

Website:

<https://www.kingscicm.org> (English)

<https://chinese.kingscicm.org> (中文)

KING'S
College
LONDON

The King's Centre for Integrative Chinese Medicine

An innovative approach to society's
major healthcare challenges



Table of Contents

Section title	Page Number
Table of Contents	1
Integrative Chinese Medicine (ICM): Why and How?	2
The Importance of Integrating Two Enduring Philosophies of Medicine	3
King's College London	4
King's Teaching Hospitals	5
King's Centre for Integrative Chinese Medicine	5
King's CICM Fundraising Activities	6
• Stage 1: King's CICM Empowerment Fund	7
• Stage 2: King's CICM Breakthrough Fund	10
King's 200th anniversary celebration	11
Appendix 1. Evidence-based ICM: RCT Evidence and Mechanistic Insights	12
Appendix 2. Selected KHP Publications: Laying the Foundation of King's CICM	16
Appendix 3. Fundraising Plan for the King's CICM Initiative	17
Appendix 4. King's CICM Staff	23
Appendix 5. King's CICM Honorary Advisory Board	25
Quote of Marie Curie	27

Integrative Chinese Medicine: Why and How?

*"We cannot solve our problems with the same thinking
we used when we created them."*

Albert Einstein (1879-1955)

Integrative Chinese Medicine (ICM)

ICM seeks to deliver patient-centred, safe and effective healthcare by merging the wisdom of traditional Chinese medicine (TCM), conventional medicine, and modern science and technology. It is not a mere combination of two medical systems but an epic interdisciplinary effort to shape the future of medicine, addressing contemporary health challenges through collaboration, research and innovation.

The Need for ICM

Conventional medicine faces challenges in addressing chronic diseases, functional disorders and preventive care. TCM, with its holistic approach, function-oriented diagnosis, emphasis on endogenous defence, metabolic homeostasis, and personalised prevention and treatment (both pharmacological and non-pharmacological), offers valuable insights to address these gaps. Integrating these two medical systems enhances our understanding of health and disease, paving the way for more effective prevention and treatment strategies.

Achieving ICM

- Breaking down barriers and fostering interdisciplinary collaboration.
- Harmonising the philosophies of TCM and conventional medicine.
- Combining expertise and resources from both fields with cutting-edge science and technology.

As Albert Einstein noted, solving complex problems requires new ways of thinking. ICM embodies this principle, advancing medical practice and exploring innovative solutions for human health through cross-cultural learning and collaboration.

Holistic, personalised, function-oriented diagnoses  Four diagnostic methods (inspection, auscultation & olfaction, inquiry and palpation) are the key to TCM diagnosis	A traditional medicine with over 2000 years of text record  410 volumes, 800 classic Chinese <i>materia medica</i> works had been published by 1911, i.e., end of China's Qing dynasty
Use of herbal drugs and other types of medication  Over 11,000 botanical species, 1600 zoological species and 80 mineral substances	Non-drug therapies, e.g., acupuncture, tai-chi and tuina  A dozen non-drug therapies also include cupping, gua sha, lotus position, medical qigong, meditation, etc.

The importance of integrating two enduring philosophies of medicine

Universal access to safe and effective traditional, complementary and integrative medicine for health and wellbeing is central to the World Health Organization (WHO) Traditional Medicine Strategy 2025-2034. The King's CICM initiative explores TCM as a case study for innovation by blending different medical traditions with cutting-edge science and technology.

Characterised by interventions guided by holistic, personalised and function-oriented diagnostics, TCM is an integral component of China's mainstream higher education and healthcare systems. The WHO recognises TCM as one of the world's most ancient medical systems and one that still plays an important role in global healthcare. TCM research has led to the discoveries of artemisinin for malaria (*Nobel Prize* 2015) and arsenic dioxide for leukaemia (*Future Science Prize* 2020). Accumulating evidence supports the use of TCM to address major unmet medical needs of modern society (**Appendix 1**), and it is widely anticipated that TCM will continue to inspire groundbreaking innovations in health science and care. Against this backdrop, researchers at King's College London (King's) have developed an *ICM approach to catalysing innovation* by breaking down barriers, facilitating dialogue, supporting collaboration, and integrating wisdom, expertise and resources from TCM, conventional medicine, and state-of-the-art science and technology.

King's scientists are among the pioneers in investigating the nephrotoxic and carcinogenic effects of aristolochic acid-containing plant species. Their work has contributed to the ban of these species, hence making herbal medicine safer. They are at the forefront of innovation by integrating Western and Chinese wisdom in the medical field. For example, they are leaders in TCM-inspired research of kidney disease and antifibrotic therapies, and in promoting good practices in the research of traditional, complementary and integrative medicine, and in facilitating interregional, intersectoral and interdisciplinary collaborations in TCM and other ethnic medicines (**Appendix 2**).

Building on this track record, *King's Centre for Integrative Chinese Medicine* has been initiated to catalyse innovation in medical education, research, healthcare and regulation. Aligned with *WHO Traditional Medicine Strategy 2025-2034*, *NHS Priorities*, *King's Strategic Vision 2029* and *King's Strategy 2030*, the Centre will build upon well-established international standards, good practice guidelines and collaboration networks, which will also support the integration of other ethnic wisdom, such as Ayurveda, Unani and yoga from India, into tomorrow's medicine and healthcare.

King's College London. This renowned institution was founded in 1829 by King George IV and the Prime Minister, Duke of Wellington, on the banks of the Thames in central London. It was a founding member of the University of London, one of the oldest universities in the UK. King's is a world-famous centre for scientific & technological innovation and the cradle of talent cultivation. From it, 14 Nobel Prize winners have emerged. King's is ranked 31st in the 2026 QS World University Rankings, 2nd in Nursing, 5th in Dentistry, 9th in Life Sciences and Medicine, 15th in Psychology, 17th in Pharmacy & Pharmacology, and 23rd in Anatomy & Physiology.



Strand campus, King's College London (Somerset House East Wing)

In 2009-2012, King's led the development and implementation of the 1 million Euro *Good Practice in Traditional Chinese Medicine Research in the Post-Genomic Era* (GP-TCM) project, the EU's first-ever EU-China cooperation on the modernisation of Chinese medicine, funded under the 7th Framework Programme of the European Commission. King's also led the conversion of the GP-TCM



The KHP logo

consortium to the GP-TCM Research Association and its establishment into a UK-based charity, an Interested Party of the European Medicines Agency and an acclaimed international society dedicated to the development and dissemination of good practices in TCM research.

In 2013, King's and its world-renowned teaching hospitals (collectively known as King's Health Partners, KHP) decided to develop a new centre dedicated to catalysing innovation by integrating wisdom derived from TCM, conventional medicine and state-of-the-art bioscience.

King's teaching hospitals include St. Thomas' Hospital, opposite the Houses of Parliament across the River Thames. Here, Florence Nightingale founded the world's first vocational nursing school. The hospital is also the birthplace of the prestigious medical journal *The Lancet* and modern nephrology, lymphomatology and endocrinology.

Standing at London Bridge on the south bank of the Thames, just beside the Shard, the tallest building in Western Europe, King's Medical School at Guy's Hospital has hosted many MRC Research Centres, the UK's national medical research teams.

King's College Hospital and Maudsley Hospital, located on the Denmark Hill Campus, are South London's most influential general hospital and the oldest and most prestigious psychiatric hospital in the UK, respectively. Together, they embody King's long-standing tradition of integrating body and mind in studies of health and disease.

King's Centre For Integrative Chinese Medicine (CICM)

King's CICM is a research-focused interdisciplinary initiative of King's College London and KHP. It was approved by the KHP Research Committee as an incubator for innovative research, teaching and care through interdisciplinary, intersectoral and interregional collaborations.

King's CICM aims to catalyse innovation, nurture talent, foster disruptive research, facilitate knowledge exchange and support cooperation by integrating modern health science and care with TCM-derived wisdom and practices. Bearing the banner of *good practice*, the centre combines KHP strengths with complementary TCM knowledge and resources to provide innovative solutions to major challenges of modern society.

King's CICM plans to kick-start with a few priority areas: tackling kidney disease, cardiovascular disease, cancer and other ageing-associated disorders through the application of cutting-edge technologies such as artificial intelligence, clinical studies, and TCM-inspired biomedical innovation. As resources and expertise grow, our R&D remit will be expanded gradually to cover other major health threats aligned with the priorities of the World Health Organization (WHO), the National Health Service (NHS) and the National Institute for Health and Care Research (NIHR), as well as the strengths of KHP (e.g. liver disease, lung disease, mental health, infertility, antibiotic resistance, infection, inflammation, pain-related conditions, and long-neglected rare diseases). *The objective is to provide safe, cost-effective, innovative and equitable solutions through an ICM approach.*



St Thomas' Hospital



Guy's Hospital



Maudsley Hospital



King's College Hospital

King's CICM Fundraising Activities

To enable the King's CICM initiative, a fundraising campaign was launched in 2016 and a substantial grant income for this centre was achieved. This fundraising campaign was put on hold due to the SARS-CoV2 pandemic in 2020.

8 October 2024 marks the rebirth of CICM

The King's CICM was relaunched in 2024. On 8 October 2024, the freeze on fundraising was lifted. 8 October 2025, King's CICM regained KHP fundraising priority status.

Like the rebirth of the Phoenix, King's CICM renews its life with vigour. A new business blueprint and a new fundraising plan are released, as summarised in this document.

