

TCM Integration in Singapore's Healthcare System

UTS2101 Biomedicine and Singapore Society
Final Project

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T&CM

Traditional and Complementary Medicine

CAM

Complementary and Alternative Medicine

TCM

Traditional Chinese Medicine

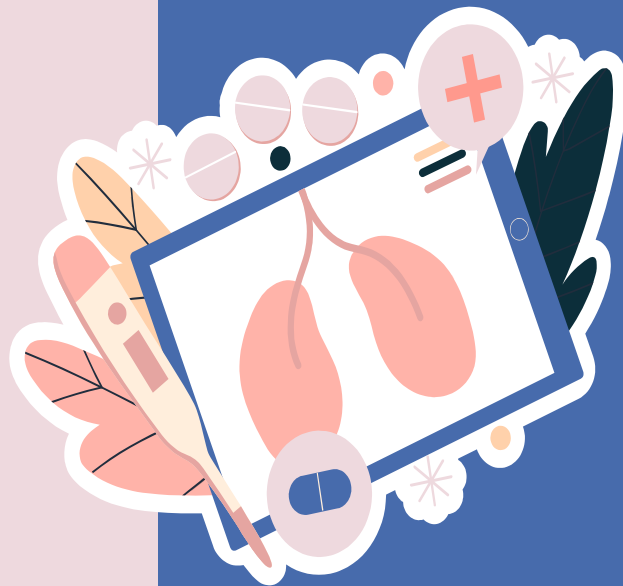
WM

Western Medicine



01 Introduction

Background, Motivation, Methodology



Background

Globally, around 100 countries have adopted Traditional and Complementary Medicine (T&CM), up from 25 in 1999

In Singapore, there is a shift towards a **preventive healthcare** in line with the ongoing movement of Healthier SG





Research Question

How can TCM be better integrated into Singapore's healthcare system?

Research Methodology



**WHO Strategy
& Global Report**



Government Policies



Scientific Papers



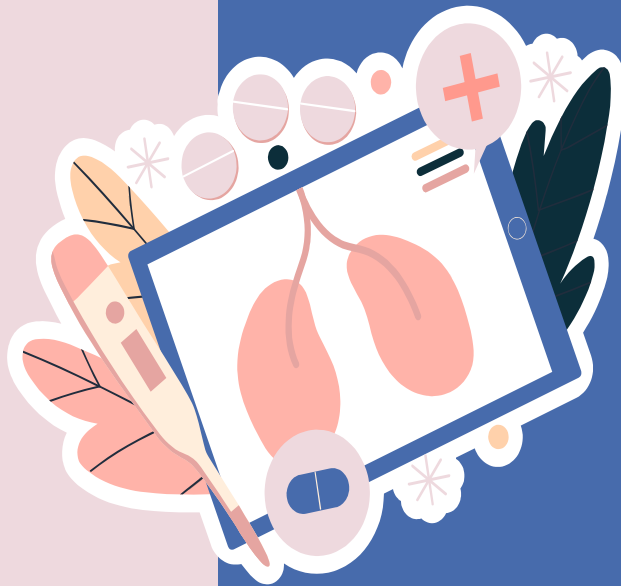
News Websites



02

Trends in T&CM

Global Outlook, State of T&CM in SG



Global Outlook on T&CM

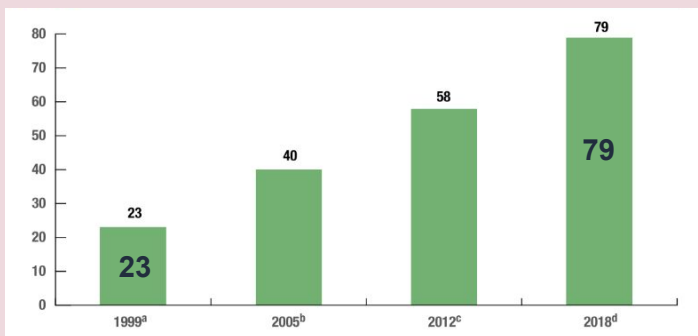
- The WHO's first Traditional Medicine Strategy was released in 2002. Since then, it has conducted two additional surveys, a second global survey from 2010-2012 and an update survey from 2016-2018. WHO's latest Traditional Medicine Strategy 2014–2023 has three strategic objectives: 1. Active management of T&CM through national policies, 2. Regulate products, practices and practitioners, 3. Promote universal health coverage through T&CM integrations (WHO, 2013).



