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Comparing Medical Doctors' Views on Alternative Medicine in Taiwan and Sweden

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ABSTRACT

Numerous research endeavors have delved into the perceptions of medical physicians regarding alternative medicine; nevertheless, none have employed the symbolic interaction paradigm to scrutinize their individual viewpoints. **Objective:** To broaden our knowledge of complementary medicine by analyzing the viewpoints and engagement with it among individuals hailing from Taiwan and Sweden. **Methods:** Semi-structured interviews were conducted with a diverse group of medical professionals from Taiwan and Sweden, representing a range of specialties and levels of experience. **Results:** Four themes were identified: (1) Evidence-based medicine, (2) The views of medical doctors on alternative medicine, (3) Belief associated with alternative medicine, and (4) Stigma associated with alternative medicine. **Conclusions:** The findings indicate a common understanding of Western medicine as evidence-based among both Taiwanese and Swedish doctors, with Taiwanese doctors also viewing alternative medicine as experience-based, reflecting the influence of local history, social context, and regulations.

INTRODUCTION

The trajectory of sociology as a discipline is intricately linked with the incorporation of biological insights and the exploration of the sociological dimensions of disease [1]. The incorporation of a social perspective in healthcare holds promise for advancing our comprehension of this domain, while also presenting novel insights and obstacles [2]. Sociology, with its scrutiny of the ways in which institutions mold the behaviors and choices of individuals, offers a valuable framework for exploring the societal implications of healthcare practices [2]. The field of medical sociology involves the study and examination of how social and cultural factors impact healthcare, illness, and medical facilities [3]. It serves as a complementary perspective to the prevailing biomedical or psychological views that are prominent within the medical community

[3]. Conventional medicine, also referred to as Western medicine, and alternative medicine exhibit divergent ontologies and evolutionary paths. These two medical approaches differ in their fundamental philosophical tenets and historical trajectories [4]. Medical practitioners, comprising of physicians, physical therapists and psychologists, administer Western medicine that primarily emphasizes the identification and management of diseases [5]. Alternative medicine encompasses various medical and healthcare systems, including acupuncture, chiropractic, homeopathy, and traditional Chinese medicine, which are not integrated into conventional Western medicine and often rely on natural, holistic, and non-invasive approaches to promote healing and well-being [6]. In Taiwan, the regulation of Western

medicine and Traditional Chinese Medicine (TCM) is carried out by separate governing bodies: The Taiwan Food and Drug Administration (TFDA) for Western medicine, while the Department of Chinese Medicine and Pharmacy (DCMP) oversees TCM [7]. On the other hand, Sweden has a uniform healthcare system that solely uses Western medicine and does not have an all-encompassing approach towards complementary and alternative medicines [8]. Symbolic interactionism examines micro-processes in social interaction [9]. In medical sociology, the viewpoint is that illness should be perceived as a social construct rather than being solely viewed as a clinical condition [2]. This approach acknowledges the "micro-level" interaction between doctors and individual patients in the medical profession [2]. Symbolic interactionism can potentially aid in the better understanding of healthcare-related issues, such as preventing sexually transmitted infections, violent behavior, and the use or abuse of psychoactive substances [10]. Several studies have explored medical doctors' attitudes towards alternative medicine [11-14], but none have used symbolic interactionism to examine the subjective views of medical doctors. This study aims to fill this gap by employing qualitative interviews to gain a deeper understanding of cross-cultural perspectives on medical doctors' attitudes towards alternative medicine.

METHODS

This research aimed to explore individuals' perceptions and engagement with complementary medicine in Taiwan and Sweden. The investigation mainly revolves around the following queries: [15]. Can you explain what is meant by allopathic medicine? Can you explain what is meant by alternative medicine? Can you provide insight into how patients in your country perceive and interact with alternative medicine? Eight medical doctors were selected for this study, five from Taiwan and three from Sweden. These participants were sourced through a combination of internet searches and social contacts. They came from various backgrounds and had different levels of experience, ranging from clinical and academic to full-time research, resident, dentist, and student with internship experiences. The data collection process involved conducting semi-structured interviews from October to November 2020. Taiwanese participants were interviewed in-person, while Swedish participants were interviewed via Zoom and Skype. The objective of the research was clarified to every participant prior to the interview, and their approval was sought for audio recording, all while emphasizing on ensuring complete privacy and confidentiality of the gathered data. The interviews were transcribed using an online tool called Speechnotes. (<https://speechnotes.co/>) [15, 16]. This article's data is a

republication of a chapter from the author's master's thesis which can be found in the repository of the Swedish University of Agricultural Sciences at the following link: [<https://stud.epsilon.slu.se/17166/>] [15].

RESULTS

The medical doctors offered their thoughts on alternative medicine and used symbolic language and narratives to illustrate their perspectives. This paper will explore the major themes that emerged from the data collected, which include [15]: 1- Evidence-based medicine. 2- The views of medical doctors on alternative medicine. 3- Beliefs associated with alternative medicine. 4- Stigmas associated with alternative medicine.