As summarised in **Appendix 3**, King's CICM 2.0 will raise funds in **two key stages**:

- **Stage 1:** A £0.5m **Empowerment Fund** will enable us to build the platform and network needed for the growth of the Centre, including team development, website, forums, as well as education and training endeavours. We propose that the **Empowerment Fund** be partitioned to fulfil the following purposes:
 - £400k to support co-funded research projects
 - £50k to support CICM education, training and forum activities
 - £25k to support publications, academic meetings, dissemination and outreach, and
 - £25k to facilitate website development and fundraising activity.

Patient and Public Involvement (PPI) is central in King's CICM 2.0 initiative. We will listen to, collaborate with, and strive to serve the needs of patients and society.

- **Stage 2:** A £5m **Breakthrough Fund** will enable further growth of the Centre by recruiting global talents and unlocking more opportunities for collaboration and resource integration. It will also allow for expanding the remit of CICM to cover more major areas of unmet needs and will deliver broader and deeper impacts. It is proposed that the **Breakthrough Fund** be broken down to accomplish the following purposes:
 - £4m for sustainability: three academic and research positions created to recruit leaders at the frontiers of ICM
 - £500k for co-funded projects covering all key themes
 - £250k for ICM education, training and forum
 - £125k supporting publication, meetings, dissemination and outreach, and
 - £125k: website and fundraising activity.

As detailed in **Appendix 3**, our fundraising plan will aim to:

- **Establish a pool of donations aligned with donor-selected projects and purposes.** Inspired by the award-winning **World's Questions | King's Answers** campaign (<https://www.kcl.ac.uk/world-questions-kings-answers>), we are keen to listen to a wide spectrum of ideas, ranging from patients, caregivers, general public and media, to the TCM community, KHP staff, King's CICM Honorary Advisors, collaborators and other stakeholders.
- **Establish four named memorial awards** in honour of the late Professors Peter Hylands, Peter Houghton, Boying Ma and Man Fong Mei. Funds supporting these awards will drive the development of **10 priority areas** of ICM research and training (**Appendix 3**). Characterised by the application of cutting-edge science & technology and interdisciplinary approaches, these

projects will break down barriers, facilitate dialogue and collaboration, promote good practices, and will particularly emphasise TCM-inspired biomedical innovation, clinical efficacy and safety of TCM drugs and non-drug therapies, efficacy- and safety-based mechanisms, and marketing of innovative ICM products.

Stage 1: King's CICM Empowerment Fund

Target: £500,000 by December 2025

Purpose: This funding will allow for laying a solid foundation for a world-class centre for ICM:

In Stage 1, King's CICM aspires to establish the following "brand":

- Leaders in high-quality, objective scientific studies of TCM;
- Frontrunners in promoting Patient and Public Involvement, Equality, Diversity and Inclusion in integrative medicine;
- Regular contributors to top clinical and science journals;
- Key consulting centre for regulatory authorities, non-governmental organisations and the public for independent, objective and accurate assessments;
- Preferred UK and European partner for Chinese institutions, companies and authorities in their international development strategy; and
- Experts in new therapeutic development, *e.g.* addressing the hidden, as yet rapidly growing, epidemic of kidney disease, coronary heart disease, cancer, and fibrotic diseases — soft tissue scarring, hardening and stiffness — a common leading cause of chronic organ failure and mortality in modern society.

These are built on what we have already achieved so far. This includes:

- Leadership of a global collaborative network through the GP-TCM project and the GP-TCM Research Association, which is particularly influential in Europe and China;
- Highly-cited TCM-related publications, such as those on GP-TCM good practice guidelines (*J Ethnopharmacol.* 2012;140:469-475), GP-TCM report on TCM omic studies (*J Ethnopharmacol.* 2012;140:535-544) and the GP-TCM Research Association position paper on the "3Is" principles (integrity, integration and innovation) (*BMC Complement Altern Med.* 2013;13:132) —each of these publications has been cited over 200 times, and four other research papers on TCM, fibrosis and antifibrotic therapies have been each cited over 100 times; and
- Novel research directions on kidney diseases and antifibrotic therapies, *e.g.*, kidney defence mechanisms as a convergence point of regulation and novel therapeutic target in acute kidney injury and chronic kidney disease, as inspired by the TCM "Healthy Qi" (正氣) and Wei defensive qi (衛氣) theory, (*Nephron* 2019;143:148-152; *Sci Rep.* 2020;10:16683; and *Exp Biol Med.* 2024;249:10167) and metabolic mechanisms of fibrosis and antifibrotic therapies, as inspired by the TCM "Yang Qi" theory (*Sci Rep* 2020;10:19054 and *Phytomedicine* 2022;100:154049).
- A team of King's CICM faculty (**Appendix 4**) with strong expertise in Nephrology, Cardiology, Vascular biology, Cancer studies, Pharmaceutical Science, Clinical Trials and Artificial Intelligence (AI) have been developed. This will continue to grow.

In Stage 1, we will focus on the following.

King's CICM — website, library projects and related innovation:

- Support research and teaching, showcase the history, blueprint, scientific aspirations and milestones of the King's CICM project;
- Build networks and stimulate enthusiasm;
- Collaborate closely with the WHO, NIHR, British Library, British Museum, Royal Botanical Gardens and other world-leading institutions to boost our education, research and social impact.

King's CICM — team development:

- **A team of CICM Staff** is being established (**Appendix 4**), with expertise in studies of **Body-Mind Integrative Medicine, Healthy Ageing, Cancer & Pharmaceutical Science, Cardiovascular, Kidney & Metabolic Health**, and **Medical Humanities**, including clinical studies, basic research, AI and Digital Technologies, PPI and fundraising — which will grow as the King's CICM initiative.
- **A prestigious Honorary Advisory Board** comprising international and UK leaders of the TCM community and related studies (**Appendix 5**) has been established. The Board is co-chaired by **Professor Yung-Chi Cheng**, Yale University, Chairman of the Consortium for Globalization of Chinese Medicine (CGCM), and **Professor Clara Bik-San Lau**, The University of Hong Kong, Secretary-General, CGCM, and Past President, The Good Practice in Traditional Chinese Medicine Research Association (GP-TCM RA), offering world-leading expertise in *Acupuncture and TCM, Chinese Materia Medica and Herbal Medicine, Clinical Trial Design and Medical Statistics, Pharmacy, Pharmacognosy, Pharmacology and PPI*. Given China's vast expertise and unique leadership in TCM and related studies, we risk honouring a few but missing many if we choose to appoint Honorary Advisors from Mainland China. To avoid this, we refrain from appointing Honorary Advisors from Mainland China. Instead, we look forward to developing collaborations and strive to be their preferred British and European collaborators.
- **Collaborators:** From the King's CICM fora, the King's CICM website, to classic and contemporary TCM literature studies, and clinical and preclinical research projects, we will develop interregional, interdisciplinary and inter-sectoral partnerships, **particularly emphasising academic-industrial collaboration**, tailored to the needs of specific projects. This evolving collaborative ecosystem constitutes a defining feature of King's CICM, and it serves as a fundamental pillar of our success, with its scope and impact growing in tandem with project advancement.



King's CICM — leadership:

- **King's CICM is directed by Dr Qihe Xu**, a nephrologist and pharmacologist, an international leader in promoting good practices and bridging collaborations, and a vanguard in TCM-inspired innovation. He will provide overall leadership in the initiative. Dr Xu will be assisted by **Dr Min Zhang**, a senior scientist in cardiovascular biology and heart research, who will help coordinate actions and provide leadership in basic and translational research.



- **Honorary Advisors, Staff and Collaborators will form project steering committees** to conduct quality control of what we do at King's CICM.

King's CICM — curriculum and forum:

- Facilitate dialogues among practitioners of TCM (including non-drug therapies *e.g.* acupuncture), other medical traditions (*e.g.* Ayurveda, Unani and yoga), conventional medicine, medical education and regulation through student-selected projects and initiatives of the MBBS and biosciences curricula, regular CICM fora, panel discussions, workshops, meetings, as well as dissemination and outreach activities;
- Promote education, research and care, disseminate the latest developments, and promote *good practices* and interdisciplinary collaboration.

King's CICM — R&D and training:

Along **10 lines of main research priorities (Appendix 3)**, King's CICM will develop specific projects led by faculty members, with appropriate funding and collaboration. This will be guided by the opinions of the patients, care providers and the public. Based on the expertise of our faculty, our fundraising will especially focus on *body-mind integration, kidney disease, heart disease, stroke, cancer* and other *ageing-associated diseases* to advance TCM-inspired biomedical innovation, drug development and non-drug strategies for disease prevention and treatment. We foresee that our research remit will expand to other WHO priorities such as *diabetes, respiratory disease* and *mental health*, as the expertise of our faculty grows.

King's CICM Empowerment Fund aims to achieve the following main outcomes:

- Interdisciplinary, interregional and intersectoral collaborative networks;
- Scientific innovation and discovery, novel evidence informing policy making and clinical practice to ensure the safety and well-being of the public;
- Intellectual property rights (patents and licensing);
- Stimulating and engaging healthcare education, narrowing the gaps and lowering the barriers among medical traditions, and increasing quality of research by dissemination and outreach activities; and
- Nurturing talents at postdoctoral and all degree levels.

DIRECTOR



Dr. Qihe Xu, an expert in Renal Medicine, Pharmacology and Integrative Chinese Medicine, will provide overall leadership to the King's CICM initiative.

