

Traditional Chinese Medicine for COVID: Usage & Attitudes

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Introduction: Traditional Chinese Medicine (TCM) in the Context of Pandemics

The emergence of the **Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)**, leading to the global COVID-19 pandemic, necessitated a rapid and multifaceted medical response. In China, where the outbreak originated, Traditional Chinese Medicine (TCM) was immediately mobilized alongside conventional Western biomedical approaches, reflecting its long-standing role in the nation's healthcare infrastructure, particularly during previous epidemic crises such as SARS in 2003. This integration was not merely a cultural reflex but a policy decision rooted in historical precedent, positioning TCM as a complementary or alternative therapeutic option from the outset. Understanding attitudes towards TCM in this unique context requires acknowledging the complex interplay between cultural heritage, government endorsement, scientific scrutiny, and global health skepticism regarding its implementation in a modern viral pandemic.

Historically, TCM has played a significant role in managing infectious diseases, relying on diagnostic principles that focus on balancing internal energies (Qi), addressing pathogen invasion based on environmental factors, and utilizing complex herbal formulations tailored to individual syndrome patterns rather than specific pathogens. This holistic, individualized approach contrasts sharply with the standardized, pathogen-specific treatment modalities characteristic of modern biomedicine. Consequently, public and professional attitudes towards TCM treatments for COVID-19 were heavily influenced by preconceived notions regarding its efficacy, safety profile, and mechanism of action, often leading to polarized viewpoints both domestically and internationally regarding its potential contribution to pandemic management and clinical outcomes.

The pandemic provided an unprecedented global stage for TCM, thrusting its practices--including herbal decoctions, acupuncture, and Qigong--into the international spotlight. While proponents highlighted its perceived ability to mitigate symptoms, reduce disease progression severity, and accelerate recovery, skeptics demanded rigorous, randomized controlled trials (RCTs) meeting international standards before accepting its clinical value. These divergent expectations set the stage for a dynamic evolution of attitudes, driven by clinical outcomes reported in China, media portrayal, and the rapidly shifting landscape of scientific evidence during the early and intermediate phases of the global health crisis, making the study of these attitudes crucial for future public health preparedness.

The Role of TCM in the COVID-19 Response

The official Chinese response to COVID-19 prominently featured TCM, incorporating it into national diagnostic and treatment protocols published by the National Health Commission (NHC). Specific herbal formulas, such as **Jinhua Qinggan Granules**, **Lianhua Qingwen Capsule**, and **Xuebijing**

Injection, were widely distributed and utilized across designated COVID-19 treatment centers, primarily aimed at treating mild to moderate cases, alleviating fever, cough, fatigue, and preventing progression to severe illness. The underlying philosophy for this deployment was the understanding that TCM could address the systemic inflammatory response and organ damage associated with the disease, even in the absence of targeted antiviral drugs during the initial stages of the outbreak, thus providing essential supportive care.

The integration was structured through multidisciplinary teams, where TCM practitioners worked alongside Western medical doctors. This collaborative model was intended to leverage the strengths of both systems--TCM's symptomatic relief and holistic support, coupled with conventional medicine's intensive care and monitoring capabilities. Initial reports suggested high rates of use, often exceeding 90% of confirmed cases in some regions, particularly Wuhan, the original epicenter. This high utilization rate within the primary area of outbreak significantly shaped public attitudes within China, where the perceived swiftness and scale of the deployment reinforced confidence in the government's comprehensive approach to crisis management and the efficacy of indigenous medicine.

However, documenting the precise efficacy of TCM interventions proved challenging due to the inherent complexity of herbal formulations and the difficulty in designing large-scale placebo-controlled trials under emergency conditions. While numerous observational studies and small-scale trials were quickly published, demonstrating positive clinical outcomes such as reduced hospitalization duration and symptom resolution, these studies frequently faced methodological critiques internationally regarding blinding and control. The nature of the evidence generation--rapid, pragmatic, and often focused on clinical syndromes rather than specific viral load reduction--contributed to varied professional and public attitudes regarding the scientific validity and generalizability of the reported benefits outside of the specific Chinese healthcare setting.

Global Public Perceptions and Acceptance

Outside of China and other East Asian countries with established TCM traditions, public attitudes towards its use for COVID-19 were significantly more cautious and heterogeneous. In Western nations, where regulatory standards for botanical medicine are often stringent and where the primary healthcare model is dominated by biomedicine, TCM was frequently viewed through the lens of **complementary and alternative medicine (CAM)**, associated more with wellness maintenance than critical care intervention. Early media reports highlighting the massive deployment of TCM in Wuhan often struggled to translate the underlying theoretical framework of TCM to a Western audience, contributing to confusion, skepticism, and the classification of TCM as merely an unproven folk remedy.

Public acceptance was highly correlated with pre-existing beliefs regarding CAM therapies.

