Table des matières

1. Systematic Reviews and Meta-Analysis 1
1.1. Generic Acupuncture 1
1.1.1. Timis 2021 Ø 1
1.1.2. Gamret 2018 ☆ 1
1.1.3. Yeh 2017 ☆ 2
1.1.4. Coyle 2015 ☆ 3
1.1.5. Naldi 2009 3
1.2. Special Acupuncture Techniques 4
1.2.1. Fire Needle 4
1.2.1.1. Wang 2025 4
1.2.1.2. Xu 2024 5
1.2.1.3. Li 2020 5
1.2.1.4. Wang 2019 6
1.2.2. Cupping 6
1.2.2.1. Ma 2023 (Bloodletting cupping) 6
1.2.2.2. Xing 2020 7
2. Clinical Practice Guidelines 8
2.1. American Academy of Dermatology National Psoriasis Foundation (AAD, NPF, USA) 2020 ⊕ 8
2.2. Scottish Intercollegiate Guidelines Network (SIGN, Scotland) 2010 Ø 8

Psoriasis: Effectiveness of acupuncture

Psoriasis : évaluation de l'acupuncture

Articles connexes: - conduites thérapeutiques - pathologie - acupuncture expérimentale - qigong -

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Timis 2021 Ø

Timis TL, Florian IA, Mitrea DR, Orasan R. Mind-Body Interventions as Alternative and Complementary Therapies for Psoriasis: A Systematic Review of the English Literature. Medicina (Kaunas). 2021;57(5):410. [219198]. doi

Objective	Conventional therapeutic methods for psoriasis include topical and systemic drugs, phototherapy, and biologic agents. Despite the fact that these treatment methods, and especially biologic agents, are met with a considerable reduction in disease activity, they can sometimes be costly and are nonetheless accompanied by high risks of adverse events, ranging from mild to debilitating. Therefore, complementary and alternative medicine (CAM), especially mind-and-body interventions, such as acupuncture, psychotherapy, climatotherapy, and cupping may provide a cheaper and potentially beneficial outcome for these patients.
Methods	We performed a systematic review of articles pertaining to acupuncture, cupping, psychotherapy and meditation, as well climatotherapy and balneotherapy in the management of psoriasis, by using the PubMED, Medline and Google Academic research databases and reference cross-checking.
Results	**12 articles on acupuncture**, 9 on dry or wet cupping, 27 concerning meditation, hypnosis or psychotherapy, and 34 regarding climate therapy or balneotherapy were found.
Discussion and conclusions	Currently, there is a lack of evidence in the English literature to support acupuncture as an effective alternative therapy for psoriasis, whereas cupping has been described in the majority of instances to result in Koebner phenomenon and clinical worsening. Stress management therapies such as psychotherapy, hypnosis, and meditation have shown promising results as complementary treatment methods. Climatotherapy and balneotherapy have already been proven as effective means of achieving clinical improvement in psoriasis.

1.1.2. Gamret 2018 ☆

Gamret AC, Price A, Fertig RM, Lev-Tov H, Nichols AJ. Complementary and Alternative Medicine Therapies for Psoriasis: A Systematic Review. JAMA Dermatol. 2018. [168677].

