World Federation of Chinese Medicine Societies
The Sixth Meeting of The Third Council and
The Fifth Meeting of The Third Board of Supervisors

Conference Handbook

St. Petersburg* Russia
2014.10.2
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会议日程
2014年10月2日

主持人：李振吉副主席兼秘书长
08:30 09:00 会场参会登记，领取理事会会议手册

Ⅰ 秘书处工作报告

<table>
<thead>
<tr>
<th>时间</th>
<th>内容</th>
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<tbody>
<tr>
<td>09:00-09:15</td>
<td>余浩主席：世界中联理事会工作报告</td>
</tr>
<tr>
<td>09:15-09:35</td>
<td>黄健军副秘书长：讨论通过第三届理事会成员增补名单</td>
</tr>
<tr>
<td>09:35-09:45</td>
<td>李桂华常务理事：讨论通过《中医基本名词术语中俄对照国际标准》</td>
</tr>
<tr>
<td>09:45-09:55</td>
<td>邓建华主任：讨论通过《国际中医药学科体系类目》</td>
</tr>
<tr>
<td>09:55-10:05</td>
<td>邓跃先副主任：讨论通过《国际中医医师测试与评审规范》</td>
</tr>
<tr>
<td>10:05-10:10</td>
<td>邓建华主任：讨论通过《世界中联关于贯彻落实世界卫生组织传统医学战略(2014-2023)的决定》</td>
</tr>
<tr>
<td>10:10-10:15</td>
<td>邓辉副主任：关于世界中联2014年新增团体会员和热心公益会员的通告</td>
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Ⅱ 理事会成员专题报告

<table>
<thead>
<tr>
<th>时间</th>
<th>内容</th>
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<tbody>
<tr>
<td>10:15-10:25</td>
<td>拉蒙监事会主席(西班牙)：促进拉丁美洲国家的法规建设和提高其中医与针灸的质量</td>
</tr>
<tr>
<td>10:25-10:35</td>
<td>谢万纳副主席(意大利)：中医在西方国家传播的问题与建议</td>
</tr>
<tr>
<td>10:35-10:45</td>
<td>沈满生主席团执委(法国)：中医在西方医学和社会中的地位</td>
</tr>
<tr>
<td>10:45-10:55</td>
<td>沈佩德主席团执委(新西兰)：如何与会员所在国的卫生部门建立联系，推动中医药的发展</td>
</tr>
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Ⅲ 交流讨论

<table>
<thead>
<tr>
<th>时间</th>
<th>内容</th>
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</thead>
</table>
| 10:55-12:00 | 1. 结合各国中医药发展的现状，研讨世界中联工作重点和工作方向，并对秘书处工作提出意见和建议。
          2. 李振吉副主席兼秘书长总结发言                           |

会议结束
AGENDA
October 2nd, 2014

Emcee: Mr. Li Zhenji, vice-chairperson and the secretary-general of WFCMS

08:30-09:00 Registration and taking handbooks of the meeting

I Work reports by the secretariat

<table>
<thead>
<tr>
<th>Time</th>
<th>Speaker/Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:00-09:15</td>
<td>Ms. She Jing, the chairperson of the Council: The Work Report of the Secretariat</td>
</tr>
<tr>
<td>09:15-09:35</td>
<td>Mr. Huang Jianxin, vice secretory-general: to discuss and approve the List of Supplemented Members for the Third Council</td>
</tr>
<tr>
<td>09:35-09:45</td>
<td>Mr. Li Quilin, the standing member of the Council: to discuss and approve International Standard Chinese-Russian Basic Nomenclature of Chinese Medicine</td>
</tr>
<tr>
<td>09:45-09:55</td>
<td>Ms. Zou Jianhua, the director of WFCMS: to discuss and approve The International Catalogue of Chinese Medicine Discipline</td>
</tr>
<tr>
<td>09:55-10:05</td>
<td>Ms. Zheng Yuexian, the director of WFCMS: to discuss and approve Test and Assessment Protocol of International Chinese Medicine Doctors</td>
</tr>
<tr>
<td>10:05-10:10</td>
<td>Ms. Zou Jianhua, the director of WFCMS: to discuss and approve WFCMS Resolution on the Implementation of the World Health Organization Traditional Medicine Strategy (2014-2024)</td>
</tr>
<tr>
<td>10:10-10:15</td>
<td>Ms. Qiu Jun, vice director of WFCMS: to announce the new society members and public spirited members of WFCMS for 2014</td>
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II Special reports by members of the Council and the Board of Supervisors

<table>
<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>10:15-10:25</td>
<td>Mr. Ramon (Spain), the chairperson of the Board of Supervisors: Project of European Foundation of TCM to promote the regulation and raise the quality of acupuncture and Chinese Medicine in Latin American countries</td>
</tr>
<tr>
<td>10:25-10:35</td>
<td>Mr. Giovanardi (Italy), vice-chairperson of the Council: Obstacles for the diffusion of TCM in Western countries; reflections and proposals</td>
</tr>
<tr>
<td>10:35-10:45</td>
<td>Ms. Zhu Miansheng (France), executive member of the presidium: The Role of Chinese Medicine in Western Medicine and Society</td>
</tr>
<tr>
<td>10:45-10:55</td>
<td>Mr. Cui Pengde (New Zealand), executive member of the presidium: How to establish relationship with administrations of health in the countries of members for the development of TCM</td>
</tr>
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</table>

III Discussions

1. To discuss the focus and direction of the work of WFCMS in the future in consideration of the status quo of the development of TCM in each country, and to raise opinions and advices to the work of the secretariat.

2. To summarize the meeting by Mr. Li Zhenji, vice-chairperson and the secretary-general of WFCMS

The end of the meeting
世界中联第三届第六次理事会与第五次监事会会议工作报告

俄罗斯 圣彼得堡

余国

2014.10.2

各位理事，各位监事：

今天，我们召开世界中医药学会联合会第三届第六次理事会与第五次监事会会议。在此，谨对与会的各位理事，监事会主席，监事会副主席，监事会常委，监事和各位嘉宾表示热烈的欢迎！

一年来，在理事会的领导下，在广大会员的积极支持下，在秘书处全体员工的努力下，各项工作都取得了新的进展。现报告如下：

一、总结经验认真规划未来

去年正值世界中联成立十周年，我会组织多项活动，包括举办征文比赛，书画展览，开展学术交流，发表纪念文章。制作宣传片《光辉的历程》，编辑出版《共筑十年》，《中国十年》等，回顾中联发展历程，总结经验，找出不足，认真分析了中医药发展趋势，认清面临的机遇与挑战。研究了应对的策略和措施，组织制定了《世界中联发展规划》，并通过理事会审议，进一步明确了社会的发展方向。2013年10月30日，我会在北京国际会议中心召开“总结过去，规划未来”为主题的“世界中联成立十周年座谈会”。来自世界中联的全国高等医药学府，中医院校，中国中医药管理局，中国国家认证认可委员会，中国标准化委员会和有关领导，以及来自中国，美国，加拿大，英国，日本，西班牙，韩国，法国，德国等内外会员代表180人参加了会议。与会各方对世界中联成立十年表示祝贺，高度评价了世界中联十年来取得的成就，总结了过去十年的经验，对世界中联今后发展方向提出了建议。国家中医药管理局医药局陈麻局长对未来发展提供了具体方案。会议产生了积极影响，会后多家媒体进行了报道。

二、加强组织体系建设

为了体现规范性，增强凝聚力，我会努力加强组织体系建设，初步形成了“一体两翼”的组织架构

1. 一体：不断扩大

一年来我会发展了50家团体，2名个人入会。截止到2014年9月底，我会已拥有56个国家和地区的239个团体会员，6名个人会员。

我会于2014年10月22日召开了第三届第五次理事会和第五次监事会会议。会议总结了中联十年的经验，分析了中医药发展趋势，明确了今后十年发展战略。讨论通过了《世界中联成立十周年回顾》，《中国中联组织发展规划》，《中国中联发展规划》和《中国中联组织建设与任务》。《世界中联发展规划》（四稿）文件，审议通过了《中国中联临床研究伦理审查评估标准》。研究了2014年第21届世界中医药大会的筹备工作，顺利完成了预备任务。

由世界中联会员，理事会，监事会，高级专家顾问委员会，工作咨询委员会组成的世界中联的组织结构不断完善。

2. 专业委员会建设快速发展

一年来新媒体领域内新增成员2名，中医院校，方药与药物研究，中医健康管理等13个专业委员会，其中中医院校领域内2个，药物与药物研究，中医传统知识保护研究，中医院校，中医院校，中医院校。7个专业委员会召开了成立大会。至此，我会正式注册的20个专业委员会有73个，新增成员2709人。

去年完成了心血管病，糖尿病，肿瘤，糖尿病，中风等7个专业委员会的换届工作。新增会员1025人。第3任理事会中高级职称人员增多，年轻学术骨干力量增强，高级理事增加，为各学科的发展和建设创造了有利条件。多数专业委员会成立组织本学科，专业的学术研讨，技术交流，人才培养等活动。

2014 年的专业（工作）委员会会议在170人参加。与会代表认真总结，交流经验，具有
世界中医药学会联合会
第三届第六次理事会与第五次监事会会议

43 个专业委员会发布了年度学术评估报告，对本学科专业学术进展、热点问题进行评估，体现了各专业委员会“引领中医药学术发展、推动科技进步”的积极作用。会议审议了 2012-2013 年专业（工作）委员会工作情况报告和年度工作计划。有 27 个专业（工作）委员会受到表彰，由学术领域专家组成的
专业（工作）委员会网络作为世界中医药组织的重要一翼在迅速发展，它是推动学术建设，促进学术进步，加强学术交流的基地。

4. 中医药国际联络建设已经起步

为促进中医药产品、技术和设备国际推广，充实国际中医药服务内容，促进中医药国际联盟，整合资源，推动中医药技术、产品、设备以提高服务可及性，满足社会需求，推动
中医药国际发展。2014 年 5 月，世界中医药国际联盟在韩国首尔隆重举行，该联盟以推广中医药文化为初心，开展外交活动和学术交流。目前取得了积极的效果。

由相关学术研究机构的专家、技术人员组成的中医药国际联络作为世界中医药组织的重要一翼正在迅速发展，它是中医药技术、产品、设备推广交流的基地。

三、积极开展国际学术交流活动

近年来，我会继续组织国际学术会议交流平台，组织召开各类国际会议 37 次，其中世界中医药大会 4 次，区域性国际会议 3 次，专业性学术会议 33 次，累计收到论文 2400 余篇，与会人数达 8000 余人。

1. 成功召开世界中医药大会

第十届世界中医药大会在世界中医药学会成立十周年庆典于 2013 年 9 月 21-22 日在泰国举办的泰国中医药发展研讨会上举行。来自世界各地的中医药专家学者齐集国际大会，彰显了中医药的国际影响力。大会主题是“探索世界中医药发展新路径”。大会主题演讲吸引了 1200 余人参与，大会学术交流活动覆盖了中医药的各个领域，包括中医药国际、中医药教育、中医药文化等领域。大会还设置了中医药国际合作论坛，中医药企业交流平台，中医药产品展示等，进一步推动了中医药的国际交流与合作。

2. 国际区域性和学术交流

2013 年 10 月，“第一届国际中医药技术研讨会”在泰国举办，论坛由中国北京中医药大学、泰国中医药大学主办，大会主题是：促进中医药技术的国际交流与合作。来自泰国、马来西亚、印度尼西亚等十多个国家的 400 多位专家学者围绕中医药技术、中医药文化、中医药产业发展等多个议题进行交流，有助于推动中医药的国际化进程。

2014 年 3 月，“世界中医药学会联盟学术会议”在泰国举办，大会主题是：促进中医药技术的国际交流与合作。来自泰国、马来西亚、印度尼西亚等十多个国家的 400 多位专家学者围绕中医药技术、中医药文化、中医药产业发展等多个议题进行交流，有助于推动中医药的国际化进程。
世界中医药学会联合会

第六次国际中医药大会

四、推动中医药国际标准化建设

新的一年，面对严峻形势，继续发挥国际学术组织的资源优势，积极开展中医药国际标准化研究，制定、推广使用。

1. 建立3部专业委员会技术标准

努力推进专业委员会技术标准建设。目前，已有2处标准委员会通过了《中药临床研究技术要求》的审查，3处标准委员会通过了《中药临床研究技术要求》的审查。下一步，我们将继续推动专业委员会技术标准的制定和推广，为中医药国际标准化建设贡献力量。

2. 建立1部国际委员会技术标准

我会于2012年11月12日发布了《中国中医药临床研究技术要求》。作为专业委员会的技术标准，它将对中医药临床研究技术要求进行规范，提升中医药临床研究的技术水平。
世界中医药学会联合会
第三届第六次理事会与第五次监事会会议

