

## Society for Acupuncture Research: 2007 Conference Report: “The Status and Future of Acupuncture Research: 10 Years Post–NIH Consensus Conference”

Rosa Schnyer, Lic.Ac.,<sup>1</sup> Lixing Lao, Ph.D., C.M.D. (China),<sup>2</sup> Richard Hammerschlag, Ph.D.,<sup>3</sup>  
Peter Wayne, Ph.D.,<sup>1</sup> Helene M. Langevin, M.D.,<sup>4</sup> Vitaly Napadow, Ph.D., Lic.Ac.,<sup>5</sup> Richard Harris, Ph.D.,<sup>6</sup>  
Jongbae Park, K.M.D., Ph.D.,<sup>7</sup> Ryan Milley, M.Ac.O.M., L.Ac.,<sup>3</sup> Misha Cohen, O.M.D., L.Ac.,<sup>8</sup>  
and Hugh MacPherson, Ph.D., M.B., Ac.C.<sup>9</sup>

On November 9–11, 2007, the Society for Acupuncture Research (SAR) hosted an international conference to mark the tenth anniversary of the landmark NIH [National Institutes of Health] Consensus Development Conference on Acupuncture. More than 300 acupuncture researchers, practitioners, students, funding agency personnel, and health policy analysts from 20 countries attended the SAR meeting, held at the University of Maryland School of Medicine, Baltimore, MD, and co-hosted by the University of Maryland Center for Integrative Medicine.

The 1997 NIH consensus panel had provided a guarded endorsement of acupuncture while concluding that the overall evidence base of randomized controlled trials was weak.<sup>1</sup> In the panel’s opinion, there was clear evidence of acupuncture efficacy for only three conditions: adult postoperative and chemotherapy related nausea/vomiting, and postoperative dental pain. The panel also cited other conditions for which acupuncture may be effective as stand alone or adjunctive therapy. In this category were addiction, stroke rehabilitation, headache, menstrual cramps, tennis elbow, fibromyalgia, myofascial pain, osteoarthritis, low back pain, carpal tunnel syndrome, and asthma. Many clinical studies, the consensus statement asserted, “provided equivocal results because of design, sample size and other factors . . . [including] difficulties in the use of appropriate controls”.

The 2007 SAR conference, through invited lectures, panel discussions and poster presentations, aimed to provide critical reviews of the several hundred clinical trials of acupuncture as well as the wide variety of physiologic studies and qualitative findings published in the past decade. The SAR conference also aimed to assess the methodological challenges still facing the design of acupuncture research and to

identify important directions for future research. The implicit goal of the conference was to foster closer ties among investigators active in this expanding field of research.

This section of this issue comprises three papers containing presenter-authored summaries of the invited talks at the SAR conference. The first paper by Park et al. (pp. 871–881) addresses the current status of clinical evidence for acupuncture, summarizing research in the areas of pain, neurologic conditions, women’s health, psychiatric disorders, cancer care, and functional bowel disorders. The second paper authored by Napadow et al. (pp. 861–869) summarizes our current understanding of the basic and physiologic processes believed to underlie the mechanisms by which acupuncture affects health, including acupuncture modulation of the central and peripheral nervous system, neuroendocrine system, and connective tissue. The third paper, authored by MacPherson et al. (pp. 883–887), reflects on the impact of the 1997 NIH consensus conference, provides broader perspectives on approaches to acupuncture research, emphasizes the unique contributions of qualitative methods to acupuncture research, and sets out promising directions for the future of acupuncture research.

### Acknowledgments

The SAR conference was made possible by Grant R13 AT004143 from the National Center for Complementary and Alternative Medicine at the NIH, with additional support from the NIH Offices of Rare Diseases and Research on Women’s Health, Office of Cancer Complementary and Alternative Medicine at the National Cancer Institute, National Institute on Alcohol Abuse and Alcoholism, National Insti-

<sup>1</sup>Osher Research Center, Harvard Medical School, Boston, MA.

<sup>2</sup>Center for Integrative Medicine, University of Maryland School of Medicine, Baltimore, MD.

<sup>3</sup>Oregon College of Oriental Medicine, Portland, OR.

<sup>4</sup>Department of Neurology University of Vermont, Burlington, VT.

<sup>5</sup>Martinos Center for Biomedical Imaging, Massachusetts General Hospital, Charleston, MA, and Harvard Medical School, Boston, MA.

<sup>6</sup>Chronic Pain and Fatigue Research Center, Department of Anesthesiology, University of Michigan, Ann Arbor, MI.

<sup>7</sup>Department of Physical Medicine and Rehabilitation, University of North Carolina at Chapel Hill, Chapel Hill, NC.

<sup>8</sup>Quan Yin Healing Arts Center, San Francisco, CA.

<sup>9</sup>Department of Health Sciences, University of York, York, United Kingdom.

tute of Arthritis and Musculoskeletal and Skin Diseases, and National Institute of Dental and Craniofacial Research. Support was also received from the American Academy of Medical Acupuncture (USA), American Association of Acupuncture and Oriental Medicine (USA), American College of Acupuncture and Oriental Medicine (USA), American College of Traditional Chinese Medicine (USA), Atlantic Institute of Oriental Medicine (USA), Bastyr University, School of Acupuncture and Oriental Medicine (USA), Chinese Association of Traditional Chinese Medicine (USA), Chinese University of Hong Kong (China), Council of Colleges of Acupuncture and Oriental Medicine (USA).

German–Chinese Research Foundation for Traditional Chinese Medicine (Germany), Hong Kong Baptist University (China), Institute of Automation, Chinese Academy of Sciences (China), Guangxi Medicine University (China), *The Journal of Alternative and Complementary Medicine* (USA), *Journal of Chinese Integrative Medicine* (China), Korean Pharmacopuncture Institute (Korea), Kyung Hee University (Korea), Logan College of Chiropractic (USA), Maryland Acupuncture Society (USA), Meiji University of Oriental Medicine (Japan), National Certification Commission for Acupuncture and Oriental Medicine (USA), National Acupuncture Foundation (USA), National Association of Chinese Medicine (USA), National Federation of Chinese TCM Organizations

(USA), New England School of Acupuncture (USA), Northwestern Health Sciences University (USA), Oregon College of Oriental Medicine (USA), Shanghai University of Traditional Chinese Medicine (China), Southern California University of Health Sciences (USA), Suzuka University of Medical Science (Japan), Sydney Institute of Traditional Chinese Medicine (Australia), Tai Sophia Institute (USA), Traditional Chinese Medicine World Foundation (USA), University of Maryland School of Medicine (USA), and University of Western Sydney (Australia).

#### Reference

1. NIH Consensus Conference. Acupuncture. *JAMA* 1998; 280:1518–1524.

Address reprint requests to:  
 Vitaly Napadow, Ph.D., Lic.Ac.  
 Martinos Center for Biomedical Imaging  
 Massachusetts General Hospital  
 Building 149, 13th Street  
 Room 2301—NMR Center  
 Charlestown, MA 02129

E-mail: [vitaly@mnr.mgh.harvard.edu](mailto:vitaly@mnr.mgh.harvard.edu)

**This article has been cited by:**

1. L Lao. 2008. The Center for Integrative Medicine at the University of Maryland: the first complementary and alternative medicine center in a US medical school. *Journal of Chinese Integrative Medicine* 1205-1209. [[CrossRef](#)]