# Fewer Headache Days With Acupuncture

— Chronic tension headache patients experience relief with 8-week treatment course

by Michal Ruprecht, Editorial Intern, MedPage Today June 25, 2022



Acupuncture helped reduce the frequency of chronic tension-type headaches (CTTH), a randomized controlled trial in China found.

More than two-thirds (68.2%) of people with CTTH who received true acupuncture reported at least a 50% reduction in the number of monthly headache days at week 16, compared with 48.1% who had superficial acupuncture (OR 2.65, 95% CI 1.5-4.77), reported Ying Li, MD, PhD, of Chengdu University of Traditional Chinese Medicine in China, and colleagues in *Neurology*.

At week 16, those who had true acupuncture had 13.1 fewer headache days a month, while those with superficial acupuncture had 8.8 fewer monthly headache days (mean difference of 4.5 days, 95% CI 2.1-6.8, *P*<0.001).

Despite the effect seen in the superficial acupuncture group, the trial was "rigorous" and had a "really strong design," said Peter Wayne, PhD, of Harvard Medical School in Boston, who wasn't involved with the study.

"Any encounter with a healthcare provider, whether it's a physician or a surgeon, has some therapeutic effects," Wayne told *MedPage Today*.

"People inherently are hard-wired to want to get better," he added, noting that participants in both groups received "the ritual of acupuncture and a mild stimulation."

Some headache patients are shifting away from pharmaceuticals, Wayne observed. "I think many pain centers are already using acupuncture for headaches," he pointed out. "I think this will just add to the evidence to support that."

Tension-type headaches, which cause pressing and tightening on both sides of the head, are commonly treated with over-the-counter drugs. Previous studies have suggested that acupuncture may reduce the overall burden of tension headaches.

"Tension-type headaches are one of the most common types of headaches and people who have a lot of these headaches may be looking for alternatives to medication," Li said in a statement. "Our study found that acupuncture reduces the average number of headache days per month for those struggling with these painful and disruptive headache attacks."

The trial included 218 patients with CTTH with a mean age of 43.1, recruited from the Teaching Hospital of Chengdu University of Traditional Chinese Medicine from June 2017 to September 2020. Participants had experienced CTTH for 130 months and had 21.5 episodes per month at baseline, on average.

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Chronic headache was defined as 15 or more headaches per month. People who took prophylactic medications in the 3 months leading up to the study were not included. One-third of participants took drugs for acute headache treatment at baseline.

Each participant was assigned to either true acupuncture (n=110) or superficial acupuncture (n=108). Participants in the true acupuncture group were needled to experience deqi sensation, which leads to a tingling, numbness, or heaviness feeling. The superficial acupuncture group were needled in a way to avoid deqi.

"We found that deqi sensation made [a] difference in clinical effect even when the acupuncture points were the same in both groups, which might indicate that deqi sensation might be an independent contributor to the acupuncture effect," Li and colleagues wrote. "The mechanism of how deqi sensation affects the effect of acupuncture is unclear."

Both cohorts received 20 sessions over 8 weeks, and each treatment session lasted 30 minutes. The primary outcome was the responder rate -- defined as at least a 50% reduction in the monthly number of headache days -- at week 16, with followup to week 32. Headache data were self-reported.

The overall effect lasted for at least 8 months. At week 32, the responder rate was 68.2% in the true acupuncture group and 50% in the superficial acupuncture group (OR 2.4, 95% CI 1.36-4.3, *P*<0.001).

From week 4 to week 32, the percentage of participants who reported no headache intensity on a visual analogue scale increased from 0.91% to 30.91% in the true acupuncture group, and from 0% to 10.2% in the superficial acupuncture group.

Four mild adverse events were reported, which did not require treatment. One participant from each group experienced subcutaneous hematoma and two patients from the true acupuncture group had pain at the needle site.

Li and co-authors noted that all participants came from one hospital and results may not be generalizable to other communities.



Michal Ruprecht is a medical student based in Michigan. He is a former reporting intern for MedPage Today. Follow

#### **Disclosures**

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Li and co-authors reported no conflicts of interest.

### **Primary Source**

Neurology

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