时，与会人员近350余人。与上年同期相比，人数有所增加。今年共实施4期评审，共21人获选为中医药专业评委，参加高级职称评审的人员来自美国、英国、新西兰、新加坡、西班牙、匈牙利等国家。与上一年同期相比，评审人数也呈现了增加的趋势。

2. 建立“世界中医药云学堂”

为了给国际中医药从业人员学习专业技术提供方便，我会组建了国际中医药网络教育综合服务平台—“世界中医药云学堂”。目前，已与中国江苏汇通网络科技有限公司签订了技术转让合同，完成了版块设置，页面设计搭建网站的平台初步建设，初步上传了44个课程，包括中医药国际交流相关内容，临床医疗实践课程和中医药食疗课程。

3. 组织国际名师带高徒

去年6月我会通过了《国际名师带高徒项目》实施方案（世界中医药2013年4号）。该方案规定了指导老师和徒弟的条件，提出培养目标、培养时间和教学要求等。

目前，已有来自美国、英国、法国、德国、荷兰、匈牙利等国的资深中医药专家申请加入该项目。在本次世界中医药大会期间，由法国朱典教教授、英国马克斯教授和匈牙利的于福言教授等3位指导老师和3位徒弟。诺埃尔·马霍尔（瑞典）、袁炳荣（英国）、杨伯农（匈牙利）等4位学员举行隆重的“拜师仪式”，相信各位名师专家会尽心尽力，传授真谛，也希望各位高徒能学以致用，学有所成。这是培养新一代名医的重要途径。

六、加强门户网站和学术刊物建设

2013年进一步加强了以世界中医药官网为核心，以10个专题为补充的中医药网路化建设。世界中医药学会英文版正式运行。我会举办“世界中医药学术会”和“首届世界中医药服务贸易网上博览会”，于2014年10月16日到2015年1月16日。博览会的主题为：推广、传播“世界中医药”性、保健、健康、产业。教育、文化六大展区。内容包括名院名科、名医名店、特色诊疗技术、医疗器械、中药及保健品、科技成果及专利产品、国际教育机构与培训项目、中医药文化基地、中医药产品、中医药等体现中医药和文化的平台建设。

今年我会开通世界中医药微信公众平台（微信号：wcmscn）。这是利用新媒体的优势，以更加及时、快捷的信息传播中医药的途径。是为相关人员及服务机构的平台，也是扩大世界中医药影响力的窗口。

去年我会《世界中医药》杂志由双月刊改月刊，做了重大编排调整，增设重大专刊栏目和专家访谈栏目。杂志学术水平和编辑质量提高，创办《世界中医药》英文期刊的工作在积极推进，组稿了54篇论文。在泰国曼谷召开的第五届世界中医药大会，已建立独立的英文网站。今年11月《世界中医药》英文刊创刊号将出版。世界中医药专业委员会，创办了《世界中医药医学杂志》中文版。

七、加强与国际组织的沟通与联系

自2011年与世界各国卫生组织建立合作关系以来，积极推进建立卫生组织的合作，我会提出了《中医药国际发展战略》和《WHO中医药全球战略》的意向，形成了中医药全球发展战略的更新。今年2月，我会邀请了世界卫生组织中医药专家洪启宇博士访问我会，就合作计划进行了深入探讨。4月22日，世界卫生组织代表黄世杰博士到我会访问，双方就中医药在国际及全球卫生组织中的作用进行了深入交流，取得了共识。我会已与世界卫生组织建立了“世界中医药世界卫生组织正式联系单位”，并得到了世界卫生组织的肯定，将于2015年在执行委员会会议上讨论。

盛田执委符格应意先生也分别代表西班牙和意大利出席了本次会议。世界中医药 ISO/TC249 提交的《中医药词典》作为 ISO 第一个名词术语类标准，目前已经推进到委员会草案阶段。

我会积极参加联合国教科文组织非物质文化遗产保护委员会的活动。2015 年 12 月，联合国教科文组织保护非物质文化遗产政府间委员会第八次会议在阿塞拜疆首都巴库召开。我会作为联合国教科文组织非物质文化遗产保护委员会认证的咨询机构应邀作为观察员参加了本次会议，并提交了“世界中医药非物质文化遗产保护中的地位与作用”的专题报告。

总之，回顾过去的工作，有很多新进展，我们这些成绩的取得源于社会各界的支持，理事会的正确领导，全体会员的共同努力，各专业委员会的辛勤劳动，秘书处的奉献与服务，对此表示衷心感谢和崇高的敬意！

各位理事、各位监事：通过十年总结，规划未来，我们已经明确我会发展目标：在未来 5-10 年内要进行更加科学化、发展性、学术性、业务性，不断提升服务能力和国际影响力，将世界中医药发展成为国际上学术地位最高、规模最大、最具影响力的中医药国际学术组织，为中医药国际发展做出更大贡献。完成这样的使命需要我们进一步加强理事会建设，不断加强领导能力，理事会成员要增强责任感与使命感，更多地发挥主观能动性，要主动加强理事会各层级的沟通与联系，深入研究社会需求，为中医药发展提供更多智慧意见，要认真履行职责，不断开拓创新，努力工作，齐心协力把理事会建设成坚强有力的领导集体，要更加加强秘书处建设，不断提高服务水平，扩大服务空间。

相信在理事会的正确领导下，一定能更好地团结全体会员，共同实践世界中医药发展贡献精神，加强与其他世界组织的交流与合作、促进中医药业发展水平、提高中医药业国际地位、促进中医药业的交流与合作，为人类的健康和中医药业发展作出更大贡献的宗旨。只要我们坚持不懈、团结奋斗，就一定能够实现我们的目标！

以上报告，请理事会审议。

最后，祝理事会取得圆满成功，也祝各位同仁身体健康，事业有成！
谢谢大家！

The Sixth Meeting of the Third Council and the Fifth Meeting of the Third Board of Supervisors of WFCMS Work report

St. Petersburg, Russia
She Jing
2 October, 2014

Distinguished members of the Council and the Board of Supervisors

Today, we hold the Sixth Meeting of the Third Council and the Fifth Meeting of the Third Board of Supervisors of World Federation of Chinese Medicine Societies. Hereby, I express my warm welcome to the present vice-chairpersons, executive members of presidium, standing members, members of the Council, and to the present chairperson, vice-chairpersons and the executive members of the Board of Supervisors.

Over the past year, under the leadership of the council, with the active support of general members and the efforts made by stuff of the Secretariat, our work has made new progress. The report is as follows:

1. Summarizing the past decade’s experiences of our society since its founding and planning for the future

Last year, as World Federation of Chinese Medicine Societies’ 10th anniversary, our society organized many activities, including: essay competition, painting and calligraphy exhibition, implemented academic exchanges,
published commemorative articles, produced propaganda Glorious Course, edited and published album Looking Back the Past Decade, etc. reviewed the development of the past ten years, summarized experiences and found out our disadvantages; carefully analyzed the situation in the international development of Chinese medicine; recognized opportunities and challenges in front of us, discussed the strategies and measures to cope with these problems, drafted The Ten Years’ Plan for the World Federation of Chinese Medicine Societies, in addition, further clarified the development direction of our society by the council’s consideration. On October 30, 2013, our society held The 10th Anniversary Symposium for WFCMS in Beijing International Convention Center, and the theme of this symposium is: Summarize the Past, Planning for the Future. He Lui, Vice Chairwoman of the tenth NPC, and leaders from the China’s Ministry of Civil Affairs, the State Administration of Traditional Chinese Medicine, China National Certification and Accreditation Committee, the Chinese Committee for Standardization. As well as the members both home and abroad from China, Britain, America, the Netherlands, Spain, South Korea, Gabon, etc. 180 people attended the meeting, participants expressed congratulations to the 10th anniversary for WFCMS, set a high value on the progresses made by the WFCMS in the last decade, summarized experiences and have made good suggestions for the WFCMS’s further development. Wu Gang, Deputy Director of the State Administration of Traditional Chinese Medicine put forward his ardent expectations. The symposium has a positive influence and has been reported by several media after the meeting.

2. Strengthen the construction of organization system

In order to reflect international and increase the cohesive force, our society tries to strengthen the construction of organization system, formed “one body two wings” platform for the organization initially.

2.1. “One body” continuously consolidates

Over the last year, our society has developed five society members, and two individual members. Until the end of September 2014, our society has owned 239 member organizations and six individual members from 65 countries and regions.

Our society held the 5th session of 3rd Council Board and the 4th Super visionary Board on October 22, 2013. Summarized the past decade’s experience since WFCMS’ founding, analyzed the situation in the international development of Chinese medicine, clarified the next decade’s development strategy for our society. Discussed and adopted four documents: The Review of the Past Ten Years’ of the WFCMS, The Internationalization of Chinese Medicine: the Bottleneck and Countermeasures, The International Situation of TCM and Our Mission, The Ten Years’ Plan for the WFCMS, deliberated and passed Assessment Standard for Ethics Review of Biomedical Research with Human Participants of TCM Clinical Research, the meeting also discussed the preparatory work for the 11th World Congress of Chinese Medicine, which will be hold in 2014, successfully completed the scheduled tasks.

The body organization structure of the WFCMS which is constituted by WFCMS’s members, the Council, the Board of Supervisors, Advanced Specialists Advisory Committee and Consultative Committee continuously consolidates.

2.2. The construction of the professional committee is developing rapidly

Over the year, new register 13 Specialty Committees, including: Endocrine, External Treatment of Tumor, Dose Effect Research, Chinese Medicine Health Management, etc. Medicinal Resources Utilization and Conservation, Evaluation of Postmarketing Chinese Medicines, nursing, Research on Protection of Traditional Knowledge, TCM Pharmacognosy, Diagnostics of Traditional Chinese Medicine and reproductive medicine has held its inaugural meeting, so far there are already 73 new registered professional committees in our society, and increased 2709 new members.

Last year we completed the changing session work of Cardiovascular Disease, TCM Pharmaceutical Analysis, Pulse Manifestation, Digestive System Disease, Chinese Materia Medica, Diabetes and Andrology, and new
registered 1075 people. In the new council, the number of high professional titled talents, young academic key staff and overseas member has increased, which created good condition for the development and construction of various disciplines. Most Professional Committee has carefully organized the disciplines and specialties of academic discussion, technical exchanges, talent training, etc.

There were 170 people attended 2014 Specialty (Working) Committee President Level Meeting. Representatives present summarized the work carefully and exchanged experiences. A total of 43 Specialty Committees released its annual academic review report, reviewed academic progress and hot issues of the discipline, which reflected the Specialty Committees' positive effect “Occupy academic high ground, lead and promote academic development”. The meeting has awarded 2012-2013 Specialty (Work) Committee comprehensive advanced collectives and various individual awards. There were 23 Specialty (Working) Committee awarded. As an important wing of the WFCMS, the Specialty (Working) Committee network which constituted by experts in various disciplines is developing rapidly. It’s the base to push discipline construction, promote the academic progress, and strengthen academic exchanges.

2.3. The construction of the TCM international union has already started

In order to promote the international extension of TCM products, technology, equipments, enrich the connotation of the international TCM services, our society has been explored and established different international unions, integrated resources, university-industry cooperation, and extending TCM technology, products and equipments. So as to improve the accessibility of services, meet the needs of society, and promote the international development of TCM. In May, 2014, WFCMS's first international alliance- the Inaugural Conference of Wujibaoyang Moxibustion International Alliance was held in Cheju Island, the major job of this alliance is to extend the Wujibaoyang moxibustion technology, develop moxibustion training and academic exchanges, positive results have been achieved at present.

As another important wing of the WFCMS, TCM international alliances, which are constituted by related university, industry institution's experts and technicians are now on the way of development. The construction has been started, and it is the base of promote communication of TCM technology, products and equipments.

3. Strive to increase international academic exchanges

Over the past year, our society has continued to consolidate the tertiary academic conference communication platform, organized 37 various levels of meetings, including 3 regional international meetings and 33 professional academic conferences. We received more than 2400 papers, more than 8000 people attended the meeting.

3.1. Held the 10th World Congress of Chinese Medicine Successfully

The 10th World Congress of Chinese Medicine and World Federation of Chinese Medicine Societies 10th Anniversary were convened in San Francisco from 21-22th September, 2013. More than 1000 experts and scholars of TCM and delegates of the enterprises related attended the meeting. The theme is “Cooperation between Eastern and Western medicine, Better health services for people around the world.” More than 240 academic papers were collected, four experts made keynote speeches, and received representative presents' high evaluations. There were 6 sessions in the Congress, in which more than 150 papers were discussed and there were 6 workshops during the meeting. At the same time, exhibition of the latest achievements and products was held, attendees got lots of harvests. A gala was held by the organizing committee for the 10th anniversary, in which attendees had a joyful gathering, reviewing the achievements of the past ten years and looking into the future. The 10th World Congress of Chinese Medicine had a good effect both at home and abroad.

