

Is acupuncture an effective treatment for menorrhagia?

**Systematic review, exploratory randomised trial,
qualitative investigation and GP survey**

Volume 2.

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Submitted in partial fulfilment of the requirements for a PhD Degree

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January 2006

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A. Subject headings and keywords for the search strategies developed for the Cochrane Menstrual Disorders and Subfertility Group, 2002.

Search strategy for menstrual disorders for use on MEDLINE:

1. randomized controlled trial.pt.
2. controlled clinical trial.tp.
3. randomized controlled trials/
4. random allocation/
5. double-blind method/
6. single-blind method/
7. or/1-6
8. clinical trial.pt.
9. exp clinical trials/
10. (clin\$ adj25trial\$).tw.
11. ((singl\$ or doubl\$ or treb\$ or tripl\$) adj25 (blind\$ or mask\$)).tw.
12. placebos/
13. placebo\$.tw.
14. random\$.tw.
15. research design/
16. or/8-15
17. animal/ not (human/ and animal/)
18. 7 or 16
19. 18 not 17
20. exp menstruation disorders/ or menstruation disorders.tw
21. pelvic pain/
22. endometriosis/
23. (pelvic adj5 pain).tw.
24. endometrio\$.tw.
25. adenomy\$.tw.
26. dysmenorrh\$.tw.
27. add-back.tw.
28. add back.tw.
29. 'add back'.tw.
30. (pelvic adj5 (ven\$ or congestion)).tw.
31. (ovar\$ adj5 bleed\$).tw.
32. (menstru\$ adj5 bleed\$).tw.
33. (heavy adj5 menstru\$).tw.
34. (iron adj5 anaem\$).tw.
35. (dysfunctional adj5 uter\$).tw.
36. menorrhag\$.tw.
37. fibroma/
38. fibroma\$.tw.
39. fibroid\$.tw.
40. leiomyoma/
41. leiomy\$.tw.
42. premenstrual syndrome/
43. prementrual.tw.
44. pre-menstrual.tw.
45. late luteal.tw.
46. luteal phase.tw.
47. (luteal adj5 sumptom\$).tw.
48. hirsutism.
49. hirsutism.tw.
50. oligomenorrhea/
51. oligomenorrh\$.tw.
52. oligo-amenorrh\$.tw.
53. polycystic ovary syndrome/
54. (polycystic adj ovar&).tw.
55. hyperprolactinemia/
56. hyperprolactinem\$.tw.
57. amenorrhea/
58. amenorrhea.tw.
59. ovarian cysts/
60. exp climacteric/
61. climacter\$.tw.
62. menopause\$.tw.

63. flushing/
64. flush\$.tw.
65. flash\$.tw.
66. vaginal dryness.tw.
67. (painful adj5 menstua\$).tw.
68. (painful adj5 period\$).tw.
69. postmenopaus\$.tw
70. post-menopaus\$.tw
71. perimenopaus\$.tw
72. peri-menopaus\$.tw
73. endometrial hyperplasia/
74. (endometrial adj5 hyperplasia).tw.
75. myoma/ or myoma.tw.
76. Acne Vulgaris/ and female/
77. metrorrhagia.tw.
78. metrorrhagia/
79. or/20-78
80. 79 and 19
81. exp hysterectomy/ or exp hysterectomy, vaginal/
82. exp hysteroscopy/
83. (endometrial adj5 ablation).tw
84. endometrium.su [Surgery]
85. Endometrium/su[Surgery]
86. Hysterectom\$.tw
87. Hysteroscop\$.tw
88. Or/81-87
89. 88 not 90
90. 89 and 19
91. 80 or 90
92. limit 91 to latest update

Search strategy for trials in subfertility for use on MEDLINE:

1. randomised controlled trial.pt.
2. controlled clinical trial.pt.
3. randomised controlled trials/
4. random allocation/
5. double-blind method/
6. single-blind method/
7. or/1-6
8. clinical trial.pt.
9. exp clinical trials/
10. (clin\$ adj25 trial\$).tw.
11. ((singl\$ or doubl\$ or treb\$ or tripl\$) adj25 (blind\$ or mask\$)).tw.
12. placebos/
13. placebo\$.tw.
14. random\$.tw.
15. research design/
16. or/8-15
17. animal/ not (human/ and animal/)
18. 7 or 16
19. 18 not 17
20. exp reproduction techniques/
21. exp fertility agents/
22. (in vitro adj5 fertili\$).tw.
23. ivt.tw.
24. icsi.tw.
25. (intracytoplasmi\$ adj5 sperm\$).tw.
26. subfertili\$.tw.
27. (sperm adj5 injection\$).tw.
28. suzi.tw.
29. (subzon\$ adj5 sperm\$).tw.
30. (zona adj5 dissect\$).tw.
31. pzd.tw.
32. (ovar\$ adj5 hyperstim\$).tw
33. ohss.tw
34. (oocyte adj5 retriev\$).tw
35. (oocyte adj5 pickup).tw

36. (sperm adj5 prepa\$).tw.
37. (acrosome adj5 sperm).tw.
38. (sperm\$ adj5 stimul\$).tw.
39. (sperm\$ adj5 pentoxl\$).tw.
40. (sperm\$ adj5 caff\$).tw.
41. (sperm\$ adj5 kalli\$).tw.
42. (sperm\$ adj5 swimup).tw.
43. (sperm\$ adj5 percol\$).tw.
44. (embryo\$ adj5 biops\$).tw.
45. (cocult\$ adj5 embryo\$).tw.
46. (occult\$ adj5 trophobl\$).tw.
47. luteal phase adj5 support.tw.
48. (sperm\$ adj5 cryopreserv\$).tw.
49. (frozen adj5 embryo\$).tw.
50. antisperm\$ adj5 antibod\$.tw.
51. (sperm adj5 antibod\$).tw.
52. (artifice\$ adj5 inseminat\$).tw.
53. (cervic\$ adj5 inseminat\$).tw.
54. (fallopian tub\$ adj5 perfus\$).tw.
55. (luteal adj5 defect\$).tw.
56. (luteal adj5 dysfunct\$).tw.
57. (ovulat\$ adj5 induc\$).tw.
58. (intraut\$ adj5 inseminat\$).tw.
59. (ectop\$ adj5 preg\$).tw.
60. (tub\$ adj5 preg\$).tw.
61. inseminate\$.tw.
62. varicoc\$.tw.
63. fertility/
64. fertilization/
65. insemination/
66. ovum implantation/
67. (embryo\$ adj5 transfer\$).tw.
68. or/20-67
69. 68 and 19
70. *Breeding/
71. *Consanguinity/
72. (plant\$ adj5 hybridi\$).tw..
73. *plants/ or *plants, edible/ or * power plants/
74. or/70-73
75. 69 not 74
76. limit 75 to latest update

Appendix 1B

B. Subject headings and keywords used by Proctor ML, Smith CA, Farquhar CM, Stones RW for the systematic review entitled "Transcutaneous electrical nerve stimulation and acupuncture for primary dysmenorrhoea (Cochrane Review)". In: The Cochrane Library, Issue 4, 2002.

Oxford: Update Software.

1. exp Menstruation disorders/, exp Menstruation disorders/
2. Pelvic pain/
3. (pelvic adj5 pain).tw.
4. Dysmenorrhea/
5. dysmenorrh\$.tw.
6. (painful adj5 menstrua\$).tw.
7. (painful adj5 period\$).tw.
8. menstrual disorder.tw.
9. or/1-8
10. Transcutaneous electric nerve stimulation/
11. transcutaneous electrical nerve stimulation.tw.
12. transcutaneous nerve stimulation.tw.
13. nerve stimulation.tw.
14. TENS.tw.
15. Acupuncture/
16. Acupuncture therapy/
17. acupuncture\$.tw.
18. Or/10-17
19. 9 and 18

Appendix 2

Reviewer's checklist for trials of acupuncture for menstrual disorders

Reviewer _____ Article No _____

Author of study and

Publication year

Item	Heading	Question	Yes	No ¹	Partially
1	Reporting	Is the aim of the study clearly described?	2	0	1
2	Methods: Protocol	Are both inclusion and exclusion criteria specified?	2	0	1
3		Are the distributions of principal confounders in each group of subjects to be compared clearly described? <i>(A list of principal confounders is provided: eg. age, parity, contraception, obesity, severity and chronicity)</i>	2	0	1
4		Are the interventions of interest clearly described and their timing? <i>(Precise details of treatments and placebo (where relevant) that are to be compared and how and when they were actually administered. Where a score of 75% or more is achieved on the Checklist for Acupuncture Quality, this question should be answered yes. Answer partially for a score of 50% or above.)</i>	2	0	1
5		Are primary & secondary outcome measures clearly defined? <i>(This should include a statement about minimum important differences).</i>	2	0	1
6		Is justification for the sample size given? <i>(If the effect size is given and a power calculation was undertaken prior to the study answer yes. Answer partial if only effect size was discussed or only a power calculation was undertaken).</i>	2	0	1
7	Methods: Assignment	Is the method of randomisation secure in principle? <i>(Answer yes if is an on-site, coded computer system that gives allocations only after inputting an enrolled participants details; is a remote-telephone system; or envelopes sequentially numbered, sealed and opaque. Answer no if randomisation involves a "list" or "table" to allocate assignments; or for "envelopes" or "sealed envelopes" without giving further details.)</i>	2	0	1
8		Are the methods for allocation concealment adequate? <i>(Answer yes if the paper convinces you that allocation cannot be predicted. Answer partially if is partially convincing).</i>	2	0	1
9	Results: Analysis	Are those assessing the outcomes blinded to group assignment?	2	0	1
10		Is baseline comparability assessed?	2	0	1
11		Is compliance assessed?	2	0	1
12		Is the attrition rate acceptable? <i>(Answer yes if less than 20%, partial if between 20 and 30% and no if more than 30%)</i>	2	0	1
13		Has an intention to treat analysis been carried out? <i>(Answer yes if all participants were analysed according to their original group assignment regardless of what subsequently occurred.)</i>	2	0	1
14		Are the statistical analyses appropriate? <i>(Answer yes if yield an estimate of effect on primary and secondary outcome measures; include a point estimate and measure of precision; give actual p values; give absolute numbers as well as percentages)</i>	2	0	1
15		Are there enough summary data and descriptive and inferential statistics to permit alternative analyses and replication?	2	0	1
16	Comment	Do the findings support the conclusions? <i>(Do the authors note sources of bias and imprecision and discuss the issue of external validity? Do they give guidance on interpretation of the evidence in light of the totality of evidence available?)</i>	2	0	1
Maximum quality assessment score of 32					

¹ No and Not stated

Appendix 3a

Checklist for the assessment of the methodological quality both of randomised and non-randomised studies of health care interventions from: Downs & Black 1998. "The feasibility of creating a checklist for the assessment of the methodological quality both of randomised and non-randomised studies of health care interventions", *Journal of Epidemiology and Community Health*, vol. 52, pp. 377-384.

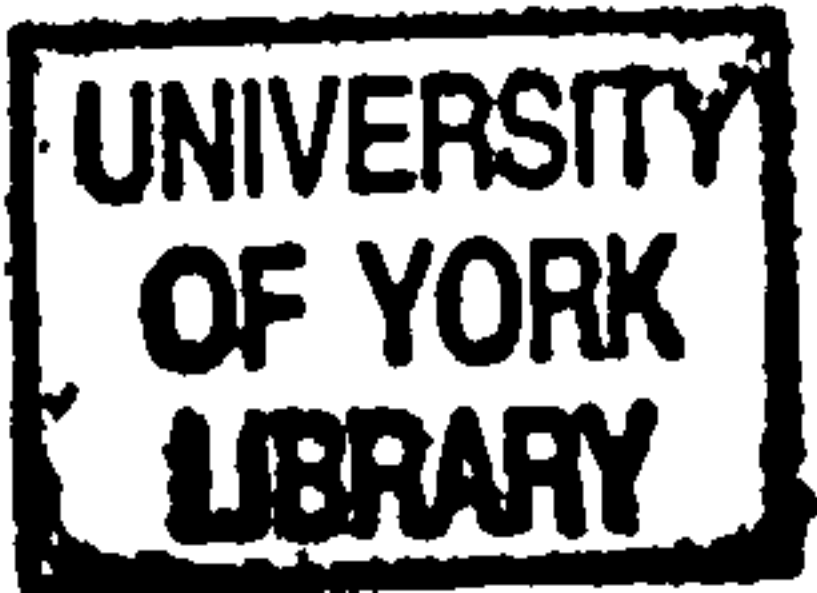
Item	Heading	Question	Y	P	N
	Reporting	Y=yes, P=partially, N=no	Y	P	N
1		Is the hypothesis/aim/objective of the study clearly described?	2	1	0
2		Are the main outcomes to be measured clearly described in the Introduction or Methods section? <i>(If the main outcomes are first mentioned in the Results section, the question should be answered No.)</i>	2	1	0
3		Are the characteristics of the patients included in the study clearly described? <i>(In cohort studies and trials, inclusion and/or exclusion criteria should be given. In case-control studies, a case-definition and the source for controls should be given.)</i>	2	1	0
4		Are the interventions of interest clearly described? <i>(Treatments and placebo (where relevant) that are to be compared should be clearly described.)</i>	2	1	0
5		Are the distributions of principle confounders in each group of subjects to be compared clearly described? <i>(A list of principle confounders is provided: e.g. age, parity, contraception, obesity, severity and chronicity (duration of symptoms).)</i>	2	1	0
6		Are the main findings of the study clearly described? <i>(Simple outcome data (including denominators and numerators) should be reported for all major findings so that the reader can check the major analyses and conclusions. (This question does not cover statistical tests which are considered below).)</i>	2	1	0
7		Does the study provide estimates of the random variability in the data for the main outcomes? <i>(In non-normally distributed data the inter-quartile range of results should be reported. In normally distributed data the standard error, standard deviation or confidence intervals should be reported. If the distribution of the data is not described, it must be assumed that the estimates used were appropriate and the question should be answered yes.)</i>	2	1	0
8		Have all important adverse events that may be a consequence of the intervention been reported? <i>(This should be answered yes if the study demonstrates that there was a comprehensive attempt to measure adverse events. (A list of possible adverse events is provided).)</i>	2	1	0
9		Have the characteristics of patients lost to follow-up been described? <i>(This should be answered yes where there were no losses to follow-up or where losses to follow-up were so small that findings would be unaffected by their inclusion. This should be answered no where a study does not report the number of patients lost to follow-up.)</i>	2	1	0
10		Have actual probability values been reported (e.g. 0.035 rather than <0.05) for the main outcomes except where the probability value is less than 0.001?	2	1	0
	External validity	Y=yes, N=no, ?=unable to determine	Y	N	?
	All the following criteria attempt to address the representativeness of the findings of the study and whether they may be generalised to the population from which the study subjects were derived.				
11		Were the subjects asked to participate in the study representative of the entire population from which they were recruited? <i>(The study must identify the source population for patients and describe how the patients were selected. Patients would be representative if they comprised the entire source of population, an unselected sample of consecutive patients, or a random sample. Random sampling is only feasible where a list of all members of the relevant population exists. Where a study does not report the proportion of the source population from which the patients are derived, the question should be answered as unable to determine.)</i>	1	0	0
12		Were those subjects who were prepared to participate representative			

		of the entire population from which they came? <i>(The proportion of those asked who agreed should be stated. Validation that the sample was representative would include demonstrating that the distribution of the main confounding factors was the same in the study sample and the source population)</i>	1	0	0
13		Were the staff, places, and facilities where the patients were treated, representative of the treatment the majority of patients receive? <i>(For the question to be answered yes the study should demonstrate that the intervention was representative of that in use in the source population. The question should be answered no if, for example, the intervention was undertaken in a specialist centre unrepresentative of the hospitals most of the source population would attend.)</i>	1	0	0
	Internal validity - bias		Y	N	?
14		Was an attempt made to blind study subjects to the intervention they have received? <i>(For studies where the patients would have no way of knowing which intervention they received, this should be answered yes.)</i>	1	0	0
15		Was an attempt made to blind those measuring the main outcomes of the intervention?	1	0	0
16		If any of the results of the study were base on "data dredging", was this made clear? <i>(Any analyses that had not been planned at the outset of the study should be clearly indicated. If no retrospective unplanned subgroup analyses were reported, then answer is yes)</i>	1	0	0
17		In trials and cohort studies, do the analyses adjust for different lengths of follow-up of patients, or in case-control studies, is the time period between the intervention and outcome the same for cases and controls? <i>(Where follow-up was the same for all study patients the answer should be yes. If different lengths of follow-up were adjusted for by, for example, survival analysis the answer should be yes. Studies where differences in follow-up are ignored should be answered no.)</i>	1	0	0
18		Were the statistical tests used to assess the main outcomes appropriate? <i>(The statistical techniques used must be appropriate to the data. For example non-parametric methods should be used for small sample sizes. Where little statistical analysis has been undertaken but where there is no evidence of bias, the question should be answered yes. If the distribution of the data (normal or not) is not described it must be assumed that the estimates used were appropriate and the question should be answered yes.)</i>	1	0	0
19		Was compliance with the intervention(s) reliable? <i>(Where there was non-compliance with the allocated treatment or where there was contamination of one group, the question should be answered no. For studies where the effect of any misclassification was likely to bias any association to the null, the question should be answered yes.)</i>	1	0	0
20		Were the main outcome measures used accurate (valid and reliable)? <i>(For studies where the outcome measures are clearly described, the question should be answered yes. For studies which refer to other work or that demonstrates the outcome measures are accurate, the question should be answered yes.)</i>	1	0	0
	Internal validity - confounding (selection bias)		Y	N	?
21		Were the patients in different intervention groups (trials and cohort studies) or were the cases and controls (case-control studies) recruited from the same population? <i>(For example, patients for all comparison groups should be selected from the same hospital. The question should be answered unable to determine for cohort and case-control studies where there is no information concerning the source of patients included in the study.)</i>	1	0	0
22		Were the study subjects in different intervention groups (trials and cohort studies) or were the cases and controls (case-control studies) recruited over the same period of time? <i>(For a study which does not specify the time period over which patients were recruited, the question should be answered as unable to determine.)</i>	1	0	0
23		Were study subjects randomised to intervention groups? <i>(Studies, which state that subjects were randomised, should be answered yes, except where method of randomisation would not ensure random allocation. For example, alternate allocation would score no because it is predictable.)</i>	1	0	0
24		Was the randomised intervention assignment concealed from both patients and health care staff until recruitment was complete and irrevocable? <i>(All non-randomised studies should be answered no. If assignment was concealed from patients but not from staff, it should</i>	1	0	0

		<i>be answered no.)</i>			
25		Was there adequate adjustment for confounding in the analyses from which the main findings were drawn? <i>(This question should be answered no for trials if: the main conclusions of the study were based on analyses of treatment rather than intention to treat; the distribution of known confounders in the different treatment groups was not described; or the distribution of known confounders differed between the treatment groups but was not taken into account in the analyses. In non-randomised studies if the effect of the main confounders was not investigated or confounding was demonstrated but no adjustment was made in the final analyses the question should be answered as no.)</i>	1	0	0
26		Were losses to follow-up taken into account? <i>(If the numbers of patients lost to follow-up are not reported, the question should be answered as unable to determine. If the proportion lost to follow-up was too small to affect the main findings, the question should be answered yes.)</i>	1	0	0
	Power				
27		Did the study have sufficient power to detect a clinically important effect where the probability value for a difference being due to chance is less than 5%? <i>(Sample sizes have been calculated to detect a difference of x% and y%).</i>			

	Size of <i>smallest</i> intervention group	
A	<n1	0
B	n1—n2	1
C	n3—n4	2
D	n5—n6	3
E	n7—n8	4
F	n8 +	5

Maximum quality assessment score of 32



Appendix 3b

Reviewer's checklist for time-series, cohort and case-control studies

Reviewer: _____ Article No: _____

Name of author and publication date: _____

Item	Heading	Question	Y	P	N	NA
	Reporting	Y=yes, P=partially, N=no, NA=not applicable	Y	P	N	NA
1		Is the hypothesis/aim/objective of the study clearly described?	2	1	0	
2		Are the main outcomes to be measured clearly described in the Introduction or Methods section? (If the main outcomes are first mentioned in the Results section, the question should be answered No.)	2	1	0	
3		Are the characteristics of the patients included in the study clearly described? (In time-series and cohort studies, inclusion and/or exclusion criteria should be given. In case-control studies, a case-definition and the source for controls should be given.)	2	1	0	
4		Are the interventions of interest clearly described? (Treatments and placebo (where relevant) that are to be compared should be clearly described. Where a score of 75% or more is achieved on the Checklist for Acupuncture Quality, this question should be answered yes. Answer partially for a score above and no for a score below 50%)	2	1	0	
5		Are the distributions of principle confounders in each group of subjects to be compared clearly described? (A list of principle confounders is provided: e.g. age, parity, contraception, obesity, severity and chronicity (duration of symptoms).)	2	1	0	
6		Are the main findings of the study clearly described? (Simple outcome data (including denominators and numerators) should be reported for all major findings so that the reader can check the major analyses and conclusions. (This question does not cover statistical tests which are considered below).)	2	1	0	
7		Does the study provide estimates of the random variability in the data for the main outcomes? (In non-normally distributed data the inter-quartile range of results should be reported. In normally distributed data the standard error, standard deviation or confidence intervals should be reported. If the distribution of the data is not described, it must be assumed that the estimates used were appropriate and the question should be answered yes.)	2	1	0	
8		Have all important adverse events that may be a consequence of the intervention been reported? (This should be answered yes if the study demonstrates that there was a comprehensive attempt to measure adverse events. (A list of possible adverse events is provided).)	2	1	0	
9		Have the characteristics of patients lost to follow-up been described? (This should be answered yes where there were no losses to follow-up or where losses to follow-up were so small that findings would be unaffected by their inclusion. This should be answered no where a study does not report the number of patients lost to follow-up.)	2	1	0	
10		Have actual probability values been reported (e.g. 0.035 rather than <0.05) for the main outcomes except where the probability value is less than 0.001?	2	1	0	
	External validity		Y	P	N	NA
	All the following criteria attempt to address the representativeness of the findings of the study and whether they may be generalised to the population from which the study subjects were derived.		2	1	0	
11		Were the subjects asked to participate in the study representative of the entire population from which they were recruited? (The study must identify the source population for patients and describe how the patients were selected. Patients would be representative if they comprised the entire source of	2	1	0	

		<i>population, or were an unselected sample of consecutive patients. Where a study does not report the proportion of the source population from which the patients are derived, the question should be answered as unable to determine.)</i>				
X		<i>In time series studies (i.e. controlled-before-and-after studies, interrupted-time-series and large n=1 studies), was there evidence of stable trends? (Answer NA if the study was a cohort or case control study)</i>	2	1	0	
12		<i>Were those subjects who were prepared to participate representative of the entire population from which they came? (The proportion of those asked who agreed should be stated. Validation that the sample was representative would include demonstrating that the distribution of the main confounding factors was the same in the study sample and the source population)</i>	2	1	0	
13		<i>Were the staff, places, and facilities where the patients were treated, representative of the treatment the majority of patients receive? (For the question to be answered yes the study should demonstrate that the intervention was representative of that in use in the source population. The question should be answered no if, for example, the intervention was undertaken in a specialist centre unrepresentative of the hospitals most of the source population would attend.)</i>	2	1	0	
	Internal validity - bias		Y	P	N	NA
14		<i>Was an attempt made to blind study subjects to the intervention they have received? (For studies where the patients would have no way of knowing which intervention they received, this should be answered yes.)</i>	2	1	0	
15		<i>Was an attempt made to blind those measuring the main outcomes of the intervention?</i>	2	1	0	
16		<i>If any of the results of the study were base on "data dredging", was this made clear? (Any analyses that had not been planned at the outset of the study should be clearly indicated. If no retrospective unplanned subgroup analyses were reported, then answer is yes)</i>	2	1	0	
17		<i>In time-series and cohort studies, do the analyses adjust for different lengths of follow-up of patients, or in case-control studies, is the time period between the intervention and outcome the same for cases and controls? (Where follow-up was the same for all study patients the answer should be yes. If different lengths of follow-up were adjusted for by, for example, survival analysis the answer should be yes. Studies where differences in follow-up are ignored should be answered no.)</i>	2	1	0	
18		<i>Were the statistical tests used to assess the main outcomes appropriate? (The statistical techniques used must be appropriate to the data. For example non-parametric methods should be used for small sample sizes. Where little statistical analysis has been undertaken but where there is no evidence of bias, the question should be answered yes. If the distribution of the data (normal or not) is not described it must be assumed that the estimates used were appropriate and the question should be answered yes.)</i>	2	1	0	
19		<i>Was compliance with the intervention(s) reliable? (Where there was non-compliance with the allocated treatment or where there was contamination of one group, the question should be answered no. For studies where the effect of any misclassification was likely to bias any association to the null, the question should be answered yes.)</i>	2	1	0	
20		<i>Were the main outcome measures used accurate (valid and reliable)? (For studies where the outcome measures are clearly described, the question should be answered yes. For studies which refer to other work or that demonstrates the outcome measures are accurate, the question should be answered yes.)</i>	2	1	0	
	Internal validity – confounding (selection bias)		Y	P	N	NA
21		<i>Were the patients in different intervention groups (trials and cohort studies) or were the cases and controls (case-control studies) recruited from the same population? (For example, patients for all comparison groups should be selected from the same hospital. The question should be answered unable to determine for cohort and case-control studies where there is no information concerning the source of patients included in the study.)</i>	2	1	0	

22		Were the patients in different intervention groups (cohort studies) or were the cases and controls (case-control studies) recruited over the same period of time? <i>(For a study which does not specify the time period over which patients were recruited, the question should be answered as unable to determine.)</i>	2	1	0	
23		Was there adequate adjustment for confounding in the analyses from which the main findings were drawn? <i>(This question should be answered no if the effect of the main confounders was not investigated or confounding was demonstrated but no adjustment was made in the final analyses.)</i>	2	1	0	
26		Were losses to follow-up taken into account? <i>(If the numbers of patients lost to follow-up are not reported, the question should be answered as unable to determine. If the proportion lost to follow-up was too small to affect the main findings, the question should be answered yes.)</i>	2	1	0	
Y		Was quality assurance demonstrated? <i>(To answer yes, the study should state how it had considered, sought to identify or addressed, possible bias and confounding from, for example, changes in practice organisation, the influence of a new GP, or known and unknown prognostic variables.)</i>	2	1	0	
	Power					
27		Did the study have sufficient power to detect a clinically important effect where the probability value for a difference being due to chance is less than 5%? <i>(Sample sizes have been calculated to detect a difference of x% and y%).</i>	2	1	0	

	Size of <i>smallest</i> intervention group	
A	<n1	0
B	n1—n2	1
C	n3—n4	2
D	n5—n6	3
E	n7—n8	4
F	n8 +	5

Maximum quality assessment score of 41
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Appendix 4

Reviewer's checklist for uncontrolled before-and-after studies, cross-sectional surveys and case-series studies of acupuncture for menstrual conditions

Reviewer: _____ Article No: _____

Name of author and publication date: _____

Item	Heading	Question	Y	P	N	NA
	Reporting		2	1	0	
1		Is the hypothesis/aim/objective of the study clearly described?	2	1	0	
2		In the introduction or discussion, do the authors acknowledge that the study is concerned with and designed only to describe the existing distribution of variables, without regard to causal hypotheses? <i>(Answer no if authors overstep the data and present results as clear evidence of effectiveness)</i>	2	1	0	
3		Are the interventions of interest clearly described? <i>(Treatments should be clearly described. Where a score of 75% or more is achieved on the Checklist for Acupuncture Quality, this question should be answered yes. Answer partial for a score above and no for a score below 50%)</i>	2	1	0	
4		Are the main findings of the study clearly described? <i>(Simple outcome data (including denominators and numerators) should be reported for all major findings so that the reader can check the major analyses and conclusions)</i>	2	1	0	
	External Validity					
5		Is the process used to select the sample completely defined? <i>(To answer yes, the study must identify the source population and describe how the patients were selected or recruited)</i>	2	1	0	
6		Are the characteristics of the patients included in the study clearly described? <i>(To answer yes, the study must give explicit inclusion criteria)</i>	2	1	0	
	Internal Validity - confounding					
7		Were the patients sufficiently homogenous with respect to prognostic risk? <i>(To answer yes, the study must describe the distribution of principle confounders such as age, chronicity and parity)</i>	2	1	0	
8		Were patients recruited from the same time-period, so avoiding non-contemporaneous bias through changes in definitions, diagnoses, exposures, disorders and interventions over time? <i>(Where the time-period over which patients were recruited is not stated the question should be answered no)</i>	2	1	0	
9		If sub-group comparisons are made, are the distributions of principle confounders in each group of subjects to be compared clearly described? <i>(E.g. age, parity, contraception, obesity, severity, chronicity and co-morbidity)</i>	2	1	0	-2
	Internal Validity - bias					
10		Are the main outcome measures accurate (valid and reliable)? <i>(For studies which refer to other work or that demonstrate the outcome measures are accurate, the question should be answered yes. For studies where the outcome measures are clearly described, the question should be answered partially.)</i>	2	1	0	
11		Was an attempt made to blind those measuring the main outcomes of the intervention?	2	1	0	
12		Was follow-up long enough for important events to occur?	2	1	0	
13		Was follow-up sufficiently complete? <i>(This should be answered yes where validity of study is not threatened by a loss that is large in relation to the proportion of patients who did not respond, whose symptoms became worse, or who suffered unacceptable side effects from the intervention. Answer no where losses to follow-up are large or where a study does not report the number of patients lost to follow-up.)</i>	2	1	0	
14		Were the statistical tests used to assess the main outcomes appropriate? <i>(The statistical techniques used must be appropriate to the data. Where little statistical analysis has been undertaken but where there is no evidence of bias, the question should be answered Partially)</i>	2	1	0	√

Maximum quality assessment score and denominator = 28 minus NA score

Appendix 5

Reviewer's checklist for interventions in trials of acupuncture for menstrual disorders

Reviewer _____ Article No _____

Author of study and Publication year _____

Item	Heading	Description	Y	P	N	NA
1	Acupuncture rationale	Is the style of acupuncture used defined? <i>The approach taken should be stated, e.g. traditional Chinese medicine or western medical.</i>	2	1	0	
2		Is the rationale for treatment and whether it is individualised or standardised given? <i>The rationale for prescribing treatment, for example according to syndrome patterns, segmental levels or trigger points should be stated.</i>	2	1	0	
3		Are literature sources to justify the rationale provided?	2	1	0	
4	Needling details	Are points used described with standard nomenclature (e.g. ST36, Zusanli) or in terms of anatomical location?	2	1	0	
5		Are specific point locations, and whether unilateral or bilateral, given for a formula of points? Or, where treatment is individualised, are typical points and the range of points used given?	2	1	0	
6		Is the number of needle insertions specified? <i>A simple total of needle insertions for a formula of points, or as a mean and range where the number of needles varies between patients</i>	2	1	0	
7		Are depths of insertion given (e.g. cun or tissue level) and whether standardised or individualised?	2	1	0	
8		Are responses elicited described (e.g. deqi or twitch response)?	2	1	0	
9		Is needle stimulation described (e.g. manual or electrical)?	2	1	0	
10		Is needle retention time specified? <i>The standard time needles were retained, or the mean and range for individualised treatments, should be given.</i>	2	1	0	
11		Is the needle type (gauge, length, and manufacturer or material) stated?	2	1	0	
12	Treatment regimen	Are the number or treatment sessions clearly documented? <i>Where there is variation in the regimen between patients, the mean and range should be reported.</i>	2	1	0	
13		Is the frequency of treatment clearly documented? <i>Where there is variation in the regimen between patients, the mean and range should be reported.</i>	2	1	0	
14	Co-interventions	Are auxiliary techniques clearly documented (e.g. moxibustion, cupping and herbs)?	2	1	0	-2
15		Are prescribed self-help interventions clearly documented (e.g. exercises and lifestyle advice, such as dietary changes, based on diagnostic criteria)?	2	1	0	-2
16	Practitioner	Practitioner's duration of relevant training stated?	2	1	0	
17		Length of clinical experience stated?	2	1	0	
18		Expertise in specific condition stated?	2	1	0	
19	Control interventions	Is the intended effect of the control intervention and its appropriateness to the research question described? <i>The control may be an active comparison such as physiotherapy, a minimally active penetrating or non-penetrating sham, or an inert control such as an inactivated TENS machine. Participants may or may not be blinded. In all cases the aims and objectives of the control in relation to the research question should be given.</i>	2	1	0	-2
20		Are sources that justify the choice of control provided?	2	1	0	-2
21		Are the explanations given to patients of treatment and control interventions stated? <i>For sham acupuncture this should include the precise wording used, e.g. "another type of acupuncture" or "not acupuncture, but feels similar".</i>	2	1	0	-2
22		Is the control credible? <i>If the control treatment is common practice for the condition answer yes. If the control is sham acupuncture or an inert control, answer yes if its credibility has been demonstrated on the target population.</i>	2	1	0	-2
23		Is the control intervention clearly reported? <i>A precise description, as for "Needling details" above, and other items if a different regimen from the acupuncture group has been used should be given.</i>	2	1	0	-2
Maximum quality assessment score of 46 minus NA scores						

Y= yes P= partially N= no NA= not applicable

DATA EXTRACTION SHEET: ACUPUNCTURE FOR MENORRHAGIA REVIEW
(Reproduced here with the omission of white space)

Article Number:
Study Quality Assessment Score:
Interventions Quality Assessment Score:
VERIFICATION OF STUDY ELIGIBILITY
Type of acupuncture:
Gynaecological or obstetric condition treated:
Outcomes of interest:
Study design:
Include / exclude

DETAILS OF PUBLICATION

Author
Title
Source
Journal
Year
Volume
Pages
Country of Origin
Institutional Affiliation
Postal address
Email address

STUDY DESIGN and METHODS

- 1. Justification for sample size:
- 2. Randomisation secure:
 - 1. Recruitment procedures:
 - 2. Recruitment time-period:
- 3. Number of participants:
- 4. Number in each group (describe)
 - o Group A
 - o Group B
 - o Group C
 - o Group D
- 3. Allocation concealment adequate:
- 4. Blinding:
- 5. Assessor blinding:
- 6. Baseline comparability / comparable controls:
- 7. Stable trends:
- 8. Loss to follow-up:
- 9. Intention to treat analyses:
- 10. Appropriate statistical analyses:
- 11. Alternative analyses possible:
- 12. Other evidence of quality assurance:

PARTICIPANTS

- 5. Location:
- 6. Source population:
- 7. Inclusion criteria:
- 8. Exclusion criteria:
- 9. Characteristics of participants at intervention commencement:
 - o Age
 - o Ethnicity
 - o Socio-economic group
 - o Contraception
 - o Parity
 - o Obesity
 - o Severity
 - o Chronicity

10. Number in sub-groups (describe)

- Group A
- Group B
- Group C
- Group D
- Group E

11. Distribution of principle confounders in sub-groups:

- Age
- Ethnicity
- Socio-economic group
- Contraception
- Parity
- Obesity
- Severity
- Chronicity

INTERVENTIONS

- Setting:
- Practitioner details:
 - Relevant training
 - Clinical experience / Specific expertise
- Style of acupuncture:
- Rationale for treatment (e.g. trigger points or syndromes):
- Points used (specific or typical):
- Number of needle insertions (precise or mean and range):
- Needle type:
- Depths of insertions (specific or typical):
- Responses elicited (specific or typical):
- Needle stimulation (e.g. manual or electrical):
- Needle retention time (specific or mean and range):
- Number of treatments (specific or mean and range):
- Frequency of treatments (specific or mean and range):
- Co-interventions (describe):
 - A
 - B
 - C
- Control intervention(s)
 - A
 - B
 - C
- Intended effect of control and appropriateness (describe):
- Sources that justify the control (detail):
- Explanations given to patients of control and interventions (describe):
- Evidence of credibility:

OUTCOMES

1. Measures taken at baseline:

- | | |
|---|---|
| A | C |
| B | D |

2. Measures taken at follow-up:

- | | |
|---|---|
| A | C |
| B | D |

3. Evidence outcome measures are accurate (describe):

4. Timing of follow-up:

5. Adverse events monitored (describe):

- | | |
|---|---|
| A | C |
| B | D |

FINDINGS

1. Results reported:

2. Do findings support conclusions?

NOTES

Appendix 7

GP letter of invitation to participate in ACUMEN



ACUMEN Research Centre

122A Acomb Road, York, YO24 4EY

Tel: 01904 781630

20th April 2001

Dear Dr

Acupuncture for Menorrhagia Exploratory Trial

This exploratory trial of acupuncture for menorrhagia is a collaborative DPhil project between the Department of Health Sciences and Clinical Evaluation, University of York, the York-based research Foundation for Traditional Chinese Medicine, and the Medical Care Research Unit, University of Sheffield.

The study will involve 40 patients, and aims to assess the feasibility of a full-scale trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care. The York Research Ethics Committee has approved the study, and we are now writing to all GPs in the Selby and York PCT to invite them to participate.

GPs participating in the study are only required to identify and notify the researcher of suitable menorrhagia patients. These patients are then contacted by the researcher, and recruited if they meet the criteria and consent to randomisation. For patients randomised to the offer of acupuncture, treatment is provided free of charge at one of three local private clinics. All patients will continue to receive normal primary care management at the discretion of their GP.

The professional acupuncturists providing study treatment are members of the British Acupuncture Council. They are responsible for the acupuncture care they provide and are indemnified for the patients they treat. In line with GMC guidelines, GPs retain responsibility for the overall management of the patient's care.

Further details of the trial are enclosed. If you are interested in referring patients to the trial, please return the enclosed post-card to the study office, and we will arrange a convenient time to come and talk to you.

Yours sincerely

Alison Gamon
DPhil Student,
University of York

Prof. Ian Russell
Academic Supervisor
University of York

Dr Hugh MacPherson
Director, Foundation for
Traditional Chinese
Medicine

Ms Kate Thomas
Academic Co-Supervisor
University of Sheffield

Dr Manuela Fontebasso
GP Advisor to Project

Appendix 8

Summary of the ACUMEN trial included with the GP letter of invitation



ACUMEN

Acupuncture for Menorrhagia Exploratory Trial

To assess the feasibility of a full-scale trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care

Summary:

A 12 month exploratory trial to develop and test a protocol for the rigorous evaluation of offering acupuncture to patients with menorrhagia assessed as suitable for management in primary care.

A parallel qualitative study, based on interviews with a subset of six patients accepting the offer of acupuncture, will examine the acceptability and appropriateness of acupuncture treatment for menorrhagia.

Inclusion criteria:

- Women of 18 years and over with menorrhagia

Exclusion criteria:

- Serious underlying pathology such as carcinoma, endometriosis or fibroids
- Currently receiving specialist medical care for gynaecological conditions
- Pending litigation

Treatment arm:

Patients randomised to acupuncture will be offered up to 20 treatments by one of three qualified acupuncturists with a minimum of three years experience working at a York-based clinical centre: The York Clinic for Complementary Medicine on Tadcaster Road, the Northern Acupuncture Clinic on Micklegate, or the Healing Clinic on Fulford Cross.

Treatment costs:

Costs are to be met in full by the Foundation for Traditional Chinese Medicine, York.

Sample size:

40 patients will be referred by GPs and recruited by the study researcher over 5 months.

Key people:

Alison Gamon—DPhil Student, ACUMEN Research Centre, 122a Acomb Road, York. Tel: 01904 781630

Prof. Ian Russell— Academic Supervisor and Head of Department of Health Sciences and Clinical Evaluation, University of York.
Tel: 01904 434519

Hugh MacPherson PhD— Clinical Supervisor and Director, Foundation for Traditional Chinese Medicine, York. Tel: 01904 781630

Kate Thomas— Academic Co-supervisor and Deputy Director, Medical Care Research Unit, University of Sheffield. Tel: 0114 222 5202

Dr Manuela Fontebasso—General Practitioner and Project Advisor, York. Tel: 01904 788304

Appendix 9

ACUMEN Newsletter – Issue 1
Primary Health Care Team Edition



Alison Gamon
ACUMEN Researcher

ISSUE 1

September 2001

Primary Health Care Team Edition

ACUMEN Newsletter

Acupuncture for Menorrhagia Exploratory Trial

Trial underway—more patients needed

In this, the first of our ACUMEN Newsletters, we aim to bring you up to date with our progress, and address some of the key questions that have been raised by you.

The most pressing issue concerns recruitment. The trial has been underway since June, and it is clear that we now need to increase the rate of referral to **9 patients per month**, in order to meet the target of 40 patients by the end of December 2001. Please be extra vigilant in your identification of suitable patients over the coming months.

The free acupuncture service

To date, all patients randomised to the "offer of acupuncture" have accepted this offer and attended for treatment within one week of randomisation.

Patterns of referral

21 GPs (from 11 practices) in the York and Selby area are now participating in the trial and have been briefed by the researcher, Alison Gamon. Our thanks to the 5 GPs who have referred patients so far.

By the end of August, 6 patients had been identified as suitable for the trial, all of whom were recruited to the study. Of these:

- 1 patient had been asked to consider taking part in the trial by their GP,
- 3 had asked their GP about the study on seeing the ACUMEN poster in the surgery waiting room,

- 1 had heard about the study through their acupuncturist and consulted their GP to discuss the possibility of their participating, and
- 1 had contacted the researcher on hearing about the study from an ACUMEN patient.

So far no patients identified as suitable and invited to participate in the trial by their GP have declined. Please don't forget to tell us about these patients.

Frequently Asked Questions:

1). What makes the ACUMEN trial a pragmatic study?

This is not a placebo—controlled explanatory trial. We are conducting what is called a "pragmatic trial", designed to answer questions about the relative clinical and cost effectiveness of different treatment options in a real world setting. This design does not provide a definitive answer to the question "Does acupuncture work?" Instead it answers the more practical question "Does the addition of the option of acupuncture for women with menorrhagia in primary care lead to greater health benefits than the offer of standard care alone, for the same or less cost?"

The results from a full-scale trial would, therefore, assist GPs and Primary Care Groups in making decisions about offering acupuncture to this patient population in the future. The results from this exploratory trial will enable us to determine the feasibility of, and justification for, a full-scale trial.

2). How sure do I need to be that my patient doesn't have underlying pathology, such as fibroids, before I invite her to consider taking part in the ACUMEN trial?

Some of you have been worried about your ability to satisfy this aspect of our inclusion criteria without first referring the patient for investigative surgery. Please do not worry about this unnecessarily!

The key here is whether or not you would consider this to be appropriate for the patient. If you would not under normal circumstances refer the patient for further investigations, you need not for the purposes of this trial. All we are asking is that you be **reasonably confident** that the patient's symptoms of menorrhagia are idiopathic in origin when inviting her to consider taking part in this trial.

3). What if a patient is interested in taking part in the trial, but I would like to refer her for investigative surgery?

Please let the patient know that once you know her diagnosis, you will be better able to advise on whether or not joining the study would be appropriate for her. You may also wish to provide her with a *Patient Information Sheet* at this point. The inclusion/exclusion criteria for the trial is discussed here, and Alison Gamon's contact phone number is printed on the front cover.

4). What steps have been taken to ensure that the ACUMEN trial is acceptable to patients?

We have taken into consideration the way in which women who consult acupuncturists privately for treatment for heavy periods tend to choose to manage their care. Based on both research evidence and clinical experience we know that:

- a) Women who consult acupuncturist for treatment for menorrhagia are often also taking prescribed medication.
- b) It is only when they feel confident that acupuncture can successfully address

their symptoms that they then consult their GP to discuss withdrawing from their medication.

- c) Waiting to experience the benefits from acupuncture before withdrawing from medication is most often the case, even when patients are not convinced that the medication is of any benefit to them.

Thus we determined that the pragmatic **acupuncture-as-adjunct** trial design would be more acceptable to both patients and their GPs, than a study that denied patients randomised to acupuncture access to normal GP care.

5). Are there any restrictions on the treatment and care I can give to patients in the ACUMEN trial?

