



Latest Research

March 2010

Pubmed

1. [The effect of electroacustimulation on postoperative nausea, vomiting, and pain in outpatient plastic surgery patients: a prospective, randomized, blinded, clinical trial](#)
Larson JD, Gutowski KA, Marcus BC, Rao VK, Avery PG, Stacey DH, Yang RZ.
Plast Reconstr Surg. 2010 Mar;125(3):989-94
2. [Acupuncture for depression during pregnancy: a randomized controlled trial](#)
Manber R, Schnyer RN, Lyell D, Chambers AS, Caughey AB, Druzin M, Carlyle E, Celio C, Gress JL, Huang MI, Kalista T, Martin-Okada R, Allen JJ.
Obstet Gynecol. 2010 Mar;115(3):511-20
3. [Effects of acupuncture on hot flashes in perimenopausal and postmenopausal women--a multicenter randomized clinical trial](#)
Kim KH, Kang KW, Kim DI, Kim HJ, Yoon HM, Lee JM, Jeong JC, Lee MS, Jung HJ, Choi SM.
Menopause. 2010 Mar;17(2):269-80
4. [Acupuncture induces a pro-inflammatory immune response intensified by a conditioning-expectation effect](#)
Karst M, Schneidewind D, Scheinichen D, Juettner B, Bernateck M, Molsberger A, Parlesak A, Passie T, Hoy L, Fink M.
Forsch Komplementmed. 2010;17(1):21-7. Epub 2010 Mar 4
5. [Clinical observation on therapeutic effect of warming needle at spinal nerves for treatment of cervical spondylosis of nerve root type](#)
Qin YG.
Zhongguo Zhen Jiu. 2010 Feb;30(2):121-3. Chinese
6. [Clinical observation on acupuncture combined with medication for treatment of essential tremor](#)
Sui KM, Li X.
Zhongguo Zhen Jiu. 2010 Feb;30(2):107-9. Chinese
7. [Clinical study on acupuncture for treatment of chronic functional constipation](#)
Jin X, Ding YJ, Wang LL, Ding SQ, Shu L, Jiang YW, Huo WY.
Zhongguo Zhen Jiu. 2010 Feb;30(2):97-101. Chinese
8. [Clinical evaluation on balanced muscular tension needling method for improving disabled function of stroke patients with spastic paralysis](#)
Lou BD, Zhang W, Liu Z, Lan H, Li JR, Wang JJ.
Zhongguo Zhen Jiu. 2010 Feb;30(2):89-92. Chinese
9. [Optimization of acupuncture treatment programs for facial paralysis](#)
Luo HP, Lin TD, Cai M, Huang XX, Wang BB, Gao WK.
Zhongguo Zhen Jiu. 2010 Feb;30(2):93-6. Chinese

10. **Acupuncture in Post-stroke Rehabilitation. A Systematic Review and Meta-Analysis of Randomized Trials**
Wu P, Mills E, Moher D, Seely D.
Stroke. 2010 Feb 18
11. **Scalp penetration acupuncture for insomnia: a randomized controlled trial**
Zhou ZL, Shi X, Li SD, Guan L.
Zhong Xi Yi Jie He Xue Bao. 2010 Feb;8(2):126-30. Chinese
12. **Effects of acupuncture and heating on blood volume and oxygen saturation of human Achilles tendon in vivo**
Kubo K, Yajima H, Takayama M, Ikebukuro T, Mizoguchi H, Takakura N.
Eur J Appl Physiol. 2010 Feb 6

Other Databases

1. Lin H.-L. Song H.-M. Zhong W.-H. Chen S.-Q. Wang S.-Z.
Effects of different acupuncture and moxibustion treatments on cervical spondylotic radiculopathy: A systematic evaluation
Journal of Clinical Rehabilitative Tissue Engineering Research. 13(46)(pp 9017-9021), 2009
Date of Publication: 12 Nov 2009

Abstract

Objective: To evaluate the effect and safety of conservative treatment for treating cervical spondylotic radiculopathy by Cochrane evaluation systems. DATA SOURCE: CBM (from January 1978 to October 2008), CNKI (from January 1978 to October 2008) and VIP (from January 1989 to October 2008) databases were retrieved by computer and partial documents were searched by hands.

Data selection: Randomized controlled trial was adopted in course of acupuncture and moxibustion treatment for cervical spondylotic radiculopathy and its quality was assessed. Data source was randomized and semi-randomized controlled. Some evaluations such as random method-selection bias, allocation concealment-selection bias, blind method-performance bias and measurement bias, exclusion, lose to follow-up, withdraw-attrition bias were chosen.

