

Complementary and Alternative Medicine and the Law Syllabus

Summer 2009
Professor Tovino
Hamline University School of Law

General Course Information

Course: Complementary and Alternative Medicine and the Law
Credits: 2
Classroom: Law 103
Day: Monday, Tuesday, Wednesday, and Thursday, June 22, 23, 24, 25
Time: 9:00 a.m. – 12:00 p.m.; 12:30 – 4:00 p.m.
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Course Description and Objectives

Welcome to Complementary and Alternative Medicine and the Law! This course will examine the legal, ethical, and policy issues raised by the delivery of complementary and alternative medicine (CAM). Special attention will be given to the definitions, theories, and practice of major CAM therapies, including chiropractic, acupuncture, homeopathy, naturopathy, massage therapy, dietary supplementation, herbal medicine, and various cancer therapies; the role of evidence-based medicine in evaluating CAM therapies; the licensure, regulation, and certification (or lack thereof) of CAM providers; the historical bias of allopathic physicians and health insurance companies against CAM providers; legal issues relating to collaboration with CAM providers, including credentialing, medical staff membership, clinical privileges, ordering, and referrals; informed consent to CAM therapies and CAM research; CAM malpractice; other civil and criminal law issues cases involving CAM providers; truth-in-advertising by CAM providers; and public and commercial insurance coverage of CAM.

Course Description and Objectives (continued)

The objectives of this course include: (1) familiarizing students with the major legal, ethical, and policy issues raised by the delivery of CAM; (2) exploring the reasons for CAM use and the health conditions for which CAM is used by different genders, racial and ethnic groups, religious traditions, and socio-economic status groups; (3) obtaining the knowledge and research skills necessary to confront biomedicine's exclusive claim to being scientific in relation to other competing epistemologies in medicine; and (4) introducing students to non-legal (*i.e.*, medical, scientific, public health, ethics, and sociology) literature that bears on the evaluation of CAM therapies.

Readings are drawn from a range of primary and secondary legal sources, including statutes, regulations, judicial opinions, attorney general opinions, law review articles, legal news articles, and legal blogs, as well as the relevant medical, scientific, public health, health policy, ethics, and sociology literature.

Course Materials

Your course materials include: (1) this syllabus; (2) the readings posted to our Course Blog; and (3) my PowerPoint presentations, which also will be posted to our Course Blog. Students may access the Course Blog at <http://camseminarsummer09.blogspot.com/>. The PowerPoint presentations are designed to structure class discussions and assist on-call students with class preparation.

I will post our class readings to our Course Blog at least three weeks prior to the first day of class so that students have ample time to download and read the material before class. I will post our PowerPoints to our Course Blog at least one week prior to the first day of class so that students have ample time to download the PowerPoint before class. I will not distribute paper copies of the readings or the PowerPoints during class.

Course Evaluation

Course grades shall be based on one anonymous, final examination, which shall include thirty multiple-choice questions.

Course Attendance

At the beginning of each class session, I will distribute a class roster for students to sign. Students who are absent for more than 20% of our total in-class minutes will be treated as "excessively" absent in accordance with the Hamline University School of Law Academic Rules.

Background Information

I will provide background information regarding CAM during our first week of class. However, it may be helpful for students to re-review this background information as our course progresses or before beginning the seminar paper. I think that the best summary of the development of CAM is provided by Professor Michael H. Cohen, J.D., M.B.A, M.F.A., a prominent Boston attorney and prolific scholar who has appointments at Harvard Medical School and Harvard School of Public Health and who founded the CAM Law Blog, available at <http://www.camlawblog.com/>. The following summary is from Professor Cohen's many writings and online resources:

In the late-nineteenth century, what we now call "scientific medicine," "biomedicine," or "allopathic medicine" began to dominate patient care as well as the regulation of patient care. The growing power of the biomedical community resulted in: (1) the passage of medical licensing laws that broadly defined the "practice of medicine" and prohibited the unlicensed practice of medicine by non-medical providers, including homeopaths, naturopaths, and chiropractors; (2) the establishment of medical and professional society rules and regulations that limited membership to medical providers; and (3) the adoption of ethical and other standards that prohibited professional association between allopathic physicians and non-medical providers.

