Study suggests acupuncture may be better than no acupuncture, sham acupuncture for chronic pain

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An analysis of patient data from 29 randomized controlled trials suggests that acupuncture may be better than no acupuncture or sham acupuncture for the treatment of some chronic pain, according to a report published Online First by Archives of Internal Medicine.

Acupuncture, the practice of inserting and stimulating needles at specific points on the body, is widely used for chronic pain, although controversy remains about its value, according to the study background.

The individual patient data meta-analyses conducted by Andrew J. Vickers, D.Phil., of Memorial Sloan-Kettering Cancer Center, New York, and colleagues used data from previously published randomized controlled trials (RCTs) with a total of 17,922 patients from the United States, United Kingdom, Germany, Spain and Sweden. Researchers sought to determine the effect size of acupuncture for some chronic pain conditions.

"We found acupuncture to be superior to both no-acupuncture control and sham acupuncture for the treatment of chronic pain," the authors comment. "Although the data indicate that acupuncture is more than a placebo, the differences between true and sham acupuncture are relatively modest, suggesting that factors in addition to the specific effects of needling are important contributors to therapeutic effects."

Sham acupuncture in the trials included needles inserted superficially, devices with needles that retracted into the handle rather than penetrating the skin, and non-needle approaches such as deactivated electrical stimulation or detuned laser, according to the study.

The authors report that patients receiving acupuncture had less pain with scores that were 0.23, 0.16 and 0.15 SDs (standard deviations) lower than sham controls for back and neck pain, osteoarthritis and chronic headaches, respectively. The effect sizes in comparison to no-acupuncture controls were 0.55, 0.57 and 0.42 SDs, according to the study results.

"Our results from individual patient data meta-analyses of nearly 18,000 randomized patients in high-quality RCTs provide the most robust evidence to date that acupuncture is a reasonable referral option for patients with chronic pain," the authors conclude.

In a commentary, Andrew L. Avins, M.D., M.P.H., of Kaiser-Permanente, Northern California Division of Research, Oakland, writes: "The relationship between conventional allopathic medical care and the world of complementary and alternative medicine (CAM) remains ambiguous."

"At the end of the day, our patients seek our help to feel better and lead longer and more enjoyable lives. It's ideal to understand the mechanism of action, which carries the potential for developing more and better interventions. But the ultimate questions is: does this intervention work (or, more completely, do its benefits outweigh its risks and justify its costs)?" Avins continues.

"At least in the case of acupuncture, Vickers et al have provided some robust evidence that acupuncture seems to provide modest benefits over usual care for patients with diverse sources of chronic pain. Perhaps a more productive strategy at this point would be to provide whatever benefits we can for our patients, while we continue to explore more carefully all mechanisms of healing," Avins concludes.

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