

**2003-04 SESSION
COMMITTEE HEARING
RECORDS**

Committee Name:

Senate Committee on
Health, Children,
Families, Aging and
Long Term Care
(SC-HCFALTC)

Sample:

Record of Comm. Proceedings ... RCP

- 03hrAC-EdR_RCP_pt01a
- 03hrAC-EdR_RCP_pt01b
- 03hrAC-EdR_RCP_pt02

➤ Appointments ... Appt

➤ **

➤ Clearinghouse Rules ... CRule

➤ **

➤ Committee Hearings ... CH

➤ **

➤ Committee Reports ... CR

➤ **

➤ Executive Sessions ... ES

➤ **

➤ Hearing Records ... HR

➤ 03hr_sb0200

➤ Miscellaneous ... Misc

➤ **

➤ Record of Comm. Proceedings ... RCP

➤ **

Senate Bill 200

Chelation Therapy

88

2003 SENATE BILL 200

Ms Ed has
legal since 1978

Recognized
lead; Alcho
Poisoning
a last resort
treatment
mandatory
Probs.

June 17, 2003 – Introduced by Senator SCHULTZ, cosponsored by Representatives ALBERS, SERATTI and VAN ROY. Referred to Committee on Health, Children, Families, Aging and Long Term Care.

New England journal medicine about people in med K failure
to 30,000 per year vs 3000

- 1 AN ACT to amend 448.06 (2); and to create 448.015 (1c), 448.02 (3) (am) and
- 2 448.02 (3) (i) of the statutes; relating to: chelation therapy.

Analysis by the Legislative Reference Bureau

Under current law, the Medical Examining Board licenses physicians to practice, investigates allegations of malpractice or unprofessional behavior by a physician, and imposes discipline on a physician who commits malpractice or acts unprofessionally.

This bill permits a physician to practice chelation therapy. Chelation therapy is a medical treatment in which a chemical is introduced into a patient's body for the purpose of binding and either removing or rearranging metallic elements. Under the bill, the Medical Examining Board may not deny a license, investigate, or take disciplinary action against a physician solely because he or she practices, or wishes to practice, chelation therapy.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

- 3 SECTION 1. 448.015 (1c) of the statutes is created to read:
- 4 448.015 (1c) "Chelation therapy" means a medical treatment in which a
- 5 chemical is introduced into the body for the purpose of binding, and removing or
- 6 rearranging, metallic elements in the body.

Family Support
1st/2nd alt.

Spouse - 1st Daughter
Spouse - 1st Daughter
in future wishes

A pharmaceutical
use of label

SENATE BILL 200

1 **SECTION 2.** 448.02 (3) (am) of the statutes is created to read:

2 448.02 (3) (am) If the board receives an allegation of unprofessional conduct
3 or negligence involving the practice of chelation therapy, the board shall consult, as
4 part of its investigation under par. (a), with at least one physical who devotes a
5 significant portion of his or her practice to chelation therapy.

6 **SECTION 3.** 448.02 (3) (i) of the statutes is created to read:

7 448.02 (3) (i) The board may not investigate or take disciplinary action against
8 a physician solely because the physician practices, attempts to practice, proposes to
9 practice, or holds himself or herself out to the public as one who practices, chelation
10 therapy.

11 **SECTION 4.** 448.06 (2) of the statutes is amended to read:

12 448.06 (2) DENIAL OF LICENSE OR CERTIFICATE. The board may deny an
13 application for any class of license or certificate and refuse to grant such license or
14 certificate on the basis of unprofessional conduct on the part of the applicant, failure
15 to possess the education and training required for that class of license or certificate
16 for which application is made, or failure to achieve a passing grade in the required
17 examinations. The board may not deny an application for a physician's license and
18 may not refuse to grant a physician's license solely because the applicant practices,
19 attempts to practice, proposes to practice, or holds himself or herself out to the public
20 as one who practices, chelation therapy.

