INTEGRATING THE PRACTICE OF TRADITIONAL AND NATURAL MEDICINE INTO THE HEALTH SYSTEM



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Introduction

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As part of the "Health for All by the Year 2000" effort, the World Health Organization issued the *Declaration* of Alma Ata at the end of the International Conference on Primary Health Care in 1978, which, amongst other proposals, called on the international community to integrate scientifically proven alternative medicines and traditional therapies into their national health systems. At present WHO continues to follow the development of Natural and Traditional Medicine elaborating a working strategy at the global level. As far as Cuba is concerned, a number of clinics were already using various forms of traditional medicine, but it wasn't until 1996 that a programme of strategic objectives and measures was passed to develop these techniques and methods. Now, 12 years later, the techniques of traditional and natural medicine, or TRM (known as MTN in Cuba), have been definitively incorporated into the national health system of Cuba.

> **TRM is** a broad-spectrum specialization, which includes health promotion, prevention of disease, diagnosis, treatment and rehabilitation of patients utilising, amongst other things, traditional Chinese medicine (acupuncture, acupressure, moxibustion, cupping, therapeutic

massage), herbal medicine, apitherapy, homeopathy, flower therapy, suggestion and hypnosis. It also includes treatments employing natural resources such as spa waters, mineral mud therapy, ozone, magnetic fields and other sources of natural energy.

In recent years, perhaps the most significant achievement of this programme in Cuba is to have gradually and stably integrated TRM resources into the National Health Service, offering broad coverage both in primary and secondary health care. Specialised TRM development centres are present in all the country's provinces and integrated rehabilitation services with NTM departments were created in the country's municipalities. This has had a positive effect on the efficiency and quality of health services, which are now better integrated into the community in the prevention of non-transmissible chronic illnesses and epidemics. It also offers a less harmful and more efficient solution to health care problems from the economic point of view, providing savings in expenditure on industrially produced chemical medicine and fewer adverse



reactions were reported.

Cuba's accumulated experience in the field of traditional medicine has been recognised by specialist organisations and experts in China, Vietnam, Korea, Mexico, Colombia, USA, Guatemala, Venezuela, Spain, Italy, and other countries that have appreciated the positive results gained and have come to view these efforts as a cutting edge experience. The international community has given this programme further impulse by providing donations, literature, expert help, and joint research and international

collaboration projects.

The employment of TRM is of strategic importance in the field of human development, since it can be applied in areas with no or insufficient health services. It fulfils a crucial role in emergency situations, such as natural or manmade catastrophes, since all that is required is trained personnel and the resources of the surrounding environment. As part of the national health system, it improves the capacity of the medical services to



resolve problems and is a source of new jobs.

The benefits that TRM brings are most noticeable in areas where there is no or insufficient health infrastructure, and represents a way of extending social protection to the poorest sectors of the population. It is also one of the most effective ways of improving, at reduced cost, medical assistance to millions of people in

What problem does it solve?

The way natural medicine first develops is the same all over the world, no matter where it is practised. In Cuba, the use of traditional and natural medicine came about in two broad stages: the first characterised by isolated examples of practices of 'green' medicine, acupuncture, mud therapy, etc., and the second involving the gradual introduction of TRM into the national health system. This last process began at the beginning of the 1990s when the Health Ministry (MINSAP) became aware of the need to revitalise traditions in the use of medicinal plants, and introduce the therapeutic resources of traditional Chinese medicine. This was when training for TRM specialists and studies in homeopathy were first introduced, and thermal and spa water resources were regenerated throughout the country.

March 1995 saw the creation of the Inter-ministerial TRM Development Commission, followed in September by the MINSAP Traditional and Natural Medicine Department. In 1996, the Programme for the Development of Traditional and Natural Medicine was approved, and in 2002 the Council of Ministers' Executive Committee adopted Agreement 4282. This agreement established a series of measures, including, most importantly, the creation of the National TRM Development Centre to direct the activities of the programme throughout the country.

TRM is especially useful in areas with poor health service facilities and in the event of natural or man-made disasters and epidemics. Some natural and traditional medicine therapies and procedures only require trained medical personnel and a minimal amount of resources and equipment that can mostly be supplied locally. Thus, it can be used to provide highly effective primary medical assistance in areas without social services, and in the event of earthquakes, hurricanes, fires, droughts and other catastrophes.

