Dr. Yeh-chong Chan (Y.C. Chan) is one of the earliest acupuncturists in the United States (US). He served for seven years in the first acupuncture center in the US, which was established in Washington, D.C. in 1972. In 1979, he moved the clinic to Rockville, Maryland and continued to practice acupuncture there for over 30 years. He is a well-known licensed acupuncturist (LAc), one of the developers of the acupuncture profession, and a scholar of acupuncture and traditional Chinese medicine (TCM). He has treated two US Governors (In the US, the title Governor refers to the chief executive of each state or insular territory and the political and ceremonial head of the state.) and many sports stars. He is the author of books entitled *Acupuncture Practice in the United States* [1], *Dr. Chan’s Cancer Healing, Prevention and Self-healing*, and others.

He has a historic photo with Dr. Yao Wu Lee, taken on October 31, 1973 in Washington D.C., when two famous scholars who were interested in developing acupuncture in Taiwan, Dr. Yu-jin Chen (陈毓锦, President of Taipei Mental Hospital) and Professor Wei-san Huang (黄维三, Professor of China Medical College, Taichung, Taiwan) visited the Washington Acupuncture Center to get first-hand experience. Dr. Chen worked in our Washington Acupuncture Center for eight months, while Dr. Huang worked for three months, so they were my acupuncture colleagues at that time.

In the first article [2], there are several places that need to be corrected. (1) Chinese doctors’ names: my name is Yeh-chong Chan (Yick-chong Chan, or Y.C. Chan in short; 陈奕昌, pseudonym 陈昌; 陈一强, Dr. Greg Chen is not correct). The other three doctors were Dr. Yi-fan Zhang (张逸帆, Dr. Yufen Jiang or 严玉凡 is wrong), Dr. Ru-lin Jin (金如霖; Yulin Jin or 金玉林 is incorrect) and Susan Ho (何素嫦; Susan He is wrong). (2) The newspaper’s name Washington Times should be
replaced by *Washington Star News* (*Washington Times* was established in 1982). (3) The Washington Acupuncture Center was open in Washington, D.C. for almost seven years (1972-1978). After Dr. Lee and several other major doctors moved to Florida in 1976, dozens of employees here came and went. All worked just for several weeks to several months in the center except for Dr. Louise Wensel and I who worked until the center closed due to the worsening of Washington, D.C.’s political environment. Then, I moved the practice to Rockville, Maryland (moved to *Chinatown in Washington, D.C.* was incorrect). Recording the history should keep everything correct, including the time, people and location. Any error should be avoided.

From 1972 to 1975, there were 11 acupuncturists (all Chinese), 8 Western medical doctors, 60 to 70 assistants and nurses in the Washington Acupuncture Center in Washington, D.C. Our acupuncture teams paired every acupuncturist with other four personnel, such as interpreters and assistants. At its most prosperous time, the center had about 100 employees. It was at one time bigger than the center Dr. Ralph Coan belonged to (Acupuncture Center of Washington).

Dr. Coan was one of the very few Western medical doctors interested in acupuncture at that time and became a pioneer of the acupuncture profession. In recent years, he suffered several strokes. I treated him seven times with acupuncture, and he had much improvement. On September 15, 2012 we met each other by coincidence in a hospital for a yearly check-up. It looked like he recovered very well, but his overall condition was much worse than that during his healthier times. In the article of his interview[3], some parts were written thoroughly, some were too brief and there was information missing. I understand it must be very difficult to interview a person who has disability in both memory and speaking.

The second article[3] may give readers the misconception that the Acupuncture Center of Washington and the Washington Acupuncture Center belong to the same institution. Actually, they were separated in 1973-1974. They no longer belonged to one professional group. Starting in 1974, Dr. Wensel was the director of the Washington Acupuncture Center while Dr. Coan was the director of the Acupuncture Center of Washington. In the first article[3], you also did not clearly separate these two centers. As I like to keep notes, I still have some precious old records for the history of that time.

**Fan notes:** according to Dr. Yao Wu Lee, he opened the Washington Acupuncture Center in April, 1973, while he still administered the Acupuncture Center of Washington which opened in December, 1972. These two centers were separate, independent centers of business, but still belonged to the same business partners, Dr. Yao Wu Lee, Arnold Benson and Charles Newmark, until the partnership separated in 1974. So, Dr. Lee treated these two centers as one group (1973-1974) most of the time when I interviewed him.

