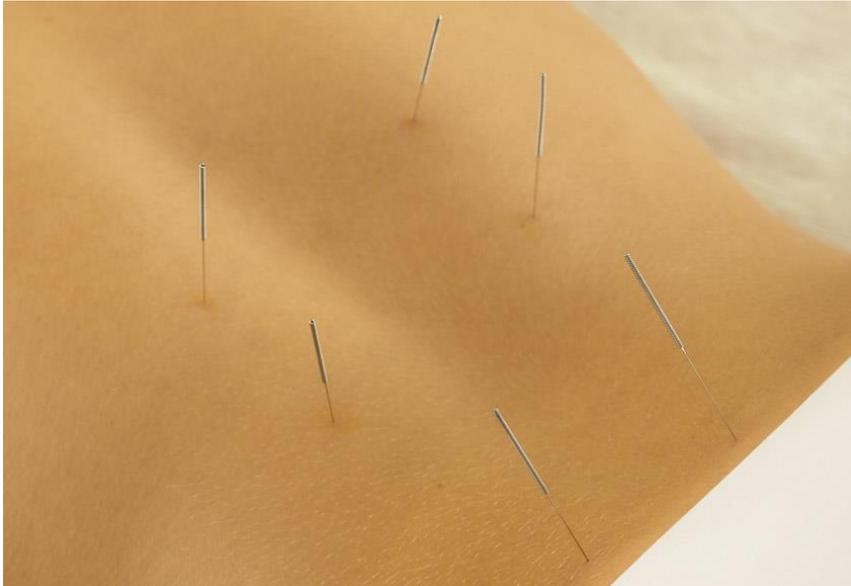


# Acupuncture Outmatches Drug For IBS

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Acupuncture and Chinese herbal medicine are found effective for the alleviation of IBS (irritable bowel syndrome). Two independent investigations confirm that acupuncture, as a standalone therapy, or acupuncture combined with the herbal formula Si Shen Wan (Four Miracle Pill) is safe and effective. Additionally,

investigators confirm that acupuncture is more effective than loperamide, a synthetic opiate used to control diarrhea by inhibiting peristalsis (wavelike intestinal constriction and relaxation).

Heilongjiang Traditional Chinese Medicine Hospital researchers determined that acupuncture, as a standalone therapy, produces a 92.19% total effective rate for the treatment of IBS. A group receiving loperamide plus Si Shen Wan achieved a 72.88% total effective rate. The acupuncture group outperformed the drug plus herbs group by 19.39%. The total effective rate includes all patients that completely recovered or those that had significant relief of symptoms with less frequency of IBS and improved daily life activity functioning.

In an independent investigation, Chongqing Nanchuan Traditional Chinese Medicine Hospital researchers determined that acupuncture plus Si Shen Wan is more effective than loperamide plus Si Shen Wan. Acupuncture plus Si Shen Wan was significantly more effective for the reduction of abdominal pain and discomfort and also for controlling bouts of excessive bowel movement frequency than loperamide plus Si Shen Wan. Acupuncture plus herbs was also successful in improving stool consistency and appearance, bloating, and fecal incontinence whereas the drug plus herbs group did not show significant improvements in these areas.

An SF-6 health survey (a variant of the SF-36), reveals that acupuncture plus herbs produces additional advantages over drugs plus herbs. Acupuncture plus herbs significantly improves the following: vitality, bodily pain levels, role limitations due to physical health, physical functioning, role limitations due to emotional health, mental health, social functioning. The drugs plus herbs group showed more modest improvements that were limited to only two of these areas of health: bodily pain levels, role limitations due to physical health.

An IBS-QOL (disease specific questionnaire) demonstrates additional advantages to acupuncture over drugs. Acupuncture plus herbs produced significant improvements in the following areas: interference with activity, dysphoria, health concern, body image, food avoidance. Drugs plus herbs produced a minor benefit for food avoidance only.

### **Heilongjiang Traditional Chinese Medicine Hospital**

Let's take a closer look at the study from Heilongjiang Traditional Chinese Medicine Hospital where acupuncture, as a standalone therapy, produced a 92.19% total effective rate and loperamide plus Si Shen Wan produced a 72.88% total effective rate. A total of 123 IBS patients participated in the clinical trial. They were diagnosed for treatment at Heilongjiang Traditional Chinese Medicine Hospital between January 2014 and December 2015. They were randomly divided into two groups: 64 patients in the acupuncture treatment group and 59 patients in the drug control group. The age, gender, and duration of illness for both groups at the inception of the study were equivalent ( $P > 0.05$ ) to ensure fairness of results. The following primary acupoints were selected for the acupuncture treatment group:

- Baihui (GV20)
- Taichong (LV3)
- Tianshu (ST25)
- Zusanli (ST36)
- Yintang (MHN3)
- Sanyinjiao (SP6)
- Shangjuxu (ST37)

