Global Views

Dr. Ralph Coan: a hero in establishing acupuncture as a profession in the United States

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1 Introduction

Dr. Ralph Coan is not well known to the general public. Originally, we had wanted to interview him as he was the medical director of the first acupuncture center in the United States that opened in the early 1970s[1]. We wanted to know more about that center’s history. Prior to visiting Dr. Coan, we found an article written by Dr. Sherman Cohn that mentioned Dr. Coan. The article noted that Dr. Coan was the founder of the American Association of Acupuncture and Oriental Medicine, which is the national association of acupuncturists and Chinese medicine practitioners in the United States[2]. While interviewing Dr. Coan on February 18, 2012, it became apparent that he truly is a leading light in establishing acupuncture as a profession in the United States. Dr. Coan is 75 years old and retired several years ago from his busy medical practice in Kensington, Maryland, USA. As he had recently partially recovered from a stroke while also suffering from heart disease, he could not talk much (Figure 1, Dr. Coan was in the interview). To collect further information about him, we also consulted his former colleagues and relatives, and researched articles written about him.

2 An acupuncture believer

“I put an advertisement in the Washington Post stating Looking for a Physician Position. To my surprise, I immediately got a call in the same day. He said, ‘Are you interested in working in an acupuncture clinic? If so, please come.’ I was not familiar with acupuncture before this. However, I had to get a job to support my family after I left the United States Army. At that time, most of the medical doctors (MDs) and politicians did not believe in acupuncture; some media treated acupuncture as a ‘quack’ profession. I started the work with great suspicions. It was at the beginning of 1973.” Dr. Coan recalled 40 years later.

Dr. Coan graduated from the Georgetown University School of Medicine in Washington, D.C. in 1963 as an.
honors student, had a one-year internship in the University of Chicago Hospitals, and completed his residency at Walter Reed Army Hospital in Washington, D.C. He joined the United States Special Army and served at Fort Bragg, North Carolina, in the Canal Zone, Panama, at Lowry Air Force Base, Colorado, and Walter Reed in Washington, D.C. In 1972, Dr. Coan left the Army after serving for eight years due to the end of the Vietnam War. He was one of the three earliest staff physicians, with six Chinese medicine doctors or acupuncturists, to work for the Acupuncture Center of Washington, the first legal acupuncture center in the United States. At that time, Western-trained MDs performed the diagnoses and decided which patients needed acupuncture, and the Chinese medicine doctors would perform acupuncture treatment under the MDs’ supervision. The first MD director of the Center was Dr. Arnold Benson, a New York internist and one of the three founders. Dr. Coan became the second MD director a year later, since Dr. Benson was busy and could not work full-time. As the staff director and co-founder, Dr. Yao Wu Lee recalled that Dr. Coan worked part-time initially, then became a full-time doctor, and at last, served as the MD director, while Dr. Chingpang Lee, a Chinese medicine doctor, served as the office manager.

“I was not sure whether acupuncture was safe and effective, so I wanted to do a little research by myself before I finally decided to work there. I collected the contact information of the first 50 contiguous patients and examined them — the Center had an official copy; I collected by myself secretly. Over approximately two months, I called all of those patients. The results were very encouraging: more than 80% of the patients told me that they got better without any obvious adverse effects. I became a believer, so I decided to work full-time there. I stayed in that Center for approximately 10 years.” Dr. Coan said.

At that time, there were very few acupuncture clinics, and patients came from throughout the United States as well as from many other countries. The Center was immensely popular and had to split into two separate clinics: the Acupuncture Center of Washington and the Washington Acupuncture Center. At their peak popularity, both clinics saw about one thousand patients per day. Within one year, there were thirteen acupuncture clinics open in Washington, D.C., leading it to become a capital of acupuncture. The acupuncture business was so successful that buses full of patients came from New York, New Jersey, and other cities daily to visit the Center. Such scenes and the effectiveness of acupuncture amazed many open-minded MDs like Dr. Coan. However, the booming acupuncture business aroused anxiety and unease within conservative Western style medical institutions and drug manufacturers. In 1974, the Washington, D.C. Board of Medicine gave the Center orders to close acupuncture offices six times. To save the acupuncture profession, as well as the Center, the directors decided to respond. From mid-1974 to the early 1975, they were involved in two lawsuits in the Superior Court of the District of Columbia. The court conducted a serious hearing on acupuncture. Judge Fred Ugast listened to the testimonies of the Washington, D.C. Board of Medicine, the Acupuncture Center of Washington and Washington Acupuncture Center, as well as the public for three months. Dr. Coan was one of the key MDs who attended the hearing and played an important role.

