

February 2007 Newsletter

Whats new

We have added several new features to the website and have upgraded the research/news archive as well as the events calendar.	Page 2
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Events calendar

Overview of Acupuncture and TCM Events for February.	Page 3
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The latest research

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Media gallery additions




Cosmetic Acupuncture Video: Cosmetic Acupuncturist Siamak F. Shirazi is being interviewed about his "facial rejuvenation" technique by a local TV station in Portland. He demonstrates his technique on a model. Visit Acupuncture.com.au to view the video.

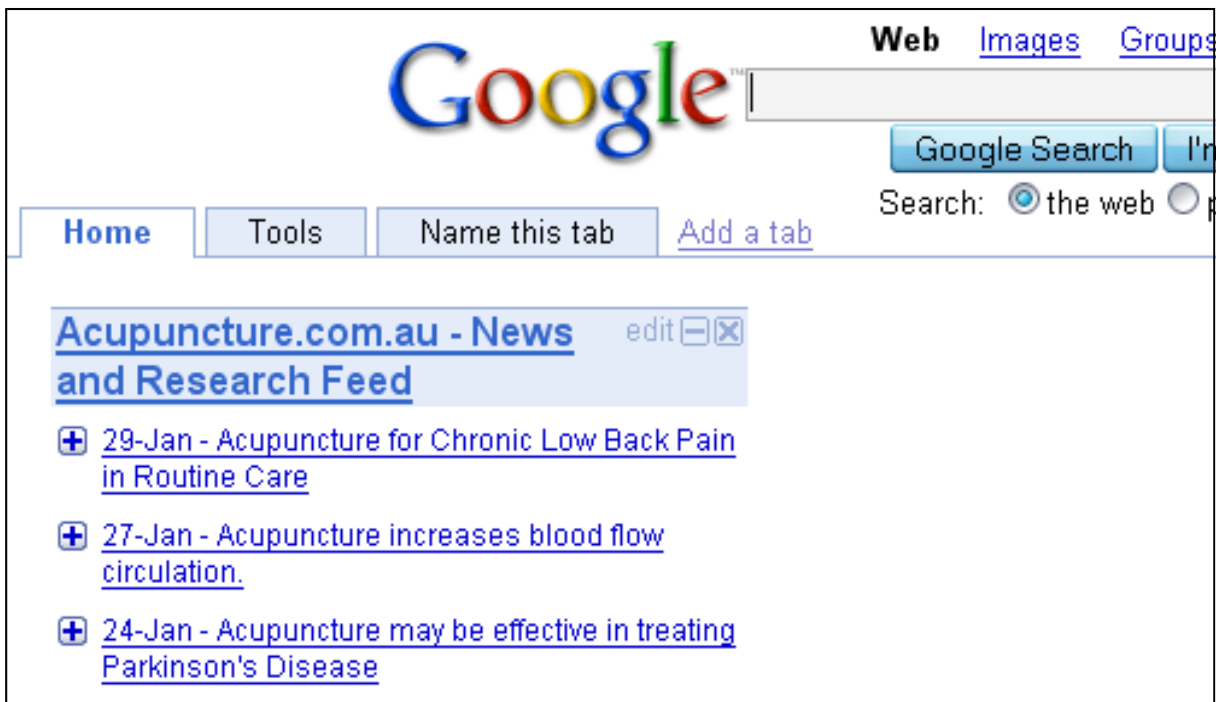
Whats new this month

News, Research and Articles Archive


We have just launched the new look articles archive. All information is now stored into a database which will allow research and news to be retrieved much easier through the use of keyword searches.

Add us to your Google Start Page

You can now have all the latest Acupuncture news and research displayed on your google home/start page as shown below. Login to the website and open the research archive and use the add to google link. 



Send to a friend

You can now send any article in the research/news archive to a friend by clicking on the "Send to a friend" button located at the bottom of each article on the website. 

Events Calendar

The online events calendar has been upgraded to allow every event to have a detailed event information page specific for the event.

