

Submitter: Alexandra Dewsnap
On Behalf Of:
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: HB3824

Members of the Senate Committee on Health Care,

My name is Alexandra Dewsnap. I am from St Helens, OR, and am a Chinese medicine (acupuncture) student graduating this year. I am writing you 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—functionally equivalent to acupuncture, as defined in Oregon law.

Acupuncture, by definition, is the insertion and stimulation of needles on certain points of the body with or without electrical impulses. What the physical therapists want is to be able to also insert needles on certain points on the body. They want to do acupuncture.

Those who do insert needles without acupuncture licensure, even me as a yet unlicensed student when I am not doing acupuncture under the supervision of one of my licensed teachers, are breaking the law, as stated under ORS 677.759. This is established law, and allowing non-acupuncture licensed professionals of any type to do acupuncture, goes against the law.

As a student of acupuncture, I am completing 2,500-3,500 hours of training with 800-1,000 hours of supervised clinical education, which I have gratefully almost completed. In my education, I have learned the powerful impact acupuncture needles can have positively and negatively. If used correctly, they can provide great healing. If used incorrectly, they can cause serious damage to patients. We are taught again and again and coached hour after hour on how to needle safely and effectively.

Physical therapists who want to do dry needling take a course that is 20-100 hours long. As someone going through extensive training, I know that nobody can learn how to needle safely and effectively in 20-100 hours. I have heard several stories of physical therapists who try to do dry needling/acupuncture and end up damaging nerves and other body structures, causing serious pain and damage to their patients. To be more specific, here are some facts from studies about the adverse effects of dry needling:

- 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 (S,ahin et al., JournalAgent, 2020; Western Journal of Emergency Medicine, 2013).

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.

Citations:

- 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.
- S,ahin N, et al. A Rare Complication Caused by Dry Needling: Bilateral Pneumothorax. JournalAgent. 2020.
- Boissonnault WG, et al. Traumatic Pneumothorax Following Acupuncture: A Case Series. Western Journal of Emergency Medicine. 2013.