

# Autumn Scientific Meeting 2001

6th & 7th October, Royal College of Physicians, London

## Day 1, Scientific

### **Acupuncture For Back Pain: A Randomised Controlled Trial**

*Dr A F Molsberger, Düsseldorf, Germany*

This was a prospective, randomised-controlled trial with three, blinded parallel groups and follow up at 3 months, to explore whether a combination of acupuncture and conservative orthopaedic treatment could improve pain treatment for chronic low back pain (LBP). 188 patients attending a LBP rehabilitation centre were randomly allocated to three groups, comparing conventional conservative orthopaedic treatment alone, the same conservative orthopaedic treatment with the addition of acupuncture at recognised acupuncture points, and the same conservative orthopaedic treatment with the addition of needling to non-specific points (so-called "sham" acupuncture).

174 patients completed the treatment protocol and 124 were followed up at 3 months. Outcome was measured using a Visual Analogue (VAS) pain scale and treatment efficacy measured on a 4 point box scale.

Acupuncture combined with conventional orthopaedic treatment proved significantly more effective than either "sham" acupuncture with conventional treatment or conventional treatment alone.

### **Acupuncture For Women With Nausea And Vomiting In Early Pregnancy: A Randomised Controlled Trial**

*Dr Caroline Smith, Adelaide, Australia*

A Cochrane systematic review of interventions for nausea and vomiting in early pregnancy describes the results from trials of PC6 acupressure as helpful. However, in the absence of high quality randomized trials, there remains scepticism as to the benefits of acupuncture to treat nausea and vomiting in early pregnancy.

This trial was set up to determine whether acupuncture (both traditional acupuncture and pericardium 6 acupuncture) was better than sham (placebo) acupuncture or no acupuncture in reducing the frequency, duration, amount and distress from nausea, dry retching and vomiting and improved the health status of women in early pregnancy. 593 women were recruited into this trial and the preliminary results were reported, prior to anticipated publication early next year.

### **Acupuncture For Dyspnoea: An Overview And Pilot Study Results**

*Dr T Q Howes, Department of Thoracic Medicine, Colchester General Hospital, UK*

Conventional guidelines stress the use of bronchodilator and anti-inflammatory drugs to treat the chronic dyspnoea associated with chronic obstructive pulmonary disease (COPD). However, studies of these have shown that the effects are, at best, small. A preliminary pilot study was carried out to explore the feasibility of a trial to investigate the use of acupuncture in severe COPD patients. Matched cohorts of patients were allocated to either acupuncture, sham acupuncture or an open controlled group. The first two groups were blinded to the nature of the intervention. Outcomes looked at breathlessness on the St George's Respiratory Questionnaire and lung function parameters. Both the acupuncture and sham acupuncture groups showed improvement compared to the open control group. The bulk of the changes were in breathlessness and the St George's Respiratory Questionnaire but there were also small but not significant improvements in lung function parameters. It was noted that recruitment and follow-up presented major difficulties in this group of severely pulmonary disabled patients.

### **A Pilot Project To Evaluate The Effects Of Acupuncture Versus Two Placebo Controls In The Treatment Of Disabling Breathlessness**

*Dr George Lewith, Centre for Study of Complementary Medicine, Southampton, UK*

This pilot study was designed to evaluate the feasibility of providing acupuncture treatment on a domiciliary basis, in Southampton, to patients with disabling breathlessness. Sixteen subjects with disabling breathlessness caused by chronic lung disease were recruited and three treatments (real acupuncture, dummy acupuncture and mock TENS) were used on one occasion each in random order. The study evaluated respiratory outcome measures, looked at the credibility of the three treatments (using a previously validated Borkovec and Nau scale) and calculated the sample size for a larger, more definitive study.

### **A Comparison Of Acupuncture With Advice And Exercises On The Symptomatic Treatment Of Osteoarthritis Of The Hip - A Randomised Controlled Trial**

*Roisin Haslam, Swindon, UK*

Thirty-two patients awaiting a total hip arthroplasty were randomly allocated to either the experimental group (A) to have six sessions of acupuncture, or the control group (B) to be given advice and exercises for their hip over the same six week period. Patients were assessed for pain and functional ability, using a modified version of the WOMAC questionnaire, pre-treatment, immediately post-treatment and at eight weeks post-treatment.

There was a significant improvement in group A immediately post-treatment ( $p=0.002$ ) and this was maintained at

the eight week follow up ( $p=0.03$ ). There was no significant change in group B. Changes in WOMAC scores showed a significantly greater improvement between pre-treatment and immediately post-treatment in group A compared with group B ( $p=0.02$ ). This was maintained at the eight week follow up ( $p=0.003$ ). These results support the hypothesis that acupuncture is more effective than advice and exercises in the symptomatic treatment of osteoarthritis of the hip.

### **Acupuncture Treatment - Side-Effects And Complications**

*Dr Eva Haker, Department of Physiology and Pharmacology, Karolinska Institute, Stockholm*

A questionnaire was sent out to 717 physiotherapists belonging to the Swedish Acupuncture Association for Registered Physiotherapists.

9277 acupuncture treatments were recorded by 187 physiotherapists over a 4 week period. Positive side effects (i.e. beneficial non-intended effects) were reported in 2504 treatments and negative side effects in 2108 treatments. A pleasant feeling of fatigue was the most reported positive side-effect (14.9%) while bleeding (at needle withdrawal) was the most frequent negative one (14.8%). No life-threatening complications were reported.

### **The Use Of Acupuncture For Scar Pain**

*Dr Juliette Ross, General Practitioner, Wembley, UK*

Ten cases of scar pain were presented. Following acupuncture, nine achieved good symptom relief. They included patients with painful scars resulting from operations at different sites and painful scars resulting from accidental injury. One of the cases (involving a patient who had an amyloid related intra-cerebral bleed and consequent craniotomy) was demonstrated in detail.

### **Rehabilitation Of Patients Following Operations**

*Dr Heidi Thorer, Nantes, France*

An analysis was presented of 6320 case files, collected between 1986 and 2000 for post-operative patients attending for rehabilitation immediately following their procedures. A number of useful point combinations with remarkable stability of action were identified. Point localisation, depth of needle insertion, timing and observations about DEQI were described for each point. Overall patient satisfaction rate, as measured by VAS scale, was 8 out of 10 (0=worse and 10=cured).

### **Day 2, Master Classes**

#### **The Nature Of Pain And Suffering: What Role Can Acupuncture Play In Prevention And Alleviation**

*Professor Richard Chapman, Salt Lake City, USA*

This workshop reviewed the older concepts of pain and acupuncture's role in pain modulation, introduced new knowledge in pain research, focusing on the impact of nociception on brain mechanisms and provided a basis for understanding how acupuncture may act through physiological and psychological factors.

#### **Acupuncture Workshops for Sports Injuries**

*Dr John Reynolds, Oxford, UK*