

Chinese herbal medicine or traditional Chinese medicine

Advice online | 06 Aug 2015

Note: This advice is given by the CAP Executive about non-broadcast advertising. It does not constitute legal advice. It does not bind CAP, CAP advisory panels or the Advertising Standards Authority.

This section should be read in conjunction with the entry on [Health: Therapies \(General\)](#)

Chinese Herbal medicine seems to be different from more conventional herbalism in that it seeks to restore the balance of Yin and Yang and restore qi energy. CAP understands that the clinical evidence needed to support efficacy claims depends on the individual herbal preparation being advocated but has not seen evidence to show that Chinese Herbal Medicine works. CAP understands that little quality evidence for Chinese Herbal Medicine exists and advises marketers to make no efficacy claims (Chinese Medicine Centre, 14 January 2004 (complaint 2); Dr & Herbs, 30 April 2003, and Herbmedic, 22 October 2003).

Practitioners who are “qualified” in traditional Chinese medicine should take care not to misleadingly imply they are doctors in conventional medicine (Herbmedic, 22 October 2003; Dr & Herbs, 30 April 2003; Chinese Medical Centre, 6 March 2002, and Great Chinese Herbal Medicine Ltd T/A Dr China, 7 December 2005). Claims, that a marketer is a Chinese medicine “practitioner” are unlikely to breach the CAP Code if they are true; the ad should not otherwise mislead.

Herbal medicines can have an effect on the body and consequently they have the potential for adverse reactions and interactions with conventional medicines. The variable quality of some products, especially some traditional Chinese “medicines”, has resulted in concerns about their safety. The ASA has upheld complaints against claims that Chinese herbal medicine would not interfere with the effects of western medicine (Dr & Herbs, 24 August 2004). In general, such claims are unlikely to be supported by objective substantiation and could be dangerous. Claims that western medicine has damaging side effects that Chinese medical treatment avoids are equally likely to be unacceptable (Everwell Ltd, 04 January 2006).

Marketers should not discourage essential treatment and unqualified health professionals should not offer specific advice on, diagnosis of or treatment for serious or prolonged conditions (Rule 12.2 and Help Note on Health, Beauty and Slimming Marketing Communications That Refer to Medical Conditions).

Rule 12.3 requires practitioners offering individual treatments to have relevant and recognised qualifications and consumers to be encouraged to take independent medical advice before committing themselves to significant treatments. Depending on the nature of the treatment, marketers might be well advised to refer patients to their GP or similar.

April 2021