



HOW TO MAKE A GOOD REFERRAL TO AN ACUPUNCTURIST

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Medical Practitioners: Here's guidance for you:

Acupuncture care is useful in a very wide range of situations. While acupuncture is most famous for its success with musculoskeletal pain, this is definitely not where its utility ends. Acupuncture care can safely and effectively be used in conjunction with other types of care, be it biomedical (MD) care, chiropractic, osteopathy, homeopathy, naturopathy, massage therapy, cranio-sacral manipulation, or shamanic healing. In fact, there are few situations in which acupuncture is not useful... (the only one I can think of is that the pain-control feature is somewhat lessened if the patient is taking steroids).

- For research details, please see a web site such as www.acubriefs.com, www.acupuncture.com, www.ncbi.nlm.nih.gov (Pubmed), www.liebertpub.com/acm (J Altern Comple Med), or ecam.oxfordjournals.org (Evidence-Based Complement Altern Med).
- To find names of acupuncturists near you, see a web site such as www.acufinder.com.
- Read *Contemporary Chinese Medicine and Acupuncture* (C.M. Cassidy, editor, Elsevier (Churchill-Livingstone), 2002), a text written specifically for medical professionals. It won't teach you to needle your patients, but it will introduce you to how professional acupuncturists think and practice, and offer research findings by top researchers. This book costs only \$45 and has had uniformly excellent reviews.

To make a good referral:

1. NETWORK!

Get to know acupuncturists near you. Some of your patients may already use acupuncture—ask them for details and make a lunch date! Or, read your local "alternative medicine" newspaper, and identify people who interest you. Call them up; make a lunch date!

Ask an acupuncturist to address your local practitioners group.

Exchange treatments with an acupuncturist.

Observe an acupuncturist at work.

Most acupuncturists are eager to enlarge their referral network!

2. LEARN ENOUGH TO KNOW WHEN & WHO TO REFER

This list could get way too long, so I'll just offer categories and a few examples. To learn more, ask an acupuncturist or consult a web site, including the WHO and NIH-NCCAM websites.

- musculoskeletal pain: TMJ, back, shoulder, neck, carpal tunnel syndrome, fibromyalgia, osteoporosis, plantar fasciitis, sprain etc. etc.
- mood complaints: depression, anxiety, panic, dysthymia, grief, anger...
- digestive complaints: reflux, heartburn (gastritis), gallbladder issues, hepatitis, indigestion, irritable bowel syndrome, constipation, diarrhea...
- respiratory complaints: recurrent colds, sinusitis, rhinitis, allergies, asthma, otitis media...
- urinary and kidney complaints: kidney stones, cystitis...
- skin complaints: eczema, psoriasis, acne...
- reproductive system complaints: PMS, menstrual pain, menopausal symptoms, infertility, recurrent miscarriage, low libido, erectile dysfunction...
- nervous system complaints: numbness, Morton's neuroma, peripheral neuralgia, Parkinson's syndrome, multiple sclerosis, post-stroke syndrome, post-concussion syndrome, headaches of every variety, eye and ear complaints, post-amputation pain, pain in scars...
- energetic complaints: fatigue, constant chilliness, autoimmune issues...

--and no doubt more that I can't think of right now!--

FYI: The way we think in Asian medicine and the way practitioners of allopathic medicine think is different. Here's a paragraph that summarizes some important differences that may serve you when you think about referring a patient (MA Hyman, MD, 'Systems of Correspondence: Functionality in Traditional Chinese Medicine and Emerging Systems Biology', editorial in *Alternative Therapies*, Mar/Apr 2006, Vol 12(2):10-11):

"At the center of Chinese medicine is the notion of functional relationships within the body. Organs are of interest, not for their anatomical relationships, but for their functional patterns and distant effects with other 'organs.' Organs in Chinese medicine are concepts organized around function, not discrete anatomical entities. Diseases are perceived not as discrete entities arising from diseased organs, but imbalances in the functional relationships within the system. I fear that in our deductive, reductionistic scientific inquiry into traditional Chinese medicine we will lose the most important lesson of this 12-centuries-old cosmology—the opportunity to reframe our interpretation of phenomena based on functional patterns, relationships, and systems. This is where the emerging paradigm underlying systems biology intersects with the ancient wisdom of Chinese medicine. Traditional Chinese medicine does not treat diseases of Western conception per se, but rather disturbed function, imbalances in communication between systems of the body that are connected through physical and energetic pathways."