

A Study on Tennis Elbow Patient's Experiences of Alternative Therapy Use in Korea

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Abstract

The objective of this study is to identify the experiences of tennis elbow patients' uses of alternative therapies through a study of their experience. This study used an inductive descriptive research method, which tries to reveal experiences through analysis of description of human experiences as a qualitative research method. Information providers (participants) were a total of five patients, who visited an Oriental Medicine Hospital to receive alternative therapies through surgical and non-surgical treatments, complaining of decrease in muscle strength, muscle contracture and abnormal stress on the elbow joint due to tennis elbow among those who play tennis as a hobby. The data were collected from June to October 2014 for 6 months until they were theoretically saturated. With the participants' permission got digital audio recording of in depth interviews and observation for data collection. The number of the concepts finally drawn through a data analysis were 32 out of 102, and 13 sub-categories and 9 upper categories were drawn. This study will understand the experiences of tennis elbow and the results of the study will be used as the basic data for the development of independent nursing interventions using alternative therapies in Korean culture. This study suggests the application of the results as Korean nursing interventions studied with various methods to understand the patients, including the areas of public health and nursing for family and community in the future.

Keywords: *tennis elbow patients, alternative therapy, qualitative research*

1. Introduction

1.1 Necessity of Research

At the present point of time when the earnest advancement into public leisure society is accelerated with the improvement of the standard of living and extended execution of a weekly forty-hour system, the public, with an increase in leisure time, will pursue a quality leisure environment with cultural, aesthetic and functional dimensions and social development [1]. According to the National Health Interview Survey [2], it was reported that the percentage of sports activities done during leisure time exceeded watching TV for the first time since 2006, which shows that particularly, the proportion of sports participation increased. Of them, tennis is in the limelight as a cultural activity that gives satisfaction in the field of sports and as a sport anyone can approach and enjoy easily.

Tennis elbow was named in this way as it was first found in tennis players and is also called lateral epicondylitis. 50% of tennis players experience tennis elbow [3], which is a lesion caused by excessive tension of muscles that stretch the wrist joint, and it often, occurs in people like tennis players who use a heavy racquet. Pain occurs when an excessive force is continuously applied to the muscles around the elbow joint [4]. In

particular, it is accompanied by a pain in the lateral elbow joint, which usually, occurs in the bending of the elbow joint, when extending the wrist joint, or grabbing an object. It reduces concentration on treatment according to the extent and continuance of pain, which makes it difficult to control the pain, so even severe anxiety and depression may accompany the disease [5]. With the popularization of sports, a lot of people enjoy sports and a considerable number of them visit the hospital with injuries to the elbow joint caused by sports such as tennis, racquetball, table tennis, or squash [6]. The part that is most frequently injured in people who enjoy tennis as a hobby is the elbow joint (36.6%), and as for the time when tennis elbow first occurred, 52.3% occurred within three years of playing tennis, followed by 4-6 years (22.6%) and 7 through 9 years [7]. Tennis elbow is a clinically common lesion, and patients complain of pain in the elbow joint, deterioration of muscular strength, contracture of muscles and abnormal stress [8-9]. It seems that repeated trauma or acute trauma, whether it is as a leisure activity or played professionally, is a cause for this syndrome [10].

90% of tennis elbow can be improved with non-operative treatment [11], and the treatment methods include rest, fixation, medication, extracorporeal shock wave [12], taping [6], massage [13] and manual therapy [14]. Of them, alternative therapy is a method that can be applied while maintaining mutual complementary relationships to solve difficult health problems with Western medicine. Interest in that is increasing [15]. According to Kim, Suk-yeong [16], Korean people have experienced one or more supplementary/alternative therapies, and the reason is that they consider it a method that can cure diseases and reduces the side effects of Western medicine so they pursue a natural treatment method. However, nursing to date has depended on nursing interventions developed in the West, so it is necessary to gain expertise, propose new Korean nursing theories and seek a new direction for nursing in the future based on them. In addition, at this point in time Korea should develop and evolve the originality of nursing and get ready for the influx of medical institutions from foreign countries in the near future. It could be a breakthrough to introduce alternative therapies in Korean culture as independent nursing interventions, which have been overlooked.

