



November 11, 2017

Dear Colleagues:

On Wednesday, November 8th, 2017, after many months of planning by the American Society of Acupuncturists (ASA) and the American Alliance for Professional Acupuncture Safety (AAPAS), the acupuncture community held its first-ever “Congressional Briefing” on Capitol Hill. Sponsored by Congressman Tim Ryan (D-OH), the Democratic co-chair of the Congressional Addiction, Treatment & Recovery Caucus, and Congresswoman Judy Chu (D-CA) who has introduced groundbreaking federal legislation to get acupuncture to our veterans, and held in the Rayburn House Office Building, the event was a resounding success.



Over 50 staff members were in attendance including representatives from House members Loeb sack (D-IA), Butterfield (D-NC), Bishop (R-UT), Brownley (D-CA26), Lieu (D-CA33), Blunt Rochester (D-DE), Garamendi (D-CA3), Lofgren (D-CA19), Moore (D-WI), Rogers (R-AL), Speier (D-CA14), Bass (D-CA37), Crawford (R-AR), Posey (R-FL), Crowley (D-NY), Matsui (D-CA6), O’Halleran (D-AZ), Speaker Pelosi (D-CA12),



Johnson (D-GA), and Gottheimer (D-NJ), and Senate members Tillis (R-NC), Leahy (D-VT), Blumenthal (D-CT), Cardin (D-MD), Boozman (R-AR), Ernst (R-IA). *This was a rare bi-partisan event.* In addition, there was ample representation from the Chronic Care community and other trade associations addressing pain, including the Arthritis Foundation, the

Alzheimer’s Association, the US Pain Association, and the American Physical Therapy Association. The NCCAOM was also graciously in attendance.



The event began with a warm welcome from Ellen Hamilton representing congresswoman Chu's office. And was followed by a moving testimonial from advocate Terri Winn, who spoke of the journey she is taking in dealing with the loss of her son to an overdose last year.

She walked Congressional staff members through her family's experience of what was available for treatment, the limited exposure and access to acupuncture, and her belief that if acupuncture had been readily available, her son would still be here. Her son had acupuncture once as part of a recovery attempt, and felt it to be powerfully effective.



Members in attendance then received seamlessly orchestrated auricular acupuncture sessions from a team of Licensed Acupuncturists from surrounding states. The change in participants was evident, and this tangible experience of acupuncture will no doubt be one of



the most powerfully impacting portions of the event.

Speakers for the community included Dr. David W. Miller, M.D., L.Ac. and Dr. Tracy Soltesz, D.Ac., L.Ac., of the American Society of Acupuncturists (ASA), Dr. Jun Xu, M.D., L. Ac. of the American Alliance for Professional Acupuncture Safety (AAPAS), and Dr. Arthur Fan, M.D. (China), Ph.D., L.Ac. Dr. Miller presented on the evidence base supporting acupuncture's use for pain control, lessening opioid volume, and



assisting with addiction. Dr.'s Xu and Fan gave insight into how China has already integrated acupuncture into its care-system, and how this might act as a model for the U.S., as well as on the impressive education received by doctors from China trained in acupuncture. Dr. Soltesz closed with a detailed overview of the educational system in the United States, as well as the certification standards that allow hospitals, clinics, and others to identify qualified practitioners.

The feedback from this event has been universally positive and overwhelming. Dr. Kallie Guimond, D.OM., L.Ac. Legislative & Regulatory Liaison, ASA Board, was the key organizer of this event, and is the subsequent point of contact. She has already received numerous requests for follow-up, reflective of great interest. For further information, she can be reached at 240-432-7522, Drkallieguimond@gmail.com. We extend heartfelt thanks to Kallie and all of the volunteers who worked so hard to make this event possible and a success.



Please see presentation slides below.

ACUPUNCTURE: A Powerful Tool in Solving the Opioid Crisis

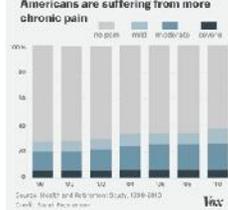


Sponsored by
 The American Society of Acupuncturists (ASA)
 The American Alliance for Professional Acupuncture Safety (AAPAS)

David W. Miller, M.D., L.Ac.

More than 1/3 of Americans Report Pain

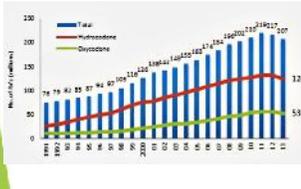
Americans are suffering from more chronic pain



In 2015 it was estimated that 25.3 million Americans suffered from chronic pain, while an estimated 126 million American adults reported some type of pain in the prior three months.