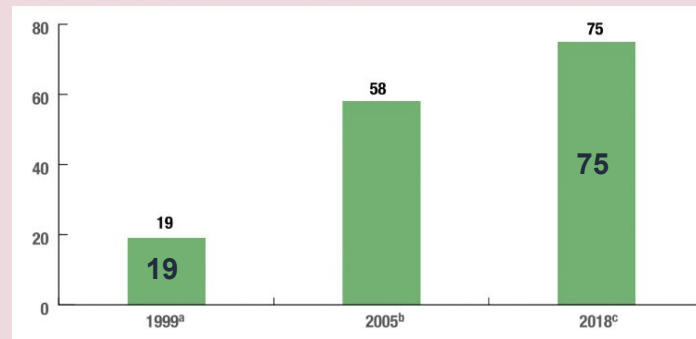
Global Outlook on T&CM

T&CM has shown remarkable maturity in the past two decades

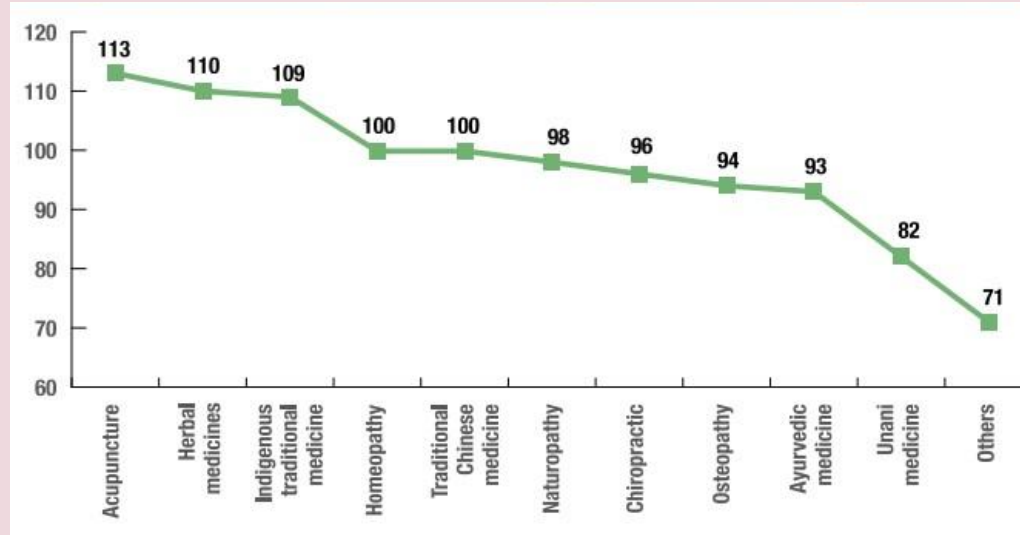
Number of countries with a
national programme for T&CM



Number of countries with a **national research institute** for T&CM



Global Outlook on T&CM



Globally, acupuncture and herbal medicine are the top two types of CAM used



Global Outlook on T&CM

However, regulation has been moving at a different pace amongst the various T&CM practices

Herbal Medicine

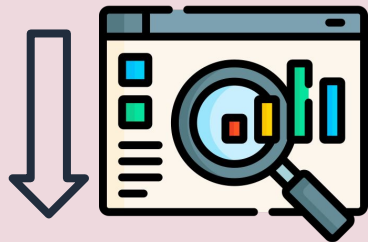
124 regulations in
2018

Other CAM services

Only 78 regulations
in 2018

Global Outlook on T&CM

Significant challenges lie ahead for countries to regulate T&CM.



**Lack of
research data**



**Lack of financial
support for T&CM
research**



**Lack of mechanisms
to monitor T&CM
safety**

Global Outlook on T&CM

Regulation is crucial:

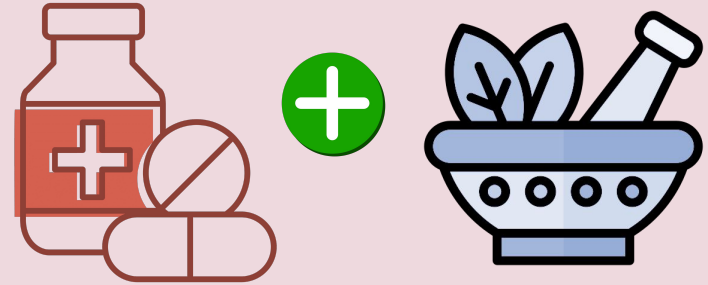
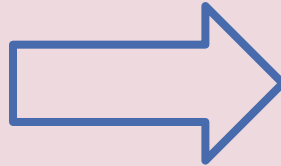
- establish standardised, high quality services for patients
- prevent potential abuses of CAM services