Dr. Coan remembered very clearly, “One day I was in court. I testified that in Washington, D.C. there were no MDs or dentists trained in acupuncture. It is impossible to get rid of acupuncturists in an acupuncture practice, because they are the experts. Then, Judge Fred Ugast let the doctor who was in charge of the Washington, D.C. Medical Board in. The judge asked him, ‘Dr. Robinson, your regulation wants to limit the right to practice acupuncture to licensed physicians and dentists in Washington, D.C. Do you know how many Western-trained doctors in Washington, D.C. were trained in acupuncture? How many patients need acupuncture everyday?’ The doctor replied, ‘I don’t know.’ Then the judge said, ‘Oh, you can go now.’”

“I predicted that we would win the case. At last, the judge announced that the new Washington, D.C. regulation which wanted to limit the right to practice acupuncture to licensed MDs and dentists is unconstitutional. The rights of physicians to choose proper treatment based on his best judgment, acupuncturists to perform acupuncture, and patients to get professional acupuncture services have been protected. So, acupuncturists could continue to perform acupuncture as long as it is under a MD’s supervision.”

Dr. Coan was a diligent doctor and held at least six qualifications in subspecialties of internal medicine, such as endocrinology and infectious diseases, which is many more than what doctors today may have. He worked with those acupuncturists in his office from 1972 until late 1990s. He said, “I am a believer of acupuncture, although I did not insert any acupuncture needles into any patient. When my family members were sick, I always suggested them to use acupuncture first. Acupuncture works!”

3 A pioneer in acupuncture research

There was very little acupuncture research reported in the 1970s and 1980s, Dr. Coan was one of the pioneers in conducting acupuncture clinical trials. When I mentioned his name to Dr. Lixing Lao, a well-known researcher in acupuncture and Chinese herbology, and a Chinese medicine doctor at the Center for Integrative Medicine of the University of Maryland, he gave Dr. Coan very high praise, “Dr. Coan was an important acupuncture researcher with historical status. His two papers in acupuncture
clinical trials on neck pain and low-back pain have been cited by many researchers today.”

In mid-September, 1973, the National Institutes of Health (NIH) held a special workshop for acupuncture scientific study. Dr. Benson and Dr. Coan reported their clinical observation of acupuncture’s effectiveness in 36 cases of rheumatoid arthritis (RA) which was conducted by Dr. Coan.

The presentation at this NIH meeting showed that during the first six weeks after the center was established in December 1972, there were 64 patients with RA who were treated with acupuncture. The first follow-up was conducted three months later. They were able to contact 55 patients, of whom 36 had been given 5 to 24 acupuncture treatments (average 6.6). Of the 36, 25 patients (69%) reported improvement, including less need for pain medications and in some cases, reduction of the nodules which occur on arthritis sufferer’s joints. Of 19 patients who had fewer than 5 treatments, only 5 cases (16%) reported improvement. The second follow-up was conducted six months later, which showed continued improvement by 16 of 27 patients (59%) from the original group. The average age of patients in this study was 55 years, and they had been suffering from RA for an average of 11.5 years.

Many newspapers in the United States reported this news, which encouraged more patients to try acupuncture.

An article entitled The acupuncture treatment of low back pain, a randomized controlled study was reported by Dr. Coan and his colleagues in 1980. The study was conducted within the Acupuncture Center of Washington and Acupuncture Center of Maryland.