21 **SECTION 5. Nonstatutory provisions.**

22 (1) The medical examining board may not investigate or take disciplinary
23 action against a physician solely because the physician practices, attempts to

SENATE BILL 200

1 practice, proposes to practice, or holds himself or herself out to the public as one who
2 practices, chelation therapy before the effective date of this subsection.

3 (END)

2003 SENATE BILL 200

*Schultz
Justified*

June 17, 2003 - Introduced by Senator SCHULTZ, cosponsored by Representatives ALBERS, SERATTI and VAN ROY. Referred to Committee on Health, Children, Families, Aging and Long Term Care.

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SENATE BILL 200

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SENATE BILL 200

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3 (END)

DECEMBER 16, 2003 PUBLIC HEARING

Senate Bill 200 relating to Chelation Therapy

WI. Association for Health Freedom

- EDTA: Group of chelating agents that binds metals-in this case removes them from the human body.
- Can be used to remove lead (lead poisoning cases).
- It has been shown that toxic metals affect the IQ of children.
- Accumulating evidence that toxic metals contribute to health/heart disease.
- FDA originally approved EDTA for cardiovascular...but it is not now (*did I hear that right*)?
- \$30 million federal study will include 2400 Americans being tested/studied.
- The New England Journal of Medicine okayed the use of EDTA for kidney failure. Reduced costs.
- Using EDTA for heart disease is an off label use.
- There is question as to why the Medical Examining Board has investigated Doctors who use chelation therapy to treat heart disease. The Board is supposed to investigate complaints brought against doctors. No person has complained about the use of Chelation therapy. Insurance companies are the one's complaining.
- Many times, chleation therapy is used on patients who have exhausted other forms of treatment.
- Chelation therapy is not covered by insurance. In the case of an MA patient, the person has to sign off that they understand this treatment is experimental.

Genie Kedile

- She is the wife of a doctor who practices.
- No patient complaints. In fact, they have written letters of support.
- Her husband's father almost needed his leg amputated. Chelation therapy helped him. He died at the age of 100 last year. He started Chleation therapy at the age of 80.

Patient

- Pays \$100 per treatment.
- He feels healthier. He is able to be more active.
- HIRSP initially paid for the therapy.

Senator Chvala

- ***Why does DRL investigate Doctors who practice Chelation when it has been approved for other purposes. It is his understanding that Doctors can use drugs/therapies as they see fit as long as they are approved for something.***

Halbur, Jennifer

From: Asbjornson, Karen
Sent: Tuesday, December 16, 2003 8:46 AM
To: Vander Sanden, Patrick; Halbur,
Subject: FW: VOTE FOR Senate Bill 200
Patrick - constituent from your district.
Jennifer - bill in Health Committee

Karen Asbjornson
Office of Senator Carol Roessler
(608) 266-5300/1-888-736-8720
Karen.Asbjornson@legis.state.wi.us

-----Original Message-----

From: Paula Cleveland [mailto:pdccleveland@excel.net]
Sent: Monday, December 15, 2003 2:40 PM
To: Undisclosed.Recipients@green.excel.net
Subject: VOTE FOR Senate Bill 200

Dear Senator,
It is imperative that you vote FOR Senate Bill 200 tomorrow!!!

Please do so in order to guarantee patient choice in health care providers and services. Also, we must keep Wisconsin abreast of medical developments. Our motto is FORWARD.

PLEASE vote for Senate Bill 200.

Sincerely,
Paula D Cleveland
Sheboygan



Wisconsin Medical Society

Your Doctor. Your Health.

TO: Members, Senate Health Committee

FROM: Alice O'Connor & Mark Grapentine, JD
Wisconsin Medical Society

DATE: December 16, 2003

RE: Information on Senate Bill 200 – Chelation Therapy

On behalf of more than 10,000 members statewide, the Wisconsin Medical Society thanks you for this opportunity to provide testimony for information only on Senate Bill 200 (SB 200), related to chelation therapy.

