



Mr. Andrew Alexander, Ombudsman  
The Washington Post  
1150 15th Street, NW  
Washington, DC 20071

March 30, 2009

Dear Mr. Alexander:

As the Chief Executive Officer of the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM), I am writing to inform you of a pertinent piece of data that was left out of the article entitled, *"Millions Embrace Acupuncture, Despite Thin Evidence"* and accompanying story *"Finding an Acupuncturist"* in your March 17, 2009 issue written by Ellen Edwards. The articles neglected to mention the largest population of certified acupuncturists in the nation, Diplomates of the NCCAOM.

While the articles discuss the need to seek out a licensed acupuncturist, it fails to mention the largest and most highly trained segment of acupuncturists, Licensed Acupuncturists, most of whom are NCCAOM certified practitioners. Both the District of Columbia and Virginia require that all acupuncture practitioners must first pass the NCCAOM examinations before they can apply for licensure in their state. Maryland also accepts the NCCAOM examinations as a requirement for practice. Since its inception in 1982, NCCAOM has issued more than 22,000 certificates in Acupuncture, Oriental Medicine, Chinese Herbology and Asian Bodywork Therapy. The NCCAOM, a national non-profit organization is constantly at work to build and strengthen ethical standards in acupuncture and Oriental medicine. NCCAOM certification examinations are currently required by 44 states and the District of Columbia.

NCCAOM's acupuncture certification program constitutes one of the most significant milestones in the history of acupuncture and Oriental medicine (AOM). In order to become a certified NCCAOM Diplomat, one must complete a rigorous testing process and must demonstrate completion of more than **2,000 hours** of education and clinical training. In order to retain the Diplomat status, one must be recertified every four years. On the other hand, the physicians with which the article referred readers to require as few as **200 hours** of training to garner other certifications. This includes the "1,000 Graduates" of the Helms Medical Institute that is referenced in the article.

It is important that those seeking a practitioner for acupuncture look for an NCCAOM-certified Diplomat in Acupuncture (Dipl. Ac. (NCCAOM)) whom they can be assured have extensively exceeded the educational requirements and testing requirements that would be needed by a medical doctor practicing acupuncture. NCCAOM's website, [www.nccaom.org](http://www.nccaom.org), provides a searchable database of certified practitioners of acupuncture and Oriental medicine throughout the U.S. and the world.



March 30, 2009  
Letter to Andrew Alexander  
Page Two

To provide you with some additional background, I have also attached a document, co-drafted by the NCCAOM and several other national acupuncture and Oriental medicine (AOM) organizations in July of 2008, which provides a brief definition and description of the AOM profession. I look forward to hearing from you regarding this letter and working with you regarding a follow-up article in *The Washington Post*. If I can answer any questions, or help you in any way with information related to this burgeoning field, please do not hesitate to contact me at [kwardcook@nccaom.org](mailto:kwardcook@nccaom.org) or via phone at (904) 674-2501.

Sincerely yours,

A handwritten signature in black ink that reads "Kory Ward-Cook". The signature is written in a cursive, flowing style.

Kory Ward-Cook, Ph.D. MT(ASCP), CAE  
Chief Executive Officer

cc: NCCAOM Board of Commissioners  
Deborah Lincoln, Dipl. Ac. (NCCAOM), L.Ac.,

Attachments:

1. Electronic copy of article, "*Millions Embrace Acupuncture, Despite Thin Evidence*" by Ellen Edwards
2. Electronic copy of article, "*Finding an Acupuncturist*" by Ellen Edwards
3. Acupuncturist: Profession Description

# The Washington Post

## Millions Embrace Acupuncture, Despite Thin Evidence

By Ellen Edwards  
Washington Post Staff Writer  
Tuesday, March 17, 2009; HE04

Kaiya Larson pressed a small, thin needle against the patient's skin.

A licensed acupuncture practitioner, Larson focused intently as she felt for the right spot -- *not here, not there* . . . then *ping*, she pushed the needle in and turned it a little to the right, as though she were turning up the volume on her car radio.

