

The Integration of Chinese Medicine and Western Biomedicine

*with emphasis on the management of Psychiatric
disorders*

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“There are two types of physicians...”

- There are two types of physicians--those that are free (men) and those that are slaves. The slaves...are treated by slaves, who pay them a hurried visit, or receive them in dispensaries. A physician of this kind never gives a servant any account of his complaint, nor asks him for any; he gives him some imperial injunction with an air of finished knowledge, in the brusque fashion of a dictator, and then is off in haste to the next ailing servant....

There are two types of physicians...

- “...The *free physician* attends free (people), treats their diseases by going into things thoroughly in a *scientific* way; and takes the patient and his family into his confidence. Thus he learns something from the sufferers, and at the same time instructs the invalid to the best of his powers. He does not give his prescriptions until he has won the patient’s support...Now which of the two methods is that of the better physician or director of the bodily regimen?” Plato (2500 years ago)

Overview

- Philosophical remarks
- Benefits of Chinese medicine to W. medicine
- Benefits of W. med to Chinese medicine
- Review of Chinese medical Rx in depressed mood
- Promising emerging Chinese Rx of shizophrenia
- Approaches to thinking about integrating Chinese and Western medicine in psychiatry

Some Philosophical Remarks

- Western biomedicine and Chinese medicine are the most widely practiced professional systems of medicine in the world
- Both systems of medicine have strong *internal coherence* between theory and clinical practices that are valid *within their respective world-views*
- The ideological framework of each major system of medicine rests on philosophical assumptions about the nature of the body in space and time, and therefore, the *kinds of factors* that potentially affect (cause) health or illness

Philosophical Remarks

- Both systems of medicine rest on *metaphysical assumptions*, and these core assumptions are different
- Chinese medicine posits the existence of a fundamental energy, Qi, that permeates and determines the nature of all things and processes and is therefore the necessary and valid way of *seeing* the body and all factors that affect health and illness
- Western biomedicine bases its theories on empirical assumptions underlying Western science in general, which claim that only *things* and *processes* that have a physical or *empirically knowable* energetic nature are *measurable* and therefore valid ways of conceptualizing models of health or illness.

Philosophical Remarks

- Each system of medicine rests on metaphysical assumptions that, by definition, *cannot be empirically demonstrated to be true or false.*
- Therefore, neither system can be shown to be objectively, empirically *more valid* than the other
- Basic differences in *metaphysical* assumptions have resulted in a conceptual gap between Chinese and Western medical theory and practice
- Therefore, the *only* claims that can be made about either system of medicine are *specific claims* of effectiveness of *specific treatments* with respect to *specific symptoms*

Concluding philosophical remarks

- It necessarily follows that Western biomedicine *cannot* offer valid criticisms of the theoretical basis of Chinese medicine (or other non-Western systems of medicine)
- In the same way, Chinese medicine *cannot* validly criticize the theoretical basis of Western biomedicine (or other systems of medicine)
- In summary, Western biomedicine and Chinese medicine are disparate systems of medicine that *can* evaluate specific claims but not fundamental theoretical assumptions of the other system

From philosophical to practical

- Patients are increasingly using biomedical treatments and Chinese medical treatments in both Asian and Western countries on the basis of empirical evidence of efficacy and safety
- Until now a method for *thinking between* Western biomedicine and Chinese medicine has not been put forward, and there are no rational guidelines for combining diagnostic or therapeutic approaches in these disparate systems of medicine

Benefits of Chinese Medicine to Western biomedicine

- graduated series of responses
- improved management of side effects caused by Western medicines
- improved outcomes of Western medical Rx
- greater coherence in healing
- more holistic framework
- improved prescriptive methodology

Chinese medicine offers the patient a graduated series of responses

- Many effective therapies for a given pattern discrimination ranging from benign therapeutic effects with mild side effects through more dramatic therapeutic outcomes and increased side effect risks
- Main goal is adequate therapeutic response while minimizing side effects

Graduated series of responses (2)

- In contrast, Western pharmacotherapy does *not* offer an analogous graduated series of responses, and most choices are associated with side effects or toxicities
- This difference is due to an assumption in the philosophy of Western biomedicine that an *average* response is desirable and appropriate for an *average* symptom pattern
- In contrast, Chinese medicine uses a prescriptive methodology that identifies a specific treatment to bring *each* individual back into balance

