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Acupoint

Meridian

Special Point Role

Surface Region

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Studied Condition

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Naturopathic Care for Chronic Low Back Pain: A Randomized Trial

Orest Szczurko, Kieran Cooley, Jason W Busse, Dugald Seely, Bob Bernhardt, Gordon H Guyatt, Qi Zhou, Edward J Mills. "Naturopathic Care for Chronic Low Back Pain: A Randomized Trial." *PLoS ONE*, 2007.
<https://doi.org/10.1371/journal.pone.0000919>

Studied Condition

Low back pain

Condition Note

chronic low back pain

Trial Type: RCT

Sample Size

Total: 75 participants; Naturopathic care group: 39 participants; Control group: 36 participants

Control Groups

The control group received standardized physiotherapy advice, which included an educational booklet designed by the British Physiotherapy Association. This booklet provided information on back pain management, including causes, prognosis, appropriate use of imaging studies and specialists, and exercises for promoting recovery and preventing recurrences. Participants

Condition
Context
Pain
Country
Canada

were also instructed on specific back stretching and strengthening exercises and relaxation techniques.

Acupuncture Modality

The acupuncture modality involved twice-weekly sessions for 12 weeks, using Seirin disposable needles number 5 (0.25630 mm) inserted at specific points (GV 3,4, BL 23, 25, 40 bilaterally) to a depth of 0.5 cun, with stimulation to achieve de qi and left in place for 20 minutes per session.

Stimulation Type

Manual stimulation to achieve de qi sensation; needles left in place for 20 minutes

Needling Details

Needle depth: 0.5 cun; Needle angle: Not mentioned

Listed Acupoints: GV 3, GV 4, BL 23, BL 25, BL 40

Acupoint	Meridian	Special Point Role	Surface Region	Related Region	Body Region
BL 23	Bladder Meridian	Back-Shu Point of the Kidney	lower back	lumbar vertebra 2, posterior median line	lower back, trunk
BL 25	Bladder Meridian	Back-Shu Point of the Large Intestine	lower back	lumbar vertebra 4, posterior median line	lower back, trunk
BL 40	Bladder Meridian	He-Sea Point	knee	popliteal crease	knee, leg, limb, lower limb segment
GV 3	Governor Vessel		lower back	iliac crest, lumbar vertebra 4, posterior median line	lower back, trunk
GV 4	Governor Vessel		lower back	lumbar vertebra 2, posterior median line	lower back, trunk

Acupuncture relieves pelvic and low-back pain in late pregnancy

Nina Kvorning, Catharina Holmberg, Lars Grennert, Anders A °berg, Jonas A °keson. "Acupuncture relieves pelvic and low-back pain in late pregnancy." , 2004. <https://doi.org/10.1111/j.0001-6349.2004.0215.x>

Studied Condition
Low back pain
Condition Note
pelvic and low-back pain during pregnancy
Condition Context
Pain
Country
Sweden

Trial Type: Randomized Controlled Trial (RCT)
Sample Size
Total: 72 participants; Acupuncture group: 37 participants; Control group: 35 participants
Control Groups
The controls in the study were untreated; they did not receive any sham stimulation or placebo treatment.
Acupuncture Modality
Traditional acupuncture points and local tender points were used, with periosteal stimulation when possible. Specific points included LR3, GV20, BL60, SI3, and others, with needle insertion techniques varying (tangentially, obliquely, perpendicularly) and achieving Dechi was a goal. Treatment frequency was initially twice a week, then once a week.
Stimulation Type
Manual stimulation with periosteal stimulation when possible; needles manipulated to achieve Dechi, repeated after 30-60 seconds; frequency: twice a week for the first two weeks, then no more than once a week.
Needling Details
Needle depth: 2.5-inch needles for lumbar and sacral bladder points, minimal gluteal muscle tendon, sacroiliac tendons; 1.0-inch needles for symphysis. Needle angle: tangentially for lumbar and sacral bladder points and minimal gluteal muscle tendon, obliquely for sacroiliac tendons, perpendicularly for symphysis.