With over 30 years of clinical and laboratory experience (10 years in China; 26 years in USA/UK), Dr Xu's work focuses on TCM-inspired research of kidney defence mechanisms, acute kidney injury, chronic kidney disease and Chinese herbal medicine.

Dr. Xu was the leader of the FP7 GP-TCM EU-China collaboration on the modernisation of TCM. Since 2012, he has been a core leader of the *GP-TCM Research Association*, a charitable international society dedicated to developing and disseminating good practices in TCM research, and a consulting body of the European Medicines Agency. In 2020, Dr. Xu was awarded the Qihuang International Prize, China Association of Chinese Medicine - so far, only 15 scientists worldwide have been honoured by this prestigious award.

To enhance the impact of the CICM Empowerment Fund, we will:

- Focus on developing mutually beneficial, co-funded research and training projects and nurturing scholarship and fellowship-winning talents.
- Invest 80% of the CICM Empowerment Fund to attract the rest of the needed investment from collaborators and other funders such as WHO, European Commission, UK Research and Innovation (UKRI), NIHR, Wellcome Trust, Royal Society, Kidney Research UK, China Scholarship Council, Innovation & Investment Funds from Taiwan, Hong Kong and Macao, Bernard Osher Foundation, the Oak Foundation, the Bill & Melinda Gates Foundation, and industrial partners.

Stage 2: King's CICM Breakthrough Fund

Target: £5,000,000 by December 2029

Purpose: This fund will facilitate the official launch of the King's CICM by recruiting global talents, facilitating collaboration and resource integration, and expanding the CICM education, research, healthcare and outreach programmes in a steady & sustainable manner.

Key initiatives: Stage 2 will build on the achievements and continue to drive the following key initiatives ABCDEFG:

- **Assemble** and consolidate interregional, interdisciplinary and intersectoral teams at King's, King's teaching hospitals and through coordinated, dynamic and effective collaborations.
- **Build** bridges among scientists, clinicians, technologists, regulators and experts in medical humanities to make the best use of the resources and expertise available from KHP and beyond.
- **Catalyse** innovation through integrating biomedical and pharmaceutical research, modern medical science and technology (evidence-based medicine, omics, systems biology, network pharmacology, artificial intelligence [AI], real-world studies, n-of-1 studies and quantum technologies) and TCM (holism, personalised medicine, function-oriented syndrome differentiation; varying treatments according to time, place and person; intervention before illness arises; and herbal medicine and non-drug approaches, *e.g.* acupuncture & moxibustion).
- **Develop**, implement and disseminate *good practices* through high-quality publications, high-profile conferences, leadership in national and international societies and initiatives, and positive interaction with other stakeholders.

ASSISTANT DIRECTOR



Dr. Min Zhang is Senior Lecturer in Cardiovascular Biology, King's College London. As the Assistant Director, Dr Zhang will assist the Co-Directors in coordinating action and in leading TCM-inspired translational research.

As a specialist funded by the British Heart Foundation for over two decades, Dr. Zhang's research focuses on elucidating the roles of reactive oxygen species in heart hypertrophy, remodelling and failure, aortic valve calcification and other cardiovascular diseases. This includes exploring the safety, efficacy and mechanisms of TCM-derived compounds for the prevention and treatment of cardiovascular diseases.

As an experimentalist, Dr Zhang utilises a broad spectrum of cutting-edge techniques in translational research and has published many highly cited papers in leading science, biology, pharmacology and medical journals, *e.g.* PNAS, eLife, EMBO, JACC, Front Pharmacol, Circulation, Circ Res and Cardiovasc Res.

- Enable talented researchers to carry out innovative research and sustainable development of King's CICM 2.0 through winning peer-reviewed incomes from the EU, NIHR, UKRI, national and international charitable funders, and international collaboration funds, as well as securing philanthropists' contributions.
- Focus on delivering *safe, cost-effective and innovative solutions* to health problems, as informed by the NHS Priorities and Operational Planning Guidance 2024/25, which will gradually extend to cover all major health problems facing the modern world, *e.g.* cancer, kidney and cardiocerebral vascular diseases, liver and lung diseases, infertility, mental health and other painful life-threatening and/or rare disorders.
- Generate intellectual property to support commercialisation, in close collaboration with King's Commercialisation Institute, the NHS and the industry.

Through these initiatives, King's CICM will catalyse the innovation that the NHS and healthcare services worldwide urgently need to tackle society's most pressing challenges. It will actively contribute to all three key reforms proposed in the 2024 Darzi Independent Review of the NHS in England—shifting from sickness to prevention, transitioning from analogue to digital, and bringing care closer to communities. Furthermore, King's CICM can drive transformative change in biomedical education and research, delivering more patient-centred, safe, and effective solutions for chronic diseases, functional disorders, preventive care, and beyond.

As outlined in this Handbook's introduction, King's CICM positions ICM as a pioneering case study for healthcare innovation, bridging ancient medical traditions with contemporary scientific and technological advancements. Building on this foundation, we are committed to incorporating insights from diverse global ethnomedical systems, ensuring that underrepresented cultural wisdom informs the future of medicine. Our strategic vision includes establishing the *King's Institute for Integrative Medicine*—a flagship hub where CICM will collaborate with specialised centres dedicated to studying other ethnic medical traditions. Ultimately, we aspire to elevate the Institute into a WHO Collaborating Centre for Traditional, Complementary and Integrative Medicine, solidifying its role as a global authority in harmonising heritage-based knowledge with evidence-based, translational research.

King's 200th anniversary celebration

Stage 2 will enable the official launch of CICM as soon as funding is in place, preferably by 2029, in time to celebrate King's College London's 200th anniversary.

We cordially invite your support

King's reputation in conventional medicine and health sciences is world-class. We are now working to establish a research-led ICM platform, adding to King's leadership in medical innovation. This is a daunting task, but the opportunities are astounding. We are excited about the challenges ahead.



Please get in touch with us if you are interested in donating, supporting or collaborating with us.

E-mail: info@kingscicm.org

Post address: The King's CICM Initiative, King's College London, Room 1.050, The James Black Centre, 125 Coldharbour Lane, London SE5 9NU, United Kingdom.

Appendix 1. Evidence-based ICM: RCT Evidence and Mechanistic Insights

TCM drugs for disease prevention

- **Neuroprotection and prevention of oxaliplatin-induced neuropathy** with Huangqi Guizhi Wuwu Decoction: a 12-center randomized, double-blind trial with mechanistic validation. (Sun X, et al. *Phytomedicine*. 2026;159:158539)
- Efficacy and safety of Naoxintong capsule for **secondary prevention after reperfused acute myocardial infarction**: a randomized, double-blind, placebo-controlled, multicenter trial. (Wan H, et al. *Phytomedicine*. 2026;160:158593).
- Tongxinluo for the **secondary prevention of atherosclerotic disease**: a systematic review and meta-analysis of randomised clinical trials. (Feng Y, et al. *Brain Behav*. 2026;16:e71232).
- Jinlida for **diabetes prevention** in impaired glucose tolerance and multiple metabolic abnormalities: The FOCUS randomised clinical trial (Ji H et al. *JAMA Intern Med* 2024; 184:727-35).
- Effects of ginseng berry saponins from panax ginseng on glucose metabolism of patients with **prediabetes**: A randomised, double-blinded, placebo-controlled, crossover trial. (Gao J et al. *Phytomedicine* 2024;132:155842).
- **Atrial tachyarrhythmia prevention** by Shensong Yangxin after catheter ablation for persistent atrial fibrillation: the SS-AFRF trial (Huang H et al. *Eur Heart J* 2024;45:4305-14).
- Entecavir plus Biejia-Ruangan compound **reduces the risk of hepatocellular carcinoma** in Chinese patients with chronic hepatitis B (Ji D et al. *J Hepatol* 2022;77:1515).

TCM drugs for treating heart diseases and stroke

- **Coronary atherosclerotic plaque intervention** with Tongxinluo capsule (TXL-CAP): a multicenter, randomised, double-blind and placebo-controlled study (Ni M, et al. *Signal Transduct Target Ther*. 2026;11:72).
- **Heart failure**:
 - The traditional Chinese medicine Qiliqiangxin in heart failure with reduced ejection fraction: a randomised, double-blind, placebo-controlled trial. (Cheang I et al. *Nat Med* 2024; 30:2295-302).
 - A multicenter, randomised, double-blind, parallel-group, placebo-controlled study of the effects of qili qiangxin capsules in patients with chronic heart failure (Li X et al. *J Am Coll Cardiol*. 2013;62:1065-72).
- **Acute myocardial infarction and coronary heart disease**:
 - Traditional Chinese medicine compound (Tongxinluo) and clinical outcomes of patients with acute myocardial infarction: The CTS-AMI randomised clinical trial. (Yang Y et al. *JAMA* 2023;330:1534-45).
 - A multicenter, randomised, double-blind, placebo-controlled trial to evaluate the effect of Tongmai Yangxin pill on ventricular remodelling in acute anterior STEMI patients after primary PCI. (Wang Y et al. *Phytomedicine* 2024;135:156133).
 - Efficacy and safety of yangxinshi versus trimetazidine on exercise tolerance in patients with coronary heart disease after percutaneous coronary intervention: Multicenter, double-blind clinical trial (Li Y et al. *Phytomedicine* 2024;135:156198).
 - Impact of Xuezhikang on coronary events in hypertensive patients with previous myocardial infarction from the China Coronary Secondary Prevention Study (CCSPS). (Li JJ, et al. *Ann Med*. 2010;42:231-40).
 - Effect of Xuezhikang, an extract from red yeast Chinese rice, on coronary events in a Chinese population with previous myocardial infarction. (Lu Z, et al. *Am J Cardiol*. 2008;101:1689-93).
 - Xuezhikang, an extract of cholestin, protects endothelial function through antiinflammatory and lipid-lowering mechanisms in patients with coronary heart disease. (Zhao SP, et al. *Circulation* 2004;110:915-20).
- **Acute ischaemic stroke**: Tongxinluo and functional outcomes among patients with acute ischemic stroke: a randomised clinical trial (Dong Y, et al. *JAMA Netw Open* 2024;7:e2433463).

