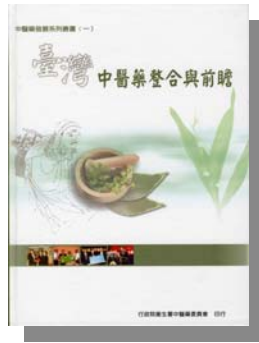


Chinese Medicine Integration and its Prospects in Taiwan



Introduction

When I became the chairman of the Committee on Chinese Medicine and Pharmacy, Department of Health, Executive Yuan on January 2, 2002, I vowed to do my utmost on the foundations laid down by the predecessors and continue the innovations. I understood the weight of the burden and the root of the problem. With support from Western and Chinese medical circles in the nation, we decided to move in the following directions to give Chinese medicine a new look: (1) modernizing and internationalizing the studies of traditional medicine, (2) making Taiwan into a herbal medicine island by developing it into a high-value industry, and (3) propagating herbal medicine by making people know more of herbal medicine. At the same time, I raised “integration and its prospects” as my administrative vision. For two years, my colleagues and experts throughout the nation have joined me in the struggle. Bearing the whole world in mind, I have tried hard to introduce new ideas to my job in the hope that I can render better service to the modernization and internationalization of Taiwan’s Chinese medical.

Since the beginning of the republic, the health organization has changed many times with the change of government but every time the Committee on Chinese Medicine and Pharmacy was kept as an advisory body. With the increasing need for traditional medicine, the business of the committee snowballed, attracting more and more attention. As a result, it was given some substantive administrative responsibility in 1987. Under the pressure of traditional medicine circles and with the support of legislators, the Act of the Committee on Chinese Medicine and Pharmacy, Department of Health Executive Yuan passed the first

reading in the legislature on November 18, 1991, and was finally approved on December 15, 1994. It was put into effect through a presidential decree on December 30 of the same year.

After a year's preparation, the Committee on Chinese Medicine and Pharmacy was inaugurated on November 1, 1995, as an independent organization under the Department of Health. The inauguration of the committee marked a milestone in the nation's history of medical development. The committee was first headed by Kuan-chung Su (Nov. 1, 1995–Jan. 2, 1998) and then by Cheng-kuo Chang (Mar. 2, 1998–Jan. 1, 2002). I took office on Jan. 2, 2002, and have been at the post ever since (Note: DOH Senior Specialist Tsai-chin Chen acted as the chairman from Jan. 3, 1998 to Mar. 1, 1998). At first, the committee had a staff of only 42 and 1% of the DOH budget. Nonetheless, the committee strove with all its might to catch up with the world flow and improve its work in keeping with the anticipations of the people. In the end, its accomplishments have drawn more and more attention. When it was established, the committee even did not have an office. It rented the space from a private landlord. Thanks to help from the higher-ups in DOH and from among the legislators, it was given a building and moved into it on March 9, 2001, laying the foundation for future development.

After eight years' hard work, we have accomplished a lot. On the basis of the research findings, we established an evaluation system for traditional medical hospitals and clinics, set up the diagnostic standard and treatment guidance for traditional medicine practitioners, raised the quality of traditional medicine practitioners through re-education, divided traditional medicine into professional disciplines, and continued to perfect the administration and management for traditional medicine. All this has contributed much to the modernization of traditional Chinese medicine in Taiwan.

With regard to the development of alternative medicine, we have worked hard to study the mechanism and present it in the form of modern medicine to highlight the characteristics of traditional medicine. In an effort to break through the difficulties of modern medicine, we have used the thinking of modern science to design the research projects, including recognizing, exploring, tracing and systemically analyzing the individual cases of successful treatment. We hope to drive traditional Chinese medicine to the international door and to win it a place in the world. With regard to traditional pharmaceuticals, in accordance with

research findings, we have taken the following concrete steps: setting the standards for authenticating herbal medicines, stipulating the specifications for preparing herbal medicines, establishing the ingredients and active agents of herbal medical products, and organizing clinical evaluation centers for traditional Chinese medicine. So far, we have established such centers in nine hospitals, including the Nation Taiwan University Hospital, Taipei Veterans General Hospital the Chang Gung Memorial Hospital—Linkou Branch , the Chinese Medical University Hospital, CHI MEI Medical Center, Show Chwan Memorial Hospital, Tri-service General Hospital, and National Cheng Kung University Hospital. In the future, we will continue to push for clinical evaluation for new herbal pharmaceuticals and help bio-science research teams at home and abroad to boost their capacities, strengthen international exchange, and encourage selling herbal medicines on the world market.