By the 1960s and 1970s, increasing patient interest in therapies such as chiropractic, naturopathy, massage therapy, acupuncture and traditional oriental medicine, nutritional and herbal medicine, folk medicine, and mind-body therapies resulted in greater attention to "holistic health care." Very generally, holistic health care approaches treatment in terms of its effect on the whole person, including the physical, mental, emotional, spiritual, and environmental dimensions.

In 1992, Congress created a tiny office within the National Institutes of Health (NIH) known as the Office for Unconventional Medical Practices. In 1993, David M. Eisenberg, M.D., et al., published an article in the *New England Journal of Medicine* describing the field of "alternative medicine" and including within that field many therapies not commonly used in U.S. hospitals or taught in U.S. medical schools, including the therapies listed in the previous paragraph. In Europe, the term "complementary medicine" was gaining currency to describe the same therapies. The Office for Unconventional Medical Practices later was renamed the Office of Alternative Medicine and, even later, the National Center for Complementary and Alternative Medicine (NCCAM), <http://nccam.nih.gov/>.

The NCCAM currently defines CAM as covering "a broad range of healing philosophies (schools of thought), approaches, and therapies that mainstream Western (conventional) medicine does not commonly use, accept, study, understand, or make available." The NCCAM further explains: "A few of the many CAM practices include the use of acupuncture, herbs, homeopathy, therapeutic massage, and traditional oriental medicine to promote well-being or

treat health conditions. People use CAM treatments and therapies in a variety of ways. Therapies may be used alone, as an alternative to conventional therapies, or in addition to conventional, mainstream therapies, in what is referred to as a complementary or an integrative approach. Many CAM therapies are called holistic, which generally means they consider the whole person, including physical, mental, emotional, and spiritual aspects.” Although the NCCAM’s definition is neither universally accepted nor authoritative, it does represent a starting point for thinking about what distinguishes (or fails to distinguish) CAM therapies from conventional care.

State (not federal) law governs much of CAM practice. During class, we will explore several Iowa and other state statutes, regulations, and common laws relating to professional licensure, scope of practice, and malpractice that are representative of most states’ laws governing CAM providers and the provision of CAM therapies. With respect to licensure, each state has enacted a medical licensing act that technically prohibits the unlicensed practice of medicine and thereby criminalizes activity by unlicensed CAM providers who offer medical services to patients. We also will examine the application to CAM of malpractice, which you learned about in your first year Torts course and may be defined as an unreasonable practice that fails to conform to the standard of care in the profession and causes injury.

Although state law controls much of CAM practice, a significant federal role exists in the regulation of dietary supplements. The federal Food and Drug Administration (FDA) regulates foods, drugs, and cosmetics in interstate commerce. No new “drug” may be introduced into interstate commerce unless proven “safe” and “effective” for its intended use, as determined by FDA regulations. “Foods,” however, are subject to different regulatory requirements, and need not go through trials proving safety and efficacy. The growing phenomenon of consumer use of vitamins, minerals, herbs, and other “dietary supplements” has challenged the historical divide between drugs and foods. The federal Dietary Supplements Health Education Act (DSHEA) has allowed manufacturers to distribute dietary supplements without having to prove safety and efficacy, so long as the manufacturers have made no claims linking the supplements to a specific disease.

CAM law and policy is constantly evolving. Three recent and significant developments include: (1) approval of final guidelines, by the Federation of State Medical Boards, to govern physician integration of CAM therapies; (2) a final report, issued to Congress by the White House Commission on Complementary and Alternative Medicine, making recommendations for federal legislation and policy regarding CAM; and (3) a Complementary and Alternative Medicine report issued by the Institute of Medicine in 2005. All three of these documents are included in the readings below. These developments are likely to influence future efforts at regulating CAM therapies both at the federal level, where possible, and across states, as well as through the efforts of professional healthcare organizations. Clinical pathways and laws governing CAM will continue to evolve as new evidence accumulates regarding safety and efficacy (or lack thereof) of specific CAM therapies.