The integration of TRM methods into national health services is all the more feasible in countries, regions or locations where governments are already taking serious steps to improve health assistance. TRM provides real support to local institutions that are striving to achieve sustainable development in the service sector and preserve their environmental heritage, which in turn increases opportunities for decent work.



The integration of TRM into the national health system can bring the added benefit of helping conciliate the diversity of existing criteria on how to tackle health and illness, since it can employ a health care strategy and model that brings together conflicting tendencies in many parts of the world: medicine as a product of technology and as the result of traditional knowledge and culture. It also promotes the convergence of curative and preventative approaches in medical schools, since the unification of these two concepts is one of its main advantages. In effect, it promotes greater quality in the health services, because it extends the range of therapeutic possibilities that doctors have at their disposal to solve the problems they have to face. As well as resolving or helping to resolve the problems of the population less expensively, it also shows individuals how to overcome some of their ailments by themselves, and how to lead a healthier way of life.



The development of TRM depends on the joint participation of various social stakeholders, including non-government organisations, the mass media, local authorities and leaders, since specific analysis is required in areas where this process is to be promoted.

In Cuba, natural and traditional medicines are studied as sciences and techniques and are part of the Health Ministry's Ramal Programme. At present there are 191 protocols concerning research, medical plants, acupuncture, peloids, and mineral and medical waters amongst others. Favourable public opinion and improved services more than justify its use. **TRM resources** can be employed by highly qualified professionals as well as unqualified practitioners, once they receive special training. The practice of traditional medicine can generally be provided at very low cost.

Although economic studies are notoriously difficult to conduct, solid arguments exist for TRM to be employed in areas where there are insufficient resources, or in the presence of natural or man-made disasters. In these cases, trained personnel can resolve the most diverse health problems just by utilising their own capabilities, the resources that are locally available, and simple instruments and equipment, thus providing social and economic benefits of inestimable value.

At the same time, the inclusion of TRM within national health systems means services can be extended to a broader sector of the population since available resources can be used more efficiently by applying less costly techniques in primary health care, such as the medical use of natural resources. Moreover, whenever TRM is employed in health services, it enhances medical practice, improves the quality of health care and broadens capacity for resolving problems.

Traditional and Natural Medicine in practice



TRM can be implemented at both local and national levels since it can be integrated into the health systems of a geographical area of any size or population strata.

The most important stages in the development of a TRM strategy in a country, province, or community are as follows.

- Analysis of the present situation and problems of the selected area so that a strategy can be elaborated to suit to the area's specific conditions.
- Coordination of stakeholders in the area, government and non-government organisations, the mass media, and community leaders.
- Professional training for health personnel and community leaders, purchase and/or elaboration of equipment, supplies, and bibliography.
- Evaluation of initial work vis-à-vis any necessary adjustments.

After these stages, the integration of TRM into the national health system requires the following:

- Strategic integration of TRM services in primary and secondary care networks
- Creation of new centres specialised in TRM procedures
- Management of TRM teacher training.

ELEMENTS COMPRISING TRM:

NATURAL MEDICINE	TRADITIONAL MEDICINE	THERAPEUTIC SYSTEMS	OTHER SUPPORTING RESOURCES
Herbalism	Acupuncture and similar therapies	Homoeopathy	Ozone therapy
Apitherapy	Acupunctural Microsystems	Flower essence therapy	Magnet therapy
Mud baths	Traditional massage	Osteopathy	Neural therapy I
Hot springs	Traditional Asian exercise		Microdosing
Diet-based therapy	Ayurveda		Therapeutic Hypnosis
			Light therapy

Clearly, it is each area, region or country that must decide what TRM methods to develop and when to incorporate them, basing its decisions on the conditions, traditions and characteristics of the area.

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The following principles must be followed in developing and integrating TRM into the medical system:

- Scientific basis. Only TRM procedures that have undergone scientific research validating their harmlessness and beneficial therapeutic effect are to be approved and utilised.
- Integration. Each TRM procedure is part of a set of measures aimed at improving the quality of life. The resources made available by this medicine are added to the store of therapeutic resources conventionally used by doctors, thus

forming an integral part of the therapeutic models and policies that can be used in orthodox medical practice.

