# SOCIAL SURVEY ON INTEGRATIVE MEDICINE

# Situation of Integrative Medicine in China: Results from a National Survey in 2004\*

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ABSTRACT Integrative medicine (IM), usually called integrated traditional and Western medicine in China, which came into being in the 1950s as a new form of medicine, although is now developing quickly, little is known about its status and existing problems. So a national survey in China was conducted through questionnaire in 2004 by Chinese Association of Integrative Medicine with the support of State Administration of Traditional Chinese Medicine (SATCM). The results show that, of all the medical professionals investigated in this survey, 91.21% and 93.52% respondents respectively favored IM as the best diagnostic and therapeutic method. Of all the patients who once went through TCM, Western medicine (WM) and IM therapies, 68.85%, 65.45% and 71.2% respondents respectively most appreciated IM, IM hospitals and IM therapeutic treatments. Most of the 6 595 respondents held that the optimal scientific research strategy in TCM should be integrating modern medical research method (n=2 380) or modern scientific method (n=2 920). However, many hospitals exposed the problems in the aspects of governmental supports and funding supports, human resources, and domestic or international academic activities. These results indicated that IM is the patients' social needs and doctors' aspiration in China. For further development of IM, the enhancement of scientific research construction and assistance by policies and finance from the government and other institutions are urgently needed in China.

KEY WORDS integrative medicine, survey, China

Integrative medicine (IM) develops quickly since it was established as early as in the 1950s as a new form and new mode of medicine, and has become one of Chinese health care systems. Therefore, State Administration of Traditional Chinese Medicine (SATCM) has conducted a series of surveys about the situation and existing problems of IM since 1993. These surveys were limited only in a few of IM hospitals. So the survey of IM conducted nationally in 2004 aimed to attain further knowledge about the status and existing problems of IM all over the country.

#### METHODS

The national survey was conducted by Chinese Association of Integrative Medicine in 2004. Various divisions of Chinese Association of Integrative Medicine in each province participated in this arduous task, including 56 IM hospitals and 12 IM research institutes, all of whom were enthusiastic participants in the survey. Amongst all the 19 824 medical professionals are investigated, 11 835 engaged in the field of IM, 3 172 are IM therapy doctors, and also, 797 are registered doctors providing Western medicine (WM) in the same institution. There were 1 609 wards and 10 501 patient beds in these hospitals. Twelve IM research institutes, including 55 laboratories, which have made research findings in 340 items and carried out 349 research projects.

On account of the survey purpose, and to fully comprehend the current situation and existing problems of IM in China, the survey focused on the following five aspects: the attitude of medical professionals towards IM, patients' perception of IM and their opinion about doctors who provided various therapies, the scientific research condition of IM, the prospect of IM hospitals, as well as the problems encountering IM hospitals currently.

We designed eleven kinds of questionnaires on the basis of survey purpose, sent out more than 20 000 copies, and back over 12 000 copies.

#### RESULTS

# Attitude towards IM in Comparison with WM and TCM among Medical Professionals

We investigated medical professionals' attitude towards IM in comparison with WM and TCM from

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the aspects of diagnostic and therapeutic methods. Respondents were permitted to make one choice or more. As shown in Figure 1, over 91.2% (n = 5548) of the 6 083 respondents favored most the diagnostic method of IM, less than 24% (n = 1423) of the total thought the best diagnostic method pertains to WM and only 112 respondents preferred first of all TCM method. The 93.52% (n = 6483) of 6 932 respondents most favored the therapeutic method of IM while the first choice of WM and TCM therapeutic method were 363 and 186 respondents respectively.

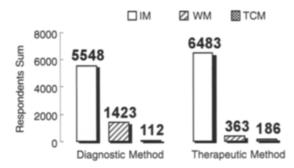


Figure 1. Medical Professionals' Attitude towards IM, WM and TCM in Diagnostic and Therapeutic Methods

# Attitude towards IM in Comparison with WM and TCM among Patients Who had Experienced All Kinds of Therapies

As shown in Figure 2, all participants we investigated had received IM, WM and TCM treatments in the corresponding hospitals. Their favorite medicine, hospitals and therapeutic methods were concerned in the investigation. Of all the respondents (n=3747), 68.85% (n=2582) favored most IM, and the others preferred WM (n=426) or TCM (n=741).

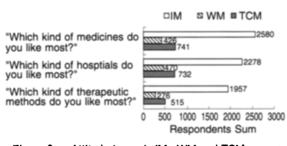


Figure 2. Attitude towards IM, WM and TCM among Patients Who Had Experienced All Kinds of Methods

When 3 480 participants were asked "which kind of hospitals do you like most among IM, WM and TCM hospitals", 65.45% (n=2278) answered they would choose IM hospitals, 470 respondents preferred WM hospitals and 732 cherished TCM hospitals as their best choice. Of 2 748 participants

who were asked "which kind of therapeutic methods do you like most", more than 71.2% preferred IM therapeutic method, 18.74% held they would take TCM therapeutic method as their favorite and 10.04% chose therapeutic method of WM.

