Dear Members of the Senate Committee on Health Care,

My name is Dr. Arnaud Versluys. I was a long-term Portland resident and now live in New Orleans, Louisiana. I am in opposition to HB 3824, specifically the inclusion of "needle insertion" (Page 3, Line 37) in the physical therapy scope of practice. The term refers to dry needling, a technique that uses acupuncture needles to penetrate the skin and stimulate muscle or nerve tissue—wholly equivalent to acupuncture, as defined in Oregon law.

For many years now, various health professions have been attempting to expand their scope of practice by including acupuncture-like treatment modalities. This is solely aimed at increasing their own healthcare market share, at the expense, in this case, of licensed acupuncturists. These attempts have been undertaken by chiropractors as well. Approval of said expansion of scope of practice is very detrimental to the success and survivability of the acupuncture profession in Oregon. It at the same time puts the public at grave risk.

Legal and Regulatory Conflict

Under **ORS 677.757(1)(a)**, "acupuncture" is explicitly defined as the stimulation of specific points on the body "by the insertion of needles". The statute further affirms that acupuncture includes the use of electrical or mechanical devices with or without needles, which are also marketed under dry needling protocols.

In Oregon, acupuncture may only be practiced by those licensed by the **Oregon Medical Board** under **ORS 677.759**. Unauthorized practice of acupuncture—including any unlicensed needle insertion—is considered the **unauthorized practice of medicine** under **ORS 677.765** and is subject to penalties.

This bill therefore directly **conflicts with established state law** by proposing to allow non-OMB-regulated practitioners (physical therapists) to perform a procedure that falls squarely within the **legal definition of acupuncture**.

The **Acupuncture Advisory Committee** established in **ORS 677.780–785** was specifically tasked with recommending standards for education, licensure, and scope of practice in order to protect the public. HB 3824 undermines this structure by bypassing OMB oversight entirely.

Education and Patient Safety

I personally trained in China for 12 years. My basic acupuncture training alone comprised of 4,500 didactic hours along with 46 weeks of clinical internship. I completed a further 4,000+ hours in my graduate medical education. In Oregon, licensed acupuncturists must show to have completed **2,500 to 3,500 hours of training**, including

800–1,000 hours of supervised clinical education. All this far exceeds the **20–100** hours of training typically offered in dry needling courses for physical therapists or chiropractors. This discrepancy has serious implications for patient safety.

Numerous studies highlight increased risks of adverse events when dry needling is performed by inadequately trained providers:

- **36.7**% of dry needling treatments resulted in adverse events, with **20 major complications** such as pneumothorax and nerve injury (Brady et al., *PM&R*, 2014).
- A Polish study reported 3% pneumothorax, 14% nerve palsy, and 1% hospitalization (Majchrzycki et al., MDPI, 2022).
- Multiple case reports confirm life-threatening events, including bilateral pneumothorax and prolonged nerve damage (Şahın et al., JournalAgent, 2020; Western Journal of Emergency Medicine, 2013).

For these reasons, the term "needle insertion" should be removed from HB 3824. It is legally inconsistent with Oregon law, compromises patient safety, and bypasses established licensure and oversight standards put in place to protect the public.

Thank you for your time and consideration.

Collegially,

Arnaud Versluys, PhD, MD (China), LAc

(503) 780-1369/ Arnaud.versluys@gmail.com

References:

- ORS 677.757–677.785: Licensing and regulation of acupuncture in Oregon
- Brady S, et al. Adverse events following trigger point dry needling: a prospective survey of 20,000 treatments. PM&R. 2014;6(9):847–852.
- Majchrzycki M, et al. Adverse Reactions to Dry Needling Therapy: Insights from Polish Practitioners. MDPI. 2022.
- Şahın N, et al. A Rare Complication Caused by Dry Needling: Bilateral Pneumothorax. Journal Agent. 2020.
- Boissonnault WG, et al. *Traumatic Pneumothorax Following Acupuncture: A Case Series. Western Journal of Emergency Medicine*. 2013.