United States National Center for Complementary and Integrative Medicine, National Institutes of Health. NH Analysis Shows Americans Are in Pain (August 11, 2015). <https://nccih.nih.gov/news/press/08112015>. Accessed October 10, 2017.

For Many Types of Pain, Opioids have been Our "Go-to" Solution



Over the past two decades in the U.S., post-operative pain management has come to rely increasingly on opioids, while underutilizing alternative analgesics such as acupuncture.

Eighty to ninety-four percent of patients undergoing low risk surgical procedures fill a prescription for opioids within 7 days.

Levy B, Pauluzzi L, Mack KA, Jones CM. Trends in Opioid Analgesic Prescribing Rates by Specialty, U.S., 2007-2012. *American Journal of Preventive Medicine*. 2015; 49(3): 409-413. doi:10.1016/j.amepre.2015.02.020

Thiels CA, Anderson SS, Uhl DS, et al. Wide Variation and Overprescription of Opioids after Elective Surgery. *Annals of Surgery*. 2017; doi:10.1097/sia.0000000000002365

Wunsch H, Wijeyesundara DN, Passarella MA, et al. Opioids Prescribed after Low-Risk Surgical Procedures in the United States, 2004-2012. *JAMA*. 2016;315(15): 1654-1657. doi:10.1001/jama.2016.0230

Deaths Instead of Relief

A deadly dose
 Excess deaths involving opioids



More than 33,000 Americans died from opioid drugs in 2015, and more than 64,000 died in 2016.

United States National Institute on Drug Abuse, National Institutes of Health. Overdose Death Rates (published in September 2017). <https://www.drugabuse.gov/related-topics/trends-statistics/overdose-death-rates>. Accessed October 10, 2017.

August 2017

AUGUST 31ST IS OVERDOSE AWARENESS DAY

Prevention. Reduce Stigma. Remember.

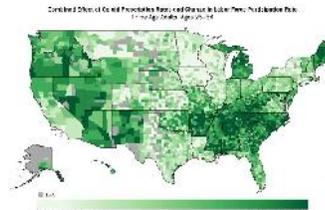


www.PHE.gov

October 2017

Opioids are Expensive

Economic Burden to America:
 More than \$78.5 Billion dollars in 2016



We cannot afford to continue as we are.

<https://a.priming.com/734670/041370043593274216798f8b8d8c62d>

AGCs urge insurers to prioritize payment coverage and policies for non-opioid pain management options.

Why Acupuncture?

Acupuncture is Effective for Treating Pain - and is often as good as available options

- Acupuncture has been found to be effective for treating various types of pain, with the strongest evidence emerging for back pain, neck pain, shoulder pain, chronic headache, and osteoarthritis.
- In the largest study of its kind to date, **454,920 patients were treated with acupuncture for headache, low back pain, and/or osteoarthritis** in an open pragmatic trial. Effectiveness was rated by the 8,727 treating physicians as marked or moderate in 76% of cases.

Jessica Gold/Blend Images/Getty Images

Weidenhammer W, Streng A, Linde K, Hoppe A, Melchart D. Acupuncture for Chronic Pain within the Research Program of 10 German Health Insurance Funds—Basic Results from an Observational Study. *Complementary Therapies in Medicine.* 2007;15(4):238-46.

Acupuncture is Effective for Treating Pain - and is often as good as available options

- A systematic review and meta-analysis on acupuncture for the treatment of sciatica reported that acupuncture was **superior to standard pharmaceutical care** (such as ibuprofen, diclofenac, and prednisone) in reducing pain intensity (mean difference (MD) = -1.25, 95% CI [-1.63 to -0.86]) and increasing pain threshold (MD = 1.08, 95% CI [0.98-1.17]).
- Another systematic review and network meta-analyses of 21 different interventions for sciatica found that **acupuncture was second in global effect only to biological agents, and superior to all other interventions including non-opioid and opioid medications.**

Ji M, Wang X, Chen M, Shen Y, Zhang X, Yang J. The Efficacy of Acupuncture for the Treatment of Sciatica: A Systematic Review and Meta-Analysis. *Evidence-based Complementary and Alternative Medicine: eCAM.* 2015;2015:192808.

