

(22)

## 台灣、日本、韓國、東南亞和美國的傳統醫學發展現況與交流

### Update Academic Development and Experience Exchange of Traditional Medicine in Taiwan, Japan, South Korea, Southeast Asia, and the United States

時 間：114 年 6 月 28 日(星期六) 13:40~17:00

地 點：臺北榮民總醫院 三門診 9 樓創意沙龍

協辦單位：臺北民總醫院傳統醫學部

國立陽明交通大學醫學院傳統醫藥研究所

國立陽明交通大學醫學院中醫學系

13:40-13:45 長官致詞

王署君院長  
Shuu-Jiun Wang

13:45-13:50 貴賓致詞

蘇奕彰司長  
Yi-Chang Su

#### Session I 傳統醫學的政策與挑戰

座長：黃信彰 院長(Shinn-Jang Hwang)

13:50-14:20 日本的傳統醫學和醫療保健  
Traditional Medicine and Healthcare Coverage in Japan

Prof. Kiichiro Tsutani  
(日本)

座長：洪裕強 教授(Hung-Yu Chiang)

14:20-14:50 傳統輔助及替代醫學在健康照護系統強化及韌性的角色  
The Role of Traditional, Complementary, and Alternative  
Medicine in Health System Strengthening and Resilience

Prof. Chun Huei Chi  
(美國)

座長：郭文華 教授(Wen-Hua Kuo)

14:50-15:20 全球視野下中醫藥現狀與前瞻  
Current Status and Prospect of Traditional Medicine in the  
Global Context

黃怡超教授  
Yi-Tsau Huang

15:20-15:50 *Coffee Break*

#### Session II 整合醫學

座長：陳方佩 主任(Fang-Pey Chen)

15:50-16:20 陰陽生理心理學的臨床應用價值探討  
A Study on the Clinical Applicability of Yin-Yang  
Biopsychology

Prof. Han CHAE  
(韓國)

**座長：龔彥穎 主任(Yen-Ying Kung)**

16:20-16:35	從傳統到現代：馬來西亞中醫皮膚科的發展與實踐 Transition from Tradition to Modernity: Evolution and Application of Chinese Medicine Dermatology in Malaysia	Prof. Hui-Lin Kung (馬來西亞)
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**座長：林東毅 教授(Tung-Yi Lin)**

16:35-16:50	馬來西亞中醫藥發展現況 The Current Status of the Development of Traditional Chinese Medicine in Malaysia	Dr. Jia Rou Soo Hoe (馬來西亞)
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16:50-17:00	Discussion	All staff
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## **Traditional medicine and healthcare coverage in Japan**

### **日本の傳統醫學和醫療保健**

**Kiichiro Tsutani**

津谷喜一郎

*University of Tokyo and President of the World Medical, Tokyo, Japan*

東京大學 及 世界醫師會

This article explores the relationship between traditional medicine and healthcare coverage in Japan. With a rich history encompassing practices such as acupuncture, massage, and herbal medicine, traditional medicine continues to play a significant role in Japanese society, even as modern healthcare systems evolve.

Japan's healthcare insurance system is one of the most advanced globally, providing coverage for most of its citizens. However, the integration of traditional medicine into this system is uneven, with certain practices, like acupuncture and kampo (traditional Japanese herbal medicine), included in insurance coverage but often with limitations on reimbursement rates. This creates a financial burden for patients who seek other traditional therapies.

Patients generally hold a positive attitude towards traditional medicine, particularly for chronic disease management and health maintenance. Surveys indicate a desire for greater support for traditional therapies within the insurance framework, prompting policymakers to reassess the status of traditional medicine.

To enhance healthcare coverage for traditional medicine, this article recommends expanding coverage options, increasing awareness among healthcare providers and patients, and promoting the integration of traditional and modern medical practices.

In conclusion, traditional medicine remains an essential component of Japan's healthcare landscape. Addressing the evolving needs of patients by improving insurance coverage for traditional therapies can lead to better health outcomes and promote health equity.

## **The role of traditional, complementary, and alternative medicine in health system strengthening and resilience**

### **傳統輔助及替代醫學在健康照護系統強化及韌性的角色**

**Chun-Huei Chi**

紀駿輝

*Global Health Program and Health Management & Policy Program, Oregon State University, Corvallis, Oregon, USA*  
美國奧勒岡州立大學 全球衛生學程 衛生管理與政策學程

The World Health Organization formally incorporated traditional medicine into its Primary Health Care and Health For All initiative in 1978, becoming the first prominent supragovernmental organization to officially promote traditional medicine. Since then, traditional, complementary, and alternative medicine (TCAM) has been steadily integrated into many national healthcare systems. The mainstreaming of TCAM is also reflected in its wide utilization and coverage by national health systems and private health insurances. The purpose of this presentation is to investigate the progression of TCAM and its role in strengthening national health systems while also contributing to their resilience. While I will use TCAM in the United States as an example, the investigation and discussions will have wide implications for most national health systems around the world.

