行政院所屬各機關因公出國人員出國報告 (出國類別:參加國際會議)

參加 2005 ISCM 國際中醫藥學術會議

出國報告

服務機關: 行政院衛生署中醫藥委員會

出國人 職 稱:主任委員

姓 名:林宜信

出國地區:澳門

出國期間:民國94年3月31日至4月3日

報告日期:民國94年7月11日

行政院所屬各機關因公出國人員出國報告 (出國類別:參加國際會議)

参加 2005 ISCM 國際中醫藥學術會議

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服務機關: 行政院衛生署中醫藥委員會

出國人 職 稱:主任委員

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報告日期:民國94年7月11日

公務出國報告提要

出國報告名稱:

頁數 44: 含附件:☑是□否

參加 2005 ISCM 國際中醫藥學術會議

出國計畫主辦機關/聯絡人/電話 中醫藥委員會 洪翠英 02-25872828 ext.267

出國人員姓名/服務機關/單位/職稱/電話 林宜信 中醫藥委員會 主任委員室 主任委員 02-25994326

出國類別:□1考察□2進修□3研究□4實習回5其他

出國期間:民國94年3月31日至4月3日 出國地區:日本

報告日期:民國94年6月15日

分類號/目:J1/中醫 J0/綜合

關鍵詞:國際中醫藥學會、ISCM、實證醫學

內容摘要:

2005 ISCM 國際中醫藥學術會議(International Conference on Chinese Medicine),由國際中醫藥學會(International Society for Chinese Medicine,ISCM)主辦,由澳門大學、澳門科技大學和澳門理工學院等協辦,於 3 月 31 日起一連三天在澳門舉行。百餘名來自日本、韓國、中國大陸、香港、澳門、台灣和北美洲及歐洲的中醫藥界專家學者聚首澳門研討、交流,這次的學術會議從實證的角度探討中醫藥對現代疾病的防治,各地的專家學者均環繞這主題,研討中醫藥如何預防和治療包括心臟病,肝病,疼痛,和生活方式所引致的疾病如糖尿病等常見的現代病。本人以「臺灣中醫藥

治療肝病現況與未來發展」爲主題發表我國在中醫藥研究發展成果(以肝病爲例)尤其是中醫藥教育訓練、品質管制等之進展加以宣傳推廣。參加本次大會已達成預期目標,並有助於了解及正確掌握國際間中醫藥實證醫學之政策走向及學術發展現況,以作爲本國未來政策釐定之重要參考且有助於與國際接軌同步發展。

本文電子檔已上傳至出國報告資訊網(http://report.gsn.gov.tw)

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摘 要

2005 ISCM 國際中醫藥學術會議(International Conference on Chinese Medicine),由國際中醫藥學會(International Society for Chinese Medicine,ISCM)主辦,由澳門大學、澳門科技大學和澳門理工學院等協辦,於 3 月 31 日起一連三天在澳門舉行。百餘名來自日本、韓國、中國大陸、香港、澳門、台灣和北美洲及歐洲的中醫藥界專家學者聚首澳門研討、交流,這次的學術會議從實證的角度探討中醫藥對現代疾病的防治,各地的專家學者均環繞這主題,研討中醫藥如何預防和治療包括心臟病,肝病,疼痛,和生活方式所引致的疾病如糖尿病等常見的現代病。本人以「臺灣中醫藥治療肝病現況與未來發展」爲主題發表我國在中醫藥研究發展成果(以肝病爲例)尤其是中醫藥教育訓練、品質管制等之進展加以宣傳推廣,參加本次大會已達成預期目標,並有助於了解及正確掌握國際間中醫藥實證醫學之政策走向及學術發展現況,以作爲本國未來政策釐定之重要參考且有助於與國際接軌同步發展。

壹、目的:

本次參加在澳門舉辦的「2005 ISCM 國際中醫藥學術會議」主題爲《從實證的角度探討中醫藥防治現代病》,研討會係以實證醫學的角度來研討所選定現代病的臨床及臨床相關基礎研究的最新進展,本次大會所邀人員皆爲國內及國際間中醫藥界之知名菁英人士,參加之預期目標爲屆參加本次大會以了解及正確掌握國際間中醫藥實證醫學之政策走向及學術發展現況,以爲本國未來政策釐定之重要參考及能與國際接軌同步發展。本次研討會中本人以「臺灣中醫藥治療肝病現況與未來發展」爲題發表我國在中醫藥研究發展成果(以肝病爲例)尤其著重在我國中醫藥教育訓練、品質管制等之進展及經驗加以宣傳推廣;本人有幸參加此次研討大會,爲宣揚國家政策、展現推廣近年來中醫藥現代化、國際化之推動績效略近綿薄,至感責任重大。此行在諸方努力下,幸未辱使命,已圓滿達成當初設定之任務,至爲感慰。

貳、過程

一、行程

本學術研討會於二00五年三月三十一日起至四月二日止連續三天在澳門召開,本次出國行程相當緊湊,來回僅四天。三月三十一日由桃園國際機場搭機前往開會地點,隨即前往以「從傳統到科學證據:循證中醫學發展的途徑」爲研討會主題之"循證中醫學。會議前研討會,其中議題豐富(如附件一)研討會由WHO傳統醫學部門主管張小瑞女士就「循證傳統醫學的挑戰」爲題發表當前實證醫學發展上面臨的問題提出分析及展望,當天議題大部分鈞圍繞於循證醫學之過去、現在與未來挑戰、方法學、質量確保、評估等討論,了解國際間實證醫學之現況發展。當晚下榻飯店,並和我國同行受邀參加講者充份溝通及準備報告;四月一日起則與各界研討參與者參加「2005 ISCM 國際中醫藥學術會議」(會議議程如附件一)聽取由WHO傳統醫學部門主管張小瑞女士就「傳統

醫學的規管的全球回顧〈Global review regulation of traditional medicines WHO traditional medicine strategy〉」(簡報內容如附件二)爲題發表國際傳統中醫藥法規管理之回顧並聽取各項學術研究報告、成果並與講座就各項研究如光子中醫學之發展,另我國中國醫藥大學張永賢副院長以「中醫辨證的規範化及現代化」及台灣大學王榮德教授「介紹以生活素質結合存活率作結果評估」以不同之角度、方法評估中醫藥之療效。四月二日之研討會則分四個場地同時進行不同議題之討論,第一分會爲心血管疾病;討論如中醫藥用於心臟病及其相關疾病之治療、成果,第二分會爲肝病;議題集中於中醫藥用於治療肝病之相關應用,本人並以「臺灣中醫藥治療肝病現況與未來發展」(簡報內容如附件三)爲題發表我國在中醫藥研究發展成果(以肝病爲例)尤其著重在我國中醫藥教育訓練、品質管制等之進展及經驗加以宣傳推廣,第三及第四分會討論議題則分別爲生活方式相關疾病及疼痛;此行圓滿完成任務後於四月三日搭機返國。本人有幸參加此次研討會,除於適當時機宣揚國家政策推行績效,並了解掌握國際間之發展趨勢以利政策之訂定,至感責任重大,事後看來,幸未辱使命,圓滿達成當初設定之任務。