Therefore, this study will look into and compare the aspects of the use of alternative therapies in tennis elbow patients who are hospitalized in an oriental medical hospital to verify the applicability of the alternative therapies of Korean nursing interventions.

1.2 Research Purpose

This study aims to investigate tennis elbow patients' experience with alternative therapy use and reveal their alternative therapy experience.

2. Research Design and Method

This study is designed to understand tennis elbow patients' experience using various alternative therapies using the qualitative research method. The qualitative research method explores the developmental and constitutive source of a given phenomenon, which is based on the philosophical methodology of inquiring into the action of consciousness experienced by the subject of perception. This study uses an inductive descriptive research method that tries to reveal the human experience through an analysis of the description of it.

2.1 Research Participants

The participants in this study are patients who complain of pain in the elbow joint, deterioration of muscular strength, contracture of muscles and abnormal stress due to tennis elbow, among those who play tennis as a hobby. They are five people who visited an oriental medical hospital to get operative or non-operative alternative therapy, and their general backgrounds are in Table 1.

Table 1. General Background of Participants of Study

	Sex	Age	Tennis elbow history
Participant 1	Male	42	3 years
Participant 2	Female	48	6 months
Participant 3	Female	36	3 months
Participant 4	Male	40	1 month
Participant 5	Male	42	2 years

During the interview with the participants, intentional purposive sampling was used, which selects a person who has a different interview result, situation, or background from the other participants, based on the data from a primary analysis of alternative therapy use experience. In the early stages of data collection, the interview was conducted with various participants to find as many categories as possible, while in the later stages, it was conducted focusing on finding the core category and checking the analysis.

2.2 Preparation by the Research

In grounded theory, it is important for the researcher to explore the participants' experience in the situation and to study from their position. Thus, this researcher tried to understand the characteristics and the world of the participants' experience as a person who had received alternative therapy for tennis elbow by asking three tennis elbow specialist doctors for advice and talking with the participants before starting this study. In this process, the researcher focused on what could be found in tennis elbow patients' experience of alternative therapy use and tried to increase theoretical sensitivity.

Entering this study, to exclude the researcher's preconceived notions or prejudices, keeping a neutral position was attempted. In addition, this researcher is a member of the Qualitative Research Center currently, has attended international conferences and workshops on qualitative research and research methods of grounded theory dozens of times, has a number of experiences carrying out studies applying the qualitative research method, and has made presentations at international conferences.

2.3 Research Questions

In this study we will collect and analyze data from the participants through the following two questions.

- 1) What is the experience of alternative therapies to treat tennis elbow?
- 2) What is the most difficult point of alternative therapies used to treat tennis elbow?

2.4 Data Collection and Analysis

The data collection period is June 2014 through to October 2014, about 6 months, and the time of the interviews with participants was 2 to 4 hours per session, a total of 15 times. The interview was conducted till the data reached the theoretical saturation about tennis elbow patients' feelings and thoughts concerning alternative therapy experience.

As for the interview contents, first, the research purpose was explained and consent about confidentiality was obtained from the participants, recorded and written on a word processing program. After the interview, an additional interview was conducted by phone regarding incomplete or unclear contents. In order to ease the tension of the research participants and create a relaxing mood, daily conversation was shared then, a conversation about the research topic was held, and open and semi-structured questions were used. During the interview, for confusing conversations, a method of checking the meaning of the conversation through repeated questioning was used. During the interview, for the supplementation of data, the participants' non-verbal expressions such as facial expressions and gestures were observed immediately after each interview. Also, the impression given to the researcher during the interview, feelings or ideas the researcher came up with after the interview, and field notes containing details to be asked later were used in data analysis. The interview was conducted in a quiet office, while the researcher and participants were drinking coffee.

Data analysis was conducted simultaneously with data collection and the method of analysis was grounded theory suggested by Strass & Cobin [17]. Qualitative research methodology is a form of research that creates a result of a study by a method other than approaching through statistical procedures or other quantitative means. In other words, it is applied to studies of personal lives, experiences, actions, emotions, feelings, capabilities, social movements, cultural phenomena, and interactions. The grounded theory is drawn from data, so it provides intuition and meaningful guideline for the improvement of understanding and behaviors [12].

