

The Effectiveness of Acupuncture on Myofascial Trigger Points Versus Traditional Chinese Medicine Acupoints for Treating Plantar Fasciitis With Low Back Pain: A Study Protocol for a Randomised Clinical Trial [Letter]

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Dear editor

The recently published study, “The Effectiveness of Acupuncture on Myofascial Trigger Points Versus Traditional Chinese Medicine Acupoints for Treating Plantar Fasciitis With Low Back Pain: A Study Protocol for a Randomized Clinical Trial” by Huang et al¹ offers a valuable perspective on comparing acupuncture techniques for addressing plantar fasciitis and low back pain, an area of growing clinical interest.

The study’s adherence to the Recommendations for Interventional Trials and the Standards for Reporting Interventions in Clinical Trials of Acupuncture guidelines ensures methodological rigor.² Its well-structured randomized controlled trial design adds credibility to the findings. The comprehensive evaluation, incorporating NPRS, FFI, and RMDQ as outcome measures, strengthens the study’s reliability.³

A significant aspect of this research is the comparative analysis of acupuncture at myofascial trigger points and traditional acupoints, filling an existing knowledge gap in the field. However, a few considerations merit further attention:

Blinding Challenges: Although participant and outcome assessor blinding is implemented, the nature of acupuncture makes complete practitioner blinding difficult. Future research could explore sham acupuncture techniques to mitigate potential biases.⁴

Sustainability of Results: The inclusion of a 12-week follow-up is commendable, but since plantar fasciitis and low back pain can be chronic, a longer follow-up period would provide better insights into sustained effects and recurrence.⁵

Participant Variability: While the selection criteria are well-defined, factors such as obesity, lifestyle habits, and physical activity could influence outcomes and may benefit from subgroup analyses.

This study holds great promise for refining clinical acupuncture practices and aiding healthcare professionals in treating plantar fasciitis and low back pain. I appreciate the researchers’ effort in conducting this study and eagerly await the results.

Disclosure

The authors report no conflicts of interest in this communication.

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