Theme 1: Evidence-based medicine

The individuals who were part of the research have a foundation in conventional medicine. It is worth mentioning that those who participated from Taiwan and Sweden shared the belief that evidence-based medicine is the core principle of Western medicine. In their understanding, evidence-based medicine involves a systematic approach to drug development, which includes preliminary experiments utilizing animal cells, followed by clinical trials. Such an approach aims to generate reliable evidence and empirical data in support of the safety and efficacy of drug interventions.

"It's very important for treatment [that] we need to do a lot of work, to do clinical trials in four steps to approve in three steps the drug. I think Western medicine [...] it's between art and science, but I think maybe science 95% and art part is 5%." (Taiwanese respondent)

"Western medicine [...] focuses on scientific evidence [...]. I mean, ideally, everything that we do and prescribe and recommend to patients has scientific evidence, and I think that's the main basis for Western medicine." (Swedish respondent)

Taiwanese medical practitioners emphasized that they are required by the government to possess specific qualifications and licenses, which obligates them to uphold accuracy and honesty in their profession. Additionally, they highlighted Western medicine's foundation on the notion of "evidence", which calls for continual revisions based on new research.

Theme 2: The views of medical doctors on alternative medicine

Based on the views expressed by Taiwanese participants, it can be inferred that alternative medicine is perceived as distinct from Western medicine. While the former is considered a natural means of disease prevention, the latter is often associated with conventional medical practices. However, it is noteworthy that alternative medicine is perceived to lack scientific "evidence", despite

its potential benefits. These observations highlight the need for further research to evaluate the efficacy of alternative medicine and to elucidate its role in disease prevention and management. *"In my point of view, alternative medicine [is] just like an 'experience' medicine and formed by the imagination]and observations and lack of scientific study. I would say although there is a gap of some 'evidence' or some scientific procedural steps, other 'experiences' still tell [that] alternative medicine is based on 'experience'."*(Taiwanese respondent)

"I think Western medicine is 'evidence'-based. In contrast, I think alternative medicine to me sometimes comes from some 'experience.' It hasn't been investigated based on the statistical analysis of a collection of medical hypotheses."(Taiwanese respondent)

According to the Swedish participants, alternative medicine refers to a type of medical practice that finds its roots in Asian nations such as China or the Indian subcontinent. This type of medicine was deemed distinct from Western medicine due to its purported lack of "evidence". Although alternative medicine was acknowledged to potentially exhibit therapeutic effects, its discordance with Western medical practices was also noted.

"Alternative medicine... I don't have an understanding about it, but my concept[ion] about it is that it's basically the medicine or the part of the treatment which were before allopathy was recognized or something like I would say Chinese medicine or Ayurvedic."(Swedish respondent)

"Traditional (alternative) medicine [...] doesn't have to have the same degree of evidence-based [support ...] but I guess it's more common [in places] like China." (Swedish respondent)

Theme 3: Beliefs associated with alternative medicine

Both Taiwanese and Swedish medical practitioners have expressed their adherence to the principle of patient autonomy, even in cases where the patient expresses a willingness to experiment with alternative medicinal practices that may lack strong supporting "evidence".

"It's said in Taiwanese society [that] Western medicine can treat your symptoms, but if you want to change your body characteristics [or] your body metabolism, maybe Chinese medicine is better."(Taiwanese respondent)

As per the insights of medical practitioners from Taiwan, they display a readiness to hold talks related to alternative medicine with their patients. Furthermore, in cases where individuals express their desire to employ such treatments, these doctors suggest that they consult Chinese medicine specialists and avoid self-treatment.

"I [am] not against (alternative medicine), but because I am not specialized, [...] I can say my attitude is open. And, for example, most of the time patients ask 'Can I take Chinese

medicine,' I [advise] them 'Please consult with [someone] qualified with Chinese medicine."(Taiwanese respondent)

Based on the perspective of medical experts in Taiwan, there are limitations to Western medicine, particularly its effectiveness when dealing with rare and long-term ailments. Consequently, if an individual decides to explore alternative medicine under such circumstances, healthcare providers in Taiwan do not intervene or prevent them from doing so.

"We cannot cure all of the pain, so I think I am very open. You can go to the massage [therapist]. You can go to the acupuncture [clinic] if it's helpful. I think it's not a problem. If my chronic pain patient wants to seek other help, I think it's okay."(Taiwanese respondent)

As per the assertions of Swedish medical practitioners, alternative medicine is not advocated for as it lacks substantial empirical substantiation. Nevertheless, in the event that a patient expresses the desire to utilize alternative medicine, it remains within their personal volition to do so.

