

Table des matières

1. Systematic Reviews and Meta-Analysis	1
1.1. Generic Acupuncture	1
1.1.1. Streitberger 2006 ☆☆	1
1.1.2. Vickers 1996 ☆	1
1.2. Special Clinical Forms	2
1.2.1. Nausea and vomiting in pregnancy	2
1.2.2. Chemotherapy-induced nausea and vomiting:	2
1.2.3. Postoperative nausea and vomiting	2
1.2.4. Nausea and vomiting in palliative care	2
1.2.5. Gag reflex in dental treatment	2
2. Overviews of Systematic Reviews	2
2.1. Ezzo 2006 ☆	2
3. Clinical Practice Guidelines	3
3.1. United European Gastroenterology (UEG) and the European Society for Neurogastroenterology and Motility (ESNM) 2024 ⊕	3
3.2. BC Centre for Palliative Care (Canada) 2017 ⊕	4
3.3. Fédération Bruxelloise de Soins Palliatifs (FBSP, Belgique) 2017 ⊕	4

Nausea and Vomiting:

Nausées et vomissements : évaluation de l'acupuncture

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Streitberger 2006 ☆☆

Streitberger K, Ezzo J, Schneider A. Acupuncture for Nausea and Vomiting: an Update of Clinical and Experimental Studies. Auton Neurosci. 2006. [141397].

The objective of this overview is to summarize existing knowledge about the effects of acupuncture-point stimulation on nausea and vomiting. Systematic reviews on postoperative nausea and vomiting, chemotherapy-induced nausea and vomiting, and pregnancy-related nausea and vomiting exist. Several randomised trials, but no reviews, exist for motion sickness. For postoperative nausea and vomiting, results from 26 trials showed acupuncture-point stimulation was effective for both nausea and vomiting. For chemotherapy-induced nausea and vomiting, results of 11 trials differed according to modality with acupressure appearing effective for first-day nausea, electroacupuncture appearing effective for first-day vomiting, and noninvasive electrostimulation appearing no more effective than placebo for any outcome. For pregnancy-related nausea and vomiting, results were mixed. Experimental studies showed effects of P6-stimulation on gastric myoelectrical activity, vagal modulation and cerebellar vestibular activities in functional magnetic resonance imaging. There is good clinical evidence from more than 40 randomised controlled trials that acupuncture has some effect in preventing or attenuating nausea and vomiting. A growing number of experimental studies suggest mechanisms of action.

1.1.2. Vickers 1996 ☆

Vickers AJ. Can Acupuncture have Specific Effects on Health? A Systematic Review of Acupuncture Antiemesis Trials. Journal of the Royal Society of Medicine. 1996;89(6):303-11. [86949].

The effects of acupuncture on health are generally hard to assess. Stimulation of the P6 acupuncture point is used to obtain an antiemetic effect and this provides an excellent model to study the efficacy of acupuncture. Thirty-three controlled trials have been published worldwide in which the P6 acupuncture point was stimulated for treatment of nausea and/or vomiting associated with chemotherapy, pregnancy, or surgery. P6 acupuncture was equal or inferior to control in all four trials in which it was administered under anaesthesia; in 27 of the remaining 29 trials acupuncture was statistically superior. A second analysis was restricted to 12 high-quality randomized placebo-controlled trials in which P6 acupuncture point stimulation was not administered under anaesthesia.

Eleven of these trials, involving nearly 2000 patients, showed an effect of P6. The reviewed papers showed consistent results across different investigators, different groups of patients, and different forms of acupuncture point stimulation. Except when administered under anaesthesia, P6 acupuncture point stimulation seems to be an effective antiemetic technique. Researchers are faced with a choice between deciding that acupuncture does have specific effects, and changing from 'Does acupuncture work?' to a set of more practical questions; or deciding that the evidence on P6 antiemesis does not provide sufficient proof, and specifying what

would constitute acceptable evidence.

1.2. Special Clinical Forms

1.2.1. Nausea and vomiting in pregnancy

see [corresponding item](#)

1.2.2. Chemotherapy-induced nausea and vomiting:

see ['corresponding item](#)

1.2.3. Postoperative nausea and vomiting

see [corresponding item](#)

1.2.4. Nausea and vomiting in palliative care

see [corresponding item](#)

1.2.5. Gag reflex in dental treatment

see [corresponding item](#)

2. Overviews of Systematic Reviews

2.1. Ezzo 2006 ☆

Ezzo J, Streitberger K, Schneider A. Cochrane Systematic Reviews Examine P6 Acupuncture-Point Stimulation for Nausea and Vomiting. Journal of Alternative and Complementary Medicine. 2006;12(5):489-95. [143595].

