



**Report from
Study Excursion to China
October 13-24, 2003**



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Report from Study Excursion to Beijing and Shanghai October 2003

Introduction

In 1999 Norway and China agreed on a Letter of Intent regarding cooperation within the field of health and medicine, and a three-year Plan of Action was signed when the Norwegian Minister of Health, Dagfinn Høybråten, visited China in October 2002. One of the areas incorporated in this plan is Traditional Chinese Medicine (TCM). NAFKAM (National Research Center in Complementary and Alternative Medicine) has been given the responsibility to administer this part of the cooperation.

In October 2003 a delegation of eight members (see attached list of participants) visited Beijing and Shanghai. The purpose was to visit educational institutions and hospitals in order to establish contact, learn about research activities, and consider possible projects of cooperation both within research and exchange of medical personnel, students and TCM practitioners.

The delegation consisted of people from the Directorate for Health and Social Affairs, the Universities in Oslo and Bergen, The Pain Clinic at Aker University Hospital, and NAFKAM. Two of the participants were Chinese, and this was useful for practical arrangements, translation and understanding of both cultures.

During our ten-days stay in Beijing and Shanghai we visited altogether four academic TCM institutions and four TCM hospitals. We were warmly welcomed in every place. We learned that our delegation shares research interests with many of the institutions that we visited, such as treatment of depression with acupuncture, TCM (both acupuncture and herbs) in the treatment of perimenopausal symptoms, drug dependency, diseases related to the urinary tract system, palliative treatment of cancer and also evidence based medicine. Two of the academic centres are building impressive databases on TCM. At present, knowledge of Chinese language is necessary to access the databases, but translation into English is in progress.

Jianping Liu planned most of the program, and we were privileged to benefit from his contacts in China. It was also of great help to have two native Chinese participants to help with guidance and translation during our trip.

Institutions visited

China Academy of Traditional Chinese Medicine

Date: October 15, 2003

Founded in 1955, the China Academy of Traditional Chinese Medicine has 11 institutes and 5 affiliated hospitals. It is a national institute for research, clinical medicine and medical training and education in TCM, under the Directorate of Health and the State Administration of Traditional Chinese Medicine (SATCM). There are eleven institutes and four affiliated hospitals (with a total of 1,800 beds) as well as the postgraduate department, the Publishing house of Ancient Chinese Medical Books, and the editorial board of the Journal of Traditional Chinese Medicine. There is also collaboration with the World Health Organization (WHO). The Academy has more than 3,000 professionals working there, and almost 900 are on the level of professor/associate professor. There are around 400 tutors for postgraduate students, and around 300 postgraduate students on training. Most of the students (after finishing their degrees) are assigned to other parts of the country.

Research projects cover basic theory research (meridians and mechanisms of acupuncture), clinical research and development of new herbal compounds.

Professor Zou Jianhua, Director of International Cooperation, received us and guided us through a hallway with a large statue of Zhang Zhong Jin, before we reached the meeting room decorated with expressive drawings of four of the holy medical figures from 1-2,000 years ago.

We received a warm welcome by the Vice-President Liang Jusheng who also gave us a brief introduction of the Academy.

The Academy holds the largest library of TCM in China with historical records going back to ancient times, and they have around 20,000 precious heritage records. We were able to see some of these at the Institute Museum where the Director of the Department of History, Liang Jun, gave us a tour. Some items were originals or copies from the large museum in The Forbidden City, others were collected from individuals. We saw some of the oldest acupuncture needles made out of bone, and others (more than 3,000 years old) made from gold and silver. There were medicines, seeds etc. excavated from tombs, ceramic cups for cupping, containers for food storage, etc.

We then met with Dr. Liu Baoyan, vice president of China Academy of TCM, he himself an acupuncturist. He attended the WFAS-symposium in Oslo last September, and he also told us that several years ago he spent some months doing clinical work in Bodø and Stavanger.

Mr. Liu gave an introduction to the Clinical Evaluation Centre established in 2001. The aim is to explore methods of clinical evaluation of traditional Chinese medicine. One major research area is 'sub health state' – to be able to identify a syndrome of pre-clinical stage within TCM and to establish diagnostic criteria for this condition.

