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Evidence mapping and overview of systematic reviews of the effects of acupuncture therapies

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Evidence mapping and overview of systematic reviews of the effects of acupuncture therapies

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Abstract

Objective To provide a route map regarding systematic reviews of acupuncture therapies that will meet two goals: i) to identify areas in which more or better evidence is required and ii) to identify acupuncture applications that, although proven effective, remain underutilized in practice, and thus warrant more effective knowledge dissemination.

Methods and analysis A systematic search of the published systematic reviews (SRs) was undertaken from January 2015 to November 2020. Searches were conducted in the Epistemonikos database, Chinese National Knowledge Infrastructure (CNKI), Chinese Biomedical Literature Database (CBM), WANFANG Database, and Chinese Scientific Journal Database (VIP). Two reviewers independently extracted data. We used the “A Measurement Tool to Assess SRs” (AMSTAR) 2 to assess the quality of SRs and the grading of recommendations assessment, development, and evaluation (GRADE) approach to assess the certainty of evidence. We re-analyzed each selected meta-analysis when newly published primary studies proved available. We used an evidence map to provide a visual overview of the distribution of evidence for acupuncture therapies.

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Results Our search identified 120 SRs published in the last five years addressing acupuncture therapies across 12 therapeutic areas and 77 diseases and conditions. The SRs included 205 outcomes and involved 138,995 participants from 1,402 RCTs. We constructed 77 evidence matrices, including 120 SRs and their included RCTs in the Epistemonikos database. Seventy-seven SRs represented the effect estimate of acupuncture therapies. Finally, we system summarized the areas of possible underutilization of acupuncture therapies (high or moderate certainty evidence of large or moderate effects) , and the areas of warranting additional investigation of acupuncture therapies (low or very low certainty evidence of moderate or large effects).

Conclusion The evidence maps and overview of SRs on acupuncture therapies identified both therapies with substantial benefits that may require more assertive evidence dissemination and promising acupuncture therapies that require further investigation.

Strengths and limitations of this study

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This evidence maps and overview of SRs identified a large number of diseases and conditions where acupuncture therapies demonstrated substantial benefits that may require more assertive evidence dissemination.

Further research should focus on the identified conditions and outcomes in which acupuncture therapies showed promising effects (those with large or moderate effects) supported by low or very low certainty evidence.

The digitalized evidence mapping repository on Epistemonikos can reduce research wastes and inform clinical and policy decision-making.

A limitation of this review is that we excluded studies investigating the effect of acupuncture as an adjunct therapy (e.g., acupuncture combined with Western medicine or rehabilitation), and some diseases/conditions may be omitted.

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INTRODUCTION

Clinicians and patients worldwide now make wide use of acupuncture, a form of traditional medicine¹. According to a 2013 World Health Organization (WHO) report², 103 of the WHO's member countries have approved the use of acupuncture. According to a 2013 survey conducted by the World Federation of Acupuncture-moxibustion Societies (WFAS)³, 183 (91%) of the 202 countries surveyed use acupuncture, while 178 (93%) of the 192 member countries of the United Nations (UN) have acupuncture practices, and 59 (31%) have partial or full insurance coverage.

Based on the extensive application of acupuncture in practice, in recent years⁴ numerous systematic reviews (SRs) have explored the effects of acupuncture therapies. Despite the mass of evidence, acupuncture practice and related policies practice in different jurisdictions varies, including over-or underutilization⁵. Cultural, societal, and awareness factors may result in research waste.

Highlight possible over-or underutilization or both compared to Western clinicians; Chinese clinicians treat many more diseases and conditions using acupuncture therapies⁶. Insurance in Western countries covers only some conditions, e.g., low back pain, at the health care system level compared to that in Eastern countries (e.g., South Korea, China)⁷. Reviews of existing evidence may clarify areas in which over-utilization exists (highlighting the need for either de-implementation or further research) and where under-utilization exists (highlighting the need for more effective knowledge dissemination).

Evidence mapping is one of the latest methods for synthesizing evidence using a user-friendly format with visual graphics and or searchable databases. Evidence mapping integrates, analyses, refines and presents the evidence quickly and conveniently⁸, in the process helping define future research and knowledge dissemination priorities⁸. This relatively novel method for the overview of SRs is particularly suitable for areas where a large number of SRs exist and overlap across

diseases and conditions. To date, no evidence maps or overview of SRs summarizing evidence regarding acupuncture therapies exist.

We, therefore, developed a route map guiding the acupuncture global research agenda to either further investigate promising acupuncture therapies or implementing more assertive evidence dissemination on areas where acupuncture demonstrated substantial benefits. In this article, we present: 1) the characteristics of the included SRs from multiple dimensions, including populations, interventions, comparisons, and outcomes; 2) the most up-to-date treatment effect of acupuncture therapies in all conditions supported by RCT-based evidence along with the corresponding certainty of evidence.

Methods

Definition

Acupuncture: We used the WHO’s definition of acupuncture, as follows ⁹: *Acupuncture literally means to puncture with a needle. However, acupuncture may also involve the application of other kinds of stimulation to certain points.* We included any type of commonly used acupuncture that stimulates certain points with needles, lasers, electricity, or pressure. The specific types of acupuncture therapies included in this manuscript were manual acupuncture, electro-acupuncture, body needling, ear (auricular) acupuncture, scalp acupuncture, laser acupuncture, transcutaneous electrical nerve stimulation (TENS), and acupressure. Forms combined with moxibustion or medication, such as warm needling, acupoint injection, or hydro-acupuncture, were excluded.

Manual acupuncture ¹⁰: The most commonly seen acupuncture therapies worldwide. A practitioner uses thin, solid, metallic needles to penetrate the skin on a series of acupoints and then performs gentle and specific stimulation techniques. The concept of manual acupuncture emphasizes the non-electrified stimulation

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method.
Electro-acupuncture: Additional electric current stimulation following the needles insertion.
Body needling ¹¹ : A type of manual acupuncture performed on the trunk and limbs of the body, excluding the acupoints on the scalp and ears.
Ear (auricular) acupuncture ¹⁰ : Acupuncture at the points located on the auricle, also called auriculo-acupuncture.
Scalp acupuncture ¹⁰ : Acupuncture at the specific lines located on the scalp.
Laser acupuncture ¹⁰ : A variant of acupuncture in which needling is replaced by laser irradiation on the points.
Transcutaneous electrical nerve stimulation (TENS) ¹⁰ : A therapy that uses low voltage electrical current to provide pain relief.
Acupressure ¹² : A practitioner use hand, elbow, or various devices to apply physical pressure to acupuncture points or trigger points.

Patient-important outcome: A patient-important outcome was defined as an outcome for which one would answer “yes” to the following question: “If patients knew that this outcome was the only thing to change with treatment, would they consider receiving this treatment is associated with side effects or cost?”¹³ Some patient-important outcomes are shown below:

I . Mortality

1. All-cause mortality
2. Disease-specific mortality

II . Morbidity

1. Cardiovascular major morbid events
2. Other major morbid events (e.g., loss of vision, seizures, fractures)
3. Onset/recurrence/relapse of cancer and other chronic diseases (e.g., chronic

obstructive pulmonary disease exacerbation, symptomatic diabetes)
4. Renal failure requiring dialysis
5. Hospitalization, medical and surgical procedures (e.g., pacemaker placement, cardioversion, and revascularization)
6. Symptomatic infections
7. Dermatologic/rheumatologic disorders
III. Quality of life/functional status (e.g., failure to become pregnant, failure to nurse/breastfeed, depression)

Disease and condition ¹⁴: The term disease broadly refers to any condition that impairs the body's normal functioning. The term condition is a synonym for medical state, which describes an individual patient's current state from a medical standpoint, such as postoperative pain, postoperative ileus after abdominal surgery, cancer-related pain, and breast cancer-related lymphoedema.

Eligibility and inclusion criteria

Type of study. We included SRs that conducted meta-analyses (MAs) of randomized controlled trials (RCTs) for this overview. An eligible SR fulfilled the following criteria:

- Reported a search in at least one electronic database.
- Reported at least one criterion for the inclusion of studies.
- Reported an effect estimate for at least one patient-important outcome.

We excluded overviews of SRs, narrative reviews, protocols of SRs, or studies published prior to January 2015.

Type of participants. There were no restrictions on the type of participants. To classify diseases and conditions, we used the taxonomy established in the Living Overview of Evidence (L·OVE) platform¹⁵ built upon the International Classification of Diseases, tenth revision (ICD-10), with modification.

Type of interventions. We included SRs summarizing at least one of the following comparisons:

- Acupuncture vs. no intervention/waiting list
- Acupuncture vs. sham/placebo
- Acupuncture vs. standard of care/usual care
- Acupuncture vs. western medicine
- Acupuncture vs. other interventions (such as psychotherapy, rehabilitation)

We excluded SRs with the control group receiving Traditional Chinese Medicine-related therapies, such as acupuncture, moxibustion, scraping, cupping, bloodletting, acupoint catgut embedding, massage, Chinese herbal medicine, and tai chi.

Type of outcomes. We included SRs reporting at least one patient-important outcome.

Database and search

We searched for SRs without language restrictions from January 2015 to November 2020 in four Chinese electronic databases (Chinese National Knowledge Infrastructure (CNKI), Chinese Biomedical Literature Database (CBM), WANFANG Database, and Chinese Scientific Journal Database (VIP), and Epistemonikos database (<https://www.epistemonikos.org/>). The Epistemonikos database includes SRs from ten electronic databases (PubMed, EMBASE, Cochrane Database of SRs (CDSR), Cumulative Index to Nursing and Allied Health Literature (CINAHL), PsycINFO, Latin American and Caribbean Health Sciences (LILACS), Database of

Abstracts of SRs of Effectiveness (DARE), Campbell Library, Joanna Briggs Institute (JBI) Database, and EPPI-Centre Library).

We also searched for newly published RCTs that were eligible for selected best SRs (from its lastest search dates to November 2020) in PubMed, MEDLINE, Cochrane Central Register of Controlled Trials (CENTRAL), Embase, CNKI, CBM, WAN FANG Database, and VIP.

Selection of best SRs for effect estimates and certainty of evidence assessment

Two reviewers (Shuqi Ge and Hao Wen) independently screened titles and abstracts to identify eligible SRs. The same reviewers retrieved and independently evaluated the full text of potentially eligible SRs for final inclusion and addressed disagreements through discussion. If a consensus could not be reached, a third (Liming Lu) resolved the conflict.

When multiple SRs existed for the same disease or condition, we selected the best SR to provide the most up-to-date effect estimate and its corresponding certainty of evidence. To select the best SR, we applied the following selection criteria in the order listed:

- I . For each clinical question, we selected the most recent SR.
- II . If the publication years of SRs were consistent or close, we selected the SR that contained the most RCTs or the Cochrane SR.
- III . If the primary studies included in the SRs completely overlapped, that is, the primary studies were consistent in quantity and content, we selected the highest-quality SR using “A Measurement Tool to Assess SRs” (AMSTAR) 2. If the primary studies partially overlapped or did not overlap, we updated the MA with all eligible primary studies. We updated identified SRs when newly published RCTs were eligible to be included.

Selection of newly published RCTs

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For all best SRs, two reviewers (Shuqi Ge and Hao Wen) independently screened for newly published RCTs that might be eligible. A third author resolved any unresolved disagreements between the reviewers.

Data collection and analysis

Data extraction

For each condition, two reviewers independently extracted data from all SRs using standardized forms, including the following: study ID; first author; publication year; country; therapeutic areas (e.g., periprocedural care or oncology) classified by the modified ICD-10 classification; the number of participants; the number of included primary studies; outcomes; interventions and comparison. In addition, for the selected best SR, reviewers extracted information on the effect sizes and related 95% confidence intervals (CIs). To ensure consistency, prior to the data extraction, we conducted calibration exercises. Discrepancies in the extracted data were resolved by discussion; if needed, a third author arbitrated.

For newly published RCTs that are eligible for the best SRs, we extracted the following information: study ID; first author; year of publication; the number of participants; interventions; comparisons; result data; and patient-important outcomes that matched the selected SRs.

Quality assessment

Quality of the SRs

We assessed the methodological quality of all SRs using the AMSTAR 2 tool; items 2, 4, 7, 9, 11, 13, and 15 were considered critical items. We categorized the overall quality of the SRs as high (meeting the criteria of all items or not meeting the criteria of only one non-critical item), moderate (not meeting the criteria of more than one non-critical item), low (not meeting the criteria of one critical item) and critically low (not meeting the criteria of more than one critical item)¹⁶. Two independent reviewers

performed each quality assessment, with discrepancies adjudicated by a third reviewer.

Certainty of evidence

We assessed the certainty of evidence for patient-important outcomes in the best SRs using the grading of recommendations assessment, development, and evaluation (GRADE) methodology through GRADEpro Guideline Development Tool (GDT). GRADE classified the certainty of evidence as high, moderate, low, or very low. If SRs used GRADE, we used their certainty ratings. If they did not use GRADE, we assessed the certainty of evidence.

Data synthesis

We re-analyzed the selected MAs if new primary studies were added. We used random-effects model to calculate the overall effect. We assessed the heterogeneity among studies using the Chi² test and the I² statistic.

Evidence mapping

For all SRs and included RCTs, assisted with mapping, we visualized the overall and geographical distribution of evidence corresponding to therapeutic areas, acupuncture therapies' effect size, and certainty of evidence.

For the geographical distribution of all included SRs, we presented a geographical information system map. For the best SRs, we used a bubble plot to display therapeutic areas, their corresponding SRs, RCTs, and the type of acupuncture tested.

For patient-important outcomes with large or moderate effect in the best SRs, we used evidence figures to show the effect size and corresponding certainty of evidence. For the pooled effect estimate of dichotomous outcomes, we presented the risk ratio (RR) and absolute risk reduction (ARR) along with the 95% CIs. We calculated the ARR by multiplying the median of risks observed in control groups by the pooled risk ratio and then presenting the result in terms of the anticipated increase or decrease in

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patients experiencing the effect per 1,000 patients treated. For continuous outcomes, we presented the standardized mean difference (SMD) along with its 95% CI. When the best SRs reported other effect estimates, we converted all to SMD or RR and classified the effect size as “small”, “moderate,” or “large.” For the relative effect of dichotomous outcomes, we chose RR of “2.0 or 0.5” as the reference for small and large effects, respectively ($RR \geq 2.0$ or $RR \leq 0.5$ as large, $0.5 < RR < 2.0$ as small). For continuous outcomes, we used SMD of 0.4 and 0.7¹⁷ as the reference for small, moderate, and large effects ($SMD < 0.4$ as small, $0.4 \leq SMD < 0.7$ as moderate, ≥ 0.7 as large).

Through a tabular approach, a matrix of evidence displayed the clusters of SRs with corresponding included RCTs. For every disease or condition where acupuncture SRs exist, we created a matrix consists of all SRs and their corresponding RCTs¹⁸. If newly published RCTs were eligible for any existing SR, we added the new RCTs to the matrices. We aggregated all matrices into an online repository on the Epistemonikos database.

Patient and public involvement

Although no patients were involved in selecting the research question, conducting the study, or interpreting the results, this study solely focused on patient-important outcomes.

Results

Results of literature search and study selection

We retrieved 6,122 citations. After removing 2,695 duplicates and screening 3,427 titles/abstracts, we evaluated the full text of 614 articles, of which 120 proved eligible. **Figure 1** presents the study selection process. **Figure 2** shows the distribution of the country of publication represented by the first author’s affiliation. For each disease or condition, we used the best SR for each question to construct the bubble plot (**Figure**

3) and evidence figures (Figure 4, Figure 5, and Appendix 1: Figure 5b). Appendix 2 provides reasons for exclusion at the full-text screening stage.

Characteristics of included SRs

Appendix 3 Table 1 shows the characteristics of the 120 included SRs and MAs published between 2015 and 2020, of which SRs published in 2019 accounted for the highest proportion (n=28, 23.3%), followed by those published in 2018 (n=26, 21.7%). The first authors of the included SRs are from China (n=98, 81.7%), South Korea (n=9, 7.5%), Australia (n=5, 4.2%), the USA (n=4, 3.3%), Germany (n=2, 1.7%), the UK (n=1, 0.8%) and Iran (n=1, 0.8%) (Figure 2). The included studies involve 12 therapeutic areas (periprocedural care, oncology, neurology, connective tissue diseases, ear, nose, and throat disorders, eye disorders, gastrointestinal disorders, genitourinary disorders, mental health, nutrition and metabolic disorders, obstetrics, gynecology, and women’s health, and pregnancy or intended pregnancy) and 77 diseases or conditions. The reviews include 1,402 RCTs that enrolled 138,995 unique participants. The number of RCTs included in each SR ranges from 1 to 68, and the sample sizes range from 81 to 7,618 (Figure 3 provides further details). Typical reviews apply the Cochrane risk of bias tool (n=98, 81.7%), do not use GRADE (n=97, 80.8%), and do not report the time point at which outcomes are measured (n=86, 71.7%).

Methodological quality of included SRs

Figure 6 summarizes the methodological quality of the 120 included SRs. Of all 120 SRs, 119 (99.2%) SRs are rated as having “low” or “critically low” quality. Failure to provide a list of excluded studies and explain any modifications of previously published protocols are the main reason for the quality being rated low or critically low.

Evidence map: bubble plot

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We included 77 best SRs to construct the bubble plot. The bubble plot (Figure 3) visualized the evidence distribution across 12 therapeutic areas in which we presented the number of SRs, their included RCTs, and the total number of participants. Of the 77 reviews, neurology is the content area most frequently represented (33.8%), with a number of areas in the vicinity of 10% (oncology, connective tissue diseases, gastrointestinal disorders, mental health, obstetrics, gynecology, and women's health), and others 5.2 % or less (periprocedural care, genitourinary disorders, eye disorders, ear, nose, and throat disorders, nutrition and metabolic disorders, pregnancy or intended pregnancy). The number of RCTs included in each review ranges from 1 to 40. RCTs in only three areas (neurology, connective tissue diseases, mental health) enroll more than 16,000 participants. Manual acupuncture proves the most frequently used intervention (54.1%), following by electro-acupuncture (20.2%) and body needling (5.5%).

Evidence figure

We included 77 best SRs to construct the evidence figures (Figure 4, Figure 5a, and Appendix 1: Figure 5b).

Effective interventions at risk of underutilization

★Large effect with moderate certainty evidence

Therapies directed at improvement in functional communication of post-stroke aphasia patients, reduction in myofascial pain, and increased lactation success rate within 24 hours post-delivery demonstrated probable large effects ($RR \geq 2.0$; $SMD \geq 0.7$). Details of comparisons and effect estimates are in Figure 4.

★Moderate effect with high or moderate certainty evidence

Therapies directed at relief of neck pain and shoulder pain demonstrated moderate effects ($0.4 \leq SMD < 0.7$, high certainty evidence).

Therapies directed at a reduction in the severity of vascular dementia symptoms, relief of fibromyalgia-related pain and non-specific low back pain, and improvement of allergic rhinitis nasal symptoms demonstrated probable moderate effects ($0.4 \leq \text{SMD} < 0.7$, moderate certainty evidence). Details of comparisons and effect estimates are in [Figure 4](#).

Promising but unproven interventions warranting further study

★Large effect with low or very low certainty evidence

Low-certainty evidence

Therapies directed at the reduction in the length of first flatus and defecation in postoperative ileus after abdominal surgery, reduction in pain of post-stroke shoulder-hand syndrome, increase in motor function and reduction in spasm symptoms of post-stroke spastic hemiplegia patients, improvement in sleep quality of patients with insomnia disorder, hemodialysis patients and menopausal women, reduction in neurogenic pain, improvement in the symptoms of autism spectrum disorder in children, reduction in the severity of migraine pain, improvement in quality of life of migraine patients, reduction in the severity of carpal tunnel syndrome pain and tic symptoms in patients with tic disorder, reduction in sciatica pain, improvement in quality of life and constipation symptoms of functional dyspepsia patients, reduction in the severity of pain and voiding symptoms and improvement in quality of life of chronic prostatitis patients, increase in abstinence rate for smoking in short and long term, reduction in severity of opioid craving and depression in opioid use disorder, reduction in body mass index in obesity patients and improvement in success rate of lactation within 24 and 72 hours after delivery, improvement in the overall symptoms of chronic pelvic pain syndrome, reduction in severity of pain and menstrual symptoms of dysmenorrhea, and improvement in pregnancy rate among infertile women may result in a large effect ($\text{RR} \geq 2.0$; $\text{SMD} \geq 0.7$). (Details of comparisons and effect estimates are in [Figure 5](#))

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Very low-certainty evidence

Therapies directed at relief of postoperative pain on movement or cough and aromatase Inhibitor-induced arthralgia in breast cancer, improvement in quality of life of breast cancer patients, increase in motor function and pain in post-stroke shoulder-hand syndrome, increase in sleep quality of insomnia patients and menopausal women, reduction in frequency of migraine symptoms, reduction in the severity of carpal tunnel syndrome pain, improvement in function of hip osteoarthritis patients, relief of pain caused by postmenopausal osteoporosis, reduction in the severity of dizziness in Meniere's disease, improvement in symptoms of xerophthalmia, reduction in the risk of peptic ulcer recurrence, improvement in symptoms of gastroparesis, reduction in the risk of urinary tract infection recurrence, reduction in the severity of chronic prostatitis, reduction in the severity of depression in chronic kidney disease, opioid use disorder, and in postpartum depression, reduction in the severity of alcohol craving in alcohol use disorder, improvement in functional status in posttraumatic stress disorder, decrease in mental fatigue in chronic fatigue syndrome, reduction in frequency of hot flash symptom and improvement in the symptoms of menopausal women, and relief of pain during labour may result in a large effect (RR smaller than 0.5; SMD greater than 0.7). (Details of comparisons and effect estimates are in [Figure 5](#))

★Moderate effect with low or very low-certainty evidence

Low-certainty evidence

Therapies directed at a reduction in the severity of hot flashes after breast cancer surgery, reduction in the severity of nausea and vomit in cancer patients, increase in motor function and activities of daily living of post-stroke spastic hemiplegia, improvement in the symptoms of pediatric autism spectrum disorder and sleep quality in patients with fibromyalgia syndrome, relief of non-specific low back pain, increase in complete spontaneous bowel symptom of functional constipation patients,

improvement in symptoms of functional dyspepsia patients, reduction in alcohol withdrawal symptoms in alcohol use disorder patients, reduction in the severity of depression in patients with depression, and reduction in hot flash frequency in menopausal women may result in a moderate effect ($0.4 \leq \text{SMD} < 0.7$). (Details of comparisons and effect estimates are in [Appendix 1: Figure 5b](#))

Very low-certainty evidence

Therapies directed at relief of postoperative resting pain and postoperative (total knee arthroplasty) pain at 24h, increase in sleep quality of insomnia patients, improvement in cognitive function of mild cognitive impairment patients, relief of pain, and improvement in quality of life of hip osteoarthritis patients, reduction in the severity of constipation symptoms of functional constipation patients, improvement in constipation symptoms of functional dyspepsia patients, and improvement in the severity of depression and sleep quality in patients with chronic kidney disease may result in a moderate effect ($0.4 \leq \text{SMD} < 0.7$). (Details of comparisons and effect estimates are in [Appendix 1: Figure 5b](#))

MA supplementation and updating

We updated three selected SRs with five RCTs published after the search date of the selected SRs. (See more details [in Appendix 4](#))

Matrices of evidence

We produced 77 matrices of evidence clusters of SRs with corresponding included RCTs. Among all matrices, about three quarters ($n=56$, 72.73 %) contained one SR, the rest ($n=21$, 25.97%) included two or more SRs in which simple obesity had the largest number of SRs ($n=8$). We digitalized this portion on Epistemonikos(<https://www.epistemonikos.org/>).

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We presented two examples for the digitized matrices: Acupuncture for Non-specific low back pain: (URL: <https://www.epistemonikos.org/matrixes/60654c866ec0d61dc0b9e0d4>) (Figure 6); Acupuncture for Allergic Rhinitis: (URL: <http://www.epistemonikos.org/matrixes/606553857aac81f38258f0f>) (Figure 7). Appendix 5 has the links to the remaining 75 matrices.

Discussion

Principal findings

Our evidence mapping and overview of SRs included 120 SRs across 12 therapeutic areas and 77 diseases or conditions, including 138,995 participants from 1,402 RCTs. Neurological conditions proved the most frequently studied area; connective tissue, mental health, obstetrics, gynecology, and women's health also proved frequent areas of study. While ear, nose, and throat disorders, eye disorders, nutrition, and metabolic disorders had the fewest SRs (Figure 3). The conditions and outcomes in which acupuncture is at highest risk of underutilization (those with large or moderate effects supported by moderate or high-quality evidence) include the following: lactation within 24 hours after delivery (increased success rate), post-stroke aphasia (improved functional communication), myofascial pain (pain relief), vascular dementia (improved dementia symptoms), neck, shoulder, and non-specific low back pain (pain relief), fibromyalgia syndrome (pain relief), allergic rhinitis (reduced severity of nasal symptoms) (Figure 4).

The conditions and outcomes in which acupuncture therapies showed promising effect (those with large or moderate effects supported by low or very low-quality evidence) yet warranting further research include the following: peptic ulcer (reduced risk of recurrence), urinary infection (reduced risk of recurrence), smoking cessation

(improved abstinence rate), lactation within 24 and 72 hours after delivery (success rate increase), etc. (Figure 5 and Appendix 1: Figure 5b)

Strengths and limitations of the study

Our study, the first describing an acupuncture evidence map, has several strengths. First, this is the first evidence map for acupuncture therapies across all therapeutic areas to our knowledge. Second, we had clear, practical objectives: to identify therapies with large or moderate effects supported by high or moderate certainty evidence at risk of underutilization and therapies suggesting large or moderate effects supported by low or very low-quality evidence warranting further investigations. Third, our use of both a combination of evidence mapping and an overview approach provides readers with both a broad perspective of the evidence landscape and in-depth information on the certainty of evidence and the effect size (large, moderate, and small) on patient-important outcomes ¹⁹. Fourth, by only including patient-important outcomes and summarizing the results with additional information on the absolute rather than the relative effect size, our study adds more value to support clinical and health system decision-making than the minimal contextualized approach adopted by most SRs or overviews. Fifth, we included all relevant Chinese literature through a comprehensive search of Chinese and English databases. Considering the popularity of acupuncture therapies in China, our research increases the comprehensiveness of the findings to a greater extent. Sixth, the digitalization of available evidence provides a repository and a roadmap for readers’ further usage. Readers not only have an overview of evidence but also have access to the primary studies. Our in-depth collaboration with the Epistemonikos foundation makes this possible. Finally, we have made efforts to minimize bias in every step of this project. For the literature search, an experienced librarian developed the search strategy and performed the comprehensive literature search. All screening and data extraction were performed independently and in duplicate. These rigorous processes increased the credibility of our study.

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Our study also has several limitations. First, we excluded studies investigating the effect of acupuncture as an adjunct therapy (e.g., acupuncture combined with Western medicine or rehabilitation). Second, despite the non-randomized studies overwhelmingly providing only low-certainty evidence, excluding observational studies might limit the conclusion of our evidence map. Third, most SRs did not specify the follow-up time of the reported outcomes. We did not retrieve all of the follow-up times corresponding to the outcomes from the original 1,402 RCTs but reported the information provided in the SRs. Fourth, a large number of low or critically low-quality included SRs warrant caution when interpreting our research. Finally, and perhaps most important, we provided only candidates for possible underutilization. The interventions in which high or moderate quality evidence had demonstrated large or moderate effects are only candidates for underutilization – identification of areas in which more assertive dissemination efforts may prove beneficial will require utilization data.

Comparison with other studies

Current overviews of SRs on acupuncture therapies²⁰⁻²² covered a limited number of diseases. McDonald J et al. conducted a narrative review to identify existing evidence on acupuncture's efficacy in 122 conditions²³ using literature search, study selection, and evidence extraction methods that were neither systematic nor transparent. Du et al.'s conducted a narrative review and a national survey among 524 acupuncturists and identified 400 diseases and conditions treated by acupuncture²⁴⁻²⁵. Their project's objective was to summarize the landscape of current practice in China rather than provide a systematic and comprehensive view of the evidence map for acupuncture therapies.

Implications for practice and policy

The areas in which high or moderate certainty evidence demonstrates the large or moderate-sized effects of acupuncture therapy mandate its widespread use. Patients, clinicians, guideline developers, health policymakers, and payers can utilize the

digitalized repository on Epistemonikos to support point-of-care decision-making, to produce additional evidence summaries (e.g., develop clinical practice guidelines (CPGs) or policy briefs), or to make decisions at the health system level (e.g., recommendations, implementation decisions, and reimbursement decisions).

Implications for research

Trialists can review diseases and conditions with high/moderate-certainty evidence before conducting new research to reduce research waste (see [Figure 4](#) for more details). Granting agencies can use our research to assess the need and relevance for grant applications.

Ensuring that clinicians and patients are making optimal use of acupuncture therapies with substantial effects demonstrated by high or moderate certainty evidence will require surveys of the use of these therapies in practice. Should such surveys demonstrate underutilization, concerted efforts to remedy the underutilization will be required.

We identified a large number of outcomes in various diseases and conditions with large/moderate effect sizes and low/very low-certainty evidence, e.g., peptic ulcer (reduced risk of recurrence), urinary infection (reduced risk of recurrence), smoking cessation (improved abstinence rate), lactation within 24 and 72 hours after delivery (success rate increase), etc. These areas represent potentially fruitful targets for future clinical trials. Grant agencies can consider setting up or encouraging research in the areas mentioned above. Trialists will need to address the above areas when conducting future research. Trialists, systematic reviewers, and grant agencies can utilize the digitalized repository on Epistemonikos to assist in the design of RCTs (e.g., fine-tuning the research questions, selecting the outcomes) and SRs.

Conclusion

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The evidence maps and overview of SRs on acupuncture therapies identified both promising acupuncture therapies that require further investigation and therapies with demonstrated substantial benefits that may require more assertive evidence dissemination.

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Contributors: Liming Lu, Yuqing Zhang, Shuqi Ge, and Hao Wen, as co-first authors, contributed equally to this work. Chunzhi Tang and Nenggui Xu, as co-corresponding authors, contributed equally to this work. Liming Lu and Yuqing Zhang conceived the study. Shuqi Ge, Hao Wen, XiaoRong Tang, and Zhao Zeng designed the search strategy. Shuqi Ge and Hao Wen performed the literature search. Shuqi Ge, Hao Wen, XiaoRong Tang, and Jingchun Zeng screened the studies for eligibility. Shuqi Ge, Hao Wen, Rouhao Chen, Yu Dong, Xiaojing Wei, Wen Luo, Lin Wang performed the data extractions. Lai Wang, Gabriel Rada, Camila Ávila and Camilo Vergara digitalized the matrices on Epistemonikos. Liming Lu, Yuqing Zhang, Shuqi Ge, and Hao Wen wrote the manuscript's first draft. Gordon Guyatt, Chunzhi Tang, and Nenggui Xu were responsible for the manuscript editing and manuscript review. All the authors interpreted the data, critically revised the manuscript for important intellectual content, and gave the version's final approval. Liming Lu and Nenggui Xu are guarantors. The corresponding author attests that all

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Patient and Public Involvement

Not required.

Patient consent for publication

Not required.

Ethics approval

Institutional review board clearance is not required for this systematic review as all data are publicly available.

Provenance and peer review

Not commissioned; externally peer reviewed.

Data availability statement

The full dataset and statistical code will be available upon reasonable request by emailing Nenggui Xu.

Supplemental material

This content has been supplied by the author(s).

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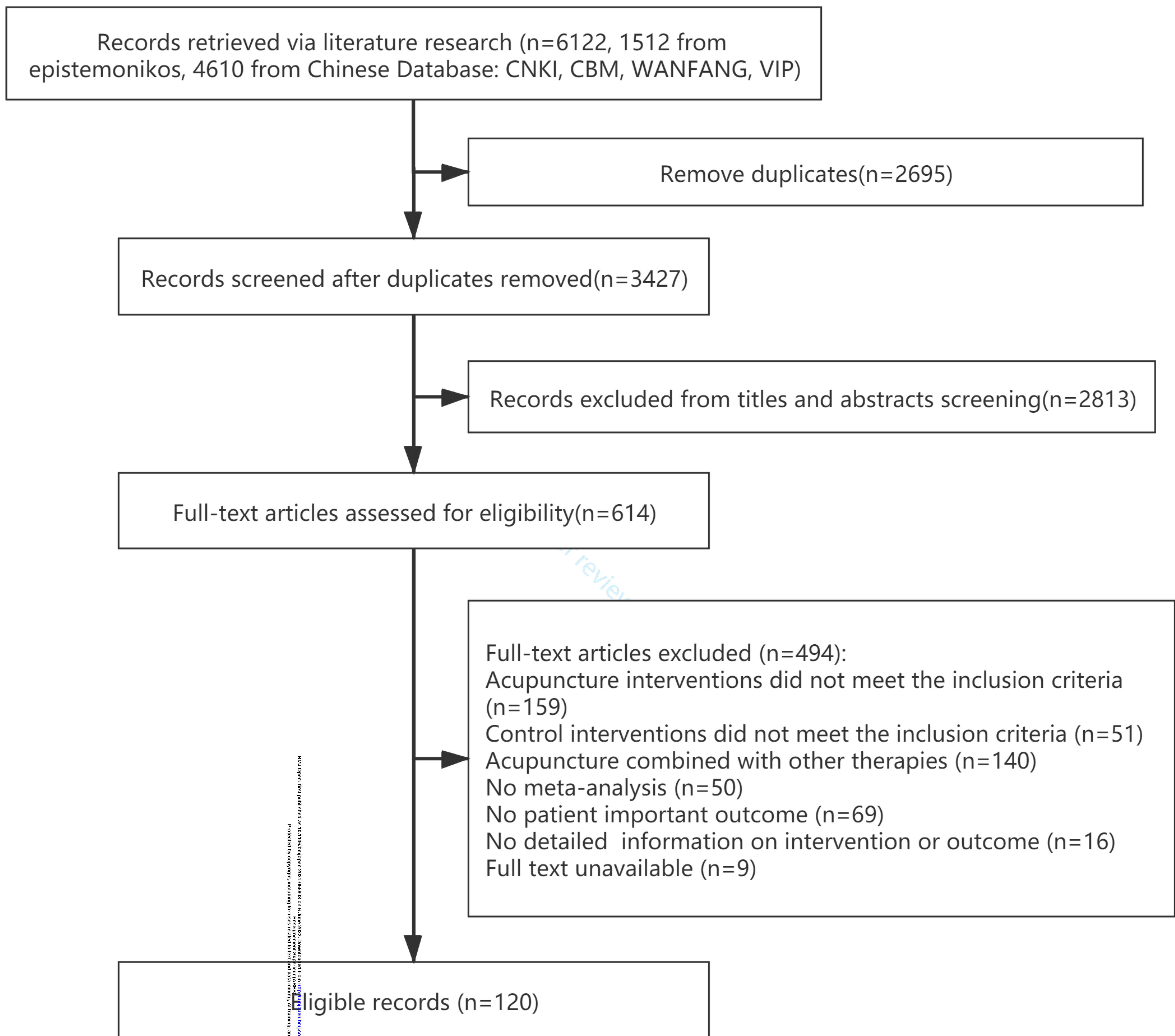


Figure 1 Flow chart of the publication-selection process.

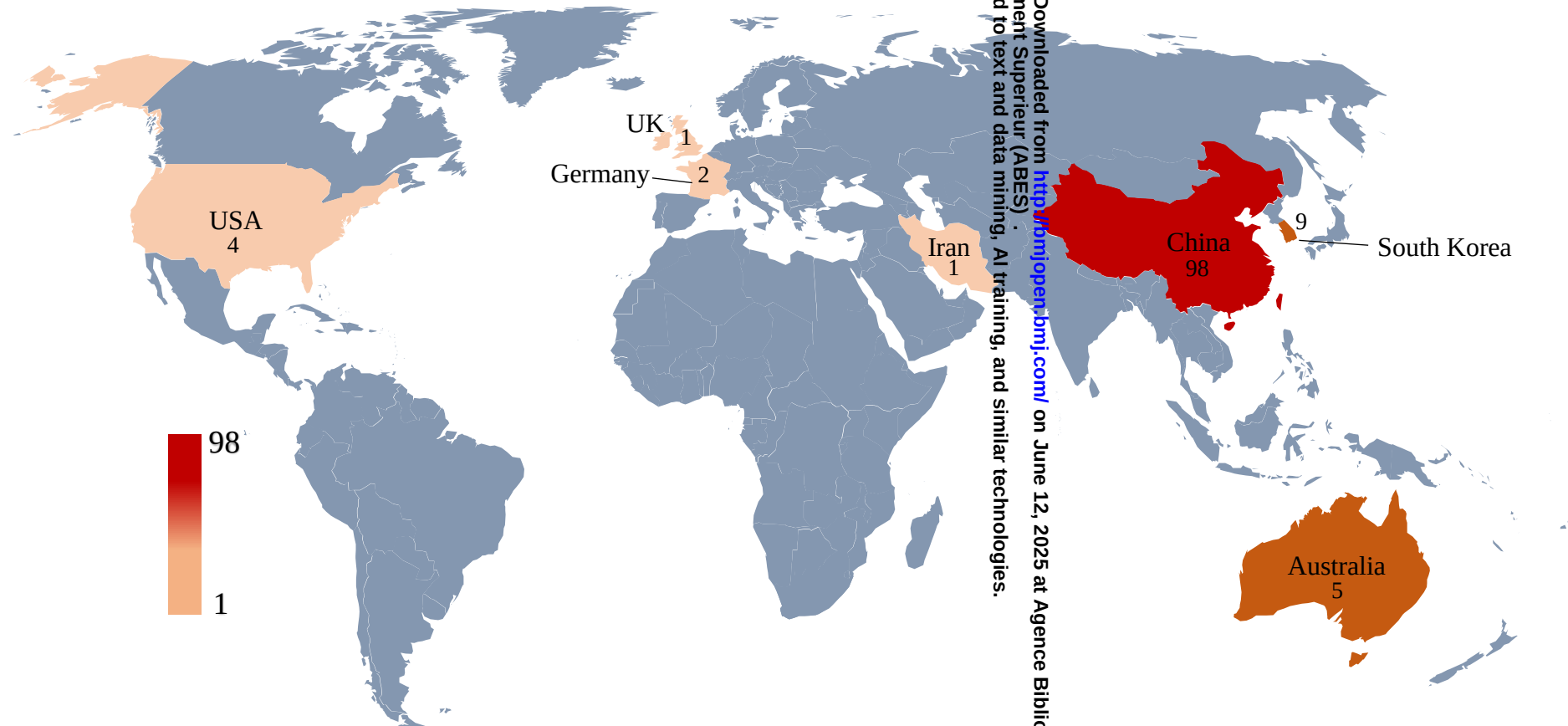


Figure 2 Country distribution of the first author's affiliation in all included systematic reviews

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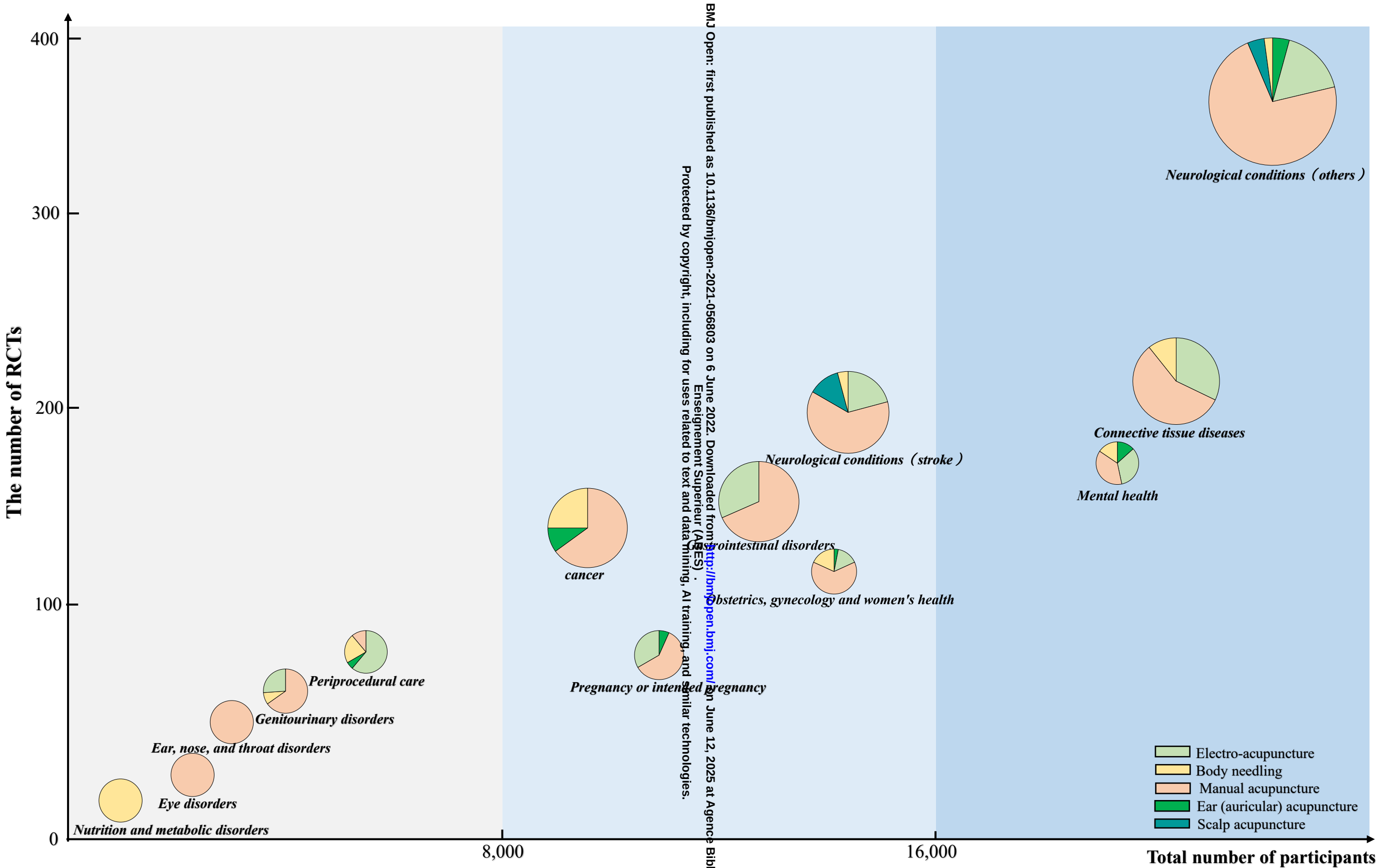


Figure 3 Bubble plot

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tevent	Tsample	Cevent	Csample	SMD(95%CI)	RR(95%CI)	CoE	ARR(95% CI)
Large Effect										
Binlong Zhang 2019	Neurology (Post-stroke aphasia)									
MA/scalp + RH vs RH	Improved functional communication	8		243		238	1.01(0.81,1.2)		Moderate	
Qi-ling Yuan 2016	Connective tissue diseases (Musculoskeletal pain)									
MA vs SA	Intensity of myofascia pain (<1 week after treatment) *	13		222		192	-1(-1.43,-0.57)		Moderate	
Ying Tang 2017	Obstetrics, gynecology and women's health (Postpartum lactating)									
MA vs SC	Increase in lactation success rate within 24 hours post-delivery	5	165	279	73	278		2.24(1.58,3.17)	Moderate	380 more per 1,000(from 178 more to 666 more)
Moderate Effect										
Qi-ling Yuan 2016	Connective tissue diseases (Musculoskeletal pain)									
MA vs SA	Intensity of neck pain (<1 week after treatment)*	6		213		200	-0.42(-0.62,-0.22)		High	
MA vs SA	Intensity of shoulder pain (<1 week after treatment)*	5		262		233	-0.63(-0.91,-0.36)		High	
Tong Li 2019	Neurology (Vascular dementia)									
MA vs WM	Severity of dementia symptoms	6		265		265	0.53(0.29,0.76)		Moderate	
Kim Jiwon 2019	Connective tissue diseases (Fibromyalgia syndrome)									
MA/EA vs SA	Intensity of pain *	11		242		317	-0.49(-0.79,-0.2)		Moderate	
Yun-xia Li 2018	Connective tissue diseases (Non-specific low back pain)									
MA vs SA	Intensity of pain (within 1 week to 3 months after treatment) *	5		686		614	-0.47(-0.77,-0.17)		Moderate	
Jinzhong 2017	Ear, nose, and throat disorders (Allergic rhinitis)									
MA vs SA	Severity of nasal symptoms *	4		198		194	-0.47(-0.67,-0.27)		Moderate	

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; SC: standard care; NRT: nicotine replacement therapy; WM: western medicine; RH: rehabilitation. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 4 Large or moderate effects with high or moderate certainty evidence

For peer review only

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tevent	Tsample	Cevent	Csample	SMD(95%CI)	RR(95%CI)	CoE	ARR(95% CI)
Large Effect										
Kai-Bo Chen 2019	Periprdocural care (Postoperative ileus after abdominal surgery)									
EA vs SC	Time to first flatus *	14		470		456	-1.1(-1.54,-0.65)		Low	
EA vs SC	Time to first defecation *	12		407		396	-0.84(-1.29,-0.39)		Low	
Shaonan Liu 2019	Neurology (Post-stroke shoulder-hand syndrome)									
EA+RH vs RH	Intensity of pain *	7		258		254	-0.94(-1.48,-0.41)		Low	
Wenjuan Fan 2020	Neurology (Post-stroke spastic hemiplegia)									
EA vs RH	Improved motor function	1		40		40	0.78(0.32,1.23)		Low	
MA+RH vs RH	Severity of spasm symptoms	6		204		205	-1.07(-1.84,-0.29)		Low	
Alexander Waits 2016	Neurology (Insomnia disorder)									
MA vs SA	Sleep quality (within 3 to 4 weeks) *	7		199		186	-1.01(-1.38,-0.65)		Low	
Wenfang Song 2018	Neurology (Sleep quality in hemodialysis patients)									
MA vs SA	Sleep quality *	7		261		261	-0.81(-1.25,-0.36)		Low	
Guangcai Zhang 2016	Neurology (Perimenopausal sleep disorder)									
MA vs SA	Sleep quality *	1		9		9	-2.49(-3.8,-1.19)		Low	
William Gibson 2017	Neurology (Neurogenic pain)									
TENs vs SA	Intensity of pain *	5		94		80	-0.96(-1.27,-0.64)		Low	
Boram Lee 2018	Neurology (Autism spectrum disorder in children)									
MA vs BEI+ MT	Symptoms improvement *	2		70		68	-1.87(-3.21,-0.53)		Low	
Jia Xu 2018	Neurology (Migraine without aura)									
AA/MA vs SA	Intensity of pain *	4		103		103	-0.8(-1.18,-0.43)		Low	
Yin Jiang 2018	Neurology (Migraine)									
MA vs SA	Quality of life (<1 month after treatment, role function-restrictive)	6		143		105	2.62(1.21,4.04)		Low	
MA vs SA	Quality of life (<1 month after treatment, role function-preventive)	6		143		105	0.75(0.18,1.33)		Low	
MA vs SA	Quality of life (<1 month after treatment, emotional function)	6		143		105	0.72(0.11,1.32)		Low	
Gwang-Ho Choi 2019	Neurology (Carpal tunnel syndrome)									
MA vs SA	Intensity of pain (at week 4 after randomization)*	1		13		13	-1.14(-1.98,-0.3)		Low	
Xinqiang Ni 2017	Neurology (Tic disorder)									
EA vs WM	Severity of tics symptom *	22		757		488	-1.29(-1.87,-0.7)		Low	
Mei Ji 2015	Connective tissue diseases (Sciatica)									
MA/EA vs WM	Intensity of pain *	3		121		120	-0.72(-0.98,-0.46)		Low	
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)									
MA/EA vs WM	Quality of life	3		100		97	1.19(0.88,1.5)		Low	
MA vs WM	Symptoms improvement *	2		84		84	-1.27(-1.89,-0.65)		Low	
JunjunLi 2020	Genitourinary disorders (Chronic prostatitis)									
MA/EA vs SA	Intensity of pain *	4		135		137	-0.79(-1.25,-0.33)		Low	
MA/EA vs SA	Severity of voiding symptoms*	5		165		165	-0.87(-1.10,-0.64)		Low	
MA/EA vs SA	Quality of life *	4		120		120	-0.82(-1.13,-0.50)		Low	
Jian-Hua Wang 2019	Mental health (Smoking cessation)									
MA vs NI	Improved abstinence rate (short-term)	1	43	224	18	222	2.37(1.41,3.97)		Low	111 more per 1,000(from 33 more to 241 more)
MA vs NI	Improved abstinence rate (long-term)	2	40	355	15	353	2.66(1.54,7)		Low	165 more per 1,000(from 50 more to 367 more)
Zhihan Chen 2018	Mental health (Opioid use disorder)									
EA vs NI	Severity of opioid craving *	1		60		30	-1.26(-1.73,-0.78)		Low	
EA vs NI	Severity of depression *	2		120		60	-1.5(-1.85,-1.15)		Low	
Yu-Mei Zhong 2019	Nutrition and metabolic disorders (Simple obesity)									
MA/EA/AA vs SA	Body mass index	10		229		212	1.11(0.67,1.56)		Low	
Ying Tang 2017	Obstetrics, gynecology and women's health (Postpartum lactating)									
MA vs SC	Success rate of lactation within 24 hours after delivery	2	40	140	19	140	2.11(1.29,3.43)		Low	357 more per 1,000(from 93 more to 783 more)
MA vs SC	Success rate of lactation within 72 hours after delivery	7	213	502	109	478	2.37(1.33,4.22)		Low	464 more per 1,000(from 112 more to 1,000more)
Yanjuan Song 2019	Obstetrics, gynecology and women's health (Chronic pelvic pain syndrome)									
MA/EA vs WM	Overall symptoms improvement *	8		288		289	0.89(0.5,1.28)		Low	
Caroline A Smith 2016	Obstetrics, gynecology and women's health (Dysmenorrhea)									
MA vs WM	Intensity of pain *	11		385		336	-0.93(-1.39,-0.47)		Low	
MA vs WM	Severity of menstrual symptoms*	6		260		180	-1.07(-1.51,-0.62)		Low	
Liu Yun 2019	Pregnancy or intended pregnancy (Infertility)									
MA+AA vs WM	Pregnancy rate	3	42	97	16	97	2.63(1.6,4.32)		Low	450 more per 1,000(from 441 more to 916 more)
Juan Zhang 2019	Periprdocural care (Postoperative pain)									
EA/TENs vs SA	Intensity of postoperative pain on movement or cough *	9		173		263	-1.31(-1.71,-0.91)		Very low	
Lawrence Chen 2017	Oncology (Aromatase Inhibitor-induced arthralgia in breast cancer)									
MA vs PL	Intensity of most treatment pain (worst pain at 3-4weeks) *	1		20		18	-0.71(-1.37,-0.05)		Very low	
Pei Lixia 2019	Oncology (Breast cancer)									
AA vs SC	Quality of life*	1		36		36	-1.21(-1.72,-0.71)		Very low	
Shaonan Liu 2019	Neurology (Post-stroke shoulder-hand syndrome)									
MA+RH vs RH	Improved motor function (upper limb)	22		935		916	1.01(0.75,1.27)		Very low	
MA+RH vs RH	Intensity of pain *	17		701		683	-1.66(-2.12,-1.2)		Very low	
Sang-Ho Kim 2019	Neurology (Insomnia disorder)									
MA vs WM	Sleep quality (within 14 to 74 days after treatment) *	4		171		168	-1.26(-1.85,-0.68)		Very low	
Guangcai Zhang 2016	Neurology (Perimenopausal sleep disorder)									
MA vs WM	Sleep quality *	1		52		52	-1.81(-2.27,-1.35)		Very low	
Jia Xu 2018	Neurology (Migraine without aura)									
MA vs SA	Frequency of migraine symptom *	3		120		120	-0.76(-1.43,-0.09)		Very low	
MA vs WM	Frequency of migraine symptom *	2		110		110	-2.13(-3.52,-0.74)		Very low	
Gwang-Ho Choi 2019	Neurology (Carpal tunnel syndrome)									
MA vs WM	Intensity of pain (at week 5 after randomization)*	1		25		25	-1.05(-1.64,-0.45)		Very low	
Eric Manheime, Ke Cheng 2018	Connective tissue diseases (Hip osteoarthritis)									
EA vs WM	Increased function	1		30		30	0.95(0.42,1.49)		Very low	
Wang Kaifu 2019	Connective tissue diseases (Postmenopausal osteoporosis)									
MA vs WM	Intensity of pain *	2		70		70	-0.74(-1.08,-0.39)		Very low	
Jiaojun He 2019	Ear, nose, and throat disorders (Meniere's disease)									
MA vs WM	Severity of dizziness *	2		46		40	-1.88(-3.06,-0.7)		Very low	
Lizhong Yu 2019	Eye disorders (Xerophthalmia)									
MA/EA vs WM	Symptoms improvement *	7		290		294	-1.23(-2.08,-0.38)		Very low	
Yao Tian 2017	Gastrointestinal disorders (Peptic ulcer)									
MA vs WM	Reduced risk of recurrence *	2	5	31	16	34	0.35(0.14,0.84)		Very low	495 fewer per 1,000(from 655 fewer to 122 fewer)
Kun Hyung Kim 2018	Gastrointestinal disorders (Symptomatic gastroparesis)									
MA vs SA	Symptoms improvement (within 4 to 12 weeks after treatment)	5		180		180	-1.41(-1.66,-1.15)		Very low	
Xindong Qin 2020	Genitourinary disorders (Urinary infection)									
MA vs NI	Reduced risk of recurrence *	2	25	94	28	41	0.39(0.26,0.58)		Very low	322 fewer per 1,000(from 391 fewer to 222 fewer)
MA vs SA	Reduced risk of recurrence *	1	7	27	15	26	0.45(0.22,0.92)		Very low	375 fewer per 1,000(from 532 fewer to 55 fewer)
JunjunLi 2020	Genitourinary disorders (Chronic prostatitis)									
MA/EA vs WM	Overall symptoms improvement *	6		181		176	-0.99(-1.59,-0.39)		Very low	
MA/EA vs SA	Overall symptoms improvement *	5		164		165	-1.53(-1.92,-1.14)		Very low	
Kun Hyung Kim 2016	Genitourinary disorders (Chronic kidney disease)									
TENs vs UC	Severity of depression *	1		36		35	-0.72(-1.2,-0.24)		Very low	
Charlotte Southern 2016	Mental health (Alcohol use disorder)									
MA/EA/AA vs SA	Severity of alcohol craving *	5		127		100	-1(-1.79,-0.21)		Very low	
Zhihan Chen 2018	Mental health (Opioid use disorder)									
EA vs SA	Severity of depression *	2		120		60	-1.07(-1.88,-0.25)		Very low	
Wei Li 2019	Mental health (Postpartum depression)									
MA vs WM	Severity of depression *	4		112		111	-1.54(-2.92,-0.15)		Very low	
Sean Grant 2018	Mental health (Posttraumatic Stress Disorder)									
MA vs NI	Improved functional status (post-intervention) *	1		29		27	-0.83(-1.38,-0.29)		Very low	
MA vs NI	Improved functional status (follow-up for 3 months)*	1		29		27	-0.97(-1.53,-0.42)		Very low	
Qing Zhang 2018	Mental health (Chronic fatigue syndrome)									
MA vs SA	Reduced mental fatigue *	3		113		108	-1.99(-3.67,-0.31)		Very low	
Eun-Young Nam 2018	Obstetrics, gynecology and women's health (Menopausal hot flashes)									
MA vs NI	Frequency of hot flash symptom (≥12 weeks after treatment started)*	3		282		159	-0.7(-1.03,-0.36)		Very low	
Weihan Li 2017	Obstetrics, gynecology and women's health (Menopausal syndrome)									
MA vs SA	Symptoms improvement-at end of treatment *	6		240		179	-1.52(-1.77,-1.28)		Very low	
MA vs SA	Symptoms improvement-within 1 to 3 months after treatment *	5		213		153	-1.05(-1.28,-0.82)		Very low	
Caroline A Smith 2020	Obstetrics, gynecology and women's health (Pain during labour)									
MA/EA vs SA	Intensity of pain *	4		249		246	-1.31(-2.14,-0.49)		Very low	
EA vs NI	Intensity of pain *	1		82		81	-0.96(-1.28,-0.63)		Very low	
MA vs SA	Intensity of pain *	6		208		264	-1.12(-1.84,-0.41)		Very low	
MA vs UC	Intensity of pain *	8		341		279	-1.07(-1.45,-0.69)		Very low	

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENs: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western medicine; BE: behavioral and educational interventions; RH: rehabilitation; MT: music therapy. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 5a Large effects with low or very low certainty evidence

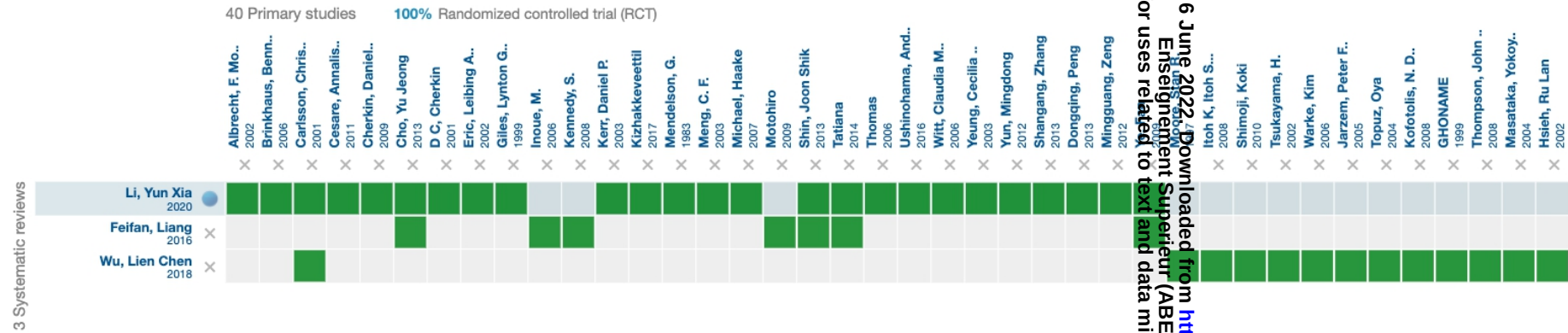


Figure 6 Digitized matrix: Acupuncture for Non-specific low back pain

3 Systematic reviews

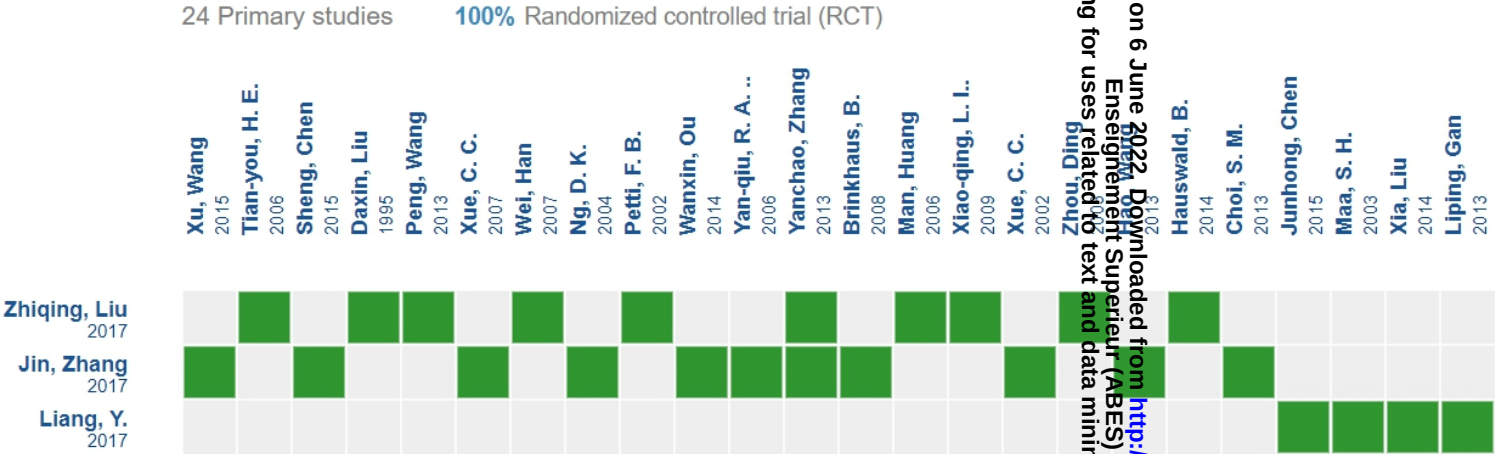


Figure 7 Digitized matrix: Acupuncture for Rhinitis

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tsample	Csample	SMD(95%CI)	CoE
Moderate Effect						
Lu Jing 2018	Periprocedural care (Breast cancer)					
MA/EA vs WM	Severity of hot flashes after breast cancer surgery*	2	115	135	-0.61(-0.87,-0.36)	Low
MA vs NI	Severity of hot flashes after breast cancer surgery (follow-up for 3 months)*	1	85	105	-0.44(-0.73,-0.15)	Low
Wei-Wei Tao 2016	Oncology (Symptom management of cancer)					
MA vs SC	Severity of nausea and vomit *	2	166	162	-0.48(-0.7,-0.26)	Low
Wenjuan Fan 2020	Neurology (Post-stroke spastic hemiplegia)					
MA vs RH	Improved motor function	12	443	441	0.4(0.14,0.65)	Low
MA+RH vs RH	Improved activities of daily living	24	888	893	0.67(0.42,0.92)	Low
Boram Lee 2018	Neurology (Autism spectrum disorder in children)					
MA vs BEI	Symptoms improvement *	2	53	54	-0.52(-0.91,-0.13)	Low
Kim Jiwon 2019	Connective tissue diseases (Fibromyalgia syndrome)					
MA/EA vs SA	Sleep Quality *	3	86	84	-0.46(-0.75,-0.18)	Low
Yun-xia Li 2018	Connective tissue diseases (Non-specific low back pain)					
MA vs NI	Intensity of pain *	2	1490	1318	-0.69(-0.99,-0.38)	Low
Lu Wang 2020	Gastrointestinal disorders (Functional Constipation)					
MA vs SA	Improved complete spontaneous bowel symptom	3	584	587	0.49(0.38,0.61)	Low
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)					
MA/EA vs WM	Symptoms improvement *	4	216	216	0.47(0.27,0.66)	Low
Charlotte Southern 2016	Mental health (Alcohol use disorder)					
EA/AA vs SA	Reduced alcohol withdrawal symptoms*	1	50	50	-0.54(-0.93,-0.14)	Low
Caroline A Smith 2018	Mental health (Depression)					
MA vs NI	Severity of depression at the end of treatment*	5	217	241	-0.56(-0.98,-0.15)	Low
Eun-Young Nam 2018	Obstetrics, gynecology and women's health (Menopausal hot flashes)					
MA vs NI	Frequency of hot flash symptom (4 weeks after treatment started)*	1	116	59	-0.47(-0.78,-0.15)	Low
Juan Zhu 2019	Periprocedural care (Postoperative pain)					
EA/AA vs SA	Intensity of resting pain at 24 h *	26	556	532	-0.64(-0.89,-0.38)	Very low
Yongjun ZHU 2017	Periprocedural care(Total knee arthroplasty)					
TENs vs SA	Severity of pain 24h after operation *	2	51	51	-0.47(-0.87,-0.08)	Very low
Cuihua Yang 2018	Neurology (Senile insomnia)					
MA vs WM	Sleep quality*	5	153	148	-0.46(-0.89,-0.03)	Very low
Hwan Kim 2019	Neurology (Mild cognitive impairment)					
EA vs WM	Improved Cognitive function	5	131	134	0.4(0.16,0.65)	Very low
Eric Manheime, Ke Cheng 2018	Connective tissue diseases (Hip osteoarthritis)					
EA vs WM	Intensity of pain *	1	30	30	-0.64(-1.16,-0.12)	Very low
MA vs SA	Quality of life (emotional) during treatment *	1	32	30	-0.56(-1.07,-0.05)	Very low
Lu Wang 2020	Gastrointestinal disorders (Functional Constipation)					
MA vs SA	Severity of constipation symptoms *	4	387	214	-0.4(-0.78,-0.03)	Very low
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)					
MA/EA vs WM	Symptoms improvement *	4	145	141	-0.66(-0.9,-0.42)	Very low
Kun Hyung Kim 2016	Genitourinary disorders (Chronic kidney disease)					
MA vs UC	Severity of depression *	3	63	65	-0.44(-0.79,-0.09)	Very low
MA vs UC	Sleep quality*	4	92	88	-0.55(-0.96,-0.14)	Very low

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; CI: confidence interval; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENs: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western medicine; BEI: behavioral and educational interventions; RH: rehabilitation. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 5b Moderate effects with low or very low certainty evidence

Appendix 2. A list of excluded studies and reasons for exclusion

Number	Title	First author	Published year	Reason for exclusion
1	Clinical Efficacy of Acupuncture on Rheumatoid Arthritis and Associated Mechanisms: A Systemic Review.	Chou, PC	2018	No meta-analysis
2	Effectiveness of Acupuncture on Pain, Physical Function and Health-Related Quality of Life in Patients with Rheumatoid Arthritis: A Systematic Review of Quantitative Evidence.	Seca, S	2019	No meta-analysis
3	Meta-analysis of the therapeutic Effect of Treating Osteoarthritis with Filiform Needle	MA Jia-jian	2016	Acupuncture combined with other therapies
4	Meta-analysis of Clinical Effect of Acupuncture and Moxibustion on Osteoarthritis/Osteodystrophy	Feng Peng	2019	Acupuncture combined with other therapies
5	A Meta-analysis of Improving the Function of Knee Osteoarthritis with Traditional Chinese Manipulation and Acupuncture	YU Saijun	2018	Acupuncture combined with other therapies
6	Meta-analysis of Acupuncture and Moxibustion for Treatment of Osteoarthritis/Osteodystrophy	Hu Hanjiao	2016	Acupuncture combined with other therapies
7	Acupuncture for Knee Osteoarthritis Relief in the Elderly: A Systematic Review and Meta-analysis.	Gong, Zidan	2019	Acupuncture combined with other therapies
8	Meta-analysis of the Effect of Acupuncture and Moxibustion on Knee Osteoarthritis Based on the theory of Meridians and Tendons	Yu Junfei	2018	Control interventions did not meet the inclusion criteria
9	Effect of Acupuncture on Gonarthromenitis: A Systematic Review	Guo, Wei	2020	Acupuncture combined with other therapies
10	Update on the Clinical Effect of Acupuncture therapy in Patients with Gouty Arthritis: Systematic Review and Meta-analysis	Lu, W W	2016	Acupuncture combined with other therapies

11	Curative Effect of Acupuncture for Gouty Arthritis: Meta-analysis	LIU Chang	2015	No detailed information on intervention or outcome
12	Acupuncture and Moxibustion for Primary Osteoporosis: An Overview of Systematic Review	Xu, G	2020	Acupuncture combined with other therapies
13	Meta Analysis of Acupuncture Treatment of Primary Osteoporosis	CHEN Jinfe ng	2018	Acupuncture combined with other therapies
14	Meta-analysis of the therapeutic Effect of Acupuncture on Postmenopausal Osteoporosis and Acupoint Selection Method	XIAO Li	2016	Acupuncture combined with other therapies
15	A Systematic Review of Acupuncture and Moxibustion for the Treatment of Lumbar Disc Herniation Caused by Sciatica	Liu Jiaying	2015	No meta-analysis
16	Systematic Evaluation and Meta-analysis of Acupuncture Treatment for Residual Pain after Lumbar Disc Herniation	LI Kai-min g	2020	Acupuncture combined with other therapies
17	Assessment of Methodological Quality and Reporting Quality of Systematic Reviews / Meta-analyses of Acupuncture for Sciatica	TAN Hui-juan	2015	Acupuncture combined with other therapies
18	Efficacy of Acupressure for Chronic Low Back Pain: A Systematic Review.	Godley, Erica	2020	No meta-analysis
19	Effect of Acupuncture on Pregnancy Related Low Back Pain and Pelvic Pain: A Systematic Review and Meta-analysis.	Yao, X	2017	Full text unavailable
20	Meta Analysis of Acupuncture and Moxibustion Treatment for Endometriosis	Xiao Xiaowen	2017	Acupuncture combined with other therapies
21	Is Acupuncture Effective in the Treatment of Pain in Endometriosis?.	Lund, I	2016	No meta-analysis
22	Efficacy and Safety of Acupuncture Combined with Moxibustion in the Treatment of Chronic Fatigue Syndrome: A Systematic Review	Hu Yue	2020	Acupuncture combined with other therapies
23	A Meta-analysis of Acupuncture and Mo	LUO Xiao-	2017	Acupuncture

	xibustion therapy for Scapulohumeral Peri arthritis	zhou		combined w ith other the rapies
24	A Systematic Review on Clinical Study of the Frozen Shoulder Treated with Thre e Shoulder Needles	TANG Hon gliang	2015	Acupuncture combined w ith other the rapies
25	Acupuncture for Recovery after Surgery i n Patients Undergoing Colorectal Cancer Resection: a Systematic Review and Meta -analysis.	Kim, K H	2016	Acupuncture combined w ith other the rapies
26	Effects of Acupuncture on Menopause-Rel ated Symptoms in Breast Cancer Survivor s: A Meta-analysis of Randomized Contr olled Trials.	Chiu, H Y	2016	Acupuncture interventions did not mee t the inclusi on criteria
27	Effects of Acupuncture on Breast Cancer-Related Lymphoedema: A Systematic Rev iew and Meta-analysis.	Yu, S	2019	Acupuncture interventions did not mee t the inclusi on criteria
28	Acupuncture in Medicine: Journal of the British Medical Acupuncture Society	Zhang, X	2019	Acupuncture interventions did not mee t the inclusi on criteria
29	Acupuncture for Treating Hot Flashes in Breast Cancer Patients: An Updated Meta -analysis.	Salehi, A	2016	Acupuncture interventions did not mee t the inclusi on criteria
30	Meta-analysis of Application of Transcuta neous Electrical Acupoint Stimulation in Breast Cancer Surgery	FU Sisi	2020	No detailed information on interventi on or outco me
31	Meta-analysis of Acupuncture Improving Quality of Life of Patients with Breast C ancer	PEI Lixia	2019	Acupuncture interventions did not mee t the inclusi on criteria
32	Effect of Acupressure on Chemotherapy-I nduced Nausea and Vomiting of Breast Cancer Patients: A Meta-analysis	Yan Meiyu	2018	No detailed information on interventi

				on or outcome
33	The Effects of Auricular therapy for Cancer Pain: A Systematic Review and Meta-analysis.	Yang, Yulan	2020	Control interventions did not meet the inclusion criteria
34	Systematic Review and Meta-analysis of Acupuncture to Reduce Cancer-Related Pain.	Chiu, H Y	2017	Acupuncture interventions did not meet the inclusion criteria
35	Acupuncture for Pain Management in Cancer: A Systematic Review and Meta-analysis.	Hu, C	2016	Acupuncture interventions did not meet the inclusion criteria
36	A Systematic Review and Meta-analysis of the Efficacy of Acupuncture and Electroacupuncture Against Chemotherapy-Induced Peripheral Neuropathy.	Hwang, M S	2020	No patient important outcome
37	The Efficacy of Acupuncture in Chemotherapy-Induced Peripheral Neuropathy: Systematic Review and Meta-analysis.	Chien, T J	2019	Acupuncture combined with other therapies
38	Acupuncture in Adults with Chemotherapy-Induced Peripheral Neuropathy: a Systematic Review.	Baviera, A F	2019	Acupuncture combined with other therapies
39	Meta-analysis of Electroacupuncture for Chemotherapy-Induced Peripheral Neuropathy	KUANG Bi yao	2019	Acupuncture interventions did not meet the inclusion criteria
40	The Effects of Acupressure on Chemotherapy-Induced Nausea and Vomiting: A Meta-analysis	Wu, Ting	2020	Acupuncture interventions did not meet the inclusion criteria
41	Effect of Neiguan Acupoint Pressure on Improving Chemotherapy-Induced Nausea and Vomiting in Cancer Patients: A Meta-analysis	CHEN Feng	2020	No detailed information on intervention or outcome

42	Meta-analysis of Acupuncture Treatment for Gastrointestinal Reaction after Chemotherapy of Tumor	HU Ya-cai	2017	Acupuncture interventions did not meet the inclusion criteria
43	Acupuncture on Treating Angina Pectoris: A Systematic Review.	Wang, J S	2020	No detailed information on intervention or outcome
44	Acupuncture and Related therapies Used As Add-on to Conventional Treatments for Heart Failure: A Systematic Review of Pairwise and Network Meta-analyses	Yang, Fengwen	2018	Acupuncture combined with other therapies
45	Acupuncture on Treating Angina Pectoris: A Systematic Review.	Wang, J S	2020	No detailed information on intervention or outcome
46	Meta-analysis of the therapeutic Effect of Acupuncture on Stable Angina Pectoris	ZHOU Jianhua	2018	Acupuncture combined with other therapies
47	Effectiveness of Acupuncture for Angina Pectoris: A Systematic Review of Randomized Controlled Trials.	Yu, C	2015	Acupuncture combined with other therapies
48	Acupuncture therapy for the Treatment of Stable Angina Pectoris: An Updated Meta-analysis of Randomized Controlled Trials	Liu, Y	2019	Acupuncture interventions did not meet the inclusion criteria
49	Meta-analysis of Acupuncture therapy for the Treatment of Stable Angina Pectoris.	Chen, M	2015	Acupuncture interventions did not meet the inclusion criteria
50	Meta-analysis of Acupuncture therapy for the Treatment of Stable Angina Pectoris.	Zhang, Z.	2015	Acupuncture interventions did not meet the inclusion criteria
51	Acupuncture As An Adjunctive Treatment for Angina Due to Coronary Artery Disease	Huang, X	2019	Control interventions did

	ase: A Meta-analysis.			d not meet the inclusion criteria
52	Acupuncture for Perioperative Care of Total Hip Arthroplasty: A Systemic Review of Controlled Trials and Meta-analysis.	Shin H	2019	No detailed information on intervention or outcome
53	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
54	Acupuncture therapy for Essential Hypertension: A Network Meta-analysis.	Tan, X	2019	No patient important outcome
55	Acupuncture for Essential Hypertension: A Meta-analysis	G., C Xiao	2015	No patient important outcome
56	Conventional Acupuncture for Cardiac Arrhythmia: A Systematic Review of Randomized Controlled Trials.	Liu, J	2018	No detailed information on intervention or outcome
57	Acupuncture-Related Cardiac Complications: A Systematic Review.	Ullah, W	2019	No detailed information on intervention or outcome
58	A Meta-analysis of the Effectiveness of Acupuncture on Chd	Sun Yang	2019	Acupuncture interventions did not meet the inclusion criteria
59	Systematic Review on Treatment of Perimenopausal Syndrome with Electroacupuncture and Hormone Replacement	CHENG Xiaoling	2018	No patient important outcome
60	Comparison System Evaluation on Acupuncture and Western Medicine Effect in the Treatment of Perimenopausal Syndrome	LAI Bin	2017	No patient important outcome
61	Systematic Review of Auricular-Plaster therapy for Treatment of Perimenopausal Syndrome	Jin Huali	2017	No patient important outcome
62	Acupuncture Versus Hormone Replacement therapy for Menopause Syndrome: A Meta-analysis	MENG Fang	2016	No patient important outcome

63	Systematic Evaluation of the Efficacy of Acupuncture on Perimenopausal Syndrome	CAO Zheng-liang	2015	Acupuncture interventions did not meet the inclusion criteria
64	Effectiveness of Traditional Chinese Acupuncture Versus Sham Acupuncture: A Systematic Review.	Carlos, L	2016	No meta-analysis
65	Acupuncture in Sham Device-Controlled Trials May Not Be As Effective As Acupuncture in the Real World: A Preliminary Network Meta-analysis of Studies of Acupuncture for Hot Flashes in Menopausal Women.	Kim, T H	2020	Control interventions did not meet the inclusion criteria
66	Acupuncture for Menopausal Hot Flashes.	Weihua, L	2015	Acupuncture interventions did not meet the inclusion criteria
67	Effects of Acupuncture on Menopause-Related Symptoms and Quality of Life in Women on Natural Menopause: A Meta-analysis of Randomized Controlled Trials.	Chiu, H Y	2015	Acupuncture interventions did not meet the inclusion criteria
68	Acupuncture to Reduce Sleep Disturbances in Perimenopausal and Postmenopausal Women: A Systematic Review and Meta-analysis.	Chiu, H Y	2015	Acupuncture interventions did not meet the inclusion criteria
69	Systematic Evaluation of Acupuncture Treatment of Perimenopausal Sleep Disorder Based on Grade	Zhang Guang-Cai	2016	Control interventions did not meet the inclusion criteria
70	Safety and Effectiveness of Acupuncture for Women Emotional Disorders in Perimenopause: A Systematic Review	WANG Ying	2018	Control interventions did not meet the inclusion criteria
71	Massage, Reflexology and Other Manual Methods for Pain Management in Labor	Smith, C A	2018	Acupuncture interventions did not meet the inclusion criteria

72	Meta-analysis of the Effects of Acupressure During Labor.	Santiago-Vasco, M	2017	Full text unavailable
73	Meta-analysis of the Effect of Acupressure on Duration of Labor and Mode of Delivery.	Makvandi, S	2016	No patient important outcome
74	Effects of Acupressure in Labor: A Meta-analysis.	Bejar, C	2016	Full text unavailable
75	Acupuncture Performed Around the Time of Embryo Transfer: A Systematic Review and Meta-analysis.	Smith, C A	2019	Acupuncture interventions did not meet the inclusion criteria
76	Therapeutic Effect of Acupuncture on the Outcomes of in Vitro Fertilization: A Systematic Review and Meta-analysis.	Qian, Y	2017	Acupuncture interventions did not meet the inclusion criteria
77	Effects of Acupuncture on Pregnancy in Patients Undergoing in Vitro Fertilization and Embryo Transfer: A Systematic Review of Randomized Controlled Trials	YANG Hui-sheng	2017	Acupuncture combined with other therapies
78	The Role of Acupuncture in In Vitro Fertilization: A Systematic Review and Meta-analysis.	Shen, C	2015	No patient important outcome
79	Interventions for Heartburn in Pregnancy.	Phupong, V	2015	Acupuncture interventions did not meet the inclusion criteria
80	Treatments for Breast Engorgement During Lactation	Mangesi, Lindaka	2016	Acupuncture interventions did not meet the inclusion criteria
81	Effects of Acupuncture for the Treatment of Endometriosis-Related Pain: A Systematic Review and Meta-analysis.	Xu, Y	2017	Control interventions did not meet the inclusion criteria
82	Meta-analysis of Acupuncture and Moxibustion Treatment for Endometriosis	Xiao Xiaowen	2017	Acupuncture interventions did not meet the inclusion criteria

