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Use case for Traditional Medicine in Japan
-Morbidity data classified by joint use of ICD-

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Abstract

World Health Organization (WHO) commenced to develop International Classification of Traditional Medicine (ICTM) in 2010 and the development was focused on traditional medicine practice used in China, Japan and Korea (One of the Traditional Medicine practice in Japan is called as "Kampo Medicine".). In this poster, we show the tentative morbidity data which are classified by joint use of Western Medicine (WM) chapter and TM chapter in ICD-11 Beta Draft by using health insurance claims.

Introduction

Traditional Medicine is an important form of health care for many people across many regions. The use of safe and effective traditional medicine practice and products can make an important contribution to national and individual health care and the promotion of health equity. However, there was no international platform that allows the harmonization of data for clinical, epidemiological and statistical use. In order to overcome such lacking, World Health Organization (WHO) commenced to develop International Classification of Traditional Medicine (ICTM) in 2010 and the development was focused on traditional medicine practice used in China, Japan and Korea (One of the Traditional Medicine practice in Japan is called as "Kampo Medicine".). Part of ICTM was evolved by integrating national standards in these countries and then is to be included into chapter 27 "Traditional Medicine Conditions – Module 1" in ICD-11.

The aim of this study is to create morbidity data in Japan, which are classified by joint use of Western Medicine (WM) chapter and TM chapter in ICD-11 Beta Draft.

Methods & Materials

Data source

Ministry of Health, Labour and Welfare (MHLW) performs "Survey of Medical Care Activities in Public Health Insurance" to obtain the basic data for health insurance policy by identifying the situation of recipient of health care including the contents of health intervention, the situation of diseases and injuries, the contents of prescription etc.. In order to conduct this survey, MHLW gathered health care claims data.

In principle, there are 3 categories in health care claims (medical claim, dental claim and pharmaceutical claims) . We use data from medical claim and pharmaceutical claims since there are data on age, sex, use of "Kampo" drug, diagnosis (according to ICD-10) and speciality of each medical institution (e.g. internal medicine, surgery, gynaecology etc.)

Mapping table between Pattern (TM) and "Kampo" drugs

One of the greatest features of "Kampo" medicine is that each "Kampo" drug is corresponds to "pattern" in traditional medicine. Japanese society of oriental medicine has completed the mapping table.

Morbidity data classified by joint use of ICD

We estimated the number of usage of "Kampo" drug by sex, age, diagnosis and speciality of medical institutions. And then, by using mapping table showing "kampo" drug-to-pattern (TM) correspondence, we created morbidity data in TM.

Results

Table1. 10 leading patterns (TM) by sex, in morbidity: Japan, 2016

Rank	Pattern(TM)			
	Male		Female	
1	TC59	Medium (Excess/Deficiency) pattern (TM)	TC59	Medium (Excess/Deficiency) pattern (TM)
2	TC52	Heat pattern (TM)	TC52	Heat pattern (TM)
3	TC55	Deficiency pattern (TM)	TC55	Deficiency pattern (TM)
4	TC53	Cold pattern (TM)	TC58	Moderate (Heat/Cold) pattern (TM)
5	TC58	Moderate (Heat/Cold) pattern (TM)	TC53	Cold pattern (TM)
6	TC81	Fluid disturbance pattern (TM)	TC81	Fluid disturbance pattern (TM)
7	TC61	Qi stagnation pattern (TM)	TC71	Blood stasis patterns (TM)
8	TC60	Qi deficiency pattern (TM)	TC62	Qi reverse flow patterns (TM)
9	TC54	Excess pattern (TM)	TC60	Qi deficiency pattern (TM)
10	TD60	Kidney qi deficiency pattern (TM)	TC61	Qi stagnation pattern (TM)

