

The background of the slide is a light gray gradient with several realistic water droplets of various sizes scattered across it. The droplets have highlights and shadows, giving them a three-dimensional appearance. The main title is centered in the upper half of the slide.

TREATING ANXIETY: A CLINICAL FEASIBILITY STUDY USING ACUPUNCTURE AND CBT

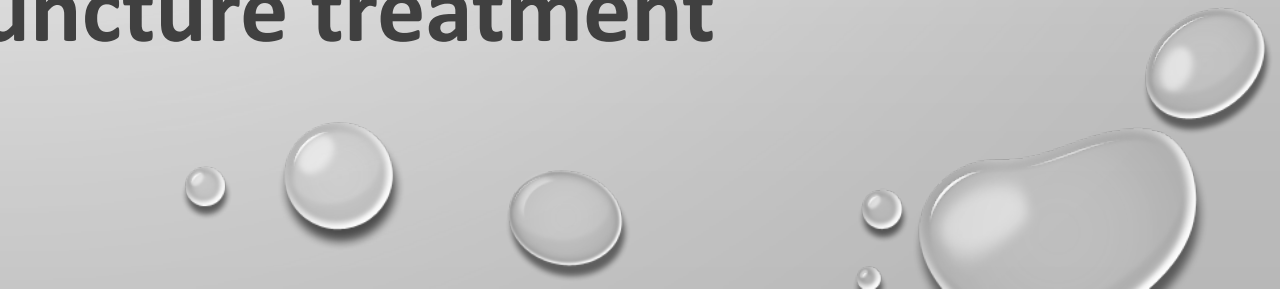
**CINZIA SCORZON MSC, MBACC
UNIVERSITY OF WESTMINSTER**

In July 2017 I received the funding from the BAcC to conduct a feasibility study that compared acupuncture with cognitive behavioural therapy (CBT) in treating generalised anxiety disorder (GAD).

The project built on a BAcC pilot study conducted in conjunction with AnxietyUK nation wide treating patients suffering from GAD with acupuncture in 2016.



The proposed project was a feasibility study which aimed to assess:

- recruitment and retention**
 - safety and side-effects**
 - to show whether patients liked acupuncture as well as CBT, which is the main non-drug treatment advised by the NHS**
 - whether patients felt the same or different after the course of CBT or acupuncture treatment**
- 

The project was designed as a small scale RCT that compared CBT with acupuncture with standard intervention according to step 1 and 2 of the NICE guidance for GAD, 2011.

Focus of the intervention	Nature of the intervention
STEP 1: All known and suspected presentations of GAD	Identification and assessment; education about GAD and treatment options; active monitoring
STEP 2: Diagnosed GAD that has not improved after education and active monitoring in primary care	Low-intensity psychological interventions: individual non-facilitated self-help*, individual guided self-help and psychoeducational groups


STUDY DESIGN

It consisted of two groups with 12 participants in each group, randomly allocated.

The main requirements was a letter from participants' GP or other medical professionals confirming that they suffered from GAD.

In both groups participants received a course of 8 treatments on a weekly frequency to start with and fortnightly after 4-6 sessions.

All treatments were delivered on a one-to-one basis and lasted 45 minutes each after the initial consultation (1 hour)



Life style advice, such as exercise and/or diet were given in both groups.

The data collection was based on GAD7 and Measure Yourself Medical Outcome Profile (MYMOP) questionnaires.

GAD7 was given to each patient on the first session of the course of treatments, then on the fourth session and, again in the last session in both groups.

Participants filled in the MYMOP before each treatment session.



GAD7 QUESTIONNAIRE

- 1. Feeling nervous, anxious or on edge (0-1-2-3)**
- 2. Not being able to stop or control worrying (0-1-2-3)**
- 3. Worrying too much about different things (0-1-2-3)**
- 4. Trouble relaxing (0-1-2-3)**
- 5. Being so restless that it is hard to sit still (0-1-2-3)**
- 6. Becoming easily annoyed or irritable (0-1-2-3)**
- 7. Feeling afraid as if something awful might happen (0-1-2-3)**


Scores of 5, 10, and 15 represent cut points for mild, moderate, and severe anxiety, respectively

RECRUITMENT

- **Various ads in the web**
- **Leaflets**
- **Word of mouth**



Recruitment was very difficult because:

- **inclusion criteria required a letter from the GP or any other medical professional confirming that participants suffered from GAD**
 - **the study was conducted during working hours**
 - **a few participants when allocated to the unwanted group declined to participate**
- 

The background features a light gray gradient with several realistic water droplets of various sizes scattered in the corners. The droplets have highlights and shadows, giving them a three-dimensional appearance. The word "RESULTS" is centered in a white rectangular box.