參、心得

(一)歐美近年來對於「傳統醫學」的態度逐漸開放,世界衛生組織(WHO)在 2002 年 5 月 26 日首度發表「2002-2005 年傳統醫藥全球策略」,指出:「全世界約 有 80%的人口採用中草藥作爲某種程度的初級醫療,全球植物藥市場目前 約有 600 億美元規模,而且每年以 10%之速度穩定成長」。報告中並建請全 球 180 餘國家將其納入該國醫療政策,並將在 2002 至 2005 年間,致力協助 各國在傳統醫學上,發展出各國之傳統醫學並整合於各國之醫療體系中,以 確保適當安全且有效使用。我國實應把握此一良機進一步努力提昇傳統醫藥的安全性、有效性及質量標準研究。

- (二)雖然中醫藥之療效有數千年歷史爲依據,但因其理論基礎與西方醫學不同, 仍有部分國際人士所質疑,傳統醫藥如何以現代方法驗證取得可資信服之科學數據實爲當務之急,實證醫學之發展及觀念、研究方法之推動,應大力推動,藉由此可使中醫藥取得適當證據,進而獲得國際醫藥主流市場的認可, 故我國政府各部門應促進與產、學、研各界相互配合及合作,利用現代醫學 及科技來協助、驗證,以加速中醫藥之現代化。
- (三)本次 2005 ISCM 國際學術會議的主題是"從實證的角度探討中醫藥防治現代病",在這主題之下,國內外專家從 1. 心臟病及心腦血管病 2.肝病 3.生活方式相關疾病 4.疼痛等四主題研討,咸認近來中醫藥相關產業已呈現出新的發展趨勢,傳統醫學的治療理念正逐漸被世界接受,傳統醫藥受到國際社會越來越多地關注,這爲中醫藥及相關產業的發展提供了良好的發展空間,應聯合世界各地的中醫藥研究力量,推動中醫藥現代化和國際化的發展,並在現代病的防治上發揮中醫藥的長處及應有的貢獻。

肆、建議

世界醫學之發展趨勢,已由「治療疾病」逐步邁向「健康促進」。未來的世界將是實踐世界地球村的共享園地,各國固有傳統民族醫學所珍藏之神秘經驗,也都將透過資訊科技之發展而一一被挖掘出來。中醫藥爲我國固有傳統醫療文化之精髓,乃具有獨特價值的醫療資產,歷久彌新值得我們詳加研究。如何擇優汰劣,進而增進人類健康及生活福祉,端賴各界共同合作並運用現代科技方法來協助發展。而如何以科學精神及實據醫學之方法來驗證中醫藥的療效,更是專業人員之重大挑戰。由衷期望在廿一世紀中醫

藥生物科技發展之舞臺上,我們能扮演著更重要的角色,做出更大的貢獻。有如下之建議:

- 1. 因爲參與國際性會議是爭取我國在國際知名度的重要方式之一,除可增加能見率外並可於適當時機介紹我國之各項成果,我國在中醫藥領域的研究表現和相關行業的投入,實爲其他國家之典範,深可自豪爲臺灣之另一項奇蹟,值得與國際上其他國家學習及互相切磋,因此積極參加此類重要國際研討會,應是提高國際能見度的一項具體行動。建議未來國際性學術研討會仍應派員與會,以顯示我國與中國大陸是具有不同的代表權,而我國於傳統醫藥之現況發展與貢獻是可以貢獻國際社會。
- 2. 可配合行政院「加強生物技術產業推動方案」及「中草藥產業技術發展五年計畫」, 爲建立健全之中醫藥臨床試驗體系及法規環境,檢視中醫藥研究在過去、現在之努力成果,並籌劃未來之致力方向,以落實中醫藥科學化與永續發展,並達普及化及 國際化之目標,建議舉辦研討會,匯集相關學者專家共同參與,以提振中醫藥研究 風氣、擴展研究領域,加強產官學研經驗交流,並規劃我國中醫藥實證醫學研究未 來發展策略。

伍、誌謝

誠摯的感謝署長之支持及同行之王榮德教授及張永賢教授的共同努力,適時介紹我國中醫藥發展現況使國際間了解我國在中醫藥研發現況及成就向國際發聲,並藉此了解及正確掌握國際間中醫藥實證醫學之政策走向及學術發展現況,以作爲本國未來政策釐定之重要參考及有助於與國際接軌同步發展,謹此致上由衷謝忱!

陸、參考資料:

- 1. 林宜信等:臺灣中醫藥整合與前瞻,p.p.1-492,衛生署中醫藥委員會,台北, 2003.12。
- 2. WHO:「2002-2005 年傳統醫藥全球策略」, http://www.who.org, 2002.5
- 3. 第 58 屆 WHA 文件資料

柒、附錄:

- 一: 2005 ISCM 國際中醫藥學術會議大會會議議程
- 二:WHO 傳統醫學部門主管張小瑞女士之「傳統醫學的規管的全球回顧〈Global review regulation of traditional medicines WHO traditional medicine strategy〉」簡報內容
- 三:「臺灣中醫藥治療肝病現況與未來發展」講稿(英文版)

			PRO ZAM AT A GLANCE	NCE				
Internation	International Symposium on Evidence-Based							
" C	Chinese Medicine (EBCM) 缩證中醫學國際研討會		2005	ISCM Intern 2005	2005 ISCM International Conference on Chinese Medicine 2005 ISCM國際中醫藥學術會議	ese Medicine		
Conference	31 March (THU) 三月卅一日 (星期四) Conference Room, Macao Cultural Centre 澳門文化中心會議室	Small Audi	1 April (FRI) 四月一日 (星期五) Small Auditorium, Macao Cultural Centre		2 April (SAT) 四月二日(星期六) Macao Cultural Centre		3 April (SUN) 四月三日 (星期日) Macao Cultural Centre	a) entre
08:00 - 17:00	Registration 註冊	08:00 - 17:00	Registration 注冊	08:00 - 12:15	Registration 注画	08:00 - 12:00	第11文化中心 10 Information Deel: 社群権	Jack 45 88 R
09:00-:09:10	Welcome 散矩							and fall the vice
09:10 - 10:25		09:15 - 10:30	Opening Ceremony 開幕典徴	09:00 - 10:30	llar Lision	ease n \$\frak{\alpha}\$ 09:00 - 10:15		Pain Session 疼痛分會 (Conference Room
	循證中醫學概念,隨機對照臨床試 縣及系統評價	10:30 - 11:00	Reception 茶器交流		小剧院) 會議室)		(Siliali Auditorium 小科院)	· · · · · · · · · · · · · · · · · · ·
10:25 - 10:35	Tea Break 茶點			10:30 - 10:45	Tea Break 茶點	10:15 - 10:30	1 Tea Break 苯亚	*
10:35 - 12:15	Morning Session 上午分題	11:00 - 12:00	Plenary Session 全體大會	10:45 - 12:15	Cardiovascular Liver Disease Diseases Session 心血管病分會 肝病分會 (Small Auditorium (Conference Room		Life-style related Diseases Session 生活方式相關疾 病分會 (Small Auditorium 小劇院)	Pain Session 疼痛分會 (Conference Room 會議室)
12:20 - 14:00	Lunch 午飯 (12:25 - 14:30)	12:00 - 14:00	Lunch 午飯	12:20 - 14:15	Lunch 午飯	12:20 - 14:00	0 Innch 存储	46
14:00 - 16:00	Alfernoon Session: 下午分題: Non-RCT, Traditional and Non- Clinical Evidence 非隨機對照臨床實驗,傳統及非臨 床證劇	14:00 - 15:30	Plenary Session 全體大會	14:15 - 15:45	Cardiovascular Liver Disease Diseases Session Session FF病分會 (Small Auditorium (Conference Room 小劇院) 會議室)			70
16:00 - 16:15	Tea Break 茶點	15:30 - 15:45	Tea Break 茶點	15:45 - 16:00	Tea Break 茶點	14:00	** 	
16:15 - 17:15	Panel Discussion 討論	15:45 - 17:15	1 Plenary Session 全燈大會	16:00 - 17:30	Life-style related Diseases Session 生活方式相關疾 病分會 病分會 (Conference Room (Small Auditorium) 全義室)	ion 19:00	遊 Macao Tour	Tour .
18:00 - 20:00	Dinner 晚飯	19:00 - 21:30	Welcome Dinner 数迎晚宴	18:30 - 21:00	Conference Banquet 大會晚宴	19:00 -20:00	Dinner 晚飯	晚飯

