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mumps

Oreillons : évaluation de l'acupuncture

1. Systematic Reviews and Meta-Analysis

☆☆☆	Evidence for effectiveness and a specific effect of acupuncture
☆☆	Evidence for effectiveness of acupuncture
☆	Limited evidence for effectiveness of acupuncture
∅	No evidence or insufficient evidence

1.1. He 2015 ∅

He J, Jia P, Zheng M, Zhang M, Jiang H. acupuncture for mumps in children. Cochrane Database Syst Rev. 2015; ;(2):CD008400. [177740].

Background	Mumps is an acute, viral illness transmitted by respiratory droplets and saliva. A number of studies published in China have suggested that acupuncture is beneficial for children with mumps but the literature reporting the benefits or harms of acupuncture for mumps has not been systematically reviewed.
Objectives	To determine the efficacy and safety of acupuncture for children with mumps.
Search Methods	We searched CENTRAL (2014, Issue 11), MEDLINE (1950 to November week 3, 2014), EMBASE (1974 to December 2014), CINAHL (1981 to December 2014), AMED (1985 to December 2014), the Chinese BioMedical Literature Database (CBM) (1979 to November 2014), China National Knowledge Infrastructure (CNKI) (1979 to November 2014), Chinese Technology Periodical Database (CTPD) (1989 to November 2014) and Wanfang database (1982 to November 2014). We also handsearched a number of journals (from first issue to current issue). Selection Criteria: Randomised controlled trials comparing acupuncture with placebo acupuncture, no management, Chinese medication, Western medication or other treatments for mumps. Acupuncture included either traditional acupuncture or contemporary acupuncture, regardless of the source of stimulation (body, electro, scalp, fire, hand, fine needle, moxibustion). Data Collection And Analysis: Two review authors independently extracted data. We identified no trials for inclusion in this updated review.
Main Results	No study met our inclusion criteria.
Authors' Conclusions	We could not reach any conclusion about the efficacy and safety of acupuncture as we identified no trials for inclusion in this review. More high-quality research is needed.

1.2. He 2012 ∅

He J, Zheng M, Zhang M, Jiang H. Acupuncture for mumps in children. Cochrane Database Syst Rev. 2012. [160663].

Background	Mumps is an acute, viral illness transmitted by respiratory droplets and saliva. A number of studies published in China have suggested that acupuncture is beneficial for children with mumps but the literature reporting the benefits or harms of acupuncture for mumps has not been systematically reviewed.
Objectives	To determine the efficacy and safety of acupuncture for children with mumps.
Methods	Search METHODS: We searched CENTRAL (2012, Issue 4), MEDLINE (1950 to April week 4, 2012), EMBASE (1974 to May 2012), CINAHL (1981 to May 2012), AMED (1985 to May 2012), the Chinese BioMedicine Database (CBM) (1979 to May 2012), China National Knowledge Infrastructure (CNKI) (1979 to May 2012), Chinese Technology Periodical Database (CTPD) (1989 to May 2012) and WANFANG database (1982 to May 2012). We also handsearched a number of journals (from first issue to current issue). Selection criteria: We included randomised controlled trials comparing acupuncture with placebo acupuncture, no management, Chinese medication,, Western medication or other treatments for mumps. Acupuncture included either traditional acupuncture or contemporary acupuncture, regardless of the source of stimulation (body, electro, scalp, fire, hand, fine needle, moxibustion). Data collection and analysis: Two review authors independently extracted data and assessed the quality of included studies. We calculated risk ratios (RR) with their 95% confidence intervals (CI) for the effective percentage and standardised mean differences (SMD) with 95% CIs for the time to cure.
Main results:	Only one study with 239 participants met our inclusion criteria. There were a total of 120 participants in the acupuncture group, of which 106 recovered, with their temperature returning back to normal and no swelling or pain of the parotid gland; the condition of 14 participants improved, with a drop in temperature and alleviation of swelling or pain of the parotid gland. There were 119 participants in the Western medicine group, of which 56 recovered and the condition of 63 improved. The acupuncture group had a higher recovery rate than the control group. The relative RR of recovery was 1.88 (95% CI 1.53 to 2.30). However, the acupuncture group had a longer time to cure than the control group. The mean was 4.20 days and the standard deviation (SD) was 0.46 in the acupuncture group, while in the control group the mean was 3.78 days and the SD was 0.46. There was a potential risk of bias in the study because of low methodological quality.
Authors' conclusions	We could not reach any confident conclusions about the efficacy and safety of acupuncture based on one study. More high-quality research is needed.

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