Course Schedule; Readings

PLEASE NOTE: YOU WILL NOT BE REQUIRED TO READ ALL, OR EVEN MOST, OF THE FOLLOWING READINGS. At least three weeks prior to the first day of class, I will assign just a few of the readings listed under each date/topic below. These readings will be posted to our Course Blog. In the list below, I am simply identifying a very broad range of relevant readings should you, in the future: (1) choose to write a paper on a particular CAM topic and like a head start on your research; and/or (2) be interested in reading more about a particular CAM topic. The Director of the Health Law Institute, Professor Lucinda Jesson, has in her office six bound volumes that contain each and every one of the readings listed below. Please feel free to make an appointment with Professor Jesson to look through the volumes.

Volume I: Introduction to CAM

- Catherine Zollman et al., ABCs of Complementary Medicine: What is Complementary Medicine? 319 British Medical Journal 693 (September 11, 1999).
- NCCAM, What Is CAM? CAM Basics.
- NCCAM, Acupuncture, Get the Facts.
- Acupuncture, Consumer Reports, 54-58 (January 1994).
- The Nuts and Bolts of Needling, Consumer Reports 58 (January 1994).
- Acupuncture and Oriental Medicine Association of Minnesota, About.
- Heather Caunt, The History and Present Day Practice of Acupuncture (June 30, 2000).
- NCCAM, About Chiropractic and Its Use in Treating Low-Back Pain, Research Report.
- NCCAM, An Introduction to Naturopathy, Background.
- NCCAM, Questions and Answers about Homeopathy, Research Report.
- Homeopathy, Much Ado About Nothing? Consumer Reports 201-206 (March 1994).
- NCCAM, Massage Therapy as CAM, Background.
- Andrew Vickers et al., Massage Therapies, 319 British Medical Journal 1254-1257 (November 6, 1999).
- Massage Therapy: The Healing Touch, Consumer Reports on Health (July 2005).
- Andrew Vickers, Herbal Medicine, 319 British Medical Journal 105-1053, 1422 (October 16, 1999).
- Office of Dietary Supplements, Dietary Supplements: Background Information.
- NCCAM, Cancer and Complementary and Alternative Medicine, Get the Facts.

- Dianne Shumay, Why Some Cancer Patients Choose Complementary and Alternative Medicine Instead of Conventional Treatment, 50(12) Journal of Family Practice 1067 (December 2001).
- Cecile A. Lengacher et al., Relief of Symptoms, Side Effects, and Psychological Distress Through Use of Complementary and Alternative Medicine in Women with Breast Cancer, 33(1) Oncology Nursing Forum 97 (2006).
- David J. Hess, The Raw and the Organic: Politics of Therapeutic Cancer Diets in the United States, 583 Annals of the American Academy 76 (September 2002).
- NCCAM, Meditation for Health Purposes, Backgrounder.
- R. Barker Bausell, Commentary: Alternative Medicine: Is It a Reflection of the Continued Emergence of the Biopsychosocial Paradigm? 17(1) American Journal of Medical Quality 28 (January/February 2002).
- Jon A. Astin, Why Patients Use Alternative Medicine: Results of a National Study, 279(19) JAMA 1548 (May 20, 1998) and responsive Letters to the Editor.
- David M. Eisenberg, Trends in Alternative Medicine Use in the United States, 1990-1997: Results of a Follow-up National Survey, 280(8) JAMA 1569 (November 11, 1998).
- Perceptions about Complementary Therapies Relative to Conventional Therapies among Adults Who Use Both: Results from a National Survey, 135(5) Annals of Internal Medicine 344 (September 4, 2001).
- Wayne B. Jonas, Alternative Medicine – Learning from the Past, Examining the Present, Advancing to the Future, 280(18) JAMA 1616 (November 11, 1998).
- Marvin M. Lipman, Office Visit: Alternative vs. Conventional Medicine: Making Ends Meet, Consumer Reports on Health 11 (August 1998).
- Alternative Therapies: Beyond the Myths, Consumer Reports on Health 8 (January 2007).
- David B. Larson and Susan S. Larson, Spirituality in Clinical Care: A Brief Review of Patient Desire, Physician Response, and Research Opportunities.
- Stephen E. Straus, Complementary and Alternative Medicine: Challenges and Opportunities for American Medicine, 75(6) American Medicine 572 (June 2000).
- Ralph Snyderman et al., Integrative Medicine: Bringing Medicine Back to Its Roots, 162 Archives of Internal Medicine 395 (2002).
- Ted J. Kaptchuk et al., Varieties of Healing (1): Medical Pluralism in the United States, 135 Annals of Internal Medicine 189 (2001).
- Ted J. Kaptchuk et al., Varieties of Healing (2): A Taxonomy of Unconventional Healing Practices, 135 Annals of Internal Medicine 196 (2001).
- Alternative Medicine: The Facts, Consumer Reports 51-53 (January 1994).
- Minnesota Statutes Chapter 146A, Complementary and Alternative Health Care Practices.

