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# Acupuncture - *by Any Other Name* - Is Acupuncture: The Fight Against Professional Plundering Continues

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As most of you already know, Illinois is in the midst of a national discussion as to whether it is appropriate for physical therapists (amongst others) to use “Trigger Point Dry Needling (TPDN)” or “Intramuscular Manual Therapy (IMT)”. This is an issue that must currently be decided on a state-by-state basis. Many states have determined that TPDN/IMT is within the scope of practice of PTs; many have decided it is not. Differences in rulings depend, in part, upon how individual state practice acts are written for both of the primary professions involved: Acupuncture and Physical Therapy. Recently in Illinois, the Illinois Physical Therapy Licensing and Disciplinary Committee placed the question to the counsel of the Illinois Department of Financial and Professional Regulation (IDFPR) as to whether TPDN/IMT could be within their scope of practice. The council examined the Physical Therapy Practice Act, **did not** consult the Board of Acupuncture, **did not** consider the Acupuncture Practice Act, clearly **did not** recognize this practice as acupuncture, and concluded in an “informal, preliminary” statement that there was nothing in the Physical Therapy Practice Act that initially seemed to preclude this practice. Based on this, a number of physical therapy organizations around the Chicago land area began offering this service.

While it is unclear exactly what information was presented to the IDFPR here in Illinois, the formal arguments that the physical therapy community in general has presented to regulatory agencies have hinged on the assertions that TPDN/IMT is not the same as acupuncture, is not based in traditional Chinese medical theory, and is not meaningfully different from other practices already in their use.

Clearly, the fact that TPDN/IMT is considered by many to be acupuncture was not included in the information presented. Yet to patients, advertising information is being distributed that states, “Intramuscular manual therapy (aka., Dry Needling) is the insertion of a filament needle directly into or over a Myofascial trigger point in order to release tension and decrease pain.” (To clarify, a “filament needle” is an acupuncture needle.) It then goes on to state, “Dry needling dates back to as early as the 7th century where Sun-SSu Mo [SIC], a Taoist doctor, used needling on what he called Ah-Shih points [SIC], which correspond to modern day trigger points.”

So, what is being asserted by the PTs is (yes, you read correctly) that TPDN/IMT is not acupuncture, but is a procedure that uses acupuncture needles in a tradition that dates back to one of the most well recognized sages of Chinese medicine and acupuncture. Further, discussions saved from list-serve conversations among physical therapists include exchanges regarding the purchase of “Acu-graphs” and similar devices that are specifically designed to locate acupuncture points. Hence, while the lip-service being presented to the State is that this is a distinct practice unrelated to Chinese medicine, the evident intent and advertising of the procedure is indistinguishable from acupuncture that is rooted in Chinese culture and medicine. There seems to be, in fact, every reason to believe that the intent of this sub-group of physical therapy professionals is to practice acupuncture with no supervision, approved training, licensure standards, continuing education, or oversight. In effect, the intent is to circumvent all public protections put into place for the

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practice of acupuncture in Illinois, through the technique of re-packaging and re-naming.

To clarify, as well, from a strictly “legalist” standpoint, the definition of “Acupuncture” under Illinois law is, “...The evaluation or treatment of persons affected through a method of stimulation of a certain point or points on or immediately below the surface of the body by the insertion of pre sterilized, single use, disposable needles, unless medically contraindicated, with or without the application of heat, electronic stimulation, or manual pressure to prevent or modify the perception of pain, to normalize physiological functions, or for the treatment of certain diseases or dysfunctions of the body...” So, *legally, in Illinois, TPDN/IMT appears to be exactly Acupuncture.* It should also be noted that the practice act specifically specifies that the only other professionals allowed to practice acupuncture are those licensed under the Medical Practice Act of 1987.

Let it be stated and understood, clearly and definitively, that the protest the acupuncture community has put forth does not in any way have to do with questions about the value that Physical Therapy, as a field, has for patients. As a medical doctor and a licensed acupuncturist I have found physical therapy services invaluable to the recovery of many of my patients, and the field as a whole has cultivated a body of knowledge that is vital and underutilized. Physical therapists I know and have worked with have been intelligent, well-intentioned individuals with a sincere goal to better the health of their clients. HOWEVER, just as I would sanction any peer who was doing harm by practicing out of scope, with inadequate training, intentionally deceiving the public, circumventing and intentionally deceiving the regulatory authorities, and



acting out of their own best interest rather than for the betterment of the public health, so must we take a firm stance against the **sub-group** of physical therapists attempting to pass this practice off as anything but what it actually is: a technique originating in acupuncture therapy as developed in East

Asia, and written about in Chinese historic texts. Aka: a specific type of acupuncture practice.

