

Testimony of Heather Gunn

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Senate Bill 103: The Patient's Access to Integrative Medicine Act of 2020

Due to the short notice of our early hearing, a few of the physicians who wanted to testify could not make it in person and are therefore submitting their testimony in writing.

To be considerate of your time, I would like to read only two or three sentences from two of these physicians since it is important that these points be heard.

Dr. Hope McIntyre, a physician that treats Lyme patients writes:

...according to the ILADS guidelines “[t]he lack of pharmaceutical interest and its concomitant funding does not encourage the innovative research that is essential to improving care for patients with Lyme disease.” When pharmaceutical interest is lacking, clinical practices often become the source of therapeutic innovation...

The US FDA states: “Valid new uses for drugs already on the market are often first discovered through serendipitous observations and therapeutic innovations [by physicians in the field], subsequently confirmed by well-planned and executed clinical investigations.”

Dr. Steve Saltzman, a Johns Hopkins trained physician writes:

“My testimony may be the most relevant that you will hear on this bill since I am the only physician I know in the State of Maryland willing to come forward to let the Senate know that I have actually declined to offer patients many evidence-based therapies simply because the treatments are not widely recognized within the accepted medical paradigm and could lead to medical board investigations by those that do not embrace nor understand alternative medicine.”

Finally, it is important that I read you this brief letter from a physician:

I am an integrative physician in Maryland who has been practicing for close to 20 years. I treat a variety of disease states and medical conditions with a mixture of complementary and conventional methods to the extent that I feel comfortable considering the current "climate" in Maryland.

I have always been hoping that I would be able to more fully help my patients recover from many different illnesses by legislation more favorable to integrative medicine. Due to the culture of misunderstanding between traditional and integrative medicine, I have always "held back" since I am afraid I may be improperly taken before the board. There are many integrative therapies that can aid patients that are not given in my office nor other integrative medical doctors' offices in the state of Maryland even though they are safer, more effective and less costly than traditional treatments for the same condition. These include integrative treatments for Lyme, chronic pain, and Alzheimer's...to name a few.

There are also disease states that functional medicine doctors have evidence based tests and answers for that conventional doctors do not know how to look for or treat. As a result, a lot of these patients are simply prescribed narcotics and other symptom-relief-only medications by traditional medicine to deal with the pain instead of trying to find the root cause of the disease process --- as an integrative medical doctor would. Therefore, if this bill was passed more patients would be able to find the root cause of their pain instead of simply being band-aided with a narcotic pain medication.

Integrative Medicine is a burgeoning field of medicine with board certification, professional organizations, fellowships and CME opportunities. Many of the therapies that integrative physicians offer are supported by substantial evidence and are as evidence-based as many conventional medicine protocols and treatments.

The passage of The Patient's Access to Integrative Medicine Act of 2020 would be tremendously helpful for the citizens of Maryland. There is no doubt that it will help patients get well and save lives. It could also allow a more productive conversation between the Medical Board, traditional physicians and integrative doctors and thus open up lines of communication for everyone's benefit.

While I submit this letter anonymously since I have concerns that even speaking up in favor of integrative medicine may result in a board inquiry, I am happy to discuss this confidentially with any interested Senator or Delegate via arrangements with the board of the Maryland Society of Integrative Medicine.

Sincerely,
Anonymous Maryland Integrative Medical Doctor

Testimony in Support of SB 103 before the Senate Education, Health &
Environmental Affairs Committee
Hope McIntyre, MD – Physician Treating Lyme Patients
January 21, 2020
Read by Hearth Gunn

As a physician who treats Lyme disease patients, I support Senate Bill 103. While I testified in person in 2018 on the previous bill, I am traveling today and cannot be with you and have asked that my testimony be read into the record. The diagnosis and treatment of Lyme Disease is one of the many important areas of medicine that would be positively impacted by passage of the Patient's Access to Integrative Healthcare Act of 2020.

Lyme disease is epidemic in the United States, and Maryland is one of the states most affected.

In a study done by Dr. John Aucott here in Maryland at Johns Hopkins in 2013, thirty-five percent of patients remained profoundly ill 6 months after standard treatment. The problem is even more significant because patients can also relapse years after initial treatment.

Per the ILADS (International Lyme and Associated Diseases Society) guidelines published in 2014 “antibiotic re-treatment will prove to be appropriate for the majority of patients who remain ill and thus it is inappropriate to constrain clinicians from exercising their clinical judgment.”