"My perception is, you know, if somebody wants it, then they're the master of their own bodies, and they can go. I mean, [...] alternative medicine is not a new thing, you know. It has been [around] thousands of years. I think if one gets benefit, [...] okay, yeah, why not? I think, as a doctor, I will not recommend anything (alternative medicine) to a patient."(Swedish respondent)

Theme 4: Stigmas associated with alternative medicine

According to Taiwanese medical practitioners, alternative medicine often incurs higher expenses than its Western counterpart and the claimed advantages of such treatments may occasionally be exaggerated. Furthermore, in certain instances, patients may opt for alternative medicine due to apprehensions regarding surgical procedures, a decision which can result in a delay of treatment and a consequent exacerbation of the underlying ailment.

"I am not against [it], because sometimes [the] cost [of] alternative medicine is [much more] expensive compared to our (Western) medicine system."(Taiwanese respondent)

"Some information is correct, and some is not. They (patients) cannot judge correctly, because of the propaganda. [It is more] attractive than what the doctor said. That's why a lot of people's paycheck [goes] to buy these kinds of products, and it's [more] expensive than seeing the doctor at NHI (National Health Insurance). And it's a big market"(Taiwanese respondent)

Swedish medical professionals expressed skepticism regarding the effectiveness of alternative medicine, citing a dearth of "evidence" to support its claims, and warning that it may be a ploy to profit from illness. This viewpoint was further elucidated by a Swedish individual:

"Something might work; something might be almost a fraud, like selling some kind of pills that are supposed to cure something; and it might be just phony to make money."

DISCUSSION

The interpretation of medicine and the concept of evidence can vary widely depending on the context in which they are discussed. The way that humans interact with their environment can shape how medicine is understood and applied, leading to different meanings in different communication settings [17]. This complexity is reflected in the concept of "evidence," which is typically understood as research-based findings that can inform healthcare decision-making. However, the interpretation of evidence is not straightforward, and can be influenced by a range of factors, including personal beliefs and prior knowledge. To complicate matters further, the process of generating evidence is itself subject to a range of different methodologies and approaches [18]. The generation of evidence is possible through the implementation of clinical trials, statistical analysis, analytical studies, published literature and reports. Interpretation of such evidence may be affected by various factors. These may include personal beliefs and biases, as well as the analytical methods used to interpret the data [18, 19]. Given this complexity, it is not surprising that there is often a lack of consensus around the meaning of "evidence" in Western medicine. Governing bodies play an important role in shaping the way that evidence is valued and interpreted, but even with clear guidelines in place, the interpretation of evidence can remain subjective and contested [19]. Taiwan and Sweden have healthcare systems that differ significantly due to their unique social, legal, and historical backgrounds [7, 20]. Consequently, they have varying approaches to patient care. However, despite these differences, medical professionals from both countries share a common understanding of evidence-based medicine, which emphasizes the use of clinical trials, experiments, meta-analysis, and expert opinion to inform medical practice. This approach helps to ensure that patient care is based on the best available evidence and helps to improve the quality of medical care. It is essential to acknowledge and appreciate these differences in healthcare systems as it allows us to learn from each other and improve patient outcomes. Alternative medicine is viewed differently by medical doctors in Taiwan and Sweden. Taiwanese doctors perceive it as lacking in scientific evidence, but based on personal experience, while Swedish doctors often associate it with non-allopathic approaches and Chinese or Indian medicine, and consider it lacking proper evidence. Despite these contrasting views, doctors in both countries use similar language and symbols to describe alternative

medicine. The interpretation of subjective views on alternative medicine is a focus on symbolic interactions, which explore how individuals make sense of their world. Understanding these varying perspectives is crucial in promoting cross-cultural communication and facilitating informed decision-making regarding healthcare. Ultimately, this can lead to improved patient outcomes and a better understanding of the role of alternative medicine in healthcare [9, 10]. Symbolic Interactionism emphasizes the notion of "stigma," which connotes being discredited and perceived as deceitful, feeble-minded, domineering, aberrant, untrustworthy, or adhering to uncompromising convictions [21, 22]. In the context of alternative medicine, stigmas differ between Taiwan and Sweden. Taiwanese doctors view alternative medicine as having a higher cost compared to allopathic medicine and being associated with misleading propaganda, which can be stigmatizing. On the other hand, Swedish doctors express concern that alternative medicine may be used as a fraudulent way of making money, which carries its own stigma. Understanding the varying stigmas attached to alternative medicine in different cultural contexts is critical in facilitating effective communication and promoting informed decision-making about healthcare choices.

CONCLUSIONS

This study utilized symbolic interactionism to investigate the perspectives and interactions of medical doctors from Taiwan and Sweden with alternative medicine. The findings revealed that both groups of doctors shared a perception of Western medicine as evidence-based. However, Taiwanese doctors also viewed alternative medicine as experience-based, influenced by local cultural norms, historical context, and regulations

Authors Contribution

Conceptualization: MMFB

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Writing-review and editing: MMFB

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

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