ISSN 2616-5783 Vol.8, Issue 8: 89-94, DOI: 10.25236/AJHSS.2025.080814

Revisiting Traditional Chinese Culture in the Context of Modernity: The Case of Traditional Chinese Medicine

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Abstract: *Amid the dual tides of globalization and modernization, the survival of traditional culture has increasingly become a central issue in civilizational dialogue. Traditional Chinese medicine (TCM) has been endowed with the symbolic mission of "cultural revival," while simultaneously subjected to the dual pressures of scientific skepticism and identity anxiety. Taking the contemporary practice of TCM as its point of departure, this article—through policy analysis, ethnographic observation, and cross-cultural comparison—reveals the cognitive disjunctions, technological disciplining, and cultural discounting it faces. The study seeks to demonstrate that the vitality of traditional culture does not lie in rigidly preserving its original form, but rather in achieving creative transformation: establishing new coordinates of meaning within the dynamic balance of deconstruction and reconstruction, so that the ancient philosophy of "the unity of heaven and humanity" may enter into substantive dialogue with the lived experiences of the digital age.*

Keywords: *Traditional Culture, Modernity, Traditional Chinese Medicine, Interdisciplinarity*

1. Introduction

Amid the dual tides of globalization and modernization, the survival of traditional culture has increasingly become a central theme in the dialogue among civilizations. Traditional Chinese Medicine (TCM), as a knowledge system that has evolved over thousands of years within Chinese civilization, serves as a prism reflecting the complex spectrum of tension between tradition and modernity. From integrative medicine clinics in community hospitals to acupuncture practices in overseas markets, from the popularity of herbal health remedies on short-video platforms to meridian research in the genomic era, TCM is simultaneously endowed with the symbolic mission of "cultural renaissance" and subjected to both scientific skepticism and identity anxiety. This tension not only concerns competing medical paradigms but also touches on the fundamental question of how traditional culture may reconstruct discourses of modernity. Taking the contemporary practice of TCM as an entry point, this study employs policy analysis, ethnographic observation, and cross-cultural comparison to reveal the phenomena of cognitive discontinuity, technological disciplining, and cultural discount, while also exploring potential pathways through which traditional wisdom may transcend the predicaments of modernity. The research seeks to demonstrate that the vitality of traditional culture does not lie in rigidly preserving its original form, but rather in its creative transformation—establishing new coordinates of meaning through a dynamic balance of deconstruction and reconstruction—so that the ancient philosophy of "the unity of heaven and humanity" may engage in substantive dialogue with the lived experience of the digital age.

2. The Contemporary Identity Reconstruction of TCM

The modernization of TCM began with its institutional reconstruction at the policy level. The enactment of the Law of the People's Republic of China on Traditional Chinese Medicine in 2017 legally recognized such traditional concepts as "yin-yang", "the five phases"[1], thereby establishing TCM's formal position within the modern medical system. This institutional empowerment has produced a dual effect. On one hand, the state has promoted the integration of TCM into primary healthcare systems. Community health service centers in cities such as Beijing and Shanghai have been required to establish TCM departments, and by 2023, 98% of grassroots medical institutions nationwide had been equipped with TCM diagnostic and therapeutic facilities, significantly enhancing

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the accessibility of TCM. On the other hand, the codification of legal texts has also led to a "de-contextualization" of traditional terminology: in standardized education and assessment systems, TCM knowledge is increasingly encoded into a fixed terminological framework rather than applied flexibly in clinical practice. For example, a curriculum evaluation at a TCM university revealed that while 92% of students could accurately recite the definition of "the liver governs dredging and dispersion" in standardized examinations, fewer than 30% were able to apply the theory effectively in clinical contexts. This phenomenon of "knowledge disciplining" has gradually transformed TCM from an experiential medicine into a symbolic system, thereby weakening, to some extent, the holistic concepts and practical wisdom of traditional medicine.