Chinese medicine can improve management of side effects caused by Western medicines

- Frequent side effects from Western medicines often lead to poor compliance and poor outcomes
- Many studies show that Chinese medicines can mitigate side effects of Western medicines
- Identifying appropriate Chinese medicines is based on an accurate pattern discrimination that determines the imbalance to be corrected

Chinese medical therapies can improve therapeutic outcomes of Western biomedical treatments

- Chinese therapies (acupuncture and herbal formulas) can *often be safely* combined with Western biomedical Rx
- Many Chinese studies and case histories show that combining specific Chinese herbal formulas with specific Western medicines achieves outcomes superior to either approach alone
- Chinese medicine has treatments for many disorders that are not effectively addressed by Western biomedicine including age-related memory loss.

Chinese medicine can provide Western patients with greater coherence in healing

- Coherence (Antonovsky) is patient's experience that internal or external factors affecting health are *predictable* and *controllable*
- Through *patient-centered* (as opposed to *therapy-centered*) treatment, Chinese medicine offers Western patients increased feelings of control or empowerment
- coherence includes comprehensibility, manageability and meaningfulness. These often increase compliance and improve outcomes.

Chinese medicine provides Western medicine with a more holistic framework

- In contrast to Western biomedicine, Chinese medicine diagnoses and treats the whole person (not her major complaint)
- The philosophy of Chinese medicine includes the assumption that all aspects of human functioning are parts of an integrated whole
- Specific signs and symptoms can be eliminated by bringing the organism into a dynamic state of balance

Chinese medicine can provide Western medicine with an improved prescriptive methodology

- Chinese medicine uses a pattern-based prescriptive methodology (specific disease is to the pattern as figure is to gestalt), in contrast to the *averaging* approach of Western biomedicine
- A medicine is *good* if it has a desired effect in a *specific* patient with few or no side effects
- Western physicians could use a similar approach to more accurately identify patterns of disease most suited to a specific Western medicine while mitigating side effects

Benefits of Western medicine to Chinese medicine

- improved accuracy in diagnosis and prognosis
- improved recognition of complications or danger signs
- more rapid and more potent treatments for serious or acute symptoms
- improved assessment and tracking of progress and outcomes
- continuous emergency and in-patient care

Western biomedicine can provide Chinese medicine with improved accuracy in diagnosis and prognosis

- Often impossible to fully know the course or prognosis of many diseases based on Chinese pattern discrimination
- Western models of disease classification are increasingly used together with conventional Chinese understandings
- Western emphasis on detailed history-taking and systematic differential diagnosis results in improved diagnostic accuracy where Chinese medical diagnosis is ambiguous
- improved diagnostic accuracy translates into a more appropriate treatment plan, and improved understanding of prognosis

Western biomedicine facilitates recognition of treatment complications or danger signs

- Western biomedicine permits more accurate identification of complications or danger signs associated with disorders or treatments
- Western biomedical assessment is ongoing, permitting frequent revisions in Dx and Rx (eg, changing Sx in schizophrenia)

Western biomedicine provides more rapid and more potent treatments for serious or acute symptoms

- Western biomedical therapies are typically more potent and act more rapidly (acupuncture is sometimes an exception)
- Therefore, Western medicines are the most appropriate Rx of severe or acute psychiatric symptoms, including mania, psychosis, suicidal or violent behavior
- Chinese medical therapies can then be used for maintenance following stabilization

Western biomedicine facilitates assessment and tracking of progress and outcomes

- Many Western medical diagnostic procedures (eg, blood and urine studies) may prove beneficial to monitoring and verifying therapeutic outcomes of Chinese medical Rx
- Data from Western Dx procedures can guide more accurate Chinese Dx formulation and improve Rx planning
- Combining Western Dx approaches with Chinese medical Rx may improve patient confidence leading to improved compliance

Western biomedicine offers continuous emergency and in-patient care

- Western medical delivery systems permit continuous access to emergency or in-patient care
- 24/7 access to care is often necessary to ensure stabilization and safety for severe or acute psychiatric symptoms
- Indications for emergency or in-patient care include rapidly progressive, impairing or life-threatening alterations in behavior, cognition or mood (eg, acute exacerbations in Schizophrenia, BAD, and infectious or metabolic derangements)

