

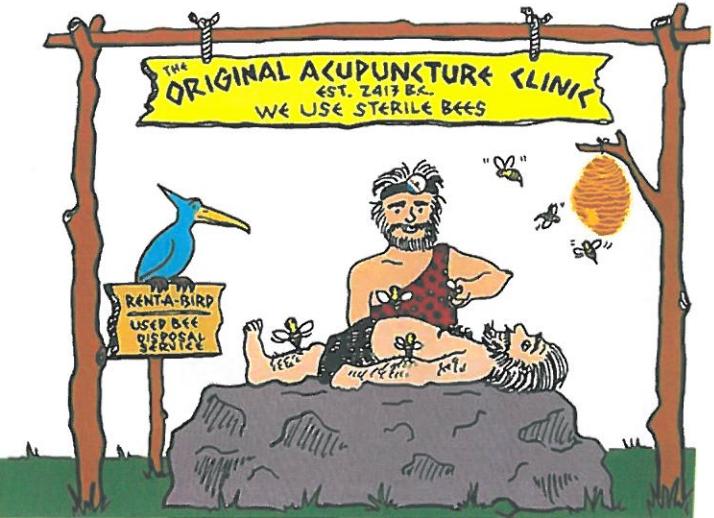


A CAM nemzetközi és hazai helyzete

Szabályozás és javaslatok

Dr. Hegyi Gabriella MD, PhD.

PTE ETK, FIZIOTERÁPIÁS ÉS TÁPLÁLKÖZSTUDOMÁNYI INTÉZET,
Komplementer Medicina Tanszék



Clifford Pang Hospital, Guangzhou, Kina



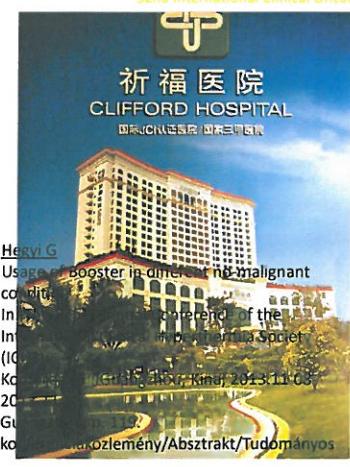
Clifford Pang Hospital, Kina



Clifford Pang Hospital, Guangzhou, Kina



Kina, Guangzhou-2013.nov. 7-10,
32nd International Clinical Oncotherapy (ICSH) and WFCMS Congress.



Schedule today

- CAM: definition(s)
- “CAMbrella”, pan-European project, 2010-2012
- International summary
- Domestic situation
- What to do? Possibilities...
- Perspectives (*study-exam-permission-control-further education, e.t...*)

What is Complementary Medicine /CAM?

Complementary medicine includes all such practices and ideas which are outside the domain of conventional medicine in several countries and defined by its users as preventing or treating illness, or promoting health and well being.

These practices complement mainstream medicine by

- 1) contributing to a common whole,
- 2) satisfying a demand not met by conventional practices, and
- 3) diversifying the conceptual framework of medicine

(definition by Cochrane Complementary Medicine Fieldm 2005)

3

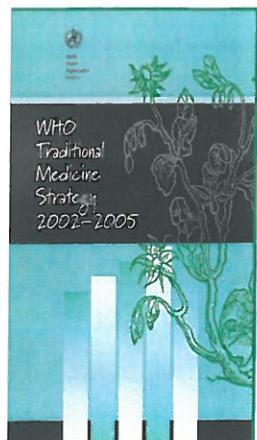
What is Complementary Medicine/CAM?

- Complementary and Alternative Medicine (CAM) is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine.
- Complementary Medicine is used in conjunction with conventional treatment
- Alternative Medicine is used as substitute for conventional treatment (where conventional treatments do not exist for the problem, where they are contraindicated, not tolerated or are unable to offer relief).

(definitions by National Center for Complementary and Alternative Medicine, USA, 2012)

4

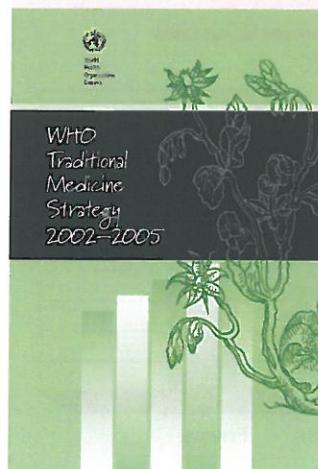
WHO Traditional Medicine Strategy 2002-2005



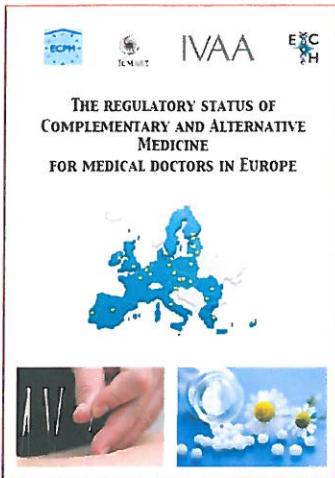
- 1 Policy:** integrate TM/CAM with national health care systems
- 2 Safety, efficacy and quality;** provide evaluation, guidance and support for effective regulation
- 3 Access:** ensure availability and affordability of TM/CAM, including essential herbal medicines
- 4 Rational use:** promote therapeutically-sound use of TM/CAM by providers and consumers

(Strategy re-enforced for 2004-2007)

The WHO and the CAM

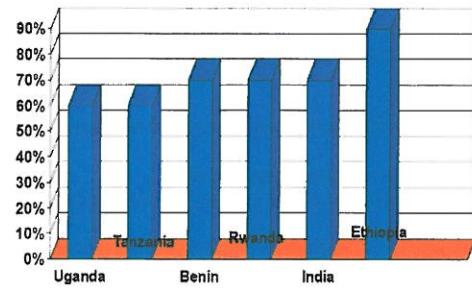


- The main objectives of the WHO:
- To facilitate integration of traditional medicine into the national health care system by assisting Member States to develop their own national policies on TM.
- To promote the proper use of TM by developing and providing international standards, technical guidelines and methodologies.
- To act as a clearing-house to facilitate information exchange in the field of TM/TCM



Use of TM/CAM World-wide

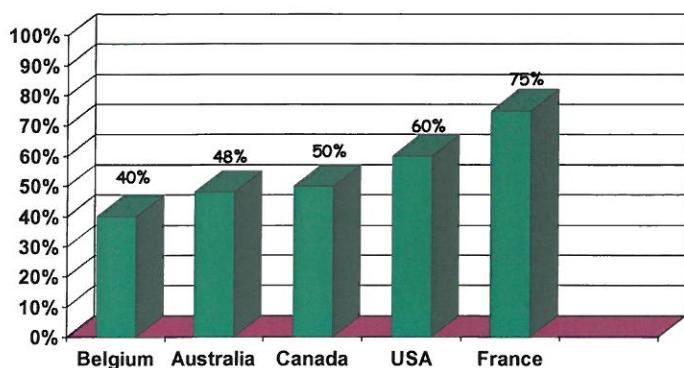
Population Reliance for Primary Health Care



D. Eisenberg, (Harvard Medical School) Trends in Alternative Medicine Use in the United States, 1990-1997: Results of a Follow-up National Survey. JAMA: The Journal of the American Medical Association Issue: Volume 280(18), 11 November 1998, pp 1569-1575,

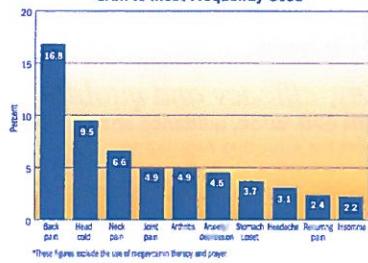
Use of TM/CAM World-wide

Population in Developed Countries Using CAM - at least once -



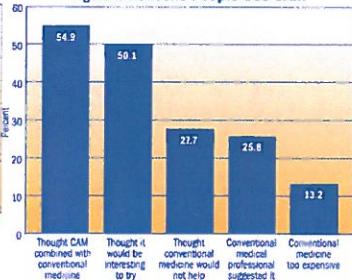
Why use CAM?

