

ROLE OF ACUPUNCTURE IN THE MANAGEMENT OF ACUTE & LONG COVID-19 SYMPTOMS: A NARRATIVE REVIEW

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ABSTRACT

BACKGROUND Acupuncture, originating over 3000 years ago in China, operates on the principle of balancing the body's energy, or qi, through stimulating specific points along meridians. Despite its ancient roots, acupuncture has gained modern acceptance for its ability to complement conventional medicine and promote overall well-being. Acupuncture's capacity to regulate the autonomic nervous system may alleviate symptoms common in COVID-19 patients, such as headache and anxiety. Its anti-inflammatory effects, achieved by modulating neuropeptides and cytokines, are crucial in managing the inflammatory response, while enhancing immune function aids in fighting the virus. Given the multifaceted nature of COVID-19, acupuncture's ability to address various aspects of the disease, including autonomic nervous system (ANS) dysfunction, inflammation, and immune response, positions it as a potentially valuable adjunctive therapy. METHOD Online Databases such as PubMed, PubMed Central, Google Scholar, Scopus, Cochrane Library, and BioMed Central (BMC) are searched for articles. A total of 21,876 references from 01st Jan 2020 until 01st February 2024, were found through the search. The papers which satisfied the inclusion criteria after removing the duplicates were selected. CONCLUSION Acupuncture shows promise in managing acute and long-term COVID-19 symptoms, particularly as adjunctive care. While generally well-tolerated with minimal side effects, more rigorous studies are needed to confirm its efficacy and explore its therapeutic potential further.

Keywords: Acupuncture, Traditional Chinese Medicine, Covid-19, Acute Covid-19 Symptoms, Long-Covid-19, and Post-Covid-Symptoms.



INTRODUCTION

ACUPUNCTURE: A BRIEF OVERVIEW OF ITS HISTORY, THEORY, AND **MECHANISMS**

Acupuncture originated in China and has a historical lineage of more than 3000 years.(Zhuang, Xing, Li, Zeng, & Liang, 2013) Rooted in a holistic understanding of the body and its energy pathways, (Yang et al., 2014) acupuncture employs stimulation of specific points on the body, usually by insertion of fine needles to stimulate healing and restore balance in the flow of vital force or energy, also known as qi.(Vickers & Zollman, 1999) Acupuncture is based on the traditional theory that the human body is composed of a network of meridians, which are channels that have connection with the internal organs and transport qi. Acupoints are specific locations along the meridians, where qi can be accessed and regulated by stimulating them with needles or other methods.

According to acupuncture theory, diseases are caused by the imbalance or blockage of qi in the meridians, and acupuncture can restore the harmony and flow of qi, thereby improving the health and well-being of the individual.(Langevin & Yandow, 2002) Evidence suggests that acupuncture is effective for the treatment of chronic musculoskeletal pain.(Zhang & Wang, 2020) Recent studies also suggest that acupuncture can address not only musculoskeletal ailments but also chronic respiratory diseases.(Wei et al., 2022)

Acupuncture operates through various mechanisms. One theory suggests that acupuncture induces local mechano-transduction, initiating cellular responses that promote tissue healing and homeostasis. This involves cytoskeletal reorganization, growth factor release, and gene transcription, facilitating pain modulation and anti-inflammatory reactions. Neurohumoral theory proposes that acupuncture stimulates the release of endogenous substances like endorphins and neurotransmitters, offering analgesic effects. The gate-control theory posits that acupuncture blocks pain signals in the spinal cord, providing relief. Additionally, acupuncture influences the autonomous nervous system, regulating sympathetic and parasympathetic activity. The morphogenetic singularity theory correlates acupuncture points with embryonic organizing centres, suggesting a developmental basis for their efficacy.(Wong, 2010)

Despite its ancient origins, acupuncture has gained widespread recognition and acceptance in modern times.(Phutrakool & Pongpirul, 2022) Acupuncture has demonstrated its ability to complement conventional medical treatments and enhance overall well-being.(Vickers & Zollman, 1999)



