Acupuncture Linked With Obstructive Pulmonary Disease Improvements

According to a small clinical trial reported by investigators from Japan, acupuncture appears to be associated with improvement of dyspnea (labored breathing) on exertion, in patients with chronic obstructive pulmonary disease (COPD), according to a study published online by *Archives of Internal Medicine*, a JAMA Network publication. The management of dyspnea is an important target in the treatment of COPD, a common respiratory disease characterized by irreversible airflow limitation. COPD is predicted to be the third leading cause of death worldwide by 2020, according to the study background.

Masao Suzuki, L.Ac., Ph.D., of Kyoto University and Meiji University of Integrative Medicine, Kyoto, Japan, and colleagues conducted a randomized controlled trial from July 2006 through March 2009. A total of 68 patients diagnosed with COPD participated, and 34 were assigned to a real acupuncture group for 12 weeks, plus daily medication. The other 34 were assigned to a placebo acupuncture group in which the needles were blunt (and appeared to, but did not enter the skin). The primary measure was the evaluation of a six-minute walk test on a Borg scale where 0 meant "breathing very well, barely breathless" and 10 signified "severely breathless."

"We demonstrated clinically relevant improvements in DOE [dyspnea on exertion] (Borg scale), nutrition status (including BMI), airflow obstruction, exercise capacity and health-related quality of life after three months of acupuncture treatment," the authors note. After 12 weeks of treatment, the Borg scale score after the six-minute walk test improved from 5.5 to 1.9 in the real acupuncture group. No improvement was seen in the Borg scale score in the placebo acupuncture group before and after treatment (4.2 and 4.6, respectively), according to the study results.

"Randomized trials with larger sample sizes and longer-term interventions with follow-up evaluations are necessary to confirm the usefulness of acupuncture in COPD treatment," the authors conclude. The trial was funded by the Grants-in-Aid for scientific research from the Japan Society of Acupuncture and Moxibustion.

In an invited commentary, George T. Lewith, M.A., M.D., F.R.C.P., M.R.C.G.P, and Mike Thomas, Ph.D., F.R.C.P., of the University of Southampton, Hampshire, England, write: "Where does this study lead us? The authors note that acupuncture must be used in addition to conventional care, and although this is undoubtedly correct, it may have significant economic implications." They continue: "Evaluating traditional interventions, such as acupuncture, that are widely available has many implications, including the fact that best practice and dose response have rarely been evaluated scientifically, as would be the case for a new pharmaceutical agent.

"This study points to an important potential role for acupuncture in COPD management. These findings demand larger but equally methodologically rigorous confirmatory studies if we are to consider integrating this approach into our management strategy," they conclude.

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