2.4.1 Open Coding

Open coding is a process of naming phenomena, drawing concepts and categorizing them through base materials [17]. The line-unit analysis method was used, which analyzes each line of details from the interview. First, meaningful statements were underlined and concepts were found in order to name them. As for the naming of concepts, some quoted the participants' statements as they were, but the researcher named most of them through abstract interpretation of the meanings of their statements. Open coding in this study mainly went through categorization of finding a concept from the data and abstracting the meaning from the general properties of the concept. It was a process of differentiating the relationship between categories by classifying the properties and dimensions of the categorized ones. In this process, advice was received from two Professors of Nursing, one Professor of Psychology and one Professor of the Humanities.

2.4.2 Axial Coding

Axial coding is a method of connecting categories to subcategories with the category as an axis, continuing to develop the category to the levels of property and dimension, and understanding the correlation between the categories with a paradigm model [17]. In axial coding, the density of properties and dimensions of the categories appearing from open coding continued to increase and the similarities and differences between the categories were investigated and revealed. In this process, the relationship between categories, whether they were closely related or not, was understood. Through the paradigm, the analysis tool in axial coding, the correlation between categories was integrated with a paradigm model of causal condition, central phenomenon, context, mediating situation,

action/interaction strategy, and result. At that time, an effort was made to attach importance to the dynamic flow of events.

Coding for the process looks into actions/interactions in the data and traces changes in situations according to the flow of time, this consists of each step. Considering that grounded theory emphasizes the process of interaction, it makes up for the emphasis on experience phenomena in other qualitative research and brings into relief the structural situations related to actions/interactions. This study made an effort to emphasize the appropriate combination of the structure with the process.

2.4.3 Selective Coding

Selective coding is a process to find a core category, find its correlations with other categories, and develop them into a theory. The first job in selective coding is to decide the core category, which has the power to draw other categories and allows for the development of the outline of the materials. This study had to find a comprehensive concept that could explain the relationships between all of the concepts in an integrative way in the process of naming the core category.

Therefore, an outline of a story was written descriptively regarding what this study is about and an attempt was made to show the result of the strategy to overcome what use of alternative therapy brings about, affected by the mediating condition, using a chart. In addition, reading the source material repeatedly, the data were studied with a global view in order to find the core category that could explain their central phenomenon. Even after naming the core category, it was sophisticated enough to develop continuous properties and dimensions. In addition, in order to concretize an indefinite category, continuous interviews were conducted with the participants, and this study went through a process of reconfirmation.

Centering on this core category, hypothetical correlations between the categories were set up concerning how the context is linked and the type of relation that repeatedly occurs in each category was analyzed.

Lastly, the process was analyzed sequentially according to the process from the time when the participants began to experience of alternative therapy use to the time when they overcame and accepted it. At that time, as the action/interaction strategy was changed under the influence of the mediating situation, how the result was changed depending on the strategy was figured out.

In the entire process of experience, the core category was described according to the properties and dimensions of the causal condition, this core category was described according to the properties and dimensions of the context, and the impact of the action/interaction strategy on the result of the influence of the mediating situation was systematized. Efforts were made to draw a grounded theory when the concepts and categories were sufficiently integrated with each other, and the structures and processes were properly integrated in this study.

2.5 Analysis Tool

This study used an analysis tools known as theoretical sensitivity, continuous comparison method, note and chart suggested by Strauss and Corbin [17].

2.5.1 Theoretical Sensitivity

Theoretical Sensitivity is a very important concept, which refers to the personal qualities and skill of a researcher to find what is important from data and give meaning to that. During the analysis, incessant questions helped the creation process of the theory, such as *“What do the data mean?”*, *“What is the subjects' central problem?”* and *“How can they cope with this problem?”*

2.5.2 Continuous Comparison Methods

Continuous comparison method is the basic method for analysis through questions and comparison in data analysis. Questions in this study were sensitized through five W's and one H, and understanding of the phenomenon was revealed through the question, "What do you think tennis elbow patients' use of alternative therapy means?" and the act of the subjects. and the phenomenon related to the action of the subjects were attempted.

