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2009

## An Interview with Fiona Kelley

An Oral History Conducted by Lisa Gioia-Acres

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Heart to Heart Oral History Project

Oral History Research Center at UNLV  
University Libraries  
University of Nevada Las Vegas

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All transcripts received minimal editing that included the elimination of fragments, false starts and repetitions in order to enhance the researcher's understanding of the material. All measures have been taken to preserve the style and language of the narrator. In several cases, photographic images accompany the collection and have been included in the bound edition of the interview.

Claytee D. White, Project Director  
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## Preface

Dr. Fiona Kelley was born and raised in Connecticut. Her parents were both teachers (though her mother quit teaching to raise their two daughters), and Fiona recalls the European vacations the family took every summer, exploring castles and enjoying picnic lunches.

Fiona was educated at Greenwich Academy in Connecticut and Bard College (dance major with art history minor) in New York. She mentions dancing in Acapulco and California and then auditioning and being hired as a cover dancer for *Hallelujah Hollywood!* at the MGM in Las Vegas. Meanwhile, she had also become licensed in massage and states that as she was making the transition from dancing to production of dance, she and her husband were invited to China.

While in China, Dr. Kelley recalls visiting a hospital which specialized in the treatment of AIDS through acupuncture. This led to a decision to learn Oriental medicine, which she pursued once she returned to the United States. She shares many details of her studies in New Mexico and Las Vegas, the licensing requirements for Nevada, and continuing education studies.

Dr. Kelley lists some of the conditions for which she treats patients in Las Vegas and explains why Nevada is such a good place to practice acupuncture and herbal medicine. She also compares the differences between Oriental and Western medicines, and believes that the two very different styles are becoming more compatible.

**This is Lisa Gioia-Acres. Today is March 21st, 2009. I'm here to conduct an oral history interview for the Heart to Heart oral history project for UNLV's Oral History Research Center. And I am here today with Dr. Fiona Kelley.**

**And what is the name of your organization here? Wuxin?**

Wuxin Healing Arts.

**Wuxin Healing Arts. And we're here on East Flamingo in Las Vegas.**

**Hello, Dr. Kelley. Nice to meet you.**

Hello.

**All right. I'm very fascinated with this branch of medicine. So I'm really excited about doing this interview with you. But before we get started about your education and experience, I'd like to talk about your early life. So tell me where you came from. Maybe talk a little bit about mom and dad and what your interests were when you were a little kid.**

Well, I was born in Connecticut. My father was a teacher. And my mother was -- she had been a teacher. She had been an art teacher. And she basically raised us. So she was a housewife. Then the nice thing about having teachers for parents is they have the summer off. So one of the best things I think about growing up was that I got to travel in the summers a lot with my parents. And starting with when I was about ten or 11 we started going to Europe in the summers. So I got to see not very much of the United States at all but a great deal of Europe over the years. And that was a fabulous education in not only art and art history and architecture but also culture and foods and the fact that there were lots of ways to do things that weren't necessarily American.

**How old were you when you first went to Europe?**

Eleven.

**Wow. Do you have brothers and sisters?**

I have one older sister. She is also a teacher. A family of teachers, actually. She teaches at MIT.

**And you grew up your whole childhood in Connecticut?**

Well, not counting the summers, yes.

**Except for the summers. What's one of your memories of going to Europe?**

Well, the four of us, my sister and I and my parents, would travel around in a little VW. It didn't matter what country we were in: we would explore castles. And they'd already mapped where we

were going to go. We had an itinerary. But often we would get to the town or the city or the village and go through the castle and then we'd go and have a picnic lunch and then more castle or whatever. But I remember an awful lot of picnics in cow fields and along streambeds in different places. Every morning we'd go and get our supplies. You know, we'd get a baguette, some ham, cheese, oranges, chocolate and a couple of bottles of water and that was it. It was a great life.

**Fascinating. When was the last time you went to Europe?**

I have to think for a moment. It's probably been two or three years. I went to England a couple of years ago with my sister. We went to England and Spain to see family.

**Wow. Do you have any idea what it was that caused your parents to do such an unconventional summer vacation?**

They liked to travel. They loved to travel. My father spent a great deal of time in Europe. And my mother absolutely loved it. So it was a great way to bring up kids.

**Do you speak a different language?**

I used to be better at French. Years later I picked up some Portuguese, some Italian and some Spanish and Japanese. But I don't claim to be fluent in any of those.

**You got a little exposure, though. And where did you go to high school?**

I went to the Greenwich Academy in Connecticut, which was then a girls' school. We wore a little green uniform every day. My father, as I said, was a teacher. He taught at the academy. So I was a faculty child.