Main outcome measures: Circled digit one Abdominal acupuncture needles were superior to the conventional method's efficiency. Circled digit two Electro-acupuncture plus cupping with barbed floc were superior to the conventional method's efficiency. Circled digit three Abdominal acupuncture were superior to traction's efficiency. Circled digit four Cervical traction, electro-acupuncture combined with point injection and massage were superior to traction's efficiency. Circled digit five Traction, electro-acupuncture, massage, TDP-guided were superior to traction, physiotherapy, TDP combined with exercise therapy's efficiency. Circled digit six Vinegar iontophoresis and electro-acupuncture were superior to simple electro-acupuncture's efficiency. Circled digit seven Long's approach acupuncture was superior to simple acupuncture's efficiency. Circled digit eight Adverse reaction.

Results: A total of 1 416 subjects were selected from 7 randomized controlled trials. All the studies have selection bias, measurement bias, loss of the high probability of bias, the quality and grade of "C" grade. And only one study proved that the efficiency of the experimental group was better than that of the control group. Study 1 showed that there was insufficient evidence suggested that acupuncture treatment of abdominal cervical spondylotic radiculopathy was efficient than conventional acupuncture. Study 2 showed that there was insufficient evidence suggested that electro-acupuncture plus cupping therapy with barbed floc was efficient than conventional acupuncture to cure cervical spondylotic radiculopathy. Study 3 showed that there was insufficient evidence suggested that acupuncture treatment of abdominal cervical spondylotic radiculopathy was efficient than traction. Study 4 showed that the cervical traction, electro-acupuncture combined with acupuncture-injection treatment of cervical spondylotic radiculopathy was efficient than traction combined massage therapy. Study 5 showed that

there was insufficient evidence suggested that traction, electro-acupuncture, massage, TDP-guided therapy was efficient than traction, physical therapy, TDP combined with exercise therapy. Study 6 showed that there was insufficient evidence suggested that electro-acupuncture combined with vinegar iontophoresis treatment of cervical spondylotic radiculopathy was better than the simple electro-acupuncture therapy. Study 7 showed that there was insufficient evidence suggested that the acupuncture therapy using Long's approach was better than simple acupuncture. No adverse reactions appeared to terminate the test in 7 studies.

Conclusion: The above seven studies mainly present with low quality, absence of a unified curative method, small samples, difference of follow-up time, Judgment standard and measurement standard. So more samples, multicenter and more regular randomized controlled trial should be performed.

2. Ahn C.-B. Jang K.-J. Yoon H.-M. Kim C.-H. Min Y.-K. Song C.-H. Lee J.-C.
A Study of the Sa-Ahm Five Element Acupuncture Theory
JAMS Journal of Acupuncture and Meridian Studies. 2(4)(pp 309-320), 2009
Date of Publication: December 2009

Abstract

This study is a review of the theoretical basis of Sa-Ahm Five Element acupuncture devised about 360 years ago. A total of 21 books and papers ranging from the ancient Huang Di Nei Jing to modern biomedical acupuncture for pain management were researched in relation to the Five Shu points. Gao-Wu, in the Chinese Ming Dynasty, used the Five Shu points for the first time based on the creation cycle as the tonification and sedation treatment, termed the "tonification and sedation treatment of self meridian". Since then, and for no particular reason, this method has been rarely used until Sa-Ahm's new doctrine, which includes the concept of the destruction cycle, was asserted. Sa-Ahm Five Element acupuncture is a method in which the Five Shu points are used from the viewpoints of the simultaneous tonification and sedation methods that are based on the promotion and control cycles. Although it is currently the most utilized method in accordance with the practitioner's points, this method is in need of designated guidelines by which Sa-Ahm acupuncture can be practiced effectively. copyright 2009 Korean Pharmacopuncture Institute.

