

Meeting report

Hybrid roundtable hosted by BMJ Group, BMJ
Evidence-Based Medicine and the Beijing
University of Chinese Medicine on Global
Convergence on Evidence and Integration:
Advancing Traditional and Integrated Medicine







22 August 2025

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Overview

On 22 August 2025, a roundtable on *Global Convergence on Evidence and Integration: Advancing Traditional and Integrated Medicine* was jointly hosted by *BMJ Evidence-Based Medicine* and Beijing University of Chinese Medicine (BUCM). Held at Anshun Hall in Beijing, the event brought together global thought leaders from across the medical, academic, and policymaking communities to explore the future of traditional, complementary, and integrated medicine within modern healthcare systems.

The roundtable featured three thematic sessions examining high-quality evidence frameworks, mechanisms for integration of traditional Chinese and Western medicine, and the translation of evidence into policy and practice. Across these sessions, speakers and panellists addressed how to navigate pluralistic health systems, ensure scientific rigour while respecting cultural traditions, and promote patient-centred, evidence-informed care.

With simultaneous interpretation, bilingual materials, and cross-sector participation, the event reflected a growing global appetite for dialogue, standards, and innovation in the traditional medicine landscape.



Opening Remarks

Dr Juan Franco, Editor-in-Chief of *BMJ Evidence-Based Medicine*, welcomed participants on behalf of BMJ Group and BUCM. He reflected on the shared goal of promoting better health through evidence-based care and noted that traditional medicine provides valuable opportunities to expand evidence paradigms. He urged researchers to view traditional and biomedical systems not as competitors but as complementary contributors to the global evidence ecosystem.

Professor Cunzhi Liu, Vice President of BUCM, highlighted the university's pivotal role in developing evidence frameworks for traditional medicine in China. He emphasised that strengthening methodological quality and clinical relevance is central to gaining wider recognition for traditional Chinese medicine (TCM) and announced BUCM's efforts to establish global partnerships to promote interdisciplinary research.

Joining online, Ms Yuyan Kong, Managing Director of BMJ China, reaffirmed BMJ's commitment to supporting transparent evidence generation. She described BMJ's evolving partnerships across Asia and its interest in bringing Chinese research to an international audience through credible peer-reviewed publication.

Dr Chengming Gu, Head of Marketing and Medical Affairs at Yangtze River Pharmaceutical Group, delivered remarks on behalf of the event sponsor. He outlined the company's investment in large-scale real-world data studies and reaffirmed its dedication to bridging empirical experience with modern research methodologies.



Scene Setting Presentations: Constructing High-Quality Evidence Frameworks for Traditional Medicine

Global Strategy and Policy for Traditional Medicine Development

Professor Charlie Xue, Vice President, Royal Melbourne Institute of Technology (RMIT), Australia, opened the first session with a presentation on developing high-quality evidence frameworks for Chinese medicine. He traced the historical evolution of the evidence-based medicine movement and discussed its relevance for traditional systems. Professor Xue proposed a whole-evidence approach, an inclusive framework that draws upon multiple knowledge sources—including classical literature, clinical experience, and modern scientific studies—to ensure that TCM's multidimensional nature is properly evaluated.

He illustrated how RMIT's partnership with Chinese institutions, including Guangdong Provincial Hospital of TCM, has resulted in 29 evidence-based clinical monographs and contributed to the WHO's global guidelines. He noted that these efforts demonstrate the feasibility of applying rigorous methods to traditional interventions without compromising their philosophical foundations. Professor Xue also discussed challenges such as variable data quality and publication barriers that limit the visibility of TCM research internationally.

In closing, he emphasised that pluralistic methodologies, encompassing pragmatic trials and real-world evidence, are essential to evaluate TCM in practice. He called for regulatory convergence, capacity-building for clinical researchers, and recognition of diverse evidence hierarchies that respect cultural and clinical realities.

Reporting Standards and Data Sharing for TCM Clinical Trials

Professor Myeong Soo Lee, Principal Researcher at the Korea Institute of Oriental Medicine, followed with a detailed discussion of global reporting and data-sharing standards. He explained that traditional medicine research faces unique challenges in reproducibility and transparency due to complex interventions and practitioner-dependent factors.