PRE-CONFERENCE INTERNATIONAL SYMPOSIUM ON EVIDENCE-BASED CHINESE MEDICINE (EBCM)

會議前 "循證中醫學" 國際研討會

Theme: From Traditional to Scientific Evidence:

The Way Forward for Evidence-based Chinese Medicine (EBCM)

主題:從傳統到科學證據:循證中醫學發展的途徑

Date: Thursday March 31, 2005

日期: 二零零五年三月卅一日, 星期四

Venue: Conference Room, Macao Cultural Centre

Macao, China

地點:澳門文化中心會議室

澳門

INTERNATIONAL SYMPOSIUM ON EVIDENCE-BASED CHINESE MEDICINE (EBCM)

循證中醫學國際研討會

SCIENTIFIC PROGRAM 研討會程序

31 March 2005, Thursday 二零零五年三月卅一日 星期四

Conference Room, Macao Cultural Centre 澳門文化中心會議室

08:00 - 17:00

Registration 註冊

09:00 - 09:10

Welcome

歡迎

YEUNG Hin Wing

	72A	楊顯榮
Morning Session 上午分題	General Concept, RCT and Systemic Review 循證中醫學概念,隨機對照臨床試驗及系統評價	
Chairperson 主持人	: Charlie XUE 薛長利	
09:10 - 09:35	The challenges to evidence-based traditional medicine 循證傳統醫學的挑戰	ZHANG Xiao Rui 張小瑞
09:35 – 10:00	Opportunities and challenges for evidence-based Chinese medicine 把握機遇迎接挑戰 - 中醫藥循證醫學	Vivian TAAM WONG 黃譚智媛
10:00 – 10:25 ′	Proving that traditional Chinese medicine is efficacious and effective 傳統中醫藥有效性的驗證	John ESDAILE
10:25 - 10:35	Tea Break 茶點	
Chairperson 主持人	: Charlie XUE 薛長利	
10:35 – 11:00	The traditional evidence-based concept and methodology in Chinese medicine 中醫學固有"循證"思維和方法的探討	LAI Shi Long 賴世隆
11:00 11:25	Developing and using the assessment system of soft endpoints in research of traditional Chinese medicine (TCM) 中醫藥研究中軟指標評價體系的建立和應用	WU Da Rong 吳大嶸
11:25 - 11:50	Cancer prevention with herbal agents: Is RCT necessary? 是否需用 RCT 來驗證中藥預防癌症的效用?	Stephen LAM 林俊濤
11:50 - 12:15	Systemic reviews of Chinese medicine 中醫藥臨床試驗的系統評價	LAO Li Xing 勞力行
12:15 – 14:00	Lunch 午飯	

Afternoon Session 下午分題	Non-RCT, Traditional and Non-Clinical Evidence 非隨機對照臨床實驗,傳統及非臨床證據		
 Chairperson 主持人:	Ian TSANG 曾廣營	Charlie XUE	
14:00 – 14:25	The role of traditional evidence of Chinese medicine	薛長利	
	傳統證據在中醫學的作用		
14:25 – 14:50	Development and validation of an instrument for assessing the quality of non-randomized studies in Chinese herbal medicine	Angela YANG 楊衛紅	
	中醫非隨機研究質量評價打分表的建立和有效 性研究		
14:50 – 15:15	General considerations for developing evidence-based traditional Chinese medicine-the possibility and practical issues 發展循證中醫學的若干思考—可能性和實踐的探討	LAI Shi Long 賴世隆	
15:15 – 15:35	Pharmacokinetic data as evidence of quality and effect of Chinese medicinal products 中醫質量保證與藥效的藥代動力學證據	Moses CHOW 周檉森	
15:35 – 16:00	Scope, evaluation and quality: evidence in complementary and alternative medicine 範圍、評價、質量:互補及替代醫學中的證據	Edwin COOPER	•
16:00 – 16:15	Tea Break 茶點	Co-Chairpersons: 主持人:	
16:15 – 17:15	Panel Discussion 討論	Co-Chairpersons: 主持人: LAI Shi Long 賴世隆 ZHANG Xiao Rui 張小瑞	
		Panelists: 討論小組成員: LAO Li Xing 勞力行 LIU Ping 劉平 Ian TSANG 曾廣營 Charlie XUE 辞長利 Stephen LAM 林俊濤	

18:00 - 20:00

Dinner 晚飯

2005 ISCM INTERNATIONAL CONFERENCE ON CHINESE MEDICINE 2005 ISCM 國際中醫藥學術會議

SCIENTIFIC PROGRAM 學術會議程序

1 April 2005, Friday 二零零五年四月一日 星期五 Small Auditorium, Macao Cultural Centre 澳門文化中心小劇院

08:00 - 18:00	Registration 註冊	76
Morning 上午		
09:30 - 10:30	Opening Ceremony 開幕式	•
10:30 - 11:00	Tea Reception 茶點交流	
Plenary Session 全體	大會	
Chairperson 主持人:	WANG Yi Tao 王一濤	
11:00 – 11:30	Global review regulation of traditional medicines WHO traditional medicine strategy 傳統醫學規管的全球回顧	ZHANG Xiao Rui 張小瑞
11:30 – 12:00	Photonic Chinese medicine and traditional Chinese medicine of the new century 光子中醫學與新世紀的中醫學	DENG Tie Tao 鄧鐵濤
12:00 - 14:00	Lunch 午飯	
Afternoon、下午		
Chairperson 主持人:	WANG Ning Sheng 王寧生	
14:00- 14:30	Normalization and modernization of pattern differentiation 中醫辨證的規範化及現代化	CHANG Yung Hsien 張永賢
14:30 – 15:00	Introduction to quality of life and its integration with survival for outcome evaluation 介紹以生活質素結合存活率作結果評估	WANG Jung Der 王榮德
15:00 – 15:30	Scientific evidence for the benefits of qigong and tai chi	LIN Shin
	氣功和太極拳效益的科學依據	林欣
15:30 – 15:45	Tea Break 茶點	
Chairperson 主持人:	TSIM Wah-Keung 詹華強	
15:45 – 16:15	Quality assurance: from crude drug to clinical preparation 中藥質量保證:從藥材到臨床用藥	XIAO Pei Gen 蕭培根
16:15 – 16:45	Studies on the mechanism of "YI QI SHENG XIAN" therapy for anti-cardiac arrhythmia 益氣升陷法抗心律失常作用機理研究	CAO Hong Xin 曹洪欣
16:45 – 17:15	Clinical and experimental research on "XNKQ" acupuncture therapy "醒腦開竅"針刺法治療中風的臨床及基礎實驗研究	SHI Xue Min 石學敏
17:15	Coach departs for hotel 酒店接送	
19:00 - 21:30	Welcome Dinner 歡迎晚宴	

