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Evidence-Based Indications for Acupuncture

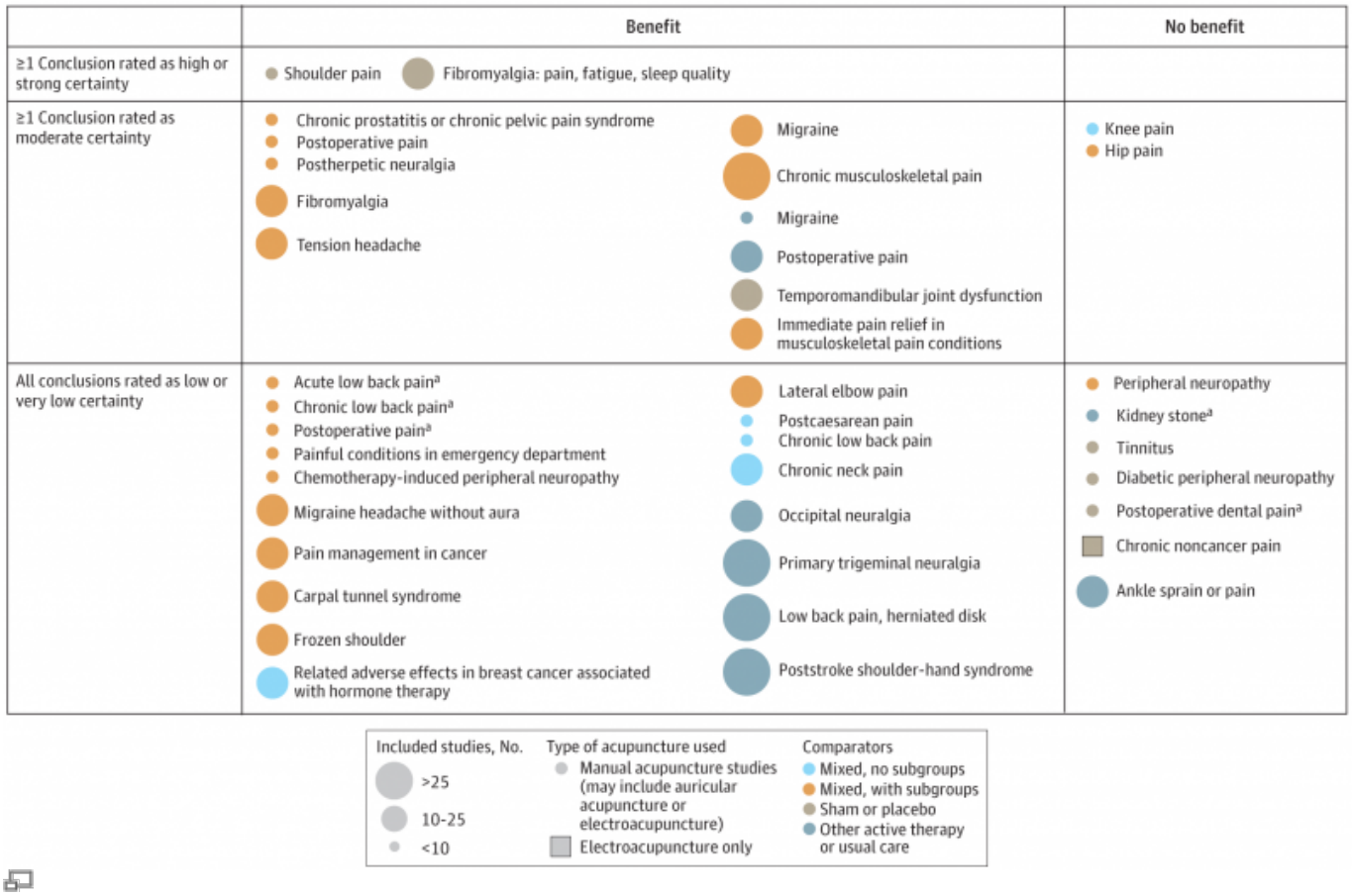
Expert Reports and Institutional Conferences

- Are listed the reports aiming to establish the indications for acupuncture and the possible levels of evidence.
- For each report, the conditions and their possible prioritization are extracted.

