

Response to WEAMA name change:
(May have future edits)

I recognize that individuals within the Acupuncture Society of America (ASA) have been contacted, but what other groups and individuals have been contacted, what other research has been engaged in locally and nationally to support the need to change our name at this time? Do we really need to use our political capital in this way at this time? The question of what to call ourselves is being struggled with nationally and is far from resolution.

How have we gathered feedback from Washington State East Asian Medicine Practitioners, school administrators, scholars and others regarding a potential name change ?

What costs will be incurred if we change the name of our professional association (legal costs, etc.)? Do we really need to incur those costs at this time?

Is there another way to address the petition from the Chinese professional community? (I have raised the concept of employing a restorative justice model as a starting point to heal the historical trauma associated with the term "East Asian Medicine".)

Our name change to EAMP a decade ago was not the reason that acupuncture has been classified as a technique rather than a system of medicine.

Changing our name to "acupuncture medicine" or some other term focusing on "acupuncture"
(1) will not alter that reality; and (2) is an inaccurate term.

East Asia refers to a geographic and geopolitical region encompassing Peoples Republic of China, Hong Kong, Japan, Macau, Mongolia, North Korea, South Korea, and Taiwan.

We need to educate the public, legislators and everyone else about the diversity of our tradition and all that our medical heritage encompasses. Acupuncture is a very important part of our medical system but is not the whole system of medicine.

"Acupuncture" has indeed become "branded". We need to do more to brand our larger medicine. Re the proposed RCW update (note: typo re China medicine), it is simply not accurate to state "acupuncture is a family of procedures ...". EAM is a "family of procedures" that includes acupuncture.

If we want to be fully integrated into the dominant medical system (and not everyone does), we have to consider playing the game as aggressively as Physical Therapists.

Physical therapists are marketing themselves furiously as "*providing services that help restore function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities in patients with injury or disease. They restore, maintain and promote overall fitness and health.... working to promote overall wellness and boost...quality of life.*" PTs are aggressively expanding a wide variety of CPT codes under their scope of practice (ex. trigger point dry needling, and cupping). PTs are licensed as "physical therapists" but are steadily planning to do much beyond conventional "physical" therapy.

Even without marketing, our medicine has proven to be extremely popular with the public at large, and continues to grow in popularity.

Why? Because conventional medicine is based on a mechanistic “scientific” model that focuses on treating disease, it is not a holistic model that focuses on general balance and well being that addresses body, mind and spirit. (This is why Physical Therapists are pushing so hard to RE-brand themselves as holistic!)

People are also seeking a relationship with their healers which is impossible in the current medical model (doctors on average spending 9 to 15 minutes per patient), and people are being harmed by the side effects and interactions of pharmaceutical drugs.

- In 2016, there were more than 63,600 drug overdose deaths in the United States, more than three times the rate in 1999.
- Medical errors are the third-leading cause of death after heart disease and cancer.

Our conventional medical system is rapidly breaking down along with failing social systems. Our medicine has much to offer although I fear that as we become more embedded in the insurance and governmental bureaucracies, we will see similar levels of burnout in our profession similar to physicians who are apparently retiring early and/or leaving the field of allopathic medicine.

So, how **can** we market ourselves?

We can imitate a lot of what the Physical Therapists are doing online and elsewhere, getting information out to the lay public and to our profession.

We need to emphasize that our medicine is nature based, a living system of medicine, which has evolved over time to adapt to environments and cultures.

We can also launch unique marketing campaigns, for example:

****ACUPUNCTURE & EAST ASIAN MEDICINE ~ THE ORIGINAL INTEGRATIVE & FUNCTIONAL MEDICINE****

[Note: *Ayurvedic Medicine could legitimately complain about this classification ! ...*]

We should inform the public that leading conventional health care centers such as the Veterans Administration, Mayo Clinic, Johns Hopkins, Cleveland Hospital and others are offering acupuncture and Chinese herbs as part of their treatment options, i.e. we are becoming integrated into the dominant health care system (even without a “name change”!).

I understand the argument that we have become branded as “acupuncturists”, an unfortunate historical mistake. The correct translation of *Zhen Jiu* is needle therapy & moxa, not acupuncture. The Classic *Ling Shu* Chapter One describes the nine ancient needles, and clearly several of those “needles” are not meant for “puncturing”. Nonetheless, that is the term that has come to the Western world and we live with the consequences. (Too bad we didn’t become NEATs, i.e. Needles & East Asian Therapists!)

We not only need to focus on marketing but encourage our profession and schools to become engaged in supporting quality East Asian medical **research**. It is fine to conduct research on the biochemical mechanisms of needle therapy such as stimulating endorphin production and influencing adenosine molecules, etc. but also need to support biofield research, as well as research on cupping, moxibustion, etc.

Let’s bring cutting edge researchers to speak to the larger professional community, speakers such as Helene Langevin, Neil Theise, Gerald Pollack, Richard Hammerschlag, Stephen Birch and others, and let’s help stimulate funding for cutting edge research.

Traditional East Asian Medicine (TEAM) is a comprehensive, integrated, living and evolving system of medicine. It is rooted in basic philosophical concepts, proven by centuries of observation and practice, and subject to continual re-evaluation by modern scientific analysis and methodology. We should stand proud in what our traditional medicine can offer.

Brenda Loew, M.Ac., EAMP/L.Ac, Dipl. Ac.