

## 1. Introduction

Acupuncture is a form of therapy in which fine needles are inserted into specific points in the body to produce a therapeutic effect. Acupuncture is employed within physiotherapy as part of an integrated approach to the management of pain and inflammation. Treatment is based on scientific research and clinical evidence that acupuncture can reduce pain by stimulating the brain and spinal cord to produce natural pain-relieving chemicals. These chemicals assist the body's healing processes and offer pain relief as a precursor to other treatments such as manual therapy or exercise in order to aid recovery.

The aim of this clinical guideline for acupuncture is to outline the medico-legal and clinical requirements for the safe and appropriate use of acupuncture.

### 1.1 Definitions

- Acupuncture - The insertion of acupuncture needles into the body at specific points in order to bring about pain-relief, correct energy imbalance and facilitate healing.
- Trigger point needling - Insertion of acupuncture needles into specific areas of tenderness and tension within a muscle, which may be either active or latent "trigger points", with the intention of relieving local discomfort. These points may or may not be recognised acupuncture points.

### 1.2 Scope

This guideline is related to acupuncture use within the UHL physiotherapy department by registered physiotherapists employed by UHL. It is for patients aged 16 and over.

Physiotherapists' scope of practice with regards to the use of acupuncture should be governed by the Health and Care Professions Council (HCPC) Standards of Proficiency, which states:

*"Your scope of practice is the area or areas of your profession in which you have the knowledge, skills and experience to practise lawfully, safely and effectively, in a way that meets our standards and does not pose any danger to the public or to yourself"*  
(HCPC, 2013, p4)

*"Registrant physiotherapists must:*

- *be able to practise safely and effectively within their scope of practice*
- *know the limits of their practice and when to seek advice or refer to another professional*
- *recognise the need to manage their own workload and resources effectively and be able to practise accordingly* (HCPC, 2013, p7)

## **2. Guideline Standards and Procedures**

### **2.1 Indications**

Within the physiotherapy services, the use of acupuncture will be intended primarily for pain-relief.

### **2.2 Contraindications**

Do not use acupuncture, if the patient is affected by any of the following:

- Unstable diabetes
- Unstable epilepsy or unexplained seizure
- Acute stroke
- Unstable heart condition
- Lack of patient understanding or co-operation with treatment or confused patients – unable to gain appropriate consent
- Uncontrolled movements
- True needle phobia
- Tumour in the area
- “Red flags” – should be referred to a doctor as appropriate. Red flags are routinely recognised by physiotherapists and include bowel/bladder disturbance and saddle anaesthesia
- Sepsis
- Metal allergy to needle material (most commonly surgical stainless steel, containing nickel)
- Infection or oedema at proposed needle site
- Lack of consent
- Needling limb with post-surgical lymphoedema, or in the limb distal to the site of lymph node removal
- Cardiac pacemaker (only electro-acupuncture contra-indicated)
- Haemophilia (needling into joints contraindicated. Otherwise, haemophilia is a precaution, taking into account the severity of the condition. Factor VII levels should be above 15% and fine needles used.)
- Patient prescribed and taking anti-platelet drugs.

### **2.3 Cautions**

Additional consideration should be given for patients with these underlying health conditions:

- Controlled diabetes
- Controlled epilepsy – Therapists are strongly advised to stay with the patient while the needles are in situ, Do not treat if the patient has had a recent seizure.
- Stable heart condition
- Pregnancy\*
- Long-term steroid use
- Anti-coagulant use – avoid intra-capsular points to prevent haemarthrosis. Patients should be advised of enhanced risk of bleeding.
- Impaired sensation / fragile skin at site of needling
- Patients taking immuno-suppressant drugs
- Patients undergoing active treatment for malignant disease –
  - the practitioner must either have an awareness and understanding of the patient’s current blood platelet and white cell counts OR treatment must be acceded by the patient’s GP or oncologist.
  - If spinal instability is suspected secondary to malignancy, local spinal needling must not be performed
- Fatigue or hunger. Patients should have eaten within the 2-4 hours before treatment
- Blood borne virus – extra precautions should be undertaken
- Valvular heart disease – prophylactic antibiotics are not recommended but patients are at a slightly higher risk of developing infective endocarditis and this should be documented as discussed with the patient at the point of consent.

\* If used in pregnancy, the practitioner must have undergone specific Acupuncture Association of Chartered Physiotherapists (AACP) approved training in the use of acupuncture in pregnancy.