Importance	Up to 51% of patients with psoriasis report the use of complementary and alternative medicine (CAM) in their treatment regimen, although it is unclear which CAM therapies are effective for treatment of psoriasis.
Objective	This review compiles the evidence on the efficacy of the most studied CAM modalities for treatment of patients with plaque psoriasis and discusses those therapies with the most robust available evidence. Evidence Review: PubMed, Embase, and ClinicalTrials.gov searches (1950-2017) were used to identify all documented CAM psoriasis interventions in the literature. The criteria were further refined to focus on those treatments identified in the first step that had the highest level of evidence for plaque psoriasis with more than 1 randomized clinical trial supporting their use. This excluded therapies lacking randomized clinical trial (RCT) data or showing consistent inefficacy.
Findings	Primary CAM therapy searches identified 457 articles, of which 107 articles were retrieved for closer examination. Of those articles, 54 were excluded because the CAM therapy did not have more than 1 RCT on the subject or showed consistent lack of efficacy. An additional 7 articles were found using references of the included studies, resulting in a total of 44 RCTs (17 double-blind, 13 single-blind, and 14 nonblind), 10 uncontrolled trials, 2 open-label nonrandomized controlled trials, 1 prospective controlled trial, and 3 meta-analyses. Compared with placebo, application of topical indigo naturalis, studied in 5 RCTs with 215 participants, showed significant improvements in the treatment of psoriasis. Treatment with curcumin, examined in 3 RCTs (with a total of 118 participants), 1 nonrandomized controlled study, and 1 uncontrolled study, conferred statistically and clinically significant improvements in psoriasis plaques. Fish oil treatment was evaluated in 20 studies (12 RCTs, 1 open-label nonrandomized controlled trial, and 7 uncontrolled studies); most of the RCTs showed no significant improvement in psoriasis, whereas most of the uncontrolled studies showed benefit when fish oil was used daily. Meditation and guided imagery therapies were studied in 3 single-blind RCTs (with a total of 112 patients) and showed modest efficacy in treatment of psoriasis. **One meta-analysis of 13 RCTs examined the association of acupuncture with improvement in psoriasis and showed significant improvement with acupuncture compared with placebo**.
Conclusions and Relevance	The CAM therapies with the most robust evidence of efficacy for treatment of psoriasis are indigo naturalis, curcumin, dietary modification, fish oil, meditation, and **acupuncture**. This review will aid practitioners in advising patients seeking unconventional approaches for treatment of psoriasis.

1.1.3. Yeh 2017 ☆

Yeh ML, Ko SH, Wang MH, Chi CC, Chung YC. Acupuncture-Related Techniques for Psoriasis: A Systematic Review with Pairwise and Network Meta-Analyses of Randomized Controlled Trials. J Altern Complement Med. 2017;23(12):930-940. [52494].

Objective	There has be a large body of evidence on the pharmacological treatments for psoriasis, but whether nonpharmacological interventions are effective in managing psoriasis remains largely unclear. This systematic review conducted pairwise and network meta-analyses to determine the effects of acupuncture-related techniques on acupoint stimulation for the treatment of psoriasis and to determine the order of effectiveness of these remedies.
Methods	This study searched the following databases from inception to March 15, 2016: Medline, PubMed, Cochrane Central Register of Controlled Trials, EBSCO (including Academic Search Premier, American Doctoral Dissertations, and CINAHL), Airiti Library, and China National Knowledge Infrastructure. Randomized controlled trials (RCTs) on the effects of acupuncture-related techniques on acupoint stimulation as intervention for psoriasis were independently reviewed by two researchers.

Results	A total of **13 RCTs with 1,060 participants** were included. The methodological quality of included studies was not rigorous. Acupoint stimulation, compared with non-acupoint stimulation, had a significant treatment for psoriasis. However, the most common adverse events were thirst and dry mouth. Subgroup analysis was further done to confirm that the short-term treatment effect was superior to that of the long-term effect in treating psoriasis. Network meta-analysis identified acupressure or acupoint catgut embedding, compared with medication, and had a significant effect for improving psoriasis. It was noted that acupressure was the most effective treatment.
ConclusionS	**Acupuncture-related techniques could be considered as an alternative or adjuvant therapy for psoriasis in short term**, especially of acupressure and acupoint catgut embedding. This study recommends further well-designed, methodologically rigorous, and more head-to-head randomized trials to explore the effects of acupuncture-related techniques for treating psoriasis.

1.1.4. Coyle 2015 ☆

Coyle M, Deng J, Zhang Al, Yu J, Guo X, Xue Cc, Lu C. Acupuncture therapies for psoriasis vulgaris: a systematic review of randomized controlled trials. Forsch Komplementmed. 2015. 22(2):102-9. [182979].