Also, according to the ILADS guidelines “[t]he lack of pharmaceutical interest and its concomitant funding does not encourage the innovative research that is essential to improving care for patients with Lyme disease.” When pharmaceutical interest is lacking, clinical practices often become the source of therapeutic innovation, preceding rather than following clinical trials.

The US FDA recognizes the important role that clinical innovation plays in patient care, stating: “Valid new uses for drugs already on the market are often first discovered through serendipitous observations and therapeutic innovations, subsequently confirmed by well-planned and executed clinical investigations.” In providing clinicians with therapeutic flexibility, the agency makes room for physicians to fashion patient-centered care, with treatment decisions being driven by the specific circumstances of an individual's illness. The benefits related to therapeutic flexibility are quite evident in orphan diseases, where an estimated 90% of all prescribed medications represent off-label use and if not for that practice, clinicians would often have no effective therapies to employ. In this respect, patient care of Lyme disease is like that of other research-orphaned diseases, relying heavily on innovative clinicians to develop treatments that improve health and reduce mortality.

Innovative therapies may employ unconventional doses of standard medications, novel combinations of currently accepted practices, new applications of standard innovations or may use accepted therapy or approved drugs for non-approved indications. Unlike research, the primary purpose of innovative therapy is to benefit the individual patient.”

Doctors in Maryland, with adequate informed consent, need to be able to employ innovative therapies for Lyme disease without fear of reprisal from the Maryland Board of Physicians. Our patients need help now. They cannot wait for more extensive research to be done 10 years from

now. We cannot keep trying the same thing and expect a different result. We have to try new therapies or new combinations of existing treatments to help these desperately ill patients.

In addition, the practice of Lyme disease doctors being punished by the board for proxy issues, such as medical record keeping, needs to be stopped. This has happened to several doctors in Maryland and it cannot continue. Patients in Maryland need access to treatment now!

Sincerely,

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Testimony in Strong Support FOR Senate Bill 103 The Patient's Access to Integrative Health Care Act

1. My name is Steven J. Saltzman, M.D., and I am a resident of Annapolis, Maryland.
2. I am a Johns Hopkins University-trained, Board-Certified anesthesiologist and an anti-aging specialist. I have practiced modern medicine (anesthesiology) in Maryland continuously since 1997. I have practiced integrative medicine that includes alternative therapies on and off for more than 15 years.
3. My testimony may be the most relevant that you will hear on this bill since I am the only physician I know in the State of Maryland willing to come forward to let the Senate know that I have actually declined to offer patients many evidence-based therapies simply because the treatments are not widely recognized within the accepted medical paradigm and could lead to medical board investigations by those that do not embrace nor understand alternative medicine.
4. These concerns/board investigations can happen even if patients are happy with their medical care. Anyone can make a medical board inquiry that can be problematic for a physician practicing outside of modern medicine's usual and customary practices.
5. I am about to publish a book that, among other things, references over 350 medical studies and current medical journal articles that showcase the power of many different complementary and alternative medical therapies. These therapies are proven effective for a wide variety of medical conditions and can also benefit those seeking longevity and enhanced athletic performance.
6. I do not feel like physicians and patients in Maryland have medical freedom to make their own health care decisions. This is because if physicians feel uncomfortable and hold back offering alternative care, as have I, then Maryland patients are not getting the treatments they want and/or the treatments that the physician believes could be most helpful. That a loss of freedom both ways.
7. I cannot be with you today, but I can be available to discuss this with any interested Senator in person on any Friday.

Thank you in advance for supporting Senate Bill 103

Steven J. Saltzman, M.D.

Letter from a Maryland Integrative Physician

January 13, 2020

Read by Heather Gunn

To Whom It May Concern,

I am an integrative physician in Maryland who has been practicing for close to 20 years. I treat a variety of disease states and medical conditions with a mixture of complementary and conventional methods to the extent that I feel comfortable considering the current "climate" in Maryland.

I have always been hoping that I would be able to more fully help my patients recover from many different illnesses by legislation more favorable to integrative medicine. Due to the culture of misunderstanding between traditional and integrative medicine, I have always "held back" since I am afraid I may be improperly taken before the board. There are many integrative therapies that can aid patients that are not given in my office nor other integrative medical doctors' offices in the state of Maryland even though they are safer, more effective and less costly than traditional treatments for the same condition. These include integrative treatments for Lyme, chronic pain, and Alzheimer's...to name a few.

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