ACUPUNCTURE AS A COMPLEMENTARY THERAPY FOR MUSCULOSKELETAL PAIN

[Adapted from the report by Dr. Shahril Effendi Bin Shuib]

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Introduction

Musculoskeletal pain syndromes are a common health problem. The causes of musculoskeletal pain are varied starting from trauma up to musculoskeletal diseases such as low back pain, Osteoarthritis and etc. Nowadays there are many ways to treat musculoskeletal pain depending on the severity of the condition. Pharmacologic and non pharmacologic therapies such as acupuncture and physiotherapy can be used to manage patient with musculoskeletal pain. Understanding the physiology of pain transmission, modulation, and perception is crucial for effective management.

Nowadays acupuncture has grown in popularity among alternative therapies and it is estimated that 2% of adults in the UK use it each year for a variety of conditions. It was claimed to have many benefits and advantages especially reducing pain in various diseases and improve quality of life.

This technology review was conducted following a request from Director of Traditional and Complementary Medical (T&CM) Division, Ministry of Health (MOH) Malaysia to provide the best available evidence in ensuring T&CM practice in Malaysia is safe and conforms to acceptable standards for the benefits of the public, and in line with requirement of the Traditional and Complementary Medicine Act 2013.

Objective/Aim

The objective of this technology review is to review evidence on the effectiveness, safety and cost-effectiveness of acupuncture as a complementary therapy for musculoskeletal pain.

Results and Conclusions

There were 11 systematic reviews, one Randomised Controlled Trial and one economic evaluation study included in this review.

There was evidence on the effectiveness of acupuncture for patients with musculoskeletal pain such as neck pain, osteoarthritis, back pain, low back pain, fibromyalgia and ankle sprain. However, the systematic reviews retrieved included studies which have various biases and hence varying the quality of the included studies.

From the review, there was evidence to suggest that acupuncture was safe and there was no serious adverse events noted. However, pain due to local insertion of the needle, ecchymosis and local paresthesia were among some of adverse events reported. In one study, three of the participants felt tired during acupuncture treatment.

Based on one economic evaluation study conducted in primary care setting, a short course of traditional acupuncture for persistent non-specific low back pain in primary care confers a modest health benefit for minor extra cost to the NHS compared with usual care. However, acupuncture care for low back pain seems to be cost-effective in the longer term. The overall incremental cost-effectiveness ratio (ICER) for acupuncture in the treatment of low back pain was positive with a mean of £4241 at 24 month with QALY gain of 0.027. In Malaysia, it is estimated that the cost for one session acupuncture treatment for chronic pain management is around RM50 /session.

Methods

Literatures were searched through electronic databases specifically PubMed, Medline, Cochrane, Ovid, Horizon scanning databases, other websites and from non scientific database - Google search engine. In addition, a cross-referencing of the articles retrieved was also carried out accordingly to the topic. Relevant articles were critically appraised and evidence graded using US/Canadian Preventive Services Task Force.