2.5.3 Note and Chart

As for note and chart, the researcher made a note, always carrying a notebook in order to record any ideas and questions the researcher came up with and made the concept, drawn on a big hard board, into a card and schematized it into a chart, and clarified the relationship between categories by moving and modifying the card frequently, which increased the overall understanding of the results of the study for analysis and integration.

3. Result

In the process of building grounded theory on tennis elbow patients' experience of alternative therapy use, in the step of open coding, 32 concepts were drawn through an analysis of base materials, and integrating these concepts, 13 subcategories were drawn, and nine top categories, which abstracted these subcategories further, were drawn.

3.1 Paradigm Model on Experience of Alternative Therapy Use for Tennis Elbow

The process of experience of alternative therapy use due to tennis elbow is the step of axial coding in the process of building grounded theory, which is a process of recombination of data after open coding. This is contrasting and verifying the relationship between subcategories according to property and dimension, and phenomena can be explained by making a custom alliance between categories through the link between them. Results of the analysis of causal condition, central phenomenon, context, mediating situation and action interaction strategy, based on the paradigm model of this study, are seen in Figure. 1.

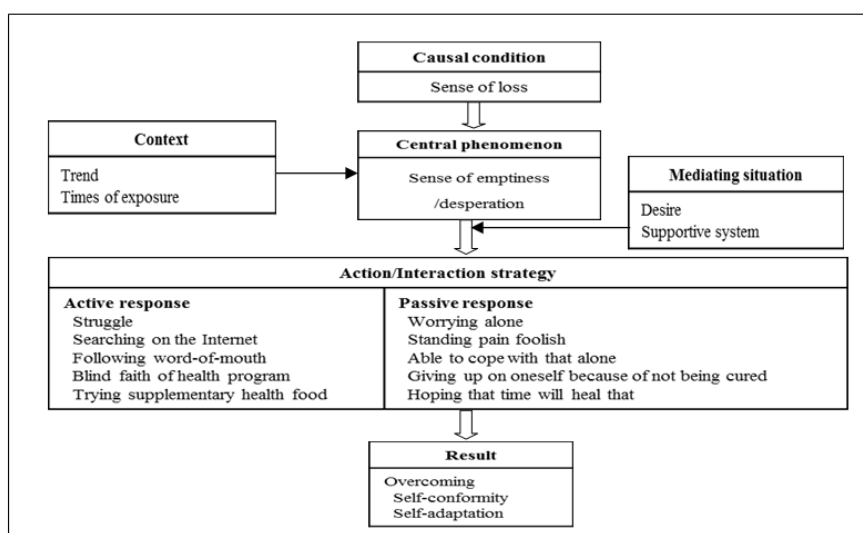


Figure1. A Paradigm Model of Experience of Alternative Therapy Use for Tennis Elbow

3.1.1 Causal Condition

A causal condition refers to a cause consisting of events that causes or leads to the development of a certain central phenomenon. As a result of an analysis of the base materials of this study, as the participants experience tennis elbow, they get such severe pain that they cannot even hold a sheet of paper, so they cannot live their daily life. Further, as they cannot play tennis, which had given them the vitality of life, they experience huge psychological stress.

Accordingly, they lose their will and confidence, and they suffer from psychological stress and feel anxiety about their body, and experience ‘psychological shrinking.’ In other words, the ‘sense of loss’ feels like they lost something, which, accordingly, causes a ‘sense of emptiness,’ which is the central phenomenon of tennis elbow patients’ experience of alternative therapy use. The property of ‘sense of loss’ showed a difference of more and less according to [extent] Table 2.

3.1.2 Central Phenomenon

A central phenomenon is the main thought and event, which is the object or target participants try to solve through a series of strategy. The central phenomenon of tennis elbow patients’ alternative therapy experience, in the results of the analysis on the base materials of this study was a ‘sense of emptiness.’ As they feel frustration in their reality due to stress caused by pain and feel distrust of trite hospital treatment, they feel a limitation to the long-term treatment. As participants are disappointed by no improvement in their pain, they experience a phenomenon in which they crave a different treatment and pursue an alternative therapy that is easier than going to the hospital. The property of “sense of emptiness” showed a difference of more and less, depending on [extent] as in Table 2.