3. Colbert A.P. Larsen A. Chamberlin S. Decker C. Schiffke H.C. Gregory W.L. Thong T.
A Multichannel System for Continuous Measurements of Skin Resistance and Capacitance at Acupuncture Points
JAMS Journal of Acupuncture and Meridian Studies. 2(4)(pp 259-268), 2009
Date of Publication: December 2009

Abstract

Electrodermal screening (EDS) is based on three commonly held assumptions: acupuncture points (APs) have lower electrical resistance than non-APs; resistance at APs varies with health and disease; and effective acupuncture treatments are associated with normalization of resistance at APs. Although evidence confirming these assumptions is limited, EDS is frequently practiced worldwide. Researchers are also beginning to assess EDS' utility as an outcome measure in acupuncture trials. Fundamental in developing EDS as a research tool is the need for an accurate and reliable measurement. We developed an automated multichannel prototype system, the Octopus, and recorded electrical resistance and capacitance at eight skin sites in 33 healthy participants over 2 hours. The Octopus accurately measured against known resistors (within 2.5% of the mean value) and capacitors (within 10% of the mean value), and yielded repeatable readings at all eight skin sites: LR 1 ($r=0.79$), SP 1 ($r=0.79$), toe non-AP ($r=0.77$), LU 9 ($r=0.97$), PC 6 ($r=0.96$), wrist non-APs ($r=0.97$), SP 6 ($r=0.96$), and leg non-APs ($r=0.97$). Resistance at APs was significantly lower than the nearby non-APs in one out of three comparisons. copyright 2009 Korean Pharmacopuncture Institute.

4. Liu M.-L. Lan L. Tang Y. Liang F.-R.

Acupuncture and moxibustion for breech presentation: A systematic review

Chinese Journal of Evidence-Based Medicine. 9(8)(pp 840-843), 2009

Date of Publication: 2009

Abstract

Objective: To evaluate the efficacy of acupuncture and moxibustion (acup-moxi) therapy for breech presentation. **Methods:** We electronically searched The Cochrane Library (Issue 1, 2008), PubMed (1980 to Mar. 2008), MEDLINE (1966 to 2008), Ovid EBM Database (1991 to 2008), CBMdisc (1978 to Mar. 2008), VIP (1989 to Mar. 2008), CNKI (1979 to Mar. 2008), and WangFang Database (1983 to Mar. 2008), as well as handsearched seven traditional Chinese medicine journals to obtain randomized control trials (RCTs) about acup-moxi for breech presentation. Quality assessment was conducted according to the Cochrane Handbook for Systematic Reviews of Interventions 5.0.1. Meta-analyses were performed for the results of homogeneous studies using RevMan 5.0 software. **Results:** Eight RCTs involving 1 341 patients met the inclusion criteria. Five trials were of relatively high quality and 3 were of low quality. The pooled analysis of six trials showed that acup-moxi was superior in cephalic presentation with RR=1.38, and 95%CI 1.20 to 1.58. **Conclusion:** Acup-moxi can increase the successful rate of cephalic presentation in the treatment of breech presentation compared with no (routine care) or knee-chest position treatment. copyright 2009 Editorial Board of Chin J Evid-based Med.

5. Schockert T.

What can be achieved by using Yamamoto New Scalp Acupuncture (YNSA)? Expert evidence

Revista Internacional de Acupuntura. 3(4)(pp 171-186), 2009

Date of Publication: November-December 2009

Abstract

Objective: In this survey of experts, therapists were asked which indication for YNSA they regarded as the most important, and were also asked to share their clinical experience with this method.

Method: Forty-two physicians from all over the world with special experience in applying YNSA were asked to respond to 11 questions with respect to their experience with YNSA concerning indications, neck/abdominal diagnosis, choice of acupuncture points, Huneke phenomena, personal preferences, literature, studies and case studies from their own practice. 29 therapists responded.

Results: The experts were in agreement in reporting that they had successfully applied YNSA for pain of the locomotor system, neurological syndromes, internal syndromes, for the relief of pain and for many other illnesses. YNSA abdominal diagnostics and neck diagnostics are regularly applied by the 29 YNSA therapists. All therapists observed Huneke phenomena in their work with YNSA. The experts' responses emphasized the rapid and reliable action of YNSA. The basal points are the generally preferred points for YNSA. Side effects were observed by fourteen experts. Seven therapists identified contraindications for YNSA.

Discussion: In spite of the very different preferences with respect to the points and somatopes used, the various therapists reached almost complete agreement on the good results of the treatment. The frequently observed Huneke phenomena, and the rapid and reliable results of treatment are closely related to the use of abdominal and neck diagnosis, which are at the heart of YNSA. These diagnostic points enable the therapist to check the correct position of the needles with respect to basal points, Y points, brain and cranial nerve points. Since the therapy points can generally be located rapidly and reliably by considerable tenderness to pressure, the application of YNSA requires a very precise examination, a careful search for the points and a close exchange of information with the patient.

Conclusions: The rapid and reliable effect of YNSA is emphasized in the experts' responses. YNSA should find global application in integrative medicine. Further and more extensive studies on the effectiveness of YNSA are both necessary and desirable.