None what so ever! You are able to provide the treatment and care that you normally would to each and every patient you invite to consider taking part in this trial. You do not need to deny your patients any treatment you believe will be of benefit to them. What we are interested in evaluating is whether or not there is a reduction in medication usage in the acupuncture group **over time**.

More patients needed

We look forward to receiving more referrals from you all and thank you for your interest in and support of the ACUMEN study.

Lead Researcher:

Alison Gamon— ACUMEN Research Centre, 122a Acomb Road, York, YO24 1ET
Tel: 01904 781630 Fax: 01904 782991

Project Team:

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Appendix 10

ACUMEN Newsletter – Issue 2
Primary Health Care Team Edition



Alison Gamon
ACUMEN Researcher

ISSUE 2
November 2001
Primary Health Care Team Edition

ACUMEN Newsletter

Acupuncture for Menorrhagia Exploratory Trial

26 patients recruited—only 14 to go—thank you!

In this, the second of our ACUMEN Newsletters, we aim to bring you up to date with our progress, and thank the many GPs in the Selby and York PCT who have referred patients to the study so far.

Patient recruitment rates rose dramatically in October (see fig. below). By the end of the month a total of 26 patients had been recruited to the study out of 40. This means that we are ***on target to achieve 40 patients by the end of December 2001.***

So far, no patients identified as suitable and invited to participate by their GP have declined referral to the researcher. Please

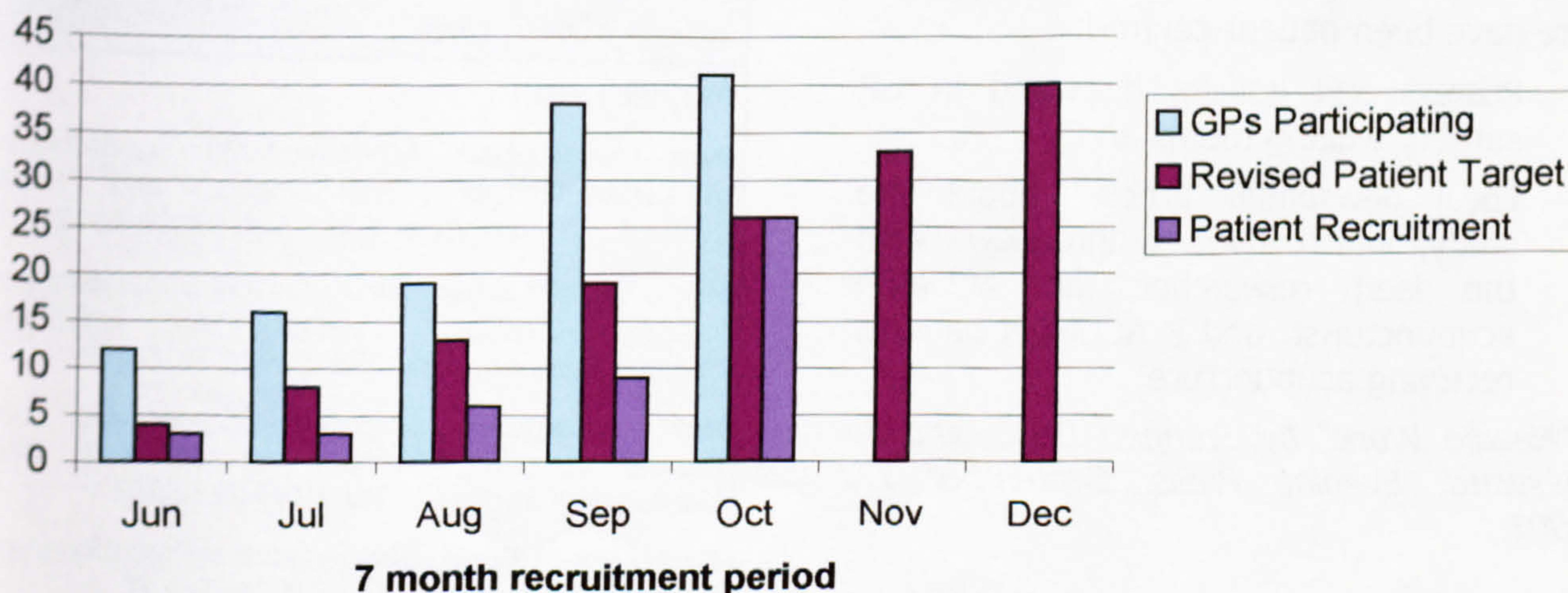
don't forget to tell us about all your suitable patients.

To date, just 3 patients identified as suitable for the trial have not been recruited by the researcher. At the point of telephone screening, two patients were excluded from the study due to a history of fibroids. One patient declined the researcher's invitation to further consider participation.

Recruiting a further 14 patients

Between now and the end of December we need to recruit a further 14 patients. To help us maintain the success achieved so far, please be extra vigilant in your identification of suitable patients over the coming months.

**ACUMEN Cumulative Recruitment
2001**



The free acupuncture service

Please note that, even at this latter stage of recruitment, patients still have a **50% chance of being randomised to the "offer of acupuncture"**. This is because we are using a system of random-permuted-blocks to ensure a relatively even flow of patients to the acupuncture service.

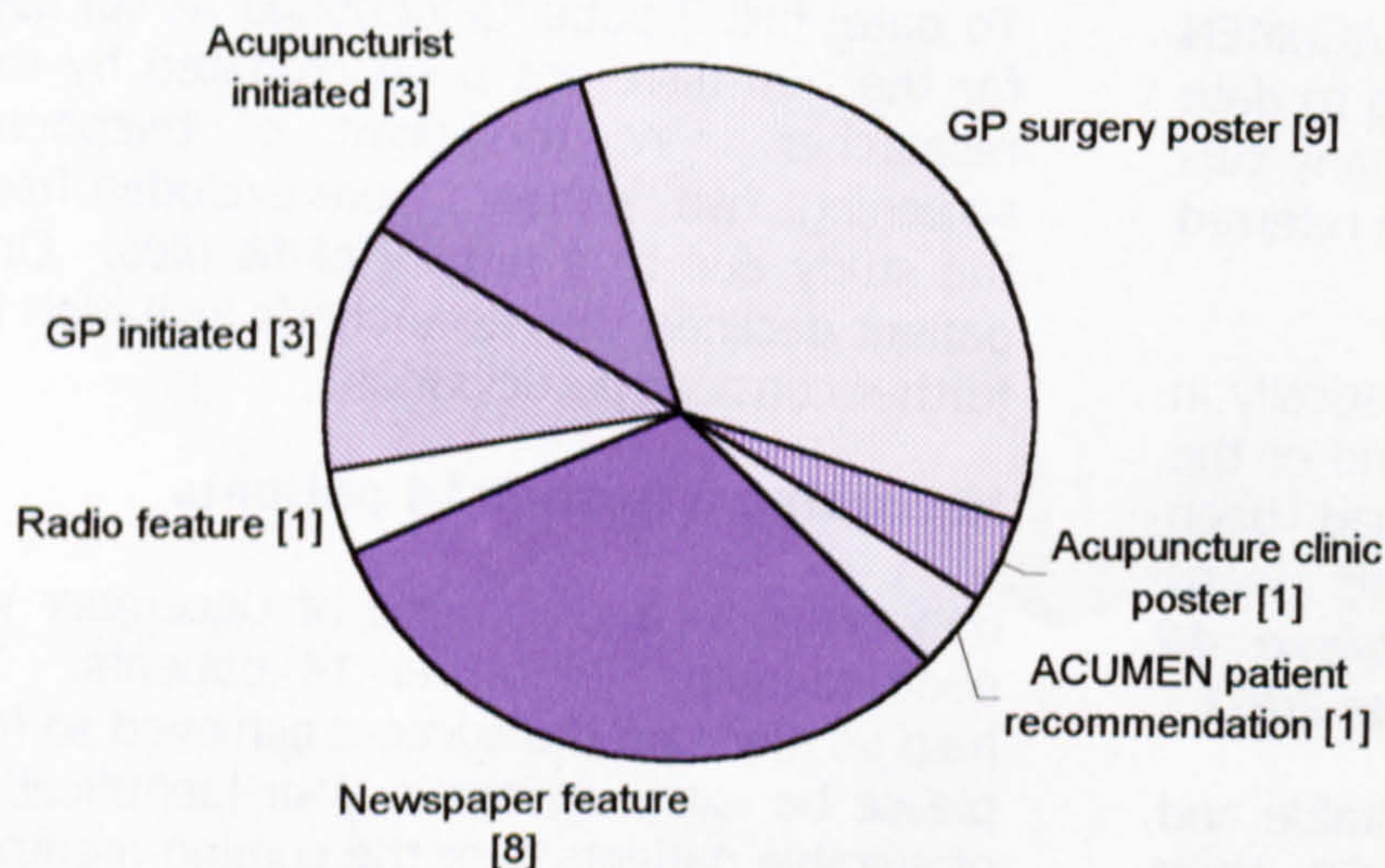
To date, all patients randomised to the "offer of acupuncture" have accepted this offer.

research place greater emphasis on ***patient-centred recruitment methods***.

Furthermore, with only 3 referrals initiated by the patient's GP, these findings also suggest a need to identify and address ***what makes it difficult for GPs to initiate a referral***.

For this reason, Alison would be keen to hear your thoughts on what factors may have made initiating referrals to the

ACUMEN Referral Pathways



ACUMEN study difficult for either you or your colleagues. Please feel free to contact Alison at the Research Centre by phone, fax, or letter, at any time.

Only 14 patients to Christmas!

We are confident that, with the continued support of GPs in the Selby and York PCT, we will achieve our target of 40 patients by the end of December 2001.

We look forward to receiving more referrals from you all, and thank you for your interest in and support of the ACUMEN study.

ACUMEN recruitment pathways

As can be seen in the figure above, the most successful recruitment strategies to date have been patient-centred:

- 1) Posters and leaflets displayed in GP surgery waiting rooms and,
- 2) Local newspaper article* about the study, which involved interviews with the lead researcher, an ACUMEN acupuncturist, and 3 ACUMEN patients receiving acupuncture.

*"Needle Work" by Stephen Lewis and Jo Hayward. *Evening Press*, September 17, 2001.

These findings would suggest that future

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Appendix 11

ACUMEN Newsletter – Issue 3
Primary Health Care Team Edition



Alison Gamon
ACUMEN Researcher

ISSUE 3
March 2002
Primary Health Care Team Edition

ACUMEN Newsletter

Acupuncture for Menorrhagia Exploratory Trial

33 of 40 patients recruited so far - Thank you!

In this, the third and last of our ACUMEN Newsletters, we aim to;

- Bring you up to date with our progress,
- Thank the many GPs in the Selby and York PCT who referred patients to the study, and
- Inform you of an upcoming GP survey.

It's hard work being a pioneer...!

The ACUMEN study is the first UK-based study of acupuncture in the treatment of menorrhagia in primary care, meaning that we started out with many more questions than we had answers, and of key importance were questions concerning acceptability:

"Would GPs be willing to refer patients into a trial of acupuncture for menorrhagia, and would patients be willing to go?"

What we have found is that GPs are willing to refer willing patients! That is, the majority of referrals were **initiated by the patient** in response to patient-centred recruitment methods and **facilitated by the GP**, with posters and leaflets in GP surgeries and a local newspaper article about the study proving to be the most effective recruitment strategies (table 1).

Is a full-scale trial really feasible?

Clearly these findings have serious implications for future research. It is very encouraging to have received such positive interest from women, many of whom have gone to great lengths to get involved in ACUMEN. We have also received a great deal of positive feedback from GPs who have been pleased to be able to support research that seeks to improve the evidence base for acupuncture.

However, a full-scale ACUMEN trial will only succeed if we are able to:

- 1) Increase GPs willingness to actively refer suitable patients to the trial, and/or
- 2) Develop other more acceptable and therefore efficient recruitment strategies*.

**For example, it maybe that many GPs would have found it easier to support the study if we had given them different recruitment options to chose from. Such as A) inviting patients to consider taking part during a consultation, or B) writing to invite suitable patients on their computerised practice list to contact the researcher (administrative support, materials and funding provided).*

**Turn over
to find out about the
GP Prize Draw to Win a Case
of Fine Wines!**



Table 1: ACUMEN Recruitment Pathways

Recruitment Pathway	Poster in GP Surgery	Newspaper article about the study	Acupuncturist	GP	ACUMEN patient recommendation	Poster in Acupuncture Clinic	Local radio feature about acupuncture
Number of patients	11	9	6	3	2	1	1

Testing an alternative strategy in the recruitment of the last 7 patients

Dr Manuela Fontebasso has kindly agreed to help us test the alternative database recruitment pathway suggested above, and in the process recruit the last of our 7 patients. This is important if we are to avoid compromising the study through being under powered. Other GPs can let us know what they think of this recruitment strategy in the upcoming ACUMEN GP Survey.

The ACUMEN GP Survey - Do you think a full-scale ACUMEN trial is achievable?

We will be sending all GPs in the Selby and York PCT a ***Confidential GP Questionnaire*** to elicit their views on recruiting patients for a trial of acupuncture for menorrhagia. All GPs returning a completed questionnaire will be entered into the ***prize draw to win a case of fine wines***. This is in recognition of the valuable part GPs will be playing in the design and conduct of future research in this area, and in recognition of the time allocated to completing the survey.

We thank you in advance for your support of the ACUMEN GP Survey and we wish you the best of luck in the prize draw.

ACUMEN GP Survey results

Results from the GP survey will be published in the Autumn of 2002. A summary of the results will be sent to all GPs returning a completed questionnaire in show of our appreciation for your invaluable support.

ACUMEN Trial Results

Data collection will be completed by November 2002 and the results published by the Spring of 2003. A summary of the results will be sent to all GPs taking part in the ACUMEN trial. Further copies will be available on request.

Thank you

As this is the last of our Newsletters to you, we would also like to take this opportunity to thank all those GPs who have referred patients to the ACUMEN study and encouraged us in our endeavour to add to the evidence base for acupuncture. Without such goodwill from both yourselves and your patients, this pioneering study would not have succeeded in recruiting 33 of 40 patients to date, or been as rewarding a project to undertake. We thank you all.

***Don't forget the upcoming
ACUMEN GP Survey!***



Lead Researcher:

Alison Gamon MSc — ACUMEN Research Centre, 122a Acomb Road, York, YO24 1ET

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Appendix 12

ACUMEN Newsletter – Issue 4

ACUMEN Patients, Acupuncturists and GPs Edition



Alison Longridge
ACUMEN Researcher

ISSUE 4

March 2003

ACUMEN Patients, Acupuncturists
& GPs Edition

ACUMEN Newsletter

Acupuncture for Menorrhagia Exploratory Trial

Thank you for taking part in the ACUMEN Exploratory Trial

A total of 39 patients, 3 acupuncturists, and 43 GPs in York and Selby have taken part in the ACUMEN trial. We would like to thank you all for your time, energy and commitment. Without your support we would not have succeeded in carrying out the first trial of acupuncture for menorrhagia in the UK. And without such goodwill it would not have been such a rewarding project to undertake. Thank you.

The Standard Care Group

Perhaps the hardest job of all was done by those wonderful women in the standard care group. As you can see from the table overleaf, patients often put considerable time and effort into becoming involved in ACUMEN, and it was not easy for me to tell patients who were so excited about the possibility of trying something new that they had not been randomised to acupuncture. That is why we are so grateful to them in particular for completing their questionnaires. Without your support we could not have achieved a **response rate of 95% at 3 months and 90% at 6 months...believe me, this is exceptionally good!**

This means that we are well on our way to finding out just how beneficial acupuncture might be for women with heavy periods. And as a small token of our appreciation we had a prize draw for the Standard Care Group. Alison Gould, Clinic Director at the Northern Acupuncture College teaching clinic, was kind enough to draw a winner. Congratulations Julie! We hope you enjoy spending your £20 M&S voucher!!



Alison Gould, Clinic Director at the Northern Acupuncture College teaching clinic draws a winner!

The 12-month follow-up questionnaires are still coming in, if a little more slowly...! We will announce the winner of the End of Study Prize Draw this May. Remember, it could be you!!

The Acupuncture Group

I'm afraid it will be a while yet before we have any results for you. What we can tell you though is that all 20 women who were randomised to the option of a course of acupuncture treatment for their heavy periods accepted this offer. They also all completed their course of treatment at one of the 3 clinical centres in York. We would like to thank these women for their commitment to treatment. Especially those who travelled all the way from Selby, sometimes by bus! Below are a range of things patients have

said about their treatment:

"I found the study good. It made my periods more regular, as they were very irregular, and the pains in my joints and legs have lessened. Although my periods are still heavy they seem to be more controlled. Thanks for everything."

"Being part of the study has had a profound affect on my life. I now no longer dread my period and it no longer rules my life...I hope your report is positive in its results because I am sure that there are many women out there that would benefit. Thank you."

"I was very pleased to be chosen as an acupuncture patient for my heavy periods. I was about to consider a hysterectomy as I was becoming fed up and washed out after months of heavy bleeding. During the 6 months on the trial, I noticed my symptoms being relieved. I can now say that acupuncture has treated the problems I had before, during and after my period...and I have a lot more energy. The people who live with me have noticed a difference too. A big thank you to all concerned."

The ACUMEN GP Survey

One of the key questions this research sought to answer was:

"Will GPs be willing to refer patients into a trial of acupuncture for menorrhagia, and will patients be willing to go?"

What we found was that GPs are willing to refer willing patients! That is, the majority of referrals were initiated by the patient in response to patient-centered recruitment methods and facilitated by the GP. Posters in GP surgeries and a local newspaper article about the study proved to be the most effective strategies (table 1).

Table 1: ACUMEN Recruitment Pathways

Recruitment Pathway	Poster in GP Surgery	Newspaper article about the study	Acupuncturist	GP	ACUMEN patient recommendation	Letters to a GPs patients (n=14)	Local radio feature about acupuncture	Posters in Acupuncture Clinics
Number of patients	12	9	6	4	2	4	1	1

Lead Researcher: Alison Longridge BA MSc MBACC— Doctoral Student, Department of Health Sciences, University of York. Tel messages: 01904 781630 Email: alison@longridge6.fsnet.co.uk

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Hugh MacPherson PhD— Clinical Supervisor and Research Director, Foundation for Traditional Chinese Medicine, York. Tel: 01904 781630

Clearly these findings have serious implications for future research. A full-scale trial will only succeed if we are able to:

- a) Increase GPs willingness to actively refer suitable patients to the trial, or
- b) Develop more acceptable and therefore efficient recruitment strategies.



The ACUMEN GP survey was designed to elicit GPs views and so help us answer these questions. **105 GPs in the Selby and York PCT took part in the survey, giving us a respectable response rate of 62%.** We thank you for your support and look forward to providing you with a report of the results.



Dr Robert Markham, Chairman of the Executive Committee for the Selby and York PCT, was kind enough to draw a winner for the GP Survey Prize Draw for a case of fine wines. Congratulations Dr Lyall!

Appendix 13

ACUMEN Poster for GP Surgeries

ACUMEN

A Research Collaboration

THE UNIVERSITY of *York*

Department of Health Sciences
& Clinical Evaluation

FOUNDATION for TRADITIONAL

CHINESE MEDICINE

Registered Charity
No. 702083



MEDICAL CARE

RESEARCH UNIT

University of Shef-



Heavy periods affect many women's lives

**Studies suggest that acupuncture can help to
regulate periods and reduce blood loss.**

**The *ACUMEN* study aims to see just how good
acupuncture might be for heavy periods.**



**If you are eligible to take part in this study,
you may be able to choose to have acupuncture
treatment.**

**Your will not have to pay for your acupuncture
treatment.**

***If you are interested, please talk to your doctor or
ring the researcher Alison Gamon
Tel: 01904 781630***

Appendix 14

ACUMEN patient information sheet



ACUMEN

INFORMATION FOR PATIENTS

ACUPUNCTURE FOR MENORRHAGIA EXPLORATORY TRIAL

You have consented to your name being passed on to a researcher at the University of York. The researcher will be contacting you shortly to talk about the study in more detail and to answer any queries you may have, before you decide whether or not to participate.

If you have any questions in the meantime please contact:

Alison Gamon
Tel: 01904 781630

Introduction

You are being invited to take part in a research study. Before you decide, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully. Discuss it with friends, relatives and your GP if you wish. Ask the researcher if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

Background

Heavy periods affect many women's lives. They can affect a woman's physical health, her emotional well-being and her ability to engage fully in life. There are a number of medications that GPs can prescribe to help reduce the blood loss and improve a woman's quality of life. But, as with all treatments, different people respond differently. What works for one woman may not work another. Each medication also carries its own set of side effects. Some women find the side effects from medication too uncomfortable to manage. Some women would also like to be able to avoid taking medication. Amongst non-drug treatments, studies suggest that acupuncture can help to reduce blood loss.

What is the purpose of this study?

At present, we do not know just how good acupuncture can be for heavy periods. We also do not know how much it would cost the NHS to offer acupuncture to women for their heavy periods. The purpose of this study is to find out how we can best answer these questions.

We will be looking to see if we are doing the research in the right way. We will check our health questionnaires to make sure we are asking women the right questions. And we will ask women what they think of acupuncture. All this will help us to see if we can carry out a much bigger study, involving many more women. A much bigger study would give us a clear idea of just how good acupuncture is for heavy periods, and what it would cost.

Why have I been chosen?

You have been asked if you would like to take part because you would like treatment for your heavy periods. Your GP would also like to help you manage your symptoms without recourse to surgery. The study aims to look at about 40 women with heavy periods.

Do I have to take part?

It is up to you to decide whether or not to take part. Whatever your decision, this will not affect the standard of care you receive. If you do decide to take part, you are still free to withdraw at any time and without giving a reason.

What will happen to me if I take part?

This is a randomised trial. Sometimes, because we do not know which way of treating people is best, we need to make comparisons. So we use a computer to put people into different treatment groups. It is like the lottery. The patients in each group are given different treatment options to choose from. We can then make a comparison to see which treatment options worked best.

In this study there will be two groups. One will be **offered** acupuncture **plus** their normal GP medical care. This will be the "**Acupuncture Group**". The other group will be the "**Normal Treatment Group**". This group will continue with their normal GP medical care. You have a **50:50 chance** of being in either the acupuncture or normal treatment group.

If you are interested in taking part in this trial, the researcher will ask you a number of questions to ensure that it is appropriate for you. She will then ask you to fill in some questionnaires about your health. Afterwards, she will inform you which group you are in.

What happens if I'm In the Acupuncture Group?

If you are in the Acupuncture Group, you will be **offered acupuncture treatment**. This means that you can have acupuncture in addition to the treatment you receive from your GP. However, because it is an offer, you can also choose not to have acupuncture. It really is up to you. We would like you to take part in the study whatever your decision.

If you would like acupuncture treatment, the researcher will offer to arrange your first appointment. The researcher will make the appointment for a time that is convenient for you. This will be with one of the three study acupuncturists. Your acupuncturist will then be able to offer you up to **20 acupuncture treatments** in all. These treatments will be given **over the course of approximately 3 to 4 menstrual cycles**. They will probably be held weekly. Your acupuncturist will discuss this with you. Treatments usually last up to an hour, except for the first appointment, which tends to be slightly longer.

At the first appointment, your acupuncturist will take a full history. You will be asked about your current symptoms and what treatment you have received so far. You will be asked about your medical history and that of your close family. You will also be asked about your digestion, your energy levels, sleep patterns and emotional state. Your acupuncturist will then feel your pulses on both wrists. They will also examine the structure, colour and coating of your tongue. Through this detailed information gathering, your acupuncturist is able to make an acupuncture diagnosis. They can then prescribe a treatment tailored for your needs. Your acupuncturist will be very happy to answer any questions you may have about your treatment.

The acupuncture treatment itself will involve your lying on a treatment couch. The acupuncturist will insert fine, sterile acupuncture needles just below the skin at the acupuncture points prescribed for you. When the needles are inserted, the acupuncturist will ask you to give feedback on the sensation you feel. The sensation is often described as a tingling or dull ache. This sensation lasts for just a few moments. The needles are then left in place for about 20 minutes, whilst you relax. Acupuncture sometimes involves the application of heat to the needles to stimulate activity. This is experienced as warmth. At the end of the treatment, the needles are removed. You will be asked to monitor how you feel in the week following your treatment. Your acupuncturist will ask you to report back at your next appointment. It is also important that you tell your acupuncturist about any changes to your medication.

There are three acupuncturists contributing to this study. They work at different clinics in different areas of York. The researcher will therefore talk with you about which clinic will be most convenient for you to get to. This is important, as the study is unable to cover your **travel expenses** to and from treatment.

We will let your GP know that you are helping us with this study. We will let your GP know that you have been offered acupuncture. You will not be required to visit your GP any more frequently during the study. There is no requirement for any additional medical tests or treatments.

What happens if I'm in the Normal Treatment Group?

If you are in the normal treatment group, you will not be required to do anything different with your treatment. Your GP will manage your treatment and care in the same way he or she would have done, had you decided to not take part in this study.

We will let your GP know that you are helping us with this study. We will let your GP know that you have not been offered acupuncture. You will not be required to visit your GP any more frequently than usual during the study. There is no requirement for any additional medical tests or treatments.

What do I have to do?

In total, your participation in this study will span 6 months. During this period, we will send you two questionnaires to complete and return to the researcher. We will enclose a stamped addressed envelop for this purpose.

The questionnaires will ask you about your general health, your periods and your treatment. They should take no more than 20 minutes to complete. Your answers will help us to see how helpful you have found your treatment.

What other information will the researcher collect?

The researcher may need to collect information about your treatment from your GP. This may include information about tests and referrals to hospital specialists. If you do see a hospital specialist for your periods, the researcher may need to see your hospital records too. If you have acupuncture treatment, the researcher will also need to look at your acupuncture clinic notes. This is because we need to keep a record of your acupuncture treatments.

Will my taking part in this study be kept confidential?

All information about you will be kept strictly confidential. Your name will not be mentioned in any reports of the trial. Care will be taken so that individuals cannot be identified from details given in the study reports. All information about you, including your replies to questionnaires, is subject to legal requirements. This includes the Data Protection Act. Any information stored on computers will remain anonymous. It will not be disclosed to any one other than the investigators.

What will happen to the results of the research study?

The results of this study will be published in a health care journal sometime after the summer of 2002. When we send out the last questionnaire, we will ask you if you would like us to send you a copy of the report.

What are the possible risks from acupuncture?

The risk of unpleasant side effects from acupuncture is low. But patients may occasionally feel a prick when the needle goes in. The needle may draw a drop of blood. Sometimes the needle may cause a light bruise.

Sometimes people feel tired after acupuncture, and others feel energised. Very rarely, patients may feel sick during the treatment, or feel faint. These reactions can be a sign that the treatment is working. They are not a health risk. But if they are of concern to you, please talk to your acupuncturist. We would also like you to tell us about them when you complete the questionnaire.

Lastly, it is important that you tell your acupuncturist if you think you might be pregnant. This is because certain acupuncture points will need to be avoided.

What are the possible benefits from acupuncture?

A possible benefit of acupuncture is that your periods may improve, and no longer be heavy. Your periods may also become less painful. It is also possible that you may experience improvements to your general health. You may feel more energetic, or sleep better. These benefits, however, cannot be guaranteed. In the future, with your help, we hope to be able to give women much better information about acupuncture.

What professional qualifications do the acupuncture practitioners hold?

The acupuncturists taking part in this study have the equivalent of 3 years full time training. They also have over 10 years post-qualification clinical experience. They are members of the British Acupuncture Council, and must observe a Code of Practice. This code of practice has been approved by the Department of Health. The practitioners are insured for professional acupuncture practice.

What if I am not happy about the way in which the study has been conducted?

You can make a complaint if you are not happy about the way you have been treated or approached during this study. There are 3 ways you can do this:

1. The researcher, Alison Gamon

You can contact the researcher if you have any concerns or complaints. Alison will always do her very best to help.

Tel: 01904 781630

2. NHS complaints procedure:

You can use the normal NHS complaints procedure. Telephone York Community Health Council for advice about how to make a complaint.

Tel: 01904 610700

3. British Acupuncture Council complaints procedure:

You can use the normal British Acupuncture Council complaints procedure. Ask to speak with the Ethics Secretary, who will give you advice about how to make a complaint.

Tel: 020 8735 0400

Thank you for reading this information.

Appendix 15

ACUMEN pro forma for GP referral of patients

ACUMEN - A Research Collaboration

THE UNIVERSITY of York
Department of Health Sciences
& Clinical Evaluation

FOUNDATION for TRADITIONAL
CHINESE MEDICINE
Registered Charity
No. 702083



MEDICAL CARE
RESEARCH UNIT
University of Sheffield



Acupuncture for Menorrhagia Exploratory Trial

Inclusion Criteria:

- Women of 18 years and over with menorrhagia

Exclusion Criteria:

- Serious underlying pathology such as carcinoma, endometriosis or fibroids
- Currently receiving specialist medical care for gynaecological conditions
- Pending litigation

Please tell us about all suitable patients, *whatever* their decision.

Invitation to Patients

“Would you be interested in taking part in some research to see if acupuncture helps women with heavy periods?”

The research would involve your filling in some questionnaires about your health and giving your permission for the researcher to see your medical records. It may also involve your being offered a course of acupuncture treatment. Not all patients will be given this option, but if you are offered acupuncture, you can choose whether or not to have treatment.

You don't need to decide now, but if you think you might be interested your GP can give you some information about the research to read at home, and ask the researcher to call you to discuss this further.”

Please fax the completed form overleaf to the research centre.

Confidential Study Fax Number: 01904 782 991

Thank you for your help.

SECTION A : To be completed for EACH suitable patient

I.D. For office use only	Consultation Date	Date of Birth or Age	Duration of Symptoms of Menorrhagia (Please tick one)
			<input type="radio"/> Less than 6 months <input type="radio"/> 6 months to 1 year <input type="radio"/> 1 to 2 years <input type="radio"/> 2 to 5 years <input type="radio"/> More than 5 years

SECTION B : To be completed for EACH patient who may want to take part in the research

Patient's Name	Address	Telephone Number

Name of GP:

I freely give my consent for the GP named above to **transfer my name, address and telephone number to Alison Gamon**, a researcher at the University of York.

Signature of Patient Date

Signature of GP Date

**SECTION C : To be completed for EACH patient who does not want to take part in research.
Please indicate below the reason(s) why:**

(Please tick all that apply)

- | | |
|---|---|
| <input type="radio"/> Dislike of needles | <input type="radio"/> Does not believe acupuncture can help menorrhagia |
| <input type="radio"/> Dislike of complementary medicine | <input type="radio"/> Getting to acupuncture is a problem (transport or cost) |
| <input type="radio"/> Dislike of research | <input type="radio"/> Other (please state): |
| <input type="radio"/> No time | |
| <input type="radio"/> Wants other treatment | |

Confidential Study Fax Number: 01904 782 991

Thank you for completing this form.

Appendix 16

Article about ACUMEN in a local newspaper:

Evening Press, Monday, September 17th 2001

Needle work

A pioneering new clinical study in York into the effectiveness of acupuncture could bring relief to women who suffer from heavy periods. STEPHEN LEWIS and JO HAYWOOD report

JANET FEARN has always been an active woman who loves to get out and about. In her work as a freelance entertainment manager, she's had to be. So when at the beginning of this year she began to suffer heavy periods, she felt as if her life had been turned upside down.

By July, she was bleeding heavily five days out of every 14. This left her wiped out and drained to the point where, on some days, she'd get up at 9am and have to go back to bed a couple of hours later.

There was also the sheer inconvenience of not being able to go out. "I couldn't wear anything nice to go out for the evening if it was at all light coloured," she said.

It even began to affect her work, to the point where she was scheduling meetings around her periods. "It was controlling my whole life," she said. "It totally depressed me."

The 43-year-old, from Acomb, tried HRT but without result. In desperation, she turned to acupuncture, which she had tried before, with good results, for back and shoulder pain.

The results this time were no less astonishing.

Within two weeks of beginning treatment, the frequency of her periods had begun to reduce – and within two months, she was almost back to normal. "This last month I went 30 days," she said. "It's been a godsend, an absolute godsend. I can't say I didn't expect it to help, but I hadn't expected such benefits so quickly."

Janet is not alone in discovering just how effective acupuncture can be for the treatment of period problems. A pioneering new study in York – involving the Foundation for Traditional Chinese Medicine, alongside research staff from the universities of York and Sheffield – aims to assess the scientific evidence for the effectiveness of acupuncture for women with period problems.

Already, 12 women have signed up for the year-long trial, and researchers are looking to recruit 28 more. Half of the 40 women in the trial will be offered acupuncture – treatment will be provided by three of the city's many experienced practitioners – while the other half will act as a 'control'. The women's progress over the next 12 months will be closely monitored.

It is the first such study of its kind in the country and it could be the first step towards getting the treatment properly recognised and available free on the NHS.

"We know from previous research that acupuncture has quite a profound effect on the female endocrine system, and that it regulates the production of hormones through the menstrual cycle," said Alison Gamon, of the University of York's Department of Health Sciences. "But there is a definite need for more research evidence."

Being able to demonstrate to the satisfaction of mainstream health professionals that acupuncture really does work is important. Heavy periods are the most common cause of

anaemia in the Western World, Alison says – as well as causing loss of self confidence and leading some women to feel trapped in their homes for fear of heavy bleeding if they go out.

Many women don't want to go down the route of having a hysterectomy, she says – but are unaware of the alternatives available. "So we're responding to the fact that there is a need for more supportive and effective treatment options."

One woman who balked at the idea of an operation – even though her two sisters had hysterectomies – is 'Christine', a 47-year-old local authority worker from York.

At the beginning of this year, her periods came more and more frequently – until she had three in six weeks. This left her drained, constantly tired and light-headed. But she didn't want a hysterectomy.

"There are other ways that the body can heal itself rather than having to be opened up. Why should we have to cut bits out?" she said.

Christine, too, joined the trial – and after three months of treatment is already seeing the benefits. She has had no more heavy bleeding and the length of time between periods has gradually increased, from just 20 days when she began to 25 now.

She also feels she has far more energy than before.

"My husband has noticed I have a lot more energy," she said. "I hadn't realised it, but I think I had probably been going downhill gradually for some time."

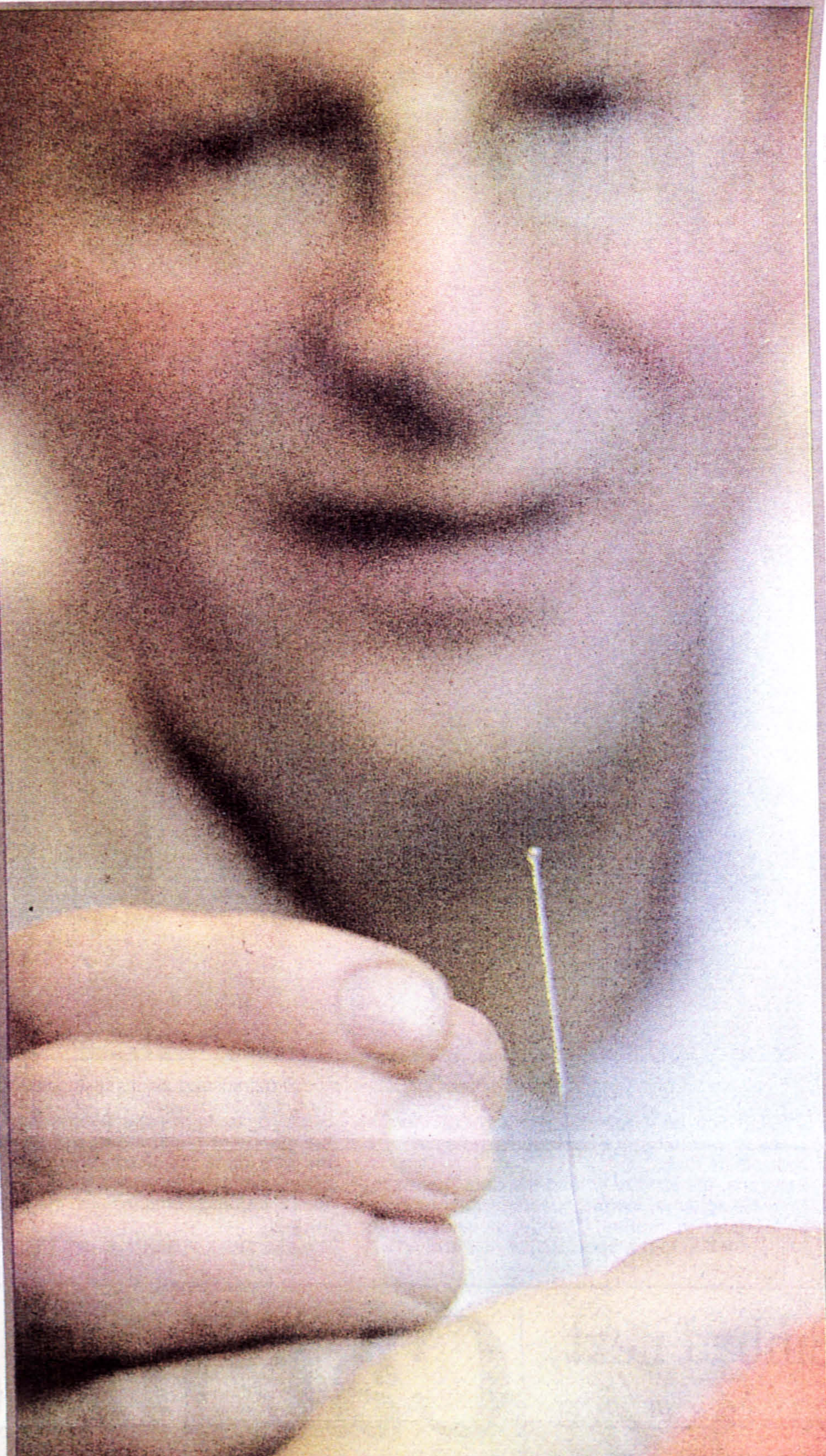
Acupuncturist Hugh MacPherson, of the York Clinic of Complementary Medicine in Tadcaster Road, is one of the three practitioners providing treatment for women taking part in the study. He said many women with heavy periods simply assumed there was little that could be done. He hopes the trial will raise awareness about how effective acupuncture can be.

"A lot of women who have problems with heavy periods don't think they can get much help," he said. "They're not aware of what acupuncture can do."

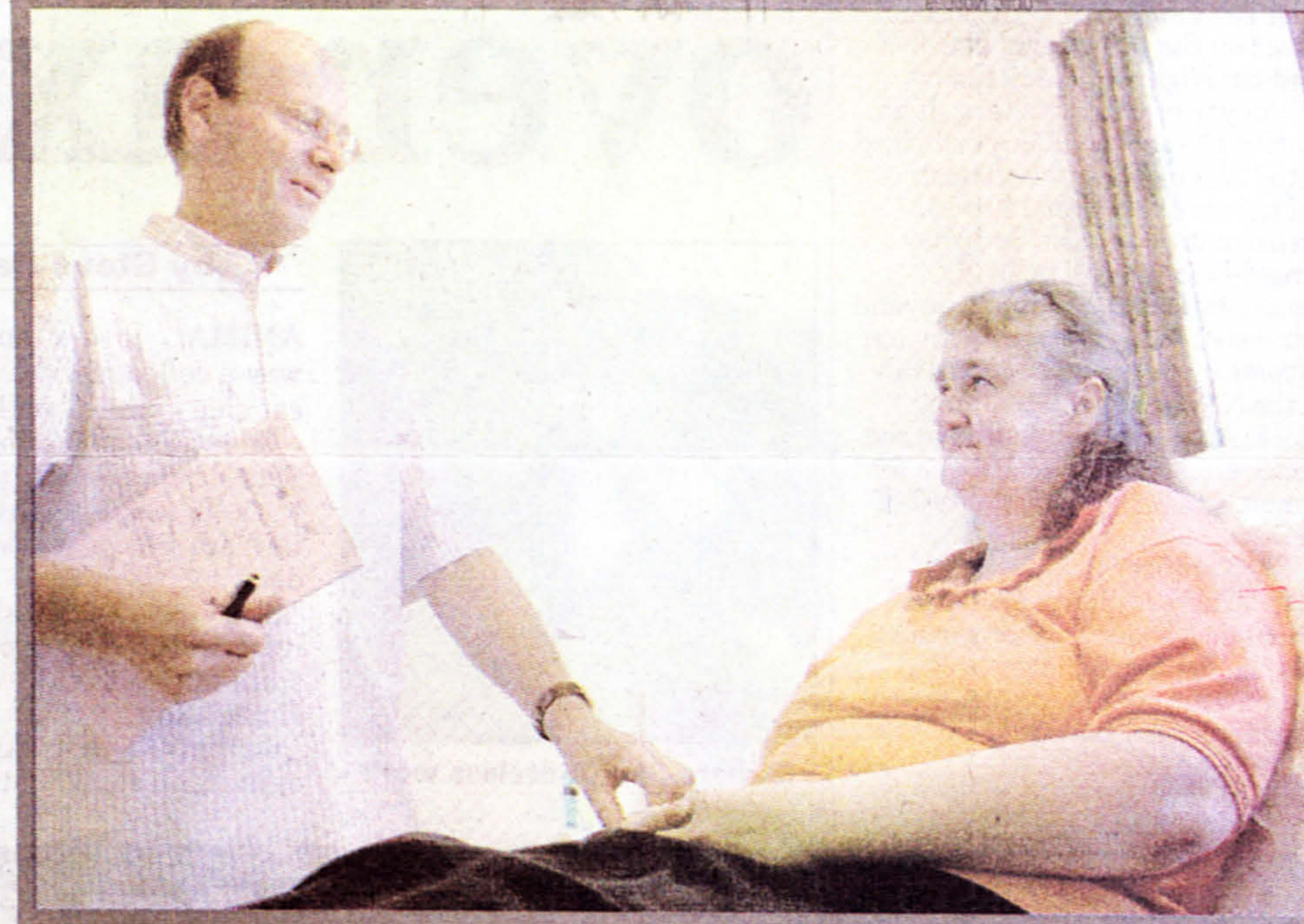
PAM Emmett is one woman who was just putting up with her monthly heavy periods, because she didn't realise she had any choice. The 44 year old from Osbalwick suffers terrible abdominal pain, bleeds heavily, feels relentlessly tired and run down, and becomes intolerant and tetchy with her family and friends.

"But I just thought that heavy periods month in and month out were my lot in life," she said. "I knew what I was suffering wasn't normal but I thought there was nothing I could do about it."

That was until she signed up for the trial. She has had two acupuncture sessions so far. The therapist inserts fibre-fine needles into Pam's wrists, stomach and ankles – all pressure points with direct links to the abdomen and ovaries – and lays hands on problem



Acupuncturist Hugh MacPherson, above, and below with patient Janet Fearn



areas to try to bring a much-needed balance to her body.

While it is too early to record any positive results yet, Pam is quietly confident that it will help.

"To be honest with you, at the moment I'm enjoying the fact that I have someone to talk over my problems with; that in itself is very therapeutic," she said. "I don't know whether the acupuncture is actually working yet, but I'm certainly more relaxed at the end of the sessions."

In common with other women taking part,

she is not fazed by the tiny needles.

"I have had to put my normal life on hold for two weeks a month for as long as I can remember," she said. "If it takes sticking needles into my ankles to put things right, it's worth it."

Researchers are still looking for women who suffer from heavy periods to take part in the study. If you are interested, contact Alison Gamon on 01904 781630 or talk to your doctor.

Appendix 17

Letter to GP about facilitating patient referral to ACUMEN

ACUMEN - A Research Collaboration

THE UNIVERSITY of *York*

Department of Health Sciences

FOUNDATION for TRADITIONAL

CHINESE MEDICINE

Registered Charity
No. 702083



MEDICAL CARE

RESEARCH UNIT

University of Shef-



ACUMEN Research Centre

122A Acomb Road, York, YO24 4EY

Tel: 01904 781630

[Date]

Dear Dr

Re: [patient's name, address and date of birth]

I am writing on behalf of your patient, [name], who contacted me today to express her interest in taking part in the Acupuncture for Menorrhagia Exploratory Trial. To facilitate this process I have enclosed a brief *Referral Consent Form* and a *Patient Information Sheet* for [name].

