



# History of the professionalization of acupuncture in Mexico

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**Abstract:** A review of the historical aspects of the development of acupuncture in Mexico is presented, which allows identifying that there have been several participants who have contributed in one way or another to the advancement of an international commitment acquired by the Mexican government as a member of the WHO. Thirty years after the diplomatic agreements between the People's Republic of China and the Mexican government and more than one hundred years after the officialization of homeopathy, reforms have been generated to regulate the professional practice of the aforementioned disciplines, as well as the creation of schools with official educational offer that train professionals with the intention that one day the Mexican health model will incorporate acupuncture into the current hegemonic model, generating a Comprehensive Health Care Model that responds to the needs of Public Health, and that helps to improve the quality of life of the population, as well as a better administration and optimization of the resources designated in various treatments. Few units in the public health sector offer acupuncture services, due to the lack of integration of Complementary Medicines in the current health system, however it is a crucial role for educational institutions to promote joint research projects through lines of research in patients with pathologies of difficult control or torpid evolution identified as health problems, establish comprehensive therapeutic models through care protocols, periodically evaluate the results of the evolution of patients treated with acupuncture, document and publish them, disseminate them to medical personnel and to the general public the effects and benefits of acupuncture. This duty also falls on the institutions to generate career opportunities and that the students at the time of leaving have the option of being entrepreneurs of their own company thus generating self-employment, but that this development of entrepreneurship is based on the regulations and guidelines that favor the professional practice of the acupuncturist in Mexico.

**Keywords:** Acupuncture; legalization; regulations in Mexico

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## Introduction

The start of the history of acupuncture in Mexico derives from the diplomatic relationship between Mexico and China in the decade of the sixties, during the administration of President Luis Echeverría Alvarés. The renewal of the diplomatic relationship was done by both parties and this event allowed academical exchanges in matter of acupuncture sponsored by the ministry of foreign affairs, helping Mexican citizens to study basic acupuncture courses taking one to three months in Hong Kong; this allowed the academic specialization of the first Mexican doctors as acupuncturists: Tomás Alcocer González y Octavio Ramírez Vargas. In their return to Mexico, the enthusiastic doctors propounded to various education centres offer actualization courses for doctors in matter of acupuncture and this was developed featuring the National Polytechnic Institute in the National School of Medicine and Homeopathy from 1986 until 1994 (1).

## Development of human resources

On the other hand, the training in acupuncture was spreading out with courses that were not validated by any official educative institution. In 1968 the master Ejo Takata arrived to Mexico to participate in the interreligious Ecumenical Council; in his journey he goes to Santa María, Oaxaca, where he regularly made medical journeys, applying acupunctural and herbal treatments aiming to help the less privileged population in that region. That's how the Mexican Institute of Acupuncture Ryodoraku, A.C. was created, offering specialized courses in acupuncture with no official academic recognition to interested people (Peña Saldaña, 2003). Many institutions offered similar courses developing more specialists with lack of knowledge in health sciences, causing limitations in their performance as acupuncturists due to the absence of a legal and technical official backup.

At the end of the past century, in the decade of nineties, the National Polytechnic Institute with the National School of Medicine and Homeopathy started to make the needed management to enrol these studies as a postgraduate specialty in human acupuncture; similarly the Autonomous Metropolitan University, started to offer the postgraduate

program in acupuncture and phytotherapy; 3 years later the Autonomous University of Zacatecas also offered a master's degree in acupuncture, all of this courses with a duration of two years and developed with an admission profile only for doctors; event that allowed the official validation of the practice of acupuncture. (López Espinosa, Plan de estudios Licenciatura en Acupuntura Humana Rehabilitatoria, 2008).

