

Is Standardization the Future of Traditional Chinese Tuina (Massage) Therapy? - A Reflection on “Bibliometric Analysis of Research Trends on Tuina Manipulation for Neck Pain Treatment Over the Past 10 Years” [Letter]

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Dear editor

We read with interest an article titled “Bibliometric Analysis of Research Trends on Tuina Manipulation for Neck Pain Treatment Over the Past 10 Years” published in the *Journal of Pain Research*.¹ Drawing on modern physical therapy background, we aim to contribute some personal perspectives on this article and research on Tuina.

Firstly, we would like to commend the authors for their comprehensive analysis of the research trends in using Tuina therapy for treating neck pain. Neck pain is a common disabling factor in musculoskeletal disorders, posing challenges for multiple disciplines in terms of prevention, treatment, and rehabilitation. The mounting high-quality evidence derived from evidence-based medicine indicates that Tuina therapy could serve as a beneficial complementary alternative treatment for neck pain.² However, it appears that the author's research methodology may be biased, resulting in unreal and surprising results. First, they should use terms such as “Tuina”, “Chinese massage”, or “Chinese manipulation” instead of using the generic terms “massage” or “manipulation”. This is because there is no standardized terminology specifically for Tuina, and searching with the generic terms can easily lead to confusion with modern physical therapy, resulting in a significantly larger number of publications unrelated to Tuina. For example, in the results section, it is observed that the United States, Spain, Australia, and institutions from these countries are identified as having the highest central role in researching Tuina for neck pain. However, it is widely known that these institutions have conducted very little research related to Tuina. The visualization analysis of keyword further confirms this bias since terms like Mobilization, Dry Needling, Muscle Energy Technique are all modern physical rehabilitation techniques unrelated to Tuina. We suggest that the authors refer to another recent bibliometric research on Tuina published in this journal,³ which demonstrates how to accurately present research trends using simple search strategies and strict inclusion criteria. Second, authors should select appropriate databases for their study. For instance, including core papers from China National Knowledge Infrastructure and Wanfang Data would be a more suitable approach, which is commonly done in meta-analyses. Although this may significantly increase workload for authors, relying solely on English databases cannot comprehensively represent research trends in Tuina—especially when conducting bibliometric analyses.

In order to properly conduct research, it is crucial to accurately define what “Tuina” entails. The authors mentioned in the article that “Tuina is one kind of manual therapy based on the principles of Chinese medicine”. In fact, Tuina therapy is a non-invasive treatment that replaces acupuncture needles with fingers, palms, elbows, or other body parts to stimulate specific areas along meridians on the body surface. It relies heavily on experience and its characteristics and effectiveness are influenced by various variables such as frequency, duration, and intensity.⁴ Although it is an important component of

traditional Chinese physical therapy and is renowned alongside acupuncture in China, Tuina therapy has not been fully standardized or widely recognized internationally. Its practice depends on the experience and skills of practitioners; different Tuina therapists may employ varying techniques and methods.⁵ Therefore, establishing a unified set of operating standards proves extremely challenging as it necessitates considering factors like practitioner experience, patient conditions, and physical states. It is precisely because personalized Tuina treatment plans tailored to individual patients exist that this therapeutic approach can achieve optimal effectiveness. Therefore, we believe that standardization is the future of Tuina research, rather than the future of clinical practice.

Disclosure

The authors report no conflicts of interest in this communication.

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