Figure 6. Disease/Condition for Which CAM Is Most Frequently Used*

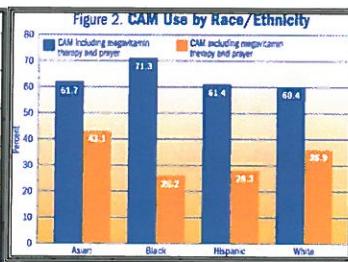
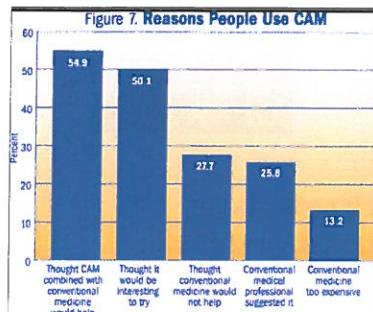


Susan Eardley, Felicity L Bishop, Francesco Cardini, Koldo Santos-Rey, Mieko Jong, Sorin Ursu, Simona Dragan, Gabriella Hegyi, Jorge Vas
A pilot feasibility study of a questionnaire to determine EU-wide Complementary and Alternative Medicine (CAM) use.
FORSCHENDE KOMPLEMENTÄRMEDEZIN 19(6) pp. 14-27. (2012), IF:1,66

Figure 7. Reasons People Use CAM



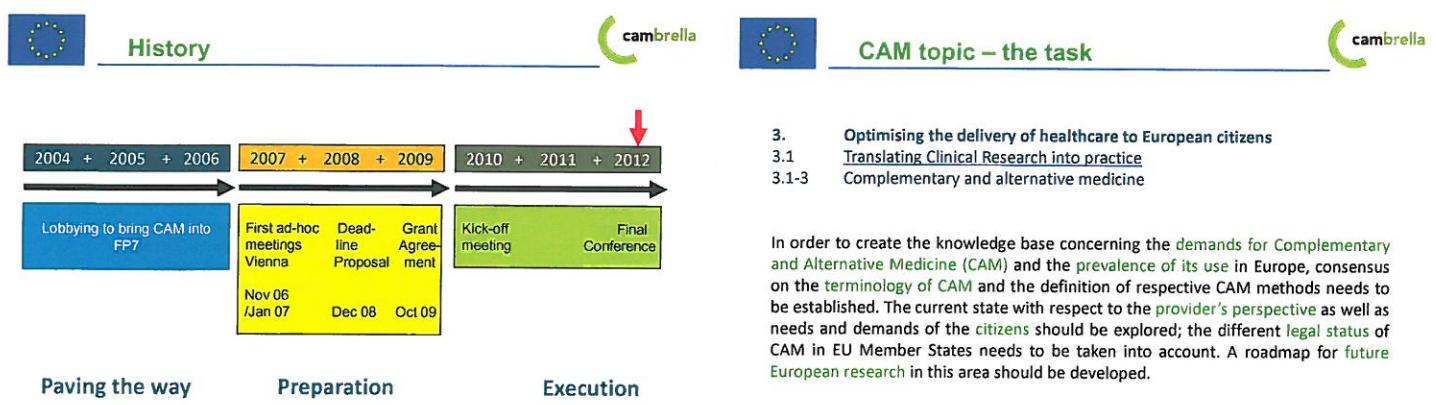
Source: NIH, USA 2005



Susan Eardley, Felicity L Bishop, Francesco Cardini, Koldo Santos-Rey, Mieke Jong, Sorin Ursoni, Simona Dragan,

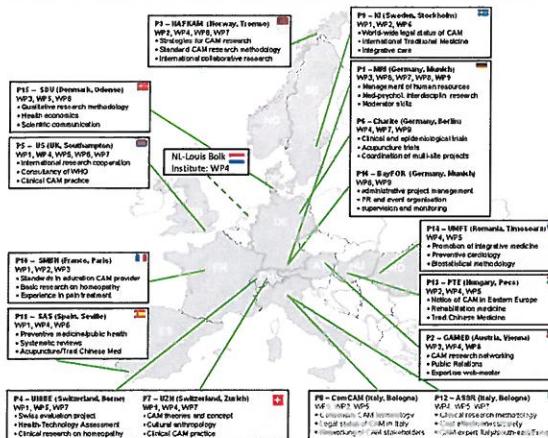
Gabriella Hegyi, Jorge Vas:

A pilot feasibility study of a questionnaire to determine EU wide Complementary and Alternative Medicine (CAM) use.
FORSCHENDE KOMPLEMENTÄRMEDIZIN 19:(6) pp. 14-27.
(2012), IF:1,66





The CAMbrella consortium



CAMBRELLA:

A pan-European research network for
Complementary and Alternative Medicine
(CAM)

- FP7-HEALTH-2009, GA No. 241951
- Project time: 01/01/2010 – 31/12/2012



| |
|--|
| 1 (CO) Technische Universität München - Klinikum rechts der Isar MRI Germany |
| 2 Wiener Internationale Akademie für Ganzheitsmedizin, GAMED Austria |
| 3 Universitetet i Tromsø NAFKAM, Norway |
| 4 Universität Bern UNIBE, Switzerland |
| 5 University of Southampton US, UK |
| 6 Charité – Universitätsmedizin Berlin, Charité Germany |
| 7 Universität Zürich UZH, Switzerland |
| 8 Comitato Permanente di Consenso per le Medicine Non-Convenzionali in Italia ComCAM |
| 9 Karolinska Institutet Kl, Sweden |
| 10 Université Paris 13 SMBH, France |
| 11 Servicio Andaluz de Salud SAS, Spain |
| 12 Agenzia sanitaria e sociale regionale - Regione Emilia-Romagna ASSR, Italy |
| 13 Pécsi Tudományegyetem – University of Pecs PTE Hungary –Hegyi G. |
| 14 Universitatea de Medicina si Farmacie Victor Babes Timisoara UMFT Romania |
| 15 Syddansk Universitet SDU, Denmark |
| 16 Bayerische Forschungsallianz gemeinschaftliche GmbH BayFOR Germany |



CAMBRELLA – in a nutshell



| | |
|----------------------|---|
| Title | CAMBRELLA – A pan-European research network for Complementary and Alternative Medicine (CAM) |
| Start of the project | Jan 1, 2010 |
| Duration | 3 years |
| Consortium | 16 participants from 12 European countries plus one adjunct partner from Netherlands |
| Coordinator | Klinikum rechts der Isar, Techn. Univ., Munich Competence Centre for Complementary Medicine and Naturopathy (Head: D Melchart); contact: W Weidenhammer |
| Funding | max 1.5 m. € (FP7/2007-2013, GA No. 241951) Funding scheme: Coordination action |
| Aims | to review the status quo of CAM in the EU and to provide a proposal (=roadmap) for CAM research |
| Impact | Research roadmap and network to enable sustainable and prioritised CAM research in the EU |
| Information | www.cambrella.eu ; Weidenhammer et al. <i>Forsch Komplmed</i> 2011;18:69-76 |





Outlook

<http://www.europarl.europa.eu/sides/getDoc.do?pubRefId=:492-8145%2b01%2bDOC%2bPDF%2bV0%2f%2fEN>