- Catherine Zollman et al., Uses and Practitioners of Complementary Medicine, 319 *British Medical Journal* 836-838 (September 25, 1999).
- Susan Smith, Who Uses Complementary Therapies?
- Catherine Zollman et al., Complementary Medicine in Conventional Practice, 319 *British Medical Journal* 901-904 (October 2, 1999).
- Ursula Sharma, Contextualizing Alternative Medicine: The Exotic, the Marginal and the Perfectly Mundane, 9(4) *Anthropology Today* 15 (August 1993).
- White House Commission on Complementary and Alternative Medicine Policy
- Federation of State Medical Boards, Model Guidelines for the Use of Complementary and Alternative Therapies in Medical Practice (April 2002).
- Michael Cohen, CAM Law Blog, A Summary Checklist of Legal Issues in Complementary, Alternative, & Integrative Medicine.

Volume II: CAM, Empirical Research, and Evidence-Based Medicine

- Marcia Angell et al., Alternative Medicine – The Risks of Untested and Unregulated Remedies, 339(12) *New England Journal of Medicine* (September 17, 1998).
- Kenneth F. Schaffner, Assessments of Efficacy in Biomedicine: The Turn toward Methodological Pluralism, in Daniel Callahan, ed., *The Role of Complementary and Alternative Medicine: Accommodating Pluralism* (Georgetown University Press 2002) [hereinafter, Callahan]
- Bonnie B. O'Connor, Personal Experience, Popular Epistemology, and Complementary and Alternative Medicine Research, in Callahan, *supra*.
- Loretta M. Kopelman, The Role of Science in Assessing Conventional, Complementary, and Alternative Medicines, in Callahan, *supra*.
- Howard Brody, The Placebo Effect: Implications for the Study and Practice of Complementary and Alternative Medicine, in Callahan, *supra*.
- Tom Whitmarsh, The Nature of Evidence in Complementary and Alternative Medicine: Ideas from Trials of Homeopathy in Chronic Headache, in Callahan, *supra*.
- Paul Root Wolpe, Medical Culture and CAM Culture: Science and Ritual in the Academic Medical Center, in Callahan, *supra*.
- Phil B. Fontanarosa et al., Alternative Medicine Meets Science, 280(18) *JAMA* 1618 (November 11, 1998).
- Nikolaos Koutouvidis, CAM and EBM: Arguments for Convergence, 97 *Journal of the Royal Society of Medicine* 39-40 (January 2004).
- Constance M. Park, Diversity, the Individual, and Proof of Efficacy: Complementary and Alternative Medicine in Medical Education, 92(10) *American Journal of Public Health* 1568-1572 (October 2002).