Objective	The purpose of this review was to evaluate the efficacy and safety of acupuncture therapies in the treatment of psoriasis vulgaris.
Methods	Embase, CENTRAL, PubMed, AMED, CINAHL, CNKI, CQVIP, CBM, and Wanfang databases were searched from inceptions to May 2013 for prospective randomized controlled trials evaluating acupuncture therapies for psoriasis vulgaris. No language limitations were applied. Studies were assessed using the Cochrane risk of bias tool. The primary outcome was Psoriasis Area Severity Index (PASI) score.
Results	**Six studies (involving 522 participants)** met the eligibility criteria for this review, and 5 were included in quantitative analysis. Due to the diversity of interventions, comparators and reported outcomes, meta-analysis was not possible. Results from single studies produced conflicting results for the outcomes PASI reduction, lesion reduction (non-PASI), PASI score, and relapse rate.
Conclusions	**There is some evidence of benefit of acupuncture therapies for the treatment of psoriasis vulgaris**. However, the conclusions are limited by the small number of included trials and conflicting results from single studies. More research is needed to clarify the effect of acupuncture therapies for psoriasis vulgaris.

1.1.5. Naldi 2009

Naldi L, Rzany B. Psoriasis (Chronic Plaque). Clin Evid (Online). 2009. [153026]

Objectives	Psoriasis affects 1-3% of the population, in some people causing changes to the nails and joints in addition to skin lesions.

Methods	We conducted a systematic review and aimed to answer the following clinical questions: What are the effects of systemic drug treatments, topical drug treatments, and non-drug treatments (other than ultraviolet light) for chronic plaque psoriasis? What are the effects of ultraviolet light treatments for chronic plaque psoriasis? What are the effects of combined treatment with drugs plus ultraviolet light on chronic plaque psoriasis? What are the effects of combined systemic plus topical drug treatments for chronic plaque psoriasis? We searched: Medline, Embase, The Cochrane Library, and other important databases up to August 2007 (Clinical Evidence reviews are updated periodically; please check our website for the most up-to-date version of this review). We included harms alerts from relevant organisations such as the US Food and Drug Administration (FDA) and the UK Medicines and Healthcare products Regulatory Agency (MHRA).
Results	We found 122 systematic reviews, RCTs, or observational studies that met our inclusion criteria. We performed a GRADE evaluation of the quality of evidence for interventions.
Conclusions	In this systematic review we present information relating to the effectiveness and safety of the following interventions: **acupuncture**, adding calcipotriol (topical) to psoralen plus ultraviolet light A or ultraviolet light B, adding oral retinoids to psoralen plus ultraviolet A (PUVA), alefacept, balneotherapy, ciclosporin, dithranol, T cell-targeted therapies, cytokine blocking agents, emollients (alone or plus ultraviolet light B), etanercept, fish oil supplementation, fumaric acid derivatives, Goeckerman treatment, heliotherapy, infliximab, Ingram regimen, keratolytics (salicylic acid, urea), leflunomide, methotrexate, oral pimecrolimus, phototherapy plus balneotherapy, psoralen plus ultraviolet A, psychotherapy, oral retinoids (alone or with ultraviolet light B), systemic drug treatments plus topical vitamin D derivatives, tars, tazarotene, topical corticosteroids (alone or plus oral retinoids), topical Vitamin D derivatives, ultraviolet light A, and ultraviolet light B.

1.2. Special Acupuncture Techniques

1.2.1. Fire Needle

1.2.1.1. Wang 2025

Wang J, Zheng B, Chen P, Zhao Y. Efficacy of oral traditional Chinese medicine combined with fire needling in treating psoriasis vulgaris: a meta-analysis. Arch Dermatol Res. 2025 Apr 29;317(1):741. https://doi.org/10.1007/s00403-025-04074-5

Background	This meta-analysis investigates the efficacy of oral traditional Chinese medicine (TCM) combined with fire needling in the treatment of psoriasis vulgaris.
Methods	**Fifteen randomized controlled trials (RCTs)** were included, evaluating key outcomes such as overall response rate (ORR), Psoriasis Area and Severity Index (PASI) scores, TCM syndrome scores, and pruritus severity scores.
Results	The results indicated that the combination of oral TCM and fire needling significantly improved the ORR (odds ratio (OR) 3.49, 95% confidence interval (CI) [2.48, 4.93], $p < 0.0001$) and significantly reduced PASI scores (mean difference (MD) - 5.31, 95% CI [- 7.37, - 3.25], $p < 0.0001$). In addition, it improved TCM syndrome scores (MD - 3.43, 95% CI [- 5.41, - 1.46], $p < 0.0001$) and reduced pruritus severity scores (MD - 0.77, 95% CI [- 0.90, - 0.65], $p < 0.0001$). Sensitivity analysis confirmed the robustness of the findings, and no significant publication bias was detected. The GRADE assessment indicated that evidence quality for ORR and PASI scores was moderate, while the quality for TCM syndrome and pruritus severity scores was low.