83	Network Meta-analysis on the Effects of the Acupuncture-Related therapy on Ovulation Rate and Pregnancy Rate in Patients with Polycystic Ovary Syndrome.	Song, Y J2019	2019	No patient important outcome
84	Systematic Review of Acupuncture in Treatment of Polycystic Ovary Syndrome in China	ZHENG Shuzhen	2019	No patient important outcome
85	Effectiveness of Acupuncture in Women with Polycystic Ovarian Syndrome Undergoing in Vitro Fertilization Or Intracytoplasmic Sperm Injection: A Systematic Review and Meta-analysis.	Jo, J	2017	No patient important outcome
86	Acupuncture for Polycystic Ovarian Syndrome: A Systematic Review and Meta-analysis.	Jo, J	2017	Acupuncture combined with other therapies
87	Effect of Acupuncture on Premenstrual Syndrome: A Meta-analysis	LIU Lihong	2019	Acupuncture combined with other therapies
88	Systematic Evaluation and Meta-analysis of Acupuncture-Moxibustion Alone in Treating Premature Ovarian Failure	ZHANG Jin-Huan	2020	Acupuncture interventions did not meet the inclusion criteria
89	Meta-analysis of the therapeutic Effect of Acupuncture on Premature Ovarian Failure	FAN Meiling	2018	No patient important outcome
90	Systematic Review and Meta-analysis of Efficacy of Acupuncture in the Treatment of Premature Ovarian Failure	LUO Xi	2016	No patient important outcome
91	Meta-analysis the Effect of Acupuncture in Treating Premature Ovarian Failure	PANG Yong	2016	No patient important outcome
92	Effect of Acupuncture therapy on Chronic Pelvic Inflammatory Disease: A Meta-analysis	HE Ting	2019	Acupuncture combined with other therapies
93	Systematic Review and Meta-analysis of Acupuncture Intervention on Hot Flashes in Patients with Breast Cancer	Tao Weiwei	2019	Acupuncture interventions did not meet the inclusion criteria
94	Short-and Medium-Clinical Effect of Acupuncture	Lu Jing	2018	Acupuncture

	puncture in Treating Hot Flashes in Patients with Breast Cancer: A Meta-analysis			combined with other therapies
95	A Meta-analysis of Treating Primary Dysmenorrhea by Acupuncture	Liu Guodong	2019	Acupuncture interventions did not meet the inclusion criteria
96	Meta-analysis of Clinical Literature on Acupuncture and Moxibustion for Primary Dysmenorrhea	Qin Yanping	2017	Control interventions did not meet the inclusion criteria
97	Meta-analysis of Auricular Plaster therapy for Primary Dysmenorrhea	Wang Jing	2017	No patient important outcome
98	Meta-analysis of Acupuncture and Moxibustion for Treatment of Primary Dysmenorrhea	Liu Tian	2016	No patient important outcome
99	A Meta-analysis of Clinical Efficacy of Acupuncture on Dysmenorrhea	Quan Yubin	2016	No patient important outcome
100	Systematic Review of Abdominal Acupuncture Treatment for Dysmenorrhea	HUANG Shimin	2016	Acupuncture interventions did not meet the inclusion criteria
101	Meta-analysis of Auricular Plaster therapy for Primary Dysmenorrhea	Wang Xiang	2016	No patient important outcome
102	Meta-analysis of Primary Dysmenorrhea Treated by Acupuncture	LIN Hanmei	2015	Control interventions did not meet the inclusion criteria
103	Meta-analysis of Clinical Literature on Acupuncture-Based Treatment of Menstrual Disorders	Cai Weiping	2018	Acupuncture combined with other therapies
104	Systematic Review and Meta-analysis of Acupuncture in the Treatment of Premature Ovarian Dysfunction	Yin Yaqian	2020	No patient important outcome
105	Acupuncture in Improving Endometrial Receptivity: A Systematic Review and Meta-analysis	Zhong, Y	2019	Acupuncture interventions

	a-analysis.			did not meet the inclusion criteria
106	Meta-analysis on the Effectiveness of Acupuncture and Moxibustion in Improving Endometrial Receptivity	Li Zheyun	2019	Control interventions did not meet the inclusion criteria
107	Meta-analysis on Acupuncture therapy for Improving Endometrial Receptivity	HU Qiulan	2017	No patient important outcome
108	A Meta-analysis of Acupuncture and Moxibustion for Luteinized Unruptured Follicle Syndrome	ZHOU Jie	2017	Acupuncture combined with other therapies
109	A Systematic Review on the Outcome of Transcutaneous Electrical Acupoint Stimulation in the Treatment of Ovarian Hyporesponsiveness	Wu Jiejie	2018	No patient important outcome
110	Acupuncture for in Vitro Fertilization In women with Poor Ovarian Response: A Systematic Review	Jang, S	2020	No meta-analysis
111	Acupuncture Or Acupressure for Induction of Labour	Smith, C. A.	2017	Acupuncture interventions did not meet the inclusion criteria
112	Effectiveness of Acupuncture in Polycystic Ovary Syndrome: A Systematic Review and Meta-analysis of Randomized Controlled Trials	Wu, J.	2020	No patient important outcome
113	Acupuncture for Polycystic Ovarian Syndrome	Lim, C.	2019	No patient important outcome
114	Efficacy of Acupuncture Versus Western Medication for Premature Ovarian Failure: A Meta-analysis	Runzi Jian	2017	No patient important outcome
115	Meta-analysis of Acupuncture Treatment for Primary Ovarian Insufficiency	Tingting Zhao	2020	No patient important outcome
116	Acupuncture Treatment for Urinary Retention Following Spinal Cord Injury: A Meta-analysis	Cheng Jie	2018	Acupuncture combined with other therapies

117	Acupuncture for Chronic Urinary Retention due to Spinal Cord Injury: A Systematic Review.	Wang, J	2016	Acupuncture combined with other therapies
118	The Effect of Different Acupuncture therapies on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Network Meta-analysis of Randomized Controlled Trials.	Xiong, F	2019	Acupuncture combined with other therapies
119	The Impact of Acupuncture on Neurological Recovery in Spinal Cord Injury : A Systematic Review and Meta-analysis.	Ma, R	2015	Acupuncture combined with other therapies
120	Electroacupuncture Treatment for Neurogenic Bladder after Spinal Cord Injury:A Meta-analysis	FU Linhui	2019	Acupuncture combined with other therapies
121	Systematic Evaluation of Acupuncture for the Treatment of Neurogenic Bladder Dysfunction after Spinal Cord Injury	WANG Jia-qi	2018	No meta-analysis
122	Acupuncture for the Effect and Safety of Neurogenic Bladder after Spinal Cord Injury:A Meta-analysis	FAN Xiao	2017	Acupuncture combined with other therapies
123	A Meta-analysis of the Effectiveness of Acupuncture in the Treatment of Epilepsy .	Deng, B W	2018	No patient important outcome
124	Non-Pharmacological Interventions for People with Epilepsy and Intellectual Disabilities.	Jackson, C F	2015	Acupuncture interventions did not meet the inclusion criteria
125	Transcutaneous Electrical Nerve Stimulation for Spasticity: A Systematic Review.	Fernández-Tenorio, E	2019	No meta-analysis
126	Systematic Review of Efficacy of Tens for Management of Central Pain in People with Multiple Sclerosis.	Sawant, A	2015	No Meta-analysis
127	Acupuncture for Obstructive Sleep Apnea (Osa) in Adults: A Systematic Review and Meta-analysis.	Wang, Liao yao	2020	Acupuncture interventions did not meet the inclusion criteria
128	Clinical Effect of Acupuncture therapy on Obstructive Sleep Apnea Hypopnea Syndrome	JIAO Su-qin	2018	Acupuncture interventions

	ome: A Meta-analysis			did not mee t the inclusi on criteria
129	The Clinical Effect of Acupuncture in the Treatment of Obstructive Sleep Apnea: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Lv, Z T	2016	No patient i mportant ou tcome
130	Meta-analysis of Obstructive Sleep Apnea in Traditional Chinese Medicine	Zhang Ruiz hi	2016	Acupuncture interventions did not mee t the inclusi on criteria
131	Clinical Effectiveness of Ziwuliuzhu Acup uncture therapy for Insomnia: A Meta-ana lysis	Hu Yue	2019	Control inte rventions di d not meet the inclusio n criteria
132	A Meta-analysis of Randomized Controlle d Trials of Intradermal Needle for Insom nia	Ma Zengbin	2019	Control inte rventions di d not meet the inclusio n criteria
133	Meta-analysis and Systematic Review of Abdominal Acupuncture for Insomnia	Li Zhen	2019	Control inte rventions di d not meet the inclusio n criteria
134	Meta-analysis of Clinical Efficacy of Auri cular Acupoints in Treating Insomnia	LI Dong-sh uang	2019	Acupuncture combined w ith other the rapies
135	Eye Acupuncture in the Treatment of Ins omnia: a Systematic Review and Meta-an alysis of Randomized Controlled Trials	Liu Guangh ui	2018	Acupuncture interventions did not mee t the inclusi on criteria
136	Systematic Review on Effect of Point M assage in Treatment of Insomnia	Yu Mengyi ng	2017	No Meta-an alysis
137	Meta-analysis on the therapeutic Effect of Acupuncture in Treating Insomnia in Chi na	LIU Weimi n	2017	Acupuncture interventions did not mee t the inclusi on criteria
138	Meta-analysis of Clinical Effect of Acupu	Mao Nan	2016	Control inte

	ncture and Moxibustion on Insomnia			rventions di d not meet the inclusio n criteria
139	Electro-acupuncture for Primary Insomnia and Psqi: A Systematic Review	WEI Xin-ra n	2016	Control inte rventions di d not meet the inclusio n criteria
140	Meta-analysis of Curative Effect on Acup uncture for Insomnia	GAO Xiyan	2015	Acupuncture interventions did not mee t the inclusi on criteria
141	Meta-analysis on Acupuncture Treatment of Insomnia	Chen Deya o	2015	Acupuncture interventions did not mee t the inclusi on criteria
142	Curative Effect of Acupuncture therapy f or Insomnia of Yin Deficiency Type: A Meta-analysis	WANG Fei	2015	Acupuncture interventions did not mee t the inclusi on criteria
143	Effectiveness of Auricular Point therapy f or Insomnia: A Meta-analysis	Yang Yuan yuan	2015	Control inte rventions di d not meet the inclusio n criteria
144	Meta-analysis of Auricular Point therapy on Insomnia	HUANG L u	2015	Control inte rventions di d not meet the inclusio n criteria
145	Network Meta-analysis on Ear Acupunctu re for Hemodialysis Patients with Insomn ia	XU Ziqi	2019	Control inte rventions di d not meet the inclusio n criteria
146	Meta-analysis of the Effect of Auricular Point Plaster therapy on Insomnia in Pati ents with Perimenopausal Period	PENG Siqu	2020	Acupuncture combined w ith other the rapies
147	Acupuncture to Reduce Sleep Disturbance	Chiu, H Y	2016	Acupuncture

	s in Perimenopausal and Postmenopausal Women: A Systematic Review and Meta-analysis.			combined with other therapies
148	Acupuncture to Treat Sleep Disorders in Postmenopausal Women: A Systematic Review.	Bezerra, A G	2015	No Meta-analysis
149	A Meta-analysis on Effectiveness of Acupuncture on Post-Stroke Insomnia	NIE Fenfen	2020	No patient important outcome
150	Meta-analysis of Auricular Acupuncture in the Treatment of Post-Stroke Insomnia	ZHANG Shuangmei	2019	Acupuncture interventions did not meet the inclusion criteria
151	Acupuncture for Insomnia after Stroke: a Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture interventions did not meet the inclusion criteria
152	Acupuncture for Insomnia in the Elderly: A Meta-analysis	Li Heng	2016	Acupuncture interventions did not meet the inclusion criteria
153	Acupuncture for Managing Cancer-Related Insomnia: A Systematic Review of Randomized Clinical Trials.	Choi, T Y	2017	Acupuncture interventions did not meet the inclusion criteria
154	Effect of Self-acupressure for Symptom Management: A Systematic Review	Song, H J	2015	No Meta-analysis
155	Meta-analysis of the Effect of Auricular Point Plaster therapy on Insomnia in Patients with Diabetes	ZHU Wenli	2018	Acupuncture combined with other therapies
156	Efficacy of Acupuncture-Moxibustion on Peripheral Facial Paralysis At Different Time Points: A Meta-analysis.	Jin, D D	2020	Control interventions did not meet the inclusion criteria
157	Electroacupuncture Is Effective for Peripheral Facial Paralysis: A Meta-analysis.	Wang, W H	2020	Control interventions did not meet the inclusion criteria

				n criteria
158	Compare the Efficacy of Acupuncture with Drugs in the Treatment of Bell's Palsy: A Systematic Review and Meta-analysis of Rcts.	Zhang, R	2019	Acupuncture interventions did not meet the inclusion criteria
159	Meta-analysis of Electroacupuncture Treatment for Peripheral Facial Paralysis During Acute Period	ZHU Yi-lin	2016	Acupuncture combined with other therapies
160	System Evaluation of the Clinical Literature of Peripheral Facial Paralysis Acupuncture Treatment	LI Jia	2015	No meta-analysis
161	Efficacy of Acupuncture for Bell's Palsy: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Li, P	2015	Acupuncture interventions did not meet the inclusion criteria
162	Meta-analysis of therapeutic Effect of Acupuncture and Moxibustion on Facial Paralysis	Zhang Ting	2015	Acupuncture combined with other therapies
163	Is Acupuncture An Effective Postherpetic Neuralgia Treatment? A Systematic Review and Meta-analysis.	Pei, W	2019	Acupuncture interventions did not meet the inclusion criteria
164	Acupuncture for Postherpetic Neuralgia: Systematic Review and Meta-analysis.	Wang, Y	2018	Acupuncture interventions did not meet the inclusion criteria
165	Acupuncture for Neuropathic Pain in Adults	Ju, Zi Yong	2017	Acupuncture interventions did not meet the inclusion criteria
166	Systematic Review of Electro-acupuncture in the Treatment of Neuropathic Pain	ZHOU Jie	2017	Acupuncture combined with other therapies
167	Meta-analysis of Acupuncture in the Treatment of Pathogenic Motor Symptoms of Parkinson's Disease	ZHOU Jing	2020	Acupuncture combined with other therapies

				rapies
168	Meta-analysis of Acupuncture for Parkinson's Disease	Liu Mohan	2019	Acupuncture combined with other therapies
169	Meta-analysis of Clinical Efficacy of Acupuncture in Treatment of Parkinson's Disease	Liu Yanhui	2018	Acupuncture combined with other therapies
170	Clinical Effectiveness of Acupuncture on Parkinson Disease: A Prisma-Compliant Systematic Review and Meta-analysis	Lee, S H	2017	Acupuncture combined with other therapies
171	The Effectiveness and Safety of Acupuncture for the Treatment of Myasthenia Gravis: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhang, X	2019	Acupuncture interventions did not meet the inclusion criteria
172	Scalp Acupuncture Treatment for Children's Autism Spectrum Disorders: A Systematic Review and Meta-analysis.	Liu, C	2019	Acupuncture combined with other therapies
173	A Meta-analysis of Treating Autism Spectrum Disorders by Acupuncture	Yue Qianjun	2019	Acupuncture combined with other therapies
174	Systematic Evaluation of Acupuncture therapy for Childhood Autism	YUAN Zhao-hong	2016	Acupuncture combined with other therapies
175	Meta-analysis of Curative Efficacy of Acupuncture for Children with Autism	Zhang Chengxiong	2015	Acupuncture combined with other therapies
176	Systematic Review: Acupuncture Vs Standard Pharmacological therapy for Migraine Prevention.	Zhang, N	2020	No meta-analysis
177	Efficacy of Acupuncture for Improving Migraine Symptoms and Cerebral Blood Flow Velocity: a Meta-analysis	Lu Tingting	2019	Acupuncture interventions did not meet the inclusion criteria
178	Effectiveness and Safety of Acupuncture Versus Drug Treatment for Migraine Pro	Pu Shengxi	2017	Acupuncture interventions

	phylaxis: a Meta-analysis			did not meet the inclusion criteria
179	Verum Versus Sham Manual Acupuncture for Migraine: A Systematic Review of Randomised Controlled Trials.	Yang, Y	2016	Acupuncture combined with other therapies
180	Meta-analysis on Prevention Comparison of Acupuncture with Western Medicine for Migraine	SONG Qian	2016	Acupuncture interventions did not meet the inclusion criteria
181	Clinical Efficacy and Safety of Acupuncture in the Treatment of Tension Headache	DENG Gan	2018	Acupuncture interventions did not meet the inclusion criteria
182	Meta-analysis of Acupuncture therapy in the Treatment of Tension-Type Headache	ZHANG Xue	2018	Control interventions did not meet the inclusion criteria
183	Acupuncture Versus Western Medicine for Tension-Type Headache in China: A Systematic Review	HU Lin	2015	Acupuncture interventions did not meet the inclusion criteria
184	Acupuncture Treatment for the Cervicogenic Headache—Updated Systematic Review	TANG Xu	2017	Acupuncture interventions did not meet the inclusion criteria
185	Systematic Review of Acupuncture and Moxibustion in Treatment of Mild Cognitive Impairment	Li Siyu	2018	Acupuncture interventions did not meet the inclusion criteria
186	Meta-analysis of Acupuncture Clinical Efficacies on Ischemic Type Cognitive Dysfunction	LU Jin-hua	2015	Acupuncture combined with other therapies
187	Clinical Efficacy of Scalp Acupuncture on Mild Cognitive Impairment: a Meta-analysis Study	MAI Wei	2015	Acupuncture combined with other therapies

				rapies
188	Meta-analysis of Acupuncture therapy for Carpal Tunnel Syndrome	FAN Ye	2019	Acupuncture combined with other therapies
189	Clinical Effect of Acupuncture on Postpartum Depression: A Meta-analysis	PANG Yong	2016	Acupuncture combined with other therapies
190	Effectiveness and Safety of Ear Acupuncture for Trauma-Related Mental Disorders after Large-Scale Disasters: A Prisma-Compliant Systematic Review.	Kwon, C Y	2020	No meta-analysis
191	Acupuncture for the Treatment of Adults with Posttraumatic Stress Disorder: A Systematic Review and Meta-analysis.	Grant, S	2018	Acupuncture interventions did not meet the inclusion criteria
192	Transcutaneous Electrical Nerve Stimulation (TENS) for Fibromyalgia in Adults	Johnson, Mark I	2017	No meta-analysis
193	Ear Acupuncture therapy in Preventing Postoperative Nausea and Emesis: A Systematic Review and Meta-analysis of Randomized Controlled Trials	GAO Yanyu	2017	Acupuncture combined with other therapies
194	Acupuncture for Glaucoma.	Law, S K	2020	No meta-analysis
195	The Efficacy of Acupuncture in Managing Patients with Chronic Prostatitis/Chronic Pelvic Pain Syndrome: A Systemic Review and Meta-analysis.	Chang, S C	2017	Acupuncture interventions did not meet the inclusion criteria
196	Efficacy of Electroacupuncture in the Treatment of Prostatitis: a Systematic Review	Su Tongsheng	2017	Acupuncture interventions did not meet the inclusion criteria
197	Comparison of the Efficacy of Acupuncture and Western Medicine Treatment on Chronic Prostatitis in China: Meta-analysis	YU Li-Zhong	2017	Acupuncture interventions did not meet the inclusion criteria
198	Meta-analysis of Acupuncture Treatment of Chronic Prostatitis	PANG Yong	2016	Acupuncture interventions did not meet

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				t the inclusi on criteria
199	Meta-analysis on Acupuncture in Treating Chronic Prostatitis	HE Yuan	2015	Acupuncture interventions did not mee t the inclusi on criteria
200	Acupuncture As a Treatment Modality in Dermatology: A Systematic Review.	Ma, C	2015	No meta-an alysis
201	Acupuncture for Cancer Pain in Adults	Paley, C A	2015	No meta-an alysis
202	Transcutaneous Electrical Nerve Stimulati on for Treating Neurogenic Lower Urinar y Tract Dysfunction: A Systematic Revie w.	Gross, T	2016	No meta-an alysis
203	Meta-analysis of Clinical Efficacy of Acu puncture in Treatment of Tic Disorders	Zhao Runzh i	2020	No patient i mportant ou tcome
204	Meta-analysis on the therapeutic Effect of Acupuncture on Guillian-Barre Syndrome	LONG Kan g-sheng	2015	Acupuncture interventions did not mee t the inclusi on criteria
205	A Meta-analysis of Acupuncture and Mo xibustion in Treatment of Sciatica	HAN Yiyao	2017	Acupuncture interventions did not mee t the inclusi on criteria
206	Meta-analysis of the Efficacy of Acupunc ture Treatment for Infantile Cerebral Pals y	XIANG Jua n	2015	Acupuncture combined w ith other the rapies
207	Randomized Controlled Clinical Meta-anal ysis of Acupuncture and Moxibustion for Treatment of Infantile Cerebral Palsy	Yuan Jinme i	2015	Acupuncture interventions did not mee t the inclusi on criteria
208	Evaluation of the Clinical Effect of Tradi tional Chinese Medicine on Abducens Par alysis Based on Meta-analysis	Ren Wei	2017	Acupuncture interventions did not mee t the inclusi on criteria
209	Meta-analysis on Random-Control Experi ment of Eye-acupuncture on Extrarectus	QIN Xinzha ng	2016	Acupuncture interventions

	Muscles for the Treatment of Abducens Paralysis			did not meet the inclusion criteria
210	A Meta-analysis of Randomized Controlled Trials of Electroacupuncture Treatment for Trigeminal Neuralgia	ZHOU Jie	2017	Acupuncture combined with other therapies
211	Meta-analysis of Literature on Acupuncture and Moxibustion therapy in Trigeminal Neuralgia	Gao Chunmei	2016	Acupuncture combined with other therapies
212	A Systematic Review of Acupuncture for Chemotherapy-Induced Peripheral Neuropathy.	Li, K	2019	Acupuncture interventions did not meet the inclusion criteria
213	Meta-analysis of Electroacupuncture for Chemotherapy-Induced Peripheral Neuropathy	KUANG Bi yao	2019	Acupuncture interventions did not meet the inclusion criteria
214	Meta-analysis of Clinical Study on Electroacupuncture Treatment of Diabetic Peripheral Neuropathy	Zheng Haizhu	2020	No patient important outcome
215	Acupuncture for the Treatment of Lower Limb Diabetic Peripheral Neuropathy: a Systematic Review.	Nash, J	2019	No meta-analysis
216	Meta-analysis of the Effect of Acupuncture and Moxibustion on the Conduction Velocity of Ulnar Nerve in Diabetic Peripheral Neuropathy	Zhong Zhen	2019	Acupuncture combined with other therapies
217	A Meta-analysis on the Effect of Acupuncture on Tibial Nerve in Diabetic Peripheral Neuropathy	MA Shiqi	2019	Acupuncture combined with other therapies
218	Meta-analysis and Test Sequential Analysis on the Effect of Acupuncture on Diabetic Peripheral Neuropathy	He Jianbin	2019	Acupuncture interventions did not meet the inclusion criteria
219	A Meta-analysis of the Effect of Auricular Pressing on Diabetic Peripheral Neuropathy	LI Ming-zhe	2019	Acupuncture combined with other therapies

220	Influence of Acupuncture-Moxibustion on the Peroneal Nerve Conduction Velocity in Type 2 Diabetic Peripheral Neuropathy: A Meta-analysis	LIU Ji-qin	2016	No patient important outcome
221	Acupuncture for the Treatment of Peripheral Neuropathy: A Systematic Review and Meta-analysis.	Dimitrova, A	2017	Acupuncture combined with other therapies
222	The Effectiveness of Acupuncture in the Management of Persistent Regional Myofascial Head and Neck Pain: A Systematic Review and Meta-analysis	Farag, A M	2020	No meta-analysis
223	Meta-analysis of the Effect of Dry Acupuncture on the Trigger Point of Upper Trapezius Myofascial Pain	Liu Lin	2015	Acupuncture interventions did not meet the inclusion criteria
224	The Effect of Acupuncture on Postoperative Pain, Nausea and Vomiting after Pediatric Tonsillectomy: a Systematic Review.	Pouy, S	2019	No meta-analysis
225	The Effectiveness of Pc6 Acupuncture in the Prevention of Postoperative Nausea and Vomiting in Children- A Systematic Review and Meta-analysis.	Zhang, Y	2020	Control interventions did not meet the inclusion criteria
226	The Effect of Acupuncture on Postoperative Nausea and Vomiting after Pediatric Tonsillectomy: A Meta-analysis and Systematic Review.	Shin, H C	2016	Acupuncture combined with other therapies
227	Transcutaneous Electrical Acupoint Stimulation for Preventing Postoperative Nausea and Vomiting after General Anesthesia: A Meta-analysis of Randomized Controlled Trials.	Chen, J	2020	No meta-analysis
228	Acupuncture therapy on Postoperative Nausea and Vomiting in Abdominal Operation: A Bayesian Network Meta-analysis.	Fu, C	2020	Acupuncture combined with other therapies
229	Non-Needle Acupoint Stimulation for Prevention of Nausea and Vomiting after Breast Surgery: A Meta-analysis.	Sun, R	2019	No patient important outcome
230	Ear Acupuncture therapy in Preventing Postoperative Nausea and Emesis: A Systematic Review and Meta-analysis of Rct	GAO Yanyu	2017	Acupuncture interventions did not meet

				t the inclusi on criteria
231	Can Perioperative Acupuncture Reduce the Pain and Vomiting Experienced after Tonsillectomy? A Meta-analysis.	Cho, H K	2016	Acupuncture combined with other therapies
232	Clinical Observation on Electroacupuncture Pre-Treatment for Delayed Vomiting Caused by Chemotherapy after Breast Cancer Operation	Huang Kejiang	2016	Acupuncture interventions did not meet the inclusion criteria
233	Meta-analysis on Postoperative Complications of Wristband Acupoint Pressure therapy.	Zhang, G L	2015	Full text unavailable
234	The Effect of Acupuncture on Postoperative Pain, Nausea and Vomiting after Pediatric Tonsillectomy: a Systematic Review.	Pouy, S	2019	No meta-analysis
235	Systematic Evaluation and Meta-analysis of the Improvement of Pain and Function after Total Knee Replacement by Percutaneous Electrical Stimulation	LI Kai-min g	2019	Acupuncture combined with other therapies
236	Meta-analysis of Auricular Acupoint Pressing therapy for Postoperative Pain in Fractures	ZHANG Ya qian	2019	Acupuncture combined with other therapies
237	Effect of Auricular Plaster therapy on Postoperative Pain and Functional Recovery after Total Hip Arthroplasty: A Meta-analysis	Li Haiyang	2019	Acupuncture combined with other therapies
238	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
239	The Effect of Auricular Acupressure/Sticking therapy on Pain Relief after Total Hip Or Knee Replacement: a Systematic Review	Zhang Qian kun	2018	Acupuncture combined with other therapies
240	A Systematic Evaluation of the Effect of Point Massage on Relieving Shoulder Pain after Laparoscopic Surgery	Yang Lin	2017	Acupuncture combined with other therapies
241	The Efficacy of Acupuncture in Post-Operative Pain Management: A Systematic Review and Meta-analysis.	Wu, M S	2016	No detailed information on intervention or outcome

				me
242	Electrical Stimulation and Recovery of Gastrointestinal Function Following Surgery : A Systematic Review.	Penfold, J A	2019	Acupuncture combined with other therapies
243	Effect of Auricular Point Sticking on Recovery of Gastrointestinal Function after Gynecological Laparoscopic Surgery: a Meta-analysis	Zhai Tian-tian	2019	Acupuncture combined with other therapies
244	Meta-analysis of the Effect of Auricular Point Sticking Pressure on Abdominal Distension Relief of Patients with Laparoscopic Surgery in Gynecology	HU Shunan	2019	Acupuncture combined with other therapies
245	A Meta-analysis of Randomized Controlled Trials of Acupuncture and Moxibustion for Postoperative Gastroparesis	LI Chao	2019	Acupuncture combined with other therapies
246	A Meta-analysis of the Effect of Acupoint Massage in Prevention of Gastrointestinal Complications after Laparoscopic Surgery in Adults	YE Chunxiang	2019	Acupuncture interventions did not meet the inclusion criteria
247	Meta-analysis of Simple Acupuncture to Promote Postoperative Abdominal Gastrointestinal Dysfunction Recovery	Wang Shiyuan	2018	Acupuncture combined with other therapies
248	Efficacy and Safety of Acupuncture Intervention in the Recovery of Gastrointestinal Function after Gynecological and Obstetric Surgery: A Systematic Review	Wang Youping	2018	No patient important outcome
249	Effectiveness of Acupuncture in Postoperative Ileus : a Systematic Review and Meta-analysis	Bik, Cheong Kah	2016	No patient important outcome
250	A Systematic Review and Meta-analysis of Acupuncture on Postoperative Ileus	Li Jinjin	2015	Acupuncture combined with other therapies
251	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture for Postoperative Intestinal Obstruction	Ma Yufeng	2015	No patient important outcome
252	Effects of Acupuncture in Anesthesia for Craniotomy: A Meta-analysis.	Asmussen, S	2017	Acupuncture combined with other therapies

				rapies
253	Systematic Review and Meta-analysis on the Effectiveness of Acupuncture and Moxibustion in the Treatment of Postpartum Lactation	Zhou Lan	2019	Acupuncture interventions did not meet the inclusion criteria
254	Meta-analysis of the Effect of Embedding Bean in Ear Acupoint on Lactation after Cesarean Section	Han Tinxia	2018	Acupuncture combined with other therapies
255	Effects of Auricular Plaster therapy and Use of Time on Postpartum Lactation: A Meta-analysis	Tang Ying	2017	Acupuncture combined with other therapies
256	Impact of Acupressure on Onset of Labour and Labour Duration: A Systematic Review.	Mollart, L J	2015	No meta-analysis
257	Acupuncture At Zusanli (St36) for Experimental Sepsis: A Systematic Review.	Lai, F	2020	No meta-analysis
258	Efficacy and Safety of Acupuncture on Sepsis: a Systematic Review	TANG Yidan	2020	Acupuncture interventions did not meet the inclusion criteria
259	Systematic Evaluation and Meta-analysis of the Improvement of Pain and Function after Total Knee Replacement by Percutaneous Electrical Stimulation	LI Kai-min g	2019	Acupuncture combined with other therapies
260	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
261	The Effect of Auricular Acupressure/Sticking therapy on Pain Relief after Total Hip Or Knee Replacement: a Systematic Review	Zhang Qian kun	2018	Acupuncture combined with other therapies
262	Effect of Auricular Plaster therapy on Postoperative Pain and Functional Recovery after Total Hip Arthroplasty: A Meta-analysis	Li Haiyang	2019	Acupuncture combined with other therapies
263	The Effect of Different Acupuncture therapies on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Network Meta-analysis of Randomized Controlled Trials.	Xiong, F	2019	Acupuncture combined with other therapies

264	Acupuncture Treatment for Urinary Retention Following Spinal Cord Injury: A Meta-analysis	Cheng Jie	2018	Acupuncture combined with other therapies
265	Efficacy of Acupuncture and Moxibustion for Neurogenic Bladder in Patients with Spinal Cord Injury: A Meta-analysis	Wan Dengfeng	2018	No patient important outcome
266	Acupuncture for the Effect and Safety of Neurogenic Bladder after Spinal Cord Injury: A Meta-analysis	FAN Xiao	2017	Acupuncture combined with other therapies
267	The Impact of Acupuncture on Neurological Recovery in Spinal Cord Injury : A Systematic Review and Meta-analysis.	Ma, R	2015	Acupuncture combined with other therapies
268	Network Meta-analysis on Effectiveness of Fire Needle, Warm Acupuncture, and Electroacupuncture in the Treatment of Knee Osteoarthritis	Zhang Jinhuan	2020	Acupuncture interventions did not meet the inclusion criteria
269	Meta-analysis of Fu's Subcutaneous Needling therapy for Knee Osteoarthritis	SONG Xiang	2019	Control interventions did not meet the inclusion criteria
270	Meta-analysis of Safety and Effectiveness of Floating Needle therapy in Treating Knee Osteoarthritis	LIU Wan-Jun	2019	Control interventions did not meet the inclusion criteria
271	Meta-analysis of Clinical Effect of Acupuncture and Moxibustion on Osteoarthritis/Osteodystrophy	Feng Peng	2019	Acupuncture interventions did not meet the inclusion criteria
272	Meta-analysis of the Effect of Acupuncture and Western Medicine on Knee Osteoarthritis/Osteodystrophy	Hao Huirui	2018	Acupuncture combined with other therapies
273	Effect of Electroacupuncture on Knee Osteoarthritis: A Systematic Review	LIN Jie	2016	Acupuncture combined with other therapies
274	Meta-analysis of the therapeutic Effect of	MA Jia-jian	2016	Acupuncture

	Treating Osteoarthritis with Filiform Needle			combined with other therapies
275	Meta-analysis of Acupuncture and Moxibustion for Treatment of Osteoarthritis/Osteodystrophy	Hu Hanjiao	2016	Acupuncture interventions did not meet the inclusion criteria
276	Acupuncture for Obstructive Sleep Apnea (Osa) in Adults: A Systematic Review and Meta-analysis	Wang, L	2020	Acupuncture interventions did not meet the inclusion criteria
277	Effects of Acupuncture on Tinnitus Treatment: A Systematic Review and Meta-analysis	ZHANG Zeyu	2018	Acupuncture interventions did not meet the inclusion criteria
278	Non-Pharmacologic Treatments for Symptoms of Diabetic Peripheral Neuropathy: a Systematic Review.	Amato, N. S	2019	Acupuncture interventions did not meet the inclusion criteria
279	Effects of Acupuncture on Luteinized Unruptured Follicle Syndrome: A Meta-analysis of Randomized Controlled Trials	Liu, X	2020	No patient important outcome
280	Complementary and Alternative Medicine Treatment Options for Otitis Media: A Systematic Review.	Marom, T	2016	No meta-analysis
281	Clinical Effect of Acupuncture therapy on Obstructive Sleep Apnea Hypopnea Syndrome: a Meta-analysis	JIAO Su-qin	2018	No patient important outcome
282	The Clinical Effect of Acupuncture in the Treatment of Obstructive Sleep Apnea: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Lv, Z T	2016	Acupuncture interventions did not meet the inclusion criteria
283	Effectiveness of Acupuncturing At the Sphenopalatine Ganglion Acupoint Alone for Treatment of Allergic Rhinitis: A Systematic Review and Meta-analysis.	Fu, Qinwei	2019	Control interventions did not meet the inclusion criteria
284	Acupuncture for Allergic Rhinitis: a Systematic Review and Meta-analysis	Liu Jie	2016	Control interventions did

				d not meet the inclusion criteria
285	Systematic Review and Meta-analysis of the Randomized Controlled Trial of Acupuncture for Allergic Rhinitis	QU Shu-han	2016	Acupuncture interventions did not meet the inclusion criteria
286	Acupuncture of Sphenopalatine Ganglion in the Treatment of Allergic Rhinitis: a Systematic Review	Chen Lihe	2016	Acupuncture interventions did not meet the inclusion criteria
287	Acupuncture and Moxibustion for the Treatment of Allergic Rhinitis: A Meta-analysis	LIANG Chao	2015	Control interventions did not meet the inclusion criteria
288	Meta-analysis of Acupuncture Treatment for Sudden Deafness	ZHA Bixiang	2019	Control interventions did not meet the inclusion criteria
289	Evaluation of Effect of Acupuncture and Moxibustion and Level of Intervention Based on Cumulative Meta-analysis and Fuzzy Comprehensive Evaluation: Sudden Hearing Loss	LI Bo	2016	No patient important outcome
290	Acupuncture for the Treatment of Sudden Sensorineural Hearing Loss: A Systematic Review and Meta-analysis: Acupuncture for Ssnhl.	Chen, S	2019	No patient important outcome
291	Acupuncture therapy for Sudden Sensorineural Hearing Loss: a Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhang, XC	2015	Acupuncture combined with other therapies
292	Efficacy and Safety of Acupuncture therapy for Nerve Deafness: a Meta-analysis of Randomized Controlled Trials.	Jiang, Y	2015	Control interventions did not meet the inclusion criteria
293	Systematic Review and Meta-analysis of Acupuncture for the Treatment of Neuropathic Tinnitus	SONG Hualong	2018	No patient important outcome

294	Systematic Review of Acupuncture Treatment of Tinnitus	Xie Hui	2018	Control interventions did not meet the inclusion criteria
295	Meta-analysis of Acupuncture and Moxibustion Treatment of Tinnitus Randomized Controlled Trial	Nie Hongmei	2016	No patient important outcome
296	The Meta-analysis of Tinnitus on Randomized Controlled Clinical Trials of Acupuncture Treatment	Meng Dan	2016	No patient important outcome
297	Systematic Review of Clinical Research on Acupuncture and Moxibustion Treatment of Tinnitus	Ji Jun	2016	No patient important outcome
298	Systematic Review of Acupuncture and Hyperthyroidism therapy	Wang Guang-an	2018	Acupuncture interventions did not meet the inclusion criteria
299	Meta-analysis of Clinical Study on Electroacupuncture Treatment of Diabetic Peripheral Neuropathy	Zheng Haizhu	2020	Acupuncture interventions did not meet the inclusion criteria
300	Acupuncture for the Treatment of Lower Limb Diabetic Peripheral Neuropathy: a Systematic Review.	Nash, J	2019	No meta-analysis
301	Meta-analysis of the Effect of Acupuncture and Moxibustion on the Conduction Velocity of Ulnar Nerve in Diabetic Peripheral Neuropathy	Zhong Zhen	2019	Acupuncture interventions did not meet the inclusion criteria
302	A Meta-analysis on the Effect of Acupuncture on Tibial Nerve in Diabetic Peripheral Neuropathy	MA Shiqi	2019	Acupuncture interventions did not meet the inclusion criteria
303	Meta-analysis and Test Sequential Analysis on the Effect of Acupuncture on Diabetic Peripheral Neuropathy	He Jianbin	2019	Acupuncture combined with other therapies
304	A Meta-analysis of the Effect of Auricular Pressing on Diabetic Peripheral Neuropathy	LI Ming-zhe	2019	Acupuncture combined with other therapies

				rapies
305	Influence of Acupuncture-Moxibustion on the Peroneal Nerve Conduction Velocity in Type 2 Diabetic Peripheral Neuropathy: A Meta-analysis	LIU Ji-qin	2016	No patient important outcome
306	Meta-analysis and Treatment Strategy of Acupuncture in the Treatment of Diabetic Peripheral Neuropathy	XU Chang	2016	No patient important outcome
307	Influence on Acupuncture Treatment of Diabetic Peripheral Neuropathy-a Systematic Review of Randomized Controlled Trials	Li Jun	2015	No patient important outcome
308	Effects and Safety of Acupuncture for Diabetes: a Systematic Review and Meta-analysis	Yi, Li-Juan	2016	No patient important outcome
309	Systematic Review and Meta-Regression Analysis of Acupuncture for Diabetic Neuropathy	Jia Ying	2019	No patient important outcome
310	A Systematic Review of Acupuncture on Diabetic Kidney Disease	WANG Anna	2019	Acupuncture combined with other therapies
311	Systematic Evaluation of Acupuncture Treating Diabetic Retinopathy	GUAN Mingdan	2019	Acupuncture combined with other therapies
312	Acupuncture for Management of Type 2 Diabetic Gastroparesis: a Meta-analysis	CHEN Ya-jun	2018	Acupuncture interventions did not meet the inclusion criteria
313	System Evaluation and Meta-analysis of Auricular Plaster Intervention for Diabetic Gastroparesis Patients	Xu Huiwen	2016	Acupuncture interventions did not meet the inclusion criteria
314	Meta-analysis of Acupuncture Treatment of Type 2 Diabetes Mellitus and Depression Clinical Research	Liu Meijun	2016	Acupuncture combined with other therapies
315	Auricular Plaster therapy for Improving Sleep in Patients with Diabetes Mellitus and Insomnia: A Systematic Review	Jiang Yuting	2016	Acupuncture interventions did not meet the inclusion criteria

316	Systematic Review and Meta-analysis on Acupuncture for Obesity Complicated with Type 2 Diabetes Mellitus	WANG Lihua	2018	Acupuncture interventions did not meet the inclusion criteria
317	Meta-analysis on the therapeutic Effect of Acupuncture and Moxibustion on Obesity of Type 2 Diabetes Mellitus	Lin Juan	2016	Acupuncture interventions did not meet the inclusion criteria
318	Systematic Review of Auricular Point therapy for Type 2 Diabetes Mellitus: A Meta-analysis	Piao Chunli	2020	No patient important outcome
319	Acupuncture for Type 2 Diabetes Mellitus: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Chen, C	2019	No patient important outcome
320	A Meta-analysis on the Effect of Acupoint Massage on Type 2 Diabetic Patients	WANG Yana	2019	No meta-analysis
321	Meta-analysis of Acupuncture on the Pancreas Islet Function of Patients with Type-2 Diabetes	XING Guochun	2015	Control interventions did not meet the inclusion criteria
322	Systematic Review of Interventional Effect of Acupuncture and Moxibustion on Impaired Glucose Regulation	SHI Liwei	2018	Acupuncture interventions did not meet the inclusion criteria
323	Meta-analysis of therapeutic Effect of Acupuncture and Moxibustion on Metabolic Syndrome	Guo Shenglong	2015	Acupuncture interventions did not meet the inclusion criteria
324	Randomized Controlled Trials of Auricular Point for Hyperlipidemia: A Meta-analysis	LI Huan	2017	No patient important outcome
325	Effectiveness and Safety of Acupuncture and Moxibustion for Hyperlipidemia: A Systematic Review	LIU Mailan	2015	No patient important outcome
326	Acupuncture for Glaucoma.	Law, S K	2020	No meta-analysis
327	Optimizing Acupuncture Treatment for Dry Eye Syndrome: a Systematic Review.	Kim, B H	2018	Acupuncture interventions did not meet

				t the inclusion criteria
328	Meta-analysis on Acupuncture for Dry Eyes Based on the Clinical Literatures: a Randomized Controlled Trial	SHENG Xu eyan	2015	Acupuncture interventions did not meet the inclusion criteria
329	Acupuncture for Acute Hordeolum	Cheng, Ke	2017	Acupuncture interventions did not meet the inclusion criteria
330	Meta-analysis of Auricular Acupressure therapy in Intervention of Juvenile Myopia	XU Baisheng	2019	Acupuncture interventions did not meet the inclusion criteria
331	Effectiveness of Acupuncture for Juvenile Myopia: A Systematic Assessment	FU Tian	2017	Control interventions did not meet the inclusion criteria
332	Meta-analysis on Acupuncture Treatment of Diplopia	Ding Yaping	2018	Acupuncture combined with other therapies
333	Meta-analysis of the Effect of Acupuncture and Moxibustion on Uveitis	Wu Hanqing	2015	No patient important outcome
334	Meta-analysis of Acupuncture As Adjuvant therapy in Improving Gastrointestinal Function of Acute Pancreatitis Patients	LIU Hong	2017	Acupuncture combined with other therapies
335	Meta-analysis on Acupuncture and Moxibustion in the Treatment of Inflammatory Bowel Disease	WANG Yuyan	2018	Acupuncture interventions did not meet the inclusion criteria
336	Clinical Efficacy Differences in Ulcerative Colitis Between Acupuncture and Salazopyridine: A Meta-analysis	LIU Zhao	2016	Acupuncture interventions did not meet the inclusion criteria
337	Systematic Review of Complementary and	Langhorst,	2015	No meta-analysis

	d Alternative Medicine Treatments in Inflammatory Bowel Diseases.	J		alysis
338	Acupuncture for Chronic Hepatitis B.	Kong, Z	2019	Acupuncture interventions did not meet the inclusion criteria
339	[Acupuncture for Diarrhea-Predominant Irritable Bowel Syndrome: a Meta-analysis].	Deng,D	2017	Acupuncture interventions did not meet the inclusion criteria
340	Meta-analysis of Acupuncture in Treatment of Irritable Bowel Syndrome	LI Rui-gen	2016	Acupuncture interventions did not meet the inclusion criteria
341	Systematic Review of Acupuncture therapies for Irritable Bowel Syndrome	XU Guixin g	2016	Acupuncture interventions did not meet the inclusion criteria
342	Systematic Review of Auricular Plaster therapy for Prevention and Treatment of Opioid Induced Constipation	DING Weib in	2020	Acupuncture interventions did not meet the inclusion criteria
343	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Functional Constipation	MA Kun	2019	Control interventions did not meet the inclusion criteria
344	Effects of Ear-acupressure in Treatment of Constipation: a Systematic Review	LUO Chun mei	2017	No patient important outcome
345	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture and Moxibustion for Constipation	Li Xue	2016	Acupuncture interventions did not meet the inclusion criteria
346	Auricular-Plaster therapy for Chronic Functional Constipation: A Meta-analysis of Randomized Controlled Trial	Wu Yuanrong	2016	No patient important outcome
347	Efficacy and Safety of Acupuncture for t	Zhou, W	2016	Acupuncture

	he Treatment of Functional Dyspepsia: Meta-analysis.			interventions did not meet the inclusion criteria
348	The Effect of Acupuncture and Moxibustion on Functional Dyspepsia Compared with Prokinetic Agents: a Meta-analysis	WU Xiao-wei	2015	Acupuncture interventions did not meet the inclusion criteria
349	Meta-analysis of Acupuncture Treatment of Peptic Ulcer	Hu Shixiu	2019	Acupuncture interventions did not meet the inclusion criteria
350	Meta-analysis of Curative Effect Comparison Between Acupuncture and Western Medicine on Chronic Gastritis	Wang Junlin	2016	Acupuncture interventions did not meet the inclusion criteria
351	Meta-analysis on Acupuncture in Treatment of Chronic Atrophic Gastritis	XIANG Juan	2016	Acupuncture interventions did not meet the inclusion criteria
352	Gastroesophageal Reflux Disease Treated with Acupoint Pointer therapy of Tcm: A Meta-analysis	LI Jianfeng	2019	Acupuncture interventions did not meet the inclusion criteria
353	Efficacy of Acupuncture therapy on Gastrointestinal Dysfunction in Patients with Non-Gastrointestinal Diseases: a Systematic Review and Meta-analysis Based on Randomized Controlled Trials	HOU Ya-hong	2017	Acupuncture combined with other therapies
354	Meta-analysis of Acupuncture Treatment for Gastrointestinal Reaction after Chemotherapy of Tumor	HU Ya-cai	2017	No patient important outcome
355	Acupuncture St25 Treatment for Chronic Diarrhea: A Systematic Evaluation and Meta-analysis	QIN Zongshi	2015	Control interventions did not meet the inclusion criteria
356	Effects of Acupuncture in Patients with Chronic Kidney Disease: a Systematic Review	Mela, GAA	2020	No meta-analysis

	view.			
357	Acupuncture for Infertile Women Without Undergoing Assisted Reproductive Techniques (Art): A Systematic Review and Meta-analysis.	Yun, L	2019	Acupuncture interventions did not meet the inclusion criteria
358	Acupuncture in Improving Endometrial Receptivity: a Systematic Review and Meta-analysis.	Zhong, Y	2019	Acupuncture interventions did not meet the inclusion criteria
359	Effect of Acupuncture on Ovulatory Dysfunction Infertility: A Systematic Review	TAN Yu-qing	2019	Acupuncture combined with other therapies
360	Acupuncture in Treatment of Fallopian Tube Obstructive Infertility: A Systematic Review and Meta-analysis	HU Yujiao	2018	Acupuncture interventions did not meet the inclusion criteria
361	A Meta-analysis on the Clinical Study of Acupuncture in Treating Infertility	LIU Tao	2018	Acupuncture interventions did not meet the inclusion criteria
362	Meta-analysis of Acupuncture-Moxibustion in Treatment of Anovulation Infertility	AI Xiao	2017	Acupuncture interventions did not meet the inclusion criteria
363	Efficacy and Safety of Acupuncture for the Treatment of Oligoasthenozoospermia: A Systematic Review.	You, F	2020	No meta-analysis
364	The Effects of Acupuncture on Pregnancy Outcomes of in Vitro Fertilization with Embryo Transfer: An Interdisciplinary Systematic Review.	Gu, Y E	2019	No meta-analysis
365	Therapeutic Effect of Acupuncture on the Outcomes of in Vitro Fertilization: a Systematic Review and Meta-analysis.	Verastegui, C	2017	Full text unavailable
366	Long-Term Effects of Acupuncture for Chronic Prostatitis/Chronic Pelvic Pain Syndrome: Systematic Review and Single-arm Meta-analyses.	Qin, Z	2019	No detailed information on intervention or outcome

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367	Meta-analysis of the Effects of Acupuncture for Chronic Prostatitis	AO Jin-bo	2018	No detailed information on intervention or outcome
368	Comparison of the Efficacy of Acupuncture and Western Medicine Treatment on Chronic Prostatitis in China: Meta-analysis	YU Li-Zhong	2017	No patient important outcome
369	Meta-analysis of Acupuncture Treatment of Chronic Prostatitis	PANG Yong	2016	Acupuncture interventions did not meet the inclusion criteria
370	Meta-analysis on Acupuncture in Treating Chronic Prostatitis	HE Yuan	2015	No detailed information on intervention or outcome
371	Evaluation of Acupuncture in Treating Benign Prostatic Hyperplasia	CHAI Qiqi	2018	Acupuncture combined with other therapies
372	Complementary therapies for Bladder Pain Syndrome: a Systematic Review.	Verghese, T S	2016	No meta-analysis
373	Meta-analysis of Clinical Efficacy of Acupuncture Versus Drugs in the Treatment of Renal Colic	HUANG Yi-yu	2020	Acupuncture interventions did not meet the inclusion criteria
374	Meta-analysis on the Clinical Effect of Acupuncture and Moxibustion in the Treatment of Female Stress Urinary Incontinence	CHEN Yali	2020	Acupuncture interventions did not meet the inclusion criteria
375	A Meta-analysis of Treating Female Stress Urinary Incontinence by Acupuncture	Zhang Yan	2016	Acupuncture interventions did not meet the inclusion criteria
376	Clinical Studies on Incontinence Treated by Electroacupuncture: a Meta-analysis	Zhang Jiaping	2018	Control interventions did not meet the inclusion

				n criteria
377	A Systematic Review and Meta-analysis of Acupuncture for Urolithiasis	Zhang Min gqiang	2019	Acupuncture interventions did not meet the inclusion criteria
378	Acupuncture Treatment for Chronic Pelvic Pain in Women: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Sung, S H	2018	Acupuncture interventions did not meet the inclusion criteria
379	Systematic Review and Meta-analysis of Complementary Treatments for Women with Symptomatic Endometriosis.	Mira, TAA	2018	No meta-analysis
380	Acupuncture for Polycystic Ovarian Syndrome.	Lim, CED	2019	No patient important outcome
381	Acupuncture for Polycystic Ovarian Syndrome: A Systematic Review and Meta-analysis.	Jo, J	2017	No patient important outcome
382	Acupuncture for Treating Polycystic Ovary Syndrome: Guidance for Future Randomized Controlled Trials.	Wu, Y	2016	No patient important outcome
383	Transcutaneous Electrical Nerve Stimulation (Tens) for Pain Management in Sickle Cell Disease.	Pal, S	2020	No meta-analysis
384	Acupuncture for Cognitive Impairment in Vascular Dementia, Alzheimer's Disease and Mild Cognitive Impairment: A Systematic Review and Meta-analysis	Lan, J	2020	Full text unavailable
385	Effectiveness and Safety of Acupuncture for the Treatment of Alzheimer's Disease: A Systematic Review and Meta-analysis.	Wang, Y Y	2020	Control interventions did not meet the inclusion criteria
386	Effectiveness of Acupuncture for Alzheimer's Disease: An Updated Systematic Review and Meta-analysis.	Huang, Q	2019	Control interventions did not meet the inclusion criteria
387	Acupuncture and Alzheimer's Disease: A Review of a Meta-analysis.	Quick, Melissa	2015	Full text unavailable
388	The Effectiveness and Safety of Acupuncture for Patients with Alzheimer Disease:	Zhou, J	2015	Acupuncture interventions

	a Systematic Review and Meta-analysis of Randomized Controlled Trials.			did not meet the inclusion criteria
389	Meta-analysis of Tiaoshen Tongdu Acupuncture in the Treatment of Vascular Dementia	Li Fei	2019	Acupuncture interventions did not meet the inclusion criteria
390	Efficacy Difference of Electro-acupuncture and Nimodipine in the Treatment of Vascular Dementia: A Study of Meta-analysis	WU Jiamin	2018	Control interventions did not meet the inclusion criteria
391	A Meta-analysis on Clinical Randomized Controlled Trials of Scalp Electroacupuncture of Vascular Dementia	WAN Ting	2017	Control interventions did not meet the inclusion criteria
392	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Senile Dementia	Lin Lin	2017	Acupuncture interventions did not meet the inclusion criteria
393	Meta-analysis: Scalp Treatment of Vascular Dementia	GUO Zhenliang	2016	Control interventions did not meet the inclusion criteria
394	Systematic Review of Acupuncture for the Treatment of Alcohol Withdrawal Syndrome.	Liu, X	2018	Acupuncture interventions did not meet the inclusion criteria
395	Systematic Review of Acupuncture therapy for Opioid-Dependence Withdrawal Syndrome	ZHANG Guang-Cai	2018	Acupuncture interventions did not meet the inclusion criteria
396	Meta-analysis of Acupoint Stimulation on Improving Opioid Protracted Withdrawal Symptoms	YANG Jia-xin	2016	Acupuncture interventions did not meet the inclusion criteria
397	Condition and Effectiveness Evaluation of	LIU Zhao	2015	Acupuncture

	Acupuncture for Smoking Cessation			interventions did not meet the inclusion criteria
398	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Schizophrenia	ZHANG Wenzhong	2019	Acupuncture interventions did not meet the inclusion criteria
399	Acupuncture As Add-on Treatment of the Positive, Negative, and Cognitive Symptoms of Patients with Schizophrenia: A Systematic Review.	van den Noort, M	2018	No meta-analysis
400	Acupuncture and Electroacupuncture for Anxiety Disorders: A Systematic Review of the Clinical Research.	Amorim, D	2018	No meta-analysis
401	Effectiveness and Safety of Ear Acupuncture for Trauma-Related Mental Disorders after Large-Scale Disasters: A Prisma-Compliant Systematic Review.	Kwon, C Y	2020	No meta-analysis
402	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Post-Traumatic Stress Disorder	Han Yadi	2017	Acupuncture interventions did not meet the inclusion criteria
403	Acupuncture for Attention Deficit Hyperactivity Disorder: A Systematic Review	ZHANG Shanyu	2020	Acupuncture interventions did not meet the inclusion criteria
404	Acupuncture for Attention Deficit Hyperactivity Disorder: A Meta-analysis of Randomized Controlled Trials	TIAN Yong	2019	Acupuncture interventions did not meet the inclusion criteria
405	A Meta-analysis on Acupuncture Treatment of Attention Deficit/Hyperactivity Disorder.	Ni, X Q	2015	Acupuncture interventions did not meet the inclusion criteria
406	A Meta-analysis on Acupuncture Treatment of Attention Deficit/Hyperactivity Disorder	NI Xin-qiang	2015	Acupuncture interventions did not meet the inclusion criteria

				on criteria
407	Neuromodulation of Autism Spectrum Disorders Using Vagal Nerve Stimulation.	van Hoorn, A	2019	Acupuncture interventions did not meet the inclusion criteria
408	Acupuncture for Autism Spectrum Disorder: A Systematic Review and Meta-analysis.	Lee, B	2017	Full text unavailable
409	Systematic Evaluation of Acupuncture therapy for Childhood Autism	YUAN Zhao-hong	2016	Acupuncture combined with other therapies
410	Complementary and Alternative therapies for Autism Spectrum Disorder.	Brondino, N	2015	Acupuncture combined with other therapies
411	Meta-analysis of Curative Efficacy of Acupuncture for Children with Autism	Zhang Chengxiong	2015	Acupuncture combined with other therapies
412	Scalp Acupuncture Treatment for Children's Autism Spectrum Disorders: A Systematic Review and Meta-analysis.	Liu, C	2019	Acupuncture combined with other therapies
413	The Efficacy and Safety of Acupuncture for the Treatment of Children with Autism Spectrum Disorder: A Systematic Review and Meta-analysis.	Lee, Boram	2018	Acupuncture combined with other therapies
414	A Meta-analysis on Randomized Controlled Trials of Acupuncture in Treatment of Children with Tic Disorders	NI Xinqiang	2017	Acupuncture combined with other therapies
415	Management of Temporomandibular Disorders with Transcutaneous Electrical Nerve Stimulation: A Systematic Review.	Fertout, A	2019	No meta-analysis
416	Acupuncture in Temporomandibular Disorder Myofascial Pain Treatment: A Systematic Review.	Fernandes, A C	2017	No meta-analysis
417	Meta-analysis of the Efficacy of Acupuncture Treatment of Temporomandibular Joint Disorder	LI Hui-ping	2015	No patient important outcome
418	Salivary Hypofunction: An Update on the therapeutic Strategies.	Salum, F G	2018	No meta-analysis

419	A Meta-analysis of Radiotherapy-Induced Salivary Hypofunction and Xerostomia in Patients with Head and Neck Cancer	SU Qun	2015	Acupuncture interventions did not meet the inclusion criteria
420	Nonpharmacologic therapies in Patients with Exacerbation of Chronic Obstructive Pulmonary Disease: A Systematic Review with Meta-analysis	Dobler, C C	2020	Acupuncture interventions did not meet the inclusion criteria
421	Acupuncture Techniques for Copd: a Systematic Review.	Fernández-Jané, C	2020	Acupuncture interventions did not meet the inclusion criteria
422	Acupuncture therapy for Functional Effects and Quality of Life in Copd Patients: A Systematic Review and Meta-analysis.	Wang, Jiajia	2018	Acupuncture interventions did not meet the inclusion criteria
423	Meta-analysis of the therapeutic Effect of Acupuncture on Chronic Obstructive Pulmonary Disease	CAO Ailing	2017	Acupuncture combined with other therapies
424	Meta-analysis of Acupuncture Treatment of Bronchial Asthma Clinical Literature	LI Meng-yuan	2018	Acupuncture interventions did not meet the inclusion criteria
425	Effect and Safety of Stimulating Acupoints in Children with Cough Variant Asthma: A Meta-analysis.	Jin, Y	2018	Acupuncture interventions did not meet the inclusion criteria
426	Meta-analysis on Randomized Controlled Trials for Scalp Acupuncture Treatment of Stroke: A Systematic Review.	Young-Nim, Y	2018	No meta-analysis
427	Statistic Method Meta-analysis on Eye Acupuncture Treatment for Stroke	GUAN Hongyang	2017	Acupuncture combined with other therapies
428	Acupuncture for Stroke Rehabilitation	Yang, Ai	2016	Acupuncture combined with other therapies

				rapies
429	Eye Acupuncture Treatment for Stroke: A Systematic Review and Meta-analysis.	Bai, Z H	2015	Acupuncture combined with other therapies
430	Xingnao Kaiqiao Needling Method for Acute Ischemic Stroke: A Meta-analysis of Safety and Efficacy.	Yang, Z X	2017	Acupuncture combined with other therapies
431	Systematic Review of Long-Term Xingnao Kaiqiao Needling Efficacy in Ischemic Stroke Treatment.	Yang, Z X	2015	Control interventions did not meet the inclusion criteria
432	Effectiveness of Scalp Acupuncture for Ischemic Stroke: A Meta-analysis.	Wang, J H	2015	Acupuncture interventions did not meet the inclusion criteria
433	Xingnao Kaiqiao Needling Method for Acute Ischemic Stroke: A Meta-analysis of Safety and Efficacy.	Yang, Z X	2017	Acupuncture combined with other therapies
434	Electroacupuncture for Acute Ischemic Stroke.	Liu, A J	2015	Acupuncture combined with other therapies
435	Meta-analysis of Floating-Needle therapy for Post-Stroke Shoulder-Hand Syndrome	WANG Zhenhui	2018	Control interventions did not meet the inclusion criteria
436	Systematic Evaluation and Meta-analysis of Acupuncture Antagonistic Muscle therapy for Spastic Paralysis after Stroke	WANG Rui	2019	Control interventions did not meet the inclusion criteria
437	Systematic Review and Meta-analysis on the therapeutic Effect of Acupuncture on Hypertonia of Hand Muscle in Patients with Stroke	Zhang Zengqiao	2019	Acupuncture combined with other therapies
438	Meta-analysis on Acupuncture for Hand Spasm Post-Stroke	Qi Conghui	2019	Acupuncture combined with other therapies

				rapies
439	Effect of Transcutaneous Electrical Nerve Stimulation (Tens) on Spasticity in Adults with Stroke: A Systematic Review and Meta-analysis.	Mahmood, A	2019	Acupuncture combined with other therapies
440	Systematic Review and Meta-analysis of Acupuncture Treatment for Post-Stroke Hemiparesis and Dysfunction	QI Cong-hui	2018	Acupuncture combined with other therapies
441	Transcutaneous Electrical Nerve Stimulation Improves Walking Capacity and Reduces Spasticity in Stroke Survivors: a Systematic Review and Meta-analysis.	Kwong, P W	2018	Acupuncture combined with other therapies
442	Meta-analysis on the therapeutic Effect of Acupuncture At Meridian Sinew for Spastic Paralysis after Stroke.	Zhang, Y	2017	Control interventions did not meet the inclusion criteria
443	Meta-analysis on the Effect of Acupuncture and Moxibustion on Limb Motor Dysfunction in Patients with Stroke	Zheng Yi	2016	Acupuncture interventions did not meet the inclusion criteria
444	Systematic Evaluation of Acupuncture for the Treatment of Post-Stroke Streptococcal Infection	ZHANG Yong	2016	Acupuncture combined with other therapies
445	Acupuncture for Spasticity after Stroke: a Systematic Review and Meta-analysis of Randomized Controlled Trials	Lim, S M	2015	Control interventions did not meet the inclusion criteria
446	Meta-analysis and Test Sequential Analysis of Depressive State in Patients with Post-Stroke Depression Treated with Acupuncture	Xu Ruoxi	2019	Acupuncture combined with other therapies
447	Systematic Review and Meta-analysis of the Clinical Efficacy of Eye Acupuncture in the Treatment of Poststroke Depression	YANG wei	2019	Control interventions did not meet the inclusion criteria
448	The Effectiveness of Acupuncture therapy in Patients with Post-Stroke Depression: An Updated Meta-analysis of Randomized	Zhang, X Y	2019	Acupuncture interventions did not meet

	Controlled Trials.			t the inclusi on criteria
449	A Meta-analysis of the Efficacy of Acup uncture and Electro-acupuncture on Post-S troke Depression	HUANG Yi ngjie	2018	Acupuncture combined w ith other the rapies
450	Meta-analysis of Effect of Acupuncture a nd Antidepressants on Depression in Pati ents with Post-Stroke Depression	ZHOU Xin	2018	Acupuncture interventions did not mee t the inclusi on criteria
451	Jin Three-Needle therapy for Post-Stroke Depression: A Systematic Review and M eta-analysis	WEI Yanyi ng	2018	Acupuncture interventions did not mee t the inclusi on criteria
452	Meta-analysis of Auricular Point Sticking in the Treatment of Post-Stroke Depressio n	WANG Qia ng	2018	Acupuncture interventions did not mee t the inclusi on criteria
453	Scalp Acupuncture therapy for Post-Strok e Depression: A Systematic Review	ZHANG H uajun	2017	Acupuncture interventions did not mee t the inclusi on criteria
454	An Meta-analysis of Acupuncture for Pos t-Stroke Depression	YIN Miao- miao	2016	No patient i mportant ou tcome
455	Consciousness Restoring for Resuscitation Acupuncture therapy for Dysphagia after Stroke: A Systematic Review and Meta-a nalysis	XU Lianjie	2019	Control inte rventions di d not meet the inclusio n criteria
456	Meta-analysis of therapeutic Effect of To ngue Tri-Points therapy on Post Stroke P seudobulbar Palsy	Yang Jiwei	2018	Control inte rventions di d not meet the inclusio n criteria
457	Acupuncture Treatment for Post-Stroke D ysphagia: An Update Meta-analysis of Ra ndomized Controlled Trials.	Li, L X	2018	Acupuncture combined w ith other the rapies
458	The Efficacy of Acupuncture for Post-Str	WANG Ch	2017	Acupuncture

	oke Dysphagia: A Systematic Review and Meta-analysis	un		combined w ith other the rapies
459	Meta-analysis of Curative Effects of Acu puncture therapy on Dysphagia after Stro ke	XU Minghu a	2017	Control inte rventions di d not meet the inclusio n criteria
460	Meta-analysis of Randomized Controlled Trials on Electro-acupuncture in the Treat ment of Dysphagia after Stroke	ZHANG Yi	2017	Acupuncture combined w ith other the rapies
461	Systematic Review on Acupuncture for T reatment of Dysphagia after Stroke.	Ye, Qiupin g	2017	Acupuncture combined w ith other the rapies
462	Clinical Literature Study of Acupuncture and Moxibustion in the Treatment of Pos t-Stroke Dysphagia Based on Meta-analys is	MENG Dan	2016	Acupuncture combined w ith other the rapies
463	A Meta-analysis of the therapeutic Effect of Nape Acupuncture on Post-Stroke Dys phagia in Domestic Literature	HU Tian-ju n	2015	Acupuncture combined w ith other the rapies
464	Mesh Meta-analysis of Different Acupunc ture therapy for Shoulder Pain after Strok e	ZHU Jing	2019	Control inte rventions di d not meet the inclusio n criteria
465	Clinical Effects of Different Acupuncture therapy in Treatment of Post-Stroke Shou lder Pain	LIU Fushui	2019	Control inte rventions di d not meet the inclusio n criteria
466	Systematic Reviews of Clinical Effect of Floating Needle in the Treatment of Sho ulder Pain after Stroke	WEI Zemin	2019	Acupuncture combined w ith other the rapies
467	Effects of Acupuncture on the Recovery Outcomes of Stroke Survivors with Shoul der Pain: A Systematic Review.	Chau, J P C	2018	Acupuncture combined w ith other the rapies
468	Acupuncture for Poststroke Shoulder Pain : A Systematic Review and Meta-analysis	Lee, S H	2016	Acupuncture combined w

	.			ith other the rapies
469	Acupuncture for the Treatment of Hiccups Following Stroke: a Systematic Review and Meta-analysis.	Yue, J	2017	No patient important outcome
470	Acupuncture for Insomnia after Stroke: a Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture interventions did not meet the inclusion criteria
471	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture and Moxibustion for Limb Numbness after Stroke	Chen Lizao	2020	Acupuncture interventions did not meet the inclusion criteria
472	Systematic Evaluation of Acupuncture for Treatment of Urinary Retention after Cerebral Apoplexy	Wang Huimin	2019	Acupuncture interventions did not meet the inclusion criteria
473	Meta-analysis on Evaluation Index of Acupuncture Improving Self-Care Ability of Post-Stroke Patients	Wang Xing	2018	Acupuncture interventions did not meet the inclusion criteria
474	Therapeutic Efficacy of Acupuncture At Baihui (Gv 20) and Shenting (Gv 24) for Post-Stroke Cognitive Impairment: A Systematic Review	LIU Fang	2018	Acupuncture combined with other therapies
475	Electroacupuncture for Post Stroke Cognitive Impairment: a Systematic Review and Meta-analyses	ZHAN Jie	2017	Acupuncture combined with other therapies
476	Meta-analysis of Scalp Acupuncture on Cognitive Disorder after Stroke	CHEN Li-zao	2016	Acupuncture interventions did not meet the inclusion criteria
477	Scalp Acupuncture for the Treatment of Cognitive Dysfunction after Stroke: A Systematic Review	Xiong Jian	2016	Acupuncture combined with other therapies
478	Rcts Meta-analysis of Electro-acupuncture Treating Post-Stroke Constipation	WANG De-long	2018	No detailed information

				on interventi on or outco me
479	Systematic Review on Acute Cerebral Inf arction Treated with Acupuncture At the Points of the Governor Vessel	JI Jian-gang	2018	No detailed information on interventi on or outco me
480	A Meta-analysis on Effectiveness of Elect ro- Acupuncture on Post-Stroke Urinary I ncontinence	TAN Zhi-g ao	2015	No patient i mportant ou tcome
481	Effectiveness of Non-Pharmacological Inte rventions on the Management of Sarcope nic Obesity: A Systematic Review and M eta-analysis.	Yin, Y H	2020	Acupuncture combined w ith other the rapies
482	Effectiveness of Electroacupuncture for Si mple Obesity: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Gao, Yanlin g	2020	Control inte rventions di d not meet the inclusio n criteria
483	Effect of Acupuncture and Intervention T ypes on Weight Loss: a Systematic Revie w and Meta-analysis.	Kim, S Y	2018	Acupuncture interventions did not mee t the inclusi on criteria
484	Auricular Acupressure for Overweight and Obese Individuals: A Systematic Review and Meta-analysis.	Huang, C F	2019	Acupuncture combined w ith other the rapies
485	Acupuncture and Related therapies for Ob esity: A Network Meta-analysis.	Zhang, Y	2018	Acupuncture interventions did not mee t the inclusi on criteria
486	A Systematic Review and Meta-analysis of Randomized Clinical Trials About Acu puncture Treatment for Obesity-Related H ormone and Blood Lipids of Female Obe sity	ZHANG Ro ngqiang	2017	No patient i mportant ou tcome
487	Does Laser Acupuncture An Effective Co mplementary therapy for Obesity Manage ment? A Systematic Review of Clinical Trials.	Namazi, N	2017	No meta-an alysis
488	Acupuncture for the Treatment of Obesity	Zhang, R	2017	No detailed

	in Adults: a Systematic Review and Meta-analysis.	Q		information on intervention or outcome
489	The Efficacy and Safety of Acupuncture on Serum Leptin Levels in Obese Patients: A Systematic Review and Meta-analysis.	Park, K S	2017	No patient important outcome
490	Acupuncture and Lifestyle Modification Treatment for Obesity: A Meta-analysis.	Fang, S	2017	Acupuncture combined with other therapies
491	The Effect of Auricular Acupoint Stimulation in Overweight and Obese Adults: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Yeh, Tzu-Lin	2017	Acupuncture combined with other therapies
492	Acupuncture for Obesity: a Systematic Review	Kim, Jiin	2016	Acupuncture combined with other therapies
493	Auricular Acupuncture for Obesity: A Systematic Review and Meta-analysis.	Ruan, Z	2016	Full text unavailable
494	A Meta-analysis on Effectiveness of Acupuncture on Post-Stroke Insomnia	NIE Fenfen	2020	Acupuncture combined with other therapies

Table 1 Characteristics of systematic reviews

ID	First author Year	Country	Therapeutic area	Disease or condition	No. of RCT s	No. of participants	Patient important outcomes	Interventions vs Controls	Quality assessment t tool for original studies included in SR
1	Juan Zhu 2019	China	Periprocedural care	Postoperative pain	35	1819	1.Postoperative resting pain intensity at 24h (VAS)	electro-acupuncture/ auricular) acupuncture vs sham acupuncture	Cochrane risk of bias tool

							2.Intensity of postoperative pain on movement or cough at 24h (VAS)	Electro-acupuncture/ TENS vs sham acupuncture	
2	Kai-Bo Che	China	Periprocedural care	Postoperative ileus after abdominal surgery	15	965	1.Time to first flatus	Electro-acupuncture vs standard of care	Cochrane risk of bias tool
	2019						2.Time to first defecation	Electro-acupuncture vs standard of care	
							3.Time to bowel sound recovery	Electro-acupuncture vs standard of care	
							4.Time to first oral feeding	Electro-acupuncture vs standard of care	
							5.Length of hospital stay	Electro-acupuncture vs	

								standard of care	
3	Lu Jing	China	Periprocedural	Hot flashes after	9	646	1.Hot flashes after breast cancer surgery	1. body needling vs sham acupuncture	Cochrane risk of bias tool
	2018		care	breast can			2. Hot flashes after breast cancer surgery	2. electro-acupuncture vs western medicine	
							3.Hot flashes after breast cancer surgery	3. body needling/ electro- acupuncture vs no intervention	
							4. Hot flashes after breast cancer surgery (follow-up for 3 months)	4. body needling/ electro- acupuncture vs no intervention	
							5. Hot flashes after breast cancer surgery (follow-up for 3 months)	5. body needling/ electro- acupuncture vs sham acupuncture	

4	Yongjun ZHU 2017	China	Periprocedural care	Pain control after total knee arthroplasty	6	529	1.Pain intensity (VAS) over a period of 24h	1. TENS vs sham acupuncture	Jadad score
5	T.-J. Chien 2020	China	Oncology	Breast cancer- related menopause symptoms	13	943	1. Frequency of hot flushes in breast cancer (3 months after treatment)	1. body needling vs sham acupuncture	Cochrane risk of bias tool +
							2. Severity of hot flushes in breast cancer (3 months after treatment)	2. body needling vs standard of care	Jadad score
							3. Menopause symptoms in breast cancer (3 months after treatment)	3. body needling vs sham acupuncture	
							4. Menopause symptoms	4. body needling vs standard of	

							in breast cancer (3 months after treatment)	care	
6	Yihan He	China	Oncology	Cancer pain	17	1111	1.Cancer Pain Intensity	acupuncture vs sham acupuncture	Cochrane risk of bias
	2019						2.Cancer Pain Intensity	acupuncture vs waiting list	tool
7	Lawrence	China	Oncology	Aromatase inhibitor-induced arthralgia in breast cancer	5	181	1.The severity of post treatment pain (worst pain at 3-4weeks)	acupuncture vs sham acupuncture	Cochrane risk of bias
	Chen 2017						2.The severity of post treatment pain (pain severity at 3-4weeks)	acupuncture vs sham acupuncture	tool
							3.The severity of post treatment pain (pain-	acupuncture vs sham acupuncture	

							related interference scores at 3-4week)		
							4.Stiffness at 3-4 weeks	4.acupuncture vs sham acupuncture	
							5.Function at 3-4 weeks	5.acupuncture vs sham acupuncture	
8	Pei Lixia 2019	China	Oncology	The quality of life of breast cancer patients	7	453	1.Quality of life	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Quality of life	2.auricular point sticking vs sham acupuncture	
							3.Quality of life	3.auricular point sticking vs standard of care	
9	Wei-Wei	China	Oncology	Symptom	68	5530	1.Fatigue (BFI)	1.acupuncture vs sham	Cochrane

	Tao 2016			management of				acupuncture	risk of bias
				cancer			2. Fatigue (BPI)	acupuncture vs standard of care	tool
							3.Remission rate of diarrhea	acupuncture vs standard of care	
							4.Hiccups	acupuncture vs standard of care	
							5.Nausea and vomit	acupuncture vs standard of care	
10	Mangmang	China	Neurology	Acute stroke	33	3946	1.Death or dependency at end of follow-up	acupuncture vs sham acupuncture	Cochrane risk of bias
	Xu 2018						2.Death or dependency at end of follow-up	acupuncture vs no intervention	tool

							3.Death or dependency at end of follow-up (≥3 months)	acupuncture vs sham acupuncture	
							4.Death or dependency at end of follow-up (≥3 months)	acupuncture vs no intervention	
11	Shaonan Liu 2019	China	Neurology	Post-stroke shoulder-hand syndrome	40	3264	1.Motor function (upper limb FMA)	electro-acupuncture + rehabilitation vs rehabilitation	Cochrane risk of bias tool
							2.Motor function (upper limb FMA)	2.manual acupuncture + rehabilitation vs rehabilitation	
							3.Pain improvement (VAS)	3.electro-acupuncture + rehabilitation vs rehabilitation	
							4.Pain improvement	4.manual acupuncture +	

							(VAS)	rehabilitation vs rehabilitation	
							5.Activities of daily living	5.manual acupuncture +	
							(MBI)	rehabilitation vs rehabilitation	
							6.Improvement in	6.manual acupuncture +	
							shoulder abduction	rehabilitation vs rehabilitation	
							(ROM)		
12	Wenjuan Fan 2020	China	Neurology	Post-stroke spastic hemiplegia	36	2628	1.Motor function (FMA)	1.manual acupuncture vs rehabilitation	Cochrane risk of bias tool
							2.Motor function (FMA)	2.electro-acupuncture vs rehabilitation	
							3.Spasticity Assessment (ASS)	3.manual acupuncture/ electro- acupuncture + rehabilitation vs rehabilitation	

							4.Quality of daily life (BI)	1.manual acupuncture/electro acupuncture+ rehabilitation vs rehabilitation	
13	Binlong Zhang 2019	China	Neurology	Post-stroke aphasia	28	1747	1.Functional communication	1.acupuncture/scalp acupuncture language rehabilitation vs language rehabilitation	Cochrane risk of bias tool
14	Xue-bin Li 2018	China	Neurology	Post-stroke depression	18	1536	1.Depression(HAMD) (at week 4 after treatment)	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool
15	Xiaolan Lin 2016	China	Neurology	Post-stroke cognitive impairment	19	1275	1.Cognitive function (MMSE)	1.manual acupuncture/electro acupuncture /scalp acupuncture vs standard of care	NA
							2.Cognitive function	2.manual acupuncture/scalp	

