

The Bright Future of Acupuncture

William Morris, DAOM, PhD, LAc

Chaos theory suggests that we cannot predict the future, yet it is human nature to try. People have looked for predictive signs since the dawn of time. Here, we consider the present as a seed for the future in terms of trends, education, market demands, social systems and policy.

It will be necessary for us to brand ourselves, to highlight and identify who we are, what we do, giving the public a clear message. At the moment, the public recognizes, best understands, and has the most affinity for the word *acupuncture*. We've been working hard to create that acupuncture brand. Some recent examples include star San Francisco Giants' baseball pitcher Randy Johnson using acupuncture to keep him in the game, Childrens Hospital Los Angeles treating pediatric patients with acupuncture, and increased use of acupuncture in the military for wounded soldiers. There was even an example on the hit TV show "So You Think You Can Dance." [Hayley Cloud](#), a 19-year-old contestant from Saint Louis, talked on national TV about acupuncture for her disc injury, which allowed her to perform. She made it as far as the Las Vegas auditions. Haley's story is not the only one where the media is creating a top position in the public's awareness for acupuncture. Watch for more.

So with all this increased awareness, what are the trends we might be seeing for the future of AOM? Here's what we should be looking for:

Research. Evidence-based medicine (EBM) looms on the horizon in a way that is both promising and concerning. The nuanced practices of Chinese medicine must be accounted for, and we may have to value a different kind of knowledge pyramid than the current EBM model which places controlled knowledge at the top. Changing this EBM emphasis makes it possible for lesser trained technicians to manage front line medical care. The center of power for the development of EBM will change as global financial power centers change. China is focused upon creating research products that are respectable in the West. Within 10 years, we will likely see research from China that competes with the U.S. stronghold as the bastion of pure and good science.

The EBM pyramid may topple as the need for richer and deeper knowledge about patient experience and total cost of care become more important than controlled knowledge in order to achieve certainty about a given procedure. Save the corporations and the government money with acupuncture. There will be an increase of research and methods that mix quantitative and qualitative methods. This will bring the sea change.

Lower costs could drive growth. Acupuncture fits with medical views of procedures and the treatment of disease. In hospital settings run by actuarial analyses, acupuncture is a great solution. It can be measured in terms of outcomes and quality of life. This is very different than wellness models, which can be difficult to assess and more difficult to monetize. While acupuncture may lower cost of care by shortening hospital stays after surgery, the system of reimbursement will have to change. At this point, hospitals need patients with good insurance coverage to stay as long as is medically necessary, which usually increases profit. If the patient is on Medicare, the shorter hospital stay brings more profit. Acupuncture only becomes economically viable if the shortened

hospital stay improves profit for all involved.

Evolving business models. The advent of community acupuncture is here to stay. It allows for flexibility of price that meets the needs of various communities. We will likely see more and more support for acupuncture in the form of government-supported programs because it will save money.

In the corporate world, companies such as Whole Foods, Apple and, yes, Costco will also realize the competitive advantages of acupuncture for occupational medicine. Participating acupuncturists must adapt appropriate physical assessment, outcomes measures and report-writing to the culture of occupational medicine. Liver *qi* stagnation and the five elements, while important as an interdisciplinary model of thought, will not work in that environment. We must give up the idea that others will accept our nomenclature. It is ours and we need it, but they don't. We must therefore communicate in a way that our listeners can hear.

Education. The debate about specialty boards will continue. We will continue to see specialty boards proliferate. People will develop higher knowledge and skill sets. While some claim that Chinese medicine is holistic and there should be no specialty, this is not true in China. They have specialties such as external medicine, internal medicine, *Shang Han Za Bing Lun* medicine, ophthalmology, women's and men's health, acupuncture, herbal medicine, pharmacy, neurology orthopedics and *tui na*. Just as whole biological systems such as a cell have functions, so do the parts. Not all parts are interchangeable. Specialization and generalization are both a part of life. Most of the people who argued against specialties in terms of selecting patient populations, branding and certification, have certification and branding in other areas.

The first professional doctorate is driven in part by a field that is bloated; roughly twice that of the standard master's-degree education. Current graduates should be receiving doctoral titles, and practitioners in the field should have an easy upgrade path just for surviving in the marketplace. The net result is that in 10 to 20 years, acupuncturists will enter the field with doctoral titles, just like other allied health professions from pharmacists to physical therapists. There will be a first professional doctorate for the field and a common identity across the subspecialties and world views in practice. There will be a single common way this profession identifies itself.

The future for acupuncture is bright. Acupuncture provides an economic solution for medical care. Legislators are finding political advantage to affiliating with acupuncture. The future for the acupuncture profession depends on its communities of interest. The professional association needs more participation. It is no longer "what is my professional association doing for me?" We have greater ethical and moral obligations to humanity in terms of sustaining this discipline as a community of knowledge. It really is about what each and every one of us does in support of the profession that we know and love.

JANUARY 2010