Conclusion	Overall, this meta-analysis demonstrates that combining oral TCM with fire needling is an effective and reliable treatment for psoriasis vulgaris, with potential for broader clinical application. Future studies should focus on enhancing the rigor of RCTs and standardizing treatment protocols to further validate these findings.

1.2.1.2. Xu 2024

Xu J, Zhou Q, Xie F, Cao Y, Yang X, Tao M. Effect of fire needle combined with traditional Chinese medicine on psoriasis: A systematic review and meta-analysis. Medicine (Baltimore). 2024 Feb 16;103(7):e35832. https://doi.org/10.1097/MD.0000000000035832

Backgound	The mechanism of action of fire acupuncture and Chinese medicine in psoriasis is unclear. In this paper, the efficacy of the 2 therapies was compared through a comprehensive analysis of their recurrence rates for clinical reference.
Methods	In this meta-analysis, we searched PubMed, Embase, Cochrane Library, CNKI, Wanfang, CQVIP, and CBM data from the establishment of the databases to May 2023. The study proposed to use randomized controlled trial research methods, excluding published literature, unpublished literature, literature with incomplete or inadequate information, animal experiments, literature reviews and systematic studies. Data were processed using STATA 15.1 software.
Results	Our group previous study found that the clinical efficacy of the fire-acupuncture group was significantly improved compared to that of Chinese herbal medicine alone (RR = 1.20, 95% CI: 1.13-1.27). Also, there were significant reductions in Psoriasis Area and Severity Index (PASI) score (SMD = -1.04,95% CI: -1.48 to -0.60), area of skin damage (SMD = -0.40,95% CI: -0.75 to -0.04), and pruritus (SMD = -1.04,95% CI: -1.32 to -0.76). Our previous study found that Dermatology Life Quality Index (DLQI) was significantly lower in the fire acupuncture group compared to herbal medicine alone (SMD = -1.61,95% CI: -3.08 to -0.15). The combined analysis found that the recurrence rate was significantly lower in the fire-acupuncture group compared to herbal medicine alone (RR = 0.21,95% CI:0.07-0.60).
Conclusion	Fire needle can improve the efficacy of TCM in the treatment of psoriasis, including the area, severity and itching of skin lesions, and reduce the recurrence rate, which is worthy of clinical promotion.

1.2.1.3. Li 2020

Li Meihong. [Meta analysis of effectiveness of fire acupuncture in treatment of psoriasis vulgaris]. Shaanxi Journal of TCM. 2020. [212938].

Objective	The clinical effectiveness of fire acupuncture in the treatment of psoriasis vulgaris was analyzed by Meta analysis.
Methods	To collect the randomized controlled trials of fire acupuncture therapy for psoriasis vulgaris in the past 20 years, and each included study was evaluated for quality and risk of bias by two researchers in accordance with Cochrane manual 5. 1. 0, and RevMan 5. 3 was used to assess the risk of quality and bias of each included study. Consolidated analysis of the research in accordance with the requirements of the software.
Results	There were **12 studies with 1, 088 patients** with psoriasis vulgaris. Meta analysis results showed that the difference between fire acupuncture treatment and the control group was statistically significant, and the heterogeneity test indicated that there was slight heterogeneity between the two groups (I~2 = 10%);the total effective rate of OR (95% CI)=2. 42 (1. 75, 3. 35), the effective rate of the intervention group was higher than that of the control group, and there was significant difference (P<0. 01).

Conclusion	The results of literature study showed that fire acupuncture had obvious advantages in the treatment of psoriasis vulgaris compared with routine treatment.

