

## Commentary

# Designations of Medicines

Nigel Wiseman

Chang Gung University, Táiwan

With the proliferation of medicines vying for recognition in modern health care systems, we are in some cases faced with the problem of what to call them. One has only to consider the terms ‘complementary’ and ‘alternative’, which appear in the title of this journal, to gain a sense of the problem. The two terms are virtually synonymous in their referents. Nevertheless, they differ markedly in their connotations, since they imply different roles in their relationship with the medicine that has come to dominate health care over the planet. What is more, they are considered by some as inappropriate designations for traditional medicines such as Chinese, Arabic and Ayurvedic medicine on the grounds that these cannot be defined in terms of an alien medical system of much more recent vintage. Many other terms used to designate medicines are also the subject of disagreement. Hence, clarification of their connotations may help to contribute to their understanding and thereby promote the development of a rational nomenclature.

Before embarking on an investigation of terms used to refer to complementary and alternative medicines, it is as well to consider the confusing welter of terms that have arisen to denote the medicine with respect to which they are considered complementary or alternative.

### Modern Western Biomedicine

The medicine that is taught in medical colleges was, until recently, the absolutely dominant medicine in the West and beyond. Hence it was simply referred to as ‘medicine’. The word ‘medicine’ has been used to refer to numerous different forms of healing that have existed over the centuries. It derives from the Latin *medicina*, which is related to *medico*, ‘to heal’ or ‘cure’. The word ‘medicine’ thus essentially means the art of healing. It is only over recent centuries that ‘medicine’ has come to denote specifically the medicine that is based on a wide gamut of natural sciences with biology at its core, since biology

explains the workings not only of the human body, but also the microorganisms that account for a large portion of human suffering. This medicine, by its seemingly incomparable achievements, has attained dominance not only in its Western homeland, but also beyond. Even though it is not necessarily the main provider of health care in every country, Western medicine is the arbiter of health matters for the government of virtually every nation of the world. Because of this, its right to be simply called ‘medicine’ was, for the greater part of the 20th century at least, almost uncontested. It was only in the final decades of the last century that dissatisfaction with this medicine caused certain sectors of the Western population to turn to alternative forms of medicine, giving rise to the need for a term by which to distinguish the dominant medicine from the alternatives. Unfortunately, not one, but many, terms denoting this body of medical knowledge have come into use.

‘Western medicine’ labels the medicine it denotes by its origin. It is commonly used particularly in contexts in which non-Western medicines such as Chinese, Arabic and Ayurvedic medicine are discussed. Some consider ‘Western medicine’ inappropriate because this medicine is now used across the globe and because it has major contributors outside the West.

‘Modern medicine’ is arguably a good term since it denotes a body of medicine that although it has roots in antiquity, is most precisely definable by its scientific stringency, which is of comparatively recent origin. It is a term commonly used in contexts where an ancient medicine (e.g. Chinese medicine or Indian medicine) is also discussed. In , there is a strong scholarly preference for ‘modern medicine’ (*xiàn dài yī xué*) over ‘Western medicine’ (*xī yī*), since the medicine these terms denote is the dominant medicine there, and no longer considered alien. Objections to the term ‘modern medicine’, strongest in the West, are that certain alternative therapies are of more modern origin and that the acceptance and development of traditional and complementary/alternative medicines is a recent phenomenon.

‘Modern Western medicine’ is a commonly used term, which is unequivocal to most people and satisfies a broader range of sensibilities than ‘modern medicine’ or ‘Western medicine’. The

For reprints and all correspondence: Nigel Wiseman, Chang Gung University, Táiwan. E-mail: Nigel.wiseman@msa.hinet.net

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only possible objection to it lies in the fact the double qualifier does not help to clarify matters, since there are several medicines that could theoretically be classed as modern Western medicines.

‘International medicine’ is favored by some because it denotes a medicine that has become internationally accepted to an extent unknown by any other medical system previously. Unfortunately, many other medicines are currently gaining international fame also, so ‘internationality’ is not necessarily a distinguishing feature.

‘Orthodox medicine’ seems to be favored by its users because the medicine in question is mainstream medicine in most countries in contrast to alternative or complementary therapies. The objection to ‘orthodox’ is that it implies a value judgment (the Greek word-root ‘orth’ means ‘right’, ‘correct’). The implication is that any other medicine is ‘unorthodox’, i.e. unconventional or new fangled. To Orientals, there is nothing unconventional about their own medical traditions.

‘Biomedicine’ is deemed appropriate for a medicine that is based on biological sciences; in other words, it is a name based on an internal feature of the medicine it denotes. The only possible objection is that the root ‘bio’, which simply means ‘life’, is not explicit enough. However, it is certainly no worse than the many theoretically ambiguous terms that abound in this medicine’s terminology, such as ‘cervicitis’ (which, contrary to what the term suggests, does not denote an inflammation of the neck).

‘Allopathic medicine’ is favored by some because the medicine in question, unlike other medicines in the West (notably homeopathy), treats disease by opposites. Unfortunately for this choice, one of the main alternative medicines on the scene at the present time is Chinese medicine, which is uncontestedly allopathic in nature. There is little argument to warrant the continuing use of this term.

One might wonder which is the best term. Medicines are often labeled by their origin, and hence Western medicine is a commonly used term in the world context. The fact that this medicine has been adopted by most countries as the arbiter of all health matters might accord it special status. However, the viable alternative terms for a medicine adopted by the whole world are politically loaded. The term ‘biomedicine’, hinting at origins in modern scientific understanding, seems viable in the global context. In Tái wān, it is interesting to note, the literal equivalent *shēng wù yī xué* seems to be catching on. Nevertheless, ‘modern Western medicine’ is a close second, since it is broadly accepted. ‘International medicine’ and ‘allopathic medicine’ have little to commend them and appear to be little used. ‘Orthodox medicine’ verges on the politically incorrect.