## Regulation and reality of studies in Acupuncture and Chinese Medicine

Nonetheless, there was another group of people that learnt acupuncture with other kind of courses, they were not doctors so they were not able to apply for the educative options provided by official institutions and formalize their knowledge in order to practice acupuncture. This limiting caused that through organizations they demanded the validation of their studies so they could practice acupuncture appropriately (Alcocer, 1998). This problem made that the Federal Commission for the Protection Against Sanitary Risk (COFEPRIS)<sup>1</sup>, (Salud, 2014) called interested institutions in the regularization of the practice of acupuncture to elaborate an Official Mexican Standard for the practice of acupuncture, being done by September 9th, 1998 and getting published on May 7th, 2002 in the Federal Official Gazette under the designation of Official Mexican Standard NOM-172-SSA1-1998. Health services provision. Auxiliary activities. Operating criteria for the practice of human acupuncture and related methods, with a validity of four years starting the day of its official publishing (2).

In NOM-172-SSA1-1998 the most outstanding points are its execution in all the places in nation where acupuncture and related methods are applied; in this, some tools are established as medical instruments and in the clause 6.2.1 holds doctors accountable for the practice of acupuncture and a figure of "Medical responsive" was created for the technical workers (2).

At the end of the validity of NOM-172-SSA1-1998, institutions interested in participating in the revision of the standard for its update were called again, in this process more than 30 institutions from the private and public health sector joined, the result was an establishment of the modifications to regulate the practice of acupuncture.

The most relevant changes made to NOM-017-

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<sup>1</sup> COFEPRIS. Ministry member of the federal health system created on the 5th of July 2001 with operational, technical and administrative autonomy, responsible of the control, regulation and sanitary promotion in terms of the federal health law and the related issues.



Figure 1 Timeline created by M.S.P. Angélica Castañeda Duarte.

SSA3-2012, are the regulation of health services for the practice of human acupuncture and related methods, this expressed in numeral six (Specifications, sub item 6. 2 regarding the profile of personnel practicing human acupuncture and related methods), establishes that acupuncture may be practiced by the health professional who has a professional degree or certificate of specialization legally issued by an educational institution with official registration, three professional degrees are considered: acupuncture technician, medical specialist in acupuncture and graduate in medical acupuncture and integral rehabilitation, the last two are named with the responsibility of treatment with acupuncture; technical personnel will only perform acupuncture under the indication of a doctor (3).

These changes were of great importance, since they consolidated the development of the first educational program in acupuncture degree offered in Mexico with an official registration. It began to be executed in the year 2000, where the governor of the State of Mexico, Arturo Montiel Rojas proposed the creation of Statewide Universities that offer innovative university programs (which until then did not exist in the Mexican educational programs) to train professionals who could contribute to solve the social issues of the country. The educational program of Medical Acupuncture and Integral Rehabilitation together with the educational program in Chiropractic were the two pioneer programs of the State University of the Valley of Ecatepec (UNEVE) (4).

Currently the official educational offer in the field of

acupuncture is in three educational levels: Higher University Technician in Acupuncture (Superior College of Alternative Medicine, Civil Association); the Bachelor’s Degree in Acupuncture, (Offered by three universities: School of Alternative Medicine, State University of the Valley of Toluca and State University of the Valley of Ecatepec; and Postgraduate programs (Schooled specialization) with a profile specifically for doctors (available in three universities as well: Autonomous University of Zacatecas, National Autonomous Metropolitan University and National Polytechnic Institute (5).

The official registration of educational programs implies compliance with various regulations; first of all, Article 5 of the Mexican Constitution, which establishes the freedom of professional and/or labour practice (6) (Figure 1).

The following are the various legal provisions that serve as legal support for the practice of acupuncture, such as the General Law of Health, the right to health protection (Article 1); the purposes of welfare, quality of life, protection for social development, preservation, satisfaction of needs, use and utilization of services, teaching, scientific and technological research (Article 2); organization, coordination and surveillance of the exercise of professional, technical and auxiliary activities for health, health establishment, promotion of the formation of human resources for health, coordination of research for health and its control in human beings (Article 3°); articles 32 and 33 of chapter II of medical attention; chapters 34, 35, 38, 78, 79, 84, 85, 86 and 87 of chapter III health service providers.

What refers to compliance for professional practice is specifically established in article 78 that establishes that professional practice is defined by the educational and health authorities; article 79 refers to the legality of the documentation that entitles professional practice (7).