							(ADL)	acupuncture vs standard of care	
							3.Cognitive function (MoCA)	manual acupuncture/electro- acupuncture vs standard of care	
16	Lin Guohua 2016	China	Neurology	Neurological function deficit of non-acute stage stroke	6	572	1.Neurological impairment (NDS) (at week 4 after treatment)	needleling vs rehabilitation	Cochrane risk of bias tool + Jadad score
17	Tong Li 2019	China	Neurology	Vascular dementia	17	1283	1.Cognitive function (HDS) (within 28 to 90 days)	body needleling/ electro- acupuncture/scalp acupuncture vs western medicine	Cochrane risk of bias tool
18	Sang-Ho Kim 2019	Korean	Neurology	Insomnia disorder	22	1761	1.Sleep quality (PSQI) (within 14 to 74 days after	1.manual acupuncture vs western medicine	Cochrane risk of bias

							treatment)		tool
19	Alexander Waits 2016	China	Neurology	Insomnia disorder	13	968	1.Sleep quality (PSQI) (within 3 to 4 weeks)	acupressure vs sham acupressure	Cochrane risk of bias tool + Jadad score
20	Xintian Wang 2020	China	Neurology	Sleep quality in hemodialysis patients	7	522	1.Sleep quality (PSQI) (within 4 to 12 weeks after treatment)	acupressure vs sham acupuncture	Jadad score
21	Guangcai Zhang 2016	China	Neurology	Perimenopausal sleep disorder	8	539	1.Sleep quality (PSQI)	1.manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Sleep Quality (PSQI)	2.manual acupuncture vs sham acupuncture	

22	Cuihua Yang 2018	China	Neurology	Senile insomnia	7	539	1.Sleep quality (PSQI)	1.manual acupuncture vs western medicine	Jadad score
23	YingYing Zang 2019	China	Neurology	Depression-related sleep disorders	15	1081	1.Sleep quality (PSQI)	acupuncture vs western medicine	Cochrane risk of bias tool
24	William Gibson 2017	Australia	Neurology	Neurogenic pain	15	724	1.Pain intensity (VAS)	NS vs sham acupuncture	Cochrane risk of bias tool
25	Hyeonseok Noh 2017	Korean	Neurology	Parkinson's disease (PD)	42	2625	1.Assessment of PD symptoms (UPDRS)	acupuncture vs sham acupuncture	Cochrane risk of bias tool
26	Boram Lee 2018	Korean	Neurology	Children with autism spectrum	27	1736	1.Evaluation the core features of ASD (Overall	1.acupuncture vs behavioral and educational interventions	Cochrane risk of bias

				disorder			CARS score)		tool
				(ASD)			2.Evaluation the core features of ASD (Overall CARS score)	acupuncture vs behavioral and educational interventions + music therapy	
27	Mingxiao Yang 2020	China	Neurology	Menstrual migraine	13	826	1.Migraine days per month	manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Migraine days per month (at month 3 after treatment)	manual acupuncture vs sham acupuncture	
							3.Mean headache intensity (VAS)	manual acupuncture/electroacupuncture vs western medicine	
28	Jia Xu	China	Neurology	Migraine without	15	1361	1.Frequency of migraine	acupuncture/manual	Cochrane

	2018			aura				acupuncture vs sham acupuncture	risk of bias tool
							2.Frequency of migraine	acupuncture/manual acupuncture vs western medicine	
							3.Pain intensity (VAS)	acupuncture/acupuncture vs sham acupuncture	
							4.Pain intensity (VAS)	acupuncture/acupuncture vs western medicine	
29	Yin Jiang 2018	China	Neurology	Migraine quality of life	62	4947	1.Migraine quality of life (MSQ) (≤1 month after treatment, role function- restrictive)	acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Migraine quality of life	acupuncture vs sham	

							(MSQ) (≥6 months after treatment, role function-restrictive)	acupuncture	
							3.Migraine quality of life (MSQ) (≤1month after treatment, role function-preventive)	acupuncture vs sham acupuncture	
							4.Migraine quality of life (MSQ) (≥6 months after treatment, role function-preventive)	acupuncture vs sham acupuncture	
							5.Migraine quality of life (MSQ) (≤1month after	acupuncture vs sham acupuncture	

							treatment, emotional function)		
							6.Migraine quality of life (MSQ) (≥6 months after treatment, emotional function)	acupuncture vs sham acupuncture	
30	Klaus Linde 2016	German y	Neurology	Tension headache	12	2349	1.Response after treatment (at least 50% reduction in headache frequency) (within 3 to 4 months after randomization)	acupuncture vs sham acupuncture	Cochrane risk of bias tool
31	Hwan Kim	Korean	Neurology	Mild cognitive	5	257	1.Cognitive function	1.electro-acupuncture vs western	Cochrane

	2019			impairment (MCI)			(MMSE)	medicine	risk of bias
							2.Cognitive function	2. sham acupuncture vs western	tool
							(MoCA)	medicine	
32	Gwang-Ho	Korean	Neurology	Carpal tunnel	12	869	1.Pain (VAS)	3. sham acupuncture vs sham	Cochrane
	Choi			syndrome (CTS)				acupuncture	risk of bias
	2019						2.Pain (VAS) (at week 4	2. sham acupuncture vs western	tool
							after randomization)	medicine	
							3.Pain (VAS) (at week 5	3. sham acupuncture vs standard of	
							after randomization)	care	
							4.Key pinch-pinch	4. sham acupuncture vs sham	
							strength (at a 3-month	acupuncture	
							follow-up)		
							5.Tip pinch-pinch strength	5. sham acupuncture vs sham	

							(at a 3-month follow-up)	acupuncture	
							6.Improvement in functional status and/or health-related quality of life parameter (at month 3 after treatment)	acupuncture vs sham acupuncture	
33	Xinqiang Ni 2017	China	Neurology	Tic disorder	29	2325	1.Severity of tics (YGTSS)	1.electro-acupuncture/scalp acupuncture vs western medicine	Jadad score
34	Ping Wu 2017	China	Neurology	Prosopalgia	8	477	1.Recurrence rate	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool
35	Zhuanzhua n Hou	China	Neurology	Cervical vertigo	10	914	1.Improvement rate of clinical symptoms-	1.acupuncture vs western medicine	Cochrane risk of bias

	2017						headache (at day 20 after treatment)		tool
							2.Improvement rate of clinical symptoms-vertigo (at day 20 after treatment)	acupuncture vs western medicine	
36	Eric Manheime, Ke Cheng 2018	USA	Connective tissue diseases	Hip osteoarthritis	6	413	1.Pain (WOMAC/VAS) (short-term-2 weeks after the end of treatment)	manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS)	electro-acupuncture vs western medicine	
							3.Function	manual acupuncture vs sham acupuncture	
							4.Function (Harris)	4.electro-acupuncture vs western	

							function score)	medicine	
							5.Quality of life	manual acupuncture vs sham acupuncture	
37	Chen Rilan 2020	China	Connective tissue diseases	Knee osteoarthritis	11	727	1.Severity of knee (ISOA)	electro-acupuncture vs western medicine	Cochrane risk of bias tool + Jadad score
38	Qinhong Zhang 2017	China	Connective tissue diseases	Chronic knee pain	19	2149	1.Pain (WOMAC) 2.Pain (WOMAC) 3.Pain (WOMAC)	body needling vs no intervention body needling vs standard care electro-acupuncture vs western medicine	Cochrane risk of bias tool

39	Qi-ling Yuan 2016	China	Connective tissue diseases	Musculoskeletal pain	6	6382	1.Neck pain after the end of an intervention period (≤1 week after treatment)	acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Shoulder pain after the end of an intervention period (≤1 week after treatment)	acupuncture vs sham acupuncture	
							3.Myofascial pain after the end of an intervention period (≤1 week after treatment)	acupuncture vs sham acupuncture	
							4.Arm pain after the end of an intervention period	acupuncture vs sham acupuncture	

							(≤1 week after treatment)		
40	Kim Jiwon	Korean	Connective tissue diseases	Fibromyalgia syndrome	10	690	1.Intensity of Pain	manual acupuncture/electro- acupuncture vs sham acupuncture	Cochrane risk of bias tool
	2019						2.Sleep Quality (PSQI)	manual acupuncture/electro- acupuncture vs sham acupuncture	
							3.Fatigue	manual acupuncture/electro- acupuncture vs sham acupuncture	
41	Zhou	China	Connective tissue diseases	Primary osteoporosis	17	1369	1.Pain (VAS)	body needling/ electro- acupuncture vs western medicine	Jadad score
	Longyun								
	2016								

42	Wang Kaili 2019	China	Connective tissue diseases	Postmenopausal osteoporosis	10	710	1.Reduction in pain degree (VAS)	1. acupuncture vs western medicine	Cochrane risk of bias tool
43	Mei Ji 2015	China	Connective tissue diseases	Sciatica	12	1842	1.Pain Intensity (VAS)	1. acupuncture/electro- acupuncture vs western medicine	Cochrane risk of bias tool
44	Yun-xia Li 2018	China	Connective tissue diseases	Non-specific low back pain	26	7618	1.Pain (VAS)	1.manual acupuncture vs no intervention	Cochrane risk of bias tool
							2.Pain (VAS) in the immediate term (≤1 week after treatment)	2.manual acupuncture vs sham acupuncture	
							3.Pain (VAS) in the short term (within 1 week to 3	3.manual acupuncture vs sham acupuncture	

							months after treatment)		
							4.Pain (VAS) in the intermediate term (within 3 to 12 months after treatment)	acupuncture vs sham acupuncture	
45	Jiaojun He 2019	China	Ear, nose, and throat disorders	Meniere's disease	12	903	1.Severity of Dizziness Handicap (DHI)	acupuncture vs western medicine	Cochrane risk of bias tool
46	Jinzhang 2017	China	Ear, nose, and throat disorders	Allergic rhinitis	11	1805	1.Improvement of nasal symptoms (TNSS) 2.Improvement of nasal symptoms (TNSS)	acupuncture vs sham acupuncture 2. acupuncture vs western medicine	Jadad score
47	Lizhong Yu	China	Eye disorders	Dry eye syndrome	11	852	1.Symptom scores	acupuncture/electro-	Jadad

	2019							acupuncture vs western medicine	score
48	Kai Zhang	China	Gastrointestin	Acute pancreatitis	12	841	1.Mortality during the treatment	acupuncture+ routine treatment vs routine treatment	Cochrane risk of bias tool
	2019		al disorders				2.Rate of transfer to surgery or ICU	acupuncture+ routine treatment vs routine treatment	
							3.Changes in chronic health evaluation (APACHE II)	acupuncture+ routine treatment vs routine treatment	
49	Haizhen Zheng	China	Gastrointestin	Irritable bowel syndrome (IBS)	41	3440	1.IBS symptom scores	acupuncture vs sham acupuncture	Cochrane risk of bias tool
	2019		al disorders				2.Quality of life	acupuncture vs sham acupuncture	
50	Lu Wang	China	Gastrointestin	Functional	28	3525	1.Complete spontaneous	acupuncture vs sham	Cochrane

	2020		al disorders	constipation			bowel movement	acupuncture	risk of bias
							2.Symptoms improvement	acupuncture vs sham	tool
							(CSS)	acupuncture	
							3.Patient assessment of	acupuncture vs sham	
							constipation quality of Life	acupuncture	
							questionnaire		
51	Xin Jin	China	Gastrointestin	Functional	20	1310	1.Quality of life (NDI-	acupuncture/electro-	Cochrane
	2018		al disorders	dyspepsia			QOLS)	acupuncture	risk of bias
								vs western medicine	tool +
							2.Symptom scores	acupuncture/electro-	Jadad
								acupuncture	score
								vs western medicine	
							3.Symptom scores	3.acupuncture vs western	

								medicine	
52	Yao Tian 2017	China	Gastrointestin al disorders	Peptic ulcer	16	1570	1.The healing rate of ulcer area	acupuncture vs western medicine	Cochrane risk of bias
							2.The recurrence rate	acupuncture vs western medicine	tool
53	Xuhan Wu 2019	China	Gastrointestin al disorders	Gastroesophageal reflux disease	26	2155	1.Symptom scores	acupuncture/electro- acupuncture vs western medicine	Cochrane risk of bias tool
54	Kun Hyung Kim 2018	Korean	Gastrointestin al disorders	Symptomatic gastroparesis	32	2601	1.Symptoms improvement (within 4 to 12 weeks after treatment)	acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Symptoms improvement (within 4 to 12 weeks after	acupuncture vs western medicine	

							treatment)		
55	Xindong Qin 2020	China	Genitourinary disorders	Urinary infection	5	341	1.Composite cure rate	acupuncture vs western medicine	Cochrane risk of bias tool
							2.Recurrence	acupuncture vs no intervention	
							3.Recurrence	acupuncture vs sham acupuncture	
56	JunjunLi 2020	China	Genitourinary disorders	Chronic prostatitis	11	748	1.Symptoms improvement (NIH-CPSI total score)	acupuncture /electro- acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Improvement of pain in chronic prostatitis (NIH- CPSI pain domain sub- score)	acupuncture /electro- acupuncture vs sham acupuncture	

							3.Improvement of voiding in chronic prostatitis (NIH- CPSI voiding domain sub- score)	acupuncture /electro- acupuncture vs sham acupuncture	
							4.Quality of life (NIH-CPSI quality of life domain sub- score)	acupuncture /electro- acupuncture vs sham acupuncture	
							5.Symptoms improvement (IPSS)	acupuncture /electro- acupuncture vs sham acupuncture	
							6.Symptoms improvement (NIH-CPSI total score)	acupuncture /electro- acupuncture vs western medicine	
57	Wei Zhang	China	Genitourinary	Benign prostatic	8	661	1.Symptoms improvement	acupuncture vs sham	

	2017		disorders	hyperplasia			(IPSS) (short-term) (within 4 to 6 weeks after treatment)	acupuncture	Cochrane risk of bias tool
							2.Symptoms improvement (IPSS) (medium-term) (within 12 to 18 weeks after treatment)	acupuncture vs sham acupuncture	
58	Kun Hyung Kim 2016	China	Genitourinary disorders	Chronic kidney disease	24	1787	1.Depression (BDI)	acupressure vs routine care	Cochrane
							2.Depression (BDI)	TENS vs routine care	risk of bias
							3.Sleep quality	acupressure vs routine care	tool
							4.Sleep quality	TENS vs routine care	
							5.Sleep quality	acupressure vs western medicine	

							6.Fatigue	6.acupressure vs routine care	
59	Charlotte Southern 2016	UK	Mental health	Alcohol use disorder	15	1378	1.Alcohol craving	body needling/ electro- acupuncture/ear (auricular) acupuncture vs sham acupuncture	Cochrane risk of bias tool + Jadad score
							2.Alcohol withdrawal symptoms	electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	
							3.Alcohol withdrawal symptoms	electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	
60	Zhihan Chen 2018	China	Mental health	Opioid use disorder	9	1063	1.Number of positive urine samples for opioids	1.ea (auricular) acupuncture vs sham acupuncture	Cochrane risk of bias

							2.Craving for opioid	2.electro-acupuncture vs no intervention	tool
							3.Craving for opioid	3.electro-acupuncture/ear (cervical) acupuncture/TENS vs sham acupuncture	
							4.Craving for opioid	4.manual acupuncture vs western medicine	
							5.Depression	5.electro-acupuncture vs no intervention	
							6.Depression	6.electro-acupuncture vs sham acupuncture	
61	Jian-Hua Wang 2019	China	Mental health	Smoking cessation	24	3984	1.Abstinence rate (short-term) (≤4 weeks after	1.head and eye acupuncture vs no intervention	Cochrane risk of bias

							treatment)		tool
							2.Abstinence rate (long-term) (>6 months after treatment)	head and eye acupuncture vs no intervention	
							3.Abstinence rate (short-term) (≤4 weeks)	head and eye acupuncture vs nicotine replacement therapy	
							4.Abstinence rate (long-term) (>6 months)	head and eye acupuncture vs nicotine replacement therapy	
							5.Nicotine withdrawal symptoms (short-term) (≤4 weeks)	body needling/ear acupuncture vs sham acupuncture	
							6.Nicotine withdrawal symptoms (short-term) (≤4 weeks)	body needling vs nicotine replacement therapy	

							4 weeks)		
62	Caroline A Smith 2018	Australia	Mental health	Depression	64	7104	1.Severity of depression at the end of treatment	1.manual acupuncture vs no intervention	Cochrane risk of bias tool
							2.Quality of life (emotional) during treatment	2.manual acupuncture vs sham acupuncture	
							3.Severity of depression at the end of treatment	3.manual acupuncture vs western medicine	
63	Wei Li 2019	China	Mental health	Postpartum depression	8	517	1.Depression (HAMD)	1.manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Depression (HAMD)	2.manual acupuncture vs psychological therapy	
							3.Overall effect (EPDS)	3.manual acupuncture vs sham	

								acupuncture	
							4. Overall effect (EPDS)	acupuncture + psychological therapy vs western medicine	
64	Sean Grant	USA	Mental health	Posttraumatic stress disorder (PTSD)	7	709	1.PTSD symptoms (post-intervention)	2. Acupuncture vs western medicine	Cochrane risk of bias tool
	2018						2.PTSD symptoms (follow-up for 1 to 6 months)	2. Acupuncture vs western medicine	
							3.Physical health-related quality of life (follow-up for 4 to 12 weeks)	3. Acupuncture vs standard of care	
							4.Mental health-related quality of life (follow-up	4. Acupuncture vs standard of care	

							for 4 to 12 weeks)		
							5.Functional status (post-intervention)	body needling vs no intervention	
							6.Functional status (follow-up for 3 months)	body needling vs no intervention	
65	Ning Sun 2020	China	Mental health	Chronic pain emotional disorder	12	2450	1.Emotional health (MSQ) -immediate effect	3.manual acupuncture /electro- acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Emotional health (SF36/SF12)-immediate effect	3.manual acupuncture /electro- acupuncture vs sham acupuncture	
							3.Emotional health (MSQ) -persistent	3.manual acupuncture /electro- acupuncture vs sham	

							effects (follow up for 3 months)	acupuncture	
							4.Emotional health (SF36/SF12)-persistent effects (follow up for 3 months)	acupuncture /electro-acupuncture vs sham acupuncture	
66	Qing Zhang 2018	China	Mental health	Chronic fatigue syndrome (CFS)	16	1346	1.Mental fatigue score of CFS	manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Physical fatigue score of CFS	manual acupuncture vs sham acupuncture	
67	Yu-Mei Zhong 2019	China	Nutrition and metabolic disorders	Simple obesity	9	473	1.The reduction of body mass index (BMI)	body needling /electro-acupuncture/ear acupuncture vs no intervention	Cochrane risk of bias tool

68	Eun-Young Nam 2018	Korean	Obstetrics, gynecology and women's health	Menopausal hot flashes	9	1324	1.Hot flash frequency (≤12 weeks)	6.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Hot flash frequency (>12 weeks)	6.manual acupuncture vs sham acupuncture	
							3.Hot flash frequency (4 weeks after treatment started)	6.manual acupuncture vs no intervention	
							3. Hot flash frequency (≥12 weeks after treatment started)	4. Manual acupuncture vs no intervention	
							5.Hot flash severity (VAS)(≤12 weeks)	6.manual acupuncture vs sham acupuncture	
							6.Hot flash severity	6.manual acupuncture vs sham	

							(VAS)(>12 weeks)	acupuncture	
69	Weihan Li 2017	China	Obstetrics, gynecology and women's health	Quality of life in menopausal women	6	419	1.Quality of life in menopausal women (MRS)-at end of treatment	acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Menopause rating scale (MRS) -at the follow-up period (within 1 to 3 months after treatment)	acupuncture vs sham acupuncture	
70	Caroline A Smith 2020	Australia	Obstetrics, gynecology and women's health	Pain during labour	28	3960	1.Pain intensity (VAS)	manual acupuncture/ electro- acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain intensity (VAS)	2.manual acupuncture/ electro- acupuncture vs standard of care	

							3.Pain intensity (VAS)	3.electro-acupuncture vs no intervention	
							4.Pain intensity (VAS)	4.acupressure vs sham acupuncture	
							5.Pain intensity (VAS)	5.acupressure vs standard of care	
71	Ying Tang 2017	China	Obstetrics, gynecology and women's health	Postpartum lactating	9	1187	1.The effective rate of lactation within 24 hours after delivery	1.acupressure vs standard of care	Cochrane risk of bias tool
							2.The effective rate of lactation within 48 hours after delivery	2.acupressure vs standard of care	
							3. Adequacy ratio of	3.acupressure vs standard of	

							lactation within 24 hours after delivery	care	
							4. Adequacy ratio of lactation within 48 hours after delivery	suppression vs standard of care	
							5. Adequacy ratio of lactation within 72 hours after delivery	suppression vs standard of care	
72	Yanjuan Song 2019	China	Obstetrics, gynecology and women's health	Chronic pelvic pain syndrome	12	1027	1.Symptoms improvement (NIH-CPSI)	1.body needling/electro- acupuncture vs western medicine	Cochrane risk of bias tool
73	Caroline A	Australia	Obstetrics,	Dysmenorrhea	46	4912	1.Improvement in	1. body acupuncture vs sham	Cochrane

	Smith		gynecology				menstrual symptoms at 3	acupuncture	risk of bias tool
	2016		and women's				months after treatment		
			health				2.Improvement in	Additional body acupuncture vs	
							menstrual symptoms at	sham acupuncture	
							12 months after treatment		
							3.Quality of life: physical	Manual acupuncture vs sham	
							health	acupuncture	
							4.Quality of life: mental	manual acupuncture vs sham	
							health	acupuncture	
							5.Pain relief	body needling/manual	
								acupuncture vs western medicine	
							6.Menstrual symptom	body needling/manual	
							score	acupuncture vs western medicine	

74	Xiaojuan Liu 2020	China	Pregnancy or intended pregnancy	Luteinized unruptured follicle syndrome	10	715	1.Ovulation rate	1.acupuncture vs western medicine	Cochrane risk of bias
							2.Pregnancy rate	2.acupuncture vs western medicine	tool
75	Liu Yun 2019	China	Pregnancy or intended pregnancy	Infertility	22	2591	1.Pregnancy rate	1.acupuncture and auricular point stimulation vs western medicine	Cochrane risk of bias tool
76	Zhengyun Xie 2019	China	Pregnancy or intended pregnancy	In vitro Fertilization- embryo transfer	27	6116	1.Clinical pregnancy rate	1.manual acupuncture /electro- acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Live birth rate	2.manual acupuncture /electro- acupuncture vs sham acupuncture	

							3.Miscarriage rate	manual acupuncture /electro- acupuncture vs no intervention	
							4.Clinical pregnancy rate	manual acupuncture electro- acupuncture vs no intervention	
							5.Live birth rate	manual acupuncture/electro- acupuncture vs no intervention	
77	Rupsa C. Boelig 2018	USA	Pregnancy or intended pregnancy	Hyperemesis gravidarum	1	81	1.Reduction of nausea	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Reduction in vomiting	2.acupuncture vs western medicine	
78	Chien, T. J. 2017	China	Oncology	Breast cancer- related menopause	8	504	1. The frequency of hot flush	acupuncture vs sham acupuncture	Jadad scale

				symptoms			2. The severity of hot flush (VAS)	acupuncture/electro- acupuncture vs sham acupuncture	
							3. Menopausal symptoms (Kupperman Index)	acupuncture/electro- acupuncture vs sham acupuncture	
79	Chiu, H. Y. 2016	China	Oncology	Breast cancer- related menopause symptoms	7	342	1.The hot-flash frequency (short-term effects)	acupuncture/electro- acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.The hot-flash severity (short-term effects)	acupuncture vs sham acupuncture	
							3.The menopause-related Symptoms	3. electro -acupuncture vs sham acupuncture	

							(short-term effects)		
							4. The hot-flash frequency (intermediate-term effects)	acupuncture/electro- acupuncture vs sham acupuncture	
							5. The hot-flash severity (intermediate-term effects)	acupuncture vs sham acupuncture	
							6. The menopause-related symptoms (intermediate-term effects)	acupuncture/ electro- acupuncture vs sham acupuncture	
80	Chien, T. J 2015	China	Oncology	Aromatase inhibitor-induced	5	207	1. Joint pain (BPI-SF)	acupuncture/electro- acupuncture vs sham	Jadad scale

				arthralgia in breast				acupuncture	
				cancer			2.Joint stiffness (WOMAC)	acupuncture/electro- acupuncture vs sham acupuncture	
81	WU Junying 2018	China	Neurology	Post-stroke shoulder-hand syndrome	14	1043	1.The shoulder-hand syndrome assessment score (SHSS)	acupuncture vs rehabilitation	Jadad scale
							2.The upper limb motor function (FMA)	acupuncture vs rehabilitation	
							3.Pain (VAS)	acupuncture vs rehabilitation	
82	LIU Kai	China	Neurology	Post-stroke shoulder-hand syndrome	7	401	2.The upper limb motor function (FMA)	acupuncture vs rehabilitation	Cochrane risk of bias
							2.Activities of daily living	2. acupuncture vs rehabilitation	tool

83	QUE Fangxu	China	Neurology	Post-stroke depression	18	1813	1. Depression (HAMD-17)	1. acupuncture vs western medicine	Cochrane risk of bias tool
							2. Depression (HAMD-24)	2. acupuncture vs western medicine	
84	Qian Wang 2016	China	Neurology	Post-stroke depression	27	1729	1. Depression (HAMD)	1. acupuncture vs western medicine	Cochrane risk of bias tool
85	Jie Zhan 2016	China	Neurology	Post-stroke depression	14	1180	1. Depression (HAMD)	1. electro-acupuncture vs western medicine	Cochrane risk of bias tool
86	Chengyong Liu 2020	China	Neurology	Insomnia disorder	13	1061	1.Sleep quality (PSQI)	1. acupuncture vs sham acupuncture	Cochrane risk of bias tool

87	Longcong Dong 2019	China	Neurology	Insomnia disorder	11	792	1.Sleep quality (PSQI)	1.acupuncture vs western medicine	Cochrane risk of bias tool
88	Waits, A 2018	China	Neurology	Insomnia disorder	13	968	1.Sleep quality (PSQI)	acupressure vs sham acupressure	Cochrane risk of bias tool
89	Lan Y 2015	China	Neurology	Insomnia disorder	15	1429	1.Sleep quality (PSQI)	auricular acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Sleep quality (PSQI)	2.auricular acupuncture vs western medicine	
90	Wenfang Song 2019	China	Neurology	Insomnia disorder	7	474	1.Sleep quality (PSQI)	1.acupuncture vs standard of care	Cochrane risk of bias tool

91	Cui Qiuyue	China	Neurology	Migraine	15	1288	1.Pain (immediate-term)	acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (short-term)	acupuncture vs sham acupuncture	
							3.Pain (long-term)	acupuncture vs sham acupuncture	
92	Linde K	German y	Neurology	Migraine	22	4985	1.Headache frequency (after treatment)	1.acupuncture vs no acupuncture	Cochrane risk of bias tool
							2.Headache frequency (after treatment)	2.acupuncture vs sham acupuncture	
							3.Headache frequency (after treatment)	3.acupuncture vs western medicine	
							4.Headache frequency	4.acupuncture vs no intervention	

							(follow-up for 3 weeks to 12 months)		
							5.Headache frequency (follow-up for 3 weeks to 12 months)	acupuncture vs sham acupuncture	
							6.Headache frequency (follow-up for 3 weeks to 12 months)	acupuncture vs western medicine	
93	Pu Shengxiang 2016	China	Neurology	Migraine acute Attack	5	618	1.Pain (VAS)- 2 hours after treatment 2.Pain (VAS)- 4 hours after treatment	acupuncture vs sham acupuncture acupuncture vs sham acupuncture	Cochrane risk of bias tool
94	Jinna Yu	China	Neurology	Tourette syndrome	7	564	1.Severity of tics	1.acupuncture vs western	Cochrane

	2016						(YGTSS)	medicine	risk of bias tool
95	Lien-Chen Wu 2018	China	Connective tissue diseases	Chronic back pain	12	700	1.Pain (VAS/BPS) 2.Pain (VAS/BPS)	NS vs sham acupuncture NS vs sham acupuncture	Cochrane risk of bias tool
96	Feifan Liang 2016	China	Connective tissue diseases	Non-specific low back pain	10	751	1.Function improvement (ODI) 2.Pain (VAS) 3.Function improvement (RMDQ)	acupuncture vs western medicine acupuncture vs sham acupuncture acupuncture vs sham acupuncture	Cochrane risk of bias tool
97	Zhiqing Liu 2017	China	Ear, nose, and throat	Allergic rhinitis	10	552	1.Symptom scores	1.acupuncture vs western medicine	Cochrane risk of bias

			disorders						tool
98	Zhang Jin 2017	China	Ear, nose, and throat disorders	Allergic rhinitis	11	1805	1. Reducing of nasal symptoms (TNSS)	1. manual acupuncture vs sham acupuncture	Jadad score
							2. Reducing of nasal symptoms (TNSS)	2. manual acupuncture vs western medicine	
99	Lei Yang 2015	China	Eye disorders	Dry eye syndrome	7	383	1. Tear break-up time	1. manual acupuncture vs western medicine	Cochrane risk of bias
							2. Severity of dry eyes (Schirmer I test)	2. manual acupuncture vs western medicine	tool
100	Jiang Hui- ru 2017	China	Eye disorders	Dry eye syndrome	8	847	1. Tear break-up time	1. manual acupuncture vs western medicine	Cochrane risk of bias
							2. Severity of dry eyes	2. manual acupuncture vs	tool

							(Schirmer I test)	western medicine	
10	Zhang	China	Gastrointestin	Functional	10	1162	1.Weekly frequency of	1. manual acupuncture vs western	Jadad
1	Jieying		al disorders	constipation			defecation	medicine	score
	2016						2.Symptoms improvement	2. manual acupuncture vs western	
							(CCS)	medicine	
10	Peng Jieru	China	Gastrointestin	Functional	7	1044	1.Postprandial fullness	1. manual acupuncture vs western	Cochrane
2	2018		al disorders	dyspepsia				medicine	risk of bias
							2.Early satiety	2. manual acupuncture vs western	tool
								medicine	
							3.Epigastric pain	3. manual acupuncture vs western	
								medicine	
							4.Epigastric burning	4. manual acupuncture vs western	
								medicine	

10 3	Shang- Chih Chang 2016	China	Genitourinary disorders	Chronic prostatitis	7	502	1.Symptoms improvement (NIH-CPSI)	1. manual acupuncture/ electro- acupuncture vs sham acupuncture	Jadad score
							2.Symptoms improvement (NIH-CPSI)	2. electro-acupuncture vs western medicine	
							3. Symptoms improvement (IPSS)	3. manual acupuncture/ electro- acupuncture vs sham acupuncture	
10 4	Qin.Z 2016	China	Genitourinary disorders	Chronic prostatitis	7	471	1.Symptoms improvement (NIH-CPSI total score)	1. acupuncture vs sham acupuncture	Cochrane risk of bias tool
								2. acupuncture vs western medicine	
							2.Improvement of pain in	3. acupuncture vs sham	

							chronic prostatitis (NIH-CPSI pain domain subscore)	acupuncture	
								acupuncture vs western medicine	
							3.Improvement of voiding in chronic prostatitis (NIH-CPSI voiding domain subscore)	acupuncture vs sham acupuncture	
								acupuncture vs western medicine	
							4.Quality of life (NIH-CPSI quality of life domain subscore)	acupuncture vs sham acupuncture	
								acupuncture vs western medicine	

							5.Symptoms improvement (IPSS)	acupuncture vs sham acupuncture	
10	Liu.B. P.	China	Genitourinary disorders	Chronic prostatitis	10	754	1.Symptoms improvement (NIH-CPSI total score)	acupuncture vs sham acupuncture	Cochrane risk of bias tool
5	2016							acupuncture vs western medicine	
							2.Response rate	acupuncture vs sham acupuncture	
								acupuncture vs western medicine	
							3.Improvement of pain in chronic prostatitis (NIH- CPSI pain domain	acupuncture vs sham acupuncture	
								acupuncture vs western	

							subscore)	medicine	
							4.Improvement of voiding	acupuncture vs sham	
							in chronic prostatitis (NIH-	acupuncture	
							CPSI voiding domain	acupuncture vs western	
							subscore)	medicine	
							5.Quality of life (NIH-CPSI	acupuncture vs sham	
							quality of life domain	acupuncture	
							subscore)	acupuncture vs western	
								medicine	
10	Armour. M	Australia	Mental health	Depression	29	2268	1.The severity of	acupuncture vs sham	Cochrane
6	2019						depression	acupuncture	risk of bias
									tool
10	ZHANG	China	Nutrition and	Simple obesity	6	236	1.Weight	acupuncture vs sham	Jadad

7	Rong-qiang		metabolic					acupuncture	score
	2017		disorders				2.BMI	acupuncture vs sham acupuncture	
10	CHEN Xia	China	Nutrition and	Simple obesity	21	1929	1.Weight	acupuncture vs no intervention acupuncture vs sham acupuncture	Cochrane
8	2016		metabolic disorders					3. acupuncture vs western medicine	risk of bias tool
							2.BMI	acupuncture vs no intervention acupuncture vs sham acupuncture	
								3. acupuncture vs western medicine	

10	Xue	China	Nutrition and	Simple obesity	17	1246	1.Weight	1. articular pressure vs sham acupuncture	Cochrane
9	Dongqun		metabolic						risk of bias
	2015		disorders				2.BMI	articular pressure vs sham acupuncture	tool
11	Jianrong	China	Nutrition and	Obesity	33	2503	1.Weight	acupuncture vs no intervention	Cochrane
0	Chen 2018		metabolic					acupuncture vs no intervention	risk of bias
			disorders						tool
11	Junpeng	China	Nutrition and	Obesity	12	1151	1.BMI	acupuncture vs sham acupuncture	Cochrane
1	Yao		metabolic						risk of bias
	2019		disorders				2.Waist circumference	acupuncture vs sham acupuncture	tool
11	Zhang Lin	China	Nutrition and	Obesity	23	1836	1.BMI	acupuncture vs sham acupuncture	Cochrane
2	2015		metabolic						risk of bias

			disorders				2.Weight	acupuncture vs sham acupuncture	tool
11	Kepei	China	Nutrition and	Obesity	21	1389	1.BMI	acupuncture vs no intervention	Cochrane
3	Zhang		metabolic						risk of bias
	2018		disorders						tool
11	Wu Qian	China	Obstetrics,	Quality of life in	10	801	1.Hot flashes frequency	acupuncture vs sham acupuncture	Cochrane
4	2016		gynecology	menopausal					risk of bias
			and women's	women			2.Hot flashes severity	acupuncture vs sham acupuncture	tool
			health						
11	Raana Haj	China	Obstetrics,	Pain during labour	10	1271	1.Labour pain	acupressure vs sham acupuncture	Cochrane
5	Najafi 2020		gynecology						risk of bias
			and women's					2.acupressure vs no intervention	tool
			health						

11	Najafi,F.	Iran	Obstetrics, gynecology and women's health	Pain during labour	16	1652	1.The severity of pain after the intervention	acupressure vs sham acupuncture	Quality criteria were not included in the analysis
11	Lixia,Lin	China	Obstetrics, gynecology and women's health	Dysmenorrhea	23	1739	1. Pain improvement (VAS)	1.acupuncture vs western medicine	Cochrane risk of bias tool
7	2020						2. Symptoms improvement (Dysmenorrhea symptom score)	2.acupuncture vs western medicine	
11	Ge,Li	China	Obstetrics,	Dysmenorrhea	56	4600	1.Pain improvement	1.acupuncture vs	Cochrane

8	2017		gynecology and women's health				(VAS)	western medicine	risk of bias tool
11	Ranran Gao	China	Pregnancy or intended pregnancy	Infertility	9	1441	1.Pregnancy	1.acupuncture vs western medicine	Cochrane risk of bias tool
9	2019						2.Ovulation	2.acupuncture vs western medicine	
							3.Pregnancy loss	3.acupuncture vs western medicine	
12	Boelig,R.C	USA	Pregnancy or intended pregnancy	Hyperemesis gravidarum	25	2052	1.Reduction or cessation in nausea	1.acupuncture vs western medicine	Cochrane risk of bias tool
0	2016						2.Reduction or cessation in vomiting	2.acupuncture vs western medicine	

Note: **VAS**, Visual Analog Scale. **TENS**, Transcutaneous Electrical Nerve Stimulation. **BFI**, Brief Fatigue Inventory. **BPI**, Brief Pain Inventory. **FMA**, Fugl-Meyer Assessment
MBI, Modified Barthel Index. **ROM**, Range of Motion. **FMA**, Fugl-Myer Assessment. **ASS**, Ashworth Scale for Spasticity. **MBI**, Modified Barthel Index. **HAMD**, Hamilton Depression
Scale. **MMSE**, Mini-mental State Examination. **ADL**, Activities of Daily Living. **MoCA**, Montreal Cognitive Assessment. **NDS**, Neurological Deficit Scale. **HDS**, Hastgawa
Dementia Scale. **PSQI**, Pittsburgh Sleep Quality Index. **UPDRS**, Unified PD Rating Scale. **CARS**, Childhood Autism Rating Scale. **MSQ**, Migraine-Specific Quality of Life
Questionnaire. **YGTSS**, Yale Global Tic Severity Scale. **ISOA**, Index of Severity for Osteoarthritis. **WOMAC**, Western Ontario and McMaster Universities Arthritis Index.
DHI, Dizziness Handicap Inventory. **TNSS**, Total Nasal Symptom Score. **ICU**, Intensive Care Unit. **APACHE**, Acute Physiology, Age, Chronic Health Evaluation. **CSS**,
Constipation symptoms scores. **NDI-QOLS**, Nipping Index of Quality of Life. **NIH-CPSI**, National Institute of Health Chronic Prostatitis Symptom Index. **IPSS**, International
Prostate Symptom Score. **BDI**, Beck Depression Inventory. **EPDS**, Edinburgh Postnatal Depression Scale. **SF36/SF12**, the MOS 36-item short-form health survey/the MOS
12-item short-form health survey. **BMI**, Body Mass Index. **MRS**, Menopause Rating Scale. **BPI-SF**, Brief Pain Inventory-short Form. **BPS**, Back Performance Scale. **ODI**,
Oswestry Disability Index. **RMDQ**, Roland-Morris Disability Questionnaire. **CCS**, Cleveland constipation Score.

Appendix 3 Meta-analysis with updated RCTs of selected SR

Meta-analysis with updated RCTs [#]		
Title	Outcome	No. of updated RCTs
Acupuncture using pattern-identification for the treatment of insomnia disorder: a systematic review and meta-analysis of randomized controlled trials	The Pittsburgh Sleep Quality Index (PSQI) score	3
Acupuncture for migraine without aura: a systematic review and meta-analysis	Pain score (VAS)	1
Acupuncture for dysmenorrhea (Review)	Pain score (VAS)	1

[#] RCTs published after the search date of the selected SRs.

Oncology:

Acupuncture for Menopause related symptoms in breast cancer patients:

<http://www.epistemonikos.org/matrixes/6052b7e77aac84d2a4bc132>

Acupuncture for Aromatase inhibitor–related arthralgia in breast cancer:

<http://www.epistemonikos.org/matrixes/605809987aac84d2a4d29c2>

Acupuncture for Breast cancer:

<http://www.epistemonikos.org/matrixes/606c97307aac82511263c9b>

Symptom Management and quality of life of cancer:

<http://www.epistemonikos.org/matrixes/60754c217aac868e925b7d1>

Acupuncture for Cancer pain:

<http://www.epistemonikos.org/matrixes/6076698a6ec0d67000198ba9>

Neurology:

Acupuncture for Post-stroke depression:

<http://www.epistemonikos.org/matrixes/6065516b7aac81f38258e79>

Acupuncture for Post-stroke shoulder-hand syndrome:

<http://www.epistemonikos.org/matrixes/606551f87db23a2fb7b02ff0>

Acupuncture for Migraine:

<http://www.epistemonikos.org/matrixes/60654f7a7db23a2fb8b0a125>

Acupuncture for Sleep quality in hemodialysis patients:

<http://www.epistemonikos.org/matrixes/606556a47db23a2fb6afee4b>

Acupuncture for Tic disorder:

<http://www.epistemonikos.org/matrixes/606557ee7db23a2fb8b0a26a>

Acupuncture for Sleep quality:

<http://www.epistemonikos.org/matrixes/60770b777aac82c4a27e6f7>

Acupuncture for Acute stroke:

<http://www.epistemonikos.org/matrixes/607547867aac84ffe263ce3>

Acupuncture for Carpal tunnel syndrome:

<https://www.epistemonikos.org/matrixes/607562c46ec0d636a11a80f0>

Acupuncture for Cervical vertigo:

<https://www.epistemonikos.org/matrixes/606c9e367aac82511263f05#6080c8097db23a42946079e9>

Acupuncture for Children with Autism spectrum disorder:

<http://www.epistemonikos.org/matrixes/607549af7db23a5a64afd7d1>

Acupuncture for Cognitive impairment after stroke:

<http://www.epistemonikos.org/matrixes/607d5cac7aac81939564de5>

Acupuncture for Depression sleep disorder:

<http://www.epistemonikos.org/matrixes/607568bb7db23a5a64afe193>

Acupuncture for Mild cognitive impairment:

<http://www.epistemonikos.org/matrixes/607560d86ec0d6700019313f>

Acupuncture for Menstrual migraine:

<http://www.epistemonikos.org/matrixes/607697047aac868e92622f8>

Acupuncture for Neuropathic pain:

<http://www.epistemonikos.org/matrixes/60769b327aac80c3027703a>

Acupuncture for Non-acute stage of cerebral infarction neurological function deficit:

<http://www.epistemonikos.org/matrixes/607797686ec0d6027b7f0969>

Acupuncture for Perimenopausal sleep disorders:

<https://www.epistemonikos.org/matrixes/606cd0ee7aaac825112653d3#606cd0ee7aaac825112653d3>

Acupuncture for Senile insomnia:

<http://www.epistemonikos.org/matrixes/607704227db23a044bafb01e>

Acupuncture for Post-stroke aphasia:

<http://www.epistemonikos.org/matrixes/607413996ec0d636a11a4963>

Acupuncture for Poststroke spastic hemiplegia:

<https://www.epistemonikos.org/matrixes/606cf4a67db23a5dc2b08f34#607541e07db23a5a64afd581>

Acupuncture for Tension-type headache:

<http://www.epistemonikos.org/matrixes/6076aafc7db23a5a64b04823>

Acupuncture for Trigeminal neuralgia:

<http://www.epistemonikos.org/matrixes/607581537db23a5a64afe932>

Acupuncture for Vascular dementia:

<http://www.epistemonikos.org/matrixes/60741c507aaac80c3026e8f6>

Sciatica:

<http://www.epistemonikos.org/matrixes/608f473c6ec0d60630e0bbe8>

Quality of Life in Patients With Migraine:

<http://www.epistemonikos.org/matrixes/609140236ec0d655ed7d723b>

Connective tissue diseases:

Acupuncture for Back pain:

<http://www.epistemonikos.org/matrixes/60654c866ec0d61dc0b9e0d4>

Acupuncture for Chronic knee pain:

<http://www.epistemonikos.org/matrixes/60763d5c6ec0d67000197cae>

Acupuncture for Fibromyalgia syndrome:

<http://www.epistemonikos.org/matrixes/6076bfe26ec0d660db19eeb9>

Acupuncture for Hip osteoarthritis:

<http://www.epistemonikos.org/matrixes/60768e607db23a1655b056b0>

Acupuncture for Knee osteoarthritis:

<http://www.epistemonikos.org/matrixes/6076c2506ec0d6700019a59f>

Acupuncture for Musculoskeletal pain:

<http://www.epistemonikos.org/matrixes/6077f17a6ec0d6027a7ef48a>

Acupuncture for Parkinson's disease:

<http://www.epistemonikos.org/matrixes/6076a3156ec0d67000199c32>

Acupuncture for Primary osteoporosis:

<http://www.epistemonikos.org/matrixes/6077205b7db23a4318afb11e>

Gastrointestinal disorders:

Acupuncture for Constipation:

<http://www.epistemonikos.org/matrixes/606544157aaac85001269b84>

Acupuncture for Functional dyspepsia:
<http://www.epistemonikos.org/matrixes/606547657aac85001269c7d>
Acupuncture for Irritable bowel syndrome:
<http://www.epistemonikos.org/matrixes/60654bae7db23a2fb7b02f74>
Acupuncture for Gastroesophageal reflux disease:
<http://www.epistemonikos.org/matrixes/607466e27aac80c302701b8>
Acupuncture for Peptic ulcer:
<http://www.epistemonikos.org/matrixes/60746fad6ec0d62d51193fe6>
Acupuncture for Symptomatic gastroparesis:
<http://www.epistemonikos.org/matrixes/607415617aac84ffe262ff5>
Acute pancreatitis:
<http://www.epistemonikos.org/matrixes/60913cd17db23a371762cfa0>

Genitourinary disorders:

Acupuncture for Chronic prostatitis:
<http://www.epistemonikos.org/matrixes/6065420e7aac85000261d36>
Acupuncture for Benign prostatic hyperplasia:
<http://www.epistemonikos.org/matrixes/607404097db23a1655afc9c1>
Acupuncture for Chronic kidney disease:
<https://www.epistemonikos.org/en/documents/2c4a15dfe327aa116dad32863b3e16fe4296dfac/matrix>
Acupuncture for Chronic pelvic pain syndrome:
<http://www.epistemonikos.org/matrixes/607451616ec0d62d511934a7>
Acupuncture for Urinary tract infection:
<http://www.epistemonikos.org/matrixes/60741aea7db23a2c33b22b24>

Mental health:

Acupuncture for Depression:
<http://www.epistemonikos.org/matrixes/606545206ec0d61dc0b9debe>
Acupuncture for Postpartum depression:
<http://www.epistemonikos.org/matrixes/607702367aac868e9264478>
Acupuncture for smoking cessation:
<http://www.epistemonikos.org/matrixe/607702c17aac868e92644c1>
Acupuncture for Alcohol dependency:
<http://www.epistemonikos.org/matrixes/6073bd237aac82c4a278889>
Acupuncture for Chronic fatigue syndrome:
<http://www.epistemonikos.org/matrixes/60745af66ec0d660db19bb9a>
Acupuncture for Emotional disorder in patients with chronic pain:
<http://www.epistemonikos.org/matrixe/60745cfd7aac82c4a27a22f>
Acupuncture for Post-traumatic stress disorder:
<http://www.epistemonikos.org/matrixe/6077060d6ec0d613b11902ea>
Acupuncture for Opioid use disorder:
<http://www.epistemonikos.org/matrixes/6074114d7db23a1655afcdbf>

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Nutrition and metabolic disorders:

Acupuncture for Simple obesity:

<http://www.epistemonikos.org/matrixes/606555887aac81f38258fbf>

Obstetrics, gynecology and women's health:

Acupuncture for Dysmenorrhea:

<http://www.epistemonikos.org/matrixes/606546707aac85001269c31>

Acupuncture for Quality of life in menopausal women:

<http://www.epistemonikos.org/matrixes/606552906ec0d61dc0b9e298>

Acupuncture for Labor pain:

<http://www.epistemonikos.org/matrixes/6065593f6ec0d61dbfb960fa>

Acupuncture for Luteinized unruptured follicle syndrome:

<http://www.epistemonikos.org/matrixes/6074672d7aac82c4a27a429>

Acupuncture for Menopausal hot flashes:

<http://www.epistemonikos.org/matrixes/6075828b7db23a5a64afe983>

Acupuncture for Poor ovarian responders:

<http://www.epistemonikos.org/matrixes/60746f547db23a5dc2b211f3>

Acupuncture for Postmenopausal osteoporosis:

<http://www.epistemonikos.org/matrixes/607470127aac8550b26d0e0>

Acupuncture for Postpartum lactation:

<http://www.epistemonikos.org/matrixes/607583bb6ec0d67000193c79>

Pregnancy or intended pregnancy:

Acupuncture for Infertility:

<http://www.epistemonikos.org/matrixes/606548cc6ec0d61dc0b9dfcf>

Acupuncture for Hyperemesis gravidarum:

<http://www.epistemonikos.org/matrixes/606558736ec0d61dc0b9e444>

Acupuncture for Vomitus gravidarum:

<http://www.epistemonikos.org/matrixes/606558736ec0d61dc0b9e444>

Acupuncture for Pregnancy outcomes of in vitro fertilization:

<http://www.epistemonikos.org/matrixes/607470217db23a3f42b0efd4>

Perioperative diseases:

Acupuncture for Hot flashes after breast cancer surgery:

<http://www.epistemonikos.org/matrixes/60741b957aac80c3026e89a>

Acupuncture for Pain control after total knee arthroplasty:

<http://www.epistemonikos.org/matrixes/60766b257aac868e9261718>

Acupuncture for Postoperative pain:

<http://www.epistemonikos.org/matrixes/60766be16ec0d67000198c77>

Acupuncture for Recovery of gastrointestinal function after operation:

<http://www.epistemonikos.org/matrixe/60766c7d6ec0d67000198ca4>

Ear, nose, and throat disorders:

Acupuncture for Rhinitis:

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<http://www.epistemonikos.org/matrixes/606553857aac81f38258f0f>

Meniere disease:

<http://www.epistemonikos.org/matrixes/60a3fb477aac828e47619af>

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PRISMA 2009 Checklist

Section/topic	#	Checklist item	Reported on page #
TITLE			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1
ABSTRACT			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	2-3
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known.	4
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	5
METHODS			
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and if available, provide registration information including registration number.	NO
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	7
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	7-8
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	8
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	8
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	9
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	9
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	9
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	10
Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., I^2) for each meta-analysis.	10-11



PRISMA 2009 Checklist

Page 1 of 2

Section/topic	#	Checklist item	Reported on page #
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	9
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	10-11
RESULTS			
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	11
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, P value, follow-up period) and provide the citations.	11-12
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	12
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	12
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measure of consistency.	13-15
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	12
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	15
DISCUSSION			
Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	16-17
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	17
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	18
FUNDING			
Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	21

From: Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 6(6): e1000097. doi:10.1371/journal.pmed1000097

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Evidence mapping and overview of systematic reviews of the effects of acupuncture therapies

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Liming Lu, Yuqing Zhang, Shuqi Ge, and Hao Wen contributed equally to this work

For peer review only

Abstract

Objective To provide a route map regarding systematic reviews of acupuncture therapies that will meet two goals: i) to identify areas in which more or better evidence is required and ii) to identify acupuncture applications that, although proven effective, remain underutilized in practice, and thus warrant more effective knowledge dissemination.

Eligibility criteria We included SRs that conducted meta-analyses (MAs) of randomized controlled trials (RCTs) for this overview.

Information sources Searches were conducted in the Epistemonikos database, Chinese National Knowledge Infrastructure (CNKI), Chinese Biomedical Literature Database (CBM), WANFANG Database, and Chinese Scientific Journal Database (VIP).

Risk of bias We assessed the risk of bias in the RCTs based on the Cochrane risk of bias tool.

Synthesis of results We re-analyzed the selected MAs if new primary studies were added. We used random-effects model to calculate the overall effect.

Results Our search identified 120 SRs published in the last five years addressing acupuncture therapies across 12 therapeutic areas and 77 diseases and conditions. The SRs included 205 outcomes and involved 138,995 participants from 1,402 RCTs. We constructed 77 evidence matrices, including 120 SRs and their included RCTs in the Epistemonikos database. Seventy-seven SRs represented the effect estimate of acupuncture therapies. Finally, we system summarized the areas of possible underutilization of acupuncture therapies (high or moderate certainty evidence of large or moderate effects), and the areas of warranting additional investigation of acupuncture therapies (low or very low certainty evidence of moderate or large effects).

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Conclusion The evidence maps and overview of SRs on acupuncture therapies identified both therapies with substantial benefits that may require more assertive evidence dissemination and promising acupuncture therapies that require further investigation.

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Strengths and limitations of this study

This study was the first evidence map for acupuncture therapies across all therapeutic areas to our knowledge.

This study includes a comprehensive search of eligible SRs and RCTs and explicit eligibility criteria.

This study use of both a combination of evidence mapping and an overview approach provides readers with both a broad perspective of the evidence landscape and in-depth information on the certainty of evidence and the effect size on patient-important outcomes

This study, in-depth collaboration with the Epistemonikos foundation, makes it possible for readers to have an overview of evidence and access the primary studies

The limitation of this review is that we excluded studies investigating the effect of acupuncture as an adjunct therapy , and some diseases/conditions may be omitted.

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INTRODUCTION

Clinicians and patients worldwide now make wide use of acupuncture, a form of traditional medicine¹. According to a 2013 World Health Organization (WHO) report², 103 of the WHO's member countries have approved the use of acupuncture. According to a 2013 survey conducted by the World Federation of Acupuncture-moxibustion Societies (WFAS)³, 183 (91%) of the 202 countries surveyed use acupuncture, while 178 (93%) of the 192 member countries of the United Nations (UN) have acupuncture practices, and 59 (31%) have partial or full insurance coverage.

Based on the extensive application of acupuncture in practice, in recent years⁴ numerous systematic reviews (SRs) have explored the effects of acupuncture therapies. Despite the mass of evidence, acupuncture practice and related policies practice in different jurisdictions varies, including over-or underutilization⁵. Cultural, societal, and awareness factors may result in research waste.

Highlight possible over-or underutilization or both compared to Western clinicians; Chinese clinicians treat many more diseases and conditions using acupuncture therapies⁶. Insurance in Western countries covers only some conditions, e.g., low back pain, at the health care system level compared to that in Eastern countries (e.g., South Korea, China)⁷. Reviews of existing evidence may clarify areas in which over-utilization exists (highlighting the need for either de-implementation or further research) and where under-utilization exists (highlighting the need for more effective knowledge dissemination).

Evidence mapping is one of the latest methods for synthesizing evidence using a user-friendly format with visual graphics and or searchable databases. Evidence mapping integrates, analyses, refines and presents the evidence quickly and conveniently⁸, in the process helping define future research and knowledge dissemination priorities⁸. This relatively novel method for the overview of SRs is particularly suitable for areas where a large number of SRs exist and overlap across

diseases and conditions. To date, no evidence maps or overview of SRs summarizing evidence regarding acupuncture therapies exist.

We, therefore, developed a route map guiding the acupuncture global research agenda to either further investigate promising acupuncture therapies or implementing more assertive evidence dissemination on areas where acupuncture demonstrated substantial benefits. In this article, we present: 1) the characteristics of the included SRs from multiple dimensions, including populations, interventions, comparisons, and outcomes; 2) the most up-to-date treatment effect of acupuncture therapies in all conditions supported by RCT-based evidence along with the corresponding certainty of evidence.

Methods

Definition

Acupuncture: We used the WHO’s definition of acupuncture, as follows ⁹: *Acupuncture literally means to puncture with a needle. However, acupuncture may also involve the application of other kinds of stimulation to certain points.* We included any type of commonly used acupuncture that stimulates certain points with needles, lasers, electricity, or pressure. The specific types of acupuncture therapies included in this manuscript were manual acupuncture, electro-acupuncture, body needling, ear (auricular) acupuncture, scalp acupuncture, laser acupuncture, transcutaneous electrical nerve stimulation (TENS), and acupressure. Forms combined with moxibustion or medication, such as warm needling, acupoint injection, or hydro-acupuncture, were excluded.

Manual acupuncture ¹⁰: The most commonly seen acupuncture therapies worldwide. A practitioner uses thin, solid, metallic needles to penetrate the skin on a series of acupoints and then performs gentle and specific stimulation techniques. The concept of manual acupuncture emphasizes the non-electrified stimulation

method.
Electro-acupuncture: Additional electric current stimulation following the needles insertion.
Body needling ¹¹ : A type of manual acupuncture performed on the trunk and limbs of the body, excluding the acupoints on the scalp and ears.
Ear (auricular) acupuncture ¹⁰ : Acupuncture at the points located on the auricle, also called auriculo-acupuncture.
Scalp acupuncture ¹⁰ : Acupuncture at the specific lines located on the scalp.
Laser acupuncture ¹⁰ : A variant of acupuncture in which needling is replaced by laser irradiation on the points.
Transcutaneous electrical nerve stimulation (TENS) ¹⁰ : A therapy that uses low voltage electrical current to provide pain relief.
Acupressure ¹² : A practitioner use hand, elbow, or various devices to apply physical pressure to acupuncture points or trigger points.

Patient-important outcome: A patient-important outcome was defined as an outcome for which one would answer “yes” to the following question: “If patients knew that this outcome was the only thing to change with treatment, would they consider receiving this treatment is associated with side effects or cost?”¹³ Some patient-important outcomes are shown below:

I . Mortality
1. All-cause mortality
2. Disease-specific mortality
II . Morbidity
1. Cardiovascular major morbid events
2. Other major morbid events (e.g., loss of vision, seizures, fractures)
3. Onset/recurrence/relapse of cancer and other chronic diseases (e.g., chronic

obstructive pulmonary disease exacerbation, symptomatic diabetes)
4. Renal failure requiring dialysis
5. Hospitalization, medical and surgical procedures (e.g., pacemaker placement, cardioversion, and revascularization)
6. Symptomatic infections
7. Dermatologic/rheumatologic disorders
III. Quality of life/functional status (e.g., failure to become pregnant, failure to nurse/breastfeed, depression)/specific symptoms (e.g., pain, nausea)

Disease and condition ¹⁴: The term disease broadly refers to any condition that impairs the body's normal functioning. The term condition is a synonym for medical state, which describes an individual patient's current state from a medical standpoint, such as postoperative pain, postoperative ileus after abdominal surgery, cancer-related pain, and breast cancer-related lymphoedema.

Eligibility and inclusion criteria

Type of study. We included SRs that conducted meta-analyses (MAs) of randomized controlled trials (RCTs) for this overview. An eligible SR fulfilled the following criteria:

- Reported a search in at least one electronic database.
- Reported at least one criterion for the inclusion of studies.
- Reported an effect estimate for at least one patient-important outcome.

We excluded overviews of SRs, narrative reviews, protocols of SRs, or studies published prior to January 2015.

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Type of participants. There were no restrictions on the type of participants. To classify diseases and conditions, we used the taxonomy established in the Living Overview of Evidence (L·OVE) platform¹⁵ built upon the International Classification of Diseases, tenth revision (ICD-10), with modification.

Type of interventions. We included SRs summarizing at least one of the following comparisons:

- Acupuncture vs. no intervention/waiting list
- Acupuncture vs. sham/placebo
- Acupuncture vs. standard of care/usual care
- Acupuncture vs. western medicine
- Acupuncture vs. other interventions (such as psychotherapy, rehabilitation)

We excluded SRs with the control group receiving Traditional Chinese Medicine-related therapies, such as acupuncture, moxibustion, scraping, cupping, bloodletting, acupoint catgut embedding, massage, Chinese herbal medicine, and tai chi.

Type of outcomes. We included SRs reporting at least one patient-important outcome.

Database and search

We searched for SRs without language restrictions from January 2015 to November 2020 in four Chinese electronic databases (Chinese National Knowledge Infrastructure (CNKI), Chinese Biomedical Literature Database (CBM), WANFANG Database, and Chinese Scientific Journal Database (VIP), and Epistemonikos database (<https://www.epistemonikos.org/>). The Epistemonikos database includes SRs from ten electronic databases (PubMed, EMBASE, Cochrane Database of SRs (CDSR), Cumulative Index to Nursing and Allied Health Literature (CINAHL), PsycINFO, Latin American and Caribbean Health Sciences (LILACS), Database of

Abstracts of SRs of Effectiveness (DARE), Campbell Library, Joanna Briggs Institute (JBI) Database, and EPPI-Centre Library).

We also searched for newly published RCTs that were eligible for selected best SRs (from its lastest search dates to November 2020) in PubMed, MEDLINE, Cochrane Central Register of Controlled Trials (CENTRAL), Embase, CNKI, CBM, WAN FANG Database, and VIP.

Selection of best SRs for effect estimates and certainty of evidence assessment

Two reviewers (Shuqi Ge and Hao Wen) independently screened titles and abstracts to identify eligible SRs. The same reviewers retrieved and independently evaluated the full text of potentially eligible SRs for final inclusion and addressed disagreements through discussion. If a consensus could not be reached, a third (Liming Lu) resolved the conflict.

When multiple SRs existed for the same disease or condition, we selected the best SR to provide the most up-to-date effect estimate and its corresponding certainty of evidence. To select the best SR, we applied the following selection criteria in the order listed:

- I . For each clinical question, we selected the most recent SR.
- II . If the publication years of SRs were consistent or close, we selected the SR that contained the most RCTs or the Cochrane SR.
- III . If the primary studies included in the SRs completely overlapped, that is, the primary studies were consistent in quantity and content, we selected the highest-quality SR using “A Measurement Tool to Assess SRs” (AMSTAR) 2. If the primary studies partially overlapped or did not overlap, we updated the MA with all eligible primary studies. We updated identified SRs when newly published RCTs were eligible to be included.

Selection of newly published RCTs

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For all best SRs, two reviewers (Shuqi Ge and Hao Wen) independently screened for newly published RCTs that might be eligible. A third author resolved any unresolved disagreements between the reviewers.

Data collection and analysis

Data extraction

For each condition, two reviewers independently extracted data from all SRs using standardized forms, including the following: study ID; first author; publication year; country; therapeutic areas (e.g., periprocedural care or oncology) classified by the modified ICD-10 classification; the number of participants; the number of included primary studies; outcomes; interventions and comparison. In addition, for the selected best SR, reviewers extracted information on the effect sizes and related 95% confidence intervals (CIs). To ensure consistency, prior to the data extraction, we conducted calibration exercises. Discrepancies in the extracted data were resolved by discussion; if needed, a third author arbitrated.

For newly published RCTs that are eligible for the best SRs, we extracted the following information: study ID; first author; year of publication; the number of participants; interventions; comparisons; result data; and patient-important outcomes that matched the selected SRs.

Quality assessment

Quality of the SRs

We assessed the methodological quality of all SRs using the AMSTAR 2 tool; items 2, 4, 7, 9, 11, 13, and 15 were considered critical items. We categorized the overall quality of the SRs as high (meeting the criteria of all items or not meeting the criteria of only one non-critical item), moderate (not meeting the criteria of more than one non-critical item), low (not meeting the criteria of one critical item) and critically low (not meeting the criteria of more than one critical item)¹⁶. Two independent reviewers

performed each quality assessment, with discrepancies adjudicated by a third reviewer.

Certainty of evidence

We assessed the certainty of evidence for patient-important outcomes in the best SRs using the grading of recommendations assessment, development, and evaluation (GRADE) methodology through GRADEpro Guideline Development Tool (GDT). GRADE classified the certainty of evidence as high, moderate, low, or very low. If SRs used GRADE, we used their certainty ratings. If they did not use GRADE, we assessed the certainty of evidence.

Risk of bias assessment

We assessed the risk of bias in the RCTs based on the Cochrane risk of bias tool. It consists of the following seven domains: random sequence generation, allocation concealment, blinding of patients and personnel, blinding of outcome assessment, incomplete outcome data, selective outcome reporting, and other sources of bias. The tool ranks the evidence from RCTs as having ‘definitely yes (low risk of bias)’, ‘probably yes’, ‘probably no’ and ‘definitely no (high risk of bias)’ levels of bias. The overall risk of bias for individual studies was classified as low risk of bias if all domains were ranked as definitely yes or probably yes, as high risk of bias if at least one domain ranked as definitely no or probably no.

Data synthesis

If newly published RCTs were updated in the SRs, we recalculate the pooled estimates in each meta-analysis. We used random-effects model to calculate the overall effect.

Evidence mapping

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For all SRs and included RCTs, assisted with mapping, we visualized the overall and geographical distribution of evidence corresponding to therapeutic areas, acupuncture therapies' effect size, and certainty of evidence.

For the geographical distribution of all included SRs, we presented a geographical information system map. For the best SRs, we used a bubble plot to display therapeutic areas, their corresponding SRs, RCTs, and the type of acupuncture tested.

For patient-important outcomes with large or moderate effect in the best SRs, we used evidence figures to show the effect size and corresponding certainty of evidence. For the pooled effect estimate of dichotomous outcomes, we presented the risk ratio (RR) and absolute risk reduction (ARR) along with the 95% CIs. We calculated the ARR by multiplying the median of risks observed in control groups by the pooled risk ratio and then presenting the result in terms of the anticipated increase or decrease in patients experiencing the effect per 1,000 patients treated. For continuous outcomes, we presented the standardized mean difference (SMD) along with its 95% CI. When the best SRs reported other effect estimates, we converted all to SMD or RR and classified the effect size as "small", "moderate," or "large." For the relative effect of dichotomous outcomes, we chose RR of "2.0 or 0.5" as the reference for small and large effects, respectively ($RR \geq 2.0$ or $RR \leq 0.5$ as large, $0.5 < RR < 2.0$ as small). For continuous outcomes, we used SMD of 0.4 and 0.7¹⁷ as the reference for small, moderate, and large effects ($SMD < 0.4$ as small, $0.4 \leq SMD < 0.7$ as moderate, ≥ 0.7 as large).

Through a tabular approach, a matrix of evidence displayed the clusters of SRs with corresponding included RCTs. For every disease or condition where acupuncture SRs exist, we created a matrix consists of all SRs and their corresponding RCTs¹⁸. If newly published RCTs were eligible for any existing SR, we added the new RCTs to the matrices. We aggregated all matrices into an online repository on the Epistemonikos database.

Patient and public involvement

No patients were involved in selecting the research question, conducting the study, or interpreting the results, this study solely focused on patient-important outcomes.

Results

Results of literature search and study selection

We retrieved 6,122 citations. After removing 2,695 duplicates and screening 3,427 titles/abstracts, we evaluated the full text of 614 articles, of which 120 proved eligible. Figure 1 presents the study selection process. Figure 2 shows the distribution of the country of publication represented by the first author’s affiliation. For each disease or condition, we used the best SR for each question to construct the bubble plot (Figure 3) and evidence figures (Figure 4, Figure 5, and Appendix 1). Appendix 2 provides reasons for exclusion at the full-text screening stage.

Characteristics of included SRs

Appendix 3 Table 1 shows the characteristics of the 120 included SRs and MAs published between 2015 and 2020, of which SRs published in 2019 accounted for the highest proportion (n=28, 23.3%), followed by those published in 2018 (n=26, 21.7%). The first authors of the included SRs are from China (n=98, 81.7%), South Korea (n=9, 7.5%), Australia (n=5, 4.2%), the USA (n=4, 3.3%), Germany (n=2, 1.7%), the UK (n=1, 0.8%) and Iran (n=1, 0.8%) (Figure 2). The included studies involve 12 therapeutic areas (periprocedural care, oncology, neurology, connective tissue diseases, ear, nose, and throat disorders, eye disorders, gastrointestinal disorders, genitourinary disorders, mental health, nutrition and metabolic disorders, obstetrics, gynecology, and women’s health, and pregnancy or intended pregnancy) and 77 diseases or conditions. The reviews include 1,402 RCTs that enrolled 138,995 unique participants. The number of RCTs included in each SR ranges from 1 to 68, and the sample sizes range from 81 to 7,618 (Figure 3 provides further details). Typical reviews apply the Cochrane risk of bias tool (n=98, 81.7%), do not use

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GRADE (n=97, 80.8%), and do not report the time point at which outcomes are measured (n=86, 71.7%).

Methodological quality of included SRs

Figure 6 summarizes the methodological quality of the 120 included SRs. Of all 120 SRs, 119 (99.2%) SRs are rated as having “low” or “critically low” quality. Failure to provide a list of excluded studies and explain any modifications of previously published protocols are the main reason for the quality being rated low or critically low.

Evidence map: bubble plot

We included 77 best SRs to construct the bubble plot. The bubble plot (Figure 3) visualized the evidence distribution across 12 therapeutic areas in which we presented the number of SRs, their included RCTs, and the total number of participants. Of the 77 reviews, neurology is the content area most frequently represented (33.8%), with a number of areas in the vicinity of 10% (oncology, connective tissue diseases, gastrointestinal disorders, mental health, obstetrics, gynecology, and women's health), and others 5.2 % or less (periprocedural care, genitourinary disorders, eye disorders, ear, nose, and throat disorders, nutrition and metabolic disorders, pregnancy or intended pregnancy). The number of RCTs included in each review ranges from 1 to 40. RCTs in only three areas (neurology, connective tissue diseases, mental health) enroll more than 16,000 participants. Manual acupuncture proves the most frequently used intervention (54.1%), following by electro-acupuncture (20.2%) and body needling (5.5%).

Evidence figure

We included 77 best SRs to construct the evidence figures (Figure 4, Figure 5, and Appendix 1).

Effective interventions at risk of underutilization

★Large effect with moderate certainty evidence

Therapies directed at improvement in functional communication of post-stroke aphasia patients, reduction in myofascial pain, and increased lactation success rate within 24 hours post-delivery demonstrated probable large effects ($RR \geq 2.0$; $SMD \geq 0.7$). Details of comparisons and effect estimates are in [Figure 4](#).

★Moderate effect with high or moderate certainty evidence

Therapies directed at relief of neck pain and shoulder pain demonstrated moderate effects ($0.4 \leq SMD < 0.7$, high certainty evidence).

Therapies directed at a reduction in the severity of vascular dementia symptoms, relief of fibromyalgia-related pain and non-specific low back pain, and improvement of allergic rhinitis nasal symptoms demonstrated probable moderate effects ($0.4 \leq SMD < 0.7$, moderate certainty evidence). Details of comparisons and effect estimates are in [Figure 4](#).

Promising but unproven interventions warranting further study

★Large effect with low or very low certainty evidence

Low-certainty evidence

Therapies directed at the reduction in the length of first flatus and defecation in postoperative ileus after abdominal surgery, reduction in pain of post-stroke shoulder-hand syndrome, increase in motor function and reduction in spasm symptoms of post-stroke spastic hemiplegia patients, improvement in sleep quality of patients with insomnia disorder, hemodialysis patients and menopausal women, reduction in neurogenic pain, improvement in the symptoms of autism spectrum disorder in children, reduction in the severity of migraine pain, improvement in quality of life of migraine patients, reduction in the severity of carpal tunnel syndrome pain and tic symptoms in patients with tic disorder, reduction in sciatica pain, improvement in

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quality of life and constipation symptoms of functional dyspepsia patients, reduction in the severity of pain and voiding symptoms and improvement in quality of life of chronic prostatitis patients, increase in abstinence rate for smoking in short and long term, reduction in severity of opioid craving and depression in opioid use disorder, reduction in body mass index in obesity patients and improvement in success rate of lactation within 24 and 72 hours after delivery, improvement in the overall symptoms of chronic pelvic pain syndrome, reduction in severity of pain and menstrual symptoms of dysmenorrhea, and improvement in pregnancy rate among infertile women may result in a large effect ($RR \geq 2.0$; $SMD \geq 0.7$). (Details of comparisons and effect estimates are in [Figure 5](#))

Very low-certainty evidence

Therapies directed at relief of postoperative pain on movement or cough and aromatase Inhibitor-induced arthralgia in breast cancer, improvement in quality of life of breast cancer patients, increase in motor function and pain in post-stroke shoulder-hand syndrome, increase in sleep quality of insomnia patients and menopausal women, reduction in frequency of migraine symptoms, reduction in the severity of carpal tunnel syndrome pain, improvement in function of hip osteoarthritis patients, relief of pain caused by postmenopausal osteoporosis, reduction in the severity of dizziness in Meniere's disease, improvement in symptoms of xerophthalmia, reduction in the risk of peptic ulcer recurrence, improvement in symptoms of gastroparesis, reduction in the risk of urinary tract infection recurrence, reduction in the severity of chronic prostatitis, reduction in the severity of depression in chronic kidney disease, opioid use disorder, and in postpartum depression, reduction in the severity of alcohol craving in alcohol use disorder, improvement in functional status in posttraumatic stress disorder, decrease in mental fatigue in chronic fatigue syndrome, reduction in frequency of hot flash symptom and improvement in the symptoms of menopausal women, and relief of pain during labour may result in a large effect (RR smaller than 0.5; SMD greater than 0.7). (Details of comparisons and effect estimates are in [Figure 5](#))

★Moderate effect with low or very low-certainty evidence

Low-certainty evidence

Therapies directed at a reduction in the severity of hot flashes after breast cancer surgery, reduction in the severity of nausea and vomit in cancer patients, increase in motor function and activities of daily living of post-stroke spastic hemiplegia, improvement in the symptoms of pediatric autism spectrum disorder and sleep quality in patients with fibromyalgia syndrome, relief of non-specific low back pain, increase in complete spontaneous bowel symptom of functional constipation patients, improvement in symptoms of functional dyspepsia patients, reduction in alcohol withdrawal symptoms in alcohol use disorder patients, reduction in the severity of depression in patients with depression, and reduction in hot flash frequency in menopausal women may result in a moderate effect ($0.4 \leq \text{SMD} < 0.7$). (Details of comparisons and effect estimates are in [Appendix 1](#))

Very low-certainty evidence

Therapies directed at relief of postoperative resting pain and postoperative (total knee arthroplasty) pain at 24h, increase in sleep quality of insomnia patients, improvement in cognitive function of mild cognitive impairment patients, relief of pain, and improvement in quality of life of hip osteoarthritis patients, reduction in the severity of constipation symptoms of functional constipation patients, improvement in constipation symptoms of functional dyspepsia patients, and improvement in the severity of depression and sleep quality in patients with chronic kidney disease may result in a moderate effect ($0.4 \leq \text{SMD} < 0.7$). (Details of comparisons and effect estimates are in [Appendix 1](#))

MA supplementation and updating

We updated three selected SRs with five RCTs published after the search date of the selected SRs.

Matrices of evidence

We produced 77 matrices of evidence clusters of SRs with corresponding included RCTs. Among all matrices, about three quarters (n=56, 72.73 %) contained one SR, the rest (n=21, 25.97%) included two or more SRs in which simple obesity had the largest number of SRs (n=8). We digitalized this portion on Epistemonikos(<https://www.epistemonikos.org/>).

We presented two examples for the digitized matrices: Acupuncture for Non-specific low back pain: (URL: <https://www.epistemonikos.org/matrixes/60654c866ec0d61dc0b9e0d4>) (Figure 7); Acupuncture for Allergic Rhinitis: (URL: <http://www.epistemonikos.org/matrixes/606553857aaac81f38258f0f>) (Figure 8).

Appendix 4 has the links to the remaining 75 matrices.

Discussion

Principal findings

Our evidence mapping and overview of SRs included 120 SRs across 12 therapeutic areas and 77 diseases or conditions, including 138,995 participants from 1,402 RCTs. Neurological conditions proved the most frequently studies area; connective tissue, mental health, obstetrics, gynecology, and women's health also proved frequent areas of study. While ear, nose, and throat disorders, eye disorders, nutrition, and metabolic disorders had the fewest SRs (Figure 3). The conditions and outcomes in which acupuncture is at highest risk of underutilization include the following: lactation within 24 hours after delivery , post-stroke aphasia , myofascial pain (pain relief), vascular dementia , neck, shoulder, and non-specific low back pain, fibromyalgia syndrome, allergic rhinitis(Figure 4).

The conditions and outcomes in which acupuncture therapies showed promising effect yet warranting further research include the following: peptic ulcer, urinary infection, smoking cessation, lactation within 24 and 72 hours after delivery, etc. (Figure 5 and Appendix 1)

Strengths and limitations of the study

Our study, the first describing an acupuncture evidence map, has several strengths. First, this is the first evidence map for acupuncture therapies across all therapeutic areas to our knowledge. Second, we had clear, practical objectives: to identify therapies with large or moderate effects supported by high or moderate certainty evidence at risk of underutilization and therapies suggesting large or moderate effects supported by low or very low-quality evidence warranting further investigations. Third, our use of both a combination of evidence mapping and an overview approach provides readers with both a broad perspective of the evidence landscape and in-depth information on the certainty of evidence and the effect size (large, moderate, and small) on patient-important outcomes ¹⁹. Fourth, by only including patient-important outcomes and summarizing the results with additional information on the absolute rather than the relative effect size, our study adds more value to support clinical and health system decision-making than the minimal contextualized approach adopted by most SRs or overviews. Fifth, the digitalization of available evidence provides a repository and a roadmap for readers’ further usage. Readers not only have an overview of evidence but also have access to the primary studies. Our in-depth collaboration with the Epistemonikos foundation makes this possible. Finally, we have made efforts to minimize bias in every step of this project. For the literature search, an experienced librarian developed the search strategy and performed the comprehensive literature search. All screening and data extraction were performed independently and in duplicate. These rigorous processes increased the credibility of our study.

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Our study also has several limitations. First, we excluded studies investigating the effect of acupuncture as an adjunct therapy (e.g., acupuncture combined with Western medicine or rehabilitation). Second, despite the non-randomized studies overwhelmingly providing only low-certainty evidence, excluding observational studies might limit the conclusion of our evidence map. Third, most SRs did not specify the follow-up time of the reported outcomes. We did not retrieve all of the follow-up times corresponding to the outcomes from the original 1,402 RCTs but reported the information provided in the SRs. Fourth, a large number of low or critically low-quality included SRs warrant caution when interpreting our research. Finally, and perhaps most important, we provided only candidates for possible underutilization. The interventions in which high or moderate quality evidence had demonstrated large or moderate effects are only candidates for underutilization – identification of areas in which more assertive dissemination efforts may prove beneficial will require utilization data.

Comparison with other studies

Current overviews of SRs on acupuncture therapies²⁰⁻²² covered a limited number of diseases. McDonald J et al. conducted a narrative review to identify existing evidence on acupuncture's efficacy in 122 conditions²³ using literature search, study selection, and evidence extraction methods that were neither systematic nor transparent. Du et al.'s conducted a narrative review and a national survey among 524 acupuncturists and identified 400 diseases and conditions treated by acupuncture²⁴⁻²⁵. Their project's objective was to summarize the landscape of current practice in China rather than provide a systematic and comprehensive view of the evidence map for acupuncture therapies.

Implications for practice and policy

The areas in which high or moderate certainty evidence demonstrates the large or moderate-sized effects of acupuncture therapy mandate its widespread use. Patients, clinicians, guideline developers, health policymakers, and payers can utilize the digitalized repository on Epistemonikos to support point-of-care decision-making, to produce additional evidence summaries (e.g., develop clinical practice guidelines (CPGs) or policy briefs), or to make decisions at the health system level (e.g., recommendations, implementation decisions, and reimbursement decisions).

Implications for research

Trialists can review diseases and conditions with high/moderate-certainty evidence before conducting new research to reduce research waste (see [Figure 4](#) for more details). Granting agencies can use our research to assess the need and relevance for grant applications.

Ensuring that clinicians and patients are making optimal use of acupuncture therapies with substantial effects demonstrated by high or moderate certainty evidence will require surveys of the use of these therapies in practice. Should such surveys demonstrate underutilization, concerted efforts to remedy the underutilization will be required. We identified a large number of outcomes in various diseases and conditions with large/moderate effect sizes and low/very low-certainty evidence, e.g., peptic ulcer, urinary infection, smoking cessation, lactation within 24 and 72 hours after delivery etc. These areas represent potentially fruitful targets for future clinical trials. Grant agencies can consider setting up or encouraging research in the areas mentioned above. Trialists will need to address the above areas when conducting future research. Trialists, systematic reviewers, and grant agencies can utilize the digitalized repository on Epistemonikos to assist in the design of RCTs (e.g., fine-tuning the research questions, selecting the outcomes) and SRs.