EUROPEAN PARLIAMENT
Committee on Industry, Research and Energy
2009 - 2014

2011/0402(CNS)

€ 2012

Amendments No. 595, 633 and 650 refer to the inclusion of CAM

AMENDMENTS 586 - 753

Draft report
Maria Da Graça Carvalho
(E, 189 600 €, 0,00)

to the proposal for a Council decision establishing the Specific Programme for Research, Implementation Actions 2007 - The Framework Programme for Research and Innovation (2007 - 2013)

Proposal for a Directive
(COM(2011)0511 - C 0509 2011 - 0402(CNS))



Announcements



Announcements



CAMBrella's
Final Conference
29.11.2012

The Roadmap
for European
CAM Research

Forschende Komplementärmedizin Wissenschaft • Praxis • Perspektiven Research in Complementary Medicine Research • Practice • Perspectives

Vol. 19
Supplement 2,
December 2012
Insights into the Current
Situation of CAM in Europe:
Major Findings of the EU Project
CAMbrella

Editors
Harald Walach, Frankfurt/O.
Wolfgang Weisenthäler, München



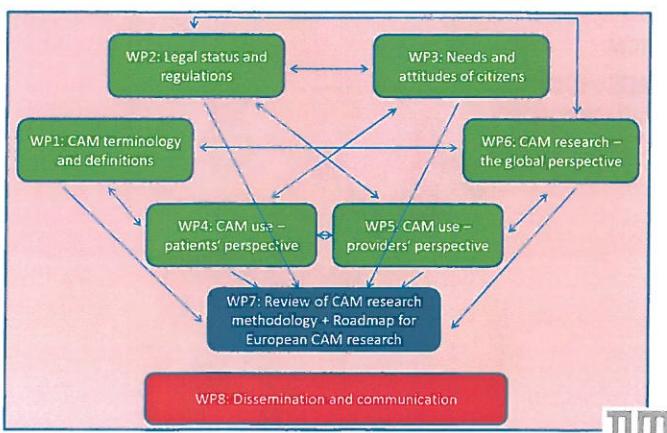
The Roadmap for
European CAM Research



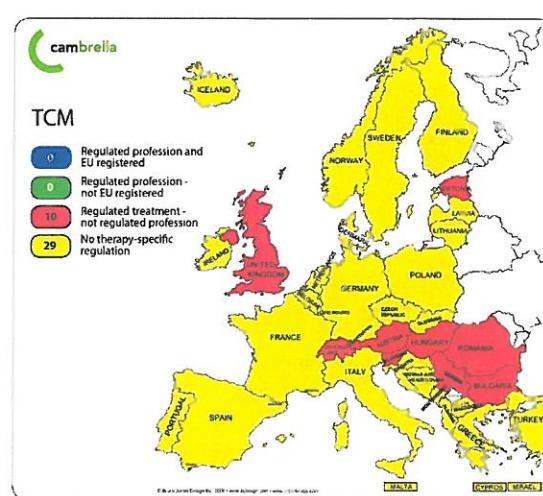
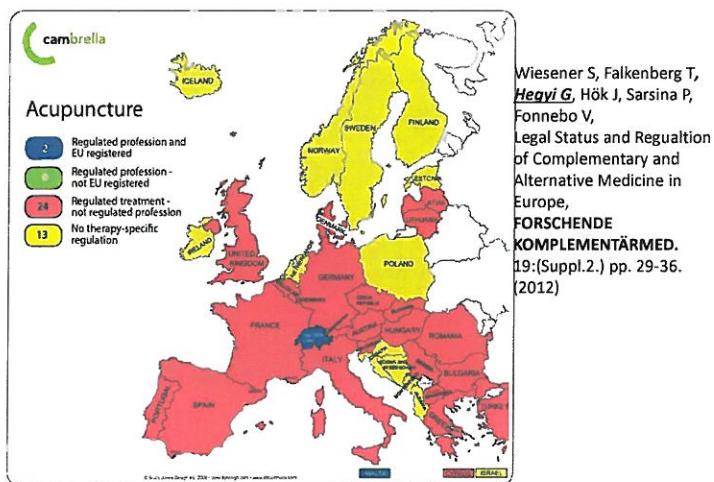
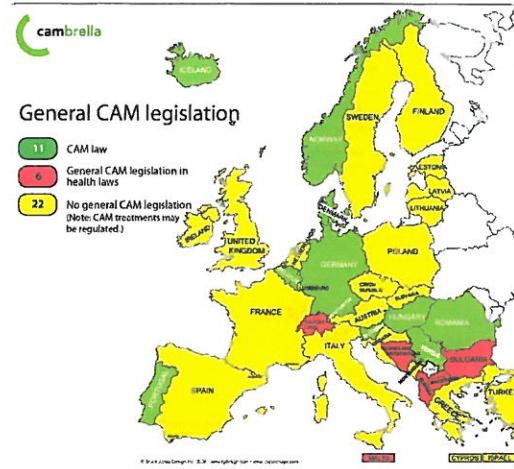
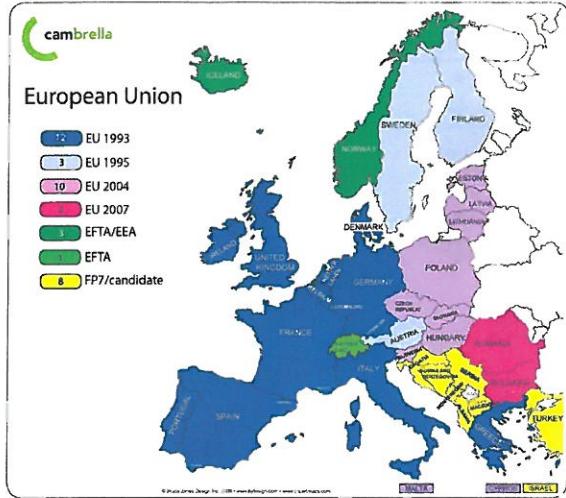
Pan-European research network for
Complementary and Alternative
Medicine (CAM)
www.cambrella.eu

