

Supplementary Table 5. Incidence of AEs according to the study design

Author (year)	Acupuncture group (No. of AEs reported/ no. of sessions (%))	Control group (No. of AEs reported/ no. of sessions (%))	Incidence of AEs related to acupuncture treatment in acupuncture group (No. of AEs related/ no. of sessions (%))
RCTs/quasi-RCTs			
Acupuncture as an adjunct			
Vas (2013) ¹	2/1865 (0.1)	0/NA (—)	2/1865 (0.1)
Guerreiro da Silva (2012) ²	2/200 (1.0)	0/NA (—)	2/200 (1.0)
Do (2011) ³	0/200 (0.0)	0/NA (—)	0/200 (0.0)
Wang (2009) ⁴	2/112 (1.8)	1/NA (—)	2/112 (1.8)
Guerreiro da Silva (2007) ⁵	4/253 (1.6)	0/NA (—)	4/253 (1.6)
Yang (2006) ⁶	0/1442 (0.0)	0/1442 [†] (0.0)	0/1442 (0.0)
Elden (2005) ⁷⁻⁸	76/1380 (5.5)	8/NA (—)	76/1380 (5.5)
Guerreiro da Silva (2005) ⁹	1/125 (0.8)	0/NA (—)	1/125 (0.8)
Du (2005) ¹⁰	0/250 (0.0)	21/700 [†] (3.0)	0/250 (0.0)
Guerreiro da Silva (2004) ¹¹	6/270 (2.2)	0/NA (—)	5/270 (1.9)
Neri (2004) ¹²	0/456 (0.0)	0/NA (—)	0/456 (0.0)
Chen (2004) ¹³	0/438 (0.0)	0/414 [‡] (0.0)	0/438 (0.0)
Smith (2002) ¹⁴⁻¹⁵	96/1340 (7.2)	53/NA (—)	0/1340 (0.0)
Lin (2002) ¹⁶	0/454 (0.0)	0/1510 [§] (0.0)	0/454 (0.0)
Total	189/8785 (2.2)	21/4066 (0.5)	92/8785 (1.0)
Acupuncture vs. sham acupuncture			
Vas (2013) ¹	2/1865 (0.1)	3/1865 (0.2)	2/1865 (0.1)
Manber (2010) ¹⁷	40/456 (8.8)	24/407 (5.9)	34/456 (7.5)
Wang (2009) ⁴	2/112 (1.8)	4/104 (3.8)	2/112 (1.8)
Elden (2008) ¹⁸	72/672 (10.7)	70/624 (11.2)	72/672 (10.7)
Smith (2002) ¹⁴⁻¹⁵	96/1340 (7.2)	53/668 (7.9)	0/1340 (0.0)
Knight (2001) ¹⁹	11/103 (10.7)	8/100 (8.0)	11/103 (10.7)
Carlsson (2000) ²⁰	0/212 (0.0)	0/207 (0.0)	0/212 (0.0)
Total	223/4760 (4.7)	162/3975 (4.1)	121/4760 (2.5)
Acupuncture vs. usual care			