UNDERSTANDING COVID-19 AND ITS LONG-TERM EFFECTS

In the wake of the unprecedented global COVID-19 pandemic, healthcare systems worldwide have faced immense challenges in managing the virus's complex array of symptoms and sequelae.(Razu et al., 2021) As medical professionals continue to grapple with the evolving understanding of COVID-19 and its long-term effects, the importance of exploring adjunctive treatments to support patients' recovery and well-being has become increasingly evident.(Xu, Ong, & Wang, 2020)

COVID-19, stemming from the novel coronavirus Severe acute respiratory syndrome <u>coronavirus 2</u> (SARS-CoV-2), presents a diverse array of symptoms, which encompass fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion or runny nose, as well as nausea, vomiting, and diarrhoea. It is imperative to note that this list may not encompass all potential symptoms, as the presentation of COVID-19 can evolve with the emergence of new variants and may vary based on an individual's vaccination status. ('Symptoms of COVID-19 | CDC', n.d.)

The SARS-CoV-2 virus enters the respiratory tract through droplets or aerosols and binds to ACE2 receptors on the cells. This triggers an immune response that causes inflammation, mucus production, and cell death. The virus can also damage the alveoli, which are the air sacs that exchange oxygen and carbon dioxide. This leads to fluid leakage, reduced lung capacity, and low blood oxygen levels. The condition worsens as the patient develops acute respiratory distress syndrome (ARDS), which can be fatal.(Parasher, 2021)

Various other complications related to COVID-19 are caused by multiple pathophysiological mechanisms that affect different organs and systems.(Trougakos et al., 2021) The intrusion of SARS-CoV-2 poses a significant disruption to our body's equilibrium, challenging its ability to maintain homeostasis, which can imbalances the electrolyte levels, blood pressure and fluid level.(Sieck, 2020) Impairment of the autonomic nervous system (ANS), which controls unconscious body functions, is also seen in severe illness resulting from SARS-CoV-2 infection.(Leitzke, Stefanovic, Meyer, Schimpf, & Schönknecht, 2020)

Beyond the acute phase of the illness, many survivors experience persistent symptoms, often referred to as "long COVID," Long COVID refers to persistent symptoms experienced by individuals' weeks or months after recovering from SARS-CoV-2 infection, regardless of viral status. These symptoms, ranging from fatigue and breathlessness to neurological issues and reduced quality of life, can be continuous or relapsing. Diagnosis is challenging due to varying



recovery times, asymptomatic cases, and unreliable testing. Risk factors include female gender, older age, and presence of multiple acute symptoms. The pathophysiology is multifaceted, potentially involving organ damage, chronic inflammation, immune response, and psychological factors. Management involves a thorough clinical evaluation, categorizing symptoms, and addressing potential complications.(Raveendran, Jayadevan, & Sashidharan, 2021)

ACUPUNCTURE IN THE CONTEXT OF COVID-19

One of the effects of acupuncture is its ability to regulate the activity of ANS. This effect of acupuncture can contribute to alleviate the various symptoms related to ANS dysfunction, including, headache, anxiety, depression and insomnia.(Y. W. Li et al., 2022) it's imperative to note that ANS dysfunction is prevalent among COVID-19 patients,(Leitzke et al., 2020) and acupuncture may help alleviate these symptoms, which are likewise common in individuals with COVID-19.(Sampaio Rocha-Filho, 2022; Wá Nkowicz, Szylí Nska, Rotter, Scarpelli, & Alfonsi, 2021)

Indeed, controlling the inflammatory response is paramount, potentially as crucial as directly addressing the virus itself.(Tay, Poh, Rénia, MacAry, & Ng, 2020) This is where acupuncture demonstrates its significance, offering anti-inflammatory effects through modulation of neuropeptides like substance P and cytokines such as interleukins.(Zijlstra, Van Den Berg-De Lange, Huygen, & Klein, 2003)

Acupuncture can also enhance the immune response and resistance to infections by regulating the innate and adaptive immune systems, as well as the neuroanatomical pathways.(Wang, Liu, Ge, & Liu, 2023) As the contribution of dysfunctional immune response in covid-19 is evident in its progression,(Tay et al., 2020) this aspect of acupuncture becomes particularly significant in assisting the body's fight against COVID-19.

Acupuncture's ability to modulate the autonomic nervous system, (Y. W. Li et al., 2022) reduce inflammation, (Zijlstra et al., 2003) and support immune function(Wang et al., 2023) aligns well with the multifactorial nature of COVID-19.