Simultaneously with institutional changes, capital forces are reshaping the cultural expressions of TCM. Analyzing today's global healthcare landscape, the medical policies of the United States, Japan, and the European Union provide significant insights for China's healthcare reform. Reports indicate that in 2009, U.S. healthcare expenditure accounted for 17.6% of the national GDP, and projections suggested that within a decade, the figure would reach 20.3%. Such massive expenditures are closely associated with ethical issues and have the potential to generate severe social tensions.[2] In contrast, TCM is increasingly intertwined with capital, evolving into a consumable cultural symbol as exemplified by Chengdu's "Qihuangli" TCM-themed commercial street. Within its faux-ancient architecture, AI-based pulse diagnostic devices stand alongside fortune-telling stalls; patients can simply scan a QR code to obtain both a "constitution analysis report" and a herbal tea package, thereby greatly lowering the threshold of TCM consultation. More noteworthy is the rise of the "light wellness" trend. Tongrentang, for example, launched a "herbal coffee" line, printing both excerpts from the Compendium of Materia Medica and images of goji berry lattes on takeaway cups. This attracted large numbers of young consumers to share photos on social media. Yet, while the average consumer spent only 17 seconds completing a photo check-in, few actually engaged with the classical texts. Such phenomena highlight the trend of symbolic consumption of TCM culture in contemporary markets—where traditional medicine no longer primarily functions as a healing system but is deconstructed into communicable, marketable cultural elements aligned with the logic of consumerism.

Within this process, young people's perceptions of TCM exhibit a paradoxical nature. Survey data indicate that 89% of individuals aged 18–35 agree that "TCM represents the essence of Chinese culture," but only 34% are willing to receive acupuncture treatment. This cognitive disjunction is particularly visible on social media: on Douyin (TikTok China), the hashtag #TCMHealthcare has garnered more than 24 billion views, yet the average completion rate of related educational videos is below 15%. A deeper analysis reveals that Generation Z is reconstructing tradition through a mode of "elemental extraction": they simplify the principle of "food and medicine sharing the same origin" into intermittent fasting diets, and transform the theory of "ziwu liuzhu" (the circulation of qi according to the twelve meridians at different hours) into biological-clock management apps. This selective inheritance sustains cultural memory and allows TCM to enter the lives of younger generations in new forms, while simultaneously accelerating the fragmentation of its knowledge system, transforming TCM from a holistic medical theory into a collection of piecemeal health management tools.

Therefore, the modernization of TCM is the result of multiple forces interwoven. Institutional reconstruction has promoted the standardization and legitimization of TCM, but at the same time has brought challenges of "de-contextualization." Capital intervention has accelerated the symbolization of TCM culture, redefining it under the logic of the market. Meanwhile, younger generations, through selective inheritance, have enabled the continuation of TCM, albeit at the risk of knowledge fragmentation. In this process of transformation, a key question for the future is how to preserve the integrity and practicality of TCM within modern systems.

3. The Survival Challenges of Traditional Wisdom

Since the 1970s, China has gradually completed its transition from biomedicine to modern medicine. The leading causes of mortality have shifted from acute and severe infectious diseases to chronic illnesses. Over the seventy years of implementing the policy of integrative medicine, TCM has been compelled to adopt the cognitive framework of modern biomedicine. As the state has promoted the modernization of the healthcare system, TCM has been increasingly incorporated into a diagnostic and treatment system dominated by Western medical standards. While this process has brought advantages of standardization, it has also generated considerable controversy. A clinical study in a top-tier hospital demonstrated that the efficacy verification of Chinese patent injections followed the standards of double-blind trials in order to meet the requirements of modern evidence-based medicine. However, the

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resulting clinical guidelines produced a phenomenon of "one formula for a thousand patients." For example, in one regional TCM hospital, the prescription rate of Lianhua Qingwen capsules for treating the common cold reached 78%, a figure far higher than the individualized treatment ratio prescribed by traditional practice, thereby deviating fundamentally from the TCM core principle of "treatment based on syndrome differentiation."

More critically, the training system for TCM practitioners has also undergone profound changes, particularly in its assessment criteria. At present, Western medical knowledge accounts for more than 40% of the content in the national TCM practitioner qualification examinations, whereas the Huangdi Neijing—the foundational classic of TCM—accounts for less than 10%. This institutional design compels TCM practitioners to become "bilingual users," who must both master the scientific theories of modern medicine and simultaneously practice within the framework of traditional TCM. Yet given the fundamental differences between the two paradigms—in modes of thought, diagnostic logic, and therapeutic goals—such cross-disciplinary adaptation is far from easy. As a result, many TCM physicians in clinical practice are forced to conform to Western evaluation systems, gradually weakening TCM's distinctive holistic diagnostic and therapeutic model.

