

# A Paucity of Acupuncture-Based Rehabilitation for Cerebral Palsy Patients in Pakistan

Ammara Rafique<sup>1</sup>, Sana Subhan<sup>2</sup>, Syeda Amna Iqbal<sup>3</sup>

<sup>1</sup> Indus College of Physical Therapy & Rehabilitation, Indus University of Health Sciences, Karachi

**How to Cite:** Rafique A, Subhan S, Iqbal S A. Paucity of Acupuncture-Based Rehabilitation for Cerebral Palsy Patients in Pakistan. Pak J Med Dent.2024;13(2): 123-124.Doi: 10.36283/PJMD13-2/020

Dear Editor,

Cerebral Palsy (CP) is a neurological disorder that primarily affects motor functions along with cognitive, hearing, speech, and oral health functions<sup>1,2</sup>. Morbidity data has shown that CP is more common in males in Karachi, Pakistan<sup>3</sup>. CP management often requires many interventions including anticonvulsant medications, bimanual training, botulinum toxins, castings, context-focused therapy, home-based therapy, occupational therapy, physiotherapy, and even surgeries in extreme cases<sup>4</sup>. Apart from these interventions, acupuncture is an effective and widely used method of rehabilitation to treat addiction, asthma, cancer pain, carpal tunnel syndrome, chronic prostatitis, CP, depression, dental pain, fibromyalgia, headaches, infertility, irritable bowel syndrome, labor pain, menstrual cramps, myofascial pain, osteoarthritis, post-operative pain, sciatica, urinary incontinence, and many more.

Acupuncture is classified as an alternative and complementary medicine based on an intricate theoretical framework<sup>5</sup>. Diseases are caused when there is a stagnation of energy flow or an imbalance of Yin and Yang in the body<sup>6</sup>. For performing acupuncture, fine needles are carefully inserted into defined points (acupoints) specific to the diagnosis to restore disruptions in harmony<sup>2</sup>. Acupuncture helps re-establish the normal energy flow across the body, restoring internal balance and well-being. Each acupoint has a distinct therapeutic effect and some acupoints treat an entire yin-yang emblematic configuration, while others treat local symptoms. Li et al reported that acupuncture stimulates nerve cells and is therefore, helpful for improving motor functions and speech in CP patients. Research has also implicated that acupuncture along with rehabilitation can improve gross motor functions, decrease muscle spasms, and augment daily life activities in CP patients<sup>7</sup>. Acupuncture has an overall 80 to 100% rehabilitation rate depending on the age of the CP patient, and treatment duration<sup>8</sup>.

We searched several electronic databases with no publication date limitations and found that unfortunately there were no studies on the use of acupuncture for CP-inflicted patients in Pakistan. We also identified that there are only few licensed acupuncturists in Pakistan, which might also be the reason behind deficient studies on this topic. Acupuncture is safe if an acupuncturist is skilled.

Based on studies, we envisaged that the inclusion of acupuncturists along with neurologists, pediatricians, and occupational, physical, and speech therapists may provide a more upgraded and holistic treatment plan for CP patients. Thus, there is a crucial need for rampant awareness campaigns concerning the therapeutic uses of acupuncture and extensive research on this topic.

## ACKNOWLEDGEMENTS

The author would like to acknowledge and extend their gratitude to the institution.

## CONFLICT OF INTEREST

There is no conflict of interest.

This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY) 4.0  
<https://creativecommons.org/licenses/by/4.0/>

## **AUTHORS CONTRIBUTION**

AR had given the conception of the idea, performed the literature search, manuscript drafting, and reviewed it. SS and SAI contributed to manuscript writing and editing.

## **REFERENCES**

1. Graham HK, Rosenbaum P, Paneth N, Dan B, Lin JP, Damiano DL, et al. Cerebral palsy. *Nat Rev Dis Primers*. 2016; 2:15082. doi: 10.1038/nrdp.2015.82.
2. Rafique H, Rafique A, Syed S, Sami Z. The Oral Health of Cerebral Palsy Patients in Pakistan: A Neglected Domain. *Pak J Med Dent*. 2023;12(2): 68-69. doi: 10.36283/PJMD12-2/012.
3. Rafique A, Naz H. A survey-based report on the occurrence of cerebral palsy in urban areas of Karachi. *J Pak Med Assoc*. 2020;70(8):1442-1444. doi: 10.5455/JPMA.28135.
4. Novak I, Mcintyre S, Morgan C, Campbell L, Dark L, Morton N, et al. A systematic review of interventions for children with cerebral palsy: state of the evidence. *Dev Med Child Neurol*. 2013;55(10):885-910. doi: 10.1111/dmcn.12246.
5. Kaptchuk TJ. Acupuncture: theory, efficacy, and practice. *Ann Intern Med*. 2002;136(5):374-383. doi: 10.7326/0003-4819-136-5-200203050-00010.
6. Liptak GS. Complementary and alternative therapies for cerebral palsy. *Ment Retard Dev Disabil*. 2005;11(2):156-163. doi: 10.1002/mrdd.20066.
7. Li LX, Zhang MM, Zhang Y, He J. Acupuncture for cerebral palsy: A meta-analysis of randomized controlled trials. *Neural Regen Res*. 2018;13(6):1107-1117. doi: 10.4103/1673-5374.233455.
8. Mandziuk K, Liu Y, Adams D, Vohra S. Acupuncture for cerebral palsy. *Focus on Alternative and Complementary Therapies*. 2012; 17:85-90. doi:10.1111/J.2042-7166.2012.01156. X.

## **Corresponding Author:**

Dr. Ammara Rafique  
Indus College of Physical Therapy & Rehabilitation,  
Indus University of Health Sciences,  
Karachi, Pakistan.  
Email: ammararafique92@gmail.com  
ORCID iD: 0000-0003-0473-6392