RESULTS

Retention: CBT Group

Participant	Sessions Attended
1	8
2	8
3	4
4	0 (DNA)
5	8
6	1
7	0 (DNA)
8	3
9	1
10	8
11	6
12	2
13	8
14	5

Retention: Acupuncture Group

Participant	Sessions Attended
1	8
2	8
3	8
4	8
5	8
6	8
7	8
8	8
9	8
10	8
11	8
12	6

The background features a light gray gradient with several realistic water droplets of varying sizes scattered in the corners. The droplets have highlights and shadows, giving them a three-dimensional appearance.

RESULTS: GAD 7 & MYMOP

MYMOP AVERAGE SCORE: CBT GROUP

Patient	Initial score	Session 2	Session 3	Session 4	Session 5	Session 6	Session 7	Session 8
1	18	17	14	16	15	10	12	8
2	15	17	14	14	14	12	9.5	8.5
3	16	13	12	9	16	8	7	8
4	19	9	6	17	13	9	7	7
5	11	10	9	8	10	7	9	Forgot to do it
6	20	21	20	19	20	20	20	
7	7	9	3	4	3	3		
8	15	12	11	11				

GAD TOTAL SCORE: CBT GROUP

Patient	Beginning (Initial consultation)	Middle (After 4 sessions)	End (after 8 Sessions)
1	13	10	9
2	9	6 and 1/2	3
3	11	11	8
4	15	18	1
5	13	8	8
6	15	6	7
7	4	3	2 (after 6 sessions)
8	20	9	

MYMOP AVERAGE SCORE: ACUPUNCTURE GROUP

Patient	Initial score	Session 2	Session 3	Session 4	Session 5	Session 6	Session 7	Session 8
1	17	16	15	13	13	14	12	10
2	24	19	19	16	12	13	12	12
3	15	11	12	7	4	6	6	2
4	11	11	12	11	10	9	8	6
5	16	10	11	13	11	11	10	11
6	24	23	23	21	21	21	22	20
7	16	6	6	3	1	3	4	2
8	18	15	14	13	12	8	0	0
9	20	16	18	15	11	14	9	5
10	12	10	7	6	4	6	4	6
11	13	10	13	8	7	7	6	4
12	18	18	18	18	11	14		


GAD TOTAL SCORE: ACUPUNCTURE GROUP

Patient	Beginning (Initial consultation)	Middle (After 4 sessions)	End (after 8 Sessions)
1	11	14	8
2	12	7	8
3	10	6	4
4	10	7	4
5	17	17	9
6	21	19	14
7	20	9	7
8	16	11	2
9	20	14	6
10	11	10	5
11	13	7	4
12	21	18	



SAFETY & SIDE-EFFECTS

Both arms of the study were totally safe and there was no side-effect reported



TREATMENT: CM DIAGNOSTIC PATTERNS

PATTERN	NUMBER
Heat in the heart	4
Phlegm misting the orifice of the heart	3
Blood deficiency (liver, heart)	2
Blood stasis	2
Liver qi stagnation	2
Lung qi deficiency	2
Kidney qi deficiency	2
Spleen qi deficiency	1
Liver qi deficiency	1

DISCUSSION

Retention

- **Several participants wanted acupuncture not CBT**
- **CBT practitioner has a serious accident which caused a four months interruption**
- **All participants allocated to the acupuncture group continued until the end except for one, who started university outside London.**

Results

The study has shown that acupuncture treatment is as effective as CBT and patients liked the treatment

The acupuncture group liked the treatment they received as much as the CBT group appreciate theirs.

Acupuncture Treatment

- **No standardised GAD point combination was used**
- **Several points were used more frequently than others**
- **Needle retention was also variable, average between 10 and 20 minutes**
- **Needle depth was more superficial**
- **The manipulation and *deqi* sensation were minimal to allow patients to be more relaxed**

Conclusion

This study has demonstrated that acupuncture is a safe and beneficial medical treatment for GAD and it is as effective as conventional CBT. It also showed that patients appreciated the treatment they received and found it useful in managing their condition.

In the future, both qualitative and longitudinal studies would be more appropriate to explore the effectiveness of acupuncture in treating this condition.

The background features a light gray gradient with several realistic water droplets of various sizes scattered in the corners. The droplets have highlights and shadows, giving them a three-dimensional appearance. The text is centered in the middle of the page.

THANK YOU FOR LISTENING!