

Das Globale Netzwerk für Ärztliche Akupunktur

ICMART International Council of Medical Acupuncture and Related Techniques
Ärztliche Akupunktur in Indonesien

Der ICMART hat über die drei Jahrzehnte seines Bestehens ein internationales Netzwerk der Ärztlichen Akupunkturgesellschaften geknüpft, das sich der Anerkennung, Verbreitung und Erforschung der Akupunktur verschrieben hat.

Es ist wenig bekannt, dass Länder fernab von Europa und dem Westen diesbezüglich ihre eigene erfolgreiche Entwicklung im Förderungs- und Anerkennungsprozess gemacht haben. Ein Beispiel soll hier dargestellt werden: Indonesien.

Die Indonesian Association of Medical Acupuncture IAMA (indonesisch HIDAMI) ist seit 2009 Mitgliedsgesellschaft des ICMART. Der engagierte Anerkennungsprozess der Akupunktur und schließlich der Ärztlichen Akupunktur im Land der 1.000 Inseln war nur durch den Einsatz aller Beteiligten mit Unterstützung

der Regierung möglich. Der im Folgenden dargestellte Prozess hat unsere volle Bewunderung und Unterstützung.

Die IAMA wird darüber hinaus 2015 einen ICMART Weltkongress auf Bali organisieren und durchführen, zu dem alle herzlich eingeladen sind. Siehe Seite 37.

Dr. med. Walburg Marić-Oehler

Mariannenweg 48

D-61348 Bad Homburg v. d. H.

Tel.: +49 6172 21038

Fax: +49 6172 690441

maric-oehler.daegfa@t-online.de

www.icmart.org

✉ K. Saputra, T.C. Sutrisno

Indonesian Association of Medical Acupuncture (IAMA)

Medical Acupuncture in Indonesia

1. Introduction

Acupuncture has been practiced in Indonesia for many years, in one of the government hospitals in Jakarta since 1963. Research in Eastern medical paradigms, including acupuncture, is now being conducted in Indonesia. Acupuncture organizations began to be organized in Indonesia in 1978. The Indonesian Ministry of Health and Ministry of Education have issued regulations about acupuncture organizations. In 1990 the government established the Acupuncture Research Laboratory in Health Services (LP3A) under the guidance of National Institute of Health of the Republic of Indonesia, see figs. 1–4. Its purpose was to conduct acupuncture research regarding its utilization in health services. The research was conducted through joint

activities with Airlangga University Surabaya and the Ministry of Research and Technology Republic of Indonesia.

2. Acupuncturist regulation in Indonesia – a historical overview

1990 – Regulation of acupuncture non-formal education and acupuncture usage by Ministry of Education and Ministry of Health

Acupuncturist regulation in Indonesia began in 1990, with the promulgation of joint regulations between Ministry of Health and Ministry of Education about non-formal acupuncture edu-



Fig. 1: National Institute of Health, Surabaya, Indonesia



Fig. 2: Acupuncture Research Department as part of the National Institute of Health area, Surabaya



Figs. 3 and 4: Research activity using mice

cation (acupuncture courses). The regulation stated that courses in acupuncture are a non-formal education to produce acupuncturists and promote acupuncturist usage by Ministry of Health as part of health service providers in the community. [1]

1992 – Establishment of acupuncture research laboratory in Health Services (LP3A) by Ministry of Health

The use of acupuncturists in formal health services between 1990–1995 was very limited. Acupuncture was primarily practiced in private offices.

After the enactment of the Health Act 1992, which codified the use of traditional medicine [2], the government formed the Development and Application Center of Traditional Medicine at the Research and Development Center of Health Services with Acupuncture Research Laboratory in Health Services (LP3A) as the center of the activities [3].

1996 – Usage of acupuncture in formal health services system by Ministry of Health

In 1994, the Ministry of Health began the process of guiding and supervising acupuncture services.

In 1996, the Ministry of Health issued a regulation about the usage of acupuncture in formal health services system. Since that time the usage of acupuncture has flourished in Indonesia. [4]

2003 – Licensing by Ministry of Health for acupuncturists working in Indonesia

In 1997–1998, Indonesia suffered from an economic crisis. Until that time, a substantial number of foreign acupuncturists had entered Indonesia illegally. As a result, the government began working on regulations regarding the licensure of acupuncturists working in Indonesia.

