Table des matières

Flexor tenosynovitis

Doigt à ressaut, ténosynovite des fléchisseurs des doigts

1. Systematic Reviews and Meta-Analysis

☆☆☆	Evidence for effectiveness and a specific effect of acupuncture
☆☆	Evidence for effectiveness of acupuncture
☆	Limited evidence for effectiveness of acupuncture
Ø	No evidence or insufficient evidence

1.1. Generic Acupuncture

1.2. Special Acupuncture Techniques

1.2.1. Acupotomy

1.2.1.1. Liang 2023

Liang YS, Chen LY, Cui YY, Du CX, Xu YX, Yin LH. Ultrasound-guided acupotomy for trigger finger: a systematic review and meta-analysis. J Orthop Surg Res. 2023 Sep 13;18(1):678. https://doi.org/10.1186/s13018-023-04127-3

Background	Trigger finger is a common condition in the hand, and ultrasound-guided acupotomy for trigger finger has been widely used in recent years.
Purpose	This study aims to investigate the efficacy and safety of ultrasound-guided acupotomy for trigger finger.
Methods	We searched for relevant studies in the Cochrane Library, China National Knowledge Infrastructure (CNKI), Embase, PubMed, Chinese Biomedical Literature Database (CBM), Wanfang Data, and other resources from their inception to January 2023. Randomized controlled trials of ultrasound-guided acupotomy for trigger finger were included. The meta-analysis was carried out using Review Manager 5.4 and Stata 15.1.
Results	Overall, **15 studies with 988 patients** were included. The experimental group was treated with ultrasound-guided acupotomy, and the Control group received traditional acupotomy, traditional operation or injection of medication. Meta-analysis showed that the overall clinical effectiveness (OR = 4.83; 95% CI 2.49-9.37; I2 = 73.1%; P < 0.001) in the experimental group was significantly better than that of the control group. And the Visual Analogue Scale (VAS) score (WMD = - 1; 95% CI - 1.24, - 0.76; I2 = 99%; P < 0.001), the Quinnell classification (WMD = - 0.84; 95% CI - 1.28, - 0.39; I2 = 99.1%, P < 0.001), the incidence of complications (RR = 0.26; 95% CI 0.11, 0.63; I2 = 0%, P = 0.003), and the recurrence rate (RR = 0.14; 95% CI 0.03, 0.74; I2 = 0%; P = 0.021) were significantly lower in the experimental group.

Conclusion	Our systematic review and meta-analysis can prove the effectiveness and safety of ultrasound-guided acupotomy in the treatment of trigger finger, but this still needs to be verified by a clinical standard large sample test.

1.2.1.2. Li 2022

Li D, Wang X, Fang T, Chen Y, Xiang S, Qi J, Liang C, Ren C, Zhao X, Qiu Z, Liu F, Yan X. Acupotomy in the treatment of tenosynovitis of hand flexor tendons: A systematic review and meta-analysis. Medicine (Baltimore). 2022 Nov 11;101(45):e31504. https://doi.org/10.1097/MD.0000000000031504. |

Background	Acupotomy was used to treat tenosynovitis of hand flexor tendons (THFT) in China. But it's uncertain about the efficacy of acupotomy for THFT. We plan to evaluate the efficacy and safety about acupotomy therapy in the treatment of THFT through this review.
Methods	The protocol about this review was registered in PROSPERO (registration number: CRD42022330568). We searched 6 databases from their respective inception dates to January 11, 2022. Studies searched was screened by our reviewers, and then the raw data was filtered out. We used RevMan 5.3 software to perform statistical analysis.
Results	**11 studies involving 828 patients** were shortlisted. The experimental group showed obvious advantages compared with the control group, such as effective rate (odds ratio [OR] = 6.77, 95% CI [confidence intervals] = [3.89, 11.77], P < .00001), cure rate (OR = 3.32, 95% CI = [1.81, 6.11], P = .0001) and Vas score (MD = -1.21, 95% CI = [-2.00, -0.42], Z = 3.01, P < .003).
Conclusions	According to the above results, Acupotomy is an effective and safe treatment for THFT. So it should be recommended for the treatment of THFT patients.

1.2.1.3. Xie 2016

Xie Lishuang, Zhou Xuelong, Wang Zhanyou, Liang Dongyue. [Meta-analysis of curative effect of small needle knife therapy on stenosing tenovaginitis of flexor digitorum], Shandong Journal of TCM. 2016;35(6):522-5. [168686].

Objective	To compare the curative effect and safety of small needle knife therapy and blocking therapy on stenosing tenovaginitis of flexor digitorum by system evaluation.
Methods	Randomized controlled trials on treatment of stenosing tenovaginitis of flexor digitorum by small needle knife therapy and blocking therapy as the contrast were retrieved from Chinese national knowledge infrastructure (1962~2015), VIP database (1993~2015), WanFang database (2000~2015) and PubMed Chinese database (1994~2015) by computer, as well as related medical journals by manual work. The Meta-analysis was done by the RevMan 5.2 software after the selected data was cross checked by 2 valuators according to the requirements.
Results	A total of 7 randomized controlled trials met the inclusion criteria, including 1 174 patients, but there was no high-quality literature. The results of Meta-analysis showed that the total effective rate of the small needle knife group was significantly higher than that of the control group, OR=9.07,95%CI[4.64,17.76],Z=6.44,P<0.00001 and the cure rate of the small needle knife group was significantly higher than that of the control group, OR=7.86,95% CI[5.75,10.74],Z=12.93,P<0.00001.
Conclusion	The curative effect of small needle knife therapy was better than that of the control group. Since the study included a limited number of trials and the quality of the literature was not high, the funnel plot showed publication bias, so the conclusion need to be validated by more rigorous randomized controlled trials.

1.2.1.4. Zhang 2016

Zhang JW, Jiang SM, Wu HB, et al. [System review of acupotomy treatment for stenosing tenovaginitis of flexor digitorum]. Chinese Journal of Information on TCM. 2016;23(7):46-50. [168559].