# Optimal Strategy for Scientific Research Method

As shown in Figure 3, we investigated medical professionals' attitude towards scientific research methods in the domain of medicine. Of all the 6 595 respondents, only 5. 07% (n = 335) held that the optimal scientific research method in TCM was traditional method; 14. 56% (n = 960) respondents held modern medicine research method as the optimal strategy for scientific research. The 80. 36% (n = 2 380) respondents gave the opinion that the optimal methodology of scientific research ought to use modern medical research means or use modern scientific methodology (n = 2 920) to study TCM.

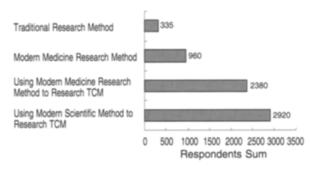


Figure 3. Medical Professionals' Attitude as to What Is the Optimal Strategy in Scientific Research Method

The development of IM is closely related with the modernization of TCM and development in WM itself. The result of investigation shows that over 90% of the respondents have a clear cognition about the connotation of integration between TCM and WM (shown in Figure 4).

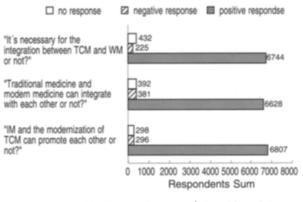


Figure 4. Medical Professionals' Cognition of the Connotation of Integration between TCM and WM

Of all respondents  $(n = 7 \ 401)$ , 91.97%  $(n = 6 \ 807)$  thought IM and the modernization of TCM can promote each other, 89.56%  $(n = 6 \ 628)$  had a positive attitude that traditional medicine (TCM) and modern medicine (WM) can be integrated and complemented with each other, and 91.12% (n = 6744) respondents considered it's absolutely necessary to integrate TCM and WM.

## The Developing Condition

An on-the-spot investigation proved that, most medical professionals in IM hospitals showed their confidence in the developing prospect of such hospitals. When participants (n=37) were asked: "Are you clear about the direction of establishing IM hospitals", "Are you confident of the developing prospect for IM" and "has clinical scientific research in IM been carried out or not", 36 participants responded that they recognized the direction of establishing IM hospitals and showed their confidence and enthusiasm in the developing prospect for IM, and 33 participants answered that clinical scientific research in IM has been carried out or is carrying on in their hospitals.

#### **Existing Problems**

Four items were selected in this aspect: governmental policy support (government support), funding support, human resources and academic activities as questionnaire indexes. The statistic results are shown in Figure 5. Over 50% of all respondents (n=7 401) thought the problem is "lack of government support" (n=3 952) and "lack of funding support" (n=3 798), and more than one third held that it is "lack of human resources" (n=2 950) and "lack of domestic and international academic activities" (n=2 332).

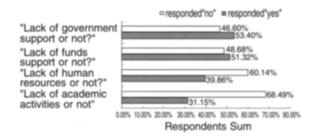


Figure 5. Existing Problems in IM Development

We also investigated the single index "government support" in TCM Department of Peking Union Medical Hospital (PUMC, a well-known WM hospital in Beijing) and Yueyang IM Hospital (a wellknown TCM hospital) in Shanghai. Of 24 questionnaires collected from PUMC, 18 respondents held that their trouble lies in "lack of government support". Of 28 questionnaires from Yueyang IM hospital, 24 replied "lack of government support".

#### DISCUSSION

## Comparison with Other Countries over Complementary and Alternative Medicine

IM, as a new form of medicine, is guite different in China from complementary and alternative medicine (CAM) in other countries. Although the use of CAM in other countries is increasing along with the demand of patients, CAM is only frequently used to treat chronic diseases such as rheumatologic conditions<sup>(1,2)</sup>, asthma<sup>(3)</sup>, inflammatory bowel diseases<sup>(4)</sup>, headache<sup>(5,6)</sup>, back problems or chronic pain<sup>(5,7,8)</sup>, and anxiety or depression<sup>(9)</sup>. CAM users often don't disclose CAM therapies they used or are using to their conventional medicine providers for certain reasons<sup>(10,11)</sup>. However, in China, IM that is integrated TCM with WM has been used for more than 60 years in clinical practice and now still makes up more than one third of the Chinese health care system, and it is used to treat almost all kinds of diseases since it enjoys the advantage of both TCM and WM, and patients prefer describing their treatment history as much as possible than to not disclosing it. What's more, this national highlight on the perception of IM between CAM and WM providers suggests that they are not prejudiced against IM since they have received education in WM and CAM in their medical college training system.

