianjin Street
Baiyun District	Sanyuanli Street
Liwan District	Dongjiao Street
Huadu District	Huacheng Street / Xinhua Street

1.2 Research Methods

This study used a self-designed questionnaire, which was reviewed by experts before administration. Trained primary healthcare professionals and postgraduate students majoring in public health management served as investigators, conducting one-on-one surveys with community residents. Respondents completed the questionnaire on-site, with investigators providing clarification and quality control, and checking and collecting the questionnaires immediately. The questionnaire content included basic resident information, awareness of TCM “preventive treatment of disease”, channels for obtaining knowledge about TCM “preventive treatment of disease”, trust in TCM “preventive treatment of disease”, and service demand and utilization. Detailed questionnaire items are summarized in Table 2 .

1.3 Statistical Methods

Questionnaire data were entered using the Wenjuanxing online platform, with two postgraduate students entering data simultaneously for cross-verification. SPSS 25.0 software was used for statistical analysis. Normally distributed measurement data were expressed as means, and count data were described using frequency and composition ratio. Descriptive analysis was conducted on patients’ basic information using chi-square tests. In the analysis of community

residents' acceptance willingness of TCM "preventive treatment of disease" services, "very willing" and "willing" were assigned a value of 1, indicating "trust", while "not very willing", "very unwilling", and "uncertain" were assigned a value of 0, indicating "distrust". Residents' trust level was used as the dependent variable, and possible influencing factors were analyzed using 2 tests and binary Logistic regression analysis. The binary Logistic regression used a stepwise forward method. $P < 0.05$ was considered statistically significant.

Results

2.1 General Information

A total of 652 questionnaires were collected in this survey, including 185 males and 441 females. The age distribution of community residents was relatively even. Specific information on education level, household registration type, marital status, monthly income, occupation, and medical insurance payment method is shown in Table 2.

2.2 Community Residents' Awareness of TCM "Preventive Treatment of Disease"

The overall awareness rate of TCM "preventive treatment of disease" among community residents was 67.79% (442 persons), with 31.6% (206 persons) still unaware, and 0.61% (4 persons) having missing data for this item.

2.3 Channels for Community Residents to Obtain Knowledge About TCM "Preventive Treatment of Disease"

The survey used multiple-choice questions to ask respondents about their channels for understanding TCM "preventive treatment of disease". Options included newspapers, books, and magazines; radio and television; mobile phones and internet; lectures and free clinics; family and friends; community publicity; hospital publicity; and others. The results showed that mobile phones and internet (41.87%), and community publicity (including community health service institutions and neighborhood committees) (41.87%) were the main channels for community residents to obtain knowledge about TCM "preventive treatment of disease", followed by family, friends, and neighbors (31.44%) and hospital publicity (29.29%). Details of other channels are shown in Table 3.

2.4 Community Residents' Trust in TCM "Preventive Treatment of Disease"

77.91% of respondents expressed trust in TCM "preventive treatment of disease" services ("very willing" and "willing"), while 20.40% expressed distrust ("not very willing", "very unwilling", or "uncertain"), as shown in Table 4.

2.5 Community Residents' Utilization of TCM "Preventive Treatment of Disease" Services

The survey asked respondents about TCM "preventive treatment of disease" service items they had received and the number of times they had received services in the past year. Among them, 69.63% (454 persons) of community residents had received traditional TCM physiotherapy, followed by TCM medicinal diet guidance and herbal paste conditioning (40.18%, 262 persons) and TCM constitution identification (38.04%, 248 persons). The utilization rate of emotional and psychological counseling services was relatively low (11.20%, 73 persons). 15.95% (104 persons) of respondents had never received TCM "preventive treatment of disease" services, as shown in Table 5 . Regarding service frequency, 56.90% (371 persons) of community residents had not received TCM "preventive treatment of disease" services in the past year, and community residents who had received services more than 4 times accounted for 6.59% (43 persons), as shown in Table 6 .

2.6 Analysis of Influencing Factors on Community Residents' Trust in TCM "Preventive Treatment of Disease" Services

Using gender, age, education level, household registration type, marital status, monthly income, occupation, and medical insurance payment method as independent variables, and trust in TCM "preventive treatment of disease" as the dependent variable, univariate correlation analysis was conducted. The results showed that age, household registration type, marital status, occupation, and medical insurance payment method were influencing factors of community residents' trust in TCM "preventive treatment of disease" services in Guangzhou ($P < 0.05$), as shown in Table 7 .

