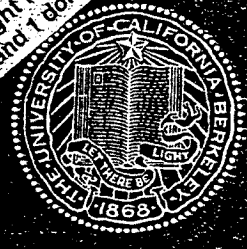


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The fine points of acupuncture

It may be trendy these days, but acupuncture can hardly be called a fad. It was mentioned more than 2,000 years ago in a Chinese text known as the *Yellow Emperor's Classic of Medicine* and has been a mainstay of traditional Chinese medicine ever since. It began its climb to popularity in the U.S. after President Nixon's visit to China and is now a major player in the alternative medicine movement. Millions of Americans have tried it.

Acupuncture aims to relieve pain as well as cure disease. A trained practitioner inserts thin needles into the skin of the patient at defined points, of which about 2,000 have been described. The theory is that these points are located along meridians, or channels, that carry a form of energy or vital force called Qi (pronounced "chi") throughout the body. What causes disease or pain is believed to be a disruption in Qi. Acupuncture re-establishes orderly energy flow and thus health, according to the theory. (Western scientists have never identified any such thing as Qi.) Modern acupuncture has moved beyond only placing needles in the body. The practitioner may also twist the needles or apply heat or small electrical currents. Acupuncture points can be stimulated with a laser or electricity, sometimes without needles. Acupressure—pressing acupuncture points with the fingers—may also come into play.

Scientifically studying acupuncture is no easy task. The best kind of study is a double-blind clinical trial, meaning that the treatment is compared to another treatment (often a placebo), and neither the patients nor the researchers know which treatment is being delivered. Otherwise, results may be biased. But how does one "fool" patients into thinking that the researchers are using needles if there are none? Even if the patients can be fooled, how does one fool the researchers, so that they don't influence the results? Also, there are many different kinds of acupuncture. In addition to all these complications, most acupuncture studies so far have been small and inconclusive.

Still, there has been some worthwhile research on acupuncture, especially concerning chronic pain. Recent studies have compared real and "sham" acupuncture (in the latter, needles are placed in locations other than true acupuncture points). The results seem to indicate that there is a larger biochemical effect in people when the needles are placed in the true points. But clearly, acupuncture has a strong placebo effect—meaning that people feel better afterward, in part, because of their positive expectations.

What it may be good for

Here are the results, some of them encouraging, of recent investigations:

■ **Nausea and vomiting following surgery (usually brought on by anesthesia) or chemotherapy; morning sickness in pregnancy; dental pain:** In 1997 the National Institutes of Health released a statement extolling the benefits of acupuncture in treating such problems. Since then, these recommendations have been strengthened by the results of more studies. Interest-

ingly, most of the research on nausea and vomiting centers around a single acupuncture point known as P6. This point is located on the inside of the forearm just above the wrist. Many studies have shown benefits of acupressure on location P6 as well.

■ **Headache, back and neck pain, asthma, premenstrual syndrome, and arthritis:** The jury is still out. The evidence so far is contradictory and/or inconclusive. Two recent studies did find that acupuncture can help alleviate arthritis pain in knees, and two other studies found benefits for chronic neck pain.

■ **Tennis elbow and other tendinitis:** Some studies have shown short-term benefit; others have found no benefit. Here, too, the jury is still out.

■ **Tinnitus (persistent noise and ringing in ears):** This does not respond to acupuncture, according to the studies.

■ **Weight loss, seizures, psoriasis, irritable bowel syndrome:** No benefit has been demonstrated.

■ **Smoking cessation:** For years acupuncture seemed promising as a tool to help smokers quit, and perhaps as a treatment for other addictions, but it has not panned out.

■ **Hot flashes:** No evidence of benefit; studies so far have been small and poorly designed.

■ **Infertility:** No proof yet that it helps promote conception in women undergoing fertility treatment. A recent study pointed to encouraging preliminary evidence and called for clinical trials.

Getting to the point

Acupuncture is probably quite safe, so long as the practitioner uses disposable needles (as the FDA requires). Rare side effects include bleeding, bruising, local skin irritation, and possibly nerve damage. The greatest danger is that acupuncture may be used instead of proven medical treatments. But acupuncture could be part of a comprehensive program for pain relief, for example. You should discuss it beforehand with your physician. Be sure you know what your diagnosis is.

Forty-one states now license acupuncturists, usually requiring at least three years of training and a national board-certification exam administered by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM). Also, many states allow licensed physicians to do acupuncture as an adjunct to their regular practice if they get extra training. The degree of O.M.D. (Oriental Medical Doctor), while recognized in some states, is not awarded by any accredited program in the U.S. If you live in a state that does not license acupuncturists (Kansas, Michigan, Alabama, Delaware, Kentucky, Mississippi, North Dakota, South Dakota, and Wyoming), ask to see evidence that the acupuncturist has completed at least three years of training at an accredited institution. Check with your state medical board for the exact licensure title and requirements in your state. For a list of licensed acupuncturists in your area, call the National Acupuncture and Oriental Medicine Alliance at 253-851-6896, visit its website at www.acupuncturealliance.org.