

Table des matières

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Abraham 2025

1.1.2. Yang 2025 (breast cancer)

1.1.3. Ding 2024 (breast cancer)

1.1.4. Fangfang 2023

1.1.5. Li 2023

1.1.6. Wang 2023

1.1.7. Wang 2022

1.1.8. Tao 2016 ☆

2. Clinical Practice Guidelines

2.1. Society for Integrative Oncology/ American Society of Clinical Oncology (SIO/ASCO, USA) 2023 ⊕

2.2. Association of the Scientific Medical Societies, German Cancer Society, German Cancer Aid, (AWMF, DKG, DK, Germany) 2021 ⊕

2.3. National Comprehensive Cancer Network (NCCN, USA) 2021 ⊕

2.4. American Cancer Society / American Society of Clinical Oncology (ASCO, USA) 2017 ⊕

2.5. Society for Integrative Oncology (SIO, USA) 2017 ⊕

2.6. Association Francophone des Soins Oncologiques de Support (AFSOS) 2014 ⊕

2.7. Society for Integrative Oncology (SIO, USA) 2014 ⊕

1

1

1

1

2

3

3

4

5

5

6

6

6

7

7

7

7

8

Anxiety and Depression in Cancer Patients

Syndrome anxio-dépressif du patient cancéreux

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Abraham 2025

Abraham J, Holzer KJ, Pedomallu L, Kozower BD, Avidan MS, Lenze EJ. Peri-operative mental health interventions for surgical oncology patients: a narrative synthesis and meta-analysis. *Anaesthesia*. 2025 Feb;80 Suppl 2:54-64. <https://doi.org/10.1111/anae.16471>

Introduction	Oncologic surgeries are common and rates of depression and anxiety are high in the peri-operative period, potentially interfering with successful recovery.
Methods	We conducted a narrative review and meta-analysis focusing on randomised controlled trials evaluating the effect of peri-operative mental health interventions on anxiety and/or depression in adult patients having oncological surgery. The review included studies published in the last 5 years, identified through EMBASE with no pre-specified criteria for the type of comparison or outcome. A meta-analysis using a random effects model was performed for outcomes with sufficient data, and a vote-counting synthesis was performed for studies with insufficient data or fewer than two studies per outcome.
Results	Seventeen randomised controlled trials were included. All were conducted internationally, primarily in Asia. Ten studies assessed psychological interventions (e.g. cognitive behavioural therapy), six assessed pharmacological interventions (e.g. ketamine) and one assessed acupuncture . Meta-analysis revealed significant intervention effects on pre-operative anxiety scores (n = 429, Hedge's g = -1.03, p = 0.001) and postoperative depression scores at hospital discharge (n = 188, Hedge's g = -0.88, p < 0.001), whereas no significant intervention effect was found in anxiety scores at discharge (n = 188, Hedge's g = -1.54, p = 0.08). Vote-counting synthesis identified intervention effects on depression and anxiety scores on day 3 postoperatively and on depression scores at one-week postoperatively, while all other time-points showed no intervention effect.
Discussion	Psychological and pharmacological interventions are effective at reducing pre-operative anxiety and immediate postoperative depression scores in patients having oncological surgery, but these benefits do not persist postoperatively. Hence, future research efforts should focus on development and testing of interventions that are effective and implementable within the peri-operative context.

1.1.2. Yang 2025 (breast cancer)

Yang Y, Wang H, Chen ZZ, Teng QR. Effects of acupuncture on improving sleep quality and the risk of

emotional maladjustment of breast cancer patients: a systematic review and meta-analysis. *Front Oncol.* 2025 Jun 26;15:1617818. <https://doi.org/10.3389/fonc.2025.1617818>