Using the five significant indicators from the univariate analysis (age, household registration type, marital status, occupation, and medical insurance payment method) as covariates, binary Logistic regression analysis was performed. The regression process used a stepwise forward method to enter the binary Logistic regression model, with $\alpha = 0.05$ as the significance level for variable entry and $\beta = 0.10$ as the removal level. The Omnibus test was used to test model coefficients, with $P < 0.05$ indicating that among the variables included in the fitted model, at least one variable's OR value was statistically significant, meaning the overall model was meaningful. The Hosmer and Lemeshow test was used to test the goodness-of-fit of the model, with a P value of 1 (i.e., $P > 0.05$), indicating that the information in the current data had been fully extracted and the model had high goodness-of-fit. In Logistic regression, multi-categorical variables with dummy variables are entered and removed as a whole; that is, as long as one group has a statistically significant OR value compared to the reference group, all groups of that variable are included in the model. The results showed that household registration type (non-agricultural, agricultural-to-resident, and non-agricultural-to-resident) was an influencing factor of community residents' trust in TCM "preventive treatment of disease" services in Guangzhou ($P < 0.05$), as

shown in Table 8 .

Discussion

3.1 Overall Awareness of TCM “Preventive Treatment of Disease”

Compared with research findings from 2011 by Yu Zhixin [9] and Wang Yingtang [10], and from 2017 by Nie Huanhuan et al. [11] on community residents’ awareness of TCM “preventive treatment of disease” in Shanghai and Changzhou, Jiangsu Province, this study shows that community residents’ awareness rate of TCM “preventive treatment of disease” has improved, with a relatively high overall cognitive level. Guangzhou established four TCM “preventive treatment of disease” guidance centers in 2019, included the TCM preventive treatment enhancement project as a major municipal government decision in 2020, and issued the “Guangzhou TCM Preventive Treatment Enhancement Project Action Plan” in 2021 [19], establishing a “three-dimensional management” model aimed at deeply advancing TCM preventive treatment work with health as the center and disease prevention as the focus, particularly among community residents, especially those with chronic diseases, mental disorders, and maternal and child populations. The popularization of the TCM “preventive treatment of disease” concept in Guangzhou has achieved remarkable results.

Nevertheless, nearly one-third of respondents in this study had never heard of TCM “preventive treatment of disease” services, indicating that there are still gaps in popularization and room for improvement. Greater publicity efforts are still needed. The survey also found that mobile phone/internet, community publicity, and friends/relatives were the main channels for community residents to obtain knowledge about TCM “preventive treatment of disease” , suggesting that residents’ preferred formats such as WeChat official account posts, community free clinics and lectures can be fully utilized to increase publicity and expand coverage. Knowledge is a prerequisite for behavior change. Widely disseminating systematic and correct knowledge about TCM “preventive treatment of disease” , cultivating a health concept focused on prevention and combining prevention with treatment, benefiting more residents, while simultaneously driving revenue generation for TCM “preventive treatment of disease” departments to form a virtuous cycle, will promote the development of TCM and give full play to its unique advantages in preventive health care.

3.2 High Trust in TCM “Preventive Treatment of Disease”

Considering that some elderly respondents had reading difficulties, the survey was conducted in a one-on-one format combining questionnaires with interviews. For respondents who were unaware of TCM “preventive treatment of disease” services before the survey, investigators provided publicity and education. After being informed by investigators, most of these respondents showed good acceptance of TCM “preventive treatment of disease” services. Therefore, the survey results showed trust levels higher than awareness rates, consistent with

the findings of Guo Jianhong et al. [12], demonstrating that TCM “preventive treatment of disease” services have a broad and deep mass foundation. However, residents with agricultural household registration had relatively lower trust in TCM “preventive treatment of disease” compared to those with other household registration types, indicating that greater publicity efforts are still needed for specific groups to eliminate weak spots in outreach.

