



BSI Standards Publication

Health informatics — Categorial structures for representation of acupuncture

Part 4: Meridian and collateral channels

National foreword

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**Health informatics — Categorical
structures for representation of
acupuncture —**

Part 4:
Meridian and collateral channels

*Informatique de santé — Structures catégoriques pour la
représentation de l'acupuncture —*

Partie 4: Les méridiens et leurs collatéraux





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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

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For an explanation on the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT) see the following URL: www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 215, *Health informatics*.

Introduction

Acupuncture therapy is widely practiced as a part of complementary and alternative medicine in many countries, both eastern and western.

A guideline for reporting acupuncture intervention in clinical trial is already provided, and a large number of clinical trials have been conducted to assess the efficiency of acupuncture therapy. However, the descriptions of meridian and collateral, as an acupuncture intervention in clinical reports, tend to be insufficient for the interpretation of heterogeneity among trials, often causing difficulties in synthesizing data in the meta-analysis. This arises from three reasons: firstly, appropriate information structure of meridian and collateral is not formulated; secondly, peculiar concepts within traditional medicine in western pacific-rim region originated in China are not considered sufficient; thirdly, semantic associations between concepts of meridian and collateral need to be explicit.

This document defines the categorial structures in the field of meridian and collateral in order to solve the existing problems.

Health informatics — Categorial structures for representation of acupuncture —

Part 4: Meridian and collateral channels

1 Scope

This document specifies the categorial structure within the subject field of meridian and collateral by defining a set of domain constraints of sanctioned characteristics, each composed of a semantic link and an applicable characterizing category in order to represent the concept of meridian and collateral.

2 Normative references

There are no normative references in this document.

3 Terms and definitions

For the purposes of this document, the following terms and definitions apply.

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

- ISO Online browsing platform: available at <https://www.iso.org/obp>
- IEC Electropedia: available at <https://www.electropedia.org/>

3.1

categorial structure

minimal set of domain constraints for representing concept systems in a subject field

Note 1 to entry: Clause 6 provides further explanation.

3.2

category

division of sets of entities regarded as having particular shared characteristics

EXAMPLE Oral route, subcutaneous route and all other routes share characteristics particular to the category route.

Note 1 to entry: Categories may be more or less general. Where one category is subsumed by another, the IS A relation is asserted to obtain a hierarchy between the more specific or subsumed category and the more general or subsuming category. For example, the parenteral route is more general than the intravenous route.

3.3

characteristic

abstraction of a property of an entity or of a set of entities

EXAMPLE Fever is a characteristic symptom of flu.

Note 1 to entry: Characteristics are used for describing concepts and for differentiating categories