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Chinese massage (Tuina) for the treatment of essential hypertension: A systematic review and meta-analysis



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Summary

Background: Chinese massage, named Tuina, is commonly used in China and potentially effective for essential hypertension (EH). However, there is no critically appraised evidence such as systematic reviews or meta-analyses on the effectiveness and safety of Tuina for EH.

Methods: The following electronic databases: Pubmed, the Cochrane library, CNKI, the Wan Fang Database and VIP were searched for published and unpublished randomized controlled trials (RCTs) of Tuina for EH up to 20th August 2013.

Results: Seven randomized trials involving 479 patients were included. The results of meta-analysis showed superior effects of Tuina plus antihypertensive drugs compared to antihypertensive drugs alone, however, Tuina alone was not superior to antihypertensive drugs. The safety of Tuina for EH was still unclear because adverse effects were not assessed in most of the original trials.

Conclusions: The findings from our review suggest that Tuina might be a beneficial adjuvant for patients with EH, although the results are of limited value due to the clinical heterogeneity and low methodological quality of the included studies. Future studies should adhere to high-quality RCTs with long follow-up for demonstrating the effectiveness of Tuina for inpatients with EH.

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Introduction

Hypertension, as an independent predisposing factor for heart failure, coronary artery disease, stroke, renal disease, and peripheral arterial disease, is associated with serious morbidity and mortality.¹ It has been estimated that hypertension accounts for 6% of deaths worldwide.² Although antihypertensive drug treatment clearly reduces the risks of cardiovascular and renal disease, large population of the hypertensive patients are either untreated or inadequately treated.³ It is indicated that both environmental and genetic factors may contribute to high blood pressure and hypertension prevalence, especially for essential hypertension.⁴ In addition, the prevalence of essential hypertension increases with age; individuals with relatively high blood pressures at younger ages are at increased risk for the subsequent development of hypertension.⁵

Recently, there is a growing tendency for lowering blood pressure with natural therapy or complementary and alternative therapy.^{6–14} Chinese massage, usually named Tuina in China, is an important component of traditional Chinese medicine (TCM), parallel to internal medicine, acupuncture, moxibustion, life cultivation and rehabilitation of Chinese medicine. Massage had been noted in “Yellow Emperor’s Canon of Medicine”, the classic of TCM. It was pointed out that Chinese massage originated and developed in the central region of China. The term Tuina was first seen in the Ming dynasty. It had the function of unblocking or dredging the meridians and collateral, promoting qi to activate blood, and eliminating cold to stop pain. With the hands or needles working on the meridians and acupoints, we can re-establish the proper flow of qi and blood through the channels. When Tuina or acupuncture stimulations are used to the affected parts, these produced energy will regulate the function of body.^{15,16}

Several clinical studies, including a substantial number of randomized controlled trials (RCTs), have shown that Tuina is effective and safe for essential hypertension. It

can also improve symptoms, such as headache, dizziness, fatigue. And it is common to see patients with essential hypertension are treated with Tuina alone or combined with antihypertensive agents.^{17–19} However, the RCTs examining the effectiveness of Tuina for essential hypertension have never been systematically summarized. As a result, we performed this systematic review to critically assess the effectiveness of Tuina for essential hypertension.

Methods

Data sources

We searched the following electronic databases up to 20th August 2013: Pubmed, the Cochrane library, including the Cochrane Central Register of Controlled Trials (CENTRAL, 2013), Chinese bases, including Chinese National Knowledge Infrastructure (CNKI; 1979–2013), the Wan Fang Database (1985–2013), and Chinese Scientific Journal Database (VIP; 1989–2013). The searching terms were ‘Chinese massage’, ‘Tuina’, ‘Yuan Fa Xing Gao Xue Ya (essential hypertension)’, and ‘Gao Xue Ya (hypertension)’. No language restriction was applied.

Study selection

All randomized controlled trials (RCTs) that compared Tuina with conventional antihypertensive drugs for the treatment of EH were included, regardless of blinding or the published language. RCTs comparing Tuina combined antihypertensive drugs with antihypertensive drugs were also included. Animal studies, clinical trials including case report, case series traditional reviews were not included. Quasi-RCTs were also not considered. The participants were diagnosed as hypertensive, with a systolic BP (SBP) ≥ 140 mmHg and/or a diastolic BP (DBP) ≥ 90 mmHg or used antihypertensive drugs. We did not intend to make any restrictions

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