The patient, a 31-year-old woman hoping that acupuncture would increase her energy level and relieve her occasional stomach problems, said she felt a brief "grab." Then nothing. She lay on the exam table for 20 minutes more while that needle, and four others, remained in place.

Larson, demonstrating the procedure at the Tai Sophia Institute outside Columbia, had already taken the patient's pulses; in Chinese medicine, there are six of them, which measure not heartbeats but energy flow, and are taken at two levels of pressure on both wrists. Besides having a discussion about the patient's general health, she had also examined the woman's tongue, finding diagnostic clues in its color and texture.

The process bore little resemblance to a visit to a conventional American doctor. But it's becoming familiar to an increasing number of Americans. A study published in [December](#) by the National Center for Complementary and Alternative Medicine (NCCAM), a part of the National Institutes of Health, found that 3.1 million adults and 150,000 children used acupuncture in 2007, seeking relief from ailments including headache or back pain, insomnia and attention-deficit disorders. That was about 1 million more adults than in 2002, when the last NCCAM survey was done. "In the consciousness of the American public, acupuncture has become white bread," said Joseph M. Helms, a physician who trains medical doctors in acupuncture techniques.

The people who go regularly for treatment swear by it. Some wouldn't miss a week. Others scoff that it's complete hokum and that you would get just as much help from a nap.

The American Medical Association takes no position specifically on acupuncture; the AMA groups it with other alternative treatments, saying "there is little evidence to confirm the safety or efficacy of most alternative therapies." It says "well-designed, stringently controlled research" is needed to evaluate its efficacy.

In 2007, NCCAM spent about \$9.1 million on acupuncture research. While more is planned, Brent Bauer, an internist at the Mayo Clinic and director of its complementary and alternative medicine program, said the research is in its "toddlerhood."

"Some of the most interesting research on acupuncture is how it might impact brain functioning," said Richard Nahin, the acting director for research at NCCAM. He said magnetic resonance imaging

observations during acupuncture have shown specific areas of the brain that respond to the treatment. The field of pain relief is getting the most attention in these studies, but they hold promise in many areas, said Nahin.

Bauer also said he has seen remarkable results in pain management, adding, "I don't fully understand how it works."

In 2004, researchers at the Center for Integrative Medicine at the University of Maryland tested the effects of acupuncture on 570 people over 50 with osteoarthritis in the knee. The patients were split into three groups: The group that received education about their condition recorded a 22 percent improvement in function; those who received sham acupuncture, a placebo-like process using real needles but not on known acupuncture points, improved 31 percent' and those who were treated with true acupuncture recorded improvement of 40 percent.

The benefits of the actual acupuncture showed up over time, with most of those who got relief feeling it after 14 weeks of treatment.

Other preliminary research shows promise when acupuncture is used as part of treatment for infertility, obesity, post-traumatic stress syndrome, depression and pain relief. But many of those studies were small, and more work needs to be done for them to be validated.

However, other studies have found no difference between sham acupuncture and the real thing. An [analysis](#) of 13 studies of pain treatment with acupuncture, published online this month by the journal BMJ, concluded there was little difference in the effect of real, sham and no acupuncture.

Bauer said that patients are increasingly asking about incorporating acupuncture into their care and that doctors, especially younger ones, are more willing to give it a chance. "I would call it evolutionary," he said of physicians' attitudes. "Twenty years ago there was more antagonism and much more hard-core skepticism. Now there is a lot more of an open attitude."

Brian Berman, director of the University of Maryland center, came to acupuncture after feeling that something was missing in his practice of family medicine.

"I was well trained with acute problems such as an asthma attack, trauma, heart attack," he said. "But when it came to chronic pain, I didn't have all the answers. Eventually that led me to taking the acupuncture course in 1983, then further training in the U.K., and I incorporated it my practice."

When he first suggested it to his patients, he said, they were skeptical. They were looking for a "magic pill" that would cure them: "Sometimes we had tried the pill and they still had their problems, and I would ask, 'Would you consider acupuncture?' " Often, it worked.

Linda Lee, a gastroenterologist who is director of Johns Hopkins's new Integrative Medicine and Digestive Center, said it's very hard to find scientific support for acupuncture, but she sees anecdotal evidence.