SCIENTIFIC PROGRAM 學術會議程序

二零零五年四月二日 2 April 2005, Saturday

08:00 - 18:00

Registration 註册

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Session I 分會	-#:31	Cardiov	ascular L	uscases ,	7 mr 12 /	PI 1

Venue 會場: Small Au	ditorium, Macao Cultural Centre 澳門文化中心小劇院。	
Chairperson 主持人:	LIU Liang 劉良	YYY' Da
09:00 - 09:30	Study of the Traditional Chinese Medicine on Coronary Heart Disease	LI Lian Da 李連達
,	中藥治療冠心病研究	
09:30 - 10:00	Clinical and basic studies of therapeutic effects of Sheng-mai-san on heart failure 生脈散治療心臟衰竭的臨床與基礎研究	YOU Jyh Sheng 游智勝
10:00 – 10:30	Improving cardiovascular care through a patient-Centreed integrative East-West medical model: US perspective 以病人為本的中西醫結合模式處理心血管病:美國觀點	HUI Ka Kit 許家傑
10:30 – 10:45	Tea Break 茶點	
Chairperson 主持人:	FAN Tai Ping 典台平	
10:45 – 11:15	Functional imaging of platelet forming thrombi under blood flow conditions and its application on the dissection of the action mechanism of Chinese herbal medicine	Shinya GOTO 後藤信哉
	血栓形成的功能性成像術及其在中藥作用機理研 究的應用	
11:15 – 11:45	Clincial research on atheroserosis treated by Jiang Zhi Tong Mai 降脂通脈方抗動脈粥樣硬化的臨床研究	GUO Wei Qin 郭維琴
11:45 – 12:15	Biotechnology in Chinese Herbal Research	KANG Jing Xuan 康景軒
	生物技術應用於中藥研究	W(N, T1 .
Afternoon 下午		
Chairperson 主持人:	FONG Wang Fun 方宏勳	DISTO TRUE
14:15 – 14:45	Ginseng, angiogenesis and cardiovascular diseases	FAN Tai Ping 樊台平
	人參、血管新生及心血管病	
14:45 – 15:15	Application of modern science and technology on quality control of Chinese medicine for cardiovascular diseases	WANG Yi Tao 王一濤
	現代科技與活血化瘀中藥的質量評價	
15:15 – 15:45	The summary of traditional Chinese medicine and prescription about the therapy of cardiac and cerebrovascular disease	SUN Tong 孫桐
	治療心腦血管疾病的中药與方劑述要	
15:45 – 16:00	Tea Break 茶點	

SCIENTIFIC PROGRAM 學術會議程序

2 April 2005, Saturday 二零零五年四月二日 星期六

08:00 - 18:00

Registration 註冊

Morning 上午

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Chairperson 主持人:	ice Room, Macao Cultural Centre 澳門文化中心實驗至 CHE Chun Tao 車鎮濤	Robert BATEY
09:00 - 09:30	Traditional chinese medicine (TCM) and hepatitis in a Western liver clinic experience	Kopen Bairi
09:30 - 10:00	中醫學與肝炎:來自西方肝病診所的經驗 Multicentric, random, control clinic trial on liver fibrosis due to chronic hepatitis B with Chinese traditional herbs 中藥複方治療慢性乙型肝炎肝纖維化的多中心、隨	LIU Ping 劉平
10:00 – 10:30	機對照試驗 Effects of Chinese herbal medicine on liver disease in Taiwan: now & future 臺灣中藥界治療肝病現況與未來發展	LIN I Hsin 林宜信
10:30 - 10:45	Tea Break 茶點	
Chairperson 主持人:	HUI Ka Kit 許家傑	LIU Jian Ping
10:45 - 11:15	Chinese herbal medicine for chronic hepatitis B: systematic overview	劉建平
	中草築治療慢性乙型肝炎系統性回顧	X
11:15 – 11:45	Study on Chinese traditional medicine treating refractory ascites induced by hepatocirrhosis 中醫藥為主治療難治性肝硬化腹水的研究	ZHOU Da Qiao 周大橋
11:45 – 12:15	Several key aspects of clinical study on fatty liver	YIN Chang Jian 尹常健
11.45 — 12.15	脂肪肝中醫臨床研究的幾個主要環節	, the teach
12:15 14:15	Lunch 午飯	
Afternoon 下午		
Chairperson 主持人: 14:15-14:45	MUI Ling Cheung 梅嶺昌 Clinical efficacy of treating liver fibrosis with "Lao disease" theory.	LIU Shao Neng 劉紹能
	從絡病論治肝纖維化臨床療效觀察	
14:45-15:15	Modern technology of molecule biology Applied in research of liver diseases on combination of traditional Chinese medicine with western medicine 現代分子生物學技術在中西醫結合肝病研究中的應用	XU Lie Ming 徐列明
15:15-15:45	Clinical observation on efficacy of wrist-ankle acupuncture in relieving moderate and severe pain of patients with liver cancer 腕踝針對中重度肝癌疼痛的鎮痛療效觀察	LING Chang Quan 凌昌全
15:45 - 16:00	Tea Break 茶點	

Session III 分會三: Life-Style Related Diseases 生活方式相關疾病

Venue 會場: Small Auditorium, Macao Cultural Centre 澳門文化中心小劇院

Chairperson 主持人: TONG Yao 童瑤

16:00 - 16:30 Use of herbal agents for lung cancer

Stephen LAM 中藥治防肺癌的應用

林俊濤

Integrated medicine approach to breast cancer 2005: 16:30 - 17:00

PAN Nien Chung case report 潘念宗

綜合治理乳癌的最新進展〈2005〉: 病例的探討

The clinical treatment protocol of Chinese medicine 17:00 - 17:30

Charlie XUE for seasonal allergic rhinitis (SAR): an evidence-based 薛長利?

approach

中藥治療季節性鼻敏感的臨床方案:

循證醫學方式

Coach departs for hotel 酒店接送 17:30

18:30 - 21:00 Conference Banquet 大會晚宴

Session IV 分會四: Pain 疼痛 Venue 會場 Conference Room, Macao Cultural Centre 澳門文化中心會議室 Chairperson 主持人: BIAN Zhao Xiang 卞兆祥 Pain management by acupuncture in a physiological 16:00 - 16:30 Iréne LUND perspective 從生理角度看針灸鎮痛 Anti-arthritic activities of sinomenine and Qingfu 16:30-17:00 LIU Liang Guanjieshu capsule, the botanical drugs from Chinese 劉良 medicines 青藤鹼與中醫植物藥品"Qing Fu"關節素膠囊的 抗風濕作用 Therapeutic effects of Korean herb-acupuncture on 17:00-17:30 LEE Hye Jung pain diseases 李惠貞 韓國"草藥—針灸療法"對痛症的療效 17:30 Coach departs for hotel 酒店接送 18:30 - 21:00Conference Banquet 大會晚宴

