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The use of auriculotherapy for cardiac arrhythmias: A systematic review

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3.28. Neurophysiological Basis of Auriculotherapy for Perioperative Pain Management

Chelly, J.

Background: Auriculotherapy otherwise known as auricular acupuncture is an effective complement to modern pharmacotherapies to treat numerous pathologic conditions. It is considered a safe and cost effective approaches to improves outcomes, especially when used for the treatment of acute and chronic pain including low back pain, pain associated with trauma and surgery, fibromyalgia, neuropathic pain, myofascial pain, and even opioid addiction in the adult and pediatric population.

Method: This presentation based on a systemic review of the literature to provide evidence supporting the objective use of Auriculotherapy /Auriculo-acupuncture for the management of acute and chronic pain with a special focus on evidence supporting the use of the traditional Chinese/German Auriculo-acupuncture and also the use of the French scientific Auriculotherapy.

Results: Based on the review of randomized of clinical trials (with or without a control group), case reports and series, it is established that various techniques have been proposed for the management of pain. Although many of them claimed to be efficacious, at the present time it is very difficult to establish the relative efficacy of each technique. The same apply to approaches and protocols. Used to treat a given pathologic condition. **Conclusions:** Additional are required to establish which technique, approach, and protocol should be chosen for the management of pain using Auriculotherapy.

3.29. A Detailed Comparative Analysis of the Effects of DC Micro-Current Point Stimulation (MPS) on the Autonomic Nervous System (ANS) when Applied to Battlefield Acupuncture (BA) Protocol of a N = 8 Patient Sample Size with a History of Pain

Armstrong, K.

Background: A detailed comparative analysis of the effects of DC Microcurrent Point stimulation (MPS) on the autonomic nervous system (ANS), when applied to Battlefield acupuncture (BA) protocol of a $n = 8$ patient sample size with a history of pain.

Methods: Evaluations entailed a Standard Protocol baseline NPRS (VAS) pain scale, Cortisol and a baseline status of 27 ANS functions, all repeated pre-post to electro-therapy on a $n = 8$ sample size with a history of pain.

Results: The ANS response of a $n = 8$ patient sample with chronic pain electrical nerve stimulation Microcurrent Point stimulation reflected a statistically significant pre-post improvement in seven of the 29 markers collected: pain reduced 2.0625 points or 63% [95% CI (1.2745, 2.8505); $p = 0.0001$], HRV improved 662.375 points or a 42% [95% CI (-1273.675, -51.075); $p = 0.037$], HF-Vagal tone improved 231.25 points or a 56%, [95% CI (-430.42, -31.58); $p = 0.029$]. Exercise tolerance-SDANN increased of 9.500 points or 22% [95% CI (-16.747, -2.253); $p = 0.017$], RMSSD- Parasympathetic activity improved 14.000 points or a 38% [95% CI (-23.202, -4.798); $p = 0.009$], Stress: reduced 39.125 points or 27%, [(95% CI (1.945, 76,305); $p = 0.042$], and PTGi-Cardiac marker improved 21.5125 points or a 48% [95% CI (-35.441754, -7.5832461); $p = 0.008$].

Conclusion: The positive results in this study could will help establish the validity of MPS applied to BFA protocol for other pathologies that can be impacted by the sympathetic nervous system activation on the body.

3.30. The Use of Auriculotherapy for Cardiac Arrhythmias: A Systematic Review

Mok, M.; Suen, L.; Tan, J.Y.; Xie, G.

Background: Patients with paroxysmal type of cardiac arrhythmia often experience poor quality of life due to the low successful rate of the mainstream treatments in controlling the disorder. Being one of the complementary health approaches, auriculotherapy was found to be a safe treatment modality which may benefit patients with cardiac arrhythmias. This systematic review therefore evaluates the effectiveness of auriculotherapy on patients with this problem.

Method: Literatures were searched through Pubmed, Embase, CENTRAL, China National Knowledge Infrastructure (CNKI), WangFang Database, and VIP Database using relevant keywords and mesh terms. All articles were screened by title and abstract to identify relevant clinical studies.

Results: A total of 341 relevant articles were identified from 1990 to 2017. Eight clinical trials involving 2050 participants were included. Subjects with premature atrial contraction, premature ventricular contraction, sinus arrhythmia and/or sinus tachycardia, were included in most of these trials. The results suggested beneficial effects of auriculotherapy on the reduction of heart rate and/or arrhythmia episodes compared with the controls. However, generalizability of the findings was limited because of significant methodological flaws, such as inadequate information regarding the randomization process, blinding, and allocation concealment.

Conclusion: The findings of the systematic review indicated a plausible effect of auriculotherapy on patients with cardiac arrhythmias. The implications drawn from these studies put some clues for future high-quality trials so as to determine the effectiveness of auriculotherapy on cardiac arrhythmias. A more detailed report of the systematic review and bias assessment of these studies will be presented in the symposium.

3.31. Comparative Examination of the Ear Acupuncture Points (NADA/Battlefield) in Light of Western Medicine (Lab, Instrumental) and of Chinese Medicine (meridian diagnostics)—Randomized, Placebo-Controlled, Double Blind Research

Szechenyi, I.

Background: Auricular acupuncture/acupuncture has been often attacked on grounds that it makes no difference which points are stimulated by needles, the effect will be the same, and even in an optimal case “only a placebo” effect is apparent.

To investigate the importance of localization and the placebo effect we chose to use the internationally recognized 5-point NADA (Smith) and 5-point Battlefield (Niemtzow) protocol.

Methods: Randomized double blind placebo control (RDBPC) studies, (the second one only RDBP). 44 persons participated in our first research, while 110 persons in the second one.

Results: Both in the group which was treated with needles and in the NADA group which was treated with laser the values of the PRL, CORT and MeriDiM significantly reduced. At present, we are performing a comparative analysis between the NADA and the Battlefield protocol with MRI.

In the case of the Battlefield group, the changes of the PR and CORT level stagnated, while the measured values of the MeriDiM[®] decreased to the greatest extent.

Conclusion: Comparing the effect of the specific NADA 5-point treatment (either needle or laser treatment) with the non-specific effects of Battlefield treatment, based on the PRL and CORT response levels of the human body the points of NADA have an immediate significant stress-reducing effect, while the Battlefield points don't.

4. Workshops

4.1. Battlefield Acupuncture Training Across Clinical Settings—Initial Results & Lessons Learned

Pock, A.; Niemtzow, R.

Background: Within the United States, the need for safe, effective, and efficient management of acute and chronic pain is becoming a health-related priority of national proportions, particularly when viewed in the setting of a growing epidemic of opioid dependence and overuse.

Objective: To evaluate a large scale, \$5.4 M multi-disciplinary, multi-site teaching program designed to facilitate the effective implementation of the Battlefield Acupuncture (BFA) technique at 26 different medical facilities across the U.S. Department of Defense and at 21 different Veteran's Affairs Hospitals.