

## Key Points

1. Acupuncture is a very popular complementary medicine
2. Although not conclusive, the NIH found that there is enough evidence of acupuncture's effectiveness to warrant further investigation
3. Research is starting to show that acupuncture is effective in treating certain types of pain
4. New study evaluated the effectiveness of acupuncture in treating neck pain in 153 people
5. 68% of the people reported their pain improved by at least 50%
6. Acupuncture was less effective for pain that had lasted a long time
7. Study suffers from several limitations including no control group and no formal criteria for inclusion in the the study
8. Second study reviewed literature for reports of adverse events due to acupuncture
9. Found a total of 715 reported adverse events, most common were trauma and infection
10. 12 prospective studies of over 1,000,000 treatments showed the rate of adverse events to be very low

## Definitions

**acupoints** - very specific points on the body which are used for acupuncture

**acupuncture** - medical technique where thin needles are inserted into specific points on the body to restore the flow of Qi

**electroacupuncture** - acupuncture technique where a very small electrical current - set to a specific frequency - is passed through acupuncture needle

**meridian** - another name for a Qi channel in the human body

## More Evidence That Acupuncture Is Effective And Safe

Acupuncture is one of the most commonly used complementary therapies for pain and is employed in over 80% of pain clinics in the United Kingdom. Now, two reports in the September, 2004 issue of the journal *Acupuncture in Medicine* (the journal of the British Medical Acupuncture Society) provide more evidence that acupuncture is not only effective in treating certain types of pain, but is safe as well.

Neck pain, even - or especially - after surgery, is one of the most common problems that Chiari and syringomyelia patients endure. The potentially good news is that Patrick Blossfeldt, a Consultant in Pain Management in Great Yarmouth, UK, found that acupuncture was very effective in helping people with chronic neck pain.

Blossfeldt assessed the effectiveness of acupuncture in 153 patients he treated for chronic neck pain. The patients ranged in age from 20 to over 70 with an average age of 50 years. They had been suffering from neck pain for an average of 38 months, with some in pain as short as 6 months and some as long as 10 years. In 34% of the patients, the pain was confined to their neck area, but the rest had pain that radiated to the head, shoulder, and/or arms as well. In half the patients, the cause of the pain was undiagnosed, but many suffered from pain due to whiplash, occupational strain, surgery, scoliosis, and arthritis to name a few.

The patients included in the study were selected by the researcher, who did not follow a formal protocol, but rather included people he thought would benefit from acupuncture. He purposely excluded people with psychological problems and, perhaps significantly for Chiari patients, people with clearly identified neuropathic pain. The group received an average of 7 acupuncture treatments, with no electrical stimulation, and pain was evaluated using a simple scale after the treatment, and then 6 months and 1 year later.

Overall, Blossfeldt found that 68% of the people reported their pain improved by 50% or more (see Table 1), with half reporting an improvement of at least 75%. Interestingly, but perhaps not surprisingly, the treatments were not as effective for people who had been in pain for longer periods of time. Defining success as a pain improvement of 50% or more, 85% of the subjects who had been in pain less than 3 months were successfully treated; however, this dropped to 70% success for people in pain 2 years or less (see Table 2).

**Table 1**  
**Effectiveness of Acupuncture Treatment For Neck Pain (153 Subjects)**

Improvement	% of Patients
Painfree	9
75%-99%	41
50%-74%	18
No change	32

**Table 2**  
**Effectiveness of Acupuncture In Patients With Different Durations of Pain**

Pain Duration	# of Patients	% Success
< 3 mos	13	85
<6 mos	32	78
<12 mos	69	72
<24 mos	92	70
Overall	153	68

**Note:** Success is defined as a 50% or more decrease in pain

**Source:** Blossfeldt P. Acupuncture for chronic neck pain--a cohort study in an NHS pain clinic. *Acupunct Med.* 2004 Sep;22(3):146-51.

The follow-up data was also encouraging. Of the 104 people who were successfully treated, only 65 responded to the 6 month assessment, but of these 72% reported that their pain was either the same or had continued to

**pneumothorax** - accumulation of air or gas in the space between the lung and chest wall, resulting in partial or complete collapse of the lung.

**Qi** - pronounced "chee"; vital, invisible energy force that flows through the body along specific channels according to Traditional Chinese Medicine

### Source

White A. A cumulative review of the range and incidence of significant adverse events associated with acupuncture. *Acupunct Med.* 2004 Sep;22(3):122-33.

get better. One year after the treatment, only 36 people responded, but of these 81% reported positively on their pain levels.

Unfortunately, like many acupuncture reports, this study suffers from limitations and methodological flaws. There were no objective criteria to include patients in the study and the author even states he picked people he thought would respond well, so the results may not apply to a broad group. Secondly, this wasn't a controlled study in the sense that there wasn't a group of people with neck pain who didn't receive acupuncture (a control group) to compare the results to. The author acknowledges these limitations however, and the results are still meaningful if kept in perspective. It would be interesting, and useful, to see a study specifically on the effectiveness of acupuncture used to treat Chiari related neck pain after decompression surgery.

In a second report in the same journal, Adrian White, a Clinical Senior Lecturer at the Peninsula Medical School in Plymouth, UK, addressed the safety of acupuncture. White scoured medical databases, case reports, surveys, and textbooks for reports of adverse events associated with acupuncture. Using data from 1994 to 2004, White found 715 total reports of serious adverse events (see Table 3).

**Table 3**  
**Number of Adverse Event Reports Found In Search**

Adverse Event	Primary Reports	Sec. Reports	Total
Trauma	90	186	276
Infection	204	91	295
Misc.	61	83	144
All	355	270	715

**Notes:** Most common trauma events include pneumothorax and central nervous system injury; most common infection Hepatitis B; Misc. includes seizures and drowsiness

The events were divided into primary reports, meaning that the clinician involved in the event reported it, and secondary events, meaning the event was reported by someone else. Because of their very nature, secondary reports were given less credibility than primary reports. The events were further divided into the category types of trauma, infection, and miscellaneous.

White found 90 primary reports of trauma events with the most common being pneumothorax (air trapped between the lung and chest wall which can collapse the lung) and 204 primary reports of infection, with the most common being Hepatitis B. In the miscellaneous category common adverse events included seizures and drowsiness to the point that it could affect driving. There were also 12 primary reports of death, mostly due to cardiac events and pneumothorax.

To put these reports of adverse events into perspective, White also compiled the results of 12 prospective studies which followed over 1,000,000 acupuncture treatments. During the course of those treatments, only 6 adverse events were recorded. From this, White estimates the rate of adverse events to be .05 per 10,000 treatments and .55 per 10,000 individuals. According to the author, this would indicate that acupuncture is safe, and this adverse event rate is lower than many common medical treatments.

The author goes on to point out the risks for individuals can be greatly reduced by taking simple precautions. For example, using disposable needles (standard practice in the West) greatly reduces the risk of infection and going to a properly trained acupuncturist also reduces the risk of a serious adverse event. Finally, the author points out that acupuncturists need to be aware of the risks associated with a given patient and as an example points out that acupuncture can sometimes make asthma symptoms worse.

In summary, despite the frequent structural limitations in the research, evidence is accumulating that acupuncture can be effective in treating certain types of pain. That is probably why it is one of the most popular complementary therapies today.

--Rick Labuda

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