2005 ISCM INTERNATIONAL CONFERENCEON CHINESE MEDICINE 國際中醫藥學術會議

Global review regulation of traditional medicines WHO traditional medicine strategy 傳統醫學規管的全球回顧

ZHANG Xiao Rui 張小瑞

sulting, NBJ, Eurotor

Global Review Regulation of Traditional Medicines WHO Traditional Medicine Strategy



Dr Xiaorui Zhang Coordinator Traditional Medicine Department of Essential Drugs and Traditional Medicine Warld Health Organization

Populations using TM/CAM worldwide

Populations using traditional medicine for primary health care Ethiopia ex Benin pox India pox Rwanda pox Tanzania ex Uganda ex

Populations in developed countries who have used complementary and alternative medicine at least once Survey: Standary \$61 of al. 1982; Flater F & Word A. 1982; Heath Energy, 2002; World Health Grantistics, 1982; and personnel separate polysical as \$150.

The Rise in Herbal Medicines Market Sales



The 6 member states are: the Kingdom of Bhutan, Canada, the Czech Republic, the Islamic Republic of Iran, the Republic of Madagascer, the Islamic Republic of Pakistan, the Republic of Sudan, the Kingdom of Sweden.

Global Market of Supplements 2003 (Market Volume: US\$ 51 Billion)

	VMS	,Herba	Sports / Specialty	Total
North America	7,0		4,5	16.3
Еигоре	5.6		2.5	15.0
Asia	1,6		1.1	7.6
Japan	3.6	建 基金融值	1.4	7.2
South America	6,0		0.3	1.7
Rest of World	1.2	## TO 1	0.6	2.6
Total	20.6	19,6	10.4	50.6

in retail prices

TM/CAM use for various diseases and conditions



France

- 49% for minor diseases
- 54% for chronic diseases
- 3% for serious ilinesses
- 17% to maintain health and to prevent diseases

Role of TM/CAM



 In Africa, North America and Europe, over 75% of AIDS patients use some form of TM/CAM treatment for various symptoms and conditions

Artemisia annua i

- In Ghana, Mali, Nigeria and Zambia, 60% of children with fever are treated with herbal medicines at home
- In China, WM and TCM combination for SARS treatment



Challenges faced by alternative medicine

- Lack of national policies and regulations on TM/CAM
- Lack of sound scientific evidence concerning safety and efficacy
- Difficulties in ensuring rational use and quality control of TM/CAM
- Need to ensure the sustainable use and the protection of knowledge of TM/CAM

WHO Traditional Medicine Strategy 2002-2005



Policy: Integrate TM/CAM with national health care systems

 Safety, efficacy and quality: provide evaluation, guidance and support for effective regulation

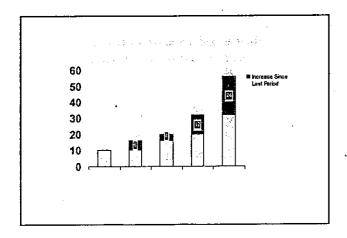
Access: ensure availability and affordability of TM/CAM, including essential herbal medicines

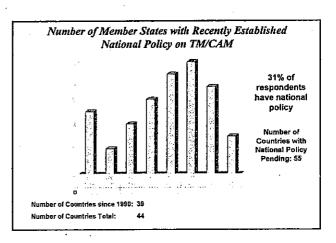
Rational use: promote therapeutically-sound use of TM/CAM by providers and consumers

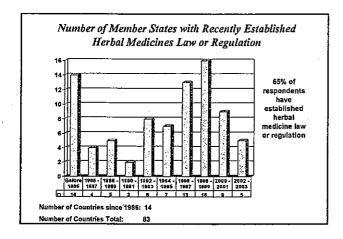
Policy



- Regulatory Situation of Herbal Medicines: a worldwide review, <u>1998</u>
- Legal status of traditional medicine and complementary/alternative medicine: a worldwide review, 2001
- WHO Global Survey and Database of National Policy and Regulation of TM/CAM and Herbal Medicines including information from 141 countries, 2004
- Summary report of the global survey on national policy on traditional medicine and regulation of herbal medicines 2005







Safety, efficacy and quality



- WHO monographs on selected medicinal plants Volume 1. 1998 2. 2002 3. in press 4. in drafting
- General Guidelines for Methodologies on Research and Evaluation of Traditional Medicine <u>2000</u>
- Acupuncture: Review and analysis of reports on controlled clinical trials 2002
- SARS: clinical trials on treatment using a combination of Traditional Chinese medicine and Western medicine 2004
- Homeopathy: review and analysis of reports on controlled clinical trials in press

Safety, efficacy and quality



- Quality control methods for medicinal plant materials <u>1998</u>
- Guidelines for Good Agricultural Practice and Good Control Practice for medicinal plants 2003
- Guidelines on Safety Monitoring and Pharmacovigilance of Herbal Medicines 2004
- WHO guidelines on assessing safety and quality of herbal medicines with reference to contaminants and residues, <u>(in press)</u>
- Updated WHO GMP guidelines for herbal products (in press)

Rational Use



- WHO guidelines for developing consumer information on the proper use of TM/CAM 2004
- WHO guidelines on basic training and safety in acupuncture, <u>1996</u>
- Training guidelines for phytotherapies,
 who describing
 who can prescribe herbs,



➤ who can sell herbs

■ Training guidelines for manual therapies including Chinese Tunia, Chiropractic, Osteopathy and other popularly used manual therapies

Conclusion

- Traditional Medicine will contribute to human health care in the 21st century.
- There are many challenges to the safety and effective use of traditional medicine.
- The WHO Strategy will meet the gaps and challenges, but...



it is a long way to go...

Effects of Traditional Chinese Medicine on Liver Disease

in Taiwan: Now & Future

Presented by:

Chairperson I-hsin Lin,M.D.,Ph.D





Committee on Chinese Medicine and Pharmacy Department of Health, Executive Yuan,

Outlines

- I.Preface
- II. The international trend of traditional medicine
- Ⅲ.The integration and prospect of Chinese medicine and pharmacy
- IV. The importance of Chinese medicine and pharmacy in treating liver disease
- V. The future of the research on Chinese medicine and pharmacy in treating liver disease
 - VI. Conclusion



I. Preface---The developing dynamics and trend

of traditional medicine in the world

The worldwide view

- ❖ 16 May, 2002 The World Health Organization 《 WHO Traditional Medicine Strategy 2002-2005》
- ❖ World Health Organization Regional Office for the Western Pacific 《7 Strategic Goals 2001-2010》
- ❖ In USA

 「National Center for Complementary and Alternative Medicine」



04/02/2005 ISCM

I-hsin Lin, M.D., Ph.D.