Acupuncture Events for February 2007

01

PR China - Study tours in China

When: 08.00am - 05.00pm, Where: Beijing

Contact: Konstantino Dimitropoulos on 0437 887 500 or office@acudo.info

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Brisbane - Enteric System by Daniel Weber

When: 9.45am - 3.30pm, Where: Marriott Hotel, 515 Queen St

Contact: Emily Lewis on 1300 133 807 or emily@chmrd.com

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Sydney - TCM & Infertility by Jane Lyttleton

When: 17-18th, Where: Sydney

Contact: Becks Armstrong on 0416 232 573

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Melbourne - Toyohari Basic Training - Weekend 1

When: All - Day, Where: Melbourne

Contact: Australian Shiatsu College on (03) 9419 5520

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Melbourne - Toyohari Basic Training - Weekend 1

When: All - Day, Where: Melbourne

Contact: Australian Shiatsu College on (03) 9419 5520

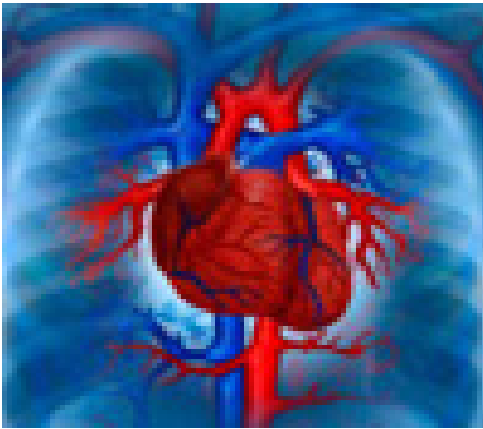
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Melbourne - Toyohari Basic Training - Weekend 1

When: All - Day, Where: Melbourne

Contact: Australian Shiatsu College on (03) 9419 5520

Electro Acupuncture decreases susceptibility to tachycardia.



05/01/2007 - Electro-acupuncture Decreases the Susceptibility to Ventricular Tachycardia in Conscious Rats by Reducing Cardiac Metabolic Demand.

Research authors:

Lujan HL, Kramer VA, Dicarlo SE.

Research abstract:

Physiology, Wayne State University School of Medicine, Detroit, Michigan, United States.

Reperfusion after a brief period of cardiac ischemia can lead to potentially lethal arrhythmias. Clinical observations and experimental work with animals suggest that acupuncture may have therapeutic effects for individuals with coronary heart disease, certain arrhythmias, and myocardial ischemia. Therefore, we tested the hypothesis that electro-acupuncture reduces the susceptibility to ischemia/reperfusion-mediated ventricular tachyarrhythmias. To test this hypothesis, we measured the susceptibility to ventricular tachyarrhythmias produced by three minutes of occlusion and reperfusion of the left main coronary artery in conscious rats under two experimental conditions: 1) control and 2) with electro-acupuncture. Acupuncture was simulated by electrically stimulating the median nerves (corresponding to the Jianshi-Neiguan (P 5-6) acupoints). Results document a significantly lower incidence of ventricular tachyarrhythmias with electro-acupuncture (2 of 8, 25%) relative to control (14 of 14, 100%) rats. The decreased susceptibility to tachyarrhythmias with electro-acupuncture was associated with a reduced cardiac metabolic demand (lower rate-pressure product and ST-segment elevation) during ischemia. Key words: cardiovascular risks, acupuncture, arrhythmia.

Acupuncture treatment for chronic knee pain.

10/01/2007 - Acupuncture treatment for chronic knee pain: a systematic review.

Research authors:

White A, Foster NE, Cummings M, Barlas P.

Research abstract:

Objectives. To evaluate the effects of acupuncture on pain and function in patients with chronic knee pain.



Methods. Systematic review and meta-analysis of randomized controlled trials of adequate acupuncture. Computerized databases and reference lists of articles were searched in June 2006. Studies were selected in which adults with chronic knee pain or osteoarthritis of the knee were randomized to receive either acupuncture treatment or a control consisting of sham (placebo) acupuncture, other sham treatments, no additional intervention (usual care), or an active intervention. The main outcome measures were short-term pain and function, and study validity was assessed using a modification of a previously published instrument.

