■ Sun. Sep 28, 2025 10:40 AM - 12:10 PM JST | Sun. Sep 28, 2025 1:40 AM - 3:10 AM UTC **■** Session Room 6 (Conference Room B)

[Symposium 89] Traditional Medicine and Mental Health Care

Moderator: Fumiya Miyano (Department of Psychiatry, Hokkaido University Graduate School of Medicine)

[SY-89]

Traditional Medicine and Mental Health Care

Fumiya Miyano^{1,6}, Chommakorn Thanetnit², Ken Suzutani^{3,6}, Piyush Verma⁴, Katsuomi Yoshida^{5,6} (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan), 2. Department of Psychiatry, Thammasat University Hospital (Thailand), 3. Department of psychiatry Aizu Medical Center (Japan), 4. Sukoon Health (India), 5. Kanagawa Psychiatric Center (Japan), 6. Japan Young Psychiatrists Organization (Japan))

[SY-89-01]

Thai Traditional Massage in Contemporary Mental Health Care

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[SY-89-02]

onsen and psychiatry

*Ken Suzutani¹ (1. Department of Psychiatry,Fukushima Medical Univ. Aizu Medical Center (Japan))

[SY-89-03]

Traditional Treatment Modalities for Mental Health from India

*Piyush Verma¹ (1. Consultant Psychiatrist (India))

[SY-89-04]

Traditional Oriental Medicine and Mental Health Care: Toward Integration and Evidence-Based Practice

*Katsuomi Yoshida¹ (1. Kanagawa Psychiatric Center (Japan))

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[SY-89] Traditional Medicine and Mental Health Care

Fumiya Miyano^{1,6}, Chommakorn Thanetnit², Ken Suzutani^{3,6}, Piyush Verma⁴, Katsuomi Yoshida^{5,6} (1. Department of Psychiatry, Hokkaido University Graduate School of Medicine (Japan), 2. Department of Psychiatry, Thammasat University Hospital (Thailand), 3. Department of psychiatry Aizu Medical Center (Japan), 4. Sukoon Health (India), 5. Kanagawa Psychiatric Center (Japan), 6. Japan Young Psychiatrists Organization (Japan)) Keywords: Traditional Medicine、Mental Health Care、Traditional Thai Medicine、Traditional Chinese Medicine、Ayurveda and Yoga

Psychiatry, while grounded in scientific evaluation and intervention, cannot disregard the unique knowledge systems shaped by regional and cultural contexts. Culture-specific mental phenomena such as the Ainu people's *Imu*, Japan's *Kitsunetsuki* (fox possession), and Southeast Asia's *Amok* provide critical perspectives for understanding mental health. Additionally, traditional cultural practices like mindfulness rooted in Buddhism, Morita Therapy derived from Zen, and yoga based on Ayurveda have been restructured within the framework of modern medicine and are gaining attention as novel therapeutic methods. This symposium aims to explore the intersection of traditional medicine and modern psychiatry, addressing the following central questions: How can different knowledge systems engage in dialogue, and what new horizons can we open to address mental health challenges in contemporary society? The goal is to chart a path forward for their integration.

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[SY-89-01] Thai Traditional Massage in Contemporary Mental Health Care

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Keywords: Thai traditional massage, massage therapy, mental health

Mental health care in Thailand has evolved from traditional roots to a modern system that integrates Western psychiatry with Thai traditional medicine. Historically, treatments were based on Buddhist philosophy, animism, spiritual rituals, herbal remedies, and Thai Traditional Massage. In modern practice, these traditional treatments, such as Thai Traditional Massage, herbal medicine, and Buddhist psychotherapy, have been integrated with Western medicine under the term "Applied Thai Traditional Medicine." This approach is increasingly incorporated into contemporary mental health treatment and rehabilitation.

This symposium explores the role of Thai Traditional Massage (TTM) as an adjunctive treatment for mental health conditions. TTM uses deep rhythmic pressure, assisted stretching, and manipulation of energy lines to relieve muscular tension, enhance flexibility, improve circulation, and promote physical and mental relaxation. Emerging clinical evidence supports its use as one of several adjunctive strategies for reducing symptoms of depression, anxiety, insomnia, and musculoskeletal pain. Randomized controlled trials have shown improvements in depression scores and quality of life in patients with Major Depressive Disorder when TTM is used alongside conventional treatment. Additional benefits include stress reduction, better sleep, and improved emotional well-being, especially among the elderly and those with myofascial pain syndrome. Despite promising outcomes, the evidence base remains limited. High-quality clinical trials and systematic reviews are needed to clarify TTM's mechanisms and develop standardized protocols. Expanding research could support broader integration of TTM into global mental health care.