3.2. Active international regional conferences

On October 2013, the first session of the Baltic Sea TCM International Conference held in Latvia's capital
Riga successfully. The forum was host by Beijing Kundawell Medical Institute, co-organized by the Pan European Federation of TCM Societies, the theme is “Promote TCM exchanges and cooperation in the Baltic sea regions.” Over 400 people from more than 10 countries: Russia, Ukraine, Lithuania, Latvia, etc. They discussed several subjects, such as: around the combination of Chinese traditional and Western medicine, TCM, medical Qigong and the natural therapy.

On March 2014, The Second China-Africa Cooperation and Development Forum for Chinese Medicine was held successfully at Port Louis, Mauritius and Cape Town of South Africa. The forum was organized by the World Federation of Chinese Medicine Societies and hosted by the University of the Western Cape and South Africa Association of Chinese Medicine and Acupuncture. The theme is: Strengthen the cooperation and communication between China-Africa, and to promote the health of African with the help of TCM.” More than 200 experts who attended the conference from many countries, such as: Mauritius, South Africa, America, United Kingdom, China, etc. They discussed many issues around the subjects such as: Basic Theoretical Research of TCM, TCM Development in South Africa, Theory and Clinical Practice of Acupuncture.

On May 2014, “The Third TCM Asian-Pacific Forum on International Cooperation and Development” was held in Cheju Island successfully. This forum was host by the South Korean Traditional Acupuncture and Moxibustion Societies. The theme is: inheriting moxibustion technology, protecting traditional culture, serving public health. Near 100 delegates who from South Korea, China, and America attended the meeting.

These regional activities gathered experts and scholars from different countries, they discussed academic problems such as: Basic Theory and Clinical Practice of TCM, Basic and Development of TCM, Theory and Practice of Acupuncture, Combination of Chinese and Western Medicine to Prevent Diseases, TCM Characteristics Therapy, etc. They discussed the way, measure and model of TCM international regional development, put up related information and suggestions of making decision for TCM international development; Promoted the host country and neighboring countries and regions’ TCM academic and career development. Regional meeting has already become an international regional exchanges and cooperation platform of TCM for all continents.

3.3. Various academic activities in Specialty Committees

Over the past year, there were 31 Specialty (Working) Committees organized 33 academic activities, more than 6000 delegates from different countries and regions attended the meeting, and published more than 2000 academic theses. Academic activities were held in various forms, the scale was flat with previous years, but the attendance has increased, and the academic level is increasing year by year. Many conferences emphasize discussed the difficulties and hot issues of the professional development. These conferences have a positive effect in pushing academic development and promote international discipline differentiation of TCM.

In order to push the international cooperation and exchanges for TCM education, our society founded the Educational Instruction Committee in November, 2006. Under the leadership of the President Zhang Boli, the committee follows the constitution, combines different countries and regions’ experts, scholars and managers who carry out TCM education. The committee has carried out effective work for promote understanding between TCM educational institutions, push exchanges and cooperation in the field of TCM education, jointly regulate the TCM education, improve the level of TCM education, and cultivate more qualified talents of TCM. The Educational Instruction Committee took on the job of making the World Standard of Chinese Medicine Undergraduate (Pre-CMD) Education, the World Core Course of Chinese Medicine Specialty, they got good response after approved by the WFCCMS’s Council. In the past year, the Educational Instruction Committee established the Instruction Committee for Editing and Translation, drafted and ratified the writing principle and requirements for the Syllabus for World Core Course of Chinese Medicine Specialty, the Teaching Materials for World Core Course of Chinese Medicine Specialty, and the selective qualifications for the Teaching Materials for World Core Course of Chinese Medicine Specialty’s editors, the work was already started. Last year, the
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Educational Instruction Committee and the Nanjing University of Chinese Medicine host the third World Conference on Education of Chinese Medicine, more than 400 experts and delegates who from more than 30 countries and regions including China and overseas countries attended the meeting. The theme of the meeting is: “Education decides the future.” Total received more than 170 papers, there were over 60 experts made academic report in four parallel sessions, more than 50% of them were foreign experts. In the same of showing the achievements of the international education of Chinese medicine, the meeting also analyzed the challenges that the world TCM education is facing and the problems which are to be settled urgently, contributed suggestions for promote the development of world education of Chinese medicine, cultivate more and better international talents of TCM.

4. Promoting the construction of international standardization of TCM

Over the past year, we’ve been following the tenets of our society, constantly exerting the superiority of an international academic organization in resources, and actively taking steps in the deliberation, formulation and the promotion of TCM international standards.

4.1. Having introduced 3 specialty committee technical standards

We have pushed ahead with the construction of specialty committee technical standards. So far, 9 specialty committees have established “Specialty Technical Standards Certification Committee”, formulated their own specialty standard development programme and put forward a series of technical standard proposal projects. These 9 committees are Ethic Review, Pediatrics, Pulse Manifestation, Cosmetology, Andrology, Evaluation of Postmarketing Chinese Medicines, Clinical Curative Effect Evaluation, Hepatic Disease and Dermatology. Over the year, 3 standards including “World Standard of Higher Vocational Education of Chinese Medicine Beauty”, “TCM syndrome diagnostic criteria of chronic hepatitis B (ALT ÷ 2 × ULN)” and “TCM syndrome key factors diagnostic criteria of chronic hepatitis B (ALT ÷ 2 × ULN)” have been examined, adopted and published by the council of relevant specialty committee in accordance with the procedure, been recommended and trialed in the units.

4.2. Having published 1 WFCMS Specialty Committee Standard

The TCM Clinical Research of Assessment Standard for Ethics Review of Biomedical Research with Human Participants was published on 2012, Nov, 12 by Ethics Review Council of our society after deliberation. As a technical standard of specialty committee, after a nearly-one-year trial, it has been improved and entitled as above and reported to WFCMS Council. On 2013, September 22, the standard was discussed and passed at the fifth meeting of the third Council. It’s the first specialty committee standard discussed and passed by the council, which was formulated for the evaluation of TCM clinical research ethics review platform. It stipulates basic requirements of medical and sanitary institution, ethics review committee and ethics review committee office, clinical departments and researchers, included in ethics review platform. According to the standard, 37 hospitals have currently performed ethics review platform evaluation, which promotes the protection system construction of clinical research subjects and improves the ethics review ability and level of institutions being evaluated.

4.3. The published WFCMS international institution standards having been applied

The TCM education institutions around the world have gradually applied the published institution standards such as International Standard Chinese-English Basic Nomenclature of Chinese Medicine, International Standard Chinese-French Basic Nomenclature of Chinese Medicine, International Standard Chinese-Spanish Basic Nomenclature of Chinese Medicine, International Standard Chinese-Portuguese Basic Nomenclature of Chinese Medicine, International Standard Chinese-Italian Basic Nomenclature of Chinese Medicine in practice for education. Some TCM colleges in the world are run in accordance with the world traditional Chinese medicine undergraduate education standards, which guarantees the inheritance of TCM academic all over the world, the promotion of the accuracy of TCM technology application and the improvement of teaching quality.
4.4. A number of international institution standards under way

*International Standard Chinese-Russian Basic Nomenclature of Chinese Medicine* has been completed and submitted to the Council for deliberation.


5. Improving the academic level of the international TCM practitioners

5.1. Having developed international TCM professional and technical examination and review

To help improve the professional and technical level of the international TCM practitioners, we kept organizing and implementing international TCM professional and technical examination and review. Management documents such as international herbalists qualification examination and senior professional title review have been further revised and improved, meanwhile, administrative rules like test translation have been perfected, which lay a solid foundation for the improvement of management quality. We’ve organized to design over 6000 parameter-completed examination questions covering all subjects. After revision, we are going to successively organize to translate other types of articles to expand database. Last year, 31 sessions of International Professional Titles of Chinese Medicine Doctors Exam were implemented with over 350 examinees in total, increasing year-on-year. 4 periods of review were completed with 21 people entitled “Senior Chinese Medicine Doctor”. People participated in the review were from the USA, the UK, New Zealand, Singapore, Spain and Hungary, increasing year-on-year.

5.2. Having setting up E-learning of World Chinese Medicine

For the convenience of the international TCM practitioners learning professional skills, we established international TCM online education comprehensive service platform----E-learning of World Chinese Medicine. We have already signed technical support contract with Jiangsu Huizhi Network Technology Co. Limited, completed platform construction of website building such as block settings and page designs and tentatively uploaded 44 courses covering TCM internationalization, TCM clinical practical courseware and TCM popular science.

5.3. Having organized International Apprenticeship Project

Last June, the Implementation Plan of the Project: International Apprenticeship (WFCMS [2013]4) was passed. It specified the qualification of coaches and students, the procedure of forming apprenticeship, mentoring duration and teaching requirements.

So far, many senior experts in TCM, from China, the USA, France, the UK, Holland and Hungary, have applied to the project. During this congress, we are going to arrange solemn ceremony for three coaches, Pro. Zhu Miasheng from France, Pro. Ma Boying from UK and Pro. Yu Funian from Hungary, and 4 students, Chen Chuxin(Spain), Noel Mathieu(France), Yuan Bingnan(China), and Yang Yunong(Hungary). We believe that all the coaches would teach as much essence as they can. We wish that every student could devote himself/herself to practice and learn something. It is a significant method in cultivating new generation of renowned doctors.

6. Strengthening the construction of portals and academic journals

During the past year, we strengthened the construction of WFCMS network group, which focuses on WFCMS official website and supplements 10 specialized networks. The English version of WFCMS official website was officially launched. Online Expo of the First Session World Chinese Medicine Service Trade decided by our society, held on the World Chinese Medicine Net will be in on-line exhibition from 16th, Oct, 2014 to Jan, 2015. The theme is “Show, Introduction, and Dissemination----Let the World Find You”. The expo has six exhibition areas, covering the following subjects: famous hospitals and special departments of hospitals, celebrated factories and shops, characteristic diagnosis and treatment techniques, medical apparatus and instruments, Chinese herbs and health care products, scientific and technological achievements and patented products, international education
organizations and training projects, TCM culture bases, cultural relics and historic monuments, and books and image products. We are going to give full play to the advantages of the network, establish a platform to broadcast, exhibit, communicate, cooperate and trade for the worldwide units of TCM medical treatment, health care, scientific research, education, industry and culture, which is our new exploration to promote in-depth development of TCM service trade and further accelerate the international communication of TCM.

We are going to run WFCMS WeChat public platform (wfcms2003) this year. It is an approach to spread TCM in a more active and colourful way, by taking advantage of the new media; it is a service platform for relevant people and units; it is also a window to expand influence of WFCMS.

Last year, World Chinese Medicine of our society changed from bimonthly to monthly, optimized the columns and added major subject column and expert interview column with sharply increased expert dissertations and overseas articles and improved academic level and editing quality. The mission of launching English version of World Chinese Medicine is progressing; we set up a 54-people editorial board and successfully held the first session of English journal editorial board meeting in Nanjing, China. Our independent English website has built and the first English version of World Chinese Medicine will be published in September this year. The Specialty Committee of Sleep Medicine of WFCMS has launched Chinese edition of World Journal of Sleep Medicine.

7. Strengthening the communication and contact with international organizations

Since we have established working relationship with WHO in 2011, we have actively promoted cooperation with WHO and submitted "Overview of Chinese Medicine Development in the World and Recommendations for WHO’s Global Strategy of Traditional Medicine" to help WHO update global strategy for traditional medicine. We conducted research on TCM manipulation treatment and submitted survey report for the reference of drawing up "global manipulation treatment". This February, we invited Dr. Zhang Qi, the traditional medicine official of WHO to visit our society and had an in-depth discussion about cooperation project. On April 22th, Dr. Bernhard Schwartzlander, the WHO representative in China led a delegation to our society. He affirmed the importance of WFCMS in traditional medicine and looked forward to actively cooperating with us. We have already submitted "The Application Report of Requesting WHO to Confirm Official Relationship between WHO and WFCMS" to WHO and received their reply, which will be discussed at executive-committee meeting in 2015.

As an A-liaison organization of ISO/TC249, we’ve been taking part in their activities actively. We have submitted 2 standard proposals and offered some suggestions and support for its organization construction and development strategy. On 26th May, 2014, the Fifth Annual Conference of ISO/TC249 was held in Kyoto, Japan. The delegation headed by the vice president and secretary general of our society Pro. Li Zhenji attended this meeting, submitted "A-liaison Organization Work Report" to the congress and offered an official proposal of ISO/TC249 working scope expansion. Mr. Ramon, the chairperson of the Board of Supervisors, and Mr. Sergio Bangrazi, the executive member of presidium of the Council also presented respectively on behalf of Spain and Italy. "TCM vocabulary part1: Chinese Materia Medica", as the first nomenclature standard of ISO, has been submitted to ISO/TC249 and delivered to the committee draft period.

