

Are We Forgetting a Foundational Concept of Chinese Medicine During This COVID-19 Crisis?

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"Can you believe everyone is out of *Yu Ping Feng San*? What am I supposed to give people?" a colleague of mine exclaimed over a Zoom call, a platform I've gotten all too familiar with the past few weeks. I thoughtfully took a pause, wondering if my first instinct was too obvious. "Well ... there are other options for prevention of illness, right?"

Telemedicine was on the rise before *social distancing* became a household term, yet our industry now has an opportunity to be a major player in this new frontier. Guidelines have become more flexible in many states due to the abrupt need for more widespread use of telemedicine, but there are still some things we all need to be aware of:

- Telemedicine needs to be initiated by the patient
- Acupuncturists, although called acupuncturists, can do more than just needle. Check your scope of practice.

What does "Telemedicine needs to be initiated by the patient" mean? When your patient fills out your HIPAA privacy notice and states methods by which they may be contacted, e.g., email, text, phone, those same rules apply to how you reach out to your patients to bring up any information regarding offering telemedicine services. If your patient asked to be contacted via email only, you need to reach out to them via email to review your value proposition: meaning to explain how you still have the ability to help them even if you are not physically needling patients in your practice.

But what am I supposed to say to them? I am an acupuncturist and I usually just do needles, but I've closed my physical practice temporarily. How many of us actually spend the majority of our time needling during a patient visit? I personally end up spending plenty of time with a patient reviewing bloodwork or supplements, prescribing herbs and giving nutritional advice, as well as simply checking in and seeing how they are doing. Only a couple minutes of my time involves actual needling, yet it's so easy to fall into the trap of thinking, "Oh no, practices are closing down and I can't needle. What can I do?"

A professor once told me, "The treatment starts as soon as the patient walks in your office." In the world we're living in right now, that treatment may indeed start with that first phone call, email, etc., to check in on them, even if they cannot physically come to your practice. There are many things we can offer as practitioners beyond needling.

A few weeks ago, I combed through all my favorite vendor websites to fact check if panic buying was in full effect. I confirmed yes: all the main distributors were out of your typical patents like *Yu Ping Feng San*, *Yin Qiao* and *Gan Mao Ling*. Essentially every formula we learned in our first formulas class on how to treat acute colds and flu was out of stock. The same hoarding of toilet paper and paper towels was happening in our own backyard ... with herbs! (Note: This may no longer be the case; check with your vendors.)

Besides the fact that many practices are closed and are likely not even using these abruptly ordered formulas to treat patients right now, I find something more bothersome than hording at its most basic level.

Herbs are not a one-size-fits-all, blanket approach, and we seem to be forgetting this at the most critical time. *Yu Ping Feng San* is not the only formula that will help someone's immune system. (I'm not picking on Jade Windscreen, because it's a great formula, but does that mean it's the *best* formula for everyone?) Did you get into this medicine to get simply "good" results for your patients? Or did you have a belief that you could do more than just "good" for people? Did we not all at one point or another marvel at the beauty of the personalized approach Eastern medicine offers?

At a fundamental level, isn't any dysfunction (like a poorly functioning immune system) caused by internal disharmony? Did we not learn to first diagnose and then implement a treatment plan for patients based on a pattern? An underlying deficiency or excess? An imbalance of yin and yang? Isn't low immune function simply a symptom and not a diagnosis when we look at it from a Chinese medical perspective? Seems as though we are missing a fundamental driving concept right now, and at the most critical time.

If we are focused on the prevention of disease, as a superior doctor is quoted to be focused on, should we not be doing more than recommending a handful of formulas when a customized approach based on our years of education and experience could offer so much more? Are there not countless herb combinations to address patterns which, left unattended to, could result in pathogens attacking the lungs? And does this not look different for different patients?

We have a unique opportunity and obligation to bring more value to others by educating on the highly effective means by which we can address some of the prominent issues that have come to the forefront: optimizing immune function, improving sleep, and offsetting the damage stress and anxiety are causing to patients' bodies at this time.

There will not be another opportunity as unique as this to demonstrate the power we bring to the table in prevention of disease and optimization of health. It is our time as practitioners to show the strength of our medicine. People are seeking answers and are desperate for solutions to problems we can absolutely address.

We're well-educated, creative, thoughtful and caring practitioners at a time when the world needs us. Let's allow ourselves to be innovative and remember why we got into this medicine. We have all at some point been amazed by the power of this truly customized approach of our medicine. Let us not forget the power of that approach at a time when it's most critically needed.

MAY 2020