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urinary retention after stroke

Rétention urinaire post-AVC : évaluation de l'acupuncture

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Zuo 2012 ☆

Zuo Xiao-Hong, Fu Li-Xin, Shen Xin. [Systematic evaluation of acupuncture for treatment of urinary retention after stroke]. Journal of Clinical Acupuncture and Moxibustion 2012;28 (11):51. [175435].

Objective	To evaluate the therapeutic effect of acupuncture for treatment of Urinary retention after stroke.
Methods	According to the requirements of evidence - based medicine, we retrieved the relative medical database in china , and clinically randomized controlled trials (RCTs) and quasi - RCTs were used as enrolled criteria, and the treatment group was treated with the main therapy of acupuncture , and the control group with the main therapy of conventional treatment of urinary retention in Western Medicine. The curative rate of urinary retention after stroke was used as evaluation index. Dates were extracted and Methodological quality evaluated by two reviewers independently. There were 8 Literatures (684 cases) enrolled in the last , which were conducted for Meta analysis by ReMan4.2.10.
Results	The total OR was 3.06 with 95% CI [2.19,4.27] of the curative rate in the 8 studies , the curative effect in the acupuncture group was superior to the conventional treatment group (p < 0.05) . Funnel plot was used to analyze the possible existence of publication bias , and the Funnel plot was asymmetric which showed the possible existence of publication bias existed.
Conclusion	Acupuncture is better than the conventional treatment in the treatment of urinary retention after stroke. There are defects in quality and quantities of trials , so further studies are necessary to perform in order to get more efficient evidence.

2. Clinical Practice Guidelines

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

2.1. Brazilian Academy of Neurology 2022 ∅

Minelli C, Bazan R, Pedatella MTA, Neves LO, Cacho RO, Magalhães SCSA, Luvizutto GJ, Moro CHC, Lange MC, Modolo GP, Lopes BC, Pinheiro EL, Souza JT, Rodrigues GR, Fabio SRC, Prado GFD, Carlos K, Teixeira JJM, Barreira CMA, Castro RS, Quinan TDL, Damasceno E, Almeida KJ, Pontes-Neto OM, Dalio

MTRP, Camilo MR, Tosin MHS, Oliveira BC, Oliveira BGRB, Carvalho JJF, Martins SCO. Brazilian Academy of Neurology practice guidelines for stroke rehabilitation: part I. Arq Neuropsiquiatr. 2022 Jun;80(6):634-652. <https://pubmed.ncbi.nlm.nih.gov/35946713>.

Neurogenic lower urinary tract dysfunction and fecal incontinence: For post-stroke NLUTD, behavioral interventions, specialized professional care, complementary therapies such as **acupuncture (electroacupuncture and moxibustion)**, transcutaneous electrical stimulation, physical therapy techniques, pharmacotherapy, and a combination of interventions have uncertain benefits. (Recommendation IIb-B)

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Last update: **21 Aug 2022 08:46**