## 2.4 Equipment Required

- Acupuncture needles – single use
- Non-woven gauze / cotton wool
- Plinth, or appropriate supportive chair or bed for optimum patient positioning
- Sharps disposal box
- Personal protective equipment (PPE)
- Hand decontamination equipment
- Clinical waste facilities

## 2.5 Main Guidance

Treatment should be conducted in accordance with the AACP Guidelines for Safe Practice (2012).

The practitioner may use acupuncture following a traditional Chinese medicine (TCM) approach, Western approach, or trigger point formulatory. The treatment chosen should be in accordance with the practitioner's individual training, experience and scope of practice

Therapists should follow the usual process for communicating with GPs and consultants regarding the progress of patients. Additional communication regarding acupuncture would only be to assist with patient care.

	Action	Rationale
<b>Patient Consent</b>	Patients are required to sign a written consent form (Appendix 1) prior to the start of the course of treatment on or before the first visit. They may give verbal consent on subsequent visits. Patients can request answers to any of their questions related to their physiotherapy and acupuncture prior to treatment. 16 and 17 year olds may give their own consent legally, but is good practice to involve the parents too where the young person permits.	To ensure informed consent
<b>Patient positioning</b>	Patients should be positioned in as supported a position as possible during treatment. Positioning will vary according to the acupuncture points chosen. However, for the initial treatment, the patient should be positioned in either lying or supported long-sitting if possible.	To minimise risk of injury in case of patient fainting or having an adverse reaction to treatment.
<b>Hand decontamination</b>	Hand decontamination in accordance with the trust Infection Prevention Policy (B4/2005) is imperative in all treatment. It is important to note that a clinicians hands should be decontaminated both before inserting or removing needles and whenever there is a risk of cross infection from practitioner or patient to patient (AACP, 2017)	To minimise the risk of cross contamination
<b>Protective clothing</b>	Protective clothing is not required for acupuncture treatment. The use of gloves is not required. (AACP, 2017) However, gloves must be worn if the practitioner has a lesion of the hands not covered by a waterproof dressing, or if the patient is carrying a blood borne virus.	Gloves may reduce dexterity when handling needles and the risk of exposure to blood/body fluids is minimal. To minimise the risk of cross contamination
<b>Skin preparation</b>	Pre-treatment skin preparation is not required as a routine procedure with body acupuncture, however it must always be performed prior to auricular	AACP guidelines for safe practice (2017) do not advocate the use of

	<b>Action</b>	<b>Rationale</b>
	needling. Acupuncture to facial areas will require skin to be free of make-up. Visibly dirty or sweaty skin will need to be washed clean prior to treatment, as will skin that has recently had emollients applied.	swabbing
<b>Needles</b>	Staff must check each needle is in date, unopened and undamaged prior to use. Needles purchased in physiotherapy are single-use.	To minimise harm to patient
<b>Needle stimulation</b>	Once in situ, needles may either be stimulated manually, or with electro-acupuncture. Type, frequency and intensity of needle stimulation will be subject to the practitioner's discretion, following close ongoing monitoring of patient response to treatment.	To maintain an appropriate level of needle stimulation to achieve "De Qi" response in the patient.
<b>Treatment duration</b>	Following insertion, the patient will be asked to relax with the needles in situ for a period up to 30 minutes. They must either be supervised or provided with a call bell during this time, depending upon the individual practitioner's assessment as to how they are responding to treatment.  The first acupuncture treatment should be a slightly shortened "test dose" to assess how the patient responds to treatment. This will usually be a duration of 10-20 minutes, but will be subject to the individual practitioner's discretion.	To allow prompt response in case of adverse reaction to treatment.  To assess patient reactivity to treatment and avoid over-stimulation on first treatment.
<b>Needle Removal</b>	The number of needles should be documented and the patient told the number of needles that are in situ before the needles are audibly counted out as they are removed from the patient.	To minimize risk of retained needles following treatment.
<b>Equipment decontamination</b>	Plinths and any other medical devices used must be decontaminated in accordance with manufacturer's instructions.	To minimise risk of cross contamination
<b>Leaving Patients Unattended</b>	The AACP does not recommend leaving patients unattended, but recommends a call bell or other means for the patient to get attention if it is unavoidable. However, the AACP does support "multi-bed clinics" as long as the high standards of treatment and care are provided.	To minimise risk of patient harm.
<b>Treatment response</b>	Most people report some pain relief after approximately 2-3 treatments. (If no benefit has been achieved after 3-4 treatments, acupuncture treatment should be discontinued).	To avoid continuation with non-effective treatment and allow other treatment avenues to be explored.
<b>Minimise the risk of Trauma or Injury</b>	When needling over the thoracic region either use superficial oblique insertion or direct the needle at a tangent to the ribcage (AACP 2017)	To minimise risk of pneumothorax
<b>Aftercare</b>	It is advised that nothing is placed on the skin immediately after acupuncture treatment apart from the patients clothing.	To reduce the risk of infection
<b>Storage of Sharps</b>	Sharps boxes must be kept in a safe location. All sharps boxes must be signed and dated on construction, remain in use for no longer than three months or until $\frac{3}{4}$ full and should be signed and dated on closure. Unused acupuncture needles should be stored out of sight and not left out between patients	To minimise risk of sharps injury and comply with the Sharps Management Policy (B8/2013).