The U.S. Food and Drug Administration (FDA) has approved chelation therapy for the treatment of heavy metal toxicity and the removal of lead from the body. More specifically, chelation has been found effective for heavy metal poisoning, hypercalcemia (excessive calcium levels in the bloodstream) or digitalis toxicity (buildup of medicine given for heart failure). Because chelation therapy has been proven effective in treating these mentioned maladies, the bill's main thrust that a physician should not be automatically disciplined solely for practicing chelation therapy is acceptable, as long as the physician is using chelation therapy properly.

A troubling aspect of chelation therapy is the anecdotal accounts of such therapy being attempted in non-FDA approved cases, such as treating cardiovascular disease, rheumatoid arthritis or cancer. The Society believes that the Medical Examining Board should still retain the power to discipline physicians who practice medicine outside the structure of properly controlled scientific studies, including attempting chelation therapy when data or scientific study does not support such action.

It is policy of both our Society and the American Medical Association that it is the responsibility of chelation therapy proponents to conduct properly controlled scientific studies, to adhere to FDA guidelines for drug investigation, and to disseminate study results in the usually accepted channels. The AMA has also specifically stated its belief that chelation therapy for atherosclerosis is an experimental process without proven efficacy. We read SB 200 as not interfering with these policies.

Thank you again for this opportunity to provide testimony. If you have any further questions or need additional information, please feel free to contact Alice O'Connor at aliceo@wismed.org or Mark Grapentine at markg@wismed.org. Both can be reached at (608) 442-3800.

SB
200

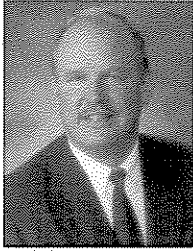
Committee Meeting Attendance Sheet

Committee on Health, Children, Families, Aging and Long Term Care

Date: 12-16-03 Meeting Type: Public Hearing
Location: 411 South

<u>Committee Member</u>	<u>Present</u>	<u>Absent</u>	<u>Excused</u>
Senator Carol Roessler, Chairs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Ted Kanavas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Ronald Brown	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Robert Welch	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Senator Dale Schultz	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Judith Robson	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Charles Chvala	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Robert Jauch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Tim Carpenter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Totals: 8 1



DALE W. SCHULTZ
Wisconsin State Senator



12/16/03
Public
hearing

Date: December 16, 2003

To: Senator Roessler, Chair & Members
Senate Committee on Health, Children, Families, Aging and Long-Term Care

From: Senator Dale Schultz

Subject: Senate Bill 200

I am pleased to be able to testify today on behalf of SB 200, which would permit the practice of chelation therapy. Representative Sheryl Albers and I have introduced this legislation after hearing many stories from constituents who have benefited from chelation therapy. Some of those people are here today.

By introducing this bill, in no way am I questioning the merits of traditional medicine; but rather stating that there is always room for growth and development of new medical treatments and techniques.

Chelation therapy is a recognized treatment for lead and heavy metal poisoning but is not yet approved to treat cardiac conditions. There are some doctors in this state that have come under investigation for unprofessional conduct and it concerns me that these investigations may have been initiated due to the fact that they use chelation therapy.

This bill is intended to give the citizens of Wisconsin the freedom to choose alternative therapies of medicine if they see fit. It does not ask you to make a determination of the efficacy of this treatment. It simply permits a physician to practice chelation therapy and prevents the Medical Examining Board from using a doctor's practice of chelation as the sole reason for denying a license, investigating, or taking other disciplinary actions against that physician.

This is an issue of ensuring personal freedom for individuals to decide what is best for him/her in his/her health care. Chelation therapy is usually a last resort treatment. If an individual is sick and has exhausted all possible traditional medical treatments, who is to say that they cannot seek out additional help?

In the past couple of weeks, the Medical Examining Board has taken action to permit the use of chelation therapy and has dismissed an earlier charge that the use of chelation therapy for circulatory problems presented an unacceptable risk to the patient. I have included with my testimony a copy of a *Wisconsin State Journal* article from November 25 regarding the decision. It is my hope that this committee can reinforce what now appears to be the Medical Examining Board's new standard.