We actively participated in the activities of UNESCO Intangible Cultural Heritage Protection Committee. The Eighth Session of UNESCO ICH Protection Inter-government Committee was held in Baku, the capital of Azerbaijan. We attended the meeting as an observer as an accredited advisory institution certificated by UNESCO Intangible Cultural Heritage Protection Committee and submitted the report “the Position and Role of WFCMS in the Intangible Cultural Heritage Protection”.

In conclusion, we have improved a lot according to the review. The achievements are due to the support from all sectors of the society, the appropriate leadership of the Council, the joint efforts of all members, the hard work of every Specialty Committee and the dedication and service from the secretariat. Hereby I express my
heartfelt thanks and great respect!

Dear members of the Council and of the Board of Supervisors: The development goal of our society is explicit through the 10-year review and future plan. We are going to further consolidate and develop the existing organization foundation, academic brand and business channels, continuously improve the service capabilities and international influence and make WFCMS the largest and most influential TCM international academic organization with the highest academic status in the world, making more contribution to the international development of TCM. To accomplish the mission, we need to further strengthen the construction of the Council and improve leadership. Members of the Council should enhance the sense of responsibility and the sense of mission, bring more subjective initiative into play, take active steps to strengthen communication and contact of all levels of the council, further study the requirement of society, provide more constructive suggestions for the development of WFCMS, earnestly perform duties, constantly explore and innovate, work hard shoulder to shoulder and make the Council a strong leading group. The secretariat need to strengthen the construction, improve service ability and level and expand the service space.

We believe that under the leadership of the Council, we can certainly unite all the members, together practice the theme of increasing the understanding and cooperating of the worldwide TCM units, enhancing the academic communication around the world, improving the professional skills of TCM, protecting and developing TCM, facilitating TCM entering medical and health systems of countries in the world, promoting communication and cooperation of TCM with all kinds of medicine in the world and making more contribution to human health. As long as we unremittingly unite and strive, we can definitely achieve our goals!

Please deliberate the report above.

Finally, I wish the congress a great success, wish all of you good health and flourishing careers!

Thank you!
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《中医基本名词术语中俄对照国际标准》简介

Brief introduction of International Standard Chinese-Russian Basic Nomenclature of Chinese Medicine

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   Damp-draining Diuretic 利水渗湿药
   Interior-warming Medicinal 温里药
   Qi-regulating Medicinal 理气药
   Digestant Medicinal 消食药
   Hemostatic Medicinal 止血药
   Blood-activating and Stasis-resolving Medicinal 活血化瘀药
   Phlegm-resolving Medicine 化痰药
   Antitussive and Antiasthmatic Medicinal 止咳平喘药
   Tranquilizing Medicinal 安神药
   Liver-pacifying Wind-extinguishing Medicinal 平肝熄风药
   Resuscitative Medicinal 抢救药
   Tonifying Medicinal 补益药
   Astringent Medicinal 收湿药
   Emetic Medicinal涌吐药

13 Formula 方剂
   Externally Applied and Miscellaneous Medicinal 外用药及其他
   Miscellaneous Medicinal 其他方剂
   Exterior-releasing Formula 解表药
   Heat-clearing Formula 清热药
   Summerheat-clearing Formula 清暑剂
   Purgative Formula 泻下剂
   Harmonizing Formula 和解剂
   Warming Interior Formula 温里剂
   Tonifying Formula 补益剂
   Astringent Formula 固涩剂
   Tranquilizing Formula 安神剂
   Resuscitative Formula 醒神剂
   Qi-regulating Formula 理气剂
   Blood-regulating Formula 理血剂
   Wind-relieving Formula 祛风剂
   Dryness-relieving Formula 治燥剂
   Dampness-dispelling Formula 祛湿剂
   Phlegm-expelling Formula 化痰剂
   Digestive Formula 消食剂

14 Internal Disease 内科病
15 External Disease 外科病
16 Gynecological Disease 妇科病
17 Pediatric Disease 儿科病
18 Ophthalmic and Otorhinolaryngologic Diseases 眼、耳鼻喉科病
   Ophthalmic Disease 眼科病
   Otorhinolaryngologic Disease 耳鼻咽喉科病
19 Orthopedic and Traumatic Diseases 骨伤科病
20 Acupuncture and Moxibustion 针灸
   Nomenclature of Fourteen Meridians/Channels 十四经名称
   Position of Extra Points 经外穴点定位名称
   Points in Meridians/Channels 经穴名称
   Extra Points 经外穴名称
   Scalp Acupuncture Lines 头针穴线
世界中医药学会联合会
第三届第六次理事会与第五次监事会会议

 Auricular Zone 耳郭分区  21 Health Preservation and Rehabilitation, Five Circuits and Six Qi 养生康复，五运六气
Ear Points 耳穴名称

翻泽基本原则
力求浅译 “信、达、雅”，为此，应遵守以下基本原则：
(1) 对应性：俄译词义尽量与中医学术内涵相对应，是最重要的原则。
(2) 简洁性：在不影响清晰度的前提下，译名越简单越好，避免辞令式译义。
(3) 同一性：同一概念的名词只用同一词对译。
(4) 约定俗成：目前已通行的译名，与前述原则虽然不完全符合，仍可考虑采用。

Принципы русского перевода терминов китайской медицины
Перевод должен быть ясным, точным и звучным. Поэтому мы руководствовались следующими принципами:
(1) эквивалентность: русский перевод соответствует оригинальному значению китайских терминов. Это самый важный принцип;
(2) простота: перевод должен быть коротким и понятным;
(3) идентичность: два и более китайских термина могут быть абсолютно эквивалентны, перевод должен быть один;
(4) русский перевод, который уже давно используется, и хотя он не соответствует вынесенным ранее принципам, но его можно использовать.

翻译方法
(1) 中医基础、中医诊断、治治法的名词术语，应尽量采用直译，用普通俄语作对应词，避免与现代医学概念混淆。
比如：“肾主水”译为“почка отвечает за воду”而不能译为“почка, управляющая водным метаболизмом”;
“活血”译为“стимулирует кровообращение”而不能译为“проявлять кровообращение”
(2) 多数中医人体的名词与之完全对应的俄译词（西医解剖名词），俄译时应选用这些对应词，而不能另造新词，以免使读者将其误认为中医特有的解剖结构。
比如：“面王”英文对应词为“лицо человека”,而不能另造新词译为“король лица”
(3) 中药名称采用双译法:每一个中药词条后，均按顺序列出汉语拼音名、拉丁名（Latin pharmaceutical name）及俄文名称。
例如：“当归” Radix Angelicae Sinensis “Душица”
(4) 方剂名称采用双译法:每一个方剂词条后，均按顺序列出汉语拼音名及俄译名。
例如：“参苓白术散” Sheng Ling Bai Zhu San “Гинсень, Poria и белый порошок”
汉语拼音名参照《中华人民共和国药典（2005年英文版）》汉语拼音方案;但采取了以中药名为单位，划分子节。
有些中文单音，是俄罗斯的骂人脏话，如гуй,就是一句脏话，所以我们建议尽量在方剂里隐瞒掉。
例如：“当归龙骨丸”在该药典为“Danggui Longhui Wan”本标准为“Danggui Long Hui Wan”，与其俄译名不符Дангуи линьху,有更坏的对应性，
(5) 中医药名称的俄译：如某些中疾病名与西疾病名相对应，直译中医药名，将对应的俄文西疾病名放在括号内，置于中医药名之后。
例如：“风火眼”的俄文对应词为“нетральный глаз”(стертый коньонктивит):如果一个中疾病名与两个或两个以上西疾病名相对应，不能只选其中的一个西疾病名作对应词。
第一部分

例：中文的“忧郁”与俄语的“抑郁”（сандарный диабет）及“告健康”（сахарное мочепиурическое）及“神学性障碍”（кенопатологическая полиция）均有对应关系。因此汉语可解释为“痛感”及“疾病”等，而不将“сахарный диабет”定为汉语语词对等词。

6. 中文名用法：即每一个穴位词后，均按顺序列出汉语拼音名、法语标记及俄译名，如大椎 Daizhu1 VGI4, diyi-jui1

1. 俄语在俄罗斯疾病学理论、诊断学，方法和原理：治疗营养科学和药物治疗需要通过俄语的词典来查询，以不使用新名称。

例如，“肾主水”是指肾水有“调节功能”，而“肾”是指肾水的“调节功能”。“肾”是指肾水的“调节功能”，而“肾”是指肾水的“调节功能”。“肾”是指肾水的“调节功能”。

2. 解释性术语：为避免误解，在解释性术语中应使用汉语。

例如，“肝”是指肝水的“调节功能”，而“肝”是指肝水的“调节功能”。“肝”是指肝水的“调节功能”，而“肝”是指肝水的“调节功能”。“肝”是指肝水的“调节功能”。“肝”是指肝水的“调节功能”。

3. 俄语将“肝”译为“肾”，“肝”译为“肾”，“肝”译为“肾”，而“肝”译为“肾”，“肝”译为“肾”，“肝”译为“肾”。

例如，“肝”是指肝水的“调节功能”，而“肝”是指肝水的“调节功能”。“肝”是指肝水的“调节功能”，而“肝”是指肝水的“调节功能”。“肝”是指肝水的“调节功能”，而“肝”是指肝水的“调节功能”。“肝”是指肝水的“调节功能”，而“肝”是指肝水的“调节功能”。

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世界中医药学会联合会
第三届第六次理事会与第五次监事会会议

02-027 生之本在于阴阳 [shēng zhī běn běn yù yīn yáng] 人和人之间关系重要
02-028 阴虚而补阳形 [yīn xū qǐ yín chēn xíng] 予以补给形式
02-029 阴阳之要，阳密乃固 [yīn yáng zhī yào，yáng mì nǎi gù] 阴阳关系好，人和人之间关系好
02-030 真阴真阳，精神乃治 [yín qín yáng mí jīn shēn nǎi zhì] 人和人之间关系好，人和人之间关系好
02-031 阴阳转移病情 [yīn yáng zhuǎi qí yín yáng bìngqíng] 人和人之间关系好
02-032 阴阳转移病情 [yīn yáng zhuǎi qí yín yáng bìngqíng] 人和人之间关系好
02-033 阴阳决别，精气乃绝 [yín yáng jié bié jīng qì nǎi jié] 人和人之间关系好，人和人之间关系好
02-034 阴阳者无若天之 [yīn yáng qì zuò tiān yī] 人和人之间关系好
02-035 太阳[tài yáng] 天气 [tái yì] 人和人之间关系好

"维基百科"之一 - 一个在所有领域的项目

"维基百科"之一 - 一个在所有领域的项目

02-036 阴阳[yīn yáng] 有无[yǒu wú] 人和人之间关系好
02-037 阴阳[yīn yáng] 有无[yǒu wú] 人和人之间关系好
02-038 阴阳[yīn yáng] 有无[yǒu wú] 人和人之间关系好
02-039 阴阳[yīn yáng] 有无[yǒu wú] 人和人之间关系好
02-040 五行[wǔ xíng] 有无[yǒu wú] 人和人之间关系好
02-041 木[mù] 人和人之间关系好
02-042 火[huǒ] 人和人之间关系好
02-043 土[tǔ] 人和人之间关系好
02-044 金[jīn] 人和人之间关系好
02-045 水[shuǐ] 人和人之间关系好
02-046 五行[wǔ xíng] 有无[yǒu wú] 人和人之间关系好
02-047 有无[yǒu wú] 人和人之间关系好
02-048 五行[wǔ xíng] 有无[yǒu wú] 人和人之间关系好

"维基百科"之一 - 一个在所有领域的项目

"维基百科"之一 - 一个在所有领域的项目

02-049 生木[sēng mù] 有无[yǒu wú] 人和人之间关系好
02-050 火生土[huǒ shēng tǔ] 人和人之间关系好
02-051 土生金[tǔ shēng jīn] 人和人之间关系好
02-052 金生水[jīn shēng shuǐ] 人和人之间关系好
02-053 水生木[shuǐ shēng mù] 人和人之间关系好
02-054 木生水[mù shēng shuǐ] 人和人之间关系好
02-055 木克土[mù kè tǔ] 人和人之间关系好
02-056 土克水[tǔ kè shuǐ] 人和人之间关系好
02-057 火克水[huǒ kè shuǐ] 人和人之间关系好
世界中医药学会

The Sixth Meeting of the Third Council and the Fifth Meeting of the Third Board of Supervisors

