



WHO Global Atlas
of Traditional, Complementary
and Alternative Medicine

TEXT VOLUME

G. Bodeker | C.K. Ong | C. Grundy | G. Burford | K. Shein



World Health Organization
Centre for Health Development
Kobe, Japan

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WHO Library Cataloguing-in-Publication Data

WHO global atlas of traditional, complementary and alternative medicine.

2 v.

Contents: Text volume.

1. Medicine, Traditional 2. Complementary therapies 3. Health care surveys
4. Atlases 1. World Health Organization.

ISBN 92 4 156286 2

(NLM classification: WB 50)

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Typeset in Switzerland by Strategic Communications
Printed in Malta by Interprint

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ACKNOWLEDGEMENTS

The WHO Centre for Health Development, Kobe, Japan, is grateful to the following contributors for their active participation and collaboration at various stages in the preparation and publication of the WHO Global Atlas of Traditional, Complementary and Alternative Medicine.

WHO AFRICAN REGION

Cameroon: Daniel N. Lantum, Martin Ekeke Monono; *Ghana:* Francis Kwabena Oppong-Boachie; *Kenya:* Jack Githae; *Mozambique:* Adelaide Bela Agostinho; *Nigeria:* Tolu Fakeye, Karniyus S. Gamanuel, Abayomi Sofowora; *Swaziland:* D. Nhlavana Maseko; *Uganda:* Joseph Tenywa; *United Republic of Tanzania:* Andrew Y. Kitua, Rogasian Lemmy Anselm Mahunnah, Zacharia H. Mbwambo, Paul Mhame, Sabina Mnaliwa, Mainen J. Moshi, Febronia C. Uiso.

WHO REGION OF THE AMERICAS

Argentina: Silvia Debenedetti, Maria A. Rossella, Susana Zacchino; *Bolivia:* Alberto Gimenez, José Antonio Pagés; *Brazil:* Elaine Elisabethsky; *Canada:* Michael John Smith, Tracey Spack; *Chile:* Ana Christina Nogueira; *Costa Rica:* Philippe Lamy, Gerardo Alberto Mora; *Cuba:* Francisco Moron; *Dominican Republic:* Dalia Castillo, Carlos Roersch; *Ecuador:* Ximena Chiriboga, Fernando Ortega; *Guatemala:* Armando Caceres, Hilda Leal de Molina; *Honduras:* Jorge A. Mendoza, Cristina Mercedes Montoya, Regina Moncada; *Nicaragua:* Francisco Beteta; *Panama:* Mahabir Prashad Gupta, Jose De Gracia, Rosaura Jimenez, Ana Isabel Santana, Pablo Solis; *Suriname:* Hanny L. van de Lande, Lucien Kloof; *United States of America:* Joseph Bastien, Rowan J. D. Brixey, Nancy A. Hazleton, Jack Killen, Karen E. Kun.

WHO SOUTH-EAST ASIA REGION

Bangladesh: Mahbub Ara Ummeh Zohra; *Bhutan:* Dorji Wangchuk; *India:* B.B. Gaitonde, P.N.V. Kurup, G.S. Lavekar, Sheyphali B. Sharan, S.K. Sharma; *Indonesia:* M Hayatie Amal, Rachmaniar Brahim, Hardaningsih, Sri Harsodjo, Kustiani, Agnes M. Loupatry, Soetomo, Nani Sukasediati, Imam Waluyo; *Sri Lanka:* Niletthi Nimal Siripala De Silva; *Thailand:* Tipsukon Bamrun, Wong, Anchalee Chuthaputti, Kunchana Deewised, Pennapa Subcharoen.

WHO EUROPEAN REGION

Denmark: Erling Høg, Karen Worm, *Georgia:* Lali Dateshidze, *Germany:* Gudrun Bornhöft, Thomas Hofmann, Peter F. Matthiessen, Susanne Moebus, *Russian Federation:* Andrey V. Goryunov, Alexey A. Karpeev, Vladimir V. Tonkov, Pavel P. Vetrenko, Andrey S. Zakharevich; *Sweden:* Torkel Falkenberg; *United Kingdom:* Henrietta Bidwell, Gerard Bodeker, Gordon Brown, Gemma Burford, Alison Daykin, Chris Grundy, Penny Ireland, Michael McIntyre, Cora Neumann, Chi-Keong Ong, Kerrie Raggatt, Mushi Rahman, Terence Ryan, Judith Thompson, Diana Walford.

WHO EASTERN MEDITERRANEAN REGION

Egypt: Aly Bayoumi Hammad; *Islamic Republic of Iran:* Majid Cheraghali, Ali Haeri, Mahmoud Mosaddegh, Farzaneh Naghibi; *Kuwait:* Abdul Rahman Abdulla Al-Awadi, Ahmed Regai El-Genady, Mohammad Sabir; *Pakistan:* Athar Saeed Dil, Anwar-ul-Hassan Gilani, Hakeem Abdul Hannan, Shahzad Hussain, Farnaz Malik; *Saudi Arabia:* Tawfeq A. Al-Howiriny, Abdullah M. N. Al-Bedah; *United Arab Emirates:* Sassan Behjat.

