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# Recurrent Oral Ulcer

## Aphthose : 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. Generic Acupuncture

##### 1.1.1. Yan 2022 ☆

Yan H, Chen T, Zuo Y, Tu Y, Ai H, Lin Y, Chen Y. A Systematic Review and Meta-Analysis of Acupuncture Treatment for Oral Ulcer. Evid Based Complement Alternat Med. 2022 Nov 8;2022:6082179. <https://doi.org/10.1155/2022/6082179>.

<b>Background</b>	Oral ulcer (OU) is a common oral mucosal disease manifested with obvious pain. In some studies, the efficacy of acupuncture in OU has been confirmed, but systematic reviews and meta-analyses for them are lacking. Our aim is to evaluate the efficacy of acupuncture in the treatment of OU.
<b>Methods</b>	We searched the literature from eight databases from their inception to December 2021. We included randomized controlled trials of acupuncture for the treatment of oral ulcer. The meta-analysis was carried out using Review Manager 5.3 and Stata 16.0. The main outcomes were the effective rate and the recurrence rate, the secondary outcomes were the visual analogue score (VAS) and the ulcer healing time.
<b>Results</b>	Totally, <b>18 studies</b> were finally included in the meta-analysis, including <b>1,422 patients</b> . In meta-analyses, we found that in comparison with Western medicine, acupuncture can improve effective rate (OR = 5.40, 95% CI: 3.40 to 8.58), reduce the ulcer recurrence rate (OR = 0.21, 95% CI: 0.13 to 0.33), and relieve the ulcer pain (MD = -2.26, 95% CI: -4.27to-0.24). In addition, compared with Western medicine, acupuncture plus Western medicine also can improve effective rate (OR = 2.95, 95% CI: 1.48 to 5.85). Compared with the Chinese medicine, the acupuncture plus Chinese medicine can improve the effective rate (OR = 8.26, 95% CI: 3.61 to 18.88) and relieve the ulcer pain (MD = -1.85, 95% CI: -2.51 to -1.19).
<b>Conclusion</b>	Acupuncture may be more effective than Western medicine in terms of efficacy rate, and acupuncture combined with Western or Chinese medicine may have the potential to reduce the recurrence of ulcer and relieve the ulcer pain. However, due to limited evidence, higher quality and more rigorously designed c

##### 1.1.2. Yang 2020 ☆

Yang Xuejie. [Meta-analysis About Curative Effect of Acupuncture on Recurrent Oral Ulcer]. Chinese Journal of Basic Medicine in TCM. 2020. [212903].

<b>Objective</b>	To systematically evaluate the efficacy of acupuncture in the therapy of recurrent oral ulcer.
<b>Methods</b>	Randomized controlled trials (RCT) about acupuncture therapy on recurrent oral ulcers were electronically searched from China National Knowledge Infrastructure (CNKI), Chinese Scientific and Technological Journals (VIP), WanFang Database, PubMed and the Cochrane Library from the establishment time of databases to October 23, 2018. Literature screening, data extraction and quality evaluation were implemented for the literature which met the inclusive criteria. Meta analysis was done by using Review Manager 5. 3.
<b>Results</b>	Meta-analysis showed that a total of <b>23 papers including 2462 patients</b> were included. The total effective rate of acupuncture was compared with the control group; the total effective rate of acupuncture vs medication; the Semi-annual recurrence rate of acupuncture vs the control group; 1 year recurrence rate of acupuncture vs the control group; the VAS score of acupuncture vs the control group; the Improved of ulcer area; all results of the trial group were significantly improved better than those of the control group, and the differences were statistically significant.
<b>Conclusion</b>	Acupuncture is effective for recurrent oral ulcers, and it has advantages in reducing recurrence rate, relieving pain and promoting the healing of ulcer. However, there are some problems in the literature included in the evaluation, such as quality defects, less quantity and small sample size. More large sample and high-quality randomized controlled trials are needed for further comprehensive scientific evaluation.

## 1.2. Special Acupuncture Techniques

### 1.2.1. Fire needle

#### 1.2.1.1. Wu 2024

Wu Y, Cheng Z, Ma W, Li Z, Weng P, Li B, Zhao W. The effectiveness of fire needle therapy in the treatment of recurrent aphthous stomatitis: A systematic review and meta-analysis. *Medicine (Baltimore)*. 2024 Jan 12;103(2):e36817. <https://doi.org/10.1097/MD.00000000000036817>

<b>Background</b>	Recurrent aphthous stomatitis (RAS) is common in clinical practice and imposes both physical and psychological distress on patients.
<b>Objective</b>	This study aimed to evaluate the clinical effectiveness of fire needle therapy for the treatment of RAS, providing a basis for clinical decision-making.
<b>Methods</b>	Eight databases, in both Chinese and English, were searched from their inception until December 2022. All randomized controlled trials (RCTs) that utilized fire needle therapy, either alone or combined with other treatments for RAS, were considered. Data evaluation and extraction were conducted independently by 2 authors.

<b>Results</b>	The revised Cochrane Risk of Bias Version 2 tool was employed to assess the risk of bias in the included RCTs. A meta-analysis was conducted using Review Manager 5.4 and Stata 15.0. <b>Nine RCTs involving 1469 patients</b> were selected for inclusion. The meta-analysis revealed that, compared to a non-fire-needle control group (primarily utilizing vitamin and transfer factor treatments), fire needle therapy for RAS significantly improved the total effective rate (relative risk = 1.25, 95% confidence interval [CI] [1.14, 1.36], $P < .00001$ ), reduced the visual analogue scale score (mean difference = -1.68, 95% CI [-1.82, -1.53], $P < .0001$ ), diminished the Traditional Chinese Medicine symptom score (standardized mean difference = -1.20, 95% CI [-1.76, -0.65], $P < .0001$ ), and shortened the healing time (mean difference = -1.66, 95% CI [-2.73, -0.59], $P = .002$ ). Notably, there was no significant difference in the recurrence rate between the groups (relative risk = -0.18, 95% CI [-0.36, 0.01], $P = .06$ ). Further subgroup analysis on total efficacy rate was performed based on variables such as experimental group intervention, control group intervention, and duration of therapy to explore potential sources of heterogeneity.
<b>Conclusion</b>	Fire needle therapy appears to be a clinically effective treatment for RAS, offering benefits such as pain alleviation, symptom improvement based on the Traditional Chinese Medicine parameters, and faster recovery. Nonetheless, the overall quality of the RCTs available raises concerns. Future research, involving high-quality RCTs, is essential to confirm the clinical efficacy and safety of this treatment. Registration number: PROSPERO (CRD42023387973).

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