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Conclusion

The evidence maps and overview of SRs on acupuncture therapies identified both promising acupuncture therapies that require further investigation and therapies with demonstrated substantial benefits that may require more assertive evidence dissemination.

For peer review only

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Patient consent for publication

Not required.

Ethics approval

Institutional review board clearance is not required for this systematic review as all data are publicly available.

Provenance and peer review

Not commissioned; externally peer reviewed.

Data availability statement

The full dataset and statistical code will be available upon reasonable request by emailing Nenggui Xu.

Supplemental material

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Figure legend/caption

Figure 1 Flow chart of the publication-selection process

Figure 2 Country distribution of the first authors affiliation in all included systematic reviews

Figure 3 Bubble plot

Note: Each pie represents a therapeutic area. Pie size: number of RCTs (larger = more studies).

Figure 4 Large or moderate effects with high or moderate certainty evidence

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; SC: standard care; NRT: nicotine replacement therapy; WM: western medicine; RH: rehabilitation. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 5 Large effects with low or very low certainty evidence

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENs: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western

medicine; BEI: behavioral and educational interventions; RH: rehabilitation; MT: music therapy. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 6 Methodological quality: evaluation results of each AMSTAR2 question of included studies.

Note. Y, yes; PY, partial yes; N, no.

Figure 7 Digitized matrix: Acupuncture for Non-specific low back pain

Figure 8 Digitized matrix: Acupuncture for Rhinitis

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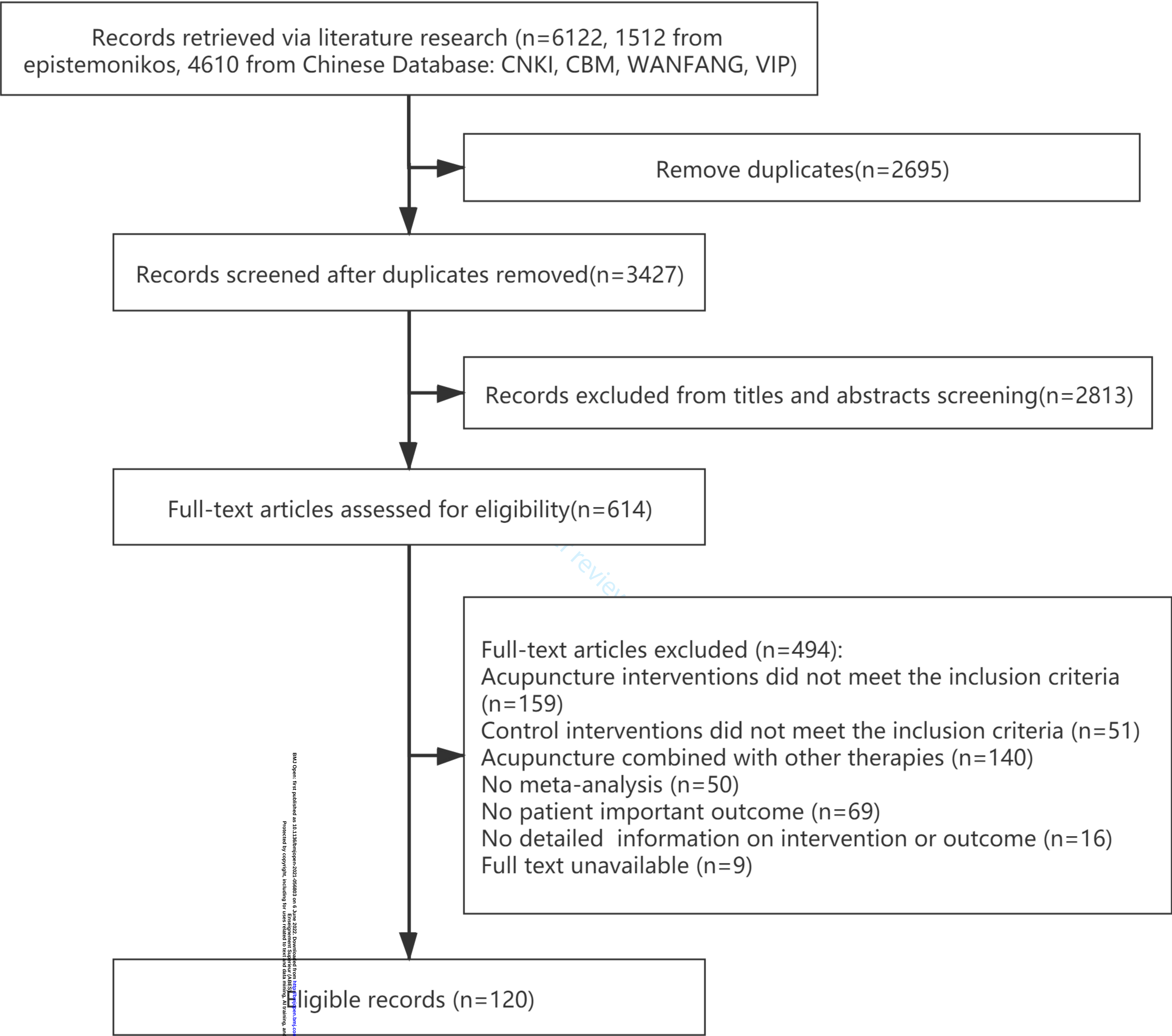


Figure 1 Flow chart of the publication-selection process.

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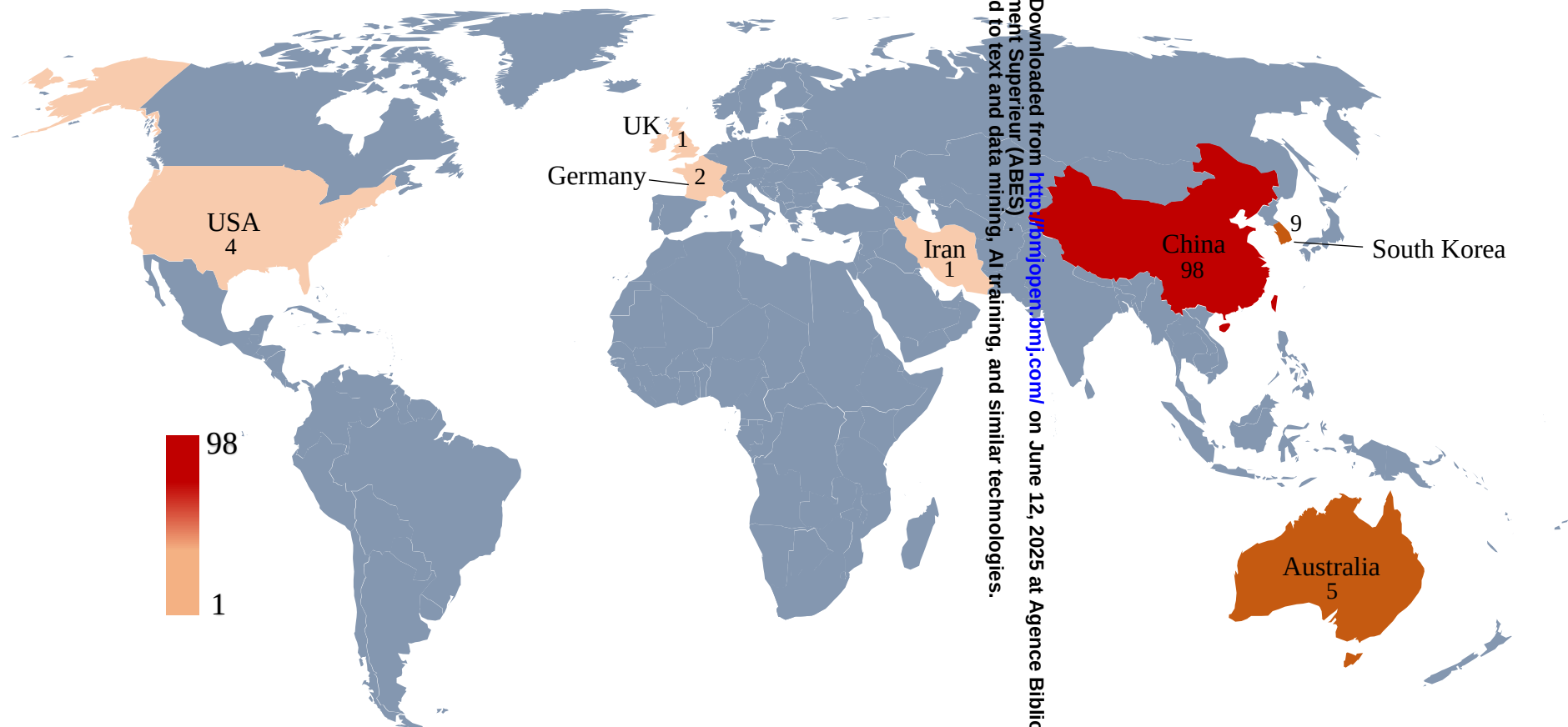


Figure 2 Country distribution of the first author’s affiliation in all included systematic reviews

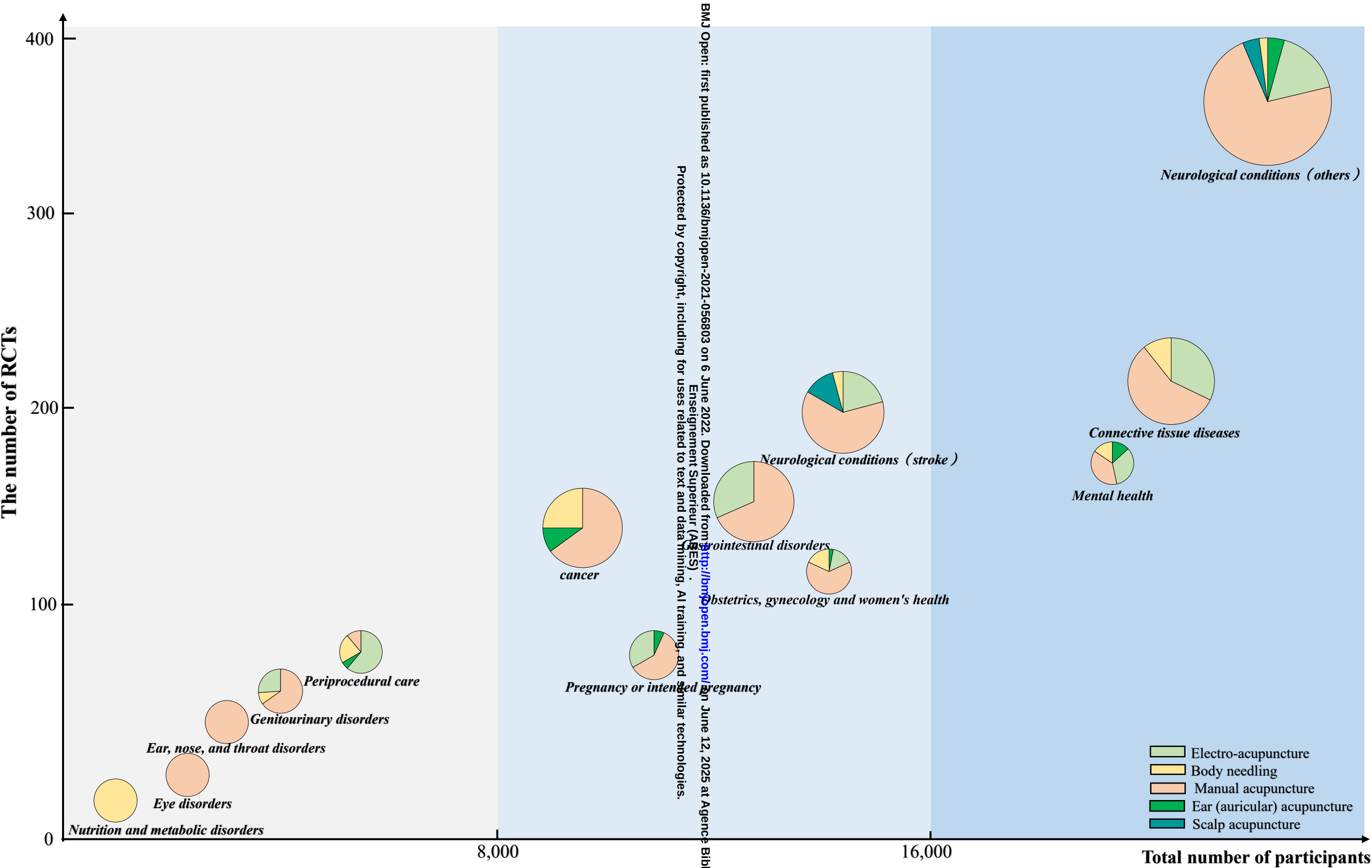


Figure 3 Bubble plot

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tevent	Tsample	Cevent	Csample	SMD(95%CI)	RR(95%CI)	CoE	ARR(95% CI)
Large Effect										
Binlong Zhang 2019	Neurology (Post-stroke aphasia)									
MA/scalp + RH vs RH	Improved functional communication	8		243		238	1.01(0.81,1.2)		Moderate	
Qi-ling Yuan 2016	Connective tissue diseases (Musculoskeletal pain)									
MA vs SA	Intensity of myofascia pain (<1 week after treatment) *	13		222		192	-1(-1.43,-0.57)		Moderate	
Ying Tang 2017	Obstetrics, gynecology and women's health (Postpartum lactating)									
MA vs SC	Increase in lactation success rate within 24 hours post-delivery	5	165	279	73	278		2.24(1.58,3.17)	Moderate	380 more per 1,000(from 178 more to 666 more)
Moderate Effect										
Qi-ling Yuan 2016	Connective tissue diseases (Musculoskeletal pain)									
MA vs SA	Intensity of neck pain (<1 week after treatment)*	6		213		200	-0.42(-0.62,-0.22)		High	
MA vs SA	Intensity of shoulder pain (<1 week after treatment)*	5		262		233	-0.63(-0.91,-0.36)		High	
Tong Li 2019	Neurology (Vascular dementia)									
MA vs WM	Severity of dementia symptoms	6		265		265	0.53(0.29,0.76)		Moderate	
Kim Jiwon 2019	Connective tissue diseases (Fibromyalgia syndrome)									
MA/EA vs SA	Intensity of pain *	11		242		317	-0.49(-0.79,-0.2)		Moderate	
Yun-xia Li 2018	Connective tissue diseases (Non-specific low back pain)									
MA vs SA	Intensity of pain (within 1 week to 3 months after treatment) *	5		686		614	-0.47(-0.77,-0.17)		Moderate	
Jinzhong 2017	Ear, nose, and throat disorders (Allergic rhinitis)									
MA vs SA	Severity of nasal symptoms *	4		198		194	-0.47(-0.67,-0.27)		Moderate	

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; SC: standard care; NRT: nicotine replacement therapy; WM: western medicine; RH: rehabilitation. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 4 Large or moderate effects with high or moderate certainty evidence

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tevent	Tsample	Cevent	Csample	SMD(95%CI)	RR(95%CI)	CoE	ARR(95% CI)
Large Effect										
Kai-Bo Chen 2019	Periprosthetic care (Postoperative ileus after abdominal surgery)									
EA vs SC	Time to first flatus *	14		470		456	-1.1(-1.54,-0.65)		Low	
EA vs SC	Time to first defecation *	12		407		396	-0.84(-1.29,-0.39)		Low	
Shaonan Liu 2019	Neurology (Post-stroke shoulder-hand syndrome)									
EA+RH vs RH	Intensity of pain *	7		258		254	-0.94(-1.48,-0.41)		Low	
Wenjuan Fan 2020	Neurology (Post-stroke spastic hemiplegia)									
EA vs RH	Improved motor function	1		40		40	0.78(0.32,1.23)		Low	
MA+RH vs RH	Severity of spasm symptoms	6		204		205	-1.07(-1.84,-0.29)		Low	
Alexander Waits 2016	Neurology (Insomnia disorder)									
MA vs SA	Sleep quality (within 3 to 4 weeks) *	7		199		186	-1.01(-1.38,-0.65)		Low	
Wenfeng Song 2018	Neurology (Sleep quality in hemodialysis patients)									
MA vs SA	Sleep quality *	7		261		261	-0.81(-1.25,-0.36)		Low	
Guangcai Zhang 2016	Neurology (Perimenopausal sleep disorder)									
MA vs SA	Sleep quality *	1		9		9	-2.49(-3.8,-1.19)		Low	
William Gibson 2017	Neurology (Neurogenic pain)									
TENS vs SA	Intensity of pain *	5		94		80	-0.96(-1.27,-0.64)		Low	
Boram Lee 2018	Neurology (Autism spectrum disorder in children)									
MA vs BEI+ MT	Symptoms improvement *	2		70		68	-1.87(-3.21,-0.53)		Low	
Jia Xu 2018	Neurology (Migraine without aura)									
AA/MA vs SA	Intensity of pain *	4		103		103	-0.8(-1.18,-0.43)		Low	
Yin Jiang 2018	Neurology (Migraine)									
MA vs SA	Quality of life (<1 month after treatment, role function-restrictive)	6		143		105	2.62(1.21,4.04)		Low	
MA vs SA	Quality of life (<1 month after treatment, role function-preventive)	6		143		105	0.75(0.18,1.33)		Low	
MA vs SA	Quality of life (<1 month after treatment, emotional function)	6		143		105	0.72(0.11,1.32)		Low	
Gwang-Ho Choi 2019	Neurology (Carpal tunnel syndrome)									
MA vs SA	Intensity of pain (at week 4 after randomization)*	1		13		13	-1.14(-1.98,-0.3)		Low	
Xinqiang Ni 2017	Neurology (Tic disorder)									
EA vs WM	Severity of tics symptom *	22		757		488	-1.29(-1.87,-0.7)		Low	
Mei Ji 2015	Connective tissue diseases (Sciatica)									
MA/EA vs WM	Intensity of pain *	3		121		120	-0.72(-0.98,-0.46)		Low	
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)									
MA/EA vs WM	Quality of life	3		100		97	1.19(0.88,1.5)		Low	
MA vs WM	Symptoms improvement *	2		84		84	-1.27(-1.89,-0.65)		Low	
Junjun Li 2020	Genitourinary disorders (Chronic prostatitis)									
MA/EA vs SA	Intensity of pain *	4		135		137	-0.79(-1.25,-0.33)		Low	
MA/EA vs SA	Severity of voiding symptoms*	5		165		165	-0.87(-1.10,-0.64)		Low	
MA/EA vs SA	Quality of life *	4		120		120	-0.82(-1.13,-0.50)		Low	
Jian-Hua Wang 2019	Mental health (Smoking cessation)									
MA vs NI	Improved abstinence rate (short-term)	1	43	224	18	222	2.37(1.41,3.97)		Low	111 more per 1,000(from 33 more to 241 more)
MA vs NI	Improved abstinence rate (long-term)	2	40	355	15	353	2.66(1.54,4.7)		Low	165 more per 1,000(from 50 more to 367 more)
Zhihan Chen 2018	Mental health (Opioid use disorder)									
EA vs NI	Severity of opioid craving *	1		60		30	-1.26(-1.73,-0.78)		Low	
EA vs NI	Severity of depression *	2		120		60	-1.5(-1.85,-1.15)		Low	
Yu-Mei Zhong 2019	Nutrition and metabolic disorders (Simple obesity)									
MA/EA/AA vs SA	Body mass index	10		229		212	1.11(0.67,1.56)		Low	
Ying Tang 2017	Obstetrics, gynecology and women's health (Postpartum lactating)									
MA vs SC	Success rate of lactation within 24 hours after delivery	2	40	140	19	140	2.11(1.29,3.43)		Low	357 more per 1,000(from 93 more to 783 more)
MA vs SC	Success rate of lactation within 72 hours after delivery	7	213	502	109	478	2.37(1.33,4.22)		Low	464 more per 1,000(from 112 more to 1,000more)
Yanjuan Song 2019	Obstetrics, gynecology and women's health (Chronic pelvic pain syndrome)									
MA/EA vs WM	Overall symptoms improvement *	8		288		289	0.89(0.5,1.28)		Low	
Caroline A Smith 2016	Obstetrics, gynecology and women's health (Dysmenorrhea)									
MA vs WM	Intensity of pain *	11		385		336	-0.93(-1.39,-0.47)		Low	
Liu Yun 2019	Severity of menstrual symptoms*	6		260		180	-1.07(-1.51,-0.62)		Low	
MA/AA vs WM	Pregnancy or intended pregnancy (Infertility)									
Juan Zhu 2019	Periprosthetic care (Postoperative pain)									
EA/TENS vs SA	Intensity of postoperative pain on movement or cough *	3	42	97	16	97	2.63(1.6,4.32)		Low	450 more per 1,000(from 441 more to 916 more)
Lawrence Chen 2017	Oncology (Aromatase Inhibitor-induced arthralgia in breast cancer)									
MA vs PL	Intensity of most treatment pain (worst pain at 3-4weeks) *	1		20		18	-0.71(-1.37,-0.05)		Very low	
Pei Lixia 2019	Oncology (Breast cancer)									
AA vs SC	Quality of life*	1		36		36	-1.21(-1.72,-0.71)		Very low	
Shaonan Liu 2019	Neurology (Post-stroke shoulder-hand syndrome)									
MA+RH vs RH	Improved motor function (upper limb)	22		935		916	1.01(0.75,1.27)		Very low	
MA+RH vs RH	Intensity of pain *	17		701		683	-1.66(-2.12,-1.2)		Very low	
Sang-Ho Kim 2019	Neurology (Insomnia disorder)									
MA vs WM	Sleep quality (within 14 to 74 days after treatment) *	4		171		168	-1.26(-1.85,-0.68)		Very low	
Guangcai Zhang 2016	Neurology (Perimenopausal sleep disorder)									
MA vs WM	Sleep quality *	1		52		52	-1.81(-2.27,-1.35)		Very low	
Jia Xu 2018	Neurology (Migraine without aura)									
MA vs SA	Frequency of migraine symptom *	3		120		120	-0.76(-1.43,-0.09)		Very low	
MA vs WM	Frequency of migraine symptom *	2		110		110	-2.13(-3.52,-0.74)		Very low	
Gwang-Ho Choi 2019	Neurology (Carpal tunnel syndrome)									
MA vs WM	Intensity of pain (at week 5 after randomization)*	1		25		25	-1.05(-1.64,-0.45)		Very low	
Eric Manheime, Ke Cheng 2018	Connective tissue diseases (Hip osteoarthritis)									
EA vs WM	Increased function	1		30		30	0.95(0.42,1.49)		Very low	
Wang Kaifu 2019	Connective tissue diseases (Postmenopausal osteoporosis)									
MA vs WM	Intensity of pain *	2		70		70	-0.74(-1.08,-0.39)		Very low	
Jiaojun He 2019	Ear, nose, and throat disorders (Meniere's disease)									
MA vs WM	Severity of dizziness *	2		46		40	-1.88(-3.06,-0.7)		Very low	
Lizhong Yu 2019	Eye disorders (Xerophthalmia)									
MA/EA vs WM	Symptoms improvement *	7		290		294	-1.23(-2.08,-0.38)		Very low	
Yao Tian 2017	Gastrointestinal disorders (Peptic ulcer)									
MA vs WM	Reduced risk of recurrence *	2	5	31	16	34	0.35(0.14,0.84)		Very low	495 fewer per 1,000(from 655 fewer to 122 fewer)
Kun Hyung Kim 2018	Gastrointestinal disorders (Symptomatic gastroparesis)									
MA vs SA	Symptoms improvement (within 4 to 12 weeks after treatment)	5		180		180	-1.41(-1.66,-1.15)		Very low	
Xindong Qin 2020	Genitourinary disorders (Urinary infection)									
MA vs NI	Reduced risk of recurrence *	2	25	94	28	41	0.39(0.26,0.58)		Very low	322 fewer per 1,000(from 391 fewer to 222 fewer)
MA vs SA	Reduced risk of recurrence *	1	7	27	15	26	0.45(0.22,0.92)		Very low	375 fewer per 1,000(from 532 fewer to 55 fewer)
Junjun Li 2020	Genitourinary disorders (Chronic prostatitis)									
MA/EA vs WM	Overall symptoms improvement *	6		181		176	-0.99(-1.59,-0.39)		Very low	
MA/EA vs SA	Overall symptoms improvement *	5		164		165	-1.53(-1.92,-1.14)		Very low	
Kun Hyung Kim 2016	Genitourinary disorders (Chronic kidney disease)									
TENS vs UC	Severity of depression *	1		36		35	-0.72(-1.2,-0.24)		Very low	
Charlotte Southern 2016	Mental health (Alcohol use disorder)									
MA/EA/AA vs SA	Severity of alcohol craving *	5		127		100	-1(-1.79,-0.21)		Very low	
Zhihan Chen 2018	Mental health (Opioid use disorder)									
EA vs SA	Severity of depression *	2		120		60	-1.07(-1.88,-0.25)		Very low	
Wei Li 2019	Mental health (Postpartum depression)									
MA vs WM	Severity of depression *	4		112		111	-1.54(-2.92,-0.15)		Very low	
Sean Grant 2018	Mental health (Posttraumatic Stress Disorder)									
MA vs NI	Improved functional status (post-intervention)*	1		29		27	-0.83(-1.38,-0.29)		Very low	
MA vs NI	Improved functional status (follow-up for 3 months)*	1		29		27	-0.97(-1.53,-0.42)		Very low	
Qing Zhang 2018	Mental health (Chronic fatigue syndrome)									
MA vs SA	Reduced mental fatigue *	3		113		108	-1.99(-3.67,-0.31)		Very low	
Eun-Young Nam 2018	Obstetrics, gynecology and women's health (Menopausal hot flashes)									
MA vs NI	Frequency of hot flash symptom (≥12 weeks after treatment started)*	3		282		159	-0.7(-1.03,-0.36)		Very low	
Weihan Li 2017	Obstetrics, gynecology and women's health (Menopausal syndrome)									
MA vs SA	Symptoms improvement-at end of treatment *	6		240		179	-1.52(-1.77,-1.28)		Very low	
MA vs SA	Symptoms improvement-within 1 to 3 months after treatment *	5		213		153	-1.05(-1.28,-0.82)		Very low	
Caroline A Smith 2020	Obstetrics, gynecology and women's health (Pain during labour)									
MA/EA vs SA	Intensity of pain *	4		249		246	-1.31(-2.14,-0.49)		Very low	
EA vs NI	Intensity of pain *	1		82		81	-0.96(-1.28,-0.63)		Very low	
MA vs SA	Intensity of pain *	6		208		264	-1.12(-1.84,-0.41)		Very low	
MA vs UC	Intensity of pain *	8		341		279	-1.07(-1.45,-0.69)		Very low	

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENS: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western medicine; BEI: behavioral and educational interventions; RH: rehabilitation; MT: music therapy. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 5 Large effects with low or very low certainty evidence

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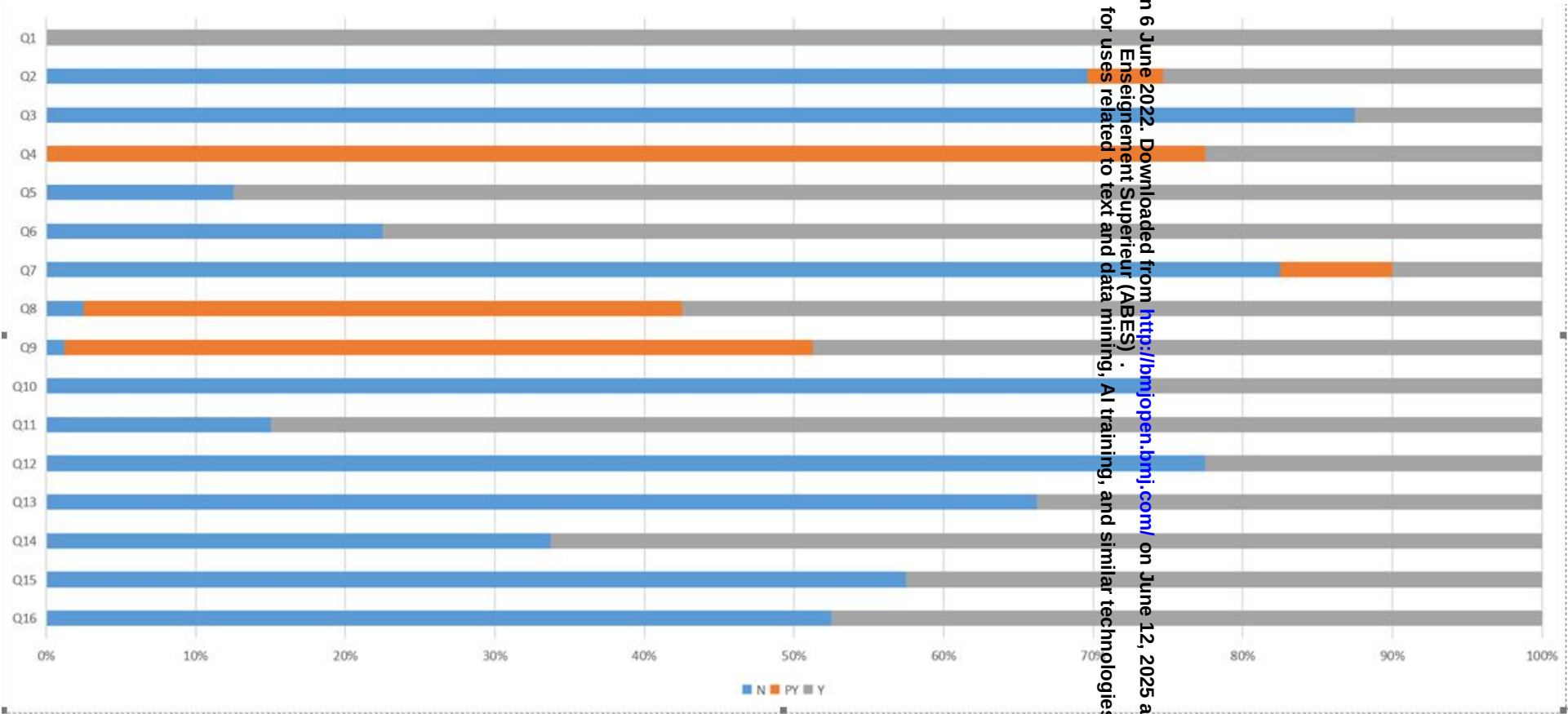


Figure 6 Methodological quality: evaluation results of each AMSTAR2 question of included studies.
Note. Y, yes; PY, partial yes; N, no.

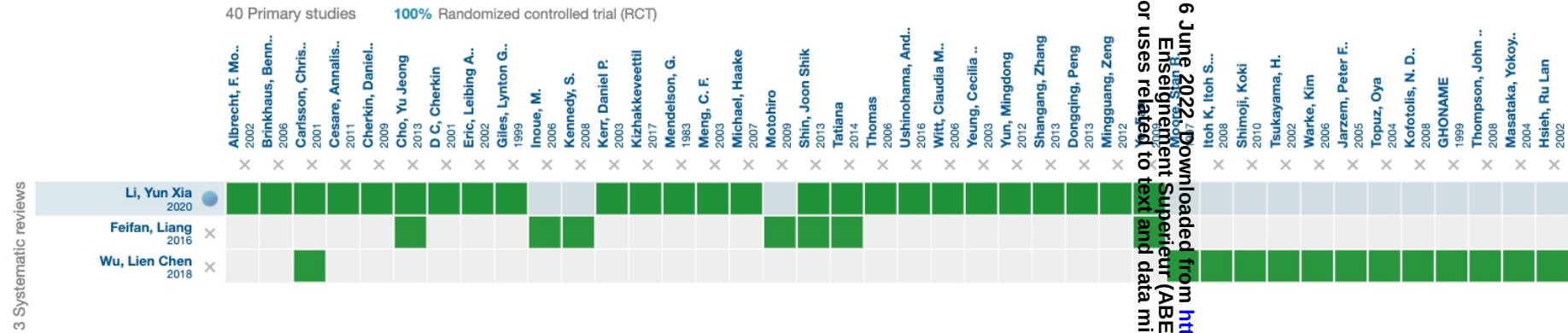


Figure 7 Digitized matrix: Acupuncture for Non-specific low back pain

3 Systematic reviews

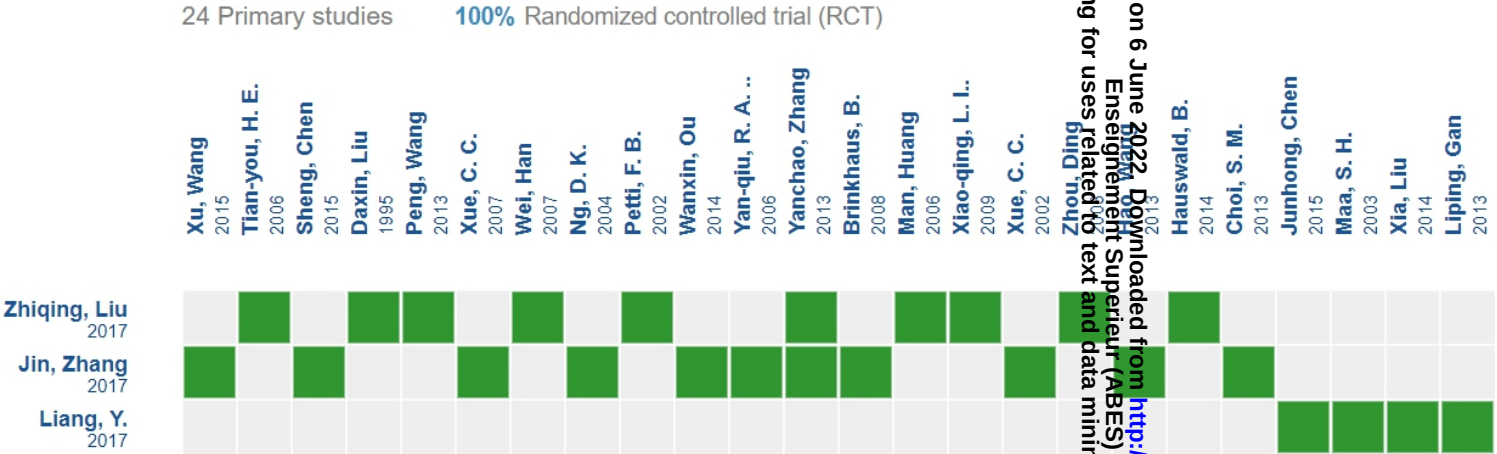


Figure 8 Digitized matrix: Acupuncture for Rhinitis

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tsample	Csample	SMD(95%CI)	CoE
Moderate Effect						
Lu Jing 2018	Periprocedural care (Breast cancer)					
MA/EA vs WM	Severity of hot flashes after breast cancer surgery*	2	115	135	-0.61(-0.87,-0.36)	Low
MA vs NI	Severity of hot flashes after breast cancer surgery (follow-up for 3 months)*	1	85	105	-0.44(-0.73,-0.15)	Low
Wei-Wei Tao 2016	Oncology (Symptom management of cancer)					
MA vs SC	Severity of nausea and vomit *	2	166	162	-0.48(-0.7,-0.26)	Low
Wenjuan Fan 2020	Neurology (Post-stroke spastic hemiplegia)					
MA vs RH	Improved motor function	12	443	441	0.4(0.14,0.65)	Low
MA+RH vs RH	Improved activities of daily living	24	888	893	0.67(0.42,0.92)	Low
Boram Lee 2018	Neurology (Autism spectrum disorder in children)					
MA vs BEI	Symptoms improvement *	2	53	54	-0.52(-0.91,-0.13)	Low
Kim Jiwon 2019	Connective tissue diseases (Fibromyalgia syndrome)					
MA/EA vs SA	Sleep Quality *	3	86	84	-0.46(-0.75,-0.18)	Low
Yun-xia Li 2018	Connective tissue diseases (Non-specific low back pain)					
MA vs NI	Intensity of pain *	2	1490	1318	-0.69(-0.99,-0.38)	Low
Lu Wang 2020	Gastrointestinal disorders (Functional Constipation)					
MA vs SA	Improved complete spontaneous bowel symptom	3	584	587	0.49(0.38,0.61)	Low
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)					
MA/EA vs WM	Symptoms improvement *	4	216	216	0.47(0.27,0.66)	Low
Charlotte Southern 2016	Mental health (Alcohol use disorder)					
EA/AA vs SA	Reduced alcohol withdrawal symptoms*	1	50	50	-0.54(-0.93,-0.14)	Low
Caroline A Smith 2018	Mental health (Depression)					
MA vs NI	Severity of depression at the end of treatment*	5	217	241	-0.56(-0.98,-0.15)	Low
Eun-Young Nam 2018	Obstetrics, gynecology and women's health (Menopausal hot flashes)					
MA vs NI	Frequency of hot flash symptom (4 weeks after treatment started)*	1	116	59	-0.47(-0.78,-0.15)	Low
Juan Zhu 2019	Periprocedural care (Postoperative pain)					
EA/AA vs SA	Intensity of resting pain at 24 h *	26	556	532	-0.64(-0.89,-0.38)	Very low
Yongjun ZHU 2017	Periprocedural care(Total knee arthroplasty)					
TENs vs SA	Severity of pain 24h after operation *	2	51	51	-0.47(-0.87,-0.08)	Very low
Cuihua Yang 2018	Neurology (Senile insomnia)					
MA vs WM	Sleep quality*	5	153	148	-0.46(-0.89,-0.03)	Very low
Hwan Kim 2019	Neurology (Mild cognitive impairment)					
EA vs WM	Improved Cognitive function	5	131	134	0.4(0.16,0.65)	Very low
Eric Manheime, Ke Cheng 2018	Connective tissue diseases (Hip osteoarthritis)					
EA vs WM	Intensity of pain *	1	30	30	-0.64(-1.16,-0.12)	Very low
MA vs SA	Quality of life (emotional) during treatment *	1	32	30	-0.56(-1.07,-0.05)	Very low
Lu Wang 2020	Gastrointestinal disorders (Functional Constipation)					
MA vs SA	Severity of constipation symptoms *	4	387	214	-0.4(-0.78,-0.03)	Very low
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)					
MA/EA vs WM	Symptoms improvement *	4	145	141	-0.66(-0.9,-0.42)	Very low
Kun Hyung Kim 2016	Genitourinary disorders (Chronic kidney disease)					
MA vs UC	Severity of depression *	3	63	65	-0.44(-0.79,-0.09)	Very low
MA vs UC	Sleep quality*	4	92	88	-0.55(-0.96,-0.14)	Very low

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; CI: confidence interval; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENs: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western medicine; BEI: behavioral and educational interventions; RH: rehabilitation. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Appendix 1 Moderate effects with low or very low certainty evidence

Appendix 2. A list of excluded studies and reasons for exclusion

Number	Title	First author	Published year	Reason for exclusion
1	Clinical Efficacy of Acupuncture on Rheumatoid Arthritis and Associated Mechanisms: A Systemic Review.	Chou, PC	2018	No meta-analysis
2	Effectiveness of Acupuncture on Pain, Physical Function and Health-Related Quality of Life in Patients with Rheumatoid Arthritis: A Systematic Review of Quantitative Evidence.	Seca, S	2019	No meta-analysis
3	Meta-analysis of the therapeutic Effect of Treating Osteoarthritis with Filiform Needle	MA Jia-jian	2016	Acupuncture combined with other therapies
4	Meta-analysis of Clinical Effect of Acupuncture and Moxibustion on Osteoarthritis/Osteodystrophy	Feng Peng	2019	Acupuncture combined with other therapies
5	A Meta-analysis of Improving the Function of Knee Osteoarthritis with Traditional Chinese Manipulation and Acupuncture	YU Saijun	2018	Acupuncture combined with other therapies
6	Meta-analysis of Acupuncture and Moxibustion for Treatment of Osteoarthritis/Osteodystrophy	Hu Hanjiao	2016	Acupuncture combined with other therapies
7	Acupuncture for Knee Osteoarthritis Relief in the Elderly: A Systematic Review and Meta-analysis.	Gong, Zidan	2019	Acupuncture combined with other therapies
8	Meta-analysis of the Effect of Acupuncture and Moxibustion on Knee Osteoarthritis Based on the theory of Meridians and Tendons	Yu Junfei	2018	Control interventions did not meet the inclusion criteria
9	Effect of Acupuncture on Gonarthromenitis: A Systematic Review	Guo, Wei	2020	Acupuncture combined with other therapies
10	Update on the Clinical Effect of Acupuncture therapy in Patients with Gouty Arthritis: Systematic Review and Meta-analysis.	Lu, W W	2016	Acupuncture combined with other therapies

11	Curative Effect of Acupuncture for Gouty Arthritis: Meta-analysis	LIU Chang	2015	No detailed information on intervention or outcome
12	Acupuncture and Moxibustion for Primary Osteoporosis: An Overview of Systematic Review	Xu, G	2020	Acupuncture combined with other therapies
13	Meta Analysis of Acupuncture Treatment of Primary Osteoporosis	CHEN Jinfe ng	2018	Acupuncture combined with other therapies
14	Meta-analysis of the therapeutic Effect of Acupuncture on Postmenopausal Osteoporosis and Acupoint Selection Method	XIAO Li	2016	Acupuncture combined with other therapies
15	A Systematic Review of Acupuncture and Moxibustion for the Treatment of Lumbar Disc Herniation Caused by Sciatica	Liu Jiaying	2015	No meta-analysis
16	Systematic Evaluation and Meta-analysis of Acupuncture Treatment for Residual Pain after Lumbar Disc Herniation	LI Kai-min g	2020	Acupuncture combined with other therapies
17	Assessment of Methodological Quality and Reporting Quality of Systematic Reviews / Meta-analyses of Acupuncture for Sciatica	TAN Hui-juan	2015	Acupuncture combined with other therapies
18	Efficacy of Acupressure for Chronic Low Back Pain: A Systematic Review.	Godley, Erica	2020	No meta-analysis
19	Effect of Acupuncture on Pregnancy Related Low Back Pain and Pelvic Pain: A Systematic Review and Meta-analysis.	Yao, X	2017	Full text unavailable
20	Meta Analysis of Acupuncture and Moxibustion Treatment for Endometriosis	Xiao Xiaowen	2017	Acupuncture combined with other therapies
21	Is Acupuncture Effective in the Treatment of Pain in Endometriosis?.	Lund, I	2016	No meta-analysis
22	Efficacy and Safety of Acupuncture Combined with Moxibustion in the Treatment of Chronic Fatigue Syndrome: A Systematic Review	Hu Yue	2020	Acupuncture combined with other therapies
23	A Meta-analysis of Acupuncture and Mox	LUO Xiao-	2017	Acupuncture

	ibustion therapy for Scapulohumeral Peria rthritis	zhou		combined with other t herapies
24	A Systematic Review on Clinical Study o f the Frozen Shoulder Treated with Three Shoulder Needles	TANG Hon gliang	2015	Acupuncture combined with other t herapies
25	Acupuncture for Recovery after Surgery i n Patients Undergoing Colorectal Cancer Resection: a Systematic Review and Meta -analysis.	Kim, K H	2016	Acupuncture combined with other t herapies
26	Effects of Acupuncture on Menopause-Rel ated Symptoms in Breast Cancer Survivor s: A Meta-analysis of Randomized Contro lled Trials.	Chiu, H Y	2016	Acupuncture intervention s did not m eet the incl usion criteri a
27	Effects of Acupuncture on Breast Cancer- Related Lymphoedema: A Systematic Rev iew and Meta-analysis.	Yu, S	2019	Acupuncture intervention s did not m eet the incl usion criteri a
28	Acupuncture in Medicine: Journal of the British Medical Acupuncture Society	Zhang, X	2019	Acupuncture intervention s did not m eet the incl usion criteri a
29	Acupuncture for Treating Hot Flashes in Breast Cancer Patients: An Updated Meta -analysis.	Salehi, A	2016	Acupuncture intervention s did not m eet the incl usion criteri a
30	Meta-analysis of Application of Transcuta neous Electrical Acupoint Stimulation in Breast Cancer Surgery	FU Sisi	2020	No detailed information on interven tion or outc ome
31	Meta-analysis of Acupuncture Improving Quality of Life of Patients with Breast C ancer	PEI Lixia	2019	Acupuncture intervention s did not m eet the incl

				usion criteri a
32	Effect of Acupressure on Chemotherapy-Induced Nausea and Vomiting of Breast Cancer Patients: A Meta-analysis	Yan Meiyu	2018	No detailed information on intervention or outcome
33	The Effects of Auricular therapy for Cancer Pain: A Systematic Review and Meta-analysis.	Yang, Yulan	2020	Control interventions did not meet the inclusion criteria
34	Systematic Review and Meta-analysis of Acupuncture to Reduce Cancer-Related Pain.	Chiu, H Y	2017	Acupuncture interventions did not meet the inclusion criteria
35	Acupuncture for Pain Management in Cancer: A Systematic Review and Meta-analysis.	Hu, C	2016	Acupuncture interventions did not meet the inclusion criteria
36	A Systematic Review and Meta-analysis of the Efficacy of Acupuncture and Electroacupuncture Against Chemotherapy-Induced Peripheral Neuropathy.	Hwang, M S	2020	No patient important outcome
37	The Efficacy of Acupuncture in Chemotherapy-Induced Peripheral Neuropathy: Systematic Review and Meta-analysis.	Chien, T J	2019	Acupuncture combined with other therapies
38	Acupuncture in Adults with Chemotherapy-Induced Peripheral Neuropathy: a Systematic Review.	Baviera, A F	2019	Acupuncture combined with other therapies
39	Meta-analysis of Electroacupuncture for Chemotherapy-Induced Peripheral Neuropathy	KUANG Bi yao	2019	Acupuncture interventions did not meet the inclusion criteria
40	The Effects of Acupressure on Chemotherapy-Induced Nausea and Vomiting: A Met	Wu, Ting	2020	Acupuncture intervention

	a-analysis			s did not meet the inclusion criteria
41	Effect of Neiguan Acupoint Pressure on Improving Chemotherapy-Induced Nausea and Vomiting in Cancer Patients: A Meta-analysis	CHEN Feng	2020	No detailed information on intervention or outcome
42	Meta-analysis of Acupuncture Treatment for Gastrointestinal Reaction after Chemotherapy of Tumor	HU Ya-cai	2017	Acupuncture interventions did not meet the inclusion criteria
43	Acupuncture on Treating Angina Pectoris: A Systematic Review.	Wang, J S	2020	No detailed information on intervention or outcome
44	Acupuncture and Related therapies Used As Add-on to Conventional Treatments for Heart Failure: A Systematic Review of Pairwise and Network Meta-analyses	Yang, Fengwen	2018	Acupuncture combined with other therapies
45	Acupuncture on Treating Angina Pectoris: A Systematic Review.	Wang, J S	2020	No detailed information on intervention or outcome
46	Meta-analysis of the therapeutic Effect of Acupuncture on Stable Angina Pectoris	ZHOU Jianhua	2018	Acupuncture combined with other therapies
47	Effectiveness of Acupuncture for Angina Pectoris: A Systematic Review of Randomized Controlled Trials.	Yu, C	2015	Acupuncture combined with other therapies
48	Acupuncture therapy for the Treatment of Stable Angina Pectoris: An Updated Meta-analysis of Randomized Controlled Trials.	Liu, Y	2019	Acupuncture interventions did not meet the inclusion criteria
49	Meta-analysis of Acupuncture therapy for	Chen, M	2015	Acupuncture

	the Treatment of Stable Angina Pectoris.			interventions did not meet the inclusion criteria
50	Meta-analysis of Acupuncture therapy for the Treatment of Stable Angina Pectoris.	Zhang, Z.	2015	Acupuncture interventions did not meet the inclusion criteria
51	Acupuncture As An Adjunctive Treatment for Angina Due to Coronary Artery Disease: A Meta-analysis.	Huang, X	2019	Control interventions did not meet the inclusion criteria
52	Acupuncture for Perioperative Care of Total Hip Arthroplasty: A Systemic Review of Controlled Trials and Meta-analysis.	Shin H	2019	No detailed information on intervention or outcome
53	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
54	Acupuncture therapy for Essential Hypertension: A Network Meta-analysis.	Tan, X	2019	No patient important outcome
55	Acupuncture for Essential Hypertension: A Meta-analysis	G., C Xiao	2015	No patient important outcome
56	Conventional Acupuncture for Cardiac Arrhythmia: A Systematic Review of Randomized Controlled Trials.	Liu, J	2018	No detailed information on intervention or outcome
57	Acupuncture-Related Cardiac Complications: A Systematic Review.	Ullah, W	2019	No detailed information on intervention or outcome
58	A Meta-analysis of the Effectiveness of Acupuncture on Chd	Sun Yang	2019	Acupuncture interventions did not meet the incl

				usion criteri a
59	Systematic Review on Treatment of Peri menopausal Syndrome with Electroacupun cture and Hormone Replace	CHENG Xi ao-ling	2018	No patient i mportant ou tcome
60	Comparison System Evaluation on Acupu ncture and Western Medicine Effect in th e Treatment of Perimenopausal Syndrome	LAI Bin	2017	No patient i mportant ou tcome
61	Systematic Review of Auricular-Plaster th erapy for Treatment of Perimenopausal S yndrome	Jin Huali	2017	No patient i mportant ou tcome
62	Acupuncture Versus Hormone Replacemen t therapy for Menopause Syndrome: A M eta-analysis	MENG Fan g	2016	No patient i mportant ou tcome
63	Systematic Evaluation of the Efficacy of Acupuncture on Perimenopausal Syndrom e	CAO Zheng -liang	2015	Acupuncture intervention s did not m eet the incl usion criteri a
64	Effectiveness of Traditional Chinese Acup uncture Versus Sham Acupuncture: A Syst ematic Review.	Carlos, L	2016	No meta-an alysis
65	Acupuncture in Sham Device-Controlled Trials May Not Be As Effective As Acupu ncture in the Real World: A Preliminary Network Meta-analysis of Studies of Ac upuncture for Hot Flashes in Menopausal Women.	Kim, T H	2020	Control inte rventions di d not meet the inclusio n criteria
66	Acupuncture for Menopausal Hot Flashes.	Weihua, L	2015	Acupuncture intervention s did not m eet the incl usion criteri a
67	Effects of Acupuncture on Menopause-Rel ated Symptoms and Quality of Life in W omen on Natural Menopause: A Meta-ana lysis of Randomized Controlled Trials.	Chiu, H Y	2015	Acupuncture intervention s did not m eet the incl usion criteri a
68	Acupuncture to Reduce Sleep Disturbance s in Perimenopausal and Postmenopausal Women: A Systematic Review and Meta-	Chiu, H Y	2015	Acupuncture intervention s did not m

	analysis.			meet the inclusion criteria
69	Systematic Evaluation of Acupuncture Treatment of Perimenopausal Sleep Disorder Based on Grade	Zhang Guang-Cai	2016	Control interventions did not meet the inclusion criteria
70	Safety and Effectiveness of Acupuncture for Women Emotional Disorders in Perimenopause: A Systematic Review	WANG Yingying	2018	Control interventions did not meet the inclusion criteria
71	Massage, Reflexology and Other Manual Methods for Pain Management in Labor	Smith, C A	2018	Acupuncture interventions did not meet the inclusion criteria
72	Meta-analysis of the Effects of Acupressure During Labor.	Santiago-Vasco, M	2017	Full text unavailable
73	Meta-analysis of the Effect of Acupressure on Duration of Labor and Mode of Delivery.	Makvandi, S	2016	No patient important outcome
74	Effects of Acupressure in Labor: A Meta-analysis.	Bejar, C	2016	Full text unavailable
75	Acupuncture Performed Around the Time of Embryo Transfer: A Systematic Review and Meta-analysis.	Smith, C A	2019	Acupuncture interventions did not meet the inclusion criteria
76	Therapeutic Effect of Acupuncture on the Outcomes of in Vitro Fertilization: A Systematic Review and Meta-analysis.	Qian, Y	2017	Acupuncture interventions did not meet the inclusion criteria
77	Effects of Acupuncture on Pregnancy in Patients Undergoing in Vitro Fertilization and Embryo Transfer: A Systematic Review of Randomized Controlled Trials	YANG Hui-sheng	2017	Acupuncture combined with other therapies
78	The Role of Acupuncture in In Vitro Fertilization: A Systematic Review and Meta-	Shen, C	2015	No patient important outcome

	analysis.			tcome
79	Interventions for Heartburn in Pregnancy.	Phupong, V	2015	Acupuncture intervention s did not meet the inclusion criteria
80	Treatments for Breast Engorgement During Lactation	Mangesi, Lindaka	2016	Acupuncture intervention s did not meet the inclusion criteria
81	Effects of Acupuncture for the Treatment of Endometriosis-Related Pain: A Systematic Review and Meta-analysis.	Xu, Y	2017	Control interventions did not meet the inclusion criteria
82	Meta-analysis of Acupuncture and Moxibustion Treatment for Endometriosis	Xiao Xiaowen	2017	Acupuncture intervention s did not meet the inclusion criteria
83	Network Meta-analysis on the Effects of the Acupuncture-Related therapy on Ovulation Rate and Pregnancy Rate in Patients with Polycystic Ovary Syndrome.	Song, Y J2019	2019	No patient important outcome
84	Systematic Review of Acupuncture in Treatment of Polycystic Ovary Syndrome in China	ZHENG Shuzhen	2019	No patient important outcome
85	Effectiveness of Acupuncture in Women with Polycystic Ovarian Syndrome Undergoing in Vitro Fertilization Or Intracytoplasmic Sperm Injection: A Systematic Review and Meta-analysis.	Jo, J	2017	No patient important outcome
86	Acupuncture for Polycystic Ovarian Syndrome: A Systematic Review and Meta-analysis.	Jo, J	2017	Acupuncture combined with other therapies
87	Effect of Acupuncture on Premenstrual Syndrome: A Meta-analysis	LIU Lihong	2019	Acupuncture combined with other therapies

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88	Systematic Evaluation and Meta-analysis of Acupuncture-Moxibustion Alone in Treating Premature Ovarian Failure	ZHANG Jin-Huan	2020	Acupuncture interventions did not meet the inclusion criteria
89	Meta-analysis of the therapeutic Effect of Acupuncture on Premature Ovarian Failure	FAN Meiling	2018	No patient important outcome
90	Systematic Review and Meta-analysis of Efficacy of Acupuncture in the Treatment of Premature Ovarian Failure	LUO Xi	2016	No patient important outcome
91	Meta-analysis the Effect of Acupuncture in Treating Premature Ovarian Failure	PANG Yong	2016	No patient important outcome
92	Effect of Acupuncture therapy on Chronic Pelvic Inflammatory Disease: A Meta-analysis	HE Ting	2019	Acupuncture combined with other therapies
93	Systematic Review and Meta-analysis of Acupuncture Intervention on Hot Flashes in Patients with Breast Cancer	Tao Weiwei	2019	Acupuncture interventions did not meet the inclusion criteria
94	Short-and Medium-Clinical Effect of Acupuncture in Treating Hot Flashes in Patients with Breast Cancer: A Meta-analysis	Lu Jing	2018	Acupuncture combined with other therapies
95	A Meta-analysis of Treating Primary Dysmenorrhea by Acupuncture	Liu Guodong	2019	Acupuncture interventions did not meet the inclusion criteria
96	Meta-analysis of Clinical Literature on Acupuncture and Moxibustion for Primary Dysmenorrhea	Qin Yanping	2017	Control interventions did not meet the inclusion criteria
97	Meta-analysis of Auricular Plaster therapy for Primary Dysmenorrhea	Wang Jing	2017	No patient important outcome
98	Meta-analysis of Acupuncture and Moxib	Liu Tian	2016	No patient i

	ustion for Treatment of Primary Dysmeno rrhea			mportant ou tcome
99	A Meta-analysis of Clinical Efficacy of A cupuncture on Dysmenorrhea	Quan Yubin	2016	No patient i mportant ou tcome
100	Systematic Review of Abdominal Acupun cture Treatment for Dysmenorrheal	HUANG Sh imin	2016	Acupuncture intervention s did not m eet the incl usion criteri a
101	Meta-analysis of Auricular Plaster therapy for Primary Dysmenorrhea	Wang Xian g	2016	No patient i mportant ou tcome
102	Meta-analysis of Primary Dysmenorrhea T reated by Acupuncture	LIN Han-m ei	2015	Control inte rventions di d not meet the inclusio n criteria
103	Meta-analysis of Clinical Literature on Ac upuncture-Based Treatment of Menstrual Disorders	Cai Weipin g	2018	Acupuncture combined with other t herapies
104	Systematic Review and Meta-analysis of Acupuncture in the Treatment of Prematu re Ovarian Dysfunction	Yin Yaqian	2020	No patient i mportant ou tcome
105	Acupuncture in Improving Endometrial R eceptivity: A Systematic Review and Met a-analysis.	Zhong, Y	2019	Acupuncture intervention s did not m eet the incl usion criteri a
106	Meta-analysis on the Effectiveness of Acu puncture and Moxibustion in Improving Endometrial Receptivity	Li Zheyun	2019	Control inte rventions di d not meet the inclusio n criteria
107	Meta-analysis on Acupuncture therapy for Improving Endometrial Receptivity	HU Qiulan	2017	No patient i mportant ou tcome
108	A Meta-analysis of Acupuncture and Mox ibustion for Luteinized Unruptured Follicl e Syndrome	ZHOU Jie	2017	Acupuncture combined with other t herapies

109	A Systematic Review on the Outcome of Transcutaneous Electrical Acupoint Stimulation in the Treatment of Ovarian Hyporesponsiveness	Wu Jiejie	2018	No patient important outcome
110	Acupuncture for in Vitro Fertilization In women with Poor Ovarian Response: A Systematic Review	Jang, S	2020	No meta-analysis
111	Acupuncture Or Acupressure for Induction of Labour	Smith, C. A.	2017	Acupuncture intervention s did not meet the inclusion criteria
112	Effectiveness of Acupuncture in Polycystic Ovary Syndrome: A Systematic Review and Meta-analysis of Randomized Controlled Trials	Wu, J.	2020	No patient important outcome
113	Acupuncture for Polycystic Ovarian Syndrome	Lim, C.	2019	No patient important outcome
114	Efficacy of Acupunctur Versus Western Medication for Premature Ovarian Failure: A Meta-analysis	Runzi Jian	2017	No patient important outcome
115	Meta-analysis of Acupuncture Treatment for Primary Ovarian Insufficiency	Tingting Zhao	2020	No patient important outcome
116	Acupuncture Treatment for Urinary Retention Following Spinal Cord Injury: A Meta-analysis	Cheng Jie	2018	Acupuncture combined with other therapies
117	Acupuncture for Chronic Urinary Retention due to Spinal Cord Injury: A Systematic Review.	Wang, J	2016	Acupuncture combined with other therapies
118	The Effect of Different Acupuncture therapies on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Network Meta-analysis of Randomized Controlled Trials.	Xiong, F	2019	Acupuncture combined with other therapies
119	The Impact of Acupuncture on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Meta-analysis.	Ma, R	2015	Acupuncture combined with other therapies
120	Electroacupuncture Treatment for Neuroge	FU Linhui	2019	Acupuncture

	nic Bladder after Spinal Cord Injury:A Meta-analysis			combined with other therapies
121	Systematic Evaluation of Acupuncture for the Treatment of Neurogenic Bladder Dysfunction after Spinal Cord Injury	WANG Jia-qi	2018	No meta-analysis
122	Acupuncture for the Effect and Safety of Neurogenic Bladder after Spinal Cord Injury:A Meta-analysis	FAN Xiao	2017	Acupuncture combined with other therapies
123	A Meta-analysis of the Effectiveness of Acupuncture in the Treatment of Epilepsy.	Deng, B W	2018	No patient important outcome
124	Non-Pharmacological Interventions for People with Epilepsy and Intellectual Disabilities.	Jackson, C F	2015	Acupuncture interventions did not meet the inclusion criteria
125	Transcutaneous Electrical Nerve Stimulation for Spasticity: A Systematic Review.	Fernández-Tenorio, E	2019	No meta-analysis
126	Systematic Review of Efficacy of TENS for Management of Central Pain in People with Multiple Sclerosis.	Sawant, A	2015	No Meta-analysis
127	Acupuncture for Obstructive Sleep Apnea (OSA) in Adults: A Systematic Review and Meta-analysis.	Wang, Liao yao	2020	Acupuncture interventions did not meet the inclusion criteria
128	Clinical Effect of Acupuncture therapy on Obstructive Sleep Apnea Hypopnea Syndrome: A Meta-analysis	JIAO Su-qi n	2018	Acupuncture interventions did not meet the inclusion criteria
129	The Clinical Effect of Acupuncture in the Treatment of Obstructive Sleep Apnea: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Lv, Z T	2016	No patient important outcome
130	Meta-analysis of Obstructive Sleep Apnea in Traditional Chinese Medicine	Zhang Ruizhi	2016	Acupuncture interventions did not meet the incl

				usion criteri a
131	Clinical Effectiveness of Ziwuliuzhu Acup uncture therapy for Insomnia: A Meta-ana lysis	Hu Yue	2019	Control inte rventions di d not meet the inclusio n criteria
132	A Meta-analysis of Randomized Controlle d Trials of Intradermal Needle for Insom nia	Ma Zengbin	2019	Control inte rventions di d not meet the inclusio n criteria
133	Meta-analysis and Systematic Review of Abdominal Acupuncture for Insomnia	Li Zhen	2019	Control inte rventions di d not meet the inclusio n criteria
134	Meta-analysis of Clinical Efficacy of Auri cular Acupoints in Treating Insomnia	LI Dong-sh uang	2019	Acupuncture combined with other t herapies
135	Eye Acupuncture in the Treatment of Ins omnia: a Systematic Review and Meta-an alysis of Randomized Controlled Trials	Liu Guangh ui	2018	Acupuncture intervention s did not m eet the incl usion criteri a
136	Systematic Review on Effect of Point Ma ssage in Treatment of Insomnia	Yu Mengyi ng	2017	No Meta-an alysis
137	Meta-analysis on the therapeutic Effect of Acupuncture in Treating Insomnia in Ch ina	LIU Weimi n	2017	Acupuncture intervention s did not m eet the incl usion criteri a
138	Meta-analysis of Clinical Effect of Acupu ncture and Moxibustion on Insomnia	Mao Nan	2016	Control inte rventions di d not meet the inclusio n criteria
139	Electro-acupuncture for Primary Insomnia and Psqi: A Systematic Review	WEI Xin-ra n	2016	Control inte rventions di d not meet the inclusio

				n criteria
140	Meta-analysis of Curative Effect on Acupuncture for Insomnia	GAO Xiyan	2015	Acupuncture interventions did not meet the inclusion criteria
141	Meta-analysis on Acupuncture Treatment of Insomnia	Chen Deyao	2015	Acupuncture interventions did not meet the inclusion criteria
142	Curative Effect of Acupuncture therapy for Insomnia of Yin Deficiency Type: A Meta-analysis	WANG Fei	2015	Acupuncture interventions did not meet the inclusion criteria
143	Effectiveness of Auricular Point therapy for Insomnia: A Meta-analysis	Yang Yuanyuan	2015	Control interventions did not meet the inclusion criteria
144	Meta-analysis of Auricular Point therapy on Insomnia	HUANG Lu	2015	Control interventions did not meet the inclusion criteria
145	Network Meta-analysis on Ear Acupuncture for Hemodialysis Patients with Insomnia	XU Ziqi	2019	Control interventions did not meet the inclusion criteria
146	Meta-analysis of the Effect of Auricular Point Plaster therapy on Insomnia in Patients with Perimenopausal Period	PENG Siqi	2020	Acupuncture combined with other therapies
147	Acupuncture to Reduce Sleep Disturbances in Perimenopausal and Postmenopausal Women: A Systematic Review and Meta-analysis.	Chiu, H Y	2016	Acupuncture combined with other therapies
148	Acupuncture to Treat Sleep Disorders in Postmenopausal Women: A Systematic Review	Bezerra, A G	2015	No Meta-analysis

	view.			
149	A Meta-analysis on Effectiveness of Acupuncture on Post-Stroke Insomnia	NIE Fenfen	2020	No patient important outcome
150	Meta-analysis of Auricular Acupuncture in the Treatment of Post-Stroke Insomnia	ZHANG Shuangmei	2019	Acupuncture interventions did not meet the inclusion criteria
151	Acupuncture for Insomnia after Stroke: a Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture interventions did not meet the inclusion criteria
152	Acupuncture for Insomnia in the Elderly: A Meta-analysis	Li Heng	2016	Acupuncture interventions did not meet the inclusion criteria
153	Acupuncture for Managing Cancer-Related Insomnia: A Systematic Review of Randomized Clinical Trials.	Choi, T Y	2017	Acupuncture interventions did not meet the inclusion criteria
154	Effect of Self-acupressure for Symptom Management: A Systematic Review	Song, H J	2015	No Meta-analysis
155	Meta-analysis of the Effect of Auricular Point Plaster therapy on Insomnia in Patients with Diabetes	ZHU Wenli	2018	Acupuncture combined with other therapies
156	Efficacy of Acupuncture-Moxibustion on Peripheral Facial Paralysis At Different Time Points: A Meta-analysis.	Jin, D D	2020	Control interventions did not meet the inclusion criteria
157	Electroacupuncture Is Effective for Peripheral Facial Paralysis: A Meta-analysis.	Wang, W H	2020	Control interventions did not meet the inclusion criteria

158	Compare the Efficacy of Acupuncture with Drugs in the Treatment of Bell's Palsy: A Systematic Review and Meta-analysis of Rcts.	Zhang, R	2019	Acupuncture interventions did not meet the inclusion criteria
159	Meta-analysis of Electroacupuncture Treatment for Peripheral Facial Paralysis During Acute Period	ZHU Yi-lin	2016	Acupuncture combined with other therapies
160	System Evaluation of the Clinical Literature of Peripheral Facial Paralysis Acupuncture Treatment	LI Jia	2015	No meta-analysis
161	Efficacy of Acupuncture for Bell's Palsy: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Li, P	2015	Acupuncture interventions did not meet the inclusion criteria
162	Meta-analysis of therapeutic Effect of Acupuncture and Moxibustion on Facial Paralysis	Zhang Ting	2015	Acupuncture combined with other therapies
163	Is Acupuncture An Effective Postherpetic Neuralgia Treatment? A Systematic Review and Meta-analysis.	Pei, W	2019	Acupuncture interventions did not meet the inclusion criteria
164	Acupuncture for Postherpetic Neuralgia: Systematic Review and Meta-analysis.	Wang, Y	2018	Acupuncture interventions did not meet the inclusion criteria
165	Acupuncture for Neuropathic Pain in Adults	Ju, Zi Yong	2017	Acupuncture interventions did not meet the inclusion criteria
166	Systematic Review of Electro-acupuncture in the Treatment of Neuropathic Pain	ZHOU Jie	2017	Acupuncture combined with other therapies

				herapies
167	Meta-analysis of Acupuncture in the Treatment of Pathogenic Motor Symptoms of Parkinson's Disease	ZHOU Jing	2020	Acupuncture combined with other therapies
168	Meta-analysis of Acupuncture for Parkinson's Disease	Liu Mohan	2019	Acupuncture combined with other therapies
169	Meta-analysis of Clinical Efficacy of Acupuncture in Treatment of Parkinson's Disease	Liu Yanhui	2018	Acupuncture combined with other therapies
170	Clinical Effectiveness of Acupuncture on Parkinson Disease: A Prisma-Compliant Systematic Review and Meta-analysis	Lee, S H	2017	Acupuncture combined with other therapies
171	The Effectiveness and Safety of Acupuncture for the Treatment of Myasthenia Gravis: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhang, X	2019	Acupuncture intervention did not meet the inclusion criteria
172	Scalp Acupuncture Treatment for Children's Autism Spectrum Disorders: A Systematic Review and Meta-analysis.	Liu, C	2019	Acupuncture combined with other therapies
173	A Meta-analysis of Treating Autism Spectrum Disorders by Acupuncture	Yue Qianjun	2019	Acupuncture combined with other therapies
174	Systematic Evaluation of Acupuncture therapy for Childhood Autism	YUAN Zhao-hong	2016	Acupuncture combined with other therapies
175	Meta-analysis of Curative Efficacy of Acupuncture for Children with Autism	Zhang Chenximing	2015	Acupuncture combined with other therapies
176	Systematic Review: Acupuncture Vs Standard Pharmacological therapy for Migraine Prevention.	Zhang, N	2020	No meta-analysis
177	Efficacy of Acupuncture for Improving Migraine Symptoms and Cerebral Blood Flow	Lu Tingting	2019	Acupuncture intervention

	ow Velocity: a Meta-analysis			s did not meet the inclusion criteria
178	Effectiveness and Safety of Acupuncture Versus Drug Treatment for Migraine Prophylaxis: a Meta-analysis	Pu Shengxi ong	2017	Acupuncture interventions did not meet the inclusion criteria
179	Verum Versus Sham Manual Acupuncture for Migraine: A Systematic Review of Randomised Controlled Trials.	Yang, Y	2016	Acupuncture combined with other therapies
180	Meta-analysis on Prevention Comparison of Acupuncture with Western Medicine for Migraine	SONG Qian	2016	Acupuncture interventions did not meet the inclusion criteria
181	Clinical Efficacy and Safety of Acupuncture in the Treatment of Tension Headache	DENG Gan	2018	Acupuncture interventions did not meet the inclusion criteria
182	Meta-analysis of Acupuncture therapy in the Treatment of Tension-Type Headache	ZHANG Xue	2018	Control interventions did not meet the inclusion criteria
183	Acupuncture Versus Western Medicine for Tension-Type Headache in China: A Systematic Review	HU Lin	2015	Acupuncture interventions did not meet the inclusion criteria
184	Acupuncture Treatment for the Cervicogenic Headache—Updated Systematic Review	TANG Xu	2017	Acupuncture interventions did not meet the inclusion criteria
185	Systematic Review of Acupuncture and	Li Siyu	2018	Acupuncture

	Moxibustion in Treatment of Mild Cognitive Impairment			interventions did not meet the inclusion criteria
186	Meta-analysis of Acupuncture Clinical Efficacies on Ischemic Type Cognitive Dysfunction	LU Jin-hua	2015	Acupuncture combined with other therapies
187	Clinical Efficacy of Scalp Acupuncture on Mild Cognitive Impairment: a Meta-analysis Study	MAI Wei	2015	Acupuncture combined with other therapies
188	Meta-analysis of Acupuncture therapy for Carpal Tunnel Syndrome	FAN Ye	2019	Acupuncture combined with other therapies
189	Clinical Effect of Acupuncture on Postpartum Depression: A Meta-analysis	PANG Yong	2016	Acupuncture combined with other therapies
190	Effectiveness and Safety of Ear Acupuncture for Trauma-Related Mental Disorders after Large-Scale Disasters: A Prisma-Compliant Systematic Review.	Kwon, C Y	2020	No meta-analysis
191	Acupuncture for the Treatment of Adults with Posttraumatic Stress Disorder: A Systematic Review and Meta-analysis.	Grant, S	2018	Acupuncture interventions did not meet the inclusion criteria
192	Transcutaneous Electrical Nerve Stimulation (Tens) for Fibromyalgia in Adults	Johnson, Mark I	2017	No meta-analysis
193	Ear Acupuncture therapy in Preventing Postoperative Nausea and Emesis: A Systematic Review and Meta-analysis of Rct	GAO Yanyu	2017	Acupuncture combined with other therapies
194	Acupuncture for Glaucoma.	Law, S K	2020	No meta-analysis
195	The Efficacy of Acupuncture in Managing Patients with Chronic Prostatitis/Chronic Pelvic Pain Syndrome: A Systemic Review and Meta-analysis.	Chang, S C	2017	Acupuncture interventions did not meet the inclusion criteria

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196	Efficacy of Electroacupuncture in the Treatment of Prostatitis: a Systematic Review	Su Tongshe ng	2017	Acupuncture intervention s did not meet the inclusion criteria
197	Comparison of the Efficacy of Acupuncture and Western Medicine Treatment on Chronic Prostatitis in China: Meta-analysis	YU Li-Zhong	2017	Acupuncture intervention s did not meet the inclusion criteria
198	Meta-analysis of Acupuncture Treatment of Chronic Prostatitis	PANG Yong	2016	Acupuncture intervention s did not meet the inclusion criteria
199	Meta-analysis on Acupuncture in Treating Chronic Prostatitis	HE Yuan	2015	Acupuncture intervention s did not meet the inclusion criteria
200	Acupuncture As a Treatment Modality in Dermatology: A Systematic Review.	Ma, C	2015	No meta-analysis
201	Acupuncture for Cancer Pain in Adults	Paley, C A	2015	No meta-analysis
202	Transcutaneous Electrical Nerve Stimulation for Treating Neurogenic Lower Urinary Tract Dysfunction: A Systematic Review.	Gross, T	2016	No meta-analysis
203	Meta-analysis of Clinical Efficacy of Acupuncture in Treatment of Tic Disorders	Zhao Runzhi	2020	No patient important outcome
204	Meta-analysis on the therapeutic Effect of Acupuncture on Guillian-Barre Syndrome	LONG Kang-sheng	2015	Acupuncture intervention s did not meet the inclusion criteria
205	A Meta-analysis of Acupuncture and Moxibustion in Treatment of Sciatica	HAN Yiyan	2017	Acupuncture intervention

				s did not meet the inclusion criteria
206	Meta-analysis of the Efficacy of Acupuncture Treatment for Infantile Cerebral Palsy	XIANG Juan	2015	Acupuncture combined with other therapies
207	Randomized Controlled Clinical Meta-analysis of Acupuncture and Moxibustion for Treatment of Infantile Cerebral Palsy	Yuan Jinmei	2015	Acupuncture intervention s did not meet the inclusion criteria
208	Evaluation of the Clinical Effect of Traditional Chinese Medicine on Abducens Paralysis Based on Meta-analysis	Ren Wei	2017	Acupuncture intervention s did not meet the inclusion criteria
209	Meta-analysis on Random-Control Experiment of Eye-acupuncture on Extrarectus Muscles for the Treatment of Abducens Palsy	QIN Xinzhang	2016	Acupuncture intervention s did not meet the inclusion criteria
210	A Meta-analysis of Randomized Controlled Trials of Electroacupuncture Treatment for Trigeminal Neuralgia	ZHOU Jie	2017	Acupuncture combined with other therapies
211	Meta-analysis of Literature on Acupuncture and Moxibustion therapy in Trigeminal Neuralgia	Gao Chunmei	2016	Acupuncture combined with other therapies
212	A Systematic Review of Acupuncture for Chemotherapy-Induced Peripheral Neuropathy.	Li, K	2019	Acupuncture intervention s did not meet the inclusion criteria
213	Meta-analysis of Electroacupuncture for Chemotherapy-Induced Peripheral Neuropathy	KUANG Biyao	2019	Acupuncture intervention s did not meet the incl

				usion criteri a
214	Meta-analysis of Clinical Study on Electr oacupuncture Treatment of Diabetic Perip heral Neuropathy	Zheng Haiz hu	2020	No patient i mportant ou tcome
215	Acupuncture for the Treatment of Lower Limb Diabetic Peripheral Neuropathy: a S ystematic Review.	Nash, J	2019	No meta-an alysis
216	Meta-analysis of the Effect of Acupunctur e and Moxibustion on the Conduction Ve locity of Ulnar Nerve in Diabetic Periphe ral Neuropathy	Zhong Zhen	2019	Acupuncture combined with other t herapies
217	A Meta-analysis on the Effect of Acupun cture on Tibial Nerve in Diabetic Periphe ral Neuropathy	MA Shiqi	2019	Acupuncture combined with other t herapies
218	Meta-analysis and Test Sequential Analysi s on the Effect of Acupuncture on Diabet ic Peripheral Neuropathy	He Jianbin	2019	Acupuncture intervention s did not m eet the incl usion criteri a
219	A Meta-analysis of the Effect of Auricular Pressing on Diabetic Peripheral Neuropa thy	LI Ming-zh e	2019	Acupuncture combined with other t herapies
220	Influence of Acupuncture-Moxibustion on the Peroneal Nerve Conduction Velocity in Type 2 Diabetic Peripheral Neuropath y: A Meta-analysis	LIU Ji-qin	2016	No patient i mportant ou tcome
221	Acupuncture for the Treatment of Periphe ral Neuropathy: A Systematic Review and Meta-analysis.	Dimitrova, A	2017	Acupuncture combined with other t herapies
222	The Effectiveness of Acupuncture in the Management of Persistent Regional Myof ascial Head and Neck Pain: A Systematic Review and Meta-analysis	Farag, A M	2020	No meta-an alysis
223	Meta-analysis of the Effect of Dry Acupu ncture on the Trigger Point of Upper Tra pezius Myofascial Pain	Liu Lin	2015	Acupuncture intervention s did not m eet the incl usion criteri a