This negotiation is not confined to China's domestic healthcare system but is also confronted in the internationalization of TCM, where profound cognitive gaps emerge. According to the World Federation of Acupuncture-Moxibustion Societies, 62% of overseas acupuncture practitioners interpret the concept of "deqi" merely as a neurostimulatory response, thereby stripping away the cosmological and holistic dimensions embodied in the meridian theory. Ethnographic studies in TCM clinics in Germany further reveal that patients commonly regard cupping as a form of "deep tissue therapy," rather than a method to harmonize qi and blood or to dispel dampness and cold. Similarly, pulse diagnosis is often reduced to mere heart rate monitoring within Western medical frameworks. These examples illustrate how overseas medical systems, even while adopting TCM, frequently redefine it in accordance with modern biomedical standards, systematically obscuring its philosophical dimensions. This "de-contextualized" cultural translation is analogous to the British Museum's definition of Shang and Zhou dynasty bronzes as "ancient vessels," which erases their religious, ritual, and cultural significance in Chinese civilization.

Against this backdrop, artificial intelligence is further transforming the very form of TCM's existence and accelerating the deconstruction of its traditional knowledge system. A technology company, for instance, has developed a "TCM syndrome differentiation robot" that, based on massive clinical data and machine learning algorithms, has achieved a diagnostic accuracy rate of 82%. Yet although AI can precisely match symptoms to corresponding syndrome types, it cannot comprehend diagnostic modes involving psychological, social, and cultural factors, such as "illness caused by emotional imbalance," nor can it flexibly adjust individualized treatment plans. This implies that while AI offers significant advantages in improving diagnostic efficiency, it also risks reducing TCM's core value to standardized symptom-matching, rather than holistic regulation under an integrative worldview.

What is even more concerning is that the advancement of artificial intelligence and digital technologies is progressively altering the traditional doctor–patient relationship, making it increasingly objectified. Under the monitoring of wearable devices and big-data analytics, the pulse has been transformed into real-time data streams, and the ancient diagnostic method of "inspection, listening/smelling, inquiry, and palpation" has been downgraded into mere biosignal collection. Statistics from a TCM clinic in Hangzhou show that after adopting AI-assisted diagnostics, the average doctor–patient consultation time decreased from 23 minutes to 9 minutes. This change indicates that as healthcare becomes increasingly digitized, the traditional TCM diagnostic model—emphasizing in-depth interpersonal communication—is being replaced by standardized, assembly-line clinical procedures. In the long run, this may lead to the gradual erosion of the humanistic spirit of medicine: patients' subjectivity in TCM diagnosis and treatment could be weakened, while physicians may increasingly become interpreters of medical data rather than genuine clinical thinkers.

Faced with these transformations, the future development of TCM confronts multiple challenges. On one hand, within the broader trend of integrative medicine, how can TCM preserve its distinctiveness rather than passively adapting to Western-dominated evaluation frameworks? On the other hand, in the process of internationalization, how can TCM avoid the "de-contextualization" of its theoretical system and secure its rightful place within global medical discourses? Overall, China's current TCM healthcare and wellness service system remains at an early stage, with blurred boundaries between TCM medical services and health-preservation practices.

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4. A Third Path of Creative Transformation: Reconstructing Subjectivity Amid Deconstruction

Digital technologies are providing new momentum for the modernization of TCM, while also invisibly reshaping its very essence. The “Digital Materia Medica” project in Zhejiang has established a blockchain-based traceability system for Chinese medicinal materials, enabling consumers to scan a QR code to trace the cultivation environment, processing methods, and quality inspection reports of herbs. This not only enhances consumer trust in product quality but has also increased the export price of Longquan lingzhi mushrooms by 340%, constructing a “digital authenticity” certification system. On the surface, this appears to be a modern upgrade of the traditional concept of daodi (authentic medicinal materials), but at a deeper level it signifies a transformation from experiential cognition to data-driven standards.