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Moderator: Fumiya Miyano (Department of Psychiatry, Hokkaido University Graduate School of Medicine)

[SY-89-02] onsen and psychiatry

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Keywords: hot spring therapy, traditional medicine, preventive medicine

Japan has numerous hot springs(onsen) since ancient times. Hot spring therapy, in its narrow sense, encompasses the following effects: 1.thermal effects, 2.physical effects such as buoyancy, water pressure, and viscous resistance, 3.chemical and pharmacological effects due to contained substances, and 4. indirect effects such as the direct effects of drinking hot spring water and the body's physiological responses to stimuli. Additionally, environmental factors such as marine, forest, and terrain conditions, as well as activities like exercise, diet, and physical therapy conducted in hospitals or facilities, combine to form broad-spectrum hot spring therapy. Traditionally, hot springs have been said to offer the "three benefits of hot springs": rest (recreation), health maintenance (convalescence), and disease treatment (therapeutic care). While there are reports that hot springs are effective in treating muscle pain and skin diseases, recent studies have also suggested their potential impact on mental health improvement. For example, a survey examining the relationship between hot spring bathing and depression among elderly Japanese individuals found a correlation between regular daily hot spring bathing and lower rates of depression history. In this presentation, we will discuss the intersection of hot springs and psychiatry while touching on the differences between hot spring cultures in Japan and overseas.

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[SY-89-03] Traditional Treatment Modalities for Mental Health from India

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Keywords: YOGA、AYURVEDA、TRADITIONAL MEDICINE

India stands home to one of the most ancient civilisations universally, endowed with a rich

heritage of traditional healing practices. Many contemporary practices have roots in century old

rituals for both physical and mental health. A few such practices which have acclaimed global

recognition are Ayurveda and Yoga. They are known to be profound disciplines with substantiated evidence of their benefits and efficacy.

Ayurveda views the mind and body as two parts of a system that forms a healthy individual

through mutual balance - quiet like the yin Yang. It elaborates three treatment modalities; spiritual therapy, mind therapy and rational therapy, of which rational therapy includes the use of

medicinal herbs. Many of these herbs have earned widespread recognition for their potential to

aid psychopharmacology.

Yoga is an evidence based meditation approach often used for treating or managing mental

health conditions, proven effective for individuals dealing with anxiety, depression, post traumatic stress, etc. These robust advantages should be further explored for treating and managing psychiatric conditions.

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[SY-89-04] Traditional Oriental Medicine and Mental Health Care: Toward Integration and Evidence-Based Practice

*Katsuomi Yoshida¹ (1. Kanagawa Psychiatric Center (Japan))

Keywords: Medicine、Traditional、Mind-Body Relations、Metaphysical、Acupuncture Therapy、Phytotherapy、Integrative Medicine

Mental health care is increasingly drawing from both modern psychiatry and traditional medicine. While earlier psychiatric models emphasized mind-body dualism by separating mental and physical causes, recent diagnostic frameworks such as the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), and the International Classification of Diseases, Eleventh Revision (ICD-11), reflect a shift toward mind-body unity. This transition highlights the need for integrative approaches that address psychological problems beyond the limitations of dualism.

Oriental medicine, including Kampo in Japan and Korean medicine, which is rooted in Chinese traditions, has long conceptualized health through the principles of Qi, Yin-Yang balance, and the Five Elements. These frameworks are applied clinically via pathological pattern recognition (Sho), which guides individualized therapeutic strategies. Based on Sho, practitioners prescribe interventions such as herbal medicine and acupuncture. Herbal medicine has demonstrated some clinical evidence, yet methodological challenges in standardization and statistical analysis remain. By contrast, acupuncture has accumulated more substantial evidence. The World Health Organization (WHO) officially recognized 361 acupoints in 2008, and recent systematic reviews, meta-analyses, and randomized controlled trials have demonstrated efficacy particularly in depression, insomnia, and anxiety disorders. The Canadian Network for Mood and Anxiety Treatments (CANMAT) guidelines now recommend acupuncture, and neurobiological studies have revealed mechanisms involving neurotransmitter regulation, brain connectivity, autonomic balance, and immune modulation.

In Japan, the Kanagawa Psychiatric Center developed the K-Style Acupuncture Score (KSAS) to establish a standardized "common language" between psychiatry and acupuncture. This initiative has expanded into the Acupuncture and Psychological Supporters Network (APNET), fostering collaboration between psychiatrists, acupuncturists, and allied professionals.

The integration of Oriental medicine into modern psychiatry presents a promising framework for expanding therapeutic options, fostering a shared understanding, and improving both individual well-being and public mental health.

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