

The Acupuncture Evidence Project: Plain English Summary

The following is a plain English summary of the findings of the Acupuncture Evidence Project. The full document (81 pages) is available from the Australian Acupuncture and Chinese Medicine Association Ltd (AACMA):

McDonald J, Janz S. The Acupuncture Evidence Project: A Comparative Literature Review (Revised edition). Brisbane: Australian Acupuncture and Chinese Medicine Association Ltd; 2017. <http://www.acupuncture.org.au>.

Bottom Line

Our study found evidence for the effectiveness of acupuncture for 117 conditions, with stronger evidence for acupuncture's effectiveness for some conditions than others. Acupuncture is considered safe in the hands of a well-trained practitioner and has been found to be cost effective for some conditions. The quality and quantity of research into acupuncture's effectiveness is increasing.

Background

Acupuncture originated in China and is now practised throughout the world. Although acupuncture has been practised for thousands of years, evidence of its effectiveness is still controversial. The Australian Acupuncture and Chinese Medicine Association Ltd (AACMA) identified the need for an updated review of the evidence with greater rigour than was possible in the past and commissioned The Acupuncture Evidence Project.

AACMA members accredited in acupuncture are registered by the Chinese Medicine Board of Australia in the division of acupuncture, and are permitted to use the title 'Acupuncturist'

We searched the literature with a focus on systematic reviews and meta analyses (the highest form of evidence available). We sorted the evidence to identify which conditions acupuncture has been found to be most effective for. We also looked for evidence of acupuncture's safety and cost-effectiveness, and we reported how the evidence for acupuncture's effectiveness has changed over an

eleven-year time-frame.

Key results

Of the 122 conditions identified, strong evidence supported the effectiveness of acupuncture for 8 conditions, moderate evidence supported the use of acupuncture for a further 38 conditions, weak positive/unclear evidence supported the use of acupuncture for 71 conditions, and little or no evidence was found for the effectiveness of acupuncture for five conditions (meaning that further research is needed to clarify the effectiveness of acupuncture in these last two categories).

In addition, research showed that acupuncture was cost effective for 10 conditions, and is safe in the hands of a well-trained practitioner. The level of evidence has increased over the 11-year period of this study for 24 conditions. Placebo-controlled clinical trials consistently underestimate the true effect size of

It is no longer possible to say that the effectiveness of acupuncture is because of the placebo effect, or that it is useful only for musculoskeletal pain.

acupuncture (which means that acupuncture is more effective than the type of trials used in this review show), yet they have still demonstrated National Health and Medical Research Council (NHMRC) Level I evidence for the effectiveness of acupuncture for 117 conditions.

Summary of Findings

Summary of Findings 1: The following tables summarise the effectiveness of acupuncture for various conditions.

Table 1. Conditions with strong evidence supporting the effectiveness of acupuncture	
Reviews with consistent statistically significant positive effects and where authors have recommended the intervention. The quality of evidence is rated as moderate or high quality.	
<ul style="list-style-type: none"> - Allergic rhinitis (perennial & seasonal) - Chemotherapy-induced nausea and vomiting (with anti-emetics) - Chronic low back pain - Headache (tension-type and chronic) 	<ul style="list-style-type: none"> - Knee osteoarthritis - Migraine prophylaxis - Postoperative nausea & vomiting - Postoperative pain

Table 2. Conditions with moderate evidence supporting the effectiveness of acupuncture	
Reviews reporting all individual randomised controlled trials (RCTs) or pooled effects across RCTs as positive, but the reviewers deeming the evidence insufficient to draw firm conclusions. The quality of evidence is rated as moderate or high quality.	
<ul style="list-style-type: none"> - Acute low back pain - Acute stroke - Ambulatory anaesthesia - Anxiety - Aromatase-inhibitor-induced arthralgia - Asthma in adults - Back or pelvic pain during pregnancy - Cancer pain - Cancer-related fatigue - Constipation - Craniotomy anaesthesia - Depression (with antidepressants) - Dry eye - Hypertension (with medication) - Insomnia - Irritable bowel syndrome - Labour pain - Lateral elbow pain - Menopausal hot flushes 	<ul style="list-style-type: none"> - Modulating sensory perception thresholds - Neck pain - Obesity - Perimenopausal & postmenopausal insomnia - Plantar heel pain - Post-stroke insomnia - Post-stroke shoulder pain - Post-stroke spasticity - Post-traumatic stress disorder - Prostatitis pain/chronic pelvic pain syndrome - Recovery after colorectal cancer resection - Restless leg syndrome - Schizophrenia (with antipsychotics) - Sciatica - Shoulder impingement syndrome (early stage) (with exercise) - Shoulder pain - Smoking cessation (up to 3 months) - Stroke rehabilitation - Temporomandibular pain

Summary of Findings 1 (continued): The following tables summarise the effectiveness of acupuncture

