



Acupuncture Reduces Pain and Dysfunction in Head and Neck Cancer Patients after Neck Dissection

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NEW YORK, NY - New data from a randomized, controlled trial found that acupuncture provided significant reductions in pain, dysfunction, and dry mouth in head and neck cancer patients after neck dissection. The study was led by David Pfister, MD, Chief of the Head and Neck Medical Oncology Service, and Barrie Cassileth, PhD, Chief of the Integrative Medicine Service, at Memorial Sloan-Kettering Cancer Center (MSKCC). Dr. Pfister presented the findings today at the annual meeting of the American Society for Clinical Oncology.

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-- Barrie Cassileth, PhD, Chief, Integrative Medicine Service, MSKCC

Neck dissection is a common procedure for treatment of head and neck cancer. There are different types of neck dissection, which vary based on which structures are removed and the anticipated side effects. One type - the radical neck dissection - involves complete removal of lymph nodes from one side of the neck, the muscle that helps turn the head, a major vein, and a nerve that is critical to full range of motion for the arm and shoulder.

"Chronic pain and shoulder mobility problems are common after such surgery, adversely affecting quality of life as well as employability for certain occupations," said Dr. Pfister. Nerve-sparing and other modified radical techniques that preserve certain structures without compromising disease control reduce the incidence of these problems but do not eliminate them entirely. Dr. Pfister adds, "Unfortunately, available conventional methods of treatment for pain and dysfunction following neck surgery often have limited benefits, leaving much room for improvement."

Seventy patients participated in the study and were randomized to receive either acupuncture or usual care, which includes recommendations of physical therapy exercises and the use of anti-inflammatory drugs. For all of the patients, at least three months had elapsed since their surgery and radiation treatments. The treatment group received four sessions of acupuncture over the course of approximately four weeks. Both groups were evaluated using the Constant-Murley scale, a composite measure of pain, function, and activities of daily living.

Pain and mobility improved in 39 percent of the patients receiving acupuncture, compared to a 7 percent improvement in the group that received usual care. An added benefit of acupuncture was significant reduction of reported xerostomia, or extreme dry mouth. This distressing problem, common among cancer patients following radiotherapy in the head and neck, is addressed with only limited success by mainstream means.

"Like any other treatment, acupuncture does not work for everyone, but it can be extraordinarily helpful for many," said Dr. Cassileth. "It does not treat illness, but acupuncture can control a number of distressing symptoms, such as shortness of breath, anxiety and depression, chronic fatigue, pain, neuropathy, and osteoarthritis."

"Cancer patients should use acupuncturists who are certified by the national agency, NCCAOM [National Certification Commission for Acupuncture and Oriental Medicine], and who are trained, or at least experienced, in working with the special symptoms and problems caused by cancer and cancer treatment," she added.

Acupuncture, a component of Traditional Chinese Medicine, originated more than 2,000 years ago. Treatment involves stimulation of one or more predetermined points on the body with needles, heat, pressure, or electricity for therapeutic effect. A report published by the Centers for Disease Control (CDC) indicated that more than 8 million Americans use acupuncture to treat different ailments. Acupuncture is being used in the palliative care of cancer to alleviate pain and chronic fatigue and to reduce postoperative chemotherapy-induced nausea and vomiting.

The study was funded in part from a grant by the National Cancer Institute. In addition to Drs. Pfister and Cassileth, other MSKCC contributors to the study include: Dr. Andrew Vickers, Dr. Gary Deng, Ms. Jennifer Lee, Mr. Donald Garrity, Dr. Nancy Lee, Dr. Dennis Kraus, Dr. Ashok Shaha, and Dr. Jatin Shah.

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