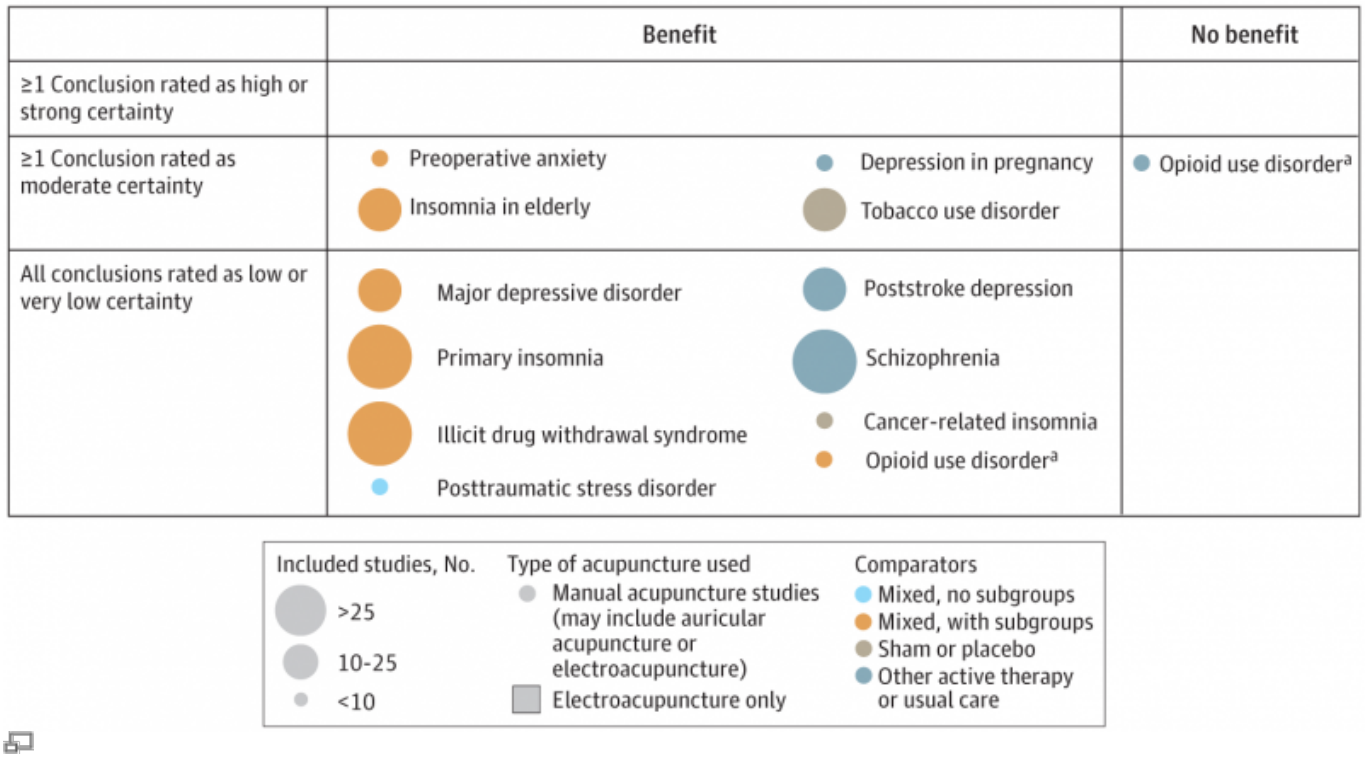
1. Veterans Health Administration (VHA, USA) 2022

Allen J, Mak SS, Begashaw M, Larkin J, Miake-Lye I, Beroes-Severin J, Olson J, Shekelle PG. Use of Acupuncture for Adult Health Conditions, 2013 to 2021: A Systematic Review. JAMA Netw Open. 2022 Nov 1;5(11):e2243665. https://doi.org/10.1001/jamanetworkopen.2022.43665