Another focus is to explore different ways of establishing evaluation systems for individualized treatments in TCM. One idea is to establish criteria, guidelines, and diagnosis for various conditions. Mr. Liu stressed that one major characteristic of TCM is to individualize the treatment of each patient. If this is lost, it is no longer TCM.

The institute is running a multi centre study on SARS including 11 institutions. During the SARS epidemic, information was registered electronically (standardized form with individualization) by eleven centres in Beijing. This institute established a database ensuring the quality and validity of the data being collected. Statisticians from Beijing University and others were invited to explore individualized data.

Sameline Grimsgaard then gave an introduction of NAFKAM and our delegation. After the introduction Dr. Liu commented that there were many common interests, the two major areas being acupuncture and methodology for clinical evaluation.

Vice Director Cui Meng showed us the database they are setting up (cintcm.com). The English version has around 500 titles, the Chinese one over 10 000 (containing information on conditions, prescriptions, etc).

All databases may be accessed for a fee of 2 000 USD per year.



From the visit at China Academy of Traditional Chinese Medicine. From the left: Brit J. Drageset, Vinjar Fønnebø, He Dong, Vegard Nore, Vice President Liang Jusheng, Terje Alræk, Professor Zou Jianhua, Aksel Bilicz, and Jinaping Liu.

**Beijing University of Traditional Chinese Medicine,
College of Acupuncture and Moxibustion**

Date: October 15, 2003

The Beijing University of Traditional Chinese Medicine (BUTCM) was founded in 1956. The number of students is presently around 15,000, of which 800 are foreign students. The staff counts around 2,500 members, among whom around 650 are professors and research fellows.

The University is part of a project where the Ministry of Education has chosen 100 universities that are to be developed as “key” universities. The BUTCM has cooperative relationship with more than 40 institutions and academic organizations of 16 countries and regions.

The College of Acupuncture and Moxibustion has about 700 students. Last year there were 134 foreign students, 75% from South-East Asia (focusing on herbal medicine) and 25% from Europe and USA (focusing on acupuncture). The students do voluntary work (community service) under guidance of teachers.

Vice president, Dr. Xu Xiao, welcomed us on behalf of President Sheng Souzeng. Present were also Professor Zhu Jiang (Dean), Professor Zhang Lufen (Director of Laboratory) and Professor Zhang Liping (Vice-director of International Cooperation Department).

When asked about licensing procedures in China, they explained that all medical students, both within western medicine and TCM, need to pass a standard, national examination. Students of TCM spend about 40% of their time learning western medicine. Students of western medicine spend about 20% of their time on TCM. The national exam is the same for all, but it states the major for each student.

Most of the teachers also practice as therapists, and many foreign patients come to the school to receive treatments. Teachers are being sent to about 25 countries to teach, give lectures, do clinical work, and attend conferences. Up until now this College has had no exchange with Norway or Scandinavia, and they expressed the wish to start now.

Research is being carried out on acupuncture treatments, techniques of acupuncture and moxibustion, mechanism of moxibustion, mechanism of regulation of immunity, pain relief, etc.

After the delegation had been introduced, we visited two wonderful museums. The first one, a museum of history, contained some items similar to the one we visited at the CATCM.

The second one was a museum of herbal medicine including plants, minerals, corals and animals, with different sections according to TCM theory.

The visit at the BUTCM was ended with a 20 minute sharing and discussion to find possible areas for collaboration.

Their situation in general is that the government supports experimental research (on animals), and some clinical research also receives support. Some of their projects (most of them ongoing) are:

Labour (reduce pain and shorten time of labour)

Treatment of menopause syndrome

Treatment of frozen shoulder

Urine retention after surgery

Prevention of cold (moxibustion)

Allergic rhinitis (electro acupuncture)

Poor digestion in infants

Poor eye sight (myopia)

Neck and shoulder pains

High blood cholesterol

There is also a research group working with western doctors on depression.

At present most research is done according to methodology of evidence based medicine.

Double blinding is difficult in acupuncture. Sham is difficult because most people in China have experience with acupuncture. There are usually three groups, 40 persons in each, at three different centres (120 per arm).

Professor Zhu expressed a great interest in cooperation on the menopause study and also in an exchange of students on different levels and an exchange of practitioners. She suggested that both sides propose next steps and how to go forward with this. She will assign a key contact person.