[Name] has arranged an appointment with you to discuss the possibility of her joining the study. For her to be eligible she will need to be aged 18 years or over and have menorrhagia in the absence of serious underlying pathology such as fibroids.

If you find that [name] does fulfil this criterion I would be most grateful if you could complete sections A and B of the *Referral Consent Form* with [name], and fax this to the research centre. I will then contact her to arrange a time to talk about the study in more detail.

Thank you for your help in this matter, and if you have any queries or concerns, please do not hesitate to contact me at the above address.

Yours sincerely

Ms Alison Gamon BA MSc MBAcC

Lear Researcher

Department of Health Sciences and Clinical Evaluation

University of York

Enclosed:

1. Referral consent form
2. Patient information sheet

Appendix 18

Letter from a GP to eligible patients on their database

7th March 2002

Dear

I am delighted to be able to invite you to take part in a pioneering new clinical study, taking place here in York. The study is looking at the effectiveness of acupuncture for heavy periods (also known as menorrhagia), and could provide you with a unique opportunity to try a course of acupuncture free of charge. Acupuncture is a natural or low-tech therapy that has been found to regulate menstruation by regulating hormone levels and blood loss. It is also a very safe treatment.

The study will involve 40 women in total, half of whom will be offered referral for acupuncture. Just seven places remain, three of which would lead to the offer of acupuncture. The York-based acupuncturists taking part in this study are fully qualified members of the British Acupuncture Council with over 10 years post-qualification clinical experience.

Whether you receive the offer of acupuncture or not, or even if you do not want acupuncture at all, I assure you that your involvement in this study would be invaluable. That is because all 40 women are being asked to complete 3 health questionnaires over a period of 6 months. By tracking your experience of treatments for heavy periods over this time, researchers will be able to see which treatment options women find most helpful. This will then enable them to give women and GPs much better information about the range of treatments available for heavy periods, including acupuncture.

This is an excellent opportunity for women who are interested in trying acupuncture or who would like to get involved with research into heavy periods. So if you are interested, please do contact Alison Gamon, a researcher at the University of York, either by phone (01904 781630) or by sending the reply slip on the back of this letter in the enclosed S.A.E. Alison will then send you an information booklet before contacting you to talk about the study in more detail.

Yours sincerely



Dr Manuela Fontebasso

Enclosed:

- Further information about the study
- Stamped envelope addressed to Alison Gamon, the researcher. (The reply slip is on the reverse of this letter).

40413
925
1112

137

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27

28

I am interested in taking part in the *Acupuncture for Menorrhagia Study* and would like to receive further information:

Name

Address

Telephone

Post code

Appendix 19

Summary of the ACUMEN trial

that was included with the letter of invitation to patients listed on a GP database



Alison Gamon
ACUMEN Researcher

ACUMEN Research Centre
122a Acomb Road
York YO24 4EY
Tel: 01904 781630

Version: 24.01.2002

ACUMEN

ACUpuncture for MENorrhagia Study

Heavy periods (menorrhagia)

Menorrhagia, or heavy periods, can affect a woman's physical health, her emotional well-being and her ability to engage fully in life.

Treatments

There are a number of medications that GPs can prescribe to help reduce the blood loss and improve a woman's quality of life. But, as with all treatments, different people respond differently. What works for one woman many not work for another. Each medication also carries its own set of side effects. Some women find the side effects from medication too uncomfortable to manage. Some women would also like to be able to avoid taking medication. Amongst non-drug treatments, studies suggest that acupuncture can help to reduce blood loss.

The purpose of this study

The purpose of this study is to see just how good acupuncture can be for heavy periods.

Taking part

Because we don't know which way of

treating women with heavy periods is best, we need to make comparisons. That is why in this study a computer allocates patients to one of two groups: *The Acupuncture Group* or *The Normal Treatment Group*. We can then look to see which treatment options worked best.

You will have a **50:50 chance of being offered free acupuncture** at your choice of one of two private clinics in York. (*Remember, because it is an offer, you don't have to have acupuncture. It really is up to you. We would like your help in this study whatever your decision and preferred treatment.*)

Improving women's health care

Whichever group you are in, your help is invaluable. You will help us to give women and GPs much better information about the treatments available for heavy periods.

Only 7 places left!

If you think you might like to take part in the study, and wish to receive further information, please write

using the reply slip and enclosed SAE. Alternatively, you can contact Alison Gamon at the research centre on **01904 781630**. Alison will always do her very best to help.

Heavy periods affect many women's lives

**Studies suggest that
acupuncture can help
to regulate periods
and reduce blood
loss.**



**If you are interested
in taking part in the
ACUMEN study,
and would like to
receive further
information,
please return
the reply slip using
the enclosed SAE
or
ring the researcher
Alison Gamon on
01904 781630**

Appendix 20

Letter of reply from candidate to interested patients listed on a GP database

ACUMEN - A Research Collaboration

THE UNIVERSITY of *York*

Department of Health Sciences

FOUNDATION for TRADITIONAL

CHINESE MEDICINE

Registered Charity
No. 702083



MEDICAL CARE

RESEARCH UNIT

University of Shef-



ACUMEN Research Centre

122A Acomb Road, York, YO24 4EY

Tel: 01904 781630

[Date]

Dear

Re: Acupuncture for Menorrhagia (Heavy Periods) Study

Thank you so much for your interest in the Acupuncture for Menorrhagia (ACUMEN) Study. As requested, I have enclosed an *ACUMEN Patient Information Sheet*, which explains why the research is being done and what it would involve for you. Please take time to read this information carefully. You may also find it helpful to discuss it with friends, relatives and your GP, Dr Fontebasso.

I will ring next week to ask whether or not you would like to meet with me to discuss the study further before deciding whether or not to take part. In the meantime, if you have any questions please do not hesitate to contact me at the research centre on 01904 781630.

Thank you again for your interest in ACUMEN.

With very best wishes

Ms Alison Gamon BA MSc MBAcC

Lear Researcher

Department of Health Sciences and Clinical Evaluation

University of York

Appendix 21

ACUMEN acupuncture treatment record:

Patient Treatment Booklet

Please note that the original was printed on A3 folded; the cover was printed on 100gm lilac paper; there was an additional side of A4 for the "case history"; and a total of 20 sections for recording treatment and responses/adverse reactions to acupuncture.



PATIENT TREATMENT BOOKLET

DATE of REFERRAL :	____/____/____
PATIENT NAME :	_____
PRACTITIONER :	_____

Patient's Address		GP
		GP Address
Home phone no:	D.O.B	Date of letter(s) sent to GP and phonecalls:--
Work phone no:	Age:--	
Occupation		

Total no. of acupuncture treatments:	Date of first: ____/____/____	Date of last: ____/____/____
--	----------------------------------	---------------------------------

**Please return this treatment booklet to Alison Gamon
at the end of the patients' course of treatment (see address below)**

Practitioners' Checklist:

The returned treatment booklet has been completed ☐

The treatment report at the back of the booklet has been completed ☐

I understand that the researcher will type the treatment report on study notepaper
and send it to the patients' GP on my behalf ☐

I understand that this treatment booklet will be returned to me, the practitioner, within 7 working days ☐

Presenting Conditions

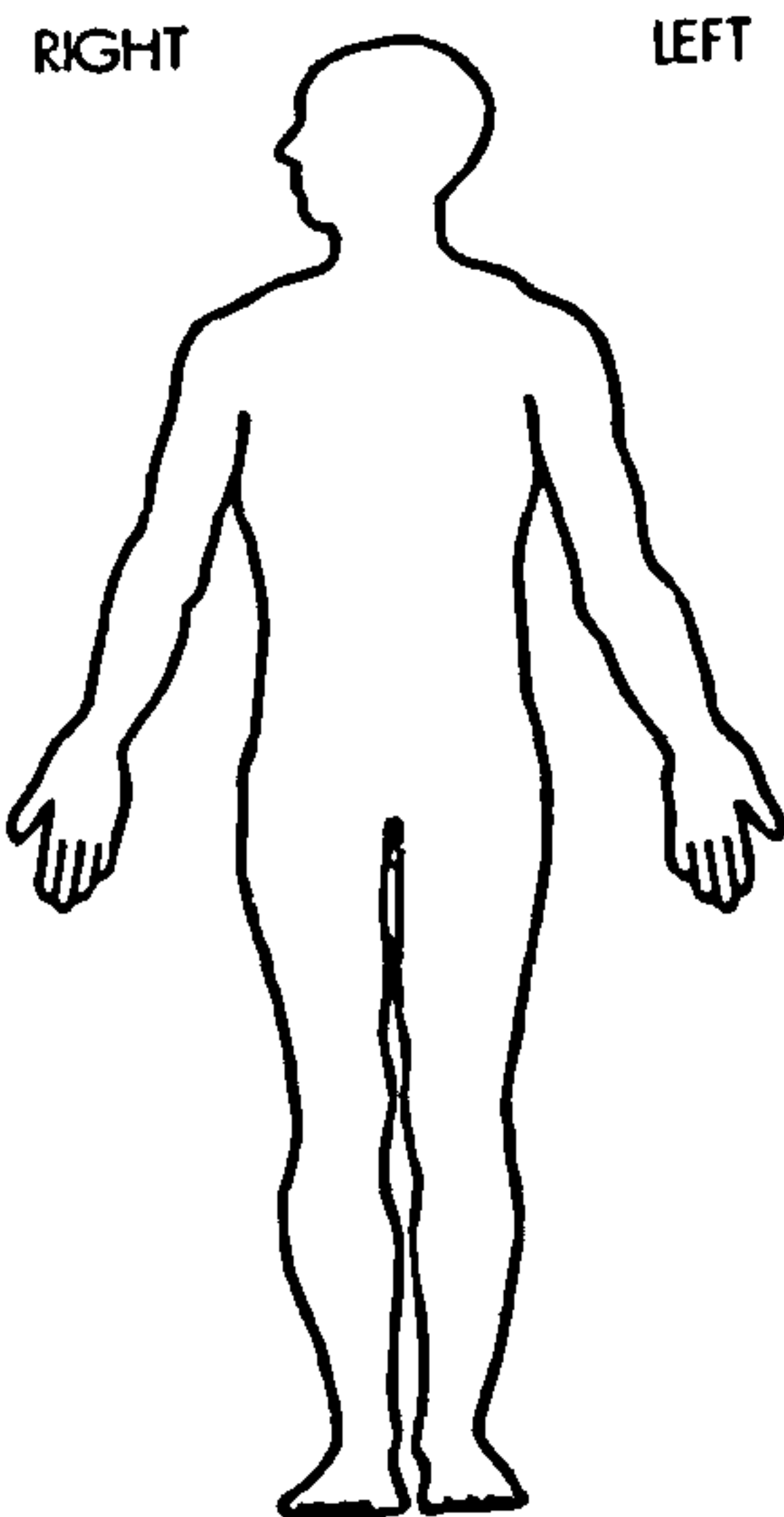
1
2
3

TREATMENT PLAN

No. of treatments agreed:

Frequency of treatments:

SPECIAL NOTES
(sensitive to needles, position for treatment, pacemaker etc..)



Case History:

Skin/Hair/Nails:
Headaches:
Ears/Hearing:
Eyes/Vision:
Lungs/Breathing:
Heart/Palpitations:
Digestion:
Stools:
Urine:
Appetite/Thirst:
Diet:
Allergies:
Hot/Cold:
Sweating:
Energy:
Exercise:
Relaxation:
Sleep:
Nature of occupation/Work environment::
Family/Home environment:
Emotional type:
Appearance/Face/Body/Demeanour:

Medical History (including mother/sister’s menstrual history):

Medication:

Tongue diagnosis:

Pulse diagnosis:

Left	Right
------	-------

1	1
2	2
3	3

Further Information:

IDENTIFICATION of PATTERNS	
Syndromes in order of importance	Symptoms and signs
AETIOLOGY	
Syndromes	Aetiological factors
PATHOLOGY & AETIOLOGY DIAGRAM	

Treatment No.1

Date:

Patient's progress etc.:

Acupuncture points prescribed:

☐ Acupressure ☐ Moxa ☐ Cupping ☐ Ear-acupuncture ☐ Chinese herbs ☐ Other

Other interventions (please tick and give details):

☐ Moxa ☐ Dietary advice ☐ Exercise ☐ Self-massage ☐ Relaxation techniques ☐ Other

Self-help treatments prescribed/ facilitating and supporting lifestyle change (please tick and give details):

Practitioner's intentions, observations and impressions:

TREATMENT SENSATIONS & REACTIONS

Type 1: Sensations and reactions communicated spontaneously by the patient during or after treatment, or at the next visit.

- | | | |
|---------------------------------|--------------------------------------|--|
| <input type="radio"/> Energised | <input type="radio"/> Light-headed | <input type="radio"/> Emotional release |
| <input type="radio"/> Hungry | <input type="radio"/> Feeling faint | <input type="radio"/> Other (please specify) |
| <input type="radio"/> Relaxed | <input type="radio"/> Dizzy | |
| <input type="radio"/> Tired | <input type="radio"/> Feeling sick | |
| <input type="radio"/> Drowsy | <input type="radio"/> Heavy sweating | |

Type 2: An aggravation of existing symptoms following the previous treatment:

What symptom(s) were aggravated or made worse, by the previous acupuncture treatment? Please write below:	How soon after the acupuncture treatment did this symptom(s) start feeling worse?	For how long did this worsening of symptoms last?	How is this symptom now, compared to how it was before the aggravation? Please tick one:
	<input type="radio"/> Immediately <input type="radio"/> Same day <input type="radio"/> Next day <input type="radio"/> More than 2 days after	<input type="radio"/> Less than 1 day <input type="radio"/> 1 day <input type="radio"/> 2 days <input type="radio"/> 3 days <input type="radio"/> 4 days <input type="radio"/> 5 days <input type="radio"/> More than 5 days	<input type="radio"/> Much better than before the aggravation <input type="radio"/> A bit better than before the aggravation <input type="radio"/> Same as before the aggravation <input type="radio"/> Worse than before the aggravation

Type 3: Adverse events:

- | | | |
|---|--|---------------------------------------|
| <input type="radio"/> Pain on insertion of the needle | <input type="radio"/> Forgotten needle | <input type="radio"/> Skin reactions |
| <input type="radio"/> Bruising from the needle | <input type="radio"/> Broken needle | <input type="radio"/> Cross infection |
| <input type="radio"/> Bruising from cupping | <input type="radio"/> Moxa burn | <input type="radio"/> Pneumothorax |
| <input type="radio"/> Bleeding for more than 10 seconds | | |

- ☐ Fainting
☐ Fit (convulsions)
☐ Vomiting
☐ Unacceptable worsening of existing symptoms
☐ Other

Please give details of the incident:

Practitioner Treatment Report

To be completed by the practitioner at the end of study treatment

Date:

Re: (Patient's name).....
(Address)(DoB).....

Thank you for referring(name) to me through the Acupuncture for Menorrhagia exploratory trial. She has received a course of acupuncture sessions, between (date).....and (date)

Please state the patient's response to treatment and treatment outcome:

.....
.....
.....
.....
.....
.....
.....
.....

Please state what agreement you and the patient have come to, about future treatment, now that the course of acupuncture provided as part of the ACUMEN study has come to an end:

.....
.....
.....
.....
.....
.....
.....

Practitioner's signature:

.....

This treatment report will be typed on study notepaper by the researcher, Alison Gamon, and posted to the patient's GP on behalf of the practitioner.

Appendix 22

Letter of consent to participate in ACUMEN from acupuncturist Alison Gould



61 Micklegate, York YO1 6LJ
Tel: (01904) 343305 Fax: (01904) 330370
e-mail: info@chinese-medicine.co.uk
website: www.chinese-medicine.co.uk

22.2.01

Dear Alison

Re: Acupuncture for Menorrhagia Exploratory Study

Thank you for inviting me to assist in this trial. I would be pleased to participate according to the outline received, ie to treat between 5 and 10 patients with acupuncture. I am also happy to be interviewed by you to discuss the treatment of any 2 of these patients.

I confirm that I am a member of the British Acupuncture Council and hold indemnity insurance.

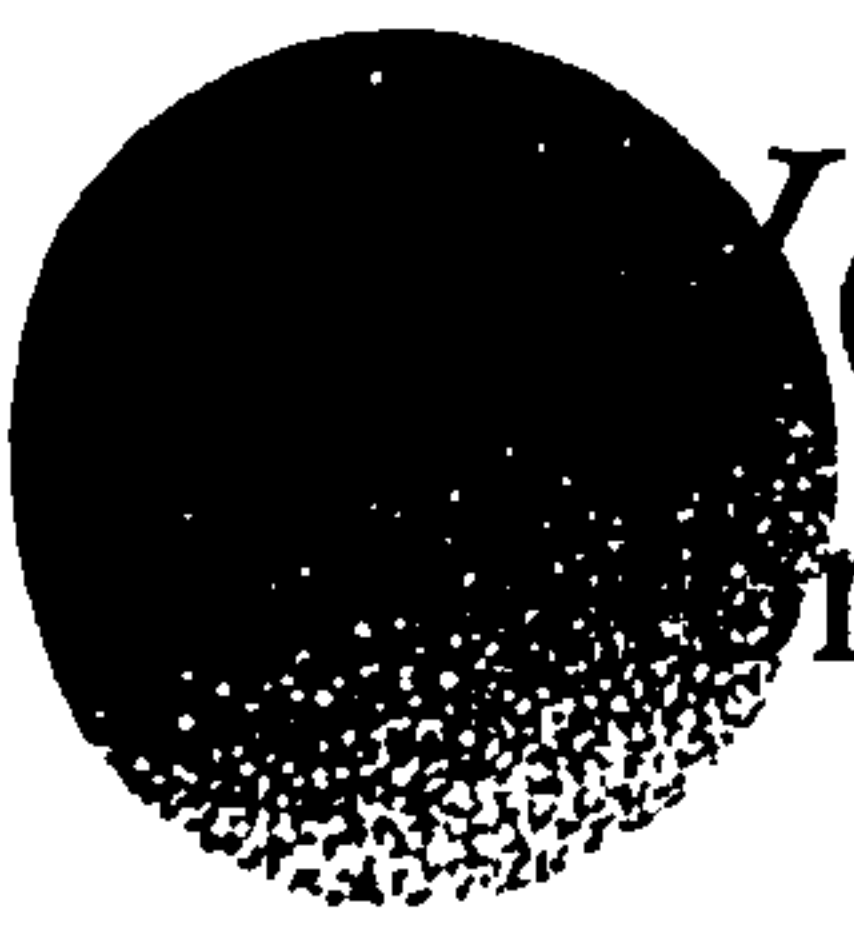
I look forward to being part of this interesting study.

Yours sincerely

Alison J Gould
Clinical Director

Appendix 23

Letter of consent to participate in ACUMEN from acupuncturist Hugh MacPherson



York Clinic

for Complementary Medicine

296 Tadcaster Road, York YO24 1ET
Telephone (01904) 709688
email@yorkclinic.com
www.yorkclinic.com

Alison Gamon
Acumen Project
122A Acomb Road
York
YO24 4EY

15 January 2001

Dear Alison,

Re: Acupuncture and Menorrhagia Exploratory Trial

I am writing to confirm my willingness to participate in this trial, treating between 5 and 10 patients with acupuncture. I will also be happy to attend interviews with you to discuss the treatment.

I confirm I am a member of the British Acupuncture Council, and have professional indemnity insurance. I look forward to being involved.

Yours sincerely,

Hugh MacPherson
PhD MBAcC MRCHM

Appendix 24

Letter of consent to participate in ACUMEN from acupuncturist June Tranmer

THE HEALING CLINIC

Alison Gamon
ACUMEN Project
122a Acomb Road
York
YO24 4EY

Jan. 16th, 2001

Dear Alison;

Re: Acupuncture for Menorrhagia Exploratory Trial

Thank you for inviting me to assist in this trial. I would be very pleased to participate according to the outline I have received: to treat between 5 and 10 patients with acupuncture. I am also happy to participate in the interviews with you to discuss the treatment of two of these patients.

I confirm that I am a member of the British Acupuncture Council and have professional indemnity insurance.

I look forward very much to being involved.

Yours sincerely,



June Tranmer, BAHons, Dip Ac, MBAcC, PGCE

Appendix 25A

Letter sent to patients in the Acupuncture Group at 3-Month Follow-Up



Alison Gamon
ACUMEN Researcher

ACUMEN Research Centre
122a Acomb Road
York YO24 4EY
Tel: 01904 781630

ACUMEN

Acupuncture for Menorrhagia Study **3-month follow-up Questionnaire**

Dear

Thank you for taking part in the York and Selby *Acupuncture for Menorrhagia Study (ACUMEN)*. It is now 3 months since you first joined the study, which is why I am sending you the 2nd of your ACUMEN questionnaires (only 1 more to go!). Your questionnaire answers are very important. Without them we would be unable to see just how helpful acupuncture might be for the thousands of women whose lives are affected by heavy periods.

This questionnaire is very similar to the first, and most of the questions about your health will be familiar to you. The main difference is the addition of a *Health Care Costs* questionnaire. Your answers to these questions will help us to see how much acupuncture would cost and save the NHS and how much it would cost and save women.

This questionnaire should take no more than 20 minutes to complete. But if you do have any problems filling it in, please do not hesitate to contact me at the above address. If you'd rather meet in person, as opposed to talking over the phone, just let me know.

Thank you again for taking part in the *Acupuncture for Menorrhagia Study*.

With very best wishes

Alison Gamon,
University of York

Appendix 25B

Letter sent to patients in the Acupuncture Group at 6-Month Follow-Up



Alison Gamon
ACUMEN Researcher

ACUMEN Research Centre
122a Acomb Road
York YO24 4EY
Tel: 01904 781630

ACUMEN

Acupuncture for Menorrhagia Study **6-month follow-up Questionnaire**

Dear

Thank you for taking part in the York and Selby *Acupuncture for Menorrhagia Study (ACUMEN)*. It is now 6 months since you first joined the study, which is why I am sending you the last of your ACUMEN questionnaires!

Your questionnaire answers are very important. Without them we would be unable to see just how helpful acupuncture might be for the thousands of women whose lives are affected by heavy periods.

This questionnaire is almost identical to the last one, and the questions about your health and health care costs will be familiar to you. We have just added 3 short questions that ask, "*knowing what you know now about treatments for heavy periods*", what treatment would you want in the future and what treatment would you recommend other women try.

It should take no more than 20 minutes to complete this questionnaire. But if you do have any problems filling it in, please do not hesitate to contact Lucy Thorpe at the above address. Lucy is taking care of the study whilst I am on maternity leave. If you'd rather meet in person, as opposed to talking over the phone, just let Lucy know.

The results of this study will be published in a health care journal sometime after the winter of 2002. If you would like me to send you a copy of the report, please tick the box at the back of the questionnaire.

Thank you again for taking part in the *Acupuncture for Menorrhagia Study*.

With very best wishes

Alison Gamon, University of York

Appendix 26

ACUMEN Baseline Questionnaire

Please note the original was printed on pink paper

ACUMEN

A Research Collaboration

THE UNIVERSITY of York
Department of Health Sciences
& Clinical Evaluation

FOUNDATION for TRADITIONAL
CHINESE MEDICINE
Registered Charity
No. 702083



MEDICAL CARE
RESEARCH UNIT
University of Sheffield



CONFIDENTIAL

Trial Participant Pre-Randomisation Questionnaire

Affix Participant Study I.D.

Enter the date the participant completed the questionnaire

BACKGROUND QUESTIONS

To begin with, we would like to ask you a few background questions about yourself.

1. What is your date of birth?
(please write your date of birth)

/

/

daymonthyear

2. What is your age?
(Please write your age)

years

3. What is your marital status?
(please tick one box)

Single

1

Married

2

Living as married

3

Separated

4

Divorced

5

Widowed

6

4. How many children do you have?
(please write in the box)

5. What type of accommodation does your household occupy?
(please tick one box)

Detached house or bungalow

1

Semi-detached house or bungalow

2

Terraced house (including end-terrace)

3

Apartment/ flat

4

Maisonette

5

Caravan or other mobile or temporary structure

6

6. Does your household own or rent the accommodation?
(please tick one box)

- Owens outright ☐ 1
- Owens with a mortgage or loan ☐ 2
- Pays part rent and part mortgage (shared ownership) ☐ 3
- Rents ☐ 4
- Lives here rent free ☐ 5

7. How old were you when you left full -time education?
e.g. school, college or university
(please cross one box)

- Age 16 or less ☐ 1
- Age 17-19 ☐ 2
- Age 20 or over ☐ 3
- I am still in full-time education ☐ 4

If you are still in full-time education please go straight to page 3 question 1

8. Since leaving school, college or university have you had any more
full or part-time further or higher education?
(please cross one box)

- Yes ☐ 1
- No ☐ 2

9. Are you?
(please cross one box)

- Looking after the home and family and not looking for paid employment ☐ 1
- Employed full-time ☐ 2
- Employed part-time ☐ 3
- Unemployed ☐ 4
- Unable to work because of poor health ☐ 5

10. What is your ethnic group?

Please choose **one** section from A to E, then tick the appropriate box to indicate your cultural background.

- A****White**

☐ English☐ Irish☐ Scottish☐ Welsh☐ Any other White background,
(Please write below)

.....

- B****Mixed**

☐ White and Black Caribbean☐ White and Black African☐ White and Asian☐ Any other Mixed background,
(Please write below)

.....

- C****Asian or Asian British**

☐ Indian☐ Bangladeshi☐ Any other Asian background,
(Please write below)

.....

- D****Black or Black British**

☐ Caribbean☐ African☐ Any other Black background,
(Please write below)

.....

- E****Chinese or other ethnic group**

☐ Chinese☐ Any other,
(Please write below)

.....

YOUR HEALTH IN GENERAL - SF-36

The following questions ask you about your health. This information will help keep track of how you feel and how well you are able to do your usual activities.

If you are unsure how to answer a question, please give the best answer you can.

1. In general, would you say your health is:
(Please tick one)

- | | | |
|------------------|-----------------------|----------|
| Excellent | <input type="radio"/> | 5 |
| Very Good | <input type="radio"/> | 4 |
| Good | <input type="radio"/> | 3 |
| Fair | <input type="radio"/> | 2 |
| Poor | <input type="radio"/> | 1 |

2. Compared with one year ago, how would you rate your health now?
(Please tick one)

- | | | |
|--|-----------------------|----------|
| Much better now than one year ago | <input type="radio"/> | 5 |
| Somewhat better now than one year ago | <input type="radio"/> | 4 |
| About the same as one year ago | <input type="radio"/> | 3 |
| Somewhat worse now than one year ago | <input type="radio"/> | 2 |
| Much worse now than one year ago | <input type="radio"/> | 1 |

HEALTH AND DAILY ACTIVITIES

3. The following questions, in the table below, are about activities you might do during a typical day.

Does your health now limit you in these activities? If so, how much?

(Please circle one number on each line)

ACTIVITIES	Yes, limited a lot	Yes, limited a little	No, not limited at all
a. Vigorous activities , such as running, lifting heavy objects, participating in strenuous sports	1	2	3
b. Moderate activities , such as moving a table, pushing a vacuum cleaner, bowling or playing golf	1	2	3
c. Lifting or carrying groceries	1	2	3
d. Climbing one flight of stairs	1	2	3
e. Climbing several flights of stairs	1	2	3
f. Bending, kneeling or stooping	1	2	3
g. Walking more than one mile	1	2	3
h. Walking several hundred yards	1	2	3
i. Walking one hundred yards	1	2	3
j. Bathing and dressing yourself	1	2	3

4. **During the past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of your physical health?**

(Please circle one number on each line)

During the past 4 weeks, how much of the time have you.....due to your physical health?	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Cut down on the amount of time you spent on work or other activities	1	2	3	4	5
b. Accomplished less than you would like	1	2	3	4	5
c. Were limited in the kind of work or other activities you could do	1	2	3	4	5
d. Had difficulty performing the work or other activities (for example, it took extra effort)	1	2	3	4	5

5. During the **past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of any emotional problems** (such as feeling depressed or anxious)?

(Please circle one number on each line)

During the past 4 weeks, how much of the time have you.....as a result of any emotional problems?	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Cut down on the amount of time you spent on work or other activities	1	2	3	4	5
b. Accomplished less than you would like	1	2	3	4	5
c. Did work or other activities less carefully than usual	1	2	3	4	5

6. **During the past 4 weeks**, to what extent has your **physical health or emotional problems** interfered with your **normal social activities** with family, friends, neighbours or groups?

(Please tick one)

Not at all	<input type="radio"/>	5
Slightly	<input type="radio"/>	4
Moderately	<input type="radio"/>	3
Quite a bit	<input type="radio"/>	2
Extremely	<input type="radio"/>	1

7. How much **bodily pain** have you had **during the past 4 weeks**?

(Please tick one)

None	<input type="radio"/>	6
Very mild	<input type="radio"/>	5
Mild	<input type="radio"/>	4
Moderate	<input type="radio"/>	3
Severe	<input type="radio"/>	2
Very severe	<input type="radio"/>	1

8. **During the past 4 weeks**, how much did **pain** interfere with your **normal work** (including work outside the home and housework)?

(Please tick one)

Not at all	<input type="radio"/>	5
A little bit	<input type="radio"/>	4
Moderately	<input type="radio"/>	3
Quite a bit	<input type="radio"/>	2
Extremely	<input type="radio"/>	1

YOUR FEELINGS

9. These questions, in the table below, are about how you feel and how things have been with you, **during the last 4 weeks**.

For each question please indicate one answer that comes closest to **the way you have been feeling**, during the past 4 weeks.

(Please circle one number on each line)

How much of the time during the past 4 weeks.....	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Did you feel full of life?	5	4	3	2	1
b. Have you been very nervous?	1	2	3	4	5
c. Have you felt so down in the dumps that nothing could cheer you up?	1	2	3	4	5
d. Have you felt calm and peaceful?	5	4	3	2	1
e. Did you have a lot of energy?	5	4	3	2	1
f. Have you felt down-hearted and <u>low</u> ? UKD "depressed"	1	2	3	4	5
g. Did you feel worn-out?	1	2	3	4	5
h. Have you been happy?	5	4	3	2	1
i. Did you feel tired?	1	2	3	4	5

GENERAL HEALTH

10. *During the past 4 weeks*, how much of the time has your **physical health or emotional problems** interfered with your **social activities** (like visiting friends, relatives, etc.)?

(Please tick one)

- All of the time ☐ 5
- Most of the time ☐ 4
- Some of the time ☐ 3
- A little of the time ☐ 2
- None of the time ☐ 1

11. How **TRUE** or **FALSE** is *each* of the following statements for you?

(Please circle one number on each line)

Statements:	Definitely True	Mostly True	Not sure	Mostly False	Definitely False
a. I seem to get ill more easily than other people	1	2	3	4	5
b. I am as healthy as anybody I know	1	2	3	4	5
c. I expect my health to get worse	1	2	3	4	5
d. My health is excellent	1	2	3	4	5

YOUR HEALTH TODAY

This question asks you:

“How good or bad is your health today?”

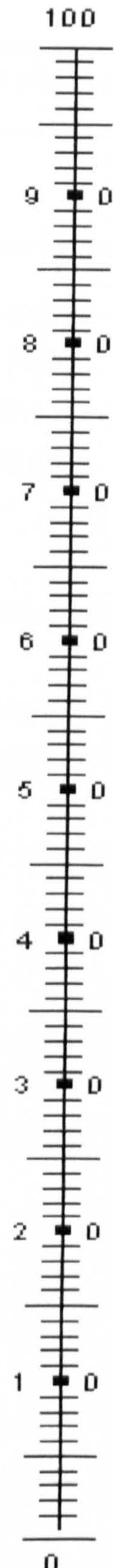
To help you answer this question, we have drawn a scale that looks like a thermometer.

Imagine that at the very top, **at 100, is the best health you can imagine experiencing today**, and that at the very bottom, **at 0, is the worst health you can imagine experiencing today**.

To indicate how good or bad your health is today, **please draw a line from ‘your health today’, to the point on the thermometer** that best represents how good or bad your health is today.

Your health today

Best health imaginable



Worst health imaginable

YOUR PERIODS (AMQ)

The following questions ask you about your periods and how they have affected your ability to manage in everyday life.

If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult next to your best answer.

1. On average, *during the last three months*, for how many days did your period last?

(Please cross one box)

Less than 3 days ☐ 1

Between 3 and 7 days ☐ 2

Between 8 and 10 days ☐ 3

More than 10 days ☐ 4

2. On average, *during the last three months*, were your periods regular or irregular?

(Please cross one box)

Regular ☐ 1

Irregular ☐ 2

3. On average, *during the last three months*, how many days were there from the first day of one period to the first day of the next period?

(Please cross one box)

Less than 21 days ☐ 1

Between 21 and 35 days ☐ 2

More than 35 days ☐ 3

4. On average, *during the last three months*, would you describe your period as?

(Please cross one box)

Light ☐ 1

Moderate ☐ 2

Heavy ☐ 3

Very Heavy ☐ 4

5. On average, **during the last three months**, for how many days of each period was the bleeding heavy?
(Please cross one box)

- Not heavy ☐ 1
- Between 1 and 3 days ☐ 2
- Between 4 and 6 days ☐ 3
- Between 7 and 10 days ☐ 4
- More than 10 days ☐ 5

6. On average, **during the last three months**, have your periods been associated with any pain?
(Please cross one box)

- No pain at all ☐ 1
- Slight pain ☐ 2
- Moderate pain ☐ 3
- Severe pain ☐ 4
- Very severe pain ☐ 5

7. On average, **during the last three months**, have you had any problems with soiling/staining any of the following because of your periods?
(Please cross all that apply)

- No, not at all ☐
- Soiling/staining of your outer-clothes/over-garments ☐ 1
- Soiling/staining of your bedlinen ☐ 2
- Soiling/staining of your upholstery ☐ 3

8. On average, **during the last three months**, have your periods prevented you from carrying out your work, housework or other daily activities?
(Please cross one box)

- No, not at all ☐ 1
- I could continue to work, but my work suffered ☐ 2
- Yes, usually for no more than one day with each period ☐ 3
- Yes, usually for more than one day with each period ☐ 4

9. On average, **during the last three months**, have you been confined to bed with each period?

(Please cross one box)

- No, not at all ☐ 1
- Yes, for part of one day ☐ 2
- Yes, for the whole of one day ☐ 3
- Yes, for more than one day ☐ 4

10. On average, **during the last three months**, have your leisure activities been affected by your heavy periods? (Including social life, hobbies, sport).

(Please cross one box)

- Not affected by heavy periods ☐ 1
- Mildly affected by heavy periods ☐ 2
- Moderately affected by heavy periods ☐ 3
- Severely affected by heavy periods ☐ 4
- Heavy periods prevented any social life at all ☐ 5

11. On average, **during the last three months**, has your sex life been affected by your heavy periods?

(Please cross one box)

- Not affected by heavy periods ☐ 1
- Mildly affected by heavy periods ☐ 2
- Moderately affected by heavy periods ☐ 3
- Severely affected by heavy periods ☐ 4
- Heavy periods prevented any sex life at all ☐ 5
- Does not apply ☐ 6

12. On average, **during the last three months**, how many tampons might you use on the heaviest day of your period?

(Please cross one box)

- No tampons at all ☐ 1
- Between 1 and 5 tampons ☐ 2
- Between 6 and 10 tampons ☐ 3
- Between 11 and 15 tampons ☐ 4
- More than 15 tampons ☐ 5

13. On average, how many sanitary towels might you use *on the heaviest day* of your period?
(Please cross one box)
- | | | |
|-----------------------------------|--------------------------|---|
| No sanitary towels at all | <input type="checkbox"/> | 1 |
| Between 1 and 5 sanitary towels | <input type="checkbox"/> | 2 |
| Between 6 and 10 sanitary towels | <input type="checkbox"/> | 3 |
| Between 11 and 15 sanitary towels | <input type="checkbox"/> | 4 |
| More than 15 sanitary towels | <input type="checkbox"/> | 5 |

14. At any time *during the last three months*, did you require more than one form of protection at the same time (not including mini-sanitary towels or panti-liners)?
(Please cross one box)
- | | | |
|--|--------------------------|---|
| No | <input type="checkbox"/> | 1 |
| Tampon and pad together | <input type="checkbox"/> | 2 |
| Two pads together Tampon and two pads together | <input type="checkbox"/> | 3 |
| More protection than this (i.e. disposable nappies, towels etc.) | <input type="checkbox"/> | 4 |

OTHER PERIOD SYMPTOMS

This question asks about symptoms, apart from heavy bleeding, that are often associated with menstruation.

Please use the space at the bottom of the table to tell us about any symptoms you experience that are not listed here.

1. Over the past 3 months, how troublesome were the following period symptoms?

(Please circle one number in each row)

Period Symptom	Not at all troublesome	Slightly troublesome	Moderately troublesome	Very troublesome	Extremely troublesome
Period pain/ cramps	1	2	3	4	5
Backache	1	2	3	4	5
Tender or swollen breasts	1	2	3	4	5
Bloating	1	2	3	4	5
Fluid retention	1	2	3	4	5
Migraine or headache	1	2	3	4	5
Tiredness or fatigue	1	2	3	4	5
Irritability	1	2	3	4	5
Tension	1	2	3	4	5
Feeling low or depressed	1	2	3	4	5
Anxiety	1	2	3	4	5
Difficulty concentrating	1	2	3	4	5
Crying bouts	1	2	3	4	5
Clumsiness	1	2	3	4	5
Aggression	1	2	3	4	5
Other:	1	2	3	4	5
Other:	1	2	3	4	5

YOUR MOST RECENT PERIOD

The following questions ask you how much your most recent period troubled you.

If you are unsure how to answer a question, please give the best answer you can.

1. **At your most recent period**, how **troublesome** were the following symptoms?

(Please circle one number in each row)

Symptom	Not at all troublesome	Slightly troublesome	Moderately troublesome	Very troublesome	Extremely troublesome
Heavy bleeding	1	2	3	4	5
Period Pain/ cramps	1	2	3	4	5
Tiredness or fatigue	1	2	3	4	5

2. **At your most recent period**, for how many days **did your period prevent** you from carrying out your work, looking after your home and family, or attending college/university?

Please write in the number of days:

days

(N.B. if your **periods did not prevent** you from carrying out these activities and responsibilities, please write **0** in the box above).

MORE ABOUT YOUR HISTORY

**If you are unsure how to answer a question,
please give the best answer you can and write why you found a question difficult
next to your best answer.**

1. For how long have you experienced heavy periods?
(Please cross one box)

- Less than 6 months☐ 1
- 6 months to 1 year☐ 2
- 1 to 2 years☐ 3
- 2 to 5 years☐ 4
- More than 5 years☐ 5

2. What factors do you think were related to the start of your heavy periods?

Please write your answer(s):

**3. Have you ever had any of the following tests or gynaecological operations
because of your periods?**
(Please tick all that apply)

- No☐ 1
- Blood tests☐ 2
- Dilation and curettage (D & C)☐ 3
- Hysteroscopy☐ 4
- Laparoscopy☐ 5
- Pelvic ultrasound☐ 6
- Other☐ 7

Please tell us about this in the box below:

4. Has your GP or specialist asked you to consider having any of the following surgical treatments?
(Please tick all that apply)

- No☐ 1
- Hysterectomy☐ 2
- Endometrial ablation☐ 3
- Endometrial resection☐ 4
- Hysteroscopy☐ 5
- Laparoscopy☐ 6
- Other☐ 7

Please tell us about this in the box below:

5. Are you currently on the waiting list for any of the following surgical treatments?
(Please tick all that apply)

- No☐ 1
- Hysterectomy☐ 2
- Endometrial ablation☐ 3
- Endometrial resection☐ 4
- Hysteroscopy☐ 5
- Laparoscopy☐ 6
- Other☐ 7

Please tell us about this in the box below:

6. Do you use any of the following contraceptives?

(Please tick one)

- No ☐ 1
- Combined Oral Contraceptive Pill ☐ 2
- Mini Pill ☐ 3
- Mirena Coil or IUS (progestogen containing coil or intra-uterine system) ☐ 4
- Depot Provera (contraceptive injection) ☐ 5
- IUCD (copper coil or intra-uterine contraceptive device) ☐ 6

7. This question asks you about the **medicines** (drug treatments) you have had **for your heavy periods**.

Please use the space at the bottom of the table on the next page to tell us about any medicines you have had for your heavy periods that are not listed.

Have you ever had any of these medicines for your <u>heavy periods</u> ?		<u>If yes</u> , how helpful did you find these?
Non-steroidal anti-inflammatory drug (NSAID) Mefenamic-acid or Ponstan Naproxen or Naprosyn Ibuprofen or Brufen or Nurofen	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects
Combined oral contraceptive pill (COCP)	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects
Progestogen Norethisterone	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects

Continued overleaf....

7. (Continued from last page.)

Have you ever had any of these medicines for your <u>heavy periods</u> ?		If <u>yes</u> , how helpful did you find these?
Tranexamic acid Cyklokapron	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects
Progestogen Containing Coil Mirena Coil IUS	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects
Ethamsylate Dicynene	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects
Danazol	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects
Other:	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects
Other:	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Not helpful <input type="radio"/> Helped a bit <input type="radio"/> Helped a lot <input type="radio"/> Side effects a bit of a problem <input type="radio"/> Stopped because of side effects

8.

This question asks you about the

medicines you took at your most recent period, including medicines taken for period symptoms other than heavy bleeding (e.g. period pain).

This question also asks if your medicine was **prescribed by a doctor or self-prescribed**. Self-prescribed means that you purchased this medication over-the-counter at a pharmacy, chemists or supermarket (e.g. Nurofen or vitamin and iron supplements).

If you are not currently taking any medication (drug treatments) or supplements for your periods, ***please tick this box*** ☐

11

Name of medicine you took at your most recent period:	Prescribed? (please tick one)	For how many days did you take this?	How many times per day?	How many tablets did you take each time?
Example: <i>Tranexamic acid</i>	<input checked="" type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed	7	3	2
Example: <i>Vitamin & iron supplements</i>	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input checked="" type="radio"/> Self-prescribed	28	1	2
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			

9. Are you currently having any other treatments for your periods?
(Please tick one box)

No ☐ 1

Yes ☐ 2

If yes, please tell us about this in the box below:

10. In what ways have your *periods changed over the last 3 months?*
(Please cross one box)

Vastly improved ☐ 1

Much improved ☐ 2

Slightly improved ☐ 3

No change ☐ 4

Slightly worsened ☐ 5

Much worsened ☐ 6

Vastly worsened ☐ 7

11. If you were told your periods would be *like they are now* until your menopause,
how would you feel about it?
(Please cross one box)

Terrible ☐ 1

Unhappy ☐ 2

Mostly dissatisfied ☐ 3

Mixed (about equally satisfied and dissatisfied) ☐ 4

Mostly satisfied ☐ 5

Pleased ☐ 6

Delighted ☐ 7

12. Do you have any **other health problems** apart from your heavy periods?
(Please cross one box)

Yes ☐ 1
No ☐ 2

If you answered yes, please tell us about your other health problem(s) by writing in the box below:

YOUR TREATMENT PRIORITIES

The following questions ask you to think about your heavy periods and what you would like your treatment to help with.

If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult next to your best answer.

1. How important is reducing your menstrual blood loss?
(Please tick one)

Not important	<input type="checkbox"/>	1
Slightly important	<input type="checkbox"/>	2
Fairly important	<input type="checkbox"/>	3
Very important	<input type="checkbox"/>	4

2. How important is increasing your energy levels?
(Please tick one)

Not important	<input type="checkbox"/>	1
Slightly important	<input type="checkbox"/>	2
Fairly important	<input type="checkbox"/>	3
Very important	<input type="checkbox"/>	4

3. How important is increasing the activities you can do?
(Please tick one)

Not important	<input type="checkbox"/>	1
Slightly important	<input type="checkbox"/>	2
Fairly important	<input type="checkbox"/>	3
Very important	<input type="checkbox"/>	4

4. How important is cutting down or avoiding medication?
(Please tick one)

Not important	<input type="checkbox"/>	1
Slightly important	<input type="checkbox"/>	2
Fairly important	<input type="checkbox"/>	3
Very important	<input type="checkbox"/>	4

5. How important is avoiding surgery?
(Please tick one)

Not important	<input type="checkbox"/>	1
Slightly important	<input type="checkbox"/>	2
Fairly important	<input type="checkbox"/>	3
Very important	<input type="checkbox"/>	4

YOUR SATISFACTION WITH TREATMENT

The following questions ask you about the treatment you have received for your heavy periods over the past three months.