"We have this double standard," she said of the medical profession. "We are completely comfortable using pharmacological therapies that have not been subjected to clinical trials for the purposes we use them, but we are super suspicious of alternative therapies that haven't been tested with randomized placebo trials. From a research point of view, I understand the criticism. But we

physicians are in the healing business, and we have to go beyond the pharmacological solutions to understand the whole person," she said. "Acupuncturists start with the whole person."

At the Hopkins center, acupuncture is used in conjunction with more-conventional medical treatment, said Lee.

"I have been very impressed by how much the acupuncturists pay attention to everything else going on in the body," said Lee, who is not trained in acupuncture. "I'm a specialist. I've been trained to hone in on one system."

Elise Feingold, 51, a human geneticist from Silver Spring, began trying acupuncture seven years ago for chronic back and knee pain. Her father had gotten some pain relief from it, and so she felt it might be beneficial.

Feingold says she reaped unexpected benefits: dramatic and rapid relief from hot flashes that had been waking her seven or eight times a night, as well as relief from 11 months of coccyx (tailbone) pain that her doctors had been unable to help.

"You see benefits over a period of time," said Feingold. "You're not always going to have that home run like [with] the hot flashes."

She said she has also found relief for less tangible and perhaps more emotionally based issues such as sleeplessness and stress, some of which she attributes to the time the practitioner spends talking with her. "There's a therapy aspect to this, too," she said. While she has no acute issue, she gets acupuncture about once a month for general health maintenance.

"I decided to leave my science brain aside," she said. "I felt it had helped other people, and it might help me. I don't know how it works, but it's got 4,000 years of Chinese medicine behind it."

# The Washington Post

## Finding an Acupuncturist

By Ellen Edwards  
Washington Post Staff Writer  
Tuesday, March 17, 2009; HE04E05

Acupuncture, the ancient Chinese practice of healing through the insertion of needles into specific points on the body, first came to the attention of mainstream America in 1971, after New York Times reporter James Reston wrote enthusiastically about receiving the treatment. Reston had been traveling with President Richard Nixon in China when he had an emergency appendectomy, and acupuncture successfully treated his postoperative pain.

Today, millions of Americans have tried acupuncture, but locating and selecting a practitioner can be difficult. There are several types of acupuncture based on different philosophies, and the language (eight principles, five elements, the need to balance yin and yang) can be confusing.

A primary rule is to get advice from friends or people you trust who have received the treatment. Ask questions such as: Is your practitioner willing to work as a partner with your medical doctor? Does he or she take time to listen to the reasons you are seeking help? Robert M. Duggan, president of the Tai Sophia Institute, says that a serious conversation between patient and practitioner, discussing general health and life concerns, is key to treating the whole patient, rather than just the illness.

You can also get advice from conventional medical doctors. In addition to doctors who cooperate with acupuncturists, some have been trained in the practice themselves. Most get their training at the Helms Medical Institute in Berkeley, Calif., whose courses are sponsored by the medical schools at Stanford University and the University of California at Los Angeles. To locate such doctors, go to <http://www.hmiacupuncture.com>. Click on "1000 grads" at the bottom of the page.

When you consider a practitioner, make certain of several things:

- Any needles used must be single-use and disposable.
- If herbs are prescribed, check all interactions with prescription drugs.
- Check with your insurance carrier in advance of treatment: Some cover acupuncture and others don't. Still others will cover it to treat only certain conditions.

Any acupuncture practitioner you consider should be licensed. Requirements vary by jurisdiction; check the following Web sites:

In the District: <http://hpla.doh.dc.gov/hpla/site>. Click on "Professional Licensing Boards," then "Acupuncture."

In Maryland: <http://www.dhmf.state.md.us/bacc>.

In Virginia: <http://www.dhp.state.va.us/medicine>. Click on "Advisory Boards."

