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**Wayne B. Jonas, MD**  
President and CEO  
Samueli Institute

## **Acupuncture for Treatment of Trauma Spectrum Response Symptoms**

Acupuncture shows promise in the treatment of headaches, chronic pain, depression, anxiety and sleep disturbances according to a systematic review of reviews by Samueli Institute published in the October issue of *Systematic Reviews*.

Co-existing symptoms (for example, chronic pain, depression, anxiety, and fatigue) are common in military fighters who have experienced physical and/or psychological trauma. These overlapping conditions cut across the boundaries of mind, brain and body, resulting in a common symptomatic and functional spectrum of physical, cognitive, psychological and behavioral effects referred to as the ‘Trauma Spectrum Response’ (TSR).



Based on the analysis of 51 high-quality reviews, acupuncture seems to be effective for treating headaches and is a promising treatment option for anxiety, sleep disturbances, depression and chronic pain. More data is required to determine whether acupuncture effectively treats post-traumatic stress disorder (PTSD), sexual dysfunction, fatigue or cognitive difficulties.

“It is clear that complementary and integrative medicine has a role to play in the treatment of our nation’s soldiers and other patients. The implications of this study for members of the military are huge,” said Wayne B. Jonas, MD, CEO of Samueli Institute. “Based on these results the next logical step is a randomized control trial on warfighters suffering from these trauma symptoms, and ultimately some relief.”

Samueli Institute has worked collaboratively with the U.S. military for more than a decade to apply rigorous science and evaluate the impact of complementary and integrative medicine on the symptoms related to the TSR.

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Lee C, Crawford C, Wallerstedt D, York A, Duncan A, Smith J, Sprengel M, Welton R, Jonas W. The effectiveness of acupuncture research across components of the trauma spectrum response (tsr): a systematic review of reviews. *Syst Rev*. Oct 2012; 1(1): 46.