If you are unsure how to answer a question, please give the best answer you can.

1. *Over the past 3 months*, how satisfied were you with the following aspects of your treatment and care:

A) The information you were given about your heavy periods?
(Please tick one)

- Very satisfied ☐ 1
- Somewhat satisfied ☐ 2
- Neither satisfied nor dissatisfied ☐ 3
- Somewhat dissatisfied ☐ 4
- Very dissatisfied ☐ 5

B) The treatment you received for your heavy periods?
(Please tick one)

- Very satisfied ☐ 1
- Somewhat satisfied ☐ 2
- Neither satisfied nor dissatisfied ☐ 3
- Somewhat dissatisfied ☐ 4
- Very dissatisfied ☐ 5

C) The overall care you received for your heavy periods?
(Please tick one)

- Very satisfied ☐ 1
- Somewhat satisfied ☐ 2
- Neither satisfied nor dissatisfied ☐ 3
- Somewhat dissatisfied ☐ 4
- Very dissatisfied ☐ 5

MORE ABOUT YOUR SATISFACTION WITH TREATMENT

The following questions ask you about **the treatment and care you have received for your heavy periods** over the past 3 months.

How would you rate the following?.....

(Please circle one answer on each line)

1. The explanation of your condition and how treatment might help?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
2. The explanation given about what treatment would involve for you?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
3. The attention given to what you have to say?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
4. The advice given to you about ways to become and stay healthy?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
5. The friendliness and courtesy shown to you?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
6. The respect shown to you, such as attention to your privacy?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
7. The reassurance and support offered to you?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
8. The time given to you at each visit for advice and/or treatment?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5

Your comments:

COMPLEMENTARY AND ALTERNATIVE MEDICINE

The following questions ask about your use of complementary and alternative medicine, and your views on acupuncture in particular.

If you are unsure how to answer a question, please give the best answer you can and write your comments next to your answer.

1. Have you **ever** consulted a complementary or alternative medicine practitioner, for example, one of those listed in the box below?

(Please cross one box)

Yes ☐ 1

No ☐ 2

If you answered **yes**, in the table below, please indicate **which practitioner you consulted** and whether you received treatment for your **heavy periods**, OR for **another health condition**.

(Please circle the relevant number(s) in the table below)

Practitioner consulted	Treatment for heavy periods	Treatment for other health condition
a) Acupuncturist	1	2
b) Chiropractor	1	2
c) Homeopath	1	2
e) Herbalist	1	2
f) Osteopath	1	2
g) Other (please write below)	1	2

2. In general, do you think **acupuncture can work**?

(Please cross one box)

Yes ☐ 3

No ☐ 1

Don't know ☐ 2

3. Do you think your **heavy periods** may be helped by acupuncture?

(Please cross one box)

Yes ☐ 3

No ☐ 1

Don't know ☐ 2

4. If you were offered acupuncture treatment for your heavy periods, would you choose to **accept** OR **decline** this offer?
(Please cross one box)
- | | | |
|------------|--------------------------|---|
| Accept | <input type="checkbox"/> | 3 |
| Decline | <input type="checkbox"/> | 1 |
| Don't know | <input type="checkbox"/> | 2 |

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE

Please feel free to write any comments you may have in the box below.

Your comments:

Appendix 27

ACUMEN Three-Month Follow-Up Questionnaire

Please note that this follow-up questionnaire comprised of a health outcomes questionnaire and a health care costs questionnaire. The health outcomes questionnaire was at the front and printed on lilac paper. The health care costs questionnaire was at the back and printed on blue paper.

ACUMEN

A Research Collaboration

THE UNIVERSITY of York
Department of Health Sciences
& Clinical Evaluation

FOUNDATION for TRADITIONAL
CHINESE MEDICINE
Registered Charity
No. 702083



MEDICAL CARE
RESEARCH UNIT
University of Shef-



CONFIDENTIAL

Trial Participant Three-Month Follow-Up Questionnaire

Affix Participant Study I.D.

Enter the date the questionnaire was posted to the participant

**Please return the completed questionnaire in the
envelope provided.**

You do NOT need a stamp.

Thank you for your help.

YOUR HEALTH IN GENERAL - SF-36

The following questions ask you about your health. This information will help keep track of how you feel and how well you are able to do your usual activities.

If you are unsure how to answer a question, please give the best answer you can.

1. In general, would you say your health is:
(Please tick one)

Excellent	<input type="radio"/>	5
Very Good	<input type="radio"/>	4
Good	<input type="radio"/>	3
Fair	<input type="radio"/>	2
Poor	<input type="radio"/>	1

2. Compared with six months ago, how would you rate your health now?
(Please tick one)

Much better now than six months ago	<input type="radio"/>	5
Somewhat better now than six months ago	<input type="radio"/>	4
About the same as six months ago	<input type="radio"/>	3
Somewhat worse now than six months ago	<input type="radio"/>	2
Much worse now than six months ago	<input type="radio"/>	1

HEALTH AND DAILY ACTIVITIES

3. The following questions, in the table below, are about activities you might do during a typical day.

Does your health now limit you in these activities? If so, how much?

(Please circle one number on each line)

ACTIVITIES	Yes, limited a lot	Yes, limited a little	No, not limited at all
a. Vigorous activities , such as running, lifting heavy objects, participating in strenuous sports	1	2	3
b. Moderate activities , such as moving a table, pushing a vacuum cleaner, bowling or playing golf	1	2	3
c. Lifting or carrying groceries	1	2	3
d. Climbing one flight of stairs	1	2	3
e. Climbing several flights of stairs	1	2	3
f. Bending, kneeling or stooping	1	2	3
g. Walking more than one mile	1	2	3
h. Walking several hundred yards	1	2	3
i. Walking one hundred yards	1	2	3
j. Bathing and dressing yourself	1	2	3

4. **During the past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of your physical health?**

(Please circle one number on each line)

During the past 4 weeks, how much of the time have you..... due to your physical health?	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Cut down on the amount of time you spent on work or other activities	1	2	3	4	5
b. Accomplished less than you would like	1	2	3	4	5
c. Were limited in the kind of work or other activities you could do	1	2	3	4	5
d. Had difficulty performing the work or other activities (for example, it took extra effort)	1	2	3	4	5

5. During the **past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of any emotional problems** (such as feeling depressed or anxious)?

(Please circle one number on each line)

During the past 4 weeks, how much of the time have you..... as a result of any emotional problems?	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Cut down on the amount of time you spent on work or other activities	1	2	3	4	5
b. Accomplished less than you would like	1	2	3	4	5
c. Did work or other activities less carefully than usual	1	2	3	4	5

6. **During the past 4 weeks**, to what extent has your **physical health or emotional problems** interfered with your **normal social activities** with family, friends, neighbours or groups?

(Please tick one)

Not at all	<input type="radio"/>	5
Slightly	<input type="radio"/>	4
Moderately	<input type="radio"/>	3
Quite a bit	<input type="radio"/>	2
Extremely	<input type="radio"/>	1

7. How much **bodily pain** have you had **during the past 4 weeks**?

(Please tick one)

None	<input type="radio"/>	6
Very mild	<input type="radio"/>	5
Mild	<input type="radio"/>	4
Moderate	<input type="radio"/>	3
Severe	<input type="radio"/>	2
Very severe	<input type="radio"/>	1

8. **During the past 4 weeks**, how much did **pain** interfere with your **normal work** (including work outside the home and housework)?

(Please tick one)

Not at all	<input type="radio"/>	5
A little bit	<input type="radio"/>	4
Moderately	<input type="radio"/>	3
Quite a bit	<input type="radio"/>	2
Extremely	<input type="radio"/>	1

YOUR FEELINGS

9. These questions, in the table below, are about how you feel and how things have been with you, *during the last 4 weeks*.

For each question please indicate one answer that comes closest to the way you have been feeling, during the past 4 weeks.

(Please circle one number on each line)

How much of the time during the past 4 weeks.....	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Did you feel full of life?	5	4	3	2	1
b. Have you been very nervous?	1	2	3	4	5
c. Have you felt so down in the dumps that nothing could cheer you up?	1	2	3	4	5
d. Have you felt calm and peaceful?	5	4	3	2	1
e. Did you have a lot of energy?	5	4	3	2	1
f. Have you felt down-hearted and low?	1	2	3	4	5
g. Did you feel worn-out?	1	2	3	4	5
h. Have you been happy?	5	4	3	2	1
i. Did you feel tired?	1	2	3	4	5

GENERAL HEALTH

10. **During the past 4 weeks**, how much of the time has your **physical health or emotional problems** interfered with your **social activities** (like visiting friends, relatives, etc.)?

(Please tick one)

- All of the time** ☐ 5
Most of the time ☐ 4
Some of the time ☐ 3
A little of the time ☐ 2
None of the time ☐ 1

11. How **TRUE** or **FALSE** is **each** of the following statements for you?

(Please circle one number on each line)

Statements:	Definitely True	Mostly True	Not sure	Mostly False	Definitely False
a. I seem to get ill more easily than other people	1	2	3	4	5
b. I am as healthy as anybody I know	1	2	3	4	5
c. I expect my health to get worse	1	2	3	4	5
d. My health is excellent	1	2	3	4	5

YOUR HEALTH IN GENERAL - EQ-5D

The statements below are also about your health in general.

To indicate **which statements best describe your own health state TODAY**, please **tick one** of the three statements **under each heading**.

1. Mobility (*tick one*)

- 1 ☐ I have no problems in walking about
- 2 ☐ I have some problems in walking about
- 3 ☐ I am confined to bed

2. Self-Care (*tick one*)

- 1 ☐ I have no problems with self-care
- 2 ☐ I have some problems washing or dressing myself
- 3 ☐ I am unable to wash or dress myself

3. Usual Activities (*tick one*)

(e.g. work, study, housework, family or leisure activities)

- 1 ☐ I have no problems with performing my usual activities
- 2 ☐ I have some problems with performing my usual activities
- 3 ☐ I am unable to perform my usual activities

4. Pain/Discomfort (*tick one*)

- 1 ☐ I have no pain or discomfort
- 2 ☐ I have moderate pain or discomfort
- 3 ☐ I have extreme pain or discomfort

5. Anxiety/Depression (*tick one*)

- 1 ☐ I am not anxious or depressed
- 2 ☐ I am moderately anxious or depressed
- 3 ☐ I am extremely anxious or depressed

YOUR HEALTH TODAY

This question asks you:

“How good or bad is your health today?”

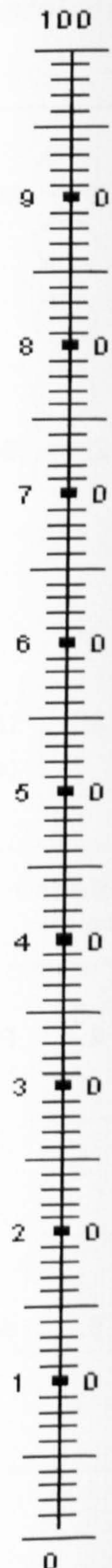
To help you answer this question, we have drawn a scale that looks like a thermometer.

Imagine that at the very top, **at 100, is the best health you can imagine experiencing today**, and that at the very bottom, **at 0, is the worst health you can imagine experiencing today**.

To indicate how good or bad your health is today, **please draw a line from ‘your health today’, to the point on the thermometer** that best represents how good or bad your health is today.

Your health today

Best health imaginable



Worst health imaginable

YOUR PERIODS (AMQ)

The following questions ask you about your periods and how they have affected your ability to manage in everyday life.

If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult next to your answer.

1. On average, **during the last three months**, for how many days did your period last?

(Please cross one box)

Less than 3 days ☐ 1

Between 3 and 7 days ☐ 2

Between 8 and 10 days ☐ 3

More than 10 days ☐ 4

2. On average, **during the last three months**, were your periods regular or irregular?

(Please cross one box)

Regular ☐ 1

Irregular ☐ 2

3. On average, **during the last three months**, how many days were there from the first day of one period to the first day of the next period?

(Please cross one box)

Less than 21 days ☐ 1

Between 21 and 35 days ☐ 2

More than 35 days ☐ 3

4. On average, **during the last three months**, would you describe your period as?

(Please cross one box)

Light ☐ 1

Moderate ☐ 2

Heavy ☐ 3

Very Heavy ☐ 4

5. On average, **during the last three months**, for how many days of each period was the bleeding heavy?
(Please cross one box)

- Not heavy ☐ 1
- Between 1 and 3 days ☐ 2
- Between 4 and 6 days ☐ 3
- Between 7 and 10 days ☐ 4
- More than 10 days ☐ 5

6. On average, **during the last three months**, have your periods been associated with any pain?
(Please cross one box)

- No pain at all ☐ 1
- Slight pain ☐ 2
- Moderate pain ☐ 3
- Severe pain ☐ 4
- Very severe pain ☐ 5

7. On average, **during the last three months**, have you had any problems with soiling/staining any of the following because of your periods?
(Please cross all that apply)

- No, not at all ☐
- Soiling/staining of your outer-clothes/over-garments ☐ 1
- Soiling/staining of your bed linen ☐ 2
- Soiling/staining of your upholstery ☐ 3

8. On average, **during the last three months**, have your periods prevented you from carrying out your work, housework or other daily activities?
(Please cross one box)

- No, not at all ☐ 1
- I could continue to work, but my work suffered ☐ 2
- Yes, usually for no more than one day with each period ☐ 3
- Yes, usually for more than one day with each period ☐ 4

9. On average, **during the last three months**, have you been confined to bed with each period?

(Please cross one box)

- No, not at all ☐ 1
- Yes, for part of one day ☐ 2
- Yes, for the whole of one day ☐ 3
- Yes, for more than one day ☐ 4

10. On average, **during the last three months**, have your leisure activities been affected by your heavy periods? (Including social life, hobbies, sport).

(Please cross one box)

- Not affected by heavy periods ☐ 1
- Mildly affected by heavy periods ☐ 2
- Moderately affected by heavy periods ☐ 3
- Severely affected by heavy periods ☐ 4
- Heavy periods prevented any social life at all ☐ 5

11. On average, **during the last three months**, has your sex life been affected by your heavy periods?

(Please cross one box)

- Not affected by heavy periods ☐ 1
- Mildly affected by heavy periods ☐ 2
- Moderately affected by heavy periods ☐ 3
- Severely affected by heavy periods ☐ 4
- Heavy periods prevented any sex life at all ☐ 5
- Does not apply ☐ 6

12. On average, **during the last three months**, how many tampons might you use on the heaviest day of your period?

(Please cross one box)

- No tampons at all ☐ 1
- Between 1 and 5 tampons ☐ 2
- Between 6 and 10 tampons ☐ 3
- Between 11 and 15 tampons ☐ 4
- More than 15 tampons ☐ 5

13. On average, how many sanitary towels might you use **on the heaviest day** of your period?

(Please cross one box)

- | | | |
|-----------------------------------|--------------------------|---|
| No sanitary towels at all | <input type="checkbox"/> | 1 |
| Between 1 and 5 sanitary towels | <input type="checkbox"/> | 2 |
| Between 6 and 10 sanitary towels | <input type="checkbox"/> | 3 |
| Between 11 and 15 sanitary towels | <input type="checkbox"/> | 4 |
| More than 15 sanitary towels | <input type="checkbox"/> | 5 |

14. At any time **during the last three months**, did you require more than one form of protection at the same time (not including mini-sanitary towels or panti-liners)?

(Please cross one box)

- | | | |
|--|--------------------------|---|
| No | <input type="checkbox"/> | 1 |
| Tampon and pad together | <input type="checkbox"/> | 2 |
| Two pads together Tampon and two pads together | <input type="checkbox"/> | 3 |
| More protection than this (i.e. disposable nappies, towels etc.) | <input type="checkbox"/> | 4 |

OTHER PERIOD SYMPTOMS

This question asks about symptoms, apart from heavy bleeding, that are often associated with menstruation.

Please use the space at the bottom of the table to tell us about any symptoms you experience that are not listed here.

1. Over the past 3 months, how troublesome were the following period symptoms?

(Please circle one number in each row)

Period Symptom	Not at all troublesome	Slightly troublesome	Moderately troublesome	Very troublesome	Extremely troublesome
Period pain/ cramps	1	2	3	4	5
Backache	1	2	3	4	5
Tender or swollen breasts	1	2	3	4	5
Bloating	1	2	3	4	5
Fluid retention	1	2	3	4	5
Migraine or headache	1	2	3	4	5
Tiredness or fatigue	1	2	3	4	5
Irritability	1	2	3	4	5
Tension	1	2	3	4	5
Feeling low or depressed	1	2	3	4	5
Anxiety	1	2	3	4	5
Difficulty concentrating	1	2	3	4	5
Crying bouts	1	2	3	4	5
Clumsiness	1	2	3	4	5
Aggression	1	2	3	4	5
Other:	1	2	3	4	5
Other:	1	2	3	4	5

YOUR MOST RECENT PERIOD

The following questions ask you how much your most recent period troubled you.

If you are unsure how to answer a question,
please give the best answer you can.

1. **At your most recent period**, how **troublesome** were the following symptoms?

(Please circle one number in each row)

Symptom	Not at all troublesome	Slightly troublesome	Moderately troublesome	Very troublesome	Extremely troublesome
Heavy bleeding	1	2	3	4	5
Period Pain/ cramps	1	2	3	4	5
Tiredness or fatigue	1	2	3	4	5

3. **At your most recent period**, for how many days did your period **prevent** you from carrying out your work, looking after your home and family, or attending college/university?

Please write in the number of days:

days

(N.B. if your **periods did not prevent** you from carrying out these activities and responsibilities, please write **0** in the box above).

MORE ABOUT YOUR PERIODS

**If you are unsure how to answer a question,
please give the best answer you can and write why you found a question difficult
next to your best answer.**

1. Since you joined the study, about 3 months ago, have you had any of the following tests or gynaecological operations because of your periods?
(Please tick all that apply)

- No ☐ 1
- Blood tests ☐ 2
- Dilation and curettage (D & C) ☐ 3
- Hysteroscopy ☐ 4
- Laparoscopy ☐ 5
- Pelvic ultrasound ☐ 6
- Other ☐ 7

Please tell us about this in the box below:

2. Since you joined the study, about 3 months ago, has your GP or specialist asked you to consider having any of the following surgical treatments?
(Please tick all that apply)

- No ☐ 1
- Hysterectomy ☐ 2
- Endometrial ablation ☐ 3
- Endometrial resection ☐ 4
- Hysteroscopy ☐ 5
- Laparoscopy ☐ 6
- Other ☐ 7

Please tell us about this in the box below:

3. **Since you joined the study, about 3 months ago**, have you been put on the waiting list for any of the following surgical treatments?
(Please tick all that apply)

- | | | |
|-----------------------|--------------------------|---|
| No | <input type="checkbox"/> | 1 |
| Hysterectomy | <input type="checkbox"/> | 2 |
| Endometrial ablation | <input type="checkbox"/> | 3 |
| Endometrial resection | <input type="checkbox"/> | 4 |
| Hysteroscopy | <input type="checkbox"/> | 5 |
| Laparoscopy | <input type="checkbox"/> | 6 |
| Other | <input type="checkbox"/> | 7 |

Please tell us about this in the box below:

4. **Since you joined the study, about 3 months ago**, has the type of contraception you use changed?
(Please tick one)

No ☐ 1

Please go straight to question 6 on page 17

Yes ☐ 2

5. Do you now use any of the following contraceptives?
(Please tick one)

- | | | |
|--|--------------------------|---|
| No | <input type="checkbox"/> | 1 |
| Combined Oral Contraceptive Pill | <input type="checkbox"/> | 2 |
| Mini Pill | <input type="checkbox"/> | 3 |
| Mirena Coil or IUS (progestogen containing coil or intra-uterine system) | <input type="checkbox"/> | 4 |
| Depot Provera (contraceptive injection) | <input type="checkbox"/> | 5 |
| IUCD (copper coil or intra-uterine contraceptive device) | <input type="checkbox"/> | 6 |

This question asks you about the **medicines you took at your most recent period**, including medicines taken for period symptoms other than heavy bleeding (e.g. period pain).

This question also asks if your medicine was **prescribed by a doctor or self-prescribed**. Self-prescribed means that you purchased this medication over-the-counter at a pharmacy, chemists or supermarket (e.g. Nurofen or vitamin and iron supplements).

If you are not currently taking any medication (drug treatments) or supplements for your periods, **please tick this box** ☐

Name of medicine you took for your most recent period:	Prescribed by? (please tick one)	For how many days did you take this?	How many times per day?	How many tablets did you take each time?
Example: <i>Tranexamic acid</i>	<input checked="" type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed	7	3	2
Example: <i>Vitamin & iron supplements</i>	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input checked="" type="radio"/> Self-prescribed	28	1	2
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			

7. Have you had **any other treatments or medicines** for your periods, (not including study acupuncture)?
(Please cross one box)

No ☐ 1

Yes ☐ 2

If yes, please tell us about this in the box below:

8. In what ways have your **periods changed over the last 3 months**?
(Please cross one box)

Vastly improved ☐ 1

Much improved ☐ 2

Slightly improved ☐ 3

No change ☐ 4

Slightly worsened ☐ 5

Much worsened ☐ 6

Vastly worsened ☐ 7

9. If you were told your periods would be **like they are now** until your menopause, how would you feel about it?
(Please cross one box)

Terrible ☐ 1

Unhappy ☐ 2

Mostly dissatisfied ☐ 3

Mixed (about equally satisfied and dissatisfied) ☐ 4

Mostly satisfied ☐ 5

Pleased ☐ 6

Delighted ☐ 7

TREATMENT SIDE EFFECTS

1. Over the past 3 months, during which time you have received treatment for your heavy periods, have you experienced any of the following?
(Please circle your answers)

	Have you experienced this?	If yes, how would you describe the strength of your reaction?			If yes, how much did this response concern you?				If yes, would you be prepared to experience this
		Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	
a. Feeling drowsy	Yes No								Yes No
b. Feeling dizzy	Yes No								Yes No
c. Vertigo or severe dizziness	Yes No								Yes No
d. Feeling faint	Yes No								Yes No
e. Fainting	Yes No								Yes No
f. Feeling sick or nauseous	Yes No								Yes No
g. Vomiting	Yes No								Yes No
h. Irregular periods	Yes No								Yes No
i. Erratic periods (stopping and starting)	Yes No								Yes No
j. Absence of periods (no periods)	Yes No								Yes No

1. Continued...

	Have you experienced this?	If yes, how would you describe the strength of your reaction?				If yes, how much did this response concern you?				If yes, would you be prepared to experience this response again?
k. Depression	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
l. Headache or migraine	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
m. Skin problems (e.g. rashes or acne)	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
n. Diarrhoea	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
o. Stomach pain or discomfort	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
p. Breast tenderness	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
q. Water retention	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
r. Weight changes (gain or loss)	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
s. Other:	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	
t. Other:	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No	

Your comments:

ADVERSE EVENTS FROM TREATMENT

1. Over the past 3 months, have you received acupuncture for your heavy periods? (Please cross one box)

No ☐ 1

Please go straight to page 22, 'Your Treatment Priorities'

Yes, I have received acupuncture as part of this research project ☐ 2

Yes, I have received acupuncture privately (paid for by me) ☐ 3

2. If yes, have you experienced any of the following? (Please circle your answers)

	Have you experienced this?	If yes, how would you describe the strength of your reaction?			If yes, how much did this response concern you?				If yes, would you be prepared to experience this response again?
		Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	
a. Pain where the acupuncture needle was inserted	Yes No								Yes No
b. Bruising where the acupuncture needle was inserted	Yes No								Yes No
c. Bleeding where the acupuncture needle was inserted for <u>more than 10 seconds</u>	Yes No								Yes No
d. Other:	Yes No								Yes No
e. Other:	Yes No								Yes No

Your comments:

YOUR TREATMENT PRIORITIES

The following questions ask you to
think about your heavy periods and what you would like your treatment to help with.

If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult next to your best answer.

1. How important is reducing your menstrual **blood loss**?

(Please cross one box)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

2. How important is increasing your **energy levels**?

(Please cross one box)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

3. How important is increasing the **activities** you can do?

(Please cross one box)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

4. How important is cutting down or avoiding **medication**?

(Please cross one box)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

5. How important is avoiding **surgery**?

(Please cross one box)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

YOUR SATISFACTION WITH TREATMENT

The following questions ask you about the treatment you have received for your heavy periods over the past three months.

If you are unsure how to answer a question, please give the best answer you can.

1. **Over the past 3 months, how satisfied were you with the following aspects of your treatment and care:**

A) **The information you were given about your heavy periods?**

(Please tick one)

- | | | |
|------------------------------------|-----------------------|---|
| Very satisfied | <input type="radio"/> | 1 |
| Somewhat satisfied | <input type="radio"/> | 2 |
| Neither satisfied nor dissatisfied | <input type="radio"/> | 3 |
| Somewhat dissatisfied | <input type="radio"/> | 4 |
| Very dissatisfied | <input type="radio"/> | 5 |

B) **The treatment you received for your heavy periods?**

(Please tick one)

- | | | |
|------------------------------------|-----------------------|---|
| Very satisfied | <input type="radio"/> | 1 |
| Somewhat satisfied | <input type="radio"/> | 2 |
| Neither satisfied nor dissatisfied | <input type="radio"/> | 3 |
| Somewhat dissatisfied | <input type="radio"/> | 4 |
| Very dissatisfied | <input type="radio"/> | 5 |

C) **The overall care you received for your heavy periods?**

(Please tick one)

- | | | |
|------------------------------------|-----------------------|---|
| Very satisfied | <input type="radio"/> | 1 |
| Somewhat satisfied | <input type="radio"/> | 2 |
| Neither satisfied nor dissatisfied | <input type="radio"/> | 3 |
| Somewhat dissatisfied | <input type="radio"/> | 4 |
| Very dissatisfied | <input type="radio"/> | 5 |

MORE ABOUT YOUR SATISFACTION WITH TREATMENT

The following questions ask you about **the treatment and care you have received for your heavy periods** over the past 3 months.

How would you rate the following?.....

(Please circle one answer on each line)

1. The explanation of your condition and how treatment might help?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
2. The explanation given about what treatment would involve for you?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
3. The attention given to what you have to say?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
4. The advice given to you about ways to become and stay healthy?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
5. The friendliness and courtesy shown to you?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
6. The respect shown to you, such as attention to your privacy?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
7. The reassurance and support offered to you?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5
8. The time given to you at each visit for advice and/or treatment?	POOR 1	FAIR 2	GOOD 3	VERY GOOD 4	EXCELLENT 5

Your comments:

HEALTH CARE COSTS

If the NHS were to provide all women with heavy periods the option of acupuncture treatment, they would need to know how much it would **cost and save the NHS** and how much it would **cost and save women**.

That is why these questions ask you **how often you have seen a health professional for treatment or advice about your period symptoms.**

And why these questions ask you about **your travel to and from treatment, and the items you have bought because of your period symptoms, over the past 3 months.**

Please answer these questions as accurately as you can. If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult next to your best answer.

Thank you for completing this questionnaire

VISITS TO YOUR GP'S SURGERY

1. Since you last completed a questionnaire, about 3 months ago, **how often** have you consulted a GP or nurse ***at your GP's surgery***, because of your period symptoms?

(Please write the number of times. If none write 0)

a). Your own **GP** or another GP

--	--

No. of times

b). Practice **nurse**

--	--

No. of times

c). **Other**

Please specify.....

--	--

No. of times

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TELEPHONE CALLS TO NHS DIRECT

2. Since you last completed a questionnaire, about 3 months ago, **how often** have you telephoned 'NHS Direct' for advice about your period symptoms?

(Please write the number of times. If none write 0)

a). NHS Direct

No. of times

If you telephoned NHS Direct for advice about your heavy periods, **on average**, how long did each telephone consultation last?

No. of minutes

VISITS TO NHS WALK IN CENTRES

3. Since you last completed a questionnaire, about 3 months ago, **how often** have you consulted a GP or nurse **at an NHS Walk in Centre**, because of your period symptoms?

(Please write the number of times. If none write 0)

a). GP

No. of times

b). Nurse

No. of times

c). Other

Please specify.....

No. of times

REFERRALS TO GYNAECOLOGISTS AT NHS HOSPITALS

4. Since you last completed a questionnaire, about 3 months ago, **how often** have you consulted, or been referred to, a gynaecologist in an **NHS hospital**, because of your period symptoms?

(Please write the number of times. If none write 0)

a). Gynaecologist

No. of times

b). Other hospital specialist

Please specify.....

No. of times

CONSULTATIONS WITH PRIVATE HEALTH CARE PROFESSIONALS

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office
use

5. Since you last completed a questionnaire, about 3 months ago, **how often** have you consulted a **private** health care professional, because of your heavy periods?
(Please write the number of times. If none write 0)

a). **Gynaecologist (private)**

No. of times

b). **Acupuncturist (private)**

(I.e. paid for by you, not study acupuncture)

No. of times

c). **Other**

Please specify.....

No. of times

PLANNED VISITS TO NHS AND PRIVATE HOSPITALS

6. Since you last completed a questionnaire, about 3 months ago, have you been to hospital for any planned gynaecological investigations or operations (i.e. not an emergency visit)? (Please tick one)

No ☐ 1
(Please go straight to question 7)

Yes ☐ 2

- a. If you answered yes, please write the **number of times** you have been to hospital for planned gynaecological investigations or operations, over the last 3 months:

No. of times

- b. **What happened after your gynaecological investigation(s) or operation(s)?**
Please tell us about this in the table below:

What happened after your...	Were you discharged (allowed home) the same day?	If you stayed in hospital, for <u>how many days</u> did you stay?
First planned gynaecological investigation or operation?	<input type="radio"/> Yes <input type="radio"/> No	<input type="text"/> <input type="text"/> days
Second planned gynaecological investigation or operation?	<input type="radio"/> Yes <input type="radio"/> No	<input type="text"/> <input type="text"/> days

c. Please tell us about the hospital(s) in the table below:

Name of hospital(s):	Was it a private or NHS hospital?
	<input type="radio"/> Private <input type="radio"/> NHS
	<input type="radio"/> Private <input type="radio"/> NHS

EMERGENCY VISITS TO NHS HOSPITALS

7. Since you last completed a questionnaire, about 3 months ago, have you been admitted to an NHS hospital **as an emergency**, because of your period symptoms? (Please tick one)

No ☐ 1

(Please go straight to question 8)

Yes ☐ 2

a. If you answered yes, please write the **number of times** you have been admitted to an NHS hospital as an emergency **because of your periods**, over the last 3 months:

--	--

No. of times

b. How did you get to the hospital each time? (Please tick all that apply)

☐ Ambulance
 ☐ Car
 ☐ Taxi
 ☐ Other (please specify)

.....

c. What happened after you were admitted to an NHS hospital as an emergency, because of your periods?

Please tell us about this in the table below:

What happened after your...	Were you discharged (allowed home) the same day?	If you stayed in hospital, for <u>how many days</u> did you stay?
First emergency visit to an NHS hospital because of your periods?	<input type="radio"/> Yes <input type="radio"/> No	<input type="text"/> <input type="text"/> days
Second emergency visit to an NHS hospital because of your periods?	<input type="radio"/> Yes <input type="radio"/> No	<input type="text"/> <input type="text"/> days

c. Please write the **name of the NHS hospital(s)** you were admitted to in the box below:

Name of hospital(s):

PRESCRIPTION COSTS

For
office
use:

8. This question asks you about the prescription costs you have paid, over the last 3 months, for **medicines prescribed** for your period symptoms **by either a GP or gynaecologist**.

Please include medicines prescribed for period symptoms other than heavy bleeding (e.g. Ponstan for period pain), and write your answers in the table below.

If you have not paid any prescription costs for medicines for your period symptoms, over the last 3 months, please tick this box ☐

Name of medicine prescribed for your period symptoms:	Cost of prescription to nearest £:	Number of prescriptions paid for over last 3 months:
Example: <i>Tranexamic acid</i>	£ 6.00	1
	£	
	£	
	£	

PRIVATE HEALTH CARE PRESCRIPTION COSTS

9. This question asks you about the **medicines or remedies you have paid for**, over the past 3 months, that were **prescribed** for your period symptoms by a **private health care professional**, and were not included in the consultation fee (e.g. homoeopathic remedies or medicinal herbal prescriptions).

If you have not bought any medicines from a private health care professional, for your period symptoms, over the last 3 months, please tick this box ☐

Name of medicine prescribed for your period symptoms:	Cost of prescription to nearest £:	Number of prescriptions paid for over last 3 months:
Example: <i>Chinese medicinal herbs</i>	£ 28.00	4
	£	
	£	
	£	

COST OF SELF-PRESCRIBED MEDICATION AND SUPPLEMENTS

For
office
use:

10. This question asks you about the **self-prescribed medicines or supplements you have bought for your period symptoms, over the last 3 months.**

Self-prescribed means that you purchased this medication over-the-counter at a pharmacy, chemists or supermarket (e.g. Nurofen or vitamin and iron supplements).

Please write your answers in the table below.

If you have not bought any over-the-counter medicines or supplements for your period symptoms, over the last 3 months, please tick this box

☐

Name of medicine, or supplements, bought for your period symptoms:	Cost of medicine, or supplements, to nearest £:	Number bought over the last 3 months:
Example: <i>Nurofen (box of 16)</i>	£ 2.00	3
Example: <i>Floradex Liquid Iron Formula (500ml bottle)</i>	£ 9.00	1
	£	
	£	
	£	
	£	
	£	

COST OF FEMININE HYGIENE PRODUCTS

For office use:

11. This question asks you about the **feminine hygiene products or sanitary protection** you have used over the last 3 months, and how much these products cost you (e.g. tampons, sanitary towels, pants-liners, nappies and towels etc.).

Please write your answers in the table below.

Type of feminine hygiene products, or sanitary protection, bought over the last 3 months:	Cost of product to nearest £:	Number bought over the last 3 months:
Example: <i>Tampax (box of 32)</i>	£ 4.00	3
Example: <i>Bodyform sanitary towels (pack of 16)</i>	£ 2.00	9
Example: <i>protective cover for mattress</i>	£ 23.00	1
	£	
	£	
	£	
	£	
	£	

COST OF REPLACING ITEMS

12. This question asks you about the items of clothing, bedlinen and upholstery etc. that you have replaced because of problems with soiling and staining because of your heavy periods, over the last 3 months.

If you have not replaced any items because of your heavy periods, over the last 3 months, please tick this box ☐

Please write your answers in the table below.

Item replaced:	Cost of product to nearest £:	Number bought over the last 3 months:
Example: <i>Double sheet</i>	£ 12.00	1
Example: <i>Knickers (pack of 5)</i>	£ 7.00	1
	£	
	£	
	£	
	£	
	£	
	£	
	£	

For
office
use:

TRAVEL TO STUDY ACUPUNCTURE APPOINTMENTS

For
office
use:

13. Have you had study acupuncture over the last 3 months?

(Please tick one)

No ☐

(please go straight to question 18)

Yes ☐

14. Including travel to and from the clinic, how much time does attending a study acupuncture appointment usually take out of your day? (please tick one)

☐ Up to 1 hour

☐ 1 to 1½ hours

☐ 1½ to 2 hours

☐ More than 2 hours

15. Approximately how far do you travel to get to and from study acupuncture appointments? (Please tick one)

☐ Less than 5 miles

☐ 5 to 15 miles

☐ More than 15 miles

16. Is this journey usually part of your normal routine, for example, on the way to work or shopping? (Please tick one)

☐ Yes

☐ No

17. How do you usually get to your study acupuncture appointments?

(Please tick one)

☐ On foot

☐ Bicycle

☐ Bus

☐ Car

☐ Taxi

☐ Other (please specify)

.....

TRAVEL TO APPOINTMENTS AT YOUR GP'S SURGERY

18. Have you consulted a GP or nurse, at your GP's surgery, about your periods over the last 3 months? (Please tick one)

No ☐

(please go straight to question 23)

Yes ☐

19. Including travel to and from the surgery, how much time does attending an appointment at your GP's surgery usually take out of your day? (please tick one)

☐ Up to 15 minutes

☐ 15 to 30 minutes

☐ 30 minutes to 1 hour

☐ More than 1 hour

20. Approximately how far do you travel to get to and from appointments at your GP's surgery? (Please tick one)

☐ Less than 5 miles

☐ 5 to 15 miles

☐ More than 15 miles

21. Is this journey usually part of your normal routine, for example, on the way to work or shopping? (Please tick one)

☐ Yes

☐ No

22. How do you usually get to appointments at your GP's surgery?

(Please tick one)

☐ On foot

☐ Bicycle

☐ Bus

☐ Car

☐ Taxi

☐ Other (please specify)

.....

TRAVEL TO APPOINTMENTS AT NHS HOSPITALS

23. Have you consulted a specialist at an NHS hospital about your periods over the last 3 months? (Please tick one)

No ☒

(please go straight to question 28)

Yes ☐

24. Including travel to and from the hospital, how much time does attending a hospital appointment usually take out of your day?

☐ Up to 1 hour ☐ 1 to 1½ hours ☐ 1½ to 2 hours ☐ More than 2 hours

25. Approximately how far do you travel to get to and from hospital appointments? (Please tick one)

☐ Less than 5 miles ☐ 5 to 15 miles ☐ More than 15 miles

26. Is this journey usually part of your normal routine, for example, on the way to work or shopping? (Please tick one)

☐ Yes ☐ No

27. How do you usually get to hospital appointments? (Please tick one)

☐ On foot ☐ Bicycle ☐ Bus ☐ Car ☐ Taxi ☐ Other (please specify)

.....

TRAVEL TO APPOINTMENTS WITH PRIVATE HEALTH CARE PROFESSIONALS

28. Have you consulted a private health care professional about your periods over the last 3 months? (Please tick one)

No ☐

(please go straight to last page)

Yes ☐

29. Including travel to and from the private health care clinic or hospital, how much time does attending an appointment usually take out of your day?

☐ Less than 30 minutes ☐ 30 minutes to 1 hour ☐ 1 to 2 hours ☐ More than 2 hours

30. Approximately how far do you travel to get to and from appointments? (Please tick one)

☐ Less than 5 miles ☐ 5 to 15 miles ☐ More than 15 miles

31. Is this journey usually part of your normal routine, for example, on the way to work or shopping? (Please tick one)

☐ Yes ☐ No

32. How do you usually get to appointments? (Please tick one)

☐ On foot ☐ Bicycle ☐ Bus ☐ Car ☐ Taxi ☐ Other (please specify)

.....

For
office
use:

STUDY RESULTS:

If you would like to receive a copy of the report of the results (due to be published in the autumn of 2003), please tick this box:

☐

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE

Please feel free to write any comments you may have in the box below.

Your comments:

Appendix 28A

Letter sent to patients in the Usual Care Group at Three-month Follow-up



Alison Gamon
ACUMEN Researcher

ACUMEN Research Centre
122a Acomb Road
York YO24 4EY
Tel: 01904 781630

ACUMEN

Acupuncture for Menorrhagia Study

3-month follow-up Questionnaire

Dear

Thank you for taking part in the York and Selby *Acupuncture for Menorrhagia Study (ACUMEN)*. It is now 3 months since you first joined the study, which is why I am sending you the 2nd of your ACUMEN questionnaires (only 1 more to go!). Your questionnaire answers are very important. Without them we would be unable to see just how helpful acupuncture might be for the thousands of women whose lives are affected by heavy periods.

This questionnaire is very similar to the first, and most of the questions about your health will be familiar to you. The main difference is the addition of a *Health Care Costs* questionnaire. Your answers to these questions will help us to see how much acupuncture would cost and save the NHS and how much it would cost and save women?

This questionnaire should take no more than 20 minutes to complete. But if you do have any problems filling it in, please do not hesitate to contact me here at the research centre. If you'd rather meet in person, as opposed to talking over the phone, please let me know.

Thank you again for taking part in the *Acupuncture for Menorrhagia Study*.

With very best wishes

Alison Gamon, University of York

***£20 M&S Voucher or
Chocolates and Champagne to be Won!***
***Just complete and return your questionnaires
(3-month & 6-month)
and you will be entered into the
Standard Care Group Prize Draw
to win
£20 M&S Voucher or Chocolates and Champagne!!***

Appendix 28B

Letter sent to patients in the Usual Care Group at Six-month Follow-up

THE UNIVERSITY of *York*

Department of Health Sciences
& Clinical Evaluation

FOUNDATION for TRADITIONAL
CHINESE MEDICINE

Registered Charity
No. 702083



MEDICAL CARE
RESEARCH UNIT

University of Sheffield



Alison Gamon
ACUMEN Researcher

ACUMEN Research Centre
122a Acomb Road
York YO24 4EY
Tel: 01904 781630

ACUMEN

Acupuncture for Menorrhagia Study

6-month follow-up Questionnaire

Dear

Thank you for taking part in the York and Selby *Acupuncture for Menorrhagia Study (ACUMEN)*. It is now 6 months since you first joined the study, which is why I am sending you the last of your ACUMEN questionnaires! ***Your questionnaire answers are very important.*** Without them we would be unable to see just how helpful acupuncture might be for the thousands of women whose lives are affected by heavy periods.

This questionnaire is almost identical to the last one, and the questions about your health and health care costs will be familiar to you. We have just added 3 questions that ask, "*knowing what you know now about treatment for heavy periods*", what treatment would you want in the future and what treatment would you recommend other women try?

This questionnaire should take no more than 20 minutes to complete. But if you do have any problems filling it in, please do not hesitate to contact me at the above address. If you'd rather meet in person, as opposed to talking over the phone, just let me know.

The results of this study will be published in a health care journal sometime after the autumn of 2003. If you would like me to send you a copy of the report, please tick the box at the back of the questionnaire. A **Newsletter** announcing the ***winner of the Standard Care Group prize draw*** will be sent to you in the New Year (it could be you!).

Thank you again for taking part in the *Acupuncture for Menorrhagia Study*.
With very best wishes

Alison Gamon, University of York

Remember!

***If you complete and return your questionnaire
you could win the***

Standard Care Group Prize Draw

for

£20 M&S Voucher or Chocolates and Champagne!

Appendix 29

Letter sent to Patients at Twelve-month Follow-up



Alison Gamon
ACUMEN Researcher

ACUMEN Research Centre
122a Acomb Road
York YO24 4EY
Tel: 01904 781630

ACUMEN

Acupuncture for Menorrhagia Study 12-month follow-up Questionnaire

Dear

THE ACUMEN STORY SO FAR

Thank you for taking part in the *York and Selby Acupuncture for Menorrhagia Study (ACUMEN)*. The reason for my writing is to let you know how well the study is going. By April 2002 we had successfully recruited 39 patients to the study out of a target of 40. Indeed, the positive response we have had from women has been overwhelming, thank you.

I would also like to thank you for returning your 3 and 6-month follow-up questionnaires. In fact, a fantastic 95% of women have returned their 3-month follow-up questionnaires, and the numbers returning their 6-month follow-ups are also good (90%). This means that we are well on our way to finding out just how beneficial acupuncture might be for women with heavy periods.

What we won't be able to tell from these questionnaires, however, is if these benefits might last in the long-term. This is clearly an important issue. And it is for this reason that I am writing to ask for your help with a **12-month follow-up questionnaire**.

The questionnaire is enclosed and is almost identical to the last one. I am hoping, therefore, that it will not take up too much more of your time. However, I am aware that I am asking you to put aside extra time to complete a further questionnaire. And I will therefore be entering everyone who returns a completed questionnaire into an **"End of Study Prize Draw"**. The winner will be announced in May 2003 and will receive a **£20 gift voucher of their choice** (it could be you!!). *Please note that this End of Study Prize Draw is separate from, and in addition to, the Standard Care Prize Draw announced in our last Newsletter.*

Thank you again for taking part in the *Acupuncture for Menorrhagia Study*.