For other information:

-- The National Association of Oriental Medicine: <http://www.nomaa.org>

-- The American Academy of Medical Acupuncture: <http://www.medicalacupuncture.org>

-- Tai Sophia Institute: <http://www.tai.edu>

-- **Ellen Edwards**



## Acupuncturists: Profession Description

### Profession Definition:

The practice of Acupuncture and Oriental Medicine (AOM) is an ancient and empirical system of medicine based on the concept of *Qi* (pronounced “chee”), which is usually translated as energy. Acupuncturists, also known as Oriental Medicine Practitioners assess a patient’s syndrome or pattern of disharmony by using a set of diagnostic skills that involve four areas, questioning, palpitation, visual inspection, and olfactory-auditory data collection. By discriminating the exact pattern of the body’s physiological response to pathogenic factors, an Acupuncturist determines the necessary treatment principle and strategy to prompt the patient back to functional harmony. This therapeutic approach is therefore based on a conceptual framework that is unlike, but complimentary to conventional modern medicine; the particular therapeutic intervention to redress the patient’s disharmony is chosen from among several traditional treatment methods suitable for that individual. These therapeutic interventions include acupuncture, electro-acupuncture, cupping, manual therapies such as acupressure, moxibustion, and exercises such as *tai chi* or *qi gong*, as well as Chinese herbal preparations and dietary therapy.

### Significant Points:

Job Prospects should be good. Acupuncture is one of the fastest growing forms of complementary and alternative (CAM) health care in the U.S. today. There is an increasing consumer demand for natural, non-prescription, non-surgical and preventive health care.

Professional Acupuncturists, who are also known as Oriental Medicine Practitioners or Doctors of Oriental Medicine, are authorized to practice in 43 states and the District of Columbia. The prevailing form of practice authorization for these practitioners is licensure, which requires completion of a 3-4 year Masters level education at an acupuncture college accredited by or in candidacy (pre-accreditation) status with the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM), and passing scores on the national certification and/or state licensure examinations of the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM).

### Nature of the Work:

The practice of Acupuncture and Oriental medicine traditionally includes five branches of practice - acupuncture, Chinese herbal therapy, Asian bodywork therapy (massage), nutritional and other lifestyle counseling, and specialized exercises to promote health. Acupuncture is the most familiar aspect of Oriental Medicine. However, most Acupuncturists practice a combination of the five branches (modalities) in the treatment of their patients.

Acupuncture is the stimulus of specific points on the body, by insertion of very fine, sterile, stainless steel needles, to elicit a predictable physiological response. The prompting stimulus may also be administered to the points using mild electrical stimulation (with or without needles), pressure techniques with the hands (acupressure) or the application of heat by various methods, such as moxibustion. Chinese herbal

formulas may be administered, in addition to, or in lieu of acupuncture in order to assist the restoration of homeostasis. Professional Acupuncturists must possess the knowledge and skills to choose the appropriate points to elicit the required physiological response, the skill to

locate the points correctly and safely and the ability to perform the specific needling techniques properly. The acupuncturist's skill at determining the appropriate points to treat is based upon his/her ability to accurately distinguish the presenting pattern, the knowledge of correct points to address that pattern and knowledge of the proper type of stimulus to each point, for each patient. This is the key distinction between a professional Acupuncturist (Oriental Medicine Practitioner) and other health care providers who employ acupuncture only as a modality, using points for their general effect without adjusting their choice of points to the specific patient. The effectiveness of treatment and the rarity of side effects with Oriental medicine are due in part to this individualized treatment administration. Acupuncture and Oriental medicine uses a diagnostic and treatment approach that is significantly different from existing Western medicine practice.

Comprehensive training in traditional differential diagnosis and proper treatment methods require that professional Acupuncturists complete 3 to 4 academic years of education at the Masters Degree level in an accredited acupuncture college approved by ACAOM, the only accrediting body recognized by the U.S. Department of Education as reliable authority for quality education and training in acupuncture and Oriental Medicine. The achievement of professional competencies in the field is verified by passing a rigorous national/state examination for licensure. This is in contrast to the use of acupuncture points as a modality by other professions, such as Chiropractors or Registered Nurses, or even medical doctors who typically receive 100-300 hours of abbreviated training.<sup>1</sup>

Professional Acupuncturists are also trained in standard medical history gathering, safety, and ethics and they recognize when to refer patients to other health care professionals or consult with other medical practitioners. Acupuncturists may advise patients about health practices in any of the traditional five branches of Oriental Medicine, such as nutrition and exercise; however, acupuncturists do not prescribe pharmaceutical drugs or perform surgery.

