



## **NATUROPATHIC WISDOM NOTES**

Suite 300, 1170 Shoppers Row, Campbell River, BC. V9W 2C8 ~ Tel: 250-286-3655 or 800-898-6699  
Fax: 250-850-2078 ~ email: doctor@drpincott.com ~ Web: www.DrPincott.com ~ Hours: Mon-Fri 9:00 AM – 6 PM

### **Fall 2010: Enhanced Primary Care in BC Improvements to Primary Care, Patient Choice & Access to Preventive Care**

(Reprinted, with permission, from BCNA's *Your Health*,  
Volume 16, Number 3, Summer 2010)

As of this fall, many of BC's licensed naturopathic physicians (NDs) will be permitted to prescribe medications for patients. This will enhance the existing care NDs currently provide and improve primary care options for patients across the province.

Below we've listed some common questions received by patients over the last few months concerning the improvements to scope of practice.

#### **Why do Naturopathic Doctors Need Prescription Medications?**

Making a prescription is fundamental to the practice of medicine in any and all forms. But prescribing pharmaceuticals is not the central focus of naturopathic medicine—it is simply a facet of providing timely and effective primary care.

Another critical element, however, is that over the decades NDs have lost access to many botanical medicines and natural therapeutics. These "traditional" substances, such as high dose vitamins, some amino acids, hormones, botanicals and herbs, which NDs have used for decades, have slowly become "scheduled"—meaning prescription only.

Even more importantly, NDs are providing primary care without the capacity to practice at the full extent of their education, training and expertise. Naturopathic physicians have traditionally acted as primary care practitioners and continue to do so today. As such, it is imperative that NDs be allowed to retain their historical right to prescribe.

#### **Don't Naturopathic Doctors Only Use "Natural" Medicines?**

No and yes. Even to this day many prescription drugs are derived from natural sources—where there is overlap and emphasis in naturopathic medical training. Some "natural" medicines are prescription only (e.g., amino acids, high-dose vitamins).

But really this is a question about employing basic medical diagnosis and laboratory analysis. Naturopathic doctors' primary focus is on treating the underlying nature or cause

of disease. Put simply, naturopathic medicine is the "nature" of the "pathos" or disease, not "natural" medicines stand alone. This focus is about supporting the natural healing processes of the patient, not only using a product.

Thus, naturopathic medicine is about the removal of any impediment to the healing process; the prevention and treatment of physical and mental disease, disorders and conditions; and the promotion of good health using not only natural methods but methods that support and enhance a patient's overall health.

Unfortunately, even those "natural" medicines naturopathic doctors have used for many decades are often, now, by prescription only.

#### **How Does Prescribing Impact Patients?**

NDs offering prescriptions, when appropriate, will improve patient care. The improvement will increase access to traditional medicaments (e.g., high dose vitamins, minerals, hormones), restoring core elements of ND expertise. In respect to a patient who requires medication but seeks primary care from an ND, they can avoid additional trips to another practitioner for refills. For patients seeking non-drug alternatives, the ND will now be able to adjust, if appropriate, drug regimens while introducing non-drug therapies.

That said, consider the alternative which limits patient care: Without the ability to prescribe, the lack of access to pharmaceuticals puts NDs in a position of ambiguity. It leads to confusion both on the part of the practicing ND and the patient, vis-à-vis patient protocols. This discrepancy carries with it an inherent danger to the public and to the naturopathic profession. A case in point is bronchial pneumonia where the ND deems antibiotics are required, yet cannot prescribe them. An inability to prescribe places the patient at risk due to the delay in receiving proper medical treatment.

#### **As a Patient, I See an ND to Avoid Taking Prescription Medications. Why is the Profession Becoming Just Like MDs?**

Naturopathic medicine is focussed on each patient's distinct health needs. NDs seek to find the safest, most effective, least invasive therapy and medicament for treatment. Historically this has always been the case and at present it's the case—none of those tenets will change.

