

# Acupoint stimulation to prevent postoperative nausea and vomiting in adults

Study	Subjects/Intervention	Results
Boehler <sup>3</sup>	n = 80 women; acupressure “seeds” at Korean hand acupoint K9 (preoperatively, for 24 h) vs. inappropriate placement	Positive: Compared to control, fewer treated patients than placebo had N (P = 0.006) or V (P = 0.007)
Kotani <sup>4</sup>	n = 189; acupuncture (preoperatively, for four days) vs. sham	Positive: Compared to controls, incidence of N/V was significantly less in the acupuncture group (P < 0.05)
Ming <sup>5</sup>	n = 150; finger acupressure before and after surgery vs. wristbands vs. no intervention	Positive: Compared to control, both types of acupressure reduced both N and V
Agarwal <sup>6</sup>	n = 200; P6 acupressure bands (preoperatively, until six hours post-op) vs. inappropriate placement	Negative: No difference between groups in N/V within 24 h
Harmon <sup>7</sup>	n = 94 women; P6 acupressure bands (preoperatively, until six hours post-op) vs. inappropriate placebo	Positive: Compared to control, treated subjects had less N/V during or after surgery (P ≤ 0.003)
Alkaissi <sup>8</sup>	n = 60; P6 acupressure bands vs. inappropriate band placement (preoperatively) vs. no treatment	Mixed: P6 acupressure reduced V, compared to no treatment (P < 0.05); two hours post-op, N was similar among groups
Harmon <sup>9</sup>	n = 104 women; P6 acupressure bands vs. inappropriate band placement (preoperatively) vs. no treatment	Positive: Compared to control, acupressure reduced the incidence (42% vs. 19%) but not severity of N/V
al-Sadi <sup>10</sup>	n = 81 women; P6 acupuncture (intra-operative only)	Positive: Acupuncture, compared to control, reduced N/V (P ≤ 0.007)
Yentis <sup>11</sup>	n = 50; P6 acupuncture before anesthesia, after anesthesia, or postoperatively vs. sham	Negative: There were no differences among groups in N/V (secondary source used)
Fan <sup>12</sup>	n = 200; Acupressure bands (preoperatively, for six hours) vs. inappropriate band placement	Positive: Compared to controls, acupressure group had less N/V (23% vs. 41%, P = 0.0058)
Stein <sup>13</sup>	n = 75 women; Acupressure bands (preoperatively) vs. metoclopramide vs. sham bands + IV saline (double dummy design)	Positive: Compared to control, acupressure and metoclopramide reduced N (P < 0.001); only metoclopramide reduced V
Ho <sup>14</sup>	n = 60 women; P6 acupressure bands (preoperatively, for 48 h) vs. sham bands	Positive: Compared to sham, acupressure decreased N/V (P < 0.05)
Ferrara-Love <sup>15</sup>	n = 90; P6 acupressure bands (preoperatively through post-op) vs. sham bands vs. routine care	Negative: No differences among groups in N/V in OR or immediately post-op; compared to control, acupressure and sham reduced N/V (P ≤ 0.003) in second phase of recovery
Allen <sup>16</sup>	n = 46 women; P6 acupressure bands (preoperatively, apparently for 24 h) vs. inappropriate band placement	Negative: No difference in incidence of N/V
Philips <sup>17</sup>	n = 80 women; (apparently non-blinded) acupressure bands (preoperatively, apparently for 48 h) vs. no treatment	Mixed: Compared to controls, treated group had similar incidence of, but less severe, N (P = 0.002)
Yang <sup>18</sup>	n = 120 women; P6 glucose injection (intra-operatively) vs. IV droperidol vs. untreated controls	Positive: Compared to controls, droperidol and acupoint injection decreased incidence of V post-op (P < 0.05)
Gieron <sup>19</sup>	n = 60 women; P6 stimulation with metal “bullets” for 24 h vs. (apparently) misplaced bullets	Positive: Compared to controls, acupressure reduced post-op N (53% vs. 23%, P = 0.03) (German paper, read in abstract)
Barsoum <sup>20</sup>	n = 162; (apparently single-blind) P6 acupressure bands (post-op for seven days) vs. placebo bands with or without prochlorperazine	Positive: Compared to control or drug, acupressure reduced N on days 1 and 2 (P < 0.002), but not later; no benefit for V
Rogers <sup>21</sup>	n = 19 men; P6 acupressure vs. no treatment	Positive: Compared to controls, the treated group had less (and less severe) N within six hours, but not later
Dundee <sup>22</sup>	n = 50 + n = 75 women; study 1: P6 acupuncture with or without meptazinol; study 2: acupuncture or sham with nalbuphine	Positive: P6 acupuncture significantly reduced N/V compared to meptazinol alone (P = 0.001); compared to sham, acupuncture reduced N (P < 0.002)
Ghaly <sup>23</sup>	n = 93 women; P6 acupuncture vs. electroacupuncture vs. cyclizine vs. no intervention	Positive: All three active treatments superior to placebo for N/V (P ≤ 0.001)
Weightman <sup>24</sup>	n = 44 women; P6 acupuncture (intra-operatively) vs. no acupuncture	Negative: No differences between groups in N/V
Fry <sup>25</sup>	n = 500; brief P6 acupressure before and after anesthesia vs. acupressure	Positive: Compared to control, fewer in the P6 group were sick (P < 0.001)

**Key:** N = nausea; V = vomiting