TCM drugs for diabetes, diabetic kidney disease and other chronic kidney disease

- Shaoyao-Gancao decoction for the treatment of **muscle cramps in maintenance hemodialysis**: A prospective randomised crossover controlled trial. (Li C, et al. *J Ethnopharmacol.* 2025;347:119758)
- Randomised controlled clinical trial of Shenzhuo Formula in the treatment of macroalbuminuria in **diabetic kidney disease** and its inflammation-modulating mechanisms. (Wang A, et al. *Precis Clin Med.* 2025;8:pbaf031).
- Chinese herbal medicine (Tangshen Formula) formula treatment of patients with **diabetic kidney disease**: a systematic review and meta-analysis. (Zhao P, et al. *Front Endocrinol (Lausanne).* 2025;16:1522759.
- The clinical efficacy of Gegen Qinlian Decoction in treating **type 2 diabetes** is positively correlated with the dose of coptidis rhizoma: three randomised, double-blind, dose-parallel controlled clinical trials. (Kang X et al. *Drug Des Devel Ther* 2024;18:5573-82).
- Add-on astragalus in **type 2 diabetes** and **chronic kidney disease**: A multi-centre, assessor-blind, randomised controlled trial (Chan KW et al. *Phytomedicine* 2024;130:155457).
- Add-on rehmannia-6-based chinese medicine in **type 2 diabetes** and **CKD**: A multicenter randomised controlled trial (Chan KW et al. *Clin J Am Soc Nephrol* 2023;18:1163-74).
- Efficacy of combined abelmoschus manihot and irbesartan for reduction of albuminuria in patients with **type 2 diabetes and diabetic kidney disease**: a multicenter randomised double-blind parallel controlled clinical trial (Zhao J et al. *Diabetes Care.* 2022;45:e113-5).
- Bupi Yishen Formula versus losartan for **non-diabetic stage 4 chronic kidney disease**: a randomised controlled trial. (Mao W, et al. *Front Pharmacol.* 2021;11:627185).
- Efficacy and safety of Abelmoschus manihot for **IgA nephropathy**: A multicenter randomized clinical trial. Li P, et al. *Phytomedicine.* 2020;76:153231).
- Zheng Y, et al. Efficacy and safety of niaoduqing particles for delaying **moderate-to-severe renal dysfunction**: a randomized, double-blind, placebo-controlled, multicenter clinical study. (Zheng Y, et al. *Chin Med J (Engl).* 2017;130:2402-2409).

TCM drugs for COPD, cancer and other major unmet medical needs

- Qibai Pingfei Capsule ameliorates NK-cell dysfunction in **COPD**: Insights from single-cell sequencing in a randomized multicenter double-blinded placebo-controlled trial. (Shi M, et al. *Phytomedicine.* 2026;159:158570)
- Chinese herbal medicine (JianPi-BuShen) and completion rate of adjuvant chemotherapy for patients with stage II and III **colon cancer**: A randomized clinical trial. (Sun L et al. *Eur J Cancer.* 2024;213:115109).
- Effectiveness and safety of Sanhan Huashi granules versus nirmatrelvir-ritonavir in adult patients with **COVID-19**: A randomised, open-label, multicenter trial. (Zou X et al. *Sci Bull (Beijing).* 2024;69:1954-63).
- Effects of Lianhuaqingwen Capsules in adults with mild-to-moderate **COVID-19**: an international, multicenter, double-blind, randomised controlled trial. (Zheng JP et al. *Virol J* 2023;20:277).
- Xiaoyao Pills, a Chinese patent medicine, treats mild and moderate **depression**: A randomised clinical trial combined with DNA methylation analysis. (Fan L et al. *Phytomedicine* 2024;130:155660).
- Efficacy and safety of YOXINTINE for **depression**: A double-blinded, randomised, placebo-controlled, phase 2 clinical trial (Dong Z et al. *Phytomedicine.* 2024;136:156204).
- Efficacy and safety of Qushi Huayu, a traditional Chinese medicine, in patients with **nonalcoholic fatty liver disease** in a randomised controlled trial. (Liu Y et al. *Phytomedicine.* 2024;130:155398).
- Effects of the Zishen Yutai Pill on live births compared with placebo among **infertile women** with frozen-thawed embryo transfer cycle: A multicentre double-blind randomised controlled trial. *Phytomedicine* (Chen X et al. *Phytomedicine* 2024;135:156072).
- Effect of Xuefu zhuyu oral liquid on **tension-type headache**: A randomised clinical trial (Zhou L et al. *Phytomedicine* 2024;135:156112).

- Efficacy and safety of Dachaihu decoction for **sepsis**: A randomised controlled trial (Huang N et al. *Phytomedicine* 2024;136:156311).
- The efficacy and safety of Bazi Bushen Capsule in treating **premature aging**: A randomised, double blind, multicenter, placebo-controlled clinical trial (Mei J et al. *Phytomedicine* 2024;130:155742).
- Efficacy of Chinese medicine WW-1 in managing gastric atrophy and intestinal metaplasia in patients with **chronic atrophic gastritis**: A multicenter, randomized, double-blind, placebo-controlled trial. (Yang Y, et al. *Pharmacol Res.* 2026;227:108176).

TCM non-drug interventions to address major unmet medical needs

• Acupuncture for migraine prevention and treatment

- Acupuncture for **migraine** without aura and connection-based efficacy prediction: a randomized clinical trial (Zhang X, et al. *JAMA Netw Open.* 2026;9:e2555454).
- Acupuncture improves **migraine** and quality of life in patients with migraine: a systematic review with meta-analysis (Lu T, et al. *Syst Rev.* 2025;14:220).
- Manual **acupuncture versus sham acupuncture** and usual care for prophylaxis of **episodic migraine** without aura: multicentre, randomised clinical trial. (Xu S et al. *BMJ* 2020;368:m697).
- The long-term effect of **acupuncture for migraine prophylaxis**: a randomised clinical trial (Zhao L et al. *JAMA Intern Med* 2017;177:508-15).

• Acupuncture for management of stroke and heart disease

- Electroacupuncture modulates multiple pathways for **neuroprotection and neurorepair in ischemic stroke** (Zhao M, et al. *CNS Neurosci Ther.* 2026;32:e70862)
- Acupuncture and **stroke motor rehabilitation**: a decade of evidence synthesis via systematic mapping (2015-2024) (Ke C, et al. *Front Neurol.* 2025;16:1647086)
- Comparing the effect of acupuncture, sham acupuncture, and waiting-list control on patients with **post-stroke cognitive impairment**: A randomised clinical trial. (Chen X, et al. *QJM.* 2025:hcaf181)
- Effect of acupuncture vs sham acupuncture on patients with **poststroke motor aphasia**: a randomized clinical trial (Li B et al. *JAMA Netw Open.* 2024 Jan 2;7(1):e2352580.
- Cost-effectiveness of speech and language therapy plus scalp acupuncture versus speech and language therapy alone for community-based patients with Broca's **aphasia after stroke**: a post hoc analysis of data from a randomised controlled trial (Liu Z, et al. *BMJ Open.* 2021;11:e046609)
- Acupuncture as adjunctive therapy for **chronic stable angina**: a randomised clinical trial (Zhao L, et al. *JAMA Intern Med.* 2019;179:1388-1397).

• Acupuncture for disorders of joints, bones and muscles

- Electroacupuncture for **knee osteoarthritis**: a multicentre randomised controlled trial assessing symptomatic and structural efficacy. (Hang M, et al. *EClinicalMedicine.* 2026;96:103982).
- Functional connectivity changes in the thalamocortical network due to **neck pain** and the multiscale regulatory effects of acupuncture: a cross-scale multi-omics neuroimaging study. (Gao Z, et al. *Front Neurosci.* 2026;20:1783910).
- Acute effects of a single electroacupuncture session on purinergic signaling and inflammatory markers in patients with chronic nonspecific **low back pain**: a pilot study. (Ecco JC, et al. *Purinergic Signal.* 2026;22:48).
- GABRB3 gene polymorphisms influences the analgesic response to acupuncture treatment in patients with **chronic knee pain**: a randomised controlled neuroimaging transcriptomics study. (Wu S, et al. *FASEB J.* 2026;40:e71779).
- **Acupuncture vs sham acupuncture** for **chronic sciatica from herniated disk**: A randomised clinical trial (Tu J et al. *JAMA Intern Med* 2024; 184:1417-24).
- Effect of **acupuncture** on neurogenic claudication among patients with **degenerative lumbar spinal stenosis**: A randomised clinical trial (Zhu L et al. *Ann Intern Med.* 2024;177:1048-57).