I ask for your support of this important legislation. I would be happy to answer any questions at this time.

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Board Allows Chelation Therapy

Medical Examining Board Agrees To Let Green Bay Doctor Offer The Heart Disease Treatment.

Wisconsin State Journal :: LOCAL/WISCONSIN :: C1

Tuesday, November 25, 2003
Patricia Simms Health reporter

State licensing officials have agreed to let a Green Bay doctor continue to use chelation therapy to treat heart disease and other ailments.

But the state Medical Examining Board, among other things, reprimanded Dr. Eleazar Kadile for false advertising and faulty record keeping, required him to submit to a two-year medical skills assessment, and required that Kadile's patients read and sign a consent form before treatment.

The negotiated settlement last Friday, months in the making, ends at least one part of a prosecution that alternative medicine advocates have seen as a threat to their ability to get treatment.

"I think we did pretty well," said Raymond Roder, one of Kadile's lawyers. "The settlement includes a reprimand, but it just relates to some record-keeping issues. If a person is reprimanded, he can continue to practice. If there was really any threat to the public, they wouldn't allow that."

Michael Berndt, attorney supervisor for the state Department of Regulation and Licensing, did not comment.

In chelation, a man-made amino acid is generally delivered through the veins so that it can bind to toxic or excess metals and help flush them from the body, according to the National Center for Complementary and Alternative Medicine.

The case reflects a national battle fiercely fought between alternative and complementary medicine advocates and those who deride procedures not used in traditional Western practice.

Still to be decided by Administrative Law Judge John N. Schweitzer: who will pay the costs of the prosecution, including at least \$65,840 in expert witness fees charged by Robert Baratz, a Boston dentist and doctor.

The state had accused Kadile, a Green Bay area psychiatrist and alternative medicine provider, with using chelation therapy to inappropriately treat at least five patients suffering from heart and other diseases.

The final order did not assess whether the treatment works. "The board makes no findings concerning the efficacy of EDTA (ethylenediaminetetraacetic acid) chelation therapy for vascular disease at this time," the order said.

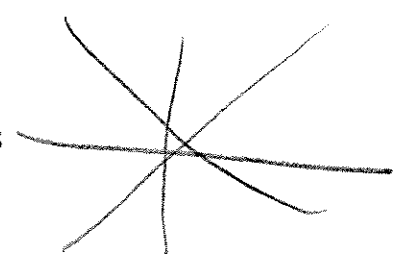
No other department officials commented Monday on the order.

Chelation is approved by the U.S. Food and Drug Administration (FDA) for treating lead poisoning and other heavy-metal toxicity, but the FDA has not approved it to treat coronary disease.

The state earlier charged that the use of chelation "by a physician for circulatory problems, arteriosclerosis or for removal of metals other than lead and other heavy metals is an unacceptable risk to the patient and is unprofessional conduct."

Federal officials estimate that at least 800,000 visits to receive chelation therapy are made in the United States every year.

Meanwhile, for years Wisconsin regulators have been investigating Dr. Robert Waters, who offers chelation therapy at his clinic in Wisconsin Dells. No state official would comment on how the Kadile settlement will affect action against Waters.



WISCONSIN STATE SENATE



Carol Roessler
STATE SENATOR

December 17, 2003

Michael Arthur Ketterhagen
220 E Merrill Ave
Fond Du Lac WI, 54935-3616

Dear Michael,

Thank you for your contact on Senate Bill 200 relating to chelation therapy.

Senate Bill 200 was introduced by Senator Schultz on June 17, 2003, and was referred to the committee on Health, Children, Families, Aging and Long Term Care, which I chair. On Tuesday December 16, 2003 the committee held a public hearing.

I have enclosed a copy of the bill for your review.

Again, thank you for your contact and feel free to contact me with any further questions or concerns.

Sincerely,

A handwritten signature in cursive script that reads "Carol".

