Just to be sure

I read with interest the recently published online article by Hasegawa et al. It was the title which first triggered my interest, including the phrase ‘double blind’. Wow, a double blinded study on acupuncture! This is of course the ‘highest’ level of research one can achieve in randomised controlled trials, and consequently highly appreciated among acupuncture researchers. However, it has been impossible to blind practitioners in acupuncture studies, as it is for other complex interventions (eg, psychotherapy and manual therapies). While reading the article it soon becomes evident that it is the assessors who are blinded in this randomised controlled trial. Is it then legitimate to call the study double blind? Some of my concerns are:

- Double blinding is a methodological issue which has strong implications in terms of blinding of the participants and those giving the therapeutic treatment in question—and not the assessors. Using the term as presented in Hasegawa et al’s title might mislead readers into thinking that the biases that double binding is normally controlling for are avoided. However, as the readers will find out, this is not the case—the therapists are not blinded, which leaves the study open to important biases.

- Minor concerns relating to terminology for searching databases. For example, ‘double blind studies on acupuncture’ currently identifies very few studies, and I think it should continue to be the case.

- Although the Jadad scale is outdated, if it were to be used it would unfairly favour studies like the one in question, since one of the criteria is ‘described as double blind’.

There have been concerns regarding acupuncture terminology. This has resulted in agreement on the nomenclature of meridian and point names. Furthermore, a discussion paper in 2011 tried to summarise the issues relating to the use of the terminology of acupuncture itself and also to put forward a consistent use of sham needling versus use of placebo needling. To my knowledge, the discussion around using the term double blind in acupuncture studies when it is only the assessor that is blinded has not been raised in relevant papers. I feel maybe it is timely to raise this issue.

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