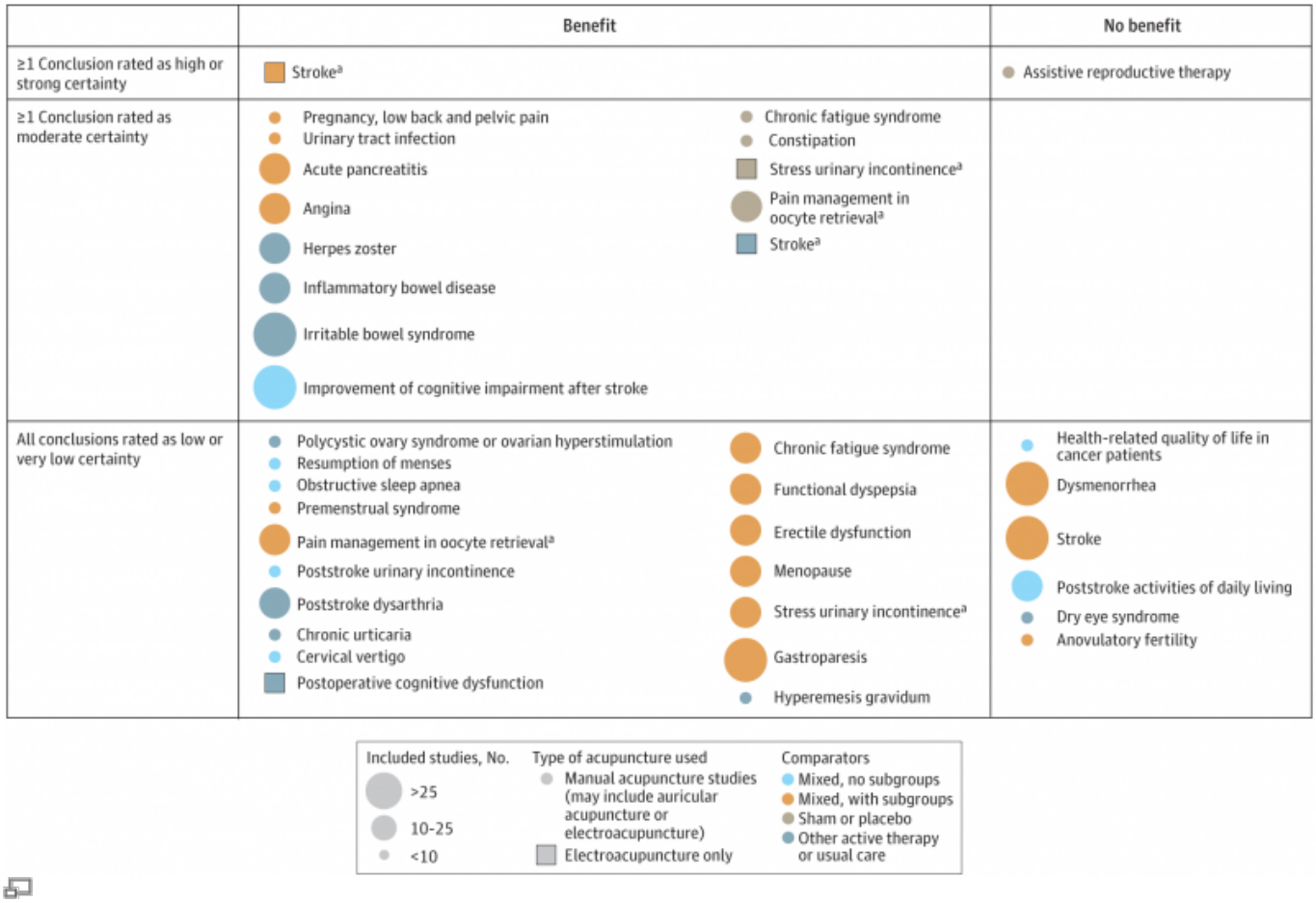
Importance	Acupuncture is a popular treatment that has been advocated for dozens of adult health conditions and has a vast evidence base.
Objective	To map the systematic reviews, conclusions, and certainty or quality of evidence for outcomes of acupuncture as a treatment for adult health conditions.
Evidence Review	Computerized search of PubMed and 4 other databases from 2013 to 2021. Systematic reviews of acupuncture (whole body, auricular, or electroacupuncture) for adult health conditions that formally rated the certainty, quality, or strength of evidence for conclusions. Studies of acupressure, fire acupuncture, laser acupuncture, or traditional Chinese medicine without mention of acupuncture were excluded. Health condition, number of included studies, type of acupuncture, type of comparison group, conclusions, and certainty or quality of evidence. Reviews with at least 1 conclusion rated as high-certainty evidence, reviews with at least 1 conclusion rated as moderate-certainty evidence, and reviews with all conclusions rated as low- or very low-certainty evidence; full list of all conclusions and certainty of evidence.
Findings	A total of 434 systematic reviews of acupuncture for adult health conditions were found; of these, 127 reviews used a formal method to rate certainty or quality of evidence of their conclusions, and 82 reviews were mapped, covering 56 health conditions. Across these, there were 4 conclusions that were rated as high-certainty evidence, and 31 conclusions that were rated as moderate-certainty evidence. All remaining conclusions (>60) were rated as low- or very low-certainty evidence. Approximately 10% of conclusions rated as high or moderate-certainty were that acupuncture was no better than the comparator treatment, and approximately 75% of high- or moderate-certainty evidence conclusions were about acupuncture compared with a sham or no treatment.
Conclusions and Relevance	Despite a vast number of randomized trials, systematic reviews of acupuncture for adult health conditions have rated only a minority of conclusions as high- or moderate-certainty evidence, and most of these were about comparisons with sham treatment or had conclusions of no benefit of acupuncture. Conclusions with moderate or high-certainty evidence that acupuncture is superior to other active therapies were rare.



Evidence Map for Pain



Evidence Map for Mental Health Conditions



Evidence Map for Other Conditions

2. Australian Acupuncture and Chinese Medicine Association (AACMA, Australia) 2017

Référence : McDonald J, Janz S. The Acupuncture Evidence Project. A Comparative Literature Review. Australian Acupuncture and Chinese Medicine Association. 2017;:83P. [52664].

Key results : Of the 122 conditions identified, strong evidence supported the effectiveness of acupuncture for 8 conditions, moderate evidence supported the use of acupuncture for a further 38 conditions, weak positive/unclear evidence supported the use of acupuncture for 71 conditions, and little or no evidence was found for the effectiveness of acupuncture for five conditions (meaning that further research is needed to clarify the effectiveness of acupuncture in these last two categories).

2.1. Conditions with strong evidence supporting the effectiveness of acupuncture

Reviews with consistent statistically significant positive effects and where authors have recommended the intervention. The quality of evidence is rated as moderate or high quality.

- Allergic rhinitis (perennial & seasonal)
- Chemotherapy-induced nausea and vomiting (with anti-emetics)
- Chronic low back pain
- Headache (tension-type and chronic)
- Knee osteoarthritis

- Migraine prophylaxis
- Postoperative nausea & vomiting
- Postoperative pain

2.2. Conditions with moderate evidence supporting the effectiveness of acupuncture

Reviews reporting all individual RCTs or pooled effects across RCTs as positive, but the reviewers deeming the evidence insufficient to draw firm conclusions. The quality of evidence is rated as moderate or high quality.

