

Acupuncture and NATO

Jean-Louis Belard, MD, Ret French Army Col,¹
and Arnyce R. Pock, MD, Col, USAF, MC^{2*}

ABSTRACT

This article provides an introduction to some of the medical components associated with the North Atlantic Treaty Organization (NATO) and describes an opportunity by which acupuncture could be utilized as part of the initial military medical response to a cataclysmic disaster.

Key Words: Acupuncture, NATO

INTRODUCTION

THE NORTH ATLANTIC TREATY ORGANIZATION (NATO) was established in April 1949 as an intergovernmental alliance aimed at providing a mechanism for mutual or collective defense. While this remains a primary function of the agency, during the past 2 decades, there has been an increasing emphasis on enhancing NATO's military medical component, particularly with regard to fostering increased interoperability and cost-effective partnerships in a broad spectrum of multinational operations.

One of the ways in which NATO has sought to achieve this goal was to establish the Committee of the Chiefs of Military Medical Services (COMEDS) in 1994. COMEDS is comprised of the Surgeons General from each of the NATO member nations. In addition, there are subsidiary working groups that regularly meet and address issues ranging from organizational structure to chemical, biological, radiological, nuclear, and explosive (CBRNE) incidents, to preventive medicine, dentistry, and psychiatry.

Of particular note is the interrelationship between COMEDS and the Human Factors and Medicine (HFM) group, one of seven key panels aligned under the NATO Research and Technology Agency. In 2009, the HFM group chartered a Research Technical Group (RTG) and charged its chair (Dr. Belard) with the task of leading a 3-year study of "Integrative Medicine Interventions for Military Medicine." It is this activity that now offers some unique opportunities for the possible integration of acupuncture and related technologies into NATO's military medical doctrine.

DISCUSSION

Data from a 2005 survey of U.S. military personnel¹ suggests that approximately 44.5% of all active-duty military members use some form of complementary and alternative medicine (CAM), with dietary supplements being used by as many as 60% of active-duty personnel. While comparative data from the international military community

¹U.S. Army Medical and Materiel Command, Frederick, MD.

²Office of Curriculum Reform, Uniformed Services University of the Health Sciences, Bethesda, MD.

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are not currently available,[†] anecdotal reports suggest that the utilization rates are likely to be similar or higher. With public interest being increasingly focused on avoiding the financial burden of pharmaceuticals, coupled with the risk of untoward side-effects, use of alternative modalities, such as acupuncture, homeopathy, mind–body interventions, magnets, and laser stimulation have gained an increased level of popularity in many regions across the globe.

The primary objective of the Integrative Medicine RTG is to conduct an in-depth analysis of the use of CAM techniques throughout NATO, including the results of salient research activities. The RTG is also tasked with delivering a comprehensive reference document, outlining recommendations on the proper use of CAM modalities, to COMEDS and other senior NATO leaders.

Considering that many of NATO's military medical engagements involve efforts to ameliorate the suffering associated with local or regional disasters, be it the result of forces of nature or forces of human beings, the authors propose that selective use of two specific acupuncture modalities could provide a highly effective, portable, and inexpensive tool for NATO's military medical practitioners.

Cataclysmic disasters are characterized by situations in which chaos prevails and access to advanced medical care may be severely limited. The availability of medical supplies, replacement supply chains, and usual forms of communications are typically disrupted as well. Finally, a surge in demand for medical resources and social services is almost always inevitable.

All of this sets a perfect stage for the training of a cadre of military medical professionals, throughout NATO, in the auricular-based, Battlefield Acupuncture (BFA) technique developed by Col (Ret) Richard C. Niemtow, MD, PhD, MPH. Details of this approach are described elsewhere in this issue of the *Journal*. The 5-Point BFA technique has been shown to be highly effective for relieving acute and chronic pain, making BFA highly conducive to use in a cataclysmic environment.

