

## **Chiropractic and Auricular Therapy**

Doctors of chiropractic are often exploring new forms of therapy which can be beneficial for their patients. Once such theory involves auricular therapy. Chiropractors often question whether their scope of practice permits the application of auricular therapy. Normally, this form of therapy involves the chiropractor's application of microcurrent from a mechanical device to a portion(s) of a patient's ear falls within the scope of practice of chiropractic as defined under Wisconsin law. The microcurrents were non-invasive in nature and were commonly applied to a portion of the ear to stimulate "acupuncture points". The microcurrents are applied for a relatively short duration with a device approved by the Food and Drug Administration.

With this understanding of the procedure, it is necessary to initially review the definition of auricular therapy. Based upon definitions of that therapy provided at various websites (including [auriculartherapy.com](http://auriculartherapy.com), [healthline.com](http://healthline.com), [suite101.com](http://suite101.com), and [kosmixrighthealth.com](http://kosmixrighthealth.com)), it is understood that this theory originated in the 1950's through research by a Neurologist, Dr. Paul Nogier. This Neurologist apparently theorized that sciatica could be treated by cauterizing portions of a patient's ear. Nogier apparently believed that pain in parts of the body can be relieved by needling, cauterizing, massaging, or electrically stimulating regions of the ear. Practitioners of this theory apparently claim that it can be used for relief of pain, addictions, compulsive disorders, and internal disorders. One site noted that the therapy is in the form of "alternative medicine" which is based on the idea that the ear is a micro system with aspects of the entire body represented on the auricula or pinna, the outer portion of the ear, in a fashion similar to reflexology (zone therapy) and iridology (iridodiagnosis). By its very

nature, the therapy is largely regarded as “non-evasive”, easy to self-administer, and without any observable side effects. In evaluating this theory further, it is interesting to note that it is not limited in use by practitioners of acupuncture. In fact, there were several notable exceptions under this theory to the practice of acupuncture:

1. Auricular Therapy considers the ear to be a localized reflex system connected to the central nervous system. In contrast, acupuncture focuses on the ear as an empirical acupoint which serves a specific body function. These acupoints are often referred to “acupuncture meridians”.

2. Per the theory as advanced by the founder, auricular points differ from acupuncture points in that auricular points are movable; while acupuncture points are stationary.

3. Auricular Therapy can be performed using a variety of instruments besides just needles, including needles, laser, message, or electrical stimulation.

4. Under the theory of Auricular Therapy, the practitioner is influencing “nerve endings” as compared to “meridians” as advanced by acupuncture practitioners.

Consequently, this theory has been adapted by a variety of fields of health science, principally involving acupuncture and massage therapy.

A review of the Wisconsin Statutes, case law, and Administrative Code provisions do not appear to contain any express prohibition against chiropractors involvement with Auricular Therapy. As administrative code provisions, particular attention should be given to chapters Chir 4 and Chir 6 from the Administrative Code. These sections contain express prohibitions on certain forms of practice or conduct by a

Wisconsin chiropractor. As of the initial printing of this article, there is no express reference to Auricular Therapy in these sections.

In a further effort to locate any express directive relating to Auricular Therapy, minutes of the Chiropractic Examining Board dating back to January of 1994 through the printing of this article can also be reviewed. Over the years, this Board and/or its legal counsel have occasionally addressed whether specific modalities of treatment fall within the scope of chiropractic. Notably, the Board has reviewed the use of magnets, pulsed electromagnetic device known as the “PAP-IMI” (rejected by the Board 5/15/03), use of Cold Laser Therapy, extremity manipulation (acceptable to Board’s legal counsel 6/28/04), and NANET Therapy (rejected by the Board 4/17/03). Although these opinions do not specifically address Auricular Therapy, they contain a good example of the technique utilized by the Board in evaluation new modalities of care.

In reviewing the regulatory minutes, it does not appear that there is any express evaluation of Auricular Therapy. In the summer of 2000, the Board offered minutes which were intended to address the Board’s overall policy on modalities which are within the scope of chiropractic in Wisconsin. This was one of the Board’s most thorough overviews of policy on the scope of chiropractic provided within the past decade. Again, these policies do not specifically reference Auricular Therapy.