Background	Acupuncture is highly controversial in enhancing the quality of sleep and the risk of emotional maladjustment in breast cancer patients. Through a comprehensive meta-analytic approach, this study intends to investigate the effects of acupuncture on enhancing sleep quality and the risk of emotional maladjustment in patients diagnosed with breast carcinoma.
Methods	Search tactics aligned with Cochrane Collaboration recommendations. Systematic electronic searches were conducted in April 2025 across several data storage, including PubMed, Embase, Web of Science, the Cochrane Library, and Scopus. The reference lists of review essay were manually searched to refine potentially eligible studies. A pair of researchers independently performed a comprehensive literature review, conducted data extraction, and assessed the risk of bias. Outcome analysis included the quality of sleep and the risk of emotional maladjustment. For continuous measures, the pooled weighted mean difference (MD) and 95% confidence interval will be estimated. The meta-analysis was conducted using the Review Manager 5.3 and Stata 16.0 statistical software platforms.
Result	A total of 11 studies involving 1116 participants were included. Statistically significant differences were found between acupuncture and control group in Pittsburgh Sleep Quality Index (PSQI) (MD = -1.38, 95%CI = -2.45 to -0.31), Insomnia Severity Index (ISI) (MD = -1.11, 95%CI = -3.68 to 1.45), Brief Fatigue Scale (BFI) score (MD = -2.30, 95%CI = -5.62 to -1.03). Acupuncture has been shown to Boost sleep quality and reducing the risk of emotional maladjustment. Specifically, it is manifested in: Hospital Anxiety and Depression Scale (HADS-A) (MD = -1.24, 95%CI = -2.41 to -0.35) and Hospital Anxiety and Depression Scale (HADS-D) (MD = -1.18, 95%CI = -2.15 to -0.20).
Conclusion	In comparison to other standard treatment modalities, acupuncture exhibits a notable distinction in boosting the sleep quality and the risk of emotional maladjustment of breast cancer patients. However, Clinicians should exercise caution when applying these results, as the available evidence suffers from methodological biases and quality limitations.

1.1.3. Ding 2024 (breast cancer)

Ding X, Zhao F, Zhu M, Wang Q, Wei S, Xue J, Li Z. A systematic review and meta-analysis of interventions to reduce perceived stress in breast cancer patients. *Complement Ther Clin Pract.* 2024 Feb;54:101803. <https://doi.org/10.1016/j.ctcp.2023.101803>

Purpose	Breast cancer (BC) patients commonly face stress that causes severe psychological and physiological problems. The main objective of the review was to confirm the effect of interventions on breast cancer patients' perceived stress, and the secondary objective was to explore the impact of interventions on anxiety, depression, and inflammatory markers.
Methods	A systematic and comprehensive search for randomized controlled trials (RCTs) that reported interventions' effects on perceived stress in breast cancer patients was performed in nine databases.

Results	Twenty-four RCTs, including 1887 participants, met the inclusion criteria, summarizing six categories for the intervention group: mindfulness and yoga, exercise, cognitive-behavioral stress management, self-regulation, relaxation training, and acupuncture. Compared with usual care or other types of care, mindfulness and yoga had excellent effects against perceived stress, anxiety, and depression; self-regulation could reduce perceived stress and anxiety; exercise could reduce perceived stress; acupuncture could reduce the level of depression; mindfulness could improve the TNF- α level, and yoga can reduce the level of salivary cortisol and DNA damage.
Conclusion	This systematic review indicated that nondrug interventions, such as mindfulness and yoga, effectively reduce perceived stress, anxiety, and depression. Rigorous studies with large sample sizes are needed to address the limitations of small sample sizes and shortcomings in methodology in this area.

1.1.4. Fangfang 2023

Fangfang MA, Hewei Z, Bingxue LI, Peiyu C, Mingwei YU, Xiaomin W. Acupuncture and moxibustion for malignant tumor patients with psychological symptoms of insomnia, anxiety and depression: a systematic review and Meta-analysis. J Tradit Chin Med. 2023 Jun;43(3):441-456.

