



Integrating Evidence-Based and Cost-Effective Complementary and Alternative Medicine (CAM) into the Health Care Systems in Asia

Tuesday, 06 September 2016

Time: 8:30AM-9:30AM

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- Brief overview of CAM
- Growing needs for economic evaluation in Asian countries
- Introduction of the session & speakers

Brief overview of CAM

■ Definition of CAM



The screenshot shows the WHO website with a navigation bar at the top. Below it, a section titled "Essential medicines and health products" is visible. Under this, there is a heading "Traditional Medicine: Definitions". A link to "General Guidelines for Methodologies on Research and Evaluation of Traditional Medicine" is provided. The text defines traditional medicine as the sum total of knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness. It also defines complementary/alternative medicine (CAM) as a broad set of health care practices that are not part of that country's own tradition and are not integrated into the dominant health care system.

General Guidelines for Methodologies on Research and Evaluation of Traditional Medicine,
WHO/EDM/TRM/2000

CAM (WHO)

- The terms "complementary medicine" or "alternative medicine" are used interchangeably with traditional medicine in some countries. They refer to a broad set of health care practices that are not part of that country's own tradition and are not integrated into the dominant health care system.

Brief overview of CAM

■ Definition of CAM



The screenshot shows the NCCIH website. The header includes the NIH logo and the text "National Center for Complementary and Integrative Health". A search bar and a menu bar are also present. The main content area is titled "Complementary, Alternative, or Integrative Health: What's In a Name?". It discusses the difference between complementary and alternative medicine. It states that many Americans use health care approaches developed outside of mainstream Western, or conventional, medicine. When describing these approaches, people often use "alternative" and "complementary" interchangeably, but the two terms refer to different concepts:

- * If a non-mainstream practice is used **together with** conventional medicine, it's considered "complementary."
- * If a non-mainstream practice is used **in place of** conventional medicine, it's considered "alternative."

True alternative medicine is uncommon. Most people who use non-mainstream approaches use them along with conventional treatments.

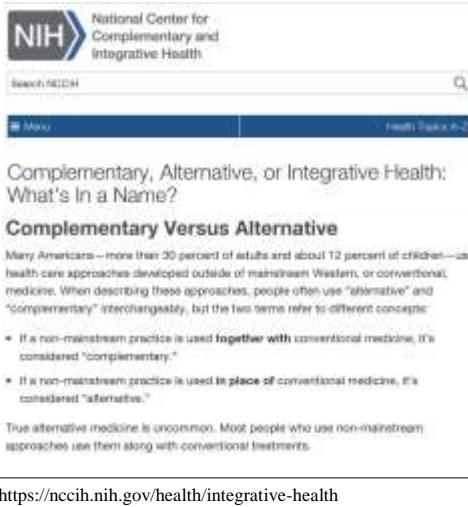
<https://nccih.nih.gov/health/integrative-health>

Complementary Versus Alternative (NIH)

- - If a non-mainstream practice is used **together with** conventional medicine, it's considered "complementary."
- If a non-mainstream practice is used **in place of** conventional medicine, it's considered "alternative."

Brief overview of CAM

■ Definition of Integrative Medicine



The screenshot shows the NCCIH homepage. At the top, there's a navigation bar with the NIH logo, a search bar, and links for "Menu" and "Health Topics A-Z". The main content area has a title "Complementary, Alternative, or Integrative Health: What's In a Name?" followed by a section titled "Complementary Versus Alternative". It includes a paragraph about the use of non-mainstream health approaches and two bullet points explaining the difference between complementary and alternative medicine. Below this is a note about true alternative medicine being uncommon and people often using non-mainstream approaches alongside conventional treatments.

Complementary, Alternative, or Integrative Health: What's In a Name?

Complementary Versus Alternative

Many Americans—more than 30 percent of adults and about 12 percent of children—use health-care approaches developed outside of mainstream Western, or conventional, medicine. When describing these approaches, people often use “alternative” and “complementary” interchangeably, but the two terms refer to different concepts:

- If a non-mainstream practice is used **together with** conventional medicine, it's considered “complementary.”
- If a non-mainstream practice is used **in place of** conventional medicine, it's considered “alternative.”

True alternative medicine is uncommon. Most people who use non-mainstream approaches use them along with conventional treatments.

<https://nccih.nih.gov/health/integrative-health>

Integrative Medicine

- The use of integrative approaches to health and wellness has grown within care settings across the United States.
- NCCIH generally uses the term “complementary health approaches” when we discuss practices and products of non-mainstream origin. We use “integrative health” when we talk about incorporating complementary approaches into mainstream health care.

