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myopia

Myopie : évaluation de l'acupuncture

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

1.1.1. Wei 2011 Ø

Wei MI, Liu JP, Li N, Liu M. Acupuncture for slowing the progression of myopia in children and adolescents, Cochrane Database Syst Rev. 2011. [160668].

Background	Myopia (near-sightedness or short-sightedness) is one of the three commonly detected refractive (focusing) errors. Acupuncture is the stimulation of acupuncture points by various methods including needle insertion and acupressure. It is often used by traditional Chinese medicine practitioners to treat myopia in children.
Objectives	To assess the effectiveness and safety of acupuncture in slowing the progression of myopia in children and adolescents.
Methods	Search strategy: We searched CENTRAL (which contains the Cochrane Eyes and Vision Group Trials Register) (The Cochrane Library 2011, Issue 7), MEDLINE (January 1950 to July 2011), EMBASE (January 1980 to July 2011), the Allied and Complementary Medicine Database (AMED) (January 1985 to July 2011), Latin American and Caribbean Health Sciences Literature Database (LILACS) (January 1982 to July 2011), the metaRegister of Controlled Trials (mRCT) (www.controlled-trials.com), ClinicalTrials.gov (www.clinicaltrial.gov), the National Center for Complementary and Alternative Medicine (NCCAM) (The first issue to August 2010), the Chinese Biological Medicine Database (CBM) (1978 to April 2011), China National Knowledge Infrastructure (CNKI) (1994 to April 2011) and VIP (1989 to April 2011). There were no date or language restrictions in the electronic searches for trials. CENTRAL, MEDLINE, EMBASE, AMED, LILACS, mRCT and ClinicalTrials.gov were last searched on 9 July 2011. NCCAM was searched up to August 2010 and CBM, CNKI, and VIP were last searched on 6 April 2011. Selection criteria: We included randomized controlled trials (RCTs) that included any type of acupuncture treatment for myopia in children and adolescents. Data collection and analysis: Two authors independently evaluated the search results according to the inclusion and exclusion criteria. Two authors extracted and assessed data independently. We contacted the study investigator for missing data.

Main results:	We included **two RCTs conducted in Taiwan with a total of 131 participants**. We did not perform a meta-analysis as the trials were assessing different outcomes. Neither trial met our pre-defined primary outcome criteria of myopia progression defined as one diopter mean change. Only one trial reported the changes of axial length without non-significant difference among groups and both trials reported that several children experienced mild pain during acupuncture stimulation.
Authors' conclusions	Two trials are included in this review but **no conclusions can be drawn for the benefit of co-acupressure** for slowing progress of myopia in children. Further evidence in the form of RCTs are needed before any recommendations can be made for the use of acupuncture treatment in clinical use. These trials should compare acupuncture to placebo and have large sample sizes. Other types of acupuncture (such as auricular acupuncture) should be explored further as well as compliance with treatment for at least six months or longer. Axial length elongation of the eye should be investigated for at least one year. The potential to reduce/eliminate pain from acupuncture experienced by children should also be reviewed.

1.2. Special Acupuncture Techniques

1.2.1. Auricular Acupuncture

1.2.1.1. Sangvatanakul 2021

Sangvatanakul P, Tangthianchaichana J, Tasanarong A, Pabalan N, Tharabenjasin P. An Updated Meta-Analysis of Controlling Myopia with Auricular Acupoint Stimulation. Med Acupunct. 2021 Oct 1;33(5):335-342. doi

Objective	Myopia prevalence mostly affects young people, particularly in Asia. Of the several recommendations addressing the myopia epidemic, auricular acupoint stimulation (AAS) has been proposed and investigated. However, reported outcomes have been inconsistent, prompting a meta-analysis to obtain more precise estimates.
Materials and Methods	**Twelve articles** were included in a meta-analysis, wherein each article was evaluated for risk of bias. Summary effects were calculated using odds ratios (ORs) and 95% confidence intervals (CIs). Outlier and sensitivity treatments as well as publication bias assessment were applied.
Results	Risk of bias among the articles was low in random sequence but generally unclear judgments for the other bias criteria. AAS outcomes were significant (P a [P-value for association] <0.00001-0.003) when random and fixed effects favored the treated groups (ORs: 2.87-3.42; 95% CIs: 1.44-5.75).
Conclusions	This meta-analysis showed evidence of AAS being effective for controlling myopia. Substantial magnitude (up to 3.4-fold), robustness, and lack of bias strengthened this effect.

1.2.1.2. Gao 2020

Gao H, Zhang L, Liu J. Auricular acupressure for myopia in children and adolescents: A systematic review. Complement Ther Clin Pract. 2020. [211194]. doi

Objectives	To identify and assess the evidence showing the efficacy of auricular acupressure alone for myopia in children and adolescents.

Methods	Randomized controlled trials (RCTs) that were published until March 2019 in Pubmed, Web of Science, OVID, Foreign Medical Literature Retrieval Service, China Knowledge Resource Integrated Database, The Chinese Biological Medicine Database, Wanfang Database, and Chongqing VIP Information were searched. The quality of RCTs was assessed using the Cochrane risk of bias assessment tool.
Results	**Ten RCTs** were included to be qualitatively summarized, of which 5 studies qualified for the meta-analysis of the efficacy rate in treating myopia. This review demonstrated that auricular acupressure alone was more effective than eye-drops treatment, eye exercise, and was the just as effective as needle acupuncture.
Conclusions	Auricular acupressure could slow the progression of myopia in children and adolescents. However, there is a need for further studies with higher methodological quality and sufficient follow-up.

2. Clinical Practice Guidelines

2.1. American Academy of Ophthalmology (AAO, USA) 2012

American Academy of Ophthalmology. Acupuncture for slow myopia in children. San Francisco (CA): American Academy of Ophthalmology. 2012; 7P. [168140].

The decision to recommend acupuncture in children with myopia should be individualized to the patient' needs and preferences, as the data do not permit any clear conclusions regarding the benefits or harms of these proposed treatment.

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