AIM AND OBJECTIVES

AIM

To assess the role of acupuncture for the management of covid-19 and its long-term effects.

OBJECTIVES

- 1. To evaluate the efficacy of acupuncture in managing both acute and long-term symptoms of COVID-19
- 2. To explore the underlying mechanisms of acupuncture's effects on COVID-19 and long **COVID-19** symptoms
- 3. To assess the safety of acupuncture in the treatment of COVID-19 and its long-term effects

METHOD

A comprehensive search was conducted across multiple online databases, including PubMed, PubMed Central, Google Scholar, Scopus, Cochrane Library, and BioMed Central (BMC), using keywords such as 'Acupuncture,' 'Traditional Chinese Medicine,' 'Covid-19,' 'Long Covid,' 'Post-covid,' and 'Covid-19 Sequelae.' The search spanned from January 1st, 2020, to February 1st, 2024, encompassing a total of 21,876 references.

The review primarily targeted experimental papers, case studies, and case series written in English, which explored the effects of acupuncture either as a standalone treatment or in combination with other therapies on COVID-19 and post-COVID syndrome. Studies not meeting these criteria or lacking accessible abstracts were excluded. After applying the inclusion and exclusion criteria and removing duplicate references, a subset of studies meeting the review's objectives was selected for the final analysis.



RESULT

Table 1: provides a detailed overview of the articles included in the present study.

S.No.	Title of the	Methodology	Variables	Result	Conclusion
	article (Author,				
	year)				
1	Acupuncture	A case study of 1	The	Improveme	acupuncture
	helps to regain	(One) patient	Glasgow	nt in GCS	showed benefits
	the	treated with	Coma Scale		to improve the
	consciousness of	acupuncture and	(GCS)		consciousness of
	a COVID-19	standard care.			a COVID-19
	patient	Acupuncture			patient
	complicated	provided three			complicated
	with hypoxic-	times weekly for			with hypoxic
	ischemic	two weeks with			ischemic
	encephalopathy:	duration of 30			encephalopathy.
	a case	minutes (each			
	report(Yeh,	session)			
	Chen, Chang,				
	Lee, & Chen,				
	2021)				
2	Acupuncture or	An assessor	Evaluated	Both	Acupuncture
	cupping plus	blinded	SpO2, RR,	acupuncture	and cupping
	standard care	randomized trial	ICU	and warm	show potential
	versus standard	with three groups:	admission,	cupping	as safe and
	care in moderate	ACUG	intubation/d	groups	effective
	to severe	(Acupuncture +	eath rates,	showed	treatment
	COVID-19	standard care),	and clinical	improved	methods for
	patients: An	CUPG (Warm	symptoms	oxygen	COVID-19
	assessor-	cupping +	including	levels and	management.
	blinded,	standard care),	cough,	faster	
	randomize d,	and a CTRG	dyspnoea,	recovery	
	controlle d trial	(Standard care	chest	with fewer	
	(Alipour et al.,	only).	tightness,	ICU	