Individuals who already utilized CAM showed a higher propensity to seek or endorse TCM treatments for COVID-19 prophylaxis or symptom management, often driven by a belief in natural remedies and a desire for personalized care. Conversely, segments of the population relying exclusively on conventional medical advice often viewed TCM interventions as unproven, potentially dangerous, or distracting from mainstream public health efforts like vaccination and antiviral development. Furthermore, the spread of misinformation regarding certain high-profile TCM formulas, particularly concerning exaggerated claims of efficacy, further complicated informed decision-making and polarized public opinion regarding their responsible use.

The global availability and regulatory status of specific TCM products heavily influenced consumption attitudes. In countries where products like Lianhua Qingwen were readily available or received emergency use authorization, consumer trust tended to be higher due to perceived governmental vetting. Conversely, regulatory bodies in many Western countries issued warnings against self-medicating with unproven herbal remedies, emphasizing the need for robust safety data and discouraging use outside of supervised clinical trials. This regulatory divergence created a situation where attitudes varied dramatically based on geographical location and local government endorsement, demonstrating that trust in the healthcare system's vetting process was a critical determinant of public acceptance.

Attitudes Among Healthcare Professionals (HCPs)

Attitudes toward TCM among conventional **Healthcare Professionals (HCPs)** were critical, as they served as gatekeepers for treatment recommendations and patient counseling. Within China, the attitude was largely one of mandatory integration, requiring conventional doctors to familiarize themselves with TCM protocols. This professional integration fostered a degree of acceptance, driven by national policy and observed clinical outcomes in large patient populations, even if the theoretical models remained distinct from their primary biomedical training. Many HCPs reported seeing tangible benefits in using TCM to manage complex symptom clusters and improve patient quality of life, particularly in recovery phases where conventional options were limited.

Internationally, the attitude among HCPs was generally marked by cautious skepticism and demand for higher evidentiary standards. While many recognized the potential for certain botanical compounds to yield therapeutic agents (a common historical route for drug discovery), the holistic, complex nature of full TCM prescriptions made them difficult to evaluate using standard pharmacological metrics. The primary barrier to widespread acceptance among Western HCPs was the perceived lack of high-quality, blinded, placebo-controlled clinical trial data demonstrating both efficacy and safety, particularly concerning potential **drug-herb interactions** when used alongside standard COVID-19 medications like antivirals or corticosteroids.

However, a growing minority of Western HCPs, particularly those involved in integrative medicine

or those practicing in fields like supportive care and rehabilitation, demonstrated a more open attitude. These professionals recognized the limitations of conventional medicine in addressing long-term symptoms or providing holistic support for patients suffering from **Post-Acute Sequelae of COVID-19 (PASC)**, commonly known as "Long COVID." For these practitioners, TCM offered a potential framework for managing chronic fatigue, cognitive dysfunction, and pain, leading to a nuanced acceptance focused on symptom management and rehabilitation rather than acute viral clearance, recognizing its role in improving quality of life.

Factors Influencing Positive Attitudes

Several key factors contributed to the formation and strengthening of positive attitudes toward TCM for COVID-19 management. The first major factor was the **cultural resonance and historical trust**, particularly in East Asia, where TCM is deeply embedded in cultural identity and health beliefs. For many citizens, utilizing TCM during a national crisis was a reflection of cultural pride and trust in indigenous medical knowledge, reinforcing a positive disposition regardless of external scientific validation, viewing it as a reliable, time-tested approach to epidemic management.

Secondly, the perception of **low side effects and holistic care** played a crucial role in patient choice. In the initial phases of the pandemic, when uncertainty about conventional drug treatments (such as repurposed antivirals and novel vaccines) was high, patients often preferred TCM treatments, viewing them as gentler and less likely to cause severe adverse reactions compared to synthetic pharmaceuticals. The promise of addressing the patient's overall condition--improving energy, appetite, and sleep--rather than solely targeting the virus, appealed strongly to those seeking comprehensive supportive care and overall systemic balance.

Finally, official **government endorsement and mass media promotion** in countries like China provided significant psychological assurance. When the national health authorities mandated the inclusion of TCM in treatment protocols and when high-profile doctors publicly advocated for its use, public confidence soared. This institutional backing served as a powerful legitimizing force, translating into positive attitudes and high rates of usage among the population. Furthermore, successful anecdotal reports and testimonials, widely shared through social media, reinforced the belief in TCM's effectiveness, creating a positive feedback loop of acceptance and advocacy among users.

Skepticism, Regulatory Challenges, and Negative Attitudes

Negative attitudes towards TCM were predominantly fueled by scientific skepticism regarding its mechanisms and the quality of evidence. Critics, primarily from the biomedical research community in the West, highlighted the methodological flaws in many early TCM trials, including small sample sizes, lack of blinding, and the absence of clear control groups or standardized outcome measures.