- Acute low back pain
- Acute stroke
- Ambulatory anaesthesia
- Anxiety
- Aromatase-inhibitor-induced arthralgia
- Asthma in adults
- Back or pelvic pain during pregnancy
- Cancer pain
- Cancer-related fatigue
- Constipation
- Craniotomy anaesthesia
- Depression (with antidepressants)
- Dry eye
- Hypertension (with medication)
- Insomnia
- Irritable bowel syndrome
- Labour pain
- Lateral elbow pain
- Menopausal hot flushes
- Modulating sensory perception thresholds
- Neck pain
- Obesity
- Perimenopausal & postmenopausal insomnia
- Plantar heel pain
- Post-stroke insomnia
- Post-stroke shoulder pain
- Post-stroke spasticity
- Post-traumatic stress disorder
- Prostatitis pain/chronic pelvic pain syndrome
- Recovery after colorectal cancer resection
- Restless leg syndrome
- Schizophrenia (with antipsychotics)
- Sciatica
- Shoulder impingement syndrome (early stage) (with exercise)
- Shoulder pain
- Smoking cessation (up to 3 months)
- Stroke rehabilitation
- Temporomandibular pain

2.3. Conditions with weak positive/unclear evidence supporting the effectiveness of acupuncture

Reviews consisted mostly of weak positive evidence or conflicting evidence between reviews or between authors within a review, with reviewers summarising the evidence as inconclusive. Reviews are of low or very low quality; or there is conflicting levels of evidence within or between reviews.

- Acupuncture in Emergency Department
- Acute ankle sprain in adults
- Alzheimer's disease
- Angina pectoris
- Assisted conception in ART
- Asthma in children
- Atopic dermatitis
- Attention Deficit Hyperactivity Disorder (ADHD)
- Autism spectrum disorder (ASD)
- Bell's palsy
- Bladder pain syndrome
- Cancer-related insomnia
- Cancer-related psychological symptoms
- Carpal tunnel syndrome
- Chemotherapy-induced peripheral neuropathy
- Chronic fatigue syndrome
- Chronic kidney disease
- Chronic obstructive pulmonary disease (COPD)
- Chronic urinary retention due to spinal cord injury
- Chronic urticaria
- Dysmenorrhoea
- Dyspepsia in diabetic gastroparesis (DGP)
- Erectile dysfunction
- Exercise performance & post-exercise recovery
- Fatigue in systemic lupus erythematosus
- Fibromyalgia
- Functional dyspepsia
- Gag reflex in dentistry
- Glaucoma
- Heart failure
- Hot flushes in breast cancer
- Hyperemesis gravidarum
- Hypoxic ischemic encephalopathy in neonates
- Induction of labour
- Inflammatory bowel disease
- Itch
- Lumbar spinal stenosis
- Melasma
- Meniere's disease/syndrome
- Menopausal syndrome
- Multiple sclerosis
- Mumps in children
- Myelosuppression after chemotherapy

- Oocyte retrieval pain relief
- Opiate addiction
- Opioid detoxification
- Parkinson's disease
- Polycystic ovarian syndrome
- Poor sperm quality
- Postnatal depression
- Postoperative gastroparesis syndrome (PGS)
- Postoperative ileus
- Post-stroke hiccoughs
- Premenstrual syndrome
- Primary ovarian insufficiency
- Primary Sjogren's syndrome
- Psoriasis vulgaris
- Rheumatoid arthritis Slowing progression of myopia
- Spinal cord injury
- Stress urinary incontinence in adults
- Sudden sensorineural hearing loss
- Surgery analgesia
- Tinnitus
- Traumatic brain injury
- Urinary incontinence
- Uterine fibroids
- Vascular cognitive impairment without dementia
- Vascular dementia
- Whiplash associated disorder (WAD)

2.4. Conditions with little or no evidence supporting the effectiveness of acupuncture

Reviews have consistently found little support for acupuncture. The quality of the evidence is consistently low or very low. Further research required.

- Alcohol dependence
- Cocaine addiction
- Epilepsy
- Nausea in pregnancy
- Smoking cessation (more than 6 months)

3. Institut national de la santé et de la recherche médicale (INSERM, France) 2014

Reférence : Barry C, Seegers V, Guegen J, Hassler C, Ali A, Falissard B. Evaluation de l'efficacité et de la sécurité de l'acupuncture. Inserm U669. 2014. 212p. 160626
Nguyen J, Goret O. Commentaires au rapport “Evaluation de l'efficacité et de la sécurité de l'acupuncture” in Barry C et al. Inserm U669. 2014. p 194-205. 152624

Literature review limited to 42 systematic reviews published by the Cochrane Collaboration

(2005-2013).

3.1. Cochrane Collaboration reviews concluding a potential benefit (moderate to strong level of evidence)

- Tension Headache
- Migraine
- Osteoarthritis
- Low Back Pain
- Pain during Childbirth
- Dysmenorrhea
- Neck Pain
- Prevention of Postoperative Nausea and Vomiting

