

ABSTRACT IN CHINESE

[摘要] 目的：从不同针刺方法、刺激量及深度等可量化的方面切入，探寻这些因素与“得气”之间的关系。方法：系统收集关于“得气”的古文献以及近10年关于得气的临床和基础研究相关文献。结果：（1）脑功能成像技术及得气量表应用为近10年最常用的“得气”量化指标；（2）影响针灸“得气”因素很多，涉及个人生理状态、疾病性质、穴位下解剖特点、不同针刺方法、刺激量及深度等，其中不同针刺方法、刺激量及深度等因素对“得气”的影响及机制不同。结论：（1）“得气”不等同于针感；（2）对隐性针感需要重新认识；（3）应重视施针者的针下感；（4）需要重新定义和理解“得气”的含义。
[关键词] 得气 针感 不同针刺方法 不同针刺刺激量 针刺

News

Acupuncture therapy is recommended by American Academy of Otolaryngology in the latest *Clinical practice guideline: Allergic Rhinitis*

美国耳鼻喉学会推荐用针灸治疗过敏性鼻炎

In 2015, application of acupuncture is recommended by American Academy of Otolaryngology in the latest *Clinical practice guideline: Allergic Rhinitis*. It is written in the *Clinical practice guideline for Allergic Rhinitis*: Clinicians may offer acupuncture, or refer to a clinician who can offer acupuncture, for patients with AR who are interested in non pharmacologic therapy. Option based on RCTs with limitations, observational studies with consistent effects, and a preponderance of benefit over harm.

Evaluation on acupuncture and moxibustion are:

- Quality improvement opportunity: Increased awareness of acupuncture as a treatment option for AR
- Aggregate evidence quality: Grade B, based on randomized controlled trials with limitations, observational studies with consistent effects
- Level of confidence in evidence: Low; the randomized trials did not show comparison to traditional medical therapy for AR and had methodological flaws.
- Benefits: Effective alternative to medical therapies, reduction of symptoms, may more closely align with patient values, improved quality of life, avoidance of medication use and potential side effects
- Risks, harms, costs: Logistics of multiple treatments, need for multiple needle sticks, cost of treatment, rare infections
- Benefit-harm assessment: Equilibrium of benefit and harm
- Value judgments: Panel members varied in their preconceived bias for or against acupuncture.
- Intentional vagueness: None
- Role of patient preferences: Limited—Potential for shared decision making
- Exclusions: None
- Policy level: Option
- Differences of opinions: None.

(Provided by Chen Bo from Tianjin University of Chinese Medicine)