

Can acupuncture improve quality of life for people with traumatic brain injury-related headaches?

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A study comparing the effectiveness of usual care alone to usual care plus either auricular or traditional Chinese acupuncture in treating patients with headaches due to a previous traumatic brain injury (TBI) showed a significant improvement in headache-related quality of life (QoL) with the addition of acupuncture. Auricular acupuncture had a greater overall impact on headache-related QoL than did traditional Chinese acupuncture, according to the study published in *Medical Acupuncture*.

In the article "A Randomized Exploratory Study to Evaluate Two Acupuncture Methods for the Treatment of Headaches Associated with Traumatic Brain Injury," Wayne Jonas, MD, and coauthors from Samueli Institute (Alexandria, VA), Integrative Healing, LLC (Hyattsville, MD), Walter Reed National Military Medical Center (Bethesda, MD), and Fort Belvoir Community Hospital (Fort Belvoir, VA), conducted the study in previously deployed members of the U.S. military who had mild to moderate TBI and [headaches](#). Chronic or recurrent headache is reported by 80% of Service members with TBI. Participants in the 6-week study received usual care alone, or usual care plus either 10 auricular acupuncture sessions involving six to nine needled points and indwelling needles left in for up to three days, or 10 Traditional Chinese [acupuncture](#) sessions with placement of up to 22 needles on the limbs, head, and torso.

"Chronic concussion headaches are a clinical challenge. Acupuncture appears promising to avoid the opioid gateway for these patients," says Richard C. Niemtow, MD, PhD, MPH, Editor-in-Chief of Medical Acupuncture and Director, Director of the United States Air Force Acupuncture and Integrative Medicine Center, Joint Base Andrews, Maryland.

More information: Wayne B. Jonas et al, A Randomized Exploratory Study to Evaluate Two Acupuncture Methods for the Treatment of Headaches Associated with Traumatic Brain Injury, *Medical Acupuncture* (2016). [DOI: 10.1089/acu.2016.1183](https://doi.org/10.1089/acu.2016.1183)

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