The World Health Organization 《 WHO Traditional Medicine Strategy 2002-2005 》

- ❖Integrate TCM/CAM with national health care systems
- ❖ Promote the safety, efficacy and quality of TCM/CAM
- ❖Increase the availability and affordability of TCM/CAM
- ❖Promote therapeutically sound use of appropriate of TCM/CAM

Source: WHO Traditional Medicine Strategy 2002-2005 16 May, 2002

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WHO Regional Strategy for Traditional Medicine in the Western Pacific

7 strategic goals between 2001-2010

- ❖ Set national policy for TM
- ❖ Raise public's acknowledgement and understanding on TM
- ❖ Assess the economic potential of TM
- ❖ Establish appropriate standard for TM
- ❖ Encourage and fortify basic research on TM
- ❖ Respect TM culture as a whole
- ❖ Establish policies to protect and reserve health resources

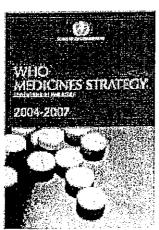


04/02/2005 ISCM

I-hsin Lin, M.D., Ph.D.

Source: Chinese Medicine and Pharmacy Post, 27 May, 2002

The developing dynamics and trend of traditional medicine in the world



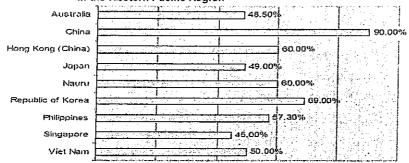
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WHO MEDICINES STRATEGY 2004-2007

- ■POLICY 2: Traditional medicine and complementary and alternative medicine
 - 2.1 TM/CAM integrated into national health care systems where appropriate
 - 2.2 Safety, efficacy, and quality of TM/CAM enhanced
 - 2.3 Availability and affordability of TM/CAM enhanced
- 2.4 Rational use of TM/CAM by providers I-hsin Liaped. DO 95 Memoria promoted

The developing dynamics and trend of traditional medicine in the world

Figure Percentage of population using traditional medicine selected countries in the Western Pacific Region



(Source: Traditional Medicine, WHO May, 2003, http://www.who.int/mediacentre/factsheets/fa134/en/print.html
Except for the Western Pacific countries showed above, there are over 50% people in Europe, northern America and other
industrial countries having experience of using TM, such as 70 % of population in Canada and 70 % of population in
German WHO Regional Strategy for Traditional Medicine in the Western Pacific

(source: 2002 WHO in the Western Pacific, The Global Strategy for Tradition Medicine and Complementary Medicine, 2002-2005年)

As WHO estimated, the global market for traditional medicine is on steady growing trend of 60 billion per year 04/02/2005 ISCM I-hsin Lin, M.D., Ph.D.

II. The international trend of traditional medicine

- ❖ 「Guidelines on developing consumer information on proper use of traditional, complementary and alternative medicines」 was pronounced on 22th June, 2004, as the action reference for countries
- ❖ 「White House Commission on Complementary and Alternative Medicine Policy」 was established in March, 2000

04/02/2005 ISCM

\prod . The international trend of traditional medicine

- ❖ In June, 2004, FDA has also revised draft proposals since 1996 into an act-「Guidance for Industry Botanical Drug Products」
- ❖ The "Directive on Herbal Medicinal Products" pronounce by European Union, the regulation and inclusion of traditional medicine into the health insurance schemes in UK and Norway have raised worldwide concern

04/02/2005 ISCM

I-hsin Lin, M.D., Ph.D.

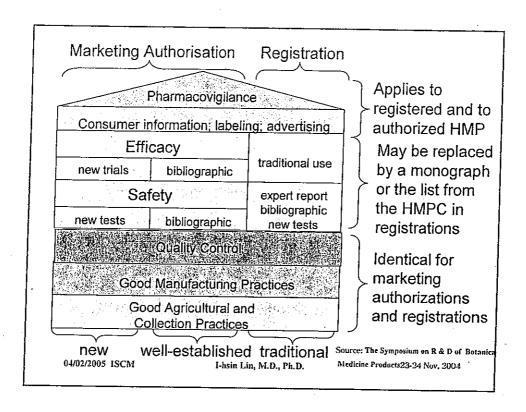
The NCCAM Strategic Plan (2005-2009) Expanding Horizons of Health Care: Strategic Plan 2005-2009

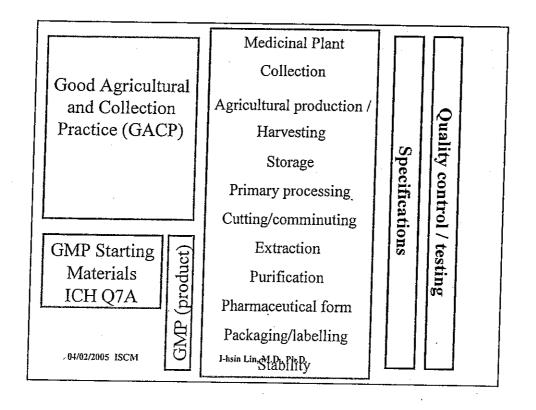


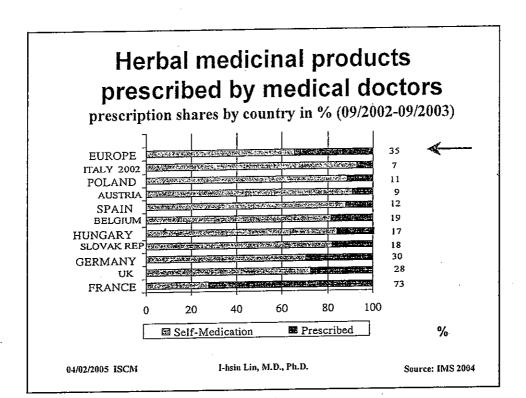
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NCCAM specify goals for four strategic areas:

- Investing in Research
- 1. Mind-Body Medicine
- 2. Biologically Based Practices
- 3. Manipulative and Body-Based Practices
- 4. Energy medicine
- 5. Whole Medical Systems
- 6. International Health Research
- 7. Health Services Research
- 8. ELSI of CAM Research and Integrated Medicine
- •Training CAM Researchers
- Expanding Outreach
- •Advancing NCCAM's Organization

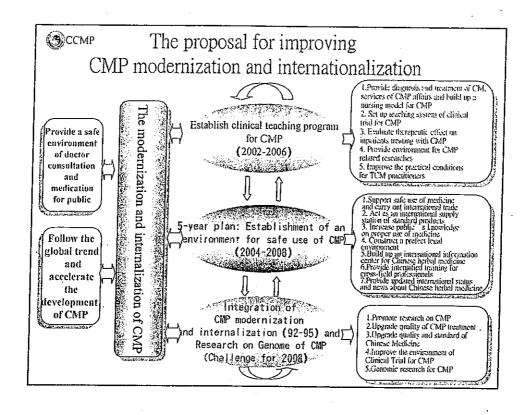






Ⅲ. The integration and prospect of Chinese medicine and pharmacy

04/02/2005 ISCM



Committee on Chinese Medicine and

†

Pharmacy

+ ⁺ + 2004 the policy goal for Chinese Medicine and Pharmacy

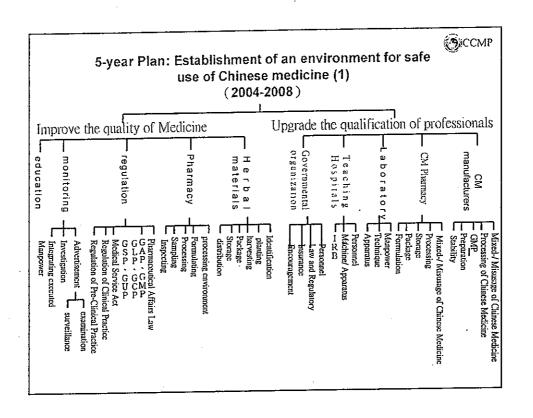
The year of launching quality control for*+
Chinese Pharmacy

