

Part One: Line Up for the Group Photo

By C.P. Negri

I am an acupuncturist, just like you. I was trained in the late 1970s, and am of the generation that recognized Oriental medicine and other alternatives as "the health system of the future." Twenty years ago, we said that a lot, but inside, we all had our doubts as to whether it would ever happen in our lifetimes.

Back then, few states were licensing us, and insurance reimbursement - and therefore any meaningful income - was withheld from us. It seems so sudden that things have changed so much.

Now, every time I turn around, I find evidence of our field where I wouldn't expect to see it, like a full-page ad in the *New York Times* that showed a hand guiding acupuncture needles into a patient's ear. The ad used long, long needles - dramatic imagery, but not the sort of needles a seasoned acupuncturist would stick in a person's delicate ear, so I looked closer. The ad was for an insurance health plan. It told the reader, "We all want to have the best care when we pursue non-conventional therapies. That's why we built the first credentialed alternative medicine network in the region."

This HMO offers its members alternative medicine practitioners who are "credentialed every two years," and continues: "So whether it's a visit to an acupuncturist, a massage therapist, or a yoga instructor, Members have peace of mind." The implication is that their "Members" (with a capital M) have reason to be unsure about providers who aren't within the fold of this HMO. After all, they may not be "credentialed."

This may have struck me as typical marketing gobbledeygook if not for other items I have come across in print. An excellent piece by John Weeks in the January 2001 issue of *Alternative Healthcare Management* talked about the integration of complementary and alternative medicine (CAM) into mainstream hospitals. It described the current trend of bringing together acupuncturists, chiropractors, massage therapists, etc. under one roof, and the selling of that concept to the public. A quote from the article caught my eye: "Hospital PR departments work their local media for maximum advantage, and for good reason: the clinic's business

model needs to access the cash-paying CAM consumer."

The article went on to say that the hospital will then try to sell its other services to the 30-50% of consumers who use CAM. In other words, draw in the people who want something other than conventional medicine, then sell them something else provided by the conventional source. The article closed with the words, "Worth noting is that CAM integration's less-publicized channel is typically through cross-trained conventional medical professionals rather than through members of the distinctly licensed CAM professions."

What Mr. Weeks was trying to tell us is that medical doctors with a short course in acupuncture will be getting the lion's share of business in the new field of "integrated" medicine. Patients wanting massage therapy will receive it from a physical therapist, not a licensed massage therapist. Nurses on staff will be tapped to provide therapeutic touch; reiki; aromatherapy; or whatever "alternative" therapy the public is buying that year. In other words, it's all business.

I don't think things are so different today for students of Oriental medicine than when I was in school. We study and practice with the primary goal of getting people well. We want to make a living, of course, but I don't know anyone who chose this field in the hopes of becoming rich. We apply ourselves to learning a philosophy from another time and culture, and a methodology different from the medicine we grew up with. All that effort doesn't leave much time to think about how we're going to prosper when we're finally out in practice. What little business management instruction is given does not fully prepare us for the incredible struggles we face in the health care marketplace.

The average allopathic medical student, on the other hand, often comes from a family with a comfortable income. He or she is rarely going to school (as an acupuncturist frequently is) later in life, as a second or third career. There are at least two advantages to this up front: Knowing there is money behind you, and knowing there is money in front of you. It is a foregone conclusion that an MD will make a better than average income, so much so that the medical student does not have to agonize over whether there will be a job waiting once school is over. The business of medicine is an integral part of what is taught in the process of training the MD. All the protocols and systems through which the conventional physician works do not seem like a greedy, cutthroat corporate game to the MD; it is simply the world as it is. There is nothing to compare it to; it is medicine as it is seen everywhere. MDs will find the same familiar format anywhere they go.

The world of nonconventional healers is truly another world, one that is largely unknown and vaguely threatening to them. The only solace they have traditionally had is the knowledge that there was no meaningful competition from this other world of presumptuous providers with dubious training and unscientific theories. These "fringe practitioners" had no money, no hospitals or other institutions, no prestigious journals, no insurance coverage, and no widespread licensing or public support to mark them as "real" doctors.

We all know that has begun to change, and now, just as we find the marketplace (I hate to use that word) clamoring for what we have provided all these years, we find HMOs advertising acupuncture. Could you afford a full-page ad in the *New York Times*? I couldn't.

In this series of articles, I hope to point out to my colleagues what I see happening in the field of Oriental medicine, and natural medicine as a whole. Whether you call it alternative, complementary or CAM, we are all in the camera lens right now. I notice conventional medical providers beginning to push and shove to get into the group photograph, as it were. Have you noticed this?

A study published in *Meridians* (TAI Sophia Institute, Columbia, MD)¹ listed among the benefits of acupuncture that "84% of patients were seeing their MD less" and "70.1% of those who had been scheduled for surgery prior to acupuncture said they had avoided surgery." If you don't think statistics like these can rock the boat, then you probably don't have any idea of the significance of an ad for an HMO featuring acupuncture. Figures like these can scare the pants off a profession that is not making as much money as it used to, and is fighting managed care, malpractice suits, and a host of problems they did not have in the past. More than professional pride is hurt when a big chunk of a medical doctor's patients are seeing him less.

I meet people all the time who say, "Isn't it great that they're finally recognizing what you do?" My answer is, "No." They - the great **they** - are not really "recognizing" me as an equal but different professional. What they have recognized is the amount of money people are spending for what you and I do, and the amount of work we have done to build the market for these services. Without big money behind us, it has taken *decades* to gain the support of the public; we did it not with advertising, but with good results. The public slowly found out it had a friend in the natural doctor.

My belief is that the conventional doctor is poised to step in and pick the fruit off the tree we have tended for so long. I will tell you why in the coming segments of this series.

Reference

1. Health vision 2000. *Meridians* Vol. 3, No. 2.



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