**Did you at any point in your life decide or think that you might want to be a teacher and follow in your parents' footsteps?**

That got scotched when I was about 18 and I had to teach for a summer because what I wanted to do had fallen through. So I got myself a job teaching dance for the summer. And I absolutely loathed it and realized I didn't want to teach. However, years later I did teach here at CCSN, but that was a whole different --

**Experience.**

Very different.

**So you're 18 and out of high school maybe and --**

I was in college and I was home for the summer.

**And what was your college degree? What program were you in?**

I went to Bard College, which is in upstate New York. It was a satellite of Columbia University I believe. And I majored in dance with a minor in art history.

**You thought maybe you were going to be a dancer?**

Oh, I had every intention of being a professional dancer.

**And then what happened?**

I became a professional dancer.

**For how long?**

That's actually how I ended up coming to Vegas. But, yes, I was a starving dancer and choreographer and, you know, looking for my big break. I was floundering around in California when I got an offer that brought me to Vegas. It was a strange set of circumstances.

**Let's talk about it if you don't mind.**

Some of it I think is old hat and probably has no relation at this at all. But I got a job dancing in Mexico. And I was -- how old was I? I was 23. I had never actually been in a nightclub before. Never had. And I was in Los Angeles when this guy came up to me after a class and said would you like a job in Acapulco? And I was basically at that point looking around for Allen Funt thinking I was being set up for some gigantic joke. He was looking for a replacement dancer for this job in Acapulco, so I went down there. It was not the happiest of experiences. But the girls came from Las Vegas. We had a reunion a couple of months later and the reunion was to coincide with the auditions for MGM, which at that time had a show called Hallelujah Hollywood. We all auditioned as part of the fun of the weekend and two of us got it. Two of the other girls got into the Lido show, so we all settled here.

**So you came to Las Vegas in what year?**

1978.

**And you danced for?**

I danced for Hallelujah Hollywood as a cover dancer.

**What was that experience like?**

It was a blast. It was really nice to be paid to dance. But it was on a different scale. And it was what I used to joke to my parents was "That's Entertainment, Part Four." Do you remember the



"That's Entertainment" movies?

**Uh-huh.**

So we did a Fred and Ginger number. We did a Judy Garland number. There was a number from "Pirates of the Caribbean." And so it was the musicals.

**Do you still dance?**

No, I don't.

**So what happened? What caused you to stop dancing?**

I decided I wanted to learn to do something else because I looked at the older dancers who were jaded and they didn't seem like very happy people anymore. So I told myself in my early 30s that I would find something else to do so that I wouldn't get to be bitter. I had the good fortune enough dancing with a couple of people who would sometimes reminisce about how wonderful it was in the old days back in 1968 when they worked for -- and they would name a choreographer. I always had the sense that their life was much better then and they were just sort of hanging on. And I thought that I needed to move forward and keep on challenging myself.

So when I was 32 I started making a transition into production work as a production coordinator and a production assistant. Production assistant is the bottom. You're like a gofer. I did commercials and film jobs where I was on a crew and sort of, you know, the nice person who runs and gets all the stuff that you need.

**And that was here in Vegas?**

Uh-huh. And I did that for a little while and started augmenting that with work as a stagehand. So when there wasn't film work, there was stage work. When there was stage work, there was no film work. Somehow I was always working. And that gradually transitioned to the point where I realized that tech people got paid a lot more than people like directors and also that I really didn't want to be a film producer. I had no interest in doing that. So I ended up working through Local 720 as a stagehand.

**Before we go into the next step, what was your impression of Vegas? Why did you stay if you were no longer a dancer?**

Because there's a lot of work here in the entertainment business. There were films. There were commercials. There were little, tiny TV shoots. And I wasn't quite sure where this was going to

land, but I figured it was all interesting and it was all new. When I decided to leave dancing, there weren't a lot of opportunities. If you still had good legs, which we all did, then you could do cocktails or you could do real estate because you were used to doing very long hours or you could get married and have a baby. And I wasn't interested in any of those particularly. So I sort of struck out on my own. There were a few people who had been dancers who became stagehands, not a lot. And occasionally I ran into people that I had worked with that had been on the crew when I was in a show somewhere. Sometimes that was very nice and sometimes it was, oh, you're just a dancer; you're not really very good at being a stagehand. But it all comes back in the end. It doesn't matter.