02-058 蒲克永 [tǔ kè shuǐ] 世界谓为中气

02-059 凌克本 [jīng kè mǔ] 世界谓为中气

02-060 永克火 [shuǐ kē huǒ] 世界谓为中气

02-061 五行相乘 [wǔ xíng xiāng chéng] 世界谓为中气

02-062 制化 [zhì huà] 世界谓为中气

02-063 五行相生 [wǔ xíng xiāng shēng] 世界谓为中气

02-064 火为金 [huǒ wéi jīn] 世界谓为中气

02-065 火为水 [huǒ wéi shuǐ] 世界谓为中气

02-066 金为水 [jīn wéi shuǐ] 世界谓为中气

02-067 金为火 [jīn wéi huǒ] 世界谓为中气

02-068 金为火 [jīn wéi huǒ] 世界谓为中气

02-069 元气承制 [yuán qì chéng zhì] 世界谓为中气

02-070 元气承制 [yuán qì chéng zhì] 世界谓为中气

02-071 所不胜 [suǒ bù shèng] 世界谓为中气

02-072 木为金之所胜 [mù wéi jīn shèng] 世界谓为中气

02-073 水为木之所胜 [shuǐ wéi mù shèng] 世界谓为中气

02-074 火为土之所胜 [huǒ wéi tǔ shèng] 世界谓为中气

02-075 土为火之所胜 [tǔ wéi huǒ shèng] 世界谓为中气

02-076 水为火之所胜 [shuǐ wéi huǒ shèng] 世界谓为中气

02-077 火为木之所胜 [huǒ wéi mù shèng] 世界谓为中气

02-078 水为木之所胜 [shuǐ wéi mù shèng] 世界谓为中气

02-079 火为土之所胜 [huǒ wéi tǔ shèng] 世界谓为中气

02-080 木为土之所胜 [mù wéi tǔ shèng] 世界谓为中气

02-081 水为土之所胜 [shuǐ wéi tǔ shèng] 世界谓为中气

02-082 患胜怒 [huàn shèng nù] 世界谓为中气
国际中医药学科体系类目

（起草说明）

前言

本标准为形成国际统一的中医药学科体系而制定，规定了中医药学科的体系标准。

本标准起草单位：世界中医药学会联合会秘书处。

本标准起草程序遵循了世界中医药学会联合会2009《国际中医药学科体系类目》的规定。

引言

目前，国际的医疗科研机构和院校在中医药学科类目上存在较大差异，为建立统一的中医药学科分类体系，提升中医药学科分类在国际上的规范性、适用性，特制定中医药学科体系类目，为国际中医药学科体系建设、中医药人才培养以及科研提供依据。

本目录以中国国家中医药管理局中医药学科建设专家委员会中医药学科建设规划指导目录为基础，同时参考了中医药相关法律、法规、标准及学位授予标准，建立中医药学科体系目目的在于促进中医药学科分类的国际通用性。

本目录适用于指导社会各中医药人才培养，也适用于指导国际中医药学科建设，对保证中医药学科的系统性和完整性，推动中医药学科完善产生十分重要的影响，对理论研究和实践工作具有十分重要的指导意义。

国际中医药学科体系类目

1.范围：本标准规定了中医药学科的体系类目。本标准适用于中医药学科建设、人才培养、科研及教育指导工作。

2.术语和定义：下列术语和定义适用于本文件。

3.1学科：一定学科领域或一定科学的分支。

3.2类目：类目即不同品种、项目、书籍、学科等的清单。

3.3中医药学科体系：中医药学科体系由与中医药相关的中医学基础理论、中医学临床学、中药学、中药研究等组成，为中医药健康发展提供学科分类指导。

3.4中医基础医学

3.4.1中医学基础理论

3.4.2临床医学

3.4.3预防医学

3.4.4药学

3.4.5康复医学

3.4.6中医养生学

3.4.7中医护理学

3.4.8中医针灸学

3.4.9中医推拿学

3.4.10中医营养学

3.4.11中医诊断学

3.4.12中医治疗学

3.4.13中医护理学

3.4.14中医药研究

3.5中医临床医学

3.5.1中医内科学

3.5.2中医外科学

3.5.3中医妇科学

3.5.4中医儿科学

3.5.5中医眼科学

3.5.6中医耳鼻喉科学

3.5.7中医骨科

3.5.8中医皮肤科

3.5.9中医肿瘤学

3.5.10中医重症医学

3.5.11中医急诊医学

3.5.12中医康复医学

3.5.13中医营养学

3.5.14中医护理学

3.5.15中医药研究

3.6中医学科体系类目

3.6.1中医学科体系类目

3.6.2中医内科学

3.6.3中医外科学

3.6.4中医妇科学

3.6.5中医儿科学

3.6.6中医眼科学

3.6.7中医耳鼻喉科学

3.6.8中医骨科

3.6.9中医皮肤科

3.6.10中医肿瘤学

3.6.11中医重症医学

3.6.12中医急诊医学

3.6.13中医康复医学

3.6.14中医营养学

3.6.15中医药研究

3.7中医学科体系类目

3.7.1中医学科体系类目

3.7.2中医内科学

3.7.3中医外科学

3.7.4中医妇科学

3.7.5中医儿科学

3.7.6中医眼科学

3.7.7中医耳鼻喉科学

3.7.8中医骨科

3.7.9中医皮肤科

3.7.10中医肿瘤学

3.7.11中医重症医学

3.7.12中医急诊医学

3.7.13中医康复医学

3.7.14中医营养学

3.7.15中医药研究

3.8中医学科体系类目

3.8.1中医学科体系类目

3.8.2中医内科学

3.8.3中医外科学

3.8.4中医妇科学

3.8.5中医儿科学

3.8.6中医眼科学

3.8.7中医耳鼻喉科学

3.8.8中医骨科

3.8.9中医皮肤科

3.8.10中医肿瘤学

3.8.11中医重症医学

3.8.12中医急诊医学

3.8.13中医康复医学

3.8.14中医营养学

3.8.15中医药研究

3.9中医学科体系类目

3.9.1中医学科体系类目

3.9.2中医内科学

3.9.3中医外科学

3.9.4中医妇科学

3.9.5中医儿科学

3.9.6中医眼科学

3.9.7中医耳鼻喉科学

3.9.8中医骨科

3.9.9中医皮肤科

3.9.10中医肿瘤学

3.9.11中医重症医学

3.9.12中医急诊医学

3.9.13中医康复医学

3.9.14中医营养学

3.9.15中医药研究
The International Catalogue of Chinese Medicine discipline

(The Instructions for the drafting)

Foreword

The discipline catalogue is formulated in order to form the international unified subject system of Chinese Medicine, and it specifies the content of the subject system of Chinese Medicine.
Chief Drafting Organization: Secretariat of WFCMS.
Assessment catalogue of CM discipline is drafted in accordance with the rules based on the SCM 0001-2009 Working Regulation for Formulation and Publication of Standard.
The catalogue is issued by the World Federation of Chinese Medicine Societies.

Introduction
At present, the overseas medical research institutions, university and colleges don't use standards applicable subject cultivation of Chinese Medicine.
At the same time, there are six current standards among mainland China such as education, scientific research, the construction of key subject and others. The standards is not unified, and the name of subjects exist some differences. To establish a unified subject classification system of Chinese Medicine, and promote the standardization and applicability of subject classification of Chinese Medicine. So Chinese Medicine discipline system is established, it can provides the basis to domestic and overseas course system construction, personnel training and scientific research of Chinese Medicine.
The International catalogue of Chinese Medicine discipline specifies the content of the subject system of

Chinese Medicine
This catalogue is based on the discipline construction planning guidance catalogue of Chinese Medicine by State Administration of TCM of key discipline committee of experts, at the same time refer to the relevant laws and regulations of Chinese Medicine on scientific research standard and degree awarded. Subject system of Chinese Medicine aims to promote the international applicability of subject classification of Chinese Medicine.
This catalogue is suitable for the guidance of overseas countries to the cultivation of the talents of Chinese Medicine, can also be applied to guide the construction of Chinese Medicine discipline. Ensuring the systemateness and integrity of the subject of Chinese Medicine, it can improve the development of discipline of Chinese Medicine, and it also has guiding significance to the theoretical research and practical work.

1. Scope
The standard specifies the basic terms of the subject system of CM.
The standard applied the subject construction and cultivation of talents of CM.

2. Terms and Definitions
The following terms and definitions are applicable to this document.
2.1. Discipline: The branch of a certain field of science.
2.2. Catalogue: A catalogue is a list of things such as the goods, the objects, the books or the subjects.
2.2. The system of Chinese Medicine: By the composition with the relevant subject of CM, such as basic medical science of CM, CM clinical Medicine, Acupuncture-maxibusion and tinea, CM material medica, integrated Chinese and Western Medicine, Medicine of National ethnicities, Cultivate discipline, for health organizations of CM (medical and health institutions, research institutes, university and colleges, etc.) provide clinical subject classification, scientific research and education for guidance.

3. The catalogue of Chinese Medicine discipline
3.1. Basic medical science of Chinese Medicine
3.1.1. Basic theory of Chinese Medicine
3.1.2. Subject of Internal Classic
3.1.3 Subject of Treatise on Cold Damage Diseases
3.1.4 Subject of Warm Disease
3.1.5 Subject of Synopsis of the Golden Chamber
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3.1.6. Schools of Chinese Medicine
3.1.7. History of Chinese Medicine
3.1.8. CM Philology
3.1.9. Ancient Chinese and ancient Chinese of CM
3.1.10. CM Formulas
3.1.11. CM Diagnostics
3.2. CM Clinical Medicine
3.2.1 CM Internal Medicine
3.2.1.1 Subject of Heart Disease
3.2.1.2 Subject of Hepatic Disease
3.2.1.3 Subject of Spleen and Stomach Disease
3.2.1.4 Subject of Lung Disease
3.2.1.5 Subject of Kidney Disease
3.2.1.6 Subject of Brain Disease
3.2.1.7 Subject of Arthralgia Disease
3.2.1.8 Subject of Internal Secretion Disease
3.2.1.9 Subject of Tumor Disease
3.2.1.10 Subject of Blood Disease
3.2.2 CM Surgery
3.4 CM Material Medica
3.4.1 CM's natural Medicine
3.4.1.1 Pharmaceutical botany
3.4.1.2 Medicinal zoology
3.4.1.3 Medicinal mineralogy
3.4.3 CM Material Medica identification identificficology
3.4.3 CM Material Medica processing
3.4.4 CM Pharmacetics
3.4.5 CM Chemistry
3.4.6 CM Pharmaceutical analysis
3.4.7 CM Pharmacology
3.4.8 Clinical Chinese material medica Clinical application of CM material medica
3.5. Integrated/Combined Chinese and Western Medicine
3.5.1 Fundamentals of integrated Chinese and Western Medicine
3.5.2 Clinical integrated Chinese and Western Medicine
3.6. National ethnicities Medicine National minorities Medicine
3.6.1 Ethno Medicine
3.7. Cultivate discipline
3.7.1 CM Propylactic
3.7.2 CM Hemology
3.7.3 CM Informatics
3.7.4 CM Engineering
3.7.5 CM Psychology
3.7.6 CM Collaterals disease
3.7.7 CM Culture
3.7.8 CM Mental Disease

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3. China. The State Administration of TCM. The discipline code table of TCM on researching.

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世界中医药学会联合会
第三届第六次理事会与第五次监事会会议

《国际中医医师测试与评审规范》介绍

一、简介

构建国际中医药人才标准体系，是国际中医药人才战略的重要组成部分。建立国际中医药人才测评标准，通过统一评价要素与指标，统一测评内容与方法，对各级各类中医药人才的知识结构和临床能力进行评价，是国际中医药人才整体素质、加快国际中医药人才发展战略实施进程的重要环节与支持。

为促进国际中医药专业技术职称测评走上科学化、专业化轨道，在充分研究的基础上，依据国际标准化制定的相关规定，组织起草了《国际中医医师测试与评审规范》。《国际中医医师测试与评审规范》是国际中医药学会联合会颁布的相关标准，从前瞻性、系统性、规范性国际中医医师测评的视角，对测评标准提出了相关要求。

《国际中医医师测试与评审规范》在各级中医医师理论知识结构与临床技术能力要求方面，注意了与《世界中医药学会基本教育标准》（2010）《世界中医药学会基本教育标准》（2010）《国际中医医师测试与评审规范》等相衔接。

《国际中医医师测试与评审规范》以《世界中医药学会基本教育标准》（2010）为依据，将中医医师分为助理医师、执业医师、专科医师、高级专科医师、主任医师五个级别。

从中医医师成长规律出发，明确了助理医师、执业医师、专科医师三个层级，设置针灸、推拿、骨伤、美容、药膳等专业（方向）。以测试、临床技术操作为主要方式，重点对考试者的“知识要素”“能力要素”进行测评。

高级专科医师及以上职称，需依据学科建设具体情况，选择按一级学科或分类为若干专科实施测评。通过论文评议、有效病案审核及论文答辩，对参评者的临床、科研、带教、创新意识等内容进行综合评估。

《国际中医医师测试与评审规范》旨在建立适用于世界大部分国家或地区的中医医师测评内容与方法、程序、为各国中医医师能力评价、各中院校校年度考试、教师水平评价等提供参考。

各国可在本《指南》相关法律法规框架下，合理参照本操作规范，建立适宜本国中医医师能力测评的管理办法，不断提高中医药人才管理质量与水平，保障中医医疗服务水平与安全，为保障全球人民的健康作出更大的贡献。

二、标准内容

1. 范围
2. 规范性引用文件
3. 术语和定义
4. 一般规定
5. 测评分类
6. 测评方法
7. 测试程序和要求
Introduction of Test and Assessment Protocol of International Chinese Medicine Doctors

**Brief introduction**

The foundation of Chinese medicine talents standard system is an important part of the international Chinese medicine talents strategy. Test and assessment protocol of Chinese medicine doctors, which give the basic elements, indexes, contents and methods to test and assessment the acknowledges and clinical capability, is helpful in promoting the quality of Chinese medicine talents.

