Table des matières

Ankle instability

Instabilité de la cheville

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Hu 2025 (Umbrella Review)

Hu D, Sun H, Wang S, Wang H, Zheng X, Tang H, Hou H. Treatment and prevention of chronic ankle instability: An umbrella review of meta-analyses. Foot Ankle Surg. 2025 Feb;31(2):111-125. https://doi.org/10.1016/j.fas.2024.07.010

Backgound	Chronic ankle instability (CAI) is a common and highly disabling condition. Although several studies have evaluated and analyzed prevention and treatment strategies for CAI, an unbiased and systematic synthesis of evidence is required to provide the most powerful and comprehensive evidence-based measures for the its prevention and treatment of CAI. This study aimed to synthesize evidence from the existing literature addressing the treatment and prevention of CAI.
Methods	The PubMed, Embase, Cochrane, and Web of Science databases were systematically searched for relevant studies from inception to December 12, 2023. Data on effect sizes and corresponding 95 % confidence intervals for selected intervention measures were extracted. Systematic reviews were assessed for quality of included studies using a measurement tool (i.e., “AMSTAR 2”).
Results	In total, 37 studies were included, among which 21 (57 %) were of high or moderate quality. Strong evidence suggested that lower weight ($P < 0.001$), lower body mass index ($P = 0.002$), and non-stability defects ($P = 0.04$) significantly reduced the risk of developing CAI. Strong evidence supported exercise and moderate evidence supported manual therapy, **acupuncture**, and surgery for improving CAI. Additionally, external support plays an active role in the treatment process of CAI.
Conclusion	This is the first study synthesizing evidence supporting interventions for the treatment and prevention of CAI. Low body weight and body mass index were effective preventive measures against CAI. Exercise, manual therapy, acupuncture, and surgery can improve ankle function in patients with CAI. Plantar sensory treatment and neuromuscular training may be good therapeutic options for patients with CAI.

1.1.2. Luan 2023

Luan L, Zhu M, Adams R, Witchalls J, Pranata A, Han J. Effects of acupuncture or similar needling therapy on pain, proprioception, balance, and self-reported function in individuals with chronic ankle instability: A systematic review and meta-analysis. Complement Ther Med. 2023 Oct;77:102983. https://doi.org/10.1016/j.ctim.2023.102983

Objective	Acupuncture or similar needling therapy has long been used to improve well-being, but its effectiveness in management of chronic ankle instability (CAI) is unclear. To investigate the efficacy of acupuncture or similar needling therapy on pain, proprioception, balance, and self-reported function in individuals with CAI.
Methods	Nine databases (PubMed, Embase, Cochrane Library, Web of Science, EBSCO, PEDro, CNKI, WanFang, and CQVIP) were systematically searched from inception to April 2023. This study included randomized controlled trials involving acupuncture or similar needling therapy as an intervention for individuals with CAI. Data were extracted independently by two assessors using a standardized form. Literature quality and risk bias were assessed by using the PEDro scale.
Results	**Twelve trials (n = 571)** were found, of which the final meta-analysis was conducted with eight. Different studies employ varying treatments, including specific needle types, techniques, and therapeutic frameworks. Compared to control without acupuncture or similar needling therapy, acupuncture or similar needling intervention resulted in improved pain (WMD 1.33, 95 % CI 0.14-2.52, I^2=90 %, p = 0.03), proprioception (active joint position sense, WMD 1.71, 95 % CI 0.95-2.48, I^2=0 %, p < 0.0001), balance (SMD 0.54, 95 % CI 0.03-1.04, I^2=46 %, p = 0.04), and self-reported function (Cumberland Ankle Instability Tool (WMD 2.92, 95 % CI 0.94-4.90, I^2=78 %, p = 0.004); American Orthopedic Foot and Ankle Society (WMD 9.36, 95 % CI 6.57-12.15, I^2=0 %, p < 0.001); Foot and Ankle Ability Measure: activities of daily living (WMD 5.09, 95 % CI 1.74-8.44, I^2=0 %, p = 0.003)) for individuals with CAI.
Conclusions	The available evidence suggests that acupuncture or similar needling therapy may improve pain, proprioception, balance, and self-reported function in individuals with CAI, but more trials are needed to verify these findings. Furthermore, various needles and techniques using in different studies have resulted in methodologic limitations that should be addressed in the future.

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