

[Clinical research and the effect mechanism on premature ovarian failure treated with acupuncture in recent 20 years].

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OBJECTIVE:

To review and collect the study achievements and the effect mechanism of acupuncture in the treatment of premature ovarian failure (POF) in recent 20 years so as to provide more references for the clinical treatment of POF with acupuncture.

METHODS:

Through retrieving PubMed, CNKI and VIP, the literature on acupuncture for POF was collected from January 1, 1998 through March 31, 2017 regarding the rule of acupoint selection and the therapeutic method. The potential effect mechanism was explored.

RESULTS:

Finally, 26 papers on the clinical treatment for POF with acupuncture and 5 ones on the laboratory mechanism were obtained. The differentiated syndromes and the top 3 acupoints for the treatment of POF included *shaoyin* syndrome [Taixi (KI 3), Sanyinjiao (SP 6) and Guanyuan (CV 4)], *Taiyin* syndrome [Sanyinjiao (SP 6), Zusanli (ST 36) and Ciliao (BL 32)], *jueyin* syndrome [Taichong (LR 3), Shenting (GV 24), Guanyuan (CV 4)], the mixed syndrome of *shaoyin* and *jueyin* [Sanyinjiao (SP 6), Ganshu (BL 18) and Shenshu (BL 23)], the mixed syndrome of *shaoyin* and *taiyin* [Pishu (BL 20), Sanyinjiao (SP 6) and Zusanli (ST 36)] and the dysfunction of the thoroughfare vessel and the conception vessel [Guanyuan (CV 4), Zigong (EX-CA 1) and Huangshu (KI 16)]. The top 5 acupoints of the 14 meridians were Guanyuan (CV 4), Shenshu (BL 23), Sanyinjiao (SP 6), Zhongji (CV 3), Pishu (BL 20), Taixi (KI 3) and Ganshu (BL 18). The local extraordinary points were dominant. According to the use frequency of the acupoints, the first top 5 meridians were the bladder meridian of foot-*taiyang*, the governor vessel, the conception vessel, the spleen meridian of foot-*taiyin* and the kidney meridian of foot-*shaoyin*. The most acupoints were distributed in the chest, the abdomen, the lumbar region and the lower limbs. Many therapeutic methods were used, such as acupuncture with filiform needle, electroacupuncture, moxibustion and the acupoint thread-embedding therapy. The effect mechanisms possibly referred to the recovery of the sexual level

through regulating the hypothalamus-pituitary gland-ovarian axle (HPOA) function, the improvement of the histological morphology of the uterine, the improvement of body immunity through affecting the nerve-endocrine-immune regulation system as well as the regulation of the genetic and protein expressions of the signal pathway relevant with POF.

CONCLUSION:

Even though acupuncture has achieved the therapeutic effects in the clinical treatment of POF, the research on the effect mechanism is still limited. The exploration of acupuncture for POF in terms of mechanism may guide the clinical practice. In the future study, the clinical pathway should be specified and the effect mechanism be explored through the rigorous laboratory design and more objective and rational evaluation system.