Brief overview of CAM

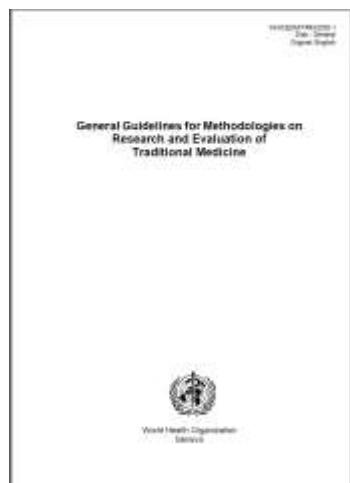
■ Degree of Integration



- Integrative system
 - Officially recognized and incorporated into all area of health care provision
- Inclusive system
 - Recognize but has not yet fully integrated into all aspects of health care
- Tolerant system
 - Recognize but has not yet fully integrated into all aspects of health care

Growing needs for economic evaluation in Asian countries

■ General guidelines in 2000



- Harmonize the use of certain accepted and important terms in traditional medicine
- Summarize key issues for developing methodologies for research and evaluation
- Improve the quality and value of research in traditional medicine
- Provide appropriate evaluation methods to facilitate the development of regulation and registration in traditional medicine.

Growing needs for economic evaluation in Asian countries

■ WHO traditional medicine strategy 2002-2005

Framework for action

1. Policy – Integrate TM/CAM with national health care systems, as appropriate, by developing and implementing national TM/CAM policies and programmes.
2. Safety, efficacy and quality – Promote the safety, efficacy and quality of TM/CAM by expanding the knowledge-base on TM/CAM, and by providing guidance on regulatory and quality assurance standards.
3. Access – Increase the availability and affordability of TM/CAM, as appropriate, with an emphasis on access for poor populations.
4. Rational use – Promote therapeutically sound use of appropriate TM/CAM by providers and consumers.

- Implementation of the strategy will initially focus on the first two objectives.
- Achieving the safety, efficacy and quality objective will provide the necessary foundation for achieving the access and rational use objectives.

Growing needs for economic evaluation in Asian countries

■ Beijing Declaration Adopted by the WHO Congress 2008

- I. The knowledge of traditional medicine, treatments and practices should be respected, preserved, promoted and communicated widely and appropriately based on the circumstances in each country.
- II. Governments have a responsibility for the health of their people and should formulate national policies, regulations and standards, as part of comprehensive national health systems to ensure appropriate, safe and effective use of traditional medicine.
- III. Recognizing the progress of many governments to date in integrating traditional medicine into their national health systems, we call on those who have not yet done so to take action.
- IV. Traditional medicine should be further developed based on research and innovation in line with the "Global strategy and plan of action on public health, innovation and intellectual property" adopted at the Sixty-first World Health Assembly in resolution WHA61.21 in 2008. Governments, international organizations and other stakeholders should collaborate in implementing the global strategy and plan of action.
- V. Governments should establish systems for the qualification, accreditation or licensing of traditional medicine practitioners. Traditional medicine practitioners should upgrade their knowledge and skills based on national requirements.
- VI. The communication between conventional and traditional medicine providers should be strengthened and appropriate training programmes be established for health professionals, medical students and relevant researchers.

Growing needs for economic evaluation in Asian countries

■ WHO traditional medicine strategy 2014-2023

1. build the knowledge base that will allow T&CM to be managed actively through appropriate national policies that understand and recognize the role and potential of T&CM.
2. strengthen the quality assurance, safety, proper use and effectiveness of T&CM by regulating products, practices and practitioners through T&CM education and training, skills development, services and therapies.
3. promote universal health coverage by integrating T&CM services into health service delivery and self-health care by capitalizing on their potential contribution to improve health services and health outcomes; and by ensuring users are able to make informed choices about self-health care.

Growing needs for economic evaluation in Asian countries



WHO Global Atlas of Traditional, Complementary and Alternative Medicine

Brief Introduction: ISPOR Asia Consortium Complementary and Alternative Medicine (CAM) Working Group

- Established in May 2015
- Objective: Provide a platform for CAM professionals to exchange information, discuss issues, and propose solutions in the effort of an efficient, safe, rational and cost-effective use of CAM therapies in Asia
- Goal: Promote safety, efficacy and quality of CAM, facilitate the integration of evidence-based & value-based CAM into conventional practices for optimal healthcare in Asia
- Recent activities: presented at the ISPOR HTA Roundtables in Astana last year and in Singapore this year, and organized the first ISPOR CAM forum at the 7th Asia-Pacific Conference.
- More information about the CAM group is available at <http://www.ispor.org/consortiums/asia/Complementary-Alternative-Medicine.asp>



Introduction of the session & speakers

- **Ming Hu, PhD**, Professor and Director, Pharmaceutical Policy & Pharmaceconomics Research Center, West China School of Pharmacy, Sichuan University, Chengdu, China
- **Hwee Ling Koh, PhD**, Associate Professor, Department of Pharmacy, National University of Singapore, Singapore
- **Wendy Wong, PhD, BCM, BSc(Hons)**, Assistant Professor of Hong Kong Institute of Integrative Medicine, Assistant Professor of School of Chinese Medicine, and Deputy Chief Chinese Medicine Practitioner, Integrative Medical Centre, Faculty of Medicine, The Chinese University of Hong Kong, Hong Kong, China
- **Donghyo Lee, DKM, PhD**, Assistant Professor, Woosuk University College of Korean Medicine, Department of Ophthalmology & Otolaryngology & Dermatology, Woosuk University Korean Medicine Hospital, Jeonju, South Korea