Table 2. Categories According to Paradigm of Tennis Elbow Patients’ Experience of Alternative Therapy Use

Concept	Subcategory	Top Category	Paradigm
Unbearable pain	Physical pain	Sense of loss	Causal condition
Difficulty in daily life			
Stress due to pain, Frustration with hospital treatment	Psychological shrink	Sense of emptiness/ desperation	Central phenomenon
Depression and severe frustration about not being able to enjoy the hobby			
Distrust in the hospital, Feeling a limitation of long-term treatment	Exhausted	Sense of emptiness/ desperation	Central phenomenon
Easier than going to the hospital Craving for a different treatment	Expectations		
Pain not improving	Disappointment	Trend	Context
Recent treatment trends	Flows of time		
Repeated pain	Unexpectedly/ Coming	- Time of exposure - Speed of pain	Context
Symptoms progress slowly			
Desire for playing tennis again	Will	Desire	Mediating situation
Desire for treatment	Coordinates	Supportive system	
Recommendation of the people around			
Struggle	Trying this and that at random	Active response	Strategy
Searching on the internet			
Following word-of-mouth			
Blind faith about health program			
Blindly pursuit of alternative therapies			

Trying supplementary health food			
Concerned alone			
Standing pain foolishly			
Can cope with it oneself	Contingency	Passive response	
Despair from not being cured			
Hoping that time will heal it			
Finding the treatment fitting for oneself			
Recovering confidence	Self-conformity	Overcoming	Results
Having hope	Self-adaptation		
Recovering vitality			
Coming to spare oneself			

3.1.3 Contest

A context is a specific property belonging to a certain central phenomenon, which is the location of events belonging to a certain phenomenon according to the range of dimension, and it stands for a special series of conditions in which a behavioral strategy is taken.

It turned out that the context in the base materials of this study was ‘tend’ and ‘time of expression.’ The property of ‘tend’ is [type], which appeared on the dimension of impact of their recent history. The property of ‘the time of expression’ is [the sense of time] seen in Table 2, which appeared on the dimensions of sudden progress and gradual slow appearance of tennis elbow

3.1.4 Mediating Situation

A mediating situation is a condition on a structure needed for an action/interaction strategy belonging to a certain central phenomenon, which promotes or suppresses the strategy taken in a specific context. It was found that the mediating situation in the base materials of this study is ‘supportive system’ and ‘will.’

The property of ‘supportive system’ is [type] seen in Table 2, which appeared on the dimensions of will and supportive system. The property of ‘will’ is [quantity], which appeared on the dimension of more and less, and it was found that the setting of the strategy is affected by the participants' will or expectation, wish or will for treatment with belief in the medical team. High will for the treatment, thinking that they have to receive regular care in the hospital, and high expectation for treatment and confidence in the medical team have a positive impact. On the other hand, it was found that, if they do not have will and receive treatment against their will or do not trust in the treatment and fail to perform the treatment, there is a negative impact.

The properties can be differentiated into ‘receptive’ or ‘unreceptive’ by the [type] of surrounding support system. In ‘receptive’ case of support system, ‘active response’ was appeared and ‘passive response’ was appeared in case of ‘unreceptive’ and ‘exclusive’ type of support system (Table 2).

3.1.5 Interaction Strategy

A strategy is an individual or collective action/interaction designed to handle, control, execute, and cope with the central phenomenon under specifically perceived situations. It was found that regarding the action/interaction strategy in the base materials of this study, the active response strategy appears after passive response in an early phase.

In an early phase, participants worried about pain due to tennis elbow and the change of life caused by that. They remain alone, stand the pain, or make efforts to cope with that themselves. However, since treatment becomes more difficult as time passes, they give up on themselves and change to a state in which they hope that time will heal that. The

property appeared on the dimension of more and less, and another property is [period], which appeared on the dimension of shortening or lengthening. They struggle to get out of the situation, search on the Internet to start body treatment, follow word-of-mouth, without any proven effectiveness, blind belief about unknown folk remedy, and try health supplements such as unknown Chinese medication unconditionally with a great interest in health programs to reach active acceptance, and the extent appeared on the dimension of more and less.