With very best wishes

Alison Gamon, University of York

Remember!
If you complete and return your questionnaire
you could win the
End of Study Prize Draw
For a
£20 M&S Voucher!

Appendix 30

ACUMEN (Six and) Twelve-Month Follow-up Questionnaire

*The original questionnaire was printed on pale green paper.
Please note that the Health Care Costs Questionnaire that was printed on yellow paper and
included at the back of the entire questionnaire is not reproduced here.
Instead, please see Appendix 27, ACUMEN Three-Month Follow-Up Questionnaire.*

ACUMEN

A Research Collaboration

THE UNIVERSITY of *York*
Department of Health Sciences

FOUNDATION for TRADITIONAL
CHINESE MEDICINE
Registered Charity
No. 702083



MEDICAL CARE
RESEARCH UNIT
University of Shef-



CONFIDENTIAL

Trial Participant Twelve-Month Follow-Up Questionnaire

Affix Participant Study I.D.

Enter the date the questionnaire was posted to the participant

**Please return the completed questionnaire in the
envelope provided**

You do NOT need a stamp

Thank you for your help

YOUR HEALTH IN GENERAL - SF-36

The following questions ask you about your health. This information will help keep track of how you feel and how well you are able to do your usual activities.

If you are unsure how to answer a question, please give the best answer you can.

1. In general, would you say your health is:
(Please tick one)

- | | | |
|------------------|-----------------------|----------|
| Excellent | <input type="radio"/> | 5 |
| Very Good | <input type="radio"/> | 4 |
| Good | <input type="radio"/> | 3 |
| Fair | <input type="radio"/> | 2 |
| Poor | <input type="radio"/> | 1 |

2. Compared with twelve months ago, how would you rate your health now?
(Please tick one)

- | | | |
|---|-----------------------|----------|
| Much better now than twelve months ago | <input type="radio"/> | 5 |
| Somewhat better now than twelve months ago | <input type="radio"/> | 4 |
| About the same as twelve months ago | <input type="radio"/> | 3 |
| Somewhat worse now than twelve months ago | <input type="radio"/> | 2 |
| Much worse now than twelve months ago | <input type="radio"/> | 1 |

HEALTH AND DAILY ACTIVITIES

3. The following questions, in the table below, are about activities you might do during a typical day.

Does your health now limit you in these activities? If so, how much?

(Please circle one number on each line)

ACTIVITIES	Yes, limited a lot	Yes, limited a little	No, not limited at all
a. Vigorous activities , such as running, lifting heavy objects, participating in strenuous sports	1	2	3
b. Moderate activities , such as moving a table, pushing a vacuum cleaner, bowling or playing golf	1	2	3
c. Lifting or carrying groceries	1	2	3
d. Climbing one flight of stairs	1	2	3
e. Climbing several flights of stairs	1	2	3
f. Bending, kneeling or stooping	1	2	3
g. Walking more than one mile	1	2	3
h. Walking several hundred yards	1	2	3
i. Walking one hundred yards	1	2	3
j. Bathing and dressing yourself	1	2	3

4. **During the past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of your physical health?**

(Please circle one number on each line)

During the past 4 weeks, how much of the time have you..... due to your physical health?	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Cut down on the amount of time you spent on work or other activities	1	2	3	4	5
b. Accomplished less than you would like	1	2	3	4	5
c. Were limited in the kind of work or other activities you could do	1	2	3	4	5
d. Had difficulty performing the work or other activities (for example, it took extra effort)	1	2	3	4	5

5. During the **past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of any emotional problems** (such as feeling depressed or anxious)?

(Please circle one number on each line)

During the past 4 weeks, how much of the time have you..... as a result of any emotional problems?	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Cut down on the amount of time you spent on work or other activities	1	2	3	4	5
b. Accomplished less than you would like	1	2	3	4	5
c. Did work or other activities less carefully than usual	1	2	3	4	5

6. **During the past 4 weeks**, to what extent has your **physical health or emotional problems** interfered with your **normal social activities** with family, friends, neighbours or groups?

(Please tick one)

Not at all	<input type="radio"/>	5
Slightly	<input type="radio"/>	4
Moderately	<input type="radio"/>	3
Quite a bit	<input type="radio"/>	2
Extremely	<input type="radio"/>	1

7. How much **bodily pain** have you had **during the past 4 weeks**?

(Please tick one)

None	<input type="radio"/>	6
Very mild	<input type="radio"/>	5
Mild	<input type="radio"/>	4
Moderate	<input type="radio"/>	3
Severe	<input type="radio"/>	2
Very severe	<input type="radio"/>	1

8. **During the past 4 weeks**, how much did **pain** interfere with your **normal work** (including work outside the home and housework)?

(Please tick one)

Not at all	<input type="radio"/>	5
A little bit	<input type="radio"/>	4
Moderately	<input type="radio"/>	3
Quite a bit	<input type="radio"/>	2
Extremely	<input type="radio"/>	1

YOUR FEELINGS

9. These questions, in the table below, are about how you feel and how things have been with you, **during the last 4 weeks**.

For each question please indicate one answer that comes closest to **the way you have been feeling**, during the past 4 weeks.

(Please circle one number on each line)

How much of the time during the past 4 weeks.....	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a. Did you feel full of life?	5	4	3	2	1
b. Have you been very nervous?	1	2	3	4	5
c. Have you felt so down in the dumps that nothing could cheer you up?	1	2	3	4	5
d. Have you felt calm and peaceful?	5	4	3	2	1
e. Did you have a lot of energy?	5	4	3	2	1
f. Have you felt down-hearted and low?	1	2	3	4	5
g. Did you feel worn-out?	1	2	3	4	5
h. Have you been happy?	5	4	3	2	1
i. Did you feel tired?	1	2	3	4	5

GENERAL HEALTH

10. **During the past 4 weeks**, how much of the time has your **physical health or emotional problems** interfered with your **social activities** (like visiting friends, relatives, etc.)?

(Please tick one)

- All of the time** ☐ 5
Most of the time ☐ 4
Some of the time ☐ 3
A little of the time ☐ 2
None of the time ☐ 1

11. How **TRUE** or **FALSE** is **each** of the following statements for you?

(Please circle one number on each line)

Statements:	Definitely True	Mostly True	Not sure	Mostly False	Definitely False
a. I seem to get ill more easily than other people	1	2	3	4	5
b. I am as healthy as anybody I know	1	2	3	4	5
c. I expect my health to get worse	1	2	3	4	5
d. My health is excellent	1	2	3	4	5

YOUR HEALTH IN GENERAL - EQ-5D

The statements below are also about your health in general.

To indicate **which statements best describe your own health state TODAY**, please **tick one** of the three statements **under each heading**.

1. Mobility *(tick one)*

- 1 ☐ I have no problems in walking about
- 2 ☐ I have some problems in walking about
- 3 ☐ I am confined to bed

2. Self-Care *(tick one)*

- 1 ☐ I have no problems with self-care
- 2 ☐ I have some problems washing or dressing myself
- 3 ☐ I am unable to wash or dress myself

3. Usual Activities *(tick one)*

(e.g. work, study, housework, family or leisure activities)

- 1 ☐ I have no problems with performing my usual activities
- 2 ☐ I have some problems with performing my usual activities
- 3 ☐ I am unable to perform my usual activities

4. Pain/Discomfort *(tick one)*

- 1 ☐ I have no pain or discomfort
- 2 ☐ I have moderate pain or discomfort
- 3 ☐ I have extreme pain or discomfort

5. Anxiety/Depression *(tick one)*

- 1 ☐ I am not anxious or depressed
- 2 ☐ I am moderately anxious or depressed
- 3 ☐ I am extremely anxious or depressed

YOUR HEALTH TODAY

This question asks you:

“How good or bad is your health today?”

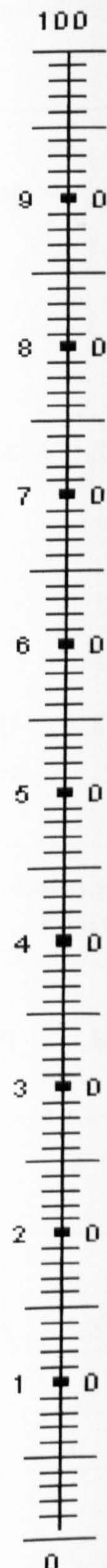
To help you answer this question, we have drawn a scale that looks like a thermometer.

Imagine that at the very top, **at 100, is the best health you can imagine experiencing today**, and that at the very bottom, **at 0, is the worst health you can imagine experiencing today**.

To indicate how good or bad your health is today, **please draw a line from ‘your health today’, to the point on the thermometer** that best represents how good or bad your health is today.

Your health today

Best health imaginable



Worst health imaginable

YOUR PERIODS (AMQ)

The following questions ask you about your periods and how they have affected your ability to manage in everyday life.

If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult next to your answer.

1. On average, **during the last three months**, for how many days did your period last?

(Please tick one)

Less than 3 days ☐ 1

Between 3 and 7 days ☐ 2

Between 8 and 10 days ☐ 3

More than 10 days ☐ 4

2. On average, **during the last three months**, were your periods regular or irregular?

(Please tick one)

Regular ☐ 1

Irregular ☐ 2

3. On average, **during the last three months**, how many days were there from the first day of one period to the first day of the next period?

(Please tick one)

Less than 21 days ☐ 1

Between 21 and 35 days ☐ 2

More than 35 days ☐ 3

4. On average, **during the last three months**, would you describe your period as?

(Please tick one)

Light ☐ 1

Moderate ☐ 2

Heavy ☐ 3

Very Heavy ☐ 4

5. On average, **during the last three months**, for how many days of each period was the bleeding heavy?
(Please tick one)

- | | | |
|-----------------------|--------------------------|---|
| Not heavy | <input type="checkbox"/> | 1 |
| Between 1 and 3 days | <input type="checkbox"/> | 2 |
| Between 4 and 6 days | <input type="checkbox"/> | 3 |
| Between 7 and 10 days | <input type="checkbox"/> | 4 |
| More than 10 days | <input type="checkbox"/> | 5 |

6. On average, **during the last three months**, have your periods been associated with any pain?
(Please tick one)

- | | | |
|------------------|--------------------------|---|
| No pain at all | <input type="checkbox"/> | 1 |
| Slight pain | <input type="checkbox"/> | 2 |
| Moderate pain | <input type="checkbox"/> | 3 |
| Severe pain | <input type="checkbox"/> | 4 |
| Very severe pain | <input type="checkbox"/> | 5 |

7. On average, **during the last three months**, have you had any problems with soiling/staining any of the following because of your periods?
(Please tick all that apply)

- | | | |
|--|--------------------------|---|
| No, not at all | <input type="checkbox"/> | |
| Soiling/staining of your outer-clothes/over-garments | <input type="checkbox"/> | 1 |
| Soiling/staining of your bed linen | <input type="checkbox"/> | 2 |
| Soiling/staining of your upholstery | <input type="checkbox"/> | 3 |

8. On average, **during the last three months**, have your periods prevented you from carrying out your work, housework or other daily activities?
(Please tick one)

- | | | |
|--|--------------------------|---|
| No, not at all | <input type="checkbox"/> | 1 |
| I could continue to work, but my work suffered | <input type="checkbox"/> | 2 |
| Yes, usually for no more than one day with each period | <input type="checkbox"/> | 3 |
| Yes, usually for more than one day with each period | <input type="checkbox"/> | 4 |

9. On average, **during the last three months**, have you been confined to bed with each period?
(Please tick one)
- | | | |
|-------------------------------|--------------------------|---|
| No, not at all | <input type="checkbox"/> | 1 |
| Yes, for part of one day | <input type="checkbox"/> | 2 |
| Yes, for the whole of one day | <input type="checkbox"/> | 3 |
| Yes, for more than one day | <input type="checkbox"/> | 4 |

10. On average, **during the last three months**, have your leisure activities been affected by your heavy periods? (Including social life, hobbies, sport).
(Please tick one)
- | | | |
|--|--------------------------|---|
| Not affected by heavy periods | <input type="checkbox"/> | 1 |
| Mildly affected by heavy periods | <input type="checkbox"/> | 2 |
| Moderately affected by heavy periods | <input type="checkbox"/> | 3 |
| Severely affected by heavy periods | <input type="checkbox"/> | 4 |
| Heavy periods prevented any social life at all | <input type="checkbox"/> | 5 |

11. On average, **during the last three months**, has your sex life been affected by your heavy periods?
(Please tick one)
- | | | |
|---|--------------------------|---|
| Not affected by heavy periods | <input type="checkbox"/> | 1 |
| Mildly affected by heavy periods | <input type="checkbox"/> | 2 |
| Moderately affected by heavy periods | <input type="checkbox"/> | 3 |
| Severely affected by heavy periods | <input type="checkbox"/> | 4 |
| Heavy periods prevented any sex life at all | <input type="checkbox"/> | 5 |
| Does not apply | <input type="checkbox"/> | 6 |

12. On average, **during the last three months**, how many tampons might you use on the heaviest day of your period?
(Please tick one)
- | | | |
|---------------------------|--------------------------|---|
| No tampons at all | <input type="checkbox"/> | 1 |
| Between 1 and 5 tampons | <input type="checkbox"/> | 2 |
| Between 6 and 10 tampons | <input type="checkbox"/> | 3 |
| Between 11 and 15 tampons | <input type="checkbox"/> | 4 |
| More than 15 tampons | <input type="checkbox"/> | 5 |

13. On average, how many sanitary towels might you use **on the heaviest day** of your period?

(Please tick one)

- | | | |
|-----------------------------------|--------------------------|---|
| No sanitary towels at all | <input type="checkbox"/> | 1 |
| Between 1 and 5 sanitary towels | <input type="checkbox"/> | 2 |
| Between 6 and 10 sanitary towels | <input type="checkbox"/> | 3 |
| Between 11 and 15 sanitary towels | <input type="checkbox"/> | 4 |
| More than 15 sanitary towels | <input type="checkbox"/> | 5 |

14. At any time **during the last three months**, did you require more than one form of protection at the same time (not including mini-sanitary towels or panti-liners)?

(Please tick one)

- | | | |
|--|--------------------------|---|
| No | <input type="checkbox"/> | 1 |
| Tampon and pad together | <input type="checkbox"/> | 2 |
| Two pads together / Tampon and two pads together | <input type="checkbox"/> | 3 |
| More protection than this (i.e. disposable nappies, towels etc.) | <input type="checkbox"/> | 4 |

OTHER PERIOD SYMPTOMS

This question asks about symptoms, apart from heavy bleeding, that are often associated with menstruation.

Please use the space at the bottom of the table to tell us about any symptoms you experience that are not listed here.

1. **Over the past 3 months, how troublesome** were the following period symptoms?
(Please circle one number in each row)

Period Symptom	Not at all troublesome	Slightly troublesome	Moderately troublesome	Very troublesome	Extremely troublesome
Period pain/ cramps	1	2	3	4	5
Backache	1	2	3	4	5
Tender or swollen breasts	1	2	3	4	5
Bloating	1	2	3	4	5
Fluid retention	1	2	3	4	5
Migraine or headache	1	2	3	4	5
Tiredness or fatigue	1	2	3	4	5
Irritability	1	2	3	4	5
Tension	1	2	3	4	5
Feeling low or depressed	1	2	3	4	5
Anxiety	1	2	3	4	5
Difficulty concentrating	1	2	3	4	5
Crying bouts	1	2	3	4	5
Clumsiness	1	2	3	4	5
Aggression	1	2	3	4	5
Other:	1	2	3	4	5
Other:	1	2	3	4	5

YOUR MOST RECENT PERIOD

The following questions ask you how much your most recent period troubled you.

If you are unsure how to answer a question,
please give the best answer you can.

1. **At your most recent period**, how **troublesome** were the following symptoms?

(Please circle one number in each row)

Symptom	Not at all troublesome	Slightly troublesome	Moderately troublesome	Very troublesome	Extremely troublesome
Heavy bleeding	1	2	3	4	5
Period Pain/ cramps	1	2	3	4	5
Tiredness or fatigue	1	2	3	4	5

3. **At your most recent period**, for how many days did your period **prevent** you from carrying out your work, looking after your home and family, or attending college/university?

Please write in the number of days:

days

(N.B. if your **periods did not prevent** you from carrying out these activities and responsibilities, please write **0** in the box above).

MORE ABOUT YOUR PERIODS

If you are unsure how to answer a question,
please give the best answer you can and write why you found a question difficult
next to your best answer.

1. Since you last completed an ACUMEN questionnaire, about 6 months ago,
have you had any of the following tests or gynaecological operations because of
your periods?

(Please tick all that apply)

- No☐ 1
- Blood tests☐ 2
- Dilation and curettage (D & C)☐ 3
- Hysteroscopy☐ 4
- Laparoscopy☐ 5
- Pelvic ultrasound☐ 6
- Other (please tell us about this in the box below)☐ 7

2. Since you last completed an ACUMEN questionnaire, about 6 months ago,
has your GP or specialist asked you to consider having any of the following
surgical treatments? (Please tick all that apply)

- No☐ 1
- Hysterectomy☐ 2
- Endometrial ablation☐ 3
- Endometrial resection☐ 4
- Hysteroscopy☐ 5
- Laparoscopy☐ 6
- Other (please tell us about this in the box below)☐ 7

3. **Since you last completed an ACUMEN questionnaire, about 6 months ago,**
have you been put on the waiting list for any of the following surgical treatments?
(Please tick all that apply)

No	<input type="checkbox"/>	1
Hysterectomy	<input type="checkbox"/>	2
Endometrial ablation	<input type="checkbox"/>	3
Endometrial resection	<input type="checkbox"/>	4
Hysteroscopy	<input type="checkbox"/>	5
Laparoscopy	<input type="checkbox"/>	6
Other (please tell us about this in the box below)	<input type="checkbox"/>	7

4. **Since you last completed an ACUMEN questionnaire, about 6 months ago,**
has the type of contraception you use changed?
(Please tick one)

No	<input type="checkbox"/>	1
<i>Please go straight to question 6</i>		
Yes	<input type="checkbox"/>	2

5. **Do you now use any of the following contraceptives?**
(Please tick one)

No	<input type="checkbox"/>	1
Combined Oral Contraceptive Pill	<input type="checkbox"/>	2
Mini Pill	<input type="checkbox"/>	3
Mirena Coil or IUS (progestogen containing coil or intra-uterine system)	<input type="checkbox"/>	4
Depot Provera (contraceptive injection)	<input type="checkbox"/>	5
IUCD (copper coil or intra-uterine contraceptive device)	<input type="checkbox"/>	6

This question asks you about the **medicines you took at your most recent period**, including medicines taken for period symptoms other than heavy bleeding (e.g. period pain).

This question also asks if your medicine was **prescribed by a doctor or self-prescribed**. Self-prescribed means that you purchased this medication over-the-counter at a pharmacy, chemists or supermarket (e.g. Nurofen or vitamin and iron supplements).

If you are not currently taking any medication (drug treatments) or supplements (vitamins etc.) for your periods, **please tick this box** ☐

Name of medicine you took for your most recent period:	Prescribed by? (please tick one)	For how many days did you take this?	How many times per day?	How many tablets did you take each time?
Example: <i>Tranexamic acid</i>	<input checked="" type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed	7	3	2
Example: <i>Vitamin & iron supplements</i>	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input checked="" type="radio"/> Self-prescribed	28	1	2
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			
	<input type="radio"/> Prescribed by GP <input type="radio"/> Prescribed by gynaecologist <input type="radio"/> Self-prescribed			

7. Over the past 6 months, have you had any of the following treatments for your heavy periods? *(Please tick all that apply)*

- No ☐ 1
- Private acupuncture (paid for by you) ☐ 2
- Prescribed medication ☐ 3
- Hysterectomy ☐ 4
- Other *(please tell us about this in the box below)* ☐ 5

8. In what ways have your **periods changed over the last 6 months?**
(Please tick one)

- Vastly improved ☐ 1
- Much improved ☐ 2
- Slightly improved ☐ 3
- No change ☐ 4
- Slightly worsened ☐ 5
- Much worsened ☐ 6
- Vastly worsened ☐ 7

9. If you were told your periods would be **like they are now** until your menopause, how would you feel about it?
(Please tick one)

- Terrible ☐ 1
- Unhappy ☐ 2
- Mostly dissatisfied ☐ 3
- Mixed (about equally satisfied and dissatisfied) ☐ 4
- Mostly satisfied ☐ 5
- Pleased ☐ 6
- Delighted ☐ 7

1. Continued...	Have you experienced this?	If yes, how would you describe the strength of your reaction?				If yes, how much did this response concern you?				If yes, would you be prepared to experience this response again?
		Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	
k. Depression	Yes No									Yes No
l. Headache or migraine	Yes	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes
m. Skin problems (e.g. rashes or acne)	Yes	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes
n. Diarrhoea	Yes	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes
o. Stomach pain or discomfort	Yes	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes
p. Breast tenderness	Yes	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes
q. Water retention	Yes No	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes No
r. Weight changes (gain or loss)	Yes No	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes No
s. Other:	Yes No	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes No
t. Other:	Yes No	Mild	Moderate	Severe		Not at all	A bit	Quite a bit	A great deal	Yes No
Your comments:										

TREATMENT SIDE EFFECTS

(Please circle your answers)

	Have you experienced this?	If yes, how would you describe the strength of your reaction?			If yes, how much did this response concern you?				If yes, would you be prepared to experience this
		Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes
a. Feeling drowsy	Yes								
b. Feeling dizzy	Yes	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes
c. Vertigo or severe dizziness	Yes	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes
d. Feeling faint	Yes	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes
e. Fainting	Yes	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes
f. Feeling sick or nauseous	Yes	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes
g. Vomiting	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No
h. Irregular periods	Yes	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes
i. Erratic periods (stopping and starting)	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No
j. Absence of periods (no periods)	Yes No	Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	Yes No

ADVERSE EVENTS FROM TREATMENT

1. Over the past 6 months, have you received acupuncture for your heavy periods? (Please tick one)

No ☐ 1

Please go straight to page 22, 'Your Treatment Priorities'

Yes, I have received acupuncture **privately** (paid for by me) ☐ 2

2. **If yes**, have you experienced any of the following? (Please circle your answers)

	Have you experienced this?	If yes, how would you describe the strength of your reaction?			If yes, how much did this response concern you?				If yes, would you be prepared to experience this response again?
		Mild	Moderate	Severe	Not at all	A bit	Quite a bit	A great deal	
a. Pain where the acupuncture needle	Yes No								Yes No
b. Bruising where the acupuncture needle	Yes No								Yes No
c. Bleeding where the acupuncture needle was inserted for <u>more</u>	Yes No								Yes No
d. Other:	Yes No								Yes No
e. Other:	Yes No								Yes No

Your comments:

YOUR TREATMENT PRIORITIES

The following questions ask you to

think about your heavy periods and what you would like your treatment to help with.

If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult next to your best answer.

If you no longer experience heavy periods please tick this box ☐ and go to "Your Satisfaction with Treatment"

1. How important is reducing your menstrual **blood loss**?

(Please tick one)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

2. How important is increasing your **energy levels**?

(Please tick one)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

3. How important is increasing the **activities** you can do?

(Please tick one)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

4. How important is cutting down or avoiding **medication**?

(Please tick one)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

5. How important is avoiding **surgery**?

(Please tick one)

- Not important ☐ 1
Slightly important ☐ 2
Fairly important ☐ 3
Very important ☐ 4

YOUR SATISFACTION WITH TREATMENT

The following questions ask you about the treatment you have received for your heavy periods over the past three months.

If you are unsure how to answer a question, please give the best answer you can.

If you have not seen any health practitioner for treatment for your heavy periods over the past 6 months please tick this box ☐

and go to "Knowing What You Know Now"

1. ***Over the past 6 months, how satisfied were you with*** the following aspects of your treatment and care:

A) The **information** you were given about your heavy periods?

(Please tick one)

- | | | |
|------------------------------------|-----------------------|---|
| Very satisfied | <input type="radio"/> | 1 |
| Somewhat satisfied | <input type="radio"/> | 2 |
| Neither satisfied nor dissatisfied | <input type="radio"/> | 3 |
| Somewhat dissatisfied | <input type="radio"/> | 4 |
| Very dissatisfied | <input type="radio"/> | 5 |

B) The **treatment** you received for your heavy periods?

(Please tick one)

- | | | |
|------------------------------------|-----------------------|---|
| Very satisfied | <input type="radio"/> | 1 |
| Somewhat satisfied | <input type="radio"/> | 2 |
| Neither satisfied nor dissatisfied | <input type="radio"/> | 3 |
| Somewhat dissatisfied | <input type="radio"/> | 4 |
| Very dissatisfied | <input type="radio"/> | 5 |

C) The **overall care** you received for your heavy periods?

(Please tick one)

- | | | |
|------------------------------------|-----------------------|---|
| Very satisfied | <input type="radio"/> | 1 |
| Somewhat satisfied | <input type="radio"/> | 2 |
| Neither satisfied nor dissatisfied | <input type="radio"/> | 3 |
| Somewhat dissatisfied | <input type="radio"/> | 4 |
| Very dissatisfied | <input type="radio"/> | 5 |

MORE ABOUT YOUR SATISFACTION WITH TREATMENT

The following questions ask you about **the treatment and care you have received for your heavy periods** over the past 6 months.

How would you rate the following?.....

(Please circle one answer on each line)

1. The explanation of your condition and how treatment might help?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>
2. The explanation given about what treatment would involve for you?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>
3. The attention given to what you have to say?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>
4. The advice given to you about ways to become and stay healthy?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>
5. The friendliness and courtesy shown to you?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>
6. The respect shown to you, such as attention to your privacy?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>
7. The reassurance and support offered to you?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>
8. The time given to you at each visit for advice and/or treatment?	POOR <small>1</small>	FAIR <small>2</small>	GOOD <small>3</small>	VERY GOOD <small>4</small>	EXCELLENT <small>5</small>

Your comments:

KNOWING WHAT YOU KNOW NOW...

If you are unsure how to answer a question, please give the best answer you can and write why you have found a question difficult in the box below each question.

1. How strongly do you agree or disagree with the statements in the table below?

Knowing what I know now about treatments for heavy periods, if I could travel back in time 12 months.....

(Please circle one number in each line)

	Strongly agree	Agree	Uncertain	Disagree	Strongly disagree
A. I would want to have acupuncture	5	4	3	2	1
B. I would want to have prescribed medication	1	2	3	4	5
C. I would want to have a hysterectomy	1	2	3	4	5
D. I would want to have (please write in)	1	2	3	4	5

Your comments:

2. How strongly do you agree or disagree with the statements in the table below?

Knowing what I know now about treatments for heavy periods, if in the future (tomorrow or in 2 years time) I needed treatment for my heavy periods.....

(Please circle one number in each line)

	Strongly agree	Agree	Uncertain	Disagree	Strongly disagree
A. I would want to have acupuncture	5	4	3	2	1
B. I would want to have prescribed medication	1	2	3	4	5
C. I would want to have a hysterectomy	1	2	3	4	5
D. I would want to have (please write in)	1	2	3	4	5

Your comments:

3. How strongly do you agree or disagree with the statements in the table below?

Knowing what I know now about treatments for heavy periods.....

(Please circle one number in each line)

	Strongly agree	Agree	Uncertain	Disagree	Strongly disagree
A. I would recommend acupuncture to other women	5	4	3	2	1
B. I would recommend prescribed medication to other women	1	2	3	4	5
C. I would recommend a hysterectomy to other women	1	2	3	4	5
D. I would recommend to other women (please write in)	1	2	3	4	5

Your comments:

STUDY RESULTS:

If you would like to receive a copy of the report of the results please tick this box:

☐

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE

Please feel free to write any comments you may have in the box below.

Your comments:

Appendix 31

**York Research Ethics Committee Trial Application Letter
January 2001**



122A Acomb Road, York, YO24 4EY
Tel: 01904 781630

Local Research Ethics Committee
York Health Services Research Unit
Bootham Park Hospital
York YO30 7BY

19th January 2001

Dear Ms Mitchell

Re: Acupuncture for Menorrhagia Exploratory Trial

Together with my supervisors Ian Russell, Hugh MacPherson and Kate Thomas, I am applying for ethics approval for a research project that I am undertaking for the purposes of the DPhil in Health Sciences and Clinical Evaluation at the University of York. This is a collaborative DPhil project between the University of York, the York-based research Foundation for Traditional Chinese Medicine (FTCM) and the Medical Care Research Unit (MCRU), University of Sheffield.

The proposed research involves two studies that will run in parallel: first, an exploratory trial to assess the feasibility of a full-scale pragmatic, randomised controlled clinical trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care. Second, case studies of patient and practitioner perspectives on the acceptability and appropriateness of acupuncture treatment, and the nature of the intervention under investigation. The key objectives of the exploratory trial include testing recruitment, randomisation, measurement of outcome and calculating the power for a definitive trial. The key objectives of the case study include increasing our understanding of the factors which determine patient satisfaction or dissatisfaction with acupuncture treatment for menorrhagia and a full descriptive analysis of the acupuncture treatment process in a subset of the patients in the exploratory trial.

Thus, the design of the proposed research is in line with the framework for the evaluation of complex interventions proposed by the Medical Research Council in a recent discussion document (April 2000). Furthermore, the trial design we propose is currently being used in the York trial of acupuncture for the treatment of low back pain, which has been funded by the NHS Executive and undertaken by two of the research centres involved in this study of acupuncture (MCRU and FTCM).

Both the House of Lords Report on complementary and alternative Medicine (1999-2000) and the BMA report on acupuncture (2000) highlighted the need to develop the evidence base for acupuncture. We see this study as part of the widening debate about acupuncture and the NHS.

I hope this application meets the requirements of the York Local Research Ethics Committee in terms of contents and copies. Please let me know if it falls short in anyway,

Yours sincerely,



Alison Gamon
DPhil Student,
University of York

Enclosures:

- 11 copies of the completed application form
- 11 copies of the application form appendices 1 and 4
- 11 copies of the patient information booklet
- 11 copies of the patient consent form for the trial
- 11 copies of the patient consent form for the case studies
- 3 copies of the letter to patient's GPs
- 3 copies of the study summary for GPs
- 3 copies of the exploratory trial protocol
- 3 copies of the Aberdeen Menorrhagia Questionnaire
- 3 copies of the appendix 'case study proposal'
- 1 copy of the letters from 2 of the 3 acupuncturists providing treatment in this study
(One of the acupuncturist's is currently on holiday. Their letter will be forwarded to you as soon as is possible)

Appendix 32

Reply from York Research Ethics Committee
February 2001 – *amendments required*

Research and Development
Bootham Park
York
YO30 7BY

Telephone: (01904) 454814
Fax: (01904) 454810
Direct line: (01904) 454378
Assistant: (01904) 454822

Ms Alison Gamon
Department of Health Sciences
University of York
Heslington
York
North Yorkshire
YO1 5DD

20th February 2001

Dear Ms Gamon

YREC 01/02/003 An exploratory trial to assess the feasibility of a full scale pragmatic randomised controlled trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care.

Thank you for your application for approval by the York Research Ethics Committee of this proposed study, which was considered at our meeting on 19th February. The Committee reviewed the application form (dated 18/1/01), the protocol (dated 16/1/01), the questionnaire (dated 16/1/01), the information sheet and consent forms (dated 16/1/01), and the letter to subjects' GPs (dated 16/1/01).

The Committee expressed some concerns and I would welcome a response to the following issues:

1. Please rewrite the patient information sheet in layman's terms as it is too complex for the subject group. The text also needs to be more equitable about the treatments for menorrhagia. As it stands there is bias towards acupuncture.
2. Please omit the words 'The trial will fund up to £500 worth of acupuncture treatments' in the patient information sheet as this may be seen as an inducement to take part.
3. Please rephrase 'The interviews will be tape-recorded' so that subject's permission is requested for tape-recording of interviews and state details of what happens to the tapes after the study has concluded.
4. The consent form requires the name of the researcher to be included, as well as the signature, and a statement should be included that the subject will be given a copy of the consent form to keep.
5. The recruitment process needs greater clarity in terms of who will be getting the questionnaire and/or interview and what was being consented to at each stage. A consent form is required between patient and GP to formalise transfer of name and address to researcher.
6. The GP letter should state that the acupuncturist is responsible and indemnified for patients referred for study treatment.

We look forward to the opportunity of considering your application further.

Yours sincerely


Dr Jonathan Thow
York Research Ethics Committee

Approval of applications to the York Research Ethics Committee

1.1. The current membership of the Committee is as follows:

Dr Jonathan ThowChairman and Consultant Member
Alan Coates.....Vice-Chairman and Nurse Member
Dr Alexander Anderson...Consultant Member
Penny BainbridgeLay Member
Mr Alan Bedford.....Psychologist Member
Mitzi BlennerhassettLay Member
Dr Colin Jones.....Consultant Member
Dr Martin Reeder.....Consultant Member
Dr Robert Ruston.....GP Member
Mr Michael Stower.....Consultant Member
Ms Jane Turner.....Pharmacist Member
Bill DavidsonAdministrator (non-voting)

1.2. The Chairman may be contacted via the Administrator at the following address:

Department of Research and Development
York Health Services NHS Trust
Bootham Park Hospital
York
YO30 7BY

1.3. The YREC reference number allocated to the application must be quoted in all correspondence.

2.1. The investigator must reapply for approval by the Committee if the research is not started within one year of the date of this letter.

2.2. The investigator must conduct the research in accordance with good research practice as defined by the World Medical Association's Declaration of Helsinki (available at <http://www.wma.net/e/policy/17c.pdf>), the ICH Guideline for Good Clinical Practice (<http://www.ifpma.org/pdfifpma/e6.pdf>) and the Data Protection Act (<http://www.hmsa.gov.uk/acts/acts1998/19980029.htm>). Reference should be made to the draft EU Directive on Good Clinical Practice (http://europa.eu.int/eur-lex/en/dat/2000/c_300/c_30020001020en00320044.pdf) and to the Department of Health's draft Research Governance Framework for Health and Social Care (<http://www.doh.gov.uk/research/documents/researchgovernanceconsult.pdf>). The MRC recommendations for personal information in medical research and for research on children and the mentally incapacitated (http://www.mrc.ac.uk/ethics_a.html) must be followed if applicable. Summary guidelines specific to academic research and to research for the purposes of service evaluation or audit are available from the Administrator.

2.3. The investigator must notify the Chairman immediately of any information received by him or her or of which he or she becomes aware which may cast doubt upon or alter any information contained in the application or any subsequent document submitted to the Committee and/or which may raise questions about the safety and/or continued conduct of the research.

2.4. The investigator must refer any proposed amendment to the approved protocol to the Committee for further review and obtain the approval of the Committee prior to implementation of such amendment. In cases of emergency, where the welfare of the subject is paramount, exceptional action may be taken without such prior approval on condition that the investigator subsequently notifies the Committee of such action.

2.5. The investigator must notify the Committee if the research is discontinued or if any subject is withdrawn.

2.6. The investigator must report the progress of the research to the Committee by March of each year and notify the Committee of the conclusion and outcome of the research, including its publication in whole or in part.

3.1. The investigator must notify all associated staff, including junior doctors and nursing staff, of the research.

3.2. The investigator must submit a copy of this document and the letter of approval to the sponsor of the research.

Appendix 33

Amended Application to York Research Ethics Committee
March 2001



122A Acomb Road, York, YO24 4EY
Tel: 01904 781630

Dr Jonathan Thow
York Research Ethics Committee
Research and Development
Bootham Park
York
YO30 7BY

16th March 2001

Dear Dr Thow

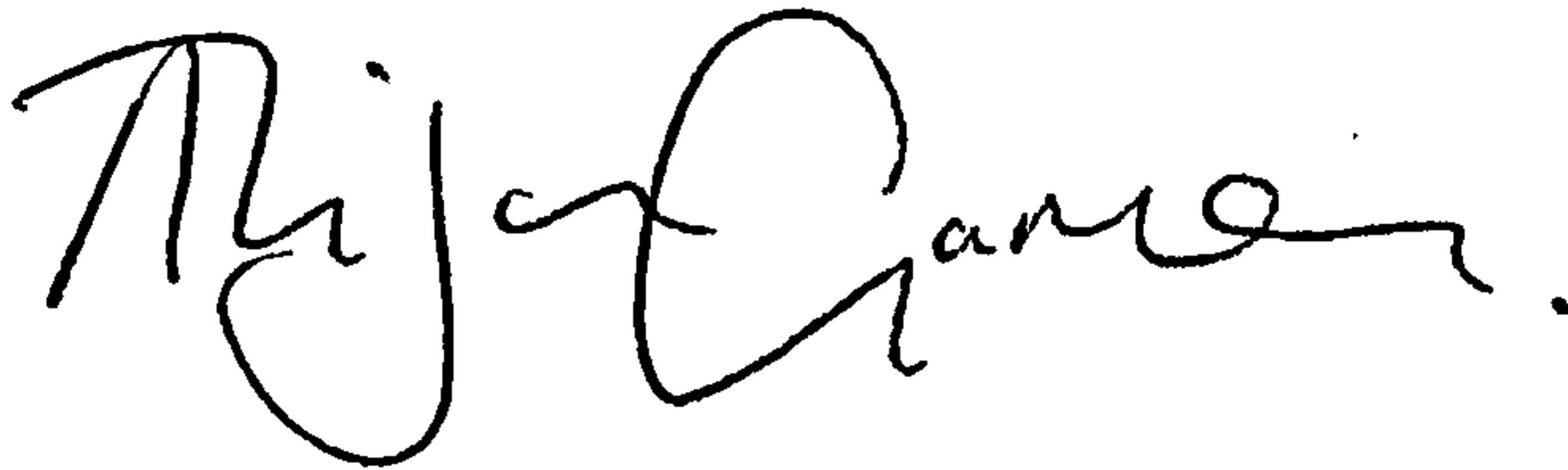
YREC 01/02/003 An exploratory trial to assess the feasibility of a full scale pragmatic randomised controlled trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care

Thank you for your letter of the 20th February. I have since met with my supervisors to discuss the issues raised by the committee at the meeting on the 19th February. In the revised application enclosed, we have sought to address all these issues. The amendments made are as follows:

1. The patient information sheet has been rewritten in layman's terms.
2. The patient information sheet is more equitable about the treatments for menorrhagia.
3. The words 'the trial will fund up to £500 worth of acupuncture' have been omitted.
4. The phrase 'interviews will be tape-recorded' has been amended so that the patient's permission is requested for tape-recording of interviews.
5. The patient is informed that the tapes will be erased at the end of the research.
6. The name of the researcher is included in the consent form.
7. The consent form includes a statement that the researcher will provide patients with a copy of the consent form to keep.
8. A separate information sheet and consent form has been drafted for patients invited to participate in interviews. This clarifies what is being consented to at each stage, and who will be getting the questionnaires only or questionnaires and interviews.
9. A recruitment consent form has been drafted to formalise the transfer of patient contact details to the researcher.
10. The GP letter states that the acupuncturist is responsible for the acupuncture care they provide and are indemnified for the patients they treat.
11. The application form, trial protocol, and case study proposal have been amended to reflect these changes.

I would like to thank you for offering to consider our application further. To facilitate this process I have enclosed both a copy with highlighted changes and a copy of the revised draft, where appropriate. I hope this application meets your requirements in terms of contents and copies. Please let me know if it falls short in any way.

Yours sincerely



Alison Gamon MSc, DPhil Student, University of York

Enclosures:

- Application form and appendices 1 and 4
 - One copy with highlighted changes (*dated 12/03/01*)
 - One copy of the revised draft (*dated 13/03/01*)
- Patient information sheet
 - One copy of the original (*dated 16/01/01*)
 - One copy of the revised draft (*dated 12/03/01*)
- Patient consent form for the trial
 - One copy with highlighted changes (*dated 12/03/01*)
 - One copy of the revised draft (*dated 12/03/01*)
- Patient information sheet and consent form for the case study
 - One copy of the original consent form (*dated 16/01/01*)
 - One copy of the patient information sheet and consent form (*dated 14/03/01*)
- GP letter
 - One copy with highlighted changes (*dated 15/03/01*)
 - One copy of the revised draft (*dated 15/03/01*)
- GP summary
 - One copy with highlighted changes (*dated 08/03/01*)
 - One copy of the revised draft dated (*dated 09/03/01*)
- One copy of the recruitment consent form (*dated 09/03/01*)
- Exploratory trial protocol
 - One copy with with highlighted changes (*dated 15/03/01*)
 - One copy of the revised draft (*dated 16/03/01*)
- Aberdeen menorrhagia questionnaire (*dated 16/01/01*)
- Appendix 'case study proposal'
 - One copy with highlighted changes (*dated 15/03/01*)
 - One copy of the revised draft (*dated 16/03/01*)
- Letter from the third acupuncturist providing treatment in this study (letters from the other 2 acupuncturists were submitted with the original application).

Appendix 34

Letter regarding York Research Ethics Committee Approval for ACUMEN

March 2001

Research and Development
Bootham Park
York
YO30 7BY

Telephone: (01904) 454814

Fax: (01904) 454810

Direct line: (01904) 454378

Assistant: (01904) 454822

Ms Alison Gamon
Department of Health Sciences
University of York
Heslington
York
North Yorkshire
YO1 5DD

21st March 2001


Dear Ms Gamon

YREC 01/02/003 An exploratory trial to assess the feasibility of a full scale pragmatic randomised controlled trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care.

Thank you for your letter of 16th March responding to the concerns expressed by the Committee in my letter of 20th February. The Committee reviewed the application form (dated 13/3/01), the protocol (dated 12/3/01), the questionnaire (dated 16/1/01), the recruitment material (dated 9/3/01 and 15/3/01), the information sheets and consent forms (dated 12/3/01 and 14/3/01), and the protocol (dated 16/3/01).

I am pleased to inform you that the Committee was satisfied by your responses and the study is therefore approved on ethical grounds for subjects in the York area. Approval is given on condition that you adhere to the terms set out in the attached document.

Yours sincerely



Dr Jonathan Thow
Chair, York Research Ethics Committee

Enc

Approval of applications to the York Research Ethics Committee

- 1.1.** The current membership of the Committee is as follows:
Dr Jonathan ThowChairman and Consultant Member
Dr Alexander Anderson...Consultant Member
Penny BainbridgeLay Member
Mr Alan Bedford.....Psychologist Member
Mitzi BlennerhassettLay Member
Alan Coates.....Nurse Member
Dr Colin Jones.....Consultant Member
Dr Martin Reeder.....Consultant Member
Dr Robert Ruston.....GP Member
Mr Michael Stower.....Consultant Member
Dr Patricia Sloper.....Social Scientist Member
Ms Jane Turner.....Pharmacist Member
Dr Jonathan Wilson.....Consultant Member
Bill DavidsonAdministrator (non-voting)
- 1.2.** The Chairman may be contacted via the Administrator at the following address:
York Research Ethics Committee, c/o Department of Research and Development
York Health Services NHS Trust, Bootham Park Hospital, York YO30 7BY
- 1.3.** The YREC reference number allocated to the application must be quoted in all correspondence.
- 2.1.** The investigator must reapply for approval by the Committee if the research is not started within one year of the date of this letter.
- 2.2.** The investigator must conduct the research in accordance with good research practice as defined by the World Medical Association's Declaration of Helsinki (available at <http://www.wma.net/e/policy/17c.pdf>), the ICH Guideline for Good Clinical Practice (<http://www.ifpma.org/pdfifpma/e6.pdf>) and the Data Protection Act (<http://www.hmsa.gov.uk/acts/acts1998/19980029.htm>). Reference should be made to the draft EU Directive on Good Clinical Practice (http://europa.eu.int/eur-lex/en/dat/2000/c_300/c_30020001020en00320044.pdf) and to the Department of Health's draft Research Governance Framework for Health and Social Care (<http://www.doh.gov.uk/research/documents/researchgovernanceconsult.pdf>). The MRC recommendations for personal information in medical research and for research on children and the mentally incapacitated (http://www.mrc.ac.uk/ethics_a.html) must be followed if applicable. Summary guidelines specific to academic research and to research for the purposes of service evaluation or audit are available from the Administrator.
- 2.3.** The investigator must notify the Chairman immediately of any information received by him or her or of which he or she becomes aware which may cast doubt upon or alter any information contained in the application or any subsequent document submitted to the Committee and/or which may raise questions about the safety and/or continued conduct of the research.
- 2.4.** The investigator must refer any proposed amendment to the approved protocol to the Committee for further review and obtain the approval of the Committee prior to implementation of such amendment. In cases of emergency, where the welfare of the subject is paramount, exceptional action may be taken without such prior approval on condition that the investigator subsequently notifies the Committee of such action.
- 2.5.** The investigator must notify the Committee if the research is discontinued or if any subject is withdrawn.
- 2.6.** The investigator must report the progress of the research to the Committee by March of each year and notify the Committee of the conclusion and outcome of the research, including its publication in whole or in part.
- 3.1.** The investigator must notify all associated staff, including junior doctors and nursing staff, of the research.
- 3.2.** The investigator should submit a copy of this document and the letter of approval to the sponsor of the research.

