



Why broad prescriptive authority is an essential element of naturopathic practice

Naturopathic medicine is a distinct system of medicine that skillfully combines natural therapeutic traditions with modern science to restore and optimize health. Many think that, because of the emphasis on more natural modalities, that prescriptive authority is not necessary in naturopathic practice. This is not the case for the following reasons:

1. **Allows naturopathic physicians to prescribe the safest, most effective medicines for their patients.** Prescribing authority should be based on training, standard of care, and safety. While naturopathic doctors will prioritize less expensive and less invasive natural substances and modalities first, sometimes the safest, most effective drug is a pharmaceutical. For example, a patient presenting with dangerously high blood pressure should be put on a pharmaceutical to quickly and safely bring their blood pressure into a safe zone, while slower acting natural substances and lifestyle changes treat the underlying cause of the symptom. [another example would be that some pharma antibiotics are just better first-line treatment than herbal antibiotics].
2. **Reduces healthcare costs** – patients of naturopathic physicians who do not have prescriptive authority are forced to schedule appointments with a medical doctor or nurse practitioner to access or refill their prescriptions, simply because the best prescription for their needs happens to not be naturally derived. The time lag can result in delayed treatment, higher costs of treatment, and confusion for patients
3. **Helps alleviate the shortage of primary care providers** – especially in underserved communities. NDs have the training and education to prescribe, and should be authorized to use their complete knowledge-base. Community clinics serving underserved populations, medical volunteer agencies, and other primary-care facilities are not able to hire NDs - despite the fact that they are trained as primary care physicians – simply because of limited prescriptive authority.

4. **Lowers pharmaceutical drug costs** - Many studies have found that naturopathic care results in substantially lower prescription drug costs than conventional care. Naturopathic physicians are also much less likely to use prescription medications as treatment, even when these drugs are included in their scope of practice, and integrative medicine users in two studies reported significantly lower prescription drug use of 48% and 61%, respectively. NDs will also work to deprescribe drugs when medically possible and following careful supervision. A doctor needs prescriptive authority to safely reduce usage of or taper patients off of drugs in favor of natural alternatives and lifestyle changes.

Licensed NDs have the education and training

Licensed Naturopathic and Registered Naturopathic Doctors (NDs) are a uniquely educated and skilled, accredited healthcare workforce serving as primary care and specialty care physicians throughout the US. NDs graduate from four year, graduate-level naturopathic medical schools accredited by the Council on Naturopathic Medical Education (CNME) and approved by the US Department of Education. These individuals have also passed a standardized national postdoctoral examination called the Naturopathic Physicians Licensing Examination (NPLEX).

NDs gain extensive knowledge and expertise not only in natural approaches to healthcare, but also in the clinical and biomedical sciences typically taught in MD programs (e.g., pharmacology). Accredited ND programs are a minimum of 4,100 hours in length and 1200 clinical hours, inclusive of two years biomedical sciences and two years clinical sciences. ND Pharmacology programs are a minimum of 1200 hours of hands-on clinical training¹

As part of the pharmacology curriculum, NDs study and learn both medical and clinical pharmacology, including the primary therapeutic uses, mechanisms of action, potential adverse effect, and drug/drug interactions of medicines commonly encountered, including prescription drugs, controlled substances, and over the counter medications.

