

**Eine Metaanalyse zur Wirksamkeit der Craniosacralen Therapie bei chronischen Schmerzen
(bisher lediglich als Abstract veröffentlicht)**

	<p>Haller H, Cramer H, Sundberg T, Lauche R, Dobos G. Craniosacral Therapy for chronic pain: a systematic review and meta-analysis of randomized controlled trials.</p>
<p>Original-Abstract</p>	<p><u>Purpose:</u> The aim of this review was to systematically assess and meta-analyze the effects of Craniosacral Therapy (CST) in the management of chronic pain.</p> <p><u>Methods:</u> The MEDLINE/PubMed, CENTRAL, Scopus, PsycINFO and CINAHL databases were searched through October 2015 for randomized controlled trials (RCTs) on CST for chronic pain. Standard mean differences (SMD) and 95% confidence intervals (CI) were calculated for pain intensity, functional disability, quality of life and global improvement. Risk of bias was assessed using the Cochrane risk of bias tool.</p> <p><u>Results:</u> Eight RCTs with a total of 511 patients suffering from migraine, headache, neck and back pain, epicondylitis, and pelvic girdle pain were included. Overall risk of bias was at least unclear, except for low selection and attrition bias. Compared with usual care or no treatment, effects of CST were found on pain intensity (SMD = -0.32; 95%CI = [-0.61, -0.02]), functional disability (SMD = -0.64; 95%CI = [-1.01, -0.28]) and physical quality of life (SMD = 0.47; 95%CI = [0.14, 0.80]). Compared with sham treatment, effects of CST were found on pain intensity (SMD = -0.69; 95%CI = [-1.01, -0.36]), functional disability (SMD = -0.83; 95%CI = [-1.30, -0.36]), physical (SMD = 0.64; 95%CI = [0.30, 0.98]) and mental quality of life (SMD = 0.38; 95%CI = [0.04, 0.71]) as well as global improvement (SMD = 1.29; 95%CI = [0.93, 1.65]). Compared with other manual treatments, effects of CST on pain intensity and disability did not reach the level of significance. CST was not associated with serious adverse events.</p> <p><u>Conclusion:</u> This meta-analysis suggests evidence for significant and clinically relevant effects of CST in patients with chronic pain conditions. Despite the mainly unclear risk of bias, CST may be considered as a treatment option in the management of chronic pain.</p>