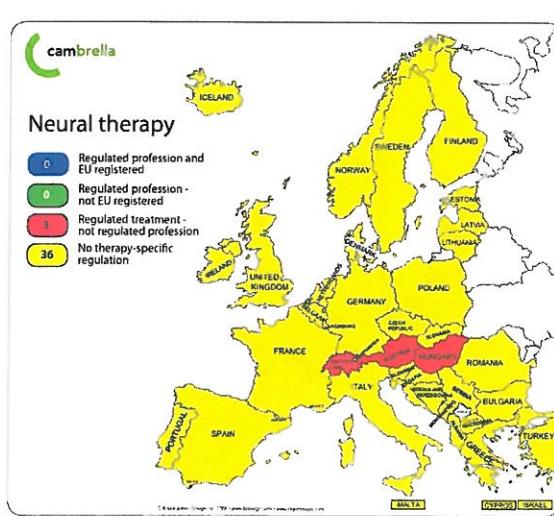
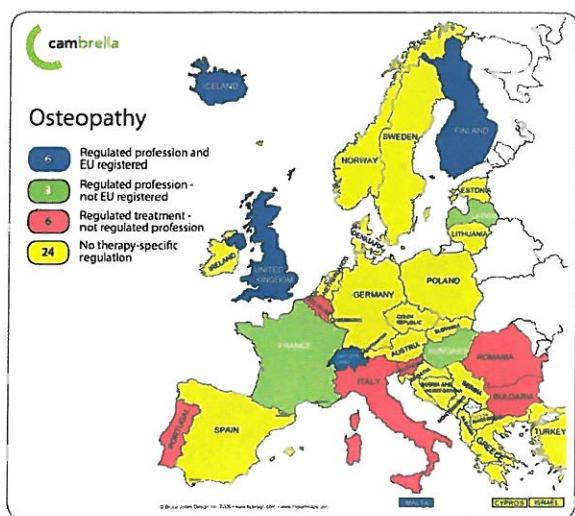
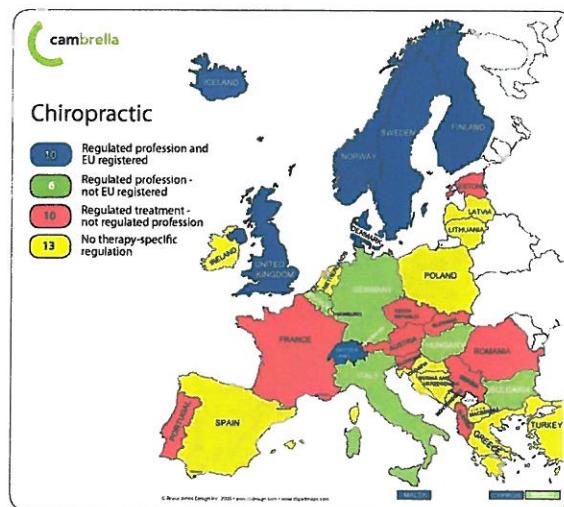
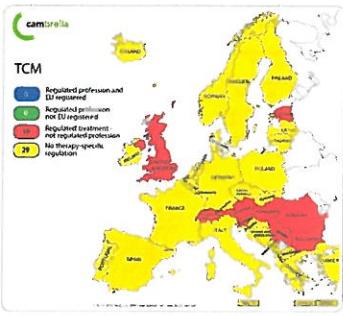
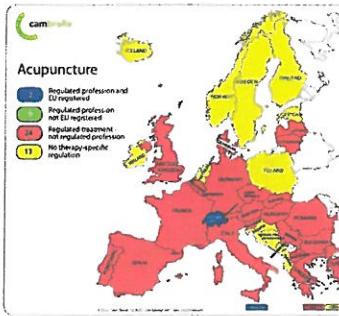


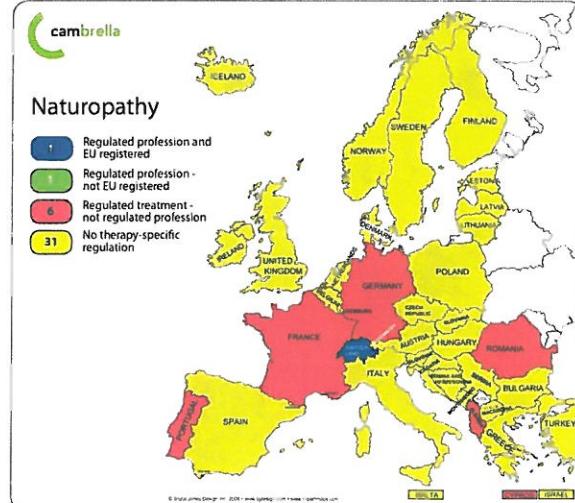
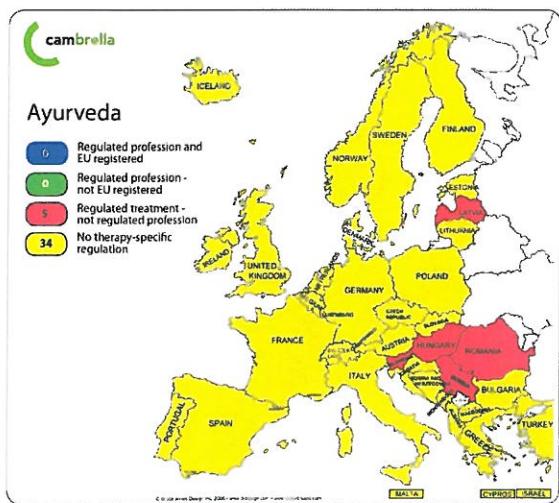
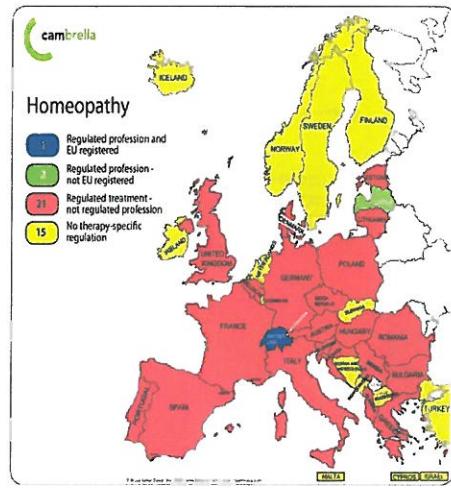
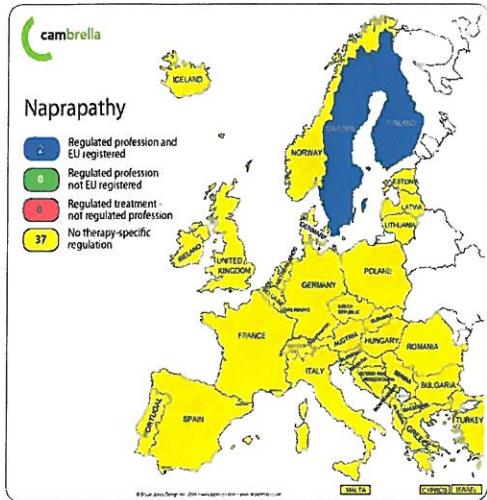
Structure of the Work Packages

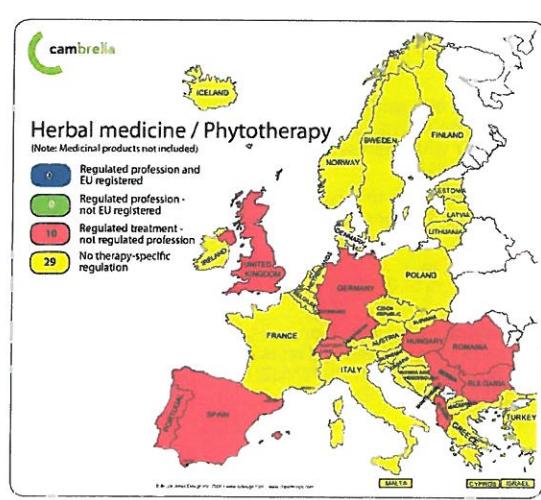
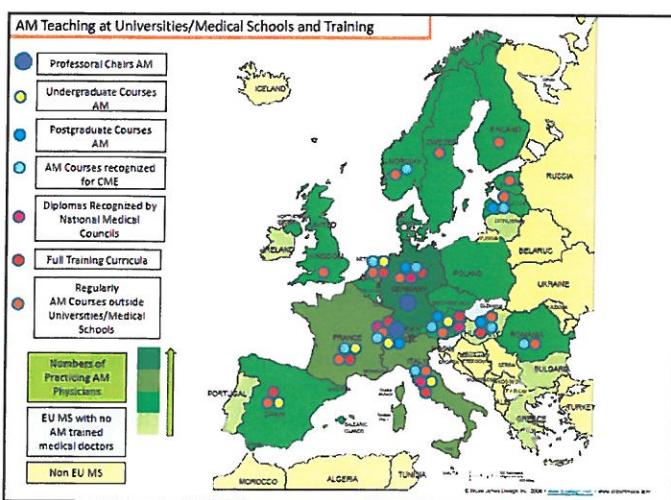
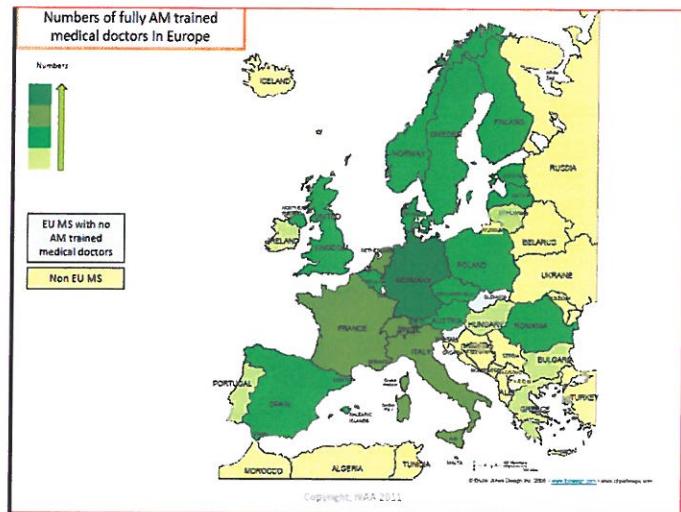
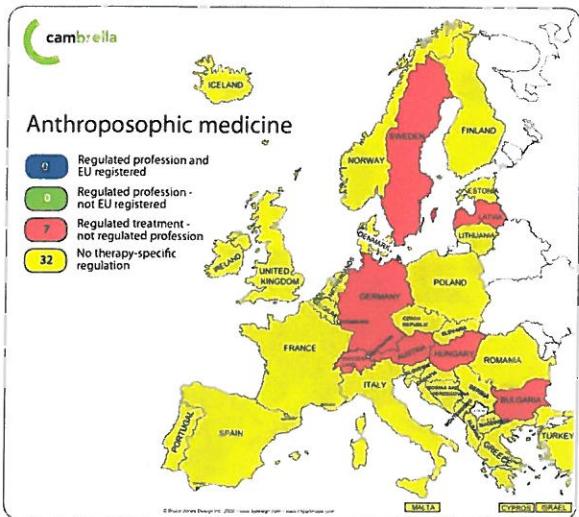


