

SENATE HUMAN SERVICES COMMITTEE
FEBRUARY 1, 2021

TESTIMONY OF
NORTH DAKOTA BOARD OF MEDICINE
SENATE BILL NO. 2274

Chair Lee, members of the Committee. I am Dr. Michael Quast, appearing on behalf of the North Dakota Board of Medicine, in opposition of SB 2274.

The Board's primary concern with the bill is naturopaths do not possess the requisite education, knowledge, and experience to safely prescribe, dispense, and administer drugs, especially controlled substances and pain medications.

It is the mission of the North Dakota Board of Medicine to protect the health, safety, and welfare of the public – the patients and people of North Dakota. In reviewing the curriculum, a naturopath's education and training are clearly inadequate to allow them to prescribe the 4,000 pharmaceutical medications to the people of North Dakota. It is not safe, nor does it have a proven track record. In reviewing other states, I did not find a medical board in favor of allowing naturopaths to prescribe schedule II-V drugs. Very few states allow naturopaths to prescribe medications at all and most are looking for oversight by a supervising medical physician. In fact, this bill allows for more prescribing rights than even Oregon which appears to have the most liberal laws applying to naturopath's prescribing rights. This bill, as written, would allow naturopaths to prescribe opioids, fentanyl, morphine, dilaudid, benzodiazepines, chemotherapy, methylphenidate, seizure medications, ketamine, and diabetic medications. This is opposite of their training, which focuses not on medications, but on ways to avoid pharmaceutical medications.

I have a unique perspective. I am an interventional pain physician and anesthesiologist. As we all know, the opioid crisis has hit everywhere. It reflects the importance of correctly prescribing, dispensing, and administering drugs and is an area in which there is a special need for public protection. Too many opioids continue to be dispensed. Today, I spend much of my time trying to discontinue or reduce opioid medications to the lowest possible, safe and effective level. In my experience, naturopaths and their natural methods – foods, therapies, and nondrug approaches – can be helpful in reducing some individual's dependence on opioids and I welcome that perspective and goal as these are not things generally taught in a physician's education. These two practices do well to compliment each other – not to supersede beyond the scope of education and training. In the next few pages, you will see a side-by-side comparison of the difference in education and practice of naturopaths and physicians.

I have also trained in a complementary and alternative medicine program while I was in a Pain Management Fellowship at Harvard. I have a degree in Acupuncture from Harvard. The acupuncture training did not give me the skill set to be able to place my interventional needles in the spine and I needed the training that my Pain Management Fellowship Program provided me. Likewise, a few pharmaceutical courses cannot adequately train a naturopath to prescribe, dispense, and administer drugs.

The Board believes the risk of public health and safety would increase with this bill and therefore urges a do not pass. Thank you for your time and I am happy to answer any questions you may have.

Naturopath¹

License

22 states register or license

Schools

7 schools of naturopathic mostly located in the Pacific Northwest.

Patient Safety

developing regulatory boards and regulations currently
health quality assurance programs new and poorly established

Education

4 year curriculum

courses focus on disease prevention, herbal and botanical medications, homeopathic medications, non-drug approaches, food as a medicine and natural treatments. The coursework doesn't focus on pharmaceutical medications but instead focuses on natural ways, herbs, and non-drug approaches to treat the patient. No courses in applying pharmaceutical based medications in disease states.

Residency Training

None

Fellowship Training

None

Medication Handbook

Utilize the PDR for supplements and the PDR for herbal medicines

Summary

Little to no education or experience with schedule II-V medications.

Extensive knowledge with herbal, botanical, homeopathic medications.

The volume of information for 4000 medications is just too great to be able to acquire without dedicated education and years of training.

¹ Information obtained from the American Association of Naturopathic Physicians and the Institute for Natural Medicine.

Allopathic/Osteopathic Medical Physicians

License

50 states register or license

Schools

191 MD/DO allopathic/osteopathic medical schools

Patient Safety

Extensive continuing educational courses and peer review hospital credentialing. Well-established quality assurance programs and regulations developed over years to provide for patient safety.

Education

4 years

Comprehensive courses on pharmacology with respect to pharmaceutical based medications and their application in disease states. Scheduled drug classes are studied and memorized individually and within categories for the 4000 PDR listed medications including antibiotics, heart rhythm medications, seizure medications, chemotherapy, immune function modulators, diabetic medications, and addictive medications including benzodiazepines and opioids which are a problem in the U.S.

Residency Training

3-7 years prescribing and utilizing schedule II-V medications as well as observing for drug-to-drug interaction

Fellowship Training

1-5 years prescribing and utilizing schedule II-V medications as well as observing for drug-to-drug interaction

Medication Handbook

Utilize the PDR (pharmaceutical medications) schedules II-V.

Summary

Approximately 10 years of training with school and residency working daily with the schedule II-V medications.

Little to no education on naturopathic methods, herbs, botanicals or homeopathic medications.