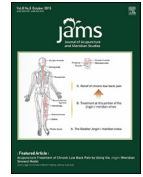


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REVIEW ARTICLE



As Acupressure Decreases Pain, Acupuncture May Improve Some Aspects of Quality of Life for Women with Primary Dysmenorrhea: A Systematic Review with Meta-Analysis

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Abstract

Primary dysmenorrhea is the most common gynecological symptom reported by women and constitutes a high health, social, and economic burden. Chemotherapies, along with their side effects, have not yielded satisfactory outcomes. Alternative nonpharmacological interventions, including acupuncture and acupressure, have been advocated, but evidence regarding their beneficial effect is inconclusive. This study sought to obtain evidence on the effectiveness of acupuncture and acupressure interventions. Twelve electronic databases were searched by using menstrual pain intensity and quality of life as primary and secondary outcomes, respectively, with the PEDro guideline for quality appraisal. Data unsuitable for a meta-analysis were reported as descriptive data. The search yielded 38 citations, from which eight studies were systematically reviewed, four of the eight being eligible for meta-analysis. The systematic review showed moderate methodological quality with a mean of 6.1 out of 10 on the PEDro quality scale. Acupressure showed evidence of pain relief while acupuncture improved both the mental and the physical components of quality of life. In conclusion, physiotherapists should consider using acupuncture and acupressure to treat primary dysmenorrhea, but a need exists for higher quality, randomized, blinded, sham-controlled trials with adequate sample sizes to establish clearly the effects of these modalities.

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1. Introduction

Dysmenorrhea constitutes a high health, social, and economic burden. Primary dysmenorrhea defined as painful menstruation without pelvic pathology usually develops 1 year or 2 years after menarche, mainly afflicting young women, but may persist in females as old as 40 years of age [1]. The incidence of primary dysmenorrhea is as high as 80% for women in their teens and early 20s, with half of these women experiencing loss of time from school or work [2–5]. The condition is so common that many women do not report it during medical reviews [6,7]. Absenteeism from school or work at least once due to the symptoms of primary dysmenorrhea has been reported to occur in one-third to one-half of all women, with 5–14% of the absenteeism occurring frequently [8]. Dysmenorrhea is a common cause of reduced quality of life in women [9,10].

Many women with primary dysmenorrhea do not respond to the primary choice of therapy, nonsteroidal anti-inflammatory drugs or oral contraceptives, with some showing contraindications. Consequently, alternative nonpharmacological interventions, including acupressure and acupuncture, have been advocated as a major nonmedical intervention for the relief of pain [11,12]. Previous studies have indicated that acupressure at the SP6 point may be considered a noninvasive method for alleviating discomfort associated with primary dysmenorrhea, with its effects persisting for as long as 2 hours after treatment [13,14]. Acupressure is thought to stimulate the regulatory systems and to activate a variety of endocrine and neurological mechanisms, which, in turn, stimulate a variety of physiological functions toward homeostasis [15]. Also, some evidence indicates that acupuncture is effective in treating primary dysmenorrhea [16–21], but that evidence was largely based on one small, randomized, controlled trial. Two more recent sham acupuncture randomized controlled trials failed to show evidence of pain reduction [22,23].

Although a few reviews of acupuncture and/or acupressure for the treatment of primary dysmenorrhea are currently available, those reviews have several limitations. One study [24] included only one trial of acupuncture, and another study [25] included two acupuncture trials and two acupressure trials. A third systematic review [26] evaluated acupuncture-related therapies, including moxibustion and acupressure treatment. Additionally, none of those reviews reported data on quality of life, which is a very important factor for women with primary dysmenorrhea.

The evidence regarding the main issue of how the different interventions are beneficial to women suffering from primary dysmenorrhea is conflicting. One of the major challenges for stakeholders in the subject of primary dysmenorrhea with respect to acupuncture and acupressure therapies has been the subjective nature of the symptoms' presentations coupled with the heterogeneity of the different protocols and acupoints utilized. As a result, evidence of pain relief has been somewhat contradictory at best, with much of the research being of low methodological quality. Therefore, a systematic review with a meta-analysis to identify robust evidence from numerous trials is warranted so that quality evidence can be put forward for

the use (or not) of these modalities for pain relief and quality-of-life improvement in individuals with primary dysmenorrhea.

2. Methods

This research is a systematic review of the literature with a meta-analysis. A systematic review of the literature was conducted to identify the outcomes and the quality of various research trials on acupuncture and acupressure interventions for a reduction of pain and an improvement in the quality of life for females suffering from primary dysmenorrhea pain. This study was approved by the Health Research and Ethics Committee, University of Nigeria Teaching Hospital, Ituku Ozalla Enugu, Nigeria.

A comprehensive search was conducted online to identify all relevant publications on acupuncture and acupressure interventions for the management of pain and quality of life for females with primary dysmenorrhea. Allied health, health-related, health science, and medical databases, including Ovid Medline, Cochrane library, Science Direct, PubMed, Scopus, PEDro, Web of Science, CINAHL, MANTIS, PsycINFO, AMED, and EMBASE were used. The search was performed by using the following key indexing terms independently: "acupuncture", "acupressure", "acupoints", "physiotherapy", "primary dysmenorrhea", "quality of life", and "physical intervention". Also, the search strategy described by Brown and Brown [27] was employed. A Google search and a hand search of the reference lists of existing articles was conducted to find papers that did not appear in the main databases. The search covered literature from 1970 to April 2014.

Studies with their main focus on the efficacy, effectiveness, or effect of acupuncture and acupressure interventions using different acupoints for the management of primary dysmenorrhea were included, as were studies on the quality of life of females with primary dysmenorrhea. Only studies utilizing human females of reproductive age were included. Studies were limited to peer-reviewed journals and conference proceedings. All study abstracts meeting these broad criteria were initially included. When the decision could not be made based on the title and the abstract of the paper, the authors were contacted for any missing data, and the full text of the paper was included for further decision. Case reports and clinical opinions were excluded. The decision to include data based on the inclusion criteria was independently made by the authors. When a difference of opinion occurred, consensus was reached on inclusion or exclusion by discussion and reflection. A third party was called upon in the event of disagreement. Selection of trials was also based on the criteria described in the similar systematic review by Cho and Hwang [28].

The following inclusion criteria determine eligibility for inclusion in this review: primary dysmenorrhea [pain affecting daily activity or with a high baseline score ≥ 3 on the visual analogue scale (VAS) or an equivalent tool], primary dysmenorrhea in the majority (> 50%) of menstrual cycles, primary dysmenorrhea for at least 1 day of menses, patients of reproductive age, and quality of life was an outcome measure. Trials that met any of the following

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