



FIFTY-SIXTH WORLD HEALTH ASSEMBLY

WHA56.31

Agenda item 14.10

28 May 2003

Traditional medicine

The Fifty-sixth World Health Assembly,

Recalling resolutions WHA22.54, WHA29.72, WHA30.49, WHA31.33, WHA40.33, WHA41.19, WHA42.43 and WHA54.11;

Noting that the terms “complementary”, “alternative”, “nonconventional” or “folk” medicine are used to cover many types of nonconventional health care which involve varying levels of training and efficacy;

Noting that the term “traditional medicine” covers a wide variety of therapies and practices which vary greatly from country to country and from region to region;

Being aware that traditional, complementary, or alternative medicine has many positive features, and that traditional medicine and its practitioners play an important role in treating chronic illnesses, and improving the quality of life of those suffering from minor illness or from certain incurable diseases;

Recognizing that traditional medicinal knowledge is the property of communities and nations where that knowledge originated, and should be fully respected;

Noting that the major challenges to the use of traditional medicine include the lack of organized networks of traditional practitioners, and of sound evidence of the safety, efficacy and quality of traditional medicine; and the need for measures to ensure proper use of traditional medicine and to protect and preserve the traditional knowledge and natural resources necessary for its sustainable application, and for training and licensing of traditional practitioners;

Noting further that many Member States have taken action to support the proper use of traditional medicine in their health systems,

1. TAKES NOTE of WHO’s strategy for traditional medicine, and its four main objectives of framing policy, enhancing safety, efficacy and quality, ensuring access, and promoting rational use;
2. URGES Member States, in accordance with established national legislation and mechanisms:
 - (1) to adapt, adopt and implement, where appropriate, WHO’s traditional medicine strategy as a basis for national traditional medicine programmes or work plans;

- (2) where appropriate, to formulate and implement national policies and regulations on traditional and complementary and alternative medicine in support of the proper use of traditional medicine, and its integration into national health-care systems, depending on the circumstances in their countries;
- (3) to recognize the role of certain traditional practitioners as one of the important resources of primary health care services, particularly in low-income countries, and in accordance with national circumstances;
- (4) to set up or expand and strengthen existing national drug-safety monitoring systems to monitor herbal medicines and other traditional practices;
- (5) to provide adequate support for research on traditional remedies;
- (6) to take measures to protect, preserve and to improve if necessary traditional medical knowledge and medicinal plant resources for sustainable development of traditional medicine, depending on the circumstances in each country; such measures might include, where appropriate, the intellectual property rights of traditional practitioners over traditional medicine formulas and texts, as provided for under national legislation consistent with international obligations, and the engagement of WIPO in development of national *sui generis* protection systems;
- (7) to promote and support, if necessary and in accordance with national circumstances, provision of training and, if necessary, retraining of traditional medicine practitioners, and of a system for the qualification, accreditation or licensing of traditional medicine practitioners;
- (8) to provide reliable information on traditional medicine and complementary and alternative medicine to consumers and providers in order to promote their sound use;
- (9) where appropriate, to ensure safety, efficacy and quality of herbal medicines by determining national standards for, or issuing monographs on, herbal raw materials and traditional medicine formulas;
- (10) to encourage where appropriate the inclusion of herbal medicines in national essential drug lists, with a focus on a country's demonstrated public health needs and on verified safety, quality and efficacy of herbal medicines;
- (11) to promote where appropriate traditional medicine education in medical schools;

3. REQUESTS the Director-General:

- (1) to facilitate the efforts of interested Member States to formulate national policies and regulations on traditional and complementary and alternative medicine, and to promote exchange of information and collaboration on national policy and regulation of traditional medicine among Member States;
- (2) to provide technical support for development of methodology to monitor or ensure product quality, efficacy and safety, preparation of guidelines, and promotion of exchange of information;

- (3) to provide technical support to Member States in defining indications for treatment of diseases and conditions by means of traditional medicine;
- (4) to seek, together with WHO collaborating centres, evidence-based information on the quality, safety, efficacy and cost-effectiveness of traditional therapies so as to provide guidance to Member States on the definition of products to be included in national directives and proposals on traditional-medicine policy as used in national health systems;
- (5) to organize regional training courses where appropriate on quality control of traditional medicines;
- (6) to collaborate with other organizations of the United Nations system and nongovernmental organizations in various areas related to traditional medicine, including research, protection of traditional medical knowledge and conservation of medicinal plants resources;
- (7) to promote the important role of WHO collaborating centres on traditional medicine in implementing WHO's traditional medicine strategy, particularly in strengthening research and training of human resources;
- (8) to allocate sufficient resources to traditional medicine at global, regional and country levels of the Organization;
- (9) to report to the Fifty-eighth World Health Assembly, through the Executive Board, on progress made in implementing this resolution.

Tenth plenary meeting, 28 May 2003
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