

MASTER'S THESIS

針灸治療癌性疼痛的文獻研究: 附針刺10例癌痛患者的鎮痛療效觀察 劉芷寧

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針灸治療癌性疼痛的文獻研究

附針刺 10 例癌痛患者的鎮痛療效觀察

**Literature review on Analgesic Effect on Cancer Pain
and
a Pilot Clinical Observation on 10 cases on
Cancer Pain Relief**

劉芷寧

LAU Chi Ling Novella

09426655

中醫學碩士學位課程

指導老師：劉宇龍博士

香港浸會大學

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摘要

第一部份 針灸治療癌性疼痛的文獻研究

研究目的：通過搜集針灸治療癌性疼痛的相關文獻，深入探討本病的診斷、病因病機、臨床表現及辨證論治的認識，用概括的方法作統計分析，歸納總結，以探討針灸治療癌性疼痛的療效及其優勢。

研究方法：本研究文獻參考資料來自電腦檢索Cochrane圖書館臨床對照試驗資料庫(2010年第3期)、MEDLINE(1966~2011年1月)、EMBASE(1974~2011年1月)、PUBMED(1950~2011年1月)、檢索途徑為主題詞、自由詞，檢索詞為：acupuncture、moxibustion、cancer、tumor、neoplasms及pain，共檢索到相關文獻230篇。繼以於中文科技期刊全文資料庫(VIP)(1989~2011年1月)、中國學術期刊全文資料庫(CNKI)(1994~2011年1月)、中國生物醫學文獻資料庫(CBM)(1978~2011年1月)，文獻檢索無語種限制。以”針刺”、”針灸”、”電針”、”耳針”、”癌”、”腫瘤”、”疼”及”痛”作為關鍵字，共檢索到相關文獻795篇，經過篩選，符合納入標準的文獻共43篇，搜集數據，進行統計分析，歸納總結，探討其療效及其優勢等。

結果：

1. 從上述43篇文獻中，以毫針針刺為療法為最多，共有11篇，次為電針，有9篇。
2. 針灸治療癌性疼痛的總平均有效率為89.51%。其總治癒率25.11%
3. 在各種針灸治療方法中，以綜合療法的治癒率(43.10%)及平均有效率最高(90.81%)。次為電針鎮痛療法，其治癒率為43.00%，平均有效率為89.75%。第三為毫針療法，治癒率為30.17%，平均有效率為90.05%。
4. 在納入的43篇文獻中，選足三里為主穴有27篇，把阿是穴選為主穴有20篇，選內關為主穴有12篇，合谷有10篇，選背俞穴為主穴有6篇。
5. 文獻報道中未有發現針灸治療本病有不良反應及副作用，顯示出針灸治療治療本病是安全可靠的。

結論：

(一) 針灸的鎮痛療效確切，無論是針刺、電針、穴位注射、艾灸、耳穴都有較好的鎮痛療效，不同的臨床研究都顯示其單獨的鎮痛作用達70%以上，聯合應用的鎮痛療效更強，某些研究指出輕度及中度癌痛患者的有效率甚至可達100%。

(二) 最常用的五個穴位分別為足三里、阿是穴、內關、合谷及背俞穴。

- (三) 病情越輕，針灸治療越早介入，單純針刺鎮痛的效果越好。
- (四) 針刺之數之增加，鎮痛效果越好，顯示針灸之累加效應。
- (五) 針灸的鎮痛維持時間均較單純使用三階梯藥物為好，沒有副作用及成癮性，而且可以治療由鎮痛藥物引起的副反應^[56]，調整患者的免疫功能^[38]，在治療癌痛的同時，起著治療癌症的作用。
- (六) 西藥鎮痛以WHO三階梯止痛方案為最常選用。
- (七) 鎮痛治療有效的患者其生存品質有較大改善，癌痛治療對患者生存品質存在非常重要的影響。
- (八) 未有報導指出針灸治療癌痛有任何副反應及不良反應。

關鍵字：針灸治療；癌痛；隨機對照試驗

第二部份 針刺治療癌痛的即時鎮痛療效觀察

研究目的：觀察針刺療法對癌痛的鎮痛效果及對癌痛患者生活質量的影響。

研究方法：1.選取符合納入研究標準的病例，疼痛主要由腫瘤本身引起。2.疼痛評分採用數字疼痛量表(NRS)及直觀模擬量表法(VAS)，為了更精確的顯示出評分結果，我們仿效David Alimi 等^{[29][30]}的研究設計，將分值單位細化到毫米而不是釐米，這就是說將原先的10 分制改為100 分制。療效評定以第一次及最後一次治療比較得出的平均差值作評估。10例癌痛患者根據疼痛的輕、中、重不同程度分為三層，進行毫針針刺治療。並用WHO中國癌症疼痛會議上修訂的量表評價癌痛患者的生活質量，比較第一次及最後一次治療得分的平均差值以作評估。

結果：

1. 針刺治療前後之鎮痛療效評估，平均NRS相差值增加0.5分；平均VAS相差值增加2.2mm。平均鎮痛起效時間縮短11分鐘。平均鎮痛持續時間增加0.65小時。
2. 針刺治療對癌性疼痛可降低約37%，疼痛程度可下降一級。
3. 經針刺治療後，患者之生活品質均有改善，尤其以患者的食慾、睡眠、疼痛、精神均有改善，說明癌痛的有效鎮痛對於提高癌症患者生存品質具有重要意義。

