



February 04, 2021

The Honorable Shane E. Pendergrass
Health and Government Operations Committee
House Office Building, room 241
Annapolis, MD 21401

RE: OPPOSE HB0219 Naturopathic Doctors - Formulary Council Membership, Formulary Content, and Scope of Practice

Chairwoman and Members of the Committee:

The Secular Coalition for Maryland is opposed to government facilitating, enabling, or promoting the practice of so-called alternative "medicine". There is no alternative or complementary chemistry, plumbing, nursing, aviation piloting, law, etc.. This is because such professional services operate on the same underlying principle. The one and only reliable standard for such professional services is best fit with the available empirical evidence.

Alternative medicine aims to achieve the healing effects of medicine, but lacks biological plausibility, lacks empirical support, is untestable, or has been proven ineffective. Complementary medicine (CM), complementary and alternative medicine (CAM), integrated medicine or integrative medicine (IM), and holistic medicine are among many rebrandings of the same phenomenon. Research into alternative therapies often fails to follow proper research protocols (such as placebo-controlled trials, blind experiments and calculation of prior probability). In contrast, experimental medicine employs scientific methods to test plausible therapies by way of responsible and ethical clinical trials, producing evidence of either effect or of no effect.

The recommendations that we have good reason to consider good for health - nutrition, exercise (for endurance, strength, balance, flexibility), daily sleep in darkness, some exposure to sunlight during the day, social interaction, mental stimulation, stress reduction, etc. - are part of established scientific medicine. Alternatives to evidence based medicine are, by definition, at least partially not based on widely accepted scientific principles of health, disease, and health care, yet they self-appropriate for themselves the "scientific", "evidence based", and "medicine"



labels. There is no flaw or weakness with current medical practice that is remediated or eliminated by alternatives to evidence based medicine.

Complementary medicine is based on prescientific or nonscientific mysticism; there is no clear standard of care to guide regulation; there is no clear standard of education for practitioners; and the available scientific evidence is most consistent with its effects being all nonspecific or placebo effects, an expected finding given the scientific implausibility of the practice. For example, Homeopathy is a discredited form of treatment. In 2017, the Federal Trade Commission (FTC) warned homeopathy marketers that they may be found to be illegally misleading consumers unless they state clearly on homeopathy product labels that “1) there is no scientific evidence that the product works; and 2) the product’s claims are based only on theories of homeopathy from the 1700s that are not accepted by most modern medical experts.”

Pseudoscientific medical treatments cause substantial harm to some patients. In some cases these treatments jeopardize patient health. But even when disproven treatments are merely ineffective, they waste valuable time that should be used to diagnose and treat a patient’s ailments before they worsen. Research published in peer-reviewed medical journals has shown that even when “complementary” medical treatments are marketed for use in conjunction with science-based medicine, some consumers use these treatments as wholesale substitutes for science-based medicine, tragically leading to significantly higher mortality rates from treatable illnesses, most notably from various forms of cancer. In addition to the issue of state licensure conferring respectability to pseudoscience, a major problem with licensing a specialty that is not based in science is that it will be members of that specialty who form a board to oversee the practitioners of that specialty, which means that there will be no scientific standards regulating that specialty. Neither will be based in science, and, contrary to the intent of the bill, the public will not be protected from bad actors any more than they are by the present system. In addition, the reason practitioners of unconventional specialties so crave state licensure is that it is the first step to requiring insurers to pay for their services. This results in a diversion and waste of precious health care resources to pay for ineffective therapies.

There are many individuals and institutions profiting from promoting a hodgepodge of treatments that are likely to be of no benefit to anyone receiving those treatments. Alternative medicine ruses, such as homeopathy, craniosacral therapy, osteopathic manipulation as a treatment for systemic disease, magnetic therapy, orthomolecular therapy, etc., have been repeatedly disproven by clinical trials. These treatments originated, and continue to be promoted, without first having been demonstrated to be effective. Government should be discouraging and cautioning against relying on alternative medicine.



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