

**Title of project:** The role of acupuncture with achieving weight loss prior to gynaecology surgery

**FOR code** 1104

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**Location of project:** Campbelltown campus

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### **Project Background**

Almost two-thirds (63%) of the Australian population aged 18 and over are overweight or obese. In South West Sydney 29% of the population is obese (1). Obese patients have a significantly higher risk of postoperative complications (2). Studies have shown their risks of myocardial infarction is five times higher, wound infection is 1.7 times higher, peripheral nerve injury is four times higher, and urinary infection is 1.5 times higher than in non-obese patients. Two systematic reviews have identified acupuncture was superior to placebo/sham, lifestyle interventions and no treatment for reducing body weight and body mass index (BMI) in obese and overweight adults (3, 4). There is an ongoing need for evidence evaluating new adjunctive treatments demonstrating clinically significant weight loss. Acupuncture is a low-risk (5), non-pharmacological, nationally-regulated treatment and may be a useful adjunctive approach to weight loss.

### **Aim of study**

To undertake a feasibility randomised controlled trial of acupuncture compared with a wait list control.

### **Methods**

A small randomised controlled trial will examine the following questions:

1. How does acupuncture affect outcomes over the course of treatment?
2. What is an estimate of the treatment effect? How many treatments are needed to obtain this effect?
3. What are the reasons for women not agreeing to participate?
4. Are the eligibility criteria too restrictive or are they sufficient?
5. Can withdrawal or drop out be kept to less than 20%?
6. Is the treatment acceptable to study participants

### **Ethics Application Requirements**

Ethics approval will be sought.

### **Key references**

1. NSW Ministry of Health. NSW Population Health Survey (SAPHaRI). Centre for Epidemiology and Evidence; 2015.

2. Bamgbade OA, Rutter TW, Nafiu OO, Dorje P. Postoperative complications in obese and nonobese patients. *World J Surg.* 2007;31(3):556-60.
3. Cho SH, Lee JS, Thabane L, Lee J. Acupuncture for obesity: a systematic review and meta-analysis. *Int J Obes (Lond).* 2009;33(2):183-96.
4. Sui Y, Zhao HL, Wong VC, Brown N, Li XL, Kwan AK, et al. A systematic review on use of Chinese medicine and acupuncture for treatment of obesity. *Obes Rev.* 2012;13(5):409-30.
5. Witt CM, Pach D, Brinkhaus B, Wruck K, Tag B, Mank S, et al. Safety of acupuncture: results of a prospective observational study with 229,230 patients and introduction of a medical information and consent form. *Forsch Komplementmed.* 2009;16(2):91-7.