Appendix 35

Letter regarding Application for Chairs Action for Proposed Small Change to the ACUMEN
Protocol (database recruitment strategy)

January 2002

ACUMEN - A Research Collaboration

THE UNIVERSITY of *York*
Department of Health Sciences

FOUNDATION for TRADITIONAL
CHINESE MEDICINE
Registered Charity
No. 702083



MEDICAL CARE
RESEARCH UNIT
University of Shef-



ACUMEN Research Centre
122A Acomb Road, York, YO24 4EY
Tel: 01904 781630

Dr Jonathan Thow
York Research Ethics Committee
Research and Development
Bootham Park
York
YO30 7BY

28th January 2002

Dear Dr Thow

YREC 01/02/003 An exploratory trial to assess the feasibility of a full scale pragmatic randomised controlled trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care

We are writing to ask for your support for a small change we wish to make to the existing trial protocol. Now at the end of the planned recruitment period, we find that we have recruited 33 out of 40 patients, with 7 study places left. As a single GP practice in York genuinely wishes to use the acupuncture service being provided by the study, we are asking you to consider the proposed protocol amendment.

This amendment would involve Dr Manuela Fontebasso writing to suitable patients listed on her computerised practice list, to invite them to consider participating in a study that may involve the offer of acupuncture. Enclosed with her letter would be a brief information sheet about the study, and a stamped envelope addressed to the researcher. Patients who are interested in participating would be asked to contact the researcher either by phone or by returning the reply slip on the back of the letter. The researcher would then send the patient a copy of the approved ACUMEN Patient Information Sheet, before telephoning to arrange a suitable time to meet to discuss the study in further detail. From this point onwards the original study protocol would be adhered to; whereby informed consent would be obtained prior to the completion of the baseline measures and randomisation etc.

We would like to confirm with you that the small change to the existing protocol that we propose is acceptable, both in terms of ethical considerations and in terms of the integrity of the research itself. For this reason, we have enclosed a copy of the approved protocol with the proposed change to section 4.3 on page 5 of the protocol, (*"What are the proposed practical arrangements for allocating participants to trial groups?"*), highlighted in red. Please also see the relevant flow diagram [Figure 1, page 6 of the protocol]. We have also enclosed the proposed letter to be sent to patients by Dr Fontebasso, along with the proposed brief study information sheet, and a copy of the approved ACUMEN Patient Information Sheet.

I would like to thank you for your considered advice and support to date, and hope that this application meets with your requirements in terms of contents and copies. Please let me know if it falls short in any way.

Yours sincerely

Alison Gamon MSc MBAC
Doctoral Student, Department of Health Sciences, University of York

Enclosures:

- Protocol (*dated 22.01.02*)
- See section 4.3, page 5, for highlighted changes
- See Figure 1, page 6 for highlighted changes
- Letter to suitable patients from Dr Fontebasso (*dated 23.01.02*)
- Brief ACUMEN patient information sheet (*dated 24.01.02*)
- ACUMEN Patient Information Sheet (*dated 12.03.01*)

Appendix 36

**Letter regarding Approval from YREC Chair for Proposed Small Change to the ACUMEN Protocol
(database recruitment strategy)**

March 2002

Research and Development
Bootham Park
York
YO30 7BY

Tel: (01904) 725122

Direct line: (01904) 725125
E-mail: Joanne.Holmes@
EXCHA.YHS-TR.NORTHY.NHS.UK

Alison Gamon MSc MBAC
Doctoral Student
Department of Health Sciences
ACUMEN Research Centre
122A Acomb Road
York
YO24 4EY

11 March 2002

Dear Ms Gamon

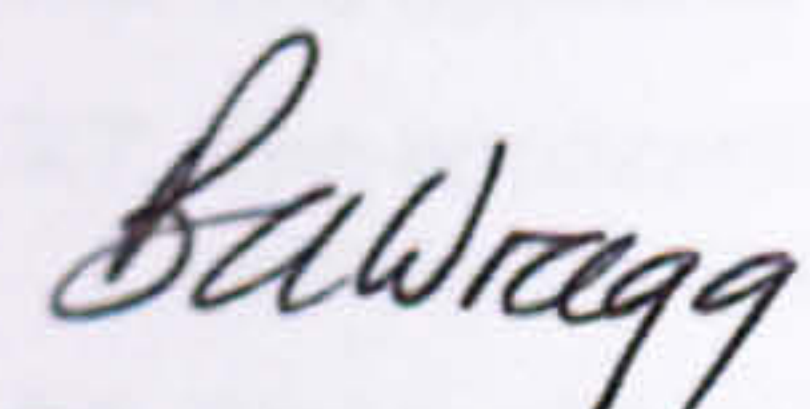
YREC REFERENCE: 01/02/003 An exploratory trial to assess the feasibility of a full scale pragmatic randomised controlled trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care.

I write to acknowledge receipt of your letter of 04 February 02 notifying us of the change to the existing protocol, (dated 16 March 01) relating to YREC 01/02/003, (the revised protocol (version 4, dated 22 January 02), the revised recruitment material (draft patient's letter dated 23 January 02), the patient's brief information sheet (undated).

I am pleased to inform you that we have no objection to this amendment, which is therefore approved for the York area on condition that you otherwise follow the previously approved protocol.

Thank you for this information.

Yours sincerely



Dr Jonathan Thow
Chair, York Research Ethics Committee

Approval by York Research Ethics Committee

1.1. The Committee is constituted in accordance with the Governance Arrangements for NHS Research Ethics Committees, which express relevant legislation (such as EU Directive 2001/20/EC) and, insofar as is consistent with legislation, generally recognized guidance (such as the ICH Guideline for Good Clinical Practice).

1.2. The current membership is of the Committee is as follows:

Dr Jonathan Thow (Chair)Consultant Physician, York Health Services NHS Trust
Ms Penny Bainbridge (Vice-Chair).....Lay Member
Mr Alan Coates (Vice-Chair).....Quality Development Support Manager, York Health Services NHS Trust
Mr Alan BedfordClinical Psychologist, Selby & York Primary Care Trust
Ms Maria GoddardAssistant Director, University of York Centre for Health Economics
Dr Colin JonesConsultant Nephrologist, York Health Services NHS Trust
Dr Martin ReederConsultant Anaesthetist, York Health Services NHS Trust
Dr Robert RustonGeneral Practitioner, Selby & York Primary Care Trust
Prof Patricia SloperSenior Research Fellow, University of York Social Policy Research Unit
Mr Michael StowerConsultant Urologist, York Health Services NHS Trust
Ms Jane TurnerMedicines Information Pharmacist, York Health Services NHS Trust
Dr Jonathan WilsonConsultant Anaesthetist, York Health Services NHS Trust

2.1. The Committee may be contacted via the Administrator, Joanne Holmes, at the following address:

York Research Ethics Committee
c/o Research Unit
York Health Services NHS Trust
Bootham Park
York
YO30 7BY
Tel: (01904) 725125
Fax: (01904) 454810
E-mail: Joanne.Holmes@EXCHA.YHS-TR.NORTHY.NHS.UK

2.2. The YREC reference number allocated to the application must be quoted in all correspondence.

3.1. The applicant must reapply for approval by the Committee if the project is not started within a year of the date of the approval letter.

3.2. The project must be conducted in accordance with the Research Governance Framework for Health and Social Care, relevant legislation (such as EU Directive 2001/20/EC and the Data Protection Act 1998) and, insofar as is consistent with legislation, generally recognized guidance (such as the ICH Guideline for Good Clinical Practice and the MRC Guidelines on Ethics and Good Practice).

3.3. The applicant must notify the Committee of any information received by him or her or of which he or she becomes aware which may cast doubt on or alter any information contained in the application or any subsequent document submitted to the Committee and/or which may raise questions about the safety and/or continuation of the project.

3.4. The applicant must refer any proposed amendment to the approved application to the Committee for approval prior to its implementation. The amendment may be implemented without prior approval if the welfare of the subject is at risk on condition that the applicant notifies the Committee immediately.

3.5. The applicant must notify the Committee of any previously unknown adverse reaction to the intervention which results in death, immediate threat to life, disability or incapacity, admission to hospital or prolonged in-patient stay or genetic anomaly. This notification must include an assessment of the implications of the reaction for the safety and continuation of the project. Notification of previously documented reactions and reactions which do not result in the aforementioned outcomes is discouraged.

3.6. The applicant must refer any proposed extension to the approved duration of the project to the Committee for prior approval.

3.7. The applicant must notify the Committee if the project is completed, suspended or abandoned or if any subject withdraws or is withdrawn or if there is a change in project staff.

3.8. The applicant must report the progress of the project to the Committee by 1st February each year and notify the Committee of the conclusion and outcome of the project, including its publication in whole or in part. The standard form available from the Administrator must be used.

4.1. The applicant must notify all associated staff, including junior doctors and nursing staff, of the project.

4.2. The applicant must supply a copy of the approval letter and this document to the sponsor of the project.

5.1. References are available from the following web sites:

<i>Governance Arrangements for NHS Research Ethics Committees</i>	www.doh.gov.uk/research/documents/gafrec.pdf
<i>Research Governance Framework for Health and Social Care</i>	www.doh.gov.uk/research/rd3/nhsrandd/researchgovernance/pdf/researchgovframework.pdf
<i>EU Directive 2001/20/EC</i>	europa.eu.int/eur-lex/en/lif/dat/2001/en_301L0020.html
<i>Data Protection Act 1998</i>	www.hmso.gov.uk/acts/acts1998/19980029.htm
<i>ICH Guideline for Good Clinical Practice</i>	www.lfpma.org/pdf/lfpma/e6.pdf
<i>MRC Guidelines on Ethics and Good Practice</i>	www.mrc.ac.uk/ethics_a.html

Appendix 37

ACUMEN Patient Consent Form

RESEARCH CONSENT FORM

TO BE COMPLETED BY ALL PARTICIPANTS IN RESEARCH

Please read this form carefully. Please ask if you do not understand anything or would like more information.

EXPLORATORY TRIAL TO ASSESS THE FEASIBILITY OF A FULL TRIAL TO EVALUATE THE BENEFITS OF OFFERING ACUPUNCTURE TO PATIENTS WITH MENORRHAGIA IN PRIMARY CARE

Study site: The York Clinic for Complementary Medicine, the Northern Acupuncture Clinic and the Healing Clinic, York.

Researchers:

Ms. Alison Gamon (Department of Health Sciences and Clinical Evaluation, University of York, York)

Prof. Ian Russell (Department of Health Sciences and Clinical Evaluation, University of York, York)

Ms. Kate Thomas (Medical Care Research Unit, University of Sheffield, Sheffield)

Dr. Hugh MacPherson (Foundation for Traditional Chinese Medicine, York)

Dr. Manuela Fontebasso (GP Project Advisor, York)

Name of participant..... DoB

Brief statement of the purpose of the research:

This is an exploratory trial to try out research procedures and discover problems before embarking upon a large trial. We will be looking to see how we might best test whether patients with heavy periods gain as much or more relief from symptoms if offered acupuncture, when compared to patients receiving usual care from their GP.

I have received an information leaflet and oral explanation of the research study from the researcher, Ms Alison Gamon.

I understand that the research will involve filling in a questionnaire booklet about my current health now, in 3 months time and again in 6 months time. Each booklet will take approximately 20 minutes to complete. Later, the researcher will collect additional information from my GP about my use of NHS services.

I understand that the research may offer me the *option of choosing* to have some acupuncture. I may not be offered acupuncture. If I am I can make up my own mind about whether I want it or not. If I am offered and choose to have acupuncture I will be referred by the researcher to one of three acupuncture clinics in York where I will be treated by an acupuncturist registered with the British Acupuncture Council. I will receive an initial consultation and treatment and up to nineteen further acupuncture treatments. The precise number of treatments will be decided in consultation with the acupuncturist. The costs of the acupuncture treatment, but not the travel to the clinic, will be met by the study.

If I receive acupuncture I can continue to receive usual care for my heavy periods from my GP.

If I am offered acupuncture, but choose not to have it, I will continue to receive usual care for my heavy periods from my GP.

If I am not offered acupuncture, I will continue to receive usual care for my heavy periods from my GP.

cont./

- | | |
|--|--------|
| I have read and understood the leaflet and have had satisfactory answers to all my questions. | YES/NO |
| I understand that I may consult my GP about my own needs at any time during the study. | YES/NO |
| I agree that my general practitioner may be asked to provide additional information about me. | YES/NO |
| I understand that researchers may need access to my acupuncture records. | YES/NO |
| I understand that researchers may need access to my hospital records in relation to a visit or admission for heavy periods. | YES/NO |
| I agree to provide information about my treatment for heavy periods and to report any unusual or unexpected changes in my health. | YES/NO |
| I understand that I may be withdrawn from the study if this is considered to be in my best interests. | YES/NO |
| I understand that I may withdraw from the study at any time without having to give an explanation and without this affecting my future care or treatment. | YES/NO |
| I understand that all information about me will be treated in strict confidence but may need to be seen by the sponsors or regulatory authorities or their representatives. If any information about me is published it will not identify me by name, or in any other way. | YES/NO |

I freely give my consent to participate in this research study.

Signature of research participant

Date

.....

.....

I have given written information, a consent form and an oral explanation to the person named above whom has freely given consent to participate.

Signature of researcher

Date

.....

.....

Ms Alison Gamon

Appendix 38

ACUMEN integral Patient Information Sheet and Consent Form for patients invited to participate in Interviews

Please note that the original was printed on A3 folded lilac paper.



ACUMEN

Women's Views and Experiences of Acupuncture

as a

Treatment for heavy periods

INFORMATION FOR PATIENTS

The researcher is inviting you to take part in another aspect of the Acupuncture for Menorrhagia Exploratory Trial. This is because you are in the *Acupuncture Group* in the trial, and you would like to receive acupuncture. The researcher will be inviting about 6 women in the Acupuncture Group to take part in interviews.

Before you decide, it is important you understand why this aspect of the research is being done and what it will involve. Please take time to read the following information carefully. Please make sure you ask the researcher about anything that is not clear. Take time to decide whether or not you wish to take part.

What is this aspect of the research about?

Alison Longridge is the researcher. In this aspect of the research, Alison would like to ask you about your heavy periods and the treatments you have had. In particular, she would like to understand what you think of acupuncture. Alison would also like you to describe what acupuncture treatment you received. All this information will help us to see if acupuncture can help women with heavy periods. It will also help us to see if the questionnaires are asking women the right questions in the right ways. This will help us with future research.

What would I be asked to do?

If you agree to take part, Alison would like to interview you on 3 occasions over the course of the next 6 months. Alison will arrange these with you prior to, during and following your course of acupuncture. Each interview will last about 1 hour. Interviews will need to be held somewhere you can have privacy and not be interrupted. For example, you could meet at your home or at a private room at the research centre. You can choose where to meet and at what time. With your permission, Alison would like to use a tape recorder to record the interviews.

What other information will the researcher collect?

The information from your interviews will be used along with your acupuncture records and questionnaire answers. To make sure Alison correctly records your acupuncture diagnosis and treatment, she will ask your acupuncturist about this at the end of your treatment.

Will my taking part in interviews be kept confidential?

Yes. Only Alison will know your decision about taking part in interviews. If you do take part, everything you say during the interview will be strictly confidential. The interview tapes will be kept under lock and key at the research centre. The written copy of your interviews will be anonymous. No names will be mentioned in any of the study reports. Care will be taken so that individuals cannot be identified from details given in the study reports.

All information about you, including interview tapes, are subject to legal requirements. This includes the Data Protection Act. It will not be disclosed to any one other than the researchers. When the research has been completed, Alison will erase the interview tapes. Or, if you prefer, Alison will send your tapes to you.

Do I have to take part in interviews?

You can decide whether or not you would like to take part in interviews with the researcher. It really is up to you. If you decide not to take part in interviews, this will not effect your treatment or care in any way. If you do decide to take part in interviews, you are still free to withdraw at any time without giving a reason.

What will happen to the results from this aspect of the research?

The results will be published in a health care journal sometime after the summer of 2002. Alison will write to ask if you would like her to send you a copy of the report.

Who can I contact if I want to talk about the interviews?

If you have any queries or concerns, please contact the researcher, Alison Longridge. Or, if you would like someone else to speak to, please contact either Kate Thomas or Alicia O'Cathain in Sheffield. Alison, Kate and Alicia will always do their very best to help.

Alison Longridge

Tel: 01904 781630

Kate Thomas

Tel: 0114 2220753

Alicia O'Cathain

Tel: 0114 2220770

Thank you for reading this information.

RESEARCH CONSENT FORM
TO BE COMPLETED BY PATIENTS PARTICIPATING IN RESEARCH INTERVIEWS

Please read this form carefully.
Please ask if you do not understand anything or would like more information.

WOMEN'S EXPERIENCES AND VIEWS OF ACUPUNCTURE AS A TREATMENT
FOR HEAVY PERIODS

Researchers:
Alison Gamon (Department of Health Sciences and Clinical Evaluation, University of York, York)
Ms. Kate Thomas (Medical Care Research Unit, University of Sheffield, Sheffield)
Prof. Ian Russell (Department of Health Sciences and Clinical Evaluation, University of York, York)

Name of participant..... DoB

Brief statement of the purpose of the research interviews:

Alison Gamon is the researcher. In this aspect of the research, Alison would like to ask you about your heavy periods and the treatments you have had. In particular, she would like to understand what you think of acupuncture. Alison would also like you to describe what acupuncture treatment you received. All this information will help us to see if acupuncture can help women with heavy periods. It will also help us to see if the questionnaires are asking women the right questions in the right ways. This will help us with future research.

Taking part in the research interviews:

If you agree to take part, Alison would like to interview you on 3 occasions over the course of the next 6 months. Alison will arrange these with you prior to, during and following your course of acupuncture. Each interview will last about an hour. Interviews will need to be held somewhere you can have privacy and not be interrupted. For example, you could meet at your home or a private room at the research centre. You can choose where to meet and what time. With your permission, Alison would like to use a tape recorder to record the interviews.

Everything you say during interview will be strictly confidential. The interview tapes will be kept under lock and key at the research centre. The written copy of your interviews will be anonymous. No names will be used in any of the study reports. Care will be taken so that individuals cannot be identified from details given in the study reports. All information about you is subject to legal requirements. This includes the Data Protection Act. It will not be disclosed to any one other than the researchers. When the research has been completed, Alison will erase the interview tapes. Or, if you prefer, Alison will send your tapes to you.

Your decision about taking part in interviews is confidential. Only Alison will know your decision. If you decide to not to take part in interviews, this will not effect your treatment and care in any way. If you do decide to take part in interviews, you are still free to withdraw at any time without giving a reason.

I have read and understood the information sheet and have had satisfactory answers to all my questions. I freely give my consent to participate in the research interviews.

Signature of research participant **Date**

.....

I have given written information, a consent form and an oral explanation to the person named above whom has freely given their consent to participate.

Signature of researcher **Date**

.....

Alison Gamon

Appendix 39

Theme Memo	CASE Chart for descriptive analysis – Linda (page 1 of 4) 44 year old woman married with one teenage daughter and a part-time support worker for adults with learning disabilities
<p>Menstrual history & experiences</p> <p>Irregular, painful and heavy-ish since menarche at 15</p> <p>Increasingly heavy & painful past 10 years</p> <p>Natural deterioration prior to menopause?</p> <p>Concerned by symptoms particularly the anaemia</p>	<p>Irregular, painful, heavy periods since menarche at age 15. Increasingly heavy and painful since the age of 30, with pain travelling down legs and achy finger and wrist joints. Very heavy bleed and passing large clots for 7 days. Wondered if the heaviness and clots were evidence of a natural deterioration of the womb and prelude to the menopause. The associated anaemia was a concern as it made her very tired.</p> <p><i>"I think when I first, when I first began my periods I was never regular. Well, I've never been regular. But I never had pain. I never had painful periods till later on I think. I don't know, maybes late 30's." (1:11-15)</i></p> <p><i>"Oh God, I think I would have been about 15 (when I started)" (1:18)</i></p> <p><i>But "I didn't start getting really painful periods until my late 30's. I mean stomach cramps, I got stomach cramps, but I never used to get the pains up my legs and achy-ness that I do now." (1:22-4)</i></p> <p><i>"I couldn't put a time on it. I just know I've always been heavy-ish. But I would say the last few years are definitely worse, I would say, it's got to be the past 10 years that my periods have been very, very heavy". (1: 31-3)</i></p> <p><i>"Oh, I mean they've always been heavy. I've never had nice periods, you know, but like sometimes I used to go like, I used to have like maybes 3 heavy days and then it would just be like little to nothing, you know, but now I do have a full 7 plus days of heavy periods." (1:35-8)</i></p> <p><i>"I mean like I've always been heavy. I don't know. So I kept thinking that, because you know, I get big clots that come away from me, so I always think that that's part of me body packing up, you know, that part, you know, your womb and all that lot. And I always think that maybes its all your childbearing things coming away from you, or whatever, you know. I don't know." (1:43-8)</i></p> <p><i>"You know, I always think that is this your body just getting older." (1:50)</i></p> <p><i>"I just think is it all, is it all just packing up, you know?" (1:58)</i></p> <p><i>"(What concerns me most about my periods is) the heaviness of them, and the pain, the aches, and the pains I get." (1:60)</i></p> <p><i>"Yes. I mean I think I'm alright temperament wise, although I know people who might argue about that! I think maybes its cos I'm not as tolerant as I am otherwise when I'm having a period, you know, when I'm due. But I put that down to other people, not me! ((Laughs)) I don't think it's me, I just think, you know, I let things usually override, I don't snap easily, but when I've got a period I do tend to sort of, you know, snap back and, but not, you know, I still think if they were alright, if they didn't do anything to annoy me, I wouldn't do that, you know. So I don't, I don't, I mean cos I know, I know people who when they've got a period will pick an argument, and I'm not like that at all, I don't fell anyway." (1:94-104)</i></p> <p><i>"(The anaemia is a concern) Because it makes me very tired. I just get so very tired." (1:108)</i></p>
<p>Experience of treatments for menorrhagia</p> <p>Over-the-counter remedies for pain</p>	<p>Past treatments were over the counter remedies to help with the pain (e.g. paracetamol and Feminax), along with GP prescribed iron supplements for anaemia. Had not consulted GP specifically for treatment for periods as did not believe would have had any effective treatment to offer. Linda had found the iron supplement effective at boosting energy levels, but limited its' use as it caused constipation.</p> <p><i>"Nothing. Oh, just Paracetamol (for the pain). Paracetamol or the, now you can get the</i></p>

Appendix 39

<p>and prescribed iron supplements for anaemia</p> <p>Not aware there were treatments for heavy bleeding</p> <p>Dislikes iron supplements because of side effects</p>	<p><i>special tablets for it can't you, like the Feminax." (1:68-9)</i></p> <p><i>"Nothing (for the heaviness), as I say, I didn't know you could get anything." (1:72-5).</i></p> <p><i>"Like I say, I'd never been to the doctors about my periods really. I'd gone because I was tired and said, "I'm, I feel really, really worn down and need some iron tablets", but I've never ever gone and said, "I really have a problem with this", you know, because I honestly didn't think that there was anything that they could do."(1:138-43)</i></p> <p><i>"Just when I've been anaemic then I've mentioned it to the doctors that I thought it was because my periods were heavy. Just iron tablets (the doctor prescribed)" (1:78-82)</i></p> <p><i>"When I'm on my iron tablets I'm alright, I'm fine. But I don't like taking them because they make me constipated. You know, getting rid of one problem and causing another." (1:110-6)</i></p> <p><i>"I'll take them (iron tablets) for a couple of weeks, if that. If I've been anaemic. If I've gone past a period and I feel all right I don't take them at all. But I will take them if I've been anaemic to just boost me up a bit for a few weeks." (1: 110-20)</i></p>
<p>Using acupuncture – motives</p> <p>ACUMEN poster in GP surgery led to trial participation</p> <p>Symptoms affect quality of life</p> <p>Not aware there were treatments for heavy bleeding</p>	<p>Enquired about ACUMEN in response to surgery poster. Key motive for joining study was to find an effective treatment. No awareness or experience of conventional treatments to address heavy menstrual loss – determined that either there's something good on the market that nobody knows about, or there isn't, which is why she's never heard about it. Concerned about side effects from iron supplements and drug therapy and expressed a preference for natural or low-tech interventions. Wish to use acupuncture closely linked to understanding it as a safe, natural, low-tech therapy that stimulates the body's own healing resources to bring about health. Reassured by acupuncture's long history. Other motives were positive media reports of acupuncture in other contexts (back pain and anaesthesia), and the rationale that other women with menorrhagia must have been found to benefit from treatment for it now to be being used in a trial.</p> <p><i>"Well it (ACUMEN poster) was in the doctor's reception. It was on the board, "anybody interested?", and I thought "oh, that's me", because it says heavy periods and would you like help or something, you know. I thought "oh yes, I'd be interested in doing that", and that's why I did it." (1:129-33)</i></p> <p><i>"Well what I'd like, I'd like, is less heavy periods and an end to this achy-ness. I mean the pains in my legs, I think they only last maybes one or two days, you know, so, but it affects my limbs, even my fingers. When I'm due a period I get achy fingers. Achy fingers and pains up my legs." (1:89-92)</i></p> <p><i>"Like I say, I'd never been to the doctors about my periods really. I'd gone because I was tired and said "I'm, I feel really, really worn down and need some iron tablets", but I've never ever gone and said "I really have a problem with this", you know, because I honestly didn't think that there was anything that they could do."(1:138-43)</i></p> <p><i>"I don't know anybody that has treatment for heavy periods. And I honestly don't know what they could possibly do. Just give you a pill or something and make it stop? Not be so heavy? I mean I don't know, you tell me, is there loads of treatments? (1:150-3)</i></p> <p><i>"But I'd never seen anything advertised...I mean there's loads of other things like sanitary towels and tampons, they're all advertised, but nothings advertised to say that if you're having heavy periods you can be helped by." (1:313-20)</i></p> <p><i>"I mean is there things you can get over the counter or is it prescribed? But even prescribed things, there is knowledge of that? There is knowledge that if you go to the doctor's you can get something, you know, that will help you for certain things? But I never heard of any help for people who have heavy periods. I don't know. Just pain killers. No. Because I mean if you ask the doctor for anything, it's like go home and take 2</i></p>

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	<p>Paracetamol, you know, every 4 hours, but that would be it wouldn't it?" (1:322-34)</p> <p>"I didn't know there was anything you could get to make your periods lighter. There's no information is there? Nothing on TV or in magazines or anything? (1:348-50)</p> <p>"Do you know what I mean, it's talked about when somebody knows something, but I just haven't heard anybody say "oh, I'm taking a great tablet that's stopped, you know, and I used to have really heavy periods". I would, I would if I found something that really had worked well for me, or something like that, and didn't give me any side effects or anything like that, and it worked really, really well." (1:361-6)</p> <p>"I think its one of the main topics of conversation amongst women...(1: 369) I'm sure with women it's one of the main topics. So I think that if there was something really good on the market, and loads and loads of people knew about it, then you know, it'd be. But I honestly believe that a lot of people don't know." (1:374-7)</p>
Dislikes iron supplements because of side effects	<p>"When I'm on my iron tablets I'm alright, I'm fine. But I don't like taking them because they make me constipated. You know, getting rid of one problem and causing another." (1:110-6)</p>
Concerned about side effects from drug therapies	<p>"(The pill and tranexamic acid can help. Tranexamic acid works by causing the blood to become thicker.) So then you're doing something against you. You know what I mean? I always feel like it's not really, it's not natural. I just think you're just doing something that isn't quite natural. The acupuncture doesn't seem to, it seems you're stimulating your body, or doing, you know, whereas I don't think medication is doing that. It's like, I don't know what I'm trying to say really, you know you're putting something, you're adding something into your body, a chemical or something, whereas with the acupuncture I don't feel as if you are doing that. You're stimulating your body to do it itself or whatever." (1:170-7)</p>
Acupuncture stimulates own healing resources	
Preference for natural, low-tech interventions	<p>"Not only that, I think I'm quite frightened, I'm quite frightened of what like you're putting into yourself, you know, as well. I mean like even tampons, I don't like wearing tampons because of that, because of, because of like I bleed a lot and I think like I'm blocking myself...(Like) you weren't getting rid of what you're supposed to, of what you're body is trying to do, you know, you're preventing it really." (1:159-66)</p> <p>"Rather than putting like foreign, or something that's chemical, or something like that. I think rather than do that. I think acupuncture could be, you know, good. I wouldn't feel like I was ill, I don't think. I wouldn't feel like I was poisoning my body, or doing something like that. Well, with all drugs, there's always side effects isn't there? No matter what drug they give you, there's always some other side effect from it. I keep thinking acupuncture's quite natural. (1:203-10)</p> <p>"Well it's just like, like my daughter, at the moment she's got this tens machine, and that, that stimulates endorphins is it? Like you know, to stimulate your own pain relief, you know and I think that acupuncture works in the sort of same way. It's certain points, but obviously I don't know the points, and obviously somebody else does". (1:187-91)</p>
Reassured by acupuncture's long history	<p>"And the Chinese have been using it for an awful long time haven't they? So, and there's an awful lot of them Chinese about isn't there! ((Laughs))" (1:210-12)</p>
Possible benefits to be had and nothing to lose	<p>"I just think well anything, I'll give anything a go. What have I got to lose? So I mean, I've only got something to gain. I've got nothing to lose. I'm hoping it'll do something. I mean I guess they've tried it on other people. Do they reckon it works?" (1:266-9)</p>
Positive reports of acupuncture in other contexts	<p>"(I'd only heard of acupuncture) for just like back pains and things like that, and muscular pains, or helping you to stop smoking. I watched an operation done once with acupuncture, and I mean they really split this guy open and that an I think, well, if you can do that with just acupuncture, with a few needles, then I mean who knows?" (1:278-82)</p>

Appendix 39

Using acupuncture – expectations	Happy to receive acupuncture as thought it could be of benefit. Expected treatment to feel similar to the acupuncture she'd received for her shoulder from her chiropractor. Expected some bleeding and bruising from the needles, given this past experience and the adverse events listed in the ACUMEN information sheet.
Effective	<i>"Well it's just like, like my daughter, at the moment she's got this tens machine, and that, that stimulates endorphins is it? Like you know, to stimulate your own pain relief, you know and I think that acupuncture works in the sort of same way. It's certain points, but obviously I don't know the points, and obviously somebody else does". (1:187-91)</i>
Similar to acupuncture received from Chiropractor for shoulder condition	<i>"No, this doesn't bother me at all. I don't mind being a guinea-pig, especially if I think it's something that can help me, I mean it's just you know, great!" (1:287-90)</i> <i>"Well I have had acupuncture before, but not ((indicates to womb area)), so I do know what it feels like." (1:218-9)</i>
Needles may cause bleeding and bruising	<i>"I don't know. Just go and lie down and have some needles pushed in, you know. Pricked in me, or whatever they do, but I'm not apprehensive or anything. You know I'm quite okay, you know." (1:221-3)</i> <i>"(I've had acupuncture) for my shoulder. Well he was a Chiropractor, he was doing a bit of both, doing acupuncture and chiropractic." (1:224-7)</i> <i>"We had blood splattered up the walls, but apart from that! ((Laughs))...Well I think there was one of them that did tend to go a bit (bleed), but it didn't, it did leave a bruise on one of them, but apart from that, yes it was okay." (1: 235-8)</i> <i>"I thought it might bleed a little bit. It did say in your leaflet actually, that you might get a little bit." (1:240-1)</i> <i>"I don't know, I can't remember, it was a while back. He must have hit my aorta or something! ((Laughs))...It did spurt a little honest, he did go back and wipe it off, and it went down my top, the gown thing, but it didn't hurt or anything, not really, it was bearable." (1:243-51)</i>

Appendix 40

Theme Memo	CASE Chart for descriptive analysis – Lyn (page 1 of 4) A 42-year old woman, married with 3 teenage children, and full-time work as a teaching assistant
Menstrual history and experiences	Regular periods from menarche at 11-years until birth of 1 st child. Since birth of 3 rd child and discontinuing the OCP, periods have become increasingly heavy with sudden flooding and severe pain that can cause fainting. The pain tends to pre-empt passing large clots. Wakes twice during the night to change. Prior to bleed experiences irritability, tiredness, mood swings poor appetite and craving chocolate. Post bleed feels washed-out and light-headed. Cycle has become shorter (3-weekly) over the past year. Concerned about long-term effects upon health and fed-up with symptoms.
Increasingly heavy periods with sudden flooding and severe pain since birth of 3 rd child and discontinuing the OCP	<i>"Well I was young starting, I was eleven, and they were pretty regular up until having my first child. And just really progressively got heavier over the years. Sort of been a gradual process. I'd say the last five years they've been enough for me to go to the doctor and say you know, I'm fed up with this I need something to help." (1:18-24)</i>
Has actively sought GP help over past 5 years	<i>"I was on the pill before I started having my children. So up to having my first child I was on the contraceptive pill. And then in between two and three I was on the mini pill. And then after the last one I carried on with the mini pill for a while and then my husband had a vasectomy so then I didn't have to take contraceptives anymore. So really after I finished taking the pill the periods seemed to get more heavy." (1:26-31)</i> <i>"(I started taking the pill at) about 17, 18. (My periods were) just normal like everybody else I would think. Well, not really an inconvenience I suppose. Whereas now it is quite inconvenient." (1:34-41)</i> <i>"I get PMT a few days before, quite ratty, don't sleep very good, things like that, tired, food cravings and then I usually know when it's starting, I can tell in my body that it's, you know, today or tomorrow and then I start taking the tablets that I'm prescribed, and the first day is usually okay, the second day's heavier, and the third day's generally the one when I feel at my worst because it's the heaviest. And I just get really bad period pain, really bad cramps, at the front and round at the back as well. And just basically a bit of a pain because I have to change tampax every hour. And obviously if I'm at work I have to time it in because I work at a school and lessons, and I have to time it in between, at lunch time and things like that and break times. I have to make sure I've got enough stuff with me at work. During the night I have to get up and change about twice. And usually it wakes me up but sometimes obviously it doesn't and that's when you have a bit of a flood." (1:44-58)</i>
Has wondered if hysterectomy might prove the solution	<i>"They're generally regular, although I've noticed the last year or so they've been sometimes every three weeks. So they've started getting shorter. The cycle's getting shorter. And then I might have one the next month. But it's never longer than 28 days, between 26-27 days, I never get to the month, the full 28 days, it's always a couple of days before. I keep a diary. And even that one's really bad and heavy. And I just think, "oh, I'll just have a hysterectomy and have the whole lot whipped out! ((Laughs))" (1:61-71)</i> <i>"And usually when I get the period pains it's because I'm losing big clots. And that usually pre-empts, the pain pre-empts the passing of a clot. And I have to go find a loo because you know what's coming, which isn't very nice." (1:84-87)</i> <i>"Well most of the time I can manage it. But sometimes I just feel really crap basically. I don't know another word to describe it when you'd just like to lay down wouldn't you. Lay down and not do anything. But obviously I'm quite a busy person so I tend to muddle through it. Unless it's a weekend and I think well I'm just not going to do anything today. I'll just put my feet up. And I do do that if it's, if I'm able to do that...If you can do nothing and just watch telly and chill-out. Yes that does help. But you can't always do that can you?" (1:91-100)</i> <i>"Any activity really. I find walking, I don't know, it can increase the blood flow, I don't know. I find if I go for a walk, ugh, you know, you can sense that warm feeling</i>

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	<p>when you know you're flooding, you know. I don't exercise the days I'm heavy, because I do exercise, I go to the gym, but if I know like I'm on and I'm heavy I don't go, because it's a bit embarrassing if you, you know, have to rush to the loo while you're in a class. So I tend not to do things on the days that I know I'm heavy. Well only do the things that I know I have to do, like if I'm at work, I do that. But I wouldn't do anything extra...Well, like an exercise class, things like that. I'd put off going shopping, things like that, if I thought, "oh, I could put that off till the next day", I'd put that off. If I could put things off till the day after I would do. Rather than have to do it on the day when I'm at my heaviest, and don't have any, much energy." (1:103-117)</p>
Age a factor?	<p>"The only thing I can think of is my age. I mean the doctor's asked me loads of questions about my history. You know my childbirth years and things like that, and she can't really say there's anything that's a trigger. They've just progressively got worse as I've got older." (1:120-25)</p>
Genetics a factor?	<p>"Now I asked my mum if she had trouble and she said no. But my elder sister did have heavy periods. But she's just gone through the menopause now she's 53. So that's all over for her. And I don't know about my younger sister, we haven't really discussed it that much. But my daughter's heavy. She started, she started, she wasn't even 11, and she's having similar problems now to me. You know, she's quite heavy...Pain yes, yes, and fainting. Things like that. Just the middle one, the elder one doesn't seem to suffer. I don't know why that is...But my eldest daughter's on the pill and the other one isn't. So that could have a bearing on that." (1:127-41)</p>
Concerned about extent of heavy blood loss and consequences for long term health	<p>"I'm worried about the amount of blood I lose. Because at the end of the week, it's like I've just finished now, and I was on for a full week, starting last Monday. Wednesday, Thursday was my bad day and I take the tablets and then it seems to settle down, and then Friday I just got up and I flooded, and you just think, "I can't possibly lose anymore blood". It's just I had a severe pain lower down in my abdomen, went to the loo and I just flooded. And you just think, "well, it can't be good for you losing all that much blood". And then I feel really washed out and light headed. And that's when I think, "if I had a hysterectomy I wouldn't have that problem". (1:145-53)</p> <p>"It's a wearing down process isn't it, if you have heavy periods every month? And I tend to think, "oh no, not again."" (1:155-6)</p> <p>"Well before it's usually irritability and sleeplessness and mood swings I'd say. And I go off my food and then have silly cravings. ((Laughs)) Well chocolate. Chocolate and just eating at the wrong times, and you know, eating what I know I shouldn't be eating and things like that. And then during my period I feel tired, because obviously I'm getting up to change, and don't have a proper nights sleep and then you just feel really, washed out really is the best way I can put it, just a bit washed out. And can't wait for the week to finish really, for it to be over." (1:211-21)</p>
Fed-up with symptoms and does not understand why she experiences them	<p>"Well last Friday I had headaches and I think, because I was so, I thought I'd finished and then had a flood on the Friday, and I just felt really washed out all day and I had to go to work. And I had a lot going on at home as well, with my daughter going away and everything, and I came home from Friday and went to bed and just laid down for a couple of hours upstairs. I just felt fed up I suppose." (1:225-30)</p> <p>"The only thing I can say about that is, if I know my friends don't suffer like me, I think, "why? Why do I have to suffer like this, and they can go through periods and it doesn't really bother them?" And I think, "oh, I've got all this to cope with", and I do get a bit fed up. But I tend to think when it's over, "oh that's it for another month and lets hope the next month is not as bad". (1:234-9)</p>
Experience of treatments for menorrhagia	<p>Consulted GP for treatment over the previous 5 years. Drug-therapies of limited benefit (OCP, NSAID's and tranexamic acid) as become increasingly ineffective over time. Expressed concerns about side effects. At recent annual review reported no real change in symptoms.</p>

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Drug therapies ineffective over time	<p><i>"Sometimes it's moderate and I don't usually take anything, and sometimes I have to take tablets for pain relief, and sometimes the pain relief doesn't do any good. It's really severe. I have passed out on occasions, once or twice. Not in the last few months, because these tablets (tranexamic acid) I'm on seem to help. Although the period pains still are there." (1:78-84)</i></p> <p><i>"The tablets I take (tranexamic acid) do help, but they don't help every time, and I feel as though my body's getting used to them now. When I was on the pill that was okay for a while, and then my body seemed to get used to that. So I've tried 3 or 4 different things I think." (1:156-60)</i></p> <p><i>"She [GP] started me off on a, I went back on a low dose pill, it was quite a few years ago, and then I tried Ponstan, which that helped for a while, and then I think she tried the pill again, and then now I'm on this tranexamic acid, which does work, as I say, most of the time, but then sometimes it doesn't. And it encourages you to clot, which I said to the doctor, you know the clots are quite big, but she said that is better than just losing blood without the clotting, because it's actually clotting, otherwise you'd lose more, the flow would be more, so." (1:162-69)</i></p>
Concerned about side effects	<p><i>"As I say I think they (drug therapies) work for a while. The pill worked quite well, but I didn't really want to be on the pill anymore because I had had my children. I was on it quite a while, and in between, and I didn't really feel as though I wanted to pump hormones into my body anymore." (1:172-5)</i></p> <p><i>"This one I'm on now is non-hormonal. I think they're very good. I just worry about, you know, giving your body something that makes your blood clot. Well I'm worried about having thrombosis and things like that, if you're making your blood clot. But that doesn't seem to be a side effect, that's probably just a worry I have." (1:178-88)</i></p> <p><i>"I went to see my doctor about my last prescription, it was my annual review, and she asked me if the medication was improving, were my periods getting any better or worse, and I said "much the same really". And then she suggested I try to put my name down for this study, and explained that I could be picked for acupuncture or might not, there's 2 groups, and would I like to give it a try. So I said, "yes, I'll try anything", which is what I felt when she suggested it to me." (1:250-6)</i></p>
Using acupuncture – motives	<p>GP suggested trial participation at annual review when Lyn reported no change in symptoms. Key motive for joining study was to find an effective treatment and alternative to drug therapy and surgery. Drug-therapy (OCP, NSAID's and tranexamic acid) had proved increasingly ineffective over time. Expressed concerns about side effects and stated that, whilst hysterectomy often seemed to be a solution, it was not an acceptable option. Wish to use acupuncture closely linked to having heard positive reports of acupuncture used in other contexts (dieting and stopping smoking), her own belief it would work and GP's positive attitude to the trial.</p>
GP suggested trial participation	<p><i>"I went to see my doctor about my last prescription, it was my annual review, and she asked me if the medication was improving, were my periods getting any better or worse, and I said "much the same really". And then she suggested I try to put my name down for this study, and explained that I could be picked for acupuncture or might not, there's 2 groups, and would I like to give it a try? So I said, "yes, I'll try anything", which is what I felt when she suggested it to me." (1:250-6)</i></p>
Symptoms affect quality of life	<p><i>"An ideal treatment would reduce the pain, the length of my period and the quantity of blood that I lose, and the feelings I associate with the few days before and the week that I'm on." (1:207-9)</i></p>
Drug therapy becomes ineffective	<p><i>"The tablets I take (tranexamic acid) do help, but they don't help every time, and I feel as though my body's getting used to them now. When I was on the pill that was okay for a while, and then my body seemed to get used to that. So I've tried 3 or 4 different things I</i></p>