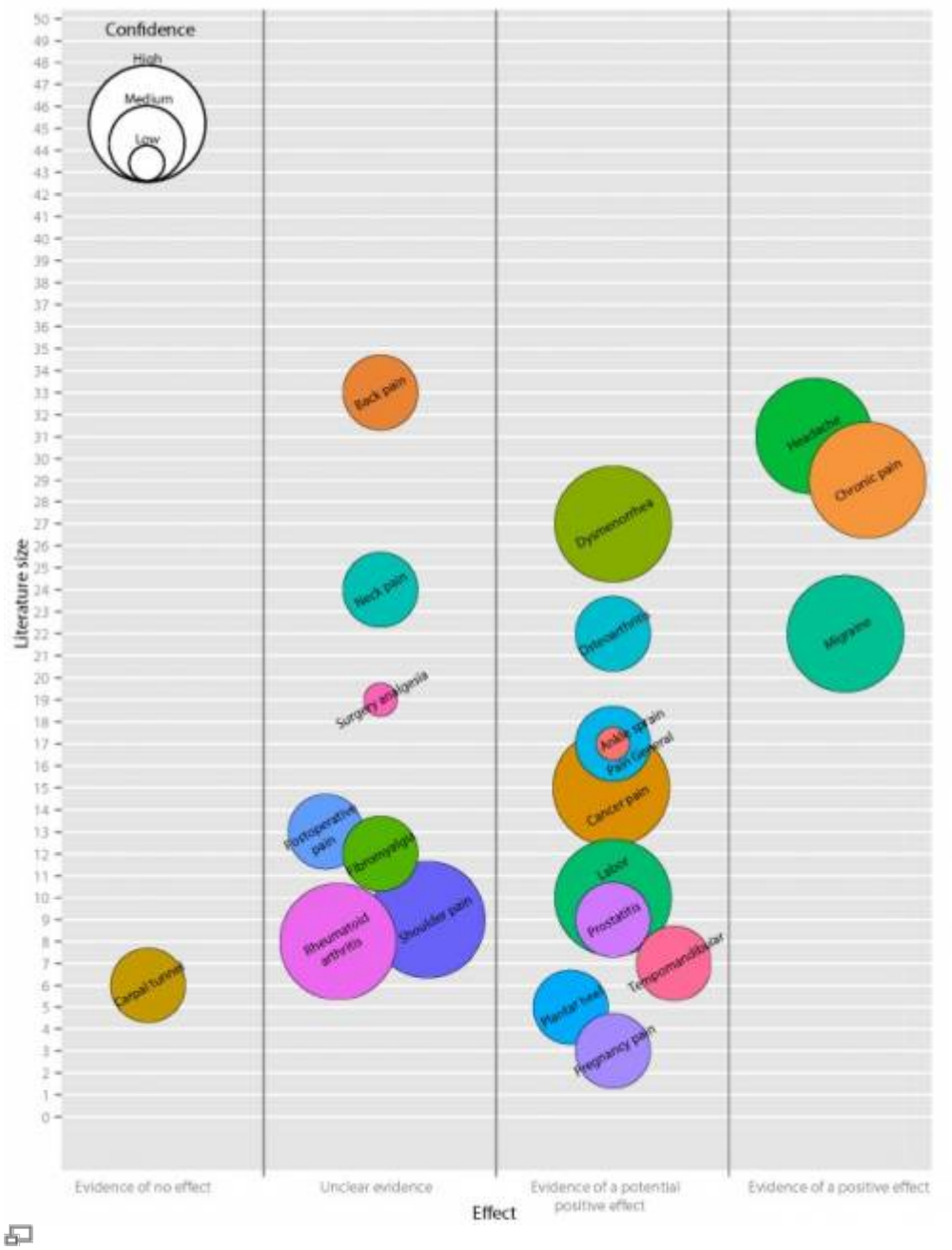
3.2. Cochrane Collaboration reviews finding a specific effect versus sham acupuncture

- Tension Headache
- Osteoarthritis of the Peripheral Joints
- Low Back Pain
- Neck Pain
- Prevention of Postoperative Nausea and Vomiting

4. Veterans Health Administration (VHA, USA) 2014

Référence: Hempel S, Taylor SI, Solloway MR, Miake-Lye IM, Beroes JM, Shanman R, Booth MI, Siroka AM, Shekelle PG. Evidence map of acupuncture. VA evidence-based synthesis program reports.2014. 170098

Results from existing reviews of reviews about the effectiveness of acupuncture are non-conclusive. A systematic review of systematic reviews of acupuncture published between 1996 and 2005 included 35 reviews. The overview noted that 12 reviews reported support for acupuncture and 6 reported strong support; however, when applying strict inclusion criteria, such as randomized and double blind studies, good evidence of no benefit was shown. In 2007, Adams compiled a “Brief Overview - A summary of the evidence for use of acupuncture from systematic reviews and meta-analyses” for the Veterans Health Administration Office of Patient Care Services Technology Assessment Program. The report included 42 systematic reviews published since 2002 and concluded that higher quality studies are only beginning to emerge, the evidence base is heterogeneous, and the review results highlight the overall poor quality of studies and reporting. Thus, it is timely to assess the current state of reviews of acupuncture.



The bubble plot shows an estimate of the evidence base for pain-related indications judging from systematic reviews and recent large RCTs. The plot depicts the estimated size of the literature (y-axis, number of RCTs included in largest review), the estimated effect (x-axis), and the confidence in the estimate (bubble size).