Objectives	In 1998, the National Institutes of Health Consensus Statement on Acupuncture concluded that promising results have emerged showing the efficacy of acupuncture in adult postoperative and chemotherapy induced nausea and vomiting. The acupuncture point, P6 had been the point used in most of the trials. OBJECTIVES: To summarize Cochrane systematic reviews assessing P6 stimulation for nausea and vomiting.
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Results	Reviews were found on postoperative sickness, chemotherapy-induced nausea and vomiting, and pregnancy-related nausea and vomiting. Results for postoperative nausea and vomiting show the most consistent results with 26 trials and more than 3000 patients showing the superiority of real P6 stimulation over sham for both adults and children and for both nausea and vomiting. Pooled data of trials including different antiemetics showed that P6 stimulation seems to be superior to antiemetic medication for nausea and equivalent for vomiting. P6 stimulation was similarly effective across the different methods of stimulation, both invasive or noninvasive. Results for chemotherapy-induced nausea and vomiting showed 11 trials and over 1200 patients. Electroacupuncture, but not manual acupuncture, was beneficial for first-day vomiting. Acupressure was effective for first-day nausea but not vomiting. Wristwatch-like electrical devices were not effective for any outcome. Results for pregnancy-related nausea and vomiting comprised six trials and approximately 1150 patients. Results were mixed with some trials showing positive and other trials equivocal results with no favor to a certain kind of method.
Conclusions	P6 stimulation may be beneficial for various conditions involving nausea and vomiting. The added value to modern antiemetics remains unclear. In patients on chemotherapy, future research should focus on patients for whom the problems are refractory. The next steps in research should include investigating whether acupuncture points added to P6 or individualizing treatment based on a Traditional Chinese Medicine diagnosis increases treatment effectiveness. It would also be worthwhile to identify predictors of response across the different conditions so that the individual patients can optimize acupuncture point therapy

3. Clinical Practice Guidelines

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

3.1. United European Gastroenterology (UEG) and the European Society for Neurogastroenterology and Motility (ESNM) 2024 ⊕

Malagelada C, Keller J, Sifrim D, Serra J, Tack J, Mulak A, Stengel A, Aguilar A, Drewes AM, Josefsson A, Bonaz B, Dumitrascu D, Keszthelyi D, Barba E, Carbone F, Zerbib F, Marchegiani G, Hauser G, Gourcerol G, Tornblom H, Hammer H, Aziz I, Matic JR, Mendive J, Nikaki K, Wauters L, Alcalá-González L, Waluga M, Jinga M, Corsetti M, Rommel N, Shidrawi R, De Giorgio R, Kadiramanathan S, Surdea-Blaga T. European Guideline on Chronic Nausea and Vomiting-A UEG and ESNM Consensus for Clinical Management. United European Gastroenterol J. 2025 Jan 4. <https://doi.org/10.1002/ueg2.12711>.

4.3.8 Non-Pharmacological Treatment Options. Statement 45. We recommend that patients with CVS are treated holistically, taking into account lifestyle changes, psychological support, and avoidance of trigger factors. *Quality of evidence: very low.* Although data is scarce, alternative therapies such as **acupressure or acupuncture** could be considered for CVS prevention [254, 255].

- 254. Bhandari and T. Venkatesan, “Novel Treatments for Cyclic Vomiting Syndrome: Beyond Ondansetron and Amitriptyline,” Current Treatment Options in Gastroenterology 14, no. 4 (2016): 495–506: Epub 2016/10/21, <https://doi.org/10.1007/s11938-016-0114-y>.
- 255. Hee, “Acupuncture in the Treatment of Hysterical Muslim and Functional Vomiting,” Medical Journal of Malaysia, no. 2 (1978): XXXIII.

3.2. BC Centre for Palliative Care (Canada) 2017 ⊕

B.C. Inter-Professional Palliative Symptom Management Guidelines. BC Centre for Palliative Care. 2017:304P. [219379]. [URL](#)

Nausea & Vomiting. Use of acupuncture or acupressure wrist bands.

3.3. Fédération Bruxelloise de Soins Palliatifs (FBSP, Belgique) 2017 ⊕

Source : <http://www.palliaguide.be/nausees-vomissements-soins-palliatifs/>

Si le contexte le permet, proposer des techniques de relaxation, **l'acupuncture** ou l'hypnose

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