

TØRRNÅLING (“DRY NEEDLING”)

Tough EA, White AR, Cummings TM, Richards SH, Campbell JL. Acupuncture and dry needling in the management of myofascial trigger point pain: A systematic review and meta-analysis of randomised controlled trials. Eur J Pain. 2009 Jan;13(1):3-10.

Dry needling compared to placebo for myofascial trigger point pain

Patient or population: Myofascial trigger point pain

Intervention: Dry needling

Comparison: Placebo

Outcomes	Anticipated absolute effects* (95% CI)	Relative effect (95% CI)	No of participants (Studies)	Quality of the evidence (GRADE)	Comments
	Risk with Dry needling				
Pain reduction assessed with: VAS	The mean pain reduction in the intervention group was 14.09 WMD higher (-5.81 lower to 33.99 higher)	-	(4 RCTs)	⊕⊕○○ LOW ¹²	No significant reduction in pain

*The risk in the intervention group (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; RR: Risk ratio; OR: Odds ratio;

GRADE Working Group grades of evidence

High quality: We are very confident that the true effect lies close to that of the estimate of the effect

Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different

Low quality: Our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect

Very low quality: We have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect

1. Stor heterogenitet
2. Få studier, få deltakere

Oppsummering: Resultatene av fire RCT studier viser ingen signifikant smertereduksjon ved tørrnåling sammenlignet med placebo. Denne dokumentasjonen er vurdert å være lav kvaliteten. Grunnlaget for dokumentasjonen er basert på studier med få deltakere og stor heterogenitet.

CAPSAICIN

Winocur E, Gavish A, Halachmi M, Eli I, Gazit E. Topical application of capsaicin for the treatment of localized pain in the temporomandibular joint area. Journal of Orofacial Pain 2000;14:31–6.

Topical capsaicin compared to placebo for TMD

Patient or population: TMD

Intervention: Topical capsaicin

Comparison: Placebo

Outcomes	Anticipated absolute effects* (95% CI)		Relative effect (95% CI)	No of participants (Studies)	Quality of the evidence (GRADE)	Comments
	Risk with placebo	Risk with Topical capsaicin				
Reducing pain assessed with: VAS follow up: median 3 months	The mean reducing pain in the control group was 0	The mean reducing pain in the intervention group was 0.61 lower (2.45 lower to 1.23 higher)	-	30 (1 RCT)	⊕⊕○○ LOW 1234	There was no statistically significant difference between topical capsaicin and placebo in reducing the pain of TMD.

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1. Adequate sequence generation?
2. Allocation concealment?
3. Incomplete outcome data addressed
4. Only one study, few participants

Oppsummering: Resultatene av en RCT studie viser ingen signifikant smertereduksjon ved bruk av capsaicin sammenlignet med placebo. Dokumentasjonen er vurdert å være av lav kvalitet. Grunnlaget for dokumentasjonen er basert på en studie med få deltakere og stor heterogenitet.