- Systematic use. Only continuous practice, systematic study, and periodic evaluation ensure the maintenance of quality. TRM is completely integrated into the health system and its therapeutic resources are used in all levels of care.
- Professionalism. The practice of TRM enhances relations between doctor and patient, promoting a broader concept of health and illness, and a healthy lifestyle. TRM resources improve the work of those that practice it. In Cuba doctors use these resources within the framework of their chosen specialisations. TRM is a medical specialization and can be practised only by health specialists and purpose-trained, accredited personnel.



Organisational chart showing the integration of traditional and natural medicine into the national health system.

Results

Cuba's biggest success in recent years is the gradual and stable integration of traditional medical resources into community services both in terms of secondary, and more importantly, primary health care, which makes this a unique experience in the American continent. The following pie chart illustrates the result of TRM integration into the Cuban health system:



TRM development centres are specialised facilities within the Cuban health system, providing services to all the country's provinces and municipalities. All in all, a total of 3,535 new jobs have been created in the 14 provincial TRM centres and municipal centres and intergrated rehabiliation services throughout the country.

There was a turning point in the teaching of medicine in Cuba with the inauguration of the Escuela Latinoamericana de Medicina (ELAM), where young people of different ethnic groups could learn to use the scientific procedures of conventional medicine and at the same time study the traditional

medicine of the local population. They also receive full training in the techniques of natural and traditional medicine used in the country. TRM practices preserve cultural traditions and enhance the health system from the institutional, scientific, economic and financial points of view.

Cuba was hit by two hurricanes in 2008, which caused much devastation. A group of homoeopathy and flower essence therapy experts identified which remedies could be administered to the population to achieve rapid psychological and physical recovery. These natural products were administered to approximately 55,000 people.

Bearing in mind the NTM growth indicators for Cuba and figures from the national statistics system for the years 2000 -2007 we can trace the development of the following parameters in the table below.

2000	2001	2002	2003	2004	2005	2006	2007		
Production of natural products (millions of units)									
20	15,8	14,8	18,3	17,3	20,4	38,8	33,1		
NTM in primary health care (millions of applications)									
8,0	11,7	12,6	13,5	6,1	4,9	9,2	9,3		
NTM integrated into the emergency health system (millions of applications)									
1,3	1,6	1,9	2,0	1,4	0,7	2,8	2,7		
Surgery using acupuncture anesthesia									
4.400	3.672	6.937	8.313	11.239	13.398	28.321	35.243		
NTM applications in hospitals									
326.000	342.790	373.526	424.025	126.981	134.136	219.010	246.383		
Dental extractions using NTM									
46.000	53.565	61.657	44.472	33.122	25.918	60.581	42.682		

The reserves of natural medical resources throughout the country have been reappraised, studied and put to better use. Moreover, technology for the production of natural medicine has been elaborated. An example of this activity is the work of the mountain laboratories, which process medicinal plants for phytotherapy or herbalism and spa resorts which integrate hot spring therapy and natural medicine.

The following two examples show the economic benefits to be gained from the use of TRM:

Cuba's experience of using homoeopathy to deal with epidemic outbreaks is positive. An example is the 2006 dengue hemorrhagic fever epidemic. Dengue fever symptoms affect a patient for an average of seven to 10 days. This was reduced to an average of three days in patients who were given homoeopathic treatment, symptoms disappearing completely or becoming very mild, and there were no complications, resulting in a marked improvement in recovery times and less time spent in hospital.

Apart from these advantages there are considerable savings economically. A dengue patient who is taken to hospital and given analgesics, antipyretics, venoclysis, antiemetics, oral rehydration salts, daily laboratory tests and medical care for seven days costs approximately 170 pesos a day. If dengue hemorrhagic fever sets in, specialised care is needed, raising costs - 15 days hospitalization at 300 pesos a day. Using homeopathy to treat dengue hemorrhagic fever patients costs about 120 pesos a day.

In short, using homoeopathy to treat this illness saved the country 1,050,000 pesos by way of not having to use allopathic medicine to treat hospital patients. The prevention of posible outbreaks and the administration of homeopathic remedies to the population saved 3 150 000 000 pesos.



Acupuncture can be used as an anaesthetic in surgery on patients that are unable to undergo general anaesthetics or where the risk involved in using anaesthetics is too high. In terms of cost, the price of a general endotracheal anaesthetic is USD 215.83 per patient, while the use of acupuncture as a anaesthetic in operations costs USD 19.71.