Professor Lee presented examples from Korea's experience developing complementary medicine registries and open data platforms that require pre-registration of study protocols. He described how initiatives such as Cochrane Complementary Medicine Korea and the G-I-N Asia network have created opportunities for regional collaboration and methodological harmonisation.

He argued that the path forward must include adapting existing international reporting frameworks—such as CONSORT and PRISMA—to reflect the particularities of herbal medicine and combination therapies. In closing, he emphasised that strong data governance and international peer networks are essential to maintaining scientific credibility and supporting global policy acceptance.

Methodological Innovation in Chinese Herbal Medicine Trials

Professor Yutong Fei, Deputy Director of the Evidence-Based Medicine Center at BUCM, expanded on China's national efforts to modernise its evidence ecosystem. She described how real-world studies and registry-based trials are increasingly being used to assess TCM interventions at scale, capturing data that reflect clinical complexity and patient heterogeneity.

Professor Fei explained that these innovations are complemented by enhanced clinical data infrastructures, including digital patient records and national research networks that integrate outcomes across hospitals. She presented case examples where pragmatic trial designs produced robust evidence on herbal therapies for chronic disease management.

Emphasising the future of capacity building, Professor Fei highlighted the need to train researchers in hybrid methodologies, biostatistics, and advanced data analytics. She concluded that China's progress demonstrates how local innovation, combined with international collaboration, can reshape the evidence landscape for traditional medicine.



Panel Discussion Highlights

1. Diversifying the Evidence Ecosystem

Participants agreed that traditional medicine research requires a broader set of methodologies to capture its real-world complexity. Pragmatic and registry studies were viewed as essential complements to randomised controlled trials, providing insights into outcomes, adherence, and patient-centred impact across diverse populations.

2. Building Global Standards for Data Integrity

The discussion highlighted that the credibility of TCM research depends on transparent reporting and robust data governance. Participants supported the development of international trial registries and shared data repositories to harmonise standards and prevent duplication.

3. Bridging Research and Policy

Delegates noted that evidence must be actively translated into regulatory and policy frameworks. Clear communication channels between researchers, ministries, and international

agencies were considered vital to ensure that evidence informs health policy and public understanding.

4. Strengthening Collaboration Across Borders

Cross-institutional partnerships were seen as key to building capacity and ensuring methodological coherence. Participants proposed multi-country networks, co-funded training initiatives, and open-access publication platforms to improve data comparability and accelerate progress.

5. Developing a Culture of Evidence-Based Practice

Finally, participants reflected that embedding evidence-based thinking within traditional medicine institutions requires sustained investment in education, mentorship, and leadership support. Creating incentives for quality research and transparent publication was seen as essential for long-term credibility.



Scene Setting Presentations: Beyond Additive Effects – Innovating Synergistic Integration Mechanisms of TCM and Western Medicine

Integrating TCM into Clinical Guidelines

Dr Merlin Wilcox, Principal Research Fellow at the University of Southampton, UK, explored strategies for embedding TCM into evidence-based clinical guidelines. He discussed collaborative work with BUCM examining herbal formulations for respiratory infections as potential substitutes for antibiotics, aligning with global priorities around antimicrobial stewardship.

Dr Wilcox presented findings from comparative effectiveness studies showing that certain herbal remedies can relieve symptoms while reducing antibiotic reliance. He argued that these outcomes illustrate the potential of integrative medicine to address modern challenges through culturally informed yet scientifically validated interventions.

He concluded that integration requires more than inclusion in guidelines—it demands rigorous evidence synthesis, safety monitoring, and transparent communication with patients. He called for bilateral cooperation in building capacity for randomised and pragmatic trials across international research networks.

Treating the Person, Not the Disease - Evidence Considerations for Integration

Professor Nicola Robinson, Emeritus Professor of Traditional Chinese Medicine and Integrated Health at London South Bank University, reflected on the philosophical underpinnings of integrated care. She explained that successful integration relies on recognising that health

outcomes are multidimensional—encompassing physical, emotional, and social dimensions that align with TCM's holistic framework.

