

*Letter to The Editor***Combined acupuncture for the treatment of pregnancy nausea and vomiting****Kıymet İclal Ayaydın Yılmaz<sup>ID</sup>**Gynecology and Obstetrics, Giresun University Faculty of Medicine, Gynecology and Pediatrics  
Training and Research Hospital. Giresun/TURKIYE

We read with great interest Şahin et al.'s case report on nausea and vomiting in pregnancy (morning sickness), titled "Nausea, vomiting in pregnancy and acupuncture", published in your journal (1). The case report of a 31-year-old pregnant woman who presented at 14 weeks of gestation with refractory to medical treatment: severe nausea, sometimes vomiting, and aversion to odors, especially food, provides interesting information. It has been reported that nausea and vomiting decreased 2 days after the session in the patient in whom body and ear acupuncture was applied. It has been stated that the ongoing feeling of nausea can be relieved by putting pressure on the bands attached to the ears.

There are examples of the case presentation presented by the authors with different designs in the literature. However, some points where this case report made a difference caught our attention. It is observed that most of the acupuncture studies for pregnancy nausea and vomiting focus on the P6 point (2). In this presentation, ST36 and REN12 points are used in addition to P6 in order to balance the energy circulating in the stomach canal in body acupuncture. Similarly, sterile permanent seeds were placed at 3 different points in ear acupuncture, and an effective treatment response was obtained by applying pressure in the presence of recurrent symptoms.

Nausea and vomiting (morning sickness) during pregnancy is one of the most common symptoms during pregnancy and may rarely continue throughout the pregnancy. These ongoing complaints may turn into a severe form called "hyperemesis gravidarum" (3). In this patient group, an early-onset treatment may prevent the development of serious complications and increase the quality of life of the pregnant woman. According to the results of the network meta-analysis of randomized controlled trials evaluating the treatment modalities of pregnancy nausea and vomiting by Sridharan K et al.: It was reported that acupuncture was effective against placebo in the primary outcome expressed as the nausea score, but the power of evidence was low (4). However, it is noteworthy that only the P6 point is preferred in the acupuncture studies evaluated in the meta-analysis. On the other hand, according to network meta-analysis results of randomized controlled trials evaluating the treatment modalities of hyperemesis gravidarum by Sridharan K et al.: Acupuncture, acupressure, and methylprednisolone were observed with better therapeutic benefits than other interventions for treating hyperemesis grvidaum (5). Combined body and ear acupuncture applied by the authors and the use of additional focal points may provide more successful results in the prevention of pregnancy nausea and vomiting in the early period. In this regard, the power of evidence for this treatment modality with a low side-effect profile will increase with randomized controlled studies of appropriate design.

**\*Corresponding author:** Dr. Kıymet İclal Ayaydın Yılmaz (MD)

Adress: Gynecology and Obstetrics, Giresun University Faculty of Medicine, Gynecology and Pediatrics Training and Research Hospital /Giresun/TURKIYE

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