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over time	think." (1:156-60)
Concerns about side-effects from drug therapy	<p>"As I say I think they (drug therapies) work for a while. The pill worked quite well, but I didn't really want to be on the pill anymore because before I had had my children. I was on it quite a while, and in between, and I didn't really feel as though I wanted to pump hormones into my body anymore." (1:172-5)</p> <p>"This one I'm on now is non-hormonal. I think they're very good. I just worry about, you know, giving your body something that makes your blood clot. Well I'm worried about having thrombosis and things like that, if you're making your blood clot. But that doesn't seem to be a side effect, that's probably just a worry I have." (1:178-88)</p> <p>"And I'd rather not take tablets. One of the side effects of tranexamic acid is it gives you diarrhoea you see, so that's another complication...But like the doctor said, you know, "would you rather have diarrhoea than heavy blood loss?" Well, I'd rather the diarrhoea, and you don't get that every time, and you might just have one bout of it and then that's gone, so...It's weighing up, yes, yes, it is yes. (1:192-201)</p>
Hysterectomy not an acceptable option	"Well generally well, I just think it's something I have to put up with, because I don't really want to have a hysterectomy. You know, I do feel it is there for a purpose. My womb. It's there for a purpose, you know. I don't really want to go into hospital and have a big operation, and I just think I can put up with it if you like, or you just think, "it's going to get easier". And it doesn't." (1:241-8)
Possible benefits to be had based on:	<p>"I wanted to give it a try really, I just thought it may help. I've heard of people having acupuncture for other things, like dieting and stopping smoking and things like that, and it's worked for them for that particular reason. I've never heard of anybody having it for something like this. But I'm willing to give it a go, and I think if you half believe it's going to work then hopefully it will." (1:258-63)</p> <p>"I want it to work so much that I'm hoping it will work. Mind over matter helps I think. I'm not sceptical about it. It does work for some people, and the doctor said it's quite successful in this programme, so I'm willing to give it a go." (266-72)</p>
a. Positive reports	
b. Own belief it will work	
c. GP's positive attitude	
Using acupuncture – expectations	Unsure how acupuncture could bring about health and healing, but expected treatment to affect all aspects of health – physical and psychological symptoms, and well-being. Expected acupuncture to involve the insertion of needles at specific sites and for her practitioner to wear a white uniform.
Treatment can affect all aspects of health	<p>"I think it'll improve my well being. And I don't know, maybe improve my moods and hopefully the symptoms I suffer. On the whole I think it will be a good thing." (1:281-3)</p> <p>"I just think if the treatment helps the condition, helps with my heavy periods, then I'll feel a lot better. So, hopefully after a few months I'll feel a lot better in myself because it's treated the, you know, the condition that I've gone for." (1:311-5)</p>
Treatment will involve the insertion of needles	<p>"I understand they target certain areas for certain parts of the body, they put the needles in certain parts of the body. I don't really know how long the needles have to be in or any thing, I haven't really studied anything about it." (1:287-90)</p> <p>"Well I don't really understand what acupuncture actually does to the body, what putting a needle in, how that will change things that are going on in your body, but I do understand that it can, you know that it does work." (1:294-7)</p> <p>"I'm not squeamish or anything...I don't think that's (the needles) a problem, no." (1:274-6)</p>
Practitioner wears a white uniform	"(What do you expect your acupuncturist to be like?) A lady with a white uniform on! ((laughs))...I don't know I really don't know." (1:298-307)

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Theme Memo	CASE Chart for descriptive analysis – Sarah (page 1 of 13) A 34-year old woman, married with one child under 5 years, and part-time work as hotel manager
Menstrual history and experiences	Menarche at 15 years of age. 9-months later experienced amenorrhoea for 3 years following the death of both parents. When periods resumed they were irregular with a light bleed and very little pain. OCP for 3 years, after which cycle became regular, a pattern that continued after birth of son. During the 18-months prior to joining the study, experienced a miscarriage followed by an ectopic pregnancy and a further miscarriage, all within the first trimester. The second period following the last miscarriage was uncharacteristically heavy, painful and prolonged with mood swings. The bleeding became lighter, but continued with little respite for 3-months. Wondered if the emotional stress from two miscarriages and an ectopic pregnancy was a factor. Determined not to sink into depression, but found the tiredness devastating. Concerned about consequences for long-term health, and the impact of symptoms upon her ability to conceive in particular. Aware symptoms were affecting her performance at work and relationship with husband.
Menarche at 15	<i>"They started when I was 15, which was fairly late. And I had them for about 9 months and then they stopped for 3 years completely, and what the doctor seemed to think was I lost both my parents within a year and he thought that was the stress of that. So, I went without periods for 3 years, which you know, didn't make me feel poorly, there were no side effects or anything. And then I started to get them, and they were always irregular. They were light and they'd be for maybe 3 or 4 days, and then I'd go for maybe 2 months and then I might have them for, you know, 5 days, and then I might have them a month after, then again I might go 3 months. And it was like that for about 2 years...until I was about 19 and I went on the pill. Well I tried to go on the pill at 19 and that's when all the investigations started and things, that they couldn't put me on the combined pill because my mum died of thrombosis and my father died of heart disease, so they said family history, can't put you on the combined pill so we'll go with the mini pill. So I went on and tried a few mini pills and they were okay, that seemed fine for me. There was not really any side effects and things, I think it was Femuline, and we decided to stay with that. And the mini pill stops your periods, because they said to me if you go on the pill it would give you a proper menstrual cycle, but it didn't, so it sort of stopped my periods, again for about 6 months. So we're now into the 20's and I think I'd had about a year of irregular periods by this time, and then I stayed on the mini pill for quite, for a few years really, for about 3 years. And then I started to have periods again, when I came off the pill and then they came back, and it was every month and they did regularise actually, they were every month, and they were for about 4 or 5 days, not really, you know a bit of discomfort the first day, a bit of pain you know, but nothing really bad, about 4 or 5 days and that was it until, that sort of carried on until I got married and, what happened then? I got married and then we started trying for, so I wasn't on the pill anyway, so I haven't been on the pill much in my life. We started trying for [son] and I conceived within the first month of trying for him, and my periods were normal up until then. They were fairly, they'd gone for a couple of years, about 2 years, where they were fairly like 28 to 30 days cycle, 4 or 5 days bleeding, pain first day but nothing, you know, I'd take a couple of Nurofen and that would be fine and that was it. And then I caught on with [son] within the first month, and then after I had him they went back to normal straight afterwards, probably the most normal I'd been in all my life really, every 28 to 30 days the same, right up until this year really. Apart from the miscarriages in between, which sort of. But that was only for the first month, I had a miscarriage and then it would be say 35 days after that miscarriage, and then it would go on to a normal cycle, 4 or 5 days normal bleeding, no pain. Exactly as it was before [son], until, up until this year really." (1:22-67)</i>
Amenorrhoea for 3 years	
Irregular, light bleed with little pain	
OCP at 19 for 3 years	
Post OCP periods regular, light bleed, mild pain	
Normal cycle resumed after birth of son, first miscarriage and ectopic pregnancy	
First period after 2 nd miscarriage normal	<i>"Well I got pregnant in April, and I lost the baby in May, I was 6 weeks. So I lost the baby in May and then it was 35 days from the miscarriage to the next period. Normal period, no pain, 4 days, I thought, "oh, back to normal again", as it has been, and then 30 days after that...I came on that period and I was in, I knew it was different straight away because the</i>

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At second period experienced heavy, prolonged bleed and severe pain	<i>pain was different, it was a real, very low pain, and it was, it wasn't like a stomach ache it was a pain, a proper pain, it sort of wiped me out for about 5 days. I had to be careful how I sat down and, you know, it hurt to walk up the stairs, I just wanted to go to bed and not have anything touch me. You know, and I just, which was impossible really. And the period was heavier, which I've never had a heavy period ever, not even after the miscarriages, I've never had a heavy period. And then it just carried on and it just carried on bleeding, and the first week was pain and it was bleeding, and then it lightened off but it was still, there was never a day where there wasn't any bleeding and that was for 5, 6, about 8 weeks of continual bleeding and then I had 2 days where I stopped bleeding and I thought, "oh, this is it, it's going to be okay". And then it started again. And then it was heavy, it wasn't as light as it had been, it was heavy like a proper period, and then that carried on for you know, the rest of the time, up until present really. It's got lighter the last couple of weeks."</i> (1:81-101)
Bleed became lighter but continued with little respite for 3 months	<i>"3 months of continual bleeding basically, with the odd day, I've had 2 days stopped and I stopped for about I think 4 days 2 weeks ago, and then it started again lighter."</i> (1:103-5)
Stress a factor?	<i>"I don't know whether it's to do with stress, I think that, you know, with the fact that my periods stopped for 3 years when my parents died, it maybe the fact that, you see with the first miscarriage I was fine, the ectopic I was fine, but the last miscarriage it really hit me. I think that it hit me physically as well as mentally. You know, I was fairly, quite strong, both, then I had this last miscarriage and I don't think I really recovered from that. I was, it took a lot longer, and I got, I started to get a little bit fed up I suppose with it all, and just lost hope really. Whereas before that I was like, "well, it will happen it's just a set back". That was my stance on everything, you know, "it's just a set back, we'll carry on trying". Whereas after a third one it was like, "is it going to happen? I think there is a problem here." And my whole mental attitude completely changed."</i> (1:108-120)
Fighting against depression	<i>"I wouldn't say depression, because I don't let it get that far. But it could be. I mean there were times when I'd think, "if I don't stop feeling like this, it's just going to go on and get worse and get worse." And I think the further you let it go the harder it is to sort of snap yourself out of it. So there'd be days I'd get up and think, "I'm going to be alright today, I'm not going to be fed up today". And I would really try. But it's not, you're not really happy, you're just trying not to affect other people around you by being a bit aloof and fed up and what not. So I think it's probably stemmed from this last miscarriage. Mentally it's, I've completely changed."</i> (1:121-131)
Impact upon health	<i>"When these periods did start, and it was continuous, continual bleeding, the affect that that has on you, not mentally but physically really, I mean I just can't believe how much I changed. Tiredness was unbelievable. I mean I've had a baby and I've been up 3, 4 times through the night, and I've been up from half 5 and I've gone to work till 1 o'clock. And I've been tired, but it was never this kind of tiredness. I would walk up the stairs and halfway it was like I'd done 2 hours in the gym. My legs would ache, my arms would ache, I just wanted to sit down and not do anything. You'd have to really push yourself. I mean that was how tired and how tired my body got. I would never have thought that was possible from, you know, because I'd never felt like that before."</i> (1:131-43)
Impact upon ability to conceive	<p><u>Impact of prolonged period upon fertility / conception (1:144-58)</u></p> <p><i>"I was really worried about it, and it was the last thing I wanted three years on down the road (trying for a baby), the last thing I really wanted was to start bleeding continually with no end in sight."</i> (1: 158-61)</p> <p><u>Concerned about fertility (1:164-70)</u></p> <p><i>"I'm trying to keep myself in the best possible health, and I have been, you know, I take my folic acid, I don't eat, I don't eat! I don't drink, I don't smoke and I watch what I eat. And I've been like that all the time while I've been trying to conceive, and now I just feel like this bleeding for 3 months has just knocked me worse than I've ever felt, before all these miscarriages or anything, you know I've felt probably worse than I ever have really. I</i></p>

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Symptoms affecting work performance	<i>mean you have a cold, but your over with it, over it within a week, whereas this is an ongoing thing everyday. Your body is tired, your mind's tired, you lose your concentration, you're not that great at your job because your mind it's, you know, you're just so tired, you think, "oh god, get me some more coffee, or get me some more tea, to keep going", and it doesn't really help." (1:170-84)</i>
Impact upon relationship with husband – intimacy and moods	<p><i>"There's two things that it affects. If you're bleeding constantly there's no way that you want to have sex every night, which you have to if you're trying to conceive a child, but that was taken away. But even the times that if you're not trying for a baby you still want an intimate relationship with your husband and that's completely out the window because one I'm too tired, and secondly I'm bleeding all the time, so no way. And I just feel so sorry for him because, you know, I've changed probably in the last 3 months. I don't think he's ever really seen me as low key as I have been. I'm a bit aloof, and if I'm not aloof I'm snapping his head-off, you know, because it's the mood swings as well, which tends to make me think, "I wonder if it's hormonal?" Because like, I can't control them." (1:186-97)</i></p> <p><u><i>Impact of moods upon relationship with husband (1:198-214)</i></u></p> <p><u><i>Impact of prolonged period upon fertility / conception (1:215-20)</i></u></p> <p><u><i>Inability to control moods (1: 220-26)</i></u></p>
Tiredness is devastating	<i>"...the tiredness is so devastating physically and mentally, that you know, that can make you fed up and then if you just don't bring yourself out of it, it can get worse and it can get, you know, I suppose it leads to depression, and you know, because I'm that type of person that can, I don't really believe in that, you've got to make your own life, so I just make a conscious effort, or you know. Like we've just been away for a week, that was because I was so tired I was making mistakes at work, I was tearful, and I just, I couldn't get any joy from the doctors, and I was just so low and my husband said, "well come on, we'll take a week off and we'll just go away and just have a break somewhere, and just a break from the routine and try and get you know, your strength back a little bit and have a bit of a rest", which is what we did. I mean we shouldn't of. We couldn't afford it, I couldn't afford to take the time off, he had to get special time off, but you know, it worked, it was a good break." (1:227-44)</i>
Fighting against depression	
Experience of treatments for menorrhagia	Unable to manage symptoms with over-the-counter NSAIDs. Therefore had consulted GP regularly over the 3 months prior to joining ACUMEN, as concerned symptoms an indication of serious pathology. Tests revealed no sign of infection. Tranexamic discontinued soon after being prescribed, as inappropriate given family medical history (blood disorder increasing the risk of thrombosis. Hormone treatments considered unacceptable because of the risk of side effects. As symptoms persisted, became increasingly worried about health, distressed by lack of GP empathy, and successive GPs' inability to offer effective treatment or counsel. Particularly concerned impact symptoms would have on ability to conceive. Explained to GP that she had started acupuncture, as they'd nothing to offer. Astounded when GP suggested referral to consultant for hormone tests she had previously been denied. Expressed dissatisfaction with the treatment and care she had received from GPs over the years, and a concern that the wait for hormone tests was made on the basis of cost rather than need.
Over-the-counter NSAIDs of no benefit	<i>"They didn't touch it though. Not this time. I took, in a week, I was taking the maximum, I usually take 2 Nurofen on a normal period, once on the first day and that's it. And that pain at the beginning of that 3 months, you know 3 months ago, I went through the maximum amount of tablets I should take in a day, and it took about an hour for it to just take the edge off, and then about an hour after that it'd be back, and I'd have to wait another 2 hours before I could take any more tablets. It was horrendous, you know. And that's what worried me really, because I'm not a tablet taking person, and these tablets were having no affect and that's what made me go to the doctors', because it was such, it was a completely different period. I knew it was different. I knew it wasn't normal, because the first week it was brown, almost black. That's, that's not like real blood. And then it changed to red, but that's initially what made me go to the doctors'. I went to the doctors'</i>
Concerned severity of pain indication of serious pathology	
Concerned unusually dark bleed	

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sign of serious pathology	at, I think I'd been on my period for about 9 days, and I went to the doctors' solely because I knew it wasn't a proper period, that was the first time I went to the doctors' and I said, "you know, it's a really strange colour, horrendous pain, I don't think it's you know, I don't think it's a normal period, you know, is it an infection stemming from the miscarriage and everything?" And that's when they said they'll give me some tablets to stop me bleeding and come back the next day to have some swabs to make sure it wasn't an infection, yes it probably could be. So I went back the next day and saw the nurse, by which time I'd realised I couldn't take these tablets because of my blood disorder, I mentioned it to the nurse, she phoned the doctor, the doctor said, "no, stop taking them immediately." So I'd only taken 2 really, so it hadn't stopped it, and the swabs came back as negative, that there's nothing wrong, there's no infection at all. And so the doctor just said, "well leave it, it will sort itself out." (1:246-275)
No sign of infection	
Discontinued tranexamic acid - inappropriate because of medical history	
Consulted GP the following month as although pain had stopped, bleed had continued	"So I did, so when the next period came and that, so I said, "oh, I'll give it 5 days, because if it's a normal period it'll be 5 days." So I just did it by dates, that roughly this should be, even though I was bleeding every day I just worked it out, 30 days, this should be the period today, 5 days from that I went back to the doctor's, about 6 days after that I think, "it's not stopping", I just knew it wasn't going to stop. "The pain has gone", I said, "but it's not, it's not stopping and I'm frightened that it's going to one make me feel", because I was okay by this point, the first month, I wasn't tired or anything, and I said, "I'm frightened that it's going to run my, run me down, make me feel tired, which I don't want it to, because it's a struggle to keep my health as best I can with trying to conceive, I don't really want to be knocked back, you know. And she kept saying, "oh no, it won't, it won't, you're not losing enough blood to cause anaemia, and it probably won't affect you that way, so". And I said, "well I can't take these tablets to stop bleeding," and she said, "well, the only thing we could do is probably give you hormone treatment, progesterone something," she said, "but we wouldn't do that now." And she said, "the thing with that is all these side effects, and she said that the side effects would be breast tenderness, very bad, swelling, bloating, acne, mood swings. And I said, "well, I don't really won't that, you know, I've got a full day, I can't, I can't function on a day to day basis with all those side effects. I just couldn't really, not at work, not here, not with a four year old". And I said, "I don't really want to take that direction", I said, "and plus, would it affect everything else? Like I don't want anything affecting my fertility side of it, because if, you know, I stop ovulating that would be even worse, and I'm afraid that messing about with hormones would cause, would cause some kind of problems there, if not, there might be problems there already, that's what this could be. I mean, up to now, no ones investigated so I don't know." And she said, well, that's all she said to me, she said, "well there's nothing we can do", so then I left it again, and then I started, a few weeks after that, and the blood got heavier then, and this is when I started to feel poorly really." (1:275-308)
Frightened about effects on general health and ability to conceive	
Felt a lack of GP concern	
Hormone treatments considered unacceptable because of side effects	
Impact upon general health	"And then I started, a few weeks after that, and the blood got heavier then and this is when I started to feel poorly really. You know like you feel a bit, just washed out is the perfect way to describe it, you know, very washed out, very pale, my skin was starting to suffer, my hair was starting to suffer. I could just tell that if, and I started to get tired, my arms and my legs were aching, if I'd bend down and I'd get back up my legs were just really aching, and that's not like me. I mean I go to the gym, and I can do an hour and a half work out. Yes I'll be tired but only because I've been lifting weights and running and things. So I went back and I said look, you know, it's not stopped, I'm really worried, and it's really starting to make me feel bad now. And I'd gone to see a different doctor. This is the third doctor I'd seen, and he said to me, "I think you're being paranoid". I mean you can imagine right, I'm at the end of my tether sort of now, "I think you're being a little bit paranoid and concentrating on the fact that you want a baby too much". And I said, "well yes, obviously, I know I am, but that's because it's 3 years down the line and I just, I don't want anything to go wrong. I'm trying to be calm about it, I'm trying not to get too obsessed about it I said, but I can't try for a baby now while I'm bleeding anyway. I just want you to get my cycle normal. That's all I want you to do. And you know, you don't have to open me up, you don't have to give me tablets. I just want you to do something to get my cycle, or at least investigate." (1:306-329)
Expressed concerns to different GP	
Distressed by lack of GP empathy and care	
Asked for hormone tests and investigations	
Concerns about fertility expressed to GP (1:329-38)	

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Told GP had started acupuncture as they'd nothing to offer	"I'd got another appointment to go back to the doctor's, and see my original doctor, [name], who saw me at the beginning of it all, she wanted to see me, and I'd gone back to her and I'd said that I was, you know, taking this path, acupuncture, and I'd been because I'd felt as if they couldn't do anything. And she said, "well that's fine, but we can refer you now to a consultant." I mean ((pause as tape turns over)) She said, "it's not worth referring you, because even if we refer you they often don't find out what the cause is." That's what she said, that was the first time I'd ever gone to the doctor's. She said, "it's not worth referring you because they don't usually find out what the cause is anyway." And so I never thought that anyone would refer me anyway through the whole time. And I went back a week ago and she said, "we'll refer you to the consultant and see what they think." And I said, "well, you said that they wouldn't be able to do anything anyway." She said, "oh well we can do a few tests, we'll do some hormone tests." "Well", I said, "well the doctor, 3 weeks ago, said that I couldn't have any hormone tests because my hormones would be a little bit abnormal anyway." And she said, "no, we'll get some done so they're done before you go to the consultant so he doesn't have to do them." (1:614-31)
Astounded when GP suggested referral to consultant and hormone tests	
Stressed that wanted investigations to understand the cause of the prolonged bleed not a tablet to mask the symptoms	"I said, "well in 8 weeks if I stop bleeding, which I hope to, should I still, because I know that a consultants time is expensive, and I don't want to waste his time if its not a problem that he can fix anyway. I don't want someone," which has been my stance the whole way through, "I don't want someone to give me a tablet to stop it bleeding but not get to the cause of it, you know, I want the cause treated. I want to make sure that there's nothing wrong in why this is happening, because it is abnormal, I've never had this before", which is what I was saying all the way through. You know, "I don't want you to make me feel better now, I want you to get to the cause of it to make sure there's nothing wrong." She (GP) said that they would refer me, it would take about 6 to 8 weeks and that 2 weeks before I go I'm to have these hormone tests so they've got the test results ready. And to do that basically. But I'm still waiting for an appointment to come through. And even if I stop bleeding, she said to still go anyway because I was due to go in January about the fertility side, I'd got an appointment with them January, a follow up appointment. She said you might as well go and tell them what's been happening and just do it all in one session if you're there." (1:634-652)
GPs don't listen	<u>Distressed that lack of GP intervention/care driven by cost (1:744-57)</u>
You're just a number	"But as for the doctors, I think they are there for you really. And I don't think they listen. I think you're a number to them, and I think they think, "God, there's another 20 sitting in the waiting room", and they give you your 5 minutes of your time. "Yes, okay take this tablet, goodbye." You know? And it is like that. Well my doctors are like that. If you've got a family doctor that's known you for years, possibly it's different. But certainly that's my stance on it. I mean I, the doctors I've had I just find appalling. The mistakes they've made with me in the past, you know?" (1:757-765)
No time	
Different with family GP?	<u>GP misdiagnosis of skin condition & prescribing too high dose of drug therapy (1:765-780)</u>
Distressed by experience of misdiagnoses	"And it's just things like that, you know? And I just ((Cries)), I just think it's wrong. I mean I know they're not perfect, but I just think that they should be a little bit more careful really. I don't think that they're specialised in the area that I want them to be, which is obvious, they've got a general knowledge. But that's fine, they're not specialised in that, that's when they should refer me to someone that is. And they won't do it, and they probably won't do it because of the cost. You know, but that's not my problem. I've paid my national contributions. And if there wasn't a problem I wouldn't, but you know, to me this is a big problem and it is affecting my life, so I think they should do something, so that's why." (1:780-91)
Concerned cost a factor in decision not to refer to consultant earlier	
Would like the hormone tests done	"And so she gave me the literature on the study and she referred me to the consultant. I'm still waiting for an appointment and I'll have to speak to [acupuncturist] first. You see even if I go to the consultant, I mean I might get the hormone test done because it'd be quite nice to see if I am just bad tempered or whether it is my hormones! ((Laughs))" (1:836-40)

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	<p><u>Distressed that protocol states 3 miscarriages prior to blood test to see if hormones or hereditary blood condition the cause of miscarriages (1:849-99)</u></p> <p><u>Aspirin to prevent miscarriage or assure appropriate care / the need to fight for appropriate care as denied for cost reasons (1:1025-45)</u></p>
Using acupuncture – motives	<p>Key motive for researching CAM and accessing acupuncture privately had been a lack of GP empathy, treatment and care, in conjunction with a further deterioration in her health. Wanted an ally to help her regain her health, first and foremost, and as a consequence, hopefully the opportunity to try for a baby. Keen to avoid IVF, and decided against Chinese herbs because of concerns about side-effects. The decision to use acupuncture influenced by published reports, including an article about acupuncture for infertility in The Times newspaper. Her niece's positive experience of acupuncture for acne from OCP usage and acupuncture's long history had also guided this decision. Had seen ACUMEN poster in GP surgery prior to accessing acupuncture privately, but as had prolonged rather than heavy periods, was unsure about eligibility. Her acupuncturist's assurance she would be eligible prompted her to request a referral to the study from her GP, as although her health was a family priority, the cost of treatment was an issue. Had had her initial consultation and treatment prior to interview. She had felt listened to and understood, and the holistic perspective taken had validated her experience of ill health, and had provided a conceptual framework by which to understand the ways in which different aspects of her physical and mental health were connected and had been affected by her heavy, prolonged bleed. Expressed a clear preference for natural, low-tech therapies and liked acupuncture's focus upon addressing the underlying cause of disharmony. Expressed a distrust and dislike of drug therapies that address the symptoms but do not address the reasons for ill-health, do not provide a "cure".</p>
Distressed by lack of GP empathy, treatment and care	<p>"I feel that you should be doing something." I said, "and I think it's probably hormonal" I said, "because my moods", which were very bad at that time, I think that's because I was feeling so low anyway, I said, "are absolutely out of control, and I hate it because that is not me, you know, I'm a fairly level-headed-person. I can take everything that life has to throw at me and cope with it," I said, "and I can't", I said, "and I don't know whether it's affecting from this, the period is causing this, or whether it's everything going wrong inside, and you know, can you not do anything, can you do a hormone test for me?" And he said, "no we can't do a hormone test, because your hormones would be all over the place considering that you've had a miscarriage." I said, "the miscarriage was nearly 3 months ago." I said, "surely my hormones should be back to normal by now?", I said, "and I've never had this problem with the other miscarriage and ectopic". And he said, "no you can't." And I think that was the turning point for me, because I came out the doctors' and I just thought, "no one is going to help." I'd gone to see 3 different doctors over a month and no one, they just kept saying "go away" basically, all in different ways, you know, but basically "go away, we can't do anything for you, you're bleeding so what?" (1:338-356)</p>
Felt that no one was going to help	
Health deteriorated	<p>"And I think that was, I think that was a turning point, because every day from then my health really did deteriorate. I mean the tiredness it just got worse and worse. And I'd already started reading about alternative methods, and you know, some different forms of help, anything really, I just knew that I could not carry on like that, and I was going to end up losing my temper if no one was going to do anything. So I did, that's when I started, you know, really researching other alternative methods and things, to get me back to normal." (1:356-65)</p>
Started researching CAM and infertility	<p><u>Information gathered on infertility/miscarriage and CAM (1:369-408)</u></p>
Let down by system	<p>"...no one is going to help me, no one is interested. They're just going to let me have another miscarriage, or you know, they're not bothered even in giving me a chance to try for a baby. I just felt completely and utterly let down by the system. Completely. I mean I've not had that much faith in the doctors anyway, but I mean, it really was a turning point for me, I've got to say. I could either have got very depressed about it and just sat and thought right, woe is me, nothing is going to be done. Or the other way, take it into your</p>
Decided to be proactive and see CAM practitioner	

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privately	<i>own hands and either go find alternative methods or even alternative doctors, you know pay for them privately." (1:408-19)</i>
Wanted a supportive therapeutic relationship	<i>"I just wanted someone to acknowledge that there was something wrong and do something for me, and not make me sound like I was a silly little woman that was moaning about bleeding everyday, or that she couldn't have a child after 3 years, which was how that doctor made me feel." (1:420-4)</i>
Decided against Chinese herbs due to concerns about side effects	<i>"I read everything I could. I read leaflets in doctors, everywhere there was alternative health methods I got the leaflets, I went to a shop, a Chinese medical shop, spoke to the lady there about Chinese herbs and everything. I was thinking about that and I thought, the Chinese medicine and things, I thought about that. I got information on that. But I preferred acupuncture, purely on reading about acupuncture. Because one I'm worried about any medication I take, because it doesn't really have a great affect on me and that, you know, there are certain things I shouldn't be taking and I was worried that a Chinese doctor that didn't really know my history, about my blood and things, might give me something that would make it worse, or could possibly be fatal. You know if they gave me something to stop me bleeding, and it was a blood-clotting tablet, then that could be fatal. And I, so that was what put me off that. I wanted someone I could talk to that was, English I suppose, that was educated here. You know, I know that's wrong to say but I meant that I didn't think I could get over my family history to a Chinese practitioner in a shop in the time that she gave me, and that's why I never went that way." (1:424-42)</i>
Wanted to avoid IVF	<i>"And also what IVF entails, which I've read about, is just horrendous really. And I don't, that's not for me that side really. I don't, whether I would be able to even have that, with my family history and everything, and the way, you know, what they do to your body. You're so abnormal, you know, it frightens me really." (1:456-61)</i> <i>"It (acupuncture) is natural, it's not putting drugs into your system. It's not making your system do something that it shouldn't be doing. You know, like, you know, fertility drugs, you know making you produce loads of eggs when you're supposed to produce one of them. You know, to me it's just not natural really." (1:702-7)</i>
Positive reports of acupuncture for infertility in book and Times newspaper	<i>"I'd read a lot about acupuncture. This book that I'd got was fantastic really. It'd got everything, from having fertility problems that they couldn't have children, from stress related, from multiple miscarriages where the doctors are doing nothing basically, and they went and had acupuncture and it, you know, within a year they were back to normal and pregnant. And I was just reading loads and loads of successful stories really, and also at the same time, in The Times, I think it was in The Times, or something like that, there was a big article on acupuncture and fertility, and I read this and it was giving the studies that they'd done and the actual percentage, saying that people that go for IVF, even though that wasn't me, sort of a circle that I'm in, people that go for IVF, the chances are, it's £3000 a go IVF, and they say that you need about 3 go's to stand a chance, which is nine thousand pounds, and then you may not even conceive after 3 goes...So they were talking about acupuncture and how that had helped people, and the success rate was about four times higher than IVF, you know, and for all sorts of things. I mean this piece was just on fertility and the book that I read was on IVF and multiple miscarriages and how it had helped with those. And whether it's a state of mind or whether it's your state of body, I don't know what it is, but it seemed to work for these people, and I thought, "well," you know, "give it a go, because what else have I got to lose?" So you know, that's why I started looking into acupuncture." (1:442-456; 461-469)</i>
Likes fact acupuncture is natural	<i>"I like, I like the fact that it's natural. I like the fact that it's not drugs. It's not something that you take, a tablet, you know, I am averse to anything like that. I mean I don't even like taking Nurofen or anything." (1:671-3)</i>
Reassured by acupuncture's long history and article in Times	<i>I like the fact that it is a natural, and it is an established practice, whether doctors recognise it or not, it's been round for hundreds of years. And I like the fact that the success rate is great, and it's becoming more and more acknowledged by people, I mean, if you've got The Times writing about it, you know, it is becoming more." (1:673-8)</i>

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Positive experience of niece	<p>"And also my niece she put me onto alternative health a couple of years ago. She was having problems with going on to the pill. She couldn't find a pill that would suit her, and they were giving her, she'd got a hormone problem, but they were giving her acne. She'd never had acne before in her life, and she was covered from head to toe in acne. And the doctors, for a year, kept giving her antibiotics. And she would take the antibiotics for 2 weeks and it would clear it up and then 2 weeks later it would come back. And this is my, this is what really annoys me about the medical world, they don't actually find out what's wrong. They just treat you there and then, and just treat your symptoms and not the cause. And that's, that's, I don't think that's right basically. I mean the amount of antibiotics that she took then wore away at her system, so that she lost all of her immune system. So then she'd just pick anything up, because that's what antibiotics do, you know, they take away you're immune system." (1:678-91)</p> <p>"So she (my niece) was getting ill all the time and she'd just had enough and she went and had acupuncture for her skin, because her skin was so bad, and she was a young girl. I mean she's twenty odd, you know, she was 21. And she was just, she was at the end of her tether and she'd heard about acupuncture with a woman who had had it done for psoriasis. And she'd heard about it and she said right I'll give it a go and she went to an acupuncturist and they said 3 sessions, no 5 sessions, and we'll have you clear, and she had 3 and it's never ever come back. You know, I mean that's a real story to me because I know her. She's not a name in a book. You know, and so things like that, things like all the literature I read on it. I like to read a lot about things, so I've got a lot of information on it." (1:691-702)</p>
Positive first consultation with acupuncturist	<p>"And I went in and I spoke to [acupuncturist] about everything, about miscarriages and about, you know, how I was feeling and, I mean, s/he looked at me anyway and said, "you know, there's just no energy there." S/he took my pulse and there was hardly any pulse. And I mean it was just, I just felt dreadful." (1:489-94)</p>
Felt listened to and understood	<p>"(Acupuncturist) went through everything, from how I was eating, how I felt when I walked up the stairs, how tired I felt, you know, there's lots of different degrees of tiredness. So we went into that, quite a great deal really, which I thought, "well what's [acupuncturist] want to know how I feel when I walk up the stairs?" It was really strange, and how do I feel after I've eaten? And it was only when I sat and I spoke to [acupuncturist] about these things I thought, "well yes, when I do eat I do feel really bloated and I have to stand up for 10 minutes afterwards because I don't feel as if it's gone down." And you know, it was really, it made me look at how everything was actually getting worse, and how everything wasn't normal, even though everyone said it was, and it wasn't in my mind." (1:505-16)</p>
Acupuncturist explained that prolonged bleed had been depleting and had affected her whole system	<p>"And [acupuncturist] said that obviously the continual bleeding had left me depleted of goodness basically, which was the chronic tiredness, and because nothing has been done I'd gone from tiredness to, it had been working overtime really, your body had been, when you should be resting or having treatment, I wasn't having treatment, and I was still doing my normal daily routine, which is busy, you know, I have a very busy day and I was still doing that. And so that had probably, you know, used all my reserves and then some. So then that had a knock on effect that it was then affecting my digestive system. Because basically you're running on empty, and you're keeping going, and it's then that everything starts to, it has a knock on effect, as in it starts to affect everything else in your body, you know obviously your mood swings, your hormones. And then there's the digestive system, which s/he said was being affected." (1:516-28)</p> <p><u>Tiredness causing work stress with digestive problems and panic attacks (1:528-545)</u></p>
Came to recognise how had impacted upon every part of her life	<p>"I was talking to [acupuncturist] about it, and I was looking, you know, how it had affected everything. And I hadn't really noticed, you know. But it has affected every part of my life. It's affected my work, it's affected my food, it's affected my relationship, and it's affected my, me as a whole really. You know, because if you can't, feel as if you can't cope, then that's I think that's a really bad way to think about yourself, and it's a bad, it's not a positive attitude. And that's what you need in life really, is a positive attitude, so, because that would then have a knock on effect to conceiving ((laughs)), which is my ultimate goal</p>

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Just wanted health back – life back	<i>basically. But more than anything else really when I went to see [acupuncturist], I just wanted to feel healthy. I wanted to feel. It's like I said to [acupuncturist], if I can't have another child because I can't conceive again, then yes I'd be upset and then I'd grieve and I'd be alright, because that's how I am, I'd be fine. But I said, "I can't stand being like this. I don't want to feel this unhealthy and this bad about things forever, or for even more than 3 months, I've had enough." You know, and that's, I think that's over taken everything now, is just wanting to be normal, wanting to be able to function on a normal level and have my life back, and that's more important than anything at the moment really." (1:546-63)</i>
Preference for natural, low-tech interventions	<i>"I want to cure it, to cure it completely, not to treat the symptoms. And this is what [acupuncturist] said, and s/he said, "you know it's not," because I was on about fertility and that, s/he said, "we can't treat that straight away, you know, you've got a knock on effect here, and we have to work back. We have to make sure to get you're digestive system working properly, when that's cured we'll get your menstrual cycle back on a normal cycle. When that's cured we'll then do a body temperature map and things like that for when, if I'm ovulating, and when I'm ovulating, and then, when I conceive to keep hold of it." You know, s/he went through the four steps, and as much as I wanted her/him to say, "well next week, you know, we're going to have you sorted and you're going to conceive by the end of the month", you know, I knew that wasn't possible, and it was nice for her/him not to say something that I wanted to hear basically. You know, s/he said that there were all these things that were wrong, and they are wrong, you know, and I've only just noticed, as I was saying, that when I went back over the past how it had a knock on effect and how things had deteriorated really." (1:711-27)</i>
Liked fact acupuncture aimed to treat the cause of the problem not just the symptoms	
Liked acupuncture's holistic approach	<i>"And obviously you can't just, what the doctor would do is give you antibiotics or give you tablets to stop you bleeding, and that's you know, that may stop you bleeding, but what has caused it in the first place they would never know because they haven't bothered to look, and they don't you know, want to know about anything else that it's caused, you know. Whereas s/he does, and s/he's going to treat every bit. Go back to where I was, which is like a domino affect really, s/he's going to rebuild them all back so I'm as healthy as I was a year ago, which is exactly what I want. Whereas a doctor wouldn't. He would say to me, if I go to the consultant, I know what he'll do. He'll do the hormone test and if they're wrong he'll give me hormone treatment. Not really, I mean I may have gone that way a year ago, but now I don't think I would. You know, I don't think I would at all, because I don't think it's for me anyway. But he wouldn't really recognise the fact that it's made any difference in my life. He wouldn't really be bothered that it's affected my digestion. He wouldn't be bothered that it's affected my relationships. He wouldn't be bothered that it's affected anything else." (1:727-44)</i>
Natural therapy that rebalances body and mind	<i>"I think that, you know, the way that acupuncture works is completely and utterly different to the medical profession, as in the medical profession just work on drugs basically, and you know, and not necessarily your sense of well-being and your mind, whereas acupuncture does. You know, it's working with your energy channels, it's working with your body, your body and your mind. You know, it's not putting anything artificial into you that's making you feel something that you wouldn't normally feel." (1:981-8)</i>
Distrustful of and dislikes drug therapy	<i>"You know tablets can, they can give you tablets to make you feel happy, to make you feel, you know, that's wrong to me, that's wrong. If you can't feel happy on your own, you're not happy. Change your life and feel happy. Don't take a tablet. It's still going to be there when you stop the tablets. It's the same with sleeping. It just annoys me that doctors do that. "I can't sleep." "Take a tablet." Shouldn't they be finding out why you couldn't sleep? And that's my stance on doctors, you know. You go, "I'm feeling a bit fed up." "Take Prozac." Well, why are you? Why can't they say, "why are you fed up? Well why don't you do this, why don't you go and get a job?" You know, I mean I know they're not councillors, but I don't think they should give out the tablets so readily really, because it's just a bad spiral and it's not treating the cause, and that's what doctors do, unless you get to a specialist, when they're completely different specialists I suppose. But certainly GPs, you know, it's just give you a tablet and go away, because they've got another patient waiting. And it is like that. I don't care what anyone tells me. It is like that. I</i>

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	<i>haven't come across a doctor yet that hasn't treated me in that way." (1:988-1004)</i>
Saw ACUMEN poster in GP surgery prior to private acupuncture	<i>"I'd seen the study in the doctors, when I'd gone to the doctors, the one day it was in the waiting room and I read it and I thought that's interesting. I was thinking about acupuncture anyway at the time, and I thought I wonder, and I thought maybe it's not me because I hadn't, it said heavy bleeding and I hadn't, I'd had prolonged bleeding. So I didn't think that I would be eligible for it, so I didn't ask. And when I went to see [acupuncturist], and when we went into it all, and s/he said, "do you know that there's a trial running at the moment to do with, to do with your problems?" And I said, "well I do actually, but I don't think that I will be eligible because prolonged bleeding is not the same as heavy periods." And [acupuncturist] said, "well, ask your doctor, see what she thinks." And I'd, as I say, I'd had this appointment booked anyway, so when I went to the doctor's, the last time when she referred me to the consultant, I said can I have the information on this trial. And she said, "well I don't think you would be eligible, it's not for you." And I said, "well why?" She said, "because it's for heavy bleeding, people with heavy periods and that's not you." And I said, "well could I try?" And she said, "well I don't think they'd accept you." And I said, and the only reason I carried on was because [acupuncturist] had said that it's worth trying, you know, they want to know about people with this kind of problem. So I said, "well can I just have the form and can I try, and if not then it's, I've not lost anything?" Because I would still see [acupuncturist], I would still go that direction. And I said to her, "you know, I would prefer to go on this trial than go to see the consultant, and surely that would be cheaper ((laughs)) than going to see the consultant." I just wanted to, you know, get on the trial. She said, "well, I'll give you the form. I'll give you the form then but don't get your hopes up." So she gave me, but that took me right until the end of that session, because all in between that she said, "well I'll refer you to the consultant." That's when she referred me and she said, "and we'll do these hormone tests," and I said, "well that's fine, but I still, I'm still going with the acupuncture now." Because I'd started it, you know, I'd had this session with [acupuncturist], and I said, "I'm still carrying on this way," I said, and I would prefer to go that way than you pumping me with hormones and you sending me to a consultant and you know, if all you're saying to me that the consultant's going to do" which is what she said, "is give me this progestogen hormone only, you know," I said, "I don't want that. So if that's all the consultant is going to do I don't want to go and see the consultant, because I'm just going to say, "well no, I don't want that. I don't want you to give me, make it all even worse." (1:796-836)</i>
Acupuncturist suggested trial participation and assured would be eligible	
GP unsure of eligibility	
Wished to continue with acupuncture despite GP referral to consultant for hormone tests	
Rather participate in study than see consultant and be prescribed hormones	
Concerned about side effects from drug therapy	
Would like the hormone test	<i>"And so she gave me the literature on the study and she referred me to the consultant. I'm still waiting for an appointment and I'll have to speak to [acupuncturist] first. You see even if I go to the consultant, I mean I might get the hormone test done because it'd be quite nice to see if I am just bad tempered or whether it is my hormones! ((Laughs)) But I certainly would not, even if the consultant said lets give you this hormone, I wouldn't do it. No way. I don't want my body being, going through that kind of change at the age of 34 and everything else that it's been through. I'm not doing that." (1:836-844)</i>
Does not want hormone treatments	
Astounded by GP offer of referral to see consultant and hormone test – would refuse on acupuncturist's advice	<i>"So I came home and I said to my husband, God it's amazing isn't it? You get someone to help you and then everybody wants to help you. Everyone's falling over themselves to say, "yes we'll do this and we'll do that." And for 3 months no ones wanted to know. And I said even then I'm going to stick to [acupuncturist], which I am this week, because I don't want anything to interfere with the acupuncture, and if s/he says to me, "don't, we'll just carry on with this", then I would. I wouldn't bother with the consultants because that's how I feel, really. You know, they've not done anything for 3 years so, so I would, I'd rather go with the acupuncture than anything else really. That's how strongly I feel about it. So I'm going to speak to [acupuncturist] on Friday when I see her/him and tell her/him look this is what they've recommended." (1:652-65)</i>
Cost an issue but regaining health the priority	<i>"...So I would definitely, whether this was happening or not [study], I would definitely, you know, no matter how much it cost, well, you know, it can be expensive, but I mean I spoke to my husband about it and I said, "what about the expense, can we afford it?" You know, especially as it's just for me, I mean it's alright spending money on your son or on a holiday as a family, but this was just sort of like, just for me, I just felt as if, "should I be spending all this money just for me?" And he said, "no, we'll do it". You know, "I want you</i>