Results. Thirteen RCTs were included, of which eight used adequate acupuncture and provided WOMAC outcomes, so were combined in meta-analyses. Six of these had validity scores of more than 50%. Combining five studies in 1334 patients, acupuncture was superior to sham acupuncture for both pain (weighted mean difference in WOMAC pain subscale score = 2.0, 95% CI 0.57-3.40) and for WOMAC function subscale (4.32, 0.60-8.05). The differences were still significant at long-term follow-up. Acupuncture was also significantly superior to no additional intervention. There were insufficient studies to compare acupuncture with other sham or active interventions.

Conclusions. Acupuncture that meets criteria for adequate treatment is significantly superior to sham acupuncture and to no additional intervention in improving pain and function in patients with chronic knee pain. Due to the heterogeneity in the results, however, further research is required to confirm these findings and provide more information on long-term effects.

Acupuncture for Neck Disorders.

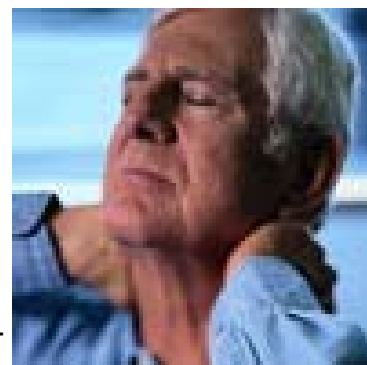
16/01/2007 - Acupuncture for Neck Disorders.

Research authors:

Trinh K, Graham N, Gross A, Goldsmith C, Wang E, Cameron I, Kay T.

Research abstract:

From the *DeGroot School of Medicine, Office of MD Admissions, daggerSchool of Rehabilitation Science, and double daggerCentre for Evaluation of Medicines, McMaster University, Hamilton, Ontario Canada; section signRehabilitation Studies Unit, Faculty of Medicine, University of Sydney, Sydney, NSW Australia; and parallelPhysiotherapy Services, Sunnybrook & Women's College Health Sciences Centre, North York, Ontario, Canada.



STUDY DESIGN.: Systematic review.

OBJECTIVE.: To determine the effects of acupuncture for individuals with neck pain.

SUMMARY OF BACKGROUND DATA.: Neck pain is one of the 3 most frequently reported complaints of the musculoskeletal system. Treatments for neck pain are varied, as are the perceptions of benefits.

METHODS.: We searched CENTRAL (2006, issue 1) and MEDLINE, EMBASE, MANTIS, Cumulative Index to Nursing and Allied Health Literature from their beginning to February 2006. We searched reference lists and the acupuncture database TCMLARS in China. Any published trials using randomized (RCT) or quasi-randomized (quasi-RCT) assignment to the intervention groups, either in full text or abstract form, were included.

RESULTS.: We found 10 trials that examined acupuncture treatments for chronic neck pain. Overall, methodologic quality had a mean of 2.3 of 5 on the Jadad scale. For chronic mechanical neck disorders, there was moderate evidence that acupuncture was more effective for pain relief than some types of sham controls, measured immediately posttreatment. There was moderate evidence that acupuncture was more effective than inactive, sham treatments measured immediately posttreatment, and at short-term follow-up (pooled standardized mean difference, -0.37; 95% confidence interval, -0.61 to -0.12). There was limited evidence that acupuncture was more effective than massage at short-term follow-up. For chronic neck disorders with radicular symptoms, there was moderate evidence that acupuncture was more effective than a wait-list control at short-term follow-up.

CONCLUSIONS.: There is moderate evidence that acupuncture relieves pain better than some sham treatments, measured at the end of the treatment. There is moderate evidence that those who received acupuncture reported less pain at short-term follow-up than those on a waiting list. There is also moderate evidence that acupuncture is more effective than inactive treatments for relieving pain posttreatment, and this is maintained at short-term follow-up.

Pain relief with TENS during the first stage of labor.

18/01/2007 - Pain relief by applying transcutaneous electrical nerve stimulation (TENS) on acupuncture points during the first stage of labor: A randomized double-blind placebo-controlled trial.

