

Editorial

The *Australian Journal of Acupuncture and Chinese Medicine* is entering its second year.

Early this year, we were invited to be included in the Australasian Medical Index (AMI), which indexes health and medical literature published in Australia. Titles and authors of manuscripts published in this Journal can now be accessed easily by readers in Australia via <http://search.informit.com.au/search;res=MEDITEXT>.

Since the publication of the first volume, we have received numerous oral and written comments. Most of them were encouraging and some were suggestions for future topics. A sample of them is published under Letters to the Editor (p. 4). In another form of feedback, we have been pleased to receive manuscripts from international researchers and authors on a wide range of topics.

There has been lively interest in the practice of evidence-based medicine and this is the prominent theme in the comments we received. Readers were intrigued by Ryan's paper,¹ published in our last volume. In this issue, we have invited Charlie Xue, Professor of Chinese Medicine at RMIT University, to discuss the application and production of evidence and their impacts on the development of Chinese medicine in Australia.

This year, for the first time, the Australian Government has allocated an extra five million dollars to the National Health and Medical Research Council (NHMRC) in order to support and encourage research for evidence in complementary medicine. This historical decision will impact upon the use and practice of complementary medicine as primary medicine or adjunctive therapies in Australia. This initiative was based on models of research funding from the United States of America. The National Center for Complementary and Alternative Medicine was established in 1999 in the USA. Since then, the funding allocated to complementary and alternative medicine research has increased by 2.4 times, from 50 million US dollars to 121.4 million. One outcome of the American funding, for Chinese medicine, is the publication of the results of a large trial of acupuncture for osteoarthritis (OA) in the knee² on the very same day that Vioxx, a common anti-inflammatory medication for OA, was recalled. The trial found that acupuncture reduced pain and improved function of OA patients with few adverse effects, suggesting that acupuncture should be considered one of the first-line treatments for OA. This is a good example of how evidence-based medicine might contribute to the development and acceptance of Chinese medicine.

The ultimate aim of this Journal is to stimulate discussion on how to improve our practice. It does not matter whether the knowledge is from clinical trials and systematic reviews or from personal experience and classical literature, so long as the information presented is valid and interpreted with caution. The Editorial Board and our peer reviewers go to great lengths to ensure the methods of all accepted manuscripts are sound and thorough. This helps us to maintain a high standard for published papers.

In this issue, a fascinating paper on the formation of the acupuncture meridians is included. The pathways, anatomic structures and physical characteristics of the meridians have been extensively studied, but with little significant evidence. Here, the author takes a different approach and proposes that the meridians are a functional system developed from withdrawal reflexes upon painful stimulation. The concept is particularly relevant to the application of acupuncture in pain management. Also included is an experiment investigating different effects of four main acupoints on the automatic nervous system in healthy humans. Another contribution on evidence-based research is a systematic review of acupuncture for managing pain in labour. The results suggest a promising treatment for women looking to use additional therapies during child-birth. We have also included a report on how a combined therapy of acupuncture, manual techniques and self-stretching was used to treat a case of thoracic outlet syndrome (TOS), a common yet often neglected condition. Continuing from our previous topics on reporting adverse events is a short paper on drug and herb interactions, providing a theoretical framework for the mechanisms of potential interactions. More papers on this topic will be published in future issues.

Where Chinese medicine will be in ten years in this country largely depends upon us – Chinese medicine practitioners, educators and researchers. We are proud that the *Australian Journal of Acupuncture and Chinese Medicine* provides a forum to stimulate debate and generate ideas.

REFERENCES

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2. Berman BM, Lao L, Langenberg P, Lee WL, Gilpin AM, Hochberg MC. Effectiveness of acupuncture as adjunctive therapy in osteoarthritis of the knee: a randomized, controlled trial. *Ann Intern Med* 2004;141(12):901–10.

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