The Norwegian delegation together with professors at Beijing University of Traditional Chinese Medicine

China-Japan Friendship Hospital

Date: October 16, 2003

The hospital was opened in 1984 as a joint effort between the Japanese and Chinese governments, and financed by Japan. After that first investment, the Chinese are now responsible for running the hospital. It is a large general hospital with 1,300 beds (400 TCM, 900 western medicine). The staff counts over 3,000. The hospital has 61 medical and technical divisions which provide medical services to more than 3,000 outpatients and emergency patients every day, as well as over 20,000 inpatients each year.

During the SARS outbreak the hospital was chosen by the authorities to be the main hospital for receiving SARS patients, and all together 250 patients were referred there. During the outbreak the police closed off the whole area and the main building was used for the SARS patients. Some of the staff had to stay within the area for a couple of months. Eight staff members were infected during SARS, but none of them died.

The last SARS patient left in July. After three months of using disinfectants, the main building was destroyed and a full remodelling was started. When we were there, they expected to finish within the next couple of weeks.

Representatives of IOC have inspected the hospital, and it has been approved as the main hospital for the Olympic Games in 2008.

The China-Japan Friendship Hospital was visited by Mr. Dagfinn Høybråten and his delegation during the fall of 2002, and is mentioned in the Plan of Action as one of our partners of cooperation.

During the planning of our trip to China, the China-Japan Friendship Hospital offered to make arrangements for us, and they found a hotel centrally located and also arranged for sightseeing during the weekend.

Mr. Wang Zelin, Program Manager of Healthcare International Relations, picked us up at the hotel and brought us to the hospital where we met his superior, Dr. Yin, Director of the Department of Foreign Affairs.

We enjoyed a delicious lunch at a hospital restaurant before meeting Professor Shi Zaixiang, Head of TCM medicine in general and Director of TCM heart-kidney department, Professor Tong Xiao Lin, Head of TCM Diabetes, and Professor Yan Xiaoping, Head of TCM Geriatrics.

All patients are first diagnosed according to western medicine. It is a policy that the patients may choose to be treated according to western medicine or TCM. A third choice is to receive integrated medicine.

There was a discussion about integrated medicine and the meaning of the term. Dr. Yan stated that real integration is not a TCM doctor using penicillin or a western doctor using herbs, but using a combination of both theories to get better results.

Another concept mentioned was wholeness (holistic approach) – treating the whole body and not just the part that is hurting. TCM may be used in a preventive way. Most western doctors who recommend herbal treatments in the early stages, do this to avoid side effects of (western) medication.

A focus on safety and security was stressed. This applies also to integrated medicine.

Some suggestions for cooperation and exchange that came up:

- Exchange of scholars. Norwegian doctors coming there will not be able to work independently, but may follow a doctor and work with him/her. The same is the case in Norway.
- Open a TCM centre in Norway or identify a hospital department with an interest in TCM, and work with diseases where the western medicine approach provides limited results. One possibility is to focus on one disease and invite Chinese specialists for practicing and teaching purposes.
- Create a system for telemedicine and contact with CJFH in special cases. This is feasible with a translator, and is already taking place between CJFH and Japan and Australia.
- Encourage medical agencies to take part in the exchange.
- Some research is easier to do in Norway since more people here are acupuncture naïve.



Dr. Jianping Liu together with Mr. Yin Yongtie and Mr. Wang Zelin during lunch at the China-Japan Friendship Hospital

Xi Yuan Hospital (affiliated hospital of CATCM)

Date: October 17, 2003

The Xi Yuan Hospital was established in 1955 as the first large TCM hospital set up by the government of People's Republic of China.

It is part of International Collaborating Centre for Traditional Medicine of the World Health Organization (WHO). Along with 44 clinical departments the hospital includes different centres, and the Editorial Board of Chinese Journal of Integrated Traditional and Western Medicine is also situated there. The hospital has 900 staff members, 600 beds and more than 2,000 outpatients are treated every day.

We were welcomed by He Liang Zhi, director of Administration/Foreign Affairs Department, and also met Professor of oncology, Dr. Yang Yufei, and staff from the office of Chinese Journal of Integrative Medicine.