Manber (2010) ¹⁷	40/456 (8.8)	13/NA (—)	34/456 (7.5)
Guittier (2009) ²¹	0/1050 (0.0)	0/NA (—)	0/1050 (0.0)
Mao (2009) ²²	0/420 (0.0)	0/630 ^{**} (0.0)	0/420 (0.0)
Yang (2007) ²³	0/1967 (0.0)	0/1956 [†] (0.0)	0/1967 (0.0)
Wedenberg (2000) ²⁴	2/300 (0.7)	4/192 ^{††} (2.1)	2/300 (0.7)
Cardini (1998) ²⁵	9/1779 (0.5)	16/NA (—)	2/1779 (0.1)
Total	51/5972 (0.9)	4/2778 (0.1)	38/5972 (0.6)
Acupuncture vs. no treatment			
Guerreiro da Silva (2009) ²⁶	1/201 (0.5)	0/NA (—)	1/201 (0.5)
Guittier (2008) ²⁷	3/56 (5.4)	0/NA (—)	0/56 (0.0)
Cardini (2005) ²⁸	29/1085 (2.7)	0/NA (—)	25/1085 (2.3)
Kvorning (2004) ²⁹	18/222 (8.1)	0/NA (—)	12/222 (5.4)
Habek (2003) ³⁰	0/204 (0.0)	0/NA (—)	0/204 (0.0)
Total	51/1768 (2.9)	0/NA (—)	38/1768 (2.1)
RCTs total	374/17512 (2.1)	187/10819 (1.7)	251/17512 (1.4)
CCTs			
Acupuncture vs. usual care			
Liang (2004) ³¹	0/3080 (0.0)	222/3416 (6.5)	0/3080 (0.0)
Xiong (1991) ³²	0/840 (0.0)	0/NA (—)	0/840 (0.0)
Acupuncture vs. no treatment			
Cardini (1993) ³³	7/25 ^{††} (28.0)	0/NA (— 0)	0/25 ^{††} (0.0)
CCTs total	7/3945 (0.2)	222/3416 (6.5)	0/3945 (0.0)
Case series/case reports			
De Jonge-Vors (2011) ³⁴	6/43 ^{††} (14.0)	NA	6/43 ^{††} (14.0)
Ahn (2011) ³⁵	3/5 (60.0)	NA	0/5 (0.0)
Tang (2010) ³⁶	0/15 (0.0)	NA	0/15 (0.0)
Lei (2010) ³⁷	0/12 (0.0)	NA	0/12 (0.0)
Lee (2010) ³⁸	0/20 (0.0)	NA	0/20 (0.0)
O (2009) ³⁹	0/143 (0.0)	NA	0/143 (0.0)
Rouse (2008) ⁴⁰	0/9 (0.0)	NA	0/9 (0.0)
Bourne (2007) ⁴¹	1/4 (25.0)	NA	1/4 (25.0)
Cummings (2003) ⁴²	2/18 (11.1)	NA	2/18 (11.1)

Forrester (2003) ⁴³	0/9 (0.0)	NA	0/9 (0.0)
Neri (2002) ⁴⁴	0/12 ^{‡‡} (0.0)	NA	0/12 ^{‡‡} (0.0)
Yang (2002) ⁴⁵	0/7 (0.0)	NA	0/7 (0.0)
Kvorning Ternov (2001) ⁴⁶	36/167 ^{‡‡} (21.6)	NA	31/167 ^{‡‡} (18.6)
CCPKMCC (2001) ⁴⁷	0/71 (0.0)	NA	0/71 (0.0)
CCPKMCC (2001) ⁴⁸	0/84 (0.0)	NA	0/84 (0.0)
Koh (1989) ⁴⁹	0/207 (0.0)	NA	0/207 (0.0)
Case total	48/826 (5.8)	NA	40/826 (4.8)
Total	429/22283 (1.9)	409/14235 (2.9)	291/22283 (1.3)

* Incidence calculated by including AEs evaluated as certainly, probably, or possibly due to acupuncture treatment in the causality assessment.

† Knee-chest position in control group twice a day for seven days.

‡ Raising buttocks in a lateral position in control group twice a day for three days.

§ Knee-chest position in control group twice a day for mean 12.8 days.

** Phenobarbital 30 mg in control group three times a day for seven days.

†† Once or twice a week-physiotherapy in control group, totalling 10 sessions within six-eight weeks.

‡‡ The number of participants replaced the number of acupuncture sessions because information was not available.

AE, adverse event; CCPKMCC, Collection of Clinical Practice in Korean Medicine Compilation Committee; CCT, controlled clinical trial; NA, not applicable; no., number; NR, not reported; RCT, randomised controlled trial.

References

1. Vas J, Aranda-Regules JM, Modesto M, *et al.* Using moxibustion in primary healthcare to correct non-vertex presentation: a multicentre randomised controlled trial. *Acupunct Med* 2013;31:31-8.
2. Guerreiro da Silva JB, Nakamura MU, Cordeiro JA, *et al.* Acupuncture for tension-type headache in pregnancy: A prospective, randomised, controlled study. *Eur J Integr Med* 2012;4:366-70.
3. Do CK, Smith CA, Dahlen H, *et al.* Moxibustion for cephalic version: a feasibility randomised controlled trial. *BMC Complement Altern Med* 2011;11:81.
4. Wang SM, Dezinno P, Lin EC, *et al.* Auricular acupuncture as a treatment for pregnant women who have low back and posterior pelvic pain: a pilot study. *Am J Obstet Gynecol* 2009;201:271 e1-9.
5. Guerreiro da Silva JB. Acupuncture for mild to moderate emotional complaints in pregnancy--a prospective, quasi-randomised, controlled study. *Acupunct Med* 2007;25:65-71.
6. Yang FQ. Comparison of knee-chest position plus moxibustion on Zhiyin with knee-chest position for breech presentation. *J Sichuan Trad Chin Med* 2006;24:106-7.
7. Elden H, Ladfors L, Olsen MF, *et al.* Effects of acupuncture and stabilising exercises as adjunct to standard treatment in pregnant women with pelvic girdle pain: randomised single blind controlled trial. *BMJ* 2005;330:761.
8. Elden H, Ostgaard HC, Fagevik-Olsen M, *et al.* Treatments of pelvic girdle pain in pregnant women: adverse effects of standard treatment, acupuncture and stabilising exercises on the pregnancy, mother, delivery and the fetus/neonate. *BMC*