#### **Work Environment:**

Acupuncturists may be employed in a wide variety of healthcare workplaces such as community clinics, integrative medical practices, hospitals, disaster-relief teams and/or private practice. Acupuncturists work an average 35-40 hours per week. Independent practitioners may set their own hours and may work evenings/weekends to accommodate patients. Practitioners in private practice also have the business responsibilities of running a practice. In a large practice, acupuncturists may employ office managers/assistants to perform non-medical tasks.

Most Acupuncturists are members of state or national acupuncture professional associations and attend annual continuing education courses to qualify for re-licensure.

#### **Training, Other qualifications, and Advancement:**

##### **Licensure:**

There has been licensure of professional Acupuncturists as a separate and distinct profession since 1973, when the first practice acts were established in Maryland, Nevada and Oregon. Early standards for licensure were set on a state by state basis. Since 1982, national standards have existed verifying the minimum entry level knowledge and skills required for the

safe and effective practice of acupuncture. Attached is a map of the United States showing states that recognize and license the Profession of Acupuncture.

The NCCAOM provides a unified set of entry-level examinations and educational credential review. NCCAOM is accredited by the National Commission for Certifying Agencies (NCCA), of the National Organization for Competency Assurance (NOCA), which represents the highest voluntary certification standards in the United States. Currently of the 43 states that regulate Acupuncturists, 95% require a passing score on the NCCAOM examinations as a prerequisite to licensure. In order to qualify for NCCAOM Certification in Oriental Medicine/Acupuncture/Chinese Herbology/Asian Bodywork Therapy, applicants are required to meet extensive academic and practical standards.

### **Education:**

The current standard of education for eligibility to take the NCCAOM exams is graduation from a formal Acupuncture or Oriental Medicine program that has achieved accreditation or candidacy (pre-accreditation) status by the Accreditation Commission for Acupuncture & Oriental Medicine (ACAOM). ACAOM is the only agency recognized for this purpose by the United States Department of Education.

The minimum length of a professional acupuncture curriculum is at least 3 academic years (a minimum of 1905 hours), which consists of at least 705 hours in Oriental medical theory, diagnosis, and treatment techniques in acupuncture and related studies, 660 hours in clinical training, 450 hours in biomedical clinical sciences, and 90 hours in counseling, communication, ethics, and practice management. The minimum length of a professional Oriental medicine curriculum (which includes the study of Chinese herbology) is at least 4 academic years (minimum of 2625 hours, which is composed of at least 705 hours in Oriental medical theory, diagnosis and treatment techniques in acupuncture and related studies, 450 hours in didactic Oriental herbal studies, 870 hours in integrated acupuncture and herbal clinical training, 510 hours in biomedical clinical sciences, and 90 hours in counseling, communication, ethics, and practice management. There are no abbreviated programs which are accredited by ACAOM, nor are graduates of abbreviated programs allowed to sit for the NCCAOM examinations.

### **Other Qualifications:**

Acupuncturists should be able to handle responsibility, behave professionally and ethically and have a desire to understand and help others. Empathy and insightfulness are favorable qualities for this caregiver role. A high percentage of professional Acupuncturists are self-employed in solo or group practices. The skills associated with running a business will, therefore affect the individual's success and ultimately earnings.

Though considerable translation of Chinese texts and references has been done and many modern texts exist in the English language, historically the scientific ideas of acupuncture have been expressed in the Chinese language. There still exists a sizeable volume of references and documents which are yet to be translated. Entry-level Acupuncturists are not required to know the Chinese language; however a familiarity with pinyin and/or the ability to read medical Chinese would be advantageous for advanced study.

### **Advancement:**

Newly licensed professional Acupuncturists generally can set up a new practice, purchase an established one or enter into a partnership with an established practitioner or group. Solo

practitioners also work in a multi-disciplinary health care practice and some are employed in integrated health care facilities and hospitals.