The treatments given at the hospital depend on the disease. The Doctors are trained both in TCM and western medicine, and even though all the wards are TCM wards, western medicine will be added if needed. Some of the conditions treated only with TCM: stroke convalescence, arthritis, chronic rheumatic disease, and advanced stages of cancer where surgery is not recommended. It happens some times that patients cannot be treated there and are sent to a western hospital, but more often Xi Yuan receives patients referred from western hospitals.

For cancer patients, herbal medicine and medicinal food supplements are used to improve quality of life by relieving pain, severe anaemia, nausea and fatigue. Qigong is sometimes used in treatment of breast cancer. When asked about the difference between qigong and taiji, they answered that taiji is used for prevention while qigong is used for medical treatment.

As we were entering the localities for the Chinese Journal, we ran into a delegation from Australia with Alan Bensoussan who some of us had met at the WFAS symposium in Oslo in September.

The journal has a Chinese version that is published monthly, and an English version, which is published quarterly. It is possible to get a full text electronic version.

When asked how the journal defines integrative medicine, the answer was, "The use of modern scientific ways to research traditional medicine."

We were also able to visit the oncology department. Patients who come there do so either of their own choice or because treatment in western hospitals brought no or poor results. The focus is to support healthy elements and eliminate evil elements by the use of herbs, external herbs (plasters), injections, diet/food and music therapy.

In the early stages of the cancer chemotherapy is used along with TCM to increase efficacy. For patients in the advanced stages the weak ones receive palliative treatment with TCM, and the strong ones receive standard chemo-therapy along with TCM.

The music therapy is a pilot project to relieve depression. The patient listens to music (composed especially for this), at the same time as needles in two acupuncture points are connected to the music giving rhythmic electro stimulation.

Food therapy is given between meals, fruit juices and herbal extracts after breakfast, and rice with herbal extracts after lunch.

They explained that nausea/vomiting and fatigue, which is frequent among Norwegian patients with advanced stages of cancer, is being effectively relieved by herbs. We also

observed patients with advanced stages of cancer, whose general condition was remarkably good.

It is difficult for them to do randomised trials (because people are familiar with acupuncture), and when asked, they expressed interest in being expertise for randomised trials in Norway. It is also possible to exchange practitioners.

One of the members of our delegation expressed interest in consulting a TCM doctor on a particular condition. A doctor was invited to do the diagnosing (tongue and pulses) and prescribe treatment. Afterwards they joined us for a particularly well tasting lunch (including yin-yang soup).



Vinjar Fønnebo receives a demonstration of the music therapy offered at Xi Yuan Hospital.

Guang An Men Hospital (GAM)

Date: October 17, 2003

The Guang An Men Hospital was founded in 1955 along with the China Academy of TCM, and is today one of WHO's collaborating Centres for Traditional Medicine. There are all together 26 clinical departments and both Western medicine and TCM is being offered. The number of beds is 580 and every day 3,000 outpatients are seen, out of which 60-70 receive acupuncture treatments.

The Hospital's Vice President welcomed us and told us that we were the first official foreign visitors after SIRS. During a visit at the acupuncture outpatient clinic we saw flame needling and cupping (with and without punctuation/bleeding). We were told that the initial consultation is quite brief with very little communication between patient and doctor. The patient expects the doctor to understand what the problem is, even though very little is being said. The patients carry their patient records themselves to keep track of the treatments.

The hospital receives governmental support, and a new building for scientific research is being planned. Their focus for clinical research is cancer, the use of herbal medicine against toxicity of western medicine, aiming at prolonging life and improvement of quality of life and also improvement of self-immune ability. Most of the cancer patients have been transferred from western (medicine) hospitals. They also collaborate with Japan on a project studying the effect of qigong on diabetes.

Besides two pharmacies (for inpatients and outpatients respectively) that provide western drugs, the hospital has one Raw Herbs Pharmacy with more than 1,000 herbs, around half of which are commonly used.



Patient receiving cupping at the outpatient clinic at Guang An Men Hospital

Peking University, Institute of Mental Health

Date: October 20, 2003

The Institute of Mental Health of Peking University is responsible for medical service, professional training and scientific research in the fields of psychiatry and mental health. It is the WHO Mental Health Collaborating Center for Research and Training in Beijing.

The Institute has nine different departments including occupational and recreational centres.

