

Acupuncture for Migraine and Recurrent Headaches

Study Finds "Promising Results" but Calls for More Research

By Editorial Staff

Acupuncture is widely used in the management of headaches. It can be applied as a single form of care, or as part of a comprehensive treatment program. Despite its popularity, however, there are still debates as to what role acupuncture plays in reducing or eliminating pain associated with recurrent headaches.

In the November 1999 issue of *Cephalalgia*, scientists from the Research Center for Complementary Medicine at Technische Universitat in Munich evaluated the effectiveness of acupuncture in combating headaches by systematically reviewing 22 randomized controlled trials. Included in the review were studies comparing acupuncture with any type of control intervention for the treatment of migraine or recurrent headaches.

Specifically, the authors sought to discover whether acupuncture is I) more effective than no treatment at all; II) more effective than "sham" acupuncture; or III) as effective as other headache interventions.

Of the 22 studies, 15 examined patients with migraine headaches; six involved patients with tension headaches; and one trial studied patients with various headaches. One of the migraine trials was conducted on children.

Fourteen of the trials compared true acupuncture versus sham procedures. Five trials compared acupuncture to various drug treatments. Two studies compared acupuncture to physiotherapy, and one three-pronged study compared acupuncture with a behavioral program and a no-treatment group.

A total of 1,042 patients were examined. The average treatment period lasted nine weeks and included eight treatment sessions.

Acupuncture fared most favorably when compared to sham treatments. Nine of the 14 trials comparing true and sham acupuncture in migraine and tension-type headache patients either "showed trends in favor of acupuncture" or had patients who "did significantly better than those in the sham acupuncture group."

Table I: Response rates in 10 sham-controlled trials of acupuncture for migraine and tension-type headaches.		
Definition of "response"	# of patients receiving true acupuncture	# of patients receiving sham acupuncture
Migraine Headaches		
>50% index reduction	27/38 (71%)	19/36 (53%)
>50% symptom reduction	16/20 (80%)	3/20 (15%)
>33% frequency reduction	18/40 (45%)	19/38 (50%)
Overall patient assessment	11/20 (55%)	3/10 (30%)
Single case time series	13/20 (65%)	8/20 (40%)
Analysis (ARIMA)	15/20 (75%)	8/21 (38%)
All migraine trials	100/158 (63%)	60/145 (41%)
Tension-type Headaches		
>33% index reduction	17/24 (71%)	11/24 (46%)
All tension-type trials	17/24 (71%)	11/24 (46%)
All Trials	117/182 (64%)	71/169 (42%)

Trials comparing acupuncture to other forms of headache intervention, however, displayed contradictory results. In one study, patients in a behavioral therapy group reported less medication use and less headaches than the acupuncture group. In another study, patients receiving the drug metoprolol suffered more side effects but had better scores in terms of lower frequency, duration and intensity of headaches.

"The widespread use of acupuncture, the promising results, and the often insufficient quality of the available studies warrant further research," the scientists said. Future studies, they believe, "should follow specific guidelines for headache trials for inclusion criteria, classification of headaches, control of co-interventions and outcome measurement, as well as general guidelines for reporting."

Based on these findings, the researchers concluded that acupuncture "has a role in the treatment of recurrent headaches." They added that while the small sample sizes and overall quality of the studies prohibited them from making a straightforward recommendation of acupuncture, the treatment "seems to be relatively safe in the hands of qualified providers. Therefore, we conclude that headache patients who want to try acupuncture should not be discouraged."

Reference

1. Melchart D, et al. Acupuncture for recurrent headaches: a systematic review of randomized controlled trials. *Cephalalgia* 1999;19:779-786.



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