Acupuncture has been a popular therapy for years, with the World Health Organization and the National Institutes of Health singing its praises and celebrities, professional athletes, U.S. Military personnel, and thousands of every day patients experiencing its life-changing benefits.

A growing number of physical therapists (and other allied health professionals) are now offering a therapy that they call dry needling or intramuscular stimulation (IMS). You may have noticed that dry needling bears a striking resemblance to acupuncture and this may have left you wondering:

**What is dry needling?**
*How is it different from acupuncture?*
*Which therapy is right for me?*

### Who are the real needle experts?
This comparison will help answer these questions.

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### Licensed Acupuncturists

Acupuncture is effective for many types of pain, including musculoskeletal pain and dysfunction due to trigger points, as well as a variety of other problems.

Palpating and needling trigger points, in addition to standard acupuncture points, has been a common technique among acupuncturists for over a thousand years. Licensed acupuncturists have more training and experience in this technique than any other type of professional. The World Health Organization and numerous experts acknowledge that dry needling / IMS is a subtype of acupuncture.

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### Physical Therapists

**Basics**

- **Dry Needling / IMS** is effective for musculoskeletal pain and dysfunction caused by trigger points.
- “Dry Needling” is a term coined by Janet Travell, MD in the mid twentieth century. Dr. Travell used empty hypodermic needles to diffuse trigger points. The term “dry” refers to the fact that the needle does not contain any medication. Physical therapists have elected to retain this terminology even though hypodermic needles have been abandoned in favor of acupuncture needles.

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**History**

- Even advocates acknowledge that the use of dry needling / IMS by non-acupuncturists is in its infancy. There are a small handful of non-acupuncturist / expert practitioners to provide instruction / oversight and a relatively small number of patients have been treated.
Licensed Acupuncturists OR Physical Therapists

**TRAINING & EDUCATION**

- Have had a minimum of 660-870 hours of hands-on, supervised training in the use of needles, in addition to 1,245-1,755 hours of training in diagnosis, biomedicine, ethics, and other topics.

- A minimum of 250-350 supervised patient treatments is required prior to graduation and licensure.

- Three to four year accredited degree programs are overseen by the US Department of Education.

- Practitioners must pass one or more national board examinations prior to licensure.

- Continuing education is required to maintain state licensure and national board certification.

- Have hundreds of hours of training in needle technique and are therefore capable of performing effective needle manipulations with minimal pain.

- Deep, aggressive insertion of needles is often used to neutralize trigger points. In the hands of a practitioner who has only a handful of hours training in needle technique, this procedure can be painful and potentially dangerous.

- Brusing and persistent soreness around the site of needleling is rare.

- National board certification and state licensure provide clear minimum standards for training that are easy for consumers to assess. All licensed practitioners have met these clearly defined standards.

- Licensed in the vast majority of states. Scope of practice is clearly defined and best practices have been established over the course of hundreds of years. Consumers have the ability to make complaints to a state regulatory board if necessary. Clear disciplinary procedures are in place at both the state and national level.

- The American Medical Association has established a procedure code for billing acupuncture.

- Training programs vary widely in their quality and rigor & minimum standards have not been clearly defined. Physical therapists themselves acknowledge that some training programs are of poor quality. There is no standardized dry needling / IMS credential, making it difficult for the consumer to assess whether their practitioner is adequately trained.

- State licensure boards vary in their ability to set educational requirements and, because this technique has only been recently adopted by non-acupuncturists, uniform professional standards of practice have not yet been established. In some states practitioners are operating in defiance of policy and / or legislation that prohibits dry needling.

- The American Medical Association has not established a procedure code for billing dry needling / IMS.

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To experience the difference that only a real acupuncturist can make, please visit The National Certification Commission on Acupuncture and Oriental Medicine or TryAcupuncture.org to search for a qualified professional in your area.

Kristen Horner Warren is a licensed acupuncturist, herbalist, and nutritionist. She has been in private practice in central Texas for over 12 years. Kristen holds master’s degrees in Traditional Chinese Medicine and physiology and holds a bachelor’s degree in nutrition. She is uniquely qualified to compare the training that licensed acupuncturists receive to the training that practitioners of dry needling receive because in 2012 she completed a dry needling certification alongside sixty physical therapists. She has written about this experience at www.liveoakacupuncture.com/dry-needling

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