

September 19, 2022

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Susan Gragg  
Program Manager, Board of Naturopathy  
P.O. Box 47852  
Olympia, WA 98504

RE: Non-surgical cosmetic procedures

Dear Ms. Gragg,

On behalf of the Washington State Medical Association, representing more than 12,000 physicians and physician assistants across the state, as well as our undersigned physician partner organizations, we write to share our opposition to the Board of Naturopathy's (Board) continued effort to expand the naturopathic scope of practice to include the administration of Botulinum Toxin, dermal fillers, and other inert substances for cosmetic purposes. In the nearly two years since the CR-101 was issued, the Board has heard concerns from several physician organizations, as well as dozens of individual physicians with expertise in this area. We have shared the significant risk of patient harm given the absence of requisite education and training. We have shared that the utilization of these substances is not only inconsistent with the practice of Naturopathy, but is also a significant scope of practice expansion that requires legislative consideration. These concerns are outlined in this letter.

**Botulinum Toxin, dermal fillers or other inert substances present a profound risk to patients when not administered by a highly-trained practitioner.**

There is broad consensus that the safety of Botulinum Toxin, dermal fillers, and other inert substances for cosmetic purposes hinge on the expertise and setting of the practitioner performing the procedure. The Food and Drug Administration (FDA) has analyzed adverse events associated with the use of injectable dermal fillers. They include facial, lip, and eye palsy, disfigurement, retinal occlusion, blindness, as well as rare but life-threatening events such as severe allergic reactions and anaphylactic shock. A number of these adverse events reported to the FDA and manufacturers imply that, in these cases, the administration of injectables were performed by untrained personnel or in settings outside a clinic or physicians' office.

We concur with the FDA's guidance on dermal filler safety that recommends seeking "...a health care provider who is trained to perform the dermal filler injection procedure.

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Having filler injected should be considered a medical procedure, not a cosmetic treatment.”<sup>1</sup>

**Naturopaths lack sufficient education and training to safely administer Botulinum Toxin, dermal fillers, and inert substances for cosmetic purposes.**

Physicians undergo years of education and training to safely administer these products for cosmetic purposes. They complete didactic courses in pharmacology, as well as the clinical application of pharmacology during their extensive training. This comprehensive training includes indications for the use of Botulinum Toxin compared to dermal fillers, proper technique, producing excellent outcomes, and most importantly, the management of adverse events. The education and training a physician receives cannot be replicated in a program or course on the procedure.

This proposal will expose Washington patients to unnecessary harm by allowing providers that do not have the requisite training and education to perform highly technical medical procedures. This is especially alarming considering there is no demonstrated shortage of highly trained practitioners performing this procedure.

**Naturopath administration of Botulinum Toxin, dermal fillers, and other inert substances is not consistent with the practice of naturopathic medicine.**

Our state’s law defines the naturopathic medicine scope of practice as “...the art and science of the diagnosis, prevention, and treatment of disorders of the body by stimulation or support or both of the natural processes of the human body”. Furthermore, the American Association of Naturopathic Physicians define the practice as “...a distinct primary health care profession, emphasizing prevention, treatment, and optimal health through the use of therapeutic methods and substances that encourage individuals’ inherent self-healing process.”<sup>2</sup>

Where naturopaths are permitted to provide injections under the “minor office procedures” provision in state law, they are limited to “substances consistent with the practice of naturopathic medicine...”

We respectfully ask the Board to address where the cosmetic use of Botulinum Toxin, dermal fillers, and other inert substances for cosmetic purposes fits under the umbrella of naturopathic medicine and its emphasis on natural processes and self-healing.

**The scope of practice proposal is inappropriate for rule and appropriate for legislative consideration.**

The administration of Botulinum Toxin, dermal fillers, or other inert substances for cosmetic purposes was not contemplated by the legislature when it established the naturopath’s scope of practice in 1987. Since then, the legislature has not amended the scope of practice to contemplate administration of injections for cosmetic procedures. It can be assumed under the principles of statutory construction that the legislature has not granted an expansion of naturopaths’ scope for non-natural treatments that are not consistent with the practice of naturopathic medicine, nor has the legislature allowed for expansion into this area of practice.

It is worth noting that the profession of naturopathy has repeatedly asked the Legislature to consider other scope of practice proposals, including increasing prescriptive authority to include Schedule III-V drugs.

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<sup>1</sup> [Dermal Fillers \(Soft Tissue Fillers\) | FDA](#)

<sup>2</sup> [Principles of Naturopathic Medicine - AANP](#)

While the details of the proposals have varied over the decades, the bills have always failed to garner broad support having never been brought to a vote in either the House or Senate.

Our organizations emphatically recommend that the Board rescind the CR-101 allowing for the scope of naturopaths to include administration of Botulinum Toxin, dermal fillers, or other inert substances for cosmetic purposes.

**This proposed scope expansion circumvents the legislative process and places patients and the public at unnecessary risk. There is no demonstrated need for the scope expansion, nor is there a demonstrated lack of existing highly-trained practitioners currently performing these procedures.**

Thank you for the opportunity to share our concerns. If you have questions, please feel free to contact WSMA Associate Policy Director Billie Dickinson at [billie@wsma.org](mailto:billie@wsma.org).

Sincerely,

