

Brief Bibliography for Acupuncture/Acupressure

1 Witt CM, Reinhold T, Brinkhaus B, Roll S, Jena S, Willich SN.
Acupuncture in patients with dysmenorrhea: a randomized study on clinical effectiveness and cost-effectiveness in usual care. *Am J Obstet Gynecol*. 2008 Feb;198(2):166.

Additional acupuncture in patients with dysmenorrhea was associated with improvements in pain and quality of life as compared to treatment with usual care alone and was cost-effective within usual thresholds.

2 Lee SW, Liong ML, Yuen KH, Leong WS, Chee C, Cheah PY, Choong WP, Wu Y, Khan N, Choong WL, Yap HW, Krieger JN.
Acupuncture versus sham acupuncture for chronic prostatitis/chronic pelvic pain. *Am J Med*. 2008 Jan;121(1):79.

Ten weeks of treatment, acupuncture proved almost twice as likely as sham treatment to improve CP/CPPS symptoms. Participants receiving acupuncture were 2.4-fold more likely to experience long-term benefit than were participants receiving sham acupuncture.

3 Arnberger M, Stadelmann K, Alischer P, Ponert R, Melber A, Greif R.
Monitoring of neuromuscular blockade at the P6 acupuncture point reduces the incidence of postoperative nausea and vomiting. *Anesthesiology*. 2007 Dec;107(6):903-8. Comment in: *Anesthesiology*. 2007 Dec;107(6):870-2.

Intraoperative P6 acupuncture point stimulation with a conventional nerve stimulator during surgery significantly reduced the incidence of PONV (post-operative nausea and vomiting) over 24 h. The efficacy of P6 stimulation is similar to that of commonly used antiemetic drugs in the prevention of PONV.

4 Tam LS, Leung PC, Li TK, Zhang L, Li EK.
Acupuncture in the treatment of rheumatoid arthritis: a double-blind controlled pilot study. *BMC Complement Altern Med*. 2007 Nov 3;7:35.

At week 10, the pain score remained unchanged in all 3 groups. The number of tender joints was significantly reduced for the EA and TCA groups. Physician's global score was significantly reduced for the EA group and patient's global score was significantly reduced for the TCA group. All the outcomes except patient's global score remained unchanged in the Sham group

5 Lang T, Hager H, Funovits V, Barker R, Steinlechner B, Hoerauf K, Kober A. Prehospital analgesia with acupressure at the Baihui and Hegu points in patients with radial fractures: a prospective, randomized, double-blind trial
Am J Emerg Med. 2007 Oct;25(8):887-93

Acupressure in the prehospital setting effectively reduces pain and anxiety in patients with distal radial trauma.

6 Haake M, Müller HH, Schade-Brittinger C, Basler HD, Schäfer H, Maier C, Endres HG, Trampisch HJ, Molsberger A.
German Acupuncture Trials (GERAC) for chronic low back pain: randomized, multicenter, blinded, parallel-group trial with 3 groups. *Arch Intern Med.* 2007 Sep 24;167(17):1892-8.
Erratum in:
Arch Intern Med. 2007 Oct 22;167(19):2072

Low back pain improved after acupuncture treatment for at least 6 months. Effectiveness of acupuncture, either verum or sham, was almost twice that of conventional therapy.

7 Endres HG, Diener HC, Molsberger A.
Role of acupuncture in the treatment of migraine. *Expert Rev Neurother.* 2007 Sep;7(9):1121-34.

From these results and our own studies on acupuncture and migraine, we conclude that a six-week course of acupuncture is not inferior to a 6-month prophylactic drug treatment, but that specific Chinese point selection, point stimulation and needling depth are not as important as had been thought. The review suggests that acupuncture should be integrated into existing migraine therapy protocols.

8 Dibble SL, Luce J, Cooper BA, Israel J, Cohen M, Nussey B, Rugo H. Acupressure for chemotherapy-induced nausea and vomiting: a randomized clinical trial. *Oncol Nurs Forum.* 2007 Jul;34(4):813-20.

Acupressure is a safe and effective tool for managing delayed CINV and should be offered to women undergoing chemotherapy for breast cancer

9 Chen HY, Shi Y, Ng CS, Chan SM, Yung KK, Zhang QL Auricular acupuncture treatment for insomnia: a systematic review *J Altern Complement Med.* 2007 Jul-Aug;13(6):669-76.

Auricular acupuncture appears to be effective for treating insomnia. Because the trials were low quality, further clinical trials with higher design quality, longer duration of treatment, and longer follow-up should be conducted.

10 Itoh K, Katsumi Y, Hirota S, Kitakoji H. Randomised trial of trigger point acupuncture compared with other acupuncture for treatment of chronic neck pain. *Complement Ther Med*. 2007 Sep;15(3):172-9.

These results suggest that trigger point acupuncture therapy may be more effective on chronic neck pain in aged patients than the standard acupuncture therapy.

11 Kwon YD, Pittler MH, Ernst E. Acupuncture for peripheral joint osteoarthritis: a systematic review and meta-analysis. *Rheumatology (Oxford)*. 2006 Nov;45(11):1331-7.

Sham-controlled RCTs suggest specific effects of acupuncture for pain control in patients with peripheral joint OA. Considering its favourable safety profile acupuncture seems an option worthy of consideration particularly for knee OA. Further studies are required particularly for manual or electro-acupuncture in hip OA. (Note: trials involving knee replacement and acupuncture as an adjunct to physiotherapy showed no significant difference between sham acupuncture and clinical acupuncture JE.)

12 Trinh KV, Graham N, Gross AR, Goldsmith CH, Wang E, Cameron ID, Kay T; Cervical Overview Group. Acupuncture for neck disorders. *Cochrane Database Syst Rev*. 2006 Jul 19

There is moderate evidence that acupuncture relieves pain better than some sham treatments, measured at the end of the treatment. There is moderate evidence that those who received acupuncture reported less pain at short term follow-up than those on a waiting list. There is also moderate evidence that acupuncture is more effective than inactive treatments for relieving pain post-treatment and this is maintained at short-term follow-up