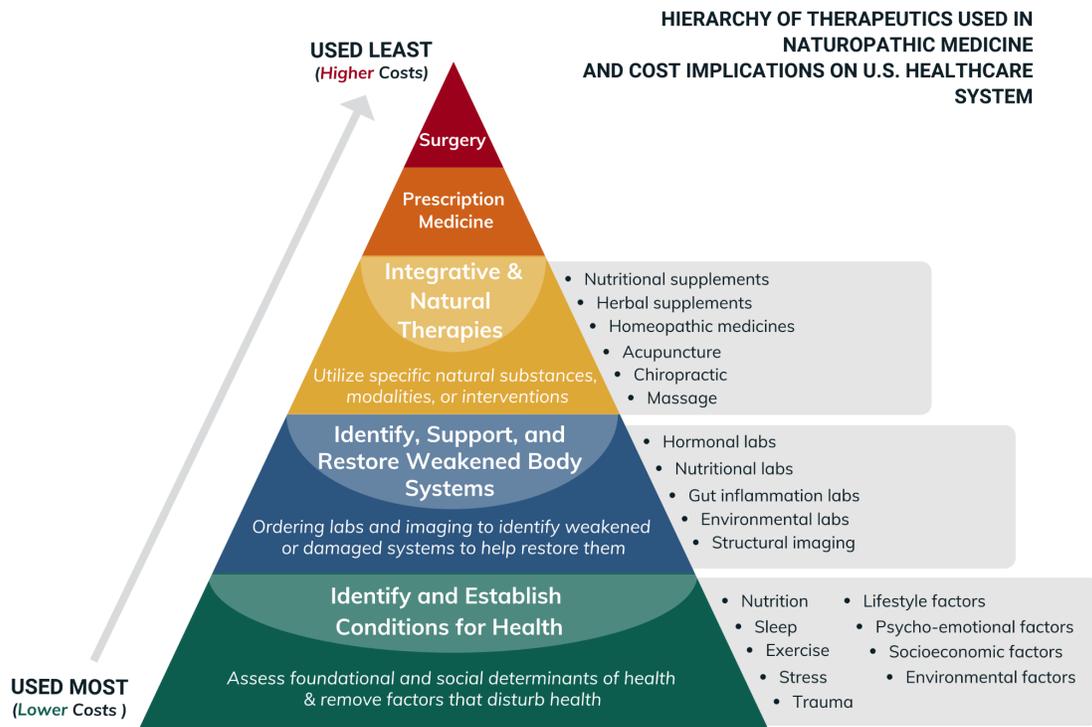
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<https://naturemed.org/do-naturopathic-doctors-prescribe-medication/#:~:text=Pharmacology%20is%20taught%20through%20a,United%20States%20Department%20of%20Education.>

One element in Whole Person Health

NDs prescribe drugs based on available evidence, clinical experience, patient preference, and the Therapeutic Order. They match the patient's level of health and pathology with the necessary level of intervention. As a principle, naturopathic doctors support and enhance the body's inherent ability to heal itself. They utilize a deep toolbox of natural therapies to help get a patient healthy enough to heal disease without strong interventions. Yet when a careful assessment of lifestyle, social/emotional factors, physical exam, and/or targeted laboratory testing reveals that the patient is not able to heal with natural therapies, NDs will refer or prescribe appropriate medicine.

The Therapeutic Order is the framework NDs use to evaluate the patient's obstacles to healing and to choose therapeutic approaches in the most logical, least invasive ways first. If NDs do prescribe medication, they anticipate and address potential side effects of that medication with natural therapies. For example, if a patient requires antibiotics, which are known to wipe out needed, healthy bacteria in the microbiome in addition to harmful bacteria, NDs may also prescribe probiotic foods or supplements to help keep the GI system in healthy balance.



Adapted from "Naturopathy as a Model of Prevention-Oriented, Patient-Centered Primary Care: A Disruptive Innovation in Health Care" by R. Bradley, et al.

Licensed NDs are proven safe guardians with pharmaceuticals

NDs have been safely practicing as primary care providers in 26 regulated US states, districts, and territories. ND licensure statutes have been in place on average over 30 years, and in two states over 100 years. Safe practice by NDs can be objectively demonstrated by the fact that NDs have fewer disciplinary actions taken against them compared to MDs and DOs (see addendum A).

Through 2021, 11 out of 26 regulated jurisdictions allow NDs broad prescriptive authority. Only three of these jurisdictions have taken disciplinary action against NDs for prescribing decisions. The majority of these actions involved opioid management, which is a challenging area for all licensed primary care providers.

Of the six jurisdictions that allow NDs broad prescriptive authority including opioids, only two require oversight by an MD or DO: California and Vermont. Vermont requires oversight for one year or the first 100 prescriptions (or other qualified experience) after passing the NPLEX Part II – Elective Pharmacology Examination. Conversely, California currently requires ongoing prescriptive oversight, creating an unnecessary burden on MDs, DOs, and NDs. As a result, the California regulator is currently seeking to remove this requirement because it interferes with the ability of a qualified ND to practice as trained and provide effective primary care.

Addendum A

Disciplinary Actions Related to Prescribing from 2010 to 2021*

Jurisdiction	Disciplinary Actions	Estimated Number of Licensees
Jurisdictions with Broad Prescribing Rights EXCLUDING Opioids		
Hawaii	0	150
Idaho	0	27
New Hampshire	0	60
New Mexico	0	15
Utah	0	60
Jurisdictions with Broad Prescribing Rights INCLUDING Opioids		
California	0	900
Montana	0	105
Vermont	0	350
Oregon	12	1200
Arizona	18	1450
Washington	32	1400
TOTAL	62	5717

* Or since year of licensure.

FNMRA interprets broad prescribing rights to mean access to all major categories of prescription drugs required for primary care.