3.1.6 Result

Finally the participants could overcome, so that they reached the feeling of 'Self-conformity' or 'Self-adaptation', it was derived from 'Finding the treatment fitting for oneself', 'Recovering confidence', 'Having hope', 'Recovering vitality', 'Coming to spare oneself'.

As a result of an analysis of base materials of this study, participants can recover vitality and keep tennis elbow aloof and adapt themselves to that. They 'actively accept' and become 'mature' through self-conformity and self-adaptation by finding a therapy fitting for themselves so that they can recover confidence and have hope as in Table 2, along with alternative therapy and self-reflection.

3.2 Development of Theory

The Discussion in this section is the step of optional coding, the final step of the process of building grounded theory on tennis elbow patients' experience of alternative therapy use, which is the process of selecting a core category. A core category refers to central phenomenon found as a result of research, which is a process of clarifying the relationship between categories by systematically associating the core category with other categories and combining the properties and dimensions of categories and concepts. This includes descriptions of story outline of the phenomena studied, standardization of hypotheses, statement of hypothetical relations and the process of analysis of types.

The participants were feeling severe depression and frustration due to not being able to enjoy their only hobby as they felt severe pain from tennis elbow. They got herbal acupuncture everyday and would play tennis again without feeling pain in a condition in which they almost lost their sense, even getting bee venom acupuncture.

The participants were feeling inconvenience in their daily life due to the physical pain of tennis elbow, complained of psychological stress because of not being able to play tennis, which they had enjoyed as a hobby, any longer, and in severe cases, they came to have depression and frustration. So, they got steroidal joint injections, which are so-called bone shots, several times, took anti-inflammatory analgesics or tried various treatments like pain care in a pain clinic to continue playing tennis. However, after not getting any special effects through these, naturally, getting herbal treatments, such as acupuncture and moxibustion, they come to depend on alternative therapies, such as bee venom, kinesio taping, acupuncture, moxibustion, bee stings and auricular acupuncture.

As a result of the use of this strategy, tennis elbow patients adapt themselves to the situation, accept it aloofly in addition to self-reflection and find treatment fitting for themselves through various information channels, so that they experience **self-conformity** by having confidence hope and **self-adaptation** by caring for their health and body more than before.

Therefore, the alternative therapies of tennis elbow were defined as **“a process of struggle for repositioning”** in the participants to stand sadness, a feeling all to themselves while feeling their bodies were not like before. In other words, **“the process of treatment nomad”** can be deemed as the core category (Basic Social Process)

occurring throughout the process of the participants' alternative therapy experience of tennis elbow.

4. Conclusions and Suggestions

This study collected data through primary and secondary in-depth interview and an additional interview using a phone from five participants in order to reveal tennis elbow patients' experience of alternative therapy use. As a result of a data analysis using Strass. A and Cobin' method [17] topics were revealed.

The result is that the central phenomenon appears intentionally or spontaneously according to the degree of various action/interaction strategies, and it is a solved state through active response and passive response to overcome the sense of emptiness, the central phenomenon of tennis elbow patients' alternative therapy experience[18].

Participants feel tired with 'sense of loss' caused by physical pain and mental stress and they also become frustrated in hospital treatment for long time with no better. Participants experience the phenomenon of 'desperation' originated from expectation for alternative therapy besides hospital treatment. Such 'desperation' shows passive/active correspondence strategy according to the number of times and speed of exposure or treatment type of the times.

At this time, participants' will and support system affect such response and participants experience the overcome process for appropriate adaption.

In conclusion, participants' experience applying alternative therapy for tennis elbow can be expressed as "the process of treatment nomad" wandering here and there aimlessly to resolve 'sense of loss'. Thus, the process of provision of will and support system to the people who experience alternative therapy for tennis elbow can be effective nursing intervention helping them have positive self-adaption with positive correspondence strategy.

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