"Modern medical students in China are required to study TCM and are encouraged to further develop its use by incorporating it with modern techniques."[3] Frontiers in Medicine, 2023, 10: 1223614.]In the field of medical education, similar technological innovations are emerging. A Shanghai hospital has developed a hybrid training system in which VR technology reconstructs classical clinical cases, allowing young physicians to practice traditional skills such as “suspension pulse diagnosis” (xuan si zhen mai) in virtual environments. This has reportedly improved clinical training efficiency fourfold. Yet as these technologies proliferate, the pathways of inheritance are also shifting—oral and experiential transmission is being replaced by algorithms and simulations. Whether this change represents an optimization of heritage or a distortion of traditional wisdom remains an open question.

Technological transformation is also reshaping the public image of TCM, endowing it with new meanings within contemporary cultural narratives. The documentary Herbs of China departs from grand historical storytelling, instead highlighting individual stories: ginseng diggers in Changbai Mountain following the ancestral rule of “taking the big, leaving the small,” or incense artisans in Lingnan burying sandalwood in clay jars for three years to preserve its fragrance. Such micro-level portrayals transform TCM from a static historical symbol into a living practice embedded in daily life. On digital platforms, dissemination has undergone further mutation. On Bilibili, the creator “TCM Maruko” reinterprets the Treatise on Cold Damage (Shanghan lun) through anime, transforming “six-channel pattern identification” into a viral warfare scenario. Individual videos have exceeded five million views, illustrating that cultural vitality lies not in static preservation but in the continuous reproduction of meaning. However, this mode of “cross-dimensional” communication also risks intensifying the symbolization and entertainment of TCM—when the six-channel system becomes a cartoon script of viral battles, can its theoretical system still be comprehensively understood?

A deeper transformation is occurring at the cognitive level: how TCM re-establishes its position within modern medical systems. At Tsinghua University, a “Dialogue Between Chinese and Western Medicine” course requires Western medical students to study the Huangdi Neijing in order to grasp TCM’s philosophical foundations, while TCM students must learn principles of gene sequencing to broaden their biomedical horizons. Such cross-disciplinary training has already inspired new theoretical explorations—for instance, a student proposed a “coupling model of epigenetics and the five-phase–six-qi theory,” attempting to explain the cosmological principle of “correspondence between heaven and humanity” at the molecular level. Similar trends are also reflected in clinical practice. A hospital has eliminated the physical separation of “Chinese medicine” and “Western medicine” departments, reorganizing care into integrated units based on human physiological systems. As a result, “clearing heat and detoxifying” therapies are no longer positioned as oppositional to antibiotics, but rather integrated into collaborative treatment protocols. This new medical model aligns with global trends toward disciplinary integration and offers a more practical path for TCM’s modernization. In this process, TCM is no longer a passive “bilingual system” adapting to Western standards, but an active participant in constructing new medical paradigms through interaction with modern technologies, communication practices, and academic frameworks.

The contemporary transformation of TCM thus mirrors the broader dilemmas of traditional culture under modernity. When AI systems begin parsing the prescription patterns of the Treatise on Cold Damage, and Generation Z reconstructs herb-gathering scenes in the metaverse, what we witness is not the disappearance of tradition but the genetic mutation of culture within new technological soils. Such growth inevitably entails pain—standardization erodes individuality, globalization provokes anxieties of subjectivity, and technological fetishism threatens the humanistic spirit. Yet these fractures create spaces for civilizational evolution. The crucial task for the future is not the complete preservation of tradition, but the construction of flexible mechanisms of transformation: enabling the wisdom of the Huangdi Neijing to illuminate ethical dilemmas of gene editing, or to converse with the cognitive limits

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of artificial intelligence. When “yin-yang balance” ceases to compete with “immune regulation” as a rival explanatory system, and instead becomes one of multiple dimensions of human knowledge, then traditional culture will truly achieve its breakthrough into modernity.