Advanced post-graduate clinical doctoral degree programs are available for those who wish to deepen their understanding in clinical specialty areas such as: Oriental medicine for gynecology, geriatrics, orthopedics, pain management, or pediatrics. Experienced Acupuncturists also find opportunities to distinguish themselves in the translation of historic texts. Teaching and clinical supervision positions exist at the more than 60 accredited acupuncture programs. The Society for Acupuncture Research (SAR) and the doctoral programs of various acupuncture colleges provide opportunities for individuals interested in conducting research.

### **Employment:**

Most Acupuncturists practice in urban/suburban communities and only about 10% practice in rural locations. Opportunities to practice in under-served locations are numerous. Demand is generally affected by the ability of patients to pay either directly or through health insurance. The extent of insurance coverage varies greatly among insurance programs. In some states, workman's compensation covers the cost of acupuncture treatment for work related injuries. Recent workman's compensation regulations describe treatment guidelines for common conditions such as low back pain. Acupuncture is not currently covered by Medicare.

The areas of disaster relief work and substance abuse/detox treatment are exciting new venues for traditional acupuncture skills. The areas of disaster relief work, for example, through the work of Acupuncturists Without Borders, and substance abuse/detox treatment under the National Acupuncture Detoxification Association (NADA) protocol are exciting new venues for traditional acupuncture skills. The Community Acupuncture Network, which offers lower cost effective acupuncture care to under-privileged populations, is seeing significant growth.

### **Job Outlook:**

Employment of professional Acupuncturists is expected to increase faster than the average for all professions, especially for those individuals with collaborative and inter-disciplinary teamwork skills. Practice management skills are extremely important for self-employed practitioners, who remain the most prevalent business model.

According to the *Deloitte 2008 Survey of Health Care Consumers*, 20% of consumers report treating a health problem with an alternative approach to conventional medicine such as acupuncture, while 40% indicate that they are open to doing so in the future<sup>3</sup>.

Both the World Health Organization and a National Institutes of Health Consensus Statement have recognized acupuncture as effective in treating a wide variety of health conditions.

### **Earnings:**

According to the NCCAOM's 2008 Job Task Analysis of certified Acupuncture and Oriental Medicine Diplomates, the average income is \$40,000 to \$60,000 annually; however, the range

of income varies from \$21,000 to greater \$160,000 per year, depending upon the location and type of practice setting of the Acupuncturist or Oriental Medicine Practitioner<sup>3</sup>.

## **Related Practitioners:**

Practitioners of Chinese Herbology, Asian Bodywork Therapists.

## **References:**

1. Know Your Acupuncturist, Council of Colleges of Acupuncture and Oriental Medicine, [www.ccaom.org](http://www.ccaom.org).
2. NCCAOM 2008 Job Task Analysis findings, unpublished data.
3. Deloitte 2008 Survey of Health Care Consumers, Deloitte Center for Health Solutions, Washington DC, , 2008:1-22.

## **Sources of Additional Information:**

American Association of Acupuncture and Oriental Medicine (AAAOM), P.O. Box 162340, Sacramento, CA 95816. Internet: [www.aaaom.org](http://www.aaaom.org).

Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM), Maryland Trade Center #3, 7501 Greenway Center Drive, Suite 760, Greenbelt, MD, 20770. Internet: [www.acaom.org](http://www.acaom.org).

Council of Colleges for Acupuncture and Oriental Medicine (CCAOM), 3909 National Drive, Suite 125, Burtonsville, MD 20866. Internet: [www.ccaom.org](http://www.ccaom.org).

Federation of Acupuncture and Oriental Medicine Regulatory Agencies (FAOMRA)  
Penny Heisler, FAOMRA Treasurer, Maryland Board of Acupuncture  
4201 Patterson Avenue, Baltimore, MD 21215. Internet: [www.faomra.org](http://www.faomra.org).

National Acupuncture Foundation (NAF), P.O. Box 137  
Chaplin, CT 06235. Internet: [www.nationalacupuncturefoundation.org](http://www.nationalacupuncturefoundation.org)

National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM), 76 South Laura Street, Suite 1290, Jacksonville, FL 32202. Internet: [www.nccaom.org](http://www.nccaom.org).