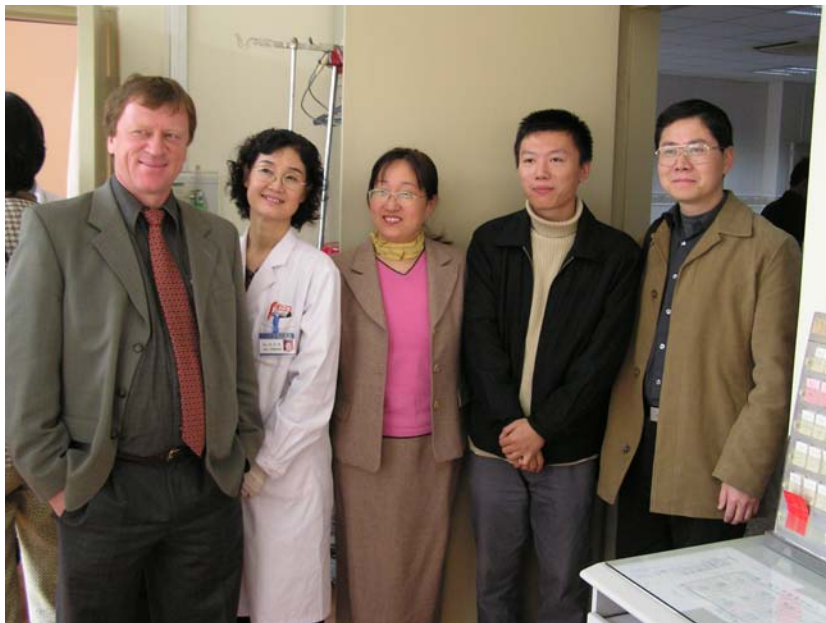
Professor Dongfeng Zhou welcomed us together with two young postgraduate doctors, and a consultation took place before we visited the outpatient TCM-clinic where Professor Luo is the director.

A special technique has been developed to treat major depression with TCM (electro acupuncture). It seems to give the same effects as new drugs – with fewer side effects. The voltage used is individual. It is possible to give electroacupuncture without penetration. The voltage should then be increased by one third. Standard treatment period is five days a week for 6 weeks. Patients from outside Beijing sometimes receive two treatments per day.

They have had ongoing research on depression for 20 years, with publications both in China and abroad where effect is confirmed. They have also been able to show effect on treating anxiety, but treatment of schizophrenia shows poor effect. There is also research being done to uncover the mechanisms of electro acupuncture.

They were interested in collaborating with Norway, and a possible project is to look at reduction of conventional medication dosage with the use of electro acupuncture.

Before going back to the hotel, we stopped at a medical book-store. Most of the literature was in Chinese, but there were also some interesting pieces for those of us who do not speak Chinese.



At the outpatient clinic of Peking University, Institute of Mental Health.

Shanghai University of Traditional Chinese Medicine.

Date: October 21, 2003

The Shanghai University of Traditional Chinese Medicine (SUTCM) was founded in 1916 and reopened in 1956 after having been closed since the 1940s. The University was appointed by the World Health Organization to found the Collaborating Centre of Traditional Medicine and the International Acupuncture Training Center in 1983, to train physicians from all over the world. In 1985, SUTCM founded Shanghai Academy of Traditional Chinese Medicine. With staff of more than 4,400, SUTCM operates ten research institutes including herbal medicine, qigong, acupuncture and medical massage. It has four hospitals on (old) site and twenty affiliated hospitals for internship.

There are approximately 4,000 undergraduate students, 300 of which are foreigners, and around 20 foreign students enrolled in the postgraduate programs.

In the fall of 2003, the University relocated to an impressive new campus situated in the high-tech Zhangjiang district in Pudong. The government of Shanghai has invested 10 million renminbi (close to 9 billion NOK) in the new campus, which has 150,000 square meters of floorage.

We were given a tour of the new campus by Medical Master Laura Guo, and during lunch Vice President Liu Ping gave an orientation.

New research facilities include thirteen laboratories controlled by a central lab equipped with modern technology, where work is initiated by researchers and not by pharmaceutical industry.

A new database is being developed, based on the original database, with extended search functions and an improved organization of the database.

There are two parts in the database: ancient TCM literature and TCM journals.