4.1. Evidence of positive effect

- headache
- chronic pain
- migraine

4.2. Evidence of potential positive effect

- dysmenorrhea
- osteoarthritis

- pain management
- ankle sprain
- cancer-associated pain
- labor pain
- prostatitis / chronic pelvic pain syndrome
- temporomandibular joint disorders
- plantar heel pain
- pregnancy-associated pelvic and back pain
- insomnia
- obesity
- Smoking cessation
- preventing postoperative nausea and vomiting
- restless legs syndrome
- constipation
- depression
- schizophrenia
- anxiety and anxiety disorders
- posttraumatic stress disorder (PTSD)

4.3. Unclear evidence

- back pain
- neck pain
- analgesia during surgery
- postoperative pain
- fibromyalgia
- shoulder pain
- rheumatoid arthritis
- cancer treatment-associated physical adverse events
- cancer treatment-associated physical adverse events; irritable bowel syndrome (IBS)
- rhinitis
- gastrointestinal diseases
- blood pressure
- tinnitus
- menopausal symptoms, premenstrual syndrome
- xerostomia
- dry eye
- exercise performance
- erectile dysfunction
- quality of life
- opiate addiction
- drug addiction
- chronic fatigue syndrome (CFS)
- stroke rehabilitation
- fertility treatment and in vitro fertilization

4.4. Evidence of no effect

- carpal tunnel syndrome

- nausea and vomiting in pregnant women
- cocaine addiction
- alcohol dependence

4.5. Future research

Clinical indications with only one or 2 reviews published in recent years.

- chemotherapy-induced leukopenia
- Bell’s Palsy
- brain injury
- asthma
- epilepsy
- breech presentation
- facial spasm
- angina pectoris therapy
- spinal cord injury
- Parkinson’s disease
- induction of labor
- Alzheimer’s disease
- uremic pruritus
- Meniere’s syndrome
- use of acupuncture in emergency departments
- vascular dementia

5. Agence nationale d'accréditation et d'évaluation en santé (ANAES, France) 2004

Référence : ANAES. Liste des actes évalués de 2000 à juin 2004. Juillet 2004. Acupuncture : page 13 (01 système nerveux central, périphérique et autonome) et page 100 (17 actes sans précision topographique). 2004

L’Anaes a été saisie par les Caisses d’Assurance Maladie, les Sociétés Savantes et les différentes Directions du Ministère de la Santé, depuis 1999, pour évaluer l’efficacité et la sécurité des actes techniques médicaux en vue de leur inscription à la Classification Commune des Actes Médicaux (CCAM). Les résultats de ces évaluations sont exprimés sous forme d’un avis sur l’inscription de l’acte à la CCAM. Cet avis peut être défavorable (AD), acte en phase de recherche clinique (RC), favorable sans recommandations (AF) ou favorable avec recommandations (AFR).

5.1. Avis favorable avec recommandations (AFR)

- Séance d'acupuncture à visée antalgique
- Acupuncture dans les conduites addictives (tabagisme)
- Acupuncture dans les conduites addictives (alcoolisme)
- Acupuncture dans les conduites addictives toxicomanie)
- Acupuncture dans les nausées et vomissements en post-opératoire (curatif)
- Acupuncture dans les nausées et vomissements en post-opératoire (préventif)

- Acupuncture dans les nausées et vomissement induits par la chimiothérapie
- Acupuncture dans les nausées et vomissement gravidiques
- Acupuncture dans les pathologies fonctionnelles uro-génitales
- Acupuncture dans les syndromes anxio-dépressifs
- Acupuncture dans l'aide à la récupération neuro-motrice
- Acupuncture dans les affections à composante allergique

6. WorkSafe (Canada) 2003

Référence : Martin CW. Acupuncture. Summary of published systematic reviews. Worksafe, Compensation and Rehabilitation Services Division. 2003;:21p. 140984

Medical Evidence - Conclusions:
• The quality of primary research publications on acupuncture is generally poor.
• There are many published good quality systematic reviews (Level I evidence) on the effectiveness of acupuncture in the treatment of various conditions.
• There is strong evidence for its effectiveness in treating dental pain, temporomandibular joint pain and post-operative as well as pregnancy related nausea and vomiting.
• The evidence for acupuncture effectiveness in treating a myriad of other disorders is lacking.
• Acupuncture is relatively safe when performed by trained individuals.

6.1. Strong evidence

- dental pain,
- temporomandibular joint pain
- post-operative nausea and vomiting
- pregnancy nausea and vomiting

7. Alberta Heritage Foundation for Medical Research (AHF, Canada) 2002

Référence: Leggett Tait P, Brooks L, Harstal C. Alberta Heritage Foundation, Series A Health Tech Assessment for Medical Research. 2002;HTA 27:67P. 131621

7.1. Found to be effective

- dental and TMD pain
- antiemesis (nausea/vomiting)

7.2. Encouraging

- idiopathic headaches
- fibromyalgia .
- inclusive evidence
- back pain
- chronic pain,

- smoking cessation,
- asthma.

7.3. Effectiveness not supported

- tinnitus,
- stroke rehabilitation
- neck pain
- addictions
- weight reduction

8. Linde K et al 2001

Référence : Linde K, Vickers A, Hondras M, Ter Riet G, Thormahlen J, Berman B, Melchart D. Systematic reviews of complementary therapies - an annotated bibliography. part 1: acupuncture. BMC Complement Altern Med. 2001. 141252