- Efficacy of intensive acupuncture versus sham acupuncture in **knee osteoarthritis**: a randomised controlled trial. (Tu JF, et al. *Arthritis Rheumatol.* 2021;73:448-458).

● Acupuncture for other disorders

- Effect of electroacupuncture on **postherpetic neuralgia**: a randomised clinical trial. (Chen L, et al. *JAMA Neurol.* 2026:e261443).
- Efficacy of acupuncture in **irritable bowel syndrome** (ACTION): A Multicenter Randomised Controlled Trial (Yang JW, et al. *Gastroenterology.* 2025;169:958-969.e5).
- Neuroinflammation-informed neuroimaging-transcriptomic signatures explaining acupuncture's therapeutic effects in **chronic insomnia**. (Lin W, et al. *Chin Med.* 2025;20:207).
- Cerebral blood flow changes and their spatial correlations with gabaa and dopamine-d1 receptor explaining individual differences in **chronic insomnia** and the therapeutic effects of acupuncture. (Yu L, et al. *Hum Brain Mapp.* 2025;46:e70183).
- Electroacupuncture reduces duration of **postoperative ileus after laparoscopic gastrectomy for gastric cancer**: a multicenter randomised trial (Pei L, et al. *Gastroenterology.* 2025;169:73-84)
- Effect of adding **electroacupuncture** to standard triple antiemetic therapy on **chemotherapy-induced nausea and vomiting**: A randomised controlled clinical trial. (Shen G et al. *J Clin Oncol* 2024;42:4051-9).
- Effect of acupuncture for **methadone reduction**: a randomised clinical trial. (Lu L et al. *Ann Intern Med* 2024;177:1039-47).
- Effectiveness of acupuncture for **anxiety among patients with Parkinson's disease**: a randomised clinical trial (Fan JQ et al. *JAMA Netw Open* 2022;5:e2232133)
- Effect of electroacupuncture on **urinary leakage among women with stress urinary incontinence**: a randomised clinical trial (Liu Z, et al. *JAMA.* 2017;317:2493-2501).

● Other non-drug interventions

- Effect of **Baduanjin** on **blood pressure** among individuals with high-normal blood pressure: a multicenter, open-label, blinded-outcome randomised controlled trial (Pu B, et al. *J Am Coll Cardiol.* 2026 Feb 18:S0735-1097(26)00077-X. doi: 10.1016/j.jacc.2026.01.014)
- **Tai chi or cognitive behavioural therapy for treating insomnia** in middle-aged and older adults: randomised non-inferiority trial (Siu PM, et al. *BMJ.* 2025 Nov 26;391:e084320).
- **Tai chi and postural stability in patients with Parkinson's disease**. (Li F, et al. *NEJM* 2012;366:511-9).

Note:

- This document highlights a selection of RCTs, systematic reviews, and meta-analyses from leading journals. Coverage is not comprehensive, and studies on pure herbal compounds are excluded.
- Most publications included in this list are from the past five years. For earlier evidence-based studies of TCM herbal drugs (including TCM-derived pure compounds), see: Chao J, Dai Y, Verpoorte R, Lam W, Cheng YC, Paoletti R. Major achievements of evidence-based traditional Chinese medicine in treating major diseases. *Biochem Pharmacol* 2017; 139: 94–104.

Appendix 2. Selected KHP Publications: Laying the Foundation of King's CICM

Investigating the nephrotoxic and carcinogenic effects of aristolochic acid-containing plants.

- Lord GM, Tagore R, Cook T et al. Nephropathy caused by Chinese herbs in the UK. *Lancet* 1999;354:481-2.
- Lord GM, Cook T, Arlt VM et al. Urothelial malignant disease and Chinese herbal nephropathy. *Lancet* 2001;358:1515-6.
- Lord GM, Hollstein M, Arlt VM et al. DNA adducts and p53 mutations in a patient with aristolochic acid-associated nephropathy. *Am J Kidney Dis* 2004;43:e11-7.
- Cronin AJ, Maidment G, Cook T et al. Aristolochic acid as a causative factor in a case of Chinese herbal nephropathy. *Nephrol Dial Transplant* 2002;17:524-5.
- Gökmen MR, Lord GM. Aristolochic acid nephropathy. *BMJ* 2012;344:e4000.
- Gökmen MR, Cosyns JP, Arlt VM et al. The epidemiology, diagnosis, and management of aristolochic acid nephropathy: a narrative review. *Ann Intern Med* 2013;158:469-77.

Research on herbal efficacy, safety and mechanisms of action.

- Hu Q, Noor M, Wong YF et al. *In vitro* anti-fibrotic activities of herbal compounds and herbs. *Nephrol Dial Transplant* 2009;24:3033-41.
- Xu Q, Feng Y, Duez P et al. The hunt for anti-fibrotic and pro-fibrotic botanicals. *Science* 2014;346 (6216 Suppl):S19-20.
- Williamson EM, Chan K, Xu Q et al. Evaluating the safety of herbal medicines: Integrated toxicological approaches. *Science* 2015, 347(6219 Suppl), S21-3.
- Bunel V, Qu F, Duez P et al. Herbal medicines for acute kidney injury: Evidence, gaps and frontiers. *WJTCM* 2015;1:47-66.
- Holden F, Amin V, Kuek D et al. Taming the fire of nephrotoxic botanicals. *WJTCM* 2019;5:151-63.
- Zhou S, Yin X, Yuan J et al. Antifibrotic activities of *Scutellariae Radix* extracts and flavonoids: comparative proteomics reveals distinct and shared mechanisms. *Phytomedicine* 2022;100:154049.

Promoting good practices in TCM research and facilitating international collaboration.

- Chan K, Shaw D, Simmonds MS et al. Good practice in reviewing and publishing studies on herbal medicine, with special emphasis on traditional Chinese medicine and Chinese materia medica. *J Ethnopharmacol* 2012;140:469-75.
- Buriani A, Garcia-Bermejo ML, Bosisio E et al. Omic techniques in systems biology approaches to traditional Chinese medicine research: Present and future. *J Ethnopharmacol* 2012;140:535-44.
- Uzuner H, Bauer R, Fan TP et al. Traditional Chinese medicine research in the post-genomic era: Good practice, priorities, challenges and opportunities. *J Ethnopharmacol* 2012;140:458-68.
- Pelkonen O, Pasanen M, Lindon JC et al. Omics and its potential impact on R&D and regulation of complex herbal products. *J Ethnopharmacol* 2012;140:587-93.
- Xu Q, Bauer R, Hendry BM et al. The Quest for Modernisation of Traditional Chinese Medicine. *BMC Complement Altern Med* 2013;13:132.

TCM-inspired research on kidney defence machinery and mechanisms in health and disease.

- Xu Q. The renal collecting duct rises to the defence. *Nephron* 2019;143:148-52.
- Papadimitriou A, Romagnani P, Angelotti ML et al. Collecting duct cells show differential retinoic acid responses to acute versus chronic kidney injury stimuli. *Sci Rep* 2020;10:16683.
- Liu W-B, Fermin D, Xu A-L et al. Single-cell RNA sequencing data locate ALDH1A2-mediated retinoic acid synthetic pathway to glomerular parietal epithelial cells. *Exp Biol Med* 2024; 249:10167.

Appendix 3. A Fundraising Plan for the King's CICM Initiative

Background: King's College London, widely known as King's, is one of the two founding members of the federal University of London and is a world-leader in health science, education and innovation. According to the 2026 QS World University Rankings, King's is ranked no. 2, 5 and 9 in Nursing, Dentistry, Life Sciences & Medicine, respectively.

King's Centre for Integrative Chinese Medicine (CICM) is a research-focused interdisciplinary initiative of King's and its world-renowned teaching hospitals, which are collectively known as King's Health Partners (KHP).

King's CICM aims to meet major healthcare challenges through innovation, which will be catalysed by integrating wisdom, expertise, and resources from traditional Chinese medicine (TCM), conventional medicine and cutting-edge science and technology.

On 8th October 2024, the King's CICM initiative re-launched fundraising after a four-year pause due to the COVID-19 pandemic, and regained KHP fundraising priority status on 8th October 2025. Goals of the campaign are as follows.

- **Stage 1:** To raise a £0.5m **King's CICM Empowerment Fund** by the end of 2026; and
- **Stage 2:** To raise a £5m **King's CICM Breakthrough Fund** by 2029.

To achieve these targets, the King's CICM initiative has updated its blueprint, operational plan and fundraising strategy in collaboration with the KHP fundraising team. King's CICM has developed a faculty that share interests in Integrative Chinese Medicine (ICM), with core research expertise in

- **Body-Mind Integrative Health;**
- **Cardiovascular Kidney Metabolic Health;**
- **Healthy Ageing, Cancer and Pharmaceutical Science; and**
- **Medical Humanities.**

The faculty is further supported by a prestigious Honorary Advisory Board (HAB) comprising 56 national and international leaders offering complementary expertise in **Acupuncture, TCM, Herbal Medicine, Pharmacy, Pharmacognosy and Pharmacology**. The King's CICM fundraising will initially focus on opportunities to address *kidney disease, cardiovascular disease, cancer* and other *ageing-related disorders*. Our research remit will expand as our expertise grows.