Drawing on her experience developing WHO benchmarks and editing leading journals in integrative medicine, Professor Robinson highlighted the need for common terminologies and professional standards to ensure patient safety. She pointed out that lack of shared definitions across countries continues to hinder collaborative progress.

She closed by stressing that integration should prioritise the patient's experience, with communication and shared decision-making central to care delivery. She urged that education, governance, and ethical frameworks evolve alongside clinical integration to maintain both quality and cultural sensitivity.

Research Achievements and Challenges in Integrative Medicine

Professor Jianping Liu, Director of the Centre for Evidence-Based Medicine at BUCM, reviewed China's major milestones in integrative medicine research. He described how supportive government policies and national funding programmes have enabled clinical networks to explore synergies between traditional and biomedical approaches in areas such as oncology, cardiovascular health, and chronic disease management.

Professor Liu noted that despite advances, barriers persist in standardising study designs and interpreting outcomes across diverse systems of care. He called for the development of comprehensive evaluation models that combine biomedical indicators with measures of holistic wellbeing.

He also discussed the potential for new technologies—such as big data analytics and artificial intelligence—to bridge evidence gaps by identifying cross-system patterns in large clinical datasets. Sustained investment, he concluded, will be key to achieving credible, scalable models of integration.



Panel Discussion Highlights

1. Designing Synergistic Models of Care

Panellists discussed the importance of creating clinical pathways that enable genuine collaboration between TCM and Western medicine practitioners. Effective integration was described as more than coexistence—it requires shared protocols and mutual respect for each discipline's diagnostic and therapeutic logic.

2. Ensuring Governance and Quality Assurance

Participants agreed that robust institutional frameworks are needed to ensure safety and consistency in integrated settings. Accreditation systems and transparent audit mechanisms were seen as essential for accountability and continuous improvement.

3. Building Workforce Competence

The discussion underscored the need for education programmes that prepare practitioners to navigate both traditional and biomedical systems. Dual training and interdisciplinary curricula were proposed as pathways to developing an agile, culturally competent workforce.

4. Cultivating Public Confidence

Participants observed that public trust will determine how quickly integrated models are adopted. Transparent communication, patient education, and the demonstration of measurable outcomes were identified as critical strategies for gaining social legitimacy.

5. Creating Shared Research Infrastructure

Delegates emphasised the importance of interoperable data systems and joint research platforms linking TCM and Western institutions. Such infrastructures were viewed as key to enabling large-scale comparative studies and sustaining evidence-based integration.



Scene Setting Presentations: Translating Evidence into Practice – Strategies for Implementing TCM Interventions

Converting Evidence into Practice Guidelines

Academician Jinzhou Tian, Chinese Academy of Engineering and BUCM, presented a comprehensive overview of China's process for translating research evidence into clinical guidelines. He explained that this process involves systematic literature review, expert consensus, and multi-centre validation to ensure both methodological rigour and clinical applicability.

Professor Tian showcased examples of national guidelines that have elevated TCM's credibility in managing chronic and complex diseases. He noted that collaboration with international organisations such as WHO has strengthened transparency and global recognition.

In concluding, he emphasised that consistent methodology and international peer review are crucial to building confidence in Chinese guidelines. Institutional support, he added, must ensure guideline dissemination and monitoring at the national level.

Implementing Evidence-Based Practice in Clinical Settings

Professor Qingquan Liu, President of Beijing Hospital of Traditional Chinese Medicine, shared the hospital's journey toward embedding evidence-based practice in routine care. He described how electronic health records, data analytics, and digital decision-support tools have enabled adherence to evidence-based pathways while preserving individualised treatment principles.

Professor Liu discussed mechanisms for continuous quality improvement, including clinician training workshops and outcome feedback loops. These systems, he explained, foster a culture of reflective practice and enhance patient safety.

He emphasised that evidence implementation must be viewed as an ongoing process requiring alignment between clinicians, researchers, and hospital management.



Panel Discussion Highlights

1. Embedding Evidence Across Systems

Participants agreed that successful implementation depends on embedding validated evidence into national health frameworks. This includes integrating TCM outcomes into reimbursement schemes, clinical performance metrics, and digital health systems to ensure evidence informs decision-making at all levels.

