

February 11, 2022

Dear Senators:

I'm reaching out to you today regarding Senate Bill 711 (House Bill 1016), a bill in which athletic trainers are trying to include dry needling in their scope. I am not sure if you are aware of the issues facing properly licensed acupuncturists fighting for our profession and the safety of our communities, but I would like the opportunity to share my concerns regarding other fields performing acupuncture without proper training and without a MD Acupuncture license when trying to hide behind "dry needle" terminology.

It is more than unfortunate that other professionals such as Physical Therapists and Chiropractors have denigrated the training and scope of Traditional Chinese Medicinal Practitioners and particularly Acupuncturists by not acknowledging that Dry Needling is acupuncture - just without needing a license to practice. In NY where I originally studied, acupuncturists were required to study for 4,000 hours in order to be able to sit for our boards and get licensed. We were trained in both Traditional Chinese Medicine and also had to take a great many Western Medical classes to make sure that we can provide our patients with the proper care in the safest way possible. It is appalling, not to mention a safety risk to the community, to allow other professions to pretend that they are not just finding ways to use acupuncture without proper training. To even consider letting athletic trainers perform acupuncture ("dry needling") is not just an insult to the licensing process that Acupuncturists in the state of MD pay for and have to abide by, but it presents a true safety risk to the community.

According to the former Chair of the Acupuncture Board, Tom Ingegno in his opposition to Senate Bill 711: "The biggest problem here is that dry needling was coined by a medical doctor, Janet Travelle, in 1983. She used syringes to break up adhesions in the soft tissue and even stated that acupuncture needles were too small to perform this task. Dry needling practitioners have appropriated the acupuncture needles and perform needling distal acupuncture points and electrical stimulation. Neither of these techniques come from the dry needling texts and are a straight appropriation of acupuncture. Furthermore, neither PTs nor chiropractors teach these techniques in the short classes. Both fields' lobby groups have spread misinformation on acupuncture to discredit our profession. Statements such as "acupuncture does not go as deep," "dry needling has more research," and perhaps the most egregious, "we don't use any of that Chinese stuff". The first two statements are bald-faced lies. Dry needling practitioners are using acupuncture needles that are made longer for specific acupuncture techniques, and acupuncture has over 30,000 studies in English alone, including over 8,000 RCTs. Other fields realize that acupuncture outperforms them and are weaseling their way into our field. The last statement about not using Chinese theory is an insult to my field and the Asian community.

For more than three years, my field has been waiting for regulations designed with consideration to patient safety and acupuncturists' training. They were met with mild

objections from other lobby groups, and our regulations have been shelved. It feels as though the state does not understand how in-depth our training and knowledge base is, especially since our doctorate requires more classroom and practical hours than chiropractors, physical therapists, and other allied health professions. It feels as though there is both ignorance and arrogance by other professions and a derogatory sentiment toward our field history and culture and countries of origin. “

I totally agree with Dr. Ingegno. I strongly oppose Senate Bill 711 (House Bill 1016), and I'm asking for your support to keep patients safe. I would love the opportunity to speak to you about this matter and any issues that involve patient safety. Please feel free to contact me if you have any questions regarding this matter. Thank you for your time.

Sincerely,

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