RCT/CCT of acupuncture inJapan abstract table (as of 31 Mar 2002)

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study ser.no.	study ID no.	study, year	allocation	patient	intervention	outcome	note
1		Kinoshita H 1962	" randomly allocated order "	28 patients of sciatica.	Allocated randomly order of weak ,middle and strong stimulation for the same patient, treated by each stimulation in a fixed period.	Degree of compression, and Lasegue angle. judge referring to other symptoms, if assessment is difficult.	RCT. Complemen ted by Kinoshita (1969, book).
2	6501	Kinoshita H 1965	" randomly allocated by cases "	28 patients of sciatica syndrome.	Left <i>in situ</i> at effective points for a duration of 10, 20 and 30 minutes.	Compression and Lasegue angle.	RCT of randomizati on in one person. Complemen ted by Kinoshita (1969, book).
3	6502	Kinohsita H 1965	" randomized by case "	31 patients of sciatica syndrome.	Three methods using 3, 5 and 10, pieces of rice- size moxa at effective points for a specified period of time.	Compression and Lasegue angle. Subjective symptoms, if no difference.	RCT of randomizati on in one person. Complemen ted by Kinoshita (1969, book).
4	6901	Kinoshita H 1969	" divided into 5 type, made a pair of two in order of coming, and equally allocated "		Divided into two, i.e., basic group, have only basic treatment, vs basic treatment was settled intradermal needle in same time.	Compression.	Probably RCT. Complemen ted by Kinoshita (1969, book).

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5	6902	Kinoshita H 1969	Allocated the same number in - situ-needle group vs single- needle group.	61 patients of sciatica.	Left needle <i>in situ</i> for in- situ-needle group vs take a single needle for single-needle group.	compression, and Lasegue	Probably RCT. Complemen ted by Kinoshita (1969, book).
6	6903	Kinoshita H 1969	" randomly allocated "	" every 16 patients for deep group and shallow group ". 32 patients of sciatica syndrome.	Divided into deep group and shallow group, both included 5 type.	Compression and Lasegue angle.	RCT. Complemen ted by Kinoshita (1969, book). Issued full paper in 1971.
7	7001	Debata A 1970	" divided into 2 groups randomly "	14 patients of maximal blood pressure over 150mmHg.	1) " Do-shi " for " Do-shi " group vs 2) penetrated, as weak stimulation is based on plasebo for control group.	Mean of hypotension of maximal and minimum blood pressure.	RCT
8	7301	Kinoshita H 1973	Allocated by the envelope method.	Starting by 50 patients of frozen shoulder, but dropping- out 20 patients in trial.	Divided into basic group, have only basic treatment, and special treatment group, have basic treatment and special treatment together.	Dividing of INQUIRY, OBSERVATIO N, EXAMINATIO N,score of every head for INQUIRY and OBSERVATIO N, real valve.	RCT
9	7501	Kinoshita S 1975	" randomly divided into 2 groups "	28 healthy adult men.	 (1) Suppress eyeball vs take a rest in supination. (2) Needle to supraorbital foramen vs take a rest in supination. 	Decrease of heart rate.	RCT

10	7601	Maruno S 1976	" divided into 2 groups in order of coming "	52 patients of stifle.	Test group is needled, left <i>in situ</i> for 10 minutes vs more received puls- electroacupuncture. Control group is needled and left <i>in situ</i> for 10 minutes.	RCT	ССТ
11	7801	Kinoshita H 1978	divided into two groups, i.e.,	50 patients, having no remarkable deformity of the cervical vertebrae, etc., displayed as major symptoms pain and/or numbress in the neck, shoulders and upper extremities.	Needled to paraneuron for test group, not needled for control group.	Score of inquiry and observation.In analyzation, 17 vs 15.	RCT
12	7901	Kurosu Y 1979	" randomly divided into two "	patients,	Left <i>in situ</i> for 10 minutes vs only ginger moxibustion.	Inquiry table.	RCT
13	7902	Kurosu Y 1979	" randomly divided into two "	40 lumbago patients, 20patients in every trial.	Single needle vs left in situ for 10 minutes.	Inquiry table.	RCT
14	8001	Shichido T 1980	" divided into two groups at random using envelope method "	64 patients of chronic hepatitis.	Decoction treatment + decoction treatment and moxibustion.	Subjective symptoms and liver function test. In analyzation, 21 vs 24.	RCT. Completed by Shichido (1982).