In 2003, the government issued a regulation about licensure for acupuncturists working in Indonesia. The regulation was issued for guidance and supervision and also to filter foreign acupuncturists who want to work in Indonesia. At that time, acupuncturists were the only traditional medicine practitioners who held government licenses. [5]

The government noticed the need for formal education in acupuncture to create professional acupuncturists. In 2003, the gov-

ernment issued a regulation about diploma education for acupuncturists who were included in the formal health profession as part of the physical therapist group. [6] In the following year, the government issued the first permit to open a diploma education course for acupuncture. [7]

2012 – Medical acupuncture as additional competency for general practitioners in Indonesia by Indonesian Medical Doctor Association

Over time, many medical doctors in Indonesia had taken acupuncture courses. These physician courses evolved into programs based on traditional principles combined with medical principles such as neurology, endocrinology, and immunology. In other words, Medical Acupuncture was created in Indonesia. Indonesia is a large country of many islands. To accommodate the need for acupuncture education for medical doctors, acupuncture education, since 2004, has been accomplished through the distant study model using Campus Online Acupuncture Indonesia. This program was developed to increase knowledge of acupuncture in medical science for all medical doctors who had learned acupuncture prior to 2004. There are now more than 3,000 medical doctors practicing Medical Acupuncture in Indonesia in formal health services and private practices (see fig. 5).



Fig. 5: Cipto Mangunkusumo Top Referral Hospital in Jakarta where is the first acupuncture department in Indonesia

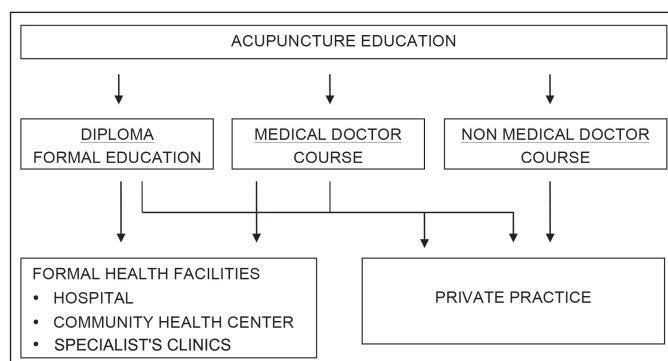


Fig. 6: Variety of acupuncturists in Indonesia

The regulations issued by the government still classify acupuncture as part of traditional medicine. Medical doctors who want to practice acupuncture must have two licenses: a medical doctor license and a traditional medicine practitioner license. The Indonesian Medical Doctor Association has accepted acupuncture as an augmenting competency for general practitioners.

In 2012 Indonesian Medical Doctor Association issued a decision letter which stated that medical acupuncture is an additional competency for general practitioners in Indonesia. [8]

3. Variety of acupuncturist in Indonesia

There are several types of acupuncturists in Indonesia. They are characterized by their acupuncture education (see fig. 6).

Family tradition

The first group includes acupuncturists who learned acupuncture from their family. They did not attend either legal institutions which provide non-formal acupuncture education (acupuncture course) or legal institutions which provide formal acupuncture education. Therefore they do not have legal certificates reflecting acupuncture education. Since 2003, as stated above, everyone who wants to practice acupuncture must have a legal certificate of acupuncture education plus a certificate of acupuncture competency.

Traditional acupuncturists

The second group includes acupuncturists who are trained as traditional acupuncturists. They attend non-formal acupuncture education according to the WHO guidelines (300 hours training). They are legally entitled to perform traditional acupuncture services in private practices in the community. They acquire their license from the local medical department using a recommendation letter from the traditional acupuncturist organization (which is called PAKSI).

Licensed traditional acupuncturists – acupuncture therapists

The third group is Diploma degree acupuncturists, who are called acupuncture therapists in Indonesia. They attend six semesters of acupuncture education, the equivalent of 2,000 hours of training. The education curriculum consists of knowledge of acupuncture, western medicine science and acupuncture application especially to support physical therapy. The acupuncture knowledge given is much more extensive compared to the non-formal education. The

curriculum is designed to create acupuncturists who are equal to paramedics.

They can work as medical doctors' assistants to provide acupuncture services in the hospital setting. They can also do private practice in the community. Their work places include hospitals, first level hospitals as well as referral hospitals, private clinics, and private practices. [9]

Their licenses are given by the local medical department using a recommendation letter from the diploma degree acupuncturist organization (which is called HAKTI).

Medical acupuncture – general practitioner medical doctor with acupuncture as additional competency

The fourth group is medical doctors who learn acupuncture as an additional medical competency.

A general practitioner medical doctor with acupuncture as additional competency receives basic acupuncture training according to the WHO guideline (900 hours training) and advanced courses. They have the authority to do medical acupuncture in the first level hospital, private clinic, and private practice. Their licenses are given by local medical department using a recommendation letter from the Indonesian Medical Doctor Association. Medical acupuncture is an additional competency for general practitioners. The Indonesian Association of Medical Acupuncture (IAMA, in Indonesian HIDAMI) represents Medical Acupuncture in Indonesia and is as a member of ICMART International Council of Medical Acupuncture and Related Techniques active. PDAI is a national Medical Acupuncture Association.