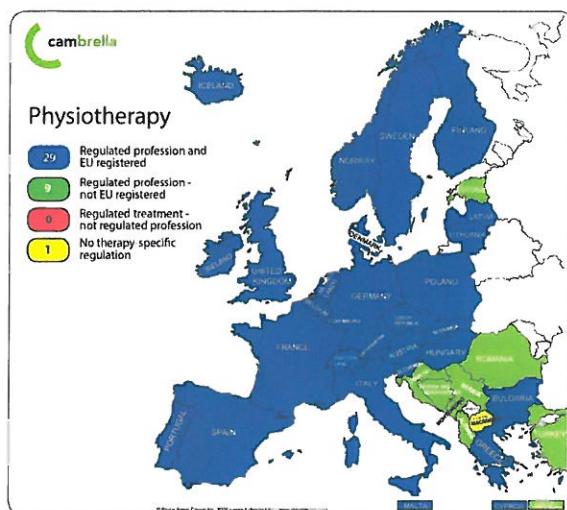
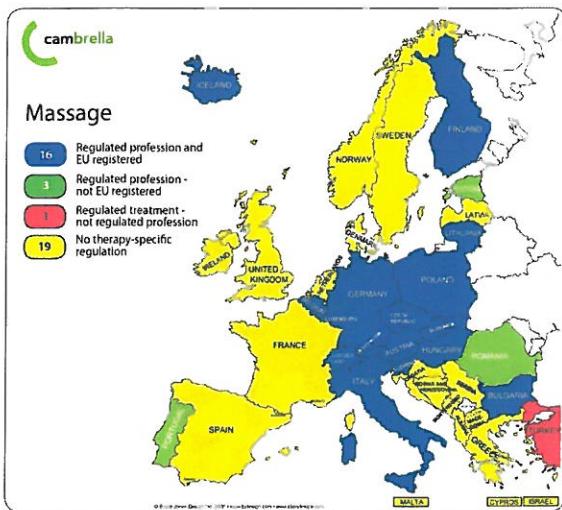
Tudunk így előre haladni?











CAM law in Hungary

- In 1997 the Minister of Health set up a body of professional advisers. Recently the Hungarian statutes were revised by the body of advisers together with representative of Hungarian University, PECS, OTH and GYEMSZI.
- The Hungarian Health Minister also recently established a new professional medical chamber for all medical disciplines, including CAM.
- CAM is regulated by law, is included in health services and patient care, and the providers of CAM have to meet certain professional requirements.**
- Regardless of having a physician's or non-physician diploma, obtaining a license requires passing tests issued by the National Health Care Education Institute (GYEMSZI-ETI- no-MDs) and PECS UNI -CAM Department for MDs.

Hegyi G.

A komplementer medicina színes palettája és jelenlegi helyzete Magyarországon
KOMPLEMENTER MEDICINA 14:(3) pp. 39-42. (2010)

Safety, Efficacy and Quality

- Collect **high-quality research data** on the safety and efficacy of Traditional Medicine therapies
- Increase technical capacity of national health authorities for dealing with Traditional Medicine issues, particularly relating to **safety and efficacy**
- Develop post-marketing surveillance** - including adverse reactions - for herbal medicines, and a monitoring and evaluation system for other therapies

Work package 3 Needs and attitudes of citizens

- Many citizens in Europe have positive attitudes to CAM although their attitudes and needs have not been consistently researched across Europe
- In addition they:
 - wish to have access to increased and diverse CAM provision
 - need easily accessible and trustworthy information regarding CAM
 - require the transparent regulation of CAM and the training of those who practice CAM

cambrella Attitudes and needs regarding CAM

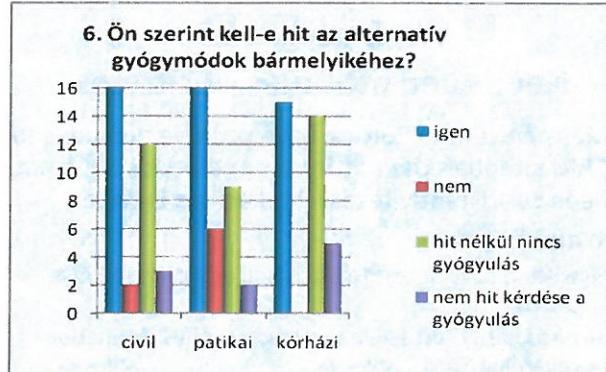
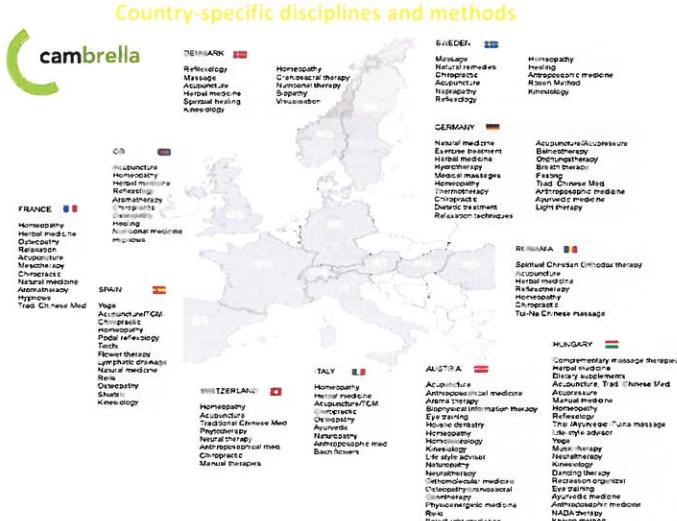
| | Info about CAM | Quality of care | Safety | Access |
|-----------|---|--|--|--|
| Attitudes | <ul style="list-style-type: none"> Difficult to find trustworthy and reliable information about CAM Personal experience is currently perceived as the most accessible and reliable source of information on CAM Biomedical professionals ought to have more knowledge on CAM | <ul style="list-style-type: none"> Value the increased time available in CAM consultations Experience better communication in CAM than in biomedicine Perception of few(er) side-effects of CAM Trust in effectiveness is based on personal experience | <ul style="list-style-type: none"> CAM is considered to be 'natural', compared to biomedicine Side-effects are rarely perceived as 'harmful' | <ul style="list-style-type: none"> Barriers to access: <ul style="list-style-type: none"> - cost (out of pocket) - geographical distance to provision - lack of availability - limited acceptance of CAM by biomedical professionals |
| Needs | <ul style="list-style-type: none"> Informed choice More trustworthy and reliable information on CAM More knowledge about CAM by biomedical professionals Increased acceptance of CAM use by biomedical professionals, to facilitate communication about CAM | <ul style="list-style-type: none"> Increased regulation and better education and training in CAM of all those who practise it | <ul style="list-style-type: none"> More trustworthy and reliable information and knowledge about CAM safety* | <ul style="list-style-type: none"> More integration of CAM and biomedicine Integration of a wider range of CAM therapies Integrated provision to be provided by a range of CAM and biomedical professionals Diversity of choice |

