

# NATIONAL ACUPUNCTURE DETOXIFICATION ASSOCIATION (NADA)

## ORIGINS & HISTORY

NADA ear acupuncture protocol (NP) is the direct descendant of Lincoln Acupuncture. Lincoln Acupuncture originated in 1971 with Dr. Mutulu Shakur, D.Ac. Dr. Shakur led the Black Panthers, the (Latino) Young Lords and White Lighting health care activists in establishing Lincoln Acupuncture Recovery Center. This was the first time in history that a standardized ear acupuncture method was used for substance use disorder (addiction) and other mental conditions. Dr. Shakur and his team also established the first ever “Patient’s Bill of Rights” and established the first acupuncture school in North America.

The NADA Organization was founded by psychiatrist Dr. Michael Smith in 1985. Dr. Smith served many years as medical director of the Lincoln Acupuncture Recovery Center. He worked to preserve and build on the successes of Dr. Shakur. Dr. Smith did much to educate others about the benefits of NP treatment and to improve access to training. He also refined and branded the Lincoln Detox Tea (a.k.a. Sleepmix Tea).

A seminal publication by Drs. Shakur and Smith (**The Use of Acupuncture in the Treatment of Drug Addiction**. Mutulu Shakur D.Ac., Michael Smith M.D.; American Journal of Acupuncture, Vol.7, No.3, July-September 1979) is the essential reading that launched what was to become the NADA protocol in the peer reviewed literature. It is the first publication to describe the use of group ear acupuncture for drug detoxification and other mental conditions in a conventional treatment setting. This article underscores why Lincoln Acupuncture is considered the forerunner of modern psychiatry’s current emphasis on Whole Health, patient-centered care, and the value of nonpharmaceutical intervention options in public health and population-based care.

In practice, the NADA protocol group setting manages a quiet and accepting atmosphere where no judgment is made, and no excuse of any kind is required or desired beyond which a practitioner or organization may absolutely need as appropriate. ADA protocol group is place where clients are drawn to contemplation and heightened internal awareness. Resiliency and ability to cope with problems. The “detoxification” facilitated by NADA protocol is not just physical—it is also emotional, addressing anxiety, fear, depression, anger, and hopelessness. It is useful across the spectrum of need from acute trauma/crisis to maintenance/chronicity to wellness. The passion and groundbreaking work of the Lincoln activists is captured in the documentary **Dope Is Death**, a film by Mia Donovan that is readily available on YouTube. The 2020 Harvard Video Series **In the Hands of Revolutionaries & Communities: A Social History of Acupuncture** by Eana Meng is another excellent documentary on the discovery of ear acupuncture for mental conditions and how its use has spread around the world.

## IMPLEMENTATION: *A Best Practice Approach*

In 2006, the U.S. Center for Substance Abuse Treatment (CSAT) of the Substance Abuse and Mental Health Services Administration (SAMHSA) identified NADA Protocol as a best practice in the treatment of substance use disorders. It did so without differentiation or distinction of

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substance as illegal or legal, prescribed or over the counter, sedative-hypnotic or stimulant, psychopharmaceutical or not. NP was recognized for excellent outcomes in engaging and retaining clients in treatment. The extent of treatment engagement and retention is a critical predictor of who will succeed in treatment and who will not. Recognition that NP is a valuable tool in the management of virtually all mental conditions has continued to grow.

The Veterans Affairs Healthcare System (VA HSC) is the largest healthcare system in the U.S. In June 2024, VA HCS launched VA-specific NADA training within VA with intention of introducing NP to all its medical facilities throughout the 50 states and 7 territories. Last year, NADA protocol was formally recognized as mitigating factors associated with suicidality (see 2023 article **The Effectiveness and Safety of Acupuncture on Suicidal Behavior: A Systematic Review** by C-Y Kwon and B. Lee; *Healthcare* **2023**, *11*(7),955). The importance of NADA protocol as a tool for decreasing suicidality cannot be overstated as a goal within VA HCS and in substance use disorder/mental health public health care overall.

The Diagnostic and Statistical Manual (DSM) of the American Psychiatric Association is the gold standard for classification of mental illness and contains a listing of diagnostic criteria for psychiatric disorders recognized by the US Healthcare System. Conventional modalities for treating mental conditions are pharmaceuticals, talk therapies and procedures such as electroconvulsive therapy. These treatments are not specific to any particular diagnosis. This lack of treatment specificity supports the notion that there are shared neurobiologic substrates underlying different DSM diagnostic categories. Impulsivity is a common symptom shared across DSM categories. High trait impulsivity is predictive of treatment failure, of a more severe illness course, and of most medically severe suicide attempts. The 2015 publication **Impulsivity and Stillness: NADA, Pharmaceuticals and Psychotherapy in Substance Use and Other DSM5 Disorders** (K. Carter and M. Olshanperlmutter; Behavioral Sciences, 2015, 5, 537-546) is a concept article that explores the issue of impulsivity and the value of using NADA protocol for mitigating impulsivity in conventional mental health treatment settings. Because NADA protocol is passively received by a client, it is an intervention that may be feasible when others that require active client motivation, attention, and learning are not. Because NADA protocol is calming, centering, and grounding, it can quickly help clients be better prepared to benefit from the psychosocial options in treatment or engage in self-help at an earlier point in the treatment process.

The 2017 publication (**NADA Ear Acupuncture: An Adjunctive Treatment to Improve and Maintain Positive Outcomes in Substance Abuse Treatment** by K. Carter and M. Olshan-Perlmutter. Behavioral Sciences, 2017, 7(2), 1-13) is a prospective, randomized trial with crossover design providing evidence that NP can facilitate a durable trait response. The strong trait association is in addition to the relaxation response state that is reliably observed over the course of a treatment hour. NADA protocol is helpful in clarifying issues such as dual diagnosis, co-occurring diagnoses, and situations where “clearing the field” of confounding signs and symptoms can be delivered as “first aid” even before a definitive diagnosis or treatment plan can be made.

## **CLOSING: NADA SUPPORTS IN-BORN HOMEOSTASIS**

The hypothalamic-pituitary-adrenal (HPA) axis is the chief mediator of neurophysiologic homeostasis, resiliency, eustress, and distress. HPA dysfunction and overactivation are associated with measurable abnormalities of brain morphology, including those structures associated with emotion (amygdala), memory (hippocampus), and decision making (medial prefrontal cortex).

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NADA protocol exercises a homeostatic influence on the HPA axis and is associated with improved functioning of the sympathetic nervous system, the parasympathetic nervous system, and central nervous system. It is truly amazing that the NP ear acupoints can elicit such robust responses across so many states, traits, illnesses, diagnoses, and conditions. At birth, the external ear is the only location in the entire body where all three germ layers co-exist in one anatomical structure. It is this structure of interconnectedness that best explains the wonderful capacity of how the NADA protocol influences many mental conditions very easily, safely, and well. Similar implications of broad ear impact on health is found in Traditional East Asian Medicine as both the Ling Shu and Su Wen agree all “Yin meridian channels converge on the ear; Yang meridian channels pass through the ear”.