2. Monitoring and Evaluation for Impact

The discussion highlighted that ongoing evaluation is essential to ensure the effectiveness and cost-efficiency of implemented interventions. Panellists recommended the use of national registries, data dashboards, and outcome indicators to monitor progress and inform future updates.

3. Disseminating Evidence Globally

Delegates underscored the importance of publishing high-quality Chinese research in international journals to expand visibility and influence. Partnerships with established publications such as The BMJ and BMJ Evidence-Based Medicine were identified as opportunities to bridge linguistic and methodological divides.

4. Policy Alignment and Leadership

Participants reflected on the need for sustained policy leadership to translate evidence into national practice. Effective implementation, they agreed, requires collaboration among ministries, regulatory authorities, and academic institutions under a unified strategic vision.

5. Building Implementation Capacity

Finally, the discussion emphasised workforce training and institutional readiness as central to long-term impact. Participants called for structured programmes that equip clinicians and administrators with the skills to apply, adapt, and sustain evidence-based TCM interventions.



Closing Reflections

Dr Juan Franco, Editor-in-Chief of *BMJ Evidence-Based Medicine*, concluded the roundtable by summarising three overarching priorities: strengthening methodological rigour in traditional medicine research, creating sustainable models for integration, and ensuring effective translation into clinical and policy practice.

He thanked Beijing University of Chinese Medicine and Yangtze River Pharmaceutical Group for their leadership and collaboration.

Annex 1: Meeting Agenda

Time	Session	Description/Speaker
14:00- 14:20	Welcome and Opening Remarks	Juan Franco Editor-in-Chief, BMJ Evidence-Based Medicine Cunzhi Liu Vice President, Beijing University of Chinese Medicine Yuyan Kong Managing Director, BMJ China (online) Chengming Gu Head of the Market and Medical Affairs Department of Yangtze River Pharmaceutical Group
14:20- 14:45	Session 1 Constructing High-Quality Evidence Frameworks for Traditional Medicine: Methodological Innovations and Global Collaboration	 Moderator: Jin-Ling Tang, Clinical Research Editor, The BMJ; Shenzhen University of Science and Technology, China Key Topics: Best available evidence that supports Chinese medicine clinical decision making: the whole evidence approach Reporting Standards and Data Sharing for TCM RCTs Methodological challenges and possible solutions for Chinese herbal medicine clinical trials Speakers: Charlie Xue, Vice President, Royal Melbourne Institute of Technology, Australia (online) Myeong Soo Lee, Korea Institute of Oriental Medicine, Korea Yutong Fei, Deputy Director of the Evidence-Based Medicine Center, Beijing University of Chinese Medicine, China
14:45- 15:20		 Panel Discussion: Challenges and suggestions for constructing high-quality evidence frameworks for traditional medicine in terms of methodological innovation and global cooperation Additional Speakers: Cunzhi Liu, Vice President, Beijing University of Chinese Medicine Xiaoyu Zhang, Doctor, Dongfang Hospital, Beijing University of Chinese Medicine, China Xinfeng Guo, Deputy director of the Clinical Research Center, Guangdong Provincial Hospital of Traditional Chinese Medicine (online)