Instead, patient care is being enhanced, without losing the

emphasis on non-drug treatments. In fact, for most protocols there are valid non-drug alternatives. But in some cases, even if only temporarily, prescription medicine may be an important element in helping a patient heal in a quick and complete manner.

An important caveat is this: In US jurisdictions, where NDs have prescribed for many years, they haven't evolved into MDs or lost their identity as NDs. They still provide safe, effective, patient-centred health care, using drugs judiciously, only as needed and when appropriate.

### ***Do Naturopathic Physicians have the Education Required to Prescribe Medicines?***

NDs already prescribe pharmaceuticals in many jurisdictions across North America. They could not prescribe if their education excluded pharmacology and pharmacognosy training.

[Pharmacognosy is the study of medicines derived from natural sources. The American Society of Pharmacognosy defines pharmacognosy as “the study of the physical, chemical, biochemical and biological properties of drugs, drug substances or potential drugs or drug substances of natural origin as well as the search for new drugs from natural sources.”]

There are no NDs in BC without at least seven year medical training. All licensed NDs complete a minimum of three-years university level pre-medical training, then four years at an accredited naturopathic medical college. (There are two in Canada and four in the USA.)

Following pre-med, the four-year ND program covers many of the same science courses as at “conventional” medical school. Drug education is of course a core part of pharmacology training, but also an inherent part of biochemistry, microbiology, physiology, botanical medicine, pathology and other core science courses in the ND curricula. Further, BC's NDs complete intensive additional pharmacology upgrade courses and exams prior to prescribing.

### ***Why do Naturopathic Physicians Want to Prescribe?***

Strictly speaking, naturopathic doctors don't “want” the change in regulation, they require it—to provide safe, effective, economical preventative health care. The ability to prescribe is in keeping with a “shared scopes of practice” model being implemented across the province whereby many health professions have access to prescription items relevant to their respective practice. The change is in keeping with the record of safety and effectiveness of this profession, and ensuring that modalities arbitrarily removed, over time, continue to be used appropriately and in a timely fashion.

### ***What About Patient Safety? If Naturopathic Physicians Haven't Dealt With Prescription Drugs in the Past, How are they Eligible for the Added Responsibility?***

Naturopathic doctors deal with prescription medicines on a daily basis: With patients already on a drug regime, considering pharmaceuticals and/or an alternative, drug/non-drug interactions, and myriad other interconnected health issues. The substantial change in regulations won't be so much an added responsibility, but rather the ability to improve patient care. Currently, hundreds of thousands of BC residents see NDs for care, many for primary care, and BC's licensed NDs attend to over a million patient visits each year.

### ***Won't it Confuse Patients Already on Prescription Medications?***

Given the shared scopes of practice model already in existence, there shouldn't be confusion. Many patients may see, for example, an ND, physiotherapist, chiropractor, acupuncturist and MD over the course of a year, sometimes simultaneously. Shared scopes of practice is the status quo in BC. Even for a patient seeing both a general practitioner and specialist, they may be under two different “allopathic” protocols without confusion or error.

But this question also begs a further clarification: There is a difference between prescriptions for chronic and acute conditions. A patient on medication for, say, depression, and seeing an ND, would require immediate attention for an acute condition such as bronchitis. The provision for access to scheduled drugs allows for more effective, timely and appropriate medical care.

### ***Will all NDs in BC be Licensed to Prescribe?***

No, each naturopathic doctor has the choice whether to complete an upgrade course or not. Upon taking the course and passing a competency exam the regulatory board, the College of Naturopathic Physicians, will permit members to prescribe. In turn, Pharmaceutical Services will issue prescribing numbers to certified NDs.

Not every prescription is a “drug”: Many “traditional” substances, such as high dose vitamins, some amino acids, hormones, botanicals and herbs, which NDs have used for decades, have slowly become “scheduled”—right here in B.C. Imagine a medical doctor losing the ability to run diagnostic tests or prescribe an antibiotic, or a surgeon unable to use anaesthetics. That's exactly what's happened over the years to naturopathic doctors in terms of many traditional medicines.