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metabolic syndrome: acupuncture effectiveness

Syndrome métabolique : évaluation de l'acupuncture

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Li 2021

Li X, Jia HX, Yin DQ, Zhang ZJ. Acupuncture for metabolic syndrome: systematic review and meta-analysis. Acupuncture in Medicine. 2021;39(4):253-263. [221960].
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Background	Metabolic syndrome (MetS) is a cluster of conditions associated with an increased risk of cardiovascular disease and diabetes mellitus. Acupuncture may have benefits in the treatment of MetS. This systematic review with meta-analysis aimed to determine the effectiveness and safety of acupuncture therapy in the treatment of MetS.
Methods	Large-sample randomized controlled trials (RCTs) of acupuncture treatment for MetS were extracted from multiple Chinese and English databases and analyzed using meta-analysis to evaluate the efficacy/effectiveness of acupuncture with respect to various MetS indices in comparison with control treatments including conventional medications (CMs) and lifestyle intervention (LI), together and separately.
Results	A total of **13 RCTs** were identified with 423 subjects undergoing acupuncture regimens and 411 receiving control interventions. Active acupuncture yielded better outcomes than sham acupuncture with respect to improving multiple MetS indices. Acupuncture monotherapy had similar effectiveness in controlling triglyceride levels and high-density lipoprotein levels compared to CMs. The overall effects of adjunctive acupuncture were markedly greater than those of controls (CMs + LI, CMs, and LI) with respect to waist circumference with a mean difference of −5.11 cm ($Z = 4.57$, $p < 0.001$) and body mass index with a mean difference of −2.54 ($Z = 5.38$, $p < 0.001$), and improvements were observed in most hyperlipidemia indices and fasting blood glucose. An evidence-based acupuncture regimen was identified as a future treatment strategy for MetS.
Conclusion	Acupuncture is beneficial in the treatment of MetS and could serve as an alternative therapy for MetS-associated conditions. Larger-scale RCTs are needed to confirm the efficacy/effectiveness of our recommended evidence-based acupuncture regimen in MetS.

1.2. Special Acupuncture Techniques

1.2.1. Cupping

Wu LK, Chen YC, Hung CS, Yen CY, Chang Chien CY, Ciou JR, Torng HH, Chang YC, Hua S, Lu PN, Liu YY, Lai CY, Kung YL, Huang HK, Chen ZK, Ho TJ. The efficacy and safety of cupping as complementary and alternative therapy for metabolic syndrome: A systematic review and meta-analysis. Medicine (Baltimore). 2023 Mar 31;102(13):e33341. https://doi.org/10.1097/MD.0000000000033341

Introduction	This systematic review and meta-analysis aimed to assess the efficacy and safety of cupping therapy in patients with metabolic syndrome (MetS).
Methods	This systematic review focused on patients with MetS and included randomized controlled trials (RCTs) that compared the effects of cupping therapy with control groups. A total of 12 electronic databases were searched from inception until February 03, 2023. The main outcome after the meta-analysis was waist circumference; the others included anthropometric variables, blood pressure, lipid profile, fasting blood glucose level, and high-sensitivity C-reactive protein level. The incidence of adverse events and the follow-up courses were also evaluated. Risk of bias (ROB) was evaluated using ROB 2.0 from the Cochrane Handbook.
Results	This systematic review included **five studies involving 489 patients**. Some risks of bias were also identified. The meta-analysis revealed a statistically significance in waist circumference (MD = -6.07, 95% CI: -8.44 to -3.71, P < .001, I2 = 61%, τ2 = 3.4), body weight (MD = -2.46, 95% CI: -4.25 to -0.68, P = .007, I2 = 0%, τ2 = 0) and body mass index (MD = -1.26, 95% CI: -2.11 to -0.40, P = .004, I2 = 0%, τ2 = 0) between the cupping therapy and control groups. However, there were no significant results in total fat percentage and blood pressure values. Regarding biochemical markers, cupping significantly lowered the concentration of low-density lipoprotein cholesterol (MD = -3.98, 95% CI: -6.99 to -0.96, P = .010, I2 = 0%, τ2 = 0) but had no significant effect on total cholesterol, triglyceride, high-density lipoprotein cholesterol, fasting blood glucose, and high-sensitivity C-reactive protein. 3 RCTs reported no adverse events.
Conclusions	Despite some ROB and low to substantial heterogeneity of the included studies, cupping therapy can be considered a safe and effective complementary intervention for reducing waist circumference, body weight, body mass index, and low-density lipoprotein cholesterol in patients with MetS. In the future, well-designed, high-quality, rigorous methodology, and long-term RCTs in this population are required to assess the efficacy and safety of cupping therapy.

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