



STATE OF NEBRASKA

DEPARTMENT OF HEALTH

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GOVERNOR

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DIRECTOR

MEMORANDUM

TO: Senator Don Wesely
Chairman, Health & Human Services Committee

FROM: Gregg F. Wright, M.D., M.Ed.
Director of Health

DATE: April 3, 1987

SUBJECT: Recommendations on Credentialing of Naturopathic Physicians

INTRODUCTION

The three critical criteria contained in section 71-6221 of the Nebraska Regulation of Health Professions Act are difficult to apply without confusion to the application on naturopathic physicians. These criteria appear to be directed at health occupations that are legally permitted to practice in Nebraska but which are not currently credentialed. In contrast, most of the activities of naturopathic physicians are currently permitted in Nebraska, but are considered part of the practice of medicine and require a medical license. Therefore, these criteria are not directly applicable to the practice situation of naturopathic medicine. This has complicated the review process for this occupation, not only for the technical committee and the Board of Health, but for me as well.

The language of LB 407 specifically requires that these criteria be satisfied. In order to satisfy this statutory requirement, I have followed the advice of the technical committee and the Board and have interpreted the criteria in such a way as to make them more applicable to the proposal, especially as regards the criterion on harm to the public. I have interpreted this criterion to mean that the current practice situation of naturopathic medicine can clearly harm or endanger the public health and welfare. I have taken the basic philosophy of LB 407 to be that regulation should be imposed only if it is necessary to protect the health of the public, and then only if it can be done safely. With this interpretation in mind, I submit the following recommendations regarding the proposal of the naturopathic physicians.

RECOMMENDATIONS

In their proposal the naturopathic physicians of Nebraska sought licensure for all those who satisfy the standards set forth in their credentialing proposal. The technical committee and the Board of Health recommended against credentialing of naturopathic physicians at this time. I concur with these recommendations.

DISCUSSION

Does the current situation pose a potential harm to Nebraskans?

Yes. Both the technical committee and the Board of Health concluded that the current situation presents harm to the public. I believe their deliberations and the public hearing support this in the following sense. There are many citizens who are not satisfied with the current practice of medicine, and who have turned to alternate health care providers. When they do so, there is no system of credentialing to protect them from unqualified practitioners. In this sense, these citizens are exposed to potential harm. I would agree.

Would licensing naturopathic physicians safely mitigate this harm?

No. Both the technical committee and the Board of Health concluded that licensure was not an effective remedy to the current potential harm. Because of the way the criteria are worded in the statute, this was expressed in a vote about whether such licensure was the most cost effective way to alleviate the harm. I believe that the information gathered by this review process should direct the emphasis in this not to the cost effectiveness, but to the cost effectiveness in terms of safety. On the basis of my review I do not believe that the licensure of naturopathic physicians is a safe alternative.

What are the potential dangers in licensing naturopathic physicians?

My concerns revolve around the training naturopaths have in dealing with trauma, the evidence that some dangerous care would be used, and in the dangers of fragmentation of care.

Trauma Management

There is a potential for harm to the public inherent in the relative lack of training that most naturopaths receive in the treatment of trauma patients. This is a matter of no small concern, given that the applicant group seeks licensure for naturopaths so that they can legally function as primary care providers. All primary care providers should be well-versed in the handling of all types of emergency cases, including trauma cases. Primary care providers who lack these skills jeopardize the well-being of their patients due to the fact that a delay in treatment will result when the trauma patient must be referred to another physician.

In addition, I have serious concerns about the training that naturopaths do receive concerning emergency care. The naturopathic textbook suggests that, in addition to providing CPR for a patient who has ceased all pulse and respiration, the naturopath should consider administering several

naturopathic preparations including "aconite, cactus, arsenicum, and lactroductus." I cannot conceive that this can be anything but harmful for a patient who has had a cardiac arrest and for whom cardiopulmonary resuscitation is in progress. In the treatment of severe anaphylactic reaction with airway occlusion which doesn't respond to medication, the textbook recommends insertion of 4 to 5 needles into the trachea to give an airway. This is clearly an invasive treatment and I have serious concerns whether their training or experience would insure the patient's safety. There are many other examples in the textbook that cause concern.

