Outcomes of acupuncture for chronic pain in urban primary care.

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Abstract
Purpose: The purpose of this study was to describe outcomes of the Acupuncture to Decrease Disparities in Outcomes of Pain Treatment (ADDOPT) trial, testing acupuncture as an adjunct to usual treatment for chronic pain in urban health centers. Method: We conducted a quasi-experimental trial. Primary care patients (>21 years old) with chronic pain caused by osteoarthritis or neck or back pain at 4 hospital-owned safety net health centers in the Bronx, New York, received weekly acupuncture treatments provided by supervised acupuncture students for up to 14 weeks. Pain and functional status were assessed during a 6-week run-in period before acupuncture, during treatment, and after treatment.

RESULTS:
Of 495 referred patients, 226 (47%) initiated acupuncture. Back pain was the most common referring diagnosis (59.5%) followed by osteoarthritis (16.3%). Patients were older (mean age, 54.3 years), mostly insured by Medicaid (60.4%), often receiving disability (38.3%), and often in poor or fair overall health (46.7%). They had high baseline levels of pain (mean severity per the Brief Pain Inventory, 6.8; mean days with pain, 12.3 of 14). The mean number of treatments was 9.7 (standard deviation, 7.3). Pain severity improved from baseline (6.8 vs. 5.6 at 12 weeks and 5.5 at 24 weeks), as did physical well-being (31.8 vs. 35.7 at 12 weeks and 35.3 at 24 weeks). Using hierarchical linear modeling methods, reduction in pain severity between baseline and the treatment phase was significant (P < .001). Improvements in physical well-being were significant at 12 and 24 weeks after baseline (P < .001).

CONCLUSIONS:
Referred primary care patients experienced high levels of pain and pain-related disability. Weekly acupuncture was associated with short-term improvements in pain and quality of life.

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