



# **Medical Board of Australia: Consultation Paper on a Registration Standard for Endorsement for Acupuncture**

Submission by the  
Australian Osteopathic Association  
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## **This submission**

The Australian Osteopathic Association (AOA) appreciates this opportunity to comment on the proposed Registration Standard for the Acupuncture Endorsement (as applied to medical practitioners) per Section 97 Health Practitioner Regulation National Law Act (2009) (the Act).

## **General Comments on the Registration Standard for the Endorsement for Acupuncture**

The AOA is in broad support of the Medical Board of Australia's initiative to develop a registration standard for its registrants for the endorsement of acupuncture.

We are particularly pleased that a pragmatic approach is being taken with respect to 'grandfathering' practitioners that are currently competently practising acupuncture.

Drawing on the expertise of the existing community of medical practitioners already practising acupuncture in the form of the Joint Consultative Committee on Medical Acupuncture (JCCMA) is sensible. We would hope that this approach will be taken by the other national boards as they make arrangements for the acupuncture endorsements.

## **Definition of Acupuncture and Code of Practice**

We note that no definition of acupuncture is included in the registration standard for the endorsement of acupuncture. We feel that the proposal would be strengthened if a definition of acupuncture were developed. From the perspective of patient health and safety we think it helpful for acupuncture to be defined.

In the recent AHPRA consultation to develop a common accreditation standard for the endorsement of acupuncture across the dental, chiropractic, medical, osteopathy, physiotherapy and podiatry professions, the AOA supported the definition of acupuncture in the proposal that is used by the Osteopathic Council of New Zealand (OCNZ), the New Zealand regulator.

*'Acupuncture means the insertion of a solid needle into any part of the human body for disease prevention or therapy. Techniques in which any substance is injected through a hollow needle are not considered to be acupuncture, nor are treatments that do not include piercing the skin.'* (OCNZ, 2009)

The OCNZ definition of acupuncture (White, 2009) and code of practice are based on the British Medical Acupuncture Society guidelines (BMAS, 2009). We feel that developing similar guidelines for practice in the Australian

context, in conjunction with the JCCMA, would strengthen the proposal further and could potentially be used as a template by other professions.

Whilst we acknowledge that there is diversity in the principles of point selection used in practice, we feel that defining acupuncture from the perspective of technique (i.e. skin penetration with a solid needle, such as an acupuncture needle) has merit from a risk management perspective and it is meaningful to patients. Regardless of point selection and/or theory, most patients will assume that treatment via the inserting of a needle is acupuncture, despite the various descriptors used across health professions. The primary purpose of the Act is protecting the health and safety of the public.

Acupuncture related techniques where there is no skin penetration such as acupressure or 'laser' acupuncture carry none of the attendant risks of skin penetration. If acupuncture is not defined other aspects of Chinese Medicine such as traditional remedies prepared from herbs or animal body parts may by default become associated with the endorsement.

By developing appropriately framed guidelines it would reinforce that the registration standard for the acupuncture endorsement is for acupuncture as a modality practiced within the context's of one's profession, an adjunct to medical practice rather than a parallel profession (Chinese Medicine), which has an entirely different professional identity and approach to knowledge.

Having explicit guidelines for practice will also help ensure that the future development of accreditation standards to support the registration standard are related to best practice as determined by a community of informed clinicians and will prepare graduates for competent practice.

## **References**

BMAS. (2009). British Medical Acupuncture Society: Code of Practice & Complaints Procedure. *Version 9 - December 2009*. Retrieved from <http://www.medical-acupuncture.co.uk/Default.aspx?tabid=89>

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White, A. R. (2009). Western Medical Acupuncture: A definition. *Acupuncture in Medicine*; 27: 33–35.