

Table des matières

1. Systematic Reviews and Meta-Analysis	1
1.1. Generic Acupuncture	1
2. Clinical Practice Guidelines	1
2.1. German Society of General Practice and Family Medicine (DEGAM, Germany) 2025 Ø	1
2.2. Danish Health Authority (DHA, Denmark) 2016 ⊕	1
2.3. Ontario Protocol for Traffic Injury Management Collaboration ((OPTIMa, Canada) 2016 Ø	1
2.4. Colorado Division of Workers' Compensation (USA) 2014 ⊕	2
2.5. Italian Society of Physical and Rehabilitation Medicine (SIMFER, Italie) 2013 ⊕	2
2.6. American College of Occupational and Environmental Medicine (ACOEM, USA) 2011 Ø	2
2.7. Accident Compensation Corporation (ACC, New-Zealand) 2011 Ø	2
2.8. National Health and Medical Research Council (Australie) 2003 Ø	3

Acute Neck Pain

Cervicalgies aiguës : évaluation de l'acupuncture

Articles connexes : - [cervicalgies](#) -

1. Systematic Reviews and Meta-Analysis

1.1. Generic Acupuncture

2. Clinical Practice Guidelines

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

2.1. German Society of General Practice and Family Medicine (DEGAM, Germany) 2025 ∅

El-Allawy A, Hecht N, Luedtke K, Schleicher P, Weidner N, Kötter T. Clinical Practice Guideline: Nonspecific Neck Pain. Dtsch Arztebl Int. 2025 Oct 3;122(20):552-557.
<https://doi.org/10.3238/arztebl.m2025.0119>

Negative recommendations are issued for acupuncture for acute nonspecific neck pain (LoE V, GoR B)

2.2. Danish Health Authority (DHA, Denmark) 2016 ⊕

National clinical guideline for the non-surgical treatment of recent onset non-specific neck pain. Danish Health Authority. 2016. [206338]. [URL](#).

Consider offering acupuncture treatment to patients with recent onset neck pain as an add-on to other treatment (= a weak/conditional recommendation for)

2.3. Ontario Protocol for Traffic Injury Management Collaboration ((OPTIMa, Canada) 2016 ∅

Côté P, Wong JJ, Sutton D, et al. Management of neck pain and associated disorders: A clinical practice guideline from the Ontario Protocol for Traffic Injury Management (OPTIMa) Collaboration. Eur Spine J. 2016;25(7):2000-2022. doi:10.1007/s00586-016-4467-7. [001]. [DOI](#)

Recommendation 4 For NAD grades I-II ≤ 3 months duration, In view of evidence of no effectiveness, clinicians should not offer structured patient education alone, strain-counterstrain therapy, relaxation massage, cervical collar, **electroacupuncture**, electrotherapy, or clinic-based heat

Recommendation 5 For NAD grades I-II ≥ 3 months duration, In view of evidence of no effectiveness, clinicians should not offer strengthening exercises alone, strain-counterstrain therapy, relaxation massage, relaxation therapy for pain or disability, electrotherapy, shortwave diathermy, clinic-based heat, **electroacupuncture**, or botulinum toxin injections.

2.4. Colorado Division of Workers' Compensation (USA) 2014 ⊕

Colorado Division of Workers' Compensation. Cervical spine injury medical treatment guidelines. Denver (CO): Colorado Division of Workers' Compensation. 2014; :96P. [166325].

Acupuncture is recommended for chronic pain patients who are trying to increase function and/or decrease medication usage and have an expressed interest in this modality. It also may be beneficial for individuals experiencing acute or subacute neck pain who cannot tolerate nonsteroidal anti-inflammatory drugs (NSAIDs).

2.5. Italian Society of Physical and Rehabilitation Medicine (SIMFER, Italie) 2013 ⊕

Monticone M, Iovine R, De Sena G, Rovere G, Uliano D, Arioli G, Bonaiuti D, Brugnoli G, Ceravolo G, Cerri C, Dalla Toffola E, Fiore P, Foti C Et Al. The Italian Society of Physical and Rehabilitation Medicine (Simfer) recommendations for neck pain. G Ital Med Lav Ergon. 2013;35(1):36-50. [166807].

In the case of non-specific acute NP, use medical therapy as outlined above. Manipulation, massage, physical therapy, acupuncture or anesthetic blocks can also be recommended.
Laser therapy and acupuncture combined with other conservative treatments are recommended for pain relief.

2.6. American College of Occupational and Environmental Medicine (ACOEM, USA) 2011 Ø

American College of Occupational and Environmental Medicine (ACOEM). Cervical and thoracic spine disorders. Elk Grove Village (IL): American College of Occupational and Environmental Medicine (ACOEM). 2011; 332P. [166312].

Acute Cervicothoracic Pain. Not recommended: Routine use of acupuncture (I)
Subacute Cervicothoracic Pain. Not recommended: Routine use of acupuncture (I)

2.7. Accident Compensation Corporation (ACC, New-Zealand) 2011 Ø

Hardaker N, Ayson M. Pragmatic Evidence Based Review. The efficacy of acupuncture in the management of musculoskeletal pain. Accident Compensation Corporation (ACC, New-Zealand). 2011. [182414].

- There is insufficient evidence to make a recommendation for the use of acupuncture in the management of acute neck, back or shoulder pain.

2.8. National Health and Medical Research Council (Australie) 2003 Ø

Australian Acute Musculoskeletal Pain Guidelines Group. Evidence-based management of acute musculoskeletal pain. Brisbane: Australian Academic Press Pty Ltd. 2003. 259P. [166495].

Acute Neck Pain. There are no randomised controlled studies on the effect of acupuncture or infrared acupuncture in the treatment of acute neck pain. There is conflicting evidence that acupuncture is more effective compared to placebo and other treatments for neck pain in mixed populations.

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