I will begin by reviewing the World Health Organization's incorporation of traditional medicine into its Primary Health Care initiative program and developments since 1978. This is followed by a case study of TCAM in the United States that includes the steady diffusion of TCAM practices and utilization in recent decades. Specifically, I will examine the process of mainstreaming TCAM in U.S. healthcare, including the development of professional postgraduate schools of TCAM, licensure of practitioners, private insurance coverage of patients' utilizations, and allopathic medical practitioner knowledge and practices related to TCAM. Further, I will discuss the challenges TCAM has been facing in the U.S., such as how TCAM addresses the expectations of evidence-based medicine, new healthcare concerns and priorities, patient satisfaction, and evolving new technologies such as genetic engineering, nanotechnology, and artificial intelligence.

Based on TCAM's development in the United States, I will explore what challenges TCAM faces in maintaining its relevance in modern healthcare systems. Specifically, I will discuss strategies for TCAM to adopt and adapt to relevant new technologies and how it can contribute to health system strengthening. Further, after our recent experience with the COVID-19 pandemic, most national health systems have highlighted the importance of resilience in future development. For TCAM to continue to develop and flourish, it can and must contribute to resilient health systems.

## Current status and prospect of traditional medicine in the global context

### 全球視野下中醫藥現狀與前瞻

Yi-Tsau Huang

黃怡超

*School of Chinese Medicine, National Yang Ming Chiao Tung University, Taipei, Taiwan, ROC*

國立陽明交通大學 中醫學系

In this presentation, I will assess four recent developments of traditional medicine in Taiwan and worldwide and provide some perspective on the future. (1) In May 2019, World Health Organization (WHO) issued the eleventh edition of International Classification of Diseases (ICD-11), with a supplementary chapter of traditional medicine, taking effects in January 2022. In 2022, WHO inaugurated a Global Centre for Traditional Medicine in Gujarat, India. (2) In December 2019, the Legislative Yuan (Parliament) in Taiwan passed the Chinese Medicine and Pharmacy Development Act, and days later the President of Taiwan announced it as an edict. This is a policy landmark for Chinese Medicine, with mandate to support and strengthen Chinese medicine in Taiwan, mainly through the Ministry of Health and Welfare. (3) During the COVID-19 pandemic (2020-2023), Prof. Yi-Chang Su Director of *National Research Institute of Chinese Medicine (NRICM)*, Ministry of Health and Welfare devised NRICM-101 (臺灣清冠一號) as a herbal formulation for symptom relief in infected patients. Between September 2020 and January 2023, the Ministry of Health and Welfare issued 14 export licenses of concentrated powder formula of NRICM-101 after expert review with significant export output. The 14 export licenses of NRICM-101 concentrated powder have reached more than 60 nations worldwide. The expert review of the first emergency use authorization (EUA) of NRICM-101 concentrated powder was convened in April 2021, and with issuance of first EUA license as a prescription drug in May 2021, later a total of 14 EUA licenses of NRICM-101 have been granted in Taiwan. After a prospective controlled trial in the latter half of 2022, the first license of NRICM-101 was issued after expert review to Sun Ten Pharmaceutical Co. (順天堂藥廠) in May 2023. It is estimated that until June 2023, among a total of 10 to 11 million Taiwanese have been infected by the virus SARS-CoV-2, around 18% (1.8 million) have been prescribed with the NRICM-101 concentrated powder paid by the Government. It is a unique and good example of Chinese medicine development for the symptom relief and health care during the COVID-19 pandemic. (4) Recently, several high-quality randomized, double-blinded, placebo-controlled trials of Chinese herbal formulae for the treatment of cardiovascular diseases were published in international prestigious journals such as JAMA, Nature Medicine, Lancet, etc. I will review some papers with comments.

## **A Study on the clinical applicability of Yin-Yang biopsychology**

### **陰陽生理心理學的臨床應用價值探討**

**Han Chae**

**蔡韓**

*School of Korean Medicine, Pusan National University, Korea*

*釜山國立大學校 韓醫學專門大學院*

Yin and Yang (Eum and Yang in Korean) are foundational concepts in traditional East Asian medicine. However, due to the lack of objective measurements, research and clinical applications of these concepts have long been undervalued, often regarded as merely cultural or philosophical ideas.

Recently, an objective clinical tool to assess Eum-Yang biopsychology was developed, and efforts are underway to register it as a New Health Technology in Korea. The Sasang Personality Questionnaire (SPQ), consisting of 20 items, includes three subscales: behavioral attitude (SPQ-B), cognitive style (SPQ-C), and emotional reactivity (SPQ-E).

Higher SPQ total scores reflect Yang biopsychological traits, while lower scores reflect Eum traits. In studies on adolescent problem behaviors, individuals with higher SPQ scores (Yang group) were more likely to show Externalizing Problems (such as aggression and rule-breaking), whereas those with lower SPQ scores (Eum group) tended toward Internalizing Problems (such as depression and social withdrawal).