CAROL ROESSLER
State Senator
18th Senate District

CR:/bc/S:\DOCS\Intern\Bruce\Letter draft\12-17 sb200.doc

Halbur, Jennifer

From: Roessler, Carol
Sent: Tuesday, December 16, 2003 9:24 AM
To: Halbur, Jennifer
Subject: FW: Defense of Marriage Bill

I hope this came to you as a forward pending? I reopened his contact on defense of marriage because he wants info

Karen Asbjornson
Office of Senator Carol Roessler
(608) 266-5300/1-888-736-8720
Karen.Asbjornson@legis.state.wi.us

-----Original Message-----

From: Michael Arthur Ketterhagen [mailto:maketter@dotnet.com]
Sent: Saturday, December 13, 2003 8:58 AM
To: Roessler, Carol
Subject: Re: Defense of Marriage Bill

Dear Senator Roessler,

Thank you so much for your replies regarding the Marriage Act presented in the Wisconsin legislature. As a Catholic theologian, I have lots of reflection about this issue and want to continue the conversation with you.

For now, I am in need of details ~~about the SB200~~. Could you send me a copy or fill me in on the details of the bill. I am also a Healing Touch Apprentice and am director of the Fond du Lac Center for Spirituality and Healing. We provide many important healing modalities for the people of Fond du Lac and I believe this bill may affect our work.

Thank you for your service,
Michael A Ketterhagen, Ph.D.
Associate Professor of Theology
Marian College of Fond du Lac
920-922-0629 (home)
920-923-8145 (college office)
mketterhagen@mariancollege.edu (college email)

SB 200

Passage

Vote Record

Committee on Health, Children, Families, Aging and Long Term Care

Date: 7/29
Moved by: Schultz Seconded by: Brown

AB _____ SB _____ Clearinghouse Rule _____
AJR _____ SJR _____ Appointment _____
AR _____ SR _____ Other _____

A/S Amdt _____
A/S Amdt _____ to A/S Amdt _____
A/S Sub Amdt _____
A/S Amdt _____ to A/S Sub Amdt _____
A/S Amdt _____ to A/S Amdt _____ to A/S Sub Amdt _____

Be recommended for:
 Passage Adoption Confirmation Concurrence Indefinite Postponement
 Introduction Rejection Tabling Nonconcurrence

<u>Committee Member</u>	<u>Aye</u>	<u>No</u>	<u>Absent</u>	<u>Not Voting</u>
Senator Carol Roessler	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Ted Kanavas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Ronald Brown	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Robert Welch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Senator Judith Robson	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Charles Chvala	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Robert Jauch	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Tim Carpenter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Totals: _____

Open

Senate Bill 200 ... relating to: chelation therapy.	
BILL SPONSORS	Introduced by Senator Schultz . Cosponsored by Representatives Albers, Seratti and Van Roy.
BILL HISTORY	Senate Bill 200 was introduced and referred to the Committee on Health, Children, Families, Aging and Long Term Care on June 16, 2003. A public hearing was held on December 16, 2003. Executive action was taken on January 29, 2004. The committee recommended passage of SB 200 on a vote of 8-1 (Jauch).
LRB ANALYSIS	<u>Current Law:</u> Under current law, the Medical Examining Board licenses physicians to practice, investigates allegations of malpractice or unprofessional behavior by a physician, and imposes discipline on a physician who commits malpractice or acts unprofessionally. <u>Proposed Changes:</u> This bill permits a physician to practice chelation therapy. Chelation therapy is a medical treatment in which a chemical is introduced into a patient's body for the purpose of binding and either removing or rearranging metallic elements. Under the bill, the Medical Examining Board may not deny a license, investigate, or take disciplinary action against a physician solely because he or she practices, or wishes to practice, chelation therapy. <u>Major Impact:</u> This bill permits a physician to practice chelation therapy.
FISCAL EFFECT	A fiscal note was not prepared for this bill.
SUPPORT	The following people appeared in favor of this bill: (1) Senator Dale Schultz; (2) Genia Kadile, Wisconsin Association for Health Freedom, Whitelaw; (3) Barbara Lemke, Wisconsin Association for Health Freedom, Watertown; (4) Rolf Kurandt, Wisconsin Association of Health Freedom, Camp Douglas; and (5) Robert Waters, Wisconsin Association of Health Freedom, Wisconsin Dells. The following person registered in favor of this bill: (1) Frances Smolen, Wisconsin Association for Health Freedom, Waupaca.
OPPOSITION	No one appeared or registered in opposition to this bill.
NEUTRAL	The following organization registered as neutral with the State Ethics Board but did not testify or register at the public hearing: (1) Wisconsin Medical Society. The following organization registered their intent to lobby with the State Ethics Board but did not take a position: (1) Wisconsin Health Freedom Coalition.
CONTACT	Jennifer Halbur, Senator Carol Roessler, 266-5300
DATE	February 27, 2004



