

Table des matières

- 1. Systematic Reviews and Meta-Analysis** 1
 - 1.1. Generic Acupuncture 1
 - 1.1.1. Peng 2024 (combined with mirror therapy) 1
 - 1.1.2. Tao 2023 1

Dyskinesia after stroke

Dyskinésies post-AVC

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Peng 2024 (combined with mirror therapy)

Peng Y, Li N, Du X, Zhang G, Huang S, Ma J. Acupuncture combined with mirror therapy for post-stroke dyskinesia: A meta-analysis and systematic review. *Medicine (Baltimore)*. 2024 Jun 28;103(26):e38733. <https://doi.org/10.1097/MD.00000000000038733>

Background	Dyskinesia is one of the most common complications of stroke. Acupuncture therapy (AT) and mirror therapy (MT) are promising rehabilitation measures for the treatment of post-stroke dyskinesia. Although some studies suggested that AT and MT are effective and safe for dyskinesia, the effects, and safety remain uncertain due to lacking strong evidence. The purpose of this study is to investigate the efficacy and safety of AT combined with MT in the treatment of post-stroke dyskinesia.
Methods	We searched the following databases: PubMed, Web of Science, Cochrane Library, EMBASE, Medline, China Knowledge Network, WANFANG, and China Biomedical Literature Database, from inception to 1 January 2023 to identify eligible studies. Total effective rate, the Fugl-Meyer assessment scale (FMA) upper and lower limb scores, modified Barthel index scores, Berg balance scale, modified Ashworth scale, and adverse reactions were adopted as outcome indicators. The Grading of Recommendations Assessment Development and Evaluation system was used by 2 independent reviewers to assess the quality of evidence for the outcome indicators included in the study. The statistical analysis was conducted by RevMan V.5.4 software.
Results	A total of 24 randomized controlled studies included 2133 patients with post-stroke dyskinesia were included. The total effective rate of AT combined with MT was more advantageous in the treatment of post-stroke dyskinesia (relative risk = 1.31, 95% confidence interval [CI] [1.22-1.42], Z = 6.96, P < .0001). AT combined with MT was more advantageous for FMA upper limb score (mean difference [MD] = 6.67, 95% CI [5.21-8.13], Z = 8.97, P < .00001) and FMA lower limb score (MD = 3.72, 95% CI [2.81-4.63], Z = 7.98, P < .00001). Meta-analysis showed that AT combined with MT for post-stroke dyskinesia had a more advantageous modified Barthel index score (MD = 9.51, 95% CI [7.44-11.58], Z = 9.01, P < .00001).
Conclusion	AT combined with MT is effective in improving motor function and daily living ability of patients, especially in improving muscle spasms. However, these results should be regarded with caution given the low quality of evidence for the evaluation results.

1.1.2. Tao 2023

Tao YX, Wu YH, Zhu GQ, Wang M. Efficacy of acupuncture in the treatment of limb dyskinesia after stroke: a systematic review and meta-analysis. *Eur Rev Med Pharmacol Sci*. 2023

Nov;27(22):10985-10993. https://doi.org/10.26355/eurev_202311_34467

Objective	This meta-analysis was performed to investigate the effectiveness of acupuncture in post-stroke limb movement disorders.
Materials and methods	An electronic search of databases including MEDLINE/PubMed, Web of Science, the Cochrane database, EMBASE, CBM, CNKI, WanFang, and VIP was performed to collect randomized controlled clinical studies on acupuncture administered for post-stroke dyskinesia from inception to April 2023. Data including baseline information, Fugl-Meyer Assessment (FMA) scores, and Barthel Index (BI) were included and analyzed using the meta package in R language.
Results	After searching and screening, 17 pieces of literature involving 1,928 participants were included, with 962 participants in the control group and 966 in the study group. Results from the included studies suggested significant benefits provided by acupuncture to improve FMA scores and BI. In specific, incorporation of acupuncture in the treatment of post-stroke limb movement disorders significantly reduced the overall FMA scores of patients by 3.45 (95% CI: 0.22, 6.69) points, the upper extremity FMA scores by 3.63 (95% CI: 0.64, 6.62) points, the lower extremity FMA scores by 3.56 (95% CI: 1.78, 5.35) points, and BI by 7.75 (95% CI: 3.35, 12.16) points.
Conclusions	Acupuncture as an adjunct to the management of post-stroke limb movement disorders contributes significantly to enhancing the motor function and quality of life of patients. However, the evidence of this study is compromised by the limited quantity of the included randomized controlled trials (RCTs) and the mediocre methodological quality. Therefore, high-quality randomized controlled trials are required to validate the benefits of acupuncture on the motor function of patients with post-stroke limb movement disorders.

From:

<http://www.wiki-mtc.org/> - Encyclopédie des sciences médicales chinoises

Permanent link:

<http://www.wiki-mtc.org/doku.php?id=acupuncture:evaluation:neuro-psychiatrie:07.%20dyskinesies%20post-avc> 

Last update: **04 Feb 2025 17:36**