15:20- 15:45	Session 2 Beyond Additive Effects: Innovating Synergistic Integration Mechanisms of TCM-Western Medicine	 Moderator: Junhua Zhang, Vice President, Tianjin University of Traditional Chinese Medicine, Director, Center for Evidence-Based Medicine Key Topics: Integrating TCM into Guidelines/Pathways for the Management of Infectious Diseases Treating the person and not the disease - what evidence should we consider? Research in integrative medicine in China: achievements and challenges
15:45- 16:20		 Speakers: Merlin Wilcox, Principal Research Fellow, University of Southampton, UK (online) Nicola Robinson, Emeritus Professor of Traditional Chinese Medicine and Integrated Health, London South Bank University, UK (online) Jianping Liu, Director, Center for Evidence-Based Medicine, Beijing University of Chinese Medicine, China Panel Discussion: Innovative Synergistic Integration Mechanisms TCM-Western Medicine and its future direction
		 Additional Speakers: Yuting Duan, Associate Director of Evidence-Based Medicine Center, The Affiliated Traditional Chinese Medicine Hospital, Guangzhou Medical University Huijuan Cao, Director of the Department of Clinical Epidemiology and Medical Statistics, School of Chinese Medicine, Beijing University of Chinese Medicine Shiyan Yan, Fellow, School of Acupuncture-Moxibustion and Tuina, Beijing University of Chinese Medicine
16:20- 16:40	Session 3 Translating Evidence into Practice: Strategies for Implementing TCM Interventions in Clinical Settings	Moderator: Yunwei Han, Vice President of The Affiliated Traditional Chinese Medicine Hospital, Southwest Medical University Key Topics: A case of converting evidence into practice guidelines Thoughts on Evidence-Based Research of Traditional Chinese Medicine
	J	Speakers: • Jinzhou Tian, Academician of the Chinese Academy of Engineering, Beijing University of Chinese Medicine

16:40- 17:20		 Qingquan Liu, President, Beijing Hospital of Traditional Chinese Medicine Panel Discussion: Challenges and strategies for implementing TCM evidence into Practice Additional Speakers: Jie Li, President, Guang'anmen Hospital, China Academy of Chinese Medical Sciences Xinhua Jia, Vice President, The Affiliated Hospital of Shandong University of Traditional Medicine Peiyong Zheng, Vice President, Longhua Hospital, Shanghai University of Traditional Chinese Medicine
17:20- 17:30	Closing Reflection and Call to Action	Juan Franco Editor-in-Chief, BMJ Evidence-Based Medicine

Annex 2: Roundtable Participants

Name	Role/Affiliation
Juan Franco	Editor-in-Chief, BMJ Evidence-Based Medicine
Cunzhi Liu	Vice President, Beijing University of Chinese Medicine
Yuyan Kong (online)	Managing Director, BMJ China
Chengming Gu	Head of the Market and Medical Affairs Department, Yangtze River Pharmaceutical Group
Jin-Ling Tang	Clinical Research Editor, The BMJ; Shenzhen University of Science and Technology, China
Charlie Xue (online)	Vice President, Royal Melbourne Institute of Technology, Australia
Myeong Soo Lee	Principal Researcher, Korea Institute of Oriental Medicine, Korea
Yutong Fei	Deputy Director, Evidence-Based Medicine Center, Beijing University of Chinese Medicine, China
Xiaoyu Zhang	Doctor, Dongfang Hospital, Beijing University of Chinese Medicine, China
Xinfeng Guo (online)	Deputy director of the Clinical Research Center, Guangdong Provincial Hospital of Traditional Chinese Medicine
Junhua Zhang	Vice President, Tianjin University of Traditional Chinese Medicine
Merlin Wilcox (online)	Principal Research Fellow, University of Southampton, UK
Nicola Robinson (online)	Emeritus Professor of Traditional Chinese Medicine (TCM) and Integrated Health, London South Bank University, UK
Jianping Liu	Director, Center for Evidence-Based Medicine, Beijing University of Chinese Medicine, China

Yuting Duan	Associate Director of Evidence-Based Medicine Center, The Affiliated Traditional Chinese Medicine Hospital, Guangzhou Medical University
Huijuan Cao	Director of the Department of Clinical Epidemiology and Medical Statistics, School of Chinese Medicine, Beijing University of Chinese Medicine
Shiyan Yan	Fellow, School of Acupuncture-Moxibustion and Tuina, Beijing University of Chinese Medicine
Yunwei Han	Vice President, The Affiliated Traditional Chinese Medicine Hospital, Southwest Medical University
Jinzhou Tian	Academician, Chinese Academy of Engineering; Beijing University of Chinese Medicine
Qingquan Liu	President, Beijing Hospital of Traditional Chinese Medicine
Jie Li	President, Guang'anmen Hospital, China Academy of Chinese Medical Sciences
Xinhua Jia	Vice President, The Affiliated Hospital of Shandong University of Traditional Medicine
Peiyong Zheng	Vice President, Longhua Hospital, Shanghai University of Traditional Chinese Medicine