Acupuncture and women with breast cancer: predictors of response

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Introduction

- Hot flashes can be a major problem for women with breast cancer. Because estrogen replacement is not recommended in these women, they have only very limited treatment options for menopausal symptoms.
- Recently, the AcClImat study, a multicentric randomized clinical trial, comparing acupuncture plus enhanced self-care versus enhanced self-care alone in women with breast cancer, showed the effectiveness of acupuncture in the management of hot flashes together with other climacteric symptoms and in the improvement of quality of life.

Objective

A post hoc analysis of the AcClImat study was conducted to evaluate demographic and clinical predictors of acupuncture response.

Methods

- Data from the AcClImat acupuncture group were used.
- The primary outcome was clinically significant improvement in hot flashes, defined as ≥75% decrease in Hot Flash Score (HFS=frequency X severity), at the end of the acupuncture treatment (responders). The secondary outcome was improvement (≥50%) in climacteric symptoms and quality of life, measured by the Greene Climacteric and MenQL scales, respectively.
- The following clinical and demographic characteristics were evaluated as predictors of response: age, Traditional Chinese Medicine (TCM) syndromes, education, treatment expectations, baseline outcome values, hormonal treatment.
- Logistic regression was used to model the potential predictors for each outcome.
- A descriptive analysis of the acupuncture points used was carried out.

Results

- 83 women who completed the acupuncture treatment were analysed; the mean age was 48.9 years; 37.4% were diagnosed with “kidney and liver yin and yang deficiency” and “liver yang rising” TCM syndromes.
- A clinical significant improvement in HFS was reported by 57% of women.
- Acupuncture was more effective in younger women (<50 years) compared to older one (OR 3.41, 95%CI 1.14-10.15, p 0.028) (tab. 1).
- Higher baseline value in the physical domain of MenQL was associated with an improvement in this domain (OR 2.6, 95% CI 1.40-4.90, p 0.003).
- Some acupoints such as LI11, LU7, SP9, SP10, CV17 were more commonly used in women who responded to acupuncture; whereas LR2, and GV14 were used more frequently in women who didn’t (tab. 2).

Conclusions

Younger age has been identified as a predictor of acupuncture response in terms of HFS improvement, among all the variables analyzed. Besides a problem of limited sample size, our results suggest that other factors, Traditional Chinese Medicine-related, could explain differences in patients acupuncture response.