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1		2022)		anorexia,	admissions	
				headache,	than	
				weakness,	controls.	
				sore throat,		
				and		
				myalgia.		
-	3	Case of	Case study of 1	Assessed	Patient	Acupuncture
		professor Xu	(one) patient with	clinical	experienced	and Chinese
		ZOU's	COVID-19.	symptoms,	symptom	herbal medicine,
		acupuncture	Treatments	tongue/puls	relief,	alongside
		technique for	includes	e changes,	improved	conventional
		"benefiting	acupuncture,	negative	tongue and	treatments,
		kidney and	moxibustion,	COVID	pulse	demonstrated
		strengthening	Chinese herbal	test, and	condition,	promise in
		anti-pathogenic	granules, and	lung lesion	negative	relieving
		qi" in promoting	moxifloxacin.	absorption	COVID-19	symptoms,
		the absorption of	Acupuncture	via CT	test, and	absorbing lung
		COVID-19	therapy was given	scan.	significant	lesions, and
		(TAO, HUANG,	consecutively for		lung lesion	expediting viral
		ZHENG, &	10 days, once a		absorption,	clearance.
		ZOU, 2020)	day, and Chinese		meeting	
			herbal granules		discharge	
			were taken orally		criteria.	
			for 10 doses, one			
			dose a day.			
ŀ	4	Effect of	Three blind	Oxygen	Acu-TENS	Acu-TENS can
		transcutaneous	parallel	saturation	group	be used to
		electrical nerve	randomized	(SpO2),	shown	improve SpO2
		stimulation of	clinical trial. 84	respiratory	significant	level as a
		acupoints on	Covid-19 patients	rate (RR),	improveme	respiratory
		respiratory	equally	heart rate	nt in SpO2	outcome in
		outcomes of	randomized to	(HR) and	level. Both	patient with
		COVID-19	two groups; Acu-	the visual	the groups	Covid-19.
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	patients with	TENS group and	analogue	couldn't	
	moderate	Control group.	scale for	display any	
	pulmonary		dyspnoea	significant	
	involvement: A		(VASD).	effect in RR	
	parallel			and HR.	
	randomized				
	clinical trial				
	(Shahdad et al.,				
	2023)				
5	Medical	Case study of 1	Clinical	After two	Traditional
	Acupuncture as	(one) covid-19	symptoms	days of	Chinese
	a Treatment for	patient self-	such as;	treatment,	medicine,
	Novel	treated with dry	pleuritic	all clinical	including
	COVID-19-	cupping and	chest pain,	symptoms	acupuncture and
	Related	Acupuncture	shortness of	were	cupping, may
	Respiratory	needling as well	breath with	subjectively	ease COVID-19
	Distress:	as bleeding at	hypoxia,	resolved,	symptoms,
	Personal	acupuncture	increased	with the	necessitating
	Experience from	point. Duration of	respiratory	exception of	innovative
	a Frontline	acupuncture	rate, dry	anosmia,	solutions like
	Anesthesiologist	needling was 30	cough,	which	self-directed
	(Cheng, 2021)	minutes.	orthostatic	showed	treatment and
			hypotension	signs of	virtual teaching.
				improveme	
				nt during	
				the course	
				of	
				treatment.	



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6	Recovery of a	Case study of	Clinical	Patient	Acupuncture
	patient with	single covid-19	symptoms	experienced	and Chinese
	severe COVID-	patient treated	& vital	immediate	herbal medicine
	19 by	with integrated	signs, blood	relief in	could assist in
	acupuncture and	approach using	tests and CT	chest and	managing severe
	Chinese herbal	conventional	scan.	abdominal	COVID-19
	medicine	medicine,		tension,	cases,
	adjuvant to	acupuncture and		improved	warranting
	standard care	traditional herbal		breathing,	integration into
	(Yin et al.,	medicine.		and	standard care,
	2021)			relaxation.	with further
				Vital signs	trials needed.
				improved,	
				with	
				negative	
				PCR tests.	
7	The Adjunctive	A single-blinded	Clinical	Acupunctur	Combined
	Effects of	randomized	symptoms,	e reduced	acupuncture and
	Acupuncture for	controlled clinical	laboratory	cough	pharmacologic
	Hospitalized	trial with 11	tests	duration	treatments show
	COVID-19	participants in	(lymphocyt	significantly	promise in
	Patients: A	treatment group	e count,	, with minor	reducing cough
	Single-Blinded	(pharmacologic	complete	hematoma	duration in
	Randomized	medicines +	blood count,	side effects.	COVID-19
	Clinical Study	acupuncture), and	CRP, ESR,	Post-	patients. Further
	(Helianthi et al.,	11 participants in	ferritin).	intervention	research needed.
	2022)	control groups		, treatment	
		(only		group	
		pharmacologic		showed	
		treatment).		improved	
				lymphocyte	
				count,	
				ferritin, and	