Western biomedicine can result in improved therapeutic outcomes

- When patient has failed Chinese medical therapies it is reasonable to refer to Western biomedical practitioner
- Western diagnostic imaging technologies (CT, MRI, fMRI, EEG), or biological assays may detect physiological causes of psychiatric symptoms that are *missed* in Chinese medical diagnosis (eg, infectious, metabolic, malignant, degenerative processes affecting CNS)

Depressed mood in Chinese Medicine

- “Frequent Sorrow” is phenomenologically *similar* to Major Depressive Disorder
- “Withdrawal and Mania” is *similar* to Bipolar Affective Disorder
- “liver qi depression” is *similar* to “agitated depression” in Western psychiatric Dx
- “Qi vacuity” is similar to “vegetative depressed mood”

Many TCM treatments of depression

- Case reports and double-blind studies have validated specific acupuncture treatments for mild to moderate depressed mood
- Sham-controlled studies show that specific acupuncture protocols achieve symptomatic relief in mildly to moderately depressed patients comparable to conventional antidepressants or psychotherapy
- Many compound herbal formulas are effective. Formula depends on “pattern discrimination”

Chinese herbal formulas in depressed mood

- Approach is analogous to acupuncture in that many compound herbal formulas are used to treat “depressed mood”
- The specific formula used will depend on the energetic properties of the formula with respect to energetic imbalances discerned during the “pattern discrimination” diagnosis
- See *Flaws and Lake* for detailed overview of studies and case reports of herbal formulas used for the range of symptom patterns that are similar to vegetative or agitated depressed mood

Chinese herbal formulas in depressed mood

- Reports of side effects have not been systematically examined and therefore the rates or kinds of side effects of Chinese herbal therapies are not clearly established
- It is not clear how many patients use Chinese herbs alone or in combination with psychotropics
- Reports of interactions between Chinese herbal treatments and synthetic drugs are even fewer. Work in this area is only beginning (reasonable approaches to take to lower potential risks--below)

Conventional acupuncture in the treatment of depressed mood

- Pilot study (Schnyer 1998), 33 depressed outpatient women who met (Western) criteria for major depression were randomly assigned to acupuncture Rx specific for depression; non-specific valid acupuncture protocol; and wait-list (no treatment)
- 64% who received Rx specific for depression showed full remission and improved significantly more than non-specific Rx group but not more than wait-list group

Electro-acupuncture in Treatment of depressed mood

- Preliminary evidence from case studies and small double-blind controlled trials has shown that electro-acupuncture (EA) treatment of specific points is as effective as amitriptyline
- Preliminary evidence suggests that computer-controlled electro-acupuncture (CCEA) may be more effective than regular acupuncture or non-computer-controlled acupuncture

Electro-acupuncture in the treatment of depressed mood

- Pilot study (N=29), and multi-center study (N=241) (Guangzhi 1992) randomized severely depressed inpatients to EA + placebo or EA + amitriptyline.
- EA and amitriptyline had equivalent efficacy at 6 weeks
- EA was superior to amitriptyline when comorbid anxious/depressed mood

Electro-acupuncture in depression--a possible mechanism

- Plasma norepinephrine (NE) levels were significantly elevated in depressed patients who improved following 6-week EA treatment suggesting EA mechanism of action is related to CNS stimulation of norepinephrine release
- EA non-responders did not show significant changes in serum NE levels
- Data suggest EA mechanism analogous to psychotropics in selective response to treatment targeting specific underlying “imbalance”

Computer-controlled electro-acupuncture in the treatment of depression

- Results from open trials of CCEA in depression suggest that superior response takes place at higher (above 1000 Hz) frequencies
- Recent studies at Beijing College of Medicine concluded equivalent efficacy of Remeron (Mirtazepine) and CCEA for severely depressed inpatients

QiGong as a treatment of depressed mood and “neuroticism”

- Most studies on QiGong limited by difficulty establishing controls
- Several case reports and observational studies show consistent improvements in indicators of “neuroticism” including anxiety, quality of sleep, etc. in well individuals who had practiced QiGong or Taijijuan at least 5 years
- Two open studies showed improved mood in depressed patients practicing Qigong at least 2 yrs