The core of this problem also lies in the following: If TPDN/IMT is approved for use by physical therapists based on the idea that it is a confined, limited, specific type of therapy, there is no remotely reliable mechanism in place to assure that this practice will remain confined to ashi point needling. The argument that this is a distinct practice is essentially meaningless, because, distinct or not, no safeguards are in place to limit expansion of point selections and treatment protocols, and no agency will be monitoring to assure that acu-graphs are not employed and that classic texts are not consulted. The field will be open to acupuncture practice in general, and, yet again, the public will have no assurance that the product they are receiving is in any way meeting any type of minimum standards.

There are many ways to do harm. The most concrete is of course to directly do bodily harm to a patient, but this is in many ways the least of the potential harms in this case. The greater harm comes from distracting patients away from providers who could truly do them greater good, because we have allowed to be put into place a system where untrained individuals are allowed to offer the same product with no safe-guards, and we allow them to do this in a structure for which they can bill insurance, there-by making them a

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preferable source for the uneducated consumer. (And yes, the physical therapists are billing TPDN/IMT under physical therapy codes.) Under the guise of helping patients achieve relief from focal musculoskeletal pain and with the up-front wrapping of this increasing access to services, practitioners of TPDN/IMT actually facilitate patients not receiving the full spectrum of treatments that they could be getting from a trained practitioner.

Further, by allowing a group of practitioners to circumvent proper licensing and training prior to practicing Acupuncture, the meaningfulness of the practice act structure in Illinois is undermined, and thus draws into question why we need regulatory agencies at all. As we stated in our letter to the IDFPR, "This move to add what is by State definition "Acupuncture" to the scope of practice of Physical Therapists in Illinois opens a door to public harm and misrepresentation, and further serves to confuse the public about safeties they have come to expect and standards for practice they deserve to have in place. It underscores that while one professional group is required to demonstrate excellence and prove on-going competence in this field, another group can effectively do whatever they choose. For the protection of the public safety and for the preservation of the legal integrity of the practice act structure in Illinois, it must be beyond the scope of authority for this change to occur via Board determination alone. The practice of Acupuncture by Physical Therapists, by whatever name is being used for the procedure, should cease and desist."

On June 20th we presented our case to the IDFPR for consideration, and as of the time of the writing of this piece, we await a response. Should this initial consideration be found to go against the integrity of the practice act structure of Illinois, and against the best practice of acupuncture in Illinois, we will take the

question to higher levels, as far as it needs to or can go. Then, if a re-determination sides in the acupuncturists' favor, we would anticipate that this question will be re-challenged by the sub-group of physical therapists interested in practicing acupuncture without training. Of course, we will remain on-guard for whatever necessitates our next course of action. Oregon has recently taken this battle to the courts; we hope to avoid a similar course of action.

To be complete, there is a core truth that our community needs to face; one that is not new and comes to light again in this current struggle. The situation we are facing did not arise *de novo*. It arose out of the public lack of understanding as to how "acupuncture" fits into the greater body of Chinese medical practice, as well as what Chinese medicine is in general. It arose out of a complete ignorance of the broad scope of conditions acupuncture can treat when applied in conjunction with proper health practices, herbs, and auxiliary techniques. Remember, "the public" includes not just the "person on the street", it includes legislators, regulators, and other health professionals. It was due to a lack of exposure to what we do that the IDFPR did not immediately realize that PTs were requesting to practice acupuncture without an acupuncture license.

Each and every licensed acupuncturist needs to be part of the effort to educate the public about this medicine, and we need to do this through coordinated efforts. If our community remains splintered or splinters further; if we do not understand the need for practice acts and our own certifying agencies (i.e. NCCAOM, ACAOM); if we rail against demanding high educational standards and professionalism; if we seek to remain in the shadows outside of the system; if we ourselves pursue the addition of techniques to our scope for which we have no sufficient training and which are not rooted in Chinese medicine (e.g. homeopathy); and, if we do

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not find ways to define, name, and explain who we are that are not based in the single treatment technique of "acupuncture", then not only will the systematic dismantling of the profession continue, but we will have contributed to that demise.

The individuals currently in your professional associations have been working diligently, as volunteers, to preserve the integrity of the field. Yet, the number of "hands-on-deck" remains too low to proceed to preemptive action. Ideally, we could see the coordinated development of a true not-for-profit organization solely devoted to education of the public. It would be vital however, that any such

effort be undertaken in coordination with legislative efforts already in place and growing, as well as informed by the national agenda. The acupuncture community should vehemently rally against any effort to further splinter collective efforts. It should be sensitive to whether intentions are towards qi gathering or qi dispersing. Ilaaom and AAAOM with the noteworthy actions of also the NCCAOM are your representatives and gateways to strengthening your profession. If you are new to this field, you must become aware of how fragile our practice opportunities are, and how challenging it is for many to become established and to earn a living. Only through participation can we hope to change the current situation. Thank you to those of you who have already leant a hand!

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