- Victor S. Sierpina et al., Need for Scholarly, Objective Inquiry into Alternative Therapies, 76(9) *American Medicine* 9 (September 2001).
- Andrew Vickers, Complementary Medicine-Clinical Review, *British Medical Journal* (September 16, 2000).
- Tom Delbanco et al., Complementary and Alternative Therapies and the Question of Evidence, 16 *Advances in Mind-Body Medicine* 244 (2000).
- Eric Manheimer et al., Meta-Analysis: Acupuncture for Low Back Pain, portions reprinted in Michael Cohen, CAM Law Blog.
- AHRQ, Routine Vitamin Supplementation to Prevent Cancer and Cardiovascular Disease, AHRQ Pub. No. APPIP03-0012 (June 2003).
- National Cancer Institute, Tea and Cancer Prevention: Fact Sheet.
- Charles E. Lewis et al., The Recipients and Results of Acupuncture, 14(3) *Medical Care* 255-262 (March 1976).
- National Cancer Institute, Garlic and Cancer Prevention: Fact Sheet.
- Ted J. Kaptchuk, Intentional Ignorance: A History of Blind Assessment and Placebo Controls in Medicine, 72(3) *Bulletin of the History of Medicine* 389-433 (1998).
- Ted J. Kaptchuk, The Double-Blind, Randomized, Placebo-Controlled Trial: Gold Standard or Golden Calf? 54 *Journal of Clinical Epidemiology* 541 (2001).
- Ted J. Kaptchuk, The Placebo Effect in Alternative Medicine: Can the Performance of a Healing Ritual Have Clinical Significance? 136(11) *Annals of Internal Medicine* 817 (June 4, 2002).
- Perspectives on the Placebo Phenomenon, 14(4) *Medical Anthropology Quarterly* 3, 16-19 (August 1983).
- Ted J. Kaptchuk, Acupuncture: Theory, Efficacy, and Practice, 136 *Annals of Internal Medicine* 374 (2002).
- David S. Sobel, Mind Matters, Money Matters: The Cost-Effectiveness of Mind/Body Medicine, 284(13) *JAMA* 1705 (October 4, 2000).
- Food and Drug Administration, FDA Issues Information for Consumers about Claims for Green Tea and Certain Cancers, FDA News (June 30, 2005).
- Michael Cohen, Pet Therapy: The Evidence, CAM Law Blog.
- Michael Cohen, Acupuncture Helped Osteoarthritis Patients, CAM Law Blog.
- Michael Cohen, Tai Chi May Help Prevent Shingles, CAM Law Blog.
- R.J. Ignelzi, Meditation 'Fools the Brain' in a Threatening World, Greater Paramus News and Lifestyle Magazine.
- Michael Cohen, Mixed Efficacy Found for CAM Approaches to Treating Chronic Pain, CAM Law Blog.
- Marvin M. Lipman, The Power of Placebos, *Consumer Reports on Health* 23 (February 1996).
- Can Your Mind Heal Your Body? *Consumer Reports* 108-115 (February 1993).

- U.S. Food and Drug Administration, Center for Food Safety and Applied Nutrition, Draft Guidance for Industry: Evidence-Based Review System for the Scientific Evaluation of Health Claims (July 2007).
- Cynthia B. Cohen et al., Prayer as Therapy: A Challenge to Both Religious Belief and Professional Ethics, Hastings Center Report 40-47 (May-June 2000).
- Kathy K. Trier et al., Prayer, Religiosity, and Healing in the Heartland, USA: A Research Note, 32(4) Review of Religious Research 351-358 (June 1991).
- Molly Glentzer, Desperate Measures, 222(1) Good Housekeeping 84 (January 1996).
- Kerri L. Novak et al., Oncologists' and Naturopaths' Nutrition Beliefs and Practices, 9(3) Cancer Practice 141-146 (May/June 2001).
- Arthur Kleinman et al., Why do Indigenous Practitioners Successfully Heal? 138 Soc. Sci. & Med. 7-26 (1979).
- The Mainstreaming of Alternative Medicine, Consumer Reports 17-25 (May 2000).
- Marilyn Larkin, Alternative Medicine Centre Aims for Mainstream Status, 358 Lancet 566 (August 18, 2001).
- E. Ernst et al., Ethical Problems Arising in Evidence Based Complementary and Alternative Medicine, 30 Journal of Medical Ethics 156-159 (2004).