<https://doi.org/10.19852/j.cnki.jtcm.20230313.001>

Objective	To evaluate the efficacy and safety of acupuncture and moxibustion therapy (AMT) for cancer-related psychological symptoms (CRPS) of insomnia, depression and anxiety.
Methods	Seven databases were searched for randomized controlled trials (RCT) comparing AMT to routine care or conventional drug for alleviating CRPS of insomnia, depression, and anxiety before April 2020. Two independent reviewers performed the data extraction and assessed the risk of bias.
Results	A total of 30 RCTs involving 2483 cancer patients were enrolled. The pooled analysis indicated that the treatment group was significantly better than the control group in improving the depression effective rate [= 1.29, 95% (1.12, 1.49), 0.0004], the quality of life (QOL) [1.11, 95% (0.80, 1.42), 0.000 01], and reducing Self-rating Anxiety Scale (SAS) [\square 7.75, 95% (\square 10.44, \square 5.05), 0.000 01]. But there was no statistically significant difference between two groups in improving the insomnia effective rate [= 1.18, 95% (0.93, 1.51), 0.18]. The subgroup analysis showed the effectiveness of different intervention on CRPS. Compared with routine care, AMT helps relieve CRPS better evaluated by Pittsburgh Sleep Quality Index (PSQI), Hamilton Depression Scale (HAMD), and Self-rating Depression Scale (SDS), and depression effective rate. Compared with conventional drug, AMT performs better evaluated by SDS, depression effective rate and QOL. Moreover, the conventional drug showed higher treatment efficacy on improving insomnia effective rate compared with AMT. Compared to conventional drug, AMT plus conventional drug resulted in a significant reduction on CRPS such as PSQI, HAMD, SDS, and SAS, and also had a meaningful improvement on insomnia effective rate, depression effective rate and QOL. Fewer published reports were found on the adverse events of AMT than the conventional drug.
Conclusion	The results suggested that AMT might be effective in improving CPRI; however, a definite conclusion could not be drawn because the quality of trials are low. Further large-scale and high-quality RCTs to verify the efficacy and safety of AMT on CRPS are still warranted.

1.1.5. Li 2023

Li X, Wang Y, Wu L, Zhao X, Zhu T. Acupuncture for tumor-related depression: a systematic review and meta-analysis. Front Oncol. 2023 Aug 8;13:1198286. <https://doi.org/10.3389/fonc.2023.1198286>

Introduction	Tumor-related depression is a series of symptoms or states triggered by a tumor as the basic disease. It does not belong to psychiatric depression but dramatically affects individuals' quality of life. Acupuncture is extensively used to treat tumor-related depression, but the effect of body acupuncture on tumor-related depression is still unsubstantiated. This work, therefore, set out to assess the effect of acupuncture on tumor-related depression.
Methods	Eight databases were searched from inception to October 2022 for randomized controlled trials (RCTs). Two researchers separately implemented the database search, study selection, data extraction, and quality assessment. All analyses were performed by using Review Manager 5.3.
Results	A total of 10 studies, including 725 participants, were included. A majority of studies recruited patients diagnosed with various tumor types and statuses. Meta-analysis revealed that acupuncture had a beneficial effect compared with usual care on the Hamilton depression scale (HAMD) (mean difference (MD) = -2.23, 95% CI [-4.43, -0.03], $p = 0.05$), self-rating depression scale (SDS) (MD = -6.22, 95% CI [-10.67, -1.78], $p = 0.006$), effective rate (RR = 1.23, 95% CI [1.06, 1.43], $p = 0.006$), and quality-of-life questionnaire (QLQ-C30) (MD = 6.08, 95% CI [3.72, 8.43], $p < 0.0001$). In the dimension of the HAMD (MD = -4.41, 95% CI [-6.77, -2.05], $p = 0.0002$) and SDS (MD = -9.19, 95% CI [-13.14, -5.24], $p < 0.00001$), subgroup analysis also highlighted that acupuncture combined with usual care had an advantage over usual care. However, there was no superiority in acupuncture itself compared to usual care on the HAMD (MD = -1.25, 95% CI [-4.34, -1.84], $p = 0.43$) and SDS (MD = -3.08, 95% CI [-11.14, 4.98], $p = 0.45$). Acupuncture also reduced the incidence of adverse effects (RR=0.43, 95% CI [0.23, 0.80], $p = 0.008$).
Conclusion	Acupuncture is a safe and effective complementary therapy for tumor-related depression. This technique can provide clinical references for the medical field.

