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Chronic Pelvic Pain

Algies pelviennes chroniques : évaluation de l'acupuncture

Articles connexes : - prostatite chronique -

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Wei 2025

Wei R, Huang Z. Acupuncture-induced pain relief and anti-inflammatory effects in chronic pelvic inflammatory disease: a systematic review and meta-analysis. Am J Transl Res. 2025;17(11):8985-8998. https://doi.org/10.62347/GLPQ2895

Objective	To systematically evaluate the effects of acupuncture and moxibustion on pain relief, inflammatory biomarkers, and reproductive outcomes in patients with chronic pelvic inflammatory disease (CPID).
Methods	A systematic search was conducted in PubMed, Embase, Cochrane Library, CNKI, and Wanfang for studies published between January 2010 and December 2023. Randomized controlled trials (RCTs) comparing acupuncture with sham/conventional control interventions in CPID patients were included. The primary outcomes included pain intensity (visual analog scale, VAS), inflammatory biomarkers (C-reactive protein [CRP], interleukin-6 [IL-6], tumor necrosis factor alpha [TNF-α]), and CPID specific indicators (fallopian tube patency and pelvic mass regression). Data were analyzed using a random-effects model (RevMan 5.3/Stata 16).
Results	**Thirteen RCTs involving 658 patients** were included. Acupuncture significantly reduced pain intensity (standardized mean deviation [SMD]=-1.42, 95% confidence interval [CI]: -1.66 to -1.18), CRP (SMD=-3.89), IL-6 (SMD=-5.00), TNF-α (SMD=0.60) (all P<0.001). CPID-specific outcomes were improved, with higher rates of fallopian tube patency (hazard ratio [RR]=1.35) and pelvic mass regression (RR=1.44; both P<0.01). Moreover, acupuncture improved quality of life (SMD=0.55, P<0.0001), increased pregnancy rate (RR=1.32), and reduced recurrence rates (RR=0.68; both P<0.05). Electroacupuncture combined with herbal medicine (≥8 weeks) showed the most pronounced therapeutic benefits.
Conclusion	Electroacupuncture combined with herbal medicine significantly alleviates pelvic pain, reduces systemic inflammation, and enhances reproductive outcomes in patients with CPID.

1.1.2. Yang 2024 (combined with traditional Chinese medicine fumigation)

Yang L, Li Y, Zhang S, Qian H, Xu W, Yu J. Efficacy of acupuncture combined with traditional Chinese medicine fumigation therapy in sequelae of pelvic inflammatory disease: a systematic review and

meta-analysis. Complement Med Res. 2024;31(2):175-186. https://doi.org/10.1159/000536101

Background	Acupuncture combined with traditional Chinese medicine fumigation is increasingly used to treat sequelae of pelvic inflammatory disease (SPID), yet no prior meta-analysis has evaluated its efficacy. This study aimed to assess the feasibility and clinical effectiveness of this combined therapy for SPID.
Methods	Eight databases were searched from inception to October 29, 2022, for studies on acupuncture combined with traditional Chinese medicine fumigation for SPID. Study quality was assessed using the Cochrane Risk of Bias tool. Pooled results were expressed as risk ratios (RRs) with 95% confidence intervals (CIs). Sensitivity analyses identified sources of heterogeneity, Egger's test assessed publication bias, and evidence quality was evaluated using GRADE. Analyses were performed with Review Manager 5.3 and Stata 14.
Results	Seven studies including 663 participants were analyzed. Acupuncture combined with fumigation showed a significantly higher total effective rate than acupuncture alone (RR = 1.17, 95% CI [1.09–1.25], p = 0.0001, I^2 = 0%) and than fumigation alone (RR = 1.42, 95% CI [1.21–1.66], p = 0.0001).
Conclusion	Acupuncture combined with herbal fumigation demonstrates superior clinical efficacy for treating sequelae of pelvic inflammatory disease. Further large-scale, high-quality trials are needed to validate these findings.