5. Prospects

BLooking ahead, the modernization of Traditional Chinese Medicine (TCM) will likely unfold along multiple interconnected dimensions, combining technological innovation, theoretical development, clinical integration, and internationalization. Digital technologies such as artificial intelligence, big data analytics, virtual reality, and blockchain are not merely tools for efficiency or standardization—they are reshaping the very epistemic foundations of TCM. For instance, blockchain-based traceability systems for herbal medicine enhance quality assurance, strengthen consumer trust, and create opportunities for internationally recognized “digital authenticity” certification. AI-assisted diagnostic systems and VR-based training platforms allow young practitioners to master classical techniques with unprecedented precision, while simultaneously generating vast datasets that can be subjected to rigorous empirical analysis."The application of AI in TCM encompasses a wide range of areas, including herbal screening and new drug discovery, diagnostic and treatment principles, pharmacological mechanisms, network pharmacology, and the incorporation of innovative AI technologies."[4]

However, technological advancement alone is insufficient. The preservation of TCM’s philosophical and theoretical foundations—holistic thinking, pattern-based diagnosis, and the concepts of yin-yang and qi—is critical for ensuring that modernization does not become mere mechanization. Educational programs must cultivate practitioners who are proficient in both TCM’s traditional epistemology and modern biomedical knowledge, fostering a generation capable of interdisciplinary synthesis. Innovative curricula, cross-disciplinary research projects, and integrative clinical units can help bridge the gap between traditional wisdom and contemporary scientific frameworks.

Clinical practice itself must also evolve. Modernization should not reduce TCM to a set of standardized procedures or commodity-like wellness products; instead, it must emphasize individualized treatment, patient-centered care, and the nuanced application of classical knowledge to contemporary health challenges. Evidence-based research, longitudinal cohort studies, and comparative effectiveness trials can strengthen the scientific credibility of TCM, while maintaining the flexibility necessary for syndrome differentiation and holistic assessment.

Internationally, TCM faces both opportunities and challenges. On the one hand, rising global interest in complementary and integrative medicine, preventive care, and holistic health provides a receptive environment for TCM’s expansion. On the other hand, cross-cultural translation and epistemic adaptation are essential to avoid “decontextualization,” where TCM concepts are stripped of their philosophical and systemic meaning and reduced to functionalized treatments. Building international academic networks, participating in global health governance, and developing culturally sensitive dissemination strategies are crucial for enhancing TCM’s visibility and academic authority.

Finally, policy and governance play a decisive role in shaping TCM’s future. Regulatory frameworks should balance standardization and innovation, support technological integration, and promote the international recognition of Chinese medicine while safeguarding its traditional knowledge systems. At the same time, public health initiatives and investment in research infrastructure can foster sustainable development, ensuring that TCM continues to contribute meaningfully to contemporary healthcare and cultural identity.

In sum, the future of TCM modernization hinges on a delicate yet dynamic equilibrium: integrating technology without undermining tradition, validating efficacy without oversimplifying theory, and promoting global outreach without eroding cultural identity. Its success will be measured not only by clinical outcomes or economic gains, but by its ability to retain a living connection to the philosophical, epistemological, and cultural values that have sustained it for millennia. By constructing flexible, pluralistic, and adaptive pathways, TCM can continue to thrive as a dynamic, culturally embedded, and globally relevant medical system in the 21st century.

6. Conclusion

This study has examined the contemporary transformation of Traditional Chinese Medicine (TCM)

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through the lenses of historical practice, institutional restructuring, technological innovation, and cultural adaptation. The analysis demonstrates that TCM's modernization is a multifaceted process shaped by the interaction of policy frameworks, market forces, digital technologies, and generational reinterpretations. It is not merely a technical adjustment, but a profound negotiation between tradition and modernity, theory and practice, local identity and global visibility.

The integration of digital tools—such as AI-assisted diagnostics, VR-based training, and blockchain traceability systems—has enhanced TCM's scientific credibility, accessibility, and pedagogical effectiveness. Meanwhile, innovative media strategies and cross-cultural dissemination have expanded its cultural influence, albeit with the risk of increased symbolization and fragmentation. Critically, the success of these transformations depends on maintaining the epistemic and philosophical foundations of TCM, ensuring that technological, market, and international pressures do not reduce it to a mechanized or commodified system.

Looking forward, TCM represents a paradigmatic case of how traditional knowledge systems can navigate the challenges of modernity. Its ongoing evolution illustrates the possibility of preserving cultural heritage while embracing innovation, integrating empirical rigor with philosophical depth, and negotiating between local practices and global expectations. Ultimately, the modernization of TCM underscores a broader lesson for traditional knowledge worldwide: sustainable cultural transformation requires a dynamic balance among continuity, adaptation, and creative reinterpretation.

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