1.1.6. Wang 2023

⊕⊕⊕⊖	Moderate
⊕⊕⊖⊖	Low

Wang T, Tan JB, Yao LQ, Huilin Cheng, Zhao I, Eliseeva S, Polotan MJ. Effects of somatic acupoint stimulation on anxiety and depression in cancer patients: An updated systematic review of randomized controlled trials. *Complement Ther Clin Pract*. 2023 May;51:101735.

<https://doi.org/10.1016/j.ctcp.2023.101735>

Objectives	To explore the effectiveness of somatic acupoint stimulation (SAS) for cancer patients with anxiety and depression.
Methods	Thirteen electronic databases were searched systematically until August 2022. Randomized controlled trials (RCTs) investigating SAS for anxiety and/or depression in cancer patients were retrieved. Methodological quality of the included studies was assessed by utilizing the Cochrane Back Review Group Risk of Bias Assessment Criteria. Evidence level was assessed by using the approach of Grading of Recommendations, Assessment, Development and Evaluations (GRADE). Both meta-analysis and descriptive analysis were conducted for outcome assessment.

Results	Twenty-eight records were finally included including 22 journal articles and six ongoing registered clinical trials. The overall methodological quality and level of evidence of the included studies were suboptimal, with no high-quality evidence identified. Moderate evidence showed that SAS could significantly decrease the anxiety of cancer patients (Acupuncture: [random effect model, SMD = -0.52, 95% CI = -0.79 to -0.24, $p = 0.0002$] and Acupressure: [random effect model, SMD = -0.89, 95% CI = -1.25 to -0.52, $p < 0.00001$]. While for depression, although the data analysis indicated that SAS can decrease depression significantly (Acupuncture: [random effect model, SMD = -1.26, 95% CI = -2.08 to -0.44, $p = 0.003$] and Acupressure: [random effect model, SMD = -1.42, 95% CI = -2.41 to -0.42, $p = 0.005$]), relevant evidence was rated as low. No statistically significant difference was identified between true and sham acupoints stimulation for both anxiety and depression.
Conclusions	This systematic review provides the latest research evidence to support SAS as a promising intervention for alleviating anxiety and depression in cancer patients. However, the research evidence should be interpreted prudently as methodological concerns were identified in some included studies, and some sub-group analyses were performed with a relatively small sample size. More rigorously designed large-scale RCTs with placebo-controlled comparisons are warranted to generate high-quality evidence.

1.1.7. Wang 2022

Wang F, Zhao J, Li Y, Yang X, Wu D, Yang B, Zhang C, He Z, Du L, Zhu X, Ming D, Liu Y, Tang D. Acupuncture and acupressure with improved cancer-related depression of retrospective studies. *Front Oncol.* 2022 Dec 12;12:1036634. <https://doi.org/10.3389/fonc.2022.1036634>

Introduction	Acupuncture and acupressure are widely used for treating cancer pain and depression and recognized as safe and effective by the international medical community. In this study, we systematically evaluated the efficacy, safety, and clinical significance of acupuncture and acupressure in treating cancer-related depression.
Methods	We searched MEDLINE, PubMed, Science Direct, Google Scholar, Web of Science and Embase and Chinese-language databases for randomized clinical trials (RCTs). To assess efficacy, rating scales administered by clinicians or experts were preferred, including the Hamilton Depression Rating Scale (HAMD), Self-rating Depression Scale (SDS), Self-rating Anxiety Scale (SAS), and Quality of Life Questionnaire-Core 30 (QLQ-C30) and the total effective rate after treatment. In all, Sixteen RCTs involving 1019 cancer patients were included in the Meta-analysis.
Results	Eleven (69%) of these studies reported the post-treatment total effective rate. Three hundred fifty-three patients received antidepressants; the total effective rate was 72.5%. Three hundred sixty-one patients underwent acupuncture and acupressure; the total effective rate was 90%. Meta-analysis results showed $I^2 = 0\%$, no heterogeneity, ($Z = 5.84$, $p < 0.00001$); and combined OR = 3.55, (95% CI = 2.32 to 5.43).
Discussion	This study found that acupuncture and acupressure are as effective as medication in the treatment of cancer-related depression, provide a reliable basis for the clinical use of acupuncture to treat cancer-related depression, help promote nonpharmacological treatment for cancer-related complications. These approaches thus help reduce drug resistance and adverse reactions and improve patients' quality of life.

