



COMPLEMENTARY THERAPIES (BMHP5001)

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SUPPORTING PAPER ON ACUPUNCTURE/ REWORK

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Introduction

This supporting essay will showcase and explore findings on the subject of Acupuncture, discussing and evaluating its efficacy and uses as a complementary therapy instead of traditional medical methods.

Acupuncture is a western medical therapeutic modality involving the insertion of very fine needles (White, 2021).

Traditional medicine can be defined as the entirety of various cultures' knowledge, skill, and practices used in the treatment and prevention of illnesses and diagnosis and the maintenance of health (World Health Organization: WHO, 2019).

This essay will focus on the analgesic properties of Acupuncture and its use in the palliative care of cancer patients and the research and analysis of various literature sources and scientific research papers.

Overview

Acupuncture is a millenary practice that originated in China and used for thousands of years as part of the Chinese medicine repertoire. It continues to be practised to this day and age globally (Arango- Vélez and Montoya- Vélez, 2015).

According to He et al. (2017), this practice entails the insertion of very fine sterile needles onto various anatomical points of the body that belong to energetical meridians. More than 300 known Acupuncture points are found on the body surface; most of these points are located between muscles, close to nerve endings and vascular regions.

According to oriental thought, life is made from primordial energy called Qi, which condenses and disperses uninterruptedly in a rhythmic and cyclical movement. This life-enhancing energy operates in two opposite and, at the same time, complementary energetic forces, the Yin and Yang polarities. These two forces govern the structure and functionality of all human body organs and systems, controlling and coordinating, including mental and emotional processes. Conceptually, in the Eastern view, disease occurs when something disturbs the circulation of Yin or Yang energy in the energy channels, to the point of causing a void, stasis or an excess of energy in these channels.

This practice has been widely used in treating pain, and the interest in this therapeutic modality has grown significantly in the last 20 years, with therapeutic application in different specialities,

neurology, orthopaedics, and ophthalmology, gynaecology, urology, and cardiology. However, research points to the effectiveness of this technique in symptoms such as nausea and vomiting, oedema, lack of appetite and anaemia resulting from chemotherapy in breast cancer, and its side effects as conventional treatment in various carcinomas (Xia et al.,2013).

History And Uses

Acupuncture needles were primarily made of bone, stone and metal, such as gold and silver (Garrido, 2019).

The U.S. Food and Drug Administration (FDA) approved using sterile needles, which must be of single-use to prevent infections and the transmission of illnesses (U.S. Food And Drug Administration, 2020).

Lefevre (2015) reports in his thesis that the traditional Chinese Acupuncture is based on the principles of Taoism, and the teachings of Confucius and the Ying and Yang are understood to be opposite forces. The theory of the five movements classifies Nature and its phenomena as belonging to water, wood, fire, earth and metal. Under these principles, man is an entity between Heaven and Earth, and its health a reflection of the harmony resultant of its environment and its inner world. In Acupuncture, this cosmovision determines the categorisation and systematisation on the acupunctural points, the vital energy or "Qi" and the meridians where it flows, the cause of illness, the role of internal organs and the diagnosis process.

The acupuncture technique contemplates several modalities of stimulation of the inserted needles, which can be manipulated manually (manual Acupuncture), electrical stimuli (electroacupuncture), heat (moxibustion), pressure (acupressure) or laser energy in order to "realign the energies of the body or the Qi". Atrial therapy is also included, which is stimulation by means of pressure or puncture of specific points in the auricle.

There is a growing demand for Acupuncture in hospitals and community clinics to recognise the experience transmitted from the East and scientific reports from the West. The application of Acupuncture contemplates a wide range of disorders whose most relevant manifestation is rebellious, chronic and recurrent pain (Garrido, 2019).

What is practised today in medical Acupuncture is a Neuromodulation technique, an adaptation of the ancient traditional Chinese Acupuncture, but on the updated knowledge of anatomy, physiology and pathology focused on the principles of evidence-based medicine. It is never an alternative to the conventional medical system but is considered a complementary treatment to improve patients' quality of life (Amezaga Urruela and Suarez-Almazor, 2012).

Efficacy

According to Xia et al. (2017), oncology has begun to implement integrative medicine with Acupuncture treatment to manage cancer patient symptomatology in the last twelve years, a therapy that has proved safe and effective. The National Comprehensive Cancer Network (NCCN) guidelines recommend using Acupuncture as an integrative treatment in conjunction with the pharmacology needed to manage the patient's disease (He et al., 2017). There is an increase in advances in cancer treatment and Acupuncture since integrative medicine has been gaining popularity in this area of medicine, focusing more on symptomatology than on the cure of the disease.

In the treatment of cancer, it also serves for fatigue, weight loss, anxiety, depression, insomnia, low appetite, dry mouth, heatwaves, neuropathies, constipation, diarrhoea and for pain management; many cancer patients are also using it for the treatment of psychological symptomatology such as depression, anxiety and insomnia that alters their quality of life.

In 2010, an article was published studying the use of Acupuncture in women diagnosed with breast cancer who were treated with aromatase inhibitors and who had arthralgia. After six weeks of acupuncture treatment, the pain severity scale decreased significantly (Arango-Vélez and Montoya-Vélez, 2015).

One-third of cancer patients go to integrative medicine for additional treatment for the management of adverse effects, in addition to the symptomatology affecting the individual caused by cancer treatment such as nausea and vomiting, which should be treated as they can lead to weakness, emotional disturbances and worsen the patient's quality of life (Arango-Vélez and Montoya-Vélez, 2015).