				CRP levels.	
8	Two cases of	Two bedridden	Clinical	Symptom	Acupuncture
	corona virus	COVID-19	symptoms	relief,	combined with
	disease 2019	patients at Wuhan	of covid 19,	improved	medication is
	(COVID-19)	Leishenshan	Chest CT	recovery,	effective in
	treated with the	Hospital treated	scan,	negative	treating
	combination of	daily with	Covid-19	COVID-19	COVID-19.
	acupuncture and	acupuncture and	RNA test	RNA	
	medication in	chinese herbal		detection,	
	bedridden	decoction		and	
	patients (Gong	therapy.		absorption	
	et al., 2020)			of lung	
				lesions on	
				chest CT	
				images.	
9	Acupuncture as	A total of 160	Modified	Significant	Combining
	an Additional	patients, assigned	Medical	improveme	acupuncture
	Method of	to either the	Research	nts	with
	Rehabilitation	Comprehensive	Council	observed in	Comprehensive
	post-COVID-19:	Rehabilitation	Modified	MDS and	Rehabilitation
	a randomized	Measures (CRM)	Dyspnoea	Borg RPE	Measures
	controlled trial	group or the CRM	Scale	scale within	improved
	(Omarova et al.,	with acupuncture	(MDS),	both groups.	respiratory
	2023)	group.	Bartel index	Acupunctur	function, daily
			(BI), 6-	e group	activity, and
			minute	showed	exercise
			walking test	significant	tolerance in
			(6-MWT),	improveme	Post-COVID
			and The	nt in 6-	Condition
			Borg scale	MWT and	patients,
				BI scores.	requiring further
					research.



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10	Acupuncture in	A case study of 1	Patient	Chest	While
	multidisciplinar	(One) patient.	symptoms	pressure	acupuncture
	y treatment for	Acupuncture	such as;	and	contributed to
	post-covid-19	treatment	Fatigue,	palpitations	the patient's
	syndrome	combined with	anosmia,	improved	recovery, the
	(Trager,	Conventional	chest	after one	specific impact
	Brewka, Kaiser,	treatment and	pressure,	acupuncture	of acupuncture
	Patterson, &	Physiotherapy	and	session;	as an isolated
	Dusek, 2022)	care.	palpitation.	with six	intervention
				additional	remains less
				sessions	defined.
				overlapping	
				Physiothera	
				pist-led	
				Symptom-	
				titrated	
				physical	
				activity, full	
				recovery	
				occurred.	
11	An integrative	A case study of 1	Indian	Post-	The synergistic
	approach with	(one) Post viral	Smell	treatment,	application of
	Ayurveda and	olfactory	Identificatio	patient	Ayurveda and
	Traditional	dysfunction	n Test	showed	TCA in this case
	Chinese	(PVOD) patient.	(ISIT) score	improved	study
	Acupuncture in	The patient was	for anosmia,	anosmia	demonstrated a
	post covid	treated using an	Visual	(ISIT score	safe and
	parosmia e A	integrative	Analogue	0 to 10),	effective
	case (Bhat,	approach	Scale	relief from	treatment,
	Krishna Kumar,	combining	(VAS)	parosmia	resolving
	& Johnson,	Ayurveda and	Score for	within a	parosmia within
	2023)	Traditional	qualitative	week, and	a week and
		Chinese	aspect of	enhanced	anosmia over
		·		·	·



		Acupuncture	parosmia.	quality of	four months.
		(TCA).		life.	
12	Case Report:	Case report of	Assessed	Case 1:	The study
	Acupuncture is	two post-COVID-	using the	NRS score	suggest that
	an	19 patients treated	Numeric	for	acupuncture
	effective	for olfactory	Rating	olfactory	may be effective
	treatment for	dysfunction with	Scale	dysfunction	in the treatment
	olfactory	acupuncture	(NRS) for	decreased	of post covid-19
	dysfunction in	sessions twice	olfactory	from 10 to 7	olfactory
	the post	weekly during	dysfunction	post-	disfunction.
	COVID-19	hospitalization	and general	treatment.	
	condition	and weekly post-	malaise	Case 2:	
	(Morita et al.,	discharge.	(Clinical	NRS score	
	2022)	C	symptom),	improved	
			and the	from 3 to 0-	
			Alinamin	1.	
			test for		
			olfactory		
			mucosal		
			disorders.		
13	Improvement in	A case study of a	Assessment	Positive	Acupuncture
	Long-COVID	46-year-old male	included	changes	may be useful to
	Symptoms	patient with Long	Traditional	observed in	address broad
	Using	-COVID	Chinese	tongue	symptoms and
	Acupuncture; A	Syndrome (LCS)	Medicine	color,	pathophysiology
	Case Study	assessed using	criteria:	moisture,	of LCS.
	(Hollifield et al.,	traditional chinese	tongue	and pulse	
	2022)	medicine	(color,	characteristi	
		diagnostic	shape, size,	cs. Clinical	
		methods and	moisture,	symptoms	