Chan: As for the acupuncture clinical trial of low back pain[3], which was published in 1980, it was conducted by the Acupuncture Center of Washington (Dr. Coan’s center) and the Acupuncture Clinic of Maryland (my center). In Dr. Coan’s center, Dr. Ralph Coan, Dr. Grace Wong (黄国贤), and one assistant participated in this program. While in my center, there were four acupuncturists, three Western medical doctors and three assistants involved. This program was supported by us and totally followed the Western medicine clinical trial standard of that time. We did all volunteer work during “acupuncture fever”. At that time, there were few public funds for acupuncture study, and it was very hard to persuade medical doctors to participate in such a study due to lack of pay or interest. It was very important to get the endorsement of the American Medical Association (AMA). If the study was conducted by American acupuncturists alone without Western medical doctors it was hard to get credit by the so-called US medical “mainstream” like the AMA. This was also the case if the study was conducted by the Chinese acupuncturists in China, or even by Western-trained doctors or researchers not in the US. So, our study was a rare case, and the conclusion of this study was endorsed by the AMA. They gave positive reports. As you know, in the US, anything related to medical practice or research (no matter if it is a medication, or a device or technology) must be tested or judged by the US Food and Drug Administration (FDA) and the AMA. After that, the general public and patients will have confidence in it and accept it. Our study was completed in the late 1970s and
published in 1980, more than 30 years ago, so many doctors or acupuncturists (or say, TCM doctors) now may feel that this was a small and unimportant study. It actually was a huge milestone at that time, was widely reported in the US, and was listed as one of the key documents in the records of the US Congress in 1979 during the 96th Congressional Hearing on Acupuncture. That our colleagues (in the Acupuncture Center of Washington and the Acupuncture Clinic of Maryland) did such work and spent their own money and time was not for their personal fame, but for the acupuncture profession as a whole and for laying a solid base for acupuncture development in the US. I recorded many details, and wrote several short articles in both English and Chinese, and a sixty-page-long article which was not published. When my schedule is available, I hope that I can publish them as a book in the future.

**Fan:** Let’s talk about your personal experience. I heard that you were a very dedicated person in the acupuncture profession.

**Chan:** I was born in the winter, 1942, now just 70 years old. It is hard to imagine that I am still alive — 30 years ago, in 1983, I almost died due to a terminal cancer (Fan notes: Johns Hopkins Hospital’s diagnosis was “terminal stage of lymphatic cancer”). Engaging acupuncture had harmed me, also helped myself, why? In the beginning stage of the acupuncture profession in the US, I had participated in numerous meetings, had been involved in endless political fights and lawsuits for protecting the acupuncture profession’s development, and saw numerous patients in my clinic every day, which depleted my energy and harmed my health. You see, just in my daily work as an acupuncturist, there is not only the manual work of inserting needles, but also talking with the patients for diagnosis, educating them, and answering their questions. As a healthcare provider, I spoke with about one hundred patients and their companions, as well as our doctors and assistants every day, and worked 10 to 12 hours a day. At home, I also had a writing hobby, such as correcting the inaccurate statements published by newspapers or journals. Such hard work needed both an iron-like body and a steel-like will. Doing acupuncture also helped me. I was severely sick. However, I used acupuncture, dietary adjustment and Qi Gong for myself, and after several years of self-adjustments, I survived very well for 30 years.

Recently, I was very proud to learn that my cancer-healing formula for cancer-healing, in clinical work, scientific studies, and various acupuncture conferences. This program was reported during my presentation at the 4th World Conference on Acupuncture in New York in 1996. There were more than 1 200 professional acupuncturists, with participants from 42 countries who attended this international conference. According to the records, about 40% of the attendants were medical doctors; the others were acupuncturists and scientific scholars as well. Combining the ancient wisdom and experience, as well as current technology and research, I am hoping my method will be more helpful to the cancer healing (Chan notes: “healing is different than curing”). We understand that healing cancer must be performed judiciously, and only after very careful consideration of a number of factors, such as patient’s self-confidence, family commitments, selecting medical providers, as well as changing the lifestyle dramatically, and then acupuncture will play an important role in the healing process. If an acupuncturist claims to cure cancer using acupuncture alone (we have seen the advertisement in newspapers for many occasions), it is considered misinformation.