Acupuncture treatment was effective for the majority of patients with lower back pain, which was shown by the use of short-term controls and long-term controls, although the latter were not intended in the study design. After acupuncture, there was a 51% pain reduction in the average pain score in the immediate treatment group. The short-term controls and the delayed treatment group showed no reduction in their pain scores at the comparable follow-up period. Later, the patients in the delayed treatment group were also treated by acupuncturists, and 62% of patients reported less pain. When these two treatment groups were compared at 40 weeks with long-term controls (inadequate treatment group), the inadequate treatment group still had the same pain scores, on the average, as when they enrolled in the study. Both treatment groups, on average, had 30% lower pain scores. Furthermore, 58% of patients in the treatment groups felt that they had definitely improved at 40 weeks, while only 11% of the inadequate treatment group felt definite improvement at 40 weeks. There was a significant difference between the groups.

Another article entitled The acupuncture treatment of neck pain, a randomized controlled trial was reported in 1981 by Dr. Coan and his colleagues.

Thirty patients with cervical spine pain syndromes, course of disease 8 years on average, were assigned randomly equally into treatment and control groups. After 12 weeks, 12 of 15 (80%) of the treatment group felt improvement, some dramatically, with a mean 40% reduction of pain score, 54% reduction of pain pills, 68% reduction of pain hours per day and 32% less limitation of activity. Two of 15 (13%) of the control group reported a slight improvement after 12.8 weeks. The control group had a mean 2% worsening of the pain score, 10% reduction in pain pills, no lessening of pain hours and 12% less limitation of activity.

Such study design may be seen as flawed if judged by today’s criteria. However, they were considered impressive by the researchers at that time, especially the studies were the first time in history endorsed by NIH, the United States Food and Drug Administration (FDA), and the American Medical Association (AMA), which is the main stream medical society. The reports had been documented in the United States Congress in 1979 and was one of key documents used for FDA relabeling acupuncture needle as a medical device from an investigational device in 1994. The later two studies were conducted by local acupuncturists and MDs using their own money, time and labor, with great difficulty, and totally followed the restrict NIH clinical trial rule (control, and random) at that time, which might be the only case in the United States medical research history. Dr. Coan was invited to give lectures throughout the United States. Such studies do therefore have some value. Dr. Coan said, “Acupuncture is a process of a needle piercing the body, to some extent, it is similar to a small operation. As a clinical doctor, I strongly believe it cannot be compared with so-called ‘sham’ acupuncture (which is used as a placebo, mimicking that in medication’s clinical trials; however, it is a real piercing or similar to that). We used the methods of comparing the effectiveness and adverse effects before and after acupuncture in the same patient group, or between the treatment group and waiting-list group. Like an operation, how can we compare the cut of a scalpel with the ‘sham scalpel cut’?”

I agree with him. Indeed, acupuncture is very different from medication; the design of the study should not be the same as the drug model, the so-called “golden criteria”.

4 A key person in establishing acupuncture as a profession in Maryland

“I was an MD who had witnessed so many patients getting better after acupuncture treatment and became an acupuncture believer. In the 1970s, I had strong motivation — I felt that I should do something to push the acupuncture profession forward in the United States.
I decided to change something at the local level first. I convinced ten more local acupuncturists, and established a professional organization Acupuncture Association of Washington Metropolitan (AAWM). I was its president for more than 10 years. We met every Saturday morning to share news with each other and discuss the role of the acupuncturists. One day, we met in Suburban Hospital (which was the affiliated hospital of NIH). We were aware that the first quarter of each year is the legislation season in every state, so we decided to remove the obstacle in law for acupuncture in Maryland.” Dr. Coan recalled.

The members of AAWM included local acupuncturists mainly from Hong Kong and Taiwan of China and Korea, such as Grace Wong, In-Su Kim, Hansheng Gu (Hanson Koo) and Shumei Zhang. They met once a month in China Garden Restaurant on Wisconsin Avenue, Bethesda, Maryland. The basic procedure was: ate lunch together (about half hour), and then discussed something new and what needed to be done — like most societies today in every state, so we decided to remove the obstacle in law for acupuncture in Maryland.”

At that time, there was a five-person committee representing the Governor and State of Maryland in the hearing. The MD’s representative who attended that hearing was a very, very famous neurosurgeon from John Hopkins Hospital, a ‘top guy’ in the Western medical field, who did not like acupuncture and tried to block the acupuncturists’ rights. During 1981 to 1982, Dr. Coan and his colleagues were involved in acupuncture licensing legislation in Maryland.