224	The Effect of Acupuncture on Postoperative Pain, Nausea and Vomiting after Pediatric Tonsillectomy: a Systematic Review.	Pouy, S	2019	No meta-analysis
225	The Effectiveness of P6 Acupuncture in the Prevention of Postoperative Nausea and Vomiting in Children- A Systematic Review and Meta-analysis.	Zhang, Y	2020	Control interventions did not meet the inclusion criteria
226	The Effect of Acupuncture on Postoperative Nausea and Vomiting after Pediatric Tonsillectomy: A Meta-analysis and Systematic Review.	Shin, H C	2016	Acupuncture combined with other therapies
227	Transcutaneous Electrical Acupoint Stimulation for Preventing Postoperative Nausea and Vomiting after General Anesthesia: A Meta-analysis of Randomized Controlled Trials.	Chen, J	2020	No meta-analysis
228	Acupuncture therapy on Postoperative Nausea and Vomiting in Abdominal Operation: A Bayesian Network Meta-analysis.	Fu, C	2020	Acupuncture combined with other therapies
229	Non-Needle Acupoint Stimulation for Prevention of Nausea and Vomiting after Breast Surgery: A Meta-analysis.	Sun, R	2019	No patient important outcome
230	Ear Acupuncture therapy in Preventing Postoperative Nausea and Emesis: A Systematic Review and Meta-analysis of RCT	GAO Yanyu	2017	Acupuncture interventions did not meet the inclusion criteria
231	Can Perioperative Acupuncture Reduce the Pain and Vomiting Experienced after Tonsillectomy? A Meta-analysis.	Cho, H K	2016	Acupuncture combined with other therapies
232	Clinical Observation on Electroacupuncture Pre-Treatment for Delayed Vomiting Caused by Chemotherapy after Breast Cancer Operation	Huang Kejiang	2016	Acupuncture interventions did not meet the inclusion criteria
233	Meta-analysis on Postoperative Complications of Wristband Acupoint Pressure therapy.	Zhang, G L	2015	Full text unavailable
234	The Effect of Acupuncture on Postoperative	Pouy, S	2019	No meta-an

	ve Pain, Nausea and Vomiting after Pediatric Tonsillectomy: a Systematic Review.			alysis
235	Systematic Evaluation and Meta-analysis of the Improvement of Pain and Function after Total Knee Replacement by Percutaneous Electrical Stimulation	LI Kai-min g	2019	Acupuncture combined with other therapies
236	Meta-analysis of Auricular Acupoint Pressing therapy for Postoperative Pain in Fractures	ZHANG Ya qian	2019	Acupuncture combined with other therapies
237	Effect of Auricular Plaster therapy on Postoperative Pain and Functional Recovery after Total Hip Arthroplasty: A Meta-analysis	Li Haiyang	2019	Acupuncture combined with other therapies
238	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
239	The Effect of Auricular Acupressure/Sticking therapy on Pain Relief after Total Hip Or Knee Replacement: a Systematic Review	Zhang Qian kun	2018	Acupuncture combined with other therapies
240	A Systematic Evaluation of the Effect of Point Massage on Relieving Shoulder Pain after Laparoscopic Surgery	Yang Lin	2017	Acupuncture combined with other therapies
241	The Efficacy of Acupuncture in Post-Operative Pain Management: A Systematic Review and Meta-analysis.	Wu, M S	2016	No detailed information on intervention or outcome
242	Electrical Stimulation and Recovery of Gastrointestinal Function Following Surgery: A Systematic Review.	Penfold, J A	2019	Acupuncture combined with other therapies
243	Effect of Auricular Point Sticking on Recovery of Gastrointestinal Function after Gynecological Laparoscopic Surgery: a Meta-analysis	Zhai Tian-tian	2019	Acupuncture combined with other therapies
244	Meta-analysis of the Effect of Auricular Point Sticking Pressure on Abdominal Distension Relief of Patients with Laparoscopic Surgery in Gynecology	HU Shunan	2019	Acupuncture combined with other therapies
245	A Meta-analysis of Randomized Controlled Trials of Acupuncture and Moxibustion	LI Chao	2019	Acupuncture combined

	for Postoperative Gastroparesis			with other therapies
246	A Meta-analysis of the Effect of Acupoint Massage in Prevention of Gastrointestinal Complications after Laparoscopic Surgery in Adults	YE Chunxiang	2019	Acupuncture interventions did not meet the inclusion criteria
247	Meta-analysis of Simple Acupuncture to Promote Postoperative Abdominal Gastrointestinal Dysfunction Recovery	Wang Shiyuan	2018	Acupuncture combined with other therapies
248	Efficacy and Safety of Acupuncture Intervention in the Recovery of Gastrointestinal Function after Gynecological and Obstetric Surgery: A Systematic Review	Wang Youping	2018	No patient important outcome
249	Effectiveness of Acupuncture in Postoperative Ileus: a Systematic Review and Meta-analysis	Bik, Cheong Kah	2016	No patient important outcome
250	A Systematic Review and Meta-analysis to Acupuncture on Postoperative Ileus	Li Jinjin	2015	Acupuncture combined with other therapies
251	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture for Postoperative Intestinal Obstruction	Ma Yufeng	2015	No patient important outcome
252	Effects of Acupuncture in Anesthesia for Craniotomy: A Meta-analysis.	Asmussen, S	2017	Acupuncture combined with other therapies
253	Systematic Review and Meta-analysis on the Effectiveness of Acupuncture and Moxibustion in the Treatment of Postpartum Lactation	Zhou Lan	2019	Acupuncture interventions did not meet the inclusion criteria
254	Meta-analysis of the Effect of Embedding Bean in Ear Acupoint on Lactation after Cesarean Section	Han Tinxia	2018	Acupuncture combined with other therapies
255	Effects of Auricular Plaster therapy and Use of Time on Postpartum Lactation: A Meta-analysis	Tang Ying	2017	Acupuncture combined with other therapies

256	Impact of Acupressure on Onset of Labour and Labour Duration: A Systematic Review.	Mollart, L J	2015	No meta-analysis
257	Acupuncture At Zusanli (St36) for Experimental Sepsis: A Systematic Review.	Lai, F	2020	No meta-analysis
258	Efficacy and Safety of Acupuncture on Sepsis: a Systematic Review	TANG Yidan	2020	Acupuncture interventions did not meet the inclusion criteria
259	Systematic Evaluation and Meta-analysis of the Improvement of Pain and Function after Total Knee Replacement by Percutaneous Electrical Stimulation	LI Kai-min g	2019	Acupuncture combined with other therapies
260	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
261	The Effect of Auricular Acupressure/Sticking therapy on Pain Relief after Total Hip Or Knee Replacement: a Systematic Review	Zhang Qian kun	2018	Acupuncture combined with other therapies
262	Effect of Auricular Plaster therapy on Postoperative Pain and Functional Recovery after Total Hip Arthroplasty: A Meta-analysis	Li Haiyang	2019	Acupuncture combined with other therapies
263	The Effect of Different Acupuncture therapies on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Network Meta-analysis of Randomized Controlled Trials.	Xiong, F	2019	Acupuncture combined with other therapies
264	Acupuncture Treatment for Urinary Retention Following Spinal Cord Injury: A Meta-analysis	Cheng Jie	2018	Acupuncture combined with other therapies
265	Efficacy of Acupuncture and Moxibustion for Neurogenic Bladder in Patients with Spinal Cord Injury: A Meta-analysis	Wan Dengfeng	2018	No patient important outcome
266	Acupuncture for the Effect and Safety of Neurogenic Bladder after Spinal Cord Injury: A Meta-analysis	FAN Xiao	2017	Acupuncture combined with other therapies
267	The Impact of Acupuncture on Neurological Recovery in Spinal Cord Injury: A S	Ma, R	2015	Acupuncture combined

	ystematic Review and Meta-analysis.			with other t herapies
268	Network Meta-analysis on Effectiveness o f Fire Needle, Warm Acupuncture, and El ectroacupuncture in the Treatment of Kne e Osteoarthritis	Zhang Jinh uan	2020	Acupuncture intervention s did not m eet the incl usion criteri a
269	Meta-analysis of Fu's Subcutaneous Needl ing therapy for Knee Osteoarthritis	SONG Xian g	2019	Control inte rventions di d not meet the inclusio n criteria
270	Meta-analysis of Safety and Effectiveness of Floating Needle therapy in Treating Knee Osteoarthritis	LIU Wan-J un	2019	Control inte rventions di d not meet the inclusio n criteria
271	Meta-analysis of Clinical Effect of Acupu ncture and Moxibustion on Osteoarthritis/ Osteodystrophy	Feng Peng	2019	Acupuncture intervention s did not m eet the incl usion criteri a
272	Meta-analysis of the Effect of Acupunctur e and Western Medicine on Knee Osteoar thritis/Osteodystrophy	Hao Huirui	2018	Acupuncture combined with other t herapies
273	Effect of Electroacupuncture on Knee Ost eoarthritis: A Systematic Review	LIN Jie	2016	Acupuncture combined with other t herapies
274	Meta-analysis of the therapeutic Effect of Treating Osteoarthritis with Filiform Nee dle	MA Jia-jian	2016	Acupuncture combined with other t herapies
275	Meta-analysis of Acupuncture and Moxib ustion for Treatment of Osteoarthritis/Oste odystrophy	Hu Hanjiao	2016	Acupuncture intervention s did not m eet the incl usion criteri a
276	Acupuncture for Obstructive Sleep Apnea (Osa) in Adults: A Systematic Review a	Wang, L	2020	Acupuncture intervention

	nd Meta-analysis			s did not meet the inclusion criteria
277	Effects of Acupuncture on Tinnitus Treatment: A Systematic Review and Meta-analysis	ZHANG Zeyu	2018	Acupuncture interventions did not meet the inclusion criteria
278	Non-Pharmacologic Treatments for Symptoms of Diabetic Peripheral Neuropathy: a Systematic Review.	Amato, N. S	2019	Acupuncture interventions did not meet the inclusion criteria
279	Effects of Acupuncture on Luteinized Unruptured Follicle Syndrome: A Meta-analysis of Randomized Controlled Trials	Liu, X	2020	No patient important outcome
280	Complementary and Alternative Medicine Treatment Options for Otitis Media: A Systematic Review.	Marom, T	2016	No meta-analysis
281	Clinical Effect of Acupuncture therapy on Obstructive Sleep Apnea Hypopnea Syndrome: a Meta-analysis	JIAO Su-qin	2018	No patient important outcome
282	The Clinical Effect of Acupuncture in the Treatment of Obstructive Sleep Apnea: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Ly, Z T	2016	Acupuncture interventions did not meet the inclusion criteria
283	Effectiveness of Acupuncturing At the Sphenopalatine Ganglion Acupoint Alone for Treatment of Allergic Rhinitis: A Systematic Review and Meta-analysis.	Fu, Qinwei	2019	Control interventions did not meet the inclusion criteria
284	Acupuncture for Allergic Rhinitis: a Systematic Review and Meta-analysis	Liu Jie	2016	Control interventions did not meet the inclusion criteria
285	Systematic Review and Meta-analysis of the Randomized Controlled Trial of Acupuncture for Allergic Rhinitis	QU Shu-han	2016	Acupuncture interventions did not meet the inclusion criteria

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				meet the inclusion criteria
286	Acupuncture of Sphenopalatine Ganglion in the Treatment of Allergic Rhinitis: a Systematic Review	Chen Lihe	2016	Acupuncture interventions did not meet the inclusion criteria
287	Acupuncture and Moxibustion for the Treatment of Allergic Rhinitis: A Meta-analysis	LIANG Chao	2015	Control interventions did not meet the inclusion criteria
288	Meta-analysis of Acupuncture Treatment for Sudden Deafness	ZHA Bixiang	2019	Control interventions did not meet the inclusion criteria
289	Evaluation of Effect of Acupuncture and Moxibustion and Level of Intervention Based on Cumulative Meta-analysis and Fuzzy Comprehensive Evaluation: Sudden Hearing Loss	LI Bo	2016	No patient important outcome
290	Acupuncture for the Treatment of Sudden Sensorineural Hearing Loss: A Systematic Review and Meta-analysis: Acupuncture for Ssnhl.	Chen, S	2019	No patient important outcome
291	Acupuncture therapy for Sudden Sensorineural Hearing Loss: a Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhang, XC	2015	Acupuncture combined with other therapies
292	Efficacy and Safety of Acupuncture therapy for Nerve Deafness: a Meta-analysis of Randomized Controlled Trials.	Jiang, Y	2015	Control interventions did not meet the inclusion criteria
293	Systematic Review and Meta-analysis of Acupuncture for the Treatment of Neuroathic Tinnitus	SONG Hualong	2018	No patient important outcome
294	Systematic Review of Acupuncture Treatment of Tinnitus	Xie Hui	2018	Control interventions did not meet the inclusion

				n criteria
295	Meta-analysis of Acupuncture and Moxibustion Treatment of Tinnitus Randomized Controlled Trial	Nie Hongmei	2016	No patient important outcome
296	The Meta-analysis of Tinnitus on Randomized Controlled Clinical Trials of Acupuncture Treatment	Meng Dan	2016	No patient important outcome
297	Systematic Review of Clinical Research on Acupuncture and Moxibustion Treatment of Tinnitus	Ji Jun	2016	No patient important outcome
298	Systematic Review of Acupuncture and Hyperthyroidism therapy	Wang Guang-an	2018	Acupuncture interventions did not meet the inclusion criteria
299	Meta-analysis of Clinical Study on Electroacupuncture Treatment of Diabetic Peripheral Neuropathy	Zheng Haizhu	2020	Acupuncture interventions did not meet the inclusion criteria
300	Acupuncture for the Treatment of Lower Limb Diabetic Peripheral Neuropathy: a Systematic Review.	Nash, J	2019	No meta-analysis
301	Meta-analysis of the Effect of Acupuncture and Moxibustion on the Conduction Velocity of Ulnar Nerve in Diabetic Peripheral Neuropathy	Zhong Zhen	2019	Acupuncture interventions did not meet the inclusion criteria
302	A Meta-analysis on the Effect of Acupuncture on Tibial Nerve in Diabetic Peripheral Neuropathy	MA Shiqi	2019	Acupuncture interventions did not meet the inclusion criteria
303	Meta-analysis and Test Sequential Analysis on the Effect of Acupuncture on Diabetic Peripheral Neuropathy	He Jianbin	2019	Acupuncture combined with other therapies
304	A Meta-analysis of the Effect of Auricular Pressing on Diabetic Peripheral Neuropathy	LI Ming-zhe	2019	Acupuncture combined with other therapies

				herapies
305	Influence of Acupuncture-Moxibustion on the Peroneal Nerve Conduction Velocity in Type 2 Diabetic Peripheral Neuropathy: A Meta-analysis	LIU Ji-qin	2016	No patient i mportant ou tcome
306	Meta-analysis and Treatment Strategy of Acupuncture in the Treatment of Diabetic Peripheral Neuropathy	XU Chang	2016	No patient i mportant ou tcome
307	Influence on Acupuncture Treatment of D iabetic Peripheral Neuropathy-a Systematic Review of Randomized Controlled Trials	Li Jun	2015	No patient i mportant ou tcome
308	Effects and Safety of Acupuncture for Df us: a Systematic Review and Meta-analys is	Yi, Li-Juan	2016	No patient i mportant ou tcome
309	Systematic Review and Meta-Regression Analysis of Acupuncture for Diabetic Nep hropathy	Jia Ying	2019	No patient i mportant ou tcome
310	A Systematic Review of Acupuncture on Diabetic Kidney Disease	WANG An- na	2019	Acupuncture combined with other t herapies
311	Systematic Evaluation of Acupuncture Tre ating Diabetic Retinopathy	GUAN Min gdan	2019	Acupuncture combined with other t herapies
312	Acupuncture for Management of Type 2 Diabetic Gastroparesis: a Meta-analysis	CHEN Ya-j un	2018	Acupuncture intervention s did not m eet the incl usion criteri a
313	System Evaluation and Meta-analysis of Auricular Plaster Intervention for Diabetic Gastroparesis Patients	Xu Huiwen	2016	Acupuncture intervention s did not m eet the incl usion criteri a
314	Meta-analysis of Acupuncture Treatment o f Type 2 Diabetes Mellitus and Depressio n Clinical Research	Liu Meijun	2016	Acupuncture combined with other t herapies
315	Auricular Plaster therapy for Improving S leep in Patients with Diabetes Mellitus a nd Insomnia: A Systematic Review	Jiang Yutin g	2016	Acupuncture intervention s did not m

				meet the inclusion criteria
316	Systematic Review and Meta-analysis on Acupuncture for Obesity Complicated with Type 2 Diabetes Mellitus	WANG Lihua	2018	Acupuncture interventions did not meet the inclusion criteria
317	Meta-analysis on the therapeutic Effect of Acupuncture and Moxibustion on Obesity of Type 2 Diabetes Mellitus	Lin Juan	2016	Acupuncture interventions did not meet the inclusion criteria
318	Systematic Review of Auricular Point therapy for Type 2 Diabetes Mellitus: A Meta-analysis	Piao Chunli	2020	No patient important outcome
319	Acupuncture for Type 2 Diabetes Mellitus: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Chen, C	2019	No patient important outcome
320	A Meta-analysis on the Effect of Acupoint Massage on Type 2 Diabetic Patients	WANG Yan	2019	No meta-analysis
321	Meta-analysis of Acupuncture on the Pancreas Islet Function of Patients with Type 2 Diabetes	XING Guochun	2015	Control interventions did not meet the inclusion criteria
322	Systematic Review of Interventional Effect of Acupuncture and Moxibustion on Impaired Glucose Regulation	SHI Liwei	2018	Acupuncture interventions did not meet the inclusion criteria
323	Meta-analysis of therapeutic Effect of Acupuncture and Moxibustion on Metabolic Syndrome	Guo Shengtong	2015	Acupuncture interventions did not meet the inclusion criteria
324	Randomized Controlled Trials of Auricular Point for Hyperlipidemia: A Meta-analysis	LI Huan	2017	No patient important outcome
325	Effectiveness and Safety of Acupuncture	LIU Mailan	2015	No patient i

	and Moxibustion for Hyperlipidemia: A Systematic Review			important outcome
326	Acupuncture for Glaucoma.	Law, S K	2020	No meta-analysis
327	Optimizing Acupuncture Treatment for Dry Eye Syndrome: a Systematic Review.	Kim, B H	2018	Acupuncture interventions did not meet the inclusion criteria
328	Meta-analysis on Acupuncture for Dry Eyes Based on the Clinical Literatures: a Randomized Controlled Trial	SHENG Xueyan	2015	Acupuncture interventions did not meet the inclusion criteria
329	Acupuncture for Acute Hordeolum	Cheng, Ke	2017	Acupuncture interventions did not meet the inclusion criteria
330	Meta-analysis of Auricular Acupressure therapy in Intervention of Juvenile Myopia	XU Baisheng	2019	Acupuncture interventions did not meet the inclusion criteria
331	Effectiveness of Acupuncture for Juvenile Myopia: A Systematic Assessment	FU Tian	2017	Control interventions did not meet the inclusion criteria
332	Meta-analysis on Acupuncture Treatment of Diplopia	Ding Yaping	2018	Acupuncture combined with other therapies
333	Meta-analysis of the Effect of Acupuncture and Moxibustion on Uveitis	Wu Hanqing	2015	No patient important outcome
334	Meta-analysis of Acupuncture As Adjuvant therapy in Improving Gastrointestinal Function of Acute Pancreatitis Patients	LIU Hong	2017	Acupuncture combined with other therapies

335	Meta-analysis on Acupuncture and Moxibustion in the Treatment of Inflammatory Bowel Disease	WANG Yuan	2018	Acupuncture interventions did not meet the inclusion criteria
336	Clinical Efficacy Differences in Ulcerative Colitis Between Acupuncture and Salazosulfapyridine: A Meta-analysis	LIU Zhao	2016	Acupuncture interventions did not meet the inclusion criteria
337	Systematic Review of Complementary and Alternative Medicine Treatments in Inflammatory Bowel Diseases.	Langhorst, J	2015	No meta-analysis
338	Acupuncture for Chronic Hepatitis B.	Kong, Z	2019	Acupuncture interventions did not meet the inclusion criteria
339	[Acupuncture for Diarrhea-Predominant Irritable Bowel Syndrome: a Meta-analysis].	Deng,D	2017	Acupuncture interventions did not meet the inclusion criteria
340	Meta-analysis of Acupuncture in Treatment of Irritable Bowel Syndrome	LI Rui-gen	2016	Acupuncture interventions did not meet the inclusion criteria
341	Systematic Review of Acupuncture therapies for Irritable Bowel Syndrome	XU Guixin	2016	Acupuncture interventions did not meet the inclusion criteria
342	Systematic Review of Auricular Plaster therapy for Prevention and Treatment of Opioid Induced Constipation	DING Weibin	2020	Acupuncture interventions did not meet the inclusion criteria

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343	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Functional Constipation	MA Kun	2019	Control interventions did not meet the inclusion criteria
344	Effects of Ear-acupressure in Treatment of Constipation: a Systematic Review	LUO Chun mei	2017	No patient important outcome
345	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture and Moxibustion for Constipation	Li Xue	2016	Acupuncture interventions did not meet the inclusion criteria
346	Auricular-Plaster therapy for Chronic Functional Constipation: A Meta-analysis of Randomized Controlled Trial	Wu Yuanrong	2016	No patient important outcome
347	Efficacy and Safety of Acupuncture for the Treatment of Functional Dyspepsia: Meta-analysis.	Zhou, W	2016	Acupuncture interventions did not meet the inclusion criteria
348	The Effect of Acupuncture and Moxibustion on Functional Dyspepsia Compared with Prokinetic Agents: a Meta-analysis	WU Xiao-wei	2015	Acupuncture interventions did not meet the inclusion criteria
349	Meta-analysis of Acupuncture Treatment of Peptic Ulcer	Hu Shixiu	2019	Acupuncture interventions did not meet the inclusion criteria
350	Meta-analysis of Curative Effect Comparison Between Acupuncture and Western Medicine on Chronic Gastritis	Wang Junlin	2016	Acupuncture interventions did not meet the inclusion criteria
351	Meta-analysis on Acupuncture in Treatment of Chronic Atrophic Gastritis	XIANG Juan	2016	Acupuncture intervention

				s did not meet the inclusion criteria
352	Gastroesophageal Reflux Disease Treated with Acupoint Pointer therapy of Tcm: A Meta-analysis	LI Jianfeng	2019	Acupuncture interventions did not meet the inclusion criteria
353	Efficacy of Acupuncture therapy on Gastrointestinal Dysfunction in Patients with Non-Gastrointestinal Diseases: a Systematic Review and Meta-analysis Based on Randomized Controlled Trials	HOU Ya-hong	2017	Acupuncture combined with other therapies
354	Meta-analysis of Acupuncture Treatment for Gastrointestinal Reaction after Chemotherapy of Tumor	HU Ya-cai	2017	No patient important outcome
355	Acupuncture St25 Treatment for Chronic Diarrhea: A Systematic Evaluation and Meta-analysis	QIN Zongshi	2015	Control interventions did not meet the inclusion criteria
356	Effects of Acupuncture in Patients with Chronic Kidney Disease: a Systematic Review.	Mela, GAA	2020	No meta-analysis
357	Acupuncture for Infertile Women Without Undergoing Assisted Reproductive Techniques (Art): A Systematic Review and Meta-analysis.	Yun, L	2019	Acupuncture interventions did not meet the inclusion criteria
358	Acupuncture in Improving Endometrial Receptivity: a Systematic Review and Meta-analysis.	Zhong, Y	2019	Acupuncture interventions did not meet the inclusion criteria
359	Effect of Acupuncture on Ovulatory Dysfunction Infertility: A Systematic Review	TAN Yu-qing	2019	Acupuncture combined with other therapies
360	Acupuncture in Treatment of Fallopian Tube Obstructive Infertility: A Systematic	HU Yujiao	2018	Acupuncture intervention

	Review and Meta-analysis			s did not meet the inclusion criteria
361	A Meta-analysis on the Clinical Study of Acupuncture in Treating Infertility	LIU Tao	2018	Acupuncture interventions did not meet the inclusion criteria
362	Meta-analysis of Acupuncture-Moxibustion in Treatment of Anovulation Infertility	AI Xiao	2017	Acupuncture interventions did not meet the inclusion criteria
363	Efficacy and Safety of Acupuncture for the Treatment of Oligoasthenozoospermia: A Systematic Review.	You, F	2020	No meta-analysis
364	The Effects of Acupuncture on Pregnancy Outcomes of in Vitro Fertilization with Embryo Transfer: An Interdisciplinary Systematic Review.	Gu, Y E	2019	No meta-analysis
365	Therapeutic Effect of Acupuncture on the Outcomes of in Vitro Fertilization: a Systematic Review and Meta-analysis.	Verastegui, C	2017	Full text unavailable
366	Long-Term Effects of Acupuncture for Chronic Prostatitis/Chronic Pelvic Pain Syndrome: Systematic Review and Single-arm Meta-analyses.	Qin, Z	2019	No detailed information on intervention or outcome
367	Meta-analysis of the Effects of Acupuncture for Chronic Prostatitis	AO Jin-bo	2018	No detailed information on intervention or outcome
368	Comparison of the Efficacy of Acupuncture and Western Medicine Treatment on Chronic Prostatitis in China: Meta-analysis	YU Li-Zhong	2017	No patient important outcome
369	Meta-analysis of Acupuncture Treatment of Chronic Prostatitis	PANG Yong	2016	Acupuncture interventions did not meet the inclusion criteria

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370	Meta-analysis on Acupuncture in Treating Chronic Prostatitis	HE Yuan	2015	No detailed information on intervention or outcome
371	Evaluation of Acupuncture in Treating Benign Prostatic Hyperplasia	CHAI Qiqi	2018	Acupuncture combined with other therapies
372	Complementary therapies for Bladder Pain Syndrome: a Systematic Review.	Verghese, T S	2016	No meta-analysis
373	Meta-analysis of Clinical Efficacy of Acupuncture Versus Drugs in the Treatment of Renal Colic	HUANG Yi -yu	2020	Acupuncture interventions did not meet the inclusion criteria
374	Meta-analysis on the Clinical Effect of Acupuncture and Moxibustion in the Treatment of Female Stress Urinary Incontinence	CHEN Yali	2020	Acupuncture interventions did not meet the inclusion criteria
375	A Meta-analysis of Treating Female Stress Urinary Incontinence by Acupuncture	Zhang Yan	2016	Acupuncture interventions did not meet the inclusion criteria
376	Clinical Studies on Incontinence Treated by Electroacupuncture: a Meta-analysis	Zhang Jiaping	2018	Control interventions did not meet the inclusion criteria
377	A Systematic Review and Meta-analysis of Acupuncture for Urolithiasis	Zhang Mingqiang	2019	Acupuncture interventions did not meet the inclusion criteria
378	Acupuncture Treatment for Chronic Pelvic Pain in Women: A Systematic Review and Meta-analysis of Randomized Controlled	Sung, S H	2018	Acupuncture interventions did not m

	ed Trials.			meet the inclusion criteria
379	Systematic Review and Meta-analysis of Complementary Treatments for Women with Symptomatic Endometriosis.	Mira, TAA	2018	No meta-analysis
380	Acupuncture for Polycystic Ovarian Syndrome.	Lim, CED	2019	No patient important outcome
381	Acupuncture for Polycystic Ovarian Syndrome: A Systematic Review and Meta-analysis.	Jo, J	2017	No patient important outcome
382	Acupuncture for Treating Polycystic Ovary Syndrome: Guidance for Future Randomized Controlled Trials.	Wu, Y	2016	No patient important outcome
383	Transcutaneous Electrical Nerve Stimulation (TENS) for Pain Management in Sickle Cell Disease.	Pal, S	2020	No meta-analysis
384	Acupuncture for Cognitive Impairment in Vascular Dementia, Alzheimer's Disease and Mild Cognitive Impairment: A Systematic Review and Meta-analysis	Lan, J	2020	Full text unavailable
385	Effectiveness and Safety of Acupuncture for the Treatment of Alzheimer's Disease: A Systematic Review and Meta-analysis.	Wang, Y Y	2020	Control interventions did not meet the inclusion criteria
386	Effectiveness of Acupuncture for Alzheimer's Disease: An Updated Systematic Review and Meta-analysis.	Huang, Q	2019	Control interventions did not meet the inclusion criteria
387	Acupuncture and Alzheimer's Disease: A Review of a Meta-analysis.	Quick, Melissa	2015	Full text unavailable
388	The Effectiveness and Safety of Acupuncture for Patients with Alzheimer Disease: a Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhou, J	2015	Acupuncture interventions did not meet the inclusion criteria
389	Meta-analysis of Tiaoshen Tongdu Acupuncture in the Treatment of Vascular Dementia	Li Fei	2019	Acupuncture interventions did not meet the inclusion criteria

				usion criteri a
390	Efficacy Difference of Electro-acupuncture and Nimodipine in the Treatment of Vascular Dementia: A Study of Meta-analysis	WU Jiamin	2018	Control inte rventions di d not meet the inclusio n criteria
391	A Meta-analysis on Clinical Randomized Controlled Trials of Scalp Electroacupunct ure of Vascular Dementia	WAN Ting	2017	Control inte rventions di d not meet the inclusio n criteria
392	Meta-analysis of Acupuncture and Moxib ustion in the Treatment of Senile Dement ia	Lin Lin	2017	Acupuncture intervention s did not m eet the incl usion criteri a
393	Meta-analysis: Scalp Treatment of Vascula r Dementia	GUO Zhenl ang	2016	Control inte rventions di d not meet the inclusio n criteria
394	Systematic Review of Acupuncture for th e Treatment of Alcohol Withdrawal Syndr ome.	Liu, X	2018	Acupuncture intervention s did not m eet the incl usion criteri a
395	Systematic Review of Acupuncture therap y for Opioid-Dependence Withdrawal Syn drome	ZHANG G uang-Cai	2018	Acupuncture intervention s did not m eet the incl usion criteri a
396	Meta-analysis of Acupoint Stimulation on Improving Opioid Protracted Withdrawal Symptoms	YANG Jia- xin	2016	Acupuncture intervention s did not m eet the incl usion criteri a
397	Condition and Effectiveness Evaluation of Acupuncture for Smoking Cessation	LIU Zhao	2015	Acupuncture intervention s did not m

				meet the inclusion criteria
398	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Schizophrenia	ZHANG Wenzhong	2019	Acupuncture interventions did not meet the inclusion criteria
399	Acupuncture As Add-on Treatment of the Positive, Negative, and Cognitive Symptoms of Patients with Schizophrenia: A Systematic Review.	van den Noort, M	2018	No meta-analysis
400	Acupuncture and Electroacupuncture for Anxiety Disorders: A Systematic Review of the Clinical Research.	Amorim, D	2018	No meta-analysis
401	Effectiveness and Safety of Ear Acupuncture for Trauma-Related Mental Disorders after Large-Scale Disasters: A Prisma-Compliant Systematic Review.	Kwon, C Y	2020	No meta-analysis
402	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Post-Traumatic Stress Disorder	Han Yadi	2017	Acupuncture interventions did not meet the inclusion criteria
403	Acupuncture for Attention Deficit Hyperactivity Disorder: A Systematic Review	ZHANG Shanyu	2020	Acupuncture interventions did not meet the inclusion criteria
404	Acupuncture for Attention Deficit Hyperactivity Disorder: A Meta-analysis of Randomized Controlled Trials	TIAN Yong	2019	Acupuncture interventions did not meet the inclusion criteria
405	A Meta-analysis on Acupuncture Treatment of Attention Deficit/Hyperactivity Disorder.	Ni, X Q	2015	Acupuncture interventions did not meet the inclusion criteria

406	A Meta-analysis on Acupuncture Treatment of Attention Deficit/Hyperactivity Disorder	NI Xin-qiang	2015	Acupuncture intervention s did not meet the inclusion criteria
407	Neuromodulation of Autism Spectrum Disorders Using Vagal Nerve Stimulation.	van Hoorn, A	2019	Acupuncture intervention s did not meet the inclusion criteria
408	Acupuncture for Autism Spectrum Disorder: A Systematic Review and Meta-analysis.	Lee, B	2017	Full text unavailable
409	Systematic Evaluation of Acupuncture therapy for Childhood Autism	YUAN Zhao-hong	2016	Acupuncture combined with other therapies
410	Complementary and Alternative therapies for Autism Spectrum Disorder.	Brondino, N	2015	Acupuncture combined with other therapies
411	Meta-analysis of Curative Efficacy of Acupuncture for Children with Autism	Zhang Chengxiong	2015	Acupuncture combined with other therapies
412	Scalp Acupuncture Treatment for Children's Autism Spectrum Disorders: A Systematic Review and Meta-analysis.	Liu, C	2019	Acupuncture combined with other therapies
413	The Efficacy and Safety of Acupuncture for the Treatment of Children with Autism Spectrum Disorder: A Systematic Review and Meta-analysis.	Lee, Boram	2018	Acupuncture combined with other therapies
414	A Meta-analysis on Randomized Controlled Trials of Acupuncture in Treatment of Children with Tic Disorders	NI Xinqiang	2017	Acupuncture combined with other therapies
415	Management of Temporomandibular Disorders with Transcutaneous Electrical Nerve Stimulation: A Systematic Review.	Fertout, A	2019	No meta-analysis
416	Acupuncture in Temporomandibular Disorder Myofascial Pain Treatment: A System	Fernandes, A C	2017	No meta-analysis

	atic Review.			
417	Meta-analysis of the Efficacy of Acupuncture Treatment of Temporomandibular Joint Disorder	LI Hui-ping	2015	No patient important outcome
418	Salivary Hypofunction: An Update on the therapeutic Strategies.	Salum, F G	2018	No meta-analysis
419	A Meta-analysis of Radiotherapy-Induced Salivary Hypofunction and Xerostomia in Patients with Head and Neck Cancer	SU Qun	2015	Acupuncture interventions did not meet the inclusion criteria
420	Nonpharmacologic therapies in Patients with Exacerbation of Chronic Obstructive Pulmonary Disease: A Systematic Review with Meta-analysis	Dobler, C C	2020	Acupuncture interventions did not meet the inclusion criteria
421	Acupuncture Techniques for Copd: a Systematic Review.	Fernández-Jané, C	2020	Acupuncture interventions did not meet the inclusion criteria
422	Acupuncture therapy for Functional Effects and Quality of Life in Copd Patients: A Systematic Review and Meta-analysis.	Wang, Jiajia	2018	Acupuncture interventions did not meet the inclusion criteria
423	Meta-analysis of the therapeutic Effect of Acupuncture on Chronic Obstructive Pulmonary Disease	CAO Ailing	2017	Acupuncture combined with other therapies
424	Meta-analysis of Acupuncture Treatment of Bronchial Asthma Clinical Literature	LI Meng-yuan	2018	Acupuncture interventions did not meet the inclusion criteria
425	Effect and Safety of Stimulating Acupoints in Children with Cough Variant Asthma: A Meta-analysis.	Jin, Y	2018	Acupuncture interventions did not meet the incl

				usion criteri a
426	Meta-analysis on Randomized Controlled Trials for Scalp Acupuncture Treatment of Stroke: A Systematic Review.	Young-Nim, Y	2018	No meta-an alysis
427	Statistic Method Meta-analysis on Eye Acupuncture Treatment for Stroke	GUAN Hongyang	2017	Acupuncture combined with other t herapies
428	Acupuncture for Stroke Rehabilitation	Yang, Ai	2016	Acupuncture combined with other t herapies
429	Eye Acupuncture Treatment for Stroke: A Systematic Review and Meta-analysis.	Bai, Z H	2015	Acupuncture combined with other t herapies
430	Xingnao Kaiqiao Needling Method for Acute Ischemic Stroke: A Meta-analysis of Safety and Efficacy.	Yang, Z X	2017	Acupuncture combined with other t herapies
431	Systematic Review of Long-Term Xingnao Kaiqiao Needling Efficacy in Ischemic Stroke Treatment.	Yang, Z X	2015	Control inte rventions di d not meet the inclusio n criteria
432	Effectiveness of Scalp Acupuncture for Ischemic Stroke: A Meta-analysis.	Wang, J H	2015	Acupuncture intervention s did not m eet the incl usion criteri a
433	Xingnao Kaiqiao Needling Method for Acute Ischemic Stroke: A Meta-analysis of Safety and Efficacy.	Yang, Z X	2017	Acupuncture combined with other t herapies
434	Electroacupuncture for Acute Ischemic Stroke.	Liu, A J	2015	Acupuncture combined with other t herapies
435	Meta-analysis of Floating-Needle therapy for Post-Stroke Shoulder-Hand Syndrome	WANG Zhenhui	2018	Control inte rventions di d not meet the inclusio

				n criteria
436	Systematic Evaluation and Meta-analysis of Acupuncture Antagonistic Muscle therapy for Spastic Paralysis after Stroke	WANG Rui	2019	Control interventions did not meet the inclusion criteria
437	Systematic Review and Meta-analysis on the therapeutic Effect of Acupuncture on Hypertonia of Hand Muscle in Patients with Stroke	Zhang Zengqiao	2019	Acupuncture combined with other therapies
438	Meta-analysis on Acupuncture for Hand Spasm Post-Stroke	Qi Conghui	2019	Acupuncture combined with other therapies
439	Effect of Transcutaneous Electrical Nerve Stimulation (Tens) on Spasticity in Adults with Stroke: A Systematic Review and Meta-analysis.	Mahmood, A	2019	Acupuncture combined with other therapies
440	Systematic Review and Meta-analysis of Acupuncture Treatment for Post-Stroke Hand and Dysfunction	QI Cong-hui	2018	Acupuncture combined with other therapies
441	Transcutaneous Electrical Nerve Stimulation Improves Walking Capacity and Reduces Spasticity in Stroke Survivors: a Systematic Review and Meta-analysis.	Kwong, P W	2018	Acupuncture combined with other therapies
442	Meta-analysis on the therapeutic Effect of Acupuncture At Meridian Sinew for Spastic Paralysis after Stroke.	Zhang, Y	2017	Control interventions did not meet the inclusion criteria
443	Meta-analysis on the Effect of Acupuncture and Moxibustion on Limb Motor Dysfunction in Patients with Stroke	Zheng Yi	2016	Acupuncture interventions did not meet the inclusion criteria
444	Systematic Evaluation of Acupuncture for the Treatment of Post-Stroke Strophopodia	ZHANG Yong	2016	Acupuncture combined with other therapies
445	Acupuncture for Spasticity after Stroke: a Systematic Review and Meta-analysis of Randomized Controlled Trials	Lim, S M	2015	Control interventions did not meet

				the inclusion criteria
446	Meta-analysis and Test Sequential Analysis of Depressive State in Patients with Post-Stroke Depression Treated with Acupuncture	Xu Ruoxi	2019	Acupuncture combined with other therapies
447	Systematic Review and Meta-analysis of the Clinical Efficacy of Eye Acupuncture in the Treatment of Poststroke Depression	YANG wei	2019	Control interventions did not meet the inclusion criteria
448	The Effectiveness of Acupuncture therapy in Patients with Post-Stroke Depression: An Updated Meta-analysis of Randomized Controlled Trials.	Zhang, XY	2019	Acupuncture interventions did not meet the inclusion criteria
449	A Meta-analysis of the Efficacy of Acupuncture and Electro-acupuncture on Post-Stroke Depression	HUANG Yingjie	2018	Acupuncture combined with other therapies
450	Meta-analysis of Effect of Acupuncture and Antidepressants on Depression in Patients with Post-Stroke Depression	ZHOU Xin	2018	Acupuncture interventions did not meet the inclusion criteria
451	Jin Three-Needle therapy for Post-Stroke Depression: A Systematic Review and Meta-analysis	WEI Yanying	2018	Acupuncture interventions did not meet the inclusion criteria
452	Meta-analysis of Auricular Point Sticking in the Treatment of Post-Stroke Depression	WANG Qiang	2018	Acupuncture interventions did not meet the inclusion criteria
453	Scalp Acupuncture therapy for Post-Stroke Depression: A Systematic Review	ZHANG Huaajun	2017	Acupuncture interventions did not meet the inclusion criteria

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454	An Meta-analysis of Acupuncture for Post-Stroke Depression	YIN Miao-miao	2016	No patient important outcome
455	Consciousness Restoring for Resuscitation Acupuncture therapy for Dysphagia after Stroke: A Systematic Review and Meta-analysis	XU Lianjie	2019	Control interventions did not meet the inclusion criteria
456	Meta-analysis of therapeutic Effect of Tongue Tri-Points therapy on Post Stroke Pseudobulbar Palsy	Yang Jiwei	2018	Control interventions did not meet the inclusion criteria
457	Acupuncture Treatment for Post-Stroke Dysphagia: An Update Meta-analysis of Randomized Controlled Trials.	Li, L X	2018	Acupuncture combined with other therapies
458	The Efficacy of Acupuncture for Post-Stroke Dysphagia: A Systematic Review and Meta-analysis	WANG Chun	2017	Acupuncture combined with other therapies
459	Meta-analysis of Curative Effects of Acupuncture therapy on Dysphagia after Stroke	XU Minghua	2017	Control interventions did not meet the inclusion criteria
460	Meta-analysis of Randomized Controlled Trials on Electro-acupuncture in the Treatment of Dysphagia after Stroke	ZHANG Yi	2017	Acupuncture combined with other therapies
461	Systematic Review on Acupuncture for Treatment of Dysphagia after Stroke.	Ye, Qiuping	2017	Acupuncture combined with other therapies
462	Clinical Literature Study of Acupuncture and Moxibustion in the Treatment of Post-Stroke Dysphagia Based on Meta-analysis	MENG Dan	2016	Acupuncture combined with other therapies
463	A Meta-analysis of the therapeutic Effect of Nape Acupuncture on Post-Stroke Dysphagia in Domestic Literature	HU Tian-jun	2015	Acupuncture combined with other therapies
464	Mesh Meta-analysis of Different Acupuncture	ZHU Jing	2019	Control interventions

	ure therapy for Shoulder Pain after Stroke			interventions did not meet the inclusion criteria
465	Clinical Effects of Different Acupuncture therapy in Treatment of Post-Stroke Shoulder Pain	LIU Fushui	2019	Control interventions did not meet the inclusion criteria
466	Systematic Reviews of Clinical Effect of Floating Needle in the Treatment of Shoulder Pain after Stroke	WEI Zemin	2019	Acupuncture combined with other therapies
467	Effects of Acupuncture on the Recovery Outcomes of Stroke Survivors with Shoulder Pain: A Systematic Review.	Chau, J P C	2018	Acupuncture combined with other therapies
468	Acupuncture for Poststroke Shoulder Pain: A Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture combined with other therapies
469	Acupuncture for the Treatment of Hiccups Following Stroke: a Systematic Review and Meta-analysis.	Yue, J	2017	No patient important outcome
470	Acupuncture for Insomnia after Stroke: a Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture interventions did not meet the inclusion criteria
471	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture and Moxibustion for Limb Numbness after Stroke	Chen Lizao	2020	Acupuncture interventions did not meet the inclusion criteria
472	Systematic Evaluation of Acupuncture for Treatment of Urinary Retention after Cerebral Apoplexy	Wang Huimin	2019	Acupuncture interventions did not meet the inclusion criteria
473	Meta-analysis on Evaluation Index of Acupuncture Improving Self-Care Ability of	Wang Xing	2018	Acupuncture intervention

	Post-Stroke Patients			s did not meet the inclusion criteria
474	Therapeutic Efficacy of Acupuncture At Baihui (Gv 20) and Shenting (Gv 24) for Post-Stroke Cognitive Impairment: A Systematic Review	LIU Fang	2018	Acupuncture combined with other therapies
475	Electroacupuncture for Post Stroke Cognitive Impairment: a Systematic Review and Meta-analyses	ZHAN Jie	2017	Acupuncture combined with other therapies
476	Meta-analysis of Scalp Acupuncture on Cognitive Disorder after Stroke	CHEN Li-zao	2016	Acupuncture interventions did not meet the inclusion criteria
477	Scalp Acupuncture for the Treatment of Cognitive Dysfunction after Stroke: A Systematic Review	Xiong Jian	2016	Acupuncture combined with other therapies
478	Rcts Meta-analysis of Electro-acupuncture Treating Post-Stroke Constipation	WANG De-long	2018	No detailed information on intervention or outcome
479	Systematic Review on Acute Cerebral Infarction Treated with Acupuncture At the Points of the Governor Vessel	Ji Jian-gang	2018	No detailed information on intervention or outcome
480	A Meta-analysis on Effectiveness of Electro-Acupuncture on Post-Stroke Urinary Incontinence	TAN Zhi-gao	2015	No patient important outcome
481	Effectiveness of Non-Pharmacological Interventions on the Management of Sarcopenic Obesity: A Systematic Review and Meta-analysis.	Yin, Y H	2020	Acupuncture combined with other therapies
482	Effectiveness of Electroacupuncture for Simple Obesity: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Gao, Yanling	2020	Control interventions did not meet the inclusion criteria

483	Effect of Acupuncture and Intervention Types on Weight Loss: a Systematic Review and Meta-analysis.	Kim, S Y	2018	Acupuncture interventions did not meet the inclusion criteria
484	Auricular Acupressure for Overweight and Obese Individuals: A Systematic Review and Meta-analysis.	Huang, C F	2019	Acupuncture combined with other therapies
485	Acupuncture and Related therapies for Obesity: A Network Meta-analysis.	Zhang, Y	2018	Acupuncture interventions did not meet the inclusion criteria
486	A Systematic Review and Meta-analysis of Randomized Clinical Trials About Acupuncture Treatment for Obesity-Related Hormone and Blood Lipids of Female Obesity	ZHANG Rongqiang	2017	No patient important outcome
487	Does Laser Acupuncture An Effective Complementary therapy for Obesity Management? A Systematic Review of Clinical Trials.	Namazi, N	2017	No meta-analysis
488	Acupuncture for the Treatment of Obesity in Adults: a Systematic Review and Meta-analysis.	Zhang, R Q	2017	No detailed information on intervention or outcome
489	The Efficacy and Safety of Acupuncture on Serum Leptin Levels in Obese Patients: A Systematic Review and Meta-analysis.	Park, K S	2017	No patient important outcome
490	Acupuncture and Lifestyle Modification Treatment for Obesity: A Meta-analysis.	Fang, S	2017	Acupuncture combined with other therapies
491	The Effect of Auricular Acupoint Stimulation in Overweight and Obese Adults: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Yeh, Tzu-Lin	2017	Acupuncture combined with other therapies
492	Acupuncture for Obesity: a Systematic Review	Kim, Jiin	2016	Acupuncture combined

				with other therapies
493	Auricular Acupuncture for Obesity: A Systematic Review and Meta-analysis.	Ruan, Z	2016	Full text unavailable
494	A Meta-analysis on Effectiveness of Acupuncture on Post-Stroke Insomnia	NIE Fenfen	2020	Acupuncture combined with other therapies

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Table 1 Characteristics of systematic reviews

ID	First author Year	Country	Therapeutic area	Disease or condition	No. of RCTs	No. of participants	Patient important outcomes	Interventions vs Controls	Quality assessment tool for original studies included in SR
1	Juan Zhu 2019	China	Periprocedural care	Postoperative pain	35	1819	1.Postoperative resting pain intensity at 24h (VAS)	1. electro-acupuncture/ auricular acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Intensity of postoperative pain on movement or cough at 24h (VAS)	2. electro-acupuncture/ TENS vs sham acupuncture	
2	Kai-Bo Che 2019	China	Periprocedural care	Postoperative ileus after abdominal surgery	15	965	1.Time to first flatus	1. electro-acupuncture vs standard of care	Cochrane risk of bias tool
							2.Time to first defecation	2. electro-acupuncture vs standard of care	
							3.Time to bowel sound recovery	3. electro-acupuncture vs standard of care	
							4.Time to first oral feeding	4.electro-acupuncture vs standard of care	
							5.Length of hospital stay	5. electro-acupuncture vs standard of care	
3	Lu Jing 2018	China	Periprocedural care	Hot flashes after breast can	9	646	1.Hot flashes after breast cancer surgery	1. body needling vs sham acupuncture	Cochrane risk of bias

							2. Hot flashes after breast cancer surgery	2. Electro-acupuncture vs western medicine	tool
							3. Hot flashes after breast cancer surgery	3. body needling/ electro-acupuncture vs no intervention	
							4. Hot flashes after breast cancer surgery (follow-up for 3 months)	4. body needling/ electro-acupuncture vs no intervention	
							5. Hot flashes after breast cancer surgery (follow-up for 3 months)	5. body needling/ electro-acupuncture vs sham acupuncture	
4	Yongjun ZHU 2017	China	Periprocedural care	Pain control after total knee arthroplasty	6	529	1. Pain intensity (VAS) over a period of 24h	1. FES vs sham acupuncture	Jadad score
5	T.-J. Chien 2020	China	Oncology	Breast cancer-related menopause symptoms	13	943	1. Frequency of hot flushes in breast cancer (3 months after treatment)	1. body needling vs sham acupuncture	Cochrane risk of bias tool + Jadad score
							2. Severity of hot flushes in breast cancer (3 months after treatment)	2. body needling vs standard of care	
							3. Menopause symptoms in breast cancer (3 months after treatment)	3. body needling vs sham acupuncture	
							4. Menopause symptoms in breast cancer (3 months after treatment)	4. body needling vs standard of care	

6	Yihan He 2019	China	Oncology	Cancer pain	17	1111	1.Cancer Pain Intensity	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Cancer Pain Intensity	2.acupuncture vs waiting list	
7	Lawrence Chen 2017	China	Oncology	Aromatase inhibitor-induced arthralgia in breast cancer	5	181	1.The severity of post treatment pain (worst pain at 3-4weeks)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.The severity of post treatment pain (pain severity at 3-4weeks)	2.acupuncture vs sham acupuncture	
							3.The severity of post treatment pain (pain-related interference scores at 3-4week)	3.acupuncture vs sham acupuncture	
							4.Stiffness at 3-4 weeks	4.acupuncture vs sham acupuncture	
							5.Function at 3-4 weeks	5.acupuncture vs sham acupuncture	
8	Pei Lixia 2019	China	Oncology	The quality of life of breast cancer patients	7	453	1.Quality of life	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Quality of life	2.acicular point sticking vs sham acupuncture	
							3.Quality of life	3.acicular point sticking vs standard of care	
9	Wei-Wei Tao 2016	China	Oncology	Symptom management of cancer	68	5530	1.Fatigue (BFI)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2. Fatigue (BPI)	2.acupuncture vs standard of care	

							3.Remission rate of diarrhea	3.acupuncture vs standard of care	
							4.Hiccups	4.acupuncture vs standard of care	
							5.Nausea and vomit	5.acupuncture vs standard of care	
10	Mangmang Xu 2018	China	Neurology	Acute stroke	33	3946	1.Death or dependency at end of follow-up	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Death or dependency at end of follow-up	2.acupuncture vs no intervention	
							3.Death or dependency at end of follow-up (≥3 months)	3.acupuncture vs sham acupuncture	
							4.Death or dependency at end of follow-up (≥3 months)	4.acupuncture vs no intervention	
11	Shaonan Liu 2019	China	Neurology	Post-stroke shoulder-hand syndrome	40	3264	1.Motor function (upper limb FMA)	1.electro-acupuncture + rehabilitation vs rehabilitation	Cochrane risk of bias tool
							2.Motor function (upper limb FMA)	2.manual acupuncture + rehabilitation vs rehabilitation	
							3.Pain improvement (VAS)	3.electro-acupuncture + rehabilitation vs rehabilitation	
							4.Pain improvement (VAS)	4.manual acupuncture + rehabilitation vs rehabilitation	
							5.Activities of daily living (MBI)	5.manual acupuncture + rehabilitation vs rehabilitation	
							6.Improvement in shoulder abduction (ROM)	6.manual acupuncture + rehabilitation vs rehabilitation	

12	Wenjuan Fan 2020	China	Neurology	Post-stroke spastic hemiplegia	36	2628	1.Motor function (FMA)	1.manual acupuncture vs rehabilitation	Cochrane risk of bias tool
							2.Motor function (FMA)	2.electro-acupuncture vs rehabilitation	
							3.Spasticity Assessment (ASS)	3.manual acupuncture/ electro-acupuncture + rehabilitation vs rehabilitation	
							4.Quality of daily life (BI)	4.manual acupuncture/electro acupuncture+ rehabilitation vs rehabilitation	
13	Binlong Zhang 2019	China	Neurology	Post-stroke aphasia	28	1747	1.Functional communication	1.acupuncture/scalp acupuncture + language rehabilitation vs language rehabilitation	Cochrane risk of bias tool
14	Xue-bin Li 2018	China	Neurology	Post-stroke depression	18	1536	1.Depression(HAMD) (at week 4 after treatment)	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool
15	Xiaolan Lin 2016	China	Neurology	Post-stroke cognitive impairment	19	1275	1.Cognitive function (MMSE)	1.manual acupuncture/electro acupuncture /scalp acupuncture vs standard of care	NA
							2.Cognitive function (ADL)	2.manual acupuncture/scalp acupuncture vs standard of care	
							3.Cognitive function (MoCA)	3.manual acupuncture/electro-acupuncture vs standard of care	
16	Lin Guohua 2016	China	Neurology	Neurological function deficit	6	572	1.Neurological impairment (NDS) (at week 4 after	1.body needling vs rehabilitation	Cochrane risk of bias

				of non-acute stage stroke			treatment)		tool + Jadad score
17	Tong Li 2019	China	Neurology	Vascular dementia	17	1283	1.Cognitive function (HDS) (within 28 to 90 days)	1. body needling/ electro-acupuncture/scalp acupuncture vs western medicine	Cochrane risk of bias tool
18	Sang-Ho Kim 2019	Korean	Neurology	Insomnia disorder	22	1761	1.Sleep quality (PSQI) (within 14 to 74 days after treatment)	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
19	Alexander Waits 2016	China	Neurology	Insomnia disorder	13	968	1.Sleep quality (PSQI) (within 3 to 4 weeks)	1. acupressure vs sham acupressure	Cochrane risk of bias tool + Jadad score
20	Xintian Wang 2020	China	Neurology	Sleep quality in hemodialysis patients	7	522	1.Sleep quality (PSQI) (within 4 to 12 weeks after treatment)	1. acupressure vs sham acupuncture	Jadad score
21	Guangcai Zhang 2016	China	Neurology	Perimenopausal sleep disorder	8	539	1.Sleep quality (PSQI)	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Sleep Quality (PSQI)	2. manual acupuncture vs sham acupuncture	
22	Cuihua Yang 2018	China	Neurology	Senile insomnia	7	539	1.Sleep quality (PSQI)	1. manual acupuncture vs western medicine	Jadad score
23	YingYing Zang 2019	China	Neurology	Depression-related sleep disorders	15	1081	1.Sleep quality (PSQI)	1. acupuncture vs western medicine	Cochrane risk of bias tool
24	William Gibson 2017	Australia	Neurology	Neurogenic pain	15	724	1.Pain intensity (VAS)	1. TENS vs sham acupuncture	Cochrane risk of bias

									tool
25	Hyeonseok Noh 2017	Korean	Neurology	Parkinson's disease (PD)	42	2625	1.Assessment of PD symptoms (UPDRS)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
26	Boram Lee 2018	Korean	Neurology	Children with autism spectrum disorder (ASD)	27	1736	1.Evaluation the core features of ASD (Overall CARS score)	1.acupuncture vs behavioral and educational interventions	Cochrane risk of bias tool
							2.Evaluation the core features of ASD (Overall CARS score)	2.acupuncture vs behavioral and educational interventions + music therapy	
27	Mingxiao Yang 2020	China	Neurology	Menstrual migraine	13	826	1.Migraine days per month	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Migraine days per month (at month 3 after treatment)	2.manual acupuncture vs sham acupuncture	
							3.Mean headache intensity (VAS)	3.manual acupuncture/electro-acupuncture vs western medicine	
28	Jia Xu 2018	China	Neurology	Migraine without aura	15	1361	1.Frequency of migraine	1.acupuncture/manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Frequency of migraine	2.acupuncture/manual acupuncture vs western medicine	
							3.Pain intensity (VAS)	3.ear acupuncture/acupuncture vs sham acupuncture	
							4.Pain intensity (VAS)	4.ear acupuncture/acupuncture vs western medicine	

29	Yin Jiang 2018	China	Neurology	Migraine quality of life	62	4947	1.Migraine quality of life (MSQ) (≤ 1 month after treatment, role function-restrictive)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Migraine quality of life (MSQ) (≥ 6 months after treatment, role function-restrictive)	2.acupuncture vs sham acupuncture	
							3.Migraine quality of life (MSQ) (≤ 1 month after treatment, role function-preventive)	3.acupuncture vs sham acupuncture	
							4.Migraine quality of life (MSQ) (≥ 6 months after treatment, role function-preventive)	4.acupuncture vs sham acupuncture	
							5.Migraine quality of life (MSQ) (≤ 1 month after treatment, emotional function)	5.acupuncture vs sham acupuncture	
							6.Migraine quality of life (MSQ) (≥ 6 months after treatment, emotional function)	6.acupuncture vs sham acupuncture	
30	Klaus Linde 2016	Germany	Neurology	Tension headache	12	2349	1.Response after treatment (at least 50% reduction in	1.acupuncture vs sham acupuncture	Cochrane risk of bias

							headache frequency) (within 3 to 4 months after randomization)		tool
31	Hwan Kim 2019	Korean	Neurology	Mild cognitive impairment (MCI)	5	257	1.Cognitive function (MMSE)	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool
							2.Cognitive function (MoCA)	2.electro-acupuncture vs western medicine	
32	Gwang-Ho Choi 2019	Korean	Neurology	Carpal tunnel syndrome (CTS)	12	869	1.Pain (VAS)	1.electro acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS) (at week 4 after randomization)	2.electro acupuncture vs western medicine	
							3.Pain (VAS) (at week 5 after randomization)	3.electro acupuncture vs standard of care	
							4.Key pinch-pinch strength (at a 3-month follow-up)	4.electro acupuncture vs sham acupuncture	
							5.Tip pinch-pinch strength (at a 3-month follow-up)	5.electro acupuncture vs sham acupuncture	
							6.Improvement in functional status and/or health-related quality of life parameter (at month 3 after treatment)	6.electro acupuncture vs sham acupuncture	
33	Xinqiang Ni 2017	China	Neurology	Tic disorder	29	2325	1.Severity of tics (YGTSS)	1.electro-acupuncture/scalp acupuncture vs western medicine	Jadad score
34	Ping Wu 2017	China	Neurology	Prosopalgia	8	477	1.Recurrence rate	1.electro-acupuncture vs western medicine	Cochrane risk of bias

									tool
35	Zhuanzhuan Hou 2017	China	Neurology	Cervical vertigo	10	914	1.Improvement rate of clinical symptoms-headache (at day 20 after treatment)	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Improvement rate of clinical symptoms-vertigo (at day 20 after treatment)	2.acupuncture vs western medicine	
36	Eric Manheime, Ke Cheng 2018	USA	Connective tissue diseases	Hip osteoarthritis	6	413	1.Pain (WOMAC/VAS) (short-term-2 weeks after the end of treatment)	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS)	2.electro-acupuncture vs western medicine	
							3.Function	3.manual acupuncture vs sham acupuncture	
							4.Function (Harris function score)	4.electro-acupuncture vs western medicine	
							5.Quality of life	5.manual acupuncture vs sham acupuncture	
37	Chen Rilán 2020	China	Connective tissue diseases	Knee osteoarthritis	11	727	1.Severity of knee (ISOA)	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool + Jadad score
38	Qinhong Zhang	China	Connective tissue diseases	Chronic knee pain	19	2149	1.Pain (WOMAC)	1.body needling vs no intervention	Cochrane risk of bias

	2017						2.Pain (WOMAC)	2.needle vs standard care	tool
							3.Pain (WOMAC)	3.electro-acupuncture vs western medicine	
39	Qi-ling Yuan 2016	China	Connective tissue diseases	Musculoskeletal pain	6	6382	1.Neck pain after the end of an intervention period (≤1 week after treatment)	1.electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Shoulder pain after the end of an intervention period (≤1 week after treatment)	2.electro-acupuncture vs sham acupuncture	
							3.Myofascial pain after the end of an intervention period (≤1 week after treatment)	3.electro-acupuncture vs sham acupuncture	
							4.Arm pain after the end of an intervention period (≤1 week after treatment)	4.electro-acupuncture vs sham acupuncture	
40	Kim Jiwon 2019	Korean	Connective tissue diseases	Fibromyalgia syndrome	10	690	1.Intensity of Pain	1.manual acupuncture/electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Sleep Quality (PSQI)	2.manual acupuncture/electro-acupuncture vs sham acupuncture	
							3.Fatigue	3.manual acupuncture/electro-acupuncture vs sham acupuncture	

41	Zhou Longyun 2016	China	Connective tissue diseases	Primary osteoporosis	17	1369	1.Pain (VAS)	1. body needling/ electro-acupuncture vs western medicine	Jadad score
42	Wang Kaili 2019	China	Connective tissue diseases	Postmenopausal osteoporosis	10	710	1.Reduction in pain degree (VAS)	1. electro-acupuncture vs western medicine	Cochrane risk of bias tool
43	Mei Ji 2015	China	Connective tissue diseases	Sciatica	12	1842	1.Pain Intensity (VAS)	1. manual acupuncture/electro-acupuncture vs western medicine	Cochrane risk of bias tool
44	Yun-xia Li 2018	China	Connective tissue diseases	Non-specific low back pain	26	7618	1.Pain (VAS)	1. manual acupuncture vs no intervention	Cochrane risk of bias tool
							2.Pain (VAS) in the immediate term (≤ 1 week after treatment)	2. manual acupuncture vs sham acupuncture	
							3.Pain (VAS) in the short term (within 1 week to 3 months after treatment)	3. manual acupuncture vs sham acupuncture	
							4.Pain (VAS) in the intermediate term (within 3 to 12 months after treatment)	4. manual acupuncture vs sham acupuncture	
45	Jiaojun He 2019	China	Ear, nose, and throat disorders	Meniere's disease	12	903	1.Severity of Dizziness Handicap (DHI)	1. acupuncture vs western medicine	Cochrane risk of bias tool
46	Jinzhong 2017	China	Ear, nose, and throat	Allergic rhinitis	11	1805	1.Improvement of nasal symptoms (TNSS)	1. acupuncture vs sham acupuncture	Jadad score

			disorders				2.Improvement of nasal symptoms (TNSS)	2. acupuncture vs western medicine	
47	Lizhong Yu 2019	China	Eye disorders	Dry eye syndrome	11	852	1.Symptom scores	1.acupuncture/electro-acupuncture vs western medicine	Jadad score
48	Kai Zhang 2019	China	Gastrointestinal disorders	Acute pancreatitis	12	841	1.Mortality during the treatment	1.acupuncture+ routine treatment vs routine treatment	Cochrane risk of bias tool
							2.Rate of transfer to surgery or ICU	2.acupuncture+ routine treatment vs routine treatment	
							3.Changes in chronic health evaluation (APACHE II)	3.acupuncture+ routine treatment vs routine treatment	
49	Haizhen Zheng 2019	China	Gastrointestinal disorders	Irritable bowel syndrome (IBS)	41	3440	1.IBS symptom scores	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Quality of life	2.acupuncture vs sham acupuncture	
50	Lu Wang 2020	China	Gastrointestinal disorders	Functional constipation	28	3525	1.Complete spontaneous bowel movement	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Symptoms improvement (CSS)	2.acupuncture vs sham acupuncture	
							3.Patient assessment of constipation quality of Life questionnaire	3.acupuncture vs sham acupuncture	
51	Xin Jin 2018	China	Gastrointestinal disorders	Functional dyspepsia	20	1310	1.Quality of life (NDI-QOLS)	1.acupuncture/electro-acupuncture vs western medicine	Cochrane risk of bias tool +
							2.Symptom scores	2.acupuncture/electro-acupuncture	Jadad score

								3.Symptom scores	3.acupuncture vs western medicine	
52	Yao Tian 2017	China	Gastrointestinal disorders	Peptic ulcer	16	1570	1.The healing rate of ulcer area	1.acupuncture vs western medicine		Cochrane risk of bias tool
							2.The recurrence rate	2.acupuncture vs western medicine		
53	Xuhan Wu 2019	China	Gastrointestinal disorders	Gastroesophageal reflux disease	26	2155	1.Symptom scores	1.acupuncture/electro-acupunctur vs western medicine		Cochrane risk of bias tool
54	Kun Hyung Kim 2018	Korean	Gastrointestinal disorders	Symptomatic gastroparesis	32	2601	1.Symptoms improvement (within 4 to 12 weeks after treatment)	1.acupuncture vs sham acupuncture		Cochrane risk of bias tool
							2.Symptoms improvement (within 4 to 12 weeks after treatment)	2.acupuncture vs western medicine		
55	Xindong Qin 2020	China	Genitourinary disorders	Urinary infection	5	341	1.Composite cure rate	1.acupuncture vs western medicine		Cochrane risk of bias tool
							2.Recurrence	2.acupuncture vs no intervention		
							3.Recurrence	3.acupuncture vs sham acupuncture		
56	JunjunLi 2020	China	Genitourinary disorders	Chronic prostatitis	11	748	1.Symptoms improvement (NIH-CPSI total score)	1.acupuncture 7electro-acupuncture vs sham acupuncture		Cochrane risk of bias tool
							2.Improvement of pain in chronic prostatitis	2.acupuncture /electro-acupuncture vs sham		

							(NIH-CPSI pain domain sub-score)	acupuncture	
							3.Improvement of voiding in chronic prostatitis (NIH-CPSI voiding domain sub-score)	3.acupuncture 3.acupuncture vs sham acupuncture	
							4.Quality of life (NIH-CPSI quality of life domain sub-score)	4.acupuncture 4.acupuncture vs sham acupuncture	
							5.Symptoms improvement (IPSS)	5.acupuncture 5.acupuncture vs sham acupuncture	
							6.Symptoms improvement (NIH-CPSI total score)	6.acupuncture 6.acupuncture vs western medicine	
57	Wei Zhang 2017	China	Genitourinary disorders	Benign prostatic hyperplasia	8	661	1.Symptoms improvement (IPSS) (short-term) (within 4 to 6 weeks after treatment)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Symptoms improvement (IPSS) (medium-term) (within 12 to 18 weeks after treatment)	2.acupuncture vs sham acupuncture	
58	Kun Hyung Kim 2016	China	Genitourinary disorders	Chronic kidney disease	24	1787	1.Depression (BDI)	1.acupuncture vs routine care	Cochrane risk of bias
							2.Depression (BDI)	2.acupuncture vs routine care	

							3.Sleep quality	5.acupressure vs routine care	tool
							4.Sleep quality	4.TENS vs routine care	
							5.Sleep quality	5.acupressure vs western medicine	
							6.Fatigue	5.acupressure vs routine care	
59	Charlotte Southern 2016	UK	Mental health	Alcohol use disorder	15	1378	1.Alcohol craving	1. body needling/ electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	Cochrane risk of bias tool + Jadad score
							2.Alcohol withdrawal symptoms	2.electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	
							3.Alcohol withdrawal symptoms	3.electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	
60	Zhihan Chen 2018	China	Mental health	Opioid use disorder	9	1063	1.Number of positive urine samples for opioids	1.ear (auricular) acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Craving for opioid	2.electro-acupuncture vs no intervention	
							3.Craving for opioid	3.electro-acupuncture/ear (auricular) acupuncture/TENS vs sham acupuncture	
							4.Craving for opioid	4.manual acupuncture vs western medicine	
							5.Depression	5.electro-acupuncture vs no intervention	

							6.Depression	Electro-acupuncture vs sham acupuncture	
61	Jian-Hua Wang 2019	China	Mental health	Smoking cessation	24	3984	1.Abstinence rate (short-term) (≤4 weeks after treatment)	1.kidney and eye acupuncture vs no intervention	Cochrane risk of bias tool
							2.Abstinence rate (long-term) (>6 months after treatment)	2.kidney and eye acupuncture vs no intervention	
							3.Abstinence rate (short-term) (≤4 weeks)	3.kidney and eye acupuncture vs the replacement therapy	
							4.Abstinence rate (long-term) (>6 months)	4.kidney and eye acupuncture vs the replacement therapy	
							5.Nicotine withdrawal symptoms (short-term) (≤4 weeks)	5.body needling/ear acupuncture vs sham acupuncture	
							6.Nicotine withdrawal symptoms (short-term) (≤4 weeks)	6.body needling vs nicotine replacement therapy	
62	Caroline A Smith 2018	Australia	Mental health	Depression	64	7104	1.Severity of depression at the end of treatment	1.manual acupuncture vs no intervention	Cochrane risk of bias tool
							2.Quality of life (emotional) during treatment	2.Electro-acupuncture vs sham acupuncture	
							3.Severity of depression at the end of treatment	3.manual acupuncture vs western medicine	
63	Wei Li 2019	China	Mental health	Postpartum depression	8	517	1.Depression (HAMD)	1.manual acupuncture vs western medicine	Cochrane risk of bias

							2.Depression (HAMD)	2.manual acupuncture vs psychological therapy	tool
							3.Overall effect (EPDS)	3.manual acupuncture vs sham acupuncture	
							4. Overall effect (EPDS)	4.manual acupuncture + psychological therapy vs western medicine	
64	Sean Grant 2018	USA	Mental health	Posttraumatic stress disorder (PTSD)	7	709	1.PTSD symptoms (post-intervention)	1.manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.PTSD symptoms (follow-up for 1 to 6 months)	2.manual acupuncture vs western medicine	
							3.Physical health-related quality of life (follow-up for 4 to 12 weeks)	3.body needling vs standard of care	
							4.Mental health-related quality of life (follow-up for 4 to 12 weeks)	4.body needling vs standard of care	
							5.Functional status (post-intervention)	5.body needling vs no intervention	
							6.Functional status (follow-up for 3 months)	6.body needling vs no intervention	
65	Ning Sun 2020	China	Mental health	Chronic pain emotional disorder	12	2450	1.Emotional health (MSQ) -immediate effect	1.manual acupuncture /electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Emotional health (SF36/SF12)-immediate	2.manual acupuncture /electro-acupuncture vs sham	

							effect	acupuncture	
							3.Emotional health (MSQ) -persistent effects (follow up for 3 months)	3.manual acupuncture 3.manual acupuncture vs sham acupuncture	
							4.Emotional health (SF36/SF12)-persistent effects (follow up for 3 months)	4.manual acupuncture 4.manual acupuncture vs sham acupuncture	
66	Qing Zhang 2018	China	Mental health	Chronic fatigue syndrome (CFS)	16	1346	1.Mental fatigue score of CFS	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Physical fatigue score of CFS	2.manual acupuncture vs sham acupuncture	
67	Yu-Mei Zhong 2019	China	Nutrition and metabolic disorders	Simple obesity	9	473	1.The reduction of body mass index (BMI)	1.body needling /electro-acupuncture/ear acupuncture vs no intervention	Cochrane risk of bias tool
68	Eun-Young Nam 2018	Korean	Obstetrics, gynecology and women's health	Menopausal hot flashes	9	1324	1.Hot flash frequency (≤12 weeks)	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Hot flash frequency (>12 weeks)	2.manual acupuncture vs sham acupuncture	
							3.Hot flash frequency (4 weeks after treatment started)	3.manual acupuncture vs no intervention	
							3. Hot flash frequency (≥12 weeks after treatment started)	4. manual acupuncture vs no intervention	

							5.Hot flash severity (VAS)(≤12 weeks)	1.manual acupuncture vs sham acupuncture	
							6.Hot flash severity (VAS)(>12 weeks)	2.manual acupuncture vs sham acupuncture	
69	Weihan Li 2017	China	Obstetrics, gynecology and women's health	Quality of life in menopausal women	6	419	1.Quality of life in menopausal women (MRS)-at end of treatment	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Menopause rating scale (MRS) -at the follow-up period (within 1 to 3 months after treatment)	2.acupuncture vs sham acupuncture	
70	Caroline A Smith 2020	Australia	Obstetrics, gynecology and women's health	Pain during labour	28	3960	1.Pain intensity (VAS)	1.manual acupuncture/ electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain intensity (VAS)	2.manual acupuncture/ electro-acupuncture vs standard of care	
							3.Pain intensity (VAS)	3.electro-acupuncture vs no intervention	
							4.Pain intensity (VAS)	4.acupressure vs sham acupuncture	
							5.Pain intensity (VAS)	5.acupressure vs standard of care	
71	Ying Tang 2017	China	Obstetrics, gynecology and women's	Postpartum lactating	9	1187	1.The effective rate of lactation within 24 hours after delivery	1.acupressure vs standard of care	Cochrane risk of bias tool

			health				2.The effective rate of lactation within 48 hours after delivery	2.acupressure vs standard of care	
							3. Adequacy ratio of lactation within 24 hours after delivery	3.acupressure vs standard of care	
							4. Adequacy ratio of lactation within 48 hours after delivery	4.acupressure vs standard of care	
							5. Adequacy ratio of lactation within 72 hours after delivery	5.acupressure vs standard of care	
72	Yanjuan Song 2019	China	Obstetrics, gynecology and women's health	Chronic pelvic pain syndrome	12	1027	1.Symptoms improvement (NIH-CPSI)	1. body needling/electro-acupuncture vs western medicine	Cochrane risk of bias tool
73	Caroline A Smith 2016	Australia	Obstetrics, gynecology and women's health	Dysmenorrhea	46	4912	1.Improvement in menstrual symptoms at 3 months after treatment	1. body acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Improvement in menstrual symptoms at 12 months after treatment	2.additional body acupuncture vs sham acupuncture	
							3.Quality of life: physical health	3.manual acupuncture vs sham acupuncture	
							4.Quality of life: mental health	4.manual acupuncture vs sham acupuncture	

							5.Pain relief	5. body needling/manual acupuncture vs western medicine	
							6.Menstrual symptom score	6. body needling/manual acupuncture vs western medicine	
74	Xiaojuan Liu 2020	China	Pregnancy or intended pregnancy	Luteinized unruptured follicle syndrome	10	715	1.Ovulation rate	1. acupuncture vs western medicine	Cochrane risk of bias tool
							2.Pregnancy rate	2. acupuncture vs western medicine	
75	Liu Yun 2019	China	Pregnancy or intended pregnancy	Infertility	22	2591	1.Pregnancy rate	1. acupuncture and auricular point picking vs western medicine	Cochrane risk of bias tool
76	Zhengyun Xie 2019	China	Pregnancy or intended pregnancy	In vitro Fertilization-embryo o transfer	27	6116	1.Clinical pregnancy rate	1. manual acupuncture 2. electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Live birth rate	2. manual acupuncture 3. electro-acupuncture vs sham acupuncture	
							3.Miscarriage rate	3. manual acupuncture 4. electro-acupuncture vs no intervention	
							4.Clinical pregnancy rate	4. manual acupuncture 5. electro-acupuncture vs no intervention	
							5.Live birth rate	5. manual acupuncture/electro-acupuncture vs no intervention	
77	Rupsa C.	USA	Pregnancy or	Hyperemesis	1	81	1.Reduction of nausea	1. acupuncture vs western medicine	Cochrane

	Boelig 2018		intended pregnancy	gravidarum			2.Reduction in vomiting	2.acupuncture vs western medicine	risk of bias tool
78	Chien, T. J. 2017	China	Oncology	Breast cancer-related menopause symptoms	8	504	1. The frequency of hot flush	2.acupuncture vs sham acupuncture	Jadad scale
							2. The severity of hot flush (VAS)	3.acupuncture/electro- acupuncture vs sham acupuncture	
							3. Menopausal symptoms (Kupperman Index)	4.acupuncture/electro- acupuncture vs sham acupuncture	
79	Chiu, H. Y. 2016	China	Oncology	Breast cancer-related menopause symptoms	7	342	1.The hot-flash frequency (short-term effects)	1.acupuncture/electro-acupunctur vs sham acupuncture	Cochrane risk of bias tool
							2.The hot-flash severity (short-term effects)	2.acupuncture vs sham acupuncture	
							3.The menopause-related Symptoms (short-term effects)	3.electro -acupuncture vs sham acupuncture	
							4.The hot-flash frequency (intermediate-term effects)	4.acupuncture/electro-acupunctur vs sham acupuncture	
							5. The hot-flash severity (intermediate-term effects)	5.acupuncture vs sham acupuncture	
							6. The menopause-related symptoms (intermediate-term effects)	6. acupuncture/ electro-acupuncture vs sham acupuncture	
80	Chien, T. J 2015	China	Oncology	Aromatase inhibitor-induced arthralgia in breast	5	207	1. Joint pain (BPI-SF)	1.acupuncture/electro-acupunctur vs sham acupuncture	Jadad scale
							2.Joint stiffness	2.acupuncture/electro-acupunctur	

				cancer			(WOMAC)	vs sham acupuncture	
81	WU Junying 2018	China	Neurology	Post-stroke shoulder-hand syndrome	14	1043	1.The shoulder-hand syndrome assessment score (SHSS)	1.acupuncture vs rehabilitation	Jadad scale
							2.The upper limb motor function (FMA)	2.acupuncture vs rehabilitation	
							3.Pain (VAS)	3.acupuncture vs rehabilitation	
82	LIU Kai	China	Neurology	Post-stroke shoulder-hand syndrome	7	401	2.The upper limb motor function (FMA)	2.acupuncture vs rehabilitation	Cochrane risk of bias tool
							2.Activities of daily living	2.acupuncture vs rehabilitation	
83	QUE Fangxu	China	Neurology	Post-stroke depression	18	1813	1. Depression (HAMD-17)	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2. Depression (HAMD-24)	2.acupuncture vs western medicine	
84	Qian Wang 2016	China	Neurology	Post-stroke depression	27	1729	1. Depression (HAMD)	1.acupuncture vs western medicine	Cochrane risk of bias tool
85	Jie Zhan 2016	China	Neurology	Post-stroke depression	14	1180	1. Depression (HAMD)	1.lectro-acupuncture vs western medicine	Cochrane risk of bias tool
86	Chengyong Liu 2020	China	Neurology	Insomnia disorder	13	1061	1.Sleep quality (PSQI)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
87	Longcong Dong 2019	China	Neurology	Insomnia disorder	11	792	1.Sleep quality (PSQI)	1.acupuncture vs western medicine	Cochrane risk of bias tool

88	Waits, A 2018	China	Neurology	Insomnia disorder	13	968	1.Sleep quality (PSQI)	1.acupressure vs sham acupressure	Cochrane risk of bias tool
89	Lan Y 2015	China	Neurology	Insomnia disorder	15	1429	1.Sleep quality (PSQI)	1.Regular acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Sleep quality (PSQI)	2.Regular acupuncture vs western medicine	
90	Wenfang Song 2019	China	Neurology	Insomnia disorder	7	474	1.Sleep quality (PSQI)	1.acupuncture vs standard of care	Cochrane risk of bias tool
91	Cui Qiuyue 2018	China	Neurology	Migraine	15	1288	1.Pain (immediate-term)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (short-term)	2.acupuncture vs sham acupuncture	
							3.Pain (long-term)	3.acupuncture vs sham acupuncture	
92	Linde K 2016	Germany	Neurology	Migraine	22	4985	1.Headache frequency (after treatment)	1.acupuncture vs no acupuncture	Cochrane risk of bias tool
							2.Headache frequency (after treatment)	2.acupuncture vs sham acupuncture	
							3.Headache frequency (after treatment)	3.acupuncture vs western medicine	
							4.Headache frequency (follow-up for 3 weeks to 12 months)	4.acupuncture vs no intervention	
							5.Headache frequency	5.acupuncture vs sham	

							(follow-up for 3 weeks to 12 months)	acupuncture	
							6.Headache frequency (follow-up for 3 weeks to 12 months)	6.acupuncture vs western medicine	
93	Pu Shengxiong 2016	China	Neurology	Migraine acute Attack	5	618	1.Pain (VAS)- 2 hours after treatment	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS)- 4 hours after treatment	2.acupuncture vs sham acupuncture	
94	Jinna Yu 2016	China	Neurology	Tourette syndrome	7	564	1.Severity of tics (YGTSS)	1.acupuncture vs western medicine	Cochrane risk of bias tool
95	Lien-Chen Wu 2018	China	Connective tissue diseases	Chronic back pain	12	700	1.Pain (VAS/BPS)	1.TENS vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS/BPS)	2.TENS vs sham acupuncture	
96	Feifan Liang 2016	China	Connective tissue diseases	Non-specific low back pain	10	751	1.Function improvement (ODI)	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Pain (VAS)	2.acupuncture vs sham acupuncture	
							3.Function improvement (RMDQ)	3.acupuncture vs sham acupuncture	
97	Zhiqing Liu 2017	China	Ear, nose, and throat disorders	Allergic rhinitis	10	552	1.Symptom scores	1.acupuncture vs western medicine	Cochrane risk of bias tool
98	Zhang Jin	China	Ear, nose, and	Allergic rhinitis	11	1805	1. Reducing of nasal	1. manual acupuncture vs sham	Jadad score

	2017		throat disorders				symptoms (TNSS)	acupuncture	
							2. Reducing of nasal symptoms (TNSS)	2. manual acupuncture vs western medicine	
99	Lei Yang 2015	China	Eye disorders	Dry eye syndrome	7	383	1.Tear break-up time	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Severity of dry eyes (Schirmer I test)	2. manual acupuncture vs western medicine	
100	Jiang Hui-ru 2017	China	Eye disorders	Dry eye syndrome	8	847	1.Tear break-up time	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Severity of dry eyes (Schirmer I test)	2. manual acupuncture vs western medicine	
101	Zhang Jieying 2016	China	Gastrointestinal disorders	Functional constipation	10	1162	1.Weekly frequency of defecation	1. electro-acupuncture vs western medicine	Jadad score
							2.Symptoms improvement (CCS)	2. electro-acupuncture vs western medicine	
102	Peng Jieru 2018	China	Gastrointestinal disorders	Functional dyspepsia	7	1044	1.Postprandial fullness	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Early satiety	2. manual acupuncture vs western medicine	
							3.Epigastric pain	3. manual acupuncture vs western medicine	
							4.Epigastric burning	4. manual acupuncture vs western medicine	
103	Shang-Chi h Chang 2016	China	Genitourinary disorders	Chronic prostatitis	7	502	1.Symptoms improvement (NIH-CPSI)	1. manual acupuncture/ electro-acupuncture vs sham acupuncture	Jadad score

							2.Symptoms improvement (NIH-CPSI)	2.a.needle-acupuncture vs western medicine	
							3. Symptoms improvement (IPSS)	2.b.manul acupuncture/needle-acupuncture vs sham acupuncture	
104	Qin.Z 2016	China	Genitourinary disorders	Chronic prostatitis	7	471	1.Symptoms improvement (NIH-CPSI total score)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
								2.a.needle acupuncture vs western medicine	
							2.Improvement of pain in chronic prostatitis (NIH-CPSI pain domain subscore)	1.acupuncture vs sham acupuncture	
								2.a.needle acupuncture vs western medicine	
							3.Improvement of voiding in chronic prostatitis (NIH-CPSI voiding domain subscore)	1.acupuncture vs sham acupuncture	
								2.a.needle acupuncture vs western medicine	
							4.Quality of life (NIH-CPSI quality of life domain subscore)	1.acupuncture vs sham acupuncture	
								2.a.needle acupuncture vs western medicine	
							5.Symptoms improvement (IPSS)	1.acupuncture vs sham acupuncture	
105	Liu.B. P. 2016	China	Genitourinary disorders	Chronic prostatitis	10	754	1.Symptoms improvement (NIH-CPSI total score)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
								2.acupuncture vs western medicine	
							2.Response rate	1.acupuncture vs sham	

								acupuncture	
								2.acupuncture vs western medicine	
							3.Improvement of pain in chronic prostatitis (NIH-CPSI pain domain subscore)	1.acupuncture vs sham acupuncture	
								2.acupuncture vs western medicine	
							4.Improvement of voiding in chronic prostatitis (NIH-CPSI voiding domain subscore)	1.acupuncture vs sham acupuncture	
								2.acupuncture vs western medicine	
							5.Quality of life (NIH-CPSI quality of life domain subscore)	1.acupuncture vs sham acupuncture	
								2.acupuncture vs western medicine	
106	Armour. M 2019	Australia	Mental health	Depression	29	2268	1.The severity of depression	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
107	ZHANG Rong-qiang 2017	China	Nutrition and metabolic disorders	Simple obesity	6	236	1.Weight	1.acupuncture vs sham acupuncture	Jadad score
							2.BMI	3.acupuncture vs sham acupuncture	
108	CHEN Xia 2016	China	Nutrition and metabolic disorders	Simple obesity	21	1929	1.Weight	1.acupuncture vs no intervention	Cochrane risk of bias tool
								2.acupuncture vs sham acupuncture	
								3.acupuncture vs western medicine	
							2.BMI	1.acupuncture vs no intervention	

								2.acupuncture vs sham acupuncture	
								3.acupuncture vs western medicine	
109	Xue Dongqun 2015	China	Nutrition and metabolic disorders	Simple obesity	17	1246	1.Weight	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.BMI	2.acupuncture vs sham acupuncture	
110	Jianrong Chen 2018	China	Nutrition and metabolic disorders	Obesity	33	2503	1.Weight	1.acupuncture vs no intervention	Cochrane risk of bias tool
								2.acupuncture vs no intervention	
111	Junpeng Yao 2019	China	Nutrition and metabolic disorders	Obesity	12	1151	1.BMI	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Waist circumference	2.acupuncture vs sham acupuncture	
112	Zhang Lin 2015	China	Nutrition and metabolic disorders	Obesity	23	1836	1.BMI	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Weight	2.acupuncture vs sham acupuncture	
113	Kepei Zhang 2018	China	Nutrition and metabolic disorders	Obesity	21	1389	1.BMI	1.acupuncture vs no intervention	Cochrane risk of bias tool
114	Wu Qian 2016	China	Obstetrics, gynecology and women's health	Quality of life in menopausal women	10	801	1.Hot flashes frequency	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Hot flashes severity	2.acupuncture vs sham acupuncture	

115	Raana Haj Najafi 2020	China	Obstetrics, gynecology and women's health	Pain during labour	10	1271	1.Labour pain	1.acupressure vs sham acupuncture	Cochrane risk of bias tool
								2.acupressure vs no intervention	
116	Najafi,F. 2018	Iran	Obstetrics, gynecology and women's health	Pain during labour	16	1652	1.The severity of pain after the intervention	1.acupressure vs sham acupuncture	Quality criteria were not included in the analysis
117	Lixia,Lin 2020	China	Obstetrics, gynecology and women's health	Dysmenorrhea	23	1739	1. Pain improvement (VAS)	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2. Symptoms improvement (Dysmenorrhea symptom score)	2.acupuncture vs western medicine	
118	Ge,Li 2017	China	Obstetrics, gynecology and women's health	Dysmenorrhea	56	4600	1.Pain improvement (VAS)	1.acupuncture vs western medicine	Cochrane risk of bias tool
119	Ranran Gao 2019	China	Pregnancy or intended pregnancy	Infertility	9	1441	1.Pregnancy	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Ovulation	2.acupuncture vs western medicine	
							3.Pregnancy loss	3.acupuncture vs western medicine	
120	Boelig,R.C 2016	USA	Pregnancy or intended pregnancy	Hyperemesis gravidarum	25	2052	1.Reduction or cessation in nausea	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Reduction or cessation in vomiting	2.acupuncture vs western medicine	

Note: **VAS**, Visual Analog Scale. **TENS**, Transcutaneous Electrical Nerve Stimulation. **BFI**, Brief Fatigue Inventory. **BPI**, Brief Pain Inventory. **FMA**, Fugl-Meyer Assessment. **MBI**, Modified Barthel Index. **ROM**, Range of Motion. **FMA**, Fugl-Myer Assessment. **ASS**, Ashworth Scale for Spasticity. **BI**, Barthel Index. **HAMD**, Hamilton Depression Scale. **MMSE**, Mini-mental State Examination. **ADL**, Activities of Daily Living. **MoCA**, Montreal Cognitive Assessment. **NDS**, Neurological Deficit Scale. **HDS**, Hastgawa Dementia Scale. **PSQI**, Pittsburgh Sleep Quality Index. **UPDRS**, Unified PD Rating Scale. **CARS**, Childhood Autism Rating Scale. **MSQ**, Migraine Specific Quality of Life Questionnaire. **YGTSS**, Yale Global Tic Severity Scale. **ISOA**, Index of Severity for Osteoarthritis. **WOMAC**, Western Ontario and McMaster Universities Osteoarthritis Index. **DHI**, Dizziness Handicap Inventory. **TNSS**, Total Nasal Symptom Score. **ICU**, Intensive Care Unit. **APACHE**, Acute Physiology, Age, Chronic Health Evaluation. **SS**, Constipation symptoms scores. **NDI-QOLS**, Nipping Index of Quality of Life. **NIH-CPSI**, National Institute of Health Chronic Prostatitis Symptom Index. **IPSS**, International Prostate Symptom Score. **BDI**, Beck Depression Inventory. **EPDS**, Edinburgh Postnatal Depression Scale. **SF36/SF12**, the MOS 36-item short-form health survey/the MOS 12-item short-form health survey. **BMI**, Body Mass Index. **MRS**, Menopause Rating Scale. **BPI-SF**, Brief Pain Inventorye-Short Form. **BPS**, Back Performance Scale. **ODI**, Oswestry Disability Index. **RMDQ**, Roland-Morris Disability Questionnaire. **CCS**, Cleveland constipation Score.