**So tell me what took place, then. You're a little dissatisfied with the work that you're doing and you decided to maybe make another change.**

I always knew that I didn't want to be a stagehand for life, but it seemed like a good place to rest until I figured out what I wanted to do. I really wanted to feel passionate, like the way I felt about dancing. I was working as a spotlight operator at the Excalibur when my then husband and I went to China. I was invited because I am nationally certified in massage, which is something I had picked up along the way.

**Who invited you to go to China?**

I am trying to remember the name of the organization. They were the traditional Chinese medicine international something-something institute. And they would put out invitations to everybody who was nationally certified. And they offered programs in Olympic sports medicine, Tui Na or Qigong. Tui Na is pediatric massage. Qigong is actually the basis of Tai Chi. So I thought I would begin at the foundation. So I took Qigong. And my husband decided he wanted to come along for the fun of it. So I did this program for medical Qigong. It was in a hospital.

**What year was that?**

I am trying to remember. It's been a long time. I think that was 1996. The hospital gave us a tour of their facility. They did acupuncture and herbs, and I remember that they were treating something I was very, very interested in. My best friend had just died of AIDS. And they were treating AIDS by tonefying (sic) the immune system. These people were not doing drug cocktails, but they were going back home and having real lives. And that was not happening very much in

the United States at that time.

So I went home and had a long talk with myself about whether I was willing to go back to college in my 40s. There were going to be a lot of hoops to jump through and was I up for it? And the thing that was larger than "was I up for it?" was could I live with myself if I didn't try? And that answer was very clear.

**Okay. Before that little break, we were talking about whether you could live with yourself if you did not go. One of my questions is: What are the hoops that you would have to go through?**

Some premed and then acupuncture school, which is a four-year program.

**Is that here in Las Vegas?**

No. No. I had bought a book in preparation for this trip about traditional Chinese medicine. And in the back of it was a list of every certified school I think in the United States and possibly in England, too. A year or two later my husband wanted to move out of Las Vegas, specifically to Santa Fe, New Mexico. And I discovered that there were two colleges in Santa Fe. The International Institute of Chinese Medicine was run by a Chinese couple. And Southwest Acupuncture College was run by an American couple who had been in the Peace Corps. It turns out she speaks five languages fluently. I interviewed at both, but I only applied to Southwest Acupuncture College and I got in.

**What kind of work did your husband do?**

He was a stagehand.

**Okay. Go ahead.**

I realized that if we moved to Santa Fe I wasn't going to be able to make a living doing what I had been doing before. There is the Santa Fe Opera, but it's seasonal. There isn't enough work to keep you working year-round. And I thought that if I went to acupuncture school I would make new friends interested in something that I was interested in and then I would do that and I'd have a new interest and new friends and I'd feel really good about it.

Santa Fe at that time had a population of about 67,000. And it had about 268 acupuncturists. This is not a good ratio. Many of those acupuncturists were waiting tables two days a week to pay the bills. And I quickly realized that I was not going to want to stay in Santa

Fe. But I didn't know what was going to happen.

Several things happened. I got divorced and I got through acupuncture school. And about the time that I was going to be finishing up school Nevada opened its doors for the first time in a long time. And my friends here said come back. There was a whole new set of hoops to jump through. And I just did them one after the other until I had gotten through the whole list.

**Well, talk to me a little bit about going to school. What was the experience like for you? As an older student what were some of the things that you had to learn?**

I always thought I was going to be the oldest one there and I never was. It was a surprise, a pleasant surprise. I did about a year and a half at CCSN. I took anatomy and physiology and biology so that I would have those already on my transcript and I wouldn't have to take them in acupuncture college because the course load is very heavy. You can do it as a four-year program in which case you're doing at least 15 credits a semester, or you can do the accelerated program and do it in three years in which case you're doing at least 20 credits a semester. When I walked in, the academic dean talked me into starting with a three-year. You can always go down to the four-year program if it's too heavy. So I did. And by the second year -- and it's a trimester program. It's pretty much you get a month off in August, but you don't get the summers off. So you have winter semester, spring semester and summer semester. And the summer is more condensed just as it is here. So you've got the same amount of material, but fewer weeks to get it done.

What was your question about this?

**Well, was it -- how challenging was it?**

Very, but it was also fun. Having by then done CCSN I had gotten used to studying again. And that was at first very, very scary going back to college and hitting the books and trying to remember how to do homework. And I was blessed with a very, very good teacher who --

**And this was here?**

That was here.

**What's the name of the teacher? Do you recall?**

Dr. Fred Jackson. We are still friends. He was in the biology department and taught anatomy and physiology, which is a two-part course. You do the lecture and you also do a lab. So I got

probably a better background than if I had just done anatomy a year or two later without the labs, without the much more detailed understanding. So I felt very blessed with that. That was great.