WHO WESTERN PACIFIC REGION

Australia: Alan Bensoussan, David Chapman-Smith, Stephen Myers; *China:* Dequan Ren, Ping Yan Lam, Baoyan Liu, Zhi Xiang Shen, Jarne Sin, Xiaopin Wang, Zhendou Wu, Jiaqing Zhu; *Fiji:* Nacanieli Goneyali; *Japan:* Norio Aimi, Kazuhiko Atsumi, Yukihiro Goda, Ken Hara, Masao Hattori, Munekazu Iinuma, Takeatsu Kimura, Hiroaki Kiyohara, Chiaki Nagase, Shinya Sakai, Ushio Sankawa, Motoyoshi Satake, Setsuko Sekita, Shohachi Tanzawa, Katsutoshi Terasawa, Kazuo

Toriizuka, Kiichiro Tsutani, Haruki Yamada, Takahiro Yamada, Kaisuke Yoneda, Yoshitoku Yoshida; *Lao People's Democratic Republic*: Boun Hoong Sourthavong; *Malaysia*: Abdul Aziz Mahmood; *Mongolia*: Zina, Batchmeg; *Papua New Guinea*: Umadevi Ambihaipahar; *Philippines*: Alfonso T. Lagaya, *Republic of Korea*: Jae-kyu An, Chung-Whan Byun, Il-Moo Chang, Hyun-Woo Han, Seonsam Na, Pyong-Ui Roh, Yoonsook Yoo; *Singapore*: Chris Cheah; *Viet Nam*: Tran Luu Van Hien, Le Van Truyen, Chu Quoc Truong.

WORLD HEALTH ORGANIZATION

WHO Centre for Health Development: Yuji Kawaguchi*, Kin Shein, Yuki Maehira

WHO Headquarters: Xiaorui Zhang, Steeve Ebener, Yaniss Guigoz.

WHO Regional Office for Africa: Rufaro Chatora, Ossy M.J. Kasilo, Marianne Ngoulla, Edoh Sombey-Alley, Charles Wambebe.

WHO Regional Office for the Americas/Pan American Sanitary Bureau: Sandra Land, Rosario D'Alessio.

WHO Regional Office for South-East Asia: Krisantha Weerasuriya.

WHO Regional Office for Europe: Kees de Joncheere.

WHO Regional Office for the Eastern Mediterranean: Mohamed Bin Shahna, Peter Graaff.

WHO Regional Office for the Western Pacific: Seung-hoon Choi, Ken Chen.

Contributions to the publication of this Global Atlas by Rosamund Williams (WHO style editing), June Morrison (indexing), are also gratefully acknowledged. The WHO Centre for Health Development is also grateful to all the other contributors in the preparation and publication of the Global Atlas.

* Dr Yuji Kawaguchi, former Director of WHO Centre for Health Development, is acknowledged for his conceptualization, initiation, and support to the Global Atlas work.

FOREWORD

The International Conference on Primary Health Care, held in 1978 in Alma-Ata in the former Soviet Union, launched “Health for All”, a global movement that has shaped the dynamics of public health ever since. Yet, despite indisputable advances made, the situation remains as “health for some”. Issues such as disparity in health-care coverage; lack of equitable, accessible and affordable health care for all; and problems with availability of realistic financial resources for health services and medicines are daily realities for the indigent, the marginalized and the underprivileged.

The World Health Organization (WHO) estimates that one-third of the world’s population has no regular access to essential modern medicines; in some parts of Africa, Asia, and Latin America, as much as half of the population faces these persistent shortages. However, in these same situations, the rich resources of traditional remedies and practitioners are available and accessible.

Traditional medicines play a primary role in people’s health, as they have for thousands of years. The range of therapies and practices is wide, varying greatly from country to country and from region to region. The most well-known are the Ayurveda of India and traditional Chinese medicine and these systems of medicine have now spread to other countries.

The use of herbal medicines, and complementary and alternative medicine, is increasing in industrialized countries, in connection with disease prevention and the maintenance of health. There is an emphasis on self-empowerment and a more holistic approach, in which life is understood as being a union of body, senses, mind and soul; and health as being the combination of physical, mental, social and spiritual well-being. This approach is consistent with WHO’s definition of health. The practices of traditional, complementary and alternative medicine focus on the holistic approach and include medicinal plants. Herbal medicines are perceived as “safe”, although in reality there are potential risks, such as side-effects, in the use of all medicines. The relatively low cost of traditional remedies and their greater accessibility contrasts with the rising cost and limited availability of a number of even the most essential modern medicines.

The WHO Global Atlas of Traditional, Complementary and Alternative Medicine relates well to one of WHO’s overall strategic directions in traditional medicine for 2002–2005; that of tackling excess mortality and morbidity especially among poor and marginalized populations. Traditional medicine’s accessibility and affordability are key values for populations struggling against communicable and noncommunicable diseases, especially in their chronic forms.

We have seen a global resurgence of interest in the use of traditional, complementary and alternative medicine over the last decade. The Fifty-sixth World Health Assembly formally acknowledged this in May 2003; Member States discussed the WHO Traditional Medicine Strategy 2002–2005 and adopted resolution WHA56.31. These documents set out squarely the major challenges: the lack of organized networks of traditional practitioners; the lack of sound evidence of the safety, ef-

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