

March 10, 2016

Re: SB 353 AN ACT CONCERNING OPIOID ABUSE

Dear Senator Gerratana, Representative Ritter, and members of the Public Health Committee.

I am hereby submitting written testimony opposing SB 353 AN ACT CONCERNING OPIOID ABUSE.

I am a licensed acupuncturist and a member of The CT Society of Acupuncture and Oriental Medicine. (CSAOM) I have been in private practice since 2003 in two locations - Westport and Bethel, CT. I also served on the Core Faculty of Tri-State College of Acupuncture in New York City from 2003-2008. I am submitting testimony on behalf of other Licensed Acupuncturists and myself regarding the importance of licensure in acupuncture when it comes to auricular acupuncture treatments.

We are opposed to the language in SB 353 which removes the requirements for acupuncture detox specialists (ADS) to perform their specialized “auricular acupuncture” treatments only in settings licensed by the DPH or operated by the DPH for the care and treatment of substance abuse, under the supervision of a physician (CGS Chapter 384c, section 20-206bb(4)(h)) and open that practice of “auricular acupuncture” by certified ADS’ to any private practice setting.

The licensed Acupuncturists of our organization, many of who are also certified by the National Acupuncture Detoxification Association (NADA) and credentialed as certified ADS, have serious concerns about any such legislative proposal and oppose it. Karen Borla, president of CSAOM has spoken to social workers and psychiatrists who are NADA trained who say they do not feel qualified to practice the protocol in a private setting. While we see the need to expand services to treat the growing epidemic of opioid addiction and abuse, and know the strong evidence that acupuncture is a valuable adjunct treatment for people trying to detox from these substances, we also know that ADS certification is a very limited professional standard. An individual with no prior medical training can become certified as a NADA auricular practitioner with a weekend course and a short practicum of supervised treatments, and is required to meet no professional re-certification or continuing education standards. Allowing these valuable, but minimally trained practitioners to perform acupuncture outside the boundaries of the licensed facilities for substance abuse treatment removes any way to oversee the safe practice of this medicine.

According to NADA’s website, during NADA treatments, groups of people sit together while undergoing the treatment. The procedure functions as an adjunct within a comprehensive treatment program that offers other therapeutic elements including counseling, education, family involvement, mutual support group involvement, and supportive medical health care.

Moving these treatments to a private practice setting clearly is outside of the intent of the NADA protocol.

That is why the restrictions were originally placed in the law. In the U.S.A. and Canada, many localities encourage the implementation of a NADA program through regulations that allow non-acupuncturist health providers to be trained in the NADA protocol, often under the supervision of a licensed acupuncturist or medical doctor. Among these states and provinces are: Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Indiana, Louisiana, Maryland, Michigan, Missouri, New Mexico, New York, Nova Scotia, Ohio, Ontario, Prince Edward Island, South Carolina, Tennessee, Texas, Vermont, Virginia, Washington. A number of these states actually define the ear points that ADS specialists are trained and permitted to use, and require a course in Clean Needle Technique.

Further, we see that some ADS' have publicly testified a misunderstanding that their certification extends beyond treatment of alcohol and drug abuse (to such other conditions as sleep disorders, anxiety and post-traumatic stress disorder). This misunderstanding, and the lack of any requirement for supervision in private practice settings, highlights exactly the concern we have with this law change.

In closing, we would like to emphasize that our profession of Licensed Acupuncturists (LAc) is also working diligently on using its full training and practice protocols to address opioid addiction, and especially the source of the current epidemic: over-prescription of opioids as first line pain treatment. Our national organization, the American Society of Acupuncturists, appointed a task force for this purpose at it's annual meeting this past week, and delegates from our state organization would welcome the opportunity to meet with you to discuss the solutions available within the field of Licensed Acupuncturists.

Thanks for your time and consideration on this very important subject.

Sincerely,  
Laura Shahinian Kara L.Ac

Kara Acupuncture & Wellness  
Laura Shahinian Kara M.S. L.Ac.  
Diplomate NCCAOM 203.470.7072  
8 Lincoln Street, 2nd floor, Westport CT 06880  
268 Greenwood Ave, Suite #200, Bethel CT 06801