Given this absence of any express evaluation, the use of Auricular Therapy should be analyzed within the current definition of “chiropractic” in Wisconsin. There are three (3) sources for this definition:

1. Wisconsin Statutes §446.01:  
(2) “Practice of chiropractic” means:

(a) To examine into the fact, condition, or cause of departure from complete health and proper condition of the human; to treat without the use of drugs as defined in s. 450.01

(10) or surgery; to counsel; to advise for the same for the restoration and preservation of health or to undertake, offer, advertise, announce or hold out in any manner to do any of the aforementioned acts, for compensation, direct or indirect or in expectation thereof;

and

(b) To employ or apply chiropractic adjustments and the principles or techniques of chiropractic science in the diagnosis, treatment or prevention of any of the conditions described in s. 448.01 (10).

2. Wisconsin Administrative Code Chir 4.02:

(1) "Chiropractic science" means that body of systematic and organized knowledge relating primarily to the identification, location, removal or reduction of any interference to nervous system integrity or nerve energy expression and the resulting change in biomechanical or physiological homeostasis. It is based on the major premise that disease or abnormal function may be caused by abnormal nerve impulse transmission or expression due to biochemical factors, compression, traction, pressure or irritation upon nerves as a result of bony segments, especially of the spine or contiguous structures, either deviating from normal juxtaposition or function which irritates nerves, their receptors or effectors.

(2) "Instrument" means a device employed or applied in accordance with the principles and techniques of chiropractic science, which is used in

the practice of chiropractic to diagnose, analyze, treat or prevent the cause of departure from complete health and proper condition of the human.

3. Wisconsin Administrative Code Chir 4.03:

The practice of chiropractic is the application of chiropractic science in the adjustment of the spinal column, skeletal articulations and adjacent tissue which includes diagnosis and analysis to determine the existence of spinal subluxations and associated nerve energy expression and the use of procedures and instruments preparatory and complementary to treatment of the spinal column, skeletal articulations and adjacent tissue. Diagnosis and analysis may include physical examination, specimen analysis, drawing of blood, blood analysis and the use of x-ray and other instruments.

Utilizing the broadest interpretation of these definitions, it can be argued that Auricular Therapy is a modality which falls within the statutory and regulatory definition of “chiropractic science”. This position can be supported if the application of Auricular Therapy is based upon the concept that the ear is a localized, reflex system anatomically connected to the central nervous system. It is apparent that there is nerve enervation to the auricular emanating from the first or second cervical vertebrae. Moreover, one could argue that the ear is “tissue” whose “associated nerve energy expression” is being analyzed and/or “treated”. This type of broad implication or interpretation of the definitions of chiropractic would need to be similarly extended in connection with acceptance of Auricular Therapy as within the scope of chiropractic.

It is probable that the board and many chiropractors would take the position that auricular therapy should not be the focus of chiropractic treatment for several reasons.

Initially, if the chiropractor is not providing a traditional “adjustment” in relation to the service provided. Second, the ear is not “tissue” adjacent to the spinal column or skeletal articulations. Third, a great deal of the work focused on this area of the body does not typically result in the preservation of patient record keeping. Given these concerns, it may be more practical to argue that this form of care is “adjunctive services” as defined in Chir 10.01. Adjunctive services as “preputory or complimentary” to the actual adjustment and typically do not include a chiropractic diagnosis or performance of a chiropractic adjustment.

In any event, three (3) additional matters should be considered. First, any instrument used in the application of this theory should have general approval of the FDA for the specific use of the device. It is interesting to note that the FDA had addressed the use of a laser device in Auricular Therapy. Second, a chiropractor utilizing a modality of treatment must ensure that he has adequate education prior to the application of new treatment modalities (see Chir 6.02(6)). In researching Auricular Therapy, it should be noted that there is some type of certification available for this modality. Third, the chiropractor must always be aware of the manner by which the modality is promoted or advertised to the public. Particular attention should be given to Chir 6.02(15) relating to advertising, which prohibits any “false, deceptive or misleading” advertising.

In order to avoid any misunderstanding, it would be advisable for a chiropractor extensively involved with aricular therapy to contact the Chiropractic Examining Board for an opinion on that issue. The Board will consider written requests on scope-of-practice related questions. These opinions can be directly obtained from the Board or

the Board's legal counsel. In seeking these types of opinions, the chiropractor typically submits educational materials, scientific literature, and case reports for consideration by the Board or legal counsel. It should be noted that there are websites sponsored by chiropractors in other states which are advancing the specific use of auricular therapy within the chiropractic offices. It may also be advisable to contact those chiropractors to obtain any information they may have on their state's policy regarding auricular therapy.

**Important Notice:** Please read the disclaimer when using this website. All materials provided with white papers; whether for a fee or not, are intended for general informational purposes since the services of a competent professional should be sought for any specific legal needs. Use of the website and this white paper item does not create or constitute an attorney-client relationship with any attorney on the website or providing this resource item.