International Interest

Cuban experience in the integration of TRM into the health services has captured the interest of increasing numbers of institutions and specialists from different countries, which in recent years have been collaborating with this programme in a variety of ways. These include Spain, Italy, USA, Guatemala, Mexico, Venezuela, Brazil, China, Korea and Colombia.

Joint projects have been carried out with:

- Italy: TRM training at the university level.
- Spain: Joint research in phytotherapy and studies on equipment needed for TRM treatment.
- United States: TRM training at the university level. Medic Project and training for yoga instructors, Yoga va Project.
- Venezuela and Colombia: assistant teachers exchanges.
- Dominican Republic: studies on medicinal flora.
- China, Vietnam and Korea: training in traditional Chinese medicine.
- Mexico: creation of TRM centres and homoeopathy and herbalism researchers.
- China: historical studies. Chinatown Project, cultural and historical exchange.



Governments of 62 countries around the world currently benefit from the medical services provided by more than 3,000 Cuban health experts. Most are based in mountainous terrain or rural areas far from cities, where health assistance is inexistent or extremely precarious. 80% of these specialists are applying forms of TRM treatments precisely in those areas, where they are most appreciated and where people are most exposed both to natural disasters and the lack of infrastructure.

National recognitions and awards include:

International recognitions and prizes include:

- Recognition from the National Commission of Science and Technical Forums for the TRM programme's for consecutive years of contributions in science and economics.
- 12 consecutive years of prizes awarded in science and technical forums to about 500 scientific TRM projects.

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- Recognition from the University of Sri Lanka for the development of acupuncture in Cuba, 1987
- Recognition from the Latin-American Society of Natural Medicine (SOLAMENAT), 1991
- Recognition for the Treatment of Asma with Natural Methods, 1993, Venezuela
- Excellence prize for the Management of TRM in Natural Disasters, awarded during the Conference on the Integration of Medicine, 1999, Colombia
- Prize for contributions in the teaching of flower therapy, awarded by the Latin-American Association of Flower Therapy, 2001
- Recognition from the Ecuadorian Society of Homeopathic Medicine for Cuban Homoeopaths, 2001
- Recognition from the US MEDIC Project for the teaching of TRM in Cuba, 2002.
- Cubans awarded honorary membership of Chilean Acupuncture Society of Surgeons
- Cubans awarded honorary membership of Puerto Rico Academy of Traditional Chinese Medicine, and appointed tutors at the Bastyr University.
- Cuban Academy of Sciences National Prize 2007for the characterization of mineral and medical waters and hydrogeological studies.

The prestige acquired by Cuba in this area has led various international TRM organisations to hold events and conferences in Cuba. So far, 176 conferences have been organised on Natural Medicine.

The use of TRM integrated with other national health services is practiced in Vietnam, Korea and China. However, all countries make use of these practices in one way or the other, whether it be traditionally in a few isolated communities, or privately in just a few isolated institutions. For many indigenous ethnic groups and communities in different countries, such as Argentina and Brazil, it is



The employment of Traditional and natural medicine in other countries

The cultural conditions for incorporating this programme are best in countries which have traditions of popular medicine. MTR centres can be most easily created in areas and regions that possess an abundance of medicinal plants, spa waters, minerals mud, and other resources used in TRM.

TRM can only be successfully incorporated into a health system if it is implemented by health workers and specialists of the highest standards and qualifications. Other, unqualified practitioners of TRM, such as herb salesmen, masseurs and medicine men, must also obtain qualifications. Then, once they are integrated into the system, they will acquire a sense of belonging and increase their standing in society. Validation of these practices by the nation's health system also avoids the occurrence of non-scientific practices.

The infrastructure needed for TRM is simple since in it is integrated into the practice of conventional medicine and the same facilities can be used. Any necessary adjustments to working areas and provision of resources are, in most cases, very simple and cheap. However, more expensive technologies do exist, but these can be acquired once available resources increase.

The implementation of strategies for the utilisation of TRM in the event of disasters, regular medical assistance in remote places, or where no health services exist, requires specific studies of the characteristics of the area concerned. In all cases, training of human resources and coordination between state and non-government organisations is vital.