The web page for ordering searches in Chinese is: <http://shtcm.com.cn>

The government of Shanghai attaches importance to the TCM evaluation for several popular therapeutic procedures in clinical use, and several projects are initiated by government funding.

Their research interests are mainly in three areas:

Basic research (modern scientific methods), applied research (Chinese herbs, standardization), and acupuncture and meridian research (mechanisms).

One area of clinical research is the use of acupuncture for female incontinence syndrome (elderly and after childbirth). Dr Zhang, director of the scientific department of SUTCM, talked about a study to find a better method of treating problems with bladder and prostate functions using acupuncture. Present research is on points, dosage of stimulation and the use of electro-acupuncture. They would like to find a standardized treatment for incontinence to make it easier to treat this all over China and also the rest of the world.

Another research area is drug abuse. Acupuncture is helpful in relieving symptoms, and herbs will help prevent the use (of drugs) again. This is a project in cooperation with police and government. It is difficult to follow this up, since using drugs a second time is a crime in China.

In 1980 research was started on hyperactivity of the thyroid gland using PTU (drug to lower hyperactivity of the thyroid) and acupuncture, and they found that the combination was more effective than the drug alone. Their conclusion was that small amounts of PTU with acupuncture gave the same results as normal dosages of PTU, and side effects and allergic reactions were avoided.

Evidence based research was established two years ago, and Jianping Liu is involved in this work.



Students practicing taiji at the new premises of Shanghai University of TCM.

Shu Guang Hospital

October 21, 2003

The Shu Guang Hospital is an affiliated hospital of Shanghai University of Traditional Chinese Medicine. It offers both western medicine and TCM.

The hospital has 13 wards with all together 600 beds. There is also a TCM tele-satellite consultation center. Each year the hospital receives 800,000 outpatients and 8,000 inpatients.

New facilities for the Shu Guang hospital are being built next to the new university campus in Pudong. A rehabilitation centre will also be established, using herbs and acupuncture.

We gathered in the meeting room and were warmly welcomed by Vice President Yuan Zin who invited to discussions about different topics. After the morning discussions when the research interests of the members of our delegation became known, several doctors working within the same fields had been invited to meet with us. They each presented their work. Within gynaecology mainly herbs are being used to treat menopausal problems; acupuncture to alleviate depression; in diabetes Chinese herbs are widely used.

When our visit at Shu Guang was supposed to end, we were invited to dinner and also to visit the acupuncture department the next day.

October 22, 2003

On our tour at the hospital the next day we visited both hospital wards and outpatient clinics. We met stroke patients and patients with various conditions such as spinal chord lesions, stroke and various painful conditions (among others).



From our visit at the Shu Guang Hospital.

Practical implications when planning future visits and research projects in China

- State intention and what is wanted (what to see, who to meet, etc.).
- Send background information about the participants to places to be visited.
- It is important to have a translator in China who understands the medical language
- It is advantageous with a person who understands both cultures.
- It will be beneficial to have more time for each place if similar visits are planned.
- Contact with Chinese health authorities (SATCM and Department of Health) will be ensured by the Norwegian Directorate for Health and Social Affairs.
- When preparing collaborative research, an agreement should be signed by both sides indicating contributions, responsibility, and sharing of research results, plus a protocol (objectives, budgets, duration, participants, outputs, etc), and project must get ethical approval from relevant committees and governmental bodies in China and Norway.

Practical implications when planning exchange projects between Norway and China

- Exchange projects will need an agreement between the involved parties stating objectives, responsibility, contributions and the sharing of expenses.
- One important point will be to clarify the payment for Chinese coming to stay in Norway.
- Chinese coming to stay in Norway must speak and communicate in English.

Summary and conclusion

The ten days trip to Beijing and Shanghai was very useful. It proved to be more comprehensive than we expected, which is largely due to the contributions of the Chinese participants in our delegation (Jianping Liu and He Dong).

The next steps in the China-Norway collaboration on TCM, will be to state expectations and intentions of both future research and exchange (of TCM-therapists, researchers and health care personnel) between Norway and China. Furthermore, it will be necessary to prioritise among possible projects. As a first step, a workshop on the China Norway collaboration on TCM will be held in Oslo Friday January 30th 2004.