Work package 3: CAM use – the patients' perspective

- The data available from our systematic review are inconclusive and of very variable quality. Many of the studies are of poor methodological quality. There are reliable data in a few countries but in the majority of the 27 EU member states there is no data.
- However, use of **herbal medicine** was the most frequently reported use of CAM. **Musculoskeletal problems** were the most reported condition.

cambrella Total scores for use and knowledge of CAM disciplines (0=very low, 4=very high)

| DISCIPLINE / METHOD | Total Score | Knowledge | Use | No. of Countries | REMARKS |
|--|-------------|-----------|-----|------------------|--|
| Acupuncture (incl. related techniques) | 76 | 43 | 33 | 14 | All consulted countries |
| Homeopathy | 66 | 39 | 27 | 14 | All consulted countries |
| Herbal medicine | 47 | 27 | 20 | 10 | All consulted countries <u>except</u> Hungary, Austria, Denmark and Spain |
| Chiropractic | 44 | 26 | 18 | 10 | All consulted countries <u>except</u> Hungary, Austria, (Denmark and Italy not included, no CAM) |
| Osteopathy/craniosacral therapy | 28 | 17 | 11 | 8 | Denmark, Austria, UK, Italy, France, Spain, Belgium, Ireland |
| Massage [complementary/medical] | 27 | 15 | 12 | 5 | Hungary, Germany, Sweden, Greece, Ireland |
| Traditional Chinese Medicine | 26 | 15 | 11 | 5 | France, Spain, Hungary, Germany, Switzerland |
| Naturopathy (summarised) | 24 | 14 | 10 | 6 | Italy, France, Spain, Germany, Austria, Denmark |
| Reflexology | 22 | 13 | 9 | 6 | UK, Hungary, Sweden, Romania, Greece, Ireland |
| Yoga | 21 | 13 | 8 | 5 | Spain, Hungary, Germany, Greece, Ireland |
| Anthroposophical medicine | 17 | 13 | 4 | 6 | Germany, Hungary, Switzerland, Austria, Sweden, Italy |



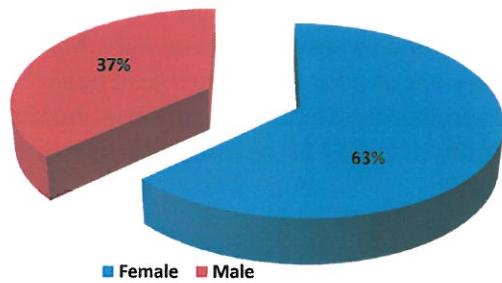
Hegyi G, Vinjar F, Johanna Hok, Wiesener Solveig
A CAM helyzete Európában és Magyarországon egy nemzetközi
felmérés alapján (CAMbrella): European Union Summary
LEGE ARTIS MEDICINAE 23:(7-8) pp. 10-20. (2013)

Habits and attitudes study

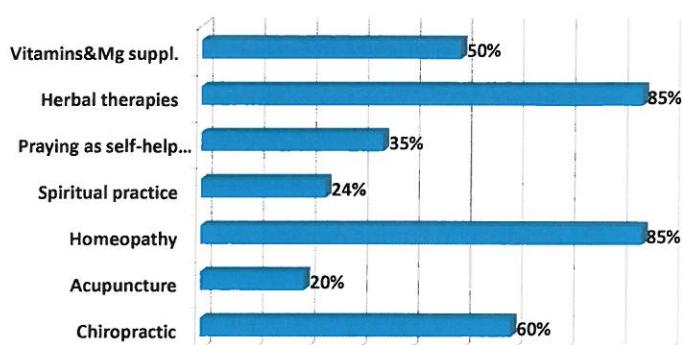
- The study "habits and attitudes towards treatments in Hungary" was developed as part of WP 4, a survey on a national representative sample.
 - The research was applied to a sample of 1636 respondents from urban and rural areas aged 15 years and over

Klaus von Ammon, Martin Frei-Erb, Francesco Cardini, Ute Daig, S Dragan, **Gabriella Hegyi**, Paolo Roberti di Sarsina, Jan Sörensen, George Lewith
CAM provision in Europe – first results approaching reality in an unclear field of practices
FORSCHENDE KOMPLEMENTÄRMEDIZIN 19:(Suppl.2) pp. 37-43. (2012) IF:1.66

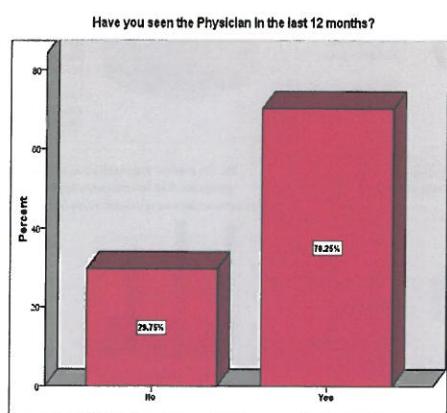
CAM use by the staff of Faculty of Pharmacy



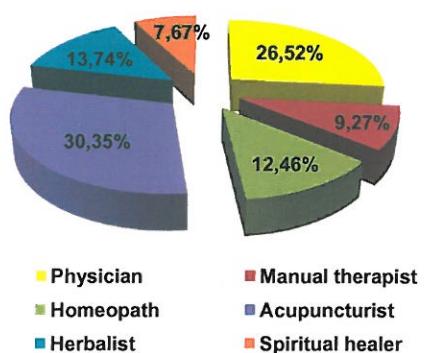
CAM use within staff of Faculty of Pharmacy



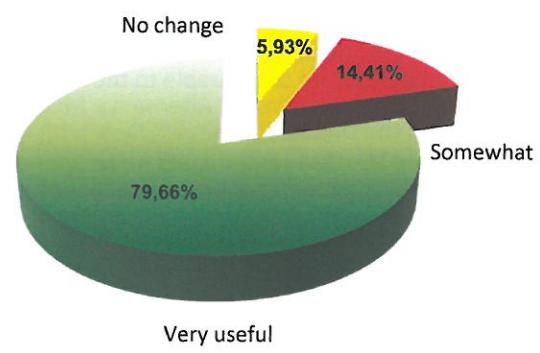
ICAMQ questionnaire

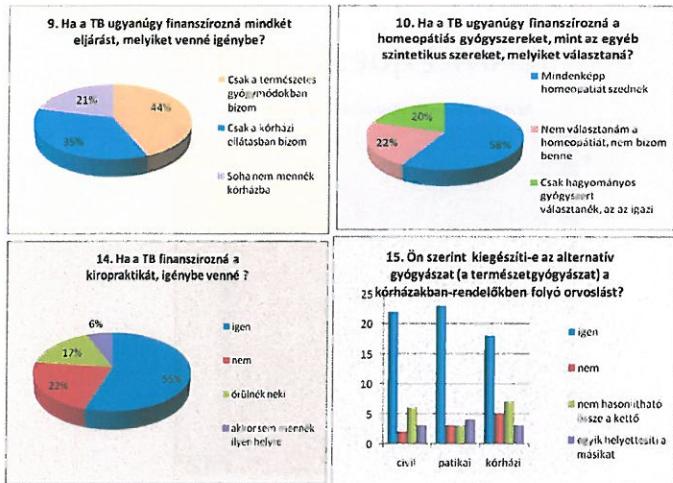


CAM use by patients



How helpful was it for you to see this provider?