From the provisions of the aforementioned articles derives the Regulatory Law of Article 5 of the Constitution, regarding the exercise of professions in its first article where it defines the term “professional degree”; the article 2 establishes the power to determine which professional activities require a degree and certificate for their execution; the article 3 refers to the right to obtain a professional license; the article 5 to the power of the General Directorate of Professions; Chapter II, Articles 8 and 9 establish the requirements for obtaining a professional title; Chapter III establishes the terms required by the educational institutions for the issuance of degrees; Article 12 establishes the possibility that the State is obliged to establish within its system the plans and programs to be able to issue degrees (7).

During the administration of President Miguel de la Madrid Hurtado, on October 19, 1983, he established an agreement for the creation of the Interinstitutional Commission for the Training of Human Resources for Health (CIFRHS); with the purpose of expanding the supply of adequate health services, this institution was created for the efficient and proper provision of health services, through the adequate training of health workers. In coordination with the Secretariat of Public Education, the registration of educational programs in health was obtained (De la Madrid Hurtado, 1983). In order to be registered, study plans and programs are first evaluated by the CIFRHS, and if approved, a favourable academic technical report is officially issued; this document is submitted to the Secretariat of Public Education (SEP), General Directorate of Professions for the registration of the educational program in health.

For the evaluation of educational programs, the CIFRHS was supported by a group of academics from the National Academy of Medicine and the National Association of Universities and Institutions of Higher Education (ANUIES). In view of the multiple recommendations, observations, and refusals for the technical approval of educational programs, the CIFRHS opted to form a technical group on acupuncture by inviting official institutions from both the educational sector and the public and private health sector.

In the Internal Regulations of the CIFRHS 2007, the

Evaluation Committee in its work plan considers a priority to strengthen the training of human resources in herbal medicine, homeopathy and acupuncture, in addition the work of the Directorate of Traditional Medicine and Intercultural Development of the Ministry of Health; this, to promote the creation of a document containing the criteria of the curricula resulting in the guide “Educational criteria and requirements to guide the evaluation of the plans and programs for the formation of the higher university technician in acupuncture”, a document that contains the mandatory minimum requirements to be developed as part of the plans and programs of study that are submitted to the CIFRHS (8-11).

Aiming to the plans and programs of study in health establishing that they must cover the requirements of the CIFRHS and SEP in agreement 279, which mention the formalities and procedures related to the recognition of official validity of higher education studies (11-13).

It is also important to mention the postgraduate educational program offered by the Universidad Autónoma de Nuevo León, under the title of Master’s Degree in Traditional Chinese Medicine with orientation in Acupuncture and Moxibustion, which is aimed at professionals with the title of Surgeon Midwife (a specialization recognized in Mexico) or its recognized equivalent (surgeon, medical degree) in order to train teachers and researchers with skills and abilities necessary for the integration of knowledge of Eastern and Western medicine, which consists of 2 years.

In the same way, the UNEVE consolidates the Master of Science in Acupuncture Postgraduate Program, which aims to train health professionals through a form of systemic thinking in the health-disease process under the model of psychoneuroimmunoendocrinology, it does not limit admission only to physicians, but in response to NOM-017-SSA3-2012 it integrates health professionals who have a degree and professional license in the field (doctors, nurses, medical acupuncturists, human acupuncturists, etc.) and mental health professionals (psychologists), with a duration of four semesters.

### **Regulation and reality of Chinese phytotherapy**

The World Health Organization (WHO) has had a policy on Traditional Medicine and Complementary Medicine since 2002; since then, Mexico, as a member of the WHO, has signed and issued several international agreements and proposals; implemented actions to incorporate Traditional

Medicine and Complementary Medicine into the current health practices.

The Ministry of Health created in 2002 the Directorate of Traditional Medicine and Intercultural Development, the hard work of its representative Dr. Alejandro Almaguer Gonzalez and his team have achieved the incorporation of some elements of different clinical therapeutic models, with the reforms to the General Health Law, published in the Official Journal of the Federation; from May 7, 1997, the Law recognizes that by their nature medicines can be (I) allopathic, (II) homeopathic and (III) herbal.