Lewis RA, Williams NH, Sutton AJ, Burton K, Din NU, Matar HE, et al. Comparative Clinical Effectiveness of Management Strategies for Sciatica: Systematic Review and Network Meta-analysis. *The Spine Journal: Official Journal of the North American Spine Society.* 2015;15(6):1461-77.

Acupuncture is Effective for Treating Pain - and is often as good as available options

A systematic review on acupuncture for **plantar heel pain** found that evidence supporting the effectiveness of acupuncture was **comparable to the evidence available for standard care interventions** such as stretching, night splints, and dexamethasone.

Clark RJ, Tighe M. The Effectiveness of Acupuncture for Plantar Heel Pain: A Systematic Review. *Acupuncture in Medicine: Journal of the British Medical Acupuncture Society.* 2012;30(4):298-306.

Acupuncture Decreases the Amount of Opioids Needed to Treat Pain

A meta-analysis published in late 2017 in the *Journal of the American Medical Association (JAMA Surgery)* focused on **non-pharmacological treatments in reducing pain after total knee arthroplasty.**

Thirty-nine randomized clinical trials were included in the meta-analysis (2,391 patients).

Moderate-certainty level evidence showed that **electrotherapy reduced the use of opioids** (MD = -3.50; 95% CI, [-5.90 to -1.10] morphine equivalents in milligrams per kilogram per 48 hours; p = .004; I² = 17%), and that **acupuncture delayed opioid use** (MD = 46.17; 95% CI, [20.84 - 71.50] minutes to the first patient-controlled analgesia; p < 0.001; I² = 19%).

Tedesco D, Gori D, Desai KR, Asch S, Carroll IR, Curtin C, McDonald KM, Fantini MP, Hernandez-Boussard T. Drug-Free Interventions to Reduce Pain or Opioid Consumption After Total Knee Arthroplasty: A Systematic Review and Meta-analysis. *JAMA Surg.* 2017 Aug 16:e172872. doi: 10.1001/jamasurg.2017.2872. [Epub ahead of print]

Acupuncture Decreases the Amount of Opioids Needed to Treat Pain

A prospective, randomized trial of acupuncture vs. morphine to treat **emergency department/emergency room patients** with acute onset, moderate to severe pain was conducted.

Acupuncture provided more effective and faster analgesia than morphine and was better tolerated.

The study included 300 patients, with 150 patients in each group. Success rate was significantly different between the 2 groups (92% in the acupuncture group vs 78% in the morphine group, $p < 0.001$). Resolution time was 16 ± 8 minutes in the acupuncture group vs 28 ± 14 minutes in the morphine group ($p < 0.005$). Overall, 89 patients (29.6%) experienced minor adverse effects; of these, 85 (56.6%) were in the morphine group and only 4 (2.6%) were in the acupuncture group ($p < 0.001$).

Grissa MH, Baccouche H, Boubaker H, Beltalef K, Baeouich N, Fiedj N, et al. Acupuncture vs Intravenous Morphine in the Management of Acute Pain in the ED. *American Journal of Emergency Med.* 2016;34(11):2112-2116.

Acupuncture Decreases the Amount of Opioids Needed to Treat Pain

Some studies have reported reduced consumption of opioid-like medication (OLM) by more than 60% following surgery when acupuncture is used.

Lin JG, Lo MW, Wen YR, Hsieh CL, Tai SK, Sun WZ. The Effect of High and Low Frequency Electroacupuncture in Pain after Lower Abdominal Surgery. *Pain.* 2002;99(3):509-14.

Wang B, Tang J, White PF, Naruse R, Sloninsky A, Kariger R, et al. Effect of the Intensity of Transcutaneous Acupoint Electrical Stimulation on the Postoperative Analgesic Requirement. *Anesthesia and Analgesia.* 1997;85(2):406-13.

In a study examining acupuncture's effectiveness in treating pain in a military cohort of 172 at a United States Air Force medical center, **acupuncture dramatically decreased the use of opiates and other pain medications among personnel.** Opioid prescriptions decreased by 45%, muscle relaxants by 34%, NSAIDs by 42%, and benzodiazepines by 14%. Quality of life measures also showed impressive changes, with some measures of improvements showing statistical significance ($p < 0.001$).

Crawford Paul, Penzien Donald B., and Coeytaux Remy. Reduction in Pain Medication Prescriptions and Self-Reported Outcomes Associated with Acupuncture in a Military Patient Population. *Medical Acupuncture.* August 2017, 29(4): 229-231. <https://doi.org/10.1089/acu.2017.1234>



Acupuncture is Cost-Effective

In a cost-effectiveness analysis of non-pharmacological treatments for osteoarthritis of the knee, acupuncture was found to be the most cost-effective option when analysis was limited to high-quality studies.