Southwest Acupuncture College was a great deal of fun, but there's also stress because you're in school. There's no slacking off. The people who go to acupuncture school are very motivated, very motivated. We had I think 24 people in our class, which was one of the larger classes they had had. It was a mix of men and women, I think more women than men, but no biggie. And it was new. And my teachers were great. It was a fabulous school. It has been described as the Ivy League of acupuncture schools.

**Let me ask a question. When you were taking your anatomy and physiology here, did you already know that you were going to do acupuncture?**

Yes.

**What's the difference, if any, between Chinese herbal medicine and acupuncture, or do they go hand in hand?**

Chinese herbal medicine is about herbs. Acupuncture is about needles going into the body.

**So what made you decide which way to go?**

It's not quite a correct question. There are ten different modalities to Oriental medicine and acupuncture is one of them. Chinese herbs is one of them. Oriental massage is one of them. Qigong is one of them. Nutrition is one of them. Feng shui is one of them. Meditation is one of them. And if I have to rack my brains, I'll probably come up with the rest. But these are all branches of Chinese medicine. The most famous, of course, to Americans would be acupuncture because it's the weirdest thing that people can imagine. How can you put needles in the body, stimulate something you can't see and make somebody better?

So the Chinese have this term, which is chi. The Japanese call it chi. The Koreans I think also pronounce it chi (pronounced key). But chi is vital energy and chi travels in blood. So a lot of what we're doing is needles into specific anatomical locations, which we call acupuncture points, to stimulate moving the chi through the body.

Every baby acupuncture student wants to be the person who's going to figure out how the meridians correspond to the capillaries or the blood system or the nerve system and break the code. It is in the innocence of students that we all think that we're going to be the ones who are

going to do this because medicine has been going on for 4,000 years. And if there was a map, they'd have found it by now, believe me.

But I had a lot of anatomy background from dancing. I had done graduate school for two years at Cal Arts in Valencia, California. And I had absolutely enjoyed anatomy and physiology, which was part of our curriculum then. And so anatomy is the structure, the naming of names, the lower border of the spinus process of T-5.

**Okay.**

Okay? The anterior superior whatever it is. It's all location. It's the naming of places. Physiology is the function. So anatomy is the names of the structures and physiology is how does it work? So anatomy and physiology is how does the human body work? Sometimes when patients say I hurt over here, I will make them very specifically say, okay, is it here or is it here? I'm trying to find out if it's on the edge of this muscle or if it's on the edge of this tissue. What is it?

And I know my anatomy well. After I came back to Vegas, Dr. Jackson talked me into teaching one of the A and P labs for a while. And he said it'll be a good brush-up for you and they'll all become your patients. None of them became my patients. But it was fun. And it was a lot more fun teaching that time than it had been when I was 18.

**So take me back and explain what made you decide. Was it because of your interest in anatomy and physiology that you decided to go into acupuncture?**

No. No. Well, let's go back to the first Chinese hospital. They were reversing AIDS. Nothing in the United States was saying that they were doing that. And I had just lost my best friend. So I thought that I would learn acupuncture and maybe treat AIDS patients. But when you commit to acupuncture school, you commit to the whole ball of wax. You commit to learning first single herbs and then formulas, as well as acupuncture.

**Oh, so those ten components of Chinese medicine --**

You get it all.

**Okay. Very good.**

You get Chinese nutrition. You get Qigong. You get the whole thing.

**And you did this in three years?**

Uh-huh.

**Very interesting. So you decided to come back to Las Vegas. There was a need.**

I came back to Las Vegas. When I had first applied, the law for Nevada was that you had to practice under a Chinese doctor as an apprentice for two years even if you were a full DOM, doctor of Oriental medicine. By the time I actually got licensed that law had been changed and it was no longer necessary to do an apprenticeship. So I was pretty much on my own.

**So you didn't do an apprenticeship when you got here?**

No.

**When did you come back to Vegas?**

I came back to Vegas at the very end of 2001. And there are three of us who were licensed in 2001. We had all got -- first, it was Dr. Sharon Roth, then Dr. Farolyn Sweeney and then me. We were the only three that got licensed that first year. And since then there have been more. There are now almost an equal number of American acupuncturists as those from China.

