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nwnaturopathicmedicine

March 29, 2021

Re: SB772, Support Fair Pay for Naturopathic Doctors (NDs)

Dear Senate Health Care Committee,

My name is **Nathalie Paravicini**; I am a Naturopathic Doctor (ND). I am asking you to please support SB772. I would like to share my experience working in Oregon as a licensed ND.

Professional experience, sample cases

For several years, as a PCP for uninsured low-income workers with no health insurance, I managed a panel of 18 patients a day: 30% of my patients suffered from diabetes, 30% from cardiovascular disorders, approximately 15% with various infections from common place to reportable. I also performed up to 10 well-women exams a day.

My current patient population is comprised of approximately 30% Medicaid patients; 40% of my patients are complex cases with multiple chronic multi-system diagnosis. A number have seen specialists for years without sufficient relief. I want to highlight a few cases:

1. Intractable headaches: patient with headaches so severe the patient would-end up vomiting. This severely impaired the patient's work history; the patient was almost on disability. The patient received testing and brain scans prescribed by neurologists and gastroenterologists; patient had tried several medications. These symptoms resolved within weeks after adjusting hydration status and adding vegetables to his diet and a few supplements. Neither of us could believe it had resolved so quickly
2. Heartburn on Omeprazole for 12 years, and life-long insomnia: Within weeks we were able to resolve heartburn (treated for SIBO) and taper off medication. Insomnia resolved within a couple of month (treated for metabolic imbalances). Patient never thought he could one day sleep a whole night.
3. IBS 20 years year, nurse. Treated for SIBO, which took several months, and symptoms resolved.
4. Nurse with severe and worsening asthma, polyps, keratoconus and pain on years of immunosuppressant therapy which precipitated other conditions. I identified a salicylate intolerance. The diagnosis above resolved when removing foods high in salicylates from the patient's diet.

5. 8 year old who suddenly became so disturbed that he was recommended psychiatric institutionalization. He was referred to me for treatment of potential PANS/PANDAS; something I treat regularly. Symptoms decreased in intensity within weeks after treatment to address neuro-inflammation and infectious processes. It took a little over 12 months, but patient was able to resume normal activities, including visits to a new dentist.
6. Patient with history of psychiatric hospitalizations, was back in inpatient facility after our first visit. *The case was too complicated for the facility, which released the patient with no services, on serotonin syndrome, days before the COVID lock down.*
I was able to stabilize the patient and secure care from a team of professionals. The patient had to be referred to an emergency unit where we worked with a fantastic team as well as the highest levels of the insurance company itself. After several months of treatment at a very specialized facility, the patient was released and is now a functioning individual with a job. The patient subsequently secured a team of specialties needed to remain well, including a naturopathic doctor.

As the last case shows, NDs are able to manage complex cases with teams that can include combinations of gastroenterologists, neurologists, endocrinologists, immunologists and behavioral health specialists and psychiatrists.

I often manage the majority of the healthcare needs for my patients, whether it be their annual physical, lab orders, health screenings or prescription(s) and a team of other competent providers and specialists when appropriate.

A failing system, embedded discriminatory practices, cultural appropriation

Naturopathic Doctors are trained in a more integrated evaluation of all systems. In addition, we are required to carry liability insurance, just like MDs or DOs. Our licensing requires us to demonstrated attendance to continuing education programs every year.

Furthermore, we want to highlight **that since 2014, life expectancy in the US has been declining every year**¹. At the same time healthcare costs have soared. Most costs are due to chronic disease, something which naturopathy has excelled.

Frustration with the existing healthcare paradigm within the medical profession itself is sky-high – witness the increasing influence of organizations such as Physicians for a National Healthcare Program (<https://pnhp.org>) of which I am a active member.

Results from a pilot program funded by the **Veterans Affairs Department** were so positive (significant cost reductions, improved results and employee retention) that **such an integrated approach is being implemented throughout a system in bad need of reform.**^{2 3}

It is true that as naturopathic Doctors it is very difficult to find **paid residencies**. That is the failure of a system which, unfortunately, has historically been designed to push out naturopathic practitioners in favor of the promise of new pharmaceuticals (Rockefeller used the Flexner report to wipe out competition). The Naturopathic profession has had to develop its own network of peer-to-peer groups, internships and mentoring to palliate for these discriminatory practices.