My acupuncture skills are partially from my ancestors, so I started to see patients even I was a teenager in Guangdong Province, China. At that time, acupuncture and TCM were not important to many people and the government because people liked Westernization. Some people laughed at me as I was interested in a “sunset profession” (Fan notes: meaning acupuncture or TCM would be banned by the government, and replaced by Western “scientific medicine” little by little). However, I said “never mind” to this, especially when I saw my patients recovering, which gave me a great sense of achievement.

In early 1973, when I became an acupuncturist (Fan notes: at that time, called TCM doctor) in the Washington Acupuncture Center, I was 29 years old. Dr. Yi-fan Zhang, Dr. Shuyu Li, Dr. Jiayan Ji, Dr. Huachen Lu, Dr. Huoren Fang, Dr. Yangzhai Xiu, Dr. Ru-lin Jin, David P.J. Hung and Dr. Chingpang Lee were about sixty. So, at that time it seemed that acupuncture was an old person’s profession. I was the youngest one among my colleagues and was called the “whiz-kid” acupuncturist. Actually, we belonged to two generations.

When a new patient came and registered with our welcome center, seven “welcome misses” (aka receptionists) of the center would ask and record the patient’s basic condition and arrange the patient to an acupuncture team after initial examination with one of the medical doctors. The patient with complicated conditions would be seen by Dr. Wensel first, because she was the medical director. Our patients included many famous politicians, community leaders, professional elites, judges, so called VIPs, as well as many ordinary people.

I treated two former US Governors: Mr. Lawton Chiles (1991–1998, served as the Governor of Florida) and Mr.
George Wallace (1963–1967, 1971–1979 and 1983–1987, served as the Governor of Alabama). Governor Chiles, who was a US Senator when he saw me, was assigned to my acupuncture team for the initial evaluation and treatment. He was satisfied with my treatments so after he became the Governor of Florida, he still came to see me and brought his wife and friends for acupuncture treatment as well. He had many acupuncture treatments, so he was an acupuncture believer. Based on my influence, his contributions had significant impact on the acupuncture legislation in Florida, one of the four largest states for acupuncture in America. For example, he insisted that an acupuncturist is a doctor, so in Florida, an acupuncturist has a higher social status than that in most other states, because the state gives the title to acupuncturists as acupuncturist physician (AP), not LAc as in other states. Mr. George Wallace’s spine was severely injured by an assassin’s bullet during his presidential campaign in May, 1972, which caused his leg paralyzed. After he terminated the treatments by Dr. Ling Sun Chu, a New York acupuncturist, he came to the Acupuncture Clinic of Maryland. I treated him for back pain and insomnia several times. Later, when he returned to Alabama, he still referred patients to my center. The Assistant Secretary for East Asian and Pacific Affairs of the Department of State, Mr. Gaston Joseph Sigur, Jr. had lower back pain, and was also treated by me several times and had significant improvement. Performing acupuncture on Governors and high level government officials was not trivial. I took great caution, and I hoped for these special patients to get positive results. At that time, the acupuncture profession in the US was in its earliest stages. It was severely criticized by some conservative medical doctors and politicians. I felt that if these Governors got a bad experience from me, it would cause serious damage to the development of acupuncture in the US, and my professional career would also be terminated. Until now, I still maintain some of their records on file.

Fan: I heard that you were involved in many major events and played an important role which helped the acupuncture profession to develop in the US. What happened in the Congressional Hearing on Acupuncture in 1979?

Chan: I was one of the acupuncturists who attended the Congressional Hearing on Acupuncture in 1979 mentioned above. In that hearing, an AMA representative, Dr. Marion T. Jenkins, provided very negative comments about acupuncture. His conclusion was that acupuncture should not be accepted by American society, and could only be a research topic. All attendants looked at each other and did not say anything, including Dr. Grace Wong and Dr. Ralph Coan! It was such a negative and incorrect statement by Dr. Jenkins, who not only despised acupuncture but also discriminated against Chinese people and Chinese culture. I could not tolerate such negative testimony. Then I spent more than 50 hours writing a six-page defense letter in order to protect acupuncture’s reputation, if possible. This letter was accepted by the Congress and published on Congress records, on the same issue Dr. Jenkins spoke of on the record. This was the only document listed with the AMA’s opinion on acupuncture in that Congress hearing. I felt it was my duty to speak for and defend Chinese quintessence, tradition, history, and culture from the distortion, discrimination and insult. The AMA representative kept silent during my defense which actually indirectly indicated my success. The six-page defense letter is now kept in the Library of Congress as a document of historical literature.