MacPherson H, Vickers A, Bland JM, Torgerson DJ, Corbett MS, Spackman E, Saramago Goncalves PR, Woods BS, Weatherly HL, Sculpher MJ, Manca A. Acupuncture for Chronic Pain and Depression in Primary Care: A Programme of Research. *Programme Grants for Applied Research.* 2017 Jan 11-342.

A recent study from the Center for Health Information and Analysis (CHIA) in response to a piece of Massachusetts legislation seeking mandated coverage for acupuncture for some conditions, found that full insurance coverage for acupuncture would increase an average insured member's monthly health insurance premium only by \$0.38 to \$0.76. Acupuncture was noted to save \$35480, \$32000, \$9000, and \$4246 per patient for migraine, angina pectoris, severe osteoarthritis, and carpal tunnel syndrome respectively.

CHIA center for health information and analysis. Mandated Benefit Review Of H.B. 3972: An Act Relative to the Practice of Acupuncture. <http://www.aomsm.org/Resources/Documents/Research/BenefitReview-H3972-Acupuncture.pdf> Accessed August 19, 2017.

Acupuncture is Safe

Strong evidence for the safety of acupuncture in chronic pain management comes from an open pragmatic trial involving 454,920 patients who were treated for headache, low back pain, and/or osteoarthritis.

Minor adverse events were reported in 7.9% of patients while only 0.003% (13 patients) experienced severe adverse events.

Minor adverse events included needling pain, hematoma, and bleeding, while serious adverse events included pneumothorax, acute hyper- or hypotensive crisis, erysipelas, asthma attack, and aggravation of suicidal thoughts.

Weidenhammer W, Streng A, Linde K, Hoppe A, Melchart D. Acupuncture for Chronic Pain within the Research Program of 10 German Health Insurance Funds- Basic Results from an Observational Study Complementary Therapies in Medicine. 2007;15(4):238-46.

Acupuncture can Help Treat Addiction

As far back as 1978 it was demonstrated that acupuncture decreased biochemical markers of stress in heroin addicts compared to observational controls.

In 2014 Chan YY and Lo WY, et al. demonstrated that acupuncture decreased the amount of morphine used by addicts in treatment, and simultaneously improved sleep in the treatment subjects.

Wen HL, Ho WK, et al. Reduction of Adrenocorticotrophic hormone (ACTH) and cortisol in drug addicts treated by acupuncture and electrical stimulation (AES). *Comparative Medicine East and West.* 1978 Spring; 6(1):61-6.

Chan YY, Lo WY, et al. Clinical Efficacy of Acupuncture as an Adjunct to Methadone Treatment Services for Heroin Addicts: A Randomized Controlled Trial. *American Journal of Chinese Medicine.* 2014; 42(3): 569-86.



Acupuncture can Help Treat Addiction

A meta-analysis done in 2012 concluded that **"the majority [of studies] agreed on the efficacy of acupuncture as a strategy for the treatment of opiate addiction"** and that "neurochemical and behavioral evidence have shown that acupuncture helps reduce the effects of positive and negative reinforcement involved in opiate addiction by modulating mesolimbic dopamine neurons. Moreover, several brain neurotransmitter systems involving opioids and GABA have been implicated in the modulation of dopamine release by acupuncture."

Lin JG, Chan YY, Chen YH. Acupuncture for the Treatment of Opiate Addiction. *Evidence Based Complement Alternative Med.* 2012;2012:739045.



Acupuncture can Help Treat or Cure Underlying Conditions

Table 3. Acupuncture for the Treatment of Numerous Conditions Including Pain Conditions
The Acupuncture Evidence Project
(Mar 2013 - Sept 2016)