Depending on the intensity of the patient's pain, Acupuncture may be used: if the pain is mild (pain scale 0-3/10), only Acupuncture can be provided satisfactory giving results; if the pain is moderate (pain scale 4-6/10), Acupuncture plus pharmacological treatment may begin to be considered; if the pain is high (pain scale >7/10) the combination of Acupuncture with opioids is the indicated treatment. Although the evidence is still insufficient because of small samples and limitations in the methodology of the studies, the World Health Organisation recommends the use of opioids and therapies such as Acupuncture for pain management in cancer patients.

The National Institute of Health in the United States have conducted meta-analyses of various studies on the validity of Acupuncture as a medical technique. [Meta-analysis is a statistical analysis that integrates the results of a number of independent studies.] The meta-analysis compiled data from 18,000 patients. The conclusions of this meta-analysis have shown (according to the rigorous validation criteria of scientific praxis), that Acupuncture provides better results in the relief of pain perception than the usual pharmacological treatments. The highly summarised conclusions show that nearly half of those treated with Acupuncture

improved on their chronic pain rating scales. A similar degree of improvement was only achieved in 30% of patients treated with analgesics.

The results obtained with Acupuncture in the treatment of chronic pain exceeded what might be expected from a strict placebo effect, including the 'psychosocial curative effect' (not evaluated) surrounding the ritual accompanying acupuncture treatment. Also, we must consider that Acupuncture, unlike pain relievers, has no adverse effects.

When we confront the concepts of "conventional medicine" and "alternative medicine", we are consolidating a prejudice that considers both practices as exclusive (NCCIH, 2016).

Contraindications

Side effects have been extensively studied; for example, a systematic review from the Cochrane Institute that included 26 studies with more than 3,000 patients demonstrated the superiority of acupuncture point stimulation for decreased nausea and vomiting, with a better outcome than treatment with antiemetic medications for nausea management and equivalent for vomiting management (Cochrane Institute, 2014).

In a systematic review that included 41 randomised controlled trials, significant evidence was found on the use of Acupuncture in the control of nausea and vomiting in cancer patients. This review sought to assess the effect of Acupuncture on other symptoms but concludes that more studies are needed to control biases to reach more accurate conclusions (Xia et al., 2017).

Acupuncture is effective in controlling pain, local swelling in the postoperative period, shortening the resolution of the hematoma and swelling of the tissues, and minimising the use of medications and their inherent side effects. It is also essential in treating nausea and vomiting, ubiquitous in patients undergoing chemotherapy treatment. These symptoms, which commonly occur in these patients undergoing chemotherapy, and inevitably, with the use of certain classes of pharmacological agents, can often be worse than the disease itself. A double-blind, randomised study conducted by the University of Los Angeles (UCLA) found a significant reduction in malaise, nausea and vomiting in patients pre-treated with Acupuncture before undergoing chemotherapy (UCLA Health, 2021).

Today, Acupuncture is routinely administered before, after, and between chemotherapy treatment sessions at this service to control nausea or vomiting.

A randomised controlled study further confirmed the antiemetic (anti-vomiting) effect of Acupuncture in patients undergoing chemotherapy, with a significant reduction in episodes of medium vomiting compared to the use of medications only.

Furthermore, a systematic review by the Cochrane Institute stated that "data on postoperative nausea and vomiting suggest a biological effect of Acupuncture at the point of stimulation" electroacupuncture has shown benefits in acute vomiting induced by chemotherapy, and

postoperative nausea and vomiting data suggest a biological effect of Acupuncture at the point of stimulation. Also, electroacupuncture has shown benefits in acute vomiting induced by chemotherapy (Cochrane Institute, 2014).

Conclusions

At one point, the experts agree: without scientific certainty about the validity of the curative capabilities of alternative therapies in the treatment of cancer; some may work in complementarity with conventional cancer treatments, never as an alternative. Pain is always a subjective experience, which raises problems in using appropriate theoretical models and measuring instruments; it is complicated to assess all the aspects that become part of it. The independent evaluation avoids the influence on the results of the favourable evaluations of grateful patients.

Moreover, there is a growing problem with publication bias, especially outside the U.S., which translates as studies being published only when they yield positive effects.

While it must be considered that Acupuncture is unable to treat cancer as such, it can be very beneficial as a therapy to help patients with adverse effects like fatigue and pain of conventional treatments like chemotherapy.

A study of 47 patients conducted in 2007 yielded positive results in treating fatigue after chemotherapy treatments. Patients reported notable improvement of symptoms of fatigue and a motivational boost after undergoing six 20-minute acupuncture sessions over two weeks (Carlos Lopes-Júnior et al., 2016).

The use of Acupuncture as an auxiliary therapy for the management of chronic pain requires some necessary conditions, as premises of rigour and protocol: There must be a primary diagnosis before the start of therapy. Thus, the patient will benefit from effective Western treatments, and, above all, it will be avoided to delay the diagnosis of a potentially serious condition, such as vertebral metastasis in the lumbar spine or pain of coronary origin.

If symptoms or warning signs appear during the sessions, such as persistent pain, nocturnal pain, the doctor who referred the patient must be called to request support from the corresponding specialist, as it could be a complication.

Recommendations

The patient must continue with the pharmacological treatment indicated by his treating physician. It often consists of medications, physical therapy, psychological and psychiatric support.

All these therapeutic modalities should be understood as adjuvants in the healing process. In addition, in case of use in conjunction with other complementary therapies and under the principle of "primum non nocere" (the first thing is not to harm).

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