1.2.1.4. Wang 2019

Wang Xingxing, Wu Qing, Ma Xiaohong, Jing Huiling. [Meta Analysis on Efficacy and Safety of Fire Acupuncture in the Treatment of Psoriasis Vulgaris]. Journal of Clinical Acupuncture and Moxibustion. 2019;35(11):53. [203718]. DOI

Objective	To evaluate the efficacy and safety of fire acupuncture in the treatment of psoriasis vulgaris.
Methods	Clinical controlled trials were retrieved in the databases of CNKI, Wanfang, VIP, Chinese biomedical literature and Pubmed from Jan. 1996 to Oct. 2018. RevMan5. 3 software provided by Cochrane collaboration was used for the analysis.
Results	A total of l 7 randomized controlled trials (RCTs) were included. The quality of literature was relatively low, with a total of 1 , 607 participants (795 in the control group and 8 l 2 in the treatment group). Meta analysis showed that the effective rate was better in the treatment group than that in the control group(OR =3. 06, 95% CI (2. 19, 4. 28), Z= 6. 56, P Z0. 001). The PASI score was analyzed in 1 1 studies, and the results showed that the improvement of PASI score in the fire acupuncture was better than that of the control group(WMD = -2. 65, 95%CI(-3. 92, - 1. 37), Z =4. 06, P Z0. 001). Three studies were conducted to compare the recurrence rate. The results showed that the recurrence rate of the fire acupuncture group was lower than that of the control groups(OR = 0. 32, 95% CI(0. 17, 0. 60), Z = 3. 53, P <0. 05). Adverse reactions were compared in 10 studies, and the results showed that the adverse reactions in the fire acupuncture group were lower than those in the control group(OR =0. 54, 95% CI(0. 32, 0. 93) , Z = 2. 23, P <0. 05).
Conclusion	Fire acupuncture is effective for psoriasis vulgaris with high safety.

1.2.2. Cupping

1.2.2.1. Ma 2023 (Bloodletting cupping)

Ma X, Li D, Zhao M, He J, Yang F, Kong J. Bloodletting cupping combined with conventional measures therapy for psoriasis: A systematic review and meta-analysis of randomized controlled trials. Front Med (Lausanne). 2023 Feb 16;10:1132928. https://doi.org/10.3389/fmed.2023.1132928

Backgound	Psoriasis is an immune-mediated inflammatory disease prone to recurrence. Some studies indicated that bloodletting cupping combined with conventional measures therapy had been proposed as a treatment strategy for psoriasis. Therefore, we performed a systematic review and meta-analysis to assess the effectiveness of this combination therapy in reducing the severity of disease in patients with psoriasis.

Methods	The following electronic databases were searched for articles from January 1, 2000 to March 1, 2022: PubMed, Embase, the Cochrane Central Register of Controlled Trials (CENTRAL), Chinese Biomedical Literature Database (CBM), Chinese Scientific Journal Database (VIP database), Wan-Fang Database, and China National Knowledge Infrastructure (CNKI). The language was not restricted while performing the search. The quality of articles was evaluated using Rev. Man 5.4 software (provided by the Cochrane Collaboration), comparing bloodletting cupping combined with conventional measures therapy to conventional measures treatments. The studies obtained randomized controlled trials (RCTs) of bloodletting cupping combined with conventional standard treatment for treating psoriasis. Two trained researchers (Xiaoyu Ma and Jiaming He) independently reviewed the literature, extracted data based on exclusion and inclusion criteria, and assessed the quality of the included studies. We estimated the aggregate data using a random effects model.
Findings	We identified 164 studies. **Ten studies** met the inclusion criteria for the meta-analysis. The primary outcome indicator was the total number of effective individuals. Secondary outcomes included the Psoriasis Area and Severity Index (PASI), adverse effects, and the Dermatology Life Quality Index (DLQI). Compared with conventional treatments, bloodletting cupping combined with conventional medicine yielded an improved total effective number of persons (RR = 1.15, 95%CI: 1.07 to 1.22, $p < 0.00001$), PASI (MD = -1.11, 95%CI: -1.40 to -0.82, $p < 0.00001$) and DLQI scores (MD = -0.99, 95%CI: -1.40 to -0.59, $p < 0.0001$). We found no significant difference in adverse reactions (RR = 0.93, 95%CI: 0.46 to 1.90, $p = 0.85$). The heterogeneity test showed the total effective numbers ($p < 0.00001$, $I^2 = 43\%$) and PASI ($p < 0.00001$, $I^2 = 44\%$) and DLQI scores ($p < 0.00001$, $I^2 = 0\%$).
Interpretation	Bloodletting cupping combined with conventional treatment can achieve the ideal treatment for psoriasis. However, the combined treatment in psoriasis needs to be further evaluated in high-quality RCTs with large sample sizes to enable future studies in clinical use.

