

Communication

Chinese Medicine on Infertility - Preliminary results of a scoping review.

Carolina Fiúza^{1,2,*}  and Mariana Alvarenga^{1,2} .

¹ ABS – Health Level Atlântico Business School, Vila Nova de Gaia, Portugal;

² IPTC – Research Department in Complementary Medicine of the Portuguese Institute of Taiji and Qigong, Maia, Portugal.

* Correspondence: carolinafiuza92@gmail.com; Tel.: +351916798085

Abstract: Infertility is a complex disorder with significant medical, psychosocial, and economic aspects and is a growing global health problem. Common therapeutic methods for infertility may include medical treatments and alternative and complementary medicine (ACM). However, medical treatments have adverse reactions, and they could be expensive, emotionally and financially. Thus, there is an urgent need for an ACM like Traditional Chinese Medicine (TCM). It becomes important to obtain greater robustness, quality and precision in the studies that use TCM methods. Identify, examine, and summarize available evidence about the treatment of female infertility with TCM and identify gaps in knowledge and studies, in order to improve further studies and recognize better ways to manage female infertility. For this scoping review six databases were searched using a search strategy with predefined keywords. Clinical Trials and Randomized Controlled Trials published from 2017 to 2022 were included. All the studies were related to women participants with a diagnosis of infertility according to World Health Organization (WHO). All of them have female pregnancies and/or live births as outcome. Studies with women being submitted to in vitro fertilization were excluded. Data were extracted on the authors, year, aim, sample size, pathology associated with infertility, used treatment, evaluated parameters, acupoints and/or plants used, main results and study quality. To evaluate the study quality the revised Downs and Black checklist was used (high internal consistency (0.89) as well as all subscales, except external validity (0.54)). Searches identified nine clinical studies. The therapeutic approach in each study was phytotherapy (n=4), acupuncture (n=3), acupuncture and phytotherapy (n=1) and moxibustion (n=1). Phytotherapy studies used different herbal mixtures based on them kidney-tonifying properties, antioxidant and polyphenolic properties or dopaminergic actions. The most used plants were: *Rizhoma discoriae*, *Semen cuscatae*, *Rizhoma Paeoniae alba*, *Fructus corni*. The most used acupoints were: CV4, CV6, CV3, LR3, SP10, SP6, LI4, ST9 and Ex-CA1. Two of the studies that used only phytotherapy had a higher pregnancy rate ($p < 0.05$). There was a higher pregnancy rate ($p < 0.05$) in the combined therapy group (letrozole and Human Chorionic Gonadotropin (HCG) + eletroacupuncture combined with ginger-isolated moxibustion). The study that combined phytotherapy with acupuncture showed a higher pregnancy rate compared to the sham acupuncture group ($p = 0.008$). In the moxibustion study, there was a higher pregnancy rate ($p < 0.05$) in the observational group (moxibustion + clomiphene citrate) compared to the control group (clomiphene citrate).

Keywords: Chinese medicine, Women infertility, Acupuncture, Phytotherapy, Moxibustion, Pregnancy rate.

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