


A Commentary on “Acupuncture and Related Therapies for Endometriosis: A Network Meta-Analysis of Randomised Controlled Trials” [Letter]

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Dear editor

We have carefully reviewed the article titled “Acupuncture and Related Therapies for Endometriosis: A Network Meta-Analysis of Randomised Controlled Trials” by Li et al.¹ This meta-analysis, which included 42 randomized controlled trials (RCTs), utilized an innovative approach by employing a network meta-analysis to compare the therapeutic effects of various acupuncture-related therapies for endometriosis (EMs). The study effectively highlights the potential benefits of these therapies in managing EMs. While we commend the authors for their significant contributions, we would like to offer some suggestions and observations for further consideration.

Firstly, we identified several factors that may have affected the accuracy of the study results. Notably, most of the original studies did not account for the clinical staging of endometriosis,² a critical variable in assessing treatment outcomes. Additionally, some of the included RCTs combined acupuncture with Chinese herbal medicine, introducing a potential confounding factor, as the therapeutic effects and risks of Chinese herbs remain unclear.³ We recommend that future studies consider both the clinical staging of endometriosis and the possible influence of herbal therapies to improve the robustness of the findings.

Secondly, while the therapeutic acupuncture points used in the included RCTs were well-documented, they were not further analyzed in terms of clinical efficacy. Since the selection of specific acupuncture points plays a crucial role in determining therapeutic outcomes,⁴ we suggest that future studies conduct a stratified analysis based on acupuncture point selection. This could provide valuable insights into the efficacy of different points in the treatment of endometriosis.

Thirdly, we noted a minor error in Table 2, where Guilai (ST 29) is incorrectly labelled as “ST 25”. Although this error may not significantly affect the overall results of the study, it is important to address it because ensuring the correct use of international acupoint terminology improves the consistency and applicability of acupuncture practice,⁵ as well as the reliability of this study.

In conclusion, we deeply appreciate the work of Li et al, as it represents a significant step forward in exploring acupuncture-related therapies for endometriosis. We anticipate further high-quality studies to solidify the evidence-based efficacy of these therapies.

Disclosure

The authors report no conflicts of interest in this communication.

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