Volume III: Licensure; Scope of Practice Limitations

- New York State Education Law, Article 155, Massage Therapy.
- Vermont Administrative Rules for Licensed Acupuncturists.
- Nevada Revised Statutes, Chapter 630A, Homeopathic Medicine.
- California Senate Bill No. 577 (2002).
- Coalition for Natural Health, Mission and State-by-State.
- Natural Healers, Massage Therapy Law and Licensure; States Regulating Massage.
- Legal Issues in Homeopathy.
- Commonwealth v. Schatzberg, 371 A.2d 544 (1977) (chiropractic licensing).
- Andrews v. Ballard, 498 F. Supp. 1038 (S.D. Tex. 1980) (constitutionality of acupuncture licensing statute).
- Minnesota Department of Health, Health Occupations Program, Office of Unlicensed Complementary and Alternative Health Care Practice, Frequently Asked Questions.
- National Center for Homeopathy, Homeopathy in the Law.
- Ann Richtman, Minnesota Natural Health Coalition, A Slice of Law and Medicine.
- Minnesota Statutes, Chapter 147B, Acupuncture Practitioners.
- Minnesota Board of Medical Practice, Acupuncturist Fact Sheet.
- Minnesota Attorney General Opinion, 1975 Minn. AG Lexis 9 (March 10, 1975).

- Minnesota Board of Chiropractic Examiners, Requirement for Licensure to Practice.
- Minnesota Board of Chiropractic Examiners, Reciprocity/Endorsement.
- Minnesota Board of Chiropractic Examiners, Reciprocity, and Minn. Rules 2500.0800.
- Minnesota Board of Chiropractic Examiners, Chemical Dependency/Other Disabilities.
- Minnesota Board of Chiropractic Examiners, The Authority of Chiropractors to Perform Certain Physical Examinations.
- Minnesota Board of Chiropractic Examiners, Overview of the Complaint Review Process.
- Minnesota Board of Chiropractic Examiners, Questions and Answers about the Board of Chiropractic Examiners Complaint Review Process.
- Zabrecky v. Connecticut Board of Chiropractors, 1991 Conn. Super. LEXIS 2682 (1991).
- State v. Beno, 373 N.W.2d 544 (Mich. 1985).
- Nethken v. State of Arizona, 104 P.2d 159 (1940).
- State Farm v. Arizona Board of Chiropractic, 931 P.2d 426 (1996).
- Crees v. California State Board of Medical Examiner, 28 Cal. Rptr. 621 (1963).
- Oosterveen v. Board of Medical Examiners, 246 P.2d 136 (1952).
- Millsap v. Alderson, 219 P. 469 (1923).
- Filkoff v. Connecticut Board of Naturopathic Examiners, 1999 Conn. Super. LEXIS 2388 (1999).
- New York v. Amber, 76 Misc.2d 267 (1973).
- Idaho v. Maxfield, 564 P.2d 968 (1977).
- Foster v. Georgia Board of Chiropractic Examiners, 359 S.E.2d 877 (1987).
- David M. Eisenberg et al., Credentialing Complementary and Alternative Medical Providers, 137(12) Annals of Internal Medicine 965 (December 17, 2002).
- Minnesota Board of Chiropractic Examiners, Newsletter, Spring/Summer 2006.
- Minnesota Board of Medical Practice, Fee List.

Volume IV: Advertising; Unfair Competition; Marketing; Labeling; Patients' Rights

- Minnesota Rules 2500.0510, Advertising.
- Minnesota Rules, 2500.0550, Professional Designations.
- Minnesota Rules, 2500.0600, Board Certification Advertising.
- People v. Hoang Chiropractic
- Minnesota Board of Chiropractic, Decompression Therapy ... Be very careful!!! (Fall/Winter 2006)

- Williams v. State of Alabama, 453 So.2d 1051 (1984).
- Dare v. Board of Medical Examiners, 136 P.2d 304 (1943).
- Oosterveen v. Board of Medical Examiners, 246 P.2d 136 (1952).
- National Council Against Health Fraud, Wikipedia entry.
- National Council Against Health Fraud v. Aroma Vera.
- National Council Against Health Fraud v. King Bio Pharmaceuticals.
- Office of Dietary Supplements, Botanical Dietary Supplements: Background Information.
- Minnesota Statutes § 146A.11 (2006), Complementary and Alternative Health Care Client Bill of Rights.
- Sample Client Bill of Rights (BOR).