Evidence of positive effect Allergic rhinitis (perennial & seasonal) Chemotherapy-induced nausea and vomiting (CINV) (with anti-emetics) Chronic neck pain Headache (tension type and chronic) Irritable bowel syndrome Migraine prophylaxis Post-operative nausea & vomiting Post-operative pain		Evidence of potential positive effect Acute low back pain Acute stroke Anesthesia awareness Anxiety Anticancer inhibitor-induced arthralgia Asthma in adults Back or pelvic pain during pregnancy Cancer pain Cancer-related fatigue Constipation Constipation associated with depression Dry eye Hypertension (with medication) Irritability Irritable bowel syndrome Labor pain Latent of elbow pain Menopausal hot flashes	Modulator sensory perception threshold Neck pain (acute types/non-whiplash) Obesity Pain: menopausal & post-menopausal ischemia Plantar heel pain Post-stroke incontinence Post-stroke shoulder pain Post-stroke spasticity Post-traumatic stress disorder Proximal pain (chronic pelvic pain syndrome) Recovery after colorectal cancer resection Restless leg syndrome Recovery after orthopedic cancer resection Sciatica Shoulder impingement syndrome (early stage) (with exercise) Shoulder pain Shoulder rehabilitation (up to 3 months) Stroke rehabilitation Temporomandibular joint disorder
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McDonald & Jans S. The Acupuncture Evidence Project: A Comprehensive Literature Review. Australian Acupuncture & Chinese Medicine Association Journal, Dec 18, 2016.

Acupuncture is Available, and can also be a Source of U.S. Economic Development – Jobs Creation and Industry Development

A 2015 study found the number of trained practitioners to be approximately 34,400. The number of licensed acupuncturists was noted to have increased by 23.3% and 52.1% compared to the years 2009 (n=27,965) and 2004 (n=22,671) respectively, increasing about 1,266 per year!!

Fan Av, Faggett S. Number of Licensed Acupuncturists and Educational Institutions in the United States in Early of 2015. J Integrat Med. 2017 September; Epub ahead of print. doi:10.1016/S2095-4964(17)60373-6

- Currently, the Council of Colleges of Acupuncture and Oriental Medicine (CCAOM) has fifty-seven schools in its membership, with approximately ten schools offering doctoral degrees. www.ccaom.org
- The National Certification Council for Acupuncture and Oriental Medicine (NCCAOM) has certified more than 18,000 practitioners for minimal competency. www.nccaom.org

The practitioners emerging from this educational and testing infrastructure are the most highly trained in Chinese medicine as a complete system, and the training capacity is vastly underutilized. This system could produce many more practitioners were demand increased.

Recognition of the Complexity of the Situation, but Focus on the Simplicity of One Solution.

- The Acupuncture community recognizes the complexity of the opioid epidemic. We understand that acupuncture is not the whole solution, that we need to work in teams, and that this is a long-haul effort.
- However, this is a time of crisis: we must use all available, reasonable, evidence-based tools to solve this issue, and acupuncture stands as potential “star player” in that effort.
- Acupuncture could be quickly integrated into medical systems to decrease opioid use for numerous conditions, decrease initial addiction, and help with addiction rehabilitation.



Contact

- For questions regarding legislative & regulatory affairs or strategic partnerships:

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THANK YOU!



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• Global Views
Acupuncture's Role in Solving the Opioid Epidemic: Evidence, Cost-Effectiveness, and Care Availability for Acupuncture as a Primary, Non-Pharmacologic Method for Pain Relief and Management—White Paper 2017
 Arthur Yin Fan¹, David W. Biller^{1,2}, Bonnie Boland¹, Matthew Bauer¹, John McDonald¹, Sarah Faggett¹, Hongyan He¹, Yong Wang^{1,2}, Amy Minkoff¹, Lindy Camarillo¹, Mel Hopper Koppelman¹, Jennifer A.M. Stone^{1,3}, Lindsay Meade¹, John Pang¹

The Practice of Traditional Chinese Medicine (TCM) (Including Acupuncture) in China Today

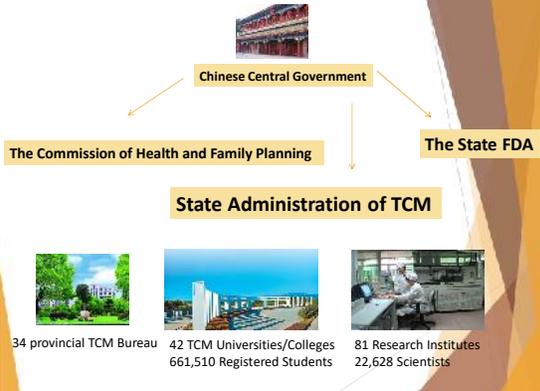
Jun Xu, MD, LAc



Striking Differences in Healthcare Between the US and China

	China	US
Birth Rate Per 1,000	12.22	14
Hospital Bed Per 1,000	2.45	3.3
Life Expectancy at birth, total	75.04	78.64
Physicians Per 1,000 people	1.51	2.3
Healthcare Expenditure total % of GDP (2014)	5.5	17.1
Healthcare Expenditure Per Capita (2014)	\$731	\$9403