This is reflected in the Health Inputs Regulation, which regulates the definition, registration, elaboration, packaging, advertising and establishments of homeopathic medicines, herbal medicines and herbal remedies. In November 2001, the first edition of the Herbal Pharmacopoeia of the United Mexican States was published<sup>2</sup> (Guía de Implantación para el fortalecimiento de los servicios de salud, s.f.).

Homeopathy and acupuncture are currently integrated in the following hospitals in the Ministry of Health: National Homeopathic Hospital of the Ministry of Health, General Hospital of Mexico, General Hospital Dr. Manuel Gea Gonzalez, General Hospital Juarez de Mexico, Adolfo Lopez Mateos Medical Center and the ISSEMYM Ecatepec Medical Center. In the ISSSTE, services have already been integrated in the National Medical Center 20 de Noviembre, in the "Aragón" Clinic, and the Physical Medicine and Rehabilitation Clinic. In the Secretary of the Navy, acupuncture is available at the General Naval High Specialty Hospital.

In addition, homeopathy and acupuncture services are available at the following university hospitals: Homeopathy Clinic of the National School of Medicine and Homeopathy of the National Polytechnic Institute; Acupuncture Clinic of the National School of Medicine and Homeopathy of the IPN; and the Integral University Clinics of the State University of the Ecatepec Valley and the State University of the Toluca Valley (Guía de Implantación para el

fortalecimiento de los servicios de salud, s.f.).

### **Regulation and reality of the professional practice of Acupuncture and Chinese Medicine**

The Federal Commission for the Protection against Health Risks (COFEPRIS) is a government figure with administrative, technical, and operational autonomy that exercises the powers of regulation, control and health promotion. It is responsible for the surveillance of health care establishments such as clinics, doctor's offices, and spas. The following requirements are those that COFEPRIS requests during a medical office inspection (13-15): (I) Official Documentation. It must have a notice of operation granted by the municipality in question, Notice of Sanitary Responsible with professional title and have the complete documentation of the health professionals working in the establishment. The title and license must be visible. (II) Labelling. Certificate and license must be visible to the public and opening hours must be posted. (III) Space. Must comply with the official standard NOM 005 SSA3-2010 on minimum requirements for infrastructure and equipment of establishments for outpatient medical care. (IV) Clinical Records: Clinical records must be stored for at least 5 years, in addition to having an area to store them as established in NOM-004.SSA3-2012. (V) The clinic or doctor's office must have a daily sheet for the registration of patients (epidemiological report) to comply with the General Health Law, Title VI, Single Chapter, Articles 104-109 Health Information. The establishments that provide health services shall keep statistics, as indicated by the Secretary of Health, and shall provide the corresponding information to the Secretary of Health and the government, as appropriate. (VI) The office must comply with safety and hygiene issues in the contracting of RPBI collection, referring to NOM-087-ECOL-SSA1-2002. (VII) In Prevention, it must have a first aid kit, evacuation routes, fire extinguisher, and signage in accordance with the Civil Protection visit (16-18).

<sup>2</sup> The Homeopathic Pharmacopoeia of the United Mexican States is the official document, prepared and published by the Ministry of Health, which establishes the methods of analysis and technical specifications that must be met by medicines, biological and biotechnological products consumed in the country, as well as their drugs, additives, and materials, whether imported or produced in Mexico. Article 195 of the General Health Law establishes that drugs will be regulated by the Mexican Pharmacopoeia, therefore, its scope is nationwide and affects the entire Mexican population. Its use is mandatory for establishments where any of the activities related to the procurement, processing, manufacture, preparation, preservation, mixing, conditioning, packaging, handling, distribution, storage and sale or supply to the public of medicines, raw materials for the manufacture of medicines and drug dyes, as well as chemical, biological, pharmaceutical or toxicology control laboratories, for the study and experimentation of medicines and raw materials. (Ley General de Salud, Art. 258).

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