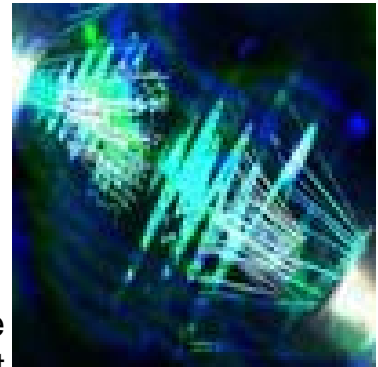
Research abstract:

Pain relief by applying transcutaneous electrical nerve stimulation (TENS) on acupuncture points during the first stage of labor: A randomized double-blind placebo-controlled trial.

* Chao AS, * Chao A, * Wang TH, * Chang YC, * Peng HH, * Chang SD, * Chao A, * Chang CJ, * Lai CH, * Wong AM.

Department of Obstetrics and Gynecology, Chang Gung Memorial Hospital and Chang Gung University College of Medicine, Taoyuan, Taiwan.

Transcutaneous electrical nerve stimulation (TENS) is one of the non-pharmacological means of pain relief for labor and delivery. We aimed to investigate the efficacy and safety of TENS on specific acupuncture points for reducing pain in the first stage of labor. In this double-blind, placebo-controlled trial, we randomly assigned healthy full-term parturients in active phase of first-stage labor to either TENS on four acupuncture points (Hegu [Li 4] and Sanyinjiao [Sp 6]) (n=52) or the TENS placebo (n=53). Visual analogue scale (VAS) was used to assess pain before and 30 and 60min after treatment. The primary outcome was the rate of VAS score decrease 3 in each group. A questionnaire was given at 24h post-partum to evaluate the satisfaction of pain relieving method and the willingness to have the same treatment again. Mode of delivery and neonatal effect were measured as secondary outcome. One hundred women were eligible for analysis. TENS group experienced VAS score reduction 3 significantly more common than the TENS placebo group (31/50 [62%] vs 7/50 [14%], $P<0.001$). Willingness of using the same analgesic method for a future childbirth was also significantly different (TENS: 48/50 [96%] vs TENS placebo: 33/50 [66%], $P<0.001$). Operative delivery was increased in the TENS group (12/50 [24%] vs 4/50 [8%], $P=0.05$), but the neonatal outcomes were not different. The application of TENS on specific acupuncture points could be a non-invasive adjunct for pain relief in the first stage of labor.



Study of fMRI signal change evoked by electroacupuncture stimulation.**21/01/2007 - Test-retest study of fMRI signal change evoked by electroacupuncture stimulation.****Research authors:**

Kong J, Gollub RL, Webb JM, Kong JT, Vangel MG, Kwong K.

Research abstract:

Department of Psychiatry, Massachusetts General Hospital (MGH), MA, USA.



Recent efforts to use fMRI to investigate the effects of acupuncture needle manipulation on the brain have yielded discrepant results.

This study was designed to test the reliability of fMRI signal changes evoked by acupuncture stimulation.

Six subjects participated in six identical scanning sessions consisting of four functional scans, one for each of the four conditions: electroacupuncture stimulation (2 Hz) at GB 37, UB 60, non-acupoint (NP), and a control task of the finger tapping. In the group analysis across all subjects and sessions, both the average ratings on a Subjective Acupuncture Sensation Scale and the average fMRI signal changes (increases and decreases) were similar for GB37, UB 60, and NP. Visual inspection of the activation maps from individual sessions and ICC analysis revealed that fMRI signal changes evoked by electroacupuncture stimulation were significantly more variable than those from the control finger-tapping task.

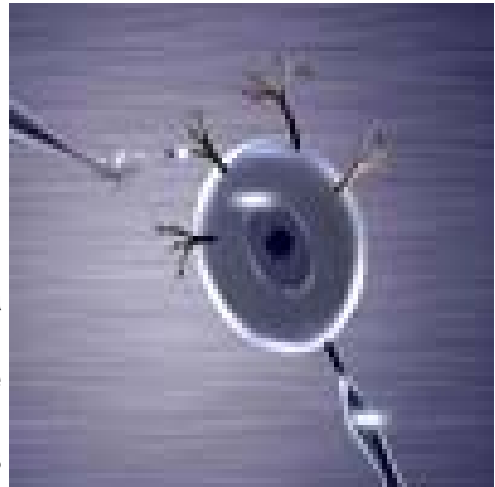
The relatively large variability across different sessions within the same subject suggests multiple sessions should be used to accurately capture the activation patterns evoked by acupuncture stimulation at a particular point for a specific subject.