1.1.3. Yi 2024 (pelvic inflammatory disease)

Yi L, Huang B, Liu Y, Zhou L, Wu Y, Yu C, Long W, Li Y. Acupuncture therapies for relieving pain in pelvic inflammatory disease: A systematic review and meta-analysis. PLoS One. 2024 Jan 31;19(1):e0292166. https://doi.org/10.1371/journal.pone.0292166

Backgound	Studies investigating the effectiveness of acupuncture therapies in alleviating pain in pelvic inflammatory disease (PID) have gained increasing attention. However, to date, there have been no systematic reviews and meta-analyses providing high-quality evidence regarding the efficacy and safety of acupuncture therapies in this context.
Objective	The objective of this review was to assess the efficacy and safety of acupuncture therapies as complementary or alternative treatments for pain relief in patients with PID.
Method	A comprehensive search was conducted in eight databases from inception to February 20, 2023: PubMed, Embase, Web of Science, the Cochrane Library, China National Knowledge Infrastructure, Wanfang Database, VIP Database, and Chinese Biomedical Literature Database. Randomized controlled trials (RCTs) investigating acupuncture therapies as complementary or additional treatments to routine care were identified. Primary outcomes were pain intensity scores for abdominal or lumbosacral pain. The Cochrane risk of bias criteria was applied to assess the methodological quality of the included trials. The Grading of Recommendations, Assessment, Development, and Evaluations (GRADE) system was used to evaluate the quality of evidence. Data processing was performed using RevMan 5.4.

Result	This systematic review included **twelve trials comprising a total of 1,165 patients**. Among these, nine trials examined acupuncture therapies as adjunctive therapy, while the remaining three did not. Meta-analyses demonstrated that acupuncture therapies, whether used alone or in combination with routine treatment, exhibited greater efficacy in relieving abdominal pain compared to routine treatment alone immediately after the intervention (MD: -1.32; 95% CI: -1.60 to -1.05; P < 0.00001). The advantage of acupuncture therapies alone persisted for up to one month after the treatment (MD: -1.44; 95% CI: -2.15 to -0.72; P < 0.0001). Additionally, acupuncture therapies combined with routine treatment had a more pronounced effect in relieving lumbosacral pain after the intervention (MD: -1.14; 95% CI: -2.12 to -0.17; P < 0.00001) in patients with PID. The incidence of adverse events did not increase with the addition of acupuncture therapies (OR: 0.56; 95% CI: 0.21 to 1.51; P = 0.25). The findings also indicated that acupuncture therapies, as a complementary treatment, could induce anti-inflammatory cytokines, reduce pro-inflammatory cytokines, alleviate anxiety, and improve the quality of life in patients with PID.
Conclusion	Our findings suggest that acupuncture therapies may effectively reduce pain intensity in the abdomen and lumbosacral region as complementary or alternative treatments, induce anti-inflammatory cytokines, decrease pro-inflammatory cytokines, alleviate anxiety, and enhance the quality of life in patients with PID, without increasing the occurrence of adverse events. However, due to the low quality of the included trials, the conclusion should be interpreted with caution, highlighting the need for further high-quality trials to establish more reliable conclusions.
GRADE	⊕⊕⊖⊖ Low ➔ ⊕⊖⊖⊖ Very low

1.1.4. Lin 2023

Lin KY, Chang YC, Lu WC, Kotha P, Chen YH, Tu CH. Analgesic Efficacy of Acupuncture on Chronic Pelvic Pain: A Systemic Review and Meta-Analysis Study. Healthcare (Basel). 2023 Mar 11;11(6):830. https://doi.org/10.3390/healthcare11060830.

Background	Chronic pelvic pain (CPP) is the pain occurred in the pelvic region longer than six months. The monotherapy of medicine may not adequate for the pain management of CPP and multidisciplinary approaches have been more recommended. The aim of this study is to evaluate the pain management efficacy of acupuncture compared with a control group on CPP.
Methods	The articles of randomized controlled trial on CPP in PubMed and Embase databases were screened between January 2011 and September 2022 without language restriction to evaluate the treatment efficacy of acupuncture. The visual analogue scale/numerical rating scale (VAS/NRS) and total pain scores of National Institutes of Health-chronic prostatitis symptom index (NIH-CPSI) were served as outcome variables. Post-intervention mean scores were extracted and pooled for meta-analysis.
Results	**Seventeen studies including 1455 patients** were selected for meta-analysis. Both total pain scores of NIH-CPSI and VAS/NAS data revealed significant lower pain level in the acupuncture group than in the control group. Moreover, monotherapy with acupuncture revealed a significantly lower pain level than in the control group in both total pain scores of NIH-CPSI and VAS/NRS.
Conclusions	These results indicated that acupuncture may have beneficial effects on pain management for CPP, even when administrated as a monotherapy.