Listed Acupoints: LR 3, GV 20, BL 60, SI 3, BL 22, BL 23, BL 24, BL 25, BL 26

Acupoint	Meridian	Special Point Role	Surface Region	Related Region	Body Region
BL 22	Bladder Meridian	Back-Shu Point of Triple Energizer	lower back	lumbar vertebra 1, posterior median line	lower back, trunk
BL 23	Bladder Meridian	Back-Shu Point of the Kidney	lower back	lumbar vertebra 2, posterior median line	lower back, trunk
BL 24	Bladder Meridian		lower back	lumbar vertebra 3, posterior median line	lower back, trunk

BL 25	Bladder Meridian	Back-Shu Point of the Large Intestine	lower back	lumbar vertebra 4, posterior median line	lower back, trunk
BL 26	Bladder Meridian		lower back	lumbar vertebra 5, posterior median line	lower back, trunk
BL 60	Bladder Meridian	Jing-River Point	tarsal region	calcaneal tendon, lateral malleolus of fibula	limb, lower limb segment, tarsal region
GV 20	Governor Vessel		head	anterior hairline, anterior median line, posterior hairline	head
LR 3	Liver Meridian	Shu-Stream Point, Yuan-Primary Point	pes	dorsalis pedis artery, metatarsal bone of digit 1, metatarsal bone of digit 2	limb, lower limb segment
SI 3	Small Intestine Meridian	Confluent Point, Shu-Stream Point	manual digit 5	distal phalanx, nail of manual digit 5	limb

Acupuncture for low back pain in pregnancy -a prospective, quasi-randomised, controlled study

João Bosco, Guerreiro Da Silva, Mary Uchiyama Nakamura, José Antonio Cordeiro, Luiz Kulay, Mary Uchiyama. "Acupuncture for low back pain in pregnancy -a prospective, quasi-randomised, controlled study." , 2004. <https://doi.org/10.1136/aim.22.2.60>

Studied Condition

Low back pain

Condition Note

low back and pelvic pain during pregnancy

Condition Context

Pain

Trial Type: quasi-randomised, pragmatic controlled study

Sample Size

Total: 61 participants; Study group (acupuncture): 27; Control group: 34

Control Groups

The control group received conventional treatment only, which included paracetamol and hyoscine.

Acupuncture Modality

Traditional needle-based acupuncture using classical points without electro-

Country Brazil	<p>stimulation or ear acupuncture, involving the insertion of approximately 12 needles for about 25 minutes per session.</p> <p>Stimulation Type Manual stimulation to elicit de qi; no specific frequency mentioned</p> <p>Needling Details Not mentioned (the paper does not specify the exact needle depth or angle of insertion)</p>
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Listed Acupoints: KI 3, SI 3, BL 62, BL 40, TE 5, GB 30, GB 41, Huatuojiagi

Acupoint	Meridian	Special Point Role	Surface Region	Related Region	Body Region
BL 40	Bladder Meridian	He-Sea Point	knee	popliteal crease	knee, leg, limb, lower limb segment
BL 62	Bladder Meridian	Confluent Point	pes	calcaneus, lateral malleolus of fibula	limb, lower limb segment
GB 30	Gallbladder Meridian		buttock	anterior superior iliac spine, greater trochanter, sacral hiatus	buttock
GB 41	Gallbladder Meridian	Confluent Point, Shu-Stream Point	pes	metatarsal bone of digit 4, metatarsal bone of digit 5, tendon of extensor digitorum longus	limb, lower limb segment
Huatuojiagi			process of vertebra	lumbar vertebra 1, lumbar vertebra 2, lumbar vertebra 3, lumbar vertebra 4, lumbar vertebra 5, thoracic vertebra 1, thoracic vertebra 2, thoracic vertebra 3, thoracic vertebra 4, thoracic vertebra 5, thoracic vertebra 6, thoracic vertebra 7, thoracic vertebra 8	process of vertebra

KI 3	Kidney Meridian	Shu-Stream Point, Yuan-Primary Point	tarsal region	calcaneal tendon, medial malleolus	limb, lower limb segment, tarsal region
SI 3	Small Intestine Meridian	Confluent Point, Shu-Stream Point	manual digit 5	distal phalanx, nail of manual digit 5	limb
TE 5	Triple Energizer Meridian	Confluent Point, Luo-Connecting Point	forelimb zeugopod	dorsal wrist crease, interosseous muscle of autopod, radius bone, ulna	arm, limb, upper limb segment

Acupuncture in the Management of Chronic Low Back Pain: A Blinded Randomized Controlled Trial

Daniel P Kerr, Deirdre M Walsh, David Baxter. "Acupuncture in the Management of Chronic Low Back Pain: A Blinded Randomized Controlled Trial." *The Clinical Journal of Pain*, 2003. <https://doi.org/10.1097/00002508-200311000-00004>

