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Alopecia

Alopécie

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Jun 2026

Jun JH, Lee HW, Choi TY, Lee MS. Acupuncture for treating alopecia areata: A systematic review and meta-analysis. *Medicine (Baltimore)*. 2026 Mar 20;105(12):e48073.

<https://doi.org/10.1097/MD.0000000000048073>

Background	Alopecia areata (AA) is characterized by hair loss triggered by an autoimmune response that leads to emotional distress and a poor quality of life. However, conventional treatments may also have potential side effects. Therefore, traditional medicine methods such as acupuncture are emerging as alternative treatments for AA, with recent evidence suggesting their effectiveness and prompting further research to assess their safety and efficacy.
Methods	This systematic review aimed to evaluate the current evidence regarding AA treatment using acupuncture. We searched 13 databases until December 2024 for studies that compared the efficacy of acupuncture and Western medicine in treating AA. The present review solely targeted randomized controlled trials (RCTs). The risk of bias was assessed using the Risk of Bias tool (ROB), whereas the quality of evidence was evaluated using the Grading of Recommendations, Assessment, Development, and Evaluation approach.
Results	Eleven RCTs with 1144 participants were included in this review. The included studies had an unclear risk of bias in most domains. Among these, 7 RCTs tested the total treatment effects of combining plum-blossom needling with western medicine compared with western medicine alone. The results revealed that combining plum-blossom needling with western medicine resulted in a higher rate of improved symptoms than using western medicine alone (RR 1.09, 95% CI 1.03-1.16, I ² = 50%, P = .005, 7 RCTs, 756 participants, low certainty of evidence).
Conclusion	This review provides evidence for the benefits of acupuncture in AA treatment. However, the quality of the evidence was low, and the sample size was small. Therefore, future large-scale studies should be conducted using more rigorous methodologies.

Clinical Practice Guidelines

⊕ positive recommendation (regardless of the level of evidence reported)
 ∅ negative recommendation (or lack of evidence)

1. Japanese Dermatological Association (JDA, Japan) 2017 Ø

Nihon Hifuka Gakkai Enkei Datsumo Syo Shinryo Gaidorain. Japanese Dermatological Association; 2017:2741-2762 . *Cited by* Okawa Y, Yamashita H, Masuyama S, Fukazawa Y, Wakayama I. Quality assessment of Japanese clinical practice guidelines including recommendations for acupuncture. Integr Med Res. 2022 Sep;11(3):100838. <https://doi.org/10.1016/j.imr.2022.100838> . *Note* : Fair, but should have been classified in "I" (inconclusive) if this category existed.

Alopecia Areata. Recommend not to do. Grade C2 (out of A to D).

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