

Table des matières

1. Systematic Reviews and Meta-Analysis	1
1.1. He 2024	1
1.2. Wang 2020 ☆	1
1.3. Meng 2016	2
1.4. Yu 2005	2

Mammary Dysplasia

Dysplasie mammaire : évaluation de l'acupuncture

1. Systematic Reviews and Meta-Analysis

1.1. He 2024

He Z, Xing L, He M, Sun Y, Xu J, Zhuang H, Guo R, Chen H, Wu K, Dong Q, Yin G, Zhang J, Yu S, Wang X, Zhao R, Qin D. Best acupuncture method for mammary gland hyperplasia: Evaluation of randomized controlled trials and Bayesian network meta-analysis. *Heliyon*. 2024 Apr 4;10(8):e28831. <https://doi.org/10.1016/j.heliyon.2024.e28831>

Objective	To evaluate the effectiveness of different acupuncture treatments for mammary gland hyperplasia (MGH) using a network meta-analysis.
Methods	Several databases were searched without language restrictions from 2000 to February 2023, including PubMed, Embase, Web of Science, Cochrane Library, China Science and Technology Journal Database, China Biology Medicine Database, Wanfang Database, China National Knowledge Infrastructure Database, and other professional websites and gray literature. Inclusion criteria were adult women diagnosed with MGH; intervention measures included acupuncture and related therapies; the control group was treated with simple drugs; and the research type was a randomized controlled trial (RCT). The primary outcomes were treatment effectiveness and estradiol and progesterone levels. Secondary outcomes were breast lump size and visual analog scale (VAS) score of breast pain. Exclusion criteria were studies unrelated to MGH, incorrect study populations, control measures or interventions, incomplete data, non-RCTs, case reports, and animal experiments. Cochrane tools were used to assess the risk of bias. The R software (x64 version 4.2.1), Review Manager 5.3 software and STATA 16.0 software were used for data analysis.
Results	Following a rigorous screening process, data extraction, and quality assessment, 48 eligible RCTs encompassing 4,500 patients with MGH and 16 interventions were included. The results indicated that acupuncture, alone or in combination with traditional Chinese or Western medicine, had better therapeutic effects than conventional therapy. In terms of effectiveness, warm needle acupuncture was the best choice (94.6%). Bloodletting pricking was the most effective method (85.7%) for lowering progesterone levels. Bloodletting pricking was the most effective method (98.3%) for lowering estradiol levels. Manual acupuncture combined with traditional Chinese medicine was the most effective (74.5%) treatment to improve the size of the breast lump. Warm needle acupuncture was the most effective (69.8%) in improving the VAS score.
Conclusion	Acupuncture therapy was more effective in treating MGH than drug therapy alone, and warm needle acupuncture and bloodletting pricking were the two best options. However, larger sample sizes and high-quality RCTs are required.

1.2. Wang 2020 ☆

Wang Ziyang. [Meta-analysis of Acupuncture in the Treatment of Mammary Gland Hyperplasia]. Guiding Journal of TCM and Pharmacy. 2020. [212955].

Objective	To evaluate the efficacy and safety of acupuncture for mammary gland hyperplasia.
Methods	Randomized controlled trials were searched among four Chinese databases (CNKI, VIP, WanFang, SinoMed) and English databases (Cochrane Library, Medline) on acupuncture for mammary gland hyperplasia. The retrieval time was from the establishment of each database to December 2018. Two evaluators independently screened the literature, cross-checked and assessed the risk of bias. Meta-analysis was performed by using Review Manager 5.3 software.
Results	15 RCTs involving 1588 patients were included. The treatment of acupuncture and Chinese medicine group was better than that of traditional Chinese medicine group. The treatment of acupuncture and western medicine group was better than that of western medicine group.
Conclusion	Based on the results of this study, it has been shown that acupuncture has a certain effect on the treatment of mammary gland hyperplasia, and no serious adverse reactions have occurred. However, due to the limited number and quality of the included studies, the quality of the evidence in this study is of low quality, so caution should be exercised when applying this conclusion. And more high quality multicenter randomized double-blind controlled trials are needed to verify.

1.3. Meng 2016

Meng Dan, Lai Hao, Zhang Qingxiang. [The meta-analysis on randomized controlled clinical trials literatures of acupuncture and moxibustion in the treatment of hyperplasia of mammary glands]. Chinese Medicine Modern Distance Education of China. 2016;6:140-142. [186963].

目的 循证评价针灸治疗乳腺增生的有效性。方法 计算机检索2000–2015年中国知网关于针灸治疗哮喘的临床研究文献,选择符合要求的随机对照试验 (CRCT)文献进行Meta分析。结果 共纳入21篇文献,运用Cochrane系统评价的方法,使用RevMen5.3软件进行Meta分析,并据其纳入原始临床治疗方法的类型进行统计分析。结论 治疗乳腺增生,针药结合、针灸(尤其是穴位埋线)治疗方式的总有效率均优于单纯药物治疗;临床应积极促进穴位埋线疗法的应用

1.4. Yu 2005

Yu JN, Liu BY, Liu ZS, Chen XY. [Acupuncture for Mammary Dysplasia: A Systematic Review]. Chinese Journal of Evidence-Based Medicine. 2005;5(5):381-403. [143353].

Objective	To assess the effectiveness and safety of various types of acupuncture in the treatment of mammary dysplasia.
Methods	We searched The Cochrane Library, CENTRAL, MEDLINE(19662004), EMBASE(19802004), CBM(19752004), CNKI(19972004) and reference lists, databases of ongoing trials and relevant academic conference proceedings.
Results	Five studies involving 534 women ranging from 78 to 180 met the inclusion criteria. The recovery rates of two groups in one study showed acupuncture was statistically superior to Rupixiao (RR 9.00, 95%CI 2.29 to 35.43; RR 8.04, 95%CI 2.20 to 32.02), six good improvement rates (including groups analysis) indicated that there was no significant difference between acupuncture and other therapies. None of the studies reported incidence of adverse reaction.

Conclusions	Overall, there is no conclusive evidence for acupuncture in the treatment of mammary dysplasia because the quality of included studies and amount of evidence are both poor and insufficient. There is an urgent need for larger, well-designed randomised controlled trials to assess the effectiveness and adverse-effect of acupuncture.
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