Table 3. Conditions with weak positive/unclear evidence supporting the effectiveness of acupuncture	
Reviews consisted mostly of weak positive evidence or conflicting evidence between reviews or between authors within a review, with reviewers summarising the evidence as inconclusive. Reviews are of low or very low quality; or there is conflicting levels of evidence within or between reviews.	
<ul style="list-style-type: none"> - Acupuncture in Emergency Department - Acute ankle sprain in adults - Alzheimer’s disease - Angina pectoris - Assisted conception in ART - Asthma in children - Atopic dermatitis - Attention Deficit Hyperactivity Disorder (ADHD) - Autism spectrum disorder (ASD) - Bell’s palsy - Bladder pain syndrome - Cancer-related insomnia - Cancer-related psychological symptoms - Carpal tunnel syndrome - Chemotherapy-induced peripheral neuropathy - Chronic fatigue syndrome - Chronic kidney disease - Chronic obstructive pulmonary disease (COPD) - Chronic urinary retention due to spinal cord injury - Chronic urticaria - Dysmenorrhoea - Dyspepsia in diabetic gastroparesis (DGP) - Erectile dysfunction - Exercise performance & post-exercise recovery - Fatigue in systemic lupus erythematosus - Fibromyalgia - Functional dyspepsia - Gag reflex in dentistry - Glaucoma - Heart failure - Hot flushes in breast cancer - Hyperemesis gravidarum - Hypoxic ischemic encephalopathy in neonates - Induction of labour - Inflammatory bowel disease 	<ul style="list-style-type: none"> - Itch - Lumbar spinal stenosis - Melasma - Meniere’s disease/syndrome - Menopausal syndrome - Multiple sclerosis - Mumps in children - Myelosuppression after chemotherapy - Oocyte retrieval pain relief - Opiate addiction - Opioid detoxification - Parkinson’s disease - Polycystic ovarian syndrome - Poor sperm quality - Postnatal depression - Postoperative gastroparesis syndrome (PGS) - Postoperative ileus - Post-stroke hiccoughs - Premenstrual syndrome - Primary ovarian insufficiency - Primary Sjogren’s syndrome - Psoriasis vulgaris - Rheumatoid arthritis Slowing progression of myopia - Spinal cord injury - Stress urinary incontinence in adults - Sudden sensorineural hearing loss - Surgery analgesia - Tinnitus - Traumatic brain injury - Urinary incontinence - Uterine fibroids - Vascular cognitive impairment without dementia - Vascular dementia - Whiplash associated disorder (WAD) - Xerostomia in cancer

for various conditions

Table 4. Conditions with little or no evidence supporting the effectiveness of acupuncture
Reviews have consistently found little support for acupuncture. The quality of the evidence is consistently low or very low. Further research required.

- Alcohol dependence	- Nausea in pregnancy
- Cocaine addiction	- Smoking cessation (more than 6 months)
- Epilepsy	

Summary of Findings 2: Conditions with evidence of cost-effectiveness.

Table 5. Conditions with evidence of cost effectiveness	
- Allergic Rhinitis	- Low back pain
- Ambulatory Anaesthesia	- Migraine
- Chronic Pain	- Neck Pain (plus usual medical care)
- Depression	- Osteoarthritis
- Dysmenorrhoea	- Post-operative nausea and vomiting
- Headache	

Summary of Findings 3: Conditions with evidence of safety.

Table 6. Conditions with evidence of safety	
Condition	Comments
Acupuncture generally prior to this review	Acupuncture can be considered inherently safe in the hands of well-trained practitioners.
Allergic Rhinitis	Safe and cost-effective
Ambulatory Anaesthesia	Acupuncture safe , cost-effective and effective as an adjunctive therapy.
Alzheimers disease	Acupuncture is Safe .
Cancer-related psychological symptoms	Strong evidence for safety .
Depression	Strong evidence for safety .
Low back pain	Safe and well tolerated. Effective and safe for major depressive disorder.
Migraine	Moderate to high quality evidence Cost effective. Promise in safety and effectiveness. Serious adverse events were not reported in any trial.
Osteoarthritis of the Knee	Promise in safety and effectiveness.
Prostatitis pain/chronic pelvic pain syndrome	Acupuncture superior to both sham and to usual care and safe .

Summary of Findings 4: Changes in evidence levels over the eleven-year period covered by this review

Table 7. Statistical summary of findings of this review			
Evidence Level	Number of Conditions	Changes in Level of Evidence	Number of Conditions
Strong Evidence of effect	8	Increase to strong evidence	5
Moderate Evidence effect	38	Increase to moderate evidence	18
Unclear/mixed evidence	71	Increase to weak positive/unclear evidence	1
Little of no evidence of effect	5	Decreased evidence level	2
Total conditions with some evidence of effect (any level)	117	_____	_____
Total conditions reviewed	122	Total increases in evidence level since prior reviews	24

To request a full copy of the evidence report please email:

Communications@acupuncture.org.au

AACMA