



Public Health Committee
Testimony in Opposition to
House Bill 5902 AN ACT CONCERNING NATUROPATHIC MEDICINE
February 25, 2019

Good Morning Senator Abrams and Representative Steinberg, and other distinguished members of the Public Health Committee. For the record, my name is David Boisoneau, M.D. I am a board-certified Otolaryngologist practicing in Waterford, CT. I am here representing the thousands of physician members and physicians in training of the above-mentioned societies to strongly oppose to House Bill 5902.

If you have a feeling of Déjà vu, you are not alone. Some of you will certainly recall our testimony presented in 2010, 2013, 2015, 2016, 2017, and 2018 opposing similar bills for Naturopaths seeking prescriptive authority. Unfortunately, we are here to address yet another effort by naturopaths to create a back door to prescriptive authority.

We have submitted information for your consideration (see attached fact sheet) regarding the striking contrast of training and experience between physicians and naturopaths. We will discuss that in a moment, but we would also like to point out the dangerous precedent this bill would set. The Connecticut state legislature, by law and ethics has the duty to consider scope of practice expansions, and to protect the public. Having failed to convince this body, on multiple occasions, that naturopaths should prescribe medicines, they are trying a different strategy. We are faced now with a bill that audaciously assumes they can prescribe, and boldly focuses on which medicines they will be allowed. If passed, this bill would create a mechanism by which professions could circumvent the time honored and trusted public hearing and legislative process and the legislature's own scope review process. That process has three times reviewed this issue and not recommended prescriptive authority. Further, it unprecedentedly requires the Department of Public Health to create and administer a process and structure for evaluating, reviewing, and determining appropriate prescriptive authority. This will require new expertise, personnel and funding.

Several years ago, the CGA took the lead in creating a fair and inclusive Scope Review Process. Through this process, health practitioners wishing to expand their scope can request a review by the Department of Public Health (DPH). The DPH then solicits requests from other health care professionals to participate in the process, allowing an exchange of ideas and a vetting of the request for scope expansion before proceeding to the legislature. With a vetted request, legislation would often be introduced and undergo a public hearing under the auspices of the Public Health Committee. In recent years, many members of our organizations spent many valuable hours serving on about 12 Scope Review Committees, including the APRN review which resulted in independent practice for some APRNs. When the previous requests by Naturopaths for prescriptive authority were reviewed through the Scope Review Process, many hours were spent reviewing the education, training and clinical hours of the inconsistent Naturopathic training. Each time it has been considered the committees have reached the same conclusion: it was not in the public interest to allow Naturopaths prescriptive authority. This opinion was reinforced by an article in Consumer Reports last year that warns against seeing a naturopath without coordinating treatment with a Medical Doctor. In addition to an inadequate level of training for naturopaths, many of those who choose to go to a Naturopath do so for alternative health treatments and not for the prescription of traditional pharmaceuticals. This is confirmed by the University of Bridgeport's Naturopathic Program which has advertised to prospective students a "non-Rx approach" for their training program and their profession.

This legislation proposes that the DPH draw up a formulary for naturopaths. Let us set aside, for a moment, the fact that naturopaths lack the necessary academic, and particularly, the clinical, training to safely prescribe and manage prescription medicines. Creating a formulary of this nature is not a simple task, and there currently is no process for doing this in the Department. There is no precedent for such an action for any other profession. In addition to a full understanding of the pharmacopoeia, the creation of such a formulary would also require a detailed, impartial, and disinterested knowledge of the true scope and limits of naturopathic practice and training, so that correct and judicious limits would be applied. This proposed approach seems a bit like asking a fox to prescribe exactly how it would like the hen house stocked before its arrival.

There are many health care professions who have completed the rigorous didactic and practical training to achieve prescriptive authority. There is no substitute for the hundreds of hours of didactic lectures in pharmacology and thousands of hours in clinical rotations these students complete just to receive their diplomas. But this only lays the foundation. Post graduate training on the nuances of clinical pharmacology in internships, residencies and fellowships, all under the watchful eyes of experienced prescribers and care givers, ensures that this knowledge becomes part of their DNA. Other approaches that consist of limited hours or even weekend courses simply cannot ensure the safety of our patients. Even just last year, the naturopaths suggested additional training be required for them to be allowed to prescribe medications, and this bill now simply asserts they will prescribe with no additional training or review.

In conclusion, this bill is wrong in both its intent and its proposed execution. The ability of professions to perform an “end run” to achieve their desire for expanded scope of practice will place patients at risk and erode our well delineated and accepted process. The Connecticut General Assembly should not open this door to those who are not satisfied with their career choice. It is the wrong goal and the wrong approach. And there is simply no need for this –Connecticut is a small state with thousands of well-trained professionals with prescriptive authority. A collaborative approach would be far more useful and would best utilize the strengths of all health care professionals

Prescriptive authority of Naturopaths

Naturopaths are increasingly seeking legislative approval for the authority to prescribe medication, including controlled substances.⁷² Indeed, naturopathic beliefs are rooted in vitalism, the pre-20th-century assertion that biological processes do not conform to universal physical and chemical principles. Naturopaths describe a healing power of nature that is compromised by modern medicine. For these reasons, as stated by the American Naturopathic Medical Association, “Requests for expanding their prescriptive rights alone prove their real interest in healthcare is not naturopathic.”⁷³

In part due to these beliefs, naturopaths are largely anti-vaccine, deferring to statements regarding patient choice. A 2010 study found that pediatric use of naturopaths in Washington State was significantly associated with reduced adherence to recommended pediatric vaccination schedules and with acquisition of vaccine preventable disease.⁷⁴ At the same time, data indicates that naturopaths write exceedingly high rates of prescriptions for medical marijuana in those states that allow the practice. According to a November 2014 medical marijuana report published by the Arizona Department of Public Services, naturopaths wrote about 75 percent of the roughly 52,000 medical marijuana certifications from July 2013 to June 2014, despite having a small number of providers.

While naturopaths will point to minor pharmaceutical training included in curricula for schools of naturopathy, it is important to note that there is no naturopathic standard of care, and that many naturopathic therapies have not enjoyed the rigorous scientific study of those pharmacotherapies taught in osteopathic and allopathic schools of medicine. Granting naturopaths the right to prescribe is therefore a dangerous proposition.

Moreover, naturopathy has long been considered by many state legislatures and the public as the natural practice of healthcare. To grant the right to prescribe any form of drug to the naturopath is not only dangerous, but also confusing to the public.

⁷² Washington House Bill 4573 (2014) proposed that naturopaths be allowed to prescribe and administer Schedule II through V controlled substances. North Dakota SB 2194 (2015) proposed that naturopaths be allowed to prescribe and administer any prescription drug included on a formulary established by the board of naturopathy.

⁷³ ANMA. Letter to Washington State Department of Health. September 24, 2014.

⁷⁴ Downey LI, Tyree PT, Huebner CE, et al. Pediatric vaccination and vaccine-preventable disease acquisition: associations with care by complementary and alternative medicine providers. *Child Health J.* 2010;14(6):922-30.

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