Medical acupuncture training for general practitioners includes:

1. acupuncture in basic science (bio-molecular, biophysics, and anatomy-physiology acupuncture correlation)
2. pathophysiology of medical acupuncture (neuroscience, bioenergetics, endocrinology, immunology, metabolism, reproduction, aging process and pain medicine)
3. acupuncture in clinical practice (internal medicine, pediatrics, neurology, medical rehabilitation, obstetric gynecology, anesthesia, dermatology, cosmetic, psychiatric).

Medical doctor with hospital course work

Some medical doctors in Indonesia attend their acupuncture education in form of course work in the hospital. This six semester course equals 2,000 hours of practice. At this time, the training duration is designed according to medical specialist's education in Indonesia. They can work as medical acupuncturist in referral hospitals.

4. Acupuncture services in hospitals

Since 2004, acupuncture services at referral hospitals have been covered by government health insurance. This coverage encourages the development of acupuncture services in hospitals. There are two main models for hospital acupuncture services in Indonesia. First is acupuncture services in a separate clinic within the hospital and the second is acupuncture service which is integrated with other departments.

4.1 Acupuncture services in separate clinics

This model can provide many kinds of health service models including promotive, preventive, curative, and rehabilitative

models. Acupuncture must collaborate with other departments to do promotive and rehabilitative models. They are supportive to the other departments. Acupuncture as a curative model can be done within its own service model. Acupuncture services in a separate clinic can be advantageous when working together with the other treatment models, but it becomes disadvantageous if it is not recognized or supported by the other departments. Therefore, good management and communication with other departments is necessary in the hospital setting so that acupuncture usage and indications is understood by all departments in the hospital.

4.2 Acupuncture services integrated with other departments

In this model, acupuncture can be useful for all health service models because it is not separate. Acupuncture can be part of many medical services and can be used in proper conditions.

4.2.1 Medical rehabilitation department

Many cases in medical rehabilitation departments, especially pain, muscle strain and muscle sprain, require long healing time. Acupuncture can be supportive to increase the quality of the treatments. Acupuncture can be alternative treatment for hospitals with limited medical rehabilitation equipments. [10–12]

4.2.2 Neurology department

Acupuncture can increase the quality of therapy especially on migraine, headache, and pareses. [10, 11]

4.2.3 Pain center oncology department

Acupuncture has been proven to have a positive effect on pain relief and can be equal to some analgesic medicine. Acupuncture also has been proven to stimulate the immune system and to reduce other complains such as nausea and anorexia. [11]

4.2.4 Internal medicine and pediatric

Acupuncture can be used in immunological cases such as allergies and other functional diseases. [11]

4.2.5 Advantages and disadvantages

Acupuncture services, which integrated with other departments, have advantages and disadvantages. The advantages are more acceptable and can be done by medics and paramedics, the wider usage for supportive as well as alternative treatment. The disadvantage is that acupuncture is not viewed as a unique science.

5. Summary

Acupuncture, which has its origin in traditional medicine practice, is standardized and supervised by the Indonesian government (Ministry of Health and Ministry of Education) and follows years of scientific and clinical research.

Medical doctors who perform acupuncture, with the recommendation of the Indonesian Medical Doctor Association, formed the Medical Acupuncture Societies which has authority over acupuncture in the medical field.

Acupuncture has become part of formal health services in Indonesia, including private practices, medical clinics, community health centers and hospitals and has been covered by the government health insurance.

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ICMART XVII

WORLD CONGRESS ON MEDICAL ACUPUNCTURE

EXPLORING ACUPUNCTURE

IN MEDICAL SCIENCE

BALI – INDONESIA
8 – 9 – 10 MAY 2015

Organized by
Indonesian Association of Medical Acupuncture (IAMA)

Topic

- Research Based And Clinical Approach
 - Pain Management
 - Endocrinology
 - Immunology
 - Metabolism
- Workshop in Clinical Practice of Medical Acupuncture
- Education and Training Model for Medical Student and Medical Practice
- Acupuncture Practice in Formal Health Services System

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Bounty Cruises : Sunset and Night Sight
Seeing to Nusa Lembongan Island - Bali

For further informations please contact :

HARYONO TOURS & TRAVEL
Jl. Sulawesi 27 – 29, Surabaya 60281
Indonesia
Phone : +62-31-5049797
Fax : +62-31-5043033
Email : mice@haryonotours.com

ACADEMY ACUPUNCTURE OF SURABAYA
ACUPUNCTURE RESEARCH LABORATORY
Jl. Indrapura 17 Surabaya 60176, Indonesia
Phone : +62-31-3566237 - 3540089
Fax : +62-31-3558017
Email : lp3a@sbv.dnet.net.id