結論：由於本初步研究的病例數較少，尚無法確定針刺對癌痛是否有效，據觀察所得，即時鎮痛療效約 37%，可使疼痛下降一級。亦無法證明其能否改善癌痛患

者的生活質量，但研究結果提示癌痛的鎮痛治療對患者生存質量的改善有著重要的影響，可是仍需更大規模的試驗來證實。本研究對未來大規模的隨機對照臨床試驗在設計上的思考：1.採取多中心合作或與西醫院合作的方式以擴大研究病例數。2.採用 VAS 與 NRS 相結合的疼痛評價方法。

關鍵字：針刺療法；癌痛；即時鎮痛

Abstract

The First Part: Literature review on Analgesic Effect on Cancer Pain

Objectives: To evaluate the effect of acupuncture therapy on cancer pain by reviewing related literatures and using statistical methods to calculate and find out its superiority on treating the disease, so as to illustrate the pathology and clinical features of the disease.

Methods: Computer database searches of clinical controlled trials: Cochrane Library (Issue 3, 2010), MEDLINE (1966- January 2011), EMBASE (1974- January 2011), PUBMED (1950- January 2011), Chinese S&T Periodicals Database (VIP; 1989- January 2011), China Academic Journal Full-text Database (CNKI; 1994- January 2011), and Chinese Bio-Medical Literature Database (CBM; 1978- January 2011). After collecting the data and selections, there are total suitable 43 literatures for data calculation by simple statistical methods.

Results:

- (i) In the above 43 literatures, there are 11 studies use acupuncture to treat cancer pain. And the second comes to electro-acupuncture. There are 9 researches study on it.
- (ii) The total effective rate of acupuncture on treating cancer pain is 89.51%.
- (iii) The comprehensive treatment gives the overall highest effective rate (90.81%). Electro-acupuncture gives effective rate of 89.75% and acupuncture gives effective rate of 90.05%.
- (iv) After collecting the data, the acupoints chosen most is Zusanli(ST 36), the second common one is the pressure point (*a shi xue*). Others like Neiguan (PC 6), Hegu (LI 4) and acupoints of *bei shu xue* are also common used.

Conclusion:

- (i) Acupuncture is effective for pain relief. Researches show that it can reach at above 70%. The comprehensive treatment gives better results. For mild and middle cancer pain patients, the effective rate can even reach up to 100%.
- (ii) The five acupoints chosen most are Zusanli(ST 36), the pressure points (*a shi xue*), Neiguan (PC 6), Hegu (LI 4) and acupoints of *bei shu xue*.
- (iii) The earlier the acupuncture treatment starts, the better the analgesic effect.
- (iv) The more the acupuncture treatments, the better the analgesic effect. It shows the accumulate effects of acupuncture.
- (v) The analgesic time last longer if combined with three-step analgesic ladder principle. There is no side-effect and addiction. It can relieve the side-effect by anodyne.

At the same time, strengthen the immune system and treating cancer of patients.

(vi) WHO three-step analgesic ladder principle is the most common among the studies.

(vii) Quality of life can be improved through analgesic treatment of cancer patients.

(viii) Neither the adverse drug effects nor the side effects were reported so far. This showed that using Chinese Medicine or the combination of western and Chinese Medicine treating the disease was safe and reliable.

Key Words: Acupuncture therapy; Analgesic effect ; Cancer pain

The Second Part: a Pilot Clinical Observation on 10 cases on Cancer Pain Relief

Objective: To observe analgesic effect of acupuncture on cancer pain and its effect on the quality of patient's life.

Method: 1. Select patient according to inclusion criteria and patient's pain should be mainly caused by tumor. 2. Pain score will be measured by numerical rating scale (NRS) and visual analogue scale (VAS). To be more precisely present score results, we've set score unit to mm rather than cm by copying the study design by David Alimi and et al. that is to say VAS has been changed from previous 10 points scale to 100 points scale. Effect was evaluated based on the average differences between NRS and VAS scores measured. 3. Grouping and treatment: 10 patients with cancer pain were stratified into 3 levels, light, moderate and severe pain. Acupuncture was employed by acupuncturist and dialectical point selection was implemented based on pain points and primary lesion points; 4. Observe the improvement of quality of life of patients; using questionnaire amended by WHO to measure scores, patients will be asked to complete it at the first and at the last treatments and evaluate the effect of treatment based on the difference between scores.

Results: 1. Analgesic effect: NRS: increase score with 0.5. VAS : increase with 2.2mm. The onset time of analgesic effect: shorten by 11 minutes. The lasting effect of analgesic effect is 0.65 hours. The analgesic effective rate is 37%.
2. Life quality of cancer patients is improved. It shows that the relief of cancer pain is important in improving life quality of them.

Conclusion: Due to the limited number of study subjects, effect of acupuncture on cancer pain can not be determined. However, study result indicated that acupuncture can improve compulsive symptom for patient life's quality. Still, a large scale study is needed to confirm it. Considerations on the design of future large-scale clinical trial: 1.

Multi-center cooperation method and work with hospital should be employed to increase number of study subjects; 2. A combination of NRS and VAS should be used for evaluation of pain.

Keywords: Acupuncture; Cancer pain; immediate analgesic effect

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