

9. Cardiovascular Diseases

Reference

Choi YS, Kim TK, Jung WS, et al. Effects of moxibustion on the hemiplegic upper extremity after stroke. *Daehan-Hanbang-Naegwa-Hakhoeji (Korean Journal of Oriental Internal Medicine)* 2003; 24(2): 283–89 (in Korean with English abstract).

1. Objectives

To evaluate the effectiveness of the moxibustion in stroke patients with upper extremity hemiplegia.

2. Design

Randomized controlled trial (RCT).

3. Setting

One Oriental hospital (Kyunghee University Medical Center), Republic of Korea.

4. Participants

Patients with middle cerebral artery infarction, upper extremity dyspraxia, and Fugl-Meyer motor score (> 45) (n=46).

5. Intervention

Arm 1: Conservative therapy + moxibustion applied to the Hegu (LI4, 合谷), Quchi (LI11, 曲池), Zhongzhu (TE3, 中渚), Waiguan (TE5, 外關) acupuncture points until the patient had the sensation of heat, once a day for 2 weeks (n=20).

Arm 2: Conservative therapy only (n=20).

6. Main outcome measures

Fugl-Meyer motor score, Motricity Index score, and Modified Barthel Index.

7. Main results

In Arm 1, Fugl-Meyer motor score increased from 14.3 ± 11.3 before treatment to 27.8 ± 17.3 after treatment (score difference = 13.6 ± 7.5 , $P=0.038$) and Motricity Index increased from 29.8 ± 21.3 to 48.1 ± 20.6 (score difference = 18.2 ± 10.2 , $P=0.002$). Although these two indices indicated greater improvement in Arm 1 than Arm 2, there was no between-group difference in MBI.

8. Conclusions

Moxibustion at the affected site may relieve upper extremity dyspraxia after stroke.

9. Safety assessment in the article

No severe adverse events during the 4-week observation period.

10. Abstractor's comments

This study evaluated the effectiveness of moxibustion for upper extremity dyspraxia after stroke. However, since the number of subjects was small and the study period was short, additional studies are needed.

11. Abstractor and date

Go HY, 18 July 2010.