Acupuncture may be effective in treating Parkinson's Disease

24/01/2007 - Acupuncture could be used as a neuroprotective intervention for the purpose of inhibiting microglial activation and inflammatory events in Parkinson's Disease.

News release:

South Korean researchers say that acupuncture, a traditional Chinese medicine technique of inserting and manipulating needles into various points on the body, may be effective in treating the type of brain inflammation suffered by patients with Parkinson's disease.



Lead researcher Sabina Lim at Kyung Hee University in Seoul and her colleagues used a standard mouse model of Parkinson's disease, in which injections of a chemical known as MPTP kill off brain cells that manufacture dopamine.

Some of the injected mice were then administered acupuncture every two days in two spots, one behind the knee and one on top of the foot, the points which in humans could potentially be seen as targets for treatment of Parkinson's.

Another group of mice received acupuncture in two spots on the hips, not believed to be effective for acupuncture, while a third group had no acupuncture at all.

By the end of seven days, the MPTP injections had decreased dopamine levels both in the mice that not receiving acupuncture, and those who received it to about half the normal amount. But in the acupuncture-treated group, dopamine levels declined much less steeply, and nearly 80 per cent of the dopamine remained.

Lim says that the mechanism behind this effect is still unknown, but she and her team suspect that because inflammation in the brain often accompanies and worsens other symptoms of Parkinson's disease, acupuncture might maintain dopamine levels by preventing inflammation.

They have already performed a clinical trial of acupuncture in humans with Parkinson's disease, but the sample size was not large enough to verify that there was a definite effect.

"The bottom line," Nature magazine quoted Lim as saying, "is that, even though Parkinson's patients are treated with acupuncture therapies in Korea, it is difficult to say that it can 'cure' the disease."

Acupuncture may be effective in treating Parkinson's Disease

Ruth Walker, a movement disorders researcher at the Mount Sinai School of Medicine in New York City, said that using acupuncture to treat Parkinson's would also mean diagnosing the disease early enough.

"Parkinson's doesn't even manifest until you have lost a large proportion of dopamine cells," she said.

The study has been published in *Brain Research*¹. (ANI)

Research authors:

Kang JM, Park HJ, Choi YG, Choe IH, Park JH, Kim YS, Lim S.

Research abstract:

Acupuncture inhibits microglial activation and inflammatory events in the MPTP-induced mouse model.

Department of Meridian and Acupoints, College of Korean Medicine, Kyung Hee University, Seoul, South Korea; WHO Collaborating Centre for Traditional Medicine, East-West Medical Research Institute, Kyung Hee University, Seoul, South Korea.

Using a mouse model of 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP)-induced Parkinson's disease (PD), this study investigated on the neuroprotective effects of acupuncture by examining whether acupuncture contributed to inhibiting microglial activation and inflammatory events.

C57BL/6 mice were treated with MPTP (30 mg/kg, i.p.) for 5 consecutive days. Acupuncture was then applied to acupoints Yanglingquan (GB34) and Taichong (LR3) starting 2 h after the first MPTP administration and then at 48 h intervals until the mice were sacrificed for analyses at 1, 3, and 7 days after the last MPTP injection. These experiments demonstrated that acupuncture inhibited the decreased of the tyrosine hydroxylase (TH) immunoreactivity (IR) and generated a neuroprotective effects in the striatum (ST) and the substantia nigra (SN) on days 1, 3, and 7 post-MPTP injections. Acupuncture attenuated the increase of macrophage antigen complex-1 (MAC-1), a marker of microglial activation, at 1 and 3 days and reduced the increases in cyclooxygenase-2 (COX-2) and inducible nitric oxide synthase (iNOS) expression on days 1, 3, and 7. In MPTP group, striatal dopamine (DA) was measured by 46% at 7 days, whereas DA in the acupuncture group was 78%.

On the basis of these results, we suggest that acupuncture could be used as a neuroprotective intervention for the purpose of inhibiting microglial activation and inflammatory events in PD.

Acupuncture increases blood flow circulation.