Aims to promote the international professional titles test and assessment onto the track of scientificationalization and standardization, Test and Assessment Protocol of International Chinese Medicine Doctors have been drafted base on the survey research and apply to the formulation regulation of the international standard.

The standard refers to the doctor management regulation of China, USA, Japan, UK and other country or regions. It also refers to the relative standards of WFCMS. The standard gives relative requirements to guide and regulate the test and assessment of Chinese medicine doctors.

The standard is in line with the SCM 0003-2009 World Standard of Chinese Medicine Undergraduate (Pre-CMD) Education (includes its annex A) and SCM 0040-2012 World Core Courses of Chinese Medicine Specialty.

Apply to the SCM 0008-2011 World Classification Standard for Professional Titles of Chinese Medicine Doctors, the standard classifies Chinese medicine doctors into assistant doctor, licensed doctor, specialist, senior specialist, and professor.

Written examinations and practical operations have been taking as main test methods. Paper and medical case record review. Thesis defense have been taking as main assessment methods in the standard.

The standard gives main contents, methods and procedures for relative assessment, examination and evaluation of Chinese medicine doctor that suite to most countries and regions.

**Contents of the standard**

1. Scope
2. Normative References
3. Terms and Definitions
4. Test
5. Examination and Evaluation
6. Checking

- 3.2 assessments
- 3.3 professional training
- 3.4 clinical practices
- 3.5 syndrome differentiation and treatment
4. Relative responsibilities
4.1 Test and Assessment organization
4.2 Test and Assessment organizer
4.3 Test and Assessment implementer
4.4 Test and Assessment subject
5. Test and Assessment classification
5.1 Test
5.2 Assessment
6. Methods
6.1 written examination
6.2 practical operations
6.3 review
6.4 Thesis defense
7. Processes and requirements for test
7.1 publishing general outline of the test
7.2 making Action Plan for the test
7.3 selecting test question designer
7.4 making clear the task for test question design
7.5 basic regulations for test question design
7.6 processes and requirements for test question design
7.7 question type
7.8 basic regulations for question review
7.9 question bank construction
7.10 making test paper
7.11 reviewing test paper
7.12 test paper bank
7.13 start using test paper
7.14 printing and keeping of test paper
7.15 statistical analysis
7.16 test transaction management
7.17 paper marking
7.18 records management
8. Processes and requirements for Assessment
8.1 application process
8.2 documents submitting
8.3 qualification review
8.4 peer review
8.5 thesis defenses
8.6 assessment result
9. Certificate management
世界中联关于贯彻落实世界卫生组织

传统医学战略（2014-2023）的决定

（讨论稿）

2011年5月19日至21日，在日内瓦召开的第六十七届世界卫生大会通过了《世界卫生组织2011-2023年传统医学战略》。该战略旨在建立各国传统医学政策知识体系，通过监管，保证传统和补充医学的服务和产品的质量、安全性和合理使用和有效性，以期最终将传统医学纳入各国卫生系统。该战略将进一步推动传统医学在世界各国健康有序发展。

中医药作为世界传统医学的重要组成部分，拥有完整的理论体系和丰富的临床实践经验。近年来，在临床、科研和教育等方面得到了迅速的发展。世界中医药学会联合会作为国际性学术组织，一直致力于推动中医药在世界各国、各地区的传播和发展，并根据《世卫组织2002-2005年传统医学战略》和《传统医学北京宣言》积极推进中医药的国际传播和标准化建设。

世界中联理事会号召各会员单位贯彻落实《世界卫生组织2011-2023年传统医学战略》并做如下决定：

一、凝聚海内外力量，整合专家资源，利用国际医药和专业委员会的平台，制定中医药知识库，实施专业委员配合世界中联完成与WHO合作的相关工作。

二、加强各专业委员会标准化建设，以保证中医药产品、实践和技术服务的质量，提高其有效性和安全性。

三、落实世界中联向世界卫生组织提出的未来3年的合作计划，该计划旨在利用世界中联国际医药和专业委员会的资源，以及在国际会议、标准化建设等方面取得的经验和成果，围绕WHO的2014-2023年传统医学发展战略的目标，积极与WHO开展合作，提供信息和知识和分析的服务。具体开展以下四个方面的工作：

1. 通过WCMC各级会议体系建设支持WHO促进其实施WHO 2002-2011-2023年传统医学战略

2. 支持WHO研发WHO全球手法疗法报告

3. 支持WHO研发WHO技术文件，包括传统和补充医学的标准、指南等

4. 与WHO合作对中医药信息进行收集和分析

让我们携起手来，为推动中医药和各国传统和补充医学的发展，为人人享有卫生保健的目标做出更大的贡献！

(Draft)

The 67th World Health Assembly adopted the “WHO Traditional Medicine Strategy 2014-2023” during 19-24 May 2014, in Geneva. The strategy aims to develop policy-knowledge system of traditional medicine in all member countries, ensuring the quality, safety, proper applications and efficacy of traditional and complementary medicine services and products through regulation, to integrate as appropriate traditional medicine into national health systems. It will further promote development of traditional medicine in a healthy and ordered way in the world.

As a major part of traditional medicine in the world, traditional Chinese medicine (TCM) has a completely theoretical system and rich experience in clinical practice. It has in recent years experienced rapid development in clinical practice, scientific research and education. World Federation of Chinese Medicine Society, an international academic organization, has been committed to promoting the spread and development of TCM in countries or regions in the world, and in line with "the WHO traditional medicine strategy 2002-2005" and the "Beijing Declaration on Traditional Medicine", actively advancing the international spread and standardization of TCM.

WFCMS Council calls on all member units to implement the "WHO Traditional Medicine Strategy 2014-2023" and decisions are as follows:

1. Develop TCM knowledge base by uniting people at home and abroad, integrating resources of experts, and using the platform of society member and experts committees; Manual Therapy Specialty Committee assists WFCMS to finish work relating to the collaboration with WHO.

2. Strengthen standardization of all the experts committees to ensure the quality of products, practice and technical services of traditional Chinese medicine and promote its safety, efficacy and easier access.

3. Implement the collaboration plan for next three years that WFCMS submitted to WHO. The plan aims to make the best resources of group members and all the experts committees of WFCMS, through the system of three-tiered academic conferences, based on the experience and achievements WFCMS has been making from the establishment of standards, and focusing on WHO Traditional Medicine Strategy 2014-2023, positively collaborate with WHO in collection, and analysis of information on traditional Chinese medicine. The collaborative activities are as follows:
   a) Support WHO in the promotion and implementation of WHO Traditional Medicine Strategy 2014-2023 through the three-level meetings of WFCMS.
   b) Support WHO in the development of WHO global report on manual therapy.
   c) Support WHO in the development of WHO technical documents including benchmarks, guidelines and standards on traditional and complementary medicine.
   d) Collaborate with WHO in collection and analysis of information on traditional Chinese medicine.

Let us work together to promote the development of traditional and complementary medicine and make more contribution to the goal of health for all.
Notification of New Society Members and Public Spirited Members of WFCMS for 2014

September 9th, 2014

Dear members of the Council and the Board of Supervision,

According to the article 7 and 8 of Chapter 3 of the Constitution of World Federation of Chinese Medicine Societies, five institutions, including Korea International TCM-Dr’s Friendship Association (South Korea), International Naturopathy Association of China (Hong Kong, China), Tien Hung Taiji-Wushu Association (Mauritius), Jian Wu Tang Traditional Health Center LTD. (Mauritius), Fortina Spa Resort (Malta), have passed the email-vote of the Third Council of WFCMS and hereby granted society member of WFCMS. And Mr. Mauricio Carnota Tack (Costa Rica), Mr. Ton Manh Cuong (Viet Nam), have passed the email-vote of the Third Council of WFCMS and hereby granted public spirited members of WFCMS.

World Federation of Chinese Medicine Societies
促进拉丁美洲国家的法规建设并提高其中医与针灸的质量

拉蒙·博士
世界中医学会主席、欧洲中医基金会会长

在拉丁美洲的 20 个国家中，针灸与中医药实施监理的只有葡萄牙、智利和墨西哥。在我看来，进行监理时最重要的是其专业性、严格性以及该行业内学校提供的教学水平，并进一步开展专业继续教育课程和研究生项目。这样一来，当监管真正来临时，那些在监管前就已经在从事业内工作的人类只有提供文件证据表明他们已实际拥有必要的水准，并能获得证书以继续从业。

至于监管应该如何实施，以我之见，中医药研究应该成为高等研究或大学学位。别的国家在毕业生项目这方面做得很好，尤其是世界中医药学会联合会的教育指导委员会。欧洲中医药基金会和CEMTC 在 EITC 的课程之下，该项目在不同国家专家人员都给予了帮助，并认为是国家标准最低限度。该项目有两个目标，特别是：影响不同国家对中医药及针灸的监管；同时促进中医药及针灸在不同国家的医院及国家卫生系统中基础护理中心的应用。

实际上，上述项目提供针灸生物能学硕士学位， FEWTC与CEMTC以此项目工作几年。此学位能考察训练有素的针灸师和执业医师。每个国家都以联机模式持续评估。

在拉丁美洲的针灸医生都可以获得硕士学位并拿到云南中医药大学的证书，而每个国家都有可能拿到当地大学的学位。

为了此硕士学位的推广和发展，拉丁美洲国家的学校建立协议。毕业生可以直接攻读此硕士学位，不需要先考的考试，并且不再需要学费和学费上的折扣。此外，还可以轻松地按月付款。

协议还指出中医药欧洲基金会为签署协议的三年间内所有需要的所有教材。可以看文中的宗旨是适用于不同国家的课程，而尽可能地将所有学校联系在一起，来帮助他们提升质量水平。

同时，签署协议的学校保证尽可能在最短时间之内开设达到国际标准的课程。如此，将督促在拉丁美洲不同国家的许多学校（目前有超过 50 所学校）都开展高水平的教育，培养出高技能的学生，进而使患者受益同时提高行业专业人员的诚信。

此项目还致力于让不同的政府采用国际标准的课程，促进针灸和中医药教学、实践的规范化。

针灸生物能学硕士学位是联合学位，与中国中西医学硕士结合，称为LMTC（中医与西医的结合）。

这有双重目的。一方面确保中医和西医对术语和概念的理解。另一方面是保证LMTC硕士学位攻读者的人数。

完成LMTC硕士学位攻读之后，将开展项目研究。针灸生物能学硕士会开展基线研究，攻读项目所设立的其他硕士学位的学生，将以中医整合医学为基础，在大学医疗中心或初级医疗中心做临床研究。

这些研究项目将基于拉丁美洲国家大学与云南中医药大学的国际合作。云南中医药大学为此项目派遣专门的医生，此外云南中医药大学的硕士证书也为毕业生参加这一国际研究项目提供了条件。

很明显，这些临床研究项目将应用在治疗病人。也是针灸和中国传统医学进入国家卫生系统进入拉丁美洲国家的开放。这些治疗（研究）的结果以及检查费用、病人的利益等因素确实会影响相关领导人的决策。

去年 10 月刚刚启动的项目无疑是令人期待的，将会在中期后显示它的作用。无论高水平的专家还是有威望的知识青年都会向国家健康系统介绍中医药及针灸对公民的好处，因为这将提升他们的声誉。
World Federation of Chinese Medicine Societies

The Sixth Meeting of the Third Council and the Fifth Meeting of the Third Board of Supervisors

Project of European Foundation of TCM to promote the regulation and raise the quality of acupuncture and Chinese Medicine in Latin American countries

(Proyecto de la FEMTC para fomentar la regulación y elevar el nivel de calidad de la acupuntura/TMC en los países latinoamericanos)

Dr. Ramon Maria Calduch
President of European Foundation of TCM
Chairperson of the Board of Supervisors of WFCCMS

Between the twenty Latin American countries there is regulation on acupuncture / TCM only in Portugal, Chile and Mexico. For now, while the regulation comes, from my perspective, what is important is the professionalism, seriousness and the level of studies of the schools in the industry, and to progress in specialized continuing education courses and post graduate programs, so that when the regulation comes, documented evidence can be provided by whom are practicing, before this regulation, to prove the acquired level and to obtain the license to be allowed to continue working.