### Traditional, Complementary and Alternative Medicines

‘Complementary medicine’ is a generic term denoting medical practices considered by their proponents as worthy of complementing biomedicine.

‘Alternative medicine’ is a generic term denoting medical practices considered by their proponents as alternatives to

biomedicine. ‘Alternative medicine’ is virtually synonymous with ‘complementary medicine’, the only difference lying in the user’s attitude. Those who say ‘complementary’ accept biomedicine as being dominant; those who say ‘alternative’ implicitly assert a belief that their medicine is good enough on its own to serve health care needs. The abbreviation CAM, standing for complementary and alternative medicine, which overcomes the attitude problem, is now widely accepted and used. However, all three terms define the medicines they denote in relation to the dominance of biomedicine.

‘Traditional medicine’ denotes any medical tradition with a long history. Proponents of Oriental or East Asian medicine in East Asia prefer to refer to Oriental medicine in its various regional forms as traditional medicine rather than complementary or alternative since, to them, Oriental medicine is defined by its geographic origin, not in relation to a medicine that appeared relatively recently on the medical stage. Orientals do not conceive their medical traditions chiefly as complements or alternatives to biomedicines. They understand them as their own native traditions only recently challenged. In the global context, these sensibilities are important.

‘Herbology’ (or herbalism) is a term used to describe any form of medicine that uses botanical products in its treatments. The term ‘herbology’ is widely used in the West to refer to Chinese medicinal therapy and its use in this sense has gained World Health Organization (WHO) approval. There is, however, a strong objection to the use of herbology to designate any medicinal therapy that has animal and mineral amid its arsenal. Many Chinese herbologists loosely refer to gypsum, hematite, bat’s droppings, scorpion and earthworms as ‘herbs’, but this use is vehemently shunned by scholarly writers. WHO might be wise to resubmit this issue to debate.

If one is concerned to have a globally acceptable term, TCAM—traditional, complementary and alternative medicines—would be a good choice.

### East Asian (Oriental) Medicine

‘Oriental medicine’ is a generic term for the theory-based medicine that developed in ancient China and its variant forms that developed in China’s traditional cultural satellites (Korea, Japan and Vietnam). Some object that the term ‘Oriental’ is confusing, since it refers to a much wider region (Webster defines it as meaning the area south and east of the Himalayas, and including the Malay archipelago) that would include India, which has its own distinct medical traditions.

‘East Asian medicine’ is a term that has been suggested to replace ‘Oriental medicine’ (as defined above). It is uncontestedly a more precise term.

‘Chinese medicine’ is commonly used to denote the medicine of China that has also come to be called ‘Traditional Chinese Medicine’. The literal meaning of the term ‘Chinese medicine’ is identical to that of the term *zhōng yī*, which has been the standard term in China for this form of medicine since it was relegated to second place in Chinese health care following the rise of Western medicine to dominance. Although, for

most people, the term 'Chinese medicine' is easily associable with the medicine it denotes, there are two main objections to it. First, it is not the only medicine of what is now China. China also has Mongolian medicine, Tibetan medicine and other regional medicines. Usually, there is no confusion since those medicines are referred to by their names. What we call Chinese medicine is the classical theory-based medicine of the Hàn people, who are the most numerous ethnic group in the Chinese world. Secondly, even amongst the Hàn, this medicine is not the only medicine: there is also a strong tradition of local folk medicine based on empirical cures. Chinese folk medicine(s) are not entirely separate from classical Hàn medicine, since it has continually provided the latter with new drugs. There are also other traditions of healing such as shamanism and temple medicine, which survive on the island of Táiwān.

It is important to note that neither the Koreans nor the Japanese like their medicine to be referred to as 'Chinese medicine'. Their reaction is rather like that of a Mexican to the use of 'America' to refer to the USA or that of a Scotsman to the use of 'England' to refer to the United Kingdom of Great Britain and Northern Ireland.

'Traditional Chinese Medicine' (abbreviation TCM) is a term coined by Ma Kan-Wen in the 1950s. This term has been adopted as the official name of Chinese medicine in the People's Republic of China. There are nevertheless objections to the term, since the Chinese medicine taught and practiced nowadays has undergone considerable development over the 20th century and has been strongly influenced by Western medicine. For example, jaundice was viewed traditionally as being a spleen problem, but now, under the influence of Western medicine, it is explained in terms of the liver and gallbladder. However, it can also be argued that the word 'traditional' means 'of traditional origin'. One great advantage of the term TCM lies in its abilities to generate concise compound terms, such as 'TCM gynecology'.

'Kampo' is the Japanese name for Japan's variant form of Chinese medicinal therapy. It is the Japanese pronunciation of *hàn fāng*, Hàn formulas/remedies. Apparently no objections to this term exist.

A rational nomenclature would be (traditional) East Asian medicine, divided into (traditional) Hàn (or Chinese) medicine, (traditional) Japanese medicine (including Kampo) and (traditional) Korean medicine.

## Evidence-Based Medicine

Evidence-based medicine refers to any medical practice that is based on evidence to the scientific community. Biomedicine is the evidence-based medicine *par excellence*, because its theories and treatments are both evidence based. Traditional, complementary and alternative medicines rest on theory that lacks basis in evidence, even though they have had their own methods of asserting their effectiveness (e.g. the clinical empiricism of Oriental medicine and the 'provings' of homeopathy). The global influence of biomedicine, however, has imposed the most stringent and effective standards for the evaluation of treatments. Such evidence-based standards can be applied to medicines that previously did not have them.

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