



Traditional Medicine Practice Across Asia, Examples of Non-Western Approaches

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Traditional medicine has been used for a variety of painful conditions around the world, since pre-historic times. Although traditional medicine gradually lost its utility with the rise of western medicine, traditional medicine is still practiced in different parts of the world at varying levels. A balance and integrated use of traditional medicine with western medicine may provide effective relief for selected chronic pain conditions. People with lived experience of pain and clinicians treating pain conditions should consider the effectiveness of the integrated interventions, safety, and cost-effectiveness based on sound and high-quality available evidence. As discussed in other factsheets, the decision to combine traditional medicine should be evidence-based, which includes the experience and expertise of the clinicians in using these therapies, and patient preferences in addition to available evidence. Nowadays, the limitation of the “standard western medicine” to address the multidimensional nature of chronic pain makes people reutilize^[7] and study traditional medicine again, in systematic way.

Traditional Medicine Practice in East Asia

Traditional medicine practice in East Asia mainly includes Traditional Chinese Medicine, Japanese Kampo-Medicine, and Korean Medicine. The Japanese Kampo-Medicine and Korean Medicine originated largely from Chinese Traditional Medicine and have well developed in combination with their own cultures and

practices. These traditional medicines in China, Japan, and Korea have common and similar elements. They mainly include herbal prescriptions, technical therapies including acupuncture, moxibustion, massage, naprapathy, cupping therapy, various forms of physical therapy, sports therapy (e.g., Taiji, etc.), Qigong, and food therapy, as well as the Integrated Traditional Chinese and Western medicine, which is very popular in China. Chinese Tibetan medicine and Mongolian medicine have their own unique characteristics. Traditional medicine in East Asia has its complete systems of education, practice, research, and special training throughout the country. For example, there are a total of 34 universities of Chinese Traditional Medicine and over 60 thousand major Chinese traditional medicine hospitals in mainland China. Clinical and basic research have shown the significant benefits of traditional medicine in musculoskeletal body pain for pain reduction and improvements in disability, muscle tension, flexibility, anxiety, and pain-causing disease treatment, among others^[7,10].

Traditional Medicine Practice in South Asia

South Asian traditional medicinal practices have a long history of over 2000 years. It can be argued that these traditional medicinal practices have helped to advance modern western medicine. Currently, South Asian traditional medicinal practices have undergone globalization and are frequently used in different parts of the world including the Western world^[8].

South Asian medicines and therapies include Ayurveda, yoga, meditation, mindfulness, naturopathy, homeopathy, Sowa Rigpa, Siddha, Unani and different herbal medicines specific to different regions and cultures. Based on the types of therapies, they are delivered by yoga therapists, naturopaths, or homeopathic practitioners. Some of these, such as meditation, yoga and mindfulness have been extensively studied and are frequently used for several chronic pain conditions, including but not limited to chronic low back pain, neck pain, fibromyalgia, headache, and arthritis [2,6]. These therapies are also delivered by physical therapists, psychotherapists, occupational therapists and other pain clinicians.

Mechanisms of action of herbal medicine, adverse events, and interactions with other herbal products and western medicines, nonetheless, are poorly understood [3]. More research is needed to understand this important information before implementing herbal products into patient care for pain management and health care in general.

Traditional Medicine Practice in South East Asia

Traditional medicine practices in South East Asian region such as Thailand, Malaysia, Indonesia, Laos Myanmar, Vietnam and the Philippines, are influenced by other Asian regions such as East Asian and South Asian regions [5]. These practices have evolved over the years, developed their own philosophy and have now been passed down to many generations.

An example of South East Asian traditional medicine is Thai traditional medicine, which includes Thai herbal medicines and traditional Thai massage. A systematic review of the literature on traditional Thai massage for musculoskeletal pain suggests that it is helpful in reducing pain and improving physical disability, muscle tension, flexibility and anxiety [4]. Currently, Thai traditional massage practiced by licensed practitioners has been considered a treatment and is covered by certain health benefit plans. Thai traditional medicine still has a major role in providing health care in Thai society. For example, Thailand currently allows the use of medicinal Cannabis and Kratom in medical practice. Nevertheless, this practice to date is still controversial due to potential long-term harm and risk of abuse, which needs further investigation before integrating it into routine care [1].

Summary

Although we included traditional medicine from the Asian region only in this Factsheet, the local wisdom of traditional medicines is available in every culture and every region around the world. These traditional medicine practices have been used for thou-

sands of years and are increasingly globalized. While evidence for some of these are evolving, others need further developing and testing. The consumers, clinicians, and policymakers should concern about the effectiveness, costs, and potential adverse events of these practices before using or recommending them. The use of these therapies could also be culture specific, therefore, the evidence of their effectiveness and safety in one culture does not necessarily confirm that these would be effective and safe in all cultures. Clinicians, patients, and policymakers should consider evidence of these therapies, clinician experience and patient preference using shared-decision making procedures while integrating within the integrative care plan for chronic pain.

Glossary

Kratom: *Mitragyna speciosa*, a tropical tree native to Southeast Asia and has been used as local herbal medicine.

Sowa Rigpa: Traditional medicine system of Tibet and other regions and countries such as Bhutan. It incorporates combination of culture, Buddhism and philosophy.

Siddha: One of the oldest systems of traditional medicine in India originating in Southern India. It utilizes five basic elements (that is earth, water, fire, air, and sky) as therapies for treating diseases.

Unani: Practiced in Muslim cultures in South Asia based Hippocrates' principles of treatment more recently influenced by Indian and Chinese medical practices. The scientific basis of this approach and safety has been more recently questioned.

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