

# INPLASY

## Traditional Chinese Medicine Bloodletting Therapy: A Scoping Review of the Clinical Evidence

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### ADMINISTRATIVE INFORMATION

**Support** - This review receives no specific funding.

**Review Stage at time of this submission** - The review has not yet started.

**Conflicts of interest** - None declared.

**INPLASY registration number:** INPLASY202640101

**Amendments** - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 27 April 2026 and was last updated on 27 April 2026.

### INTRODUCTION

**Review question / Objective** To map the modern clinical literature on Traditional Chinese Medicine bloodletting therapy (TCMBT), synthesize the current landscape of clinical evidence, and provide evidence-based guidance for clinical practice and future investigations. The scoping review addresses: (1) What is the distribution of study designs, publication trends, and research regions? (2) Which diseases/symptoms are most frequently treated with TCMBT, classified according to ICD-11? (3) What are the core intervention characteristics (bloodletting modality, instruments, bleeding volume, acupoints, combined therapies)? (4) What outcomes and adverse events are reported? (5) For systematic reviews, how is evidence quality assessed (e.g., GRADE)?

**Condition being studied** Any health condition treated with TCMBT in clinical studies, including but not limited to pain disorders (postherpetic neuralgia, acute/chronic soft tissue injuries,

headache, cervical spondylosis, low back pain), dermatological diseases (acne, psoriasis vulgaris, urticaria, herpes zoster), neurological disorders, metabolic disorders (hypertension, diabetes), microcirculatory disorders, fever, sore throat, and other internal/external diseases. No restrictions on disease type or severity.

### METHODS

**Search strategy** Human participants of any age, gender, ethnicity, or clinical condition who received TCMBT as defined by Chinese national technical specifications. No restrictions on disease duration or treatment setting.

**Participant or population** Human participants of any age, gender, ethnicity, or clinical condition who received TCMBT as defined by Chinese national technical specifications. No restrictions on disease duration or treatment setting.

**Intervention** TCMBT as defined by national technical specifications[1], using specialized tools

such as three-edged needles or cutaneous needles (plum-blossom needle) to puncture superficial venules, specific acupoints, or localized pathological reaction points, releasing a controlled volume of blood. This includes: collateral bloodletting with cupping, auricular collateral bloodletting, plum-blossom needling bloodletting, and three-edged needle pricking bloodletting. TCMBT may be applied as monotherapy or in combination with other treatments (e.g., Tuina, moxibustion, acupuncture, herbal medicine).

**Comparator** Not required for a scoping review. If included studies have comparators (sham bloodletting, other TCM therapies, Western medicine, no treatment), these will be extracted and described descriptively.

**Study designs to be included** All types of peer-reviewed clinical evidence: primary clinical studies (randomized controlled trials, non-randomized controlled clinical trials, cohort studies, case-control studies, cross-sectional studies, case series, case reports) and secondary research (systematic reviews). No restrictions on language, publication format, or publisher.

**Eligibility criteria** Inclusion: (1) clinical studies or systematic reviews on human subjects; (2) intervention explicitly described as TCMBT per national specifications; (3) any health outcome reported. Exclusion: (1) animal experiments, in vitro studies; (2) conference abstracts only (without full text); (3) duplicate publications; (4) full text unavailable; (5) studies not in English or Chinese (recorded as language barrier).

**Information sources** PubMed, Embase, Cochrane Library, CNKI, VIP, Wanfang Data, CBM. Reference lists of included studies and relevant systematic reviews will be hand-searched. Trial registries (ClinicalTrials.gov, Chinese Clinical Trial Registry) may be consulted for ongoing studies.

**Main outcome(s)** The mapping outcomes include: (1) publication characteristics (year, region, language, journal, funding, study design); (2) participant characteristics (sample size, gender, age, disease duration, treatment course); (3) intervention details (bloodletting modality, instruments, bleeding sites, blood volume, combined therapies, control interventions); (4) reported outcomes (outcome measures, results, conclusions, adverse events); (5) for systematic reviews: use and method of evidence quality assessment (e.g., GRADE).

**Quality assessment / Risk of bias analysis** As a scoping review, formal risk of bias assessment is not mandatory for inclusion. However, for systematic reviews, we will document whether and how they assessed quality/certainty of evidence (e.g., GRADE, AMSTAR, Cochrane RoB). For primary studies, we will extract any reported quality indicators but not use them to exclude studies.

**Strategy of data synthesis** Data synthesis is descriptive and thematic, without meta-analysis. Methods: (1) Descriptive statistics (frequencies, percentages, means, medians, ranges) using SPSS 20.0; (2) Disease classification according to ICD-11 by two independent reviewers; (3) Intervention characterization and relative frequency calculation; (4) Trend analysis: line graphs of publication trends over time stratified by study design; (5) Visualization: PRISMA flow diagram, bar/pie charts, tables summarizing top conditions, intervention parameters, and safety data using Microsoft Visio 2016 and Excel 2016.

**Subgroup analysis** Not for inferential analysis. Descriptive subgroups will be presented by geographic region (China vs. other), disease system (ICD-11 chapters), and bloodletting modality (cupping, three-edged needle, plum-blossom needle).

**Sensitivity analysis** Not applicable.

**Country(ies) involved** China.

**Keywords** bloodletting therapy; traditional Chinese medicine; scoping review; clinical evidence; Fangxue therapy; evidence mapping.

#### **Contributions of each author**

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