Research projects

In the China-Norway collaboration on TCM, the strengths of the Norwegian partner are our knowledge in research methodology and the interdisciplinary collaboration between TCM therapists, researchers and clinicians within western medicine. This can be passed on through relevant collaborative and exchange projects between researchers in the two countries. Areas of interest are treatment of depression with acupuncture, TCM (both acupuncture and herbs) in the treatment of perimenopausal symptoms, drug dependency, diseases related to the urinary tract system, palliative treatment of cancer. Dissemination of research by the use of Chinese databases and evidence-based medicine is an important area.

Exchange projects

The strengths of the Chinese partner are their great knowledge and skills in both TCM and the integration of TCM and western medicine. As a first step we propose to set up an exchange between China and the Norwegian hospitals that are currently integrating TCM and western medicine. A second strategy is to explore the interest among Norwegian clinicians to investigate the possible contribution of TCM in certain diseases where western medicine provide limited results, e.g. palliative treatment of cancer and certain inflammatory diseases.

Appendix A

Participants Norwegian Delegation

- Vegard Nore, Adviser, Directorate for Health and Social Affairs.
- Sameline Grimsgaard, MD, MPH, PhD, Director of the China Norway collaboration in TCM, NAFKAM
- Vinjar Fønnebø, Professor and director, NAFKAM
- He Dong, Research Fellow and acupuncturist, University of Oslo
- Jianping Liu, MD, PhD, Professor II (based in Liverpool, UK) NAFKAM
- Terje Alraek, Research Fellow and acupuncturist, University of Bergen,
- John Aksel Bilicz, Nurse Anaesthetist and acupuncturist, Manager of Pain Clinic, Department of Anaesthesia, Aker University Hospital
- Brit J. Drageset, Coordinator of the China Norway collaboration in TCM, NAFKAM

Appendix B

List of Gifts

Given

- 8 books about Norway
- 1 book: Northern Lights over Tromsø
- 2 Moose (pewter figures)
- 2 viking boats (pewter figures)
- 2 mother and child polar bear figures
- 1 glass polar bear figure

Received

- One platter with image of an old master
- “United as One in Fighting SARS” (special folder) for each participant
- Glass decoration with a map of China showing the location of 100 hospitals participating in a specific project, for each participant.

Appendix C

Program and schedule

Day	Time	Place	Content
13/10 (Mon)		Oslo to Beijing	Through Amsterdam
14/10 (Tue)		Arrive Beijing	Jet lag adjustment and group meeting Hotel (*)
15/10 (Wed)	9.00-12.00	Chinese Academy of TCM	1) Introduction to the academy; 2) Visit Institute of Intelligence and Literature, introduction to the databases; 3) Visit TCM Historical Museum; 4) Discussing TCM clinical evaluation and methodology issues 5) Others
	14.00-17.00	Beijing University of TCM College of Acupuncture	1) Introduction to the university; (15-20') 2) Introduction to the college; (15-20') 3) Visit TCM Museum (20-30') 4) Visit Chinese medicine Museum (20-30') 5) Discussion
16/10 (Thur)		Sino-Japanese Friendship Hospital	1) Introduction to the hospital; 2) Visit different departments 3) (After lunch) Discussions re. cooperation 4) Evening Banquet
17/10 (Fri)	9.00-12.00	Xi Yuan Hospital	1) Introduction to the hospital; 2) Visit one clinical department; 3) Visit editorial office of a TCM journal; 4) Discussion
	14.00-16.30	Guang An Men Hospital	1) Introduction to the hospital; 2) Visit acupuncture department; 3) Discussion
18/10 (Sat)		Weekend	Forbidden City, Tian An Men Square, Heaven Park
19/10 (Sun)		Weekend	Great Wall and city shopping
20/10 (Mon)	All day	Mental Health Institute, Beijing University	Depression and anxiety (integration of Traditional and Western Medicine)
	Evening	Fly to Shanghai	Stay in Shanghai (Hotel)
21/10 (Tue)	All day	Shanghai University of TCM (new campus)	1) Introduction to the university; 2) Visit EBM Centre for TCM and Intelligence Literature Institute; 3) Discussion; 4) Visit one affiliated hospital
22/10 (Wed)		Others	
23/10 (Thur)		Others	
24/10 (Fri)		Leave from Shanghai to Oslo	