Unsafe treatments

The public hearing included an interchange between one of the naturopathic medicine proponents and the physician on the technical review committee that exemplifies a danger that is also reflected throughout the textbook of naturopathic medicine that was submitted. When asked what a naturopathic physician might do when confronted with a twelve-month old infant with a fever of 104 degrees and a bulging red ear drum, the testifier, who is president of a naturopathic college, suggested that the treatment would involve "belladonna, Ferrphos, chamomile, and aconite." The age and symptoms of this child indicate high risk for bacterial sepsis and a need for early antibiotic therapy. The delays inherent in "natural remedies" could be life threatening to a one year old infant. While the testimony included a mention of meningitis as a potential risk which would not be treated by the naturopath, there was no understanding of the life-threatening nature of the situation in such a young child. I have similar concerns about the treatment of strep throat for which the text book recommends either garlic or a derivative of barberry. Rheumatic fever is a life threatening complication of untreated strep throat that is still seen in Nebraska and is occurring in epidemics in other parts of the country.

Fragmentation of Care

Finally, the fragmentation involved in developing two parallel systems of primary care poses similar dangers in other situations. A dual system requires that a person have some idea of the appropriate therapy for his or her symptoms in order to decide which system to enter. Even if referrals are made, delays in diagnosis can be dangerous. There is much value to a medical philosophy that considers the whole person (and whole family) and which stresses the body's natural defenses. However this should be integrated into the rest of medical care so that the patient has the benefit of all therapeutic modalities.

Can naturopathic philosophies be integrated into our current system of medical care?

Yes. This is already happening. Primary care training programs are increasingly focusing on the needs of the whole patient, and stressing medical interventions that address the patient's own strengths. This trend should continue. The strength of concern demonstrated on the part of Nebraskans for the shortcomings of traditional medicine should be noted by every physician, and especially by our medical educators. Medicine is not the technical application of drugs to an illness but the care and treatment of a person. Training programs at both medical schools in Nebraska have recognized this and include a focus on prevention and on treating the whole person. But more can be done, and this review process emphasizes that need.

The absence of extensive scientific evidence as to the validity of naturopathic medicine makes it almost impossible to evaluate the assertions of its proponents regarding its ability to treat disease. However, current medical practice is a fluid and dynamic concept, and as new therapies, and especially less invasive therapies, are proven they are integrated into medical care.

Is there a demand for naturopathic medicine?

Yes, there is no question that there is a demand. The applicant group successfully demonstrated that many Nebraskans desire the credentialing of Naturopathic Physicians to serve as primary care providers. However, the applicant group did not demonstrate that there is a need for naturopathy nor have they demonstrated that such a demand can be safely satisfied by the licensing of naturopathic physicians. The Nebraska Regulation of Health Professions Act requires that recommendations be based upon a demonstrated health need and demonstrated safety rather than demand. There has been no compelling evidence that the credentialing of naturopathic physicians is necessary in order to protect public health, or that it could be done without harming the public health.

SUMMARY

In the naturopathic textbook, Randall Bradley summarizes the naturopathic philosophy as "helping the body heal itself in the least invasive, most fundamentally curative manner possible." This philosophy has much value, and should continue to be increasingly integrated into the practice of medicine. However, to set up a separate system of primary care would carry with it potential dangers. It has not been demonstrated that such a system is necessary to protect the public, or that such a system would safely provide care to the public. Medical practitioners and medical educators should listen to the

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concerns about traditional medical care demonstrated by large numbers of thoughtful Nebraskans. And those concerned citizens should be encouraged to express their needs to their physicians and to the medical community. The dialogue that would result should help physicians care more directly for the needs of their patients and should help the patients understand more completely the risks and benefits of various treatments. What is needed is a single system of primary care that safely meets the needs of all of us, and not a fragmented system of alternative cares. We should build on the system of medical care that has brought us many advances in our health status and encourage it to take the next steps into prevention and into the successful integration of medical technologies and our own human potential and human needs.

Finally, I must point out that current law does not prevent persons from earning a living as practitioners of naturopathic medicine, as long as they abstain from diagnosis and treatment of disease. Naturopaths can provide consultation in the area of diet and nutrition. Many naturopaths would be eligible for credentialing under the Professional Counselors Act passed by the Legislature during the 1986 session. This act would provide naturopaths with professional recognition, even though it is not the type of recognition they are currently seeking.

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