As to how regulation should be, known is my position that the Chinese medicine studies should be a Higher studies or University Degree, as well it is shown from the reality of other countries and, especially, of the position of Educational Instruction Committee of WFCMS, regarding graduate programs. And it is based on curriculum developed by this EIC, supported by expert members from different countries and is considered international standard minimums, the European Foundation of TCM and CEMETC have launched a project that has a dual purpose: to influence the regulation of acupuncture and traditional Chinese medicine in different countries, in the fine above indicated, and also boost the practice of acupuncture and TCM in hospitals and primary care centers of the National Health Systems of the different countries in the world.

Indeed, the aforementioned project, in which FEMTC and CEMETC have been working for several years, is the provision of the Masters of Bioenergetics Acupuncture and Moxibustion that may study trained acupuncturists and practitioners, which will be conducted in online mode with a system of continuous assessment and final exam in each country.

This Masters will be held for all acupuncturists in Latin America and will have a certification of Yunnan University of TCM in China and possible degree from a local university in each country, with which there is agreement.

For the promotion of the said Master there is engagement with schools from different Latin American countries, with which a convention is established, by which its alumni can access the Master without prior examination and a scholarship/discount on the cost, besides being able to pay in easy monthly installments.

The agreement also provides that the European Foundation of TCM provides to signatory schools all teaching materials for their studies of four years duration, for free, as well as the 40 books he has published, at cost price, thereby demonstrating that its will is not to be implemented as a school in different countries, but to collaborate with most schools as possible to help them raise their level of quality.
In return, schools that signed the agreement undertake to adopt in the minimum possible time, the curriculum established for achieving international standards, thus, a high level of education in many schools in different countries of Latin America (currently there are more than 50 schools), which is to result in the attainment of a high level of training of their students for the benefit of patients and the prestige of industry professionals.

It is also intended that the different governments adopt international standard curriculum in regulating the teaching and practice of acupuncture and TCM.

The said Master of Bioenergetics Acupuncture and Moxibustion is established as a binding master to take other masters that are taught in Chinese integrative medicine, called IMTC, (combination of Western medicine and acupuncture / TCM).

This is with the dual purpose of ensuring terminological and conceptual understanding among practitioners of the two medicines on the one hand and on the other, ensuring that the level of the participants in the later masters of IMTC is adequate.

Subsequent to the completion of such masters in IMTC, programs of research will be established, which in the case of Master Acupuncture Bioenergetics will be baseline research and other Masters programs established will be clinical research in university hospital centers and / or Primary Care Centers, based on Integrative Chinese Medicine.

These research programs will be established in international collaboration between local universities from Latin American countries and Yunnan University of TCM, which would provide specialist doctors in the matter. Hence the need for certification of masters from this university in China, which will enable its graduates to participate in such international research programs.

Obviously these clinical research programs are carried out by treating patients and will be the way to enter, thanks to research, acupuncture and TCM in the national health systems of different Latin American countries. The results of these treatments (research) and other factors such as the cost thereof and the benefit to patients, will certainly influence the decisions of politicians on the issue at hand.

This is undoubtedly an ambitious project that has just started last October and which will display the results in the medium and long term, both in the level of professionalism and prestige of the existing school graduates, as its influence on the regulation, which certainly would have on the different countries, and in terms of its introduction in the National Health System for the benefit of citizens.

I would like to add here that it is planned to carry out an annual meeting between all schools and universities collaborating on the project, to exchange views on the evolution of it, to contribute with ideas and evaluate results, a matter which would undoubtedly lead to greater collaboration between schools from different Latin American countries, with some common programs and about equally similar interests, not only to facilitate the exchange of experiences, but also international collaboration between them, on their own initiative.
中医在西方国家传播的障碍：思考与建议

卡洛·玛丽亚·乔万纳第
世界中医药学会联合总会副主席

在过去的几十年中，中医以不同的形式在西方国家传播。中医快速传播的原因是多方面的。首先，在于中医药疗效，尤其是慢性病的治疗中显见优势。如在疼痛的治疗中，中医比药物疗法需要更短的治疗时间，治疗花费较少且副作用小。

第二，中医学的整体观，中医把人、疾病和治疗视为一个整体，这不同于西医分科看病的方法。

第三，中医药在欧美国家的兴起，促进了中国文化和中医的传播。

中医药在西方获得了发展，但同时它的进一步传播也面临了障碍，总结如下：

1. 西医医学界有很大一部分人并不接受中医，一些西医医生认为中医治疗是不科学的，使用的语言无法让人理解。
2. 有些草药被认为是无用的，或危险的，妨碍西医疗法。
3. 针灸的功能被认为只是安慰剂效应，所以它只对疼痛的治疗有效。

因此，要想在西方国家推广中医，需要首先获得西方医学界的认同，创建中西医结合协作的基础。要重视高质量的临床研究，需要遵循现代的科研方法标准，更需要尊重中医本身的特色。例如，要说明针灸疗效不需要有假针刺对照或安慰针刺对照（这些对照组并不是没有用的），而是它需要与常规治疗组相比较，来说明它在相同的效率下有更多的副作用。

可见，用研究来证明中医药疗效是重要的。在西方国家的医疗费用之高已经难以承担人口老龄化及新疗法推广的更多需求。我们要努力证明中医，特别是针灸，在一些重要的对社会有较大影响的疾病（如疼痛、头痛）中能够以更低的费用获得更好的疗效。

鉴于此，我们希望进一步推动和传播，建议设立一个全球中医日，使得世界各国都有机会了解和认识中医。

"Obstacles for the diffusion of TCM in western countries: reflections and proposals"

Carlo Maria Giovanardi MD
President Italian Federation of Acupuncture Societies (FIASA)
Vice President Pan European Federation of TCM Societies (PEFTOS)
Vice Chairman of World Federation of Chinese Medicine Societies (WFCCM)

In the last decades the Traditional Chinese Medicine in all his shapes had his diffusion in all Western Countries. Numerous are the reasons for this rapid developing. First, the efficacy for the treatment of many diseases, in particular the chronic ones like the pain diseases that require pharmacologic treatment for long time, expensive and rich in adverse effects.

Second, TCM has the holistic idea of the man, of the disease and of the treatment, against the specialist
approach of the Western Medicine.

Third, the presence of big Chinese community in several Western Countries that carries his culture and permits his diffusion.

Although this development, until now there are obstacles to TCM expansion, here summarized:

- A big part of the Western medical class doesn’t accept it. Some Western doctor consider TCM as a not scientific treatment, that uses an incomprehensible language;
- Sometimes the herbs are supposed to be useless and/or dangerous and can interfere with Western therapies;
- The functioning of the Acupuncture is supposed to be related only to the placebo effect, so it is considered useful only for pain diseases.

Then, if the objective is the diffusion of TCM in Western Countries, it’s necessary firstly to obtain the acceptance from the Western medical class, to create the bases for an integrative medicine.

To make this, it’s important to increase the clinical research, specially the high quality one.

The clinical research has to respect the characteristic of TCM, even if it needs to follow the criteria of the modern method.

For example, the efficacy of Acupuncture doesn’t need to be compared with the sham acupuncture (demonstrated not inert), but it requires to be compared with the usual care to show the more useful treatment and, in case of similar efficacy, to underline the advantages in terms of less adverse effects.

At least, it’s important to produce research to show the good cost-efficacy of TCM. The costs of healthcare in Western Countries are reaching levels that cannot be accepted for different causes, like the ageing of the population and the new therapies. In particular for Acupuncture, the objective is to demonstrate that it’s cost-effective in some important social diseases like low back pain and headache.

Regarding the promotion and the diffusion of information, the proposal is to institute a TCM world day to have an occasion of TCM knowledge for all the population.
中医在西方医学和社会中的地位

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1 从在西医院进行中医临床研究谈起
1) 两难相逼的机遇和危险
西医之难：对非感染性疾病、慢性疾病，自身免疫等疑难疾病。认识的“空白”和治疗方法的匮乏，医患双方都在寻找解决办法。
中医之难：如何走向世界为主流医学承认和接受
寻找一个单味中药，将其转变成一个化学分子结构以利大规模的生产运用，是否会威胁中医的医学方药的严谨整体结构？
中医是否会被肢解为片断的、散乱的知识，技术，脱离其原发基础，不被作为一个整体认识和接受？
2) 临床评价的方法和标准
缺法在中西医临床疗效评价中的局限性。
中医临床特点和将经验上升为理论的主要方法：各家学说专家经验
3) 中西医学交流的途径和意义
和而不同的临床思维，知己知彼借有攻玉的双剑思维，双赢共进的镜像思维。

2 对中医被纳入补充医学的质疑
1) 什么是补充医学？顺势疗法、针灸或整脊疗法、心理疗法、足反射疗法、心理疗法等等
2) 中医是一个独立于上述补充医学的独立体系
以经典为依据的比较完备的理论体系；持续几千年为国家认可的临床、教育、科学基础的综合预防治疗手段。研究机构。

结论
中医在西方医学和世界中的地位
1. 综合运用中医多种手段，或者与西医方法结合，对治疗当代优势
疗效独特，减少副作用，提高治疗质量，降低治疗费用。
2. 中医的特有理念和方法的特殊社会效应
简便易行，大众受益，带动中医进入医疗保健。

TCM status in western medicine and society

Prof Zhu Wansheng, Prof J-R ATTMA

1. Starting from doing TCM clinical researches in western medicine hospitals
1) Two difficulties
   Difficulty in western medicine
   Lack of understanding of and treatment on non-infectious diseases, chronic diseases and autoimmune diseases.
Both doctors and patients are seeking solutions for solving these problems. Difficulty in traditional Chinese medicine
How to make traditional Chinese medicine accepted by mainstream medical field. If a single herb is transformed into a chemical molecule so that it can be produced in a large scale, will it affect the unity of the "principles, methods, formulas and medicinals" system? And will traditional Chinese medicine be thought of as an inconsistent system just for practical use instead of a whole system on its own original theoretical basis?

2) Methods and criteria for clinical assessment
Limits of blinding method in clinical efficacy assessment.
Traditional Chinese medicine clinical features and major methods to transform experience to theory: theories of different schools, expert advice

3) The meaning of blending traditional Chinese medicine and western medicine
Multiplication effect
Reversed transmission effect
Mirr r effect

2. Questions on the practice that traditional Chinese medicine is included in complementary medicine
1) What is complementary medicine?
Homeopathy, osteopathy or chiropractic therapy, psychological therapy, foot reflexology, psychotherapy, etc.

2) Traditional Chinese medicine is quite different from complementary medicine mentioned above.
A relatively complete theoretical system based on classical materials
Approved in China as useful clinical treatment and education
Comprehensive prevention and treatment
Research institutes
Conclusion

TCM status in western medicine and society

1. The advantage of applying as many as treating methods in traditional Chinese medicine or combining TCM with western medicine.
   - Unique efficacy
   - Reducing toxic reaction or side effect
   - Improving quality of life
   - Reducing expense on treatment

2. Special social effect of both the idea and methods of preserving one’s life
   - Convenient and inexpensive
   - Benefit too many people
   - Bring TCM into medical assurance
The Status and Promotion of the Pulse-taking

Professor Chijing Liu (Australia)
The President of Pulse Manifestation of WFMMS

Abstract: Pulse diagnosis plays a critical role in Chinese medicine's clinical practice. This article reviews the last 5 international conferences on pulse research. It also introduces ten of main pulse schools, including Shou’s psychological pulse, Xu’s micropulse, Jin’s pulse, S-shape vibration pulse, Huang’s pulse, Banque’s pulse diagnostic method, 25 pairs of pulse essentials, acupuncture and pulse diagnostic method, paediatric pulses, and exhaustion pulses. These ten pulse schools are discussed from their representatives, basic theories, characteristics to their importance on clinical applications. In addition, this article focuses on the clinical application of different pulse schools by analysing real cases and highlights the significance of pulse diagnosis in clinical practice. Validity and reliability of pulse diagnosis and its underlying mechanisms should be investigated using modern techniques in the future research.