Guangzhou, located in Lingnan, has a long history and profound cultural heritage of TCM with distinctive characteristics. For example, Guangzhou residents often apply TCM theories and medicinal materials extensively in their diet according to seasonal changes, achieving health maintenance and wellness through dietary regulation [13]. In 2006, Guangzhou officially launched the TCM Strong City Construction Project, focusing on building TCM cultural education bases and developing TCM cultural tourism services in terms of cultural promotion, to enhance public awareness of TCM health care and create a favorable social environment for the healthy development of TCM [14]. This demonstrates that TCM “preventive treatment of disease” services in Guangzhou have a good cultural atmosphere and favorable policy support, making them suitable for vigorous promotion among community residents.

3.3 Utilization of TCM “Preventive Treatment of Disease” Services

Compared with community residents’ trust in TCM “preventive treatment of disease”, this study’s results show a relatively low frequency of TCM “preventive treatment of disease” service utilization. Although 82.5% of respondents had previously received TCM “preventive treatment of disease” services, fewer than 7% of community residents had received related services 5 times or more in the past year, far lower than the awareness and trust rates, indicating a phenomenon of knowledge-attitude-practice separation. Most residents have not yet developed the habit of regularly using TCM “preventive treatment of disease” methods in their daily health maintenance, consistent with the findings of Li Jinghua et al. [15].

Furthermore, the TCM “preventive treatment of disease” service items utilized by community residents were mainly traditional TCM physiotherapy, with TCM medicinal diet guidance, herbal paste conditioning, and TCM constitution identification also being relatively popular, while the utilization rate of emotional and psychological counseling services was only 11%. Although numerous literature sources have elaborated on the important role of TCM “preventive treatment of disease” theory in the prevention, treatment, and prognosis of emotional disorders, including regulating emotions, adjusting mental states, and providing psychological counseling [16-18], some literature has also pointed out that TCM “preventive treatment of disease” theory has not received sufficient attention in the prevention and control of contemporary emotional disorders, and systematic prevention and treatment application protocols have not been formed [18], resulting in limited development of TCM “preventive treatment of disease” emotional and psychological related services and insufficient utiliza-

tion of the health care role of TCM “preventive treatment of disease” theory in mental health.

This study conducted a comprehensive evaluation of community residents’ knowledge, trust, and practice regarding TCM “preventive treatment of disease” related knowledge and services in Guangzhou. The results show that community residents have relatively high overall awareness of TCM “preventive treatment of disease”, with good acceptance of such services and a broad mass foundation. However, the main channels for obtaining relevant knowledge are limited, mostly remaining at the theoretical understanding stage. Actual service utilization is relatively insufficient, and the service items utilized are also relatively limited. There is still a certain distance from “knowledge and trust” to “practice”, requiring further promotion and implementation to better leverage the advantages of TCM “preventive treatment of disease” in safeguarding people’s health and meeting medical service needs.

Additionally, this study has certain limitations. First, this study selected 4 administrative districts in Guangzhou, with 3 streets sampled from each district, which did not cover all districts and streets in Guangzhou. As Guangzhou’s 11 administrative districts have certain differences in economic level and medical resources, there is a possibility of sampling error in the research results. Moreover, since the survey was conducted mainly in primary community health service centers, the respondents were mostly residents seeking daily health care and medical services, who may not fully represent all community residents. Furthermore, as the survey was conducted using face-to-face questionnaire completion, respondents might have been inclined to embellish their actual knowledge, attitude, and practice regarding TCM “preventive treatment of disease” out of politeness, potentially leading to response bias. In future research, on the one hand, the number of administrative districts and streets surveyed could be increased, and household surveys could be adopted to improve sample size and representativeness. On the other hand, anonymous questionnaires or electronic questionnaires could be considered for data collection to obtain more accurate information.

Author Contributions: ZHONG Ailin proposed the main research objectives, responsible for research conception and design, data cleaning, table drawing and presentation, paper writing and revision; LIU Ailing conducted data collection and organization, statistical processing, and paper revision; ZHOU Shangcheng was responsible for quality control and review of the article, overall responsibility for the article, and supervision and management; GAO Sande conducted survey questionnaire design, distribution, collection and organization; GAO Jing conducted paper revision; ZOU Guanyang was responsible for survey questionnaire design and theoretical demonstration; CHEN Yingyao conducted survey questionnaire distribution and quality control.

Conflict of Interest: None declared.

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Note: Figure translations are in progress. See original paper for figures.

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