Eastern Medicine Needs Substantiation by Scientific Research

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EASTERN MEDICINE is comprised of various practices, including acupuncture, moxibustion, herbal medicine, *tu'ina*, cupping, dietary therapy, *t'ai chi*, and Qigong. Interestingly enough, acupuncture and *t'ai chi* are considered to be mind-and-body practices used to treat or prevent illnesses. Over thousands of years, Eastern medicine established its own framework of theoretical explanation that was suitable during this medicine's development but now might be inadequate to substantiate Eastern medicine in modern biomedical science.

Currently, modern Western medicine contributes to meet the requirements of increasing human health by decreasing morbidity, increasing resistance, and helping disease prevention. Is it possible that Eastern medicine can also meet the same modern human health challenges by increasing this medicine's scope of applications?

To accomplish these therapeutic goals, Eastern medicine must be submitted to rigorous scientific evaluations. The ancient explanation that human life is part of the material world and the theories about life phenomena must be substantiated. Eastern medicine eventually needs to be validated by Western clinical trials to become more acceptable in the world. Is Eastern medicine self-limited by its own ancient theoretical explanations based on Yin–Yang and the Five Elements? Perhaps the terminology that describes these ancient theories must be replaced by more-modern explanations that perhaps could possibly rejuvenate these ancient conceptions. Or, perhaps the education lies in widening the Western science model to include these conceptualizations.

Scientific research needs to update the recognition of Eastern medicine and obviate the difficulties that the Western physician has in understanding its value—with the eventual prospect of eventually increasing its propagation in the modern healthcare arena. To determine if herbal medicine, acupuncture, and moxibustion might have superior value, they need to be subject to evidence-based research.

Our own acupuncture research demonstrated that cerebral acupuncture points were superior to lower-extremity points

described in the traditional literature for regulating cerebral blood flow.^{1,2} For example, cerebral blood-flow regulatory effects of acupuncture at GB 20 and BL 10 on the head were more remarkable than that of LR 3 on the foot. However, when these acupuncture points were subjected to modern research—rather than based on complicated and diagrammatical traditional-medicine theory—this actually helped widen the application of acupuncture and enhanced its usefulness.

Eastern medicine and Western medicine will eventually merge. Physicians will choose the best techniques and methodologies to help prevent and combat disease. We hope our research will encourage other scientists to look at Eastern medicine not as an old technology but as a guide to help rethink our conceptions and even discover new uses for this ancient practice that—over thousands of years before Western medicine's advent—served to defray and prevent many diseases when other means were unknown.

REFERENCES

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