When I started on my journey to become a doctor, people laughed when we spoke about the gut microbiome or “leaky gut”, or when we prescribed vitamin D, omega 3 oils, arnica and other remedies. These are now part of conventional medical parlance; some papers even hail new “discoveries” of problems that naturopathic medicine has been treating for years⁴.

The rise in integrative MDs is no less than cultural appropriation, even though I laud the courage of these practitioners. They get better results with traditional naturopathic tools and their practice thrives.

Your constituents are my patients

The piecemeal approach to healthcare no longer meets the needs of the population. That is why there is such a rise in demand for complementary and alternative medicine, in this case naturopathic medicine.

Nevertheless, the increased administrative burden of capricious credentialing and coverage practices and decreased reimbursements makes it more difficult for people like me to stay in practice and deliver this essential and unique level of care.

It also limits access to healthcare for my patients as well as other individuals and families in the community. And for those of us who have been able to stay in practice, we do so at a great economic disadvantage to our peers, making it difficult to repay student loans, raise a family and give back to the community.

My patients also experience disruptions in service, increased out-of-pocket and other costs.

That is why I am asking you to vote yes on SB772: 1) to decrease the increasing burden and cost of bureaucracy in healthcare; 2) to ensure access to the patient’s choice of care, and 3) to ensure fair pay for Naturopathic Doctors so they can continue providing effective integrative and preventative healthcare.

Sincerely yours,

A handwritten signature in blue ink, appearing to read 'Nathalie Paravicini', with a long horizontal flourish extending to the right.

Nathalie Paravicini, ND

Attached: Endnotes and supporting documentation

Endnotes and supporting documentation

¹ CDC Data Show U.S. Life Expectancy Continues To Decline; December 10, 2018, aafp News
<https://www.aafp.org/news/health-of-the-public/20181210lifeexpectdrop.html>

² Whole Health System of Care Evaluation – A Progress Report on Outcomes of the WHS Pilot at 18 Flagship Sites; VA National Office of Patient Centered Care and Cultural Transformation; from presentation by Tracy W. Gaudet, M.D., Executive Director, Whole Health Institute – see attached for further information

³ A Naturopathic Approach To The Prevention Of Cardiovascular Disease: Cost-Effectiveness Analysis Of A Pragmatic Multi-Worksite Randomized Clinical Trial. Herman PM, Szczurko O, Cooley K, Seely D. J Occup Environ Med. 2014 Feb;56(2):171-6. doi: 10.1097/JOM.000000000000066.

⁴ Unlocking the Mysteries of Long COVID, Meghan O'Rourke; The Atlantic Magazine, April 2021 Issue

VA Whole Health System of Care Evaluation

Whole Health System of Care Evaluation – A Progress Report on Outcomes of the WHS Pilot at 18 Flagship Sites

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> J Occup Environ Med. 2014 Feb;56(2):171-6. doi: 10.1097/JOM.0000000000000066.

A naturopathic approach to the prevention of cardiovascular disease: cost-effectiveness analysis of a pragmatic multi-worksite randomized clinical trial

Patricia M Herman¹, Orest Szczurko, Kieran Cooley, Dugald Seely

Affiliations + expand

PMID: 24451612 PMCID: PMC3921268 DOI: 10.1097/JOM.0000000000000066

Free PMC article

Abstract

Objective: To determine the **cost**-effectiveness of a worksite-based **naturopathic** (individualized lifestyle counseling and nutritional medicine) approach to primary prevention of cardiovascular disease (CVD).

Methods: Economic evaluation alongside a pragmatic, multi-worksite, randomized controlled trial comparing enhanced usual care (EUC; usual care plus biometric screening) to the addition of a **naturopathic** approach to CVD prevention (NC+EUC).

Results: After 1 year, NC+EUC resulted in a net decrease of 3.3 (confidence interval: 1.7 to 4.8) percentage points in 10-year CVD event risk (number needed to treat = 30). These risk reductions came with average net study-year savings of \$1138 in societal **costs** and \$1187 in employer **costs**. There was no change in quality-adjusted life years across the study year.

Conclusions: A **naturopathic** approach to CVD primary prevention significantly reduced CVD risk over usual care plus biometric screening and reduced **costs** to society and employers in this multi-worksite-based study. Trial Registration clinicaltrials.gov Identifier: [NCT00718796](https://clinicaltrials.gov/ct2/show/study/NCT00718796).

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