- **In Stage 1**, a £0.5m **Empowerment Fund** will enable us to build the platform and network needed for the growth of the Centre, including team development, website, forums, as well as education and training endeavours. We propose that a £0.5m **Empowerment Fund** be partitioned to fulfil the following purposes:
 - £400k to support co-funded research projects
 - £50k to support CICM education, training and forum activities
 - £25k to support publications, academic meetings, dissemination and outreach, and
 - £25k to facilitate website development and fundraising activity.
- **In Stage 2**, a £5m **Breakthrough Fund** will enable further growth of the Centre by recruiting global talents and unlocking more opportunities for collaboration and resource integration. It will also allow for expanding the remit of CICM to cover more major areas of unmet needs and will deliver broader and deeper impacts. It is proposed that a £5m **Breakthrough Fund** be broken down to accomplish the following purposes:
 - £4m for sustainability: three academic and research positions created to recruit leaders at the frontiers of ICM

- £500k for co-funded projects covering all key themes
- £250k for ICM education, training and forum
- £125k supporting publication, meetings, dissemination and outreach, and
- £125k: website and fundraising activity.

King's CICM Projects

King's CICM supports innovation in medical education, research and care by integrating different medical philosophies, expertise and resources. Applying interdisciplinary, cutting-edge science and technology, **King's CICM projects focus on:**

- TCM-inspired biomedical innovation and mechanistic insight; and
- clinical studies assessing efficacy, safety and value; and
- translational work delivering innovative ICM products to meet unmet clinical needs.

This will span across the following 10 research priorities

1. Systemically cataloguing TCM-related collections of world-leading British libraries, museums, universities and research institutes to facilitate information exchange and support research, education and training.
2. Conducting surveys of patients, practitioners, care providers and other stakeholders in NHS hospitals, general practitioner services and TCM clinics to identify and address possible reasons for conflicts among different medical modalities and approaches, and gain the necessary evidence to guide ICM research, teaching and care.
3. Leading and participating in international collaborations to develop, disseminate and implement good practice guidelines and standards in integrative medicine research, and collaborations in authentication, quality control and exchange of medicinal plants, herbal drugs and other medicinal materials, as these activities are the foundation of high-quality traditional, complementary and integrative medicine.
4. Applying bioimaging, photoplethysmography (measuring blood volume in the peripheral circulation), pulse wave velocity and artificial intelligence to TCM inspection, tongue and pulse diagnostics, to innovate in clinical diagnosis.
5. Applying Bayesian methods, network pharmacology and artificial intelligence to TCM real-world data to identify signals of potential efficacy and safety concerns.
6. Conducting randomised controlled trials, value-based outcome studies, and target trial emulation to examine efficacy, effectiveness, safety and value of TCM and ICM interventions, notably incorporating TCM diagnosis-based stratification.
7. Conducting studies of endogenous defences of the kidney and other organs, as inspired by the TCM concepts of Healthy qi and Wei defensive qi, which defend against injury caused by pathogenic qi. This will enable the development of potential novel diagnostic, preventive, and therapeutic strategies.
8. Conducting knowledge-based studies of TCM tonifying drugs and non-drug therapies, including traditional acupuncture, electroacupuncture, moxibustion, acupoint laser radiation, medical qigong, etc, to drive innovation in prevention and therapeutics by stress reduction and by restoring compromised endogenous defence mechanisms.
9. Conducting multi-omics-based studies of cellular, genetic, epigenetic, and metabolic mechanisms of dysfunctional Yin qi and Yang qi that underpin disease, to guide targeted, personalised TCM and ICM intervention.
10. Contributing to introducing efficacious and safe traditional medicine products into the UK/European markets. This will foster the development and enrichment of integrative medicine by incorporating diverse health concepts, methodologies, and products.

World's Questions | King's Answers

Inspired by the award-winning **World's Questions | King's Answers** campaign (<https://www.kcl.ac.uk/world-questions-kings-answers>), we are keen to listen to a wide spectrum of ideas and opinions, ranging from patients, caregivers, general public and media, to the TCM community, KHP staff, King's CICM Honorary Advisors, collaborators and other stakeholders.

Based on the projects and approaches listed above, we are keen to engage in further dialogues and collaboration to develop an ICM-centric version of **World's Questions | King's Answers**, aiming to bring down barriers, facilitate dialogue and bridge collaboration to enable the types of ICM wanted by patients and the public.

Forward plan for fundraising

1. To establish a pool of donations aligned with donor-selected projects and purposes.



2. To establish the Peter Hylands Award and the Peter Houghton Award in honour of the late Professors Peter Hylands and Peter Houghton, two finest King's scientists and pioneers in ICM research. These awards will be used to (i) co-fund PhD students and post-doctoral fellows who can secure competitive external funding for further training at King's CICM, e.g., Chinese Scholarship Council PhD Studentship or Postdoctoral Fellowship; and (ii) to recruit full-time academics and researchers. This plan has the support of the Hylands and Houghton families and the Institute of Pharmaceutical Sciences, King's College London, to which both Prof. Hylands and Prof. Houghton were affiliated.

- *The Peter Hylands Award* will support the application of cutting-edge technologies in ICM research & development; and
- *The Peter Houghton Award* will support pharmaceutical discovery from plants and other natural resources.

Tribute to Prof. Peter Hylands, Formerly Head of Institute of Pharmaceutical Science, King's College London; Co-Founder of the King's CICM initiative and Founding Treasurer, Board and Executive Council Member of the GP-TCM Research Association:

<https://www.gp-tcm.org/wp-content/uploads/2022/04/Jun-2019-GP-TCM-RA-NL.pdf>

<https://pharmaceutical-journal.com/article/news/tribute-peter-hylands>

Mrs Debs Hylands: "Thank you so much for sending this proposal. It is incredibly exciting. Peter would be very happy."

Tribute to Prof. Peter Houghton, Professor of Pharmacognosy, King's College London; an international leader in medicinal plant and ethnopharmacology research:

<https://www.tandfonline.com/doi/full/10.1080/13880209.2024.2365210>

<https://apsgb.co.uk/people-news/in-memoriam-professor-peter-houghton-london-uk/>

Mrs Joan Houghton: "...Peter was always very supportive of projects that facilitated a better understanding of different approaches to the gaining of knowledge leading to a more complete use of the resources to increase health and combat disease. Also, very close to Peter's heart was the education and nurture of young scientists who could become the leaders of the future. He had discussed with me the possibility of setting up some form of scholarship to enable those with talent and enthusiasm in this field to be able to travel and to meet with others who may help develop but also challenge their ideas. I am, therefore, wholeheartedly supportive of your proposal and gladly agree that Peter would be honoured to have his name attached to such a scholarship."



3. **To establish the Boying Ma Award and the Man Fong Mei Award** in honour of the late Professors Boying Ma (马伯英教授) and Man Fong Mei (梅万方教授), who have played important roles in developing ICM in the UK and internationally.

- *The Boying Ma Award* will support Medical History and Medical Humanities research.
- *The Man Fong Mei Award* will support ICM research with novel interdisciplinary features.

Tribute to Prof Boying Ma, Honorary Chairman and Founding President of Federation of TCM Practitioners (UK) and the author of *A History of Medicine in Chinese Culture* (in 2 volumes, 2019), who contributed greatly to the TCM History part of Dr Joseph Needham's book series *Science and Civilisation in China*:

<https://ftcmp.co.uk/en/deep-mourning-for-the-famous-medical-historian-professor-ma-boying/>

Dr Alicia Grant (Mrs Ma), author of *Globalisation of Variolation: The Overlooked Origins of Immunity for Smallpox in the 18th Century*: "Professor Ma, a western medical professor in Shanghai and a TCM practitioner in London, devoted his energy for 25 years to the furtherance of integration of ICM and TCM. Boying would have been honoured with the establishment of a research scholarship in his name in recognition of the above aim."

Tribute to Prof. Man Fong Mei, a Physics graduate of King's College London, who pioneered the development of the TCM industry in the UK, by founding AcuMedic and the Chinese Medical Institute and Register (CMIR) UK, one of the earliest, largest and most influential TCM hospitals, training centres and hubs for promoting dialogues and integration of different medical traditions: <https://shop.acumedic.com/articles/post/the-inspirational-life-of-profesor-man-fong-mei/>

Mr Don Mei, Prof. Mei's son and the current Director of Mei Group and all associated businesses and Chairman of CMIR: "(The proposal to set an award at Kings' CICM named after Prof. Man Fong Mei) is not only acceptable but an honour which I appreciate."

Estimated costs of fully or partially funded projects

Funding less than £60,000 will contribute to multilateral exchanges, education & training and research costs of pre-doctoral, doctoral and postdoctoral projects, including research conducting, data analysis, publication, dissemination, outreach and engagement programmes.

