College of Naturopathic Medicine
University of Bridgeport

Testimony of Cheryl Proctor Presented before the Public Health Committee Regarding Inclusion of Prescriptive Authority for Naturopathic Medicine Physicians in H.B. No. 6797 (RAISED): AN ACT CONCERNING THE PRACTICE OF NATUROPATHY.

Good morning and thank you for the opportunity to speak with you today. My name is Dr. Cheryl Proctor and I have been a practicing naturopathic physician for 27 years. During the last five years, before joining the University of Bridgeport, College of Naturopathic Medicine as the Associate Dean of Clinical Affairs, I practiced as a primary care physician in the state of Vermont, where I had prescriptive pharmacy rights. As a naturopathic physician, I was able to practice in the capacity of a family care physician because of crucial changes mandated by the Vermont Office of Professional Regulation (CT Dept. of Health) relative to naturopathic practice. One of the most crucial regulatory changes made by the licensing office was to define the naturopathic scope of practice in such a way as to include a dispensary of common pharmaceutical medications. Having a naturopathic formulary as part of my scope of practice allowed me to make judgment calls about when prescription medications were necessary and indicated. As a family care practitioner, I was able to assess a patient's symptoms, order laboratory testing, and diagnose conditions that sometimes required prescription medications. I am talking about common conditions such as high blood pressure, high cholesterol, hypothyroidism, strep throat, sinusitis, bronchitis, and asthma—everyday conditions that are easily treated when the correct medication is prescribed in a timely manner.

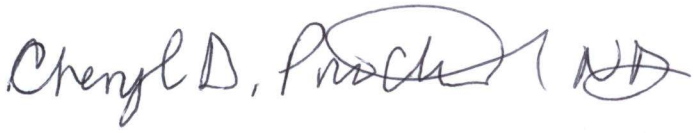
Something that I witnessed day after day in practice is that timing can be everything when a patient needs to see a physician and receive treatment for an acute infection or injury. A five-year old girl in pre-kindergarten comes to the office along with her Dad on a Friday afternoon with a fever and impetigo. Do I really just take a swab and explain that if it comes back positive for a bacterial infection I will have to refer her out because I can't write a prescription for penicillin? In another case, a 54-year-old woman presents with a recent tick bite encircled by a classic bull's eye rash, headache, fever and joint pain, and it is apparent that she is infected with Lyme disease. A simple prescription of doxycycline given early in the infection can prevent years of potential suffering for the patient, and eliminate an enormous financial burden to the healthcare system due to chronic Lyme disease. In another case, a 65 year old female presents with an infection of her foot that I diagnose as cellulitis, an infection that if left untreated can cause sepsis. In combination with naturopathic modalities to boost her immune system and promote healing, she is prescribed a short course of antibiotics to avoid serious consequences of an untreated subcutaneous infection.

As part of the healthcare infrastructure in Vermont, I was able to practice in collaboration with other health care professionals, which proved to be a mutually beneficial arrangement for patients and involved providers. Co-management of patients along with conventional medical providers, whether they were primary care doctors, gastroenterologists, orthopedic surgeons, endocrinologists, or physical therapists was a great advantage to all concerned, and it served to coordinate and integrate their care more efficiently.

Last week a study appeared in the Annals of Family Medicine entitled, "New PCP Shortage Numbers Call for 27% Bump in Residency Slots". The results of this study project that in the next 20 years an additional 44,340 PCP's will be needed. One way to address this shortage is to allow naturopathic doctors prescriptive authority. Naturopathic physicians are a relatively untapped source in terms of the health provider work force, and we are ready to take a seat at the table of family care medicine in Connecticut. Please consider a change in our scope that would give us the right to practice the medicine we

are trained to administer, and that would allow the University of Bridgeport College of Naturopathic Medicine to more efficiently meet our mandate of training primary care naturopathic physicians. Prescriptive authority for naturopathic doctors would result in Connecticut aligning its laws with other states that license naturopathic doctors, in a way that would allow us to offer both acute and chronic healthcare that also focuses on healthy lifestyles and prevention. Thank you for your time and consideration of this important issue in healthcare.

Respectfully Submitted,



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