Complement Altern Med 2008;8:34.

9. Guerreiro da Silva JB, Nakamura MU, Cordeiro JA, *et al.* Acupuncture for insomnia in pregnancy--a prospective, quasi-randomised, controlled study. *Acupunct Med* 2005;23:47-51.

10. Du YH, Xue AJ. Clinical observation of integrative medicine to correct malposition in 50 cases. *Modern J Integr Trad Chin West Med* 2005;14:2727.

11. Guerreiro da Silva JB, Nakamura MU, Cordeiro JA, *et al.* Acupuncture for low back pain in pregnancy--a prospective, quasi-randomised, controlled study. *Acupunct Med* 2004;22:60-7.

12. Neri I, Airola G, Contu G, *et al.* Acupuncture plus moxibustion to resolve breech presentation: a randomized controlled study. *J Matern Fetal Neonatal Med* 2004;15:247-52.

13. Chen Y, Yang LW. Moxibustion on Zhiyin plus raising buttocks in a lateral position for correction fetal presentation in 73 cases. *Clin J Tradit Chin Med* 2004;16:333.

14. Smith C, Crowther C. The placebo response and effect of time in a trial of acupuncture to treat nausea and vomiting in early pregnancy. *Complement Ther Med* 2002;10:210-6.

15. Smith C, Crowther C, Beilby J. Pregnancy outcome following women's participation in a randomised controlled trial of acupuncture to treat nausea and vomiting in early pregnancy. *Complement Ther Med* 2002;10:78-83.

16. Lin Y, Zhang D, Hao Y. Combination of moxibustion at point Zhiyin and knee-chest position for correction of breech pregnancy in 63 cases. *Chin Acupunct Moxibust* 2002;22:811.

17. Manber R, Schnyer RN, Lyell D, *et al.* Acupuncture for depression during

- pregnancy: a randomized controlled trial. *Obstet Gynecol* 2010;115:511-20.
18. Elden H, Fagevik-Olsen M, Ostgaard HC, *et al.* Acupuncture as an adjunct to standard treatment for pelvic girdle pain in pregnant women: randomised double-blinded controlled trial comparing acupuncture with non-penetrating sham acupuncture. *BJOG* 2008;115:1655-68.
 19. Knight B, Mudge C, Openshaw S, *et al.* Effect of acupuncture on nausea of pregnancy: a randomized, controlled trial. *Obstet Gynecol* 2001;97:184-8.
 20. Carlsson CP, Axemo P, Bodin A, *et al.* Manual acupuncture reduces hyperemesis gravidarum: a placebo-controlled, randomized, single-blind, crossover study. *J Pain Symptom Manage* 2000;20:273-9.
 21. Guittier MJ, Pichon M, Dong H, *et al.* Moxibustion for breech version: a randomized controlled trial. *Obstet Gynecol* 2009;114:1034-40.
 22. Mao ZN, Liang CE. Observation on therapeutic effect of acupuncture on hyperemesis gravidarum. *Zhongguo Zhen Jiu* 2009;29:973-6.
 23. Yang YK, Mao M, Hu YP, *et al.* Effect of moxibustion at Zhiyin (BL 67) to correct the fetus malposition: multi-center randomised controlled clinical study. *J Tradit Chin Med* 2007;48:1097-100.
 24. Wedenberg K, Moen B, Norling A. A prospective randomized study comparing acupuncture with physiotherapy for low-back and pelvic pain in pregnancy. *Acta Obstet Gynecol Scand* 2000;79:331-5.
 25. Cardini F, Weixin H. Moxibustion for correction of breech presentation: a randomized controlled trial. *JAMA* 1998;280:1580-4.
 26. Guerreiro da Silva JB, Nakamura MU, Cordeiro JA, *et al.* Acupuncture for dyspepsia in pregnancy: a prospective, randomised, controlled study. *Acupunct Med*

2009;27:50-3.