Source: <http://www.nationmaster.com/country-info/compare/China/United-States/Health>



Chinese Central Government

The Commission of Health and Family Planning **The State FDA**

State Administration of TCM

- 34 provincial TCM Bureau
- 42 TCM Universities/Colleges
661,510 Registered Students
- 81 Research Institutes
22,628 Scientists

<http://www.satcm.gov.cn>

HOSPITALS AND PHYSICIANS IN CHINA, 2016

	TOTAL HOSPITALS	TOTAL PHYSICIANS
General Hospitals	29,000	2,000,000
Independent TCM Hospitals	3966	264,411 (2012)



Source: <http://www.satcm.gov.cn>
<http://www.dcm.com/business/companies/article/2076196/china-s-dire-need-reform-health-care-sector-sees-opportunity>
<http://www.ccm.com/2017/06/29/health/china-new-law-traditional-chinese-medicine-tcm/index.html>

TCM HOSPITAL ADMISSIONS IN CHINA

Million	2005	2008	2009	2010	2011	2012
General Hospitals	41.53	58.72	67.13	75.05	84.31	99.15
TCM Hospitals	6.05	9.52	11.11	12.59	14.47	17.72
%	14.6	16.2	16.6	16.8	17.2	17.9

Source: <http://www.nhfp.gov.cn/htmlfiles/swgk1/ptpj/year2013/index2013.html>



TCM Research in China 2016

	Research Institutes	Total Employee	Scientists	%
Total	81	22,628	12,744	56.3
National Run	10	3556	2,023	56.9
Provincial Run	43	14,898	8,159	54.8
City Run	28	4,223	2,562	60.7



Source: <http://www.satcm.gov.cn>

How does Traditional Chinese Medicine (TCM) Help and Save Money?

1. It focuses on good lifestyle to prevent diseases.





Definition
 Traditional Chinese Medicine (TCM) is an ancient and still very vital holistic healing health care system. It is based on the notion of harmony and balance, and employs the ideas of moderation and prevention.

How does Traditional Chinese Medicine (TCM) Help and Save Money?

2. It is a set of natural therapies with extremely low side effect profiles compared with most modern medicine approaches. It has been used for pain management and other illness in China for thousands of years!








Final Words

1. TCM has been officially integrated into the Chinese healthcare system for more than 50 years, and is playing an increasingly important role.
2. Acupuncture is one of the key treatment methods of TCM.
3. TCM focuses on the prevention of disease and treating its root cause, and is an ideal resource to keep the population healthy and reduce pain and the use of opioids.
4. The United States can immediately use aspects of the Chinese experience with this integration to determine ways to take advantage of this health-promoting, cost-saving system.
5. TCM is a cost-effective, allied medicine with the demonstrated potential to reduce medical expenses and keep Americans healthy and drug free.

Acupuncturists' Education in China

Arthur Yin Fan, MD(China), PhD, LAC



The Official Name for Acupuncturists in China: "M.D. in Chinese Medicine (Zhong Yi 中医)"

- ▶ 264,411 (2012) Chinese medicine doctors in China
- ▶ 3,966 Chinese Medicine Hospitals
- ▶ 446 Integrative Medicine Hospitals
- ▶ Gov't backed TCM clinics: 42,528
- ▶ Integrative clinics: 7,705
- ▶ Visits (all hospitals):
 - ▶ Outpatient: approx. 910 Million patients/year
 - ▶ Inpatient: approx. 21 Million/year

The Education of Acupuncturists in China: MD Level Education (I)

Educational Facilities (government supported)

- ▶ 42 High Educational Institutes focused on TCM
- ▶ 200 Western Medicine Universities/Colleges also offer TCM Training

The Education of Acupuncturists in China: MD Level Education (II)

Years of Education and Training

- ▶ 4-6 years of college training, with additional 1 year internship
 - ▶ Approximately 40% in Chinese Medicine, 60% in Biomedicine
 - ▶ Degree: Bachelors or Masters in Medicine, equivalent to MD in the USA
- ▶ *AMA and WHO accept this educational system as MD level equivalent
- ▶ ** Some TCM doctors were trained in Western Medicine Universities
- ▶ 6 years of residency
 - ▶ Rotate in each department, then focus on one specialty

