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diabetic foot:

Pied diabétique : évaluation de l'acupuncture

Articles connexes : - diabète -

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Yu 2011 ~

Yu Zi-Feng, Fang Zhi-Hui, Zeng Xian-Tao. [Acupuncture as adjuvant treatment for diabetic foot: a systematic review and meta-analysis]. Journal of Endocrine Surgery. 2011;6:412-415. [186996].

目的 探讨针灸辅助治疗糖尿病足 (DF)的临床疗效及其安全性. 方法 计算机检索MEDLINE、Embase、CENTRAL、SinoMed、VIP、CNKI和WANFANG数据库, 并手工检索相关会议论文集及查阅检获所有文献的参考文献, 全面收集针灸辅助治疗DF的临床随机或半随机对照试验, 由2名评价者独立进行数据提取和质量评价后, 采用RevMan 5. 1软件进行Meta分析. 结果 纳入7项研究共626.
[Objective To explore the clinical efficacy and safety of acupuncture and moxibustion in the treatment of diabetic foot (DF) .Methods The MEDLINE, Embase, CENTRAL, SinoMed, VIP, CNKI and WANFANG databases were searched by computer. Literature, a comprehensive collection of clinical treatment of DF randomized or semi-randomized controlled trial, by two independent reviewers data extraction and quality evaluation, the use of RevMan 5.1 software for meta analysis.Results included in 7 studies 626 ...]

1.2. Special Acupuncture Techniques

1.2.1. Moxibustion

1.2.1.1. Ji 2024 (retracted)

- RETRACTION: Treatment of Diabetic Foot With Moxibustion: Clinical Evidence From Meta-Analysis. Int Wound J. 2025 Apr;22(4):e70655. <https://doi.org/10.1111/iwj.70655>
- Ji Y, Zhang Y, Wu R, Wang T, Wang J, Liu Z, Liu W. Treatment of diabetic foot with moxibustion: Clinical evidence from meta-analysis. Int Wound J. 2024 Feb;21(2):e14791. <https://doi.org/10.1111/iwj.14791>

Objective/Methods	To assess the efficacy of moxibustion for diabetic foot, and compile the findings of randomised clinical trials. China National Knowledge Infrastructure Database, Medicine, WanFang Database, Embase, Chinese Scientific Journal Database and Web of Science were from the establishment to January, 2024 were searched. Randomised controlled trials, which evaluated the effects of moxibustion were included.
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Results	A total of 12 randomised controlled trials involving 1196 patients were included. According to the pooled results of this meta-analysis, effective rate (relative risk 1.16, 95% confidence intervals, CI [1.11, 1.22]), healing time (mean difference [MD] -6.27, 95% CI [-8.68, -3.86]), wound area (MD 3.46, 95% CI [0.84, 6.09]), and ankle brachial index (MD 0.14, 95% CI [0.03, 0.24]) were statistically significant compared to the control group.
Conclusion	This study suggests that moxibustion treatment has the potential for improving symptoms of diabetic foot. However, future in-depth research on the benefits and harms of moxibustion for the diabetic foot is needed before it can be accepted as an evidence-based treatment.

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