- **£1,000-£10,000:**

- Pre-doctoral research costs of research internships and training projects of A-level, MBBS, BSc, MSc and MRes students.
- Donations at this level can become important contributions to the Peter Hylands, Peter Houghton, Boying Ma and/or Man Fong Mei Awards.
 - We are most grateful for a **generous £3,000 gift from Dr Dan Jiang, one of our CICM Honorary Advisors**. This donation will contribute to the pool of funds dedicated to *the Peter Hylands, Peter Houghton, Boying Ma and Man Fong Mei Awards*.
- King's CICM forums, at which high-quality evidence on efficacy, safety and scientific mechanisms of TCM intervention is disseminated to inform clinical practice (e.g., [RCT Evidence Supporting an ICM Approach to Disease Prevention and Treatment](#)); and TCM experts, NHS care-providers, academics, researchers and students gather and brainstorm. This will help break down barriers, facilitate dialogue, bridge collaboration, promote good practices and enable fusion of medical traditions in education, training, research and care.
 - Thanks to an **anonymous gift of £1,000 from a philanthropist** and an **excellent collaboration with the UK Centre of Chinese Medicine**, King's CICM was enabled to hold its 1st HAB Meeting and Inaugural Forum on the 5th Jan. 2025. *These hybrid sessions earmarked the official establishment of the HAB and served as platforms for King's CICM faculty, HAB and the audience to brainstorm. Collectively, these events harbingered a new era of King's CICM.*
 - We are deeply grateful for a **generous donation of £3,000 from Phoenix Medical Group Ltd**, which enabled the development of a dedicated King's CICM website, in both English (<https://www.kingscicm.org/>) and Chinese (<https://chinese.kingscicm.org/>), which will *play a crucial role in supporting fundraising, exchange, collaboration, innovation, dissemination and outreach.*

- **£10,000-£60,000:**

- £10,000-£40,000: research cost of 1-4 person-years of Postdoctoral Scholarship.

- £40,000-£50,000: research cost of a PhD Scholarship of 4 years.
- £50,000-£60,000: research cost of 5-6 person-years of Postdoctoral Scholarship; research cost of up to 2 PhD Scholarships of 4 years;
- Donations at this level can be used to set up scholarships named after the donors. Alternatively, donations can be significant contributions to the Peter Hylands, Peter Houghton, Boying Ma and/or Man Fong Mei Awards.
- **Funding over £60,000** may contribute to all the above purposes. In addition, donations at this higher level may contribute to 50% funded or fully funded PhD and postdoctoral projects, and recruitment of staff who will drive CICM sustainable development.
 - **£65,000:** 50% funded 4 years of an endowed PhD Studentship (UK students).
 - **£130,000-£155,000:**
 - 50% funded 4 years of an endowed PhD Studentship (international students)
 - Fully funded 4 years of an endowed PhD Studentship (UK students) or
 - Fully funded 12-24 months of an endowed post-doctoral fellowship
 - **£250,000:** Fully funded 4 years of an endowed PhD Studentship (international students)
 - **£265,000:** Fully funded 2-3 years of an endowed post-doctoral fellowship.
 - **£405,000:** Fully funded 3-4 years of an endowed post-doctoral fellowship.
 - **£500,000-£1m:** 4-8 fully funded 4 years of an endowed PhD Studentship (UK students); 2-4 fully funded 4 years of an endowed PhD Studentship (international students); or 2-4 fully funded 2-3 years of an endowed post-doctoral fellowship.
 - **£1m-£3m:** 1-3 endowed lectureships or 3-10 three-year research positions.
 - **Over £3m:** An endowed professorship
 - **Centre named after the donor:** To be discussed.

Your support is important

King's is dedicated to delivering world-leading education, research and service. KHP's reputation in conventional medicine and health sciences is world-class. We are building a research-led integrative Chinese medicine platform, which will catalyse innovation for tackling major health threats, while reinforcing King's leadership in medical innovation and advancing global health.

Realising this vision will require ambition, collaboration and sustained support. We invite you to share this opportunity with others who may be inspired to join us on this journey — and to consider how you, too, might play a part in shaping the future of integrative medicine.

We'd love to hear from you

E-mail: info@kingscicm.org

Corresponding address: The King's CICM Initiative, King's College London, Room 1.050, The James Black Centre, 125 Coldharbour Lane, London SE5 9NU, United Kingdom.

Appendix 4. A growing list of King's CICM Staff (last updated on 11 Septemebr 2026)

Directorship

- Dr Qihe Xu, Director, King's CICM: https://www.kingscicm.org/?page_id=56
- Dr Min Zhang, Assistant Director, King's CICM: <https://www.kcl.ac.uk/people/min-zhang>

R&D Programmes

Mental Health and Body-Mind Integrative Medicine

- Prof. Dag Aarsland: Professor of Old Age Psychiatry; Co-Director of Ageing Research at King's; Director of Centre for Healthy Brain Ageing and Director of NIHR HealthTech Research Centre in Brain Health, Institute of Psychiatry, Psychology & Neuroscience (IoPPN), KCL: <https://www.kcl.ac.uk/people/dag-aarsland>
- Dr Alessandra Borsini: Lecturer in Psychoneuroimmunology and Programme Leader, MSc in Psychology and Neuroscience of Mind-Body Interface, IoPPN, KCL: <https://www.kcl.ac.uk/people/alessandra-borsini>
- Professor Carmine Pariante, Professor of Biological Psychiatry, Department of Psychological Medicine, School of Academic Psychiatry, IoPPN, KCL; Consultant Perinatal Psychiatrist, Maudsley Hospital: <https://www.kcl.ac.uk/people/professor-carmine-pariante>
- Dr Gabriele Salciute Civilienė, Senior Lecturer in Digital Humanities, Co-Director of King's Institute for Human and Synthetic Mind, Department of Digital Humanities, Faculty of Arts * Humanities, KCL: <https://www.kcl.ac.uk/people/gabriele-salciute-civiliene>
- Dr Po-Wah So, Reader in Biomedical Imaging and Spectroscopy; Head, Phenomics Lab | Departmental Admissions Tutor, Department of Neuroimaging, IoPPN, KCL: <https://kclpure.kcl.ac.uk/portal/en/persons/po-wah.so>
- Prof. Federico E Turkheimer: Professor of Neuroimaging, Director, The KCL Institute for Human and Synthetic Minds; Deputy Head, Neuroimaging Department; Lead, Neuroimaging, Maudsley NIHR-BRC, KCL: <https://www.kcl.ac.uk/people/federico-turkheimer>
- Dr Qihe Xu, Director, King's CICM: https://www.kingscicm.org/?page_id=56

Cardiovascular Kidney Metabolic Health

- Prof. Luigi Gnudi: Professor of Diabetes and Metabolic Medicine; Consultant in Diabetes and Endocrinology; Head, Unit for Metabolic Medicine, KCL: <https://www.kcl.ac.uk/people/luigi-gnudi>
- Prof. Iain Macdougall, ex-Professor of Clinical Nephrology, King's College Hospital (retired). Expert in Randomised Clinical Trials (>30 NEJM, Lancet, JAMA and BMJ papers, Hi-index 94): <https://scholar.google.com/citations?user=ik9ECHsAAAAJ&hl=en>
- Mr Mazhar Noor, Technical Manager, Department of Inflammation Biology, KCL.
- Dr Min Zhang, Assistant Director, King's CICM; Senior Lecturer in Cardiovascular Biology, KCL: <https://www.kcl.ac.uk/people/min-zhang>
- Dr Haotian Gu, Clinical Senior Lecturer, KCL; Honorary Consultant Clinical Scientist in Cardiac Imaging at St Thomas' Hospital: <https://www.kcl.ac.uk/people/haotian-gu>
- Dr Richard Siow, Director, Ageing Research at King's and Reader in Vascular Biology, KCL: <https://www.kcl.ac.uk/people/richard-siow>
- Dr Qiuping Zhang, Senior Lecturer in Cardiovascular Biology, KCL: <https://www.kcl.ac.uk/people/qiuping-zhang>
- Dr Qihe Xu, Director, King's CICM: https://www.kingscicm.org/?page_id=56

Healthy Ageing, Cancer and Pharmaceutical Sciences

- Dr Richard Siow, Director, Ageing Research at King's and Reader in Vascular Biology, KCL. <https://www.kcl.ac.uk/people/richard-siow>

- Prof. Dag Aarsland: Professor of Old Age Psychiatry; Co-Director of Ageing Research at King's; Director of Centre for Healthy Brain Ageing and Director of NIHR HealthTech Research Centre in Brain Health, IoPPN, KCL: <https://www.kcl.ac.uk/people/dag-aarsland>
- Prof Eric CW So, Professor and Chair in Leukaemia Biology, KCL: <https://www.kcl.ac.uk/people/eric-cw-so>
- Prof Khuloud Al-Jamal, Professor of Drug Delivery & Nanomedicine and Head of Medicines Development, KCL; Head of Department of Pharmacology and Pharmacy; Leading KCL-HKU Liaison: <https://www.kcl.ac.uk/people/khuloud-al-jamal>
<https://www.pharma.hku.hk/en/Department/From-Our-Head>
- Prof Miraz Rahman, Professor of Medicinal Chemistry, KCL: <https://www.kcl.ac.uk/people/miraz-rahman>
- Dr Po-Wah So, Reader in Biomedical Imaging and Spectroscopy; Head, Phenomics Lab | Departmental Admissions Tutor, Department of Neuroimaging, Institute of Psychiatry, Psychology and Neuroscience, KCL: <https://kclpure.kcl.ac.uk/portal/en/persons/po-wah.so>

Medical Humanity

- Prof Fay Bound Alberti, Professor and Director, Centre for Technology and the Body, Professor in Modern History, KCL: <https://www.kcl.ac.uk/people/fay-bound-alberti>
- Prof Chris Berry, Professor of Film Studies, KCL. Expert in Arts and Media Research; CICM Liaison with the Faculty of Arts & Humanities: <https://www.kcl.ac.uk/people/professor-chris-berry>
- Dr Gabriele Salciute Civilienė, Senior Lecturer in Digital Humanities, Co-Director of King's Institute for Human and Synthetic Mind, Department of Digital Humanities, KCL: <https://www.kcl.ac.uk/people/professor-carmine-pariante>