Fan: Could you discuss the details of the Congressional hearing in 1979, including the purpose, the people who gave the testimonies, and the background of Dr. Jenkins?

Chan: The hearing purposes included two issues: (A) the acupuncture program was excluded from the “The US-China Agreement on Cooperation in Science and Technology, 1979”; (B) to examine and explore the current view of the US medical professions on acupuncture. These were two important issues related to the practice of acupuncture in the US.

Procedures of the Congressional hearing on acupuncture in 1979 were: (A) Dr. Ralph Coan’s testimony which you have reported in your previous article[3]; (B) Dr. M.T. Jenkins’s negative testimony on acupuncture; (C) My opposition statement “In Rebuttal of Dr. M. T. Jenkins Testimony”.

The following is Dr. Jenkins’s background. (1) He was the president of the American Society of Anesthesiologists in 1972. Also, he was one of the authors of a position statement on acupuncture research represented by the AMA. (2) Dr. Jenkins was one of the twelve physicians in the AMA delegation invited to visit the People’s Republic of China on July 9, 1974. In addition, he was an official guest of the Chinese government. He had a tightly structured and very busy schedule during his visit, and all medical staffs in the hospitals and medical schools he visited were expected to be well prepared and demonstrate their skills efficiently. (3) During his trip to China, he visited medical facilities in seven cities, including thirteen hospitals and five medical schools designated by the Chinese as Western-style systems. Also included were three TCM hospitals, one research institute, health services in three factories, and health services in three communities and he also had a meeting with the Minister of Health. (4) Dr. Jenkins participated by monitoring six hospitals for acupuncture anesthesia; all 12 American physicians attended the observations of many surgical procedures with acupuncture anesthesia, but Dr. Jenkins was still skeptical of all procedures. (5) In many outpatient acupuncture clinics, Dr. Jenkins and the other eleven American physicians observed patients being treated for many health issues.
Dr. Jenkins was considered one of the acupuncture experts who represented the AMA to testify in the US Congress in 1979 in order to regulate acupuncture practice by American licensed physicians. On the other hand, he suggested that acupuncture should not be made available to the US general public. As a result, many mistakes and confusion occurred during his testimony. If the Congressional leaders had followed his advice and direction, then acupuncture practice may have faced a crisis in America.

My document “In Rebuttal of Dr. M.T. Jenkins Testimony” was the only statement of opposition to challenge Dr. Jenkins’s testimony in the US Congress. The rebuttal mainly included following contents. (1) “Dr. Jenkins failed to address or even to acknowledge the glaring inconsistencies between his recommendation on acupuncture practice to the Texas State Board of Medical Examiners, and the rest of his testimony to the effect that the US medical schools are doing virtually nothing to train physician skills in acupuncture.” (2) Dr. Chan “objection to Dr. Jenkins’s statement that the progression of disease to an incurable state, owing to a patient’s temporizing with acupuncture, in term of public health, next to death….”; (3) “Dr. Jenkins reading into the record of a certain passage from the 1972 position on acupuncture of the American Society of Anesthesiologists was, I believe, irresponsible. Dr. Jenkins’s averment that the position is still pertinent makes it doubtful that the offensive passage was included through oversight….” (4) “Dr. Jenkins was in error where he stated: we knew there were many meridians; I have forgotten how many; there were 13 or 26….” (Dr. Chan made a correction); (5) “Dr. Jenkins’s probably garbled account of tonsillectomies in a TCM Hospital creates the impression that Chinese doctors do not hesitate to inflict barbaric treatment on little children who are unable to endure it, save for the virtue of their alleged ethnic stoicism… it is difficult to know exactly what it was that Dr. Jenkins witnessed, but I suspect it was no more than an experimental form of moxibustion being used for difficult cases;” (6) “Dr. Jenkins’s statement that acupuncture has not produced very satisfactory results in the past is contradicted by acupuncture’s wide use in China during all the thousands of years over which its theory and practice evolved. Additionally, Dr. Jenkins tried to cast doubt on Chinese acceptance of acupuncture by citing an 1 822 edict on the Imperial Medical Academy banning acupuncture practice. It is important to recall that imperial bodies did not issue edicts after long and reasoned debates to which all interested parties contributed their views…”

Fan notes: this Rebuttal was documented in the 96th US Congressional Hearing Records, pages 277-282). Dr. Jenkins’s 26-page testimony was full of confusion, mistakes, as well as discrimination against non-MD acupuncturists.

