



Western Medicine Clinicians as Pioneers in Integrative Medicine

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Integrative Medicine (IM) in the Hospital Authority (HA) was launched by HKAIM's former Presidents, Drs WM Ko & Vivian Wong. In 2003, when HK was hit by SARS, they facilitated the invitation of Prof Lin Lin & Prof Yang Zhimin from Guangdong Provincial Hospital of Chinese Medicine (CM) to treat patients in HA hospitals, starting with the Intensive Care Unit. Prof PC Leung also used CM for the prevention of SARS. The results were published in international peer-reviewed journals^{1,2}. Dr PK Hui and the HA SARS Collaborative Group recorded our experience in the treatment and rehabilitation of pulmonary fibrosis. Prof Derrick Au discussed the "Role of CM in Treating SARS Patients: Evidence in Context" in a chapter in the book "Challenges of SARS", coedited by Drs Jane Chan & Vivian Wong, published by Saunders Elsevier in 2006³.

To address the key concerns of our western medicine (WM) colleagues, we made sure that CM was vetted by the same Research Ethics Committee as WM. A Toxicology Reference Laboratory was established at Princess Margaret Hospital under the leadership of Drs Albert Chan and Tony Mak, to explore potential herbal toxicity. The HA Chief Pharmacist's Office was responsible for vetting procurement and testing of herbal products. A Drug-Herb Interaction Database was created and made available to all HA staff as well as those on Private Public Partnership (PPP)⁴. Dr ML Tse has been updating and enhancing its functions⁵. A special website 中醫動 was launched for public education, professional training and research sharing⁶.

The Government initially funded 18 district-based CM clinics which were upgraded to the present CM Clinics cum Teaching & Research Centres (CMCTR). The CMCTRs next to the major HA Cancer Centres were staffed by CM oncologists who were given access to the HA Clinical Management System (CMS) via the PPP Programme. Dr Tung Yuk chaired the Committee. A pilot IM primary healthcare (PHC) clinic was started at Queen Elizabeth Hospital with the co-operation of Kowloon Central Cluster Family Medicine consultant Dr David Chao and the School of Chinese Medicine (SCM) of HKBU.

Courses in CM have been run annually for doctors, nurses and allied health colleagues to facilitate better dialogue in the clinical setting. CM graduates from our 3 Universities were recruited to a 3-year CM training programme based in the CMCTRs, with structured preservice & in-service courses in WM clinical practice and continued CM clinical training during the three years. Those with high potential were given scholarships for training at the best centres in China

where IM is practised. The plan was to develop CM specialist-training through the acquisition of advanced WM and CM knowledge in parallel. In the field of Psychiatry for Family Medicine, Prof Lam Tai-pong of HKU organised courses for CM trainees in collaboration with Dr Yip Ka-chee of Kowloon Hospital.

In Tung Wah Hospital, Dr Yuen Wai-ki ran a liver cancer ward with the CM team, holding regular grand rounds for students and trainees. Drs Lo Wai-kei and Lui Sing-leung ran IM renal clinics. Dr Leonard Lee worked on stroke rehabilitation with the CM experts. Ms Kathy Lee, the General Manager (Nursing), was a qualified CMP. She designed IM nursing charts that were approved by the HA Central Nursing Committee for use in all hospitals. The "protocol driven" IM practice was well established in Kwong Wah Hospital where Drs Andrew Yip & MH Chan facilitated such in Departments of Medicine, Surgery, O & T and O & G. Dr Hung Kwan-ngai, the neurosurgeon in Queen Mary Hospital, sent post-operative patients to the MacLehose Medical Rehabilitation Centre for IM rehabilitation, which included acupuncture treatment by HKU professors.

EVIDENCE-BASED INTEGRATIVE MEDICINE (EBIM) DRIVEN BY CLINICIANS

The CMCTRs, collaborating with the SCM from HKU, CUHK & HKBU, were used as hubs for development of EBIM. Based on systematic review of publications and/or expert opinion, more than 20 integrative medicine protocols were developed and piloted in different clusters under HA. The Chinese Medicine Department of HA funded the reviews resulting in 23 publications in peer review journals⁷⁻²⁹. Through the HA Central Co-ordination Committees, the cross-referral mechanism and the clinical documentation within hospitals were endorsed.

Research studies were prioritised for the major disease burdens in which existing regimens do not produce satisfactory results, but CM has some scientific evidence of possible advantage. HA funded projects such as pharmacology of herbal medicine to treat influenza viral infection by CUHK³⁰⁻³³, use of computer imaging for tongue diagnosis by Poly U, and management of obesity by HKBU³⁴. Dr Roger Ng of Kowloon Hospital steered the study on post-stroke depression^{35,36}, and Prof KF Chung of HKU lead the post-partum depression study. The latter was greatly supported by Dr KY Leung of Queen Elizabeth Hospital³⁷.

