

Neo-traditional treatments for AIDS in China: treatment policy and local use of TCM

Evelyne Micollier



UMR 145
Sida et Maladies associées



JE 2424
Centre de Recherche
Cultures, Santé, Sociétés (CRéCSS)

Research background: context

- Since 1950s, integration of a 'neo-traditional' medicine in Chinese public health system: TCM (*zhongyi*)
- rooted in scholarly traditional medicine
- Including references of modern biology and of standardized biomedicine
- In transmission, body of knowledge and practice

TCM in the public health system

- Official promotion and legitimacy produced a modernized, standardized, secularized and scientized TCM
- TCM: critical icon of national identity in China's narrative of modernity, political use
- Structural specificity: TCM and biomedical bodies at each administrative layer; administrative body under the MoH (Ministry of Health), SATCM (State Administration of TCM)

Background 2: Shifts in AIDS policies (2004)

- Assessment by the government of the epidemic after almost two decades of denial (first reported HIV infected person in China: 1985)
 - Creation of a new AIDS committee, State council level (above ministries), new policies
- To improve the overall understanding of the epidemic dynamic
- To extend AIDS treatment and care along international standards

Among new policies

- Research and development of biomedical ART and of TCM products
- Large-scale intervention and research programme: support to trial Chinese traditional and herbal drugs in AIDS treatment and care
- End 2006, 30 000 patients have integrated national HAART programme; 6000 TCM treatment either complementary (TCM/ART combined treatment) or substitutive

OBJECTIVES

-documenting the role of TCM within the framework of the AIDS treatment and care scheme

-local use of TCM

Method: anthropological approach

Based on collection of qualitative data, documentary and archival research (academic/popular periodicals, printed or electronic news media, advertisements)

- ideally, observed facts and discourses through in sites-observation and interviews of interlocutors from the research arena in TCM and/or biomedicine and of patients
- field research conducted in Beijing



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Results/Comments

- From content analysis of Chinese publi on AIDS clinical trials:
 - identification of 70 herbs recognized as having immuno-stimulating effects/anti-viral/rebuilding function,
 - extraction of most active agents,
 - testing of medical compounds based on TCM knowledge and practice
- Most tested and used treatments very common, part of ordinary life, ailments, and indications polyvalent
- Only one drug finally approved by SFDA (State Food and Drug Administration) in 2006: Tangcao tablets

*However, results of clinical trials show no major breakthrough. Use and testing of TCM drugs raise controversy in international academia

*explanatory factors, role of TCM in policy strategy: obstacles in expanding national programme, shortcomings in implementation, lack of adherence (patients complaining about side-effects), Unavailability of second-line ART



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Discussion

- Since 2004, use of TCM not fully clarified: conceived and implemented as a complementary (combined with ART) or an alternative/substitutive treatment, in the long term or short term
- TCM research and treatment not yet standardized, generates controversy
- Globalized use: circulation of local/global knowledge and practice as TCM becomes a valued CAM in treatment schemes of chronic illnesses such as cancer and AIDS out of China

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