Fan notes: Since Dr. Jenkins had an important position, his testimony had a significant impact on the practice of acupuncture in the US. Fortunately, Dr. Chan had the opportunity to correct, argue, and challenge Dr. Jenkins’s testimony. Dr. Chan’s correct and true document becomes a permanent historical record in the US Congress for future acupuncture reference.

At that time, some people warned me — offend the police or judge, but do not offend the AMA! Because many AMA representatives were medical authorities who could significantly influence the government’s policy and activities, if they wanted to seek revenge on me, I would have been deported out of the US. However, I was an honest young man and could not endure the incorrect and insulting statements about acupuncture and Chinese culture.

Fan: Were you involved in the FDA reclassification of acupuncture needles (1994) and the National Institutes of Health (NIH) consensus on acupuncture (1997)?

Chan: I was involved in activities urging the FDA to re-label acupuncture needles. Prior to that, I helped FDA’s investigation on acupuncture during the FDA hearing on acupuncture by providing them my personal views, suggestions, as well as a lot of evidence and many documents on acupuncture.

(1) Documents: I gathered many books, journal papers, newspaper reports, letters and drafts related to acupuncture both in Chinese and English, even my receipts for buying acupuncture needles in the 1950s, my student identification, my school certificates, etc. (2) Acupuncture needles and devices: such as various acupuncture needles used in historical and current clinical practice, silver and gold needles, nine-acupuncture needles, plum-blossom needles, moxibustion devices, electric acupuncture devices, and electric acupoint-stimulating devices and computers for acupuncture treatments. I did real practice demonstration for the experts to see. (3) The director of the FDA investigation on acupuncture, Dr. David Lytle, responded to my hard work for the FDA to reclassify acupuncture needles as clinical devices, and became my patient for his innumerable sports injuries. From 1985 to 1998, he had dozens of acupuncture treatments in my clinic with very positive results. After each treatment, we always discussed the legislation issues surrounding acupuncture. At last, on March 29, 1996, the FDA completed the investigation procedure and published a new regulation classifying acupuncture needles as clinical devices, which removed a big barrier for clinical application of acupuncture in the US.

On June 24, 1999, when he was going to retire from the position of the FDA director of the Office of Science and Technology, Center for Devices and Radiological Health, Dr. Lytle wrote a thank-you letter to me, which indicated the significance of my role. The letter said: “...Lack of understanding of acupuncture has been a long-standing barrier to acceptance at the federal level. Your patient explanations and historical perspective were invaluable in
bringing about a long-awaited, ground-breaking evaluation of devices used in acupuncture. Without your help, my role in the regulation of acupuncture needles would have been far, far less effective. The reclassification of acupuncture needles by the FDA and the acceptance of acupuncture by the NIH Consensus Development Conference have been the high points…Thank you for helping to make this possible.”

**Fan Notes:** the FDA regulation made by the AMA and fifty states’ conservative MDs in 1972 treated acupuncture needles as investigational devices, which aimed to block the acupuncturists (non-MDs) from treating patients in clinical practice. This was why many states treated acupuncture as illegal practice and the insurance companies refused to pay for acupuncture treatments. In 1994, the FDA held a hearing on acupuncture[^9] and in 1996 the FDA formally relabeled acupuncture needle as a clinical device, which was a milestone in acupuncture history.

**Chan:** I was also actively involved in the 1997 “NIH Consensus Development Conference on Acupuncture” not because I was in the conference, but as the only acupuncturist interviewed by the National Broadcasting Company (NBC) News in a special report.

