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Bridging conventional medicine and traditional, complementary, and alternative approaches: Fostering collaborative attempts for a holistic healthcare system

Dear Editor,

We read the paper entitled “The future of integrative health: vision, values, and principles for positive, sustainable systemic change” by Kemper, which was published last month.¹ The points discussed therein are of great significance and direct relevance to the current status quo of the field. We are herewith responding to the open invitation to discuss some of the points raised in the paper.

There has not been a more pressing time to push for global integrative health care than today. This is especially after the COVID-19 experience that was indeed eye-opening to the turmoil and tribulations that no one could escape.

We would like to focus on the use of traditional, complementary and alternative medicine (TCAM) approaches. It is no hidden fact that resorting to TCAM is on the rise in many developed countries, in addition to developing ones. As such, there is a greater need for merging conventional medicine with TCAM, and hence an integrative approach is a pressing and utmost objective. This is in no small part due to the fact that many of the TCAM approaches are easily accessible, very affordable, and reported to be of less undesired side effects. More importantly, and despite claimed humanitarian efforts, a large proportion of people remain underdiagnosed, undertreated and worse, with no access to basic medical care. These people, like others in developed countries, resort to TCAM as the preferred choice of treating their ailments.

Folk medicine needs to be acknowledged as one of therapeutic value. However, it needs to be subjected to evidence-based approaches and experimentations to not only validate its soundness, but also to help those doubtful of TCAM. Hence, rigorous criteria need to be applied when reviewing manuscripts dealing with TCAM. To this end, many journals including this have already established some rules. However, in some instances, some of these rules may prevent us from achieving full benefit of say the herbal product investigated. For instance, many CAM journals require that a crude extract have its constituents identified before the paper can be considered. While identifying the bioactives is important, it is nonetheless one obstacle that needs to be overcome, and hence this rule could be relaxed or revisited, particularly when the research performed is rigorous: well-designed, well-executed and carefully analyzed. After all, many of those who consume these “herbal products” are not interested in the ingredients *per se*, but rather whether there is evidence to support the medicinal value claimed by folk medicine or traditional use.

Another hurdle that needs to be overcome is how to combine TCAM into the clinic. While it may be too premature to ask a physician prescribe a herbal decoction for certain ailment, suggesting such a decoction or a herbal tea as part of the regimen should not be met with serious opposition. Perhaps training and continuing education programs for physicians and nurses could “educate” those health practitioners about

the sound evidence-based utilization of these alternative medicines. This becomes important when the issue of compliance is considered, since some patients are more likely to accept incorporating these herbal therapies than taking only the conventional medicine. This explains the dramatic increase in public interest in alternative therapies. For instance, 70%, 49%, 70%, 50% of the population in Canada, France, India, or Australia respectively report using some form of traditional, complementary or integrative medicine.^{2,3}

Finally, CAM-based therapeutics need better recognition by the evidence-based medicine and experts involved in preparing therapeutic guidelines. Well-designed randomized controlled trials, particularly when converged on the efficacy of a CAM-based product, should be definitely considered by the medical experts and members of the writing and reviewing panels of international guidelines. Moreover, while there has been an upsurge in the conduct and publication of phased II randomized controlled trials, there is still a clear paucity of large-scale phase III studies aiming at the evaluation of hard outcomes belonging to different disease entities. Carrying out such valuable studies requires collective participation from researchers and universities, major research sponsors and granting bodies, as well as leading and specialized medical journals.

In closing, there is an unmet need for a resounding call to action for the advancement of global integrative healthcare. By advocating for the integration of TCAM with conventional medical practices, we underscore the pressing need to validate the therapeutic value of folk medicine and overcome barriers in manuscript review and clinical implementation. Recognizing CAM-based therapeutics within evidence-based medicine and treatment guidelines requires collaborative efforts among esteemed researchers, academic institutions, funding entities, and reputable medical journals. Together, we can forge a path towards a more comprehensive and patient-centered approach to healthcare that embraces the best of both conventional and TCAM modalities.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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