

## Acupuncture may help to improve dementia precursor—impaired memory

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Acupuncture may help to improve the subtle memory loss that precedes the development of dementia, otherwise known as mild cognitive impairment, or MCI for short, suggests a review of the available published evidence in *Acupuncture in Medicine*.

And it may be particularly effective when combined with <u>drug treatment</u>, the findings indicate, although further better quality research is needed, caution the researchers.

MCI refers to a transitional state between normal ageing and dementia, whereby an affected person typically exhibits a subtle deterioration in memory capacity beyond what would be expected for his/her age. Around 5-10% of MCI cases will evolve into dementia every year.

Several previous studies have suggested that acupuncture may reduce MCI symptoms, and the researchers wanted to analyse the available evidence to try and quantify the safety and effectiveness of the technique.

The researchers trawled Western and Chinese research databases for relevant <u>trials</u> comparing acupuncture and medical treatment that had been published up to July 2015.

Out of 10 trials, five that involved a total of 568 people, and had been published in 2012 and 2013, were deemed suitable for inclusion in the study. Three directly compared acupuncture with nimodipine, while two



evaluated acupuncture combined with nimodipine.

The number of participants in each study varied from 26 to 94, while acupuncture treatment was provided three to five times a week for 8 weeks in four trials, and for 3 months in one.

Analysis of the pooled data showed that those in receipt of acupuncture fared better than those on nimodipine alone. And they achieved better scores on two of the principal tests used to assess MCI and dementia: the mini mental state exam and picture recognition.

Furthermore, a combination of acupuncture and nimodipine significantly improved mini mental state exam scores whencompared to nimodipine alone.

Three of the trials reported side effects, which for acupuncture included fainting during treatment and slow bleeding (errhysis) at the needle sites, and for nimodipine included gut symptoms and mild headache.

The researchers point to several caveats, including the high or unclear risk of bias in the trials, the randomisation process, and the trial design which didn't take account of potential placebo effects. Most of the trials were also carried out in China where patients may prefer acupuncture to medical treatment.

Despite the promising findings, further large rigorous clinical trials in Western settings are needed before any firm conclusions can be drawn about the effectiveness and safety of <u>acupuncture</u> for treating MCI, conclude the researchers.

**More information:** Acupuncture for amnestic mild cognitive impairment: a meta-analysis of randomised controlled trials, *Acupuncture in Medicine*, DOI: 10.1136/acupmed-2015-010989



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