

Acupuncture and Massage Improve Pain for Patients With Advanced Cancer

Both approaches may offer a nonpharmaceutical option to use instead of or alongside opioids pain medication.

November 16, 2023 By [Liz Highleyman](#)

Both acupuncture and massage therapy relieved pain, enabled reduced opioid use and improved fatigue, insomnia and quality of life for people with advanced cancer, according to findings from a randomized clinical trial published in [JAMA Network Open](#).

“More research is needed to evaluate how best to integrate these approaches into pain treatment to optimize symptom management for the growing population of people living with advanced cancer,” the study authors concluded.

[Integrative oncology](#) uses mind-body practices, natural products and lifestyle modifications from different traditions along with conventional cancer treatment. Complementary therapies aim to optimize health and improve quality of life across the cancer care continuum.

Compared with medications, complementary approaches are not backed by as much data from clinical trials, in part because they don’t offer the prospect of large profits. But a growing body of evidence suggests that acupuncture, in particular, can be beneficial. Studies have shown that it [improves insomnia](#) and relieves [chemotherapy neuropathy pain](#) and [joint pain due to hormone therapy](#).

Andrew Epstein, MD, of Memorial Sloan Kettering Cancer Center, and colleagues compared the effects of acupuncture and massage therapy on musculoskeletal pain among patients with advanced cancer. While [recent guidelines](#) recommend both acupuncture and massage for cancer pain, their comparative effectiveness is unknown.

Opioids and other medications are often the mainstay of pain management for people with advanced cancer, but polypharmacy, or use of multiple drugs, is a growing concern in this population due to side effects and drug interactions, the study authors noted as background.

The Integrative Medicine for Pain in Patients with Advanced Cancer Trial, or IMPACT ([NCT04095234](#)), was a multicenter randomized controlled study conducted at Memorial Sloan Kettering Cancer Center affiliated sites in New York, New Jersey and Florida between September

2019 and February 2022. Findings were previously presented at this year's American Society for Clinical Oncology Annual Meeting in June.

The trial enrolled 298 adults with advanced cancer who experienced moderate to severe pain and had an estimated life expectancy of at least six months. Two thirds were women, a majority were white and the mean age was about 59 years. About 80% had solid tumors (primarily breast, lung, prostate, gynecologic and gastrointestinal cancers), while about 20% had blood cancers. One third reported opioid use at study entry.

The participants were randomly assigned to weekly 30-minute acupuncture or massage therapy sessions for 10 weeks with monthly "booster" sessions up to 26 weeks. The primary study endpoint was the change in worst pain intensity score from baseline through week 26, as measured by the [Brief Pain Inventory](#). At baseline, the worst pain score was 6.9 on a scale of 0 to 10, and the mean duration of pain was almost four years.

Over the 26 weeks of treatment, worst pain scores fell by 2.53 points in the acupuncture group and by 3.01 points in the massage group. The difference between the two interventions was not statistically significant. What's more, 28% of people in the acupuncture group who used opioids at baseline, and 36% of those who did so in the massage group, were able to reduce their medication use. Patients in both groups also experienced improvements in fatigue, insomnia and quality of life, again without significant differences between them.

Both treatments were well tolerated, and adverse events were mild and temporary; 7% of patients receiving acupuncture reported bruising and 15.1% in the massage group reported transient soreness.

"The durable effects of acupuncture observed in this study are consistent with findings from other large randomized clinical trials of acupuncture for pain in the general population and cancer survivors with chronic pain," the study authors wrote. "Consistent with prior research of pain in patients with cancer, acupuncture also reduced fatigue and insomnia, highlighting its capacity to jointly address multiple, co-occurring symptoms in a cancer population with a high symptom burden."

However, the researchers acknowledged that because the study did not have a control group that didn't receive either type of therapy, it is difficult to interpret whether the reduction in pain was attributed to the intervention versus a placebo effect.

They noted that Medicare currently only covers acupuncture for chronic back pain and does not cover massage for pain. "Given that patients with advanced cancer often have pain in multiple locations due to their disease and oncologic treatment, expanding Medicare coverage to include other pain locations, as well as massage, is needed to promote equitable and effective pain management for patients with cancer," they urged.

The authors pointed out that some people in the study continued to receive pain medications in addition to acupuncture or massage. "Our data should not be interpreted as drugs should be

replaced by acupuncture or massage, but that these nonpharmacologic interventions can improve pain and symptom control while potentially reducing medication use,” they wrote. “More research is needed to understand how best to integrate these nonpharmacologic treatments into the current pain management strategy to create patient-centered, efficient and effective care.”

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