1.1.8. Tao 2016 ☆

Tao Wang, Renli Deng, Jing-Yu Tan, and Feng-Guang Guan. Acupoints stimulation for anxiety and depression in cancer patients: a quantitative synthesis of randomized controlled trials. *Evid.-Based Complementary Altern. Med.* 2016.1-15. [5645632]. DOI: 10.1155/2016/564563 [170328].

Objectives	This study aims at concluding the current evidence on the therapeutic effects of acupoints stimulation for cancer patients with anxiety and depression.
Methods-Results	Randomized controlled trials using acupoints stimulation for relieving anxiety and/or depression in cancer patients were searched, and 11 studies were finally included, of which eight trials compared acupoints stimulation with standard methods of treatment/care, and acupoints stimulation showed significantly better effects in improving depression than using standard methods of treatment/care. Four studies compared true acupoints stimulation with sham methods, and no significant differences can be found between groups for either depression or anxiety, although the pooled effects still favored true intervention. For the five studies that evaluated sleep quality, the results were conflicting, with three supporting the superiority of acupoints stimulation in improving sleep quality and two demonstrating no differences across groups.
Conclusions	Acupoints stimulation seems to be an effective approach in relieving depression and anxiety in cancer patients, and placebo effects may partially contribute to the benefits. However, the evidence is not conclusive due to the limited number of included studies and the clinical heterogeneity identified among trials. More rigorous designed randomized, sham-controlled studies are necessary in future research.

2. Clinical Practice Guidelines

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

2.1. Society for Integrative Oncology/ American Society of Clinical Oncology (SIO/ASCO, USA) 2023 ⊕

- Carlson LE, Ismaila N, Addington EL, Asher GN, Atreya C, Balneaves LG, Bradt J, Fuller-Shavel N, Goodman J, Hoffman CJ, Huston A, Mehta A, Paller CJ, Richardson K, Seely D, Siwik CJ, Temel JS, Rowland JH. Integrative Oncology Care of Symptoms of Anxiety and Depression in Adults With Cancer: Society for Integrative Oncology-ASCO Guideline. J Clin Oncol. 2023 Aug 15;JCO2300857. <https://doi.org/10.1200/JCO.23.00857>
- Carlson LE, Ismaila N, Addington EL, Asher GN, Bradt J, Mehta A, Rowland JH; SIO-ASCO Expert Panel. Integrative Oncology Care of Symptoms of Anxiety and Depression in Adults With Cancer: SIO-ASCO Guideline Summary and Q&A. JCO Oncol Pract. 2023 Aug 15;OP2300358. <https://doi.org/10.1200/OP.23.00358>

Anxiety. *Recommendation 2.3.* Acupuncture may be offered to women with breast cancer to improve anxiety symptoms post treatment (Type: Evidence based; Quality of evidence: Intermediate; benefits outweigh harms; Strength of recommendation: Weak).

2.2. Association of the Scientific Medical Societies, German Cancer Society, German Cancer Aid, (AWMF, DKG, DK, Germany) 2021 ⊕

S3-Leitlinie Komplementärmedizin in der Behandlung von onkologischen PatientInnen. September 2021.

https://www.leitlinienprogramm-onkologie.de/fileadmin/user_upload/Downloads/Leitlinien/Komplement%C3%A4r/Version_1/LL_Komplement%C3%A4r_Langversion_1.1.pdf

https://www.leitlinienprogramm-onkologie.de/fileadmin/user_upload/Downloads/Leitlinien/Komplement%C3%A4r/Version_1/LL_Komplement%C3%A4r_Evidenztabellen_1.0.pdf

11.3.1.1. *Fear/ anxiety*. Acupuncture. Recommendation strength : Can. Patient context: Breast cancer patients. Note: After completion of chemotherapy or during therapy with aromatase inhibitors.
 11.3.1.2. *Depression*. Acupuncture. Recommendation strength: Can. Patient context: Breast cancer patients. Note: Depression after completion of chemotherapy or therapy with aromatase inhibitors.