Volume IV (cont.): Other Civil and Criminal Law Issues; Sexual Misconduct

- Michael Cohen, Potential Grounds for Malpractice Liability in CAM, CAM Law Blog.
- Michael Cohen et al., Potential Physician Malpractice Liability Associated with Complementary and Integrative Medical Therapies, 136 Annals of Internal Medicine 596-603 (2002).
- David M. Studdert, Medical Malpractice Implications of Alternative Medicine, 280(18) JAMA 1610 (November 11, 1998).
- Bailey v. State, 95 S.W.3d 811 (2002).
- Barrett v. Rosenthal, 112 Cal. App. 4th 749 (2003).
- Charell v. Gonzalez, 173 Misc.2d 227 (1997).
- Gonzalez v. New York State Department of Health, 232 A.D.2d 886 (1996).
- Moore v. Baker, 989 F.2d 1129 (11th Cir. 1993).
- Schneider v. Revici, 817 F.2d 987 (1987).
- Metzler v. New York State Board for Professional Conduct, 203 A.D. 617 (1994).
- Naturopaths Charged with Manslaughter, 25(6) NCAHF Newsletter (Nov./Dec. 2002).
- Michael Cohen, Informed Consent in Complementary and Alternative Medicine, CAM Law Blog.
- Edzard Ernst, Informed Consent in Complementary and Alternative Medicine, 161 Archives of Internal Medicine 2288 (October 22, 2001).
- Michael Cohen, Legal Boundaries and Ethics in Energy Work During the Clinical Encounter, CAM Law Blog
- Chalupa v. Industrial Commission, 509 P.2d 610 (1973).
- United States v. Rutherford, 442 U.S. 544 (April 25, 1979).
- Michael H. Cohen, Legal and Ethical Issues in Complementary Medicine: A United States Perspective, 181(3) MJA 168-169 (August 2, 2004).

- Illinois Attorney General Press Release, Madigan Sues Mediation and Acupuncture Teacher Accused of Defrauding his Students in a Real Estate Investment Scheme (November 16, 2006).
- Minnesota Rules, 2500.6050, Sexual Misconduct.
- Minnesota Board of Chiropractic Examiners, Sexual Misconduct.

Volume V: Collaboration with CAM Practitioners; Antitrust Issues

- The Wilk Case: Table of Contents, Chiro.org
- Wilk v. American Medical Association, 719 F.2d 207 (7th Cir. 1983).
- Wilk v. American Medical Association, 671 F. Supp. 1465 (N.D. Ill. 1987).
- Wilk v. American Medical Association, 895 F.2d 352 (7th Cir. 1990).
- Michael Cohen et al., Ethics in Complementary Medicine: New Light on Old Principles, 21(3) Contemporary Pediatrics 61-72 (2004).
- Karen E. Adams et al., Ethical Considerations of Complementary and Alternative Medical Therapies in Conventional Medical Settings 137 Annals of Internal Medicine 660-664 (2002).
- Nancy Romero-Daza, Traditional Medicine in Africa, 583 Annals of the American Academy of Political and Social Science 173-176 (September 2002).
- Kelly Safreed Harmon, Naturopath Puts a New Spin on Board Diversity, Trustee 26 (September 1999).
- Jonathan Halper, Naturopaths and Childhood Immunizations: Heterodoxy among the Unorthodox, 68 Pediatrics 407-410 (2001).
- Jason W. Busse et al., Disclosure of Natural Product Use to Primary Care Physicians: A Cross-Sectional Survey of Naturopathic Clinic Attendees, Mayo Clinic Proceedings 616-623 (May 2005).
- Michael Cohen et al., Pediatric Use of Complementary Therapies: Ethical and Policy Choices, CAM Law Blog
- Michael H. Cohen et al., Integrating Complementary and Alternative Medical Therapies in Conventional Medical Settings: Legal Quandaries and Potential Policy Models, 72 U. Cincinnati L. Rev. 671 (2003).
- Moshe Frenkel et al., The Growing Need to Teach about Complementary and Alternative Medicine: Questions and Challenges, 76(3) Academic Medicine 251 (March 2001).
- Ted J. Kaptchuk, The Persuasive Appeal of Alternative Medicine, 129 Annals of Internal Medicine 1061 (1998).
- Harold G. Koenig, Religion, Spirituality, and Medicine: Application to Clinical Practice, 284(13) JAMA 1708 (October 4, 2000).