As the nation's competent agency for traditional Chinese medicine, this committee will carry on the effort to integrate the Chinese medical evaluation centers and establish a notification system for adverse reactions of herbal medicines (one has been established in the Chang Gung Memorial Hospital- LinKou Branch). Besides, we will join the Executive Yuan plan for the development of bio-scientific industry and use the resources of the Ministry of Economic Affairs, National Science Council, Academia Sinica, and various Chinese medical associations to promote our work.

On May 16, 2002, the WHO for the first time published the “WHO Traditional Medicine Strategy, 2002-2005.” It urges the governments of various nations to include the development of traditional medicine into their medical policies and hopes to attain the following objectives through the implementation of its strategy: (1) encourage the governments of various nations to include the management norms for traditional medicine/alternative medicine into the national health system; (2) stimulate the studies of safety, effectiveness, and quality and quantity standard of traditional medicine (Taiwan began to implement GMP in 1982); (3) ensure the expense for traditional medicine/alternative medicine is affordable to the people (in Taiwan, it is covered by National Health Insurance); and promote the reasonable use of traditional medicine and alternative medicine (condensed GMP

traditional Chinese medicine is paid by National Health Insurance).

WHO has set seven strategic objectives for the West Pacific region for 2001-2010: (1) formulating a national policy for traditional medicine; (2) increasing the public's recognition and understanding of traditional medicine; (3) assessing the economic potential of traditional medicine; (4) establishing appropriate standards for traditional medicine; (5) encouraging and strengthening the study of basic science for traditional medicine; (6) respecting the cultural entity of traditional medicine; and (7) drawing up a policy for protecting and preserving health resources. It is worthy to note that these objectives are consistent with this committee's effort to make traditional Chinese medicine modern and scientific. Before the WHO announced the strategy, we have accumulated 30 years' experience and score a number of accomplishments, putting us in the leading position in the world. For instance, we have included Chinese medicine into the global budget of National Health Insurance and have applied GMP to plants of traditional medicine for 25 years. To cope with the new situation of the 21st century and looking into the future, we have included the following chapters for our book: "The Present and Prospect of Chinese Medicine in Taiwan," "The Administrative Plan and Accomplishments of Committee on Chinese Medicine and Pharmacy, Department of Health, Executive Yuan" , "Integration and Forward-looking of Chinese Medicine in Taiwan," "Sustained Development of Chinese Medicine," "Forum for Traditional Chinese Medicine," and "Area of Chinese Medicine." These materials are for reference by the industry, the government, and the academia and for their comment in the hope that these humble efforts will lead them to offer their valuable views so that we can attain the goal of integration in the future and maintain our lead in the world.

The major contents of these chapters include the proposals of various circles, the administrative achievements of this committee, and the findings of researches. These are briefed as following for the convenience of readers:

1. To enable various circles understand the various research projects, we have put the papers published by the directors of various research projects in journals and at symposiums in book form, which also includes patent applications and technology transfers. (Please see Section 5 of Chapter 2 and Sections 1-4 of Chapter 6)
2. This committee has continued to publish books and e-books on the

origin of Chinese medicine, results of surveys on local herbal medicine resources and research findings. The books published in recent years include “Quality Control of Herbal Medicine – Histological Identification,” “A Collection of Taiwan’s Aborigine Herbal Plants (which won the first DOH prize in the category of government publications in 2001), ” “Treatment of Osteoporosis with Traditional Chinese Medicine – Contemporary Studies and Information, (which won third place in 2002 and 2003 among good government publications),” “Major Physical and Chemical Ingredients of Traditional Chinese Medicines,” and “An Illustrated Compendium of Taiwan’s Herbal Plants (which won the first place in the book category of the 2003 DOH selection).” These books were published for reference of herbal medical circles and have received good review (Please see Chapter 7).