1.1.5. Zheng 2022

Zheng J, Lai X, Zhu W, Huang Y, Chen C, Chen J. Effects of Acupuncture Combined with Rehabilitation

on Chronic Pelvic Pain Syndrome in Females: A Meta-Analysis Running Head-Acupuncture Combined with Rehabilitation on Chronic Pelvic Pain. J Healthc Eng. 2022 Mar 15;2022:8770510. https://doi.org/10.1155/2022/8770510

Objective	To investigate the clinical efficacy of this combined treatment for chronic pelvic pain syndrome (CPPS) by meta-analysis.
Methods	Relevant articles were retrieved from PubMed, CNKI, Wanfang Data, Web of Science, and Embase, including randomized controlled trials on acupuncture combined with rehabilitation for CPPS in females.
Results	A total of 224 articles were retrieved in this study, and **14 studies** were finally identified for inclusion. Among them, the treatment group was treated with acupuncture combined with pelvic floor rehabilitation therapy, while the control group was treated with acupuncture or pelvic floor rehabilitation therapy. Meta-analysis showed that the treatment effective rate in the treatment group was significantly higher than that in the control group (OR = 6.54; 95% CI: 4.20, 10.21; P < 0.05). After treatment, compared with the control group, the treatment group showed lower incidences of adverse reactions (OR = 0.16; 95% CI: 0.09, 0.27; P < 0.05), bladder prolapse (OR = 0.36; 95% CI: 0.18, 0.73; P < 0.05), cervical prolapse (OR = 0.22; 95% CI: 0.10, 0.49; P < 0.05), and pelvic peritoneal hernia (OR = 0.14; 95% CI: 0.05, 0.38; P < 0.05); in addition, the treatment group was also associated with lower pain score (SMD = -4.05; 95% CI: -6.75, -1.34; P < 0.05) and pelvic dysfunction score (SMD = -4.35; 95% CI: -5.37, -3.34; P < 0.05).
Conclusion	Acupuncture combined with rehabilitation is effective for CPPS in females, which can significantly reduce the pain intensity and improve pelvic dysfunction of patients.

1.1.6. Sung 2018 ☆

Sung SH, Sung AD, Sung HK, An TE, Kim KH, Park JK. Acupuncture Treatment for Chronic Pelvic Pain in Women: A Systematic Review and Meta-Analysis of Randomized Controlled Trials. Evid Based Complement Alternat Med. 2018;:. [181776].

Aim of the Study	This systematic review and meta-analysis aims to evaluate the current evidence from randomized controlled trials (RCTs) related to the effectiveness and safety of acupuncture treatment (AT), including electroacupuncture or thread-embedding therapy in combination with modern technology, for chronic pelvic pain (CPP) in women.
Materials and Methods	We searched 12 electronic databases up to December 2017. All randomized controlled trials evaluating the effect of AT for CPP were considered.
Results	**Four RCTs with 474 participants were included**. The methodological quality of included studies was generally low. The results of meta-analysis of two studies showed that AT combined with conventional treatment (CT) was associated with significantly reduced CPP, based on the total effectiveness rate (n=277, mean difference = 1.29, confidence interval = 1.13 to 1.47, P=0.0001, I2 = 0%).
Conclusions	This review suggests the potential of AT combined with CT compared to CT alone for treating female CPP. However, there is insufficient evidence to conclude that AT can be recommended as a complementary and alternative (CAM) treatment for women with CPP. To draw a firm conclusion, future studies should require not only lager, more rigorously designed RCTs but also research on different AT types.

1.1.7. Zheng 2017 ☆

Zheng Lili, Liu Yang, Zhu Danwei. [Systematic Review and Meta-analysis of the Effect of Acupuncture

on Chronic Pelvic Inflammation Disease]. Journal of Zhejiang Chinese Medical University. 2017;11. [52378].

Objective	To evaluate the effect of acupuncture therapies for chronic pelvic inflammation diease (CPID), controlled with medicines.
Methods	The randomized controlled trials of acupuncture treatment for CPID were searched from China and foreign databases, extracted data and references by 2 people, the Jadad scoring scale and Cochrane system evaluator manual 5. 1. 0 were taken as bias risk assessment tools of RCT, and used to assess the quality of the references and make a Meta-analysis by using Rev Man5. 3.
Results	30 studies include all, the results of Meta-analysis show statistical significance in terms of total effective rate [RR =1. 18, 95% CI (1. 13, 1. 24), P <0. 00001], recurrence rate [RR =0. 40, 95% CI (0. 25, 0. 62) P <0. 0001]. The pelvic cavity accumulates liquid [RR=1. 47, 95%CI (1. 19, 1. 81), P=0. 001] and reduction pain score (P<0. 05).
Conclusion	Acupuncture is effective for CPID, but the quality of the literatures we select is low, with big possibility of bias, so the results should be confirmed by high quality studies.

