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### This month in the news..

Welcome to the May Issue of the Acupuncture.com.au monthly newsletter.

If you wish to contribute a story or article about Acupuncture or Traditional Chinese Medicine please contact the Acupuncture.com.au team through the web.

## 28/04/2010 — Traditional Chinese Medicine for treatment of Fibromyalgia: a systematic review of randomized controlled trials

### BACKGROUND:

Traditional Chinese Medicine (TCM) is popular for treatment of fibromyalgia (FM) although there is a lack of comprehensive evaluation of current clinical evidence for TCM's therapeutic effect and safety.



**Objective:** To review systematically the beneficial and harmful effects of TCM therapies for FM.

**METHODS:** We searched six English and Chinese electronic databases for randomized clinical trials (RCTs) on TCM for treatment of FM. Two authors extracted data and assessed the trial quality independently. RevMan 5 software was used for data analyses with an effect estimate presented as mean difference (MD) with a 95% confidence interval (CI).

**RESULTS:** Twenty-five RCTs were identified with 1516 participants for this review. Seven trials (28%) were evaluated as having a low risk of bias and the remaining trials were identified as being as unclear or having a high risk of bias. Overall, ten trials were eligible for the meta-analysis, and data from remaining 15 trials were synthesized qualitatively. Acupuncture reduced the number of tender points (MD, -3.21; 95% CI -4.23 to -2.11;  $p < 0.00001$ ,  $I(2) = 0\%$ ), and pain scores compared with conventional medications (MD, -1.78; 95% CI, -2.24 to -1.32;  $p < 0.00001$ ;  $I(2) = 0\%$ ). Acupuncture showed no significant effect, with a random-effect model, compared with sham acupuncture (MD, -0.55; 95% CI, -1.35-0.24;  $p = 0.17$ ;  $I(2) = 69\%$ ), on pain reduction. A combination of acupuncture and cupping therapy was better than conventional medications for reducing pain (MD, -1.66; 95% CI, -2.14 to -1.19;  $p < 0.00001$ ;  $I(2) = 0\%$ ), and for improving depression scores with related to FM (MD, -4.92; 95% CI, -6.49 to -3.34;  $p < 0.00001$ ;  $I(2) = 32\%$ ). Other individual trials demon-

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strated positive effects of Chinese herbal medicine on pain reduction compared with conventional medications. There were no serious adverse effects reported that were related to TCM therapies in these trials.

**CONCLUSIONS:** TCM therapies appear to be effective for treating FM. However, further large, rigorously designed trials are warranted because of insufficient methodological rigor in the included trials.

**Pubmed ID:** 20423209 **Country:** China **Institute:** Centre for Evidence-Based Chinese Medicine, Beijing University of Chinese Medicine, Beijing, China. **Author(s):** Cao H, Liu J, Lewith GT. **Journal:** J Altern Complement Med. 2010 Apr;16(4):397-409.

## Events Calendar for May 2010

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### **Adelaide—Australian Acupuncture and Chinese Medicine Association Conference (AACMAC)**

When: 21st to 23rd May. Where: National Wine Centre of Australia

Contact: AACMA Ph: +61 7 3324 2599 ext 16

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### **Southport, Gold Coast - Shonishin: Jap Paediatric Acupuncture**

When: 9.00am - 5.00pm, Where: Endeavor College of Natural Health 105 Scarborough Street Contact: Helio Supply Company on (02) 9698 5555 or [tchianese@heliosupply.com.au](mailto:tchianese@heliosupply.com.au) This is a multi-day event ending on the 30/05

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### **Camperdown. Sydney - Unknotting Difficult Cases.**

When: 9.30 am - 5.30 pm, Where: St Johns College. Missenden Rd

Contact: Helio Supply Co on 1800 026 161 or [TCM@heliosupply.com.au](mailto:TCM@heliosupply.com.au)

This is a multi-day event ending on the 30/05

25/04/2010 —fMRI study on effect on brain activity according to stimulation method at LI11, ST36: painful pressure and acupuncture stimulation of same acupoints.



**OBJECTIVES:** The objective of this study was to assess differences in brain responses between pressure and acupuncture stimulation at the same acupoint using functional magnetic resonance imaging (fMRI).

**SUBJECTS:** A total of 10 healthy right-handed volunteers were studied. **DESIGN:** fMRI was performed with two different paradigms; namely, pressure and acupuncture stimulation at acupuncture points LI11 and ST36 on the left. fMRI data were analyzed using SPM2.

**RESULTS:** In comparison with the left LI11 pressure stimulation, both sides of the parahippocampal gyrus, cerebellum, left side of thalamus, and right side of posterior cingulate regions were more activated by the left LI11 acupuncture stimulation. In comparison with the left ST36 pressure stimulation, the secondary motor cortex, limbic system (cingulate gyrus, posterior cingulate), primary visual cortex, pons, and medulla regions were more activated by left ST36 acupuncture stimulation. In comparison with the left ST36 pressure stimulation, both side of BA 4 and BA 6 were more activated by the LI11 pressure stimulation. In comparison with the left LI11 acupuncture stimulation, left BA 6, BA 8, and anterior cingulate cortex (ACC) were more activated by the left ST36 acupuncture stimulation.

**CONCLUSIONS:** In conclusion, brain signal activation patterns according to the stimulation methods and acupoints were observed to differ. Acupuncture stimulation activated more regions than pressure at the same acupoint. In particular, acupuncture stimulation activated the limbic system, such as the parahippocampal gyrus and ACC.

**Pubmed ID:** 20423217 **Country:** Korea **Institute:** Department of Cardiovascular & Neurologic Disease (Stroke Center), East-West Neo Medical Center, College of Korean Medicine, Kyung Hee University, Seoul, Korea. **Author(s):** Cho SY, Jahng GH, Park SU, Jung WS, Moon SK, Park JM. **Journal:** J Altern Complement Med. 2010 Apr;16(4):489-95.