“Dr. Lixing Lao once was Dr. Coan’s colleague. He recalled, “I participated in the events of AAWM, because I taught a point- locating class for National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) acupuncture examination preparation for the Tai Sophia Institute in 1986 as a part-time job, while I was a PhD candidate of physiology in the University of Maryland. Tai’s teaching, focusing on five-element acupuncture from England, is very different in content from traditional Chinese medicine (TCM), the main stream of current Chinese medicine. Dr. Yin-sue Kim attended that class and invited me to participate in Dr. Coan’s monthly events. I actually joined them in 1987. One day, we got interest to start an acupuncture school with focus on TCM in Maryland. So, several people became involved in this topic. After the normal meeting completed and other acupuncturists left, we discussed the school issue. The school was started in late 1991, and the first class was in 1992.”

The school was called the Acupuncture School of Maryland, and later, Maryland Institute of Traditional Chinese Medicine (MITCM). After eight years of preparation, the school was initially started in a Catholic elementary school where it held lectures in the evening. After several years, it moved into a professional building in Bethesda, Maryland, which was very close to a metro station, and had all lectures during normal hours. “I was the founder and the first president of the school, and ran the school by myself for two years. My daughter worked there as a secretary.” Dr. Coan said. According to Dr. Lao, Dr. Coan spent a lot of energy, time, and even his own money for the school. Before the school could become financially independent, Dr. Coan lent his money to the school for support. The teachers at the school, mostly from mainland China and well-trained in TCM, included Drs. Lixing Lao, Jingyuan Gao, Eugene Zhang, and more. “Dr. Lao and Dr. Gao were fantastic teachers and scholars, when I was the president there, I attended their lectures for two years. I should give them my heartfelt praise,” Dr. Coan said. The first graduates were twelve students in December 17, 1994. MITCM was very sound in its academic and financial condition. It was a prestigious TCM school on the east coast. However, it closed at the end of 2002.
During the 1980s to 1990s, Drs. Coan, Wong, Lao and Bob Duggan (the founder of Tai Sophia Institute) worked as the main board members in the Acupuncture Board of Maryland for many years. The Board is a state government agency that is in charge of acupuncture licensing and administers acupuncturists’ practice.

5 The founder of the American Association of Acupuncture and Oriental Medicine

Almost ten years passed from the opening of the first acupuncture center of the United States in 1972. In more and more states, such as Nevada, Maryland and Massachusetts, acupuncture legislation got passed. More and more patients considered acupuncture as an option, and more and more students studied acupuncture and Oriental medicine in the United States and became acupuncturists. These led to the birth of a national organization for the acupuncture profession[2].

Dr. Coan and Louis Gasper, PhD, were co-founders of the American Association of Acupuncture and Oriental Medicine (AAAOM). Dr. Gasper, who died in 2004, was a professor at Los Angeles International University. They sent letters nationally to invite people to attend the first AAAOM meeting at the Los Angeles International University on June 27, 1981. Neither Dr. Coan nor Dr. Gasper practiced acupuncture; however, they are acupuncture believers. The 75 attendees included MDs and dentists who used acupuncture, acupuncturists (non-MDs), and MDs who did not use acupuncture themselves but supervised acupuncturists, like Dr. Coan, as well as friends of acupuncture or those with interest in acupuncture, like Dr. Gasper. The first board was elected at that meeting, and consisted of seven members: two MDs, four acupuncturists, and another doctor without indicating designation. Dr. Coan served as the treasurer. At that time, MDs were the largest groups represented at that meeting. The second AAAOM meeting, held at the Del Coronado Hotel in San Diego in March, 1982, had a much higher attendance than the first. Most of attendees were acupuncture and Oriental medicine (AOM) practitioners. In the third AAAOM meeting, held at the Shoreham Hotel in Washington, D.C. in May, 1983, non-MD AOM practitioners strongly protested MD members’ intentional delay of AOM development, tension between the MD acupuncturists or supervisors, and the non-MD practitioners surfaced without resolution, resulting in all of the MD members walking out of AAAOM except for Dr. Coan. In that difficult time, Dr. Coan was elected as the new president of the AAAOM, which just became AOM practitioners’ own organization. “I was president of the second board and then vice-president of AAAOM for over ten years. During those years, I helped thirteen states finalize acupuncture legislations,” Dr. Coan said.