Studied Condition

Low back pain

Condition Note

chronic low back pain

Condition Context

Pain

Country

Northern Ireland

Trial Type: Randomized Controlled Trial (RCT)

Sample Size

Total: 60 participants; Acupuncture group: 30 initially (26 completed); Placebo-TENS group: 30 initially (20 completed)

Control Groups

Placebo transcutaneous electrical nerve stimulation (TENS) using a nonfunctioning TENS machine

Acupuncture Modality

The acupuncture modality involved using Seirin acupuncture needles No. 8 (0.30 × 50 mm) inserted at specific points (Bladder 23, 25, Gall Bladder 30, Bladder 40, Kidney 3, and Governor Vessel 4) until the sensation of "ch'i" was produced. The needles were manually rotated during 30-minute sessions conducted weekly over a 6-week period.

Stimulation Type

Manual rotation of needles at initial insertion and at 10-minute and 20-minute intervals during a 30-minute session

Needling Details

Not mentioned (the paper does not specify the exact needle depth or angle, only that needles were inserted until the sensation of "ch'i" was produced)

Listed Acupoints: BL 23, BL 25, GB 30, BL 40, KI 3, GV 4

Acupoint	Meridian	Special Point Role	Surface Region	Related Region	Body Region
BL 23	Bladder Meridian	Back-Shu Point of the Kidney	lower back	lumbar vertebra 2, posterior median line	lower back, trunk
BL 25	Bladder Meridian	Back-Shu Point of the Large Intestine	lower back	lumbar vertebra 4, posterior median line	lower back, trunk
BL 40	Bladder Meridian	He-Sea Point	knee	popliteal crease	knee, leg, limb, lower limb segment
GB 30	Gallbladder Meridian		buttock	anterior superior iliac spine, greater trochanter, sacral hiatus	buttock
GV 4	Governor Vessel		lower back	lumbar vertebra 2, posterior median line	lower back, trunk
KI 3	Kidney Meridian	Shu-Stream Point, Yuan-Primary Point	tarsal region	calcaneal tendon, medial malleolus	limb, lower limb segment, tarsal region

The Use of Electro-Acupuncture in Conjunction with Exercise for the Treatment of Chronic Low-Back Pain

Cecilia K N Yeung, Mason C P Leung, Daniel H K Chow. "The Use of Electro-Acupuncture in Conjunction with Exercise for the Treatment of Chronic Low-Back Pain." *Journal of Alternative and Complementary Medicine*, 2003. <https://doi.org/10.1089/107555303322284767>

Studied Condition Low back pain Condition Note Chronic Low-Back Pain Condition Context Pain Country Hong Kong	Trial Type: RCT (Randomized Controlled Trial) Sample Size Total: 52 participants; Exercise group: 26; Exercise plus EA group: 26 Control Groups The control used in the study was a standardized back exercise program without electro-acupuncture. This included warm-up, stretching, back extension exercises, abdominal exercises, cool-down stretching, advice on spinal anatomy and body mechanics, back care, postural correction, lifting and ergonomic advice, behavioral modification, and a series of home exercises. Acupuncture Modality Electro-acupuncture (EA) with electrical stimulation at 2 Hz using a biphasic waveform applied to specific acupoints along the Bladder and Spleen meridians Stimulation Type 2 Hz electrical stimulation with biphasic waveform (positive wave in square form and negative wave in triangle form with 0.5-ms pulse width) Needling Details Needle length: 40 mm; Needle depth adjusted based on patient sensation; Needle angle not mentioned
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Listed Acupoints: BL 23, BL 25, BL 40, SP 6

Acupoint	Meridian	Special Point Role	Surface Region	Related Region	Body Region
BL 23	Bladder Meridian	Back-Shu Point of the Kidney	lower back	lumbar vertebra 2, posterior median line	lower back, trunk
BL 25	Bladder Meridian	Back-Shu Point of the Large Intestine	lower back	lumbar vertebra 4, posterior median line	lower back, trunk
BL 40	Bladder Meridian	He-Sea Point	knee	popliteal crease	knee, leg, limb, lower limb segment
SP 6	Spleen Meridian		hindlimb zeugopod	medial malleolus, tibia	leg, limb, lower limb segment