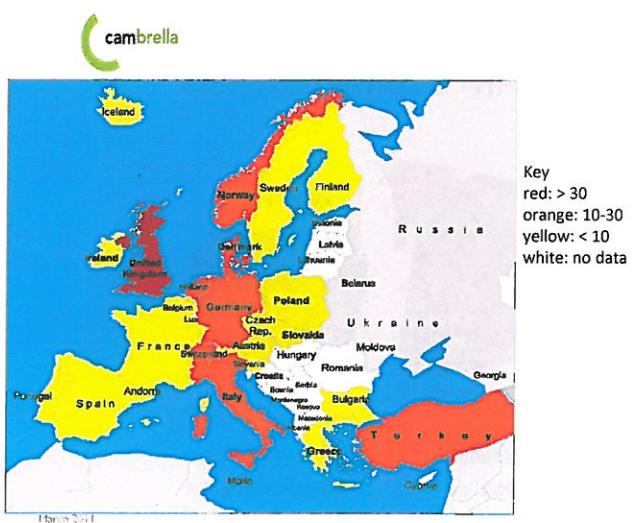


Work package 5 CAM use – the providers' perspective

- No common approach can be identified as regards the provision of CAM practice in Europe. Both medical and non-medical practitioners play an important role in the provision of CAM within the healthcare system in Europe. Teaching and certification are subject to international, national or in some countries even regional regulations. There is a complete lack of coherence in training, education and provision of CAM.
- CAM provision in Europe requires the:
 - transparent harmonization of CAM training, medical education and certification
 - standards of the regulation and registration bodies for both therapists and products to be open to the public.

Work package 6 The global perspective

- High quality research requires independent peer reviewed funding and experienced medical research networks: both should be fostered by a European institutional structure comparable to the National Center for Complementary & Alternative Medicine (NCCAM) in the United States.
- A centralized EU CAM center could make operational the CAMbrella recommendations in collaboration with selected EU member states and appropriate (worldwide) academic institutions to enable evidence based health sector reform with appropriate CAM interventions in the EU.



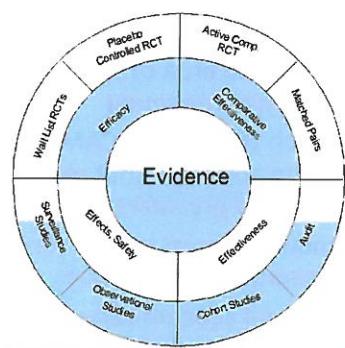


Distribution of identified articles across the EU

| > 30 articles | 10-30 articles | 4-9 articles | < 3 articles | No articles | |
|---------------|--|-----------------------|---|---|----------------------|
| UK 78 | Germany 21 Turkey 17 Israel 15 Switzerland 14 Italy 11 | Norway 9 Denmark 4 | Ireland 2 Netherlands 2 Austria 1 Czech Republic 1 France 1 Greece 1 Iceland 1 Portugal 1 Spain 1 Sweden 1 | Albania Belgium Bosnia and Herzegovina Bulgaria Croatia Cyprus Estonia Finland Hungary Iceland Latvia Lithuania Luxembourg Macedonia Malta Poland Romania Serbia Slovakia Slovenia | Europe as a whole: 5 |

Susan Eardley, Felicity L Bishop, Francesco Cardini, Koldo Santos-Rey, Mieke Jong, Sorin Ursu, Simona Dragan, Gabriella Hegyi, Jorge Vas
A systematic literature review of Complementary and Alternative Medicine (CAM) prevalence in EU. Short title - systematic review of CAM prevalence in the EU,
FORSCHENDE KOMPLEMENTÄRMEDIZIN 19:(Suppl.2.) pp. 18-28. (2012)

Circular instead of hierarchical: methodological principles for the evaluation of complex interventions in integrative medicine



Circular instead of hierarchical: methodological principles for the evaluation of complex interventions
Harald Walach, Torkel Falkenberg, Vinjar Fennebø, George Lewith and Wayne B Jonas, BMC Open Access 2006

Framework for Action

Rational Use

Objective: Promote therapeutically-sound use of Traditional Medicine by practitioners, other health care providers and consumers

- **Develop training guidelines and materials** for promoting the qualification of providers of Traditional and Complementary Medicine
- **Increase knowledge of medical doctors and pharmacists** about Traditional Medicine products and therapies (herbal medicine)
- **Develop standards to control labelling of and publicity** for herbal products
-

Hugh MacPherson, David Peters, Catherine Zollman

Published 1 September 2009, doi:10.1136/bmjj.b3335

BMJ 2009;339:b3335 Editorial

Closing the evidence gap in integrative medicine

A variety of methods of evaluating complex interventions should be considered

Work package 7

The Roadmap for CAM research in Europe

- CAM is a neglected area of research in the EU – it needs *active encouragement*
- An EU research strategy for CAM must prioritize a European wide approach that *reflects the needs of the citizens and providers of CAM*
- Research methods *must reflect the real-world settings of health care in Europe*
- A *centralized and academically supported EU CAM centre* should make this EU research strategy operational.

Work package 8

Communication and dissemination

- Communication in research is essential to ensure and support:
 - capacities, coherence and collegiality of any *multicentered research group*
 - a **corporate identity for the collaboration** and enhance its visibility
 - the **sustained dissemination of the results to the public at large** and the stakeholder groups in particular
 - to create a **coherent message and slogan that can engage the public in a dialogue about scientific results**
 - translate the **scientific results into public** out reach for the general public.

www.karger.com/fok
www.cambrella.eu

Wiesener S, Falkenberg T, Hegyi G, Hök J, Sarsina P, Fonnebo V:

Legal Status and Regulation of Complementary and Alternative Medicine in Europe
FORSCHENDE KOMPLEMENTÄRMEDIZIN
19:(Suppl.2.) pp. 29-36. (2012), IF:1.66



Gondok jelenleg M-on

- Nagyszámú, **kontrol nélküli „gyógyító”** jelenléte gyógynövény piac – „herbal medicine”, táplálék-kiegészítők,
- **Eszközök, műszerek** hivatalos vizsgálat és kontrol nélküli alkalmazása (perek, GVH, fogyasztóvédelem)
- Kormány és miniszteri rendelet felülvizsgálata és megjelentetése.... (?)
- Kinai diplomák elfogadása....(eü. salátatrendelet módosító javaslata a parlament előtt...?!.)
- Akadémikus orvosi aggodalmak (szembenállás...)
- Nincs országos szakfelügyeleti hálózat

Hegyi G: Érvek a komplementer medicina hazai gyakorlatának szabályozása mellett,
INFORMATIKA ÉS MENEDZSMENT AZ EGÉSZSÉGÜGYBEN: AZ EGÉSZSÉGÜGYI VEZETŐK SZAKLAPJA 7:(10) pp. 26-30. (2006)

ICMART XVI. World Congress, Vienna, Billrothhaus, 2013.nov.29-dec. 1



Hegyi G

Treatment of Cancer - synergy with TCM
In: International Council of Medical
Acupuncture and Related Techniques
(ICMART) XVI. Medical World Congress.
Konferencia helye, ideje: Vienna, Ausztria,
2013.11.29-2013.12.01.