1.2.2.2. Xing 2020

Xing M, Ding X, Zhang J, Kuai L, Ru Y, Sun X, Ma T, Miao X, Liu L, Wang Y, Li B, Li X. Moving cupping therapy for plaque psoriasis: A PRISMA-compliant study of 16 randomized controlled trials. Medicine (Baltimore). 2020 Oct 9;99(41):e22539. https://doi.org/10.1097/MD.0000000000022539

Backgound	Clinical treatment of plaque psoriasis typically involves a comprehensive therapy, which is expensive and unsatisfactory, and some medications have serious side effects. Moving cupping therapy has shown good clinical efficacy in the treatment of plaque psoriasis; it can significantly relieve skin inflammation and excessive thickening of plaque psoriasis and has fewer side effects. However, a comprehensive evaluation of the current clinical evidence regarding its use is lacking.
Methods	Several databases were systematically searched from inception to March 2, 2020, including PubMed, Embase, Cochrane Central Register of Controlled Trials, China Network Knowledge Infrastructure, and Wan Fang. This review included randomized controlled trials on plaque psoriasis treatment with the use of moving cupping and in combination with Chinese herbs or conventional Western medicine therapy. These trial findings were compared with the treatment results using placebo, pharmaceutical medications, or Chinese herbs. Moving cupping treatment frequency was also compared.

Results	**Sixteen trials with 1164 participants** met the inclusion criteria. Meta-analysis showed that the intervention group (moving cupping therapy) had a significant effect compared with the no-moving cupping therapy group (weighted mean difference = -1.22, 95% confidence interval [CI] [-1.58, -0.85], P < .00001 random model; I = 85%). Furthermore, moving cupping (weighted mean difference = -1.19, 95% CI [-1.98, -0.39], P = .003 random model; I = 85%) or combined with pharmaceutical medications (weighted mean difference = -1.55, 95% CI [-1.89, -1.20], P < .00001 random model; I = 0%) were better than pharmaceutical medications alone in treating plaque psoriasis. Cupping therapy significantly improved psoriasis recurrence rate (risk ratio = 0.33, 95% CI [0.16, 0.68], P = .003 fixed model; I = 28%). However, for the visual analogue score, moving cupping showed no obvious advantages (weighted mean difference = -0.27, 95% CI [-0.71, 0.17], P = .22 random model; I = 64%). Moreover, studies reported that moving cupping reduced serum tumor necrosis factor-α and vascular endothelial growth factor levels more significantly than pharmaceutical medications. Moving cupping was associated with few transient adverse reactions, such as redness, itching, and local skin burning.
Conclusion	Moving cupping therapy could be an effective treatment either alone or as a combination therapy for plaque psoriasis. However, further large-scale, rigorously designed trials are needed to confirm these findings.

2. Clinical Practice Guidelines

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

2.1. American Academy of Dermatology National Psoriasis Foundation (AAD, NPF, USA) 2020 ⊕

Elmets CA, Korman NJ, Prater EF, Wong EB, Rupani RN, Kivelevitch D, Armstrong AW, Connor C, et al. Joint AAD-NPF Guidelines of care for the management and treatment of psoriasis with topical therapy and alternative medicine modalities for psoriasis severity measures. J Am Acad Dermatol. 2021;84(2):432-70. [204393]. doi

Acupuncture may have a therapeutic effect on chronic plaque psoriasis and can be considered as adjunctive therapy in psoriasis based on patient interest and practice availability.

2.2. Scottish Intercollegiate Guidelines Network (SIGN, Scotland) 2010 Ø

Diagnosis and management of psoriasis and psoriatic arthritis in adults. Scottish Intercollegiate Guidelines Network (SIGN). 2010:72p. [196485].

There is insufficient evidence to support recommendations concerning any complementary therapy [acupuncture included] for the treatment of psoriasis or PsA (psoriatic arthritis).

From:
http://www.wiki-mtc.org/ - **Encyclopédie des sciences médicales chinoises**

Permanent link:
http://www.wiki-mtc.org/doku.php?id=acupuncture:evaluation:dermatologie:07.%20psoriasis

Last update: **03 Dec 2025 14:55**