

Performing systematic reviews of clinical trials of acupuncture: problems and solutions

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Systematic reviews of randomized controlled trials, rather than narrative reviews, generally provide the approach that is least subject to bias for assessing the efficacy and effectiveness of a therapy. But despite their increasing use, systematic reviews are not free of problems, particularly when used to assess the evidence for acupuncture. Common weaknesses are inadequate literature searches and unclear inclusion criteria, including absence of a definition of 'acupuncture' for delineating the scope of the review. In addition, the adequacy of the acupuncture performed in the trials is often not addressed. Overall, there is little consistency in the criteria used for critiquing the included trials. The validated five-point, and expanded nine-point, Jadad scales for assessing trial quality are discussed, especially in regard to their emphasis on double blinding that can be applied to acupuncture trials if 'double blind' is defined as patient and assessor blinding. Suggestions are made for avoiding each of the above-cited problems for future systematic reviews, which should include an acupuncture specialist in the author team. For the near future, however, there is a greater need for new high-quality RCTs of acupuncture than for additional systematic reviews of existing trials. © 2002, Elsevier Science Ltd. All rights reserved.

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INTRODUCTION

Evidence-based medicine has been defined as the conscious, explicit and judicious use of current best evidence in making decisions about the care of individual patients.¹ The practice of evidence-based medicine means integrating individual clinical experience with the best available evidence from clinical research. It does not mean, as commonly interpreted, only using treatments that have been demonstrated as effective in RCTs.

Systematic reviews form the highest level of evidence of efficacy and effectiveness for practising evidence-based medicine, since they reduce bias by following pre-established methods to obtain all

available information and to evaluate it even-handedly. Systematic reviews usually use evidence from RCTs, though reviews can include other trial designs such as uncontrolled studies when there are insufficient RCTs of acceptable quality.

A systematic review is an overview of primary studies that contains an explicit statement of objectives, materials, and methods and has been conducted according to explicit and reproducible methodology.² The rationale for the place of systematic reviews in health care has been discussed in detail and includes the needs to evaluate evidence critically, condense large amounts of information into digestible quantity and format, integrate important pieces of information, assess the consistency of

