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Acute Tonsillitis / pharyngitis

Angine / pharyngite

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. Zhang 2023

Zhang S, Cui Y, Zhou X, Wang D, Yin J, Meng X, Cao Y, Li Q, Yin H. Efficacy of acupuncture on acute pharynx infections: A systematic review and meta-analysis. Medicine (Baltimore). 2023 Jun 23;102(25):e34124. https://doi.org/10.1097/MD.0000000000034124

Background	Several clinical reports have focused on acupuncture for the treatment of acute pharyngeal infections. However, the efficacy and safety of acupuncture for the treatment of acute pharyngeal infections are controversial. To systematically assess the efficacy and safety of acupuncture in treating acute pharynx infections, thus providing a reference for clinical decision-making.
Methods	We searched PubMed, CENTRAL, Embase, Web of Science, China National Knowledge Infrastructure, China Biomedical, clinical research registration platforms, gray literature, and reference lists of the selected studies from inception to October 30, 2022. The risk of bias assessment was performed using RevMan. The meta-analysis was performed using STATA with the Hedges' g value. We also performed a subgroup analysis, meta-regression, and publication bias detection using Harbord's and Egger's tests.
Results	We included **19 randomized controlled trials comprising 1701 patients**, of which only one study had a high risk of bias. The primary outcome, i.e., the response rate, revealed that acupuncture was more effective than antibiotics. The secondary results revealed that the differences in the reduction of VAS scores, sore throat duration, and white blood cell counts were statistically significant in the acupuncture group compared with the antibiotic group. However, the difference in the modulation of the neutrophil percentage and C-reactive protein levels was insignificant. Moreover, the acupuncture treatment resulted in a lower incidence of adverse events than the antibiotic treatment.
Conclusions	Thus, acupuncture therapy for acute pharyngeal infections is safe and its response rate is superior to that of antibiotics. Acupuncture showed positive outcomes for alleviating the sore throat symptoms, shortening the sore throat duration, and improving the immune inflammation index. Nevertheless, owing to the limitations of this study, our conclusions should be interpreted with caution. More high-quality trials are warranted in the future for improving the methodology and reporting quality.

1.2. Special Acupuncture Techniques

1.2.1. Acupoint Bloodletting

1.2.1.1. Li 2020 ☆

Li Peize. [Meta-Analysis of Bloodletting Therapy for Acute Tonsillitis]. Guiding Journal of TCM and Pharmacy. 2020. [212911].

Objective	To systematically evaluate the effectiveness of bloodletting therapy in the treatment of acute tonsillitis.
Methods	The literatures on bloodletting therapy for acute tonsillitis were systematically searched from databases of CNKI, CBM, VIP, WF, PubMed, Embase and Cochrane Library. The search time limit was set from the establishment of the database to December 5, 2019. And two authors independently screened literature, extracted data, and used the Cochrane bias evaluation manual to evaluate the quality of the documents that met the inclusion criteria. ReverMan5. 2 software was used for data analysis. Excel software was used to export acupoint frequency distribution figure and analyze the law of selecting acupuncture Points.
Results	A total of **18 randomized controlled trials** were included, a total of **1306 cases** involved. According to the meta-analysis results, firstly, the treatment group was superior to the control group in clinical efficiency [OR=5. 51, 95%CI (3. 65, 8. 31), P <0. 0000, 1], antipyretic time [WMD =-1. 00, 95% CI (-1. 40, -0. 6), P <0. 000, 01], sore throat relief time[WMD=-1. 68, 95%CI (-2. 39, -0. 96), P<0. 000, 01], improvement of immune function, recurrence and adverse reactions; Secondly, there was no significant difference between the treatment group and the control group in terms of the total number of WBC [WMD=0. 40, 95%CI (-0. 72, 1. 52), P=0. 49] and CRP [WMD=-2. 20, 95%CI (-5. 90, 1. 50), P=0. 24] after treatment; Thirdly, the top three in the frequency of use of acupoints are Shaoshang (LU11), Shangyang (LI1) and Erjiang (EX-HN6).
Conclusion	Bloodletting therapy is superior to conventional antibiotics in the treatment of acute tonsillitis in terms of clinical efficiency, antipyretic time, sore throat relief time, improvement of immune function, recurrence and adverse reactions. However, the clinical quality of the included clinical studies is not high, and more large-scale, high-quality, rigorous methodological design and quality control clinical randomized controlled trials are needed to provide more reliable evidence for validating the clinical effectiveness of bloodletting therapy for acute tonsillitis.

1.3. Special Clinical Forms

1.3.1. Postoperative pain (tonsillectomy)

see corresponding item

2. Clinical Practice Guidelines

⊕ positive recommendation (regardless of the level of evidence reported)
Ø negative recommendation (or lack of evidence)

2.1. European Society for Clinical Microbiology and Infectious Diseases (ESCMID, Europe) 2012 ∅

ESCMID Sore Throat Guideline Group, Pelucchi C, Grigoryan L, Galeone C, Esposito S, Huovinen P, Little P, Verheij T. Guideline for the management of acute sore throat. Clin Microbiol Infect. 2012;18(suppl 1):1-28. [168083].

There is inconsistent evidence of herbal treatments and acupuncture as treatments for sore throat (C-1 to C-3).

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