

Acupuncture's Profile Enhanced in 2017

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As the opioid epidemic reached a crisis point in 2017, a number of national institutions issued various guidelines, recommendations, and mandates in response. A number of these guidelines cited acupuncture as a valid alternative treatment modality for chronic pain. Following is a brief summary of the most notable institutional responses which highlighted acupuncture.

In February 2017, the American College of Physicians published *Noninvasive Treatments for Acute, Subacute, and Chronic Low Back Pain: A Clinical Practice Guideline from the American College of Physicians*. The *Guideline* placed acupuncture on the first line of treatment for acute, subacute and chronic back pain.

With this paper, the American College of Physicians inaugurated a profound shift in treatment guidelines for those in pain. They recommended that *non-pharmaceutical* measures be sought as the first line of treatment for chronic low back pain. Acupuncture, heat wraps, massage and spinal manipulation were all named as front-line treatments for pain during the first three months. For chronic low-back pain lasting more than three months, acupuncture, tai chi, yoga, stretching and strength-training, as well as mindfulness training were specifically recommended. The College of Physicians guidelines also moved opioid pain medications to last-resort status.

May 2017, the Food and Drug Administration proposed an "Education Blueprint for Health Care Providers Involved in the Management or Support of Patients with Pain". This blueprint referenced acupuncture, chiropractic care, physical therapy, occupational therapy, surgery and psychological interventions as potential non-pharmaceutical approaches to the management of chronic pain; and went so far as to suggest that western medical doctors become educated on the use of acupuncture for pain.

The Joint Commission (TJC), the largest accrediting agency responsible for overseeing health care facilities, announced a revision of hospital performance measures for pain management in June, 2017, effective January 1, 2018. Their recommendations included a requirement to provide non-pharmacologic treatment

modalities for pain. Modalities suggested include acupuncture, manipulation, and massage therapy. The implementation of this new requirement is supposed to allow for greater options for those in pain, as well as reducing the risk of opioid addiction in patients. This requirement will also facilitate the inclusion of integrative care practitioners in medical settings where collaborative care may best serve the patient.

In July 2017, the National Academies of Science, Engineering and Medicine also recommended non-pharmacological interventions for the management of chronic pain, including acupuncture, physical therapy and exercise, cognitive behavioral therapy, and mindfulness meditation. The National Academies' 390-plus page report and recommendations reflect a 180-degree turnaround from past approaches to pain management. Among other things, they suggest that the National Institutes of Health, the Substance Abuse and Mental Health Services Administration, and the U.S. Department of Veterans Affairs invest in research focused on illuminating the factors involved in pain response and opioid use disorder (OUD).

In September 2017, the National Association of Attorneys General (NAAG) wrote to America's Health Insurance Plans (AHIP), requesting its 1300 members to encourage healthcare providers to choose alternatives to prescribing opioids. "When patients seek treatment for any of the myriad conditions that cause chronic pain, doctors should be encouraged to explore and prescribe effective non-opioid alternatives, ranging from non-opioid medications such as nonsteroidal anti-inflammatory drugs (NSAIDs) to physical therapy, acupuncture, massage, and chiropractic care". Thirty-seven Attorneys General signed the letter.

Regulating authorities are finally admitting the debilitating and deadly hazards of widespread opioid prescription. Interventions such as acupuncture, exercise and contemplative and meditative techniques are all now being considered as potential solutions in preference to opioid medications for chronic pain.