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		treated using	movement,	improved,	
		acupuncture.	coat) and	including	
			pulse (rate,	chest pain,	
			strength,	shortness of	
			quality),	breath, and	
			alongside	fatigue.	
			clinical		
			symptom		
			severity		
			ratings.		
14	The	Case report of 85	Clinical	Out of 85	Acupuncture
	Effectiveness of	patient with long	symptoms	patients, 72	restored the
	Acupuncture in	COVID was	such as;	achieved	healthy
	The Treatment	analyzed	Shortness of	clinical	functioning vital
	of Post COVID-	retrospectively	breath and	cure,	organs;
	19 Condition: A	based on their	general	resulting in	significantly
	Retrospective	clinical	fatigue,	an 85%	decreased the
	Study	symptoms,	body pain,	overall	symptoms of
	(Xiangping	diagnosis	brain fog,	effectivenes	post COVID-19
	Peng., 2022)	and classification.	and	s rate; 13	condition.
		85 patients	irregular	cases were	
		received weekly	menstruatio	ineffective.	
		acupuncture for	n.		
		8-12 weeks.			
15	The Clinical	Sixty (60) RT-	The	Respiratory	Combining low-
	Effects of Laser	PCR positive	respiratory	rate	energy laser
	Acupuncture on	patients divided	rate (RR),	unchanged.	acupuncture
	Hospitalized	into intervention	percentage	oxygen	with
	Patients with	and control	of oxygen	saturation	conventional
	Severe COVID-	groups.	saturation at	increased	drugs regulates
	19: A	intervention	rest, time of	post-	inflammation in
	Randomized	group received	hospitalizati	treatment.	severe COVID-
	Clinical Trial	daily low-energy	on,	Decreased	19 patients
h	1				



	(01 1 1)	1 .	, 1 •,	ШС	
	(Shojaeddin et	laser acupuncture	mortality,	IL-6;	effectively.
	al., 2023)	once a day for	and	reduced	
		consecutive 5	laboratory	hospitalizati	
		days.	test;	on time;	
			interleukin-	zero	
			6	mortality in	
			(IL-6).	intervention	
				group.	
16	The impact of	Study surveyed	Menstrual	Acupunctur	Long COVID
	"long COVID"	468 female	characterest	e treatment	affects women's
	on menstruation	undergraduates	ics such as;	shown	reproductive
	in Chinese	with COVID-19	menstrual	improveme	health, evident
	female college	history; 85 had	cycle,	nt in all	in menstrual
	students and the	long COVID. Of	menstrual	characteristi	changes;
	intervention of	these, 17 received	period	cs of	acupuncture
	acupuncture	acupuncture, to	duration,	menstruatio	reduces these
	(Dong et al.,	improve	menstrual	n.	effects, offering
	2024)	menstrual pattern.	flow, and		therapeutic
			the color of		value.
			menstrual		
			blood.		
17	The effect of	Eighty patients	Dyspnoea	LA group:	Utilizing lasers
	laser	with post-COVID	assessment,	TLC	on specific
	acupuncture on	symptoms were	inflammator	increased	acupuncture
	immunomodulat	randomly split:	y cytokine	significantly	points linked to
	ion and	Experimental	levels (IL6),	; IL-6	lung and
	dyspnoea in	group received	and total	levels,	immunity
	post-COVID-19	Laser	lymphocyte	dyspnoea,	yielded
	patients	Acupuncture	count	and fatigue	promising
	(Alghitany,	thrice/week for 12	(TLC)	reduced	outcomes in
	Fouad, Nassif,	weeks; control	/	significantly	alleviating post-
	& Guirguis,	group received		. Placebo	COVID
	a Guilguis,	510up received		. 1 10000	