This lack of robust, internationally standardized evidence led to the perception that TCM deployment was driven more by political and cultural imperatives than by rigorous scientific proof, severely limiting its acceptance in environments that prioritized evidence-based medicine and double-blind testing.

Regulatory challenges presented a significant barrier to international acceptance. Many TCM herbal formulas contain multiple active compounds, making standardization, quality control, and dose-response relationship analysis difficult. Concerns over potential issues such as heavy metal contamination, pesticide residues, and species misidentification in complex herbal mixtures raised serious safety questions among international regulatory bodies like the **European Medicines Agency (EMA)** and the **U.S. Food and Drug Administration (FDA)**. These safety concerns, often publicized through regulatory warnings, significantly dampened positive attitudes among consumers and practitioners outside of established TCM markets, fostering distrust in the purity and consistency of the products.

Furthermore, the philosophical divergence between TCM and biomedicine contributed to negative attitudes. The TCM concept of treating "syndromes" based on patterns of disharmony often clashed with the reductionist approach of modern medicine, which demands quantifiable biological markers, such as specific viral load reduction or defined immunological responses. This fundamental disagreement on what constitutes "efficacy" made cross-cultural communication challenging and reinforced the view among skeptics that TCM lacked the necessary precision and transparency required for modern pandemic management, leading to outright rejection by many mainstream medical institutions who prioritize mechanistic understanding.

Integration and Policy Frameworks

The COVID-19 pandemic accelerated discussions regarding the formal integration of TCM into national health systems globally, often pushing policymakers to consider traditional remedies under crisis conditions. In countries like Thailand, Singapore, and South Korea, which already possess robust frameworks for integrating traditional medicines into public health services, attitudes were generally conducive to adopting TCM protocols derived from Chinese experience, albeit often adapted to local regulatory standards and available resources. The policy framework in these nations often focused on using TCM for prevention, early intervention, and recovery support, rather than positioning it as a primary treatment for severe disease.

In contrast, integration efforts in North America and Europe focused heavily on research and regulatory harmonization before clinical adoption. Policy discussions centered on how to fund and execute high-quality clinical trials to validate the efficacy of specific TCM components using Western scientific methodology. The attitude driving this approach was pragmatic: if TCM treatments could demonstrate measurable benefits through established scientific methods, they

could be conditionally integrated. This perspective highlights a continued tension--acceptance is conditional upon meeting external, biomedical standards of evidence, rather than solely relying on centuries of traditional clinical experience.

The policy response also involved defining the scope of practice and ensuring patient safety. Ensuring that only qualified and licensed practitioners administered TCM treatments, especially complex herbal decoctions, became a regulatory priority to protect public safety and maintain consumer trust. The establishment of clear guidelines for professional collaboration and referral between certified TCM practitioners and conventional doctors was seen as essential to fostering positive professional attitudes and achieving genuine integration, moving beyond mere parallel existence to true synergistic care models that benefit the patient.

Future Trajectories of TCM Acceptance Post-Pandemic

The legacy of TCM utilization during the COVID-19 pandemic is likely to have a lasting impact on global health attitudes, having significantly raised the visibility of traditional medicine on the international stage. Future acceptance will depend heavily on the sustained effort to bridge the evidentiary gap between traditional knowledge and modern scientific requirements. This involves international collaboration to standardize herbal product quality, establish rigorous pharmacokinetic data, and conduct large-scale, multi-center trials focused on specific clinical endpoints relevant to viral diseases and, crucially, post-viral syndromes, thereby satisfying the demands of evidence-based medicine.

Attitudes are also evolving regarding the utility of TCM in managing **chronic conditions and post-viral fatigue**. As the long-term burden of COVID-19, or Long COVID, becomes clearer, conventional medicine often struggles to provide comprehensive, effective solutions for the constellation of persistent symptoms such as brain fog, chronic pain, and severe fatigue. This therapeutic gap creates a fertile ground for the increased acceptance of TCM, which traditionally excels at treating complex, chronic syndromes through individualized therapies designed to restore systemic balance. The perceived success of TCM in supporting recovery may lead to a permanent shift in professional attitudes, recognizing its distinct value in rehabilitation and long-term supportive care.

Ultimately, the trajectory of TCM acceptance will be defined by institutional endorsement and educational reform. If medical schools and continuous professional development programs begin to incorporate robust, unbiased information about the mechanisms and verified applications of TCM, the inherent skepticism among future generations of HCPs is likely to diminish. The goal is to move from polarized attitudes of acceptance or rejection to a nuanced understanding of TCM's specific therapeutic niche, ensuring that its potential is leveraged responsibly within a truly integrative global health system, prepared not only for future pandemic threats but also for the

complex chronic health challenges that follow them.

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