The conference was held from November 3 to 5, 1997, which was a significant endorsement for acupuncture development in the US, as well as other countries. To support this important event, NBC News, as a national television station, planned to interview a prestigious acupuncture doctor and his/her patient(s) as part of their programming. During this interview, NBC would give acupuncture an overall decisive, authoritative, and historic positive conclusion, which was unlike reports from the earlier years of “acupuncture fever” that were tinged with experimental or tentative tones. This report was the conclusion of an era, after acupuncture had come into the US for one-quarter century, from being nonexistent to commonplace, from illegal to legal, from rejection to acceptance. I was honored to accept that interview. On November 3, 1997, at 1:15-3:45 p.m., Nancy Ellard, one of the producers at NBC, interviewed me in my Acupuncture Clinic of Maryland, during the first day of the conference. On November 5, 1997, at 4:30 pm the prime time, the reporter Ms. Campbell Brown in Capital Hill reported the conference completed as the breaking news, with a real acupuncture story — my treatment on patient Ms. Rose Brown (with authorization) who suffered from nasal allergy. The reporter said after a 30-minute acupuncture treatment, the patient felt her nose unobstructed, throat much more comfortable, and very calm and energetic. This report was rebroadcast the next morning. As you know, the general public was very much interested in a real clinical report on a TV show which included a patient’s feeling, reaction and results, instead of reading about it in scientific papers or participating in a long-winded meeting. So, that NBC special report had great influence on the public. In that interview, I talked about acupuncture’s history in the US which began in 1972, quickly reaching the peak of “acupuncture fever”; then a decline in interest and practice; and after a few years, increasing in popularity again; the legislation in each of the states, lawsuits, politic conflicts, scientific studies, as well as real acupuncture practice and patients’ interests. Both the interviewer and I were very happy and excited.

The NIH consensus on acupuncture might be held only once, just as the 1979 Congress hearing on acupuncture, because today’s acupuncture already is on the right track. There is no longer a need for such a hearing or consensus. The NIH already laid a milestone for acupuncture.

I also recorded acupuncture history in the US, which helps acupuncturists, patients, and the general public in understanding acupuncture. My book entitled *Acupuncture Practice in the United States* was published in 1987. The last copy of the book was kept by the California Historical Museum in 2006.

I was involved in calling for the supervision of ethical practice. I wrote a letter to the National Certification Commission of Acupuncture (NCCA; now National Certification Commissions of Acupuncture and Oriental Medicine, NCCAOM), and asked for proper guidance and procession.

I wrote to newspapers and other media to correct mistakes of their reporting on acupuncture. I felt we must correct them directly and as soon as possible to avoid perpetuating misinformation, which can hinder acupuncture practice and development.

**Fan:** I heard you and your colleagues were involved in acupuncture lawsuits and legislations. Could you please tell me something about that?

**Chan:** I personally provided important acupuncture documents and positive information and helped acupuncture legislations in three states and one district: Maryland, West Virginia, Florida and Washington, D.C.

Many people may feel that acupuncture legislation work must be easy and smooth in the state of Maryland because Maryland is very close to Washington, D.C. The Acupuncture Center of Washington and the Washington Acupuncture Center were the first two centers in the US in the early 1970s and had a huge influence on the beginnings of acupuncture practice in many other states. Maryland acupuncture legislation was completed in 1973 (Fan notes: Maryland was one of the three earliest states to have acupuncture legislation in the US in that year). However, the fact was not like that. As you know, the NIH and the FDA are located in Maryland, as are some top American medical schools such as Johns Hopkins Medical School, and hospitals that have been listed as the top US medical system for several decades. Such conditions directly affected the acupuncture legislation procedure. Of course
we were practicing acupuncture in Washington D.C. for so many years, and we got some experience in legislation and lawsuits. However, more important were the many people with different backgrounds devoting their time and effort to fighting for acupuncture legal rights.

At the beginning of acupuncture legislation, due to the strong resistance from the medical society, the regulation made by the Board of Medicine aimed to protect medical doctors’ interests and rights and to limit acupuncturists’ practice as much as possible. Acupuncture legislation in Maryland passed through three stages:

1. 1973 to 1981 belonged to the beginning stage. In 1973, Maryland had the first acupuncture legislation which required all acupuncturists to work under the supervision of Western medical doctors. However, not many medical doctors knew acupuncture and most of them were afraid of taking risks to accept acupuncturists in their clinics. At that stage, there were actually only five Western medical doctors who expressed interest in being the supervisors for acupuncturists.

2. At the end of 1982, Maryland passed the second acupuncture legislation, which was called the Registered Acupuncturist Act (RAC). It allowed acupuncturists to become registered acupuncturists.

3. In 1994, Maryland passed the third acupuncture legislation, which was called the Licensed Acupuncturist Act (LAC). All acupuncturists must get a license to practice acupuncture.

