



ANF's Input to HHS' "**Draft Report on Pain Management Best Practices: Updates, Gaps, Inconsistencies, and Recommendations**" HHS-OS-2018-0027

April 1, 2019

The "Acupuncture Now Foundation" (ANF) is a U.S. based, international non-profit dedicated to educating the public, healthcare providers, and health policymakers about the practice of acupuncture. We appreciate the opportunity to offer input for your consideration to this Draft Report on Pain Management Best Practices. We applaud this effort and believe you have done an excellent job of identifying the major issues and of making recommendations for policy improvements. We want to highlight some key points we hope will be helpful in refining this report - **1. The need for Complimentary/Integrative CPGs 2. Problems with diagnosis of pain conditions 3. Suggested edits.** We focus on our area of expertise (acupuncture) although many of the issues raised here could apply to other Complementary and Integrative Health approaches.

1. Develop Complementary and Integrative Health CPGs

This draft report emphasizes the importance of developing and encouraging the use of quality pain management Clinical Practice Guidelines (CPGs). It also points out that Complementary and Integrative Health approaches are being underutilized even though some of those approaches (including acupuncture) are often recommended in evidenced-based pain management CPGs. However, most Complementary and Integrative Health approaches themselves have not yet developed their own pain management CPGs. Without such guidelines in place, many physicians, third-party payors, and policymakers will hesitate to fully support the use of a practice like acupuncture because they don't have guidance to help them understand how to make the best use of that therapy including an estimate of how many treatments would likely be needed to treat what specific health issues.

The ANF has been calling for the development of CPGs within the acupuncture community for some years but due to a lack of funding it has not been possible to carry out the needed research review and consensus building process (1). Acupuncture and Acupuncturists have suffered from a lack of insurance coverage and limited acceptance from mainstream medicine and this has adversely affected Acupuncturists' ability to raise funds to develop needed resources like CPGs. The same can be said about developing outreach efforts to educate the public, other healthcare providers and health policymakers about the practice of acupuncture.

We urge the HHS to recognize this gap in resources to develop CPGs as well as educational materials and to recommend funding a task force to pull together experts from these fields to address this gap. This

task force could also develop guidelines on how to choose what types of Complementary and Integrative Health approaches may be more indicated for what types of conditions. Reaching consensus on these issues will not be easy, but these are the kinds of practical advancements that must be developed in order for Complementary and Integrative Health approaches to meet their potential to reduce the damage from opioids and other higher-risk pain management drugs. Without this effort, physicians, third-party payors, and health policymakers (who have little first-hand knowledge of these healthcare approaches) will be left to make such decisions for themselves.

First Recommended Additions to the Draft Report:

Section 2.6 Complementary and Integrative Health

Add the italicized wording below to the end of the third paragraph that ends with – “... such as medications, behavioral therapies, and interventional treatments, although more research and evidence-informed studies are necessary.” *“However, there is a lack of pain management CPGs for several of the Complementary and Integrative Health approaches themselves and this can slow acceptance of these methods by physicians, insurance payors, and policymakers.”*

Gap 2: - Add a “Recommendation 2d: as follows:

*“**Recommendation 2d:** Establish a Task Force of experts in Complementary and Integrative Health therapies to develop CPGs for those approaches, educational materials for the public and healthcare providers, and guidelines for how to better understand what types of Complementary and Integrative Health approaches may be more indicated for what types of conditions.”*

2. Pain Diagnosis Moonshot

We also want to stress problems regarding diagnosis for many common pain conditions. Low back pain is not a diagnosis. Neither is fibromyalgia or even migraine headaches. While these names are often referred to as a “diagnosis” they in fact just describe or label symptoms. The actual cause or causes of these and many other common pain conditions remain unknown or, in the case of low back pain, are often impossible to determine with any degree of certainty. That being the case, when caring for these patients healthcare providers are essentially shooting in the dark and trying to manage symptoms without knowing their cause. If the U.S. government would like to help foster a significant breakthrough in pain management, nothing holds more promise than making a serious effort to improve our ability to diagnose the true cause of these types of pain conditions. In 2016, Congress authorized a “Cancer Moonshot”. A similar “Pain Diagnosis Moonshot” effort should also be made.

Second Recommended Addition to the Draft Report:

Under section **3.3.4 Research:** Add the words “diagnosis and” in **Gap 1** and Recommendation 1.b as shown below.

1.3 Access to Pain Care

Gap 1: Incentives for innovations in the “*diagnosis and*” treatment of chronic and acute pain are necessary for the advancement of treatment.

“Recommendation 1.b: Support legislation to fund and undertake a “Pain Diagnosis Moonshot” to improve the diagnosis of the causes of pain in the most common pain conditions for which the causes are unknown or difficult to reliably know.”

3. Minor Edits and a Reminder

To better reflect modern approaches to traditional acupuncture, we offer a minor edit to your short description of acupuncture in section **2.6 Complementary and Integrative Health:**

“Acupuncture is a recognized form of therapy with origins in ancient Chinese medicine that involves manipulating a system of “acu-points” along “qi” (subtle energy) channels (meridians) to restore homeostasis. Modern variants of traditional acupuncture follow theories based on stimulating points to excite or inhibit nerve conduction and body chemistry.”

The above language is similar to that used by the Centers for Medicare and Medicaid Services in their Decision Memo for Acupuncture for Osteoarthritis (CAG-00175N) ⁽²⁾.

Regarding section **2.3 Restorative Therapies** (understanding this was not intended as a comprehensive list); we wanted to offer a reminder that acupuncture is a very useful method for restorative therapy.

We thank HHS for this opportunity to provide input on this important topic and encourage all interested parties to contact us to work together to fight this horrible epidemic while improving pain management.

Sincerely,

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- 1.) <https://www.acunow.org/strategic-plan.html>
- 2.) [https://www.cms.gov/medicare-coverage-database/details/nca-decision-memo.aspx?NCAId=84&NcaName=Acupuncture+for+Osteoarthritis&basket=lcd%25253A26890%25253A16%25253ABreast+Imaging%25253D%25253D+Mammography%25252FBreast+Echography+\(Sonography\)%25252FBreast+MRI%25252FDuctography%25253AMAC+-+Part+A%25253ANational+Government+Services%25257C%25257C+Inc.+\(13201\)%25253A](https://www.cms.gov/medicare-coverage-database/details/nca-decision-memo.aspx?NCAId=84&NcaName=Acupuncture+for+Osteoarthritis&basket=lcd%25253A26890%25253A16%25253ABreast+Imaging%25253D%25253D+Mammography%25252FBreast+Echography+(Sonography)%25252FBreast+MRI%25252FDuctography%25253AMAC+-+Part+A%25253ANational+Government+Services%25257C%25257C+Inc.+(13201)%25253A)

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