## 2.6 Health and Safety

- Practitioners should adhere to the AACP guidelines for safe practice (2017), and also to all appropriate Trust policies and procedures (see section 6)
- Acupuncture must be administered using single-use disposable needles and disposed of in accordance with the Trust's policy
- Use-by dates of needles must be checked and adhered to prior to treatment.
- In the event of a sharps-related injury, the Trust Sharps Management policy (B8/2013) should be followed.

## 2.7 Acupuncture Specific Documentation

It is the practitioner's responsibility to ensure that the patient's physiotherapy treatment notes contain the following:

- Completed patient's written consent form (appendix 1)
- Acupuncture points used (including left, right or bilateral)
- Patient position during treatment
- Depth of needling and / or size of needles used and / or number of needles used
- Direction of needling, e.g. perpendicular, oblique, transverse
- Any specific treatment procedures, e.g. inserted into a pinch of tissue etc.
- Duration of treatment
- The addition of any needle stimulation (either manual or electro-acupuncture)
- Any adverse effects
- Needle removal
- Appendix 2 is a suggested method of documentation

## 2.8 Staff responsibilities

**Line managers / service leads** have the responsibility for:

- Ensuring staff are appropriately trained and competent to carry out the clinical procedure
- Ensuring appropriate resources are available for the procedure to be conducted

**All staff** who work within this procedure must have a recognised acupuncture qualification and demonstrate ongoing competence to undertake acupuncture. They must also report any concerns of their own or others competence to their line manager. Physiotherapists must complete regular updates in line with requirements for maintaining competence set out by the Acupuncture Association of Chartered Physiotherapists (AACP)

## 3. Education and Training

### 3.1 Training

Physiotherapists must have undertaken a recognised foundation course into the use of acupuncture for pain-relief. Courses may either be post-graduate, or undergraduate plus an additional post-graduate training at an intermediate level. Such courses should either be approved by the Acupuncture Association of Chartered Physiotherapists (AACP) or be undertaken at University level (e.g. degree or MSc in acupuncture).

### 3.2 Competencies

Physiotherapists who use acupuncture within UHL should maintain their own competence in line with Chartered Society Physiotherapy (CSP) and HCPC guidelines.

## 4. Monitoring and Audit Criteria

This guideline will be implemented by each service lead and the clinical specialists of each area.

Key Performance Indicator	Method of Assessment	Frequency	Lead
Accurate record keeping in line with the guidelines	Notes Audit	Annual	Clinical Specialist

			Physiotherapist
Accurate record of staff using acupuncture	Copies of course certificates kept on file	Ongoing	Therapy Managers

## **5. Supporting Documents and Key References**

AACP (2017) Guidelines for Safe Practice (version 3) Acupuncture Association of Chartered Physiotherapists

Chartered Society of Physiotherapy, (2012), Quality Assurance Standards

HCPC (2013) Standards of Proficiency: Physiotherapists. Available at: [http://www.hpc-uk.org/assets/documents/10000DBCStandards\\_of\\_Proficiency\\_Physiotherapists.pdf](http://www.hpc-uk.org/assets/documents/10000DBCStandards_of_Proficiency_Physiotherapists.pdf)

UHL Sharps Management Policy (B8/2013)

UHL Infection Prevention Policy (B4/2005)

## **6. Key Words**

Physiotherapy, physiotherapist, acupuncture, needling

<b>CONTACT NAME AND REVIEW DETAILS</b>	
<b>Guideline Lead (Name and Title)</b> Sarah Sykes, Clinical Specialist Physiotherapist	<b>Executive Lead</b> <b>Chief Nurse</b>
<b>Details of Changes made during review:</b> In new Trust format	

Appendix 1

## Physiotherapy Department Acupuncture Consent

You have been assessed by your physiotherapist and acupuncture has been deemed an appropriate treatment. Please read the patient information leaflet and fully complete this form and return to your therapist. You will be given the opportunity to ask questions if you wish.