15	8101	Mukaina	" randomly	50 male and	Shinmon (Shanmon	Pre and nost	RCT
15		Mukaino Y 1981 Kinoshita H 1981	" randomly divided into two treatment groups " " randomly divided into two groups " crossover test	50 male and female outpatients ranging in age from 18 to 45 with simple obesity, the level of which was above 120%. 30 cases of sciatica.	Shinmon (Shenmen: HT7) treatment group vs lung treatment group. Basic heretofore used treatment was administered to both groups with insertion at Tenshi and BL25 performed to a depth of 6 cm in the paraneural acupuncture group and 2 cm in the non-paraneural	Pre and post treatment change in appetite and weight as well as in levels of various components such as metabolism substance and hormone. The amount of tenderness, Lasegue angle and subjective symptoms. In analyzation, 17 vs 18.	RCT
17	8201	Shichido T 1982	" divided into two groups, i.e., control group vs test group "		acupuncture group. Galenicals extact was given to both groups and acupuncture was administered to the test group.	Subjective symptoms, difficulties in daily life and so on with MPI-test and MV-test.	RCT. Completed by Shichido (1982).
18	8301	Mukaino Y 1983	" randomly divided "	60 patients from 18 to 45 years old getting simple obesity in the obesity index over 120%.	Divided randomly into the lung area dermal points test group and the extra-lung area test group (1.5mm above the lung dermal points), in the auricular dermal points, subcutaneous needles were applied to both group.	A questionaire about amount of diet and drink, the sense	

19	8501	Mukaino Y 1985	" randomly divided "	25 female patients of simple adiposity of fat point over 110 %, from 25 to 60 years old.	Divided into placebo group and settled needle group, and fixed needle on lung point in both ears by operation applying to each case.	Decrease of weight.	RCT
20	8901	Fujinuki R 1989	" numbered in order of coming, randomly allocated by using envelopes "	23 patients of limp by cauda equina damage.	For test group, left <i>in</i> <i>situ</i> by Chinese needle on both intervertebral joint over damage and received acupuncture with electric stimulation for 15 minutes (1Hz, intensity in maximal permissible range).For control group, needled into about 3 cm to the same point by the needle (n.o. 3.3), on reflection drew out rapidly.	Distance until can't walk	RCT
21	9001	Tanimura H 1990	Not stated.	14 patients with gonarthrosis.	Needle is left <i>in situ</i> for 10 minutes, and laser as sequent wave is irradiated from each points toward center of joint for 3 minutes.	Effectiveness on the pain on going up and down stairs, range of motion (ROM) of knee joint and tenderness.	CCT. `` stimulated in order `` in Shichido (1993)?
22	9301	Kitaoka Y 1993	Double blinded three arms controlled in random order.	10 healthy students.	S polar needle vs N polar needle vs no polar needle.	tcPCO2, lactic acid density in blood.	RCT

23	9601	Nabeta T 1996	" divided randomly into two by the envelope method "	32 students having stiff shoulder.	Needled to Tianzhu (BL10) in right and left for <i>in-situ</i> -group, and penetrated for placebo- control-group.	Subjective stiff by VAS.	RCT
24	9701	Nabeta T 1997	" randomly allocated into experiment al and control groups by envelope method "	volunteers having stiff	experimental group: the needle was inserted to a depth of 20mm and the swallow-pecking technique was repeated 5 times vs control group: the needle penetrated the skin and was removed immediately.	intensity of stiffness using a visual	RCT
25	9702	Tsutani K 1997	Method " by the envelope method ", title " Randomize d Controlled Trial ".	10 healthy adults.	Moxibusted one Kamayamini (weak) on right or left Shousanli (LI10).	Judgement of warmth of right and left hand by examinee of judge with eyemask.	RCT
26	9703	Mori H 1997	" randomly allocated by envelope method "	20 male and female volunteers complaining stiff shoulder.	Acupunctured to stiff area for both shallow group and deep group.	Stiff by VAS.	RCT
27	9801	Luo Hechun 1998	Placebo- controlled, double blind study.	29 patients of depression.	Classified three groups. Electroacupuncture+plac ebo group vs amitriptyline group vs electroacupuncture + amitriptyline group.	Hamilton Rating Scale for Depression(HR SD), Clinical Global Impression Chart(CGI), Rating Scale for Side- effect(ASBER G), GSC.	RCT

28	9802	Hechun 1998	Randomly devided.	of depression.	Electroacupuncture+plac ebo group vs amitriptyline group.	Rating Scale for Depression(HR SD), Clinical Global Impression Chart(CGI), Rating Scale for Side- effect(ASBER G), GSC.	RCT
29	9803	Minagaw a M 1998	" randomly allocated by the envelope method "	90 new patients found urinary dysfunction.	Contorol group: acupunctured only for chief complaint vs Zhongji-treatment group: acupuncture for chief complaint, together with Zhongji (CV3) to urinary dysfunction.	Every head urinary dysfunction questionnaire.	RCT
30	9901	Ikeuchi R 1999	" randomly allocated by envelope method "	56 patients of lumbago.	Acupuncture with electric stimulation (A group) vs acupuncture- like transcutaneous electrical nerve stimulation (T group).	Pain remitting scaleand and JOA score as submeasure scale.	RCT
31	9902	Kawase Y 1999	" randomly allocated by envelope method "	24 patients of High blood pressure.	Treatment for only chief complaint (no treatment group) vs treatment for chief complaint + Zusanli (ST36) (treatment group).	Blood pressure.	RCT
32	0001	Nabeta T 2000	" by randomized controlled trial ", " by envelope method "	34 student volunteers.	Acupuncture group of 17 patients vs sham- acupuncture group of 17 patients.	Threshold of pressure, pain change of shoulder stiffness in pre and post treatment (VAS)	RCT