Arthur Thexton
Lawyer
1721 Porter Avenue
Madison, WI 53704-3830
athexton@alum.beloit.edu
608-249-2702
Fax 249-2746

February 29, 2004

Hon. Carol Roessler
State Capitol 8-S
Madison, Wisconsin

Re: SB-200, "Chelation Therapy"

Dear Senator:

I write in opposition to SB-200, a bill which seeks to establish "chelation therapy" as an accepted treatment for vascular disease. This bill is up for floor vote on Tuesday, March 2, 2004 (tomorrow).

The Medical Examining Board is the body which is specifically charged with the responsibility for determining the standard of care for medical treatment in Wisconsin, §15.08(5)(b), Wis. Stats. This is wise public policy, as the Board, composed of physicians (both medical and osteopathic) and public members, is the body with the scientific knowledge, with public input, which is in the best position to perform this function.

The Board is also responsible for licensure, and for representing to the public that practitioners are competent to practice. The Board cannot effectively perform this function if the legislature has acted to define some things as acceptable, but not others.

One might fairly ask: will the legislature take a position on homeopathy, or the use of arsenic for syphilis (a once accepted but now obsolete treatment)? Who else will want "special treatment" from the legislature? Is this decision based on science or politics?

Medicine advances quickly, and enshrining any one therapy or treatment is not appropriate policy, as virtually all methods eventually are succeeded by new and better treatments, as science advances. This bill, however, will "freeze" the medical standard of care forever with respect to this one controversial therapy.

A public campaign has been conducted recently which makes a number of false and defamatory allegations about the Department of Regulation & Licensing and its staff, including me. I ask that you put the rhetoric into perspective, and consider this bill solely from a public policy standpoint.

Thank you for considering my views, which are written solely in my personal capacity, on my own time, from my home, not as a state employee.

Sincerely yours,

Arthur Thexton

A handwritten signature in black ink, consisting of a series of loops and a long horizontal stroke extending to the right.

Jim Doyle
Governor

WISCONSIN DEPARTMENT OF
REGULATION & LICENSING

1400 E Washington Ave
PO Box 8935
Madison WI 53708-8935
Email: web@dri.state.wi.us
Voice: 608-266-2112
FAX: 608-267-0644
TTY: 608-267-2416

Donsia Strong Hill
Secretary



March 1, 2004

HAND DELIVERY

The Honorable Mary Panzer
Wisconsin State Senate Majority Leader
Room 211 South
State Capitol
P.O. Box 7882
Madison, WI 53707-7882

The Honorable Jon Erpenbach
Wisconsin State Senate Minority Leader
Room 202 South
State Capitol
P.O. Box 7882
Madison, WI 53707-7882

Dear Senators Panzer and Erpenbach:

The State of Wisconsin Medical Examining Board passed a motion at its February 18 meeting recommending that I explain further why the Board believes Senate Bill 200 is unnecessary. The Board sent a letter to Representative Gregg Underheim, Chair of the Assembly Health Committee, on November 10, 2003, stating its position that Assembly Bill 397, the companion bill to Senate Bill 200, is unnecessary. The Board strongly opposes this legislation, which would create special protection for the practice of chelation therapy that is not in the best interests of Wisconsin patients. We urge you to prevent Senate Bill 200 and its companion from becoming law.