BACKGROUND: Complementary therapies are widespread but controversial. We aim to provide a comprehensive collection and a summary of systematic reviews of clinical trials in three major complementary therapies (acupuncture, herbal medicine, homeopathy). This article is dealing with acupuncture. Potentially relevant reviews were searched through the register of the Cochrane Complementary Medicine Field, the Cochrane Library, Medline, and bibliographies of articles and books. To be included articles had to review prospective clinical trials of acupuncture; had to describe review methods explicitly; had to be published; and had to focus on treatment effects. Information on conditions, interventions, methods, results and conclusions was extracted using a pretested form and summarized descriptively. RESULTS: From a total of 48 potentially relevant reviews preselected in a screening process 39 met the inclusion criteria. 22 were on various pain syndromes or rheumatic diseases. Other topics addressed by more than one review were addiction, nausea, asthma and tinnitus. Almost unanimously the reviews state that acupuncture trials include too few patients. Often included trials are heterogeneous regarding patients, interventions and outcome measures, are considered to have insufficient quality and contradictory results. Convincing evidence is available only for postoperative nausea, for which acupuncture appears to be of benefit, and smoking cessation, where acupuncture is no more effective than sham acupuncture. CONCLUSIONS: A large number of systematic reviews on acupuncture exists. What is most obvious from these reviews is the need for (the funding of) well-designed, larger clinical trials.

8.1. Convincing evidence

- postoperative nausea
- smoking cessation

9. British Medical Association (BMA, UK) 2000

Référence : Acupuncture: efficacy, safety and practice - a BMA report. British Medical Association. 2000. 87281

Is acupuncture effective? The report evaluates the evidence for acupuncture as a treatment for back and neck pain, osteoarthritis, recurrent headache, nausea and vomiting, smoking cessation, weight loss, stroke and dental pain. Chapter two concludes that according to current evidence, acupuncture appears to be more effective than control interventions for nausea and vomiting (particularly for post-operative symptoms in adults), back pain, dental pain and migraine. Evidence is unclear about a specific response to acupuncture in osteoarthritis and neck pain cases. It considers that the jury is still out for its use in treating recovery from stroke, tension headache, fibromyalgia and certain joint dysfunctions. The report states: “Acupuncture appears not to be superior to sham acupuncture (used as a control in research) for smoking cessation and weight loss.”

9.1. Acupuncture appears to be more effective than control interventions

- nausea and vomiting (particularly for post-operative symptoms in adults)
- back pain
- dental pain
- migraine

9.2. Evidence is unclear about a specific response to acupuncture

- osteoarthritis
- neck pain

9.3. Still out for its use

- recovery from stroke
- tension headache
- fibromyalgia
- certain joint dysfunctions.

10. National Institute of Health (NIH, USA) 1997

Référence : Acupuncture-nih consensus development panel on acupuncture. JAMA. 1998;280(17):1518-24. 58596

Conclusions. Acupuncture as a therapeutic intervention is widely practiced in the United States. Although there have been many studies of its potential usefulness, many of these studies provide equivocal results because of design, sample size, and other factors. The issue is further complicated by inherent difficulties in the use of appropriate controls, such as placebos and sham acupuncture groups. However, promising results have emerged, for example, showing efficacy of acupuncture in adult postoperative and chemotherapy nausea and vomiting and in postoperative dental pain. There are other situations, such as addiction, stroke rehabilitation, headache, menstrual cramps, tennis elbow, fibromyalgia, myofascial pain, osteoarthritis, low back pain, carpal tunnel syndrome, and asthma, in which acupuncture may be useful as an adjunct treatment or an acceptable alternative or be included in a comprehensive management program. Further research is likely to uncover additional areas where acupuncture interventions will be useful.

10.1. Efficacy of acupuncture

- adult postoperative and chemotherapy nausea and vomiting

- postoperative dental pain

10.2. Acupuncture may be useful as an adjunct treatment or an acceptable alternative or be included in a comprehensive management program

- addiction
- stroke rehabilitation
- headache
- menstrual cramps
- tennis elbow
- fibromyalgia
- myofascial pain
- osteoarthritis
- low back pain
- carpal tunnel syndrome
- asthma

11. World Health Organization (WHO, Cervia - Italia) 1996

Référence: Acupuncture: review and analysis of reports on controlled clinical trials. Geneva: WHO. 2003. 160282

Diseases and disorders that can be treated with acupuncture. The diseases or disorders for which acupuncture therapy has been tested in controlled clinical trials reported in the recent literature can be classified into four categories :

1. Diseases, symptoms or conditions for which acupuncture has been proved—through controlled trials—to be an effective treatment.
2. Diseases, symptoms or conditions for which the therapeutic effect of acupuncture has been shown but for which further proof is needed.
3. Diseases, symptoms or conditions for which there are only individual controlled trials reporting some therapeutic effects, but for which acupuncture is worth trying because treatment by conventional and other therapies is difficult.
4. Diseases, symptoms or conditions for which acupuncture may be tried provided the practitioner has special modern medical knowledge and adequate monitoring.