Size 0.30 mm x 30 mm acupuncture needles were used for scalp and glabella acupoints and 0.30 mm x 40 mm acupuncture needles were used for all other acupoints. Except for Tianshu, needles were manipulated after insertion and were then retained for 30 minutes. During needle retention, needles were manipulated every 10 minutes. Manipulation techniques differed among acupoints. For Zusanli and Sanyinjiao,

rotating and lifting (Ti Cha Nian Zhuan) with reinforcement (bu) was used. For Taichong and Shangjuxu, rotating and lifting with attenuation (xie) was used. For Baihui and Yintang, rotating and lifting with mild reinforcement and attenuation (Ping Bu Ping Xie) was used. The manipulation time was 1 minute each session for each acupoint. For Tianshu, an acupoint nerve stimulator was attached to the needle upon arrival of deqi. The device was set to a constant wave at a frequency of 60 Hz. The needle was also retained for 30 minutes. One acupuncture session was conducted per day, 3–4 days per week. The total treatment period spanned 1 month.

Routine treatment for the control group consisted of loperamide capsules and Sishenwan pills. Loperamide capsules were orally ingested 3 times per day, 1 capsule each time, 30 minutes before meals. Sishenwan pills were orally ingested 2 times per day, 9 g each time. Routine treatment was administered for 1 month. The results indicate that acupuncture is more effective than loperamide plus Si Shen Wan for the treatment of IBS. Notably, Si Shen Wan was provided in pill form in this study whilst the following study provided the herbal formula in a decoction form for patients receiving acupuncture.

### **Chongqing Nanchuan Traditional Chinese Medicine Hospital**

The Chongqing Nanchuan Traditional Chinese Medicine Hospital research compared two groups of patients taking the herbal formula Si Shen Wan; however, one group received acupuncture and the other group received loperamide for the treatment of IBS. The 28 day clinical trial used a symptom scale plus an SF-6 and IBS-QOL to calculate effective rates. The data supports the conclusion that acupuncture with herbs is significantly more effective than loperamide plus herbs. Notably, the group receiving acupuncture had marked improvements in IBS related scores (including abdominal pain, diarrhea, abnormal bowel movement activity) and holistic recovery scores (quality of life improvements).

The patients were randomly divided into two groups of 63, the acupuncture group and the drug group. To ensure the fairness and objectivity of the treatment results, patients were grouped randomly such that the age, gender and duration of illness for both groups were equivalent ( $P > 0.05$ ). The following primary acupoints were selected for the acupuncture treatment group (on alternating sides of the body):

- Shangjuxu (ST37)
- Quchi (LI11)
- Dachangshu (BL25)
- Tianshu (ST25)

After disinfection, acupuncture needles were inserted into each acupoint with a two-handed insertion technique; based on the position of the acupoint, either nail pressing or skin stretching was used to insert the needle. The needles were then manipulated with rotating and lifting (Ti Cha Nian Zhuan), conforming to the reinforcement and attenuation (Ping Bu Ping Xie) principle. Upon achieving deqi, the needles were retained for 30 minutes without manipulation thereafter. One acupuncture session was administered per day for 28 days. The herbal decoction was comprised the following primary ingredients:

- Baizhu (20 g)
- Shanyao (15 g)
- Baishao (15 g)
- Chenpi (10 g)
- Huangqin (10 g)
- Chaihu (10 g)
- Wumei (10 g)
- Ganjiang (10 g)
- Zhigancao (6 g)
- Fangfeng (6 g)

Secondary ingredients were added based on individual symptoms. For severe diarrhea, the following herbs were added:

- Baibiandou
- Fuling

For severe constipation, the following herbs were added:

- Yuliren
- Binglang

For severe abdominal pain or bloating, the following herbs were added:

- Yanhusuo
- Zhiqiao
- Foshou
- Muxiang

For sticky stools, the following herbs were added:

- Houpo
- Cangzhu

The ingredients were decocted in water. The herbal medicine was ingested 2 times per day, 200 ml each time, for 28 days. The drug therapy group received loperamide capsules (Xian Janssen Pharmaceutical, Ltd.) and Sishenwan pills (Beijing Tong Ren Tang Pharmaceutical Co., Ltd.). Loperamide capsules were orally ingested 3 times per day, 1 capsule each time, 30 minutes before meals. Sishenwan pills were orally ingested 2 times per day, 9 g each time. Treatment was administered for 28 days. During the treatment period, all patients were restricted from consuming raw, cold, greasy, and spicy foods. Regular mealtimes (3 times per day) were established and meal portions were controlled. Patients with constipation were advised to increase fiber intake. The study demonstrates that acupuncture plus herbs significantly outperforms loperamide plus herbs.

### **Summary**

The independent investigations indicate that acupuncture is an important treatment option for patients with IBS. Acupuncture improves digestion, absorption, and regulates elimination. Patients are encouraged to contact local licensed acupuncturists to consult about treatment options.

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