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A randomized trial comparing acupuncture and simulated acupuncture for subacute and chronic whiplash.

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Abstract

STUDY DESIGN:
A randomized controlled trial with 3 and 6 months follow-up.

OBJECTIVE:
To compare the effectiveness of acupuncture with simulated acupuncture in patients with subacute and chronic whiplash-associated disorders.

SUMMARY OF BACKGROUND DATA:
Acupuncture is widely used for the treatment of neck and other musculoskeletal pain, and there is some evidence supporting its effectiveness for short-term pain relief. The effectiveness of acupuncture in the treatment of whiplash-associated disorders is not clear.

METHODS:
A total of 124 patients between 18 and 65 years with chronic (85%) or subacute whiplash-associated disorders (Grade I or II) were randomly allocated to real or simulated electroacupuncture treatment for 12 sessions during a 6-week period. Both treatments involved skin penetration with acupuncture needles and were provided by a single university-trained acupuncturist in a University Clinic in Sydney, Australia. Primary outcome measures were pain intensity (10-cm visual analog scale), disability (Neck Disability Index), and health-related quality of life (SF-36). Secondary outcomes were patient-specific activity scales, and the McGill Pain Rating Index.

RESULTS:
Mean initial pain intensity for all participants was 5.6 cm. Participants receiving the real electroacupuncture treatment had significantly greater reduction in pain intensity at 3 and 6 months, 0.9 cm (P = 0.05) and 1.3 cm (P = 0.007), respectively, in comparison to the sham electro-acupuncture group. After adjustment for baseline status, there was no significant reduction in disability, or improvement in health-related quality of life. There was an improvement in the activity scales of a similar size to the reduction in pain, but no difference in the McGill Index.

CONCLUSION:

Real electroacupuncture was associated with a significant reduction in pain intensity over at least 6 months. This reduction was probably not clinically significant. There was no improvement in disability or quality of life.

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