#### Limitation

The national survey wasn't conducted in the education system of IM. All TCM and most WM schools have now offered IM training courses in China. The development of IM depends very much on the quality of its education. Especially, most medical schools have affiliated hospitals where TCM and WM are integrated with each other for the best therapeutic regimen. Most IM doctors investigated in the survey also work in these schools. So it would be more helpful for further comprehension of the development of IM if a survey of the education situation of IM should be conducted. Furthermore, the survey conducted nationally was only limited in the hospitals of TCM and IM, since these hospitals provide treatment services for 70% - 80% of the population in the country. Practically, many general hospitals of WM also have clinics providing IM therapies. The conclusion is bound to be prejudiced when the sampling is restricted to patients and medical workers in the hospitals of IM or TCM in the survey.

#### **Reasons of the Rapid Progress**

The first IM hospital in China was established in the early 1980s. Results of the national survey reveal that IM has made a rapid progress after only about two decades. IM hospitals have been established in most provinces. What's more, there were established IM hospitals pertaining to class 3 and grade A (the highest grade according to the grading system of Chinese hospitals), and 12 IM hospitals of these have been decided as national key hospitals by SATCM up to 2004. Administrators in many IM hospitals are well educated in both IM and management. Comparing with the survey dated 1993, the number of subject leaders who got doctorate increased largely. The total of key subjects in these hospitals added up to 94. Some hospitals have established research institutes of IM.

IM develops the advantage of both TCM and WM and overcomes their disadvantage to a large extent. TCM therapies characterized by having few recidivisms and adverse reactions, which includes prescriptions made of natural herbs, acupuncture and moxibustion, massage, tai-chi and gi-gong, are extremely useful for ailments induced by multiple factors, diseases of unknown etiological factors, as well as chronic diseases. Nevertheless, these therapies are lacking in evidences to prove their effectiveness and their mechanism of functions to a certain degree is unknown. WM has target specificity for a wide range of diseases, but often leads to unavoidable recidivisms and adverse reactions which dissatisfied patients. IM presents a novel integration which could minimize adverse reactions and maximize the effectiveness of TCM and WM. This view is strongly supported by the results of this national survey in which patients' and medical professionals' attitude towards IM, WM and TCM was investigated.

Furthermore, IM hospitals combine the advantages of TCM hospitals with the latest, the most upto-date as well as the most sophisticated techniques and equipment of WM hospitals, and IM doctors integrate the two systems in diagnosis and treatment. Therefore, the therapies IM hospitals provide obviously surpass those offered by WM and TCM hospitals alone in treating large amounts of advanced and intractable diseases in clinical practice. The 730 questionnaires revealed that 89. 7% respondents held that it's absolutely necessary to establish more IM hospitals to meet the urgent need of Chinese health care system.

### Analysis on Problems

The results of questionnaires in existing problems suggest that the development of IM hospitals has been encountering difficulties in the following four aspects: government support, funding support, human resources (manpower deficit) and academic activities. IM hospitals were managed by TCM administrations, but most of them were established from former general hospitals of WM. Such kind of double-natured administrations in the affiliated relationship resulted in a series of problems in the development of IM hospitals. A previous survey conducted by SATCM in 1993 disclosed that 53.7% (n=332) of all respondents held that relevant local authorities just would not emphasize the development of IM hospitals. Data collected from this national survey in 2004 also indicated the same problem, i.e., about 53.4% of all the respondents (n=7 401) held that the administration of local authorities in question was not strong enough to manage such kind of hospitals using both systems.

Administers of Chinese health care have paid close attention to the problems disclosed in the survey and have been actively searching for strategies to solve these problems. They suggest that administration and management departments should strengthen policy research, formulate concrete projects, and improve their executive ability in IM policy to create a favorable policy environment for IM development. Meanwhile, funds ought to be supplied for basic medical treatment with IM, for explaining or elucidating its therapeutical mechanism and for characterizing it with outstanding special feature, significant superiority, complete equipment and scientific management. To solve the problem of human resources, SATCM recommends that IM colleges should be established in general medical universities, and special agencies should be set up for the registration of IM professionals and for conferring academic titles to them and rewarding them. Platform construction of academic exchanges in IM ought to be supported since the deficiency of academic activities exists universally in IM hospitals and institutes investigated in this survey. The levels of IM academy and renovation would be improved if external exchanges and cooperation develop in a multistrata and multichannel way.

#### Prospect of IM

IM represents one of secular development trends in biomedicine. Barnes PM et al., showed their confidence in the bright future of IM when they found that adults (54.9%) who used IM believed that CAM integrated with conventional medical interventions could be more helpful in solving their problems<sup>(9)</sup>. More and more articles on CAM/IM have been published in mainstream medical literature<sup>(12)</sup>. The increasing demands for IM have been highlighted as to the distinct and positive evaluations of its effectiveness by medical researchers, the desire of patients to medical decision making and their dissatisfaction with WM which is insufficient in treating many chronic ailments and in preventing or avoiding adverse reactions. Also the increasing expense of WM presents a big problem, at least in China. The evidences we gained from this nationwide survey reveal that IM plays an indispensable role in Chinese health care system and it would certainly become mainstream medicine in the predictable future.

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