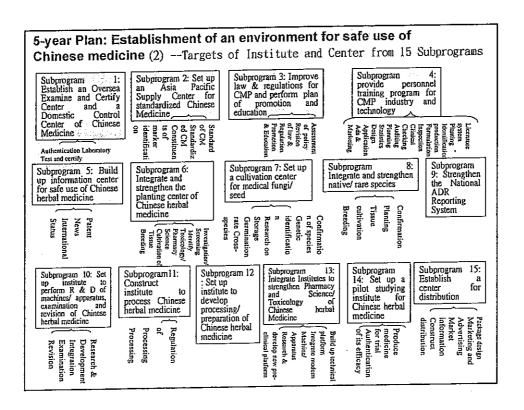
Establish an environment for the development and inventory of Chinese pharmacy

Set up a good-quality industry of Chinese Medicine and Pharmacy



Committee on Chinese Medicine and Pharmacy Department of Health, Executive Yuan,



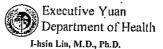


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— Target of medical and pharmaceutical policies 2005 $_{\star}$ $_{\star}$

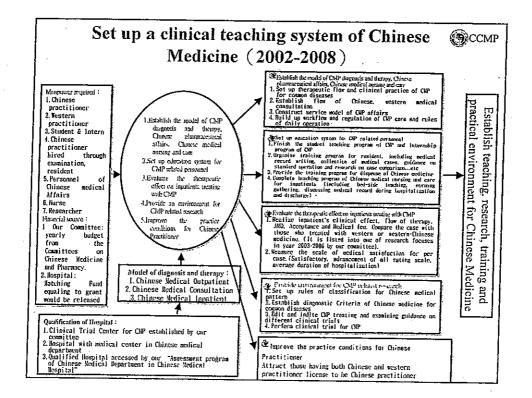
Launching year of clinical trial for Chinese Medicine and Pharmacy

Strengthen the environment for CMP development Create a new century of good services



Committee on Chinese Medicine and Pharmacy

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Implement Clinical Teaching Program of Chinese Medicine, strengthen nursing ability

- Promote "clinical teaching program of Chinese medicine", complete illness history for CM teaching as well as abstract of Chinese medical teaching content
- Implement further education for Chinese practitioner and system of license renewal. Authorize to hold related symposia and training programs
- Consign to hold the "Program of upgrading nursing ability for Chinese Medicine", increase the profession and nursing ability of related personnel

Accelerate systematization of personnel training
Upgrade nursing quality

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IV. Chinese medicine and pharmacy(CMP) in treating liver disease

- ❖ According to the statistics of cause of death from our Department of Health, liver cancer is the leading death cause in Taiwan.
- ❖ Chronic liver disease and cirrhosis are number 5 from top ten.
- ❖Liver disease are listed as an important disease by our government
- ❖Find out the treatment for liver disease is the urgent task

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V. The orientation of research on Chinese medicine and pharmacy (CMP) in treating liver disease

- ❖ 5 aspects of research:
- ❖ liver disease treated with Chinese medicine (include compound prescription and single herb);
- Evaluation of therapeutic effect by Western-Chinese medical treatment;
- Establishment of diagnostic criteria of Chinese medical pattern for liver diseases (Hepatitis B & C);
- ❖ Development of new product through Genomic medicine
- ❖ Research on literature of liver disease

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The list of the studies relate to liver disease (1)

Number	Title
DOH85-CM-004	The effect of Modified Xiao-Chaihu-Tang in patients with chronic C Virus hepatitis
DOH85-CM-006	The study on the antioxidation effect of Chinese herb drug prescriptions used for liver disease
DOH85-CM-009	Assessment of the effect supplemented jla-wei-xiao- chai-hu-tang in the treatment of chronic hepatitisc
DOH85-CM-019	The Effict of Sheau-Chir-Hwu-Tan Jia-Wey-Shia-Yau-SAAN, and In Chern Wun-Ling-SAAN on liver cirrhosis
DOH85-CM-036	Regulation of the gene expression of tumor suppressor genes(p53 and Rb) and DNA repair enzymes in hepatocellular carcinoma cells by solanaceae herbs

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The list of the studies relate to liver disease (2)

Number	Title
CCMP86-RD-020	Role of emodin in the Regulation of DNA Repair Enzymes in Cells and the Application of Tissue- Specific Nanosphere Preparation in the Therapy for Hepatocellular Carcinoma
CCMP87-RD-040	Action Mechanism of Solamargine on Hepatoma Cells and the Application of Its Nanoparticle in Target Therapy Against Hepatocellular Carcinoma
CCMP87-RD-042	Screening of natural products with antitumor activity on human hepatocellular carcinoma: rutaceous alkaloids
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The list of the studies relate to liver disease (3)

Number	Title
CCMP88-RD-011	The Research of Disease Patterns of Traditional Chinese Medicine and Contemporary Study of Tongue Images in the Patients of Chronic Hepatitis
CCMP88-RD-018	Effect of Chinese herb - basil oil - on the cell viability, detoxification capability, antioxidation system and AFB1-induced DNA damage of paimary rat hepatocytes
CCMP88-RD-019	Comparative studies of jaundice pattern prescriptions from Shan- Han-Lun, Jin-Gui-Tao-Luch and Wen-Bing-Tian-Bian on experimental hepatitis with jaundice induced by ANIT
CCMP88-RD-026	Study on the immunological mechanisms of therapeutic effect of Long-dan-tan
CCMP88-RD-040	Effect of Chinese Materia: Guizhi-Fuling-Wan, Syh-Mo-Yiin, Shich-Qing- Wan and Syh-Nih-Sann on Experimental Acute Liver Damage in Rodents.
CCMP88-RD-057	Stueies on Folk Medicine "Boehmeria spp." form Taiwan—The Investigation of Market Resource, and the Evaluation of Hepatoprotective Antioxidant and Free Radical Scavenging Activity.