Among the subscales, high SPQ-B scores indicate an active and sociable behavioral tendency, while low scores reflect passive and avoidant behaviors. High SPQ-E scores are associated with oversensitive and unstable emotionality, whereas low scores reflect a calm and composed emotional state. Maladaptive emotion regulation strategies (such as blaming, catastrophizing, and rumination), which contribute significantly to the worsening of psychopathological symptoms, were found to be associated with low SPQ-B and high SPQ-E scores.

These findings suggest that Yin-Yang biopsychology may provide a valuable framework for understanding psychopathological development and clinical diagnosis. Further research could expand its clinical applications to a broader range of disorders.

## **Transition from tradition to modernity: Evolution and application of Chinese medicine dermatology in Malaysia**

### **從傳統到現代：馬來西亞中醫皮膚科的發展與實踐**

**Hui-Lin Kung**

龔惠琳

*Tung Shin Hospital , Malaysia*

同善醫院

In Malaysia, Chinese medicine dermatology has undergone a noteworthy transformation, evolving from its traditional origins to adopt modern applications. This discussion focuses on the progression and current practices of Chinese medicine dermatology in Malaysia, emphasizing the amalgamation of age-old concepts with contemporary medical innovations.

The discussion will be categorized into seven different directions: Development Background and Purpose:

1. Discuss the historical context of Traditional Chinese Medicine in Malaysia and the driving factors and objectives behind practicing medicine over the past 15 years.
2. The impact of Malaysia's Climate and Culture on Skin Health: Delve into the influence of Malaysia's tropical climate and diverse cultural landscape on dermatological health.
3. Theoretical Basis and Clinical Application of TCM Dermatology in Malaysia: Provide an overview of the theoretical foundations of Traditional Chinese Medicine in dermatology and how it is applied in clinical settings in Malaysia.
4. Experience Sharing in Diagnosing and Treating Skin Diseases: Share insights on diagnostic and treatment experiences, as well as present typical cases of common skin conditions encountered in Malaysia.
5. Integration of Chinese and Western Medicine in Malaysia: Examine the benefits and obstacles of integrating Chinese and Western medical practices in Malaysia.
6. Psychological Needs of Malaysian Patients and the Doctor-Patient Relationship: Highlight the importance of addressing the psychological well-being of patients in Malaysia and nurturing strong doctor-patient relationships.
7. Reflection and Future Prospects of Chinese Medicine Dermatology in Malaysia: Summarize the practice of Chinese medicine in dermatology, reflect on past experiences, and provide recommendations for the advancement of Chinese medicine dermatology in Malaysia.

## **The current status of the development of traditional Chinese medicine in Malaysia**

### **馬來西亞中醫藥發展現況**

**Jia Rou Soo Hoe**

司徒佳柔

*Tung Shin Hospital, Malaysia*

同善醫院

Traditional Chinese medicine (TCM) has a long history in Malaysia, first introduced by Chinese immigrants who gradually integrated it into local society. In August 2016, traditional Chinese medicine was officially regulated under Traditional and Complementary Medicine Act, also known as Act 775 (T&CM Act 2016 [Akta 775]) in Malaysia. Currently, there are four main categories of Traditional Chinese Medicine institutions in Malaysia, which are large comprehensive hospitals with established Chinese medicine departments, private Chinese medicine hospitals or outpatient clinics, individual private practices, and Chinese medicine departments within public hospitals' traditional and complementary medicine departments.

Traditional Chinese medicine plays a complementary role in Malaysia's medical system and is effective in treating chronic diseases, respiratory conditions, cardiovascular diseases, dermatological issues etc. The concept of "preventive treatment" in traditional Chinese medicine also positively contributed to raising public health awareness and daily preventive healthcare.

However, the development of TCM in Malaysia faces several challenges, including inadequate industry regulation and standardization in areas such as pricing issues, diagnosis and treatment protocols. Additionally, there is a lack of public awareness about TCM. Conversely, government policy support, heightened public health awareness, and traditional medicine exchanges with the Association of Southeast Asian Nations (ASEAN) present opportunities for the future growth of TCM.

Tung Shin Hospital was established in 1881. Throughout the past century, it has evolved into a full-service hospital that offers a combination of Chinese and Western medical treatments. It is known for having the largest Chinese medicine healthcare services in Malaysia. The hospital's outpatient department is staffed with over 30 TCM specialists and practitioners from both local and international backgrounds, offers specialized clinics in dermatology, cardiology, gynecology, oncology, orthopedics, and more. In addition to traditional services, the Chinese Medicine Department also provides inpatient care with Chinese medicine treatments, acupuncture, Chinese therapeutic massage, and physiotherapy.

Overall, traditional Chinese medicine industry in Malaysia is experiencing rapid development and is expected to make greater contributions to public health through continued innovation and integration in the future.