Based on the regulation, if a person graduated from a US medical school (with an Doctor of Medicine or MD degree), but did not get a license for practicing medicine, he/she could not call himself/herself a medical doctor or doctor. (Any alien MD could not practice medicine or call himself/herself a medical doctor, if he/she does not get a US medical doctor license. The AMA publishes strict rules to limit the number of medical doctors in the US.) Since 1994, acupuncturists in Maryland became a new set of healthcare providers and were able to independently see patients. This caused many alien MDs to change their specialty and learn acupuncture to become LACs.

For acupuncture legislation, there were many more difficulties in Maryland than in other states. Based on the same reasons, in Maryland, it was also very difficult to start an acupuncture and TCM school. Currently, there is only one left, the TAI Sophia Institute (Fan notes: its name recently changed to Maryland University of Integrative Health (MUH)). Our prestigious school Maryland Institute of TCM closed in 2002 due to many reasons, mainly involving too many political challenges.

In 1982, the legislation procedure and the content of RAC passed in Maryland. It had several unique features not present in other states’ legislation.

1. Medical doctors’ supervision: The regulation said such MDs should have 35 h of training in acupuncture; the number of acupuncturists that each medical doctor can supervise should not be over five — You see, you have to have a medical doctor who wanted to be your supervisor, and he/she had to have 35 h of acupuncture training. It made things so difficult! (Fan notes: Dr. Coan’s clinic had one medical doctor himself; Dr. Bob Duggan and Dr. Dianne Connelly’s clinic had one medical doctor; all of the other three medical doctors were in Dr. Yeh-chong Chan’s clinic.)

2. The regulation had a section discussing the relationship of teachers and students in an acupuncture apprenticeship. The apprenticeship was a notion of mine. The reason is some TCM doctors and I believed that the study of acupuncture or TCM is more effective under an apprenticeship than through a formal school education. Apprenticeship was a tradition in acupuncture and health care professions as a whole, over thousands of years. At that time, I had ten apprenticeship students and assistants who wanted to get the acupuncturist registration. However, my notion was intensively opposed by Bob Duggan, who is the leader of Traditional Acupuncture Institute (i.e., TAI Sophia, now MUH) in Maryland. If this section passed, it might have significantly affected that school’s development. After the negotiation, we got an agreement — I agreed to remove the notion and he agreed to add something in the regulation to help my apprenticeship students get the registration. Was such a deal good or bad for education of acupuncture or TCM? I will let history be the judge. During that time, my students and assistants who got the acupuncture registration were: Shanshan Su, Sumei Zhang, Houng King, Connie Bitaga, Thomas Sexton, Lucy Wang, S. Tran, Marria Plat, B. Leon, and some others.

3. Financially supporting the re-election of senator who sponsors acupuncture legislation. Senator Arthur Dorman was one of the sponsors who introduced the acupuncture bill to the Senate. At that time, the end of his term was soon approaching. Our patients and acupuncture professionals donated a lot to help him in the re-election for serving another term.

4. The political consideration over the members of the acupuncture advisory committee. As you know, there were very few acupuncturists in the 1970s in Maryland and even few acupuncturists who had dedication for public service. I was an acupuncturist who strongly wanted to serve in the acupuncture advisory committee in Maryland. At that time, there were two main groups of acupuncturists who applied to this position — TAI had three: Bob M. Duggan, Dianne M. Connelly (female), and Warren M. Ross (MD). Our Acupuncture Association of Washington Metropolitan (AAWM) had three: Grace Wong (female), Ralph M. Coan (MD), and me. Thousands of patients and some acupuncture professionals sent letters to the Governor and the Board of Medicine supporting my application.
However, the Governor appointed the first five people who served in the first acupuncture advisory committee. I was not in there — only because the Governor wanted two medical doctors and two female acupuncturists for balance in that committee (Fan notes: Bob M. Duggan as the president), a totally political decision — this is the history! (5) Arrange for the Governor of Maryland to visit and observe acupuncture practice in China. This one was the biggest challenge at that time.

