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Poststroke disorders of consciousness

Troubles de la conscience post-AVC

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

1.1.1. Wu 2024

Wu Y, Zhao K, Wen W, Zhu K, Lu F, Kong Y, Ye X, Wang H. Acupuncture for poststroke coma: A systematic review and meta-analysis. *Complement Ther Med*. 2024 Jun;82:103046.

<https://doi.org/10.1016/j.ctim.2024.103046>

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| Background | Despite being widely applied in clinical practice, the wake-promoting effect of acupuncture in poststroke coma patients remains controversial. |
| Objective | This study aimed to evaluate the efficacy of acupuncture for the treatment of poststroke coma. |
| Methods | Randomized controlled trials (RCTs) of acupuncture for treating poststroke coma were identified in PubMed, Cochrane Library, EMBASE, CNKI, WanFang and VIP up to 25 November 2023. The main outcomes were Glasgow Coma Scale (GCS) score, National Institute of Health Stroke Scale (NIHSS) score, awakening ratio and clinically effective ratio. Stata 17 and Review Manager 5.4 software were used for meta-analysis. |
| Results | A total of 34 RCTs involving 2757 patients were included. GCS (WMD = 1.78; 95% CI: 1.35 to 2.21) and NIHSS score (WMD = -2.84; 95% CI: -3.84 to -1.84) were significantly increased in acupuncture group compared with control group. Acupuncture combined with routine treatment may be better than routine treatment in improving the awakening ratio (RR= 1.65; 95% CI: 1.24 to 2.91) and the clinically effective ratio (RR= 1.20; 95% CI: 1.13 to 1.27). Some methodological flaws were identified in the included studies, including non-implementation of blinding, inappropriate disease assessment and heterogeneous interventions. |
| Conclusions | The existing evidence suggests that acupuncture combined with conventional treatment may be an effective treatment for poststroke coma patients. In the meantime, more high-quality RCTs are needed to demonstrate these findings due to methodological weaknesses like randomization, blinding, heterogeneous interventions and long-term follow-up. |

1.1.2. Huang 2022

Huang Z, Chen Y, Xiao Q, Kuang W, Liu K, Jiang Y, Wen X, Qin W, Liu Y, Liu T. Effect of acupuncture for disorders of consciousness in patients with stroke: A systematic review and meta-analysis. *Front Neurol*. 2022 Oct 5;13:930546. <https://doi.org/10.3389/fneur.2022.930546>

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| Background | Disorder of consciousness (DOC) is frequent in patients with stroke, which is the second most common cause of death and a leading cause of disability. Acupuncture has been used as a curative method for DOC treatment in China. Nevertheless, no critical systematic review of acupuncture's effect on DOC has been published. This review aims to evaluate the present evidence regarding the efficacy of acupuncture for DOC after stroke. |
| Methods | Seven databases were searched from their inception to November 1, 2021, containing three English databases (PubMed, Embase, and Cochrane Central Register of Controlled Trials) and four Chinese databases (CNKI, CBM, VIP, and Wanfang Database). The primary outcomes comprise the Glasgow Coma Scale (GCS) and Glasgow Outcome Scale (GOS) before and after treatment. Secondary outcomes involve resuscitation rate, resuscitation time, and adverse events. Data synthesis was calculated by RevMan (V.5.4.1) software. According to the Cochrane Handbook, methodological quality was assessed with the risk of bias tool 2.0 (RoB2). |
| Results | Seventeen studies containing 1,208 patients were eventually included in our review. Overall, most trials were rated as high or had some concerns regarding the risk of bias. GCS was reported in 16 trials, and a meta-analysis showed that GCS improvement in the acupuncture group was greater than in the non-acupuncture group (MD 1.45, 95% CI 0.94-1.97, $P < 0.0001$). One trial reported that GOS improvement in the acupuncture plus medication group was greater than in the medication group (MD 0.58, 95% CI 0.11-1.05, $P = 0.01$). Another study reported that acupuncture plus medication was statistically more effective in shortening resuscitation time than medication alone (MD-0.89, 95% CI -1.53 to -0.25, $P = 0.006$). Four trials reported that the resuscitation rate in the acupuncture group was higher than without acupuncture intervention (RR 1.68, 95% CI 1.30-2.18, $I^2 0\%$, $P = 0.39$). Adverse events were reported in two studies, with one case in the acupuncture group suffering from subcutaneous hematoma. |
| Conclusion | Acupuncture may improve consciousness level, increase the resuscitation rate, and shorten resuscitation time for post-stroke patients with DOC. Adverse events from acupuncture were rare, tolerable, and recoverable. However, the results should be interpreted cautiously, and more rigorous RCTs with better methodology are warranted. |

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