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intestinal obstruction

Obstruction intestinale

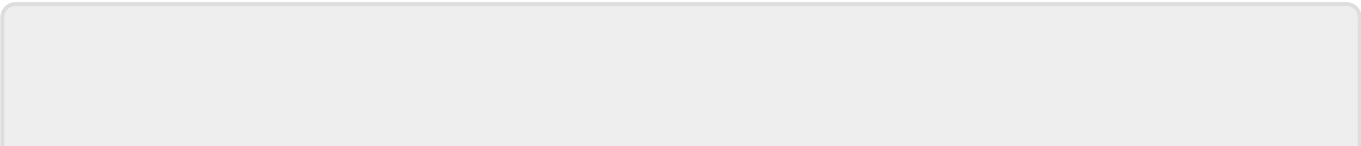
1. Systematic Reviews and Meta-Analysis

☆☆☆	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. Xie 2022

Xie Y, Zheng C, Tan X, Li Z, Zhang Y, Liu Y. Clinical efficacy of acupuncture in patients with adhesive intestinal obstruction: A meta-analysis. *Medicine (Baltimore)*. 2022 Oct 7;101(40):e30257. <https://doi.org/10.1097/MD.00000000000030257>.

Background	Adhesive intestinal obstruction (AIO) is a common surgical emergency. Surgical exploration has a considerable risk of intestinal injury, and surgical treatment may greatly reduce the quality of life after surgery and cause AIO after re-operation. The nonsurgical treatment is effective for approximately 70% to 90% of patients with adhesive small bowel obstruction (ASBO). However, the high recurrence (30%) and mortality (2%) rates of ASBO are concerning. Moreover, the ideal management method of ASBO remains debatable. Studies have shown that acupuncture can also promote postoperative gastrointestinal function recovery and prevent postoperative complications such as nausea, vomiting, and visceral pain.
Aim	We aimed to evaluate the effectiveness of acupuncture in the treatment of AIO.
Methods	Randomized controlled trials investigating the effectiveness of acupuncture for adhesive bowel obstruction published until November 2021 were identified by searching 8 comprehensive databases. Data analysis was performed using RevMan v. 5.4 and Stata software v. 16.0. The random-effects model and the fixed-effects model were used to perform the meta-analysis on the experimental group and control group.
Results	Twelve studies with a total of 892 participants were included. The results showed that the experimental group had a significantly higher effective rate (relative risk: 1.20; 95% confidence interval (CI): 1.11-1.28; P < .00001) and a markedly shorter time of the first defecation (mean difference: -11.49, 95% CI: -19.31 to -3.66; P = .004) than the control group. The experimental group also showed a reduction in the duration of abdominal pain, and the reduced length of hospital stay. However, no statistical differences were observed between the 2 groups in terms of the surgery conversion rate.
Conclusion	Acupuncture is effective in the treatment of AIO. It can remarkably alleviate some clinical symptoms in patients with AIO.



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