State of T&CM in SG



Western Medicine



**Expanding healthcare
approach to CAM**

State of T&CM in SG



76% Adoption Rate



84%



69%



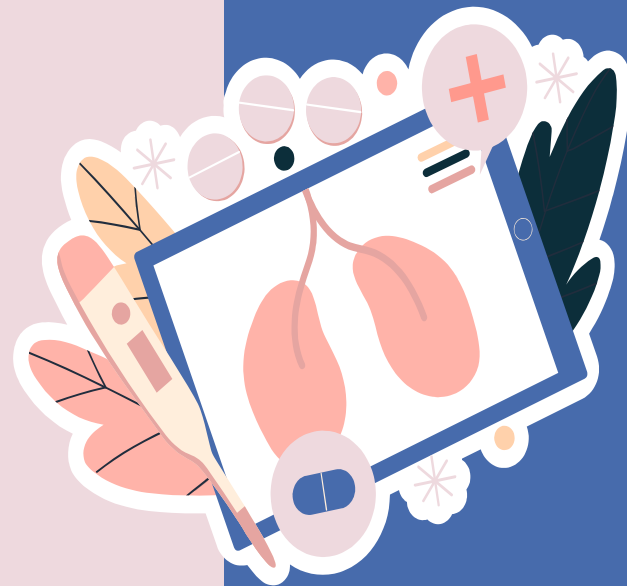
69%



03

TCM in SG

Challenges, Current Approach





Challenges of TCM in SG



Challenges of TCM in SG

➤ **Limited Access**

TCM practices are still mainly limited to private and charitable Chinese Medicine Clinics

➤ **Lack of Regulations**

Clinics are also not required to be regulated under the Healthcare Services Act (HCSA), a contrast to the stringent oversight experienced by Western medical counterparts

➤ **Limited Provision of Subsidy**

Medisave only extends subsidies to a very limited range of TCM services. Specifically, acupuncture treatments are solely for lower back pain and neck pain for patients aged 60 or above



**Societal
of TCM**

View

Societal View of TCM



Older Generation

- Possess a nuanced understanding of both WM and TCM
- TCM → slow, thorough, long-term focus, and internal emphasis.
WM → quick, immediate, short-term efficacy, and external focus
- Perceive each modality as a component of a complete healing process, suggesting that both can complement each other in a continuous pursuit of health.
- Medical choices are context-dependent, demanding a holistic healthcare system.

Societal View of TCM



Younger Generation

- A spectrum of acceptance of healthcare approaches beyond the mainstream WM
- Influenced by a prevailing stereotype that perceives TCM as inferior due to its divergence from the widely accepted biomedical model of WM
- This divergence in preference holds implications for older patients as they would conceal their choice to seek TCM services from their younger family members who predominantly endorse Western medical approaches



Healthcare Professionals' Views

Lower Perception of Safety

	Acupuncture	Herbal Medicine
Pediatricians (Loh, 2009)	42%	39%
Medical Students (Yeo, et. al, 2005)	33%	16.8%

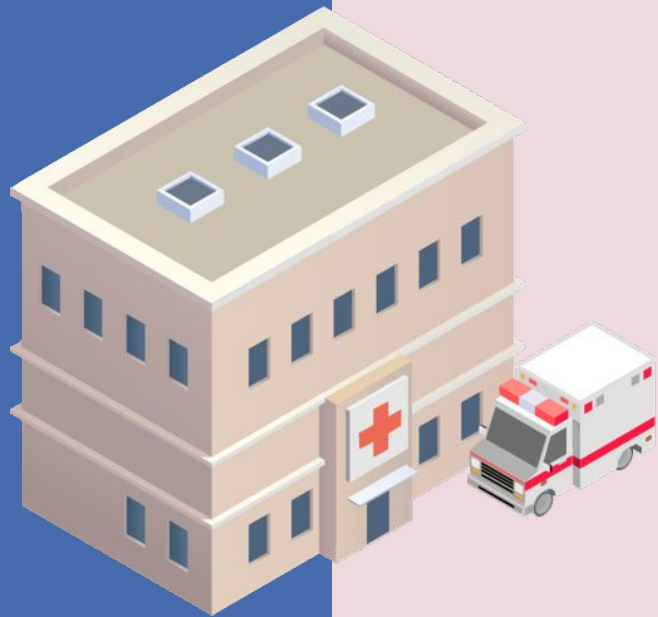


Lack of knowledge

- Median rating of pediatricians' knowledge on TCM was **2.63/10**
 - **58.2%** and **58.6%** of medical students were unsure of the harmful effects of acupuncture and herbal medicine.
1. Hesitation in referring to TCM
 2. Last resort
-



Current Approach to TCM in SG



TCM Integration in Hospitals

5 Public Hospitals Offer Acupuncture Services





What does it mean?

