













January 26, 2009

The Honourable George Abbott Minister of Health Services Ministry of Health Services Government of British Columbia PO Box 9050 STN PROV GOVT Victoria, BC V8W 9E2

Dear Minister Abbott,

Re: Proposed Amendments to the "Allergy" Section of the Naturopathic Physicians Regulation

We are writing to express our concerns with the proposal by the B.C. Government to expand the scope of practice for Naturopaths, as contained in the document "Proposed Amendments to the Naturopathic Physicians Regulation, Revision date: December 12, 2008".

As allergy specialists, we support the concerns that the B.C. Medical Association recently presented to you about the proposal, particularly the issue of training and qualifications. We firmly believe that Naturopaths do not have the necessary medical training and qualifications to safely conduct allergy testing and treatment.

As a collective group of professional organizations with expertise in the practice of allergy, clinical immunology, allergy research, and patient organizations representing thousands of Canadians with allergies, we have specific concerns with **Section 5 (1)**, **subsections k and l** of the proposed amendments pertaining to challenge testing for allergies and desensitizing treatment for allergies.

If the expanded scope of practice for Naturopaths is legislated to include these methods of allergy testing and treatment, we believe that patient safety will be compromised, having a possible negative impact on society and potentially significant public health implications. We are unaware of any other provincial governments in Canada that include these allergy methods in the scope of practice for Naturopaths.

Our concerns include the following:

- The methods for testing and treating IgE-mediated allergy include the risk of anaphylaxis and therefore death. Naturopaths are not trained to manage anaphylactic reactions and their lack of adequate training can place patients at a higher risk of death.
- Naturopaths do not define "food allergy" in the same way as medical doctors. This difference can potentially result in the selection of an incorrect test for any given patient.

- **Positive test results do not equal a diagnosis of allergy.** A common error is giving a diagnosis of "food allergy" due to a positive test, which results from the improper interpretation of test results.
- Unproven (e.g. electrodermal vega) and inappropriate (e.g. specific IgG to foods) testing methods are presently being carried out by Naturopaths for the diagnosis of food allergy. The use of such methods at the same time as food challenge testing can result in confusion and a diagnosis that is not evidence based.
- There is a potential for children to be unnecessarily placed on very restrictive diets that result in malnutrition and poor growth. This commonly occurs when labels of "food allergy" are given to children who do not have true clinical IgE-mediated food allergy.
- There is a likelihood of increased demand for referrals and longer waiting lists for specialists in allergy and clinical immunology. Allergy specialists already receive a significant number of referrals for patients who have been inappropriately labeled as being "allergic" to multiple foods.
- A potential societal impact may be inappropriate demand for increased food restrictions in schools, child care centres and other public environments due to overdiagnosis. The result of this may be the risk of a "backlash" from individuals and families that do not have allergies.
- Naturopaths' lack of support for immunizations may extend to inappropriate beliefs that children are "allergic" to immunizations or components of their material. This has the potential to decrease herd or community immunity and increase the risk for epidemic disease.

We respectfully request a conference call or meeting at your earliest opportunity with representatives of the B.C. Society of Allergy and Immunology, B.C. Medical Association, AllerGen, and patient organizations (i.e. Anaphylaxis Canada and the Allergy/Asthma Information Association) to discuss our concerns. Please contact Louise Tremblay, CSACI Executive Director, at ltremblay@rcpsc.edu or (613) 730-6272 to arrange a time for this urgent discussion.

Thank you for your consideration. We look forward to hearing from you and supporting your efforts to provide optimal healthcare services for British Columbians.

Sincerely,

Dr. Richard Warrington, President, Canadian Society of Allergy and Clinical Immunology (CSACI)

Dr. Eric Leith, Chair, Canadian Allergy, Asthma and Immunology Foundation

Dr. Ross Chang, President, British Columbia Society of Allergy and Immunology

Dr. Judah Denburg, Scientific Director and Chief Executive Officer, AllerGen NCE Inc.

Laurie Harada, Executive Director, Anaphylaxis Canada

Mary Allen, Chief Executive Officer, Allergy/Asthma Information Association (AAIA)

Pierrette Dumas, Interim Executive Director, Association québécoise des allergies alimentaires

Copies:

Honourable Gordon Campbell, Premier, Government of British Columbia

Dr. Perry Kendall, Provincial Officer of Health, Government of British Columbia

Linda Gee, Executive Director, Legislation and Professional Regulation, Ministry of Health Services,

Government of British Columbia

Catherine Lappe, Regional Director General, Health Canada

Dr. William Mackie, President, British Columbia Medical Association

Dr. Bill Abelson, President, British Columbia Pediatric Society

CSACI Board of Directors

Louise Tremblay, Executive Director, CSACI

Yvonne Rousseau, BC Regional Coordinator, AAIA

Laura Bantock, Director of Western Region, Anaphylaxis Canada

Joni Huang, Consultant