Oncology:

Acupuncture for Menopause related symptoms in breast cancer patients:

<http://www.epistemonikos.org/matrixes/6052b7e77aac84d2a4bc132>

Acupuncture for Aromatase inhibitor-related arthralgia in breast cancer:

<http://www.epistemonikos.org/matrixes/605809987aac84d2a4d29c2>

Acupuncture for Breast cancer:

<http://www.epistemonikos.org/matrixes/606c97307aac82511263c9b>

Symptom Management and quality of life of cancer:

<http://www.epistemonikos.org/matrixes/60754c217aac868e925b7d1>

Acupuncture for Cancer pain:

<http://www.epistemonikos.org/matrixes/6076698a6ec0d67000198ba9>

Neurology:

Acupuncture for Post-stroke depression:

<http://www.epistemonikos.org/matrixes/6065516b7aac81f38258e79>

Acupuncture for Post-stroke shoulder-hand syndrome:

<http://www.epistemonikos.org/matrixes/606551f87db23a2fb7b02ff0>

Acupuncture for Migraine:

<http://www.epistemonikos.org/matrixes/60654f7a7db23a2fb8b0a125>

Acupuncture for Sleep quality in hemodialysis patients:

<http://www.epistemonikos.org/matrixes/606556a47db23a2fb6afee4b>

Acupuncture for Tic disorder:

<http://www.epistemonikos.org/matrixes/606557ee7db23a2fb8b0a26a>

Acupuncture for Sleep quality:

<http://www.epistemonikos.org/matrixes/60770b777aac82c4a27e6f7>

Acupuncture for Acute stroke:

<http://www.epistemonikos.org/matrixes/607547867aac84ffe263ce3>

Acupuncture for Carpal tunnel syndrome:

<https://www.epistemonikos.org/matrixes/607562c46ec0d636a11a80f0>

Acupuncture for Cervical vertigo:

<https://www.epistemonikos.org/matrixes/606c9e367aac82511263f05#6080c8097db23a42946079e9>

Acupuncture for Children with Autism spectrum disorder:

<http://www.epistemonikos.org/matrixes/607549af7db23a5a64afd7d1>

Acupuncture for Cognitive impairment after stroke:

<http://www.epistemonikos.org/matrixes/607d5cac7aac81939564de5>

Acupuncture for Depression sleep disorder:

<http://www.epistemonikos.org/matrixes/607568bb7db23a5a64afe193>

Acupuncture for Mild cognitive impairment:

<http://www.epistemonikos.org/matrixes/607560d86ec0d6700019313f>

Acupuncture for Menstrual migraine:

<http://www.epistemonikos.org/matrixes/607697047aac868e92622f8>

Acupuncture for Neuropathic pain:

<http://www.epistemonikos.org/matrixes/60769b327aac80c3027703a>

Acupuncture for Non-acute stage of cerebral infarction neurological function deficit:

<http://www.epistemonikos.org/matrixes/607797686ec0d6027b7f0969>

Acupuncture for Perimenopausal sleep disorders:

<https://www.epistemonikos.org/matrixes/606cd0ee7aac825112653d3#606cd0ee7aac825112653d3>

Acupuncture for Senile insomnia:

<http://www.epistemonikos.org/matrixes/607704227db23a044bafb01e>

Acupuncture for Post-stroke aphasia:

<http://www.epistemonikos.org/matrixes/607413996ec0d636a11a4963>

Acupuncture for Poststroke spastic hemiplegia:

<https://www.epistemonikos.org/matrixes/606cf4a67db23a5dc2b08f34#607541e07db23a5a64afd581>

Acupuncture for Tension-type headache:

<http://www.epistemonikos.org/matrixes/6076aafc7db23a5a64b04823>

Acupuncture for Trigeminal neuralgia:

<http://www.epistemonikos.org/matrixes/607581537db23a5a64afe932>

Acupuncture for Vascular dementia:

<http://www.epistemonikos.org/matrixes/60741c507aac80c3026e8f6>

Sciatica:

<http://www.epistemonikos.org/matrixes/608f473c6ec0d60630e0bbe8>

Quality of Life in Patients With Migraine:

<http://www.epistemonikos.org/matrixes/609140236ec0d655ed7d723b>

Connective tissue diseases:

Acupuncture for Back pain:

<http://www.epistemonikos.org/matrixes/60654c866ec0d61dc0b9e0d4>

Acupuncture for Chronic knee pain:

<http://www.epistemonikos.org/matrixes/60763d5c6ec0d67000197cae>

Acupuncture for Fibromyalgia syndrome:

<http://www.epistemonikos.org/matrixes/6076bfe26ec0d660db19eeb9>

Acupuncture for Hip osteoarthritis:

<http://www.epistemonikos.org/matrixes/60768e607db23a1655b056b0>

Acupuncture for Knee osteoarthritis:

<http://www.epistemonikos.org/matrixes/6076c2506ec0d6700019a59f>

Acupuncture for Musculoskeletal pain:

<http://www.epistemonikos.org/matrixes/6077f17a6ec0d6027a7ef48a>

Acupuncture for Parkinson's disease:

<http://www.epistemonikos.org/matrixes/6076a3156ec0d67000199c32>

Acupuncture for Primary osteoporosis:

<http://www.epistemonikos.org/matrixes/6077205b7db23a4318afb11e>

Gastrointestinal disorders:

Acupuncture for Constipation:

<http://www.epistemonikos.org/matrixes/606544157aac85001269b84>

Acupuncture for Functional dyspepsia:

<http://www.epistemonikos.org/matrixes/606547657aac85001269c7d>

Acupuncture for Irritable bowel syndrome:

<http://www.epistemonikos.org/matrixes/60654bae7db23a2fb7b02f74>

Acupuncture for Gastroesophageal reflux disease:

<http://www.epistemonikos.org/matrixes/607466e27aac80c302701b8>

Acupuncture for Peptic ulcer:

<http://www.epistemonikos.org/matrixes/60746fad6ec0d62d51193fe6>

Acupuncture for Symptomatic gastroparesis:

<http://www.epistemonikos.org/matrixes/607415617aac84ffe262ff5>

Acute pancreatitis:

<http://www.epistemonikos.org/matrixes/60913cd17db23a371762cfa0>

Genitourinary disorders:

Acupuncture for Chronic prostatitis:

<http://www.epistemonikos.org/matrixes/6065420e7aac85000261d36>

Acupuncture for Benign prostatic hyperplasia:

<http://www.epistemonikos.org/matrixes/607404097db23a1655afc9c1>

Acupuncture for Chronic kidney disease:

<https://www.epistemonikos.org/en/documents/2c4a15dfe327aa116dad32863b3e16fe4296dfac/matrix>

Acupuncture for Chronic pelvic pain syndrome:

<http://www.epistemonikos.org/matrixes/607451616ec0d62d511934a7>

Acupuncture for Urinary tract infection:

<http://www.epistemonikos.org/matrixes/60741aea7db23a2c33b22b24>

Mental health:

Acupuncture for Depression:

<http://www.epistemonikos.org/matrixes/606545206ec0d61dc0b9debe>

Acupuncture for Postpartum depression:

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Acupuncture for smoking cessation:

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Acupuncture for Alcohol dependency:

<http://www.epistemonikos.org/matrixes/6073bd237aac82c4a278889>

Acupuncture for Chronic fatigue syndrome:

<http://www.epistemonikos.org/matrixes/60745af66ec0d660db19bb9a>

Acupuncture for Emotional disorder in patients with chronic pain:

<http://www.epistemonikos.org/matrixe/60745cfd7aac82c4a27a22f>

Acupuncture for Post-traumatic stress disorder:

<http://www.epistemonikos.org/matrixe/6077060d6ec0d613b11902ea>

Acupuncture for Opioid use disorder:

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Nutrition and metabolic disorders:

Acupuncture for Simple obesity:

<http://www.epistemonikos.org/matrixes/606555887aac81f38258fbf>

Obstetrics, gynecology and women's health:

Acupuncture for Dysmenorrhea:

<http://www.epistemonikos.org/matrixes/606546707aac85001269c31>

Acupuncture for Quality of life in menopausal women:

<http://www.epistemonikos.org/matrixes/606552906ec0d61dc0b9e298>

Acupuncture for Labor pain:

<http://www.epistemonikos.org/matrixes/6065593f6ec0d61dbfb960fa>

Acupuncture for Luteinized unruptured follicle syndrome:

<http://www.epistemonikos.org/matrixes/6074672d7aac82c4a27a429>

Acupuncture for Menopausal hot flashes:

<http://www.epistemonikos.org/matrixes/6075828b7db23a5a64afe983>

Acupuncture for Poor ovarian responders:

<http://www.epistemonikos.org/matrixes/60746f547db23a5dc2b211f3>

Acupuncture for Postmenopausal osteoporosis:

<http://www.epistemonikos.org/matrixes/607470127aac8550b26d0e0>

Acupuncture for Postpartum lactation:

<http://www.epistemonikos.org/matrixes/607583bb6ec0d67000193c79>

Pregnancy or intended pregnancy:

Acupuncture for Infertility:

<http://www.epistemonikos.org/matrixes/606548cc6ec0d61dc0b9dfcf>

Acupuncture for Hyperemesis gravidarum:

<http://www.epistemonikos.org/matrixes/606558736ec0d61dc0b9e444>

Acupuncture for Vomitus gravidarum:

<http://www.epistemonikos.org/matrixes/606558736ec0d61dc0b9e444>

Acupuncture for Pregnancy outcomes of in vitro fertilization:

<http://www.epistemonikos.org/matrixes/607470217db23a3f42b0efd4>

Perioperative diseases:

Acupuncture for Hot flashes after breast cancer surgery:

<http://www.epistemonikos.org/matrixes/60741b957aac80c3026e89a>

Acupuncture for Pain control after total knee arthroplasty:

<http://www.epistemonikos.org/matrixes/60766b257aac868e9261718>

Acupuncture for Postoperative pain:

<http://www.epistemonikos.org/matrixes/60766be16ec0d67000198c77>

Acupuncture for Recovery of gastrointestinal function after operation:

<http://www.epistemonikos.org/matrixe/60766c7d6ec0d67000198ca4>

Ear, nose, and throat disorders:

Acupuncture for Rhinitis:

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<http://www.epistemonikos.org/matrixes/606553857aaac81f38258f0f>

Meniere disease:

<http://www.epistemonikos.org/matrixes/60a3fb477aaac828e47619af>

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PRISMA 2020 Checklist

Section and Topic	Item #	Checklist item	Location where item is reported
TITLE			
Title	1	Identify the report as a systematic review.	1
ABSTRACT			
Abstract	2	See the PRISMA 2020 for Abstracts checklist.	2-3
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of existing knowledge.	4
Objectives	4	Provide an explicit statement of the objective(s) or question(s) the review addresses.	5
METHODS			
Eligibility criteria	5	Specify the inclusion and exclusion criteria for the review and how studies were grouped for the syntheses.	7
Information sources	6	Specify all databases, registers, websites, organisations, reference lists and other sources searched or consulted to identify studies. Specify the date when each source was last searched or consulted.	7-8
Search strategy	7	Present the full search strategies for all databases, registers and websites, including any filters and limits used.	8
Selection process	8	Specify the methods used to decide whether a study met the inclusion criteria of the review, including how many reviewers screened each record and each report retrieved, whether they worked independently, and if applicable, details of automation tools used in the process.	8
Data collection process	9	Specify the methods used to collect data from reports, including how many reviewers collected data from each report, whether they worked independently, any processes for obtaining or confirming data from study investigators, and if applicable, details of automation tools used in the process.	9
Data items	10a	List and define all outcomes for which data were sought. Specify whether all results that were compatible with each outcome domain in each study were sought (e.g. for all measures, time points, analyses), and if not, the methods used to decide which results to collect.	9
	10b	List and define all other variables for which data were sought (e.g. participant and intervention characteristics, funding sources). Describe any assumptions made about any missing or unclear information.	9
Study risk of bias assessment	11	Specify the methods used to assess risk of bias in the included studies, including details of the tool(s) used, how many reviewers assessed each study and whether they worked independently, and if applicable, details of automation tools used in the process.	10
Effect measures	12	Specify for each outcome the effect measure(s) (e.g. risk ratio, mean difference) used in the synthesis or presentation of results.	10
Synthesis methods	13a	Describe the processes used to decide which studies were eligible for each synthesis (e.g. tabulating the study intervention characteristics and comparing against the planned groups for each synthesis (item #5)).	10-11
	13b	Describe any methods required to prepare the data for presentation or synthesis, such as handling of missing summary statistics, or data conversions.	10-11
	13c	Describe any methods used to tabulate or visually display results of individual studies and syntheses.	10-11
	13d	Describe any methods used to synthesize results and provide a rationale for the choice(s). If meta-analysis was performed, describe the model(s), method(s) to identify the presence and extent of statistical heterogeneity, and software package(s) used.	10-11
	13e	Describe any methods used to explore possible causes of heterogeneity among study results (e.g. subgroup analysis, meta-regression).	10-11
	13f	Describe any sensitivity analyses conducted to assess robustness of the synthesized results.	10-11
Reporting bias assessment	14	Describe any methods used to assess risk of bias due to missing results in a synthesis (arising from reporting biases).	10
Certainty assessment	15	Describe any methods used to assess certainty (or confidence) in the body of evidence for an outcome. For peer review only - http://bmjopen.bmj.com/site/about/guidelines.xhtml	10

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PRISMA 2020 Checklist

Section and Topic	Item #	Checklist item	Location where item is reported
RESULTS			
Study selection	16a	Describe the results of the search and selection process, from the number of records identified in the search to the number of studies included in the review, ideally using a flow diagram.	12
	16b	Cite studies that might appear to meet the inclusion criteria, but which were excluded, and explain why they were excluded.	12
Study characteristics	17	Cite each included study and present its characteristics.	12
Risk of bias in studies	18	Present assessments of risk of bias for each included study.	12
Results of individual studies	19	For all outcomes, present, for each study: (a) summary statistics for each group (where appropriate) and (b) an estimate and its precision (e.g. confidence/credible interval), ideally using structured tables or plots.	13-16
Results of syntheses	20a	For each synthesis, briefly summarise the characteristics and risk of bias among contributing studies.	13-16
	20b	Present results of all statistical syntheses conducted. If meta-analysis was done, present for each the summary estimate and its precision (e.g. confidence/credible interval) and measures of statistical heterogeneity. If comparing groups, describe the direction of the effect.	13-16
	20c	Present results of all investigations of possible causes of heterogeneity among study results.	13-16
	20d	Present results of all sensitivity analyses conducted to assess the robustness of the synthesized results.	13-16
Reporting biases	21	Present assessments of risk of bias due to missing results (arising from reporting biases) for each synthesis assessed.	13-16
Certainty of evidence	22	Present assessments of certainty (or confidence) in the body of evidence for each outcome assessed.	13-16
DISCUSSION			
Discussion	23a	Provide a general interpretation of the results in the context of other evidence.	16-19
	23b	Discuss any limitations of the evidence included in the review.	16-19
	23c	Discuss any limitations of the review processes used.	16-19
	23d	Discuss implications of the results for practice, policy, and future research.	16-19
OTHER INFORMATION			
Registration and protocol	24a	Provide registration information for the review, including register name and registration number, or state that the review was not registered.	20-21
	24b	Indicate where the review protocol can be accessed, or state that a protocol was not prepared.	20-21
	24c	Describe and explain any amendments to information provided at registration or in the protocol.	20-21
Support	25	Describe sources of financial or non-financial support for the review, and the role of the funders or sponsors in the review.	20-21
Competing interests	26	Declare any competing interests of review authors.	20-21
Availability of data, code and other materials	27	Report which of the following are publicly available and where they can be found: template data collection forms; data extracted from included studies; data used for all analyses; analytic code; any other materials used in the review.	20-21

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Evidence mapping and overview of systematic reviews of the effects of acupuncture therapies

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Evidence mapping and overview of systematic reviews of the effects of acupuncture therapies

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Liming Lu, Yuqing Zhang, Shuqi Ge, and Hao Wen contributed equally to this work

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Abstract

Objective To provide a route map regarding systematic reviews (SRs) of acupuncture therapies that will meet two goals: i) to identify areas in which more or better evidence is required and ii) to identify acupuncture applications that, although proven effective, remain underutilized in practice, and thus warrant more effective knowledge dissemination.

Eligibility criteria We included SRs that conducted meta-analyses (MAs) of randomized controlled trials (RCTs) for this overview.

Information sources We searched for SRs without language restrictions from January 2015 to November 2020 in four Chinese electronic databases and Epistemonikos database. And We also searched for newly published RCTs that were eligible for selected best SRs in PubMed, MEDLINE, Cochrane Central Register of Controlled Trials, Embase, and four Chinese electronic databases from its lasted search dates to November 2020.

Synthesis of results We re-analyzed the selected MAs if new primary studies were added. We used random-effects model to calculate the overall effect.

Results Our search identified 120 SRs published in the last five years addressing acupuncture therapies across 12 therapeutic areas and 77 diseases and conditions. The SRs included 205 outcomes and involved 138,995 participants from 1,402 RCTs. We constructed 77 evidence matrices, including 120 SRs and their included RCTs in the Epistemonikos database. Seventy-seven SRs represented the effect estimate of acupuncture therapies. Finally, we system summarized the areas of possible underutilization of acupuncture therapies (high or moderate certainty evidence of large or moderate effects), and the areas of warranting additional investigation of acupuncture therapies (low or very low certainty evidence of moderate or large effects).

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Conclusion The evidence maps and overview of SRs on acupuncture therapies identified both therapies with substantial benefits that may require more assertive evidence dissemination and promising acupuncture therapies that require further investigation.

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Strengths and limitations of this study

This study was the first evidence map for acupuncture therapies across all therapeutic areas to our knowledge.

This study includes a comprehensive search of eligible SRs and RCTs and explicit eligibility criteria.

This study use of both a combination of evidence mapping and an overview approach provides readers with both a broad perspective of the evidence landscape and in-depth information on the certainty of evidence and the effect size on patient-important outcomes

This study, in-depth collaboration with the Epistemonikos foundation, makes it possible for readers to have an overview of evidence and access the primary studies

The limitation of this review is that we excluded studies investigating the effect of acupuncture as an adjunct therapy , and some diseases/conditions may be omitted.

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INTRODUCTION

Clinicians and patients worldwide now make wide use of acupuncture, a form of traditional medicine¹. According to a 2013 World Health Organization (WHO) report², 103 of the WHO's member countries have approved the use of acupuncture. According to a 2013 survey conducted by the World Federation of Acupuncture-moxibustion Societies (WFAS)³, 183 (91%) of the 202 countries surveyed use acupuncture, while 178 (93%) of the 192 member countries of the United Nations (UN) have acupuncture practices, and 59 (31%) have partial or full insurance coverage.

Based on the extensive application of acupuncture in practice, in recent years⁴ numerous systematic reviews (SRs) have explored the effects of acupuncture therapies. Despite the mass of evidence, acupuncture practice and related policies practice in different jurisdictions varies, including over-or underutilization⁵. Cultural, societal, and awareness factors may result in research waste.

Highlight possible over-or underutilization or both compared to Western clinicians; Chinese clinicians treat many more diseases and conditions using acupuncture therapies⁶. Insurance in Western countries covers only some conditions, e.g., low back pain, at the health care system level compared to that in Eastern countries (e.g., South Korea, China)⁷. Reviews of existing evidence may clarify areas in which over-utilization exists (highlighting the need for either de-implementation or further research) and where under-utilization exists (highlighting the need for more effective knowledge dissemination).

Evidence mapping is one of the latest methods for synthesizing evidence using a user-friendly format with visual graphics and or searchable databases. Evidence mapping integrates, analyses, refines and presents the evidence quickly and conveniently⁸, in the process helping define future research and knowledge dissemination priorities⁸. This relatively novel method for the overview of SRs is particularly suitable for areas where a large number of SRs exist and overlap across

diseases and conditions. To date, no evidence maps or overview of SRs summarizing evidence regarding acupuncture therapies exist.

We, therefore, developed a route map guiding the acupuncture global research agenda to either further investigate promising acupuncture therapies or implementing more assertive evidence dissemination on areas where acupuncture demonstrated substantial benefits. In this article, we present: 1) the characteristics of the included SRs from multiple dimensions, including populations, interventions, comparisons, and outcomes; 2) the most up-to-date treatment effect of acupuncture therapies in all conditions supported by RCT-based evidence along with the corresponding certainty of evidence.

Methods

Definition

Acupuncture: We used the WHO’s definition of acupuncture, as follows ⁹: *Acupuncture literally means to puncture with a needle. However, acupuncture may also involve the application of other kinds of stimulation to certain points.* We included any type of commonly used acupuncture that stimulates certain points with needles, lasers, electricity, or pressure. The specific types of acupuncture therapies included in this manuscript were manual acupuncture, electro-acupuncture, body needling, ear (auricular) acupuncture, scalp acupuncture, laser acupuncture, transcutaneous electrical nerve stimulation (TENS), and acupressure. Forms combined with moxibustion or medication, such as warm needling, acupoint injection, or hydro-acupuncture, were excluded.

Manual acupuncture ¹⁰: The most commonly seen acupuncture therapies worldwide. A practitioner uses thin, solid, metallic needles to penetrate the skin on a series of acupoints and then performs gentle and specific stimulation techniques. The concept of manual acupuncture emphasizes the non-electrified stimulation method.

Electro-acupuncture: Additional electric current stimulation following the needles insertion.
Body needling ¹¹ : A type of manual acupuncture performed on the trunk and limbs of the body, excluding the acupoints on the scalp and ears.
Ear (auricular) acupuncture ¹⁰ : Acupuncture at the points located on the auricle, also called auriculo-acupuncture.
Scalp acupuncture ¹⁰ : Acupuncture at the specific lines located on the scalp.
Laser acupuncture ¹⁰ : A variant of acupuncture in which needling is replaced by laser irradiation on the points.
Transcutaneous electrical nerve stimulation (TENS) ¹⁰ : A therapy that uses low voltage electrical current to provide pain relief.
Acupressure ¹² : A practitioner use hand, elbow, or various devices to apply physical pressure to acupuncture points or trigger points.

Patient-important outcome: A patient-important outcome was defined as an outcome for which one would answer “yes” to the following question: “If patients knew that this outcome was the only thing to change with treatment, would they consider receiving this treatment is associated with side effects or cost?”¹³ Some patient-important outcomes are shown below:

I . Mortality

1. All-cause mortality
2. Disease-specific mortality

II . Morbidity

1. Cardiovascular major morbid events
2. Other major morbid events (e.g., loss of vision, seizures, fractures)
3. Onset/recurrence/relapse of cancer and other chronic diseases (e.g., chronic obstructive pulmonary disease exacerbation, symptomatic diabetes)
4. Renal failure requiring dialysis

5. Hospitalization, medical and surgical procedures (e.g., pacemaker placement, cardioversion, and revascularization)
6. Symptomatic infections
7. Dermatologic/rheumatologic disorders
III. Quality of life/functional status (e.g., failure to become pregnant, failure to nurse/breastfeed, depression)/specific symptoms (e.g., pain, nausea)

Disease and condition ¹⁴: The term disease broadly refers to any condition that impairs the body's normal functioning. The term condition is a synonym for medical state, which describes an individual patient's current state from a medical standpoint, such as postoperative pain, postoperative ileus after abdominal surgery, cancer-related pain, and breast cancer-related lymphoedema.

Eligibility and inclusion criteria

Type of study. We included SRs that conducted meta-analyses (MAs) of randomized controlled trials (RCTs) for this overview. An eligible SR fulfilled the following criteria:

- Reported a search in at least one electronic database.
- Reported at least one criterion for the inclusion of studies.
- Reported an effect estimate for at least one patient-important outcome.

We excluded overviews of SRs, narrative reviews, protocols of SRs, or studies published prior to January 2015.

Type of participants. There were no restrictions on the type of participants. To classify diseases and conditions, we used the taxonomy established in the Living Overview of Evidence (L-OVE) platform ¹⁵ built upon the International Classification of Diseases, tenth revision (ICD-10), with modification.

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Type of interventions. We included SRs summarizing at least one of the following comparisons:

- Acupuncture vs. no intervention/waiting list
- Acupuncture vs. sham/placebo
- Acupuncture vs. standard of care/usual care
- Acupuncture vs. western medicine
- Acupuncture vs. other interventions (such as psychotherapy, rehabilitation)

We excluded SRs with the control group receiving Traditional Chinese Medicine-related therapies, such as acupuncture, moxibustion, scraping, cupping, bloodletting, acupoint catgut embedding, massage, Chinese herbal medicine, and tai chi.

Type of outcomes. We included SRs reporting at least one patient-important outcome.

Database and search

We searched for SRs without language restrictions from January 2015 to November 2020 in four Chinese electronic databases (Chinese National Knowledge Infrastructure (CNKI), Chinese Biomedical Literature Database (CBM), WANFANG Database, and Chinese Scientific Journal Database (VIP), and Epistemonikos database (<https://www.epistemonikos.org/>). The Epistemonikos database includes SRs from ten electronic databases (PubMed, EMBASE, Cochrane Database of SRs (CDSR), Cumulative Index to Nursing and Allied Health Literature (CINAHL), PsycINFO, Latin American and Caribbean Health Sciences (LILACS), Database of Abstracts of SRs of Effectiveness (DARE), Campbell Library, Joanna Briggs Institute (JBI) Database, and EPPI-Centre Library).

We also searched for newly published RCTs that were eligible for selected best SRs (from its lastest search dates to November 2020) in PubMed, MEDLINE, Cochrane

Central Register of Controlled Trials (CENTRAL), Embase, CNKI, CBM, WAN FANG Database, and VIP.

Selection of best SRs for effect estimates and certainty of evidence assessment

Two reviewers (Shuqi Ge and Hao Wen) independently screened titles and abstracts to identify eligible SRs. The same reviewers retrieved and independently evaluated the full text of potentially eligible SRs for final inclusion and addressed disagreements through discussion. If a consensus could not be reached, a third (Liming Lu) resolved the conflict.

When multiple SRs existed for the same disease or condition, we selected the best SR to provide the most up-to-date effect estimate and its corresponding certainty of evidence. To select the best SR, we applied the following selection criteria in the order listed:

- I . For each clinical question, we selected the most recent SR.
- II . If the publication years of SRs were consistent or close, we selected the SR that contained the most RCTs or the Cochrane SR.
- III. If the primary studies included in the SRs completely overlapped, that is, the primary studies were consistent in quantity and content, we selected the highest-quality SR using “A Measurement Tool to Assess SRs” (AMSTAR) 2. If the primary studies partially overlapped or did not overlap, we updated the MA with all eligible primary studies. We updated identified SRs when newly published RCTs were eligible to be included.

Selection of newly published RCTs

For all best SRs, two reviewers (Shuqi Ge and Hao Wen) independently screened for newly published RCTs that might be eligible. A third author resolved any unresolved disagreements between the reviewers.

Data collection and analysis

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Data extraction

For each condition, two reviewers independently extracted data from all SRs using standardized forms, including the following: study ID; first author; publication year; country; therapeutic areas (e.g., periprocedural care or oncology) classified by the modified ICD-10 classification; the number of participants; the number of included primary studies; outcomes; interventions and comparison. In addition, for the selected best SR, reviewers extracted information on the effect sizes and related 95% confidence intervals (CIs). To ensure consistency, prior to the data extraction, we conducted calibration exercises. Discrepancies in the extracted data were resolved by discussion; if needed, a third author arbitrated.

For newly published RCTs that are eligible for the best SRs, we extracted the following information: study ID; first author; year of publication; the number of participants; interventions; comparisons; result data; and patient-important outcomes that matched the selected SRs.

Quality assessment

Quality of the SRs

We assessed the methodological quality of all SRs using the AMSTAR 2 tool; items 2, 4, 7, 9, 11, 13, and 15 were considered critical items. We categorized the overall quality of the SRs as high (meeting the criteria of all items or not meeting the criteria of only one non-critical item), moderate (not meeting the criteria of more than one non-critical item), low (not meeting the criteria of one critical item) and critically low (not meeting the criteria of more than one critical item)¹⁶. Two independent reviewers performed each quality assessment, with discrepancies adjudicated by a third reviewer.

Certainty of evidence

We assessed the certainty of evidence for patient-important outcomes in the best SRs using the grading of recommendations assessment, development, and evaluation

(GRADE) methodology through GRADEpro Guideline Development Tool (GDT). GRADE classified the certainty of evidence as high, moderate, low, or very low. If SRs used GRADE, we used their certainty ratings. If they did not use GRADE, we assessed the certainty of evidence.

Data synthesis

If newly published RCTs were updated in the SRs, we recalculate the pooled estimates in each meta-analysis. We used random-effects model to calculate the overall effect.

Evidence mapping

For all SRs and included RCTs, assisted with mapping, we visualized the overall and geographical distribution of evidence corresponding to therapeutic areas, acupuncture therapies’ effect size, and certainty of evidence.

For the geographical distribution of all included SRs, we presented a geographical information system map. For the best SRs, we used a bubble plot to display therapeutic areas, their corresponding SRs, RCTs, and the type of acupuncture tested.

For patient-important outcomes with large or moderate effect in the best SRs, we used evidence figures to show the effect size and corresponding certainty of evidence. For the pooled effect estimate of dichotomous outcomes, we presented the risk ratio (RR) and absolute risk reduction (ARR) along with the 95% CIs. We calculated the ARR by multiplying the median of risks observed in control groups by the pooled risk ratio and then presenting the result in terms of the anticipated increase or decrease in patients experiencing the effect per 1,000 patients treated. For continuous outcomes, we presented the standardized mean difference (SMD) along with its 95% CI. When the best SRs reported other effect estimates, we converted all to SMD or RR and classified the effect size as “small”, “moderate,” or “large.” For the relative effect of dichotomous outcomes, we chose RR of “2.0 or 0.5” as the reference for small and large effects, respectively ($RR \geq 2.0$ or $RR \leq 0.5$ as large, $0.5 < RR < 2.0$ as small). For

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continuous outcomes, we used SMD of 0.4 and 0.7¹⁷ as the reference for small, moderate, and large effects (SMD<0.4 as small, 0.4≤SMD<0.7 as moderate, ≥0.7 as large).

Through a tabular approach, a matrix of evidence displayed the clusters of SRs with corresponding included RCTs. For every disease or condition where acupuncture SRs exist, we created a matrix consists of all SRs and their corresponding RCTs¹⁸. If newly published RCTs were eligible for any existing SR, we added the new RCTs to the matrices. We aggregated all matrices into an online repository on the Epistemonikos database.

Patient and public involvement

No patients were involved in selecting the research question, conducting the study, or interpreting the results, this study solely focused on patient-important outcomes.

Results

Results of literature search and study selection

We retrieved 6,122 citations. After removing 2,695 duplicates and screening 3,427 titles/abstracts, we evaluated the full text of 614 articles, of which 120 proved eligible. **Figure 1** presents the study selection process. **Figure 2** shows the distribution of the country of publication represented by the first author's affiliation. For each disease or condition, we used the best SR for each question to construct the bubble plot (**Figure 3**) and evidence figures (**Figure 4**, **Figure 5**, and **Appendix 1**). **Appendix 2** provides reasons for exclusion at the full-text screening stage.

Characteristics of included SRs

Appendix 3 Table 1 shows the characteristics of the 120 included SRs and MAs published between 2015 and 2020, of which SRs published in 2019 accounted for the highest proportion (n=28, 23.3%), followed by those published in 2018 (n=26,

21.7%). The first authors of the included SRs are from China (n=98, 81.7%), South Korea (n=9, 7.5%), Australia (n=5, 4.2%), the USA (n=4, 3.3%), Germany (n=2, 1.7%), the UK (n=1, 0.8%) and Iran (n=1, 0.8%) (Figure 2). The included studies involve 12 therapeutic areas (periprocedural care, oncology, neurology, connective tissue diseases, ear, nose, and throat disorders, eye disorders, gastrointestinal disorders, genitourinary disorders, mental health, nutrition and metabolic disorders, obstetrics, gynecology, and women’s health, and pregnancy or intended pregnancy) and 77 diseases or conditions. The reviews include 1,402 RCTs that enrolled 138,995 unique participants. The number of RCTs included in each SR ranges from 1 to 68, and the sample sizes range from 81 to 7,618 (Figure 3 provides further details). Typical reviews apply the Cochrane risk of bias tool (n=98, 81.7%), do not use GRADE (n=97, 80.8%), and do not report the time point at which outcomes are measured (n=86, 71.7%).

Methodological quality of included SRs

Figure 6 summarizes the methodological quality of the 120 included SRs. Of all 120 SRs, 119 (99.2%) SRs are rated as having “low” or “critically low” quality. Failure to provide a list of excluded studies and explain any modifications of previously published protocols are the main reason for the quality being rated low or critically low.

Evidence map: bubble plot

We included 77 best SRs to construct the bubble plot. The bubble plot (Figure 3) visualized the evidence distribution across 12 therapeutic areas in which we presented the number of SRs, their included RCTs, and the total number of participants. Of the 77 reviews, neurology is the content area most frequently represented (33.8%), with a number of areas in the vicinity of 10% (oncology, connective tissue diseases, gastrointestinal disorders, mental health, obstetrics, gynecology, and women's health), and others 5.2 % or less (periprocedural care, genitourinary disorders, eye disorders, ear, nose, and throat disorders, nutrition and metabolic disorders, pregnancy or

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intended pregnancy). The number of RCTs included in each review ranges from 1 to 40. RCTs in only three areas (neurology, connective tissue diseases, mental health) enroll more than 16,000 participants. Manual acupuncture proves the most frequently used intervention (54.1%), following by electro-acupuncture (20.2%) and body needling (5.5%).

Evidence figure

We included 77 best SRs to construct the evidence figures (Figure 4, Figure 5, and Appendix 1).

Effective interventions at risk of underutilization

★Large effect with moderate certainty evidence

Therapies directed at improvement in functional communication of post-stroke aphasia patients, reduction in myofascial pain, and increased lactation success rate within 24 hours post-delivery demonstrated probable large effects ($RR \geq 2.0$; $SMD \geq 0.7$). Details of comparisons and effect estimates are in Figure 4.

★Moderate effect with high or moderate certainty evidence

Therapies directed at relief of neck pain and shoulder pain demonstrated moderate effects ($0.4 \leq SMD < 0.7$, high certainty evidence).

Therapies directed at a reduction in the severity of vascular dementia symptoms, relief of fibromyalgia-related pain and non-specific low back pain, and improvement of allergic rhinitis nasal symptoms demonstrated probable moderate effects ($0.4 \leq SMD < 0.7$, moderate certainty evidence). Details of comparisons and effect estimates are in Figure 4.

Promising but unproven interventions warranting further study

★Large effect with low or very low certainty evidence

Low-certainty evidence

Therapies directed at the reduction in the length of first flatus and defecation in postoperative ileus after abdominal surgery, reduction in pain of post-stroke shoulder-hand syndrome, increase in motor function and reduction in spasm symptoms of post-stroke spastic hemiplegia patients, improvement in sleep quality of patients with insomnia disorder, hemodialysis patients and menopausal women, reduction in neurogenic pain, improvement in the symptoms of autism spectrum disorder in children, reduction in the severity of migraine pain, improvement in quality of life of migraine patients, reduction in the severity of carpal tunnel syndrome pain and tic symptoms in patients with tic disorder, reduction in sciatica pain, improvement in quality of life and constipation symptoms of functional dyspepsia patients, reduction in the severity of pain and voiding symptoms and improvement in quality of life of chronic prostatitis patients, increase in abstinence rate for smoking in short and long term, reduction in severity of opioid craving and depression in opioid use disorder, reduction in body mass index in obesity patients and improvement in success rate of lactation within 24 and 72 hours after delivery, improvement in the overall symptoms of chronic pelvic pain syndrome, reduction in severity of pain and menstrual symptoms of dysmenorrhea, and improvement in pregnancy rate among infertile women may result in a large effect ($RR \geq 2.0$; $SMD \geq 0.7$). (Details of comparisons and effect estimates are in **Figure 5**)

Very low-certainty evidence

Therapies directed at relief of postoperative pain on movement or cough and aromatase Inhibitor-induced arthralgia in breast cancer, improvement in quality of life of breast cancer patients, increase in motor function and pain in post-stroke shoulder-hand syndrome, increase in sleep quality of insomnia patients and menopausal women, reduction in frequency of migraine symptoms, reduction in the severity of carpal tunnel syndrome pain, improvement in function of hip osteoarthritis patients, relief of pain caused by postmenopausal osteoporosis, reduction in the severity of dizziness in Meniere’s disease, improvement in symptoms of xerophthalmia, reduction in the risk of peptic ulcer recurrence, improvement in symptoms of

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gastroparesis, reduction in the risk of urinary tract infection recurrence, reduction in the severity of chronic prostatitis, reduction in the severity of depression in chronic kidney disease, opioid use disorder, and in postpartum depression, reduction in the severity of alcohol craving in alcohol use disorder, improvement in functional status in posttraumatic stress disorder, decrease in mental fatigue in chronic fatigue syndrome, reduction in frequency of hot flash symptom and improvement in the symptoms of menopausal women, and relief of pain during labour may result in a large effect (RR smaller than 0.5; SMD greater than 0.7). (Details of comparisons and effect estimates are in Figure 5)

★Moderate effect with low or very low-certainty evidence

Low-certainty evidence

Therapies directed at a reduction in the severity of hot flashes after breast cancer surgery, reduction in the severity of nausea and vomit in cancer patients, increase in motor function and activities of daily living of post-stroke spastic hemiplegia, improvement in the symptoms of pediatric autism spectrum disorder and sleep quality in patients with fibromyalgia syndrome, relief of non-specific low back pain, increase in complete spontaneous bowel symptom of functional constipation patients, improvement in symptoms of functional dyspepsia patients, reduction in alcohol withdrawal symptoms in alcohol use disorder patients, reduction in the severity of depression in patients with depression, and reduction in hot flash frequency in menopausal women may result in a moderate effect ($0.4 \leq \text{SMD} < 0.7$). (Details of comparisons and effect estimates are in Appendix 1)

Very low-certainty evidence

Therapies directed at relief of postoperative resting pain and postoperative (total knee arthroplasty) pain at 24h, increase in sleep quality of insomnia patients, improvement in cognitive function of mild cognitive impairment patients, relief of pain, and improvement in quality of life of hip osteoarthritis patients, reduction in the severity

of constipation symptoms of functional constipation patients, improvement in constipation symptoms of functional dyspepsia patients, and improvement in the severity of depression and sleep quality in patients with chronic kidney disease may result in a moderate effect ($0.4 \leq \text{SMD} < 0.7$). (Details of comparisons and effect estimates are in Appendix 1)

MA supplementation and updating

We updated three selected SRs with five RCTs published after the search date of the selected SRs.

Matrices of evidence

We produced 77 matrices of evidence clusters of SRs with corresponding included RCTs. Among all matrices, about three quarters ($n=56$, 72.73 %) contained one SR, the rest ($n=21$, 25.97%) included two or more SRs in which simple obesity had the largest number of SRs ($n=8$). We digitalized this portion on Epistemonikos(<https://www.epistemonikos.org/>).

We presented two examples for the digitized matrices: Acupuncture for Non-specific low back pain: (URL: <https://www.epistemonikos.org/matrixes/60654c866ec0d61dc0b9e0d4>) (Figure 7); Acupuncture for Allergic Rhinitis: (URL: <http://www.epistemonikos.org/matrixes/606553857aac81f38258f0f>) (Figure 8).

Appendix 4 has the links to the remaining 75 matrices.

Discussion

Principal findings

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Our evidence mapping and overview of SRs included 120 SRs across 12 therapeutic areas and 77 diseases or conditions, including 138,995 participants from 1,402 RCTs. Neurological conditions proved the most frequently studied area; connective tissue, mental health, obstetrics, gynecology, and women's health also proved frequent areas of study. While ear, nose, and throat disorders, eye disorders, nutrition, and metabolic disorders had the fewest SRs (Figure 3). The conditions and outcomes in which acupuncture is at highest risk of underutilization include the following: lactation within 24 hours after delivery, post-stroke aphasia, myofascial pain (pain relief), vascular dementia, neck, shoulder, and non-specific low back pain, fibromyalgia syndrome, allergic rhinitis (Figure 4).

The conditions and outcomes in which acupuncture therapies showed promising effect yet warranting further research include the following: peptic ulcer, urinary infection, smoking cessation, lactation within 24 and 72 hours after delivery, etc. (Figure 5 and Appendix 1)

Strengths and limitations of the study

Our study, the first describing an acupuncture evidence map, has several strengths. First, this is the first evidence map for acupuncture therapies across all therapeutic areas to our knowledge. Second, we had clear, practical objectives: to identify therapies with large or moderate effects supported by high or moderate certainty evidence at risk of underutilization and therapies suggesting large or moderate effects supported by low or very low-quality evidence warranting further investigations. Third, our use of both a combination of evidence mapping and an overview approach provides readers with both a broad perspective of the evidence landscape and in-depth information on the certainty of evidence and the effect size (large, moderate, and small) on patient-important outcomes¹⁹. Fourth, by only including patient-important outcomes and summarizing the results with additional information on the absolute rather than the relative effect size, our study adds more value to support clinical and

health system decision-making than the minimal contextualized approach adopted by most SRs or overviews. Fifth, the digitalization of available evidence provides a repository and a roadmap for readers’ further usage. Readers not only have an overview of evidence but also have access to the primary studies. Our in-depth collaboration with the Epistemonikos foundation makes this possible. Finally, we have made efforts to minimize bias in every step of this project. For the literature search, an experienced librarian developed the search strategy and performed the comprehensive literature search. All screening and data extraction were performed independently and in duplicate. These rigorous processes increased the credibility of our study.

Our study also has several limitations. First, we excluded studies investigating the effect of acupuncture as an adjunct therapy (e.g., acupuncture combined with Western medicine or rehabilitation). Second, despite the non-randomized studies overwhelmingly providing only low-certainty evidence, excluding observational studies might limit the conclusion of our evidence map. Third, most SRs did not specify the follow-up time of the reported outcomes. We did not retrieve all of the follow-up times corresponding to the outcomes from the original 1,402 RCTs but reported the information provided in the SRs. Fourth, a large number of low or critically low-quality included SRs warrant caution when interpreting our research. Fifth, since this study only included the SRs from January 2015 to November 2020, some useful SRs with high quality might be omitted. Finally, and perhaps most important, we provided only candidates for possible underutilization. The interventions in which high or moderate quality evidence had demonstrated large or moderate effects are only candidates for underutilization – identification of areas in which more assertive dissemination efforts may prove beneficial will require utilization data.

Comparison with other studies

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Current overviews of SRs on acupuncture therapies²⁰⁻²² covered a limited number of diseases. McDonald J et al. conducted a narrative review to identify existing evidence on acupuncture's efficacy in 122 conditions²³ using literature search, study selection, and evidence extraction methods that were neither systematic nor transparent. Du et al.'s conducted a narrative review and a national survey among 524 acupuncturists and identified 400 diseases and conditions treated by acupuncture²⁴⁻²⁵. Their project's objective was to summarize the landscape of current practice in China rather than provide a systematic and comprehensive view of the evidence map for acupuncture therapies.

Implications for practice and policy

The areas in which high or moderate certainty evidence demonstrates the large or moderate-sized effects of acupuncture therapy mandate its widespread use. Patients, clinicians, guideline developers, health policymakers, and payers can utilize the digitalized repository on Epistemonikos to support point-of-care decision-making, to produce additional evidence summaries (e.g., develop clinical practice guidelines (CPGs) or policy briefs), or to make decisions at the health system level (e.g., recommendations, implementation decisions, and reimbursement decisions).

Implications for research

Trialists can review diseases and conditions with high/moderate-certainty evidence before conducting new research to reduce research waste (see [Figure 4](#) for more details). Granting agencies can use our research to assess the need and relevance for grant applications.

Ensuring that clinicians and patients are making optimal use of acupuncture therapies with substantial effects demonstrated by high or moderate certainty evidence will require surveys of the use of these therapies in practice. Should such surveys demonstrate underutilization, concerted efforts to remedy the underutilization will be

required. We identified a large number of outcomes in various diseases and conditions with large/moderate effect sizes and low/very low-certainty evidence, e.g., peptic ulcer, urinary infection, smoking cessation, lactation within 24 and 72 hours after delivery etc. These areas represent potentially fruitful targets for future clinical trials. Grant agencies can consider setting up or encouraging research in the areas mentioned above. Trialists will need to address the above areas when conducting future research. Trialists, systematic reviewers, and grant agencies can utilize the digitalized repository on Epistemonikos to assist in the design of RCTs (e.g., fine-tuning the research questions, selecting the outcomes) and SRs.

Conclusion

The evidence maps and overview of SRs on acupuncture therapies identified both promising acupuncture therapies that require further investigation and therapies with demonstrated substantial benefits that may require more assertive evidence dissemination.

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Patient consent for publication

Not required.

Ethics approval

Institutional review board clearance is not required for this systematic review as all data are publicly available.

Provenance and peer review

Not commissioned; externally peer reviewed.

Data availability statement

The full dataset and statistical code will be available upon reasonable request by emailing Nenggui Xu.

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Supplemental material

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Figure legend/caption

Figure 1 Flow chart of the publication-selection process

Figure 2 Country distribution of the first authors affiliation in all included systematic reviews

Figure 3 Bubble plot

Note: Each pie represents a therapeutic area. Pie size: number of RCTs (larger = more studies).

Figure 4 Large or moderate effects with high or moderate certainty evidence

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; SC: standard care; NRT: nicotine replacement therapy; WM: western medicine; RH: rehabilitation. The asterisk (*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 5 Large effects with low or very low certainty evidence

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENS: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western

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medicine; BEI: behavioral and educational interventions; RH: rehabilitation; MT: music therapy. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 6 Methodological quality: evaluation results of each AMSTAR2 question of included studies.

Note. Y, yes; PY, partial yes; N, no.

Figure 7 Digitized matrix: Acupuncture for Non-specific low back pain

Figure 8 Digitized matrix: Acupuncture for Rhinitis

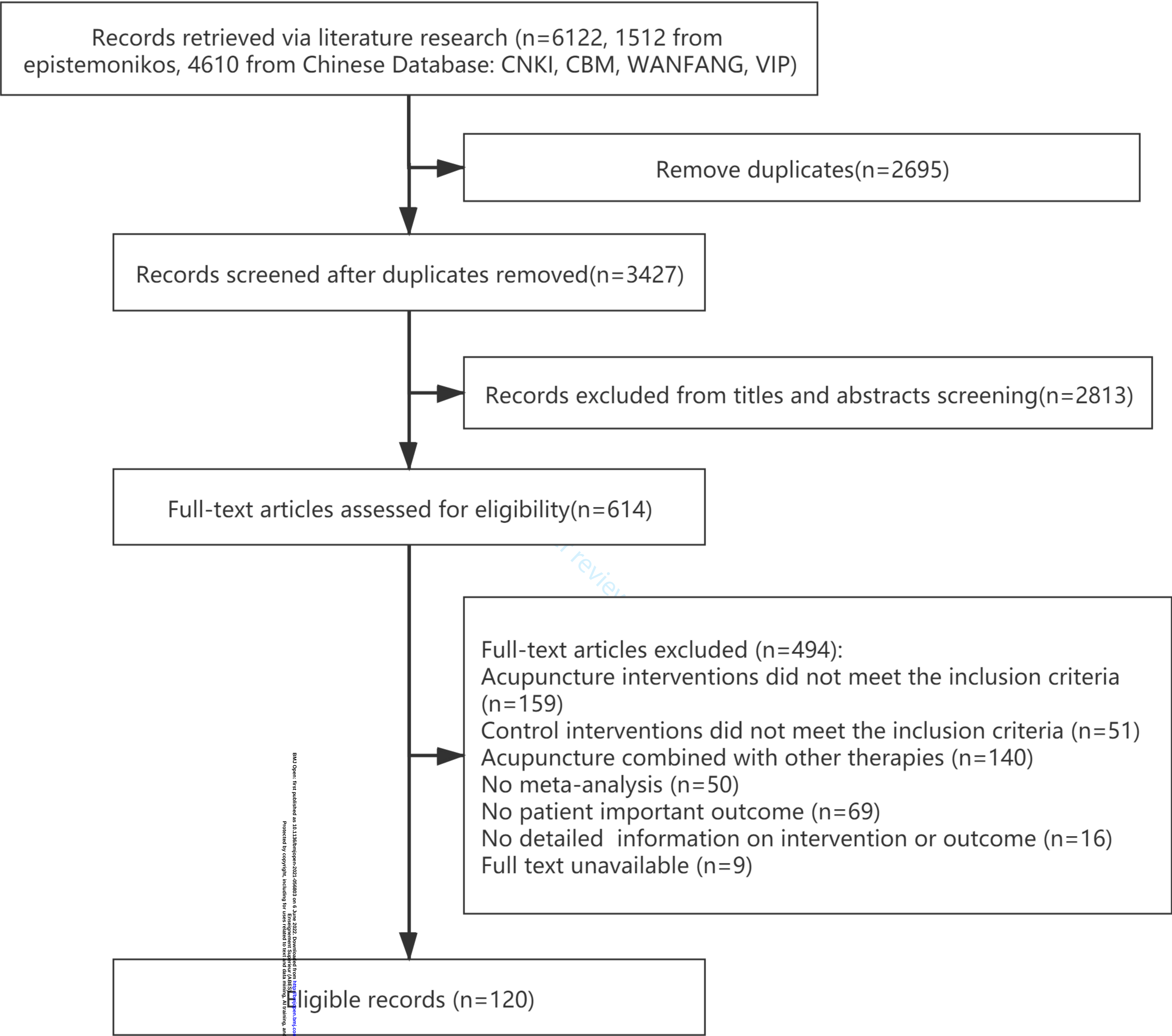


Figure 1 Flow chart of the publication-selection process.

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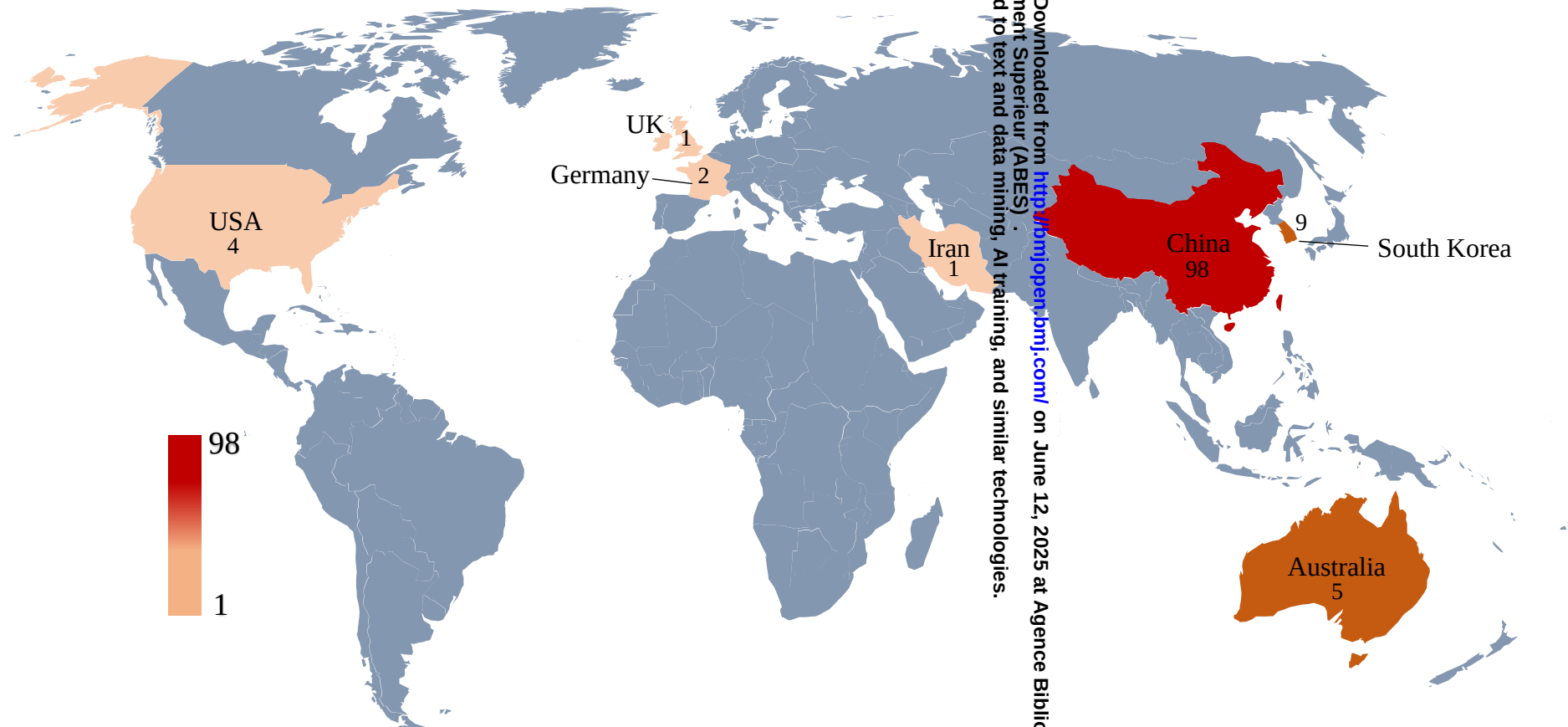


Figure 2 Country distribution of the first author's affiliation in all included systematic reviews

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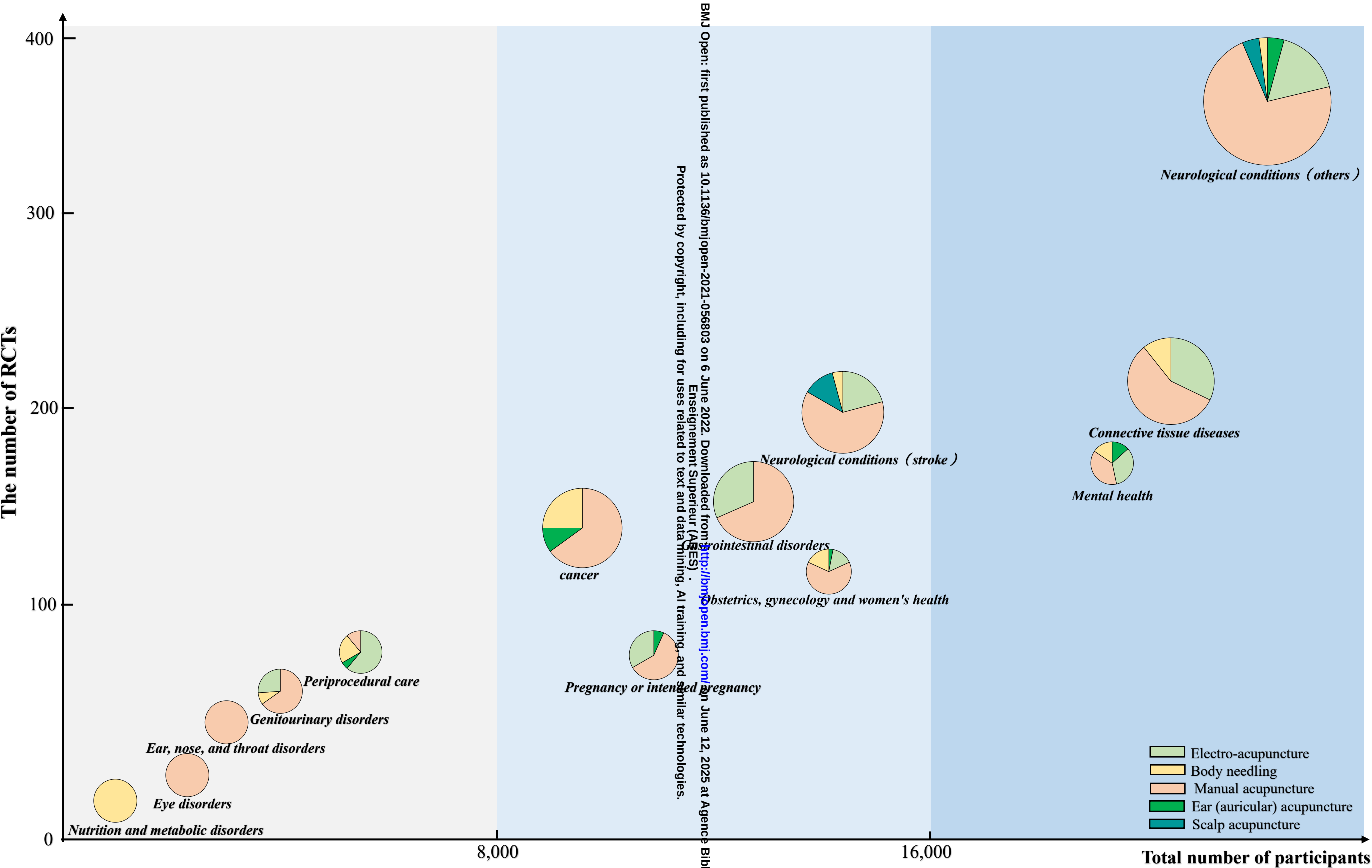


Figure 3 Bubble plot

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tevent	Tsample	Cevent	Csample	SMD(95%CI)	RR(95%CI)	CoE	ARR(95% CI)
Large Effect										
Binlong Zhang 2019	Neurology (Post-stroke aphasia)									
MA/scalp + RH vs RH	Improved functional communication	8		243		238	1.01(0.81,1.2)		Moderate	
Qi-ling Yuan 2016	Connective tissue diseases (Musculoskeletal pain)									
MA vs SA	Intensity of myofascia pain (<1 week after treatment) *	13		222		192	-1(-1.43,-0.57)		Moderate	
Ying Tang 2017	Obstetrics, gynecology and women's health (Postpartum lactating)									
MA vs SC	Increase in lactation success rate within 24 hours post-delivery	5	165	279	73	278		2.24(1.58,3.17)	Moderate	380 more per 1,000(from 178 more to 666 more)
Moderate Effect										
Qi-ling Yuan 2016	Connective tissue diseases (Musculoskeletal pain)									
MA vs SA	Intensity of neck pain (<1 week after treatment)*	6		213		200	-0.42(-0.62,-0.22)		High	
MA vs SA	Intensity of shoulder pain (<1 week after treatment)*	5		262		233	-0.63(-0.91,-0.36)		High	
Tong Li 2019	Neurology (Vascular dementia)									
MA vs WM	Severity of dementia symptoms	6		265		265	0.53(0.29,0.76)		Moderate	
Kim Jiwon 2019	Connective tissue diseases (Fibromyalgia syndrome)									
MA/EA vs SA	Intensity of pain *	11		242		317	-0.49(-0.79,-0.2)		Moderate	
Yun-xia Li 2018	Connective tissue diseases (Non-specific low back pain)									
MA vs SA	Intensity of pain (within 1 week to 3 months after treatment) *	5		686		614	-0.47(-0.77,-0.17)		Moderate	
Jinzhong 2017	Ear, nose, and throat disorders (Allergic rhinitis)									
MA vs SA	Severity of nasal symptoms *	4		198		194	-0.47(-0.67,-0.27)		Moderate	

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; SC: standard care; NRT: nicotine replacement therapy; WM: western medicine; RH: rehabilitation. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 4 Large or moderate effects with high or moderate certainty evidence

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tevent	Tsample	Cevent	Csample	SMD(95%CI)	RR(95%CI)	CoE	ARR(95% CI)
Large Effect										
Kai-Bo Chen 2019	Peripractical care (Postoperative ileus after abdominal surgery)									
EA vs SC	Time to first flatus *	14		470		456	-1.1(-1.54,-0.65)		Low	
EA vs SC	Time to first defecation *	12		407		396	-0.84(-1.29,-0.39)		Low	
Shaonan Liu 2019	Neurology (Post-stroke shoulder-hand syndrome)									
EA+RH vs RH	Intensity of pain *	7		258		254	-0.94(-1.48,-0.41)		Low	
Wenjuan Fan 2020	Neurology (Post-stroke spastic hemiplegia)									
EA vs RH	Improved motor function	1		40		40	0.78(0.32,1.23)		Low	
MA+RH vs RH	Severity of spasm symptoms	6		204		205	-1.07(-1.84,-0.29)		Low	
Alexander Waits 2016	Neurology (Insomnia disorder)									
MA vs SA	Sleep quality (within 3 to 4 weeks) *	7		199		186	-1.01(-1.38,-0.65)		Low	
Wenfang Song 2018	Neurology (Sleep quality in hemodialysis patients)									
MA vs SA	Sleep quality *	7		261		261	-0.81(-1.25,-0.36)		Low	
Guangcai Zhang 2016	Neurology (Perimenopausal sleep disorder)									
MA vs SA	Sleep quality *	1		9		9	-2.49(-3.8,-1.19)		Low	
William Gibson 2017	Neurology (Neurogenic pain)									
TENs vs SA	Intensity of pain *	5		94		80	-0.96(-1.27,-0.64)		Low	
Boram Lee 2018	Neurology (Autism spectrum disorder in children)									
MA vs BEI+ MT	Symptoms improvement *	2		70		68	-1.87(-3.21,-0.53)		Low	
Jia Xu 2018	Neurology (Migraine without aura)									
AA/MA vs SA	Intensity of pain *	4		103		103	-0.8(-1.18,-0.43)		Low	
Yin Jiang 2018	Neurology (Migraine)									
MA vs SA	Quality of life (<1 month after treatment, role function-restrictive)	6		143		105	2.62(1.21,4.04)		Low	
MA vs SA	Quality of life (<1 month after treatment, role function-preventive)	6		143		105	0.75(0.18,1.33)		Low	
MA vs SA	Quality of life (<1 month after treatment, emotional function)	6		143		105	0.72(0.11,1.32)		Low	
Gwang-Ho Choi 2019	Neurology (Carpal tunnel syndrome)									
MA vs SA	Intensity of pain (at week 4 after randomization)*	1		13		13	-1.14(-1.98,-0.3)		Low	
Xinqiang Ni 2017	Neurology (Tic disorder)									
EA vs WM	Severity of tics symptom *	22		757		488	-1.29(-1.87,-0.7)		Low	
Mei Ji 2015	Connective tissue diseases (Sciatica)									
MA/EA vs WM	Intensity of pain *	3		121		120	-0.72(-0.98,-0.46)		Low	
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)									
MA/EA vs WM	Quality of life	3		100		97	1.19(0.88,1.5)		Low	
MA vs WM	Symptoms improvement *	2		84		84	-1.27(-1.89,-0.65)		Low	
Junjun Li 2020	Genitourinary disorders (Chronic prostatitis)									
MA/EA vs SA	Intensity of pain *	4		135		137	-0.79(-1.25,-0.33)		Low	
MA/EA vs SA	Severity of voiding symptoms*	5		165		165	-0.87(-1.10,-0.64)		Low	
MA/EA vs SA	Quality of life *	4		120		120	-0.82(-1.13,-0.50)		Low	
Jian-Hua Wang 2019	Mental health (Smoking cessation)									
MA vs NI	Improved abstinence rate (short-term)	1	43	224	18	222	2.37(1.41,3.97)		Low	111 more per 1,000(from 33 more to 241 more)
MA vs NI	Improved abstinence rate (long-term)	2	40	355	15	353	2.66(1.54,4.7)		Low	165 more per 1,000(from 50 more to 367 more)
Zhihan Chen 2018	Mental health (Opioid use disorder)									
EA vs NI	Severity of opioid craving *	1		60		30	-1.26(-1.73,-0.78)		Low	
EA vs NI	Severity of depression *	2		120		60	-1.5(-1.85,-1.15)		Low	
Yu-Mei Zhong 2019	Nutrition and metabolic disorders (Simple obesity)									
MA/EA/AA vs SA	Body mass index	10		229		212	1.11(0.67,1.56)		Low	
Ying Tang 2017	Obstetrics, gynecology and women's health (Postpartum lactating)									
MA vs SC	Success rate of lactation within 24 hours after delivery	2	40	140	19	140	2.11(1.29,3.43)		Low	357 more per 1,000(from 93 more to 783 more)
MA vs SC	Success rate of lactation within 72 hours after delivery	7	213	502	109	478	2.37(1.33,4.22)		Low	464 more per 1,000(from 112 more to 1,000more)
Yanjuan Song 2019	Obstetrics, gynecology and women's health (Chronic pelvic pain syndrome)									
MA/EA vs WM	Overall symptoms improvement *	8		288		289	0.89(0.5,1.28)		Low	
Caroline A Smith 2016	Obstetrics, gynecology and women's health (Dysmenorrhea)									
MA vs WM	Intensity of pain *	11		385		336	-0.93(-1.39,-0.47)		Low	
Liu Yun 2019	Severely of menstrual symptoms*	6		260		180	-1.07(-1.51,-0.62)		Low	
MA/EA vs WM	Pregnancy or intended pregnancy (Infertility)									
Juan Zhu 2019	Peripractical care (Postoperative pain)									
EA/TENs vs SA	Intensity of postoperative pain on movement or cough *	3	42	97	16	97	2.63(1.6,4.32)		Low	450 more per 1,000(from 441 more to 916 more)
Lawrence Chen 2017	Oncology (Aromatase Inhibitor-induced arthralgia in breast cancer)									
MA vs PL	Intensity of most treatment pain (worst pain at 3-4weeks) *	9		173		263	-1.31(-1.71,-0.91)		Very low	
Pei Lixia 2019	Oncology (Breast cancer)									
AA vs SC	Quality of life*	1		36		36	-1.21(-1.72,-0.71)		Very low	
Shaonan Liu 2019	Neurology (Post-stroke shoulder-hand syndrome)									
MA+RH vs RH	Improved motor function (upper limb)	22		935		916	1.01(0.75,1.27)		Very low	
MA+RH vs RH	Intensity of pain *	17		701		683	-1.66(-2.12,-1.2)		Very low	
Sang-Ho Kim 2019	Neurology (Insomnia disorder)									
MA vs WM	Sleep quality (within 14 to 74 days after treatment) *	4		171		168	-1.26(-1.85,-0.68)		Very low	
Guangcai Zhang 2016	Neurology (Perimenopausal sleep disorder)									
MA vs WM	Sleep quality *	1		52		52	-1.81(-2.27,-1.35)		Very low	
Jia Xu 2018	Neurology (Migraine without aura)									
MA vs SA	Frequency of migraine symptom *	3		120		120	-0.76(-1.43,-0.09)		Very low	
MA vs WM	Frequency of migraine symptom *	2		110		110	-2.13(-3.52,-0.74)		Very low	
Gwang-Ho Choi 2019	Neurology (Carpal tunnel syndrome)									
MA vs WM	Intensity of pain (at week 5 after randomization)*	1		25		25	-1.05(-1.64,-0.45)		Very low	
Eric Manheime, Ke Cheng 2018	Connective tissue diseases (Hip osteoarthritis)									
EA vs WM	Increased function	1		30		30	0.95(0.42,1.49)		Very low	
Wang Kaifu 2019	Connective tissue diseases (Postmenopausal osteoporosis)									
MA vs WM	Intensity of pain *	2		70		70	-0.74(-1.08,-0.39)		Very low	
Jiaojun He 2019	Ear, nose, and throat disorders (Meniere's disease)									
MA vs WM	Severity of dizziness *	2		46		40	-1.88(-3.06,-0.7)		Very low	
Lizhong Yu 2019	Eye disorders (Xerophthalmia)									
MA/EA vs WM	Symptoms improvement *	7		290		294	-1.23(-2.08,-0.38)		Very low	
Yao Tian 2017	Gastrointestinal disorders (Peptic ulcer)									
MA vs WM	Reduced risk of recurrence *	2	5	31	16	34	0.35(0.14,0.84)		Very low	495 fewer per 1,000(from 655 fewer to 122 fewer)
Kun Hyung Kim 2018	Gastrointestinal disorders (Symptomatic gastroparesis)									
MA vs SA	Symptoms improvement (within 4 to 12 weeks after treatment)	5		180		180	-1.41(-1.66,-1.15)		Very low	
Xindong Qin 2020	Genitourinary disorders (Urinary infection)									
MA vs NI	Reduced risk of recurrence *	2	25	94	28	41	0.39(0.26,0.58)		Very low	322 fewer per 1,000(from 391 fewer to 222 fewer)
MA vs SA	Reduced risk of recurrence *	1	7	27	15	26	0.45(0.22,0.92)		Very low	375 fewer per 1,000(from 532 fewer to 55 fewer)
Junjun Li 2020	Genitourinary disorders (Chronic prostatitis)									
MA/EA vs WM	Overall symptoms improvement *	6		181		176	-0.99(-1.59,-0.39)		Very low	
MA/EA vs SA	Overall symptoms improvement *	5		164		165	-1.53(-1.92,-1.14)		Very low	
Kun Hyung Kim 2016	Genitourinary disorders (Chronic kidney disease)									
TENs vs UC	Severity of depression *	1		36		35	-0.72(-1.2,-0.24)		Very low	
Charlotte Southern 2016	Mental health (Alcohol use disorder)									
MA/EA/AA vs SA	Severity of alcohol craving *	5		127		100	-1(-1.79,-0.21)		Very low	
Zhihan Chen 2018	Mental health (Opioid use disorder)									
EA vs SA	Severity of depression *	2		120		60	-1.07(-1.88,-0.25)		Very low	
Wei Li 2019	Mental health (Postpartum depression)									
MA vs WM	Severity of depression *	4		112		111	-1.54(-2.92,-0.15)		Very low	
Sean Grant 2018	Mental health (Posttraumatic Stress Disorder)									
MA vs NI	Improved functional status (post-intervention) *	1		29		27	-0.83(-1.38,-0.29)		Very low	
MA vs NI	Improved functional status (follow-up for 3 months)*	1		29		27	-0.97(-1.53,-0.42)		Very low	
Qing Zhang 2018	Mental health (Chronic fatigue syndrome)									
MA vs SA	Reduced mental fatigue *	3		113		108	-1.99(-3.67,-0.31)		Very low	
Eun-Young Nam 2018	Obstetrics, gynecology and women's health (Menopausal hot flashes)									
MA vs NI	Frequency of hot flash symptom (≥12 weeks after treatment started)*	3		282		159	-0.7(-1.03,-0.36)		Very low	
Weihan Li 2017	Obstetrics, gynecology and women's health (Menopausal syndrome)									
MA vs SA	Symptoms improvement-at end of treatment *	6		240		179	-1.52(-1.77,-1.28)		Very low	
MA vs SA	Symptoms improvement-within 1 to 3 months after treatment *	5		213		153	-1.05(-1.28,-0.82)		Very low	
Caroline A Smith 2020	Obstetrics, gynecology and women's health (Pain during labour)									
MA/EA vs SA	Intensity of pain *	4		249		246	-1.31(-2.14,-0.49)		Very low	
EA vs NI	Intensity of pain *	1		82		81	-0.96(-1.28,-0.63)		Very low	
MA vs SA	Intensity of pain *	6		208		264	-1.12(-1.84,-0.41)		Very low	
MA vs UC	Intensity of pain *	8		341		279	-1.07(-1.45,-0.69)		Very low	

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; RR: relative risk; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach; ARR: absolute risk reduction; CI: confidence interval; MA: manual acupuncture; EA: electroacupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENs: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western medicine; BEI: behavioral and educational interventions; RH: rehabilitation; MT: music therapy. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Figure 5 Large effects with low or very low certainty evidence

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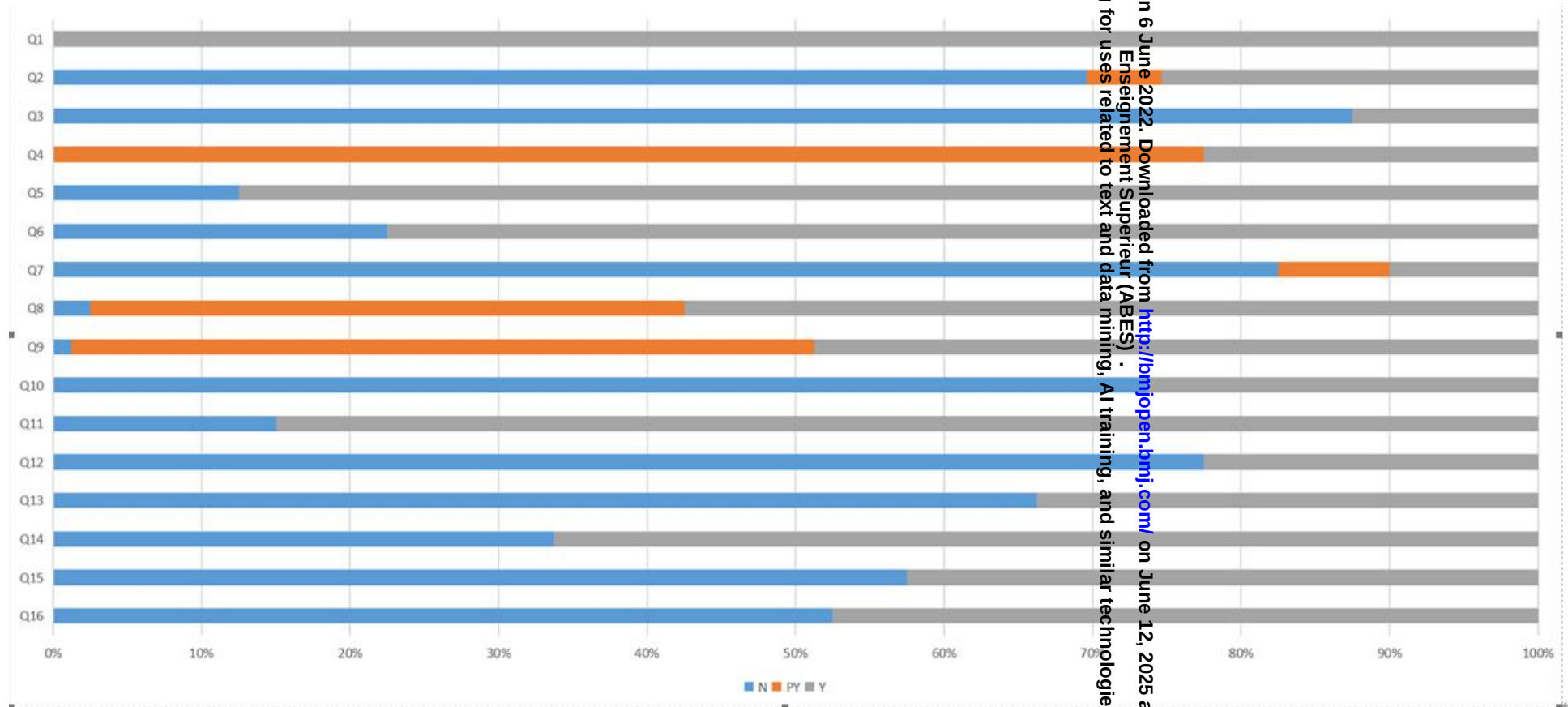


Figure 6 Methodological quality: evaluation results of each AMSTAR2 question of included studies.