1.1.8. Zhong 2017 ☆

Zhong Xuan. [Clinical Effect of Acupuncture and Moxibustion Combined with Traditional Chinese Medicine Enema in the Treatment of Patients with Chronic Pelvic Inflammatory Disease: A Meta-analysis] Journal of Clinical Acupuncture and Moxibustion. 2017;33(4):50-53. [167597].

Objective	To comprehensively study the effect of acupuncture and moxibustion combined with traditional Chinese medicine enema in the treatment of patients with chronic pelvic inflammatory disease (CPID).
Methods	Relevant literatures of acupuncture and moxibustion combined with traditional Chinese medicine enema in the treatment of patients with chronic pelvic inflammatory disease were collected from databases of CNKI, VIP, Wanfang, Pubmed and Embase up to January 2016,and system evaluation and Meta-analysis were performed.
Results	A total of 12 randomized controlled trials that met the inclusion criteria were selected for the further analysis. The Meta-analysis results showed that the total effective rate (combined OR =6.32,95□ CI:3.96 □ 10.08,P □ 0.00001) and the curative rate (combined OR =2.69,95 □ CI:2.02 □ 3.59,P □ 0.00001)by acupuncture and moxibustion combined with traditional Chinese medicine enema in the treatment of CPID was superior to those by traditional Chinese medicine enema.
Conclusion	Acupuncture and moxibustion combined with traditional Chinese medicine enema in the treatment of chronic pelvic inflammatory disease has a better efficacy according to the total effective rate and the curative rate. However,large,randomized,doubleblind,well-designed controlled trials are warranted to further support this conclusion.

1.1.9. Fan 2014 ☆

Fan LL, Yu WH, Liu XQ, Cui Z, Ma J, Li CP. [A Meta-Analysis on Effectiveness of Acupuncture and Moxibustion for Chronic Pelvic Inflammatory Disease]. Acupuncture Research. 2014;39(2):156-63. [182387].

Objectifs	To evaluate the clinical effect of acupuncture and moxibustion therapies for chronic pelvic inflammatory disease (CPID) by Meta-analysis.

Méthodes	Randomized controlled trials of acupuncture and moxibustion in the treatment of CPID were searched from Databases of China National Knowledge Infrastructure (CNKI), Chinese Scientific and Technological Journals (VIP), WanFang, China Biomedicine (CBM) and PubMed up to 15 October, 2012. Two researchers independently selected the eligible literature according to the designed selection and exclusion criteria, extracted data and made an evaluation on the quality of the included studies by using the Jadad 5-point scale. The Meta-analysis was carried out using software Stata 11.0.
Résultats	**A total of 26 studies involving 2 280 patients were included**. Results of Meta-analysis showed significant differences between acupuncture-moxibustion intervention group and control group in terms of total effective rate [OR = 5.63, 95% CI (4.24, 7.47), P < 0.0001], cure rate [OR = 3.18, 95% CI (2.59, 3.89), P < 0.0001], and recurrence rate [OR = 0.11, 95% CI (0.03, 0.47), P < 0.05].
Conclusion	**Acupuncture-moxibustion is effective in the treatment of CPID.** Due to the Jadad scores of these included studies are low, high quality studies are definitely needed to confirm the conclusion.

1.2. Special Acupuncture Techniques

1.2.1. Comparison of Acupuncture techniques

1.2.1.1. Zheng 2026

Front Med (Lausanne). 2026 Jan 12;12:1731543. The efficacy of acupuncture and related treatments on chronic pelvic inflammatory disease: a network meta-analysis.
https://doi.org/10.3389/fmed.2025.1731543