3. The findings of consecutive research projects 1998-2000, passed CCMP-100 in Taiwan and America and obtained patent licenses (ROC No.149578 and US 6,214,803). The technology transfer, DOH’s first, was completed, earning NT\$12 million. Another transfer was made in 2000, yielding NT\$300,000 in royalty. (For detail, see Section 4 of Chapter 6.)
4. The book specifically covers the control of SARS (Severe Acute Respiratory Syndrome). This committee contracted and oversaw the National Association of Chinese Medicine Practitioners to compile a reference handbook on SARS control with the use of traditional medicine. Thanks to the good offices of this committee, the National Science Council budgeted NT\$50 thousand for training herbal medicine practitioners engaged in SARS control. Traditional Chinese medicine was added to the project as the eighth division. It was aimed to increase traditional Chinese medical circles’ understanding of SARS control through education so that they could play a role in the fight and publicity against SARS. The budget was also used for developing herbal prescriptions for SARS patients in hopes of freeing the public from panic. (For details, see Section 7 of Chapter 2 and Section 5 of Chapter 6)
5. This committee has followed closely the development of alternative medicine in other countries for reference in formulating our nation’s regulations and strategies and for jump-starting the

development of herbal and related biological industries. This committee has not once gathered representatives of the industry, the government and the academia to attend discussions and has conducted international symposiums. The conclusions and papers were sent to prestigious medical journals for publication. For instance, this committee, in conjunction with the confederation of the nation's traditional Chinese medical practitioners' associations and the National Research Institute of Chinese Medicine, held the 12th International Congress of Oriental Medicine on November 7-9, 2003, a major event in Chinese medical circles for years. The meeting attracted the participation of more than a thousand people, having raised the status of Taiwan's Chinese medicine and having won international identification for the nation. (For detail, see Section 9 of Chapter 2 and Section 6 of Chapter 6)

6. The credit for this book prepared in a short period goes to members of this committee, related Chinese medical experts and scholars, the directors of contract research projects, and the staff of this committee, particularly Shu-hui Luo, director of the secretarial office, division chiefs Po-chow Hsieh, and Te-ming Wang, senior editor Chi-lun Chao, administrative specialist Wan-ju You, technician Man-jau Chang, assistant technician Bi-ru Weng, technician Tsui-ying Hung, assistants Pen-yi Liao and Chun-fang Kuo. Here, I want to thank them for their active participation and for their efforts to provide and process the materials.

While this committee has entered its eighth year, I want to thank all Department of Health, Executive Yuan directors, past and present, on behalf of my colleagues for their concern and support. In the past eight years we have worked with limited budget and staff, but we have continued to grow thanks to their support and the increasing international interest in herbal medicine. Here, in the mood of a witness, I want to brief on the support given by the Department of Health, Executive Yuan directors to this committee.

1. Director Po-ya Chang (June 1990–August 1997): During her tenure, the Department of Health Act passed the Legislative Yuan, making this committee into an affiliated organization of Department of Health, Executive Yuan. She also supported the inclusion of outpatient Chinese medical service into the National Health Insurance.

2. Director Chi-hsien Chan (September 1997–May 2000): He supported the establishment of Chinese Medical Clinical Evaluation Centers and the implementation of the global budget system for National Health Insurance.
3. Director Ming-liang Li (May 2000–August 2002): During his tenure, the revision to the Medical Doctors Act was completed and the system of re-education and license renewal system for Chinese medicine practitioners was passed, clearly proscribing that the special examination for traditional Chinese medical practitioners will be ended in 2011, and the screening system for overseas Chinese medical practitioners will be repealed. He supported the establishment of seven Traditional Chinese Medical Clinical Evaluation Centers.
4. Director Hsing-che Tu (September 2002–May 2003): He supported the establishment of seven clinical evaluation centers for Chinese medicine and the plan for establishing Chinese medical hospital and adding the Chinese medical department to a hospital. He also supported the compilation of Chinese Pharmacopoeia.
5. Director Chien-jen Chen (May 2003 --): He supported the addition of a supplementary section—Traditional Chinese Medicine—to the fifth edition of Chinese Pharmacopoeia, the 2004-2008 Five-year Plan for the Establishment of an Environment for Safe Use of Chinese Medicine proposed by the committee, control on the sources of Chinese medicine, and the establishment of Chinese medical clinical evaluation centers.

Looking into the future, we will take advantage of the current international situation and make the best use of the WHO and WT platforms to further integrate the resources at home and abroad. At the same time, we will strengthen our organization to play up our role as the competent agency and nexus of the traditional Chinese medicine. We are playing the pivotal role in maintaining Taiwan's lead and in creating more values. Therefore, this committee must broaden its international vista, seek incessant innovations at home and increase the awareness of the industry for competition abroad by strengthening research and management. As always, the whole staff of this committee will continue to dedicate them to the modernization of Chinese medicine aimed at making herbal medicine more scientific. We hope we can make the best use of the mechanism of integration to turn Taiwan into an island of

herbal medicine in conjunction with related ministries and agencies. Thus, we can develop the Chinese medical industry into the mainstream of production. In this respect, we hope leaders of all circles will not grudge their valuable advice for us.