27. Guittier MJ, Klein TJ, Dong H, *et al.* Side-effects of moxibustion for cephalic version of breech presentation. *J Altern Complement Med* 2008;14:1231-3.

28. Cardini F, Lombardo P, Regalia AL, *et al.* A randomised controlled trial of moxibustion for breech presentation. *BJOG* 2005;112:743-7.

29. Kvorning N, Holmberg C, Grennert L, *et al.* Acupuncture relieves pelvic and low-back pain in late pregnancy. *Acta Obstet Gynecol Scand* 2004;83:246-50.

30. Habek D, Cerkez Habek J, Jagust M. Acupuncture conversion of fetal breech presentation. *Fetal Diagn Ther* 2003;18:418-21.

31. Liang JL, Chen SR, Li YP. Comparative analysis of moxibustion at Zhiyin acupoint and knee-chest posture in correcting breech presentation, report of 320 cases. *Chin Med* 2004;17:11-2.

32. Xiong CH. Comparative observation on moxibustion on Zhiyin with knee-chest position for abnormal fetal position in 30 cases. *Hunan J Tradit Chin Med* 1991;6:23-4.

33. Cardini F, Marcolongo A. Moxibustion for correction of breech presentation: a clinical study with retrospective control. *Am J Chin Med* 1993;21:133-8.

34. De Jonge-Vors C. Reducing the pain: midwifery acupuncture service audit in Birmingham. *Practising Midwife* 2011;14:22-6.

35. Ahn BJ, Song HS. A case report of patient in pregnancy with external epicondylitis. *J Kor Acupunct Moxibust Soc* 2011;28:137-41.

36. Tang D. Treatment of headaches during pregnancy with acupuncture. *Int J Clin Acupunct* 2010;19:121-2.

37. Lei H, Wang W, Huang G. Acupuncture benefits a pregnant patient who has

- Bell's palsy: a case study. *J Altern Complement Med* 2010;16:1011-4.
38. Lee SH, Park YS, Kim DC. Three cases report of patients caused by traffic accident during early pregnancy. *J Orient Obstet Gynecol* 2010;23:187-95.
39. O KW, Ryu IH, Kim JR, *et al.* Case series of low back pain and pelvic pain caused by traffic accident during pregnancy. *J Orient Obstet Gynecol* 2009;22:194-204.
40. Rouse S. The use of acupuncture in the physiotherapy treatment of pelvic pain in pregnancy. *AACP* 2008;2008:67-72.
41. Bourne A. The use of acupuncture as a treatment for pelvic girdle pain during pregnancy in a multiparous woman. *AACP* 2007;2007:77-85.
42. Cummings M. Acupuncture for low back pain in pregnancy. *Acupunct Med* 2003;21:42-6.
43. Forrester M. Low back pain in pregnancy. *Acupunct Med* 2003;21:36-41.
44. Neri I, Fazzio M, Menghini S, *et al.* Non-stress test changes during acupuncture plus moxibustion on BL67 point in breech presentation. *J Soc Gynecol Investig* 2002;9:158-62.
45. Yang SJ, Cho SH, Jin CS. Clinical study for the 8 cases of the hyperemesis patients. *J Orient Obstet Gynecol* 2002;15:190-9.
46. Kvorning N, Grennert L, Aberg A, *et al.* Acupuncture for lower back and pelvic pain in late pregnancy: a retrospective report on 167 consecutive cases. *Pain Med* 2001;2:204-7.
47. Collection of Clinical Practice in Korean Medicine. Treatment of 50 cases of ascariasis in pregnant women. Seoul, Yeogang 2001.
48. Collection of Clinical Practice in Korean Medicine. Treatment of 51 cases of fetal

malposition by electroacupuncture at Zhiyin (BL67). Seoul, Yeogang 2001.

49. Koh HK, Kim CH, Lee KS. 8 case series of Bell's palsy during pregnancy. *J Orient Obstet Gynecol* 1989:59-62.