



PatienTrue  
Patient Resource Physicians

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HOUSE COMMITTEE ON HEALTH CARE TESTIMONY  
Representative Greenlick, Chair

Re: SB 856, Allows naturopathic physicians to perform certain actions that physicians are authorized to perform.

**POSITION: OPPOSE**

Dear Representative Greenlick and distinguished members of the House Committee on Health Care,

My name is Sara J. Bubenik. I have a Doctor of Medicine (MD) from Oregon Health and Sciences University and Master of Public Health (MPH) from Kansas State University. I am a native Oregonian and a patient advocate. I support improved access to health services in Oregon and have spent my career as an educator and public health advocate pursuing this goal.

I am in opposition to SB 856 on the following grounds:

**1. The Definition of Physician**

As mentioned in the submitted testimony by Laura Farr, Executive Director “the vast majority of this bill has to do with clarifying use of the term “physician”...Where the term “physician” is defined in a statute specifically as only an Medical Doctor (MD)/ Doctor of Osteopathy (DO).” While I respect naturopathic medicine, and believe it has a role in our healthcare system, I do not believe that Naturopathic physicians meet the same education standards and clinical experience as medical students trained in the United States. According to the 2016 Handbook from the Council on Naturopathic Education, naturopathic students are required to get only 850 hours of clinical training on patients.

Physicians earn thousands of hours of clinical exposure under supervision before practicing.

## **2. Training and Licensing Exam Standards**

In granting Naturopathic physicians a larger scope of practice similar to that of Medical Doctor (MD)/ Doctor of Osteopathy (DO) and the ability to be called “Physicians and naturopathic physicians” in the Oregon legislation, it deems their education superior to that of an MD. Naturopathy is not an established system of health care with evidence-driven practices and remedies.

MDs and DOs have to take the USMLE and do at least one year residency in the state of Oregon to practice medicine. Naturopaths are only required to take the NPLEX exam in order to practice medicine as a primary care physician. The NPLEX exam has been criticised to not meet national standards for licensing. According to a 2009 article by Melnick titled, *Evidence-based practice: step by step: igniting a spirit of inquiry: an essential foundation for evidence-based practice*, these naturopathic licensing exams administered by the North American Board of Naturopathic Examiners (NABNE), are written entirely by naturopaths and do not have the same level of transparency as the USMLE or COMPLEX, which undergo an external audit process to maintain common standards, evidence-based rigor, and high-quality assessment. Naturopathic Physicians (NDs) do not have to take national standardized testing such as the USMLE nor do they have to participate in residency programs that the Oregon medical board deems “a critical component of a physician’s training.” (Please refer to SB 857, attached – and the OMB opposition memo, attached).

Another submitted testimony explains that there is “a greater demand than ever for an expanded healthcare workforce”, implying that NDs are practicing at the level of their scope of practice. Again, if NDs are deemed able to practice independently outside of their Naturopathic medical school without a standardized residency, then this should apply to all medical graduates including MDs and DOs.

## **3. Patient Safety**

Naturopaths have been practicing natural medicine for many years in Oregon and If patients want to seek out this route of medical intervention, that is within the scope of practice for naturopaths. I am not in opposition of naturopathic medicine but of increasing their scope of practice and defining them as physicians, similar to MDs and DOs. This opposition is about patient safety and, more fundamentally, the role of science in the the Oregon health care system. Naturopathic medicine, despite claims to the contrary, is not an

evidence-based approach. Given this reality, the Oregon medical board should oversee this branch of medicine as they do MDs and DOs.

Another safety and public health concern to expanded practice and redefining ND's as "Physicians and naturopathic physicians" is homeopathy. Naturopaths study homeopathy in their education as a staple of treatment. Yet, basic science tells us that it shouldn't work, and multiple studies show that it is not effective. Homeopathy recently suffered yet another setback with a 2015 report from the Australian Government National Health and Medical Research Council, which debunked the effectiveness of homeopathy.

Furthermore a current public health issue in Oregon is pediatric vaccination rates. In a survey of students at the National College of Naturopathic Medicine, which is accredited by the Council on Naturopathic Medical Education, only 26% planned on regularly prescribing or recommending vaccinations for their patients; 45 % would recommend vaccination "occasionally." A whopping 96% said they would recommend a schedule different from the Centers for Disease Control despite there being absolutely no evidence in support of an alternative schedule. Ali, et al., Vaccination Attitudes and Education in Naturopathic Medicine Students, *J Alter Comp Med* (May 2014).

NDs may be well qualified to practice naturopathic medicine that utilizes natural medicine and treatments in a natural approach, NDs do not receive the education and training in naturopathic education programs to safely perform minor procedures. Graduate MDs are held to a standard of residency training and so should naturopaths if they want to hold the title "physician" with these same privileges. To ensure fairness, graduate MD's should be allowed to take the NPLEX exam to practice in the state of Oregon without a residency; or vice versa, naturopaths should take the USMLE and obtain a standardized medical residency.

I know you always consider the best interest of all Oregonians. I urge you to weigh the risks and benefits and stop SB 856.

Sincerely,

Sara Bubenik, MD, MPH