Table2. 5 leading patterns (TM) by age-group, in morbidity: Japan, 2016

	0-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-
1	TC52	TC59	TC59	TC59	TC59	TC59	TC59	TC59	TC59
2	TC59	TC52	TC52	TC52	TC52	TC52	TC52	TC55	TC55
3	TC81	TC55	TC55	TC55	TC55	TC55	TC55	TC52	TC52
4	TC55	TC81	TC81	TC81	TC58	TC58	TC58	TC58	TC53
5	TC54	TC58	TC71	TC58	TC53	TC53	TC53	TC53	TC58

Table3. 5 leading patterns (TM) by age-group, in morbidity: Japan, 2016

	IM	P	PD	S	OR	D	U	OBG	OPH	OTO	Others
1	TC59	TC55	TC52	TC59	TC59	TC52	TC52	TC55	TC52	TC59	TC59
2	TC52	TC59	TC59	TC52	TC58	TC59	TC81	TC71	TC59	TC52	TC58
3	TC55	TC52	TC81	TC55	TC55	TC71	TC55	TC59	TC81	TC81	TC52
4	TC58	TC58	TC55	TC58	TC81	TC54	TC59	TC81	TC55	TC58	TC55
5	TC53	TC53	TC54	TC53	TC53	TC55	TC53	TC53	TC53	TC55	TC53

IM:Internal Medicine, P:Psychiatry, PD: Paediatrics, S:Surgery, OR:Orthopaedics, D:Dermatology, U:Urology, OBG:Obstetrics & Gynecology, OPH:Ophthalmology, OTO:Otolaryngology,

Table4. 10 leading patterns (TM) by chapters in ICD-10, in morbidity: Japan, 2016

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	XIII	XIV	XV	XVI	XVII	XVIII	IXX
1	TC59	TC55	TC59	TC59	TC52	TC59	TC59	TC55	TC59	TC59	TC55	TC52	TC59	TC55	TC81	TC55	TC55	TC55	TC59
2	TC52	TC53	TC55	TC52	TC59	TC55	TC55	TC60	TC52	TC52	TC52	TC59	TC58	TC71	TC59	TC53	TC53	TC59	TC52
3	TC81	TC59	TC53	TC55	TC55	TC52	TC52	TC58	TC55	TC81	TC59	TC55	TC55	TC59	TC55	TC59	TC60	TC53	TC55
4	TC55	TC71	TC52	TC58	TC61	TC53	TC53	TC5Y	TC58	TC55	TC53	TC58	TC81	TC53	TC53	TC61	TC58	TC81	TC58
5	TC53	TC58	TC81	TC53	TC53	TC58	TC58	TC59	TC53	TC58	TC81	TC54	TC53	TC81	TC71	TC81	TC59	TC58	TC53
6	TC58	TC61	TC58	TC81	TC58	TC81	TC81	TC81	TC81	TC53	TC60	TC70	TC52	TC58	TC52	TC52	TC5Y	TC52	TC81
7	TC62	TC62	TC71	TC62	TC60	TC71	TD60	TC53	TC61	TC60	TC58	TC53	TC71	TC62	TC58	TC60	TC52	TC60	TC61
8	TC60	TC81	TC62	TC61	TC5A	TC61	TC71	TC52	TC60	TC56	TC61	TC71	TD60	TC52	TC62	TC58	TC61	TC62	TC71
9	TC56	TC52	TD60	TC71	TC71	TC62	TC62	TC62	TC71	TC54	TC62	TC81	TC60	TC5A	TC70	TC62	TC81	TC61	TC60
10	TD60	TC60	TC60	TC54	TC81	TC60	TC61	TC5A	TC54	TC61	TC71	TC5A	TC5Y	TD60	TC60	TC5Y	TC56	TC71	TC62

Conclusions

We created the tentative morbidity data in TM. The feature of this study is to show the cross-tabulation table according to both of WM chapter and TM chapter in ICD. Although there were still some technical problems to create morbidity data in TM, this results could show the usefulness and possibility of practical use of TM chapter in ICD-11. We hope our study could help enhance understanding of TM widely.

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