**Do you see a difference in approach between, say, an American and a Chinese acupuncture doctor?**

Yes, but I'm not sure if I can put my finger on it for you. As soon as I graduated I started a post-grad course for two years while I was setting up my practice. And I flew six times a year to study in New England with a wonderful teacher who helped me take what I had learned in the school and figure out how to actually apply it to the patients in front of me. When you are in acupuncture school, your first year you follow around a senior student in clinic. You don't do any needling. You don't know enough yet. But you get to observe. The beginning of your second year you start to treat. And you have a very, very big safety net underneath you. You have a supervisor who checks everything you do, checks the points that you pick and suggests possibly other points instead and checks your point location in that patient in the student clinic, okay? You have a lot of support and a very big safety net. And you need it. And you do student clinic for at least two years. So you do it your second year and your third year and your fourth year or however many years it takes you to get through school.

If you do school on a part-time basis -- there was one student I know who took -- she had a child and dropped down to doing only one course at a time for a while. I think it took her like seven years to get through. But she loved the medicine. But, you know, when you have the baby

and you're nursing, it's hard to keep up on --

**Well, she's got that extra clinic time as well.**

Yeah.

**What was it like the first time you needled somebody? Is that the right term, anyhow?**

I still remember the very first patient I ever had. And it was very funny. I can't remember what he came in for. But we are trained to ask the ten questions, the classical ten questions. So we go through, you know, how's your sleep? How's your digestion? Muscles aches and pains? Period problems? You know, we have various categories. And you always say is there anything else? And he said to me can you help my golf game? And I thought about it for a minute and I said I'll see what I can do.

Now, there is a set of points that helps when you are stressed and distracted. My father had been a golfer, so I knew that golf was all about focus. So I did those points to him. And the next week he comes back and my supervisor is standing there in the room. And he says whatever you did last time do it again; my golf game was better than it's ever been. And my supervisor goes, Fiona, step out of the room, please. And I'm like uh-oh. And she pulls me aside and she says what did you do? And I explained to her what my thinking was. And she said, oh, yeah, I could see -- yeah, that would work. Okay, fine. And I went back in the room with the patient. But what it taught me was that you can use these points in so many different ways.

Now, I have classical traditional Chinese medicine training. I also have training from American teachers. And possibly the way that I treat is different from somebody classically Chinese because of the teachers that I had or the teachers that they had. It doesn't mean I am better.

**No. But you learned from the Chinese and you learned from the American. And you kind of meshed it?**

It's a melting pot.

**But you can't put your finger on what the difference is, but --**

Well, there are many different approaches and also -- how to explain this? China is such a large country. So up in the northwest is different than what they have in the south in terms of weather, W-E-A-T-H-E-R. So up in the west it's very dry and windy. And down in the south it's very



different and it's coastal. And then in the middle you have Yellow River and you've got lots of dampness and you have a great deal of malaria and dysentery. So when you learn these classical texts, there are whole books on nothing but malaria and dysentery. And you go, boy, they had a lot of malaria and dysentery. Now, do I see a lot of dysentery here? Not so much. It's a dry climate. But you will end up eventually finding things that you're really good at. Because of my dance background and because of my massage background, I am really good with a lot of tendon muscular problems. I'm very good with muscles.

**And that's what I was going to ask you. What do you see as prevalent in your practice?**

**What do the patients coming in complain of?**

I get all kinds of stuff. I get the tendon muscular. I get stomachaches. I get diarrhea. I get -- not me personally, the patients -- digestive problems, fertility and infertility, reproductive disorders. Headaches is a big one. Anxiety and stress is a big one. Weight loss, stopping smoking -- we see those perhaps more in the United States than in China. Oddly enough, more and more I'm seeing hair loss from the stress.

**Interesting.**

Yeah. So I get a huge variety.

**How about allergies?**

Allergies, flus, colds, runny noses, you name it, lung disorders of all kinds, everything from hay fever and rhinitis to, you know, a lot of stuff in the chest, serious bronchitis.

**What kind of treatment do you provide that is different from, say, regular Western medicine?**

The bottom line is that in its creation Western medicine treats the symptom. I'm going to preface this little paragraph by saying I like Western medicine for a number of things. They're fabulous for emergency medicine. I don't set broken bones. I don't do surgeries. Chinese medicine tries to figure out the difference between the branch and the root of the disease. So the presenting symptom might be hand tremors, but where does it come from and why and what is creating that pattern that is finally manifesting in something like Parkinson's with hand tremors? So Western medicine will give a drug that will try and stop the tremors, but it may not address the root of the Parkinson's. With that in mind, Chinese medicine takes a lot of patience.