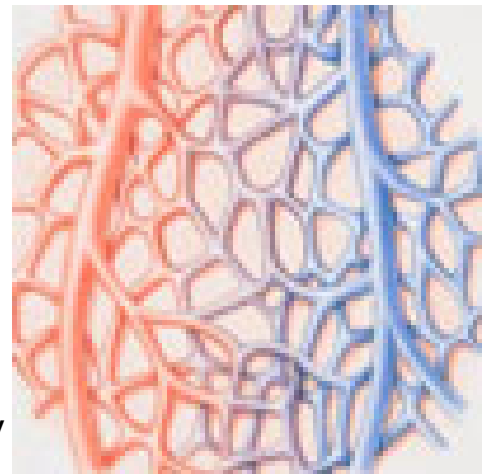
27/01/2007 - Acupuncture enhances generation of nitric oxide and increases local circulation.

Research authors:

Tsuchiya M, Sato EF, Inoue M, Asada A.

Research abstract:

Departments of Biochemistry, Osaka City University Medical School, Abeno-Ku, Japan.



Although it is widely used, the mechanisms and effects of acupuncture on pain are not completely understood. Recently, increased nitric oxide (NO) synthase activity has been found in meridians and acupoints.

Because NO is a key regulator of local circulation, and because change in circulation can affect the development and persistence of pain, we propose that acupuncture might regulate NO levels. We studied the effects of acupuncture on local NO levels and circulation in a randomized, double-blind, crossover study with 20 volunteers, each of whom underwent one session each of real and noninvasive sham acupuncture in a single hand and forearm with a 1-wk interval between treatments. NO concentration in the plasma from the acupunctured arm was significantly increased by 2.8 ± 1.5 micromol/L at 5 min and 2.5 ± 1.4 micromol/L at 60 min after acupuncture. Blood flow in palmar subcutaneous tissue of the acupunctured arm also increased, and this correlated with the NO increase. These changes were not observed in noninvasive sham-acupunctured hands and forearms. In conclusion, acupuncture increases the NO level in treated regions and thereby increases local circulation. These regulatory effects might contribute to pain relief provided by acupuncture.

Acupuncture for Chronic Low Back Pain in Routine Care

29/01/2007 - Acupuncture for Chronic Low Back Pain in Routine Care: A Multicenter Observational Study.

Research authors:

Weidenhammer W, Linde K, Streng A, Hoppe A, Melchart D.

Research abstract:

Department of Internal Medicine II, Center for Complementary Medicine Research, Technische Universität München, Germany daggerDivision of Complementary Medicine, Department of Internal Medicine, University Hospital Zurich, Switzerland.



OBJECTIVE: To investigate patient characteristics and outcomes after undergoing acupuncture treatment for chronic low back pain (cLBP) in Germany and to analyze chronification, pain grading, and depression as predictors for treatment outcomes.

PATIENTS AND METHODS: Patients with cLBP (ICD-10 diagnoses M54.4 or M54.5) who underwent acupuncture therapy (mean number of sessions 8.7+/-2.9) within the framework of a reimbursement and research program sponsored by German statutory sickness funds were included in an observational study. Patients were asked to complete detailed questionnaires that included questions on intensity and frequency of pain and instruments measuring functional ability, depression, and quality of life (SF-36) before and after treatment and 6 months after beginning acupuncture. Participating physicians assessed pain chronification in patients.

RESULTS: A total of 2564 patients (mean age 57.7+/-14.0 y, 78.7% female), who were treated by 1607 physicians, were included in the main analysis. After 6 months (6-mo follow-up), 45.5% of patients demonstrated clinically significant improvements in their functional ability scores. The mean number of days with pain was decreased by half (from 21 to 10 d/mo). Employed patients (employed patient subgroup analysis) reported a 30% decrease from baseline in days of work lost. In all, 8.1% of patients reported adverse events, the majority of which were minor. Subgroup analyses focusing on pain severity, stage of chronification, and depression revealed statistically significant relationships both to baseline measures and to reduction of pain after acupuncture.

CONCLUSIONS: Acupuncture treatment is associated with clinically relevant improvements in patients suffering from cLBP of varying degrees of chronification and/or severity.

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