guidelines based on a review of the literature. We excluded reviews where the primary topic was acupuncture. The abstracts of the 62 potentially eligible citations were downloaded for further scrutiny. Seventeen were excluded at that stage: 5 with no abstract; 9 not literature-based guideline; 2 focusing on a particular therapy; and 1 which only included the previous year’s literature.

Of the remaining 45 abstracts, 11 did not mention acupuncture and 18 mentioned acupuncture in a neutral way (such as ‘acupuncture needs to be evaluated’). Two made negative recommendations: a 2004 report into treatment of menopause-related vasomotor symptoms reported ‘single clinical trials have found no benefit for acupuncture’; and a 2005 report on complex regional pain syndrome listed acupuncture with other ‘therapies to avoid due to lack of efficacy’. The remaining 14 studies mentioned acupuncture in a positive light for 10 clinical conditions, as shown in table 1, and all but two of these included a positive recommendation for treatment with acupuncture. The two not actually recommending acupuncture were for tendinopathy, reported as ‘limited evidence exists to support the use of…’, and for myofascial trigger points, reported as ‘evidence supports …’.

In interpreting these results we acknowledge that information could be limited by the abstracting process: guidelines might omit acupuncture from the abstract, whether negative or positive evidence. We did not have the resources to search the full papers, although this would be an interesting project.

Clinical guidelines summarise the current evidence on treatments for particular conditions, sometimes with the addition of clinical expertise. Ideally, these guidelines are updated regularly. Their abstracts are readily accessible via databases such as PubMed. We wondered how many guidelines include and recommend acupuncture, and thought your readers would be interested to see these results.

We conducted a PubMed search on 10 March 2012 using search terms acupuncture AND (guideline OR guidelines), and scanned the titles of the 256 hits for articles describing treatment guidelines. We wondered how many guidelines might omit acupuncture from the abstract, whether negative or positive evidence. We did not have the resources to search the full papers, although this would be an interesting project.

Table 1 Clinical guidelines recommending acupuncture

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carpal tunnel syndrome (laser acupuncture)</td>
<td>1</td>
<td>Goodyear-Smith F, et al²</td>
</tr>
<tr>
<td>Chronic non-malignant pain</td>
<td>1</td>
<td>Sanders SH, et al⁴</td>
</tr>
<tr>
<td>Fibromyalgia</td>
<td>1</td>
<td>Schneider M, et al⁴</td>
</tr>
<tr>
<td>Low back pain</td>
<td>3</td>
<td>Mayer JM, et al⁶; Lin CW, et al²</td>
</tr>
<tr>
<td>Myofascial trigger points*</td>
<td>1</td>
<td>Vernon H, et al⁸</td>
</tr>
<tr>
<td>Osteoarthritis</td>
<td>2</td>
<td>Zhang W, et al¹⁰</td>
</tr>
<tr>
<td>Postoperative nausea and vomiting</td>
<td>2</td>
<td>Fujii Y, et al¹⁰; Skledar, SJ, et al¹¹</td>
</tr>
<tr>
<td>Post-stroke rehabilitation</td>
<td>1</td>
<td>Khadilkar A, et al¹³</td>
</tr>
<tr>
<td>Rheumatoid arthritis</td>
<td>1</td>
<td>Hammond A, et al¹⁴</td>
</tr>
<tr>
<td>Tendinopathy*</td>
<td>1</td>
<td>Pfeifer MT, et al¹⁵</td>
</tr>
<tr>
<td>Total</td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

*Two guidelines found supporting evidence but did not actually recommend acupuncture.

Positive recommendations for acupuncture in abstracts of clinical guidelines

In summary, we were surprised to find so many positive recommendations for acupuncture in diverse clinical conditions, and regard this as an indication that acupuncture is increasingly being considered within mainstream medicine.

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REFERENCES


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