	2023)	sham LA.		group: TLC	symptoms like
				increased	fatigue and
				significantly	dyspnoea.
18	People Who	Four hundred and	Clinical	Significant	Significant
	Chose the	thirty-nine people	symptoms	reduction in	reduction in
	Preventive	from seven	(fever,	COVID-19	frequency and
	Natural	countries	cough &	symptom	severity of the
	Bioenergetics	voluntarily	dyspnoea),	frequency/s	three major
	(NB) COVID-	received the non-	hospital	everity	symptoms of
	19 Treatment	invasive	visit record,	compared to	COVID-19
	Safely	preventive NB	side effects	general	compared to the
	Experienced a	treatment.		population;	general
	Significant			no	population.
	Reduction of			hospitalizati	
	COVID-19			ons,	
	Symptoms			minimal	
	Compared to the			side effects	
	General			reported.	
	Population				
	(d'Oultremont,				
	2021)				

DISCUSSION

This review reveals a diverse array of approaches employed across different studies. These interventions encompass traditional acupuncture techniques, such as needling and moxibustion, application of sugar pellets over meridians, as well as innovative methods like laser acupuncture and transcutaneous electrical nerve stimulation (TENS). Studies have explored the efficacy of acupuncture either as a standalone treatment or in combination with standard care, Chinese herbal medicine, or other complementary therapies.

The studies reviewed encompass a broad spectrum of COVID-19 conditions, ranging from mild to severe symptoms, and from acute to long-COVID symptoms. Several case studies with single



patient have reported improvements in consciousness, (Yeh et al., 2021) olfactory dysfunction, (Bhat et al., 2023; Morita et al., 2022) and lung lesions. (Gong et al., 2020; TAO et al., 2020) Although these studies provide valuable insights, the findings are based on small samples and may not be generalizable.

Three studies(Alghitany et al., 2023; Cheng, 2021; d'Oultremont, 2021) provide valuable insights into standalone treatments for managing COVID-19, However, it's essential to acknowledge their limitations. Firstly, these studies typically involve small sample sizes and / or lack robust randomized controlled trials, which may limit the generalizability of their findings. Additionally, the subjective nature of symptom assessment in some studies raises questions about the reliability of reported improvements.

During the acute phase of COVID-19, acupuncture has been reported to help manage a variety of symptoms. When acupuncture used alongside standard care, led to improved oxygen levels and faster recovery with fewer ICU admissions.(Alipour et al., 2022) Similarly, significant improvement in SpO2 level also reported in patients treated with Acu-TENS.(Shahdad et al., 2023; Shojaeddin et al., 2023) These findings suggest that acupuncture can play a crucial role in managing the acute symptoms of COVID-19, potentially reducing the severity of the disease and the need for intensive care when combined with standard care.

In the context of long COVID-19, acupuncture has shown its efficacy in managing persistent symptoms and improving the quality of life of patients, including chest pain, (Hollifield et al., 2022) chest pressure, (Trager et al., 2022) shortness of breath, (Hollifield et al., 2022; Omarova et al., 2023; Xiangping Peng., 2022) body pain,(Xiangping Peng., 2022) brain fog,(Xiangping Peng., 2022) improvement in characteristics of menstruation, (Dong et al., 2024; Xiangping Peng., 2022) and fatigue.(Hollifield et al., 2022; Trager et al., 2022; Xiangping Peng., 2022) Two studies reported improvements in olfactory dysfunction, a common long-term effect of COVID-19, following acupuncture treatment.(Bhat et al., 2023; Morita et al., 2022)

While the studies reviewed suggest that acupuncture may help alleviate post-COVID-19 olfactory dysfunction, it's important to note that the recovery of olfactory function often occurs during the early period (≤6 months) following the onset of COVID-19.(Ogawa, Nakamura, Yamamoto, Tojima, & Shimizu, 2020) This natural recovery process could potentially confound the observed effects of acupuncture. Therefore, it's crucial to distinguish the actual efficacy of acupuncture from the body's natural ability to recover. This distinction can be made through more controlled studies.