Volume VI: Insurance, Workers' Compensation, and Reimbursement Issues

- Robert Tillman, Paying for Alternative Medicine: The Role of Health Insurers, *Annals of the American Academy* 64-75 (September 2002).
- Kenneth R. Pelletier, Current Trends in the Integration and Reimbursement of Complementary and Alternative Medicine by Managed Care, Insurance Carriers, and Hospital Providers, 12(2) *American Journal of Health Promotion* 112 (1997).
- Kenneth R. Pelletier, Current Trends in the Integration and Reimbursement of Complementary and Alternative Medicine by Managed Care Organizations (MCOs) and Insurance Providers: 1998 Update and Cohort Analysis, 14(2) *American Journal of Health Promotion* 125 (1999).
- *Arizona Public Service Co. v. Industrial Commission*, 555 P.2d 126 (1976).
- *Hoffman v. Regence Blue Shield*, 991 P.2d 77 (2000).
- *State Department v. Melser*, 69 So.2d 347 (1954).

Volume VI (cont.): Diversity and CAM

- Gregory Juckett, Cross-Cultural Medicine, 72(11) *American Family Physician* 2267 (December 1, 2005).
- Jennifer J. Furin, "You Have to Be Your Own Doctor": Sociocultural Influences on Alternative Therapy Use Among Gay Men with AIDS in West Hollywood, 11(4) *Medical Anthropology Quarterly* 498-504 (1997).
- Michelle M. Alexander et al., Possibly Efficacy of a Creek Folk Medicine through Skin Absorption: An Object Lesson in Ethnopharmacology, 39(4) *Current Anthropology* 545-549 (1998).
- Linda F. Cushman et al., Use of Complementary and Alternative Medicine among African-American and Hispanic Women in New York City: A Pilot Study, *JAMWA* 193-195 (Fall 1999).
- Douglas Allchin, Points East and West: Acupuncture and Comparative Philosophy of Science, 63 *Philosophy of Science* S107-S115 (1996).
- Moon S. Chen, Informal Care and the Empowerment of Minority Communities: Comparisons between the USA and the UK, 4(3) *Ethnicity and Health* 139-151 (1999).
- Michael B. Whiteford, Homeopathic Medicine in the City of Oaxaca, Mexico: Patients' Perspectives and Observations, 13(1) *Medical Anthropology Quarterly* 69-78 (1999).
- Judith Polipnick et al., An Exploration of Community Leader Perspectives about Minority Involvement in Chiropractic Clinical Research, 11 *Journal of Alternative and Complementary Medicine* 1015-1020 (2005).

- Jeongseon Kim et al., Factors Influencing Preferences for Alternative Medicine by Korean Americans, 32 *American Journal of Chinese Medicine* 321-329 (2004).
- Robert Wells et al., Case Study: Making Room for Alternatives, 30(3) *Hastings Ctr. Rpt.* 26-28 (May-June 2000).
- Betsy Sleath et al., Ethnicity and Physician-Older Patient Communication about Alternative Therapies, 7 *Journal of Alternative and Complementary Medicine* 329-335 (2001).
- Joseph G. Grzywacz, Ethnic Differences in Elders' Home Remedy Use: Sociostructural Explanations, 30(1) *American Journal of Health Behaviors* 39-50 (2006).
- Kamil M. Ariff et al., Cultural Health Beliefs in a Rural Family Practice: A Malaysian Perspective, 14 *Australian Journal of Rural Health* 2-8 (2006).
- Deepa Rao, Choice of Medicine and Hierarchy of Resort to Different Health Alternatives among Asian Indian Migrants in a Metropolitan City in the USA, 11(2) *Ethnicity & Health* 153-167 (May 2006).
- Maria T. Chao, Women's Reasons for Complementary and Alternative Medicine Use: Racial/Ethnic Differences, 12 *Journal of Alternative and Complementary Medicine* 719-722 (2006).
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