**Not patients, but --**

Patience, as in the ability to tough it out because if you have a pattern that you've had for 60 years, no matter how good you are at this medicine, it isn't ever a magic bullet and it may take some time to get the message down to the root in your body and clear that as well -- we take care of the symptom first and then we try and get to the pattern. Chinese medicine is based on patterns and Western medicine is based on just the symptoms as they present.

Where this gets very complicated is when you have senior citizens come in, as I had somebody last week come in, with a grocery bag of bottles of medication they were taking. And I had to go through it and figure out what they were and if anything was counteracting anything else. Generally now in America that role is the pharmacists or relative who then takes things to the pharmacists and says are these things safe together?

**Very interesting. Do you find resistance or are people in the United States or even in our local community becoming more open to --**

Much more open.

**And what do you attribute that to?**

I always laugh that for a medicine that is somewhere between four and 6,000 years old we're the latest hot thing. This medicine goes back not just centuries, but we have written books that are two to 3,000 years old that are translated that we still study. And in the books that we study in school it is referenced back to something that was written in 600.

**But the average layperson doesn't know that.**

No. But I had an interesting example of this last week. I am treating a couple, a husband and wife. She comes in and says what her symptoms are. And I understand the pattern from what she has said and I start to treat the pattern. She says to her husband I am feeling better and he thinks, well, she's doing Chinese medicine; must be a quack. Then he comes to see me for a condition and he starts to get better. I can tell that he wants to ask me about his wife, so I said without going into anything about her case, I am going to read you a pattern in a book. I read him the pattern and he said, oh, my God, because it was everything that his wife has described that she is going through. He just thought she was hypochondriac and if she'd just get a job she'd be fine. That was not going to be the answer for this woman.

**So you just opened up another person's mind, then.**

Uh-huh.

**Very interesting.**

Now, in every magazine last year there was something about alternative medicine. We're the latest hot ticket. But we're based in a tradition that is far older than Western medicine. The oldest things that we have are bleeding techniques in Western medicine and leeches. If you look at old amputations, it's horrible what we used to do in the name of medicine. We have grown by leaps and bounds in the last hundred years, but Western medicine as we know it today is probably less than a hundred years old if you count from the microscope or the Salk vaccine, polio vaccines, and the whole idea of vaccine medicine. It was done in the 50s, right? Chinese medicine goes back a lot further.

There are things I think Western medicine is fabulous for. But we are an impatient and young country and we want a magic bullet and we want to be better now. We do not want to wait for two weeks. We want something that's just going to knock our socks off and make it better. And then maybe we'll understand that this medicine has great value and we'll be willing to deal with some of the other things that make us have a weakened immune system so that we always get seasonal problems.

**Have you practiced anywhere outside of Las Vegas?**

Only under the umbrella of my school in Santa Fe, New Mexico.

**What do you see in Las Vegas? Do you see it as being a really great place for your practice in medicine? And if so, why?**

I do because I see two things. I see it as a great place for acupuncture because we have a very good foundation. The Chinese first came here and set up Nevada to be the golden palace of acupuncture. They made the strictest entry requirements of anyplace in the United States and they have fought hard to keep that. So to get to practice here you have to meet some very high standards. There are other states in the United States where you can pretty much walk in and set up shop and you don't need to pass a lot of things. Nevada is not like that.

I also am an optimist and I have great faith in human nature. And for every person who isn't willing to try acupuncture there is another person willing to take their place and say may I

please have an appointment? For whatever reasons, they want to try something besides Western medicine.

I often work with people who are in Western medicine. I'm not exclusive. I have always held that I have to speak both languages. I have to be conversant. Now, I don't have to know the latest in pharmacy. Thank you very much. And that can get pretty complicated. But when somebody tells me that they have a diagnosis of such-and-such, I understand better what that is and what's involved and I'm better able to translate it into these patterns.

**Do you prescribe herbal medicines as well?**

Absolutely. I do.

**Very interesting. I'm fascinated by this whole -- so these are in bottles, the ones that you have here. How about when I go to TNT Ginseng in that Chinatown shopping center?**

Those are raw herbs. Oddly enough -- okay. I trained in raw herbs in school. We had a full pharmacy like that with the drawers and, you know, you measured out three grams of this and six grams of that and you put together the herbs that you gave your patient to go home and cook up into a tea. Oddly enough, when I moved here I wanted to do herbs. It is a big investment to start doing raw herbs. And the Chinese all said to me don't, do patents. If you really want to, you can do powders. But don't do raw herbs because you won't find the patient complaints among the Americans.

