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Acupuncture Today

September, 2000, Vol. 01, Issue 09

Message from the Front Lines

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With over two decades of being actively involved full-time as a school head, educator, practitioner and activist in the acupuncture profession in the tri-state region of New York City, I feel as if I have been on the front lines in the development of the American acupuncture and Oriental medicine profession.

As happened for so many of us who were instrumental in making this profession happen in the United States, we grew tired of the political realm and moved back to a more focused life of educating and practicing what we love so much. It is therefore with great sorrow that I look at our profession today from a more pragmatic perspective, and am compelled to sound the alarm: **acupuncture is about to be lost and scattered to the four winds of the health care world.** Scattered, I hasten to add, because very few in this profession today have the passion for acupuncture, for what acupuncture might do for a health care world in which informed touch is disappearing rapidly, and because the new thrust is for Oriental medicine and the doctorate.

This thrust sees acupuncture as a mere part of Oriental medicine, in which Oriental medicine is a code word for herbal practice. In this perspective, born when traditional Chinese medicine (TCM) hit the U.S., acupuncture is reframed as internal medicine akin to herbs, rather than a hands-on therapy designed as a physical medicine that, through informed touch, can restore integrity not only to the body, but to the body, mind and spirit as a whole.

Acupuncturists that I know, including all of the senior clinical faculty at the Tri-State College of Acupuncture, practice what Bob Flaws once termed "an acupuncturist's acupuncture": that is to say, acupuncture from an acupuncture or meridian point of view. The Oriental medicine or TCM style of acupuncture taught at most schools and practiced by most practitioners (especially on the West Coast, where TCM had its biggest influence) is a watered down version of acupuncture in which informed touch plays virtually no role at all. In TCM, practitioners do what everyone else in the health care world does: they administer an intake, analyze the data, arrive at a diagnosis in their own terms (not the patient's), and treat a

formula of acupoints by inserting needles or applying moxa to exact textbook locations, as if those points had therapeutic properties of their own like herbs. The inevitable result is that the TCM style of acupuncture has done to acupuncture what Western medicine has done to itself - removed informed touch from the therapeutic encounter.

In direct contrast, hands-on meridian acupuncture styles, including those practiced in Japan, view informed touch as a central guide to treatment. Informed touch is utilized as a means of validating the patient's experience of suffering while connecting directly with the patient's living pattern of distress. To those who would counter that such hands-on meridian-based perspectives downplay acupuncture and relegate it to the realm of a mere physical therapy, I would respond that acupuncture practiced from an acupuncture point of view is physical medicine *par excellence*. No other physical medicine perspective I am familiar with has as comprehensive and systematic a therapeutic approach, nor as comprehensive a therapeutic effect.

In its failure to recognize that acupuncture itself, independent from herbology, has caught the attention of both the public at large and the Western medical world, the Oriental medical profession is in essence allowing acupuncture to be taken out of the hands of the profession. In the last few years, we have witnessed the proliferation of a far inferior "medical acupuncture" (acupuncture practiced by medical doctors with merely 200-300 hours of training) and now, more frequently, a "chiropractic acupuncture," often practiced with only 100 hours of study.

To me, this signals that the inherent value of acupuncture as a treatment in its own right is in serious jeopardy. Unless our profession reclaims acupuncture for itself, acupuncture may be diminished by our Western counterparts to a mere part of treatment - one more billable modality to hike the overall price of a visit. Unfortunately, the public remains ill-equipped to distinguish between practitioners with abridged versus comprehensive acupuncture educations.

It is my prediction that if the acupuncture and Oriental medicine profession does not begin to develop variable training programs for physicians and chiropractors in excess of the 100-300 hour courses now available, patients will suffer. Oddly, acupuncture schools recently opted to refrain from teaching abbreviated courses to physicians or chiropractors, thereby leaving these professionals with no choice but to find other options - usually enterprising individuals with relatively limited resources. It is my belief that acupuncture schools have a responsibility to the public to actively seek out and attract serious-minded physicians and chiropractors by developing training programs that satisfy our profession's standards.

The question I raise to our profession is: Who will work for an acupuncturist's acupuncture, a practice of acupuncture in all its depth and breadth? An acupuncturist's acupuncture, anyone? The public certainly seems to want it. I believe they deserve it.



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