



**Written Testimony for the Public Health Committee  
On March 5, 2014  
OPPOSING**

**HB 5327 AN Act Concerning Health Freedom and the Practice of Classical Homeopathy**

Good Morning Senator Gerratana, Representative Johnson and distinguished members of the Public Health Committee, my name is David Emmel, MD and I am a board certified ophthalmologist practicing in Wethersfield, Connecticut. I am offering you written testimony **opposing** House Bill 5327 An Act Concerning Health Freedom and the Practice of Classical Homeopathy as a physician who participated in last years Department of Public Health Scope Review Process for Homeopathic Practice and on behalf of more than 7,000 physicians in the Connecticut State Medical Society and the 1,000 Society members in Ophthalmology, Ear Nose and Throat, Dermatology, and Urology.

In 2012, Pursuant to Public Act 11-209, I participated on the scope expansion committee granted to Homeopathy for Connecticut in their effort to seek legislation that would permit unlicensed practitioners of classical homeopathy to pursue the practice of homeopathy in Connecticut. Our groups were opposed to this expansion of scope then and we are opposed to it now. The request to pursue the practice of health care services without licensure and without the usual oversight provided by the Department of Public Health is both unprecedented and unwarranted, but more than that, it represents a threat to the safety of the citizens of Connecticut. The residents of Connecticut already have access to homeopathy in two forms, through licensed and regulated homeopathic physicians who practice both homeopathy and medicine with either a medical degree or an osteopathic degree or through the services of practitioners of natureopathy who are also licensed and regulated by an examining board and the Department of Public Health. Homeopathy for Connecticut was not able to produce convincing evidence that the need for homeopathic services is greater or different from what is currently available, nor could they show that the provision of homeopathy in its classical version by unlicensed providers would enhance health options for the citizens of Connecticut.

Much could be said about the validity of homeopathy as a health care service, but it is necessary to go no further that the actual report delivered by the Department of Public Health to the General Assembly with regard to the appropriateness of the request for scope expansion that is embodied in the bill before you. The Executive Summary of this report enumerates numerous problems with the request, the preparedness of the homeopathic practitioners covered by the bill to provide safe

and truthful services, and finally the ability of the state to perform its duty to the citizens of the state by regulating the health care profession.

The pool of talent for classical homeopaths is very small and their organizational structure at the national level smaller still making certification a dubious process at best, especially when the bulk of the candidate's work for certification can be done on-line and without the patient contact that is an essential element if not the essential element of medical training:

“Candidates (for certification as classical homeopaths) are not necessarily required to complete accredited education and training program which is unlike all other health care and health related practitioners regulated by the Department of Public Health who must complete a formal recognized and accredited education and training program.”

Connecticut residents do not appear to be clamoring for access to this specific form of homeopathy and can obtain homeopathic services from licensed homeopathic physicians and from naturopaths as well:

“Specific data regarding the utilization of homeopathy and the demand for homeopathic care in Connecticut is not readily available. Additionally, there is no literature to substantiate that Connecticut residents are not able to access homeopathic services in Connecticut or that their health status has been negatively impacted as a result of their inability to access homeopathic care.”

Homeopathy is a weakly substantiated theory and practice with unproven benefits:

“proponents believe that broad access to alternative treatments will substantially reduce health care costs while improving the health of the population, there was no documented current practice data available to support this theory. There is no available data to demonstrate that enactment of these changes in other states has enhanced access to quality and affordable care.”

There was great concern that despite disclaimers on the part of the classical homeopaths that they do not diagnose and treat disease, their practice involves the recognition and response to disease states creating the clear impression that contrary to claims, they do diagnoses and treat disease:

“The ability to ensure that the public understands that a Certified Classical Homeopath is not a medical professional and does not diagnose and treat medical conditions was a major concern raised by scope of practice review committee members.”

The imprimatur of the state through the process of granting legal access, even without licensure, may inappropriately embellish and enhance the perception that classical homeopathy can do things it cannot:

“The part of the debate that was left unresolved was trying to answer the question – is informed consent enough? The need for education of clients/patients cannot be overstated. The benefits of complementary and alternative medicine practices such as homeopathy can sound extremely promising to clients/patients who may base their treatment decisions on unrealistic expectations. Providers must be clear about what they can and cannot do.”

The absence of licensure removes from the state its most effective mechanisms for enforcing quality care:

“There is generally no enforcement mechanism available as these individuals do not hold licenses.”

“Resources are limited in handling investigations related to unlicensed practitioners.”

“There was no definitive agreement among scope of practice review committee members as to whether or not allowing certified classical homeopaths practicing under “full disclosure” is enough to adequately protect the public.”

“Because homeopathic practitioners are largely unregulated, there was no data or evidence available about their practice patterns to clearly state one way or another whether the doctrine of *caveat emptor* (i.e., let the buyer beware) is appropriate to discussions regarding the provision of health services and to adequately protect the consumers at a time when the abundance and complexity of health information that is available is overwhelming.”

“Under the statutory recognition model however there is no mechanism to hold practitioners accountable for practice related issues. The Department of Public Health would have no authority to take disciplinary action against a certified classical homeopath.

Finally, creating statute granting unique rights to this group will open the door to many other groups eager to practice alternative health care with little or no scientific or evidence based studies supporting validity and with all of the problems outlined above.

Thank you and if you have any questions regarding this testimony, I can be reached at:

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Respectfully submitted,

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