1. Acupuncture is a verified TCM
 2. Increase transparency between doctors and patients
 3. Doctors are more knowledgeable on acupuncture
-



Other TCM services

Hospitals	TCM Services provided
SGH	Acupuncture
NUH	Acupuncture, Cupping, Electro-acupuncture, Acupoints Electro-stimulation, Ear acupuncture therapy, Consultation on Traditional Chinese Medicine (TCM)
TTSH	Acupuncture, Cupping, Dietary medicine (Herbs), Western based therapies (Therapies which combine both Western and Eastern approaches such as laser acupuncture)
KTPH	Acupuncture, Vacuum Cupping
Alexandra Hospital	Acupuncture



SG Government Approach

Government



- TCM Practitioners



- TCM Products - Chinese Proprietary Medicine (CPM)

Government

- TCM is currently treated as a **complementary medicine**. When compared to WM, TCM receives **lesser recognition** and **funding** from the government
- Under the Employment Act, employers are **legally required** to **recognise MCs** issued by **doctors or dentists** but have the discretion to accept MCs issued by TCMPs
- There is limited access to TCM services via the:
 - CHAS scheme
 - Medisave claimable options



Government

Sis Flower: 🍦 🍰 > TCM???



before you made that decision?



Government

- **TCMPs are governed separately from WM**, and the government has stated that it does not intend to regulate them together
 - The **disparity in regulations** was seen during COVID, when the government **relaxed rules** on businesses such as **ice-cream shops**, but **only allowed TCM shops with a resident TCMP to reopen**
 - Eventually, all TCM halls were allowed to reopen after MP Lee Bee Wah raised it in parliament
-

Government

- In 2013, MOH set up the TCM Research Grant (TCMRG) to encourage local collaboration in TCM
- Aims to leverage **TCM principles** and **scientific research methods** to provide more **evidence-based treatment options**
- As of 2023, based on the available figures
 - Only **20 research projects** have been conducted
 - **Total funding of S\$8 million** earmarked under this grant



Government

MOH will look into the possibility of incorporating TCM in Healthier SG:
Ong Ye Kung



Health Minister Ong Ye Kung says he hopes TCM will be a part of Singapore's preventive care strategy that will shift the gravity of care from the hospitals to the community. PHOTO: EU YAN SANG



Government

“They are two separate systems, disciplines and knowhow. They may intersect at some point and overlap but you cannot make one like the other. It is not possible, they are two complete holistic systems.” -
Health Minister Ong Ye Kung



Government

“In the area of preventive health, Western medicine and TCM share a **common understanding** that **early management of risk factors and disease** can stave off problems and complications later in life. Therefore I believe when we **focus on preventive care under Healthier SG**, we hope **TCM can play a part.**”

- Health Minister Ong Ye Kung



Government

- Established two workgroups to improve
 - Career development
 - Enhance TCM clinical training
 - to raise the professionalism of the TCM sector
 - Does not intend to impose WM-equivalent regulations on TCM
 - Looking to strengthen self-regulation, as they believe **TCM has a strong traditional and cultural background**, hence self-regulation is more appropriate
-



04

Recommendations

Government, Hospitals



Government

- Instead of **forcing employers to legally recognise TCMPs issued MCs**, the government can either:
 - Encourage a mindset change amongst employers
 - Make it mandatory to provide sick leave without MC
- The civil service has started practicing this, by providing 2 days of sick leave without MC





Government

- Commendable that various hospitals offer differing levels of T&CM services, at a **strategic level**, the government can do more to set a healthcare strategy for TCM Integration, such as its **ongoing review of TCM in Healthier SG**.
 - Where evidence-based treatment options are available, the government should integrate them into public hospitals and **reclassify them as Integrative Medicine** instead of complementary medicine
-

Government

- **Bilateral cooperation** and **International cooperation** would allow Singapore to tap into other countries' expertise and set TCM standards and norms

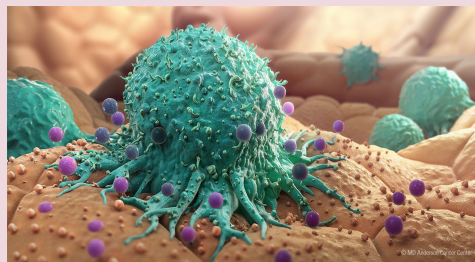
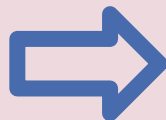
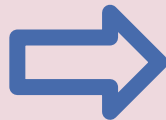


Government

- Chew (2023), pointed out that:
 - **Lack of governance and frameworks** is currently hindering the TCM industry
 - Whereas increased regulation will help **increase the professionalism**, and serve as **guidelines for future subsidies**, such as through CHAS or Medisave.



