LETTERS

A questionnaire survey to determine patient’s knowledge, opinions and experience of acupuncture in an NHS GP practice

INTRODUCTION

Recent guidelines from NICE are encouraging the incorporation of acupuncture into pain management strategies within the NHS.¹ NHS information on acupuncture suggests it has many benefits² and increasingly GP practices are offering acupuncture within their practice or referring patients for acupuncture.³ However, there is little research into patient’s knowledge, opinions and experience of acupuncture. This questionnaire survey was directed at patients who were attending their GP practice in West London, which also offers acupuncture.

METHODS

Ethical review by academic staff generated the opinions that the study raised no major ethical issues and that formal ethical approval was not needed. Ethical approval was, however, gained from the chairman of the Kensington and Chelsea Primary Care Trust and the doctors at the practice. I distributed the questionnaires to all patients attending the practice over five consecutive days. I expressed confidentiality verbally to each patient when distributing the questionnaire and their completion and return of them was considered to provide informed participant consent.

I asked a total of 162 patients to fill out the questionnaire out of which 134 (83%) agreed to and returned it. The questionnaire consisted of three questions on demographics; four ‘yes’ or ‘no’ tick box questions that assessed their basic knowledge and experience of acupuncture and one question that assessed opinions on the use of acupuncture on the NHS by use of a Likert scale. In addition, I asked patients to tick from a list the conditions that they felt acupuncture may be effective for. The list of 14 conditions was selected from an NHS patient information leaflet available online² (reordered alphabetically to reduce bias): Asthma, Anxiety, Chronic back pain, Dental pain, Depression, Digestive disorders, Fatigue, Hayfever, Headache, Insomnia, Migraine, Nausea, Neck pain, and Postoperative pain. There was also a comments box.

RESULTS

Table 1 gives the demographics of the patients who returned the questionnaire.

The main findings were as follows: 94% of patients had heard of acupuncture; 74% knew what acupuncture treatments involved and 41% had tried acupuncture out of which 60% felt it to be effective. Fifty-nine per cent had not tried acupuncture; 71% of these said they would try it if recommended by their GP. Patients’ usage of acupuncture increased proportionally with their increasing age, up to the age of 65 where it is seen to decrease. The conditions that the patients felt acupuncture would be effective for were largely reflective of those denoted in an NHS patient information leaflet (figure 1). In addition to this, the comments box identified other conditions that the patients felt acupuncture could be effective for: knee pain (five respondents), addiction (four), post chemo (two) and infertility (one). Finally, the Likert scale, used to assess patient’s opinions of whether acupuncture should be offered on the NHS, revealed that 41% strongly agreed, 34% agreed, 19% were uncertain, 5% disagreed and 1% of patients strongly disagreed.

DISCUSSION

Patients’ opinions on acupuncture being offered on the NHS are in line with those put forward by GPs in a 2007 survey (79% of GPs felt acupuncture should be offered on NHS, 75% of patients from this study group felt it should be offered).³ This positive attitude towards acupuncture may reflect increased knowledge and use of acupuncture as well as a better evidence base with the development of more sensitive techniques and better research strategy guidelines (STRICTA).⁴ As there is so little research into patient’s knowledge, opinions and experience of acupuncture, it is hard to contrast this study to others. However, in a more general review of the use of alternative therapies in the USA, Gordon et al⁵ found

![Figure 1](https://example.com/figure1.png)

**Figure 1** Percentage of respondents who felt acupuncture may be effective for a selection of conditions. Ch, chronic; Postop, postoperative.

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### Table 1

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>40</td>
<td>18–25</td>
</tr>
<tr>
<td>Female</td>
<td>60</td>
<td>26–35</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
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</tr>
<tr>
<td>White</td>
<td>69</td>
<td>46–55</td>
</tr>
<tr>
<td>Mixed</td>
<td>3</td>
<td>56–65</td>
</tr>
<tr>
<td>Asian or Asian British</td>
<td>10</td>
<td>66–75</td>
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<tr>
<td>Chinese</td>
<td>1</td>
<td>86–95</td>
</tr>
<tr>
<td>Other</td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

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that in 1998 only 6.9% of adult members (>20 years old) attending a large health maintenance organisation had ever tried acupuncture. This is significantly lower than the results found in this study (41% of patients had tried acupuncture). This could be explained by time factors; Gordon et al conducted the study 13 years ago, though this is unlikely to account for such a dramatic increase. The high rate found in my study could also be due to selection bias; patients who have had experience of acupuncture may have been more likely to fill out the questionnaire and all the people asked to fill out the questionnaire were seeking medical attention at the time. It should also be noted that my study was a relatively small sample with a limited demographic (West London), therefore it may not reflect the wider population, and that the practice has one GP offering acupuncture so patients may have been more knowledgeable.

**CONCLUSION**

Patients attending this practice were very knowledgeable about acupuncture and their experiences were largely positive. The study shows patients’ desire for GPs to recommend acupuncture, if appropriate, and for acupuncture to be offered on the NHS.

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