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33	0002	Kawase Y 2000	" randomly allocated by envelope method "	of	The group treated with use of the Zusanli point (A group) vs the group with non-use of Zusanli point(B group).	Blood pressure.	RCT
34	0003	Kitaoji H 2000	" by randomized controlled trial ", " divided into two groups by internet "	urinary	The group acupunctured for chief complaint (control group, 3 patients) vs the group acupunctured for chief complaint together with Zhongji (CV3) (Zhongji group, 5 patients)	Number of urination at night.	RCT
35	0004	Inoue M 2000	" rabdomly by using central control system on internet "	20 patients of lumbago.	Acupuncture group; the swallow-pecking technique for twenty minutes vs sham- acupuncture group; hit only acupuncture tube, and pretend acupuncture for twenty minutes.	VAS	RCT
36	0005	Shinohara S 2000	" by envelope method "	88 subjects with complaints involving the joints and muscles during movements.	Study 1 Treatment group (an intradermal needle was inserted into Ying Xue or Shu Xue on the periphery of the muscle meridian passing the site of pain.) vs sham group (the therapist applied an adhesitive plaster.) vs placebo group (an intradermal needle was inserted into the points on another adjacent normal muscle meridian.)	VAS	RCT. In study 2and 3, not indicated that is the document on RCT.

37	0006	Kanai S 2000	" randomly "	210 patients with frozen shoulder pain, low back pain, elbow pain, and/or knee pain.	Active magnets were applied externally to the painful area, dummy magnets were applied externally at random as a placebo.	The temperature of the skin.	RCT
38	0101	Katayama K 2001	" randomly by envelope method "	82 runners participated in road racing.	Before road racing, A group (round dermal needle) is acupunctured vs P group (sham acupuncture) is applied only plaster.	Fatigue, myalgia, easiness to run and acupuncture and so on (VAS).	RCT
39	0102	Tanabe K 2001	" by RCT ", " by envelope method "	18 patients with chief complaint of acute neck pain.	Acupuncture group: acupuncture to 5points (Fengchi (GB20) and Jianjing (GB21) of both side and maximum pressure neck pain point) and left <i>in situ</i> for ten minutes vs sham- acupuncture group: hit only acupuncture tube to the same points, and keep prone posture for ten minutes.	neck pain in moving (VAS).	RCT
40	0103	Ogawa T 2001	" RCT ", " by envelope method "	61 patients of coxartheosis (medial type)	-	Pain on going up-and-down of pre and post treatment (VAS).	RCT

41	0104	Furuya E 2001	"` randomly allocated "	53 patiients with shoulder stiffness.	Allocated round dermal needle group and sham- acupuncture group, and each group pasted to area remarkably reacted to pressure pain reaction for three days.	Change of shoulder stiffness (VAS).	RCT
42	0105	Araki S 2001	" by RCT ", " allocated by envelope method "	33 patients of acute lumbago.	Acupuncture group: after bending hip joints and knee joints at both side, acupuncture and repeat the movement floated backside by bed ten times vs sham- acupuncture group: after hitting only acupuncture tube, repeat the same movement ten times.	VAS, JOAscore	RCT
43	0106	Takeda E 2001	" RCT ", " by envelope method "	20 student volunteers.	Lower limb group: inserted to lower limb by real acupuncture (RA), and to lumbar by sham acupuncture (SA), vs lumbar; inserted to lumbar by real acupuncture (RA), and to lower limb by sham acupuncture (SA).	Distance of points, threshold of pressure pain, lumbar pain in pre and post treatment.	RCT

44	0107	Inoue M 2001	" rabdomly by using central control system on internet "	16 patients with lumbago.	Acupuncture group: the swallow-pecking technique for twenty minutes vs sham- acupuncture group: hit only acupuncture tube, and pretend acupuncture for twenty minutes.	VAS	RCT
45	0108	Sakai T 2001	" randomly by envelope method "	71 patients of lumbago. Analizing 64 patients in 71.	Acupuncture with electric stimulation (A group) vs acupuncture- like transcutaneous electrical nerve stimulation (T group), selecting 4 points from reaction points nearby sacrospinalis and quadratus lumborum in lumbar.	Pain scale and JOA score as complement meassure scale.	RCT