While the Board does not target complementary and alternative therapies when appropriately administered, or specifically, chelation therapy when effectively employed in procedures where it is recognized to provide a scientifically bona fide benefit to patients (to treat lead poisoning, for example), the Board views this legislation as unnecessary for the following reasons:

The Honorable Mary Panzer
The Honorable Jon Erpenbach
March 1, 2004
Page Two

1. Legislation such as SB 200, which elevates chelation therapy to a kind of protected legal status, unduly restricts the Medical Board in its ability to respond appropriately when chelation therapy is used to treat cardiovascular disease or other medical conditions for which such use is not warranted. The bill therefore erodes the Board's ability to carry out its mandate to "...define and enforce professional conduct and unethical practices..." as well as set "...standards of professional competence and conduct for the profession..."
2. There is not a sufficient scientific basis supporting the use of chelation therapy for coronary artery disease at this time. The American Heart Association, the American College of Cardiology, the United States Food and Drug Administration, and the National Institutes of Health agree there is no scientific evidence to demonstrate any benefit from this therapy for cardiovascular disease.
3. The use of EDTA chelation therapy to treat coronary heart disease patients is currently the subject of a national research trial. Irrespective of the results of that study, the Senate will provide no benefit of any kind to the patients of Wisconsin by enacting Senate Bill 200.

The Board takes seriously its responsibility to protect the health and safety of Wisconsin's health care consumers. Attempts to insulate or unfairly target specific procedures, as here, tend to put patient health and safety at risk by restricting the Board in its ability to exercise its judgment. We believe Senate Bill 200 would limit the Board in its ability to regulate and discipline when chelation therapy is used inappropriately. We therefore oppose it and ask that you act to prevent it from becoming law.

Sincerely,


Al Franger
Chair, Medical Examining Board

c: Donsia Strong Hill
Secretary, Wisconsin Department of Regulation and Licensing



Wisconsin Medical Society

Your Doctor. Your Health.

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TO: Members, Wisconsin State Senate
FROM: Mark Grapentine & Alice O'Connor
DATE: March 2, 2004
RE: Oppose Senate Bill 200

On behalf of more than 10,000 members statewide, we want to thank you for this opportunity to share our thoughts on Senate Bill 200, pertaining to chelation therapy.

When SB 200 was originally introduced in June 2003, the Society did not yet have policy directly on point. In January 2004, the Society's Council on Legislation discussed the bill and made the following recommendation to the Society's Board of Directors, which approved the policy on February 14, 2004:

The Wisconsin Medical Society continues to support evidence-based medicine when available. It is ill-advised for a legislative body to dictate or prohibit medical therapy on a disease-by-disease or therapy-by-therapy basis. The practice of medicine and discipline should be left to the Medical Examining Board.

The Society is concerned that SB 200 could be the beginning of a trend that takes away medical-related discipline decisions from the Medical Examining Board (MEB). This trend would not be in the best interests of public health. The physician members of the MEB, in consultation with the Board's public members, have the expertise to determine what is the current standard of care through daily interaction with patients, other physicians and experts in their fields. The State Legislature should continue to support the learned expertise and experience recognized in all the state licensing and disciplinary bodies – and especially that of the Medical Examining Board.

We respectfully request that SB 200 be returned to the Senate Health Committee for further discussion in light of the Society's new policy on the matter. At that time, we would be happy to have physician members discuss the pros and cons of this specific legislation and this type of legislation generally.

Thank you for keeping the Society's opinion in mind as you consider this bill. Please feel free to contact Alice O'Connor (aliceo@wismed.org), Mark Grapentine (markg@wismed.org) or Jeremy Levin (jeremyl@wismed.org) with any further questions.