Hegyi G, Szasz O, Szasz A
Synergy of Oncothermia and Traditional Chinese
Medicine (2012)
ONCOTHERMIA JOURNAL 7: p. 373. (2013)



Outlook



2014 + 2015 + 2016 + 2017 + 2018 + 2019 + 2020

Following CAM research
projects



Outlook



2014 + 2015 + 2016 + 2017 + 2018 + 2019 + 2020

Following CAM research
projects



Edzard Ernst: az örökök viták nagymértékben
félrevezetik a betegeket. (CAM Department, Exeter, Medical School
Bristol, UK)

„...a beteg képtelen tájékozódni az egymásnak ellentmondó
érvek rengetegében, és nem találja arra az egyszerű kérdésre a
választ, hogy az komplementer gyógymódok többet ártanak-e, mint
használnak.

„... a szkeptikusok nem veszik figyelembe a bizonyítékokat, és az
orvosi folyóiratok nem közlik a pozitív eredményeket...“

Másfelől viszont a komplementer gyógyászat feltétlen hívei hajlamosak
nemtudomásul venni azokat a tényeket, amelyek nem felelnek meg saját
hiedelmüknek, és kijelentik, hogy a komplementer gyógyászatban nincs
helye a tudományos bizonyítékoknak.

„...A vesztes ebben az örökök vitában természetesen a beteg...“

Ha a "nincs bizonyíték" érvelésre figyelnek, nem részesülnek a
gyógymódok előnyeiből.
Ha azonban "a tudomány erre nem alkalmas" nézetet követik,
esetleg több kárt okoznak maguknak, mint használ.

Komplementer (orvosi) módszerek M-on

Orvosi diplomával

- Hagyományos kínai orvoslás – HKO (akupunktúra, herbál medicina, masszázs és mozgásterápia)
- Manuális medicina
- Neurálterápia
- Antropozófus orvoslás
- Homeopáthia
- Kneipp orvosi módszerek
- Ayurveda medicina
- Tibeti medicina
- Kneipp módszer

Nem orvosi diplomával

- Akupresszúra
- Reflexterápia
- Komplementer mozgás és masszázsterápiák
- Kineziológia
- Szemtraining
- Életmódtanácsadás
- Fitoterápia
- NADA (csak fül)
- Kneipp módszer

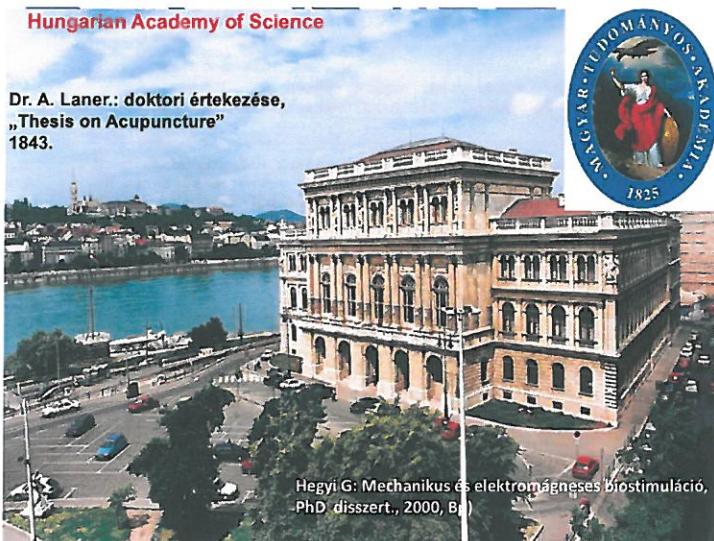
Future

- Study - BSC, Msc
- Continous further education
- Control
- International research groups (next EU FP)
- Proposals for new research projects
- PhD student acceptance (12+) PTE ETK

Wiesener S, Falkenberg T, **Hegyi G**, Hök J, Sarsina R, Fønnebø V
Legal status and regulation of CAM in Europe : Part I – CAM regulations in the European countries pp. 1-243.
A pan-European research network for Complementary and Alternative Medicine (CAM), Final report of CAMbrella Work Package 2

Hungarian Academy of Science

Dr. A. Laner.: doktori értekezése,
„Thesis on Acupuncture”
1843.



November 14, 2011

Dear Dr. Hegyi Gabor,
We are delighted to report that more than 600 participants from over 30 countries attended the 12th Annual International Conference on Acupuncture and the 7th Annual Conference of Natural Medicines from November 8-10, 2011. As a direct result of your organization, diligent work and sharing of your expertise, the conference was an overwhelming success. I wish to personally extend my sincere gratitude and appreciation for your contribution and support.

We are all looking forward to the continued exchange of information in the areas of theory, treatment and practice that will surely lead to even greater advancements in Acupuncture and Natural Medicine.

Sincerely yours,
Gerald L. Young, MD, FRCR
President, International Chinese Hospital Research Society (ICHRS)
Secretary General, World Federation of Chinese Medicine
Secretary-General, Committee on Natural Therapies (WHM-SNT)
Chinese Hospital, Canada



International tender –P.R. China and Hungary

Hindawi Publishing Corporation
Evidence Based Complementary and Alternative Medicine
Volume 2013 Article ID 507842, 12 pages
<http://dx.doi.org/10.1155/2013/507842>



Evidence Based CAM,
Review Article
IF:4.6

Hyperthermia versus Oncothermia: Cellular Effects in Complementary Cancer Therapy

Gabriella Hegyi,¹ Gyula P. Szigeti,² and András Szász³

¹Department of Complementary and Alternative Medicine, University of Pannonia, Hungary
²Department of Physiology, University of Debrecen, and Institute of Human Physiology and Clinical Experimental Research, Semmelweis University, Hungary
³Department of Biochemistry, St. Lukas University, Gödöllő, Hungary



Hebei United University, Tangshan, China

Thank you for your Attention!



Confucius Institute, PTE-Hebei United University

European Education Chapter, 2013-2020

- Hegyi G, Szigeti GP: Rehabilitation of Stroke Patients using Yamamoto New Scalp Acupuncture - A Pilot Study, **JOURNAL OF ALTERNATIVE AND COMPLEMENTARY MEDICINE** Volume 18, Number 10, 2012;(18.) pp. 971-977. (2012)
- Hegyi G, Csürtököi K, Pfeiffenröh A: Hungarian Military Use of Acupuncture and other Complementary and Alternative Medicine (CAM): CAM and Rehabilitation, **MEDICAL ACUPUNCTURE** 24:(3) pp. 152-155. (2012)
- Hegyi G: TCM Synergie, National Oncotherapy Symposium, Cologne, Germany, 2013. 06. 21-22. (2013)
- Hegyi G, A Komplementer medicina lehetőségei a stroke-os beteg habilitációjában: tartós periferias inger alkalmazása, **KOMPLEMENTER MEDICINA** 14:(4) pp. 56-58. (2010)
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- Hegyi G: Synergizmus az Oncotherapy és a HKO között, **MAGYAR EPIDEMIOLÓGIA** 10:(Suppl.) S13. (2013),
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OL-HU

Mondja Jancsi, ez egy újabb „manuális medicinális” forma?



<http://www.youtube.com/embed/e-y581HdWfY?rel=0>