2.3. National Comprehensive Cancer Network (NCCN, USA) 2021 ☯

Dotan E, Walter LC, Browner IS, Clifton K, Cohen HJ, Extermann M, Gross C, Gupta S, Hollis G, Hubbard J, Jaggi R, Keating NL, Kessler E, Koll T, Korc-Grodzicki B, McKoy JM, Misra S, Moon D, O'Connor T, Owusu C, Rosko A, Russell M, Sedrak M, Siddiqui F, Stella A, Stirewalt DL, Subbiah IM, Tew WP, Williams GR, Hollinger L, George GV, Sundar H. NCCN Guidelines® Insights: Older Adult Oncology, Version 1.2021. J Natl Compr Canc Netw. 2021 Sep 20;19(9):1006-1019.

<https://doi.org/10.6004/jnccn.2021.0043>

Domain : psychological.Potential intervention. Complementary (non-pharmacologic) modalities such as guided imagery, meditation, relaxation, **acupuncture**, etc

2.4. American Cancer Society / American Society of Clinical Oncology (ASCO, USA) 2017 ☯

Lyman GH, Greenlee H, Bohlke K, Bao T, DeMichele AM, Deng GE, Fouladbakhsh JM, Gil B, Hershman DL, Mansfield S, Mussallem DM, Mustian KM, Price E, Rafta S, Cohen L. Integrative Therapies During and After Breast Cancer Treatment: ASCO Endorsement of the SIO Clinical Practice Guideline. J Clin Oncol. 2018;Jun 11. [155475].

Anxiety/stress reduction. Recommendations: Acupuncture, massage, and relaxation can be considered for reducing anxiety. (Grade C)

Depression/mood. Recommendations: Acupuncture, healing touch, and stress management can be considered for improving mood disturbance and depressive symptoms. (Grade C)\

2.5. Society for Integrative Oncology (SIO, USA) 2017 ☯

Greenlee H, DuPont-Reyes MJ, Balneaves LG et al. Clinical practice guidelines on the evidence-based use of integrative therapies during and after breast cancer treatment. CA Cancer J Clin. 2017 May 6;67(3):194-232.

Anxiety/stress reduction. Recommendations: Acupuncture, massage and relaxation can be considered for reducing anxiety. Strength of evidence: C

Depression/mood. Acupuncture, healing touch and stress management can be considered for improving mood disturbance and depressive symptoms. Strength of evidence grade: C

2.6. Association Francophone des Soins Oncologiques de Support (AFSOS) 2014 ☯

Association Francophone des Soins Oncologiques de Support (AFSOS). Fiches Référentiels : L'acupuncture en onco-hématologie MAJ 2014 ([online](#))

Anxiété - dépression . Acupuncture (Niveau de preuve HAS : B)

2.7. Society for Integrative Oncology (SIO, USA) 2014

Greenlee H, Balneaves LG, Carlson LE, Cohen M, Deng G, Hershman D, Mumber M, Perlmutter J, Seely D, Sen A, Zick SM, Tripathy D; Society for Integrative Oncology. Clinical practice guidelines on the use of integrative therapies as supportive care in patients treated for breast cancer. J Natl Cancer Inst Monogr. 2014;50:346-58. [167074].

Anxiety/stress reduction. Recommendations: Acupuncture can be considered for reducing anxiety in fatigued BC patients. Strength of evidence: C

Depression/mood. Recommendations: Acupuncture can be considered for improving mood in postmenopausal women experiencing hot flashes or fatigue. Strength of evidence: C

From:

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

Permanent link:

<http://www.wiki-mtc.org/doku.php?id=acupuncture:evaluation:oncologie:14.%20syndrome%20anxio-depressif%20du%20patient%20cancereux> 

Last update: 18 Jul 2025 15:09