**They like taking pills.**

They like taking pills and tinctures. So what I stock in my office is either liquid or tablet form. I miss handling the raw herbs. I'm very fond of them.

**I can say that your office smells lovely. I love that smell of herbs.**

But they're all in sealed containers. There are no open herbs. If you're smelling anything it might be the lineament bottles.

**It's that powdery, woody smell.**

Ah. I laugh. My first or second year a Chinese girl walked in here. She was born in America, but her parents are Chinese. And she walked in and said, oh, it smells right. And I just laughed. I knew exactly what she meant because in Chinese hospitals -- and I did go back to China and study in a Chinese hospital, again, and I hope to go back to China again this year -- there is a kind of a

smell. But it's not the same as an American hospital.

**Oh, heck no. It's an earthy smell.**

Well, it's more of live things, not live as in micros, but live as in there is good chi in the herbs. And the companies that I use that I get my patents from the formulas are already made up. But they go through enormous and strict requirements to have good quality in the herbs.

**Are they manufactured here?**

They're manufactured here in the United States.

**Okay. So it takes me to the question --**

So that I don't have to do the headaches of trying to import herbs.

**Oh, yeah. So you're thinking of going back to China. How much do you have to keep up on the medicine? It's such an old tradition. So do you have to constantly educate yourself?**

Oh, yes. We do continuing education every year. I'm nationally certified three different ways and I do continuing education units to keep those up. I'm also required by the state of Nevada to do continuing education for the state of Nevada. We all are whether they have the national stuff or not. So I do it on several fronts.

**If somebody wants to go into the field like you, is there anyplace here in Nevada?**

No.

**Is there going to be at any time --**

Not in the near future. No. There was a school that wanted to come here, but they couldn't meet the requirements of the state. And there is no point in having a school here if the graduates cannot meet the requirements of the state. So, no.

**If somebody comes to you to be treated for a particular condition, and then has to go into a hospital for that or some other problem, does the treatment that you provide and the herbs that they take become a problem for them when they go into a regular hospital?**

A problem for the patient?

**A problem for the patient.**

No. No, it is not. But a lot of Western doctors don't know about herbs. They might know something about western herbs at best, but they mostly don't know anything about Chinese herbs. And I have had a number of times been told by the patient my MD says I have to stop all herbs

until I do this lab test. And I'm sitting there going okay, because they need those herbs to help their condition, but they're not allowed to take them according to the Western doctor. I don't give herbs frivolously. I give them specifically for conditions and I always tell my patients this is what this does and this is how it's going to do that. But I'm not in the hospitals.

**Have you ever gone into the hospitals and worked side by side with a Western physician?**

No, I haven't.

**Do you find any resistance whatsoever -- say you're at a social engagement or even a professional one and somebody finds out the kind of work that you do, do you ever find any resistance?**

Sometimes. Sometimes.

**When they see the name Dr. Fiona Kelley, they assume that you are a Western medicine doctor?**

Sometimes I've been asked that; what's the difference between an OMD and an MD? An MD has been through Western medical school. Now, if they want they can do MD and also do OMD. But most MDs, if we are lucky, opt to do a very short course perhaps through UCLA for doctors. It's not a long course, but it gives them a couple of basics so that they can see if they're interested in it. In my professional experience this is not a bad thing. But when they begin to realize how much time you have to spend with a patient to practice this medicine, they end up referring out to somebody who's an OMD.

The average Western doctor spends eight to ten minutes with a patient. I spend at least an hour, most of which time -- anywhere from 25 to 45 minutes or longer -- I'm in the room with the patient on the first visit. So I'm not seeing 50 people a day. It's a different way of practicing medicine.

**Is the financial compensation anywhere near what you would get if you were seeing 50 patients a day? Are you getting financially compensated as much as --**

I don't understand the question.

**-- your contemporaries? Is this kind of practice lucrative? I mean I know that you don't go into it --**

Well, nobody comes into acupuncture to get a BMW and a yacht if that's what you're asking. It's

not that kind of money. It's worth it to me because I love what I do. Western doctors are locked into the insurance system to a large extent. Some acupuncturists bill through insurance. I do not. So I can't speak to that. If you do that you have to do a higher volume of patients because the insurance company will then tell you how much you're going to get per patient. And when that changed about two years ago all the acupuncturists were up in arms because they lowered the number of what they were paying the acupuncturist. And the Chinese, who may or may not be that comfortable in English, were horrified. How are we going to see people if we can't get the money? I prefer and have always preferred not to do insurance. But I do not charge anywhere close to what a Western doctor costs per visit because that would be astronomical and it's not practical.