11.1. Diseases, symptoms or conditions for which acupuncture has been proved through controlled trials to be an effective treatment

- Adverse reactions to radiotherapy and/or chemotherapy
- Allergic rhinitis (including hay fever)
- Biliary colic
- Depression (including depressive neurosis and depression following stroke)
- Dysentery, acute bacillary
- Dysmenorrhoea, primary
- Epigastralgia, acute (in peptic ulcer, acute and chronic gastritis, and gastrospasm)
- Facial pain (including craniomandibular disorders)
- Headache

- Hypertension, essential
- Hypotension, primary
- Induction of labour
- Knee pain
- Leukopenia
- Low back pain
- Malposition of fetus, correction of
- Morning sickness
- Nausea and vomiting
- Neck pain
- Pain in dentistry (including dental pain and temporomandibular dysfunction)
- Periarthritis of shoulder
- Postoperative pain
- Renal colic
- Rheumatoid arthritis
- Sciatica
- Sprain
- Stroke
- Tennis elbow

11.2. Diseases, symptoms or conditions for which the therapeutic effect of acupuncture has been shown but for which further proof is needed

- Abdominal pain (in acute gastroenteritis or due to gastrointestinal spasm)
- Acne vulgaris
- Alcohol dependence and detoxification
- Bell’s palsy
- Bronchial asthma
- Cancer pain
- Cardiac neurosis
- Cholecystitis, chronic, with acute exacerbation
- Cholelithiasis
- Competition stress syndrome
- Craniocerebral injury, closed
- Diabetes mellitus, non-insulin-dependent
- Earache
- Epidemic haemorrhagic fever
- Epistaxis, simple (without generalized or local disease)
- Eye pain due to subconjunctival injection
- Female infertility
- Facial spasm
- Female urethral syndrome
- Fibromyalgia and fasciitis
- Gastrokinetic disturbance
- Gouty arthritis
- Hepatitis B virus carrier status
- Herpes zoster (human (alpha) herpesvirus 3)
- Hyperlipaemia
- Hypo-ovarianism
- Insomnia

- Labour pain
- Lactation, deficiency
- Male sexual dysfunction, non-organic
- Ménière disease
- Neuralgia, post-herpetic
- Neurodermatitis
- Obesity
- Opium, cocaine and heroin dependence
- Osteoarthritis
- Pain due to endoscopic examination
- Pain in thromboangiitis obliterans
- Polycystic ovary syndrome (Stein–Leventhal syndrome)
- Postextubation in children
- Postoperative convalescence
- Premenstrual syndrome
- Prostatitis, chronic
- Pruritus
- Radicular and pseudoradicular pain syndrome
- Raynaud syndrome, primary
- Recurrent lower urinary-tract infection
- Reflex sympathetic dystrophy
- Retention of urine, traumatic
- Schizophrenia
- Sialism, drug-induced
- Sjögren syndrome
- Sore throat (including tonsillitis)
- Spine pain, acute
- Stiff neck
- Temporomandibular joint dysfunction
- Tietze syndrome
- Tobacco dependence
- Tourette syndrome
- Ulcerative colitis, chronic
- Urolithiasis
- Vascular dementia
- Whooping cough (pertussis)

11.3. Diseases, symptoms or conditions for which there are only individual controlled trials reporting some therapeutic effects, but for which acupuncture is worth trying because treatment by conventional and other therapies is difficult

- Chloasma
- Choroidopathy, central serous
- Colour blindness
- Deafness
- Hypophrenia
- Irritable colon syndrome
- Neuropathic bladder in spinal cord injury
- Pulmonary heart disease, chronic

- Small airway obstruction

11.4. Diseases, symptoms or conditions for which acupuncture may be tried provided the practitioner has special modern medical knowledge and adequate monitoring Equipment

- Breathlessness in chronic obstructive pulmonary disease
- Coma
- Convulsions in infants
- Coronary heart disease (angina pectoris)
- Diarrhoea in infants and young children
- Encephalitis, viral, in children, late stage
- Paralysis, progressive bulbar and pseudobulbar

12. World Health Organization (WHO, Beijing- China) 1979

Référence : Bannerman RH. The world health organization viewpoint on acupuncture. American Journal of Acupuncture. 1980;8(3):131-5. 17109

The World Health Organization Interregional Seminar drew up the following provisional list of diseases that lend themselves to acupuncture treatment. The list is based on clinical experience, and not necessarily on controlled clinical research; furthermore, the inclusion of specific diseases are not meant to indicate the extent of acupuncture's efficacy in treating them.

Upper Respiratory Tract

- Acute sinusitis
- Acute rhinitis
- Common cold
- Acute tonsillitis

Respiratory System

- Acute bronchitis
- Bronchial asthma (most effective in children and in patients without complicating diseases)

Disorders of the Eye

- Acute conjunctivitis
- Central retinitis
- Myopia (in children)
- Cataract (without complications)

Disorders of the Mouth

- Toothache, post-extraction pain
- Gingivitis
- Acute and chronic pharyngitis

Gastro-intestinal Disorders

- Spasms of oesophagus and cardia
- Hiccough
- Gastroptosis
- Acute and chronic gastritis
- Gastric hyperacidity
- Chronic duodenal ulcer (pain relief)
- Acute duodenal ulcer (without complications)
- Acute and chronic colitis
- Acute bacillary dysentery
- Constipation
- Diarrhoea
- Paralytic ileus

Neurological and Musculo-skeletal Disorders

- Headache and migraine
- Trigeminal neuralgia
- Facial palsy (early stage, ie within three to six months)
- Pareses following a stroke
- Peripheral neuropathies
- Sequelae of poliomyelitis (early stage, ie within six months)
- Meniere's disease
- Neurogenic bladder dysfunction
- Nocturnal enuresis
- Intercostal neuralgia
- Cervicobrachial syndrome
- Frozen shoulder
- Tennis elbow
- Sciatica
- Low back pain
- Osteoarthritis

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