Effectiveness of Acupuncture in the Treatment of Gulf War Illness

Principal Investigator: CONBOY, LISA
Institution Receiving Award: NEW ENGLAND SCHOOL OF ACUPUNCTURE, INC.
Program: GWIRP
Proposal Number: GW080059
Funding Mechanism: Clinical Trial Award
Partnering Awards:
Award Amount: $1,015,733.00

PUBLIC ABSTRACT

Gulf War Illness (GWI) is a complex, poorly understood illness characterized by many symptoms, including fatigue after exertion, sleep and mood problems, difficulty concentrating, difficulty thinking and finding words, and musculoskeletal pain. Individuals often present with many symptoms, some of them severe and disabling, and with additional medical diagnoses, including chronic fatigue syndrome, fibromyalgia, irritable bowel syndrome, digestive complaints, and mood-related psychiatric disorders, such as depression, post-traumatic stress disorder, and other anxiety disorders. More than 100,000 veterans of the first Gulf War (Operation Desert Shield/Storm, 1990-1991) out of 700,000 U.S. service personnel deployed to the Persian Gulf have presented with medical complaints through programs established to address the problem, which came to be called chronic multisymptom illness (CMI). Groups of veterans in the United Kingdom, Canada, and Australia were identified with similar problems. The veterans have received treatment directed at their symptoms, but at 5- and 10-year follow-ups, many reported their symptoms remained, some of them severe and disabling. Clearly, an effective treatment for these conditions would be of great benefit to those who were injured during their military service.

The cause of CMI is unknown, and the symptoms cannot be explained by physical and laboratory examinations. Several factors have been considered, including exposure to vaccines, chemicals likely to be encountered in combat (chemical weapons, smoke, pesticides) and stress related to military service, deployment, and combat. After investigation by the Centers for Disease Control and Prevention (CDCP), researchers suspect that the symptoms reflect a range of injuries to the nervous system. It may be that the factors that led to these injuries were not specific to the Persian Gulf region, and that veterans of the current war in Iraq and Afghanistan, as well as active duty personnel, are exposed to similar stressors and will benefit from an investigation of CMI and its treatment.

The goal of this study is to help identify whether acupuncture is an effective treatment for Gulf War Syndrome. Acupuncture is likely to be helpful in treating GWI because it has already been used successfully to reduce many of its key symptoms -- fatigue, irritability, anxiety, insomnia, and pain. Acupuncture treatment is designed to treat each individual's symptoms, making it very well suited for treating the varied symptoms of GWI. Veterans will receive care that is directed specifically at their most distressing symptom. Though the specific etiology of CMI is unknown, acupuncture's analgesic and anti-inflammatory effects are likely to be helpful. Acupuncture seems to work, in part, on peripheral nerves near the site of injury, in the brain, central nervous system, and on the endocrine system, in ways that promote the body's own efforts to reduce pain and heal even chronic injuries. Numerous studies have shown acupuncture is well tolerated by patients, safe, and cost-effective compared to routine care. Acupuncture will be provided by licensed acupuncturists, with at least 5 years of clinical experience, who have received 20 hours of training related to symptoms of GWI.

We plan to recruit patients who report they have symptoms of GWI through the Department of Veterans Affairs (VA). Through questionnaires, physician assessment, and medical histories, we will measure the severity of symptoms before beginning treatment, after 2 months, and after treatment is completed. One group of patients will receive acupuncture evaluation and
treatment twice per week for 2 months, followed by once per week for 4 months. A second group, for comparison purposes, will continue whatever treatment they received from their physicians, and will be offered acupuncture after waiting for 2 months. Based on previous acupuncture research on fatigue, stress, and pain, we expect this length of treatment will be enough for patients to receive significant benefit. We also plan to collect samples of blood from our volunteers that will help identify possible disease mechanisms for the illness and track the effects of treatment.