A single acupuncture semi-permanent (ASP) needle used in the BFA protocol costs approximately 80 U.S. cents (~56 Euro Cents). If a patient with an acute lower-extremity fracture could have his/her pain reduced within a matter of minutes at a cost of less than \$8.00 U.S., this not only represents a significant cost saving but also provides a means by which suffering can be expeditiously ameliorated until a patient can be evacuated to a location where he/she could receive definitive care. The needles themselves typically remain in place for 2–4 days and can often provide sustained pain attenuation.

ASP needles are individually packaged in sealed, lightweight, sterile strips, making them convenient to rapid

transport and use. The entire BFA protocol can be demonstrated, taught, and clinically mastered in a clinical training session of approximately 2 hours.

While the BFA approach can be taught easily to acupuncturists and non-acupuncturist health professionals, Joseph M. Helms, MD, the founding president of the American Academy of Medical Acupuncture, recently developed an adjunctive approach—the auricular trauma protocol (ATP)—that can be highly efficacious for addressing early manifestations of post-traumatic stress, particularly following exposure to a major trauma or disaster. The six-point ATP[‡] requires a greater understanding of auricular acupuncture and neurobiology and is best utilized by trained acupuncture professionals. The ATP can, however, be applied using either traditional needles or ASP needles after identifying the precise point with an auricular point finder. This too, is a modality that lends itself to widespread sharing and integration throughout the NATO military medical community.

NATO is comprised of a diverse array of nations. Of its 28 members, 26 are established participants in the International Council of Medical Acupuncture & Related Techniques (ICMART). While ICMART is a civilian organization, it represents 44 nations and more than 80 different acupuncture societies around the globe. As such, it provides an excellent venue for education and information sharing—particularly with regard to the promulgation of rapid and effective techniques that can be used to reduce human suffering, wherever it might occur.

Given that NATO has a prominent military medical function, one potential avenue for developing, sharing, and ultimately embedding the BFA and ATP techniques into NATO-based operations is to leverage an existing organization that offers a built-in connection between NATO's military and civilian medical communities, the Confédération Interalliée des Officiers Médicaux de Réserve (CIOMR), a.k.a., the Interallied Confederation of Medical Reserve Officers.

The CIOMR was established in 1947 and is chartered by NATO. It has a designated representative at meetings of the COMEDS. In fact, over the past few years, one of the authors (Dr. Pock) has had an opportunity to attend a number of the CIOMR's annual Congresses and has introduced CIOMR delegates to a number of previously unexplored applications of military medical acupuncture. Given the level of interest conveyed by CIOMR's international delegates, coupled with the fact that a NATO-sponsored RTG focusing on “Integrative Medicine Interventions for Military Personnel” is currently underway, the authors believe that the time could be right for NATO and the world of military medical acupuncture to join forces as complementary mechanisms to ameliorate suffering and promote better health around the globe.

[†]Communications of Dr. Belard with other members of the NATO chartered RTG, focusing on Integrative Medicine Interventions for Military Medicine.

[‡]The six auricular ATP points are: Hypothalamus, Amygdala, Hippocampus, Master Cerebral, Point Zero, and Shen Men.

CONCLUSIONS

In summary, this article began by providing a brief introduction to some of the military medical activities associated with NATO. The authors then described an opportunity by which two particular acupuncture techniques could be taught to a cadre of international military medical professionals. By doing so, these individuals would not only be ready to participate as part of international medical rapid response team, but could also be in a position to demonstrate the utility of developing, deploying, and utilizing an integrative medical approach to the management of a truly cataclysmic disaster.

DISCLOSURE STATEMENT

No competing financial conflicts exist.

REFERENCE

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Address correspondence to:
Arnyce R. Pock, MD, Col, USAF, MC
Office of Curriculum Reform
Uniformed Services University of the Health Sciences
4301 Jones Bridge Road, Room D-3013-C
Bethesda, MD 20814

E-mail: arnyce.pock@usuhs.mil