



AMERICAN OSTEOPATHIC ASSOCIATION

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February 28, 2011

Representative Kurt Olson
Chair, Labor and Commerce Committee
State Capitol
Juneau, AK 99801-1182

Dear Chairman Olson:

The American Osteopathic Association (AOA) and the Alaska Osteopathic Medical Association (AKOMA) are writing to ask you to oppose HB 122 in Committee. In addition to creating the Alaska Naturopathic Medical Board, this bill expands the scope of practice of naturopaths beyond their education and training. This bill would specifically allow naturopaths to: conduct physical examinations; perform and administer therapies including intravenous delivery of dietetic substances; order or conduct medical imaging and laboratory examinations; perform pre-employment, school and workplace health examinations and administer and prescribe prescription drugs, vaccines, hormones and medical devices.

The AOA proudly represents its professional family of more than 70,000 osteopathic physicians (DOs); promotes public health; encourages scientific research; serves as the primary certifying body for DOs; is the accrediting agency for osteopathic medical colleges; and has federal authority to accredit hospitals and other health care facilities. AKOMA is a divisional (state) society of the AOA and represents the interests of osteopathic physicians in the state of Alaska.

The AOA and AKOMA recognize the role of allied health professionals in the US health care system. However, expansion of allied health professionals' scopes of practice requires appropriate increases in education, clinical training and competency examination to ensure that care provided to the public is both safe and effective. HB 122 would create the Naturopathic Medical Board (NMB), which would consist of three naturopaths, one pharmacist and one public member who may be, but is not required to be a physician. The NMB would have the authority to determine the list of prescription drugs, vaccines, hormones and medical devices that naturopaths can prescribe and administer. This is of concern given that naturopathic education consists of few contact hours of study on pharmacology and provides virtually no clinical reinforcement of pharmaceutical interventions on patients during clinical training. Physicians (DOs/MDs) have extensive medical education and training that has prepared them to understand medical treatment of disease, complex case management and safe prescribing practices.

HB 122 also allows naturopaths to perform pre-employment, school and workplace health examinations. This is problematic as the failure to recognize an underlying health issue, such as a cardiac problem, could result in harm to patients. In addition, the bill allows naturopaths to order or

conduct medical imaging and laboratory examinations. This could lead to patients being referred for the wrong tests, having to undergo additional scans or exams as ordered by a physician once the correct diagnosis is established, and ultimately increasing health care costs.

The naturopathic educational curriculum varies by school. There are six naturopathic schools, which are accredited by the Council on Naturopathic Medical Education (CNME). At most, the CNME requires a pharmacology course as part of the basic sciences requirement in the naturopathy curriculum.¹ In 2005, the CNME implemented an approval process for naturopathic residency programs. While opportunities are available for graduates of naturopathic schools to complete a one or two year residency, this training is optional. In addition, there are no standard requirements for naturopathy residency curriculum, rotations, or experiences. In terms of program content, all that is required by the CNME is that the resident receive 35 hours a year of didactic instruction, and participate in “scholarly activities that promote a spirit of inquiry, scholarship, and critical thinking such as discussions, rounds, study clubs, presentations, conferences, and local, regional, or national professional associations and scientific societies.” The CNME Accreditation Standards provide that “student clinicians must spend a minimum of 850 hours involved in patient care – either in a prior or secondary capacity – under supervision of clinical faculty members.”

The educational, post-graduate training and examination requirements for a physician are far more extensive than those of a naturopath. Prior to being admitted to medical school, a candidate must obtain a Bachelor’s degree. DOs complete four years of osteopathic medical school, which includes two years of didactic study and two years of clinical rotations. Clinical rotations in the third and fourth years are done in community hospitals, major medical centers, and doctors’ offices. Students learn osteopathic manipulative treatment (OMT) for prevention, diagnosis and treatment of disease. This is followed by three to seven years of postgraduate medical education, i.e., residencies, where DOs develop advanced knowledge and clinical skills relating to a wide variety of patient conditions. The total patient care hours required for physicians is 12,000 -16,000 hours.

The AOA and AKOMA also oppose HB 122 because it would allow a naturopath to use the title “doctor” or “physician,” which is misleading to the public. Traditionally, the terms “doctor” and “physician” were associated with the unrestricted practice of medicine or surgery. In patients’ minds, these terms indicate the completion of four years of medical school and several years of post-doctoral clinical residency. In a recent patient survey, 93% of respondents agreed that only licensed medical doctors should be able to use the title “physician.”² We believe that authorizing non-physicians to advertise themselves as “doctors” or “physicians” would result in confusion among patients.

It is our position that naturopaths’ education and training is insufficient to justify the proposed increase in scope of practice. Unless naturopaths raise their educational and post-graduate training standards, they should not be able to prescribe medicine, perform pre-employment, school and workplace health examinations, order and conduct medical imaging and laboratory exams, and use the terms “physician” or “doctor.” While increasing access to care for the patients of Alaska is of

¹ CNME, Accreditation Standards, Adopted June 2009.

² Baseline & Associates conducted a telephone survey among 850 adults nationwide between November 4–8, 2010. The overall margin of error is +/- 3.4 percent at the 95 percent level.

concern, allowing naturopaths to prescribe medication and perform these procedures would be detrimental to the quality and safety of patient care in the state.

We urge you to act in the best interests of patients by voting "No" on HB 122. We look forward to working with you on this important public policy matter. Please feel free to contact Andrea Garcia, JD, AOA Director of State Government Affairs, at agarcia@osteopathic.org or (800) 621-1773 ext. 8185 should you require any additional information.

Sincerely,



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President, AOA



Anne Musser, DO
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