Note. Y, yes; PY, partial yes; N, no.

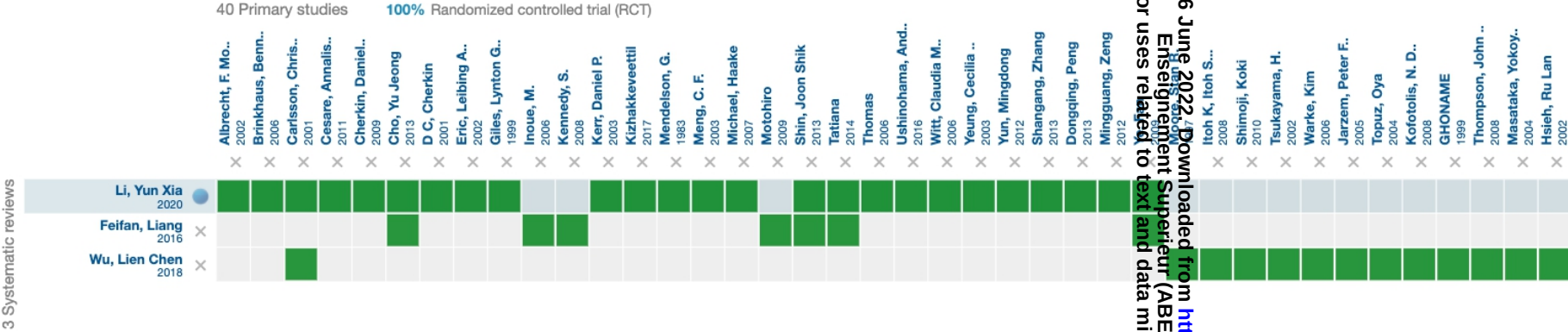


Figure 7 Digitized matrix: Acupuncture for Non-specific low back pain

3 Systematic reviews

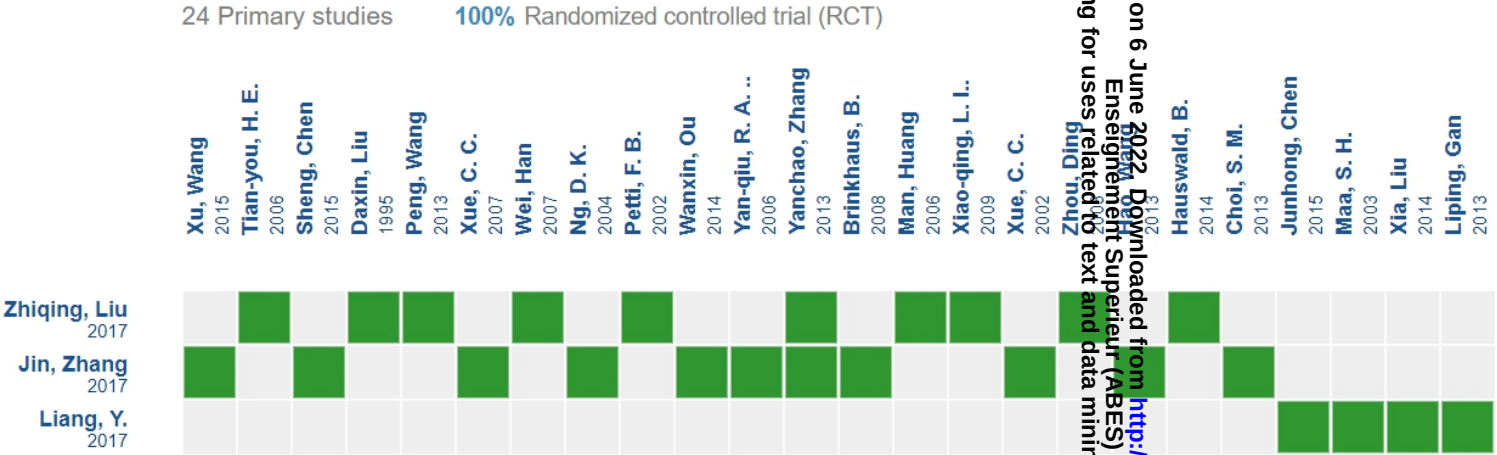


Figure 8 Digitized matrix: Acupuncture for Rhinitis

Study	Therapeutic area (disease/condition)	NO.of RCTs	Tsample	Csample	SMD(95%CI)	CoE
Moderate Effect						
Lu Jing 2018	Periprocedural care (Breast cancer)					
MA/EA vs WM	Severity of hot flashes after breast cancer surgery*	2	115	135	-0.61(-0.87,-0.36)	Low
MA vs NI	Severity of hot flashes after breast cancer surgery (follow-up for 3 months)*	1	85	105	-0.44(-0.73,-0.15)	Low
Wei-Wei Tao 2016	Oncology (Symptom management of cancer)					
MA vs SC	Severity of nausea and vomit *	2	166	162	-0.48(-0.7,-0.26)	Low
Wenjuan Fan 2020	Neurology (Post-stroke spastic hemiplegia)					
MA vs RH	Improved motor function	12	443	441	0.4(0.14,0.65)	Low
MA+RH vs RH	Improved activities of daily living	24	888	893	0.67(0.42,0.92)	Low
Boram Lee 2018	Neurology (Autism spectrum disorder in children)					
MA vs BEI	Symptoms improvement *	2	53	54	-0.52(-0.91,-0.13)	Low
Kim Jiwon 2019	Connective tissue diseases (Fibromyalgia syndrome)					
MA/EA vs SA	Sleep Quality *	3	86	84	-0.46(-0.75,-0.18)	Low
Yun-xia Li 2018	Connective tissue diseases (Non-specific low back pain)					
MA vs NI	Intensity of pain *	2	1490	1318	-0.69(-0.99,-0.38)	Low
Lu Wang 2020	Gastrointestinal disorders (Functional Constipation)					
MA vs SA	Improved complete spontaneous bowel symptom	3	584	587	0.49(0.38,0.61)	Low
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)					
MA/EA vs WM	Symptoms improvement *	4	216	216	0.47(0.27,0.66)	Low
Charlotte Southern 2016	Mental health (Alcohol use disorder)					
EA/AA vs SA	Reduced alcohol withdrawal symptoms*	1	50	50	-0.54(-0.93,-0.14)	Low
Caroline A Smith 2018	Mental health (Depression)					
MA vs NI	Severity of depression at the end of treatment*	5	217	241	-0.56(-0.98,-0.15)	Low
Eun-Young Nam 2018	Obstetrics, gynecology and women's health (Menopausal hot flashes)					
MA vs NI	Frequency of hot flash symptom (4 weeks after treatment started)*	1	116	59	-0.47(-0.78,-0.15)	Low
Juan Zhu 2019	Periprocedural care (Postoperative pain)					
EA/AA vs SA	Intensity of resting pain at 24 h *	26	556	532	-0.64(-0.89,-0.38)	Very low
Yongjun ZHU 2017	Periprocedural care(Total knee arthroplasty)					
TENs vs SA	Severity of pain 24h after operation *	2	51	51	-0.47(-0.87,-0.08)	Very low
Cuihua Yang 2018	Neurology (Senile insomnia)					
MA vs WM	Sleep quality*	5	153	148	-0.46(-0.89,-0.03)	Very low
Hwan Kim 2019	Neurology (Mild cognitive impairment)					
EA vs WM	Improved Cognitive function	5	131	134	0.4(0.16,0.65)	Very low
Eric Manheime, Ke Cheng 2018	Connective tissue diseases (Hip osteoarthritis)					
EA vs WM	Intensity of pain *	1	30	30	-0.64(-1.16,-0.12)	Very low
MA vs SA	Quality of life (emotional) during treatment *	1	32	30	-0.56(-1.07,-0.05)	Very low
Lu Wang 2020	Gastrointestinal disorders (Functional Constipation)					
MA vs SA	Severity of constipation symptoms *	4	387	214	-0.4(-0.78,-0.03)	Very low
Xin Jin 2018	Gastrointestinal disorders (Functional dyspepsia)					
MA/EA vs WM	Symptoms improvement *	4	145	141	-0.66(-0.9,-0.42)	Very low
Kun Hyung Kim 2016	Genitourinary disorders (Chronic kidney disease)					
MA vs UC	Severity of depression *	3	63	65	-0.44(-0.79,-0.09)	Very low
MA vs UC	Sleep quality*	4	92	88	-0.55(-0.96,-0.14)	Very low

Note: NO.: number; RCT: randomized controlled trials; T: treatment group; C: control group; SMD: standard mean difference; CI: confidence interval; CoE: certainty of evidence assessed using the Grading of Recommendations Assessment, Development and Evaluation approach;MA: manual acupuncture; EA: electro-acupuncture; SA: sham acupuncture; AA: auricular acupuncture; TENs: transcutaneous electrical nerve stimulation; SC: standard care; UC: usual care; NI: no intervention; WM: western medicine; BEI: behavioral and educational interventions; RH: rehabilitation. The asterisk(*) was used to present the effect estimate when a lower value indicated a better outcome.

Appendix 1 Moderate effects with low or very low certainty evidence

Appendix 2. A list of excluded studies and reasons for exclusion

Number	Title	First author	Published year	Reason for exclusion
1	Clinical Efficacy of Acupuncture on Rheumatoid Arthritis and Associated Mechanisms: A Systemic Review.	Chou, PC	2018	No meta-analysis
2	Effectiveness of Acupuncture on Pain, Physical Function and Health-Related Quality of Life in Patients with Rheumatoid Arthritis: A Systematic Review of Quantitative Evidence.	Seca, S	2019	No meta-analysis
3	Meta-analysis of the therapeutic Effect of Treating Osteoarthritis with Filiform Needle	MA Jia-jian	2016	Acupuncture combined with other therapies
4	Meta-analysis of Clinical Effect of Acupuncture and Moxibustion on Osteoarthritis/Osteodystrophy	Feng Peng	2019	Acupuncture combined with other therapies
5	A Meta-analysis of Improving the Function of Knee Osteoarthritis with Traditional Chinese Manipulation and Acupuncture	YU Saijun	2018	Acupuncture combined with other therapies
6	Meta-analysis of Acupuncture and Moxibustion for Treatment of Osteoarthritis/Osteodystrophy	Hu Hanjiao	2016	Acupuncture combined with other therapies
7	Acupuncture for Knee Osteoarthritis Relief in the Elderly: A Systematic Review and Meta-analysis.	Gong, Zidan	2019	Acupuncture combined with other therapies
8	Meta-analysis of the Effect of Acupuncture and Moxibustion on Knee Osteoarthritis Based on the theory of Meridians and Tendons	Yu Junfei	2018	Control interventions did not meet the inclusion criteria
9	Effect of Acupuncture on Gonarthromenitis: A Systematic Review	Guo, Wei	2020	Acupuncture combined with other therapies
10	Update on the Clinical Effect of Acupuncture therapy in Patients with Gouty Arthritis: Systematic Review and Meta-analysis.	Lu, W W	2016	Acupuncture combined with other therapies

11	Curative Effect of Acupuncture for Gouty Arthritis: Meta-analysis	LIU Chang	2015	No detailed information on intervention or outcome
12	Acupuncture and Moxibustion for Primary Osteoporosis: An Overview of Systematic Review	Xu, G	2020	Acupuncture combined with other therapies
13	Meta Analysis of Acupuncture Treatment of Primary Osteoporosis	CHEN Jinfe ng	2018	Acupuncture combined with other therapies
14	Meta-analysis of the therapeutic Effect of Acupuncture on Postmenopausal Osteoporosis and Acupoint Selection Method	XIAO Li	2016	Acupuncture combined with other therapies
15	A Systematic Review of Acupuncture and Moxibustion for the Treatment of Lumbar Disc Herniation Caused by Sciatica	Liu Jiaying	2015	No meta-analysis
16	Systematic Evaluation and Meta-analysis of Acupuncture Treatment for Residual Pain after Lumbar Disc Herniation	LI Kai-min g	2020	Acupuncture combined with other therapies
17	Assessment of Methodological Quality and Reporting Quality of Systematic Reviews / Meta-analyses of Acupuncture for Sciatica	TAN Hui-juan	2015	Acupuncture combined with other therapies
18	Efficacy of Acupressure for Chronic Low Back Pain: A Systematic Review.	Godley, Erica	2020	No meta-analysis
19	Effect of Acupuncture on Pregnancy Related Low Back Pain and Pelvic Pain: A Systematic Review and Meta-analysis.	Yao, X	2017	Full text unavailable
20	Meta Analysis of Acupuncture and Moxibustion Treatment for Endometriosis	Xiao Xiaowen	2017	Acupuncture combined with other therapies
21	Is Acupuncture Effective in the Treatment of Pain in Endometriosis?.	Lund, I	2016	No meta-analysis
22	Efficacy and Safety of Acupuncture Combined with Moxibustion in the Treatment of Chronic Fatigue Syndrome: A Systematic Review	Hu Yue	2020	Acupuncture combined with other therapies
23	A Meta-analysis of Acupuncture and Mox	LUO Xiao-	2017	Acupuncture

	ibustion therapy for Scapulohumeral Periarthritis	zhou		combined with other therapies
24	A Systematic Review on Clinical Study of the Frozen Shoulder Treated with Three Shoulder Needles	TANG Hongliang	2015	Acupuncture combined with other therapies
25	Acupuncture for Recovery after Surgery in Patients Undergoing Colorectal Cancer Resection: a Systematic Review and Meta-analysis.	Kim, K H	2016	Acupuncture combined with other therapies
26	Effects of Acupuncture on Menopause-Related Symptoms in Breast Cancer Survivors: A Meta-analysis of Randomized Controlled Trials.	Chiu, H Y	2016	Acupuncture interventions did not meet the inclusion criteria
27	Effects of Acupuncture on Breast Cancer-Related Lymphoedema: A Systematic Review and Meta-analysis.	Yu, S	2019	Acupuncture interventions did not meet the inclusion criteria
28	Acupuncture in Medicine: Journal of the British Medical Acupuncture Society	Zhang, X	2019	Acupuncture interventions did not meet the inclusion criteria
29	Acupuncture for Treating Hot Flashes in Breast Cancer Patients: An Updated Meta-analysis.	Salehi, A	2016	Acupuncture interventions did not meet the inclusion criteria
30	Meta-analysis of Application of Transcutaneous Electrical Acupoint Stimulation in Breast Cancer Surgery	FU Sisi	2020	No detailed information on intervention or outcome
31	Meta-analysis of Acupuncture Improving Quality of Life of Patients with Breast Cancer	PEI Lixia	2019	Acupuncture interventions did not meet the incl

				usion criteri a
32	Effect of Acupressure on Chemotherapy-Induced Nausea and Vomiting of Breast Cancer Patients: A Meta-analysis	Yan Meiyu	2018	No detailed information on intervention or outcome
33	The Effects of Auricular therapy for Cancer Pain: A Systematic Review and Meta-analysis.	Yang, Yulan	2020	Control interventions did not meet the inclusion criteria
34	Systematic Review and Meta-analysis of Acupuncture to Reduce Cancer-Related Pain.	Chiu, H Y	2017	Acupuncture interventions did not meet the inclusion criteria
35	Acupuncture for Pain Management in Cancer: A Systematic Review and Meta-analysis.	Hu, C	2016	Acupuncture interventions did not meet the inclusion criteria
36	A Systematic Review and Meta-analysis of the Efficacy of Acupuncture and Electroacupuncture Against Chemotherapy-Induced Peripheral Neuropathy.	Hwang, M S	2020	No patient important outcome
37	The Efficacy of Acupuncture in Chemotherapy-Induced Peripheral Neuropathy: Systematic Review and Meta-analysis.	Chien, T J	2019	Acupuncture combined with other therapies
38	Acupuncture in Adults with Chemotherapy-Induced Peripheral Neuropathy: a Systematic Review.	Baviera, A F	2019	Acupuncture combined with other therapies
39	Meta-analysis of Electroacupuncture for Chemotherapy-Induced Peripheral Neuropathy	KUANG Bi yao	2019	Acupuncture interventions did not meet the inclusion criteria
40	The Effects of Acupressure on Chemotherapy-Induced Nausea and Vomiting: A Met	Wu, Ting	2020	Acupuncture intervention

	a-analysis			s did not meet the inclusion criteria
41	Effect of Neiguan Acupoint Pressure on Improving Chemotherapy-Induced Nausea and Vomiting in Cancer Patients: A Meta-analysis	CHEN Feng	2020	No detailed information on intervention or outcome
42	Meta-analysis of Acupuncture Treatment for Gastrointestinal Reaction after Chemotherapy of Tumor	HU Ya-cai	2017	Acupuncture interventions did not meet the inclusion criteria
43	Acupuncture on Treating Angina Pectoris: A Systematic Review.	Wang, J S	2020	No detailed information on intervention or outcome
44	Acupuncture and Related therapies Used As Add-on to Conventional Treatments for Heart Failure: A Systematic Review of Pairwise and Network Meta-analyses	Yang, Fengwen	2018	Acupuncture combined with other therapies
45	Acupuncture on Treating Angina Pectoris: A Systematic Review.	Wang, J S	2020	No detailed information on intervention or outcome
46	Meta-analysis of the therapeutic Effect of Acupuncture on Stable Angina Pectoris	ZHOU Jianhua	2018	Acupuncture combined with other therapies
47	Effectiveness of Acupuncture for Angina Pectoris: A Systematic Review of Randomized Controlled Trials.	Yu, C	2015	Acupuncture combined with other therapies
48	Acupuncture therapy for the Treatment of Stable Angina Pectoris: An Updated Meta-analysis of Randomized Controlled Trials.	Liu, Y	2019	Acupuncture interventions did not meet the inclusion criteria
49	Meta-analysis of Acupuncture therapy for	Chen, M	2015	Acupuncture

	the Treatment of Stable Angina Pectoris.			intervention s did not m eet the incl usion criteri a
50	Meta-analysis of Acupuncture therapy for the Treatment of Stable Angina Pectoris.	Zhang, Z.	2015	Acupuncture intervention s did not m eet the incl usion criteri a
51	Acupuncture As An Adjunctive Treatment for Angina Due to Coronary Artery Disease: A Meta-analysis.	Huang, X	2019	Control inte rventions di d not meet the inclusio n criteria
52	Acupuncture for Perioperative Care of Total Hip Arthroplasty: A Systemic Review of Controlled Trials and Meta-analysis.	Shin H	2019	No detailed information on interven tion or outc ome
53	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-an alysis
54	Acupuncture therapy for Essential Hypertension: A Network Meta-analysis.	Tan, X	2019	No patient i mportant ou tcome
55	Acupuncture for Essential Hypertension: A Meta-analysis	G., C Xiao	2015	No patient i mportant ou tcome
56	Conventional Acupuncture for Cardiac Arrhythmia: A Systematic Review of Randomized Controlled Trials.	Liu, J	2018	No detailed information on interven tion or outc ome
57	Acupuncture-Related Cardiac Complications: A Systematic Review.	Ullah, W	2019	No detailed information on interven tion or outc ome
58	A Meta-analysis of the Effectiveness of Acupuncture on Chd	Sun Yang	2019	Acupuncture intervention s did not m eet the incl

				usion criteri a
59	Systematic Review on Treatment of Perimenopausal Syndrome with Electroacupuncture and Hormone Replace	CHENG Xi ao-ling	2018	No patient i mportant ou tcome
60	Comparison System Evaluation on Acupuncture and Western Medicine Effect in the Treatment of Perimenopausal Syndrome	LAI Bin	2017	No patient i mportant ou tcome
61	Systematic Review of Auricular-Plaster therapy for Treatment of Perimenopausal Syndrome	Jin Huali	2017	No patient i mportant ou tcome
62	Acupuncture Versus Hormone Replacement therapy for Menopause Syndrome: A Meta-analysis	MENG Fan g	2016	No patient i mportant ou tcome
63	Systematic Evaluation of the Efficacy of Acupuncture on Perimenopausal Syndrome	CAO Zheng -liang	2015	Acupuncture intervention s did not m eet the incl usion criteri a
64	Effectiveness of Traditional Chinese Acupuncture Versus Sham Acupuncture: A Systematic Review.	Carlos, L	2016	No meta-an alysis
65	Acupuncture in Sham Device-Controlled Trials May Not Be As Effective As Acupuncture in the Real World: A Preliminary Network Meta-analysis of Studies of Acupuncture for Hot Flashes in Menopausal Women.	Kim, T H	2020	Control inte rventions di d not meet the inclusio n criteria
66	Acupuncture for Menopausal Hot Flashes.	Weihua, L	2015	Acupuncture intervention s did not m eet the incl usion criteri a
67	Effects of Acupuncture on Menopause-Related Symptoms and Quality of Life in Women on Natural Menopause: A Meta-analysis of Randomized Controlled Trials.	Chiu, H Y	2015	Acupuncture intervention s did not m eet the incl usion criteri a
68	Acupuncture to Reduce Sleep Disturbances in Perimenopausal and Postmenopausal Women: A Systematic Review and Meta-	Chiu, H Y	2015	Acupuncture intervention s did not m

	analysis.			meet the inclusion criteria
69	Systematic Evaluation of Acupuncture Treatment of Perimenopausal Sleep Disorder Based on Grade	Zhang Guang-Cai	2016	Control interventions did not meet the inclusion criteria
70	Safety and Effectiveness of Acupuncture for Women Emotional Disorders in Perimenopause: A Systematic Review	WANG Yingying	2018	Control interventions did not meet the inclusion criteria
71	Massage, Reflexology and Other Manual Methods for Pain Management in Labor	Smith, C A	2018	Acupuncture interventions did not meet the inclusion criteria
72	Meta-analysis of the Effects of Acupressure During Labor.	Santiago-Vasco, M	2017	Full text unavailable
73	Meta-analysis of the Effect of Acupressure on Duration of Labor and Mode of Delivery.	Makvandi, S	2016	No patient important outcome
74	Effects of Acupressure in Labor: A Meta-analysis.	Bejar, C	2016	Full text unavailable
75	Acupuncture Performed Around the Time of Embryo Transfer: A Systematic Review and Meta-analysis.	Smith, C A	2019	Acupuncture interventions did not meet the inclusion criteria
76	Therapeutic Effect of Acupuncture on the Outcomes of in Vitro Fertilization: A Systematic Review and Meta-analysis.	Qian, Y	2017	Acupuncture interventions did not meet the inclusion criteria
77	Effects of Acupuncture on Pregnancy in Patients Undergoing in Vitro Fertilization and Embryo Transfer: A Systematic Review of Randomized Controlled Trials	YANG Hui-sheng	2017	Acupuncture combined with other therapies
78	The Role of Acupuncture in In Vitro Fertilization: A Systematic Review and Meta-	Shen, C	2015	No patient important outcome

	analysis.			tcome
79	Interventions for Heartburn in Pregnancy.	Phupong, V	2015	Acupuncture interventions did not meet the inclusion criteria
80	Treatments for Breast Engorgement During Lactation	Mangesi, Lindaka	2016	Acupuncture interventions did not meet the inclusion criteria
81	Effects of Acupuncture for the Treatment of Endometriosis-Related Pain: A Systematic Review and Meta-analysis.	Xu, Y	2017	Control interventions did not meet the inclusion criteria
82	Meta-analysis of Acupuncture and Moxibustion Treatment for Endometriosis	Xiao Xiaowen	2017	Acupuncture interventions did not meet the inclusion criteria
83	Network Meta-analysis on the Effects of the Acupuncture-Related therapy on Ovulation Rate and Pregnancy Rate in Patients with Polycystic Ovary Syndrome.	Song, Y J2019	2019	No patient important outcome
84	Systematic Review of Acupuncture in Treatment of Polycystic Ovary Syndrome in China	ZHENG Shuzhen	2019	No patient important outcome
85	Effectiveness of Acupuncture in Women with Polycystic Ovarian Syndrome Undergoing in Vitro Fertilization Or Intracytoplasmic Sperm Injection: A Systematic Review and Meta-analysis.	Jo, J	2017	No patient important outcome
86	Acupuncture for Polycystic Ovarian Syndrome: A Systematic Review and Meta-analysis.	Jo, J	2017	Acupuncture combined with other therapies
87	Effect of Acupuncture on Premenstrual Syndrome: A Meta-analysis	LIU Lihong	2019	Acupuncture combined with other therapies

88	Systematic Evaluation and Meta-analysis of Acupuncture-Moxibustion Alone in Treating Premature Ovarian Failure	ZHANG Jin -Huan	2020	Acupuncture interventions did not meet the inclusion criteria
89	Meta-analysis of the therapeutic Effect of Acupuncture on Premature Ovarian Failure	FAN Meiling	2018	No patient important outcome
90	Systematic Review and Meta-analysis of Efficacy of Acupuncture in the Treatment of Premature Ovarian Failure	LUO Xi	2016	No patient important outcome
91	Meta-analysis the Effect of Acupuncture in Treating Premature Ovarian Failure	PANG Yong	2016	No patient important outcome
92	Effect of Acupuncture therapy on Chronic Pelvic Inflammatory Disease: A Meta-analysis	HE Ting	2019	Acupuncture combined with other therapies
93	Systematic Review and Meta-analysis of Acupuncture Intervention on Hot Flashes in Patients with Breast Cancer	Tao Weiwei	2019	Acupuncture interventions did not meet the inclusion criteria
94	Short-and Medium-Clinical Effect of Acupuncture in Treating Hot Flashes in Patients with Breast Cancer: A Meta-analysis	Lu Jing	2018	Acupuncture combined with other therapies
95	A Meta-analysis of Treating Primary Dysmenorrhea by Acupuncture	Liu Guodong	2019	Acupuncture interventions did not meet the inclusion criteria
96	Meta-analysis of Clinical Literature on Acupuncture and Moxibustion for Primary Dysmenorrhea	Qin Yanping	2017	Control interventions did not meet the inclusion criteria
97	Meta-analysis of Auricular Plaster therapy for Primary Dysmenorrhea	Wang Jing	2017	No patient important outcome
98	Meta-analysis of Acupuncture and Moxib	Liu Tian	2016	No patient i

	ustion for Treatment of Primary Dysmeno rrhea			mportant ou tcome
99	A Meta-analysis of Clinical Efficacy of A cupuncture on Dysmenorrhea	Quan Yubin	2016	No patient i mportant ou tcome
100	Systematic Review of Abdominal Acupun cture Treatment for Dysmenorrheal	HUANG Sh imin	2016	Acupuncture intervention s did not m eet the incl usion criteri a
101	Meta-analysis of Auricular Plaster therapy for Primary Dysmenorrhea	Wang Xian g	2016	No patient i mportant ou tcome
102	Meta-analysis of Primary Dysmenorrhea T reated by Acupuncture	LIN Han-m ei	2015	Control inte rventions di d not meet the inclusio n criteria
103	Meta-analysis of Clinical Literature on Ac upuncture-Based Treatment of Menstrual Disorders	Cai Weipin g	2018	Acupuncture combined with other t herapies
104	Systematic Review and Meta-analysis of Acupuncture in the Treatment of Prematu re Ovarian Dysfunction	Yin Yaqian	2020	No patient i mportant ou tcome
105	Acupuncture in Improving Endometrial R eceptivity: A Systematic Review and Met a-analysis.	Zhong, Y	2019	Acupuncture intervention s did not m eet the incl usion criteri a
106	Meta-analysis on the Effectiveness of Acu puncture and Moxibustion in Improving Endometrial Receptivity	Li Zheyun	2019	Control inte rventions di d not meet the inclusio n criteria
107	Meta-analysis on Acupuncture therapy for Improving Endometrial Receptivity	HU Qiulan	2017	No patient i mportant ou tcome
108	A Meta-analysis of Acupuncture and Mox ibustion for Luteinized Unruptured Follicl e Syndrome	ZHOU Jie	2017	Acupuncture combined with other t herapies

109	A Systematic Review on the Outcome of Transcutaneous Electrical Acupoint Stimulation in the Treatment of Ovarian Hyporesponsiveness	Wu Jiejie	2018	No patient important outcome
110	Acupuncture for in Vitro Fertilization in Women with Poor Ovarian Response: A Systematic Review	Jang, S	2020	No meta-analysis
111	Acupuncture Or Acupressure for Induction of Labour	Smith, C. A.	2017	Acupuncture interventions did not meet the inclusion criteria
112	Effectiveness of Acupuncture in Polycystic Ovary Syndrome: A Systematic Review and Meta-analysis of Randomized Controlled Trials	Wu, J.	2020	No patient important outcome
113	Acupuncture for Polycystic Ovarian Syndrome	Lim, C.	2019	No patient important outcome
114	Efficacy of Acupuncture Versus Western Medication for Premature Ovarian Failure: A Meta-analysis	Runzi Jian	2017	No patient important outcome
115	Meta-analysis of Acupuncture Treatment for Primary Ovarian Insufficiency	Tingting Zhao	2020	No patient important outcome
116	Acupuncture Treatment for Urinary Retention Following Spinal Cord Injury: A Meta-analysis	Cheng Jie	2018	Acupuncture combined with other therapies
117	Acupuncture for Chronic Urinary Retention due to Spinal Cord Injury: A Systematic Review.	Wang, J	2016	Acupuncture combined with other therapies
118	The Effect of Different Acupuncture therapies on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Network Meta-analysis of Randomized Controlled Trials.	Xiong, F	2019	Acupuncture combined with other therapies
119	The Impact of Acupuncture on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Meta-analysis.	Ma, R	2015	Acupuncture combined with other therapies
120	Electroacupuncture Treatment for Neuroge	FU Linhui	2019	Acupuncture

	nic Bladder after Spinal Cord Injury:A Meta-analysis			combined with other therapies
121	Systematic Evaluation of Acupuncture for the Treatment of Neurogenic Bladder Dysfunction after Spinal Cord Injury	WANG Jia-qi	2018	No meta-analysis
122	Acupuncture for the Effect and Safety of Neurogenic Bladder after Spinal Cord Injury:A Meta-analysis	FAN Xiao	2017	Acupuncture combined with other therapies
123	A Meta-analysis of the Effectiveness of Acupuncture in the Treatment of Epilepsy.	Deng, B W	2018	No patient important outcome
124	Non-Pharmacological Interventions for People with Epilepsy and Intellectual Disabilities.	Jackson, C F	2015	Acupuncture interventions did not meet the inclusion criteria
125	Transcutaneous Electrical Nerve Stimulation for Spasticity: A Systematic Review.	Fernández-Tenorio, E	2019	No meta-analysis
126	Systematic Review of Efficacy of TENS for Management of Central Pain in People with Multiple Sclerosis.	Sawant, A	2015	No Meta-analysis
127	Acupuncture for Obstructive Sleep Apnea (OSA) in Adults: A Systematic Review and Meta-analysis.	Wang, Liao yao	2020	Acupuncture interventions did not meet the inclusion criteria
128	Clinical Effect of Acupuncture therapy on Obstructive Sleep Apnea Hypopnea Syndrome: A Meta-analysis	JIAO Su-qin	2018	Acupuncture interventions did not meet the inclusion criteria
129	The Clinical Effect of Acupuncture in the Treatment of Obstructive Sleep Apnea: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Lv, Z T	2016	No patient important outcome
130	Meta-analysis of Obstructive Sleep Apnea in Traditional Chinese Medicine	Zhang Ruizhi	2016	Acupuncture interventions did not meet the incl

				usion criteri a
131	Clinical Effectiveness of Ziwuliuzhu Acup uncture therapy for Insomnia: A Meta-ana lysis	Hu Yue	2019	Control inte rventions di d not meet the inclusio n criteria
132	A Meta-analysis of Randomized Controlle d Trials of Intradermal Needle for Insom nia	Ma Zengbin	2019	Control inte rventions di d not meet the inclusio n criteria
133	Meta-analysis and Systematic Review of Abdominal Acupuncture for Insomnia	Li Zhen	2019	Control inte rventions di d not meet the inclusio n criteria
134	Meta-analysis of Clinical Efficacy of Auri cular Acupoints in Treating Insomnia	LI Dong-sh uang	2019	Acupuncture combined with other t herapies
135	Eye Acupuncture in the Treatment of Ins omnia: a Systematic Review and Meta-an alysis of Randomized Controlled Trials	Liu Guangh ui	2018	Acupuncture intervention s did not m eet the incl usion criteri a
136	Systematic Review on Effect of Point Ma ssage in Treatment of Insomnia	Yu Mengyi ng	2017	No Meta-an alysis
137	Meta-analysis on the therapeutic Effect of Acupuncture in Treating Insomnia in Ch ina	LIU Weimi n	2017	Acupuncture intervention s did not m eet the incl usion criteri a
138	Meta-analysis of Clinical Effect of Acupu ncture and Moxibustion on Insomnia	Mao Nan	2016	Control inte rventions di d not meet the inclusio n criteria
139	Electro-acupuncture for Primary Insomnia and Psqi: A Systematic Review	WEI Xin-ra n	2016	Control inte rventions di d not meet the inclusio

				n criteria
140	Meta-analysis of Curative Effect on Acupuncture for Insomnia	GAO Xiyan	2015	Acupuncture interventions did not meet the inclusion criteria
141	Meta-analysis on Acupuncture Treatment of Insomnia	Chen Deyao	2015	Acupuncture interventions did not meet the inclusion criteria
142	Curative Effect of Acupuncture therapy for Insomnia of Yin Deficiency Type: A Meta-analysis	WANG Fei	2015	Acupuncture interventions did not meet the inclusion criteria
143	Effectiveness of Auricular Point therapy for Insomnia: A Meta-analysis	Yang Yuanyuan	2015	Control interventions did not meet the inclusion criteria
144	Meta-analysis of Auricular Point therapy on Insomnia	HUANG Lu	2015	Control interventions did not meet the inclusion criteria
145	Network Meta-analysis on Ear Acupuncture for Hemodialysis Patients with Insomnia	XU Ziqi	2019	Control interventions did not meet the inclusion criteria
146	Meta-analysis of the Effect of Auricular Point Plaster therapy on Insomnia in Patients with Perimenopausal Period	PENG Siqi	2020	Acupuncture combined with other therapies
147	Acupuncture to Reduce Sleep Disturbances in Perimenopausal and Postmenopausal Women: A Systematic Review and Meta-analysis.	Chiu, H Y	2016	Acupuncture combined with other therapies
148	Acupuncture to Treat Sleep Disorders in Postmenopausal Women: A Systematic Review	Bezerra, A G	2015	No Meta-analysis

	view.			
149	A Meta-analysis on Effectiveness of Acupuncture on Post-Stroke Insomnia	NIE Fenfen	2020	No patient important outcome
150	Meta-analysis of Auricular Acupuncture in the Treatment of Post- Stroke Insomnia	ZHANG Shuangmei	2019	Acupuncture interventions did not meet the inclusion criteria
151	Acupuncture for Insomnia after Stroke: a Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture interventions did not meet the inclusion criteria
152	Acupuncture for Insomnia in the Elderly: A Meta-analysis	Li Heng	2016	Acupuncture interventions did not meet the inclusion criteria
153	Acupuncture for Managing Cancer-Related Insomnia: A Systematic Review of Randomized Clinical Trials.	Choi, T Y	2017	Acupuncture interventions did not meet the inclusion criteria
154	Effect of Self-acupressure for Symptom Management: A Systematic Review	Song, H J	2015	No Meta-analysis
155	Meta-analysis of the Effect of Auricular Point Plaster therapy on Insomnia in Patients with Diabetes	ZHU Wenli	2018	Acupuncture combined with other therapies
156	Efficacy of Acupuncture-Moxibustion on Peripheral Facial Paralysis At Different Time Points: A Meta-analysis.	Jin, D D	2020	Control interventions did not meet the inclusion criteria
157	Electroacupuncture Is Effective for Peripheral Facial Paralysis: A Meta-analysis.	Wang, W H	2020	Control interventions did not meet the inclusion criteria

158	Compare the Efficacy of Acupuncture with Drugs in the Treatment of Bell's Palsy: A Systematic Review and Meta-analysis of Rcts.	Zhang, R	2019	Acupuncture interventions did not meet the inclusion criteria
159	Meta-analysis of Electroacupuncture Treatment for Peripheral Facial Paralysis During Acute Period	ZHU Yi-lin	2016	Acupuncture combined with other therapies
160	System Evaluation of the Clinical Literature of Peripheral Facial Paralysis Acupuncture Treatment	LI Jia	2015	No meta-analysis
161	Efficacy of Acupuncture for Bell's Palsy: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Li, P	2015	Acupuncture interventions did not meet the inclusion criteria
162	Meta-analysis of therapeutic Effect of Acupuncture and Moxibustion on Facial Paralysis	Zhang Ting	2015	Acupuncture combined with other therapies
163	Is Acupuncture An Effective Postherpetic Neuralgia Treatment? A Systematic Review and Meta-analysis.	Pei, W	2019	Acupuncture interventions did not meet the inclusion criteria
164	Acupuncture for Postherpetic Neuralgia: Systematic Review and Meta-analysis.	Wang, Y	2018	Acupuncture interventions did not meet the inclusion criteria
165	Acupuncture for Neuropathic Pain in Adults	Ju, Zi Yong	2017	Acupuncture interventions did not meet the inclusion criteria
166	Systematic Review of Electro-acupuncture in the Treatment of Neuropathic Pain	ZHOU Jie	2017	Acupuncture combined with other therapies

				herapies
167	Meta-analysis of Acupuncture in the Treatment of Pathogenic Motor Symptoms of Parkinson's Disease	ZHOU Jing	2020	Acupuncture combined with other therapies
168	Meta-analysis of Acupuncture for Parkinson's Disease	Liu Mohan	2019	Acupuncture combined with other therapies
169	Meta-analysis of Clinical Efficacy of Acupuncture in Treatment of Parkinson's Disease	Liu Yanhui	2018	Acupuncture combined with other therapies
170	Clinical Effectiveness of Acupuncture on Parkinson Disease: A Prisma-Compliant Systematic Review and Meta-analysis	Lee, S H	2017	Acupuncture combined with other therapies
171	The Effectiveness and Safety of Acupuncture for the Treatment of Myasthenia Gravis: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhang, X	2019	Acupuncture interventions did not meet the inclusion criteria
172	Scalp Acupuncture Treatment for Children's Autism Spectrum Disorders: A Systematic Review and Meta-analysis.	Liu, C	2019	Acupuncture combined with other therapies
173	A Meta-analysis of Treating Autism Spectrum Disorders by Acupuncture	Yue Qianjun	2019	Acupuncture combined with other therapies
174	Systematic Evaluation of Acupuncture therapy for Childhood Autism	YUAN Zhao-hong	2016	Acupuncture combined with other therapies
175	Meta-analysis of Curative Efficacy of Acupuncture for Children with Autism	Zhang Chenximeng	2015	Acupuncture combined with other therapies
176	Systematic Review: Acupuncture Vs Standard Pharmacological therapy for Migraine Prevention.	Zhang, N	2020	No meta-analysis
177	Efficacy of Acupuncture for Improving Migraine Symptoms and Cerebral Blood Flow	Lu Tingting	2019	Acupuncture intervention

	ow Velocity: a Meta-analysis			s did not meet the inclusion criteria
178	Effectiveness and Safety of Acupuncture Versus Drug Treatment for Migraine Prophylaxis: a Meta-analysis	Pu Shengxi ong	2017	Acupuncture interventions did not meet the inclusion criteria
179	Verum Versus Sham Manual Acupuncture for Migraine: A Systematic Review of Randomised Controlled Trials.	Yang, Y	2016	Acupuncture combined with other therapies
180	Meta-analysis on Prevention Comparison of Acupuncture with Western Medicine for Migraine	SONG Qian	2016	Acupuncture interventions did not meet the inclusion criteria
181	Clinical Efficacy and Safety of Acupuncture in the Treatment of Tension Headache	DENG Gan	2018	Acupuncture interventions did not meet the inclusion criteria
182	Meta-analysis of Acupuncture therapy in the Treatment of Tension-Type Headache	ZHANG Xue	2018	Control interventions did not meet the inclusion criteria
183	Acupuncture Versus Western Medicine for Tension-Type Headache in China: A Systematic Review	HU Lin	2015	Acupuncture interventions did not meet the inclusion criteria
184	Acupuncture Treatment for the Cervicogenic Headache—Updated Systematic Review	TANG Xu	2017	Acupuncture interventions did not meet the inclusion criteria
185	Systematic Review of Acupuncture and	Li Siyu	2018	Acupuncture

	Moxibustion in Treatment of Mild Cognitive Impairment			interventions did not meet the inclusion criteria
186	Meta-analysis of Acupuncture Clinical Efficacies on Ischemic Type Cognitive Dysfunction	LU Jin-hua	2015	Acupuncture combined with other therapies
187	Clinical Efficacy of Scalp Acupuncture on Mild Cognitive Impairment: a Meta-analysis Study	MAI Wei	2015	Acupuncture combined with other therapies
188	Meta-analysis of Acupuncture therapy for Carpal Tunnel Syndrome	FAN Ye	2019	Acupuncture combined with other therapies
189	Clinical Effect of Acupuncture on Postpartum Depression: A Meta-analysis	PANG Yong	2016	Acupuncture combined with other therapies
190	Effectiveness and Safety of Ear Acupuncture for Trauma-Related Mental Disorders after Large-Scale Disasters: A Prisma-Compliant Systematic Review.	Kwon, C Y	2020	No meta-analysis
191	Acupuncture for the Treatment of Adults with Posttraumatic Stress Disorder: A Systematic Review and Meta-analysis.	Grant, S	2018	Acupuncture interventions did not meet the inclusion criteria
192	Transcutaneous Electrical Nerve Stimulation (TENS) for Fibromyalgia in Adults	Johnson, Mark I	2017	No meta-analysis
193	Ear Acupuncture therapy in Preventing Postoperative Nausea and Emesis: A Systematic Review and Meta-analysis of RCT	GAO Yanyu	2017	Acupuncture combined with other therapies
194	Acupuncture for Glaucoma.	Law, S K	2020	No meta-analysis
195	The Efficacy of Acupuncture in Managing Patients with Chronic Prostatitis/Chronic Pelvic Pain Syndrome: A Systemic Review and Meta-analysis.	Chang, S C	2017	Acupuncture interventions did not meet the inclusion criteria

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196	Efficacy of Electroacupuncture in the Treatment of Prostatitis: a Systematic Review	Su Tongshe ng	2017	Acupuncture intervention s did not meet the inclusion criteria
197	Comparison of the Efficacy of Acupuncture and Western Medicine Treatment on Chronic Prostatitis in China: Meta-analysis	YU Li-Zhong	2017	Acupuncture intervention s did not meet the inclusion criteria
198	Meta-analysis of Acupuncture Treatment of Chronic Prostatitis	PANG Yong	2016	Acupuncture intervention s did not meet the inclusion criteria
199	Meta-analysis on Acupuncture in Treating Chronic Prostatitis	HE Yuan	2015	Acupuncture intervention s did not meet the inclusion criteria
200	Acupuncture As a Treatment Modality in Dermatology: A Systematic Review.	Ma, C	2015	No meta-analysis
201	Acupuncture for Cancer Pain in Adults	Paley, C A	2015	No meta-analysis
202	Transcutaneous Electrical Nerve Stimulation for Treating Neurogenic Lower Urinary Tract Dysfunction: A Systematic Review.	Gross, T	2016	No meta-analysis
203	Meta-analysis of Clinical Efficacy of Acupuncture in Treatment of Tic Disorders	Zhao Runzhi	2020	No patient important outcome
204	Meta-analysis on the therapeutic Effect of Acupuncture on Guillian-Barre Syndrome	LONG Kang-sheng	2015	Acupuncture intervention s did not meet the inclusion criteria
205	A Meta-analysis of Acupuncture and Moxibustion in Treatment of Sciatica	HAN Yiyan	2017	Acupuncture intervention

				s did not meet the inclusion criteria
206	Meta-analysis of the Efficacy of Acupuncture Treatment for Infantile Cerebral Palsy	XIANG Juan	2015	Acupuncture combined with other therapies
207	Randomized Controlled Clinical Meta-analysis of Acupuncture and Moxibustion for Treatment of Infantile Cerebral Palsy	Yuan Jinmei	2015	Acupuncture intervention s did not meet the inclusion criteria
208	Evaluation of the Clinical Effect of Traditional Chinese Medicine on Abducens Paralysis Based on Meta-analysis	Ren Wei	2017	Acupuncture intervention s did not meet the inclusion criteria
209	Meta-analysis on Random-Control Experiment of Eye-acupuncture on Extraocular Muscles for the Treatment of Abducens Palsy	QIN Xinzhang	2016	Acupuncture intervention s did not meet the inclusion criteria
210	A Meta-analysis of Randomized Controlled Trials of Electroacupuncture Treatment for Trigeminal Neuralgia	ZHOU Jie	2017	Acupuncture combined with other therapies
211	Meta-analysis of Literature on Acupuncture and Moxibustion therapy in Trigeminal Neuralgia	Gao Chunmei	2016	Acupuncture combined with other therapies
212	A Systematic Review of Acupuncture for Chemotherapy-Induced Peripheral Neuropathy.	Li, K	2019	Acupuncture intervention s did not meet the inclusion criteria
213	Meta-analysis of Electroacupuncture for Chemotherapy-Induced Peripheral Neuropathy	KUANG Biyao	2019	Acupuncture intervention s did not meet the incl

				usion criteri a
214	Meta-analysis of Clinical Study on Electroacupuncture Treatment of Diabetic Peripheral Neuropathy	Zheng Haizhu	2020	No patient important outcome
215	Acupuncture for the Treatment of Lower Limb Diabetic Peripheral Neuropathy: a Systematic Review.	Nash, J	2019	No meta-analysis
216	Meta-analysis of the Effect of Acupuncture and Moxibustion on the Conduction Velocity of Ulnar Nerve in Diabetic Peripheral Neuropathy	Zhong Zhen	2019	Acupuncture combined with other therapies
217	A Meta-analysis on the Effect of Acupuncture on Tibial Nerve in Diabetic Peripheral Neuropathy	MA Shiqi	2019	Acupuncture combined with other therapies
218	Meta-analysis and Test Sequential Analysis on the Effect of Acupuncture on Diabetic Peripheral Neuropathy	He Jianbin	2019	Acupuncture interventions did not meet the inclusion criteria
219	A Meta-analysis of the Effect of Auricular Pressing on Diabetic Peripheral Neuropathy	LI Ming-zhe	2019	Acupuncture combined with other therapies
220	Influence of Acupuncture-Moxibustion on the Peroneal Nerve Conduction Velocity in Type 2 Diabetic Peripheral Neuropathy: A Meta-analysis	LIU Ji-qin	2016	No patient important outcome
221	Acupuncture for the Treatment of Peripheral Neuropathy: A Systematic Review and Meta-analysis.	Dimitrova, A	2017	Acupuncture combined with other therapies
222	The Effectiveness of Acupuncture in the Management of Persistent Regional Myofascial Head and Neck Pain: A Systematic Review and Meta-analysis	Farag, A M	2020	No meta-analysis
223	Meta-analysis of the Effect of Dry Acupuncture on the Trigger Point of Upper Trapezius Myofascial Pain	Liu Lin	2015	Acupuncture interventions did not meet the inclusion criteria

224	The Effect of Acupuncture on Postoperative Pain, Nausea and Vomiting after Pediatric Tonsillectomy: a Systematic Review.	Pouy, S	2019	No meta-analysis
225	The Effectiveness of P6 Acupuncture in the Prevention of Postoperative Nausea and Vomiting in Children- A Systematic Review and Meta-analysis.	Zhang, Y	2020	Control interventions did not meet the inclusion criteria
226	The Effect of Acupuncture on Postoperative Nausea and Vomiting after Pediatric Tonsillectomy: A Meta-analysis and Systematic Review.	Shin, H C	2016	Acupuncture combined with other therapies
227	Transcutaneous Electrical Acupoint Stimulation for Preventing Postoperative Nausea and Vomiting after General Anesthesia: A Meta-analysis of Randomized Controlled Trials.	Chen, J	2020	No meta-analysis
228	Acupuncture therapy on Postoperative Nausea and Vomiting in Abdominal Operation: A Bayesian Network Meta-analysis.	Fu, C	2020	Acupuncture combined with other therapies
229	Non-Needle Acupoint Stimulation for Prevention of Nausea and Vomiting after Breast Surgery: A Meta-analysis.	Sun, R	2019	No patient important outcome
230	Ear Acupuncture therapy in Preventing Postoperative Nausea and Emesis: A Systematic Review and Meta-analysis of RCT	GAO Yanyu	2017	Acupuncture interventions did not meet the inclusion criteria
231	Can Perioperative Acupuncture Reduce the Pain and Vomiting Experienced after Tonsillectomy? A Meta-analysis.	Cho, H K	2016	Acupuncture combined with other therapies
232	Clinical Observation on Electroacupuncture Pre-Treatment for Delayed Vomiting Caused by Chemotherapy after Breast Cancer Operation	Huang Kejiang	2016	Acupuncture interventions did not meet the inclusion criteria
233	Meta-analysis on Postoperative Complications of Wristband Acupoint Pressure therapy.	Zhang, G L	2015	Full text unavailable
234	The Effect of Acupuncture on Postoperative	Pouy, S	2019	No meta-an

	ve Pain, Nausea and Vomiting after Pediatric Tonsillectomy: a Systematic Review.			alysis
235	Systematic Evaluation and Meta-analysis of the Improvement of Pain and Function after Total Knee Replacement by Percutaneous Electrical Stimulation	LI Kai-min g	2019	Acupuncture combined with other therapies
236	Meta-analysis of Auricular Acupoint Pressing therapy for Postoperative Pain in Fractures	ZHANG Ya qian	2019	Acupuncture combined with other therapies
237	Effect of Auricular Plaster therapy on Postoperative Pain and Functional Recovery after Total Hip Arthroplasty: A Meta-analysis	Li Haiyang	2019	Acupuncture combined with other therapies
238	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
239	The Effect of Auricular Acupressure/Sticking therapy on Pain Relief after Total Hip Or Knee Replacement: a Systematic Review	Zhang Qian kun	2018	Acupuncture combined with other therapies
240	A Systematic Evaluation of the Effect of Point Massage on Relieving Shoulder Pain after Laparoscopic Surgery	Yang Lin	2017	Acupuncture combined with other therapies
241	The Efficacy of Acupuncture in Post-Operative Pain Management: A Systematic Review and Meta-analysis.	Wu, M S	2016	No detailed information on intervention or outcome
242	Electrical Stimulation and Recovery of Gastrointestinal Function Following Surgery: A Systematic Review.	Penfold, J A	2019	Acupuncture combined with other therapies
243	Effect of Auricular Point Sticking on Recovery of Gastrointestinal Function after Gynecological Laparoscopic Surgery: a Meta-analysis	Zhai Tian-tian	2019	Acupuncture combined with other therapies
244	Meta-analysis of the Effect of Auricular Point Sticking Pressure on Abdominal Distension Relief of Patients with Laparoscopic Surgery in Gynecology	HU Shunan	2019	Acupuncture combined with other therapies
245	A Meta-analysis of Randomized Controlled Trials of Acupuncture and Moxibustion	LI Chao	2019	Acupuncture combined

	for Postoperative Gastroparesis			with other therapies
246	A Meta-analysis of the Effect of Acupoint Massage in Prevention of Gastrointestinal Complications after Laparoscopic Surgery in Adults	YE Chunxiang	2019	Acupuncture interventions did not meet the inclusion criteria
247	Meta-analysis of Simple Acupuncture to Promote Postoperative Abdominal Gastrointestinal Dysfunction Recovery	Wang Shiyuan	2018	Acupuncture combined with other therapies
248	Efficacy and Safety of Acupuncture Intervention in the Recovery of Gastrointestinal Function after Gynecological and Obstetric Surgery: A Systematic Review	Wang Youping	2018	No patient important outcome
249	Effectiveness of Acupuncture in Postoperative Ileus: a Systematic Review and Meta-analysis	Bik, Cheong Kah	2016	No patient important outcome
250	A Systematic Review and Meta-analysis to Acupuncture on Postoperative Ileus	Li Jinjin	2015	Acupuncture combined with other therapies
251	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture for Postoperative Intestinal Obstruction	Ma Yufeng	2015	No patient important outcome
252	Effects of Acupuncture in Anesthesia for Craniotomy: A Meta-analysis.	Asmussen, S	2017	Acupuncture combined with other therapies
253	Systematic Review and Meta-analysis on the Effectiveness of Acupuncture and Moxibustion in the Treatment of Postpartum Lactation	Zhou Lan	2019	Acupuncture interventions did not meet the inclusion criteria
254	Meta-analysis of the Effect of Embedding Bean in Ear Acupoint on Lactation after Cesarean Section	Han Tinxia	2018	Acupuncture combined with other therapies
255	Effects of Auricular Plaster therapy and Use of Time on Postpartum Lactation: A Meta-analysis	Tang Ying	2017	Acupuncture combined with other therapies

256	Impact of Acupressure on Onset of Labour and Labour Duration: A Systematic Review.	Mollart, L J	2015	No meta-analysis
257	Acupuncture At Zusanli (St36) for Experimental Sepsis: A Systematic Review.	Lai, F	2020	No meta-analysis
258	Efficacy and Safety of Acupuncture on Sepsis: a Systematic Review	TANG Yidan	2020	Acupuncture interventions did not meet the inclusion criteria
259	Systematic Evaluation and Meta-analysis of the Improvement of Pain and Function after Total Knee Replacement by Percutaneous Electrical Stimulation	LI Kai-min g	2019	Acupuncture combined with other therapies
260	Systematic Review of Three Electrical Stimulation Techniques for Rehabilitation after Total Knee Arthroplasty.	Yue, C	2018	No meta-analysis
261	The Effect of Auricular Acupressure/Sticking therapy on Pain Relief after Total Hip Or Knee Replacement: a Systematic Review	Zhang Qian kun	2018	Acupuncture combined with other therapies
262	Effect of Auricular Plaster therapy on Postoperative Pain and Functional Recovery after Total Hip Arthroplasty: A Meta-analysis	Li Haiyang	2019	Acupuncture combined with other therapies
263	The Effect of Different Acupuncture therapies on Neurological Recovery in Spinal Cord Injury: A Systematic Review and Network Meta-analysis of Randomized Controlled Trials.	Xiong, F	2019	Acupuncture combined with other therapies
264	Acupuncture Treatment for Urinary Retention Following Spinal Cord Injury: A Meta-analysis	Cheng Jie	2018	Acupuncture combined with other therapies
265	Efficacy of Acupuncture and Moxibustion for Neurogenic Bladder in Patients with Spinal Cord Injury: A Meta-analysis	Wan Dengfeng	2018	No patient important outcome
266	Acupuncture for the Effect and Safety of Neurogenic Bladder after Spinal Cord Injury: A Meta-analysis	FAN Xiao	2017	Acupuncture combined with other therapies
267	The Impact of Acupuncture on Neurological Recovery in Spinal Cord Injury: A S	Ma, R	2015	Acupuncture combined

	ystematic Review and Meta-analysis.			with other t herapies
268	Network Meta-analysis on Effectiveness o f Fire Needle, Warm Acupuncture, and El ectroacupuncture in the Treatment of Kne e Osteoarthritis	Zhang Jinh uan	2020	Acupuncture intervention s did not m eet the incl usion criteri a
269	Meta-analysis of Fu’s Subcutaneous Needl ing therapy for Knee Osteoarthritis	SONG Xian g	2019	Control inte rventions di d not meet the inclusio n criteria
270	Meta-analysis of Safety and Effectiveness of Floating Needle therapy in Treating Knee Osteoarthritis	LIU Wan-J un	2019	Control inte rventions di d not meet the inclusio n criteria
271	Meta-analysis of Clinical Effect of Acupu ncture and Moxibustion on Osteoarthritis/ Osteodystrophy	Feng Peng	2019	Acupuncture intervention s did not m eet the incl usion criteri a
272	Meta-analysis of the Effect of Acupunctur e and Western Medicine on Knee Osteoar thritis/Osteodystrophy	Hao Huirui	2018	Acupuncture combined with other t herapies
273	Effect of Electroacupuncture on Knee Ost eoarthritis: A Systematic Review	LIN Jie	2016	Acupuncture combined with other t herapies
274	Meta-analysis of the therapeutic Effect of Treating Osteoarthritis with Filiform Nee dle	MA Jia-jian	2016	Acupuncture combined with other t herapies
275	Meta-analysis of Acupuncture and Moxib ustion for Treatment of Osteoarthritis/Oste odystrophy	Hu Hanjiao	2016	Acupuncture intervention s did not m eet the incl usion criteri a
276	Acupuncture for Obstructive Sleep Apnea (Osa) in Adults: A Systematic Review a	Wang, L	2020	Acupuncture intervention

	nd Meta-analysis			s did not meet the inclusion criteria
277	Effects of Acupuncture on Tinnitus Treatment: A Systematic Review and Meta-analysis	ZHANG Ze-yu	2018	Acupuncture interventions did not meet the inclusion criteria
278	Non-Pharmacologic Treatments for Symptoms of Diabetic Peripheral Neuropathy: a Systematic Review.	Amato, N. S	2019	Acupuncture interventions did not meet the inclusion criteria
279	Effects of Acupuncture on Luteinized Unruptured Follicle Syndrome: A Meta-analysis of Randomized Controlled Trials	Liu, X	2020	No patient important outcome
280	Complementary and Alternative Medicine Treatment Options for Otitis Media: A Systematic Review.	Marom, T	2016	No meta-analysis
281	Clinical Effect of Acupuncture therapy on Obstructive Sleep Apnea Hypopnea Syndrome: a Meta-analysis	JIAO Su-qin	2018	No patient important outcome
282	The Clinical Effect of Acupuncture in the Treatment of Obstructive Sleep Apnea: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Ly, Z T	2016	Acupuncture interventions did not meet the inclusion criteria
283	Effectiveness of Acupuncturing At the Sphenopalatine Ganglion Acupoint Alone for Treatment of Allergic Rhinitis: A Systematic Review and Meta-analysis.	Fu, Qinwei	2019	Control interventions did not meet the inclusion criteria
284	Acupuncture for Allergic Rhinitis: a Systematic Review and Meta-analysis	Liu Jie	2016	Control interventions did not meet the inclusion criteria
285	Systematic Review and Meta-analysis of the Randomized Controlled Trial of Acupuncture for Allergic Rhinitis	QU Shu-han	2016	Acupuncture interventions did not meet the inclusion criteria

				meet the inclusion criteria
286	Acupuncture of Sphenopalatine Ganglion in the Treatment of Allergic Rhinitis: a Systematic Review	Chen Lihe	2016	Acupuncture interventions did not meet the inclusion criteria
287	Acupuncture and Moxibustion for the Treatment of Allergic Rhinitis: A Meta-analysis	LIANG Chao	2015	Control interventions did not meet the inclusion criteria
288	Meta-analysis of Acupuncture Treatment for Sudden Deafness	ZHA Bixiang	2019	Control interventions did not meet the inclusion criteria
289	Evaluation of Effect of Acupuncture and Moxibustion and Level of Intervention Based on Cumulative Meta-analysis and Fuzzy Comprehensive Evaluation: Sudden Hearing Loss	LI Bo	2016	No patient important outcome
290	Acupuncture for the Treatment of Sudden Sensorineural Hearing Loss: A Systematic Review and Meta-analysis: Acupuncture for Ssnhl.	Chen, S	2019	No patient important outcome
291	Acupuncture therapy for Sudden Sensorineural Hearing Loss: a Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhang, XC	2015	Acupuncture combined with other therapies
292	Efficacy and Safety of Acupuncture therapy for Nerve Deafness: a Meta-analysis of Randomized Controlled Trials.	Jiang, Y	2015	Control interventions did not meet the inclusion criteria
293	Systematic Review and Meta-analysis of Acupuncture for the Treatment of Neuroathic Tinnitus	SONG Hualong	2018	No patient important outcome
294	Systematic Review of Acupuncture Treatment of Tinnitus	Xie Hui	2018	Control interventions did not meet the inclusion

				n criteria
295	Meta-analysis of Acupuncture and Moxibustion Treatment of Tinnitus Randomized Controlled Trial	Nie Hongmei	2016	No patient important outcome
296	The Meta-analysis of Tinnitus on Randomized Controlled Clinical Trials of Acupuncture Treatment	Meng Dan	2016	No patient important outcome
297	Systematic Review of Clinical Research on Acupuncture and Moxibustion Treatment of Tinnitus	Ji Jun	2016	No patient important outcome
298	Systematic Review of Acupuncture and Hyperthyroidism therapy	Wang Guang-an	2018	Acupuncture interventions did not meet the inclusion criteria
299	Meta-analysis of Clinical Study on Electroacupuncture Treatment of Diabetic Peripheral Neuropathy	Zheng Haizhu	2020	Acupuncture interventions did not meet the inclusion criteria
300	Acupuncture for the Treatment of Lower Limb Diabetic Peripheral Neuropathy: a Systematic Review.	Nash, J	2019	No meta-analysis
301	Meta-analysis of the Effect of Acupuncture and Moxibustion on the Conduction Velocity of Ulnar Nerve in Diabetic Peripheral Neuropathy	Zhong Zhen	2019	Acupuncture interventions did not meet the inclusion criteria
302	A Meta-analysis on the Effect of Acupuncture on Tibial Nerve in Diabetic Peripheral Neuropathy	MA Shiqi	2019	Acupuncture interventions did not meet the inclusion criteria
303	Meta-analysis and Test Sequential Analysis on the Effect of Acupuncture on Diabetic Peripheral Neuropathy	He Jianbin	2019	Acupuncture combined with other therapies
304	A Meta-analysis of the Effect of Auricular Pressing on Diabetic Peripheral Neuropathy	LI Ming-zhe	2019	Acupuncture combined with other therapies

				herapies
305	Influence of Acupuncture-Moxibustion on the Peroneal Nerve Conduction Velocity in Type 2 Diabetic Peripheral Neuropathy: A Meta-analysis	LIU Ji-qin	2016	No patient i mportant ou tcome
306	Meta-analysis and Treatment Strategy of Acupuncture in the Treatment of Diabetic Peripheral Neuropathy	XU Chang	2016	No patient i mportant ou tcome
307	Influence on Acupuncture Treatment of D iabetic Peripheral Neuropathy-a Systematic Review of Randomized Controlled Trials	Li Jun	2015	No patient i mportant ou tcome
308	Effects and Safety of Acupuncture for Df us: a Systematic Review and Meta-analys is	Yi, Li-Juan	2016	No patient i mportant ou tcome
309	Systematic Review and Meta-Regression Analysis of Acupuncture for Diabetic Nep hropathy	Jia Ying	2019	No patient i mportant ou tcome
310	A Systematic Review of Acupuncture on Diabetic Kidney Disease	WANG An-na	2019	Acupuncture combined with other t herapies
311	Systematic Evaluation of Acupuncture Tre ating Diabetic Retinopathy	GUAN Min gdan	2019	Acupuncture combined with other t herapies
312	Acupuncture for Management of Type 2 Diabetic Gastroparesis: a Meta-analysis	CHEN Ya-j un	2018	Acupuncture intervention s did not m eet the incl usion criteri a
313	System Evaluation and Meta-analysis of Auricular Plaster Intervention for Diabetic Gastroparesis Patients	Xu Huiwen	2016	Acupuncture intervention s did not m eet the incl usion criteri a
314	Meta-analysis of Acupuncture Treatment o f Type 2 Diabetes Mellitus and Depressio n Clinical Research	Liu Meijun	2016	Acupuncture combined with other t herapies
315	Auricular Plaster therapy for Improving S leep in Patients with Diabetes Mellitus a nd Insomnia: A Systematic Review	Jiang Yutin g	2016	Acupuncture intervention s did not m

				meet the inclusion criteria
316	Systematic Review and Meta-analysis on Acupuncture for Obesity Complicated with Type 2 Diabetes Mellitus	WANG Lihua	2018	Acupuncture interventions did not meet the inclusion criteria
317	Meta-analysis on the therapeutic Effect of Acupuncture and Moxibustion on Obesity of Type 2 Diabetes Mellitus	Lin Juan	2016	Acupuncture interventions did not meet the inclusion criteria
318	Systematic Review of Auricular Point therapy for Type 2 Diabetes Mellitus: A Meta-analysis	Piao Chunli	2020	No patient important outcome
319	Acupuncture for Type 2 Diabetes Mellitus: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Chen, C	2019	No patient important outcome
320	A Meta-analysis on the Effect of Acupoint Massage on Type 2 Diabetic Patients	WANG Yan	2019	No meta-analysis
321	Meta-analysis of Acupuncture on the Pancreas Islet Function of Patients with Type 2 Diabetes	XING Guochun	2015	Control interventions did not meet the inclusion criteria
322	Systematic Review of Interventional Effect of Acupuncture and Moxibustion on Impaired Glucose Regulation	SHI Liwei	2018	Acupuncture interventions did not meet the inclusion criteria
323	Meta-analysis of therapeutic Effect of Acupuncture and Moxibustion on Metabolic Syndrome	Guo Shengtong	2015	Acupuncture interventions did not meet the inclusion criteria
324	Randomized Controlled Trials of Auricular Point for Hyperlipidemia: A Meta-analysis	LI Huan	2017	No patient important outcome
325	Effectiveness and Safety of Acupuncture	LIU Mailan	2015	No patient i

	and Moxibustion for Hyperlipidemia: A Systematic Review			important outcome
326	Acupuncture for Glaucoma.	Law, S K	2020	No meta-analysis
327	Optimizing Acupuncture Treatment for Dry Eye Syndrome: a Systematic Review.	Kim, B H	2018	Acupuncture interventions did not meet the inclusion criteria
328	Meta-analysis on Acupuncture for Dry Eyes Based on the Clinical Literatures: a Randomized Controlled Trial	SHENG Xueyan	2015	Acupuncture interventions did not meet the inclusion criteria
329	Acupuncture for Acute Hordeolum	Cheng, Ke	2017	Acupuncture interventions did not meet the inclusion criteria
330	Meta-analysis of Auricular Acupressure therapy in Intervention of Juvenile Myopia	XU Baisheng	2019	Acupuncture interventions did not meet the inclusion criteria
331	Effectiveness of Acupuncture for Juvenile Myopia: A Systematic Assessment	FU Tian	2017	Control interventions did not meet the inclusion criteria
332	Meta-analysis on Acupuncture Treatment of Diplopia	Ding Yaping	2018	Acupuncture combined with other therapies
333	Meta-analysis of the Effect of Acupuncture and Moxibustion on Uveitis	Wu Hanqing	2015	No patient important outcome
334	Meta-analysis of Acupuncture As Adjuvant therapy in Improving Gastrointestinal Function of Acute Pancreatitis Patients	LIU Hong	2017	Acupuncture combined with other therapies

335	Meta-analysis on Acupuncture and Moxibustion in the Treatment of Inflammatory Bowel Disease	WANG Yuan	2018	Acupuncture interventions did not meet the inclusion criteria
336	Clinical Efficacy Differences in Ulcerative Colitis Between Acupuncture and Salazopyridine: A Meta-analysis	LIU Zhao	2016	Acupuncture interventions did not meet the inclusion criteria
337	Systematic Review of Complementary and Alternative Medicine Treatments in Inflammatory Bowel Diseases.	Langhorst, J	2015	No meta-analysis
338	Acupuncture for Chronic Hepatitis B.	Kong, Z	2019	Acupuncture interventions did not meet the inclusion criteria
339	[Acupuncture for Diarrhea-Predominant Irritable Bowel Syndrome: a Meta-analysis].	Deng, D	2017	Acupuncture interventions did not meet the inclusion criteria
340	Meta-analysis of Acupuncture in Treatment of Irritable Bowel Syndrome	LI Rui-gen	2016	Acupuncture interventions did not meet the inclusion criteria
341	Systematic Review of Acupuncture therapies for Irritable Bowel Syndrome	XU Guixin	2016	Acupuncture interventions did not meet the inclusion criteria
342	Systematic Review of Auricular Plaster therapy for Prevention and Treatment of Opioid Induced Constipation	DING Weibin	2020	Acupuncture interventions did not meet the inclusion criteria

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343	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Functional Constipation	MA Kun	2019	Control interventions did not meet the inclusion criteria
344	Effects of Ear-acupressure in Treatment of Constipation: a Systematic Review	LUO Chun mei	2017	No patient important outcome
345	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture and Moxibustion for Constipation	Li Xue	2016	Acupuncture interventions did not meet the inclusion criteria
346	Auricular-Plaster therapy for Chronic Functional Constipation: A Meta-analysis of Randomized Controlled Trial	Wu Yuanrong	2016	No patient important outcome
347	Efficacy and Safety of Acupuncture for the Treatment of Functional Dyspepsia: Meta-analysis.	Zhou, W	2016	Acupuncture interventions did not meet the inclusion criteria
348	The Effect of Acupuncture and Moxibustion on Functional Dyspepsia Compared with Prokinetic Agents: a Meta-analysis	WU Xiao-wei	2015	Acupuncture interventions did not meet the inclusion criteria
349	Meta-analysis of Acupuncture Treatment of Peptic Ulcer	Hu Shixiu	2019	Acupuncture interventions did not meet the inclusion criteria
350	Meta-analysis of Curative Effect Comparison Between Acupuncture and Western Medicine on Chronic Gastritis	Wang Junlin	2016	Acupuncture interventions did not meet the inclusion criteria
351	Meta-analysis on Acupuncture in Treatment of Chronic Atrophic Gastritis	XIANG Juan	2016	Acupuncture intervention

				s did not meet the inclusion criteria
352	Gastroesophageal Reflux Disease Treated with Acupoint Pointer therapy of Tcm: A Meta-analysis	LI Jianfeng	2019	Acupuncture interventions did not meet the inclusion criteria
353	Efficacy of Acupuncture therapy on Gastrointestinal Dysfunction in Patients with Non-Gastrointestinal Diseases: a Systematic Review and Meta-analysis Based on Randomized Controlled Trials	HOU Ya-hong	2017	Acupuncture combined with other therapies
354	Meta-analysis of Acupuncture Treatment for Gastrointestinal Reaction after Chemotherapy of Tumor	HU Ya-cai	2017	No patient important outcome
355	Acupuncture St25 Treatment for Chronic Diarrhea: A Systematic Evaluation and Meta-analysis	QIN Zongshi	2015	Control interventions did not meet the inclusion criteria
356	Effects of Acupuncture in Patients with Chronic Kidney Disease: a Systematic Review.	Mela, GAA	2020	No meta-analysis
357	Acupuncture for Infertile Women Without Undergoing Assisted Reproductive Techniques (Art): A Systematic Review and Meta-analysis.	Yun, L	2019	Acupuncture interventions did not meet the inclusion criteria
358	Acupuncture in Improving Endometrial Receptivity: a Systematic Review and Meta-analysis.	Zhong, Y	2019	Acupuncture interventions did not meet the inclusion criteria
359	Effect of Acupuncture on Ovulatory Dysfunction Infertility: A Systematic Review	TAN Yu-qing	2019	Acupuncture combined with other therapies
360	Acupuncture in Treatment of Fallopian Tube Obstructive Infertility: A Systematic	HU Yujiao	2018	Acupuncture intervention

	Review and Meta-analysis			s did not meet the inclusion criteria
361	A Meta-analysis on the Clinical Study of Acupuncture in Treating Infertility	LIU Tao	2018	Acupuncture interventions did not meet the inclusion criteria
362	Meta-analysis of Acupuncture-Moxibustion in Treatment of Anovulation Infertility	AI Xiao	2017	Acupuncture interventions did not meet the inclusion criteria
363	Efficacy and Safety of Acupuncture for the Treatment of Oligoasthenozoospermia: A Systematic Review.	You, F	2020	No meta-analysis
364	The Effects of Acupuncture on Pregnancy Outcomes of in Vitro Fertilization with Embryo Transfer: An Interdisciplinary Systematic Review.	Gu, Y E	2019	No meta-analysis
365	Therapeutic Effect of Acupuncture on the Outcomes of in Vitro Fertilization: a Systematic Review and Meta-analysis.	Verastegui, C	2017	Full text unavailable
366	Long-Term Effects of Acupuncture for Chronic Prostatitis/Chronic Pelvic Pain Syndrome: Systematic Review and Single-arm Meta-analyses.	Qin, Z	2019	No detailed information on intervention or outcome
367	Meta-analysis of the Effects of Acupuncture for Chronic Prostatitis	AO Jin-bo	2018	No detailed information on intervention or outcome
368	Comparison of the Efficacy of Acupuncture and Western Medicine Treatment on Chronic Prostatitis in China: Meta-analysis	YU Li-Zhong	2017	No patient important outcome
369	Meta-analysis of Acupuncture Treatment of Chronic Prostatitis	PANG Yong	2016	Acupuncture interventions did not meet the inclusion criteria