At CUHK, Prof PC Leung pioneered studies on the diabetic foot³⁸, Prof Thomas Chan on herbal pharmacology and Prof Julian Chan on obesity⁷. Prof Joseph Sung & Prof Justin Wu initiated work on Irritable Bowel Syndrome, expanding to Crohn's Disease and Ulcerative Colitis, receiving recurrent grants from NIH, USA. CM diagnostics in 望聞問切 were also explored. The HK Institute of Integrative Medicine and the Institute of CM, CUHK, were both started by these western medicine (WM) clinicians. The Li Dak Sum Yip Yio Chin R & D Centre for Chinese Medicine, and the State Key Laboratory for Research on Bioactivities and Clinical Applications of Medicinal Plants under Prof PC Shaw, Prof PC Leung & Prof Clara Lau are steered by western bio-pharmacological theory and practice.

At HKU, a Molecular Chinese Medicine Laboratory was run by the paediatricians, the late Prof Alan Lau, Prof YL Lau and Prof Godfrey Chan, in turn. Prof Cindy Lam of Family Medicine did collaborative work with Guangdong and Taiwan on the Body Constitutions (體質)³⁹⁻⁴⁰. Prof Virginia Wong researched acupuncture for cerebral palsy at the Duchess of Kent Children's Hospital. Prof Raymond Cheung used CT scan of the brain to document acupuncture stimulation effects in post stroke patients. Prof KF Chung conducted a number of projects in depression and insomnia^{16-18,29,36,37}. Prof PC Ho studied the use of acupuncture for In Vitro Fertilisation. The Vivian Taam Wong Endowed Professorship in Integrative Medicine was established. Prof MF Yuen is now engaged in a multi-centre trial of herbal formula YIV-906, approved by US FDA for phase 3 trial, used in conjunction with chemotherapy for late stage liver cancer.

RESEARCH & EDUCATION IN IM PIONEERED BY HKAIM

In 2013-15, HKAIM was funded by the Professional Services Development Assistance Scheme (PSDAS), to organise Primary Healthcare Courses in WM for CM practitioners (CMP) in private practice. It covered common conditions in the community, prevention, rehabilitation, diagnostics, geriatrics, paediatrics, gynaecology and psychiatry. When the funding ended, we were in the position to organise more in-depth training, with broader perspectives, enabling the interaction of WM and CMPs.

Diabetes affects 9% of the population, with limited therapeutic options from WM for prevention and treatment of the associated kidney disease. HKAIM obtained funding from Fu Tak Iam (FTI) Foundation in 2014-16 to start a service-research programme with the 3 SCMs, on chronic kidney disease with diabetes⁴¹. Our programme demonstrated the potential in using individualised therapy offered by CMPs. This laid the foundation for a subsequent randomised controlled trial funded by the HMRF and coordinated by Prof Sydney Tang of the Department of Medicine, HKU⁴².

In public health education, we have used different media to deliver IM healthcare messages. Since 2013, Dr Vivian Wong, as Hon President of HKAIM, has co-hosted the weekly RTHK radio programme 精靈一點 (on RTHK 31 TV since 2018), with the invitation

of CMPs to share different perspectives on common healthcare practices. During the COVID-19 pandemic, a total of 22 newspaper articles have been published. Those on the use of CM are important introductions for the practice of IM in the eyes of the community.

EPILOGUE - FROM SARS TO COVID-19

Integrative Medicine started in China because Chairman Mao invited the best WM doctors to learn CM, more than 60 years ago. Twenty years ago, HK introduced CM to our WM doctors via education, research and clinical practice of EBIM. Communication and collaboration are the keys to success. I have listed 39 outstanding clinicians and researchers as pioneers in this endeavour, but I wish to apologise to those who have escaped my failing memory. Equally remarkable are the CM professors, post-graduate students, researchers who are named in the 44 references.

The challenges of SARS are different from COVID-19. Given the large amount of research output on the effectiveness of IM in the management of COVID-19, we are happy that HA has started a pilot to use IM for the early and mild cases in the Asia Expo Community Treatment Facility. As shown in the article in this edition of the Hong Kong Medical Diary on "The Use of Integrative Medicine for treatment of Covid-19", there is substantial evidence from pharmacological, in vivo, in vitro and clinical studies that CM formulae, alone or in combination with standard WM treatment, provide a better outcome in terms of admissions, use of ICU and death rates.

The IM teams from HKU and HKBU were quick off the mark in such scientific exploration with publications in March and July 2020^{43,44}. Is it time that we allow CMPs to work with our expert physicians and intensivists in an effort to improve the outcome of our patients in HK, as we did in 2003 during the SARS crisis? For "long Covid-19", should we organise a proper IM study better than our small scale study in 2003?

The historical account in the article remains a personal description by the author.

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