Central Support Team

TCM expert

- Mandy Brass, MSc MBAC, Lead Acupuncturist at Dimbleby Cancer Care, Guy's Cancer Centre, Guy's and St Thomas' NHS Foundation Trust. <https://mandybrass.co.uk/about.html> and <https://www.guysandstthomas.nhs.uk/health-information/acupuncture-dimbleby-cancer-care>
- Ms Titta M. Laattala, Lic.TCM, Dip.MQG, Dip.CHM, MPRTCM, MPRCHM, MRCHM, King's College Health Centre, KCL: <https://jscm.uk/profile/titta-m-laattala/>

Patient and Public Involvement (PPI) Advisor

- Ms Deborah Johnston, Patient Governor, King's College Hospital: <https://www.kch.nhs.uk/about/how-we-are-organised/council-of-governors/patient-governors/>

Equality, Diversity & Inclusion (EDI) Representative; Bioimaging and Phenomics Advisor

- Dr Po-Wah So: <https://kclpure.kcl.ac.uk/portal/en/persons/po-wah.so>

Fundraising

- Mr Oliver Mangham, Senior Philanthropy Manager – International, KCL. <https://www.linkedin.com/in/oliver-mangham-bb744535/>
- Ms Mylen Namocatcat, Head of Philanthropy International, KCL: <https://www.linkedin.com/in/mylen-namocatcat-walker-a000562a/>
- Mr David Meredith, Associate Director, Principal & International Giving, KCL: <https://www.linkedin.com/in/david-meredith-348aa045/>
- Mr Christopher Demetriou, Director of Corporate Affairs, KCL: <https://www.linkedin.com/in/christopher-demetriou-371160150/>

Appendix 5. King's CICM Honorary Advisory Board, last updated on 21st February 2026

Honorary Advisors	Main expertise
Co-Chairs	
Yung-Chi Cheng (Chair)	Professor of Pharmacology, Yale University, USA; Chairman of the Consortium for Globalization of Chinese Medicine (CGCM)
Clara Bik-San Lau (Co-Chair)	Professor, Department of Pharmacology and Pharmacy, and School of Chinese Medicine; Associate Director (Research), HKUMed Centre of Integrative Medicine, University of Hong Kong; Past President, Good Practice in Traditional Chinese Medicine Research Association (GP-TCM RA); CGCM Secretary-General
Board members	
<i>Leaders of Professional Societies and Leading Experts in TCM and Acupuncture</i>	
Zan-Yu Chen	President, Federation of Traditional Chinese Medicine Practitioners, UK
Yibin Feng	Professor and Director, School of Chinese Medicine, The University of Hong Kong, Hong Kong
Alex Jacobs	CEO, British Acupuncture Council, UK
Dan Jiang	Senior TCM Practitioner, Acu-Herb Consultant Sheffield, UK
Martin John	President, Register of Chinese Herbal Medicine (RCHM), UK
Songxuan Ke	Principal of Asante Academy of Chinese Medicine, UK
Zhixiu Lin	Director and Professor, School of Chinese Medicine, The Chinese University of Hong Kong, Hong Kong
Xin Lu	Executive-President of the World Traditional Medicine Forum, UK
Aiping Lyu	Vice-President (R&D), Dean of Graduate School and Acting Dean of the School of Chinese Medicine, Hong Kong Baptist University, Hong Kong
Nicky Robinson	Professor of TCM & Integrated Health, London South Bank University, UK
Jiangang Shen	Professor, School of Chinese Medicine, University of Hong Kong, Hong Kong
Shulan Tang	Principal, Shulan College of Chinese Medicine, Manchester, UK
Tiejun Tang	President, Chinese Medicine Alliance UK; Vice-Chair, World Traditional Medicine Forum, UK
Tianjun Wang	President of the Academy of Scalp Acupuncture UK; Principal of the London Academy of Chinese Acupuncture; Chairman, UK TCM Forum, UK
Jidong Wu	Member of the Herbal Medicine Advisory Committee of the Medicines and Healthcare products Regulatory Agency (MHRA), UK
Mei Xing	President of Association of Traditional Chinese Medicine & Acupuncture, UK; Vice-President, World Federation of Acupuncture-Moxibustion Societies
Guanhu Yang	Professor, Faculty of Chinese Medicine, Macau University of Science and Technology, Macau
Liuzhong Ye	President, Chinese Acupuncture and Herbal Medicine Alliance, UK
Hongchun Yin	Founder of Modern Tongue Diagnostics; President, International Society of Modern Tongue Diagnostics; Dean, International College of Modern Tongue Diagnostics, UK
Bing-Sheng Yuan	Vice-President, Federation of Traditional Chinese Medicine Practitioners, UK
Lian-Ting Zhao	Senior TCM Practitioner, Herbal China Health Beauty Clinic, London, UK
Liqin Zhao	Senior TCM Practitioner, Zhong Jing TCM UK, Sheffield, UK; Former President of the Association of Traditional Chinese Medicine & Acupuncture, UK
<i>Experts in Chinese Materia Medica and Leaders of the Herbal Industry</i>	
Abraham YL Chan	Founder, Chairman, CEO, Executive Director, PuraPharm, Hong Kong
Kelvin Chan	Emeritus Professor in Natural Products & TCM Research, Liverpool John Moores University, UK
Yuan Shiun Chang	Professor of Pharmacognosy, China Medical University, Taichung
George He	Executive Director of the UK Centre of Chinese Medicine, UK
Willow Liu	President, American Association of Chinese Herbs, USA

Monique Simmonds	OBE, Professor and Director of Commercial Innovation Unit & Deputy Director of Science – Partnerships, Royal Botanic Gardens, Kew, UK
Mei Wang	Founder and Chair, LU-European Center for Chinese Medicine & Natural Compounds, Institute of Biology, Leiden University, The Netherlands; President, GP-TCM RA.
Kaicun Zhao	Expert Advisor on herbal medicines, British Pharmacopeia Commission and Member of the Herbal Medicine Advisory Committee of MHRA, UK
Zhongzhen Zhao	Emeritus Professor of Chinese Medicine, Hong Kong Baptist University, Hong Kong
Experts in Pharmacology and Pharmacognosy	
Rudolf Bauer	Professor of Pharmacognosy, University of Graz, Austria
Yung-Chi Cheng	Professor of Pharmacology, Yale University, USA
Pierre Duez	Professor of Pharmacognosy, University of Mons, Belgium
Thomas Efferth	Professor of Pharmaceutical & Biomedical Sciences, Mainz University, Germany
Tai-Ping Fan	Chair Professor, Shandong Academy of Sciences, China
Michael Heinrich	Professor of Ethnopharmacology and Pharmacognosy, UCL, UK
Clara Bik-San Lau	Professor, Department of Pharmacology and Pharmacy and School of Chinese Medicine; Associate Director (Research), HKUMed Centre of Integrative Medicine, The University of Hong Kong, Hong Kong
Simon Ming-Yuen Lee	Chair Professor of Biomedical Sciences, Hong Kong Polytechnic University, Hong Kong; President-Elect, GP-TCM RA
Ge Lin	Professor, School of Biomedical Science, The Chinese University of Hong Kong, Hong Kong
Amala Soumyanath	Professor, Department of Neurology; Director, BENFRA Botanical Dietary Supplements Research Center; Co-Director T32 CAM Research Training in Neuroscience and Stress, Oregon Health & Science University, USA
Xuanbin Wang	Director of Hubei Key Laboratory of Wudang Local Chinese Medicine Research, Hubei University of Medicine, China
Experts in Clinical Medicine, Pharmacy and Integrative Medicine	
Sukvinder K Bhamra	Senior Lecturer in Clinical and Professional Practice, University of Kent, UK
Gerard Bodeker	Professor retired from Division of Medical Sciences, University of Oxford; Adjunct Professor of Epidemiology at Columbia University, USA, and Adjunct Professor in Integrative Medicine, University of Western Sydney, Australia
Cheng Soon Goh	Former Director, Traditional and Complementary Medicine Division, Ministry of Health; Former Head of the WHO Collaborating Centre for Traditional, Complementary and Integrative Medicine, Malaysia.
Xiaoyang Hu	Senior Advisor, NIHR Research Support Service, UK
John Hughes	Director of Research, Royal London Hospital for Integrated Medicine, UCLH NHS Trust; Associate Professor, School of Medicine & Biosciences, University of West London, London, UK.
Jeffrey B Kopp	Former Chief, Kidney Disease Section, NIDDK, NIH, USA
Merlin Willcox	Clinical Lecturer & Principal Research Fellow, University of Southampton, UK
Vivian T Wong	Honorary Professor, LKS Faculty of Medicine, The University of Hong Kong
Bin Yang	Honorary Professor in Renal Medicine, University of Leicester, UK
Experts in Medical Humanity	
Shirong Chen	Editor-in-chief, Templar Global Media, UK
Lily Po Chuen Kot	Financier
Vivienne Lo	Professor, China Centre for Health and Humanity, UCL, UK
Hong Lu	OBE, Chairman, CEDP Chinese Centre, UK
Experts in Clinical Trial Design and Medical Statistics	
Duolao Wang	Chair in Biostatistics, Liverpool School of Tropical Medicine, UK

*"Nothing in life is to be feared, it is only to be
understood. Now is the time to understand more, so
that we may fear less."*
Marie Curie (1867 - 1934)



KING'S CICM
CATALYSING INNOVATION