The mechanisms underlying the effects of acupuncture on COVID-19 and long COVID-19



symptoms are multifaceted and may involve several biological pathways. Acupuncture's potential to reduce inflammation, stems from its ability to modulate immune responses and inflammatory pathways across different systems of the body. Acupuncture has been shown to inhibit the activation of pro-inflammatory macrophages while promoting the activation of antiinflammatory macrophages. Additionally, acupuncture can downregulate the expression of inflammatory cytokines such as TNF- α and IL-6, and inhibit the formation of inflammatory bodies like NLRP3 inflammasomes. These mechanisms contribute to the alleviation of inflammatory symptoms in various diseases, including those affecting the circulatory, endocrine, and respiratory systems.(N. Li et al., 2021)

Acupuncture's inflammation modulation may mitigate COVID-19's cytokine storm, which may be the plausible reason for reducing inflammation related symptoms like chest pain, cough, and shortness of breath and its potential to alleviates fatigue and aids in lung lesion absorption. Further research into the specific mechanisms of acupuncture in modulating inflammation related to COVID-19 is warranted to optimize its therapeutic use in this context.

In terms of safety, the studies reviewed suggest that acupuncture is generally well-tolerated with minimal side effects.(d'Oultremont, 2021; Helianthi et al., 2022), indicating that any adverse effects are typically mild and transient. No other side effects or safety problems were reported across the studies, suggesting that acupuncture can be considered a generally safe treatment for COVID-19 and its long-term effects.

However, it's important to note that the practice of acupuncture involves direct contact with COVID-19 patients. This necessitates the use of proper personal protective equipment (PPE) to ensure the safety of the healthcare provider. This aspect of safety is crucial in the context of a contagious disease like COVID-19 and should be considered when planning and implementing acupuncture treatment protocols.

LIMITATIONS

This review's limited scope, with only 18 studies, may not fully capture acupuncture's role in managing COVID-19. More comprehensive studies are needed for robust conclusions.

SCOPE OF FURTHER RESEARCH

This review underscores the necessity for larger studies to validate acupuncture's efficacy in COVID-19, particularly regarding its effectiveness as adjunctive care and in addressing post-COVID-19 olfactory dysfunction. More controlled studies are needed to distinguish



acupuncture's effects from natural recovery. Further research should elucidate the standalone role of acupuncture in modulating immune responses and mitigating COVID-19's cytokine storm. This could optimize the therapeutic use of acupuncture in managing COVID-19.

CONCLUSION

The findings of this review suggest that acupuncture may play a crucial role in managing both acute and long-term symptoms of COVID-19. The evidence indicates that the effectiveness of acupuncture as an adjunctive care is more pronounced than its use as standalone care in treating COVID-19 and post-COVID-19 symptoms. Importantly, the studies reviewed also suggest that acupuncture is generally well-tolerated with minimal side effects. However, these findings should be interpreted with caution due to the limited number of studies reviewed. Further largescale, rigorous studies are needed to confirm these findings and to explore the potential of acupuncture as a therapeutic intervention for COVID-19 and its long-term effects.



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ACRONYMS

S.No.	Acronym	Full Form
1	ACE2	Angiotensin-Converting Enzyme 2
2	ANS	Autonomic Nervous System
3	ARDS	Acute Respiratory Distress Syndrome
4	CNS	Central Nervous System
5	CRM	Comprehensive Rehabilitation Measures
6	CRP	C-Reactive Protein
7	CRS	Cytokine Release Syndrome
8	СТ	Computed Tomography
9	ESR	Erythrocyte Sedimentation Rate
10	HR	Heart Rate
11	ICU	Intensive Care Unit
12	IL	Interleukin
13	ISIT	Indian Smell Identification Test



S.No.	Acronym	Full Form
14	LCS	Long -COVID Syndrome
15	MDS	Modified Dyspnoea Scale
16	NB	Natural Bioenergetics
17	PCR	Polymerase Chain Reaction
18	PPE	Personal Protective Equipment
19	PVOD	Post viral olfactory dysfunction
20	RR	Respiratory Rate
21	RT-PCR	Reverse transcription polymerase chain reaction
22	SARS-CoV-2	Severe acute respiratory syndrome coronavirus 2
23	TCA	Traditional Chinese Acupuncture
24	TENS	Transcutaneous Electrical Nerve Stimulation
25	TLC	Total Lymphocyte Count
26	TNF-α	Tumor Necrosis Factor Alpha



S.No.	Acronym	Full Form
27	VAS	Visual Analogue Scale
28	VASD	Visual Analogue Scale for Dyspnoea
29	6-MWT	6 Minute Walking Test