Does acupuncture improve the orthopedic management of chronic low back pain -a randomized, blinded, controlled trial with 3 months follow up

Albrecht F Molsberger, Jochen Mau, Danuta B Pawelec, Ja ´nos Winkler. "Does acupuncture improve the orthopedic management of chronic low back pain -a randomized, blinded, controlled trial with 3 months follow up." , 2002. [https://doi.org/10.1016/s0304-3959\(02\)00269-5](https://doi.org/10.1016/s0304-3959(02)00269-5)

Studied Condition
Low back pain
Condition Note
chronic low back pain
Condition Context
Pain
Country
Germany

Trial Type: RCT (Randomised Controlled Trial)
Sample Size
Total: 186 participants, Verum 1 COT: 65, Sham 1 COT: 61, Nil 1 COT: 60
Control Groups
Sham 1 COT (non-specific needling and COT) and nil 1 COT (COT alone)
Acupuncture Modality
Verum acupuncture involving needling specific acupuncture points, with sessions lasting 30 minutes each, administered three times a week for a total of 12 sessions. The treatment was performed by a trained medical doctor using standard points in the lumbar region and lower extremity, with needle insertion depth ranging from 1 to 10 cm to achieve Deqi sensation.
Stimulation Type
Manual needle manipulation with mild to strong intensity, three times per week for 30 minutes per session.
Needling Details
Verum acupuncture: 1 to 10 cm; Sham acupuncture: less than 1 cm

Listed Acupoints: BL 23, BL 25, GB 30

Acupoint	Meridian	Special Point Role	Surface Region	Related Region	Body Region
BL 23	Bladder Meridian	Back-Shu Point of the Kidney	lower back	lumbar vertebra 2, posterior median line	lower back, trunk
BL 25	Bladder Meridian	Back-Shu Point of the Large Intestine	lower back	lumbar vertebra 4, posterior median line	lower back, trunk
GB 30	Gallbladder Meridian		buttock	anterior superior iliac spine, greater trochanter, sacral hiatus	buttock

A prospective randomized study comparing acupuncture with physiotherapy for low-back and pelvic pain in pregnancy

Kaj Wedenberg, Berit Moen, Åsa Norling. "A prospective randomized study comparing acupuncture with physiotherapy for low-back and pelvic pain in pregnancy." , 2000. <https://doi.org/10.1034/j.1600-0412.2000.079005331.x>

Studied Condition
Low back pain
Condition Note
low-back and pelvic pain during pregnancy
Condition Context
Pain
Country
Sweden

Trial Type: RCT (Randomized Controlled Trial)

Sample Size

Total: 60 participants, Acupuncture group: 30 (28 analyzed), Physiotherapy group: 30 (18 completed)

Control Groups

The control in the study was the physiotherapy group, which was used to compare against the acupuncture group.

Acupuncture Modality

The acupuncture modality involved treatments three times a week for the first two weeks, then twice a week, totaling 10 sessions over a month. It used sterilized steel needles (1-10 cm long, 0.25-0.38 mm thick), with 2 to 10 needles per session. Treatments started with ear-acupuncture at the fossa triangularis, supplemented by body-acupuncture at points BL 26-30, BL 60, Cw 2, and local points. The deqi-sensation was elicited, and needles were tapped or rotated for stimulation.

Stimulation Type

Manual stimulation: needles were gently tapped or rotated about 15 minutes after insertion to elicit the deqi-sensation.

Needling Details

Needle depth: 1-10 centimeters; Angle: Not mentioned

Listed Acupoints: BL 26, BL 27, BL 28, BL 29, BL 30, BL 60

Acupoint	Meridian	Special Point Role	Surface Region	Related Region	Body Region
BL 26	Bladder Meridian		lower back	lumbar vertebra 5, posterior median line	lower back, trunk
BL 27	Bladder Meridian	Back-Shu Point of the Small Intestine	sacral region	first posterior sacral foramen, median sacral crest	

BL 28	Bladder Meridian	Back-Shu Point of the Bladder	sacral region	median sacral crest, second posterior sacral foramen	
BL 29	Bladder Meridian		sacral region	median sacral crest, third posterior sacral foramen	
BL 30	Bladder Meridian		sacral region	fourth posterior sacral foramen, median sacral crest, sacral hiatus	
BL 60	Bladder Meridian	Jing-River Point	tarsal region	calcaneal tendon, lateral malleolus of fibula	limb, lower limb segment, tarsal region