The Education of Acupuncturists in China: MD Level Education (II)

- ▶ **Some Doctors Add:**
 - ▶ 1 year additional training in a western medicine hospital
 - ▶ ½ year to 1 year training in a hospital in a Western Country
- ▶ Continuing Education is also needed, as in the USA
- ▶ Some Physicians will choose additional training in research, achieving another Master or PhD degree

TCM Education Institutions in China- included in TCM colleges with many other colleges, such as pharmacology colleges

	Universities have TCM	Graduates /yr	New students /yr	Current Enroll (all)	Estimated Graduates /yr
Total	42	169,113	193,935	661,510	178,724
Doctoral		1,209	1,343	4,662	1,984
Master		12,427	13,811	38,689	12,261
Undergrads		155,477	178,781	618,159	164,479



Source: <http://www.satcm.gov.cn>

The Education of Acupuncturists in China: History

- ▶ The earliest book in Chinese Medicine currently available is 2,000 years old
 - ▶ Yellow Emperor's Inner Classic (Huang Di Nei Jing).
- ▶ Earliest National Medical Educational Institution in Chinese Medicine started in China 1400 years ago
 - ▶ Imperial Medical Academy(Tai Yi Shu) in the Sui dynasty
- ▶ Modern Chinese Medicine Education started in 1954 in China
- ▶ Acupuncture has been listed as a "World Intangible Heritage" by UNESCO's cultural sector at unesco.org.

Arthur Yin Fan, MD(China), PhD, LAc
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References

1. Weeks J. Chinese TCM Renaissance and the Global Movement for Integrative Health and Medicine. *J Altern Complement Med.* 2017 Feb;23(2):79-81. doi: 10.1089/acm.2017.29019.jiw.
2. <https://bmccomplementaltermmed.biomedcentral.com/articles/10.1186/s12906-017-1946-2>
3. Fan AY, Faggert S. Re: "Chinese TCM Renaissance and the Global Movement for Integrative Health and Medicine" by Weeks (*J Altern Complement Med* 2017;23:79-81). *J Altern Complement Med.* 2017 Sep 21. [Epub ahead of print]
4. Miller D. Report Beijing-Zhengzhou. *The Illinois Acupuncturist.*2017; 2: 4-12.

Training and Qualifications of Licensed Acupuncturists

Tracy Soltesz, DAC, LAc

Acupuncture as a Procedure and Acupuncture as a Comprehensive System

- Encompasses a variety of traditional and modern therapies
 - Acupuncture needling
 - Chinese herbal medicine and Chinese nutritional theory
 - Asian bodywork and manual therapies
 - Therapeutic exercise such as medical Qi gong
- "Arguably one of the highest levels of sophistication with respect to integrative medical concepts"
 - Must understand both Eastern healthcare theory, and how that theory relates to and translates into mainstream medical terminology and concepts, in order to collaborate with conventional healthcare providers.



Educational Programs in Acupuncture and Oriental Medicine

- 56 independent institutions
 - 22 states
 - 95 different accredited or candidacy status programs

Year	Students (by State)	Students (by Country)	Total (by State)	Total (by Country)	Total (by State)	Total (by Country)
2011*			5,628	4,537	508	1,091
2012			6,947	5,621	588	1,326
2013			7,244	5,755	589	1,489
2014			7,724	6,098	626	1,626
2015			8,111	6,344	667	1,767
2016			8,501	6,688	713	1,815
2017			8,911	7,055	756	1,859
2018			9,341	7,451	890	1,891
2019			9,781	7,851	930	1,930

* Student programs were included in aggregate from 2014 to 2015
 ** Includes total domestic and international enrollment for 2015-2017 from existing and new institutions, in accordance with ACAOM data

Access to Trained Providers is the Barrier to Care Collaboration is Key

- Some of the nation's largest insurers are opting to include acupuncture as an evidence-based, covered benefit
- Hospitals and other health care institutions are offering acupuncture treatments as an optional, add-on service to some patients' comprehensive care plans
- Lack of access to fully trained acupuncturists and services remains the largest barrier for the American public
- Licensed acupuncturists are uniquely trained to adjust standard acupuncture protocols, offering customized treatments that consider each individual patient's unique health care needs
- Training includes understanding of conventional medical systems, and the ability to work collaboratively with a patient's complete team of care providers



Acupuncture Regulations in the United States

- 47 states and the District of Columbia formally regulate the practice of acupuncture
 - Require providers to become licensed, registered, or certified



Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM) Masters Degree

Accreditation Commission for Acupuncture & Oriental Medicine (ACAOM) Master of Oriental Medicine Program

Minimum 2 Year Master degree, diploma or certificate program
 2125 Hours = 146 Credits (including the following breakdown)
 Oriental Medicine/ Acupuncture Theory = 702 hrs / 47 credits
 Chinese Herbal/ Medical Studies = 431 hrs / 28 credits
 Acupuncture Clinical/ Practical Skills = 870 hrs / 57 credits
 Massage = 511 hrs / 34 credits
 Counseling, Communication, Ethics/ Practice Management = 311 hrs / 20 credits

ACAOM Master of Oriental Medicine Program
 Minimum 3 Year Master degree, diploma or certificate program
 3115 Hours = 210 Credits (including the following breakdown)
 Oriental Medicine/ Acupuncture Theory = 1075 hrs / 71 credits
 Acupuncture Clinical/ Practical Skills = 1401 hrs / 93 credits
 Massage = 511 hrs / 34 credits
 Counseling, Communication, Ethics/ Practice Management = 128 hrs / 8 credits

- Many schools offer extensive programs beyond the minimum standards:
 - 2200 – 2400 hours Master of Acupuncture
 - 3000 – 3100 hours Master of Oriental Medicine

ACAOM (2017, April). Certification Guide: Formal Education. ACAOM Certification Handbook. Retrieved <http://www.nccaom.org/applicants/forms/>

Doctoral Degrees of the Acupuncture Profession

- ▶ **Doctorate in Acupuncture and Oriental Medicine (D.A.O.M.)**
 - ▶ Post graduate doctorate focused on specialization and advanced knowledge and skills
 - ▶ Minimum 1200 hours
 - ▶ 650 hours dedicated to advanced clinical training
- ▶ **Professional Doctorate**
 - ▶ Entry-level doctorate
 - ▶ Additional 300 hours of training beyond minimum standards for Masters degree
 - ▶ 790 hours of clinical training for Doctor of Acupuncture
 - ▶ 1000 hours of clinical training for Doctor of Oriental Medicine
- ▶ **Additional coursework focused on:**
 - ▶ Patient Care and Advanced Diagnostic Studies
 - ▶ Systems-based Medicine, Collaborative Care Systems
 - ▶ Formulating and Implementing Professional Development
 - ▶ Scholarship, Research, and Evidence-Based Medicine

ACAOA, 2017, Sept. 29). Revisions to Professional Doctorate Standards. Retrieved <http://acaom.org/2017/09/29/revisions-to-the-acaoa-professional-doctorate-standards/>

National Certification Demonstrates Evidence-based Standards of Competency

- ▶ **National Certification Commission for Acupuncture and Oriental Medicine:**
 - ▶ "To assure the safety and well-being of the public and to advance the professional practice of acupuncture and Oriental medicine by establishing and promoting national evidence-based standards of competency and credentialing."
- ▶ **Certification Examinations:**
 - ▶ Acupuncture with Point Location
 - ▶ Foundations of Oriental Medicine
 - ▶ Biomedicine
 - ▶ Chinese Herbology



▶ **Diplomate of Acupuncture, Chinese Herbology, or Oriental Medicine**

Certification & Examination by State

States Use of NCCAOM Certification or Exams for Acupuncture Licensure



46 States and District of Columbia

* Wyoming became the 47th state to regulate acupuncture, requiring national standards for education and certification examinations in early 2017

* California is the only state to administer its own examination. California Acupuncture Board voted to require the NCCAOM exams as a prerequisite to licensure as early as 2019

Source: <http://www.nccaom.org/state-licensure/>

Active Diplomates by State

Number of Active NCCAOM Diplomates by State



• 17,600 active diplomates as of 2017
• 29,839 individuals certified since NCCAOM inception

• Member of Institute for Credentialing Excellence
• Accredited by the National Commission for Certifying Agencies

Source: <http://www.nccaom.org/state-licensure/>

Examination Content Validity Standards

- ▶ Content validity standards are set forth by the National Commission for Certifying Agencies (NCCA)
- ▶ A Job Task Analysis survey is conducted minimally every five years
 - ▶ Practitioners in the profession surveyed to assure content of exams accurately reflects what acupuncture practitioners do on the job
- ▶ Exam content revised based upon survey results

Linking NCCAOM Job Analysis Survey and Examinations



Source: NCCAOM Certification Handbook, 2017

Thank You!