The use of TRM can be an important source of new jobs at the local level in a variety of ways:

- Agriculture: sowing, harvesting, drying and storage of medicinal plants.
- Areas containing spa waters and mineral mud: processing these resources for medicine and therapy.
- Beekeepers and herb-salesmen.
- Local systems for the production of natural medicine (phytotherapy, apitherapy and spas).
- Information on, and distribution of, natural medicine.
- Local practitioners of acupressure and massage, under the direction of health workers.
- Doctors, dentists, nurses and paramedics.
- Civil defence personnel utilising TRM in disaster situations.



Depending on the specific conditions of each area, follow up strategies can involve any necessary epidemiological measures or the use of available resources, as far as possible compatibly with the traditions of the population. Immigrant communities representing other cultures within a nation can be involved in transmitting any medical traditions and treatments that have proved effective. This will evidently lead to the development of specific TRM procedures at the local level.

In transferring this experience to other countries, various strategies can be adopted according to the type of TRM concerned:

- Management of the production of natural medicine at local and industrial levels.
- Organisation of quality control systems for natural products.
- TRM management in primary and secondary health care.
- TRM management in the event of natural or man-made disasters.
- Creation of specialised TRM centres.
- Definition of pre-graduate and postgraduate study programmes in medicine, oral pathology and nursing.
- Definition of research and development projects in accordance with local needs.

- Community participation in the revival of traditional medicine through literature, art and culture.
- Health education through TRM.
- Definition of techno-economic parameters for spa design.
- Organisation of medical services in thermal spas.
- Management and protection of spa water and mineral mud deposits.
- Transference of technology for the medical application of mineral resources.
- Adaptation of thermal spas to the demands of commercialisation and international tourism.

To learn more

More information is available on specific aspects of the use of traditional and natural medicine from the following specialists:

- Julio Monsalvo. Doctor. Paediatrician. Author of several books. NTM researcher and collaborator in Cuba and America, member of the People's Health Movement. *cisp.conosur@argentina.com*
- Efrem Korngold and Harriet Beinfield. Co-authors of the book Between Heaven and Earth. They have given courses in Cuba. *Chinadoc@pacbel.net, hbeinfield@yahoo.com*
- Shad Reinstein. Professor of acupuncture at the Bastyr University of Naturopathic Medicine. ShadJody@aol.com
- Alfredo Embid. Coordinator of the magazine Medicina Holística. He has given conferences on NTM. amcmh@amcmh.org
- Elio Rossi. Distinguished Italian homoeopath, NTM collaborator in Cuba. coop.med-nat@lunet.it
- Tony Duek. Mexican flower essence therapist, NTM collaborator in Cuba. Tonyduek@hotmail.com
- Marry Pafard yoga instructor for Cuban therapists. maryyoga@mcn.org

Bibliography

- Cuban Health Ministry Ministerial Resolution 5/95 Programme for the Development of TRM, 1995
- World Health Organisation WHO strategy on traditional medicine for 2002-2005. Geneva
- Leoncio Padrón Cáceres Conference on TRM in Cuba, 2002
- Martha Pérez Viñas Conference on the use of traditional and natural medicine in natural disasters; conference on Integration of Medicine, 1999, Colombia.
- Fe Bosh Valdés Pain Clinic: the impact of traditional and natural medicine, MEDICC, Review Vol. V, no. 1, 2003; website http://www.Medicc.org/medicc%zoreview/V/1cmr.htlm
- Fe Bosh Valdés Tema 13: General Aspects of Traditional and Natural Medicine; Introduction to General Integral Medicine, ECIMED, Havana. Cuba.
- Orlando Licea Asma Project: a quality of life model applied to human health, Science and Technology Forum Prize, Cuba, 2002.
- Marcos Díaz Mastellari Pensar en Chino (Thinking in Chinese), Editorial Proart, Cancun, Mexico, 1997.
- MINSAP National Statistics Office: Natural and Traditional Medicine Yearbook, Cuba, 2007.

Contacts

Staff at Cuba's National TRM Centre is available to offer technical help in the development of traditional and natural medicine.

Information on establishing permanent collaboration is available at:

Centro Nacional de Medicina Tradicional y Natural de Cuba (National MTR Development Centre)

Address: Calle 44 No. 502 entre 5ta. y 5ta.A, Playa, Ciudad de La Habana Telephone: 2090532. Telefax 2034965.



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