9. Cardiovascular Diseases

Reference

1. Objectives
To evaluate the antispastic effect of the electroacupuncture and Moxibustion on stroke patients.

2. Design
Randomized controlled trial (RCT).

3. Setting
One Oriental hospital (Kyunghee University Medical Center), Republic of Korea.

4. Participants
Patients with stroke onset of more than 5 weeks and a spastic elbow joint (n=35).

5. Intervention
Arm 1: Conservative therapy + electroacupuncture treatment at the Quchi (LI11, 曲池)-Shousanli (LI10, 手三里) or Waiguan (TE5, 外關)-Hegu (LI4, 合谷) acupuncture points for 8 rounds (n=15).
Arm 2: Conservative therapy + moxibustion treatment at the Quchi (LI11, 曲池)-Shousanli (LI10, 手三里) or Waiguan (TE5, 外關)-Hegu (LI4, 合谷) acupuncture points (n=10).
Arm 3: Control treatment group (n=10).

6. Main outcome measures
Score on the Modified Ashworth Scale.

7. Main results
Spasticity was significantly decreased at 1 and 3 hours and 5 days by electroacupuncture treatment ($P<0.05$), but not by moxibustion treatment.

8. Conclusions
Electroacupuncture temporarily relieves spasticity in patients with stroke, and repeated application maintains relief.

9. Safety assessment in the article
Not mentioned.

10. Abstractor’s comments
This study evaluates the effectiveness of electroacupuncture and moxibustion on spasticity due to stroke. Electroacupuncture had significant efficacy for spasticity. This 8-week study failed to show any significant efficacy of moxibustion treatment. A future large scale and long term clinical trial is needed to test moxibustion at other acupuncture points and using other treatment courses.

11. Abstractor
Go HY, 18 July 2010.