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370	Meta-analysis on Acupuncture in Treating Chronic Prostatitis	HE Yuan	2015	No detailed information on intervention or outcome
371	Evaluation of Acupuncture in Treating Benign Prostatic Hyperplasia	CHAI Qiqi	2018	Acupuncture combined with other therapies
372	Complementary therapies for Bladder Pain Syndrome: a Systematic Review.	Verghese, T S	2016	No meta-analysis
373	Meta-analysis of Clinical Efficacy of Acupuncture Versus Drugs in the Treatment of Renal Colic	HUANG Yi-yu	2020	Acupuncture interventions did not meet the inclusion criteria
374	Meta-analysis on the Clinical Effect of Acupuncture and Moxibustion in the Treatment of Female Stress Urinary Incontinence	CHEN Yali	2020	Acupuncture interventions did not meet the inclusion criteria
375	A Meta-analysis of Treating Female Stress Urinary Incontinence by Acupuncture	Zhang Yan	2016	Acupuncture interventions did not meet the inclusion criteria
376	Clinical Studies on Incontinence Treated by Electroacupuncture: a Meta-analysis	Zhang Jiaping	2018	Control interventions did not meet the inclusion criteria
377	A Systematic Review and Meta-analysis of Acupuncture for Urolithiasis	Zhang Mingqiang	2019	Acupuncture interventions did not meet the inclusion criteria
378	Acupuncture Treatment for Chronic Pelvic Pain in Women: A Systematic Review and Meta-analysis of Randomized Controlled	Sung, S H	2018	Acupuncture interventions did not m

	ed Trials.			meet the inclusion criteria
379	Systematic Review and Meta-analysis of Complementary Treatments for Women with Symptomatic Endometriosis.	Mira, TAA	2018	No meta-analysis
380	Acupuncture for Polycystic Ovarian Syndrome.	Lim, CED	2019	No patient important outcome
381	Acupuncture for Polycystic Ovarian Syndrome: A Systematic Review and Meta-analysis.	Jo, J	2017	No patient important outcome
382	Acupuncture for Treating Polycystic Ovary Syndrome: Guidance for Future Randomized Controlled Trials.	Wu, Y	2016	No patient important outcome
383	Transcutaneous Electrical Nerve Stimulation (TENS) for Pain Management in Sickle Cell Disease.	Pal, S	2020	No meta-analysis
384	Acupuncture for Cognitive Impairment in Vascular Dementia, Alzheimer's Disease and Mild Cognitive Impairment: A Systematic Review and Meta-analysis	Lan, J	2020	Full text unavailable
385	Effectiveness and Safety of Acupuncture for the Treatment of Alzheimer's Disease: A Systematic Review and Meta-analysis.	Wang, Y Y	2020	Control interventions did not meet the inclusion criteria
386	Effectiveness of Acupuncture for Alzheimer's Disease: An Updated Systematic Review and Meta-analysis.	Huang, Q	2019	Control interventions did not meet the inclusion criteria
387	Acupuncture and Alzheimer's Disease: A Review of a Meta-analysis.	Quick, Melissa	2015	Full text unavailable
388	The Effectiveness and Safety of Acupuncture for Patients with Alzheimer Disease: a Systematic Review and Meta-analysis of Randomized Controlled Trials.	Zhou, J	2015	Acupuncture interventions did not meet the inclusion criteria
389	Meta-analysis of Tiaoshen Tongdu Acupuncture in the Treatment of Vascular Dementia	Li Fei	2019	Acupuncture interventions did not meet the inclusion criteria

				usion criteri a
390	Efficacy Difference of Electro-acupuncture and Nimodipine in the Treatment of Vascular Dementia: A Study of Meta-analysis	WU Jiamin	2018	Control interventions did not meet the inclusion criteria
391	A Meta-analysis on Clinical Randomized Controlled Trials of Scalp Electroacupuncture of Vascular Dementia	WAN Ting	2017	Control interventions did not meet the inclusion criteria
392	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Senile Dementia	Lin Lin	2017	Acupuncture interventions did not meet the inclusion criteria
393	Meta-analysis: Scalp Treatment of Vascular Dementia	GUO Zhenlang	2016	Control interventions did not meet the inclusion criteria
394	Systematic Review of Acupuncture for the Treatment of Alcohol Withdrawal Syndrome.	Liu, X	2018	Acupuncture interventions did not meet the inclusion criteria
395	Systematic Review of Acupuncture therapy for Opioid-Dependence Withdrawal Syndrome	ZHANG Guang-Cai	2018	Acupuncture interventions did not meet the inclusion criteria
396	Meta-analysis of Acupoint Stimulation on Improving Opioid Protracted Withdrawal Symptoms	YANG Jia-xin	2016	Acupuncture interventions did not meet the inclusion criteria
397	Condition and Effectiveness Evaluation of Acupuncture for Smoking Cessation	LIU Zhao	2015	Acupuncture interventions did not m

				meet the inclusion criteria
398	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Schizophrenia	ZHANG Wenzhong	2019	Acupuncture interventions did not meet the inclusion criteria
399	Acupuncture As Add-on Treatment of the Positive, Negative, and Cognitive Symptoms of Patients with Schizophrenia: A Systematic Review.	van den Noort, M	2018	No meta-analysis
400	Acupuncture and Electroacupuncture for Anxiety Disorders: A Systematic Review of the Clinical Research.	Amorim, D	2018	No meta-analysis
401	Effectiveness and Safety of Ear Acupuncture for Trauma-Related Mental Disorders after Large-Scale Disasters: A Prisma-Compliant Systematic Review.	Kwon, C Y	2020	No meta-analysis
402	Meta-analysis of Acupuncture and Moxibustion in the Treatment of Post-Traumatic Stress Disorder	Han Yadi	2017	Acupuncture interventions did not meet the inclusion criteria
403	Acupuncture for Attention Deficit Hyperactivity Disorder: A Systematic Review	ZHANG Shanyu	2020	Acupuncture interventions did not meet the inclusion criteria
404	Acupuncture for Attention Deficit Hyperactivity Disorder: A Meta-analysis of Randomized Controlled Trials	TIAN Yong	2019	Acupuncture interventions did not meet the inclusion criteria
405	A Meta-analysis on Acupuncture Treatment of Attention Deficit/Hyperactivity Disorder.	Ni, X Q	2015	Acupuncture interventions did not meet the inclusion criteria

406	A Meta-analysis on Acupuncture Treatment of Attention Deficit/Hyperactivity Disorder	NI Xin-qian g	2015	Acupuncture intervention s did not meet the inclusion criteria
407	Neuromodulation of Autism Spectrum Disorders Using Vagal Nerve Stimulation.	van Hoorn, A	2019	Acupuncture intervention s did not meet the inclusion criteria
408	Acupuncture for Autism Spectrum Disorder: A Systematic Review and Meta-analysis.	Lee, B	2017	Full text unavailable
409	Systematic Evaluation of Acupuncture therapy for Childhood Autism	YUAN Zhao-hong	2016	Acupuncture combined with other therapies
410	Complementary and Alternative therapies for Autism Spectrum Disorder.	Brondino, N	2015	Acupuncture combined with other therapies
411	Meta-analysis of Curative Efficacy of Acupuncture for Children with Autism	Zhang Chengxiong	2015	Acupuncture combined with other therapies
412	Scalp Acupuncture Treatment for Children's Autism Spectrum Disorders: A Systematic Review and Meta-analysis.	Liu, C	2019	Acupuncture combined with other therapies
413	The Efficacy and Safety of Acupuncture for the Treatment of Children with Autism Spectrum Disorder: A Systematic Review and Meta-analysis.	Lee, Boram	2018	Acupuncture combined with other therapies
414	A Meta-analysis on Randomized Controlled Trials of Acupuncture in Treatment of Children with Tic Disorders	NI Xinqian g	2017	Acupuncture combined with other therapies
415	Management of Temporomandibular Disorders with Transcutaneous Electrical Nerve Stimulation: A Systematic Review.	Fertout, A	2019	No meta-analysis
416	Acupuncture in Temporomandibular Disorder Myofascial Pain Treatment: A System	Fernandes, A C	2017	No meta-analysis

	atic Review.			
417	Meta-analysis of the Efficacy of Acupuncture Treatment of Temporomandibular Joint Disorder	LI Hui-ping	2015	No patient important outcome
418	Salivary Hypofunction: An Update on the therapeutic Strategies.	Salum, F G	2018	No meta-analysis
419	A Meta-analysis of Radiotherapy-Induced Salivary Hypofunction and Xerostomia in Patients with Head and Neck Cancer	SU Qun	2015	Acupuncture interventions did not meet the inclusion criteria
420	Nonpharmacologic therapies in Patients with Exacerbation of Chronic Obstructive Pulmonary Disease: A Systematic Review with Meta-analysis	Dobler, C C	2020	Acupuncture interventions did not meet the inclusion criteria
421	Acupuncture Techniques for Copd: a Systematic Review.	Fernández-Jané, C	2020	Acupuncture interventions did not meet the inclusion criteria
422	Acupuncture therapy for Functional Effects and Quality of Life in Copd Patients: A Systematic Review and Meta-analysis.	Wang, Jiajia	2018	Acupuncture interventions did not meet the inclusion criteria
423	Meta-analysis of the therapeutic Effect of Acupuncture on Chronic Obstructive Pulmonary Disease	CAO Ailing	2017	Acupuncture combined with other therapies
424	Meta-analysis of Acupuncture Treatment of Bronchial Asthma Clinical Literature	LI Meng-yuan	2018	Acupuncture interventions did not meet the inclusion criteria
425	Effect and Safety of Stimulating Acupoints in Children with Cough Variant Asthma: A Meta-analysis.	Jin, Y	2018	Acupuncture interventions did not meet the incl

				usion criteri a
426	Meta-analysis on Randomized Controlled Trials for Scalp Acupuncture Treatment of Stroke: A Systematic Review.	Young-Nim, Y	2018	No meta-an alysis
427	Statistic Method Meta-analysis on Eye Acupuncture Treatment for Stroke	GUAN Hongyang	2017	Acupuncture combined with other t herapies
428	Acupuncture for Stroke Rehabilitation	Yang, Ai	2016	Acupuncture combined with other t herapies
429	Eye Acupuncture Treatment for Stroke: A Systematic Review and Meta-analysis.	Bai, Z H	2015	Acupuncture combined with other t herapies
430	Xingnao Kaiqiao Needling Method for Acute Ischemic Stroke: A Meta-analysis of Safety and Efficacy.	Yang, Z X	2017	Acupuncture combined with other t herapies
431	Systematic Review of Long-Term Xingnao Kaiqiao Needling Efficacy in Ischemic Stroke Treatment.	Yang, Z X	2015	Control inte rventions di d not meet the inclusio n criteria
432	Effectiveness of Scalp Acupuncture for Ischemic Stroke: A Meta-analysis.	Wang, J H	2015	Acupuncture intervention s did not m eet the incl usion criteri a
433	Xingnao Kaiqiao Needling Method for Acute Ischemic Stroke: A Meta-analysis of Safety and Efficacy.	Yang, Z X	2017	Acupuncture combined with other t herapies
434	Electroacupuncture for Acute Ischemic Stroke.	Liu, A J	2015	Acupuncture combined with other t herapies
435	Meta-analysis of Floating-Needle therapy for Post-Stroke Shoulder-Hand Syndrome	WANG Zhenhui	2018	Control inte rventions di d not meet the inclusio

				n criteria
436	Systematic Evaluation and Meta-analysis of Acupuncture Antagonistic Muscle therapy for Spastic Paralysis after Stroke	WANG Rui	2019	Control interventions did not meet the inclusion criteria
437	Systematic Review and Meta-analysis on the therapeutic Effect of Acupuncture on Hypertonia of Hand Muscle in Patients with Stroke	Zhang Zengqiao	2019	Acupuncture combined with other therapies
438	Meta-analysis on Acupuncture for Hand Spasm Post-Stroke	Qi Conghui	2019	Acupuncture combined with other therapies
439	Effect of Transcutaneous Electrical Nerve Stimulation (Tens) on Spasticity in Adults with Stroke: A Systematic Review and Meta-analysis.	Mahmood, A	2019	Acupuncture combined with other therapies
440	Systematic Review and Meta-analysis of Acupuncture Treatment for Post-Stroke Hand and Dysfunction	QI Cong-hui	2018	Acupuncture combined with other therapies
441	Transcutaneous Electrical Nerve Stimulation Improves Walking Capacity and Reduces Spasticity in Stroke Survivors: a Systematic Review and Meta-analysis.	Kwong, P W	2018	Acupuncture combined with other therapies
442	Meta-analysis on the therapeutic Effect of Acupuncture At Meridian Sinew for Spastic Paralysis after Stroke.	Zhang, Y	2017	Control interventions did not meet the inclusion criteria
443	Meta-analysis on the Effect of Acupuncture and Moxibustion on Limb Motor Dysfunction in Patients with Stroke	Zheng Yi	2016	Acupuncture interventions did not meet the inclusion criteria
444	Systematic Evaluation of Acupuncture for the Treatment of Post-Stroke Strophopodia	ZHANG Yong	2016	Acupuncture combined with other therapies
445	Acupuncture for Spasticity after Stroke: a Systematic Review and Meta-analysis of Randomized Controlled Trials	Lim, S M	2015	Control interventions did not meet

				the inclusion criteria
446	Meta-analysis and Test Sequential Analysis of Depressive State in Patients with Post-Stroke Depression Treated with Acupuncture	Xu Ruoxi	2019	Acupuncture combined with other therapies
447	Systematic Review and Meta-analysis of the Clinical Efficacy of Eye Acupuncture in the Treatment of Poststroke Depression	YANG wei	2019	Control interventions did not meet the inclusion criteria
448	The Effectiveness of Acupuncture therapy in Patients with Post-Stroke Depression: An Updated Meta-analysis of Randomized Controlled Trials.	Zhang, XY	2019	Acupuncture interventions did not meet the inclusion criteria
449	A Meta-analysis of the Efficacy of Acupuncture and Electro-acupuncture on Post-Stroke Depression	HUANG Yingjie	2018	Acupuncture combined with other therapies
450	Meta-analysis of Effect of Acupuncture and Antidepressants on Depression in Patients with Post-Stroke Depression	ZHOU Xin	2018	Acupuncture interventions did not meet the inclusion criteria
451	Jin Three-Needle therapy for Post-Stroke Depression: A Systematic Review and Meta-analysis	WEI Yanying	2018	Acupuncture interventions did not meet the inclusion criteria
452	Meta-analysis of Auricular Point Sticking in the Treatment of Post-Stroke Depression	WANG Qiang	2018	Acupuncture interventions did not meet the inclusion criteria
453	Scalp Acupuncture therapy for Post-Stroke Depression: A Systematic Review	ZHANG Huaajun	2017	Acupuncture interventions did not meet the inclusion criteria

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454	An Meta-analysis of Acupuncture for Post-Stroke Depression	YIN Miao-miao	2016	No patient important outcome
455	Consciousness Restoring for Resuscitation Acupuncture therapy for Dysphagia after Stroke: A Systematic Review and Meta-analysis	XU Lianjie	2019	Control interventions did not meet the inclusion criteria
456	Meta-analysis of therapeutic Effect of Tongue Tri-Points therapy on Post Stroke Pseudobulbar Palsy	Yang Jiwei	2018	Control interventions did not meet the inclusion criteria
457	Acupuncture Treatment for Post-Stroke Dysphagia: An Update Meta-analysis of Randomized Controlled Trials.	Li, L X	2018	Acupuncture combined with other therapies
458	The Efficacy of Acupuncture for Post-Stroke Dysphagia: A Systematic Review and Meta-analysis	WANG Chun	2017	Acupuncture combined with other therapies
459	Meta-analysis of Curative Effects of Acupuncture therapy on Dysphagia after Stroke	XU Minghua	2017	Control interventions did not meet the inclusion criteria
460	Meta-analysis of Randomized Controlled Trials on Electro-acupuncture in the Treatment of Dysphagia after Stroke	ZHANG Yi	2017	Acupuncture combined with other therapies
461	Systematic Review on Acupuncture for Treatment of Dysphagia after Stroke.	Ye, Qiuping	2017	Acupuncture combined with other therapies
462	Clinical Literature Study of Acupuncture and Moxibustion in the Treatment of Post-Stroke Dysphagia Based on Meta-analysis	MENG Dan	2016	Acupuncture combined with other therapies
463	A Meta-analysis of the therapeutic Effect of Nape Acupuncture on Post-Stroke Dysphagia in Domestic Literature	HU Tian-jun	2015	Acupuncture combined with other therapies
464	Mesh Meta-analysis of Different Acupuncture	ZHU Jing	2019	Control interventions

	ure therapy for Shoulder Pain after Stroke			interventions did not meet the inclusion criteria
465	Clinical Effects of Different Acupuncture therapy in Treatment of Post-Stroke Shoulder Pain	LIU Fushui	2019	Control interventions did not meet the inclusion criteria
466	Systematic Reviews of Clinical Effect of Floating Needle in the Treatment of Shoulder Pain after Stroke	WEI Zemin	2019	Acupuncture combined with other therapies
467	Effects of Acupuncture on the Recovery Outcomes of Stroke Survivors with Shoulder Pain: A Systematic Review.	Chau, J P C	2018	Acupuncture combined with other therapies
468	Acupuncture for Poststroke Shoulder Pain: A Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture combined with other therapies
469	Acupuncture for the Treatment of Hiccups Following Stroke: a Systematic Review and Meta-analysis.	Yue, J	2017	No patient important outcome
470	Acupuncture for Insomnia after Stroke: a Systematic Review and Meta-analysis.	Lee, S H	2016	Acupuncture interventions did not meet the inclusion criteria
471	Meta-analysis of Randomized Controlled Clinical Studies on Acupuncture and Moxibustion for Limb Numbness after Stroke	Chen Lizao	2020	Acupuncture interventions did not meet the inclusion criteria
472	Systematic Evaluation of Acupuncture for Treatment of Urinary Retention after Cerebral Apoplexy	Wang Huimin	2019	Acupuncture interventions did not meet the inclusion criteria
473	Meta-analysis on Evaluation Index of Acupuncture Improving Self-Care Ability of	Wang Xing	2018	Acupuncture intervention

	Post-Stroke Patients			s did not meet the inclusion criteria
474	Therapeutic Efficacy of Acupuncture At Baihui (Gv 20) and Shenting (Gv 24) for Post-Stroke Cognitive Impairment: A Systematic Review	LIU Fang	2018	Acupuncture combined with other therapies
475	Electroacupuncture for Post Stroke Cognitive Impairment: a Systematic Review and Meta-analyses	ZHAN Jie	2017	Acupuncture combined with other therapies
476	Meta-analysis of Scalp Acupuncture on Cognitive Disorder after Stroke	CHEN Li-zao	2016	Acupuncture interventions did not meet the inclusion criteria
477	Scalp Acupuncture for the Treatment of Cognitive Dysfunction after Stroke: A Systematic Review	Xiong Jian	2016	Acupuncture combined with other therapies
478	Rcts Meta-analysis of Electro-acupuncture Treating Post-Stroke Constipation	WANG De-long	2018	No detailed information on intervention or outcome
479	Systematic Review on Acute Cerebral Infarction Treated with Acupuncture At the Points of the Governor Vessel	Ji Jian-gang	2018	No detailed information on intervention or outcome
480	A Meta-analysis on Effectiveness of Electro-Acupuncture on Post-Stroke Urinary Incontinence	TAN Zhi-gao	2015	No patient important outcome
481	Effectiveness of Non-Pharmacological Interventions on the Management of Sarcopenic Obesity: A Systematic Review and Meta-analysis.	Yin, Y H	2020	Acupuncture combined with other therapies
482	Effectiveness of Electroacupuncture for Simple Obesity: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Gao, Yanling	2020	Control interventions did not meet the inclusion criteria

483	Effect of Acupuncture and Intervention Types on Weight Loss: a Systematic Review and Meta-analysis.	Kim, S Y	2018	Acupuncture interventions did not meet the inclusion criteria
484	Auricular Acupressure for Overweight and Obese Individuals: A Systematic Review and Meta-analysis.	Huang, C F	2019	Acupuncture combined with other therapies
485	Acupuncture and Related therapies for Obesity: A Network Meta-analysis.	Zhang, Y	2018	Acupuncture interventions did not meet the inclusion criteria
486	A Systematic Review and Meta-analysis of Randomized Clinical Trials About Acupuncture Treatment for Obesity-Related Hormone and Blood Lipids of Female Obesity	ZHANG Ronqiang	2017	No patient important outcome
487	Does Laser Acupuncture An Effective Complementary therapy for Obesity Management? A Systematic Review of Clinical Trials.	Namazi, N	2017	No meta-analysis
488	Acupuncture for the Treatment of Obesity in Adults: a Systematic Review and Meta-analysis.	Zhang, R Q	2017	No detailed information on intervention or outcome
489	The Efficacy and Safety of Acupuncture on Serum Leptin Levels in Obese Patients: A Systematic Review and Meta-analysis.	Park, K S	2017	No patient important outcome
490	Acupuncture and Lifestyle Modification Treatment for Obesity: A Meta-analysis.	Fang, S	2017	Acupuncture combined with other therapies
491	The Effect of Auricular Acupoint Stimulation in Overweight and Obese Adults: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Yeh, Tzu-Lin	2017	Acupuncture combined with other therapies
492	Acupuncture for Obesity: a Systematic Review	Kim, Jiin	2016	Acupuncture combined

				with other therapies
493	Auricular Acupuncture for Obesity: A Systematic Review and Meta-analysis.	Ruan, Z	2016	Full text unavailable
494	A Meta-analysis on Effectiveness of Acupuncture on Post-Stroke Insomnia	NIE Fenfen	2020	Acupuncture combined with other therapies

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Table 1 Characteristics of systematic reviews

ID	First author Year	Country	Therapeutic area	Disease or condition	No. of RCTs	No. of participants	Patient important outcomes	Interventions vs Controls	Quality assessment tool for original studies included in SR
1	Juan Zhu 2019	China	Periprocedural care	Postoperative pain	35	1819	1.Postoperative resting pain intensity at 24h (VAS) 2.Intensity of postoperative pain on movement or cough at 24h (VAS)	1. electro-acupuncture/ auricular acupuncture vs sham acupuncture 2. electro-acupuncture/ TENS vs sham acupuncture	Cochrane risk of bias tool
2	Kai-Bo Che 2019	China	Periprocedural care	Postoperative ileus after abdominal surgery	15	965	1.Time to first flatus 2.Time to first defecation 3.Time to bowel sound recovery 4.Time to first oral feeding 5.Length of hospital stay	1. electro-acupuncture vs standard of care 2. electro-acupuncture vs standard of care 3. electro-acupuncture vs standard of care 4. electro-acupuncture vs standard of care 5. electro-acupuncture vs standard of care	Cochrane risk of bias tool
3	Lu Jing 2018	China	Periprocedural care	Hot flashes after breast can	9	646	1.Hot flashes after breast cancer surgery	1. body needling vs sham acupuncture	Cochrane risk of bias

							2. Hot flashes after breast cancer surgery	2. Electro-acupuncture vs western medicine	tool
							3. Hot flashes after breast cancer surgery	3. body needling/ electro-acupuncture vs no intervention	
							4. Hot flashes after breast cancer surgery (follow-up for 3 months)	4. body needling/ electro-acupuncture vs no intervention	
							5. Hot flashes after breast cancer surgery (follow-up for 3 months)	5. body needling/ electro-acupuncture vs sham acupuncture	
4	Yongjun ZHU 2017	China	Periprocedural care	Pain control after total knee arthroplasty	6	529	1. Pain intensity (VAS) over a period of 24h	1. FES vs sham acupuncture	Jadad score
5	T.-J. Chien 2020	China	Oncology	Breast cancer-related menopause symptoms	13	943	1. Frequency of hot flushes in breast cancer (3 months after treatment)	1. body needling vs sham acupuncture	Cochrane risk of bias tool + Jadad score
							2. Severity of hot flushes in breast cancer (3 months after treatment)	2. body needling vs standard of care	
							3. Menopause symptoms in breast cancer (3 months after treatment)	3. body needling vs sham acupuncture	
							4. Menopause symptoms in breast cancer (3 months after treatment)	4. body needling vs standard of care	

6	Yihan He 2019	China	Oncology	Cancer pain	17	1111	1.Cancer Pain Intensity	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Cancer Pain Intensity	2.acupuncture vs waiting list	
7	Lawrence Chen 2017	China	Oncology	Aromatase inhibitor-induced arthralgia in breast cancer	5	181	1.The severity of post treatment pain (worst pain at 3-4weeks)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.The severity of post treatment pain (pain severity at 3-4weeks)	2.acupuncture vs sham acupuncture	
							3.The severity of post treatment pain (pain-related interference scores at 3-4week)	3.acupuncture vs sham acupuncture	
							4.Stiffness at 3-4 weeks	4.acupuncture vs sham acupuncture	
							5.Function at 3-4 weeks	5.acupuncture vs sham acupuncture	
8	Pei Lixia 2019	China	Oncology	The quality of life of breast cancer patients	7	453	1.Quality of life	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Quality of life	2.acicular point sticking vs sham acupuncture	
							3.Quality of life	3.acicular point sticking vs standard of care	
9	Wei-Wei Tao 2016	China	Oncology	Symptom management of cancer	68	5530	1.Fatigue (BFI)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2. Fatigue (BPI)	2.acupuncture vs standard of care	

							3.Remission rate of diarrhea	3.acupuncture vs standard of care	
							4.Hiccups	4.acupuncture vs standard of care	
							5.Nausea and vomit	5.acupuncture vs standard of care	
10	Mangmang Xu 2018	China	Neurology	Acute stroke	33	3946	1.Death or dependency at end of follow-up	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Death or dependency at end of follow-up	2.acupuncture vs no intervention	
							3.Death or dependency at end of follow-up (≥3 months)	3.acupuncture vs sham acupuncture	
							4.Death or dependency at end of follow-up (≥3 months)	4.acupuncture vs no intervention	
11	Shaonan Liu 2019	China	Neurology	Post-stroke shoulder-hand syndrome	40	3264	1.Motor function (upper limb FMA)	1.electro-acupuncture + rehabilitation vs rehabilitation	Cochrane risk of bias tool
							2.Motor function (upper limb FMA)	2.manual acupuncture + rehabilitation vs rehabilitation	
							3.Pain improvement (VAS)	3.electro-acupuncture + rehabilitation vs rehabilitation	
							4.Pain improvement (VAS)	4.manual acupuncture + rehabilitation vs rehabilitation	
							5.Activities of daily living (MBI)	5.manual acupuncture + rehabilitation vs rehabilitation	
							6.Improvement in shoulder abduction (ROM)	6.manual acupuncture + rehabilitation vs rehabilitation	

12	Wenjuan Fan 2020	China	Neurology	Post-stroke spastic hemiplegia	36	2628	1.Motor function (FMA)	1.manual acupuncture vs rehabilitation	Cochrane risk of bias tool
							2.Motor function (FMA)	2.electro-acupuncture vs rehabilitation	
							3.Spasticity Assessment (ASS)	3.manual acupuncture/ electro-acupuncture + rehabilitation vs rehabilitation	
							4.Quality of daily life (BI)	4.manual acupuncture/electro acupuncture+ rehabilitation vs rehabilitation	
13	Binlong Zhang 2019	China	Neurology	Post-stroke aphasia	28	1747	1.Functional communication	1.electro-acupuncture/scalp acupuncture vs language rehabilitation vs language rehabilitation	Cochrane risk of bias tool
14	Xue-bin Li 2018	China	Neurology	Post-stroke depression	18	1536	1.Depression(HAMD) (at week 4 after treatment)	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool
15	Xiaolan Lin 2016	China	Neurology	Post-stroke cognitive impairment	19	1275	1.Cognitive function (MMSE)	1.manual acupuncture/electro acupuncture /scalp acupuncture vs standard of care	NA
							2.Cognitive function (ADL)	2.manual acupuncture/scalp acupuncture vs standard of care	
							3.Cognitive function (MoCA)	3.manual acupuncture/electro-acupuncture vs standard of care	
16	Lin Guohua 2016	China	Neurology	Neurological function deficit	6	572	1.Neurological impairment (NDS) (at week 4 after	1.body needling vs rehabilitation	Cochrane risk of bias

				of non-acute stage stroke			treatment)		tool + Jadad score
17	Tong Li 2019	China	Neurology	Vascular dementia	17	1283	1.Cognitive function (HDS) (within 28 to 90 days)	1. body needling/ electro-acupuncture/scalp acupuncture vs western medicine	Cochrane risk of bias tool
18	Sang-Ho Kim 2019	Korean	Neurology	Insomnia disorder	22	1761	1.Sleep quality (PSQI) (within 14 to 74 days after treatment)	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
19	Alexander Waits 2016	China	Neurology	Insomnia disorder	13	968	1.Sleep quality (PSQI) (within 3 to 4 weeks)	1. acupressure vs sham acupressure	Cochrane risk of bias tool + Jadad score
20	Xintian Wang 2020	China	Neurology	Sleep quality in hemodialysis patients	7	522	1.Sleep quality (PSQI) (within 4 to 12 weeks after treatment)	1. acupressure vs sham acupuncture	Jadad score
21	Guangcai Zhang 2016	China	Neurology	Perimenopausal sleep disorder	8	539	1.Sleep quality (PSQI)	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Sleep Quality (PSQI)	2. manual acupuncture vs sham acupuncture	
22	Cuihua Yang 2018	China	Neurology	Senile insomnia	7	539	1.Sleep quality (PSQI)	1. manual acupuncture vs western medicine	Jadad score
23	YingYing Zang 2019	China	Neurology	Depression-related sleep disorders	15	1081	1.Sleep quality (PSQI)	1. acupuncture vs western medicine	Cochrane risk of bias tool
24	William Gibson 2017	Australia	Neurology	Neurogenic pain	15	724	1.Pain intensity (VAS)	1. TENS vs sham acupuncture	Cochrane risk of bias

									tool
25	Hyeonseok Noh 2017	Korean	Neurology	Parkinson's disease (PD)	42	2625	1.Assessment of PD symptoms (UPDRS)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
26	Boram Lee 2018	Korean	Neurology	Children with autism spectrum disorder (ASD)	27	1736	1.Evaluation the core features of ASD (Overall CARS score)	1.acupuncture vs behavioral and educational interventions	Cochrane risk of bias tool
							2.Evaluation the core features of ASD (Overall CARS score)	2.acupuncture vs behavioral and educational interventions + music therapy	
27	Mingxiao Yang 2020	China	Neurology	Menstrual migraine	13	826	1.Migraine days per month	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Migraine days per month (at month 3 after treatment)	2.manual acupuncture vs sham acupuncture	
							3.Mean headache intensity (VAS)	3.manual acupuncture/electro-acupuncture vs western medicine	
28	Jia Xu 2018	China	Neurology	Migraine without aura	15	1361	1.Frequency of migraine	1.acupuncture/manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Frequency of migraine	2.acupuncture/manual acupuncture vs western medicine	
							3.Pain intensity (VAS)	3.ear acupuncture/acupuncture vs sham acupuncture	
							4.Pain intensity (VAS)	4.ear acupuncture/acupuncture vs western medicine	

29	Yin Jiang 2018	China	Neurology	Migraine quality of life	62	4947	1.Migraine quality of life (MSQ) (≤1 month after treatment, role function-restrictive)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Migraine quality of life (MSQ) (≥6 months after treatment, role function-restrictive)	2.acupuncture vs sham acupuncture	
							3.Migraine quality of life (MSQ) (≤1month after treatment, role function-preventive)	3.acupuncture vs sham acupuncture	
							4.Migraine quality of life (MSQ) (≥6 months after treatment, role function-preventive)	4.acupuncture vs sham acupuncture	
							5.Migraine quality of life (MSQ) (≤1month after treatment, emotional function)	5.acupuncture vs sham acupuncture	
							6.Migraine quality of life (MSQ) (≥6 months after treatment, emotional function)	6.acupuncture vs sham acupuncture	
30	Klaus Linde 2016	Germany	Neurology	Tension headache	12	2349	1.Response after treatment (at least 50% reduction in	1.acupuncture vs sham acupuncture	Cochrane risk of bias

							headache frequency) (within 3 to 4 months after randomization)		tool
31	Hwan Kim 2019	Korean	Neurology	Mild cognitive impairment (MCI)	5	257	1.Cognitive function (MMSE)	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool
							2.Cognitive function (MoCA)	2.electro-acupuncture vs western medicine	
32	Gwang-Ho Choi 2019	Korean	Neurology	Carpal tunnel syndrome (CTS)	12	869	1.Pain (VAS)	1.electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS) (at week 4 after randomization)	2.electro-acupuncture vs western medicine	
							3.Pain (VAS) (at week 5 after randomization)	3.electro-acupuncture vs standard of care	
							4.Key pinch-pinch strength (at a 3-month follow-up)	4.electro-acupuncture vs sham acupuncture	
							5.Tip pinch-pinch strength (at a 3-month follow-up)	5.electro-acupuncture vs sham acupuncture	
							6.Improvement in functional status and/or health-related quality of life parameter (at month 3 after treatment)	6.electro-acupuncture vs sham acupuncture	
33	Xinqiang Ni 2017	China	Neurology	Tic disorder	29	2325	1.Severity of tics (YGTSS)	1.electro-acupuncture/scalp acupuncture vs western medicine	Jadad score
34	Ping Wu 2017	China	Neurology	Prosopalgia	8	477	1.Recurrence rate	1.electro-acupuncture vs western medicine	Cochrane risk of bias

									tool
35	Zhuanzhuan Hou 2017	China	Neurology	Cervical vertigo	10	914	1.Improvement rate of clinical symptoms-headache (at day 20 after treatment)	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Improvement rate of clinical symptoms-vertigo (at day 20 after treatment)	2.acupuncture vs western medicine	
36	Eric Manheime, Ke Cheng 2018	USA	Connective tissue diseases	Hip osteoarthritis	6	413	1.Pain (WOMAC/VAS) (short-term-2 weeks after the end of treatment)	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS)	2.electro-acupuncture vs western medicine	
							3.Function	3.manual acupuncture vs sham acupuncture	
							4.Function (Harris function score)	4.electro-acupuncture vs western medicine	
							5.Quality of life	5.manual acupuncture vs sham acupuncture	
37	Chen Rilan 2020	China	Connective tissue diseases	Knee osteoarthritis	11	727	1.Severity of knee (ISOA)	1.electro-acupuncture vs western medicine	Cochrane risk of bias tool + Jadad score
38	Qinhong Zhang	China	Connective tissue diseases	Chronic knee pain	19	2149	1.Pain (WOMAC)	1.body needling vs no intervention	Cochrane risk of bias

	2017						2.Pain (WOMAC)	2.needle vs standard care	tool
							3.Pain (WOMAC)	3.electro-acupuncture vs western medicine	
39	Qi-ling Yuan 2016	China	Connective tissue diseases	Musculoskeletal pain	6	6382	1.Neck pain after the end of an intervention period (≤1 week after treatment)	1.electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Shoulder pain after the end of an intervention period (≤1 week after treatment)	2.electro-acupuncture vs sham acupuncture	
							3.Myofascial pain after the end of an intervention period (≤1 week after treatment)	3.electro-acupuncture vs sham acupuncture	
							4.Arm pain after the end of an intervention period (≤1 week after treatment)	4.electro-acupuncture vs sham acupuncture	
40	Kim Jiwon 2019	Korean	Connective tissue diseases	Fibromyalgia syndrome	10	690	1.Intensity of Pain	1.manual acupuncture/electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Sleep Quality (PSQI)	2.manual acupuncture/electro-acupuncture vs sham acupuncture	
							3.Fatigue	3.manual acupuncture/electro-acupuncture vs sham acupuncture	

41	Zhou Longyun 2016	China	Connective tissue diseases	Primary osteoporosis	17	1369	1.Pain (VAS)	1. body needling/ electro-acupuncture vs western medicine	Jadad score
42	Wang Kaili 2019	China	Connective tissue diseases	Postmenopausal osteoporosis	10	710	1.Reduction in pain degree (VAS)	1. electro-acupuncture vs western medicine	Cochrane risk of bias tool
43	Mei Ji 2015	China	Connective tissue diseases	Sciatica	12	1842	1.Pain Intensity (VAS)	1. manual acupuncture/electro-acupuncture vs western medicine	Cochrane risk of bias tool
44	Yun-xia Li 2018	China	Connective tissue diseases	Non-specific low back pain	26	7618	1.Pain (VAS)	1. manual acupuncture vs no intervention	Cochrane risk of bias tool
							2.Pain (VAS) in the immediate term (≤1 week after treatment)	2. manual acupuncture vs sham acupuncture	
							3.Pain (VAS) in the short term (within 1 week to 3 months after treatment)	3. manual acupuncture vs sham acupuncture	
							4.Pain (VAS) in the intermediate term (within 3 to 12 months after treatment)	4. manual acupuncture vs sham acupuncture	
45	Jiaojun He 2019	China	Ear, nose, and throat disorders	Meniere's disease	12	903	1.Severity of Dizziness Handicap (DHI)	1. acupuncture vs western medicine	Cochrane risk of bias tool
46	Jinzhang 2017	China	Ear, nose, and throat	Allergic rhinitis	11	1805	1.Improvement of nasal symptoms (TNSS)	1. acupuncture vs sham acupuncture	Jadad score

			disorders				2.Improvement of nasal symptoms (TNSS)	2. acupuncture vs western medicine	
47	Lizhong Yu 2019	China	Eye disorders	Dry eye syndrome	11	852	1.Symptom scores	1.acupuncture/electro-acupuncture vs western medicine	Jadad score
48	Kai Zhang 2019	China	Gastrointestinal disorders	Acute pancreatitis	12	841	1.Mortality during the treatment	1.acupuncture+ routine treatment vs routine treatment	Cochrane risk of bias tool
							2.Rate of transfer to surgery or ICU	2.acupuncture+ routine treatment vs routine treatment	
							3.Changes in chronic health evaluation (APACHE II)	3.acupuncture+ routine treatment vs routine treatment	
49	Haizhen Zheng 2019	China	Gastrointestinal disorders	Irritable bowel syndrome (IBS)	41	3440	1.IBS symptom scores	1. acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Quality of life	2. acupuncture vs sham acupuncture	
50	Lu Wang 2020	China	Gastrointestinal disorders	Functional constipation	28	3525	1.Complete spontaneous bowel movement	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Symptoms improvement (CSS)	2.acupuncture vs sham acupuncture	
							3.Patient assessment of constipation quality of Life questionnaire	3.acupuncture vs sham acupuncture	
51	Xin Jin 2018	China	Gastrointestinal disorders	Functional dyspepsia	20	1310	1.Quality of life (NDI-QOLS)	1.acupuncture/electro-acupuncture vs western medicine	Cochrane risk of bias tool +
							2.Symptom scores	2.acupuncture/electro-acupuncture	Jadad score

								3.Symptom scores	3.a.acupuncture vs western medicine	
52	Yao Tian 2017	China	Gastrointestinal disorders	Peptic ulcer	16	1570	1.The healing rate of ulcer area	1.a.acupuncture vs western medicine		Cochrane risk of bias tool
							2.The recurrence rate	2.acupuncture vs western medicine		
53	Xuhan Wu 2019	China	Gastrointestinal disorders	Gastroesophageal reflux disease	26	2155	1.Symptom scores	1.a.acupuncture/electro-acupuncture vs western medicine		Cochrane risk of bias tool
54	Kun Hyung Kim 2018	Korean	Gastrointestinal disorders	Symptomatic gastroparesis	32	2601	1.Symptoms improvement (within 4 to 12 weeks after treatment)	1.a.acupuncture vs sham acupuncture		Cochrane risk of bias tool
							2.Symptoms improvement (within 4 to 12 weeks after treatment)	2.acupuncture vs western medicine		
55	Xindong Qin 2020	China	Genitourinary disorders	Urinary infection	5	341	1.Composite cure rate	1.a.acupuncture vs western medicine		Cochrane risk of bias tool
							2.Recurrence	2.acupuncture vs no intervention		
							3.Recurrence	3.acupuncture vs sham acupuncture		
56	JunjunLi 2020	China	Genitourinary disorders	Chronic prostatitis	11	748	1.Symptoms improvement (NIH-CPSI total score)	1.acupuncture 7.electro-acupuncture vs sham acupuncture		Cochrane risk of bias tool
							2.Improvement of pain in chronic prostatitis	2.acupuncture 7.electro-acupuncture vs sham		

							(NIH-CPSI pain domain sub-score)	acupuncture	
							3.Improvement of voiding in chronic prostatitis (NIH-CPSI voiding domain sub-score)	3.acupuncture 3.acupuncture vs sham acupuncture	
							4.Quality of life (NIH-CPSI quality of life domain sub-score)	4.acupuncture 4.acupuncture vs sham acupuncture	
							5.Symptoms improvement (IPSS)	5.acupuncture 5.acupuncture vs sham acupuncture	
							6.Symptoms improvement (NIH-CPSI total score)	6.acupuncture 6.acupuncture vs western medicine	
57	Wei Zhang 2017	China	Genitourinary disorders	Benign prostatic hyperplasia	8	661	1.Symptoms improvement (IPSS) (short-term) (within 4 to 6 weeks after treatment)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Symptoms improvement (IPSS) (medium-term) (within 12 to 18 weeks after treatment)	2.acupuncture vs sham acupuncture	
58	Kun Hyung Kim 2016	China	Genitourinary disorders	Chronic kidney disease	24	1787	1.Depression (BDI)	1.acupuncture vs routine care	Cochrane risk of bias
							2.Depression (BDI)	2.acupuncture vs routine care	

							3.Sleep quality	5.acupressure vs routine care	tool
							4.Sleep quality	4.TENS vs routine care	
							5.Sleep quality	5.acupressure vs western medicine	
							6.Fatigue	5.acupressure vs routine care	
59	Charlotte Southern 2016	UK	Mental health	Alcohol use disorder	15	1378	1.Alcohol craving	1. body needling/ electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	Cochrane risk of bias tool + Jadad score
							2.Alcohol withdrawal symptoms	2.electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	
							3.Alcohol withdrawal symptoms	3.electro-acupuncture/ear (auricular) acupuncture vs sham acupuncture	
60	Zhihan Chen 2018	China	Mental health	Opioid use disorder	9	1063	1.Number of positive urine samples for opioids	1.ear (auricular) acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Craving for opioid	2.electro-acupuncture vs no intervention	
							3.Craving for opioid	3.electro-acupuncture/ear (auricular) acupuncture/TENS vs sham acupuncture	
							4.Craving for opioid	4.manual acupuncture vs western medicine	
							5.Depression	5.electro-acupuncture vs no intervention	

							6.Depression	Electro-acupuncture vs sham acupuncture	
61	Jian-Hua Wang 2019	China	Mental health	Smoking cessation	24	3984	1.Abstinence rate (short-term) (≤ 4 weeks after treatment)	1.knee and eye acupuncture vs no intervention	Cochrane risk of bias tool
							2.Abstinence rate (long-term) (>6 months after treatment)	2.knee and eye acupuncture vs no intervention	
							3.Abstinence rate (short-term) (≤ 4 weeks)	3.knee and eye acupuncture vs the replacement therapy	
							4.Abstinence rate (long-term) (>6 months)	4.knee and eye acupuncture vs the replacement therapy	
							5.Nicotine withdrawal symptoms (short-term) (≤ 4 weeks)	5.body needling/ear acupuncture vs sham acupuncture	
							6.Nicotine withdrawal symptoms (short-term) (≤ 4 weeks)	6.body needling vs nicotine replacement therapy	
62	Caroline A Smith 2018	Australia	Mental health	Depression	64	7104	1.Severity of depression at the end of treatment	1.manual acupuncture vs no intervention	Cochrane risk of bias tool
							2.Quality of life (emotional) during treatment	2.Electro-acupuncture vs sham acupuncture	
							3.Severity of depression at the end of treatment	3.manual acupuncture vs western medicine	
63	Wei Li 2019	China	Mental health	Postpartum depression	8	517	1.Depression (HAMD)	1.manual acupuncture vs western medicine	Cochrane risk of bias

							2.Depression (HAMD)	2.manual acupuncture vs psychological therapy	tool
							3.Overall effect (EPDS)	3.manual acupuncture vs sham acupuncture	
							4. Overall effect (EPDS)	4.manual acupuncture + psychological therapy vs western medicine	
64	Sean Grant 2018	USA	Mental health	Posttraumatic stress disorder (PTSD)	7	709	1.PTSD symptoms (post-intervention)	1.manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.PTSD symptoms (follow-up for 1 to 6 months)	2.manual acupuncture vs western medicine	
							3.Physical health-related quality of life (follow-up for 4 to 12 weeks)	3.body needling vs standard of care	
							4.Mental health-related quality of life (follow-up for 4 to 12 weeks)	4.body needling vs standard of care	
							5.Functional status (post-intervention)	5.body needling vs no intervention	
							6.Functional status (follow-up for 3 months)	6.body needling vs no intervention	
65	Ning Sun 2020	China	Mental health	Chronic pain emotional disorder	12	2450	1.Emotional health (MSQ) -immediate effect	1.manual acupuncture /electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Emotional health (SF36/SF12)-immediate	2.manual acupuncture /electro-acupuncture vs sham	

							effect	acupuncture	
							3.Emotional health (MSQ) -persistent effects (follow up for 3 months)	3.manual acupuncture electro-acupuncture vs sham acupuncture	
							4.Emotional health (SF36/SF12)-persistent effects (follow up for 3 months)	4.manual acupuncture electro-acupuncture vs sham acupuncture	
66	Qing Zhang 2018	China	Mental health	Chronic fatigue syndrome (CFS)	16	1346	1.Mental fatigue score of CFS	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Physical fatigue score of CFS	2.manual acupuncture vs sham acupuncture	
67	Yu-Mei Zhong 2019	China	Nutrition and metabolic disorders	Simple obesity	9	473	1.The reduction of body mass index (BMI)	1.body needling /electro-acupuncture/ear acupuncture vs no intervention	Cochrane risk of bias tool
68	Eun-Young Nam 2018	Korean	Obstetrics, gynecology and women's health	Menopausal hot flashes	9	1324	1.Hot flash frequency (≤12 weeks)	1.manual acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Hot flash frequency (>12 weeks)	2.manual acupuncture vs sham acupuncture	
							3.Hot flash frequency (4 weeks after treatment started)	3.manual acupuncture vs no intervention	
							3. Hot flash frequency (≥12 weeks after treatment started)	4. manual acupuncture vs no intervention	

							5.Hot flash severity (VAS)(≤12 weeks)	1.manual acupuncture vs sham acupuncture	
							6.Hot flash severity (VAS)(>12 weeks)	2.manual acupuncture vs sham acupuncture	
69	Weihan Li 2017	China	Obstetrics, gynecology and women's health	Quality of life in menopausal women	6	419	1.Quality of life in menopausal women (MRS)-at end of treatment	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Menopause rating scale (MRS) -at the follow-up period (within 1 to 3 months after treatment)	2.acupuncture vs sham acupuncture	
70	Caroline A Smith 2020	Australia	Obstetrics, gynecology and women's health	Pain during labour	28	3960	1.Pain intensity (VAS)	1.manual acupuncture/ electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain intensity (VAS)	2.manual acupuncture/ electro-acupuncture vs standard of care	
							3.Pain intensity (VAS)	3.electro-acupuncture vs no intervention	
							4.Pain intensity (VAS)	4.acupressure vs sham acupuncture	
							5.Pain intensity (VAS)	5.acupressure vs standard of care	
71	Ying Tang 2017	China	Obstetrics, gynecology and women's	Postpartum lactating	9	1187	1.The effective rate of lactation within 24 hours after delivery	1.acupressure vs standard of care	Cochrane risk of bias tool

			health				2.The effective rate of lactation within 48 hours after delivery	2.acupressure vs standard of care	
							3. Adequacy ratio of lactation within 24 hours after delivery	3.acupressure vs standard of care	
							4. Adequacy ratio of lactation within 48 hours after delivery	4.acupressure vs standard of care	
							5. Adequacy ratio of lactation within 72 hours after delivery	5.acupressure vs standard of care	
72	Yanjuan Song 2019	China	Obstetrics, gynecology and women's health	Chronic pelvic pain syndrome	12	1027	1.Symptoms improvement (NIH-CPSI)	1. body needling/electro-acupuncture vs western medicine	Cochrane risk of bias tool
73	Caroline A Smith 2016	Australia	Obstetrics, gynecology and women's health	Dysmenorrhea	46	4912	1.Improvement in menstrual symptoms at 3 months after treatment	1. body acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Improvement in menstrual symptoms at 12 months after treatment	2.additional body acupuncture vs sham acupuncture	
							3.Quality of life: physical health	3.manual acupuncture vs sham acupuncture	
							4.Quality of life: mental health	4.manual acupuncture vs sham acupuncture	

							5.Pain relief	5. body needling/manual acupuncture vs western medicine	
							6.Menstrual symptom score	6. body needling/manual acupuncture vs western medicine	
74	Xiaojuan Liu 2020	China	Pregnancy or intended pregnancy	Luteinized unruptured follicle syndrome	10	715	1.Ovulation rate	1. acupuncture vs western medicine	Cochrane risk of bias tool
							2.Pregnancy rate	2. acupuncture vs western medicine	
75	Liu Yun 2019	China	Pregnancy or intended pregnancy	Infertility	22	2591	1.Pregnancy rate	1. acupuncture and auricular point picking vs western medicine	Cochrane risk of bias tool
76	Zhengyun Xie 2019	China	Pregnancy or intended pregnancy	In vitro Fertilization-embryo o transfer	27	6116	1.Clinical pregnancy rate	1. manual acupuncture electro-acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Live birth rate	2. manual acupuncture electro-acupuncture vs sham acupuncture	
							3.Miscarriage rate	3. manual acupuncture electro-acupuncture vs no intervention	
							4.Clinical pregnancy rate	4. manual acupuncture electro-acupuncture vs no intervention	
							5.Live birth rate	5. manual acupuncture/electro-acupuncture vs no intervention	
77	Rupsa C.	USA	Pregnancy or	Hyperemesis	1	81	1.Reduction of nausea	1. acupuncture vs western medicine	Cochrane

	Boelig 2018		intended pregnancy	gravidarum			2.Reduction in vomiting	2.acupuncture vs western medicine	risk of bias tool
78	Chien, T. J. 2017	China	Oncology	Breast cancer-related menopause symptoms	8	504	1. The frequency of hot flush	1.acupuncture vs sham acupuncture	Jadad scale
							2. The severity of hot flush (VAS)	2.acupuncture/electro- acupuncture vs sham acupuncture	
							3. Menopausal symptoms (Kupperman Index)	3.acupuncture/electro- acupuncture vs sham acupuncture	
79	Chiu, H. Y. 2016	China	Oncology	Breast cancer-related menopause symptoms	7	342	1.The hot-flash frequency (short-term effects)	1.acupuncture/electro-acupunctur vs sham acupuncture	Cochrane risk of bias tool
							2.The hot-flash severity (short-term effects)	2.acupuncture vs sham acupuncture	
							3.The menopause-related Symptoms (short-term effects)	3.electro -acupuncture vs sham acupuncture	
							4.The hot-flash frequency (intermediate-term effects)	4.acupuncture/electro-acupunctur vs sham acupuncture	
							5. The hot-flash severity (intermediate-term effects)	5.acupuncture vs sham acupuncture	
							6. The menopause-related symptoms (intermediate-term effects)	6. acupuncture/ electro-acupuncture vs sham acupuncture	
80	Chien, T. J 2015	China	Oncology	Aromatase inhibitor-induced arthralgia in breast	5	207	1. Joint pain (BPI-SF)	1.acupuncture/electro-acupunctur vs sham acupuncture	Jadad scale
							2.Joint stiffness	2.acupuncture/electro-acupunctur	

				cancer			(WOMAC)	vs sham acupuncture	
81	WU Junying 2018	China	Neurology	Post-stroke shoulder-hand syndrome	14	1043	1.The shoulder-hand syndrome assessment score (SHSS)	1.acupuncture vs rehabilitation	Jadad scale
							2.The upper limb motor function (FMA)	2.acupuncture vs rehabilitation	
							3.Pain (VAS)	3.acupuncture vs rehabilitation	
82	LIU Kai	China	Neurology	Post-stroke shoulder-hand syndrome	7	401	2.The upper limb motor function (FMA)	2.acupuncture vs rehabilitation	Cochrane risk of bias tool
							2.Activities of daily living	2.acupuncture vs rehabilitation	
83	QUE Fangxu	China	Neurology	Post-stroke depression	18	1813	1. Depression (HAMD-17)	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2. Depression (HAMD-24)	2.acupuncture vs western medicine	
84	Qian Wang 2016	China	Neurology	Post-stroke depression	27	1729	1. Depression (HAMD)	1.acupuncture vs western medicine	Cochrane risk of bias tool
85	Jie Zhan 2016	China	Neurology	Post-stroke depression	14	1180	1. Depression (HAMD)	1.lectro-acupuncture vs western medicine	Cochrane risk of bias tool
86	Chengyong Liu 2020	China	Neurology	Insomnia disorder	13	1061	1.Sleep quality (PSQI)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
87	Longcong Dong 2019	China	Neurology	Insomnia disorder	11	792	1.Sleep quality (PSQI)	1.acupuncture vs western medicine	Cochrane risk of bias tool

88	Waits, A 2018	China	Neurology	Insomnia disorder	13	968	1.Sleep quality (PSQI)	1.acupressure vs sham acupressure	Cochrane risk of bias tool
89	Lan Y 2015	China	Neurology	Insomnia disorder	15	1429	1.Sleep quality (PSQI)	1.regular acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Sleep quality (PSQI)	2.regular acupuncture vs western medicine	
90	Wenfang Song 2019	China	Neurology	Insomnia disorder	7	474	1.Sleep quality (PSQI)	1.acupuncture vs standard of care	Cochrane risk of bias tool
91	Cui Qiuyue 2018	China	Neurology	Migraine	15	1288	1.Pain (immediate-term)	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (short-term)	2.acupuncture vs sham acupuncture	
							3.Pain (long-term)	3.acupuncture vs sham acupuncture	
92	Linde K 2016	Germany	Neurology	Migraine	22	4985	1.Headache frequency (after treatment)	1.acupuncture vs no acupuncture	Cochrane risk of bias tool
							2.Headache frequency (after treatment)	2.acupuncture vs sham acupuncture	
							3.Headache frequency (after treatment)	3.acupuncture vs western medicine	
							4.Headache frequency (follow-up for 3 weeks to 12 months)	4.acupuncture vs no intervention	
							5.Headache frequency	5.acupuncture vs sham	

							(follow-up for 3 weeks to 12 months)	acupuncture	
							6.Headache frequency (follow-up for 3 weeks to 12 months)	6.acupuncture vs western medicine	
93	Pu Shengxiong 2016	China	Neurology	Migraine acute Attack	5	618	1.Pain (VAS)- 2 hours after treatment	acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS)- 4 hours after treatment	acupuncture	
94	Jinna Yu 2016	China	Neurology	Tourette syndrome	7	564	1.Severity of tics (YGTSS)	1.acupuncture vs western medicine	Cochrane risk of bias tool
95	Lien-Chen Wu 2018	China	Connective tissue diseases	Chronic back pain	12	700	1.Pain (VAS/BPS)	1.TENS vs sham acupuncture	Cochrane risk of bias tool
							2.Pain (VAS/BPS)	1.TENS vs sham acupuncture	
96	Feifan Liang 2016	China	Connective tissue diseases	Non-specific low back pain	10	751	1.Function improvement (ODI)	1.acupuncture vs western medicine	Cochrane risk of bias tool
							2.Pain (VAS)	2.acupuncture vs sham acupuncture	
							3.Function improvement (RMDQ)	3.acupuncture vs sham acupuncture	
97	Zhiqing Liu 2017	China	Ear, nose, and throat disorders	Allergic rhinitis	10	552	1.Symptom scores	1.acupuncture vs western medicine	Cochrane risk of bias tool
98	Zhang Jin	China	Ear, nose, and	Allergic rhinitis	11	1805	1. Reducing of nasal	1. manual acupuncture vs sham	Jadad score

	2017		throat disorders				symptoms (TNSS)	acupuncture	
							2. Reducing of nasal symptoms (TNSS)	2. manual acupuncture vs western medicine	
99	Lei Yang 2015	China	Eye disorders	Dry eye syndrome	7	383	1.Tear break-up time	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Severity of dry eyes (Schirmer I test)	2. manual acupuncture vs western medicine	
100	Jiang Hui-ru 2017	China	Eye disorders	Dry eye syndrome	8	847	1.Tear break-up time	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Severity of dry eyes (Schirmer I test)	2. manual acupuncture vs western medicine	
101	Zhang Jieying 2016	China	Gastrointestinal disorders	Functional constipation	10	1162	1.Weekly frequency of defecation	1. electro-acupuncture vs western medicine	Jadad score
							2.Symptoms improvement (CCS)	2. electro-acupuncture vs western medicine	
102	Peng Jieru 2018	China	Gastrointestinal disorders	Functional dyspepsia	7	1044	1.Postprandial fullness	1. manual acupuncture vs western medicine	Cochrane risk of bias tool
							2.Early satiety	2. manual acupuncture vs western medicine	
							3.Epigastric pain	3. manual acupuncture vs western medicine	
							4.Epigastric burning	4. manual acupuncture vs western medicine	
103	Shang-Chi h Chang 2016	China	Genitourinary disorders	Chronic prostatitis	7	502	1.Symptoms improvement (NIH-CPSI)	1. manual acupuncture/ electro-acupuncture vs sham acupuncture	Jadad score

							2.Symptoms improvement (NIH-CPSI)	2.needle-acupuncture vs western medicine	
							3. Symptoms improvement (IPSS)	2. manual acupuncture/ needle-acupuncture vs sham acupuncture	
104	Qin.Z 2016	China	Genitourinary disorders	Chronic prostatitis	7	471	1.Symptoms improvement (NIH-CPSI total score)	1.needle acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Improvement of pain in chronic prostatitis (NIH-CPSI pain domain subscore)	2.needle acupuncture vs western medicine	
							3.Improvement of voiding in chronic prostatitis (NIH-CPSI voiding domain subscore)	1.needle acupuncture vs sham acupuncture	
							4.Quality of life (NIH-CPSI quality of life domain subscore)	2.needle acupuncture vs western medicine	
							5.Symptoms improvement (IPSS)	1.needle acupuncture vs sham acupuncture	
105	Liu.B. P. 2016	China	Genitourinary disorders	Chronic prostatitis	10	754	1.Symptoms improvement (NIH-CPSI total score)	1.needle acupuncture vs sham acupuncture	Cochrane risk of bias tool
								2.needle acupuncture vs western medicine	
							2.Response rate	1.needle acupuncture vs sham	

								acupuncture	
								2.acupuncture vs western medicine	
							3.Improvement of pain in chronic prostatitis (NIH-CPSI pain domain subscore)	1.acupuncture vs sham acupuncture	
								2.acupuncture vs western medicine	
							4.Improvement of voiding in chronic prostatitis (NIH-CPSI voiding domain subscore)	1.acupuncture vs sham acupuncture	
								2.acupuncture vs western medicine	
							5.Quality of life (NIH-CPSI quality of life domain subscore)	1.acupuncture vs sham acupuncture	
								2.acupuncture vs western medicine	
106	Armour. M 2019	Australia	Mental health	Depression	29	2268	1.The severity of depression	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
107	ZHANG Rong-qiang 2017	China	Nutrition and metabolic disorders	Simple obesity	6	236	1.Weight	1.acupuncture vs sham acupuncture	Jadad score
							2.BMI	3.acupuncture vs sham acupuncture	
108	CHEN Xia 2016	China	Nutrition and metabolic disorders	Simple obesity	21	1929	1.Weight	1.acupuncture vs no intervention	Cochrane risk of bias tool
								2.acupuncture vs sham acupuncture	
								3.acupuncture vs western medicine	
							2.BMI	1.acupuncture vs no intervention	

								2.acupuncture vs sham acupuncture	
								3.acupuncture vs western medicine	
109	Xue Dongqun 2015	China	Nutrition and metabolic disorders	Simple obesity	17	1246	1.Weight	1.acupuncture pressure vs sham acupuncture	Cochrane risk of bias tool
							2.BMI	2.acupuncture pressure vs sham acupuncture	
110	Jianrong Chen 2018	China	Nutrition and metabolic disorders	Obesity	33	2503	1.Weight	1.acupuncture vs no intervention	Cochrane risk of bias tool
								2.acupuncture vs no intervention	
111	Junpeng Yao 2019	China	Nutrition and metabolic disorders	Obesity	12	1151	1.BMI	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Waist circumference	2.acupuncture vs sham acupuncture	
112	Zhang Lin 2015	China	Nutrition and metabolic disorders	Obesity	23	1836	1.BMI	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Weight	2.acupuncture vs sham acupuncture	
113	Kepei Zhang 2018	China	Nutrition and metabolic disorders	Obesity	21	1389	1.BMI	1.acupuncture vs no intervention	Cochrane risk of bias tool
114	Wu Qian 2016	China	Obstetrics, gynecology and women's health	Quality of life in menopausal women	10	801	1.Hot flashes frequency	1.acupuncture vs sham acupuncture	Cochrane risk of bias tool
							2.Hot flashes severity	2.acupuncture vs sham acupuncture	

115	Raana Haj Najafi 2020	China	Obstetrics, gynecology and women's health	Pain during labour	10	1271	1.Labour pain	1.acupressure vs sham acupuncture 2.acupressure vs no intervention	Cochrane risk of bias tool
116	Najafi,F. 2018	Iran	Obstetrics, gynecology and women's health	Pain during labour	16	1652	1.The severity of pain after the intervention	1.acupressure vs sham acupuncture	Quality criteria were not included in the analysis
117	Lixia,Lin 2020	China	Obstetrics, gynecology and women's health	Dysmenorrhea	23	1739	1. Pain improvement (VAS) 2. Symptoms improvement (Dysmenorrhea symptom score)	1.acupuncture vs western medicine 2.acupuncture vs western medicine	Cochrane risk of bias tool
118	Ge,Li 2017	China	Obstetrics, gynecology and women's health	Dysmenorrhea	56	4600	1.Pain improvement (VAS)	1.acupuncture vs western medicine	Cochrane risk of bias tool
119	Ranran Gao 2019	China	Pregnancy or intended pregnancy	Infertility	9	1441	1.Pregnancy 2.Ovulation 3.Pregnancy loss	1.acupuncture vs western medicine 2.acupuncture vs western medicine 3.acupuncture vs western medicine	Cochrane risk of bias tool
120	Boelig,R.C 2016	USA	Pregnancy or intended pregnancy	Hyperemesis gravidarum	25	2052	1.Reduction or cessation in nausea 2.Reduction or cessation in vomiting	1.acupuncture vs western medicine 2.acupuncture vs western medicine	Cochrane risk of bias tool

Note: **VAS**, Visual Analog Scale. **TENS**, Transcutaneous Electrical Nerve Stimulation. **BFI**, Brief Fatigue Inventory. **BPI**, Brief Pain Inventory. **FMA**, Fugl-Meyer Assessment. **MBI**, Modified Barthel Index. **ROM**, Range of Motion. **FMA**, Fugl-Myer Assessment. **ASS**, Ashworth Scale for Spasticity. **BI**, Barthel Index. **HAMD**, Hamilton Depression Scale. **MMSE**, Mini-mental State Examination. **ADL**, Activities of Daily Living. **MoCA**, Montreal Cognitive Assessment. **NDS**, Neurological Deficit Scale. **HDS**, Hastgawa Dementia Scale. **PSQI**, Pittsburgh Sleep Quality Index. **UPDRS**, Unified PD Rating Scale. **CARS**, Childhood Autism Rating Scale. **MSQ**, Migraine Specific Quality of Life Questionnaire. **YGTSS**, Yale Global Tic Severity Scale. **ISOA**, Index of Severity for Osteoarthritis. **WOMAC**, Western Ontario and McMaster Universities Osteoarthritis Index. **DHI**, Dizziness Handicap Inventory. **TNSS**, Total Nasal Symptom Score. **ICU**, Intensive Care Unit. **APACHE**, Acute Physiology, Age, Chronic Health Evaluation. **SS**, Constipation symptoms scores. **NDI-QOLS**, Nipping Index of Quality of Life. **NIH-CPSI**, National Institute of Health Chronic Prostatitis Symptom Index. **IPSS**, International Prostate Symptom Score. **BDI**, Beck Depression Inventory. **EPDS**, Edinburgh Postnatal Depression Scale. **SF36/SF12**, the MOS 36-item short-form health survey/the MOS 12-item short-form health survey. **BMI**, Body Mass Index. **MRS**, Menopause Rating Scale. **BPI-SF**, Brief Pain Inventorye-Short Form. **BPS**, Back Performance Scale. **ODI**, Oswestry Disability Index. **RMDQ**, Roland-Morris Disability Questionnaire. **CCS**, Cleveland constipation Score.

Oncology:

Acupuncture for Menopause related symptoms in breast cancer patients:

<http://www.epistemonikos.org/matrixes/6052b7e77aac84d2a4bc132>

Acupuncture for Aromatase inhibitor-related arthralgia in breast cancer:

<http://www.epistemonikos.org/matrixes/605809987aac84d2a4d29c2>

Acupuncture for Breast cancer:

<http://www.epistemonikos.org/matrixes/606c97307aac82511263c9b>

Symptom Management and quality of life of cancer:

<http://www.epistemonikos.org/matrixes/60754c217aac868e925b7d1>

Acupuncture for Cancer pain:

<http://www.epistemonikos.org/matrixes/6076698a6ec0d67000198ba9>

Neurology:

Acupuncture for Post-stroke depression:

<http://www.epistemonikos.org/matrixes/6065516b7aac81f38258e79>

Acupuncture for Post-stroke shoulder-hand syndrome:

<http://www.epistemonikos.org/matrixes/606551f87db23a2fb7b02ff0>

Acupuncture for Migraine:

<http://www.epistemonikos.org/matrixes/60654f7a7db23a2fb8b0a125>

Acupuncture for Sleep quality in hemodialysis patients:

<http://www.epistemonikos.org/matrixes/606556a47db23a2fb6afee4b>

Acupuncture for Tic disorder:

<http://www.epistemonikos.org/matrixes/606557ee7db23a2fb8b0a26a>

Acupuncture for Sleep quality:

<http://www.epistemonikos.org/matrixes/60770b777aac82c4a27e6f7>

Acupuncture for Acute stroke:

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Acupuncture for Carpal tunnel syndrome:

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Acupuncture for Cervical vertigo:

<https://www.epistemonikos.org/matrixes/606c9e367aac82511263f05#6080c8097db23a42946079e9>

Acupuncture for Children with Autism spectrum disorder:

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Acupuncture for Cognitive impairment after stroke:

<http://www.epistemonikos.org/matrixes/607d5cac7aac81939564de5>

Acupuncture for Depression sleep disorder:

<http://www.epistemonikos.org/matrixes/607568bb7db23a5a64afe193>

Acupuncture for Mild cognitive impairment:

<http://www.epistemonikos.org/matrixes/607560d86ec0d6700019313f>

Acupuncture for Menstrual migraine:

<http://www.epistemonikos.org/matrixes/607697047aac868e92622f8>

Acupuncture for Neuropathic pain:

<http://www.epistemonikos.org/matrixes/60769b327aac80c3027703a>

Acupuncture for Non-acute stage of cerebral infarction neurological function deficit:

<http://www.epistemonikos.org/matrixes/607797686ec0d6027b7f0969>

Acupuncture for Perimenopausal sleep disorders:

<https://www.epistemonikos.org/matrixes/606cd0ee7aac825112653d3#606cd0ee7aac825112653d3>

Acupuncture for Senile insomnia:

<http://www.epistemonikos.org/matrixes/607704227db23a044bafb01e>

Acupuncture for Post-stroke aphasia:

<http://www.epistemonikos.org/matrixes/607413996ec0d636a11a4963>

Acupuncture for Poststroke spastic hemiplegia:

<https://www.epistemonikos.org/matrixes/606cf4a67db23a5dc2b08f34#607541e07db23a5a64afd581>

Acupuncture for Tension-type headache:

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Acupuncture for Trigeminal neuralgia:

<http://www.epistemonikos.org/matrixes/607581537db23a5a64afe932>

Acupuncture for Vascular dementia:

<http://www.epistemonikos.org/matrixes/60741c507aac80c3026e8f6>

Sciatica:

<http://www.epistemonikos.org/matrixes/608f473c6ec0d60630e0bbe8>

Quality of Life in Patients With Migraine:

<http://www.epistemonikos.org/matrixes/609140236ec0d655ed7d723b>

Connective tissue diseases:

Acupuncture for Back pain:

<http://www.epistemonikos.org/matrixes/60654c866ec0d61dc0b9e0d4>

Acupuncture for Chronic knee pain:

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Acupuncture for Fibromyalgia syndrome:

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Acupuncture for Hip osteoarthritis:

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Acupuncture for Knee osteoarthritis:

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Acupuncture for Musculoskeletal pain:

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Acupuncture for Parkinson's disease:

<http://www.epistemonikos.org/matrixes/6076a3156ec0d67000199c32>

Acupuncture for Primary osteoporosis:

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Gastrointestinal disorders:

Acupuncture for Constipation:

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Acupuncture for Functional dyspepsia:

<http://www.epistemonikos.org/matrixes/606547657aac85001269c7d>

Acupuncture for Irritable bowel syndrome:

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Acupuncture for Gastroesophageal reflux disease:

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Acupuncture for Peptic ulcer:

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Acupuncture for Symptomatic gastroparesis:

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Acute pancreatitis:

<http://www.epistemonikos.org/matrixes/60913cd17db23a371762cfa0>

Genitourinary disorders:

Acupuncture for Chronic prostatitis:

<http://www.epistemonikos.org/matrixes/6065420e7aac85000261d36>

Acupuncture for Benign prostatic hyperplasia:

<http://www.epistemonikos.org/matrixes/607404097db23a1655afc9c1>

Acupuncture for Chronic kidney disease:

<https://www.epistemonikos.org/en/documents/2c4a15dfe327aa116dad32863b3e16fe4296dfac/matrix>

Acupuncture for Chronic pelvic pain syndrome:

<http://www.epistemonikos.org/matrixes/607451616ec0d62d511934a7>

Acupuncture for Urinary tract infection:

<http://www.epistemonikos.org/matrixes/60741aea7db23a2c33b22b24>

Mental health:

Acupuncture for Depression:

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Acupuncture for Postpartum depression:

<http://www.epistemonikos.org/matrixes/607702367aac868e9264478>

Acupuncture for smoking cessation:

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Acupuncture for Alcohol dependency:

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Acupuncture for Chronic fatigue syndrome:

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Acupuncture for Emotional disorder in patients with chronic pain:

<http://www.epistemonikos.org/matrixe/60745cfd7aac82c4a27a22f>

Acupuncture for Post-traumatic stress disorder:

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Acupuncture for Opioid use disorder:

<http://www.epistemonikos.org/matrixes/6074114d7db23a1655afcdbf>

Nutrition and metabolic disorders:

Acupuncture for Simple obesity:

<http://www.epistemonikos.org/matrixes/606555887aac81f38258fbf>

Obstetrics, gynecology and women's health:

Acupuncture for Dysmenorrhea:

<http://www.epistemonikos.org/matrixes/606546707aac85001269c31>

Acupuncture for Quality of life in menopausal women:

<http://www.epistemonikos.org/matrixes/606552906ec0d61dc0b9e298>

Acupuncture for Labor pain:

<http://www.epistemonikos.org/matrixes/6065593f6ec0d61dbfb960fa>

Acupuncture for Luteinized unruptured follicle syndrome:

<http://www.epistemonikos.org/matrixes/6074672d7aac82c4a27a429>

Acupuncture for Menopausal hot flashes:

<http://www.epistemonikos.org/matrixes/6075828b7db23a5a64afe983>

Acupuncture for Poor ovarian responders:

<http://www.epistemonikos.org/matrixes/60746f547db23a5dc2b211f3>

Acupuncture for Postmenopausal osteoporosis:

<http://www.epistemonikos.org/matrixes/607470127aac8550b26d0e0>

Acupuncture for Postpartum lactation:

<http://www.epistemonikos.org/matrixes/607583bb6ec0d67000193c79>

Pregnancy or intended pregnancy:

Acupuncture for Infertility:

<http://www.epistemonikos.org/matrixes/606548cc6ec0d61dc0b9dfcf>

Acupuncture for Hyperemesis gravidarum:

<http://www.epistemonikos.org/matrixes/606558736ec0d61dc0b9e444>

Acupuncture for Vomitus gravidarum:

<http://www.epistemonikos.org/matrixes/606558736ec0d61dc0b9e444>

Acupuncture for Pregnancy outcomes of in vitro fertilization:

<http://www.epistemonikos.org/matrixes/607470217db23a3f42b0efd4>

Perioperative diseases:

Acupuncture for Hot flashes after breast cancer surgery:

<http://www.epistemonikos.org/matrixes/60741b957aac80c3026e89a>

Acupuncture for Pain control after total knee arthroplasty:

<http://www.epistemonikos.org/matrixes/60766b257aac868e9261718>

Acupuncture for Postoperative pain:

<http://www.epistemonikos.org/matrixes/60766be16ec0d67000198c77>

Acupuncture for Recovery of gastrointestinal function after operation:

<http://www.epistemonikos.org/matrixe/60766c7d6ec0d67000198ca4>

Ear, nose, and throat disorders:

Acupuncture for Rhinitis:

<http://www.epistemonikos.org/matrixes/606553857aaac81f38258f0f>

Meniere disease:

<http://www.epistemonikos.org/matrixes/60a3fb477aaac828e47619af>

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PRISMA 2020 Checklist

Section and Topic	Item #	Checklist item	Location where item is reported
TITLE			
Title	1	Identify the report as a systematic review.	1
ABSTRACT			
Abstract	2	See the PRISMA 2020 for Abstracts checklist.	2-3
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of existing knowledge.	4
Objectives	4	Provide an explicit statement of the objective(s) or question(s) the review addresses.	5
METHODS			
Eligibility criteria	5	Specify the inclusion and exclusion criteria for the review and how studies were grouped for the syntheses.	7
Information sources	6	Specify all databases, registers, websites, organisations, reference lists and other sources searched or consulted to identify studies. Specify the date when each source was last searched or consulted.	7-8
Search strategy	7	Present the full search strategies for all databases, registers and websites, including any filters and limits used.	8
Selection process	8	Specify the methods used to decide whether a study met the inclusion criteria of the review, including how many reviewers screened each record and each report retrieved, whether they worked independently, and if applicable, details of automation tools used in the process.	8
Data collection process	9	Specify the methods used to collect data from reports, including how many reviewers collected data from each report, whether they worked independently, any processes for obtaining or confirming data from study investigators, and if applicable, details of automation tools used in the process.	9
Data items	10a	List and define all outcomes for which data were sought. Specify whether all results that were compatible with each outcome domain in each study were sought (e.g. for all measures, time points, analyses), and if not, the methods used to decide which results to collect.	9
	10b	List and define all other variables for which data were sought (e.g. participant and intervention characteristics, funding sources). Describe any assumptions made about any missing or unclear information.	9
Study risk of bias assessment	11	Specify the methods used to assess risk of bias in the included studies, including details of the tool(s) used, how many reviewers assessed each study and whether they worked independently, and if applicable, details of automation tools used in the process.	10
Effect measures	12	Specify for each outcome the effect measure(s) (e.g. risk ratio, mean difference) used in the synthesis or presentation of results.	10
Synthesis methods	13a	Describe the processes used to decide which studies were eligible for each synthesis (e.g. tabulating the study or intervention characteristics and comparing against the planned groups for each synthesis (item #5)).	10-11
	13b	Describe any methods required to prepare the data for presentation or synthesis, such as handling of missing summary statistics, or data conversions.	10-11
	13c	Describe any methods used to tabulate or visually display results of individual studies and syntheses.	10-11
	13d	Describe any methods used to synthesize results and provide a rationale for the choice(s). If meta-analysis was performed, describe the model(s), method(s) to identify the presence and extent of statistical heterogeneity, and software package(s) used.	10-11
	13e	Describe any methods used to explore possible causes of heterogeneity among study results (e.g. subgroup analysis, meta-regression).	10-11
	13f	Describe any sensitivity analyses conducted to assess robustness of the synthesized results.	10-11
Reporting bias assessment	14	Describe any methods used to assess risk of bias due to missing results in a synthesis (arising from reporting biases).	10
Certainty assessment	15	Describe any methods used to assess certainty (or confidence) in the body of evidence for an outcome.	10



PRISMA 2020 Checklist

Section and Topic	Item #	Checklist item	Location where item is reported
RESULTS			
Study selection	16a	Describe the results of the search and selection process, from the number of records identified in the search to the number of studies included in the review, ideally using a flow diagram.	12
	16b	Cite studies that might appear to meet the inclusion criteria, but which were excluded, and explain why they were excluded.	12
Study characteristics	17	Cite each included study and present its characteristics.	12
Risk of bias in studies	18	Present assessments of risk of bias for each included study.	12
Results of individual studies	19	For all outcomes, present, for each study: (a) summary statistics for each group (where appropriate) and (b) an estimate and its precision (e.g. confidence/credible interval), ideally using structured tables or plots.	13-16
Results of syntheses	20a	For each synthesis, briefly summarise the characteristics and risk of bias among contributing studies.	13-16
	20b	Present results of all statistical syntheses conducted. If meta-analysis was done, present for each the summary estimate and its precision (e.g. confidence/credible interval) and measures of statistical heterogeneity. If comparing groups, describe the direction of the effect.	13-16
	20c	Present results of all investigations of possible causes of heterogeneity among study results.	13-16
	20d	Present results of all sensitivity analyses conducted to assess the robustness of the synthesized results.	13-16
Reporting biases	21	Present assessments of risk of bias due to missing results (arising from reporting biases) for each synthesis assessed.	13-16
Certainty of evidence	22	Present assessments of certainty (or confidence) in the body of evidence for each outcome assessed.	13-16
DISCUSSION			
Discussion	23a	Provide a general interpretation of the results in the context of other evidence.	16-19
	23b	Discuss any limitations of the evidence included in the review.	16-19
	23c	Discuss any limitations of the review processes used.	16-19
	23d	Discuss implications of the results for practice, policy, and future research.	16-19
OTHER INFORMATION			
Registration and protocol	24a	Provide registration information for the review, including register name and registration number, or state that the review was not registered.	20-21
	24b	Indicate where the review protocol can be accessed, or state that a protocol was not prepared.	20-21
	24c	Describe and explain any amendments to information provided at registration or in the protocol.	20-21
Support	25	Describe sources of financial or non-financial support for the review, and the role of the funders or sponsors in the review.	20-21
Competing interests	26	Declare any competing interests of review authors.	20-21
Availability of data, code and other materials	27	Report which of the following are publicly available and where they can be found: template data collection forms; data extracted from included studies; data used for all analyses; analytic code; any other materials used in the review.	20-21

From: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 2021;372:n71. doi: 10.1136/bmj.n71

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