**Patient Name**.....**S number**.....**DOB**.....

	YES	NO	COMMENTS
Are you diabetic?			
Have you ever had a fit, faint or funny turn?			
Have you had a pacemaker or any other electrical device fitted?			
Do you have valvular heart disease?			
Do you have a bleeding disorder (such as haemophilia)?			
Are you taking anti-coagulant or any other medication?			
Are you pregnant or trying for a baby?			
Do you have a condition that affects your immune system?			
Do you suffer from metal allergies?			
Do you suffer with needle phobia?			
Have you had acupuncture before?			
If so, did you have any adverse reactions from it?			

The purpose, benefits and potential risks of acupuncture have been explained to me.

I confirm that I have read and understood the patient information leaflet and I consent to having acupuncture treatment. I understand that I can refuse treatment at any time.

**Patient Sign**..... **Print**..... **Date**.../.../...

**Therapist Sign**..... **Print**.....



# Acupuncture in Physiotherapy

## Physiotherapy Department

### Information for Patients

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### **What is acupuncture?**

Acupuncture is a form of therapy where fine needles are inserted into certain points on the body. Some therapists then gently twirl or flick the needles, or use a small electrical current.

Acupuncture in physiotherapy is generally used for pain relief, but can be used to aid muscle relaxation.

### **Will it hurt?**

*Acupuncture in itself is not often described as painful. A very brief sharp sensation like a pin-prick is felt as the needle goes through the skin, followed by sensation that is different for each individual but is not usually described as “pain”. Patients often describe this as a heavy, dull sensation. Your therapist will ask you to tell them what you are feeling during your treatment.*

### **Is acupuncture safe?**

*Acupuncture is generally very safe. Serious side effects are very rare – less than 1 in 10,000 treatments.*

There is a very small chance of infection after acupuncture. In order to reduce this risk, only single-use, sterile, disposable needles are used. Therapists ensure they have clean hands both before and during treatment.

### **How does acupuncture work?**

It is not fully understood in western medicine why acupuncture works. It is thought to be neurophysiological and research is on-going. It is possible that the insertion of needles into different points in the body may affect the nerves and help release muscles or block pain signals to the brain. Eastern medicine is very different and works on the principle of us having energy running through our bodies called “qi” (chi). Acupuncture is thought to harmonise and improve the movement of qi.

### **Does acupuncture have side effects?**

You need to be aware that:

- A small number of patients feel drowsy or sleepy after treatment. If you are affected, you should not drive until you no longer feel drowsy
- Minor bleeding or bruising can happen after acupuncture in about 3% of treatments
- Pain during treatment can happen in about 1% of treatments
- Existing symptoms can get worse after your first treatment (in less than 3% of patients). You should tell your therapist about this, but it is usually a good sign and it should only last a couple of days or so. It means that the treatment has affected you and that future treatments may be

helpful.

- Fainting can happen in certain patients, particularly at the first treatment.

### **It is important to let your therapist know if you:**

- have ever experienced a fit, faint or funny turn
- have a pacemaker or any other electrical implants
- have a bleeding disorder
- are taking medication to thin the blood (such as Warfarin or aspirin) or any other medication
- have a heart condition
- are pregnant or trying for a baby
- have a metal allergy or needle phobia
- have any particular risk of infection (e.g. you are on immuno-suppressant medication).

### **How should I prepare for my first acupuncture treatment?**

- Read this information sheet carefully and follow any extra advice from your therapist. Ask if you are unsure about anything. You will need to sign a consent form in order to go ahead with the treatment.
- Bring shorts to your treatment, as your therapist may require you to undress, depending on the area of your body being treated.
- Acupuncture to facial areas will require skin to be free of make-up. Visibly dirty or sweaty skin will need to be washed clean prior to treatment.
- Please have something to eat before you come to your appointment.

### **Is there anything I should do after my appointment?**

You could consider resting a while to allow the acupuncture to have its full effect. It is good to drink plenty of fluids. If you are feeling a little dizzy or light headed, a snack and a rest should help.