

<p align="center">Statement from the Regional HTA Centre of Region Västra Götaland, Sweden</p>

Auricular acupuncture for narcotic dependency

Question at issue:

Does auricular acupuncture according to the NADA protocol, on drug (pharmaceutics) or narcotic dependent patients, have a positive effect on continued participation in treatment programs, reduced drug consumption, relapse, withdrawal symptoms, and craving, as well as on psychological well-being, compared to sham acupuncture, or for opiate dependence, compared to methadone or buprenorphine treatment?

PICO (Patient, Intervention, Comparison, Outcome)

- P= Drug (pharmaceutics) or narcotic dependent patients, including patients with mixed dependency for alcohol and drugs
Not isolated alcohol dependence, not isolated nicotine dependency
- I= Auricular acupuncture. Five points according to NADA (only needles, no electric current nor laser)
- C= Placebo, i.e. sham acupuncture, or for opiate dependence, comparison to methadone or buprenorphine treatment
- O= Primary outcome:
- Continued participation in treatment programs (time)
Secondary outcomes:
- Reduction in drug consumption (concentrations of substances in blood/urine)
- Drug free days (number of days when the concentration of substances in blood/urine, according to above, are zero)
- Number of relapses (number of occasions when concentrations of substances, according to above, are detected)
- Reduction of withdrawal symptoms (measured with a validated scale)
- Craving (measured with a validated scale)
- Psychological status (measured with a validated scale)

Summary of the health technology assessment:

Method and patient category:

Drug or narcotic dependent patients, including patients with mixed dependency for alcohol and drugs, are a vulnerable group of patients with poor survival, impaired functional capacity, and health related quality of life. Effective methods of treatment and weaning are largely absent. Auricular acupuncture according to NADA is acupuncture (without electrical stimulation) at five defined points on the auricula, usually, with treatment several times a week, for weeks or months.

Level of evidence for studied patient benefit:

The systematic literature review identified two systematic reviews, two randomized controlled trials, and four case reports about side effects and risks. The two systematic overviews included mainly studies that failed to meet the current PICO. Both systematic reviews concluded that scientific support for a positive effect of auricular acupuncture on narcotic dependence is lacking. The two randomized controlled trials, included in this HTA, were both of low quality.

All outcomes:

For all efficacy variables defined in the present PICO, the scientific evidence is insufficient for assessment of possible effects of auricular acupuncture (insufficient level of evidence).

Side effects:

There are isolated cases of infection and in some cases, sepsis (blood poisoning), however, no cases were fatal. Side effects may occur, most likely, with very low frequency.

Ethical aspects:

It is ethically highly questionable to use a treatment in routine care, for which the scientific support for patient benefit is insufficient.

Economic aspects

The costs of this technology are small. There are no cost-benefit analyses.

Concluding remarks

There is no scientific support for the efficacy of ear acupuncture, according to NADA, for treatment of narcotic dependency.

On behalf of the Regional HTA Centre of Region Västra Götaland, Sweden.

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