

Acupuncture in cancer care: Developing recommendations for safe practice

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Background

Concerns about acupuncture's safety remain a significant barrier to appropriate referral from oncology teams, to use by acupuncturists, and to uptake by cancer patients. Existing guidelines for safe practice of acupuncture in integrative oncology were outdated. [1, 2] During 2022/23, an expert panel developed updated recommendations for publication and international dissemination.

Aims

To enable acupuncture as a safe, appropriate adjunct to routine cancer treatment, these recommendations:

- facilitate safe clinical practice
- support, inform, and empower acupuncturists
- inform oncology professionals and policy makers.

Scope

They are intended for use by any practitioner of acupuncture using any form of acupuncture working in any setting, from integrative oncology settings to independent practitioners working in the community.



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Methods

The expert panel comprised a core development team (BdV, TY, CZ) and 12 invited international experts, who are co-authors. In two rounds, experts' comments were harmonised by the core team before final ratification and open access publication.

The panel comprised:

- senior acupuncturists with and without experience of working in oncology settings
- oncologists
- physicians/nurses trained in integrative oncology
- researchers
- academics
- professional body representatives
- a patient representative.

To aid dissemination and take-up, panel members represent national and international integrative oncology associations and treatment centres in Europe, USA, Australia, and the Middle East.

Results

Comprehensive, pragmatic recommendations for using acupuncture for people on and off treatment (surgery, Systemic Anti-Cancer Treatment (SACT), radiotherapy) provide clear guidance on:

- contra-indications
- adapting acupuncture techniques to the cancer context
- neutropenia, thrombocytopenia, blood thinners.

Exemplifying the definition of evidence-based medicine by integrating "the best external evidence with individual clinical expertise and patients' choice"[3], they:

- dispel myths around acupuncture in cancer treatment, e.g. acupuncture during chemotherapy
- clarify areas of uncertainty, e.g. acupuncture and anticoagulant therapies
- clarify best practice, e.g. acupuncture and lymphoedema.



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Special feature

The table of Red and Amber Flags identifies when patients should be referred to their medical team and highlights when emergency referrals are indicated. Its handy "at-a-glance, print-out-and-keep" format makes it useful for easy clinical reference.

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Table 4 Red and Amber Flag symptoms related to cancer or cancer treatments	
General note: These recommendations should be considered in relation to any local guidance and procedures, which take precedence.	
RED FLAG: Refer urgently for medical assessment. Do not treat with acupuncture.	
Recommended actions for any of the symptoms/situations are:	
• Urgent referral (following any local procedures) for assessment/medical review in a relevant facility, e.g., Acute Oncology Services (AOS) in the UK or hospital Accident and Emergency (A&E) department.	
• Following medical assessment, and if Red Flag symptom(s) are ongoing, give acupuncture only with medical consent/supervision.	
Anorexia (severe)/weight loss/malnutrition:	
No/minimal oral intake or urinary output for > 12 hours.	
Decreased oral intake in association with significant unintentional weight loss (> 10% loss in previous 3-6 months) or malnutrition (MUST score of ≥ 2 [28]).	
Auto-immune disease – NEW if on immunotherapy	
See Table 5 below and the section "Auto-immune reactions to immunotherapy" below for potential reactions.	
Bleeding and bruising:	
Unexpected, severe, or massive bleeding or widespread spontaneous bruising (including widespread purple petechial rash, haemoptysis, haematemesis, significant nosebleed).	
Cognitive:	
New or worsening confusion or disorientation/ cognitive disturbance/reduction in conscious level.	
Constipation: Severe	
No bowel movement for 72 hours over usual regularity pre-cancer treatment.	

Conclusion

These are the first international, multidisciplinary, peer-reviewed recommendations for the safe practice of acupuncture for people with cancer. By disseminating trustworthy, accessible guidance, the authors aim to facilitate informed, confident acupuncture practice in and outside of oncology healthcare settings.

References

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Open access:

<https://rdcu.be/dLQJC>

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