The list of the studies relate to liver disease (4)

Number	Title '
CCMP89-RD-017	Signs of blood stasis in the sublingual vessels in cirrhotic and non-cirrhotic chronic hepatitis B patients
CCMP89-RD-020	Study on the immunological mechanisms of therapeutic effect of Long-dan-tan(2-2)
CCMP89-RD-021	Effect of Cineses Materia: Guizhi-Fuling-Wan,Syh- Mo-Yiin, Shieh-Qing-Wan and Syh-Nih-Sann on Experimental Acute Liver Damage in Rodents.
CCMP89-RD-035	Is magnolol able to protect the liver against warm ischemia, cold preservation, and reperfusion injury in liver transplantation.
CCMP89-RD-101	Therapeutic effects of Kami-Shoyo-San on chronic hepatitis B: used alone or in combination with Lamiyudine

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The list of the studies relate to liver disease (5)

Number	Title
CCMP89-RD-109	Therapeutic effects of herbal medicines on liver cirrhosis: studies on an animal model
CCMP89-RD-110	Therapeutic Study of Chinese Herbal Combinations on Cirrhotic Rats
CCMP89-RD-111	The mechanism of apoptosis induced by compounds isolated from the herbal medicine, sho-saiko-to. Fung-Jou Lu
CCMP89-RD-112	Evaluate the potential effects of the Decoction of Gentianae and Bolus of Angelicae Sinensis and Gentianae by using the screening model on the inactivated protein kinase and anti-oxidative enzyme

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The list of the studies relate to liver disease (6)

Number	Title
CCMP90-RD-004	Characteristics and attitudes of chronic Hepatitis-B patients using traditional Chinese and /or Western medicine
CCMP90-RD-018	The study of diagnostic standards of Chinese medical patterns on five diseases (two of the three)- The study of diagnostic standards of Chinese medical patterns on viral hepatitis C
CCMP90-RD-019	The study of diagnostic standards of Chinese medical patterns on five diseases (3-1)-The research of the criteria of Chinese Medical diagnosis of Chronic Hepatitis B
CCMP90-RD-101	Therapeutic effects of Kami-Shoyo-San on chronic hepatitis B: used alone or in combination with Lamivudine
CCMP90-RD-107	Effect of Cineses Materia: Guizhi-Fuling-Wan, Syh-Mo-Yiin, Shieh-Qing-Wan and Syh-Nih-Sann on Experimental Acute Liver Damage in Rodents.
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The list of the studies relate to liver disease (7)

	Title
CCMP91-RD-102	The study of diagnostic standards of chinese medical patterns on diseases-The research of the criteria of Chinese Medical diagnosis of Chronic Hepatitis C
CCMP91-RD-103	The study of diagnostic standards of chinese medical patterns on diseases-The research of the criteria of Chinese Medical diagnosis of Chronic Hepatitis B
CCMP92-RD-106	The study of diagnostic standards of chinese medical patterns on diseases-The research of the criteria of Chinese Medical diagnosis of Chronic Hepatitis B and Hepatitis C

Liver disease treated with TCM (incl. compound prescription and single herb)

Outcome of researches:

- ❖ Although Xiao-Chai-Hu-Tang cannot kill the virus of Hepatitis C, it can improve the function of liver and is highly suggested to be used in treating chronic Hepatitis C.
- Anti-oxidative effect from In-Chen-Hau-Tang, Da-Chai-Hu-Tang and decoction of Gentianae is significant.
- Basil oil can reduce DNA damage in liver cell induced by Aflatoxin Bl.
- 3 prescriptions from Jin-Gui-Tao-Lueh have good therapeutic effect on neonatal hyperbilirubinemia, in which Hwang-Shiau-Shyr-Tang is the best.
- ❖ Xiao-Chai-Hu-Tang, silymarin and propranolol from western herbs can obviously improve the status of portal hypertension and partial hyperdynamic circulation, but it cannot solve the problem of hyperdynamic circulation completely.

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Therapeutic evaluation of Western-Chinese medical treatment

❖ Lamivudine can provide quite a good therapeutic effect for Hepatitis B, but antibiotic-resistance and relapse after stop taking medicine still remained. Therefore, Western-Chinese medical treatment is applied. With good therapeutic effect on chronic Hepatitis B, Kami-Shoyo-San is used in combination with Lamivudine.

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Establishment of diagnostic criteria of Chinese medicine in treating liver diseases (Hepatitis B & C)

- ❖ Due to rich experience and outstanding clinical therapeutic effect of TCM treatment, massive TCM clinical trials are definitely performed. However, the problem existing in papers and clinical cases is that patterns and even diagnostic standard are not coincident. Thus, an objective, communicated identification and diagnostic criteria of pattern should be primarily established.
- ❖ An objective and accurate questionnaire for chronic Hepatitis B, C is established. It aims to set up identification and diagnostic criteria of pattern and provide a standard to respective medical and academic units.

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Criteria of TCM Clinical Trial in treating liver disease

- *Refer to Clinical Trial Design and Treatment Regulatory from U.S. Food and Drug Administration, and combine with Chinese medical theory and treatment to set up "Criteria of CMP Clinical Trial in treating liver diseases" (Chinese and English version)
- ❖ Provide reference to clinical trial design and guidance during clinical practice, in order that estimable, acceptable data can be obtained and standard of clinical trial can be advanced.

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Develop new medicine for liver disease through Genomic Medicine

- ❖ Integrate advance of different aspects to construct a platform for new medicine research, which includes genomic research, identification of Chinese herbal origin, production and analysis of valid constituents. Select specific Chinese herbal prescription with concrete hypothesis and target through the established platform.
- ❖ Testing target of the platform, using this platform model to combine with western medical system, provide other scientific researches on efficacious medicine in treating chronic hepatitis, cirrhosis and liver cancer and cooperate with industry to develop efficacious formulae for liver care.

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Research on literatures of liver disease

- From literatures of acute and chronic hepatitis, its basic argument and treatment are mostly showed from the cases of "Jaundice", "hypochondriac pain", "tympanites".
- * To inherit previous experiences and widen the knowledge of diagnosis, relevant data of acute and chronic hepatitis are collected, induced into 6 criteria (cause of disease, symptom, diagnosis, therapy, dietetic therapy and health care), analyzed and codified into a specific literature for prevention and treatment of hepatitis.

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Achievement of research on liver disease

- ♦ Anti-viral medicine, immune modulating medicine or both were used to treat with chronic Hepatitis B. Its outcome is, however, not good. Therefore, it hopes to find out the rules of therapeutic prescription through the treatment on chronic hepatitis with Chinese, Western as well as Western-Chinese medicine.
- Due to this reason, our Committee has collected the researches in 1982 - 1986 and 1991 - 1999 and codified 42 papers into 2 books, which includes therapeutic effect on liver disease with acupuncture and Chinese herbs, effect of Chinese herbs on liver care and Treatment on liver disease with Chinese medicine.





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Cross-Strait Conference on liver disease treated with Western-Chinese Medicine 2001.4.29

- The conference was hold by K.T. Li Foundation of the Development of Science and Technology and our committee, and organized by China Medical University Hospital. Over 600 attendees from CMP field had joined the conference, which took place in the international conference hall of China Medical University Hospital on April 29, 2001.
- The title of conference is "the Latest Development of Treatment on Liver Disease with Western-Chinese Medicine". Respective new development and clinical experience were shared in the conference.

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Cross-Strait Conference on liver disease treated with Western-Chinese Medicine

- ❖ Development of treatment on different liver diseases with Western-Chinese medicine
- ❖ Development of treatment on liver cancer with Western-Chinese medicine
- ❖ Seminar on treating chronic Hepatitis with Western-Chinese medicine
- ❖ Seminar on treating Cirrhosis with Western-Chinese medicine
- ❖ Development of the basic theory of Western-Chinese medicine in treating liver disease...etc.

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VI. Conclusion

- **♦** To share Taiwan's ongoing development and expectation of the treatment on liver disease through this international conference.
- **♦**To play a more important role and has bigger contribution on the stage of biotechnological development in 21 Century.

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Thank for Your Attention!



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