A promising Chinese herbal approach in psychosis

- Preliminary data suggest that the extract of a Chinese herbal formula has anti-psychotic properties (mechanism likely D1 agonist/D2 antagonist)
- 1-stepholidine (SPD), from the root of *Stephania intermedica*, a common Chinese herb had greater anti-psychotic efficacy than perphenazine (trilafon) in both positive and negative symptoms in a trial on 61 hospitalized individuals dx'd schizophrenia
- complications included reduced WBC, fever, slight GI distress

Some limitations of Chinese medical therapies of mental illness

- Difficult to identify TCM practitioners skilled in techniques specialized for mental health problems
- Most Chinese studies of TCM in depressed mood or other psychiatric disorders do not use same symptom-rating scales as Western studies making comparisons of methods, outcomes problematic
- Some QiGong practitioners report transient agitation or other “emotional disturbances” following intense practice or when treated by “unskillful” QiGong therapists

Toward a model for integrating Chinese and Western biomedicine

- Both Chinese medicine and Western biomedicine have strengths and limitations
- Chinese medicine and Western biomedicine are mutually beneficial in the treatment of psychiatric disorders
- Established and emerging Chinese medical treatments of depressed mood
- There are *reasonable* and *safe* ways to think about integrating Chinese medicine and Western biomedicine

Combining Chinese and Western medical treatments in mental health care

- These are not intended as advice/recommendations. Need to consult with your Chinese med. Practitioner or M.D. for specific advice
- No contra-indications with psychotherapy
- no contra-indications with good nutrition, exercise (ie, treat the whole person)
- no contra-indications with conventional acupuncture (CCEA/EA still unknown)
- some contra-indications for specific Chinese herbal formulas--more research needed

Integrating Chinese herbal medicines and conventional psychotropics (1)

- *Avoid combining* Chinese herbs with Western synthetic medicines when there are known or *potential* safety issues
- Only a few potentially serious interactions between Chinese herbal formulas and Western medicines have been established after decades of combined use (eg, ma huang and MAOIs)
- However, insufficient information available to make decisions in many cases, so always use conservative approaches

Integrating Chinese herbal medicines and conventional psychotropics (2)

- First determine probable risk or compatibility before combining treatments (many on-line sources: EMBASE, Toxline, WebMD, Pharmindex, others)
- However, all current sources are incomplete and limited (many pertinent articles are not included), therefore best to use several sources to investigate a specific herb-drug interaction
- When little or no information is available, examine potential interactions between Western drug and bioactive constituents of Chinese formula (Chem Abstracts, Pharmindex)

A practical approach to combining Chinese and Western medicines

- Case histories and research studies show that most described combinations of Chinese herbs and psychotropics are well tolerated when used under medical supervision
- However, in view of limited empirical data a conservative approach is to proceed slowly only after reviewing literature to ensure absence of potential interactions between Chinese and Western medicines being considered
- When reasonable probability of safety established and combining treatments may enhance outcome, begin with very low initial doses in combination with previous Rx for several days while monitoring closely for side effects, interactions, etc.

Caveat: Questions about Western medicines should *always* be referred to Western M.D.

- Most Chinese medical practitioners (ie, in Western countries) do not have training in Western medicine
- Therefore, *all* questions about changing or discontinuing Western medicines should be brought to Western M.D. (the legally licensed prescribing physician)
- The Chinese medical practitioner is ethically responsible to contact the Western physician to explain recommended Chinese medical Rx

Medicine of the future will increasingly integrate Chinese and Western diagnostic and therapeutic methods

- NIH recently waived a previous requirement for studies verifying safety of every possible combination of Chinese and Western medicines
- NIH has given permission to FDA to register combined formulas as appropriate for investigational purposes
- This will result in clinical research combining Chinese and Western diagnostic procedures or therapies that will eventually yield standards for integrative Chinese-Western medicine

Concluding remarks

- Chinese medicine and Western biomedicine are dominant established systems of medicine with demonstrated success and safety
- Both systems of medicine have demonstrated efficacy against psychiatric disorders
- Most available evidence suggests combined safe use
- Rational conservative integration of Chinese and Western medicine will lead to deeper understandings of fundamental mechanisms of disease and improved treatment outcomes of psychiatric disorders