“I gave testimonies in person in twelve states’ hearings for acupuncture legislation, gave testimony over the phone for Alaska (I did not go there, it is too far),” Dr. Coan said. He wrote the name of thirteen states for us on a paper with his hand, slight-shaking due to the stroke: Alaska, Delaware, Maryland, Missouri, New Hampshire, New Jersey, New York, North Carolina, Rhode Island, Utah, Vermont, Virginia, and Washington, D.C.

“In Utah, there were twelve MDs who were strongly against acupuncture that attended the acupuncture legislation hearing. A representative of the AMA came too. The side that is in favor of acupuncture had only two people in attendance: one acupuncturist and me. The MDs tried to make the law to block all non-MD acupuncturists to perform acupuncture. The reason is that such non-MD acupuncturists had not had the appropriate medical education as MDs. I asked, ‘In your MDs’ clinics, there are nurses who use needles. How many years were these nurses required to study in Nurse Schools?’ They replied, ‘Three years.’ ‘Acupuncturists have education and training for four to six years, longer than the nurses. If the nurses have right to use needles, acupuncturists should be overqualified to use the needles under the supervision of a MD.’ I protested. And then, a MD stood up and said, ‘acupuncture is not useful to treat carcinoma. Acupuncture will cause carcinoma patients delay in getting the right treatments. So, acupuncture will harm patients.’ I stood behind the sponsor who wanted to introduce the acupuncture legislation and gave him the reply of our side. He responded according to my words, ‘Okay, you said acupuncture harms patients. Could you call your clinic and let your secretary use expedited mail to mail me a real medical record which indicates that acupuncture harmed your patients by tomorrow? I will pay the shipping fee.’ The doctor could say nothing. So we won the hearing, and acupuncture legislation passed.” Dr. Coan smiled, “Acupuncturists should remember, never say you could treat cancer (by acupuncture only, although you may help such patients to some extent). In the hearings, the MDs always used this as an example to block acupuncture legislations.”

Regarding Vermont, Dr. Coan said, “During the hearing there were also only two people in favor of acupuncture: a local acupuncturist and me. We won. The weather there that year was extremely cold, and this lady (the acupuncturist) had no money to pay for a hotel for me. So, I stayed in her house, without any heating, for one night. I used ten cotton blankets. That is an unforgettable experience.”

“In 1988 in Virginia, there were five surgeons in attendance who tried to block legislation which allows acupuncturists to practice acupuncture; I went there with In-Su Kim, a Korean acupuncturist, to fight with them,” Dr. Coan recalled. According to a report from a newspaper[7], at that time in Virginia State, the law made by MDs only allowed licensed MDs to practice acupuncture. Such MDs only had 100 hours of study
and 100 hours of practice in acupuncture training. The acupuncturists, mostly with 4 to 6 years extensive training, could not practice acupuncture. Dr. Coan protested in the statehouse, “This law is unjust, unfair, and immoral.”

Per the arrangement of Dr. Coan, on June 22, 1979, George Brown, Jr., an acupuncture skeptic, had acupuncture during a hearing in Congress of the United States. Dr. Grace Wong, Dr. Coan’s partner, did acupuncture on him for smoking cessation; it was very successful. At that time, Brown was the Chairman of the House Science, Research, and Technology subcommittee. It was a breaking news, reported in many newspapers.

As another pioneer in the acupuncture profession, Dr. Finando, commented on Dr. Coan, “He campaigned and lobbied anywhere and everywhere to lobby for acupuncture.” Not only did he campaign and lobby for acupuncture anywhere and everywhere, his mother influenced by him, also became a volunteer lobbyist for acupuncture.

It is true that Dr. Coan is a great hero of the acupuncture profession, even though he did not insert an acupuncture needle in any patient. He is an MD, but he has contributed his dedication and whole life to support and promotion of acupuncture; all of this as a volunteer.

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7 Competing interests

The authors declare that they have no competing interests.

REFERENCES