Keywords: Pulse diagnosis, Pulse School, Pulse with Clinical Practice

一、脉诊各学派介绍

1. 世中脉象研究专业委员会的成立

第一届国际脉象学术大会

世中脉象研究专业委员会于2010年4月16-19日在中国山东济南成立。世中脉象研究专业委员会的成立，是中国历史上第一次由专门研究脉学的专家组成的专业委员会，这是过去中医历史上从来没有过的。它的成立意义重大，必将引发中医的研究走向一个新的里程碑。脉象学研究的突破将会带领中医药研究走上一个新的台阶。

首次大会的参会人员分别来自7个国家和地区的100多名，表现出了大家对中医脉诊的学习热情。参会的脉象专家中有中医药大学的博士导师、硕士研究生、博士研究生，传统脉象研究者、创新性微观全息脉象研究者、原创性心理脉象研究者、脉传族医脉诊法和S震荡脉诊法等，脉诊技法和特点各不相同，可以说是脉诊研究领域精英的一次大聚会，脉诊研究成果的展示，大会的脉象研究者和爱好学习者提供了一次相互交流的平台，交流学习很好的机会。这是首次国内外脉象学派的代表齐聚一堂，它们的演讲代表了目前国内外脉象研究的最高水平和最新的成果，以及最新的进展。会议设了与会代表公开交流，发表论文和与会代表代表收获非常大。本次会议收到学术论文56篇。

第二届国际脉象学术大会

第二届国际脉象大会于2011年4月9-10日在陕西省西安市举办。由陕西省中医药学院主办，此次大会有来各个国家和地区的代表100多人参加。开幕式场面隆重有各方代表中医药学院学生一共200多人参与，会议吸引了各个国家的专家发言之外，还设了S震荡脉诊的工作坊，由该学派创始人之一的先生的夫人王永民医
世界中医药学会联合会"世界中医药学会联合会国际学术年会"于2014年4月18日-20日在中国北京召开。与会代表来自中国、澳大利亚、新加坡、马来西亚、日本、泰国、法国、中国台湾、中国香港等国家和地区的1800余人参加了会议，其中境外人数达50人。

本次会议收到学术论文56篇，经筛选，审定，最终由《世界中医药学会联合会</p>
世界中医药学会联合会
第三届第六次理事会与第五次监事会会议

权威脉象研究专业学术交流平台的空白，对传统中医脉学的发展具有重要意义，是当代脉学发展史上的重要里程碑。

2. 脉诊研究的主要学派介绍

1) 寿氏心理脉学

由北京寿小云教授首创的寿氏心理脉学，具有非常独特的脉诊方法，寿氏脉学分为心理脉和病理两大部分类，寿氏在心理脉和病理的定位上有很明显的特点，提出了心理脉和病理外的候脉方式，特别是心理脉的候脉方式非常独特和有代表性。寿氏脉学的理论基础约源于中医传统的基础理论，根据《内经》、《难经》、《脉经》等中医学典著作结合现代医学对脉象的认知研究而来，是现代脉学界的代表之一。如《内经》中说：“察其有无，知出者病，知入者病”，寿氏脉学的理论是寿氏脉学的依据。其在中医诊断上彰显，拓宽了现代中医诊断的发展新思路和临床价值观。我们在组织寿氏脉学在国内的推广过程中，许多中医师很快掌握了心理脉的脉诊方法，临床效果非常好，对病人心情状况的分析易于显示，使患者心安口服。

2) 许氏微观脉象

安流变脉，西医出身，擅长中医世家，潜心研究脉学三十余年。由于有西医的功底，以及自已管理的一所西医院，在脉学研究过程中通过大量的观察，B超诊断，CT，MR等诊断验证，对脉诊的准确性进行验证，大大提高了临床脉诊的准确性。根据现代医学的血液流变学和神经生理的理论，开创了许氏微观脉学的先河。其理论基础得到了现代科学的验证，是一个非常重要的脉学理论，可以说是中医脉诊的一个飞跃性的发展，与寿氏心理脉学并驾齐驱。另一个以著名中医脉学理论为基础（寿氏），另一个以经典中医脉学理论为基础（许氏），均创造出与众不同的脉学理论，值得我们进行深入的学习和研究。

许氏微观脉学的脉象被分为脉诊的二次诊断，在脉诊的最关键是脉的脉形、许氏脉学的基本理论是：“脉有心”，在寸、关、尺三部，上下六个层次发现脉象即为病脉，许氏脉诊在临床上的诊断性也是非常有效的和准确的。经过系统培训，许多医师在临床都可以不同程度的做出疾病的所在。

3) 金氏脉学

金氏脉学的基本理论是“脉病统一”的原理，从血液动力学的角度探讨疾病的统一性，提出脉诊统一性实际上是本质和现象的对应，并在临床实践中得到了很好的验证。列入国家“973”重点科研项目，金氏脉学是以现代医学理论为基础，吸收了传统中医整体观、辨证观的理论思想，以脉诊为手段，以数学化工具，结合现代科技，结合临床实践建立发展起来的，对疾病能够做出定位、定性、定量的独立诊断理论。金氏脉学不同于传统中医，又不同于现代西医的一门新科学，认为“有其脉必有其病，有其病必有其脉”。

4) 韦氏振荡医学脉诊

创始人是河南省医院，我们曾经举办过一期工作坊以及两次系统培训，在国内外的影响很大，特别是国外，目前还在筹备设立海外馆，要求进入该馆的医师必须接受一次培训，有韦氏振荡中医的老师们点评，使得大家进步非常快。韦氏振荡中医的特点是：脉诊用药，脉诊，脉诊，无药，随机：由于直接把脉象和用药对应起来，不论何病，对脉诊即可改善病脉，使得处方用药简捷有效，脉诊治疗一气呵成，由于脉诊精准，处方精当，不仅疗效快捷而且用药少，看脉诊用药，药味不多几十味药，候脉脉诊和药诊，给药后3-5分钟立刻再候脉，或者在根据脉的变化，再给药。同时包括凭脉象用针，用药同对，出现什么症状施治脉率定的穴位，疗效神奇。韦氏脉象以八纲为基准，同时参考脉内外的脉感，将脉分为阴阳，寒热，湿热，虚实，病痛疾病，对指导临床用药十分有效。我们在临床实际操作中，常常在病人诊脉期间，随机给病人诊断，往往在取针时，病人已经好转或痊愈。对于一些慢性，恶性疾病采用此法也大大提高了疗效。

5) 黄氏一脉脉诊

黄氏脉诊的定位不同，向后一个把脉，这可能与黄氏家族所在的云南靠近西藏地区有关，有类似藏医，印度医的定位。黄氏的脉诊方法是依据命脉、血管、血液和外力这四个因素的联合作用也称为四种要素，探索出来的定位脉组，通过外力使诊断部位的血管位置变动、血管变形、血管管腔变形、血液流速减
6）扁鹊脉法

扁鹊脉法由医学家扁鹊所传，脉法的传承和发展可追溯到春秋时期。脉法是通过观察患者脉搏的特征来诊断疾病的方法。扁鹊脉法在后世的发展中，形成了多种治疗方法，如切脉、望色等。

7）系统辨证脉学（即 25 对脉象要素）

系统辨证脉学是中医脉学的一个重要组成部分，它将脉象分为二十五对脉象要素，每对脉象都有其特定的诊断意义。通过对脉象的辨证，可以更准确地判断病人的病情。

8）小儿脉象的研究

小儿脉象是中医脉学中的一个重要部分，它是指儿童的脉象特征。小儿脉象的研究，对于中医儿科的诊断和治疗具有重要的意义。小儿脉象的特点主要表现在脉象的节律、力量和容量等方面。

10）绝脉的临床研究

绝脉是脉学中的一个特殊脉象，它是指脉象完全消失的情况。绝脉的临床研究，对于理解脉象的生理变化和病理变化具有重要的意义。研究绝脉的临床表现和治疗方案，对于提高临床治疗效果具有重要的作用。
世界中医药学会联合会

第三届第六次理事会与第五次监事会会议

每两月必须发表一个病例，然后由带教老师评议，修改指正，特别是跟诊中医的几位老师，非常细心地评价每一个病例，使得学员们提高的非常快。

3. 脉象研究研究的现状

在中国大陆脉诊研究尚未得到充分的重视，多数以民间培训为主，脉象研究专业委员会成立于五年前，在国内积极向各大专院校推广，向各大医院举办。同时积极在中国大陆以外宣传推广和教学，形成一个在国内外发展的热潮，可以是中国大陆以外非常热，而中国大陆以内正在逐步认识脉诊的重要性这样一个局面。我们采取的策略是以国外促国内的方式。通过学徒，用于临床让中医师真正体会到了手把手指导脉诊技巧的奥妙，让大家建立起深入研究脉诊的热忱。

4. 我们的工作方向

完善一部脉诊教学大纲，以田中联为平台，积极向各大专院校推广，并向各级医院提供在职医师的培训。

建立教学培训基地，培训基础教学的在职医师和各级医院的在职医师。

教学大纲以由东中医药大学合作教授的脉诊学中的25对脉象要略为基础知识，附脉诊各科学说，让大家充分了解和学习各脉法，风火克金。

5. 中医科研思路

中医的科研如何进行。目前许多中医科科研人员，在中药药理研究方面一直试图在寻找中药的有效成分，但目前为止中药的单味药是哪些成分在发挥效果都搞不清楚，更谈不到中药复方是有什么在起作用了。通过临床研究我们知道，中药在放入炉子火候中的三泡和，针灸等进入皮肤，甚至放在皮肤上的时候，人的脉象就开始变化，这一点经过一些脉诊专家的验证已经得到了验证。因此我们认为中药的作用，绝对不是靠一些简单的化学成分来起作用的，它即经过一系列的信息到物理到化工的途径来发挥作用的，首先发挥作用的是信息，是信息，这个信息包含有植物的气味、颜色，人体的脉象感知等，这就是我提到的气，当植物的信息与人体疾病的信息达到一致的时，人体自我调节的机制就开始发挥了它的作用，疾病也就在瞬间得到治疗。因此研究和采集人体的信息，和信息也就是通过使用中医的望闻问切，以及植物的四气五味这一系列的信息来平衡人体，疾病则一定能够治愈。在日本，用针灸脉诊治疗疾病是非常普通的，那些脉诊医师，通过脉诊取得病人的健康信息之后，将针刺入相应的穴位或者仅仅在穴位面的皮肤上即可调节人体病的信息，从而达到治疗疾病的目的。

6. 小结

中医历经二千多年而不衰，就是因为在自己一套完整的理论体系，医源于易，易变难分开，过去许多年不知道为什么许多精华的东西被当作了一般论道，而被民间悄悄地保留下来，许多有识之士正在不断的挖掘、创新，在我们的脉象研究专业委员会里，许多脉诊大师就是这样默默无闻的耕耘着。脉针的发明被大家公认为是一项伟大的发明，它打破了传统中西医的思维方式，使易学思维为指导，将复杂的疾病简单化，常常一针即可解决复杂的疾病。其实中医本不复杂，而是后人将其复杂化了罢了。

中药有没有这么好的体系和思维方法，有这么准确的用药和用药法，为什么许多人要跟随西医药的路子走呢，为什么不自己走出我们自己的路来，为什么要去顺应西医的思路来让他们读我们的中医，而不是要教会他们用我们的思路来认识中医，让他们跟随我们的思路来研究和发展中药医学。这值得我们中医药研究者重新思考中医的一个启示，中医是建立在医疗活人的基础上的，这其中有包括了天、地、人三个方面，人离开了生活的基础，我们头顶上这片天是无法生存的。

参考资料
1. 《SS 中医学院》作者韦犁
2. 《中医脉诊之源》作者韦犁
3. 《联系 E-mail: xjin888@hotmail.com》
第十二届世界中医药大会

主办：世界中医药学会联合会
承办：西班牙欧洲中医药基金会
时间：2015年9月
地点：西班牙·巴塞罗那
规模：1000人左右

议程：开幕式、主题演讲、分会场专题研讨、工作坊演示、欢迎晚宴、世界中联会员代表大会、第九届中医药服务贸易展览会、闭幕式等

工作语言：中文、英文、西班牙文（主会场配备同声传译）

注册费：含大会资料、论文集、茶歇、午餐、晚宴等
2015年3月31日前：500欧元/每人
2015年5月31日前：680欧元/每人
2015年6月1日以后：760欧元/每人

重要日期：
2014年10月1日：开始报名、收取论文；
2015年6月1日：大会注册费优惠结束；
2015年6月30日：大会论文投稿截止

大会咨询、报名：
世界中医药学会联合会
联系人：陈华(女士)、杨柳(女士)、
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The 12th World Congress of Chinese Medicine

Organizer: World Federation of Chinese Medicine Societies
Host: Fundación Europea de Medicina Tradicional China
Time: September 2015
Location: Barcelona, Spain
Scale: About 1000 people

Agenda: Opening Ceremony, Keynote Speeches, Parallel Sessions for Special Reports, On-site Display Workshops, Welcoming Banquet, General Assembly of WFCMS, The 9th TCM Trade in Services Expo, Closing Ceremony etc.

Working Languages: Chinese, English and Spanish (Simultaneous Interpreters at the main congress)

Registration fee: Including Congress Materials, Conference Proceedings, Coffee Breaks, Lunches and Evening Banquet etc.
Before 31st March 2015, 500€/person
Before 31st May 2015, 680€/person
After 1st June 2015, 760€/person

Important Dates:
- 1st October 2014: Start enrolling, collect paper.
- 1st June 2015: Deadline for discounted registration fee.
- 30th June 2015: Deadline for paper submission.

Consultation and registration for the Congress:
World Federation of Chinese Medicine Societies

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