Objective	To compare the efficacy of different acupuncture and related therapies for chronic pelvic inflammatory disease (CPID) and their effects on inflammatory factors via Network Meta-Analysis.
Methods	Eight databases were systematically searched (up to April 20, 2025) for randomized controlled trials (RCTs) of acupuncture-related therapies for CPID. Eighty-four RCTs involving 8,147 patients were included. Study quality was assessed using the Cochrane risk-of-bias tool, and data were analyzed with R software.
Results	AI interventions showed higher total effectiveness than conventional treatment. SUCRA rankings for total effectiveness: moxibustion combined with warm needle (89.1%), acupoint application therapy combined with ultrasound drug penetration (88.0%), and acupuncture combined with cupping (86.8%) ranked highest, while conventional treatment was the lowest (0.2%). For inflammatory factors: acupuncture showed the best improvement in IL-2 (61.6%); acupoint injection was optimal for TNF-α regulation (95.8%); moxibustion combined with acupuncture best modulated IL-6 (92.6%); and acupoint injection was best for CRP regulation (99.4%).
Conclusion	Acupuncture and related therapies are effective for CPID, with differences in regulating specific inflammatory factors, providing an evidence-based foundation. However, limitations like publication bias exist, warranting validation by high-quality studies.

2. Clinical Practice Guidelines

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

2.1. Society of Obstetricians and Gynaecologists of Canada (SOGC, Canada) 2024 ⊕

Allaire C, Yong PJ, Bajzak K, Jarrell J, Lemos N, Miller C, Morin M, Nasr-Esfahani M, Singh SS, Chen I. Guideline No. 445: Management of Chronic Pelvic Pain. J Obstet Gynaecol Can. 2024 Jan;46(1):102283. https://doi.org/10.1016/j.jogc.2023.102283

19. Acupuncture may be considered as a complementary modality for chronic pelvic pain (conditional, low).

2.2. American College of Obstetricians and Gynecologists 2020 ⊕

American College of Obstetricians and Gynecologists. Chronic Pelvic Pain: ACOG Practice Bulletin, Number 218. Obstet Gynecol. 2020;135(3):e98-109. [219447]. doi

Based on evidence of benefit for the treatment of nongynecologic chronic pain, acupuncture and yoga can be considered for the management of chronic pelvic pain of musculoskeletal etiology.

2.3. European Association of Urology (EAU) 2019 ⊕

Chronic Pelvic Pain. European Association of Urology. 2019:12p. [196757].

Acupuncture is superior to sham acupuncture in improving symptoms and QoL. Level of evidence: 1a Recommendations : Offer acupuncture in PPS. Strength rating : Strong.

2.4. Society of Obstetricians and Gynaecologists of Canada (SOGC, Canada) 2018 ⊕

Jarrell JF, Vilos GA, Allaire C, Burgess S, Fortin C, Gerwin R, Lapensee L, Lea RH, Leyland NA, Martyn P, Shenassa H, Taenzer P. N° 164- Consensus Guidelines for the Management of Chronic Pelvic Pain. J Obstet Gynaecol Ca. 2018;40(11):e747-e787. [219457]. doi

Alternative therapies for chronic pelvic pain that have been fund helpful include **acupuncture**, physiotherapy, and biofeedback training.

2.5. American Society for Reproductive Medicine (ASRM, USA) 2014 ⊕

Practice Committee of the American Society for Reproductive Medicine. Treatment of pelvic pain associated with endometriosis: a committee opinion. Fertil Steril. 2014;101(4):927-35. [197666].

Acupuncture can also be considered an adjunctive therapy for pelvic pain associated whith endometriosis.

2.6. Royal College of Obstetricians and Gynaecologists (RCOG, UK) 2012 ⊕

- The Initial Management of Chronic Pelvic Pain Green-top Guideline No. 41. Royal College of Obstetricians and Gynaecologists. 2012:18p. [197626].

Nonpharmacological modalities such as transcutaneous nerve stimulation, acupuncture and other complementary therapies may be helpful for some women.

- Acupuncture and Chinese Herbal Medicine for Women with Chronic Pelvic Pain Scientific Impact Paper No. 30. Royal College of Obstetricians and Gynaecologists. 2012. [197593].

Acupuncture and CHM may have roles to play in the treatment of CPP associated with dysmenorrhoea, endometriosis, IBS and PID, either as an adjunct or as an alternative to conventional treatments. Unfortunately the current evidence lacks rigour and the available trials are frequently small, poorly designed, and inadequately reported. As a consequence we can only consider this preliminary evidence. This area clearly requires further more rigorous investigation

2.7. Société des Obstétriciens et Gynécologues du Canada (SOGC, Canada) 2005 ⊕

Jarrel JF, Vilos GA. Consensus Guidelines for the Management of Chronic Pelvic Pain. J Obstet Gynaecol Can.. 2005;27(9):869-87. [165659].

Alternative therapies for chronic pelvic pain that have been found helpful include acupuncture, physiotherapy, and biofeedback training.

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