Hospitals



Hospitals



Evaluation of the antipyretic activity of Gypsum Fibrosum and its constituents

Huandi Wang, Mengyue Wang, Xiaobo Li *

School of Pharmacy, Shanghai Jiao Tong University, Shanghai 200240, China

Evaluation of Traditional Chinese Medicine Herbs in Oncology Clinical Trials

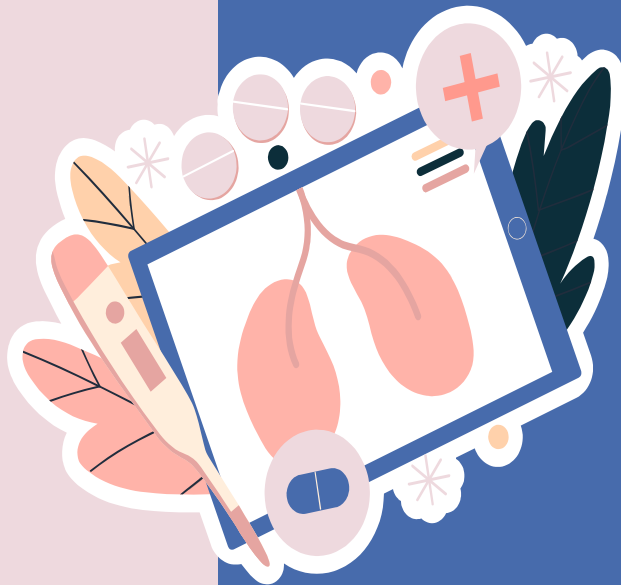
Liu, Jie MD, PhD^{*,†}; Mao, Jun J. MD, MSCE[†]; Wang, Xin Shelley MD, MPH[‡]; Lin, Hongsheng MD*

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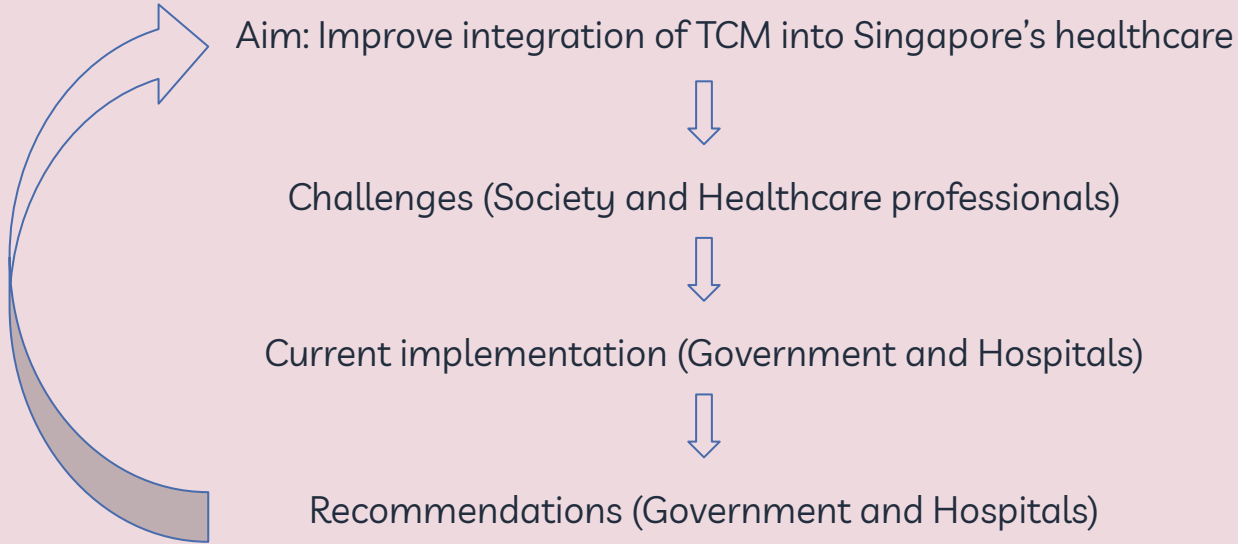
The Cancer Journal 25(5):p 367-371, 9/10 2019. | DOI: 10.1097/PPO.0000000000000404



05 Conclusion



Conclusion





Thank you!



Q&A
