# Table des matières

***1. Systematic Reviews and Meta-Analysis*** ..... 1
1.1. Generic Acupuncture ..... 1
1.2. Special Acupuncture Techniques ..... 1
1.2.1. Bloodletting ..... 1
1.2.1.1. Dong 2025 ..... 1

# Fever

# Fièvre

## 1. Systematic Reviews and Meta-Analysis

### 1.1. Generic Acupuncture

### 1.2. Special Acupuncture Techniques

#### 1.2.1. Bloodletting

##### 1.2.1.1. Dong 2025

Dong S, Xu MF, Li XH, Zhang YX, Robinson N, Yang XX, Cao HJ. Bloodletting therapy to manage fever caused by infectious diseases: A systematic review of randomized controlled trials. Eur J Integr Med. 2025 Apr;75:102441. https://doi.org/10.1016/j.eujim.2025.102441

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| **Background** | Bloodletting therapy (BLT), a traditional Chinese medicine (TCM) non-pharmaceutical therapy, may have a good antipyretic effect, but the evidence has not been evaluated. The aim of this systematic review was to assess the antipyretic effect and safety of TCM BLT used in patients with infections. |
| **Methods** | The protocol of this review was registered in PROSPERO (No.CRD42023411059). We included randomized controlled trials (RCTs) comparing BLT alone or in combination with another therapy to controls (no treatment or usual care). A search of CNKI, Wanfang, VIP, Sinomed, Cochrane Library, PubMed, and Embase databases was conducted up to March 2023. Cochrane Risk of Bias 2.0 tool and GRADE were used for assessing methodological quality of included trials and certainty of evidence. |
| **Results** | **Fourteen RCTs (1419 participants)** were included. BLT (either used alone or as add on therapy) was superior to drugs alone in increasing antipyretic rate and lowering the body temperature only for adults. For children or when combined with pediatric Tuina or herbal medicine, its advantages were not shown. The fever clearance time may be shortened (Mean Difference (MD)=-7.59 h, 95 %CI -12.73 h to -2.44 h, 194 participants, I2=69 %, 3 trials, P = 0.004) and the commencement of fever abatement (MD=-1.48 h, 95 %CI -2.02 h to -0.94 h, 134 participants, I2=0 %, 2 trials, P < 0.00001) improved when used as an adjunctive treatment with pediatric Tuina. Safety of BLT to treat fever was still unclear since few trials reported this relevant outcome. Certainty of evidence was very low. |
| **Conclusion** | The long-term (24hrs+) antipyretic effect of BLT alone and combined with drugs may be better than that of drugs alone for adults. For children combining BLT and pediatric Tuina/herbal medicine was no better in increasing antipyretic rate compared to pediatric Tuina/herbal medicine alone. Current evidence does not provide firm conclusions about the safety of BLT. |

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