In 1979 and 1980, when the second acupuncture legislation was introduced, most of the Senate and House of Representatives of Maryland who were either medical doctors themselves or had close relationships with pharmaceutical companies or the traditional Western medical system, tried to block the legislation. As acupuncturists professionals, we worked hard to get patients’ and other people’s support. For example, I: (1) sent letters to more than 1,000 patients asking for their support; (2) published articles in mainstream newspapers to explain acupuncture; (3) financially support the Senator Dorman’s re-election; (4) lobbied large numbers of patients to attend the acupuncture hearings and to provide the testimonials; (5) drafted the first version of acupuncture regulation; (6) as a delegator of the AAWM, wrote a letter to the Chinese ambassador, Ze-min Chai (柴泽民), to arrange the Governor’s observing of acupuncture practice when he visits China.

As you may know, Maryland and the Anhui Province of China became sister state/province in 1980. At that time, Chinese Vice-premier Li Wan (万里) was the matchmaker when he visited the US and transited Maryland. Later, Maryland State Governor Harry Hughes (1926-2010) planned a courtesy return visit on June 10, 1980. He planned to sign a State-Provincial collaborating plan article in Anhui Province. According to the news, he was the first US Governor to visit China after the historic visit of President Richard Nixon. I am a person who paid much attention to domestic and international news; I reported this news to our acupuncture society AAWM and hoped we could use this good opportunity to give the Governor a deep impression of acupuncture practice in order to help acupuncture legislation in our state. I suggested the Chinese government allow arranging an acupuncture treatment demonstration during the Governor’s visit. All AAWM members agreed with my suggestion, and then I mailed the letter to the Chinese Embassy in two days. In many people’s minds, such a thing would not have gotten results, and since then, we all forgot about this matter.

In early 1982, we participated in a meeting in the state capital of Annapolis to discuss acupuncture legislation again. Governor Harry Hughes attended that meeting too. The Governor told us, when he visited China, he observed a magic acupuncture demonstration, without medication, a patient’s pain dramatically decreased. It was surely our letter that brought about his first-hand observation of the power of acupuncture. Such an event played an important role in acupuncture legislation. Not very long after that meeting, in mid-1982, the Governor signed the acupuncture law. (Chan notes: The Governor’s pen was given to the Acupuncture Clinic of Maryland for display, because the Governor used this pen to sign the acupuncture law.) Also, I believe, among US Governors, Hughes was the only one who observed an acupuncture demonstration during his visit to China.

Fan notes: According to the law, the first step is passing the bill both in the House and the Senate, and then is signed by the Governor. So, the Governor’s positive view towards acupuncture was crucial in the law’s passing.

It was not until 1994 that the third acupuncture legislation was completed, and acupuncturists began their independent practice. Later, to avoid too much interference by some conservative medical doctors in Board of Medicine, the Board of Acupuncture was established in Maryland after a long battle by acupuncturists. From 1973 to 1994, we took a total of 21 years to complete the whole acupuncture legislation. The most difficult stage was from 1979 to 1981. Even after the Governor signed the act into law in 1982, acupuncture practice was still not smooth. Some conservative doctors and other parties intentionally or unintentionally caused a lot of dissension and problems. Our acupuncture professionals had to stand up and fight back. For the RAC Act, the state government still held public hearings and at last in the end of 1983, this act got published. In early 1984, the government started the acupuncturist registration. If one did not experience so many events, it would be hard to imagine and understand the difficulty and resistance of the early years. Since I worked in the first acupuncture center of the US established in Washington, D.C., 40 years have passed. Recalling the experience of the old days seems like a dream.

Thank you very much for conducting a great interview and recording acupuncture history in the US.

Fan notes: Although the first legal acupuncture center in the US established in Washington, D.C. in 1972[9], its first acupuncture regulation was published in 1989[9]. In 1973, there were about 30 acupuncturists worked there under the supervision of medical doctors; however, in 1975-1990, only very few acupuncturists left; in 2012 there are 175 active LAc. In Maryland, in 1973 there were very few acupuncturists; forty years later in 2012 there are 939 active LAc practicing in Maryland, including the acupuncturists working in Johns Hopkins University Hospital, which makes Maryland No. 8 in the number of acupuncturists in the US. Recently, Maryland announced it will include acupuncture as an essential health care benefit (so-called Obama healthcare) in 2014, which means that insurance will cover acupuncture for every resident living in
Maryland. The pioneers in the acupuncture profession have contributed their works for decades, or even their whole professional lives, to make their dreams come true: make acupuncture, a green, cost-effective therapy which will play an increasingly important role in the daily healthcare of the US.

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Competing interests

The authors declare that they have no competing interests.

REFERENCES


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