And bottom line this is a very practical medicine. We have treated literally billions and billions and billions of Chinese. Okay? They can't all have the wool over their eyes. The medicine works. China wants to become a first-world power. So they are trying to integrate Western medicine with Chinese. America is trying to integrate acupuncture with Western medicine. We're all going to meet in the middle ground somewhere.

**Fascinating. Are you going to stay in Las Vegas for the long haul?**

Yeah.

**Have you ever treated your parents?**

They're not here.

**And where is your sister? Does she live back East?**

Yeah. She's in Massachusetts.

**Before we close can you give me one story that really stands out in your mind that might be a defining moment in your career or that just really sticks with you as memory, good or bad?**

In what way?

**Just a story --**

About a patient?

**About a patient or your experience treating somebody.**

God, there are so many. I really love my work and it's incredibly rewarding. Rather than a single story, since you're sitting here in my office, you'll notice on that wall there are a bunch of baby

pictures. That is what I refer to as my fairy godmother wall. Those are the women I have helped have babies.

**Wow.**

I'm not sure for any woman there is something more rewarding. Women who have not been able to have a child, whether they've had repeated miscarriages or just not been able to get pregnant in the beginning or they needed help with in vitro fertilization transfers, there is a protocol that we do that assists that and ups your chances by up to 30 percent. There has been a European study that's been around for many years now. And there's a protocol. Dr. Roth taught it to me and I've taught it to other acupuncturists so that we can help cover the bases.

At different times in your life you find different things that you really seem to be doing a lot of. There was a time when I did a lot of otitis media.

**And that is?**

Earaches. Dr. Roth has had two children. So she specializes in fertility and IVS. I have treated a lot of people for anxiety and depression. And I've known Western doctors, who when I first came here and tried to meet as many as I could, that would have any interest in alternative care. I remember one woman who is an MD. She specializes in fertility. And she said what do you specialize in? I was brand-new and I rattled off things. She said but what do you specialize in? You will never survive if you don't specialize. And I said we are trained to treat pretty much whatever walks in the door.

If I think it is inappropriate for acupuncture, I will tell people. If I think it's too far gone or they need surgery, I will tell them. I had to do that earlier today. I had somebody who phoned up and said what about this and this? And I said let me give you a name; I'm going to refer you. There will always be people who will want something that is an alternative to Western medicine for whatever their reasons are. So even with the economy dropping off, there are other people stepping up saying I don't want to go to a Western doctor. You're less expensive. What do you cost? Can I get reimbursed? Boy, that's a lot less. Or the other one is I don't have insurance, will you treat me? I say, fine, sure, I don't care whether you have insurance or not. Does that help answer your question?

**Absolutely. Absolutely. This has been fascinating.**



**Well lastly, how many acupuncturists are now practicing in Las Vegas that you know of? Remember you talked about Santa Fe and the population and how many?**

I can't remember the number offhand. I think in the state it's about 42. And we're pretty evenly divided between here and Reno.

**Forty-two?**

I think. There aren't a lot. So it's --

**And that's including American and Chinese?**

Uh-huh. It may be a little bit higher than that. I haven't looked at the list lately.

**I'm very surprised at how low it is. I really am.**

We are trying to get more acupuncturists in, but they have to be able to meet the criteria of the state. For some reason I think the number in Las Vegas is somewhere around 15. But it might be higher by now. I don't recall.

**Two other questions: How many patients do you have on your roster and how long is a typical stretch? How many times do you see a patient before they are cured or their pattern has turned around?**

The classical duration is up to ten treatments. Now, having said that, the first woman I ever treated here I still see occasionally, every couple of months. But a lot of people I have said be well, call me if you ever need me, it's been a pleasure, thank you, because there aren't enough hours in the day for me to keep on seeing everybody for maintenance.

But -- and maybe this is a good thing to explain -- the emperor's doctors were paid to keep him well. It's the original preventative medicine. Now, if the emperor got the flu, they still worked. They treated him. They cooked herbs. They did needles. They did everything until he got over the flu and he went back to life in a more healthy way. But they weren't paid when he was sick. They still worked. That was the original preventative medicine.

Most of my patients I hear from when they think they need me. Sometimes I have people come in and say I just want a tune-up. So I'll look at their pulses and see what needs a little tonification (sic) and what needs to be smoothed out over here.

**I see. Very personal approach to medicine. I think it's wonderful.**

**Anything that you want to add that I have not asked you?**

No. Thank you. This has been an honor and a pleasure.

**Oh, this has been amazing. Thank you so much, Dr. Kelley.**