

13. Diseases of the Musculo Skeletal System and Connective Tissue

Reference

Yu SM, Lee JY, Kwon KR, et al. Comparative study of acupuncture, bee venom acupuncture, and bee venom pharmacopuncture on the treatment of herniation of nucleus pulposus. *Daehan-Chimgu-Hakhoeji (Journal of Korean Acupuncture & Moxibustion Society)* 2006; 23(5): 39–54 (in Korean with English abstract).

1. Objectives

To compare the efficacy of acupuncture, bee venom acupuncture, and bee venom pharmacopuncture as treatment for herniation of nucleus pulposus.

2. Design

Randomized controlled trial (RCT).

3. Setting

One Oriental hospital (Inega Oriental Hospital), Republic of Korea.

4. Participants

Patients with intervertebral disc herniation (age, 20–60; n=37).

5. Intervention

Arm 1: Standard treatment (acupuncture, drug treatment, physiotherapy) (n=15).

Arm 2: Standard treatment + bee venom pharmacopuncture (BVP; n=11).

Arm 3: Standard treatment + bee venom acupuncture (BVA; n=11).

Acupuncture was applied to the Mingmen (GV4, 命門), Yaoyangguan (GV3, 腰陽關), Shenshu (BL23, 腎俞), Qihai (BL24, 氣海俞), Dachangshu (BL25, 大腸俞), Guanyuanshu (BL26, 關元俞), and Huantiao (GB30, 環跳) acupuncture points twice a day (in the morning and afternoon); Houxi (SI3, 後溪), Zusanli (ST36, 足三里), Yanglingquan (GB34, 陽陵泉), and Linggu (靈骨) acupuncture points in the morning; Mingmen (GV4, 命門), Yaoyangguan (GV3, 腰陽關), Naoshu (SI10, 臑俞), Qihai (BL24, 氣海俞), Dachangshu (BL25, 大腸俞), Guanyuanshu (BL 26, 關元俞), and Huantiao (GB30, 環跳) acupuncture points in the afternoon. Depending on the severity of the pain, additional acupuncture would be applied to the kidney JEONGGYEOK(腎正格), liver JEONGGYEOK(肝正格), and gallbladder JEONGGYEOK(膽正格) acupuncture points.

BVP (once a day in the afternoon): Concentration of injected venom increased over time from 1:4000 in 0.1 ml to 1:2000 in 1 ml.

BVA (once a day in the afternoon): The bee venom was placed on the end of each acupuncture needle. No details concerning other drug treatment, physiotherapy, bedside rest were given.

Two patients, who chose surgery instead, withdrew (one subject each in Arm 2 and 3).

6. Main outcome measures

Pain self-assessed on a visual analogue scale (VAS), Oswestry Disability Index (ODI) score assessed before treatment, and after 10, 20, and 30 days of treatment; degree of physical recovery (excellent, good, fair, and poor) as assessed by the Straight Leg Raising Test (SLRT) and range of motion (ROM).

7. Main results

Treatment in all groups relieved pain ($P<0.05$) and significantly improved ODI score ($P<0.05$).

Overall, recovery was either excellent (14.3%, 5 cases), fair (45.7%, 16 cases), or good (40%, 14 cases). Recovery was excellent (0), good (4), and fair (22) in the acupuncture groups, and excellent (3), good (5), and fair (2) in the bee venom acupuncture group, and excellent (2), good (5), and fair (3) in pharmacopuncture group.

8. Conclusions

Bee venom acupuncture (or bee venom pharmacopuncture) with conventional treatment is more effective than acupuncture alone for intervertebral disc herniation.

9. Safety assessment in the article

Not mentioned.

10. Abstractor's comments

The terms 'bee venom acupuncture' and 'bee venom pharmacopuncture' are not generally used. In this study, the method of randomization was not described. Moreover, as the control acupuncture treatment is known to be effective, it is suggested that the study lacks a placebo control.

11. Abstractor and date

Kim JI, 17 June 2010.