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Would accept Chinese herbs from acupuncturist to help maintain a pregnancy	<p>back to normal and let's do it. It's worth it". And so that's what we did, that's how we are today really." (1:603-12)</p> <p>"And if, you know, [acupuncturist] says, "yes, we can give you Chinese herbs or whatever", that's apparently very good for stopping miscarriage, then I'd give it ago but along with, you know, I haven't got any expectations that [acupuncturist] could stop me miscarrying at all. That's not what I'm going for acupuncture for. If [acupuncturist] wants to give me some Chinese herbs that may help then I'd take them, the same that I'm taking the aspirin that the consultant's given me. You know, maximise your chances. That's it." (1:971-8)</p>
Using acupuncture – expectations	<p>Prior to first consultation had wondered if anyone, or any therapy, would be able to help. Impressed and reassured by acupuncturist's counsel and prognosis and effects from first treatment. Feeling faint immediately following first session and then profoundly relaxed understood as a consequence of low energy. Depression had lifted by the following day, recognised improvement related to relief that came from acupuncturist recognising the impact symptoms had had upon her health and need for treatment. Expected acupuncture to be ineffective for symptoms arising from organic pathology (blocked tubes, blood disorder) and effective for symptoms arising from stress. Expected acupuncture to be effective at restoring her health by virtue of its' focus upon the underlying causes of disease and ability to address psychological and physiological symptoms simultaneously. Expected treatment to improving her digestion, bringing about a sense of relaxation and calm, re-establish a regular cycle, and build-up the energy necessary to sustain any future pregnancy.</p>
Can anyone help me?	<p>"When I went for acupuncture, I've got to say the state of my mind and the state of my health at that point, I just thought, "anything has got to be better than doing nothing." You know what I mean? I need to be doing something. I need to be trying something. And I went in with no expectations really. I just thought, "I'll take it a step at a time", which is just the type of person I am, you know, I don't have any expectations. I think, especially from being let down by the doctors, and I just thought, "well is anyone going to be able to help me?" That's how I was particularly thinking at the time." (1:478-87)</p>
Acupuncturist confident treatment would help	<p>"And s/he sat and s/he listened, which was more than anyone else had ever done. You know, actually listened, which I know it's her/his job. But it was, I don't care, it was just, you just want someone to say, "well no, it's not normal", which is what [acupuncturist] said, "it's not normal to bleed for 3 months, it's not normal". And I just thought, well that's what I've been saying and I've been made to feel as if, you know, I'm a nuisance. "Go away, stop wasting my time, you're not ill." And that's, you know, s/he just sat there and said, "no it's not, it's not normal". S/he was very confident, and said to me that s/he felt they could help, that they'd helped a lot of people. And s/he'd gone, I mean she'd sat for about an hour and a half. (1:494-505)</p>
Positive experience – good therapeutic relationship	<p>"S/he gave me the first acupuncture and said you're going to have to clear your mind and things. And I said "oh I don't know whether I can do that" ((laughs)). I said, "I think that might be a big goal to begin with". And it was really strange. [Acupuncturist] was really nice. S/he was a comforting, caring person, which I liked very much. And you know, s/he gave me confidence to think that it wasn't just me. I just felt so positive when I came out of there, as if to say, one it's not me, I'm not a silly woman that's making a nuisance of myself. Secondly, there is something wrong. It's not all in my mind. It's not just me making myself feel fed up or me making myself feel poorly. It is actually, there is something wrong. And I had this acupuncture, and it was really strange, because I sat up and I nearly passed out. I was, it was, I thought, "God I'm not going to feel like this every time!" ((laughs)) And [acupuncturist] had to help me off the bed. And said, "are you alright?" And I said, "I feel really funny, I think I'm going to pass-out". And [acupuncturist] said, "it's all right, sometimes it does", because I hadn't much energy anyway and I hadn't relaxed at all and I wasn't used to it. I think it took a lot more out of me than I thought it would really." (1:565-586)</p>
Dizzy after treatment	
Tired after treatment	<p>"And I came home and I was just hopeless that night. I came home and my husband said,</p>

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<p>Felt positive & energised following day – depression had lifted</p> <p>Recognition of disharmony & need for treatment had a powerful effect</p>	<p>"God! What's s/he done to you?" ((Laughs)) And I said, "I'm just tired", and I just sat down, and I just couldn't have got off that settee and done anything. If the house was on fire I'd have just said, "leave me here." I was so drained." (1:587-592)</p> <p>"And I went to bed early, which is really unusual, and the next day I got up and I felt, I felt instantly different. Not cured, not my old self, but when I wake up on a morning I used to think, "oh God, here we go again", you know, "here we go, same old routine, am I going to get it done, it's a long day?" And I just got up and I just felt a little bit more energised and I just felt positive, and that's what I want really, and, you know, and that's after the first treatment. And I know a lot of it is because s/he's listened and s/he has said that there's something there, and it's not in my mind, so I will have a bit more of a positive attitude, but you know, it's more than I've felt in 3 years from any of the doctors." (1:592-603)</p>
<p>Ineffective for symptoms arising from organic pathology (blocked tubes, blood condition)</p> <p>Effective for symptoms arising from stress</p>	<p>"I would take the aspirin (to thin blood and aid implantation) because that's got nothing to do, I know there's medical things that acupuncture can't fix, you know obviously, like if your tubes are blocked no amount of acupuncture is going to unblock them. You would then have to go medical wise. But I don't think that that's my problem. I think my problem is one is stress related, because of everything that's happened and I'm disappointed and negative. So I need to feel positive again so that helps me to conceive, because if I don't conceive then the rest is history really isn't it? And the worst thing to stop you conceiving is stress and is to worry about, and I think acupuncture could help me more than any medical, any amount of tablets could. Me personally anyway." (1:902-12)</p> <p>"I mean I would take the aspirin solely because I know that acupuncture is not going to thin my blood. You know, I know because it's a disease. You know, my blood's gonna be thick, and unless I take something to thin it, acupuncture's not going to thin my blood, so I have to take that aspirin for that. You see, there are certain things that, you know, in life that you, like if you're, the ectopic, I couldn't go to [acupuncturist] to do acupuncture to stop the pain and make it go away. You would have to then go to your medical care. You then have to use the official channels and have an operation and whatever. And that's the same, that's how I feel with my blood. Acupuncture can't help that. Taking an aspirin a day, it's all right by me. It'll thin the blood out. They said that it won't do any harm, it will make the circulation better off anyway. And although that may not be the cause, and I possibly think it isn't the cause, I think it's more hormonal, I would take that anyway." (1:1009-23)</p>
<p>Based on response to first session and positive reports, thinks acupuncture will make feel better in self, help digestive system and regulate cycle and relaxation from treatment will help be less uptight and so aid conception</p>	<p>"I mean, I'm going on the research and I'm going on people's stories. I mean, I don't know the practice (acupuncture) inside out. I don't practice it. I've never done it before. But my faith is in there, until it proves me wrong, then that's where my faith will be. And I've had so many people tell me that it's cured everything from psoriasis to asthma to fertility problems. And I know it's not the be all and end all, I mean I know, like I say, that acupuncture is not going to clear it if you've got blocked tubes and you can't conceive a child, you can't go for acupuncture, because that's not going to help. But what acupuncture can do for me, I haven't got blocked tubes, I've only got one tube, but it can first of all make me feel better in myself because I'm feeling poorly and a tablet's not going to stop me feeling the way I feel now, and I'm sure that acupuncture will make me feel better, it will help my digestive system and it will make my periods on a normal cycle. And even if that's all it does, that's more than doctors have done for me in 3 years. So that, if that's all I, if that's all my expectations, then it's done more than I could possibly ask for. If [acupuncturist] gets me back to a normal cycle and me feeling energised, and me feeling better, then that's more than any doctor's have done. And if [acupuncturist] can go one further and make me not be uptight, because I think that will be a problem now, me being a little bit uptight, and it would take me longer to conceive, and the longer that I would conceive, take to conceive, the more uptight I would get. Purely because it's been 3 years, and I know I wouldn't be as laid back as I have been, and I think that that would help me, that would make me more relaxed, [acupuncturist's] treatment makes me relaxed. And from, certainly from other peoples stories and experiences, the way it makes you feel back in control of yourself, your energy, your mind and your body being one. You know, you've got to look at that aspect of it, and I probably believe that more than I would believe that antibiotics can make you better. Yes they can cure that bit, but then they</p>
<p>Help regain control of self, unite mind and body</p>	

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	<i>make you feel so much worse because they, you know, tired out your immune system to make some other problem, doesn't it?" (1:915-946)</i>
Will get to the cause	<i>"You know, to me acupuncture's getting to the cause of it and it's realistic and it's making a more natural approach to your body and your mind, where doctor's don't really acknowledge your mind unless you've got a mental disorder, you know, and it's been proved that, you know, that if you haven't got a positive and calm and easy-going mind when you're trying to conceive, you will not conceive. That's what takes people 10 years. to conceive when there's not anything medically wrong with them, it's just that they're that up-tight, you know, they're that up-tight, that's been proved. I know that. So I think that acupuncture can help me in that way. It can relax me about it. For a start it's given me a positive attitude already." (1:946-56)</i>
Will help conception by restoring sense of calm	
Believes will be effective at restoring health, giving a regular cycle and the energy to sustain any future pregnancy	
Mind and body	<i>"I think it (acupuncture) can do it, and it's only if it proves me wrong, whereas it hasn't yet, so it may and it may not. But my faith is there for now, that's what I'm saying, and that's why I'm positive about it. And you know, if it can get my cycle back to normal, you know, it's not going to make me conceive, but it's giving me the chance to conceive, then the ball's back in my court. I've got back the control that I've lost, and that I can try, you know if I've got a normal cycle I'll know if I'm ovulating, I know that I can try, and if I'm not catching on then it's nothing to do with my body. And that's what's wrong at the moment. I don't feel as if my body is working in synch with my head and how I want it to, and until it does, until they're all in synch with each other, nothing is gonna work, you know? Trying for a baby is out of the window. I need to be back healthy, I need to have a regular cycle, I need to feel energised, and then you know, if I do conceive a year down the line at least I'm at my best possible health to sustain it." (1:956-71)</i>

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Theme Memo	CASE Chart for descriptive analysis – Ann (page 1 of 5) A 49-year old mother to 4 children aged 10-years and over and carer for her terminally ill husband.
Menstrual history and experiences	Since menarche at 16, has had heavy, painful, tiring periods, with the bleed lasting 8 to 10 days. The bleed worsened when an IUD was fitted and did not improve following sterilisation. More recently, has also experienced pains running through her hips and down her legs, and debilitating migraine headaches. Wakes during the night to change. Concerned about long-term effects of heavy blood loss and looking forward to menopause.
Heavy, painful, tiring periods since menarche at 16	<i>"They've always been quite long, eight days. I've not had three's or five's. You know, people talk of 3 or 5 days. I've never had 3 or 5-day periods. They've always been over a week. I didn't start my periods until I was 16, which at first I thought, 'oh I'm a late starter. All this is because I'm late, you know, it could have accumulated ((laughs)), and I should have started earlier!" I was one of the last out my friends and I, you know, I was one of the last to start. Everybody else had sort of started, but I was nearly sixteen as I say, and eight days. I used to get pain, an awful lot of pain in my tummy, tummy aches and things, which now I still get, but I also get it in my legs and cramps in my bottom, and the tummy ache probably isn't as severe as it was." (1:10-25)</i>
Disliked OCP	<i>"I wasn't happy with the pill what-so-ever...I tried the coil, but I found that was even worse, that was even 10 days to a fortnight that I was losing...Obviously with 2 children, it's very weakening. You know, periods are weakening anyway aren't they? You get tired and the pain didn't subside, nothing seemed to alter. I think I tried, I don't think I went to the doctor's at that stage, I think once the coil was taken out, I think I tried, the next step was, Evening Primrose Oil. Things like that, which didn't seem to help my periods. Although having said that they probably helped indirectly, because I felt a little bit better in myself. But they didn't actually help the pain or the blood loss...I was still eight days, eight, ten days. I mean even today I can be anything over a week. As I say, I never go less than a week. I mean even when I'd had my third child, even after her I think I bled for about six weeks. Five, six weeks, you know, I didn't, I didn't sort of lose for a week or a fortnight, stop and then start again a few days after, or go a few months and then start again. No, it was one long spell." (1:26-76)</i>
IUD worsened bleed	
Evening Primrose Oil gave limited benefits	
Sterilisation of no benefit	<i>I mean I've tried, all my friends used to try Tampax and things, and I couldn't use those. I was just too heavy. Just too messy and too uncomfortable because, I put that down to because I was heavy. I couldn't use those. I had to go onto towels again. And as I say, even after my fourth child I was, I was still heavy so I went in for sterilisation because I thought, oh well that might just help, but again, unfortunately, to this day I'm still over a week on a period. I don't know. Maybe having four children hasn't helped me, and I'm probably at a funny age now! ((Laughs)) But I suppose, some people would say well, you know, at your age you can expect heavy periods. But, I maybe can now, but I've always had them... I've always had pain at the beginning. The first three days are really painful. And as I say, it's also the amount of blood. It's the blood loss. You think, oh, am I ever going to make this up again, you know. No wonder I feel tired, no wonder I feel weak. (1:88-112)</i>
Age a factor?	
4 children a factor?	
Concerned about extent of heavy blood loss and consequences for long term health	<i>"I get migraines as well with periods, and the first couple of days that I'm on a period, I'm just so washed out, so tired, that I can't do much at all. It takes me a lot longer, if I start a job, it takes me a lot longer than what it would normally. I try to get as much done as I can before I'm actually due for a period, and fortunately my periods are quite regular. It's very rare that I'm early, although having said that this last year has been a bit hit and miss. Last year I seemed to have sort of one bad one and then the next one wasn't quite so bad and then I was back to a bad one again. It was sort of the alternate. But recently even the better ones haven't been as good as what I would have liked. I'm just looking forward to them going completely ((laughs)). Probably a bit much to ask at the moment, but I can't wait! ((Laughs)) I can't wait." (1:179-205)</i>
Migraines	
Impact upon activities	
Looking forward to menopause	

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Limits outings and activities	<i>"I daren't walk too far. Obviously I have to be very heavily padded up so I don't like going out far. If I have to go out I go, but I don't like going far. I try and avoid it. As I say, I try and avoid a lot of things around the time when the period's due, because I know for the first couple of days that I'm not going to get much done. Like standing, and even going up and down stairs, the pains in my legs are terrible. I mean I'm even getting up in the night to change so it's not a case of rest is any good really. If I have a severe migraine, then I have to stay in bed, I have to sleep that off. I take my medication and then I have to sleep it off. But the blood loss is still there, it's a pain." (1:228-45)</i>
Wakes at night to change	
Concerned about extent of blood loss and consequences for general health	<i>"Obviously, if the blood loss was less then I may be able to do a little bit more in terms of shopping or going out. Because at the moment I daren't lift too much because I get the pain and the blood loss if I'm lifting. I just feel so uncomfortable because I can't sit, stand, as I say, if I go to bed I've got to get up to change, because I can, I can feel it, every time I move I can just feel it draining away from me, I just feel it flushing away...It does, it drains you and tires you out terribly." (1:253-64)</i>
Experience of treatments for menorrhagia	Over the years, received unsuccessful or unacceptable GP treatment for heavy, painful periods (OCP, IUD, sterilisation), and gained only limited benefits from over-the-counter remedies (e.g. Evening Primrose Oil and iron supplements). Takes iron supplements occasionally to prevent anaemia. Acknowledged that her concerns about side effects from the drug-therapies prescribed led to poor compliance (OCP, HRT and tranexamic acid). Hysterectomy considered unacceptable given her family commitments and the recovery time that would be required.
Discontinued OCP because of side effects or concerns about side effects	<i>"I did try the pill for a time, but I found that, well I tried several types of the pill, but I found that they all had side-effects. I wasn't happy with the pill what-so-ever. Pains in my legs and headaches and sickness. I didn't like the pill at all. As I say I did try more than one, so I came off that...It was before I was married, well, late teens early twenties. I got married when I was about twenty-three, twenty-four, and after having my first child I tried another mild form, new form, of the pill, which again I wasn't happy with, because I'd had side-effects before and I was waiting for one of these side-effects to happen. I wasn't confident in it at all, and when we tried for the second baby, I had 2 miscarriages, and then when I conceived for her, after she was born, I tried the coil. But I found that was even worse. That was even 10 days to a fortnight that I was losing." (1:26-47)</i>
IUD worsened bleed	
Over-the-counter remedies of limited benefit	<i>"As I say, I tried Evening Primrose just, as I say, the only thing, I did feel a little better in myself. I've tried all the, nearly everything, over the counter that said for period pains and one thing and another. They've not helped until sort of the end of the period, when you're getting over it. They don't help at the beginning when you're in agony or really heavy." (1:79-86)</i>
Sterilisation of no benefit	<i>"Even after my fourth child I was, I was still heavy so I went in for sterilisation because I thought, oh well that might just help, but again, unfortunately, to this day I'm still over a week on a period." (1:94-97)</i>
Uses iron supplements to prevent anaemia	<i>"As I say when I remember my iron tablets. I hang on for when I do remember my iron tablets...I'm hoping that I'm not anaemic by taking the iron tablets. Because I have been anaemic in the past. So I'm hoping that if I do remember to take the tablets around the time that I'm due or when I'm, whilst I'm on, I'm hoping that I'm not drained so much that I am anaemic again. I take them purely because I don't want to get anaemic, because I can't afford to be ill." (1:267-80)</i>
Concerns about side effects from HRT and Tranexamic acid led to poor compliance	<i>"I mean I do take iron tablets. I do take those from time to time, and I've had tablets off the doctor for heavy periods...tablets to stop the loss. The acid ones. The tranex? (tranexamic acid) I've had those. But, they maybe would work if I could take them properly." (1:114-24)</i> <i>"So, I mean, when I went to the doctor's a few weeks ago he said what are you going to do? Do you want some more (HRT)? And I said well I don't think they're doing me much good. Again, I think the only thing they have done, has made me feel a little bit</i>

	<p>better in myself. I'm still getting the blood loss and the pain, but they're apparently not for that. They are to just make you feel better and they're a HRT, as I say, so they're not to stop you bleeding really. So it doesn't work with everybody, it's just the odd few it does...but it hasn't helped me, as I say, one little bit. It's just maybe made me feel a little bit better, not so sluggish." (1:153-68)</p> <p>They (tranexamic acid) maybe would work if I could take them properly. I think the prescription was two, four times per day. But, with having a husband that's poorly and four, well three children at home, I forget all about myself. I don't have much time for myself at all. And tablet wise, I either forget to take them, or if I'm feeling a bit sick, I'm putting it down to a side-effect from the tablet, which, well I can't afford to be poorly, because as I say, I've got a sick husband. So I don't like taking tablets, quite honestly. And I've got to the stage now where as I never finish a full course. I mean I had the PrempacC, I never took those properly. They're HRT. I had those and never took those properly, you're supposed to take one a day. I'd forget or I'd take it at morning and it should be at night ((laughs)). You can only catch up on so many, and you're supposed to take them continually. Once you've finished one pack, start on the next. And I just wasn't taking them properly. (1:123-151)</p> <p>"As I say, these tablets (tranexamic acid) that I had from the doctor, I thought they may have worked, and as I say, they probably would have done, if I'd been able to take them properly. But it's remembering everything isn't it...Yes, not really wanting to take it." (1:285-90)</p>
Using acupuncture – motives	Enquired about ACUMEN in response to surgery leaflets. Key motive for joining the study was to find an effective treatment that did not involve drugs or surgery. Also liked the fact that weekly treatment would provide regular time for self. Was pleased with GP response to enquiry and researcher's prompt response. Other key motive for joining the study was her own previous positive experience of acupuncture for neck pain, along with positive reports from other people who'd used acupuncture. Interest in acupuncture also related to her understanding of it as a safe, natural, low-tech intervention.
Symptoms affect quality of life	<p>"But no, I want something for the heavy periods and the pain, preferably something that will combat both, or at least help both...For which I'm keeping my fingers crossed ((laughs))." (1:170-3)</p> <p>"(I'd like treatment to address) the heavy bleeding and the pain hopefully. If I can combat one I would be highly satisfied." (1:248-9)</p>
Provides an alternative to drug-therapy and surgery	<p>"As I say, if it gets rid of a little bit of pain it's a bonus. But if it gets rid of the pain or the blood loss, then it's ((holds her hands to the ceiling))...Fantastic! ((Laughs)) (1:370-2)</p> <p>"I mean as far as surgery goes, there's no way of having surgery, if it was offered to me, because as I say, with having the children and a husband, you know if, if I was referred to a gynaecologist and he said "so, would you like a hysterectomy?", there's no way I could go through that because I need to look after my husband...Oh yes, things like hysterectomy, you're out of action for quite a few weeks, and that would be out of the question." (1:207-16)</p>
Treatment provides time each week for self	"Again, (acupuncture) its not tablets, it's an appointment, and I can keep an appointment. I have quite a few. An appointment is far easier to keep. And also it's for me. So it's going to be away from the house, and it's me that's going there. You know, it's like going to the doctors. All right I'm going further, but it's like I've got a doctor's appointment. I've got to go, and I've got to get ready and go. And as I say, if it works it's an added bonus. (1:340-52)
Leaflet in GP surgery led to trial participation	"And it (ACUMEN leaflet) did say, well ask the doctor about it, and so I asked her and she said well yes, make an appointment for a full examination. And I made a double appointment, went back for a full examination, and she said, "well, you're not under a

<p>Pleased with GP response to enquiry and researcher's prompt response</p> <p>Previous successful course of acupuncture for neck pain a factor</p> <p>Safety a factor</p> <p>Positive reports of acupuncture in other contexts a factor</p>	<p><i>gynaecologist and your cervix and your pelvis looks quite healthy, so I think we can put you forward." So she filled in the appropriate form and sent it off and the next I heard from you [researcher] ((Laughs)). I got your telephone call, she said "I think you'll be hearing fairly soon", I think this was a Thursday, and you rang me on the Monday...When doctor's and that say fairly soon, you think oh yes, two weeks to a month! ((Laughs)) And then the follow-up after that could be six months! And the waiting list might be eighteen months!..Oh it was swift, yes. I was quite taken back! ((Laughs))" (1:314-31)</i></p> <p><i>"It was an advertisement, well it was a leaflet in the doctor's surgery. It was on the receptionist's ledge, on the side there. And I read it and thought, sounds interesting, and having just recently had acupuncture for a pain in my neck, and it helped that. The first session didn't. I didn't feel a lot different, but I went back, I think it was a couple of weeks after, and I had another session, and then I think I went three weeks before I had another one, and it took the pain off in the neck for a time. And then when it reoccurred, a few weeks, quite a few weeks after, I went back to the doctor's again and he said oh you can have some more acupuncture if you want. So I said yes alright then, because it had helped slightly, and the more I seemed to have the better my neck seemed. It's gone longer this time than any. I still get the odd pain, but not as bad as what it was. And as I say I saw this leaflet so I thought, well it's worked for my neck so it may work for these." (1:293-312)</i></p> <p><i>"Well I thought if it had helped the neck it may help here, and it's worth giving it a try." (1:337-8)</i></p> <p><i>"It can't make me any worse than what I am, well I don't think it can anyway. I've never heard of anybody that's had acupuncture that's made them worse. I do know somebody that had acupuncture after an accident on his foot. I think he had physiotherapy first, and I don't think he was very happy with that, and then shortly after he had, more or less straight after he had acupuncture, and he didn't have much, but it helped him as well, so I've not heard any bad reports about it...I'm hanging on to. I'm just hoping well. I've never heard any bad reports, so it can't make it any worse than what I am so I'll give it a try." (1:356-68)</i></p> <p><i>"I'm quite looking forward to it actually, because it's got to work, it will work, it's got to work because it's worked. Everybody else that I know, well I've only known a couple that's had it done, not for period related things, but for other things, but the couple that I know that have had acupuncture it's worked for. It worked for my neck. I've not heard of anybody that has had it that it hasn't worked for, so it's going to work. So it's going to be good." (1:389-96)</i></p> <p><i>"Oh yes it's definitely worth a try, and you can't, you can't say no it's not going to work if you've not tried it can you? You've got to give it a go if it's available. (1:423-6)</i></p>
<p>Using acupuncture – expectations</p> <p>Benefits based on previous experience</p> <p>Treatment will be similar to that received for neck</p>	<p><i>Expected acupuncture to work based on previous positive experience of treatment. Expected treatment to be similar to the acupuncture she'd received for her neck, which involved needles being inserted and manipulated every 10 minutes over a period of 20 minutes. Expressed some anxiety about the needles, but prepared to over-ride these for the expected benefits. Unsure how acupuncture works.</i></p> <p><i>"As I say, like everybody else I think, you just think "oh, needles!" you know, "that's not going to work", or "oh, needles, I daren't have that done!" And everybody's turned a blank eye at it, but because it's worked before for me, I'm thinking, "oh, it will." (1:412-8)</i></p> <p><i>"Well on, when I had it on my neck it was the doctor who was just putting these short needles into my neck. About ten minutes, twiddling them, checking that they'd all stayed put, and then leaving them probably another ten minutes, and then coming back and saying more or less, well that's it 'till next week." (1:375-80)</i></p>

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Anxiety about needles	<i>"I'm wondering how many needles go in. I'm not nervous about it, well not at the moment, I may be on the day, but I'm not at the moment, not nervous one little bit. Having mentioned it to a friend, she said, "oh, you're mad! You are brave!" ((Laughs)) But no I'm not. I'm quite looking forward to it actually." (1:383-90)</i>
Prepared to override anxiety about needles for expected benefits	<i>"As I say, the only thing is that I don't know is how many needles go in at once. So I shall just look away. But, as I say, however many go in, it's going to work, so I've got to just look away when they go, when the needles, the needles go in." (1:396-401)</i>
Unsure how acupuncture works	<i>"Well. It must go straight to the point, mustn't it? The needles go in. I mean I don't know how a needle takes the pain away I must admit. How does a needle take the pain away? Like a tablet goes into your bloodstream and it's away. I don't know, and I've not actually read up on it." (1:403-10)</i>

Appendix 43

Theme Memo	CASE Chart for descriptive analysis – Clare (page 1 of 5) A 37-year old woman, married with 2 children aged 4 and 6 years.
Menstrual history & experiences	By talking to friends has come to realise has had heavy, painful periods since menarche at 13-years. From 16 to 28 years, OCP and prescribed NSAIDs lessened the pain, the bleed and addressed acne - although pain still caused absenteeism. Periods worsened after difficult vaginal birth with second child 4 years ago. Periods are now heavy with sudden flooding, passing large clots and severe pain. Also experiences acute pain with bowel movements and during intercourse, a dragging period-like pain with walking, and fatigue. Concerned symptoms are a sign of serious pathology. Distressed by years of largely ineffective treatment and the impact of symptoms upon quality of life and sense of self. Distressed that a natural female phenomenon should feel like an illness.
Heavy, painful periods since menarche at 13	<i>"Well they've always been heavy. I don't know when I started, probably about thirteen. Twelve, thirteen. Something like that anyway. I was regular and fairly painful, fairly crampy with it, but always fairly heavy. You know you never know really know whether they're heavy or not. My sister's were always the same, well my twin sister was the same. But you don't know, because you don't know what other people go through. But having spoken, later on I believe it to be, they must have been quite heavy. They always lasted a week, and they were always pretty heavy for three, three of the days, three or four of the days pretty heavy." (1:4-21)</i>
Heavy bleed confirmed by talking to friends	<i>"Well just, in recent years, talking to my friends. And they, you know, they'd say that they'd bleed for a few days and not much, and you know, they don't have to wear tampons and pads. ((Laughs)) You know, they don't have to double up at all, and they just seem to get away with very little" (1:24-28)</i>
Pain caused absenteeism	<i>"I think I had Solpadine even then. And it was, I was still left with quite a lot of pain. I'd come home from school I was in that much pain, I'd come home from school with it. And so the Dianette controlled it for years and then I came off it, when [husband] went away I came off the pill completely to see how I was, and I wasn't too bad. (I was) 28, 27, 28, and my face didn't go too bad. Well it got a little bit worse, but it wasn't too bad. And so I came off it, and then we started trying for a family so I was off it anyway, and the periods weren't too bad. Again painful, but manageable, you know, just inconvenient." (1:51-66)</i>
OCP lessened symptoms	
Worsening of symptoms after birth of 2 nd child	<i>"About the first or second period I had after [daughter], it was, there was just so much blood, you know, it frightened me. I just couldn't, I couldn't move, I couldn't get off the loo, it was just awful and I ended up having to go to the doctor's and prescribed something to stop it, stop the bleeding completely, and that stopped it. And I kept them in the cupboard just in case it happened again. And since then, and really since then, the bleeding has been very heavy and clotty." (1:80-6)</i>
Symptoms affect ability to care for family	<i>"Last month was the first month of that (Progesterone only OCP)...I was the worst I'd ever been, I was like head over the toilet wanting to be sick, I was thinking that with this much pain I would be on gas and air if I was giving birth, not just a, it was just so intense. I thought I was never going to get [son] to school. I said, "look [son] you are going to have to get yours and [sister's] breakfast, I can't do anything". And I had to go upstairs and just lie on the bed, and I just didn't know what to do. Anyway, I managed to get myself the tablets and I took the Mefenamic and the Solpadine, and once they kicked in I could get on with the day, but it just leaves me shattered from coping with the pain, shattered with the loss afterwards, and I just feel horrible." (1:132-45)</i>
Affects quality of life and sense of self	<i>"The number of times I've been caught out...I've ruined my car seat...it had just gone through, and I came back and I thought I'm going to have to go out and clean that up, and you just daren't, it's just horrible...You can prepare yourself for it, but its not very, it just makes you feel horrible." (1:152-9)</i> <i>"It drains me completely of energy, with the pain and the quantity. But the quantity I seem to be able to control by taking these tablets. Seem to reduce it. But it's coping with both that leaves me shattered for 2 days, it was 2 days that I was on it, on the</i>

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Childbirth a factor?	<p>Solpadine and Methenamic acid this month, and then I seemed to get over that and then I'm just tired and you know, it has a knock on effect because it wears me out then." (1:165-73)</p> <p>"I feel that the extreme pain is related to [daughter]. I didn't used to have the clots before, well I don't remember, I don't remember having them, well there is always some, the odd one or two, but not the size of clots that I get after [daughter]. And my suspicion, after I'd had [daughter], I used to get an awful lot of pain when I had a pooh, there used to be a certain position, a certain place in the bowel that when I had a pooh it was really painful, I really had to grit my teeth to cope with it. Then once it was past that point I was fine. And then that lasted for about a year after I had had [daughter]. But I get extreme pain, I get a lot of pain if I have a tampon in and I need a pooh, so I feel as though there is something there, scar tissue or whatever, because I did rip quite badly with [daughter] and there is something there that's not right, and whether that, with the cramps that you get with the period and that's pulling on the scar tissue as well, and that's what gives the extreme pain, I don't know. That's my suspicion, that it's something like that that's causing the pain. And what the clots are I don't know, as I understand it the older you get the more clotting that you might get in your periods anyway. My sisters say that they get it more, so I'm presuming that that's what happens." (1:178-210)</p>
Age a factor?	
Pain linked to clots?	<p>"I used to have a suspicion that some of the pain I got, I used to get a pain that, you know, I just couldn't do anything, and then it would go, and that would be shortly followed by a clot, I'd see that there would be a clot, so I sort of wondered if that was related to it as well, with it coming away. It's only sort of like feelings, isn't it? I have no idea whether that's right." (1:212-220)</p>
Concerned pain an indication of serious pathology	<p>"I suppose that the pain might, is the pain an indication of something worse going on down there that I don't know about? And the fact that nobody seems bothered about it particularly, and that it takes such a long time to get anything right. You know, you try, you try things to put it right, but you've got to wait months because it only happens once a month with the period. You've got to wait months to see any difference, and this is 4 years on now, and I'm thinking that it's no better. I get quite upset about it, because you think, "well, is there going to be an end to it?" ((Cries))" (1:222-36)</p>
Distressed by lack of GP concern& the years of ineffective treatment	
Impact upon relationship with husband (sex)	<p>"And the other side of it is the sex side of it, I mean it's just I feel so sore, you know, you feel dirty I think, you know, at period time, and unpleasant, you know, you don't feel nice, and it seems to, the sex side of it, I've got no sex drive because I just think, "oh no, not more to do with down there." ((Laughs and cries)) So it's that side of it too. I just want to be left alone, which is no fun for my husband. So it is that side of it as well, you just don't feel very good about it...You don't feel nice, and it seems to be having more and more of an effect, because I, because I feel worse about it." ((Cries and blows nose)) (1:237-48)</p>
Natural female phenomenon but feels like an illness	<p>And then there's the energy. It's a drain on you, and I always feel as though I'm fighting for energy. And I know you get more tired as you get older, but I am only 37, I feel as though I ought to be a bit bouncier than I am. But I'm not ill, but I'm not right either." ((Cries)) (1:251-6)</p> <p>"I don't, I'm not sure that they (energy levels) are solely linked to that (periods). But I think they are linked to the amount of discomfort that I have. Like I can, we went on holiday end of last year, [husband] and I, and without the children there should have been no problem with having enough energy, but I had to keep stopping, I couldn't keep going, I had to keep stopping, you know, refuelling. Stopping for a drink, or something to eat, just because I couldn't stay on my feet that long, because I get very achy and draggy down here (groin), a bit like a period pain. But it's very wearing, and I find that that drains my energy, and I suspect that that's what is draining my energy day to day, and depending on how bad it is, you know, it drains me...it drags me down further. But I'm not constantly ill with flu or anything, but, and I do, it's a busy life looking after children. But I feel as though I should have, there should be more energy there...Because there's a difference, I do have, when I do have weeks when I'm full of energy, you know, there's a huge difference. Lots of get up and go and I want to do stuff and not so desperate to have a sit down! ((Laughs))</p>

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	(1:320-46)
Experience of treatments for menorrhagia	OCP and prescribed NSAIDs from 16 to 28 years lessened the pain, the bleed and addressed acne - although pain still caused absenteeism. Has consulted GP regularly since worsening of symptoms after birth of second child 4 years ago. OCP prescribed initially, but discontinued because of side effects (headaches with blurred vision). Mefenamic acid of limited benefit, partly because of problems with timing it to successfully control symptoms, whilst not also causing unacceptable side effects. Mefenamic acid and Solpadine (NSAID) needed to cope with the pain. Used new prescription of Progesterone at last period and symptoms worsened.
OCP and prescribed NSAIDs lessened bleed, pain and acne from 16 to 28	<i>"So they started off being heavy and I had bad acne, and so I was put on the pill at I think sixteen, fifteen maybe, maybe fifteen on the pill to control it, and it did lessen, it did lessen the periods and they became manageable. And I really stayed on it, I stayed on it until they changed it to a pill that was more suitable for my face, which was when I was at college, when I was about nineteen, they changed it to Dianette. And that still controlled the periods, but even then they still lasted a week. They weren't, you know, they weren't just a few days. They lasted all seven days, but they weren't the really heavy uncontrollable flow or anything. And the pain was less. Not gone completely, you know there was still pain, but a tablet would, tablets would control the pain."</i> (1:30-46)
Pain still caused absenteeism	<i>"I think I had Solpadine even then. And it was, I was still left with quite a lot of pain. I'd come home from school I was in that much pain, I'd come home from school with it. And so the Dianette controlled it for years and then I came off it, when [husband] went away I came off the pill completely to see how I was, and I wasn't too bad. (I was) 28, 27, 28, and my face didn't go too bad. Well it got a little bit worse, but it wasn't too bad. And so I came off it, and then we started trying for a family so I was off it anyway, and the periods weren't too bad. Again painful, but manageable, you know, just inconvenient."</i> (1:51-66)
Symptoms worsened after birth of 2 nd child – heavy and clotty	<i>"About the first or second period I had after [daughter], it was, there was just so much blood, you know, it frightened me. I just couldn't, I couldn't move, I couldn't get off the loo, it was just awful and I ended up having to go to the doctor's and prescribed something to stop it, stop the bleeding completely, and that stopped it. And I kept them in the cupboard just in case it happened again. And since then, and really since then, the bleeding has been very heavy and clotty."</i> (1:80-6)
OCP inappropriate because of side effects	<i>"I went back on the pill and I started getting headaches with blurred vision and like tunnel vision and stars and everything, and the doctor said right you have to come off it. So I came off the pill. And so I had no way of controlling it then."</i> (1:93-8) <i>"Well the pill (has been the most effective treatment I've tried), because it got rid of my spots and it controlled the period. I never particularly noticed an increase in weight or anything. I think that being on the pill does reduce your libido a bit, slightly. When I came off the pill I felt more, because your emotions are allowed to sway more, I suppose I felt a bit more like me, just a bit more natural, I don't know if that's psychological or not, but the pill just seemed to level things off a bit. And on the whole it suited me fine. But I didn't like being on it and the headaches that I got, you know, I thought well yes, it is risky taking it and I wouldn't, if there was an alternative, I wouldn't want to take, you know, I wouldn't want to take the risk."</i> (1:261-73)
Mefenamic acid of limited benefit & side effects an issue	<i>"He (GP) gave me tablets to reduce the bleeding, the Mefenamic (acid)...And I've tried all sorts with it. I've tried to reduce it completely by keeping taking them, but then I feel unwell, if I keep taking them and don't let the bleed come at all, I feel quite unwell with it...I just felt bloated and headachy and just really not well with it. It's hard to describe, I just didn't feel well with it. So then I just took it as soon as it started getting heavier...and it would reduce it."</i> (1:99-119) <i>"It drains me completely of energy, with the pain and the quantity. But the quantity I seem to be able to control by taking these tablets. Seem to reduce it. But it's coping with both that leaves me shattered for 2 days, it was 2 days that I was on it, on the Solpadine and Methenamic acid this month, and then I seemed to get over that and then I'm</i>

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Progesterone ineffective?	<p><i>just tired and you know, it has a knock on effect because it wears me out then." (1:165-73)</i></p> <p><i>"And that's very, trying to time it (the Mefenamic acid) isn't very good, I've got to guess because my period never seems to be so predictable, you know, that I can say well this day I definitely need to take this tablet, because it might be very low to start with, for a few days, and then blast off, you know. And that's a bit inconvenient but it does work and enable me to go out. And I did try one month without taking it, and it was just a nightmare. I had to take it to control it." (1:280-91)</i></p> <p><i>"But I had to take Solpadine and Mefenamic acid to cope with the pain. And that has just got worse, the pain has just got worse, so that now I can't do anything that day. So then he just said lets try Progesterone...and I suppose you wouldn't expect to see a difference, but I was the worst I've ever been" (1:124-34)</i></p>
<p>Using acupuncture – motives</p> <p>Drug therapy ineffective</p> <p>GP suggested trial participation</p> <p>Local acupuncture clinic</p> <p>Treatment to date ineffective –</p> <p>acupuncture seems a credible intervention alongside conventional medicine</p>	<p>At last appointment with GP reported symptoms were worsening. GP prescribed new drug-therapy (Progesterone) and suggested referral to ACUMEN. Time commitment a key factor in deciding whether or not to participate in the trial. A key motivating factor was a local clinic that would make attending for acupuncture possible. Key motive for joining the study was to find an effective treatment. Had not heard of acupuncture in this role, but liked the idea of a non-drug therapy that would rebalance her body.</p> <p><i>"I went to say the Mefenamic acid just wasn't working, wasn't you know, ideal and it was actually getting worse, the pain and everything. And I went to discuss it with him, and he (GP) said, "well there is a study going on about acupuncture, would you like to try it?" Well, I'd never heard of it before being used for periods, and I asked him how much time it was likely to take up, and he felt it was quite a chunk, so I had a quick look through it, and decided to go away and think about it, because I didn't know how it would fit in with the children and [husband] is away a lot as well, and I was thinking, "oh, I don't know". But then I found out I could go and do it at (local street name) and it would only be an hour a week, which I could probably fit in with [daughter's] Play Group. I felt, "oh well, that's possible, and I really ought to make the effort, because if it works it would be wonderful." (1:354-72)</i></p> <p><i>"(Ideally, acupuncture) would get rid of the pain and get rid of the heavy bleeding. That would be fine, if it got rid of all that. I don't know if it would get rid of the other complications that I have, I think that that still needs to be chased with the doctor, which I am doing, to see if there is scar tissue or whatever that's causing severe, other severe pain. But because I've always had pain with periods, I think there are sort of two things going on there. So if acupuncture could get rid of, or reduce, the pain and the bleeding, that would be wonderful. ((Laughs)) (1:304-13)</i></p> <p><i>"I'm really desperate to get it sorted, and if it (acupuncture) works it would be great, because it's not taking tablets. If it rebalances your body, then that's what it all needs. Perhaps having [daughter] did screw everything, and it does need to come back into line. And if there's just a chance that it would." (1:376-80)</i></p>
<p>Using acupuncture – expectations</p> <p>Ineffective for symptoms arising</p>	<p>Expected to need both acupuncture and conventional medicine to address all symptoms. Expected acupuncture to be best suited to symptoms arising from a hormonal or 'body' imbalance, and ineffective for symptoms arising from organic pathology, such as scar tissue. Expected acupuncture to involve the insertion of needles at specific sites along nerve or energy lines, and for points that may not be near the uterus to be connected to and have an affect on the uterus, in a similar way to how referred pain responds to treatment distal to the site of pain. Expected some discomfort, given husbands painful experience, and tempered by understanding acupuncture doesn't always hurt. Expected her acupuncturist to be similar to her doctor, bar their use of needles.</p> <p><i>"If it's more physical, if it's more like the scar tissue or there's something not quite right physically there, then I don't think it (acupuncture) will work. But if it is to do with hormones and the balance of your body, then I think it will work. So I'm not expecting it to, because I</i></p>

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from organic pathology	<i>suspect that it is partly physical, the problem I have. So I don't expect it to be cured completely, but I will definitely give it a try." (1:436-445)</i>
Best suited to symptoms arising from a hormonal or 'body' imbalance	<i>"(Ideally, acupuncture) would get rid of the pain and get rid of the heavy bleeding. That would be fine, if it got rid of all that. I don't know if it would get rid of the other complications that I have, I think that that still needs to be chased with the doctor, which I am doing, to see if there is scar tissue or whatever that's causing severe, other severe pain. But because I've always had pain with periods, I think there are sort of two things going on there. So if acupuncture could get rid of, or reduce, the pain and the bleeding, that would be wonderful. ((Laughs)) (1:304-13)</i>
Involves insertion of needles at specific sites along nerve or energy lines	<i>"Well I presume that they put the needles in at the nerve lines. Nerve lines or energy lines? Well I don't know, energy lines or, and that then feeds into other parts of the body. But I always presume its like referred pain, and if you've got a pain in your shoulder it hurts, it can hurt because you've got something wrong with a disc or something. You know, it's referred, so I presume it works a bit like that. If you put something in it will help somewhere else. Any more than that I don't know, apart from sticking a needle in and you and your having to sit there!" ((Laughs)) (1:406-415)</i>
Similar to treatment of referred pain	
Some discomfort	<i>"[Husband] had acupuncture for a bad shoulder and he said it killed, it really hurt him ((laughs)). He said it was really sore, not particularly at the time, but afterwards it was very sore. And he was saying, "oh you know it will hurt!" But I know that it doesn't always hurt, it depends on where it is and how it's done! ((Laughs)) So I don't know, but I presume there will be some discomfort." (1:388-97)</i>
Acupuncturist similar to doctor	<i>"I presume s/he (acupuncturist) will just be a bit like my doctor, except s/he will just come up and stick a pin in me, or whatever!" ((Laughs)) (1:431-3)</i>

Appendix 44

Theme Memo	CASE Chart for descriptive analysis – Julia (page 1 of 5) A 38-year old woman, married with 2 children aged 7-years and over.
Menstrual history and experiences	Painful periods at menarche addressed by OCP from 16 years of age. Discontinued OCP after birth of second child 6 years ago, due to concerns about long-term usage. Periods have since been very heavy and painful, with sudden flooding and passing large clots. Also experiences noticeable bloating, tiredness and poor concentration, with pain at ovulation. Showers twice daily during menses, avoids outings and needs to sleep in the day. Not knowing why a natural process is feeling like an illness is causing anxiety.
OCP at 16 years for dysmenorrhea	<p><i>So as a young girl I remember, and I know, well I'm not quite sure when I started my periods, it wasn't a sort of a key issue for me. I don't know, but what was an issue was when I did start I used to get very very painful periods. And I remember one time in particular that. ((Ehm)) I remember being on the landing at home, and I was calling my mum, and it was so painful I actually fainted. That was that one time. I don't remember the, I don't remember anything about the bleeding. I don't remember it being particularly heavy. (1:14-23)</i></p> <p><i>"So, I think that was just at the start, maybe a few periods. Just you know, that were painful. Then I was put on the contraceptive pill at about sixteen...It was for a combination of two things really ((laughs)), having a boyfriend and it was, my mother thought it would help with the pain." (1:24-9)</i></p> <p><i>"I can't remember what age it was I stopped taking the pill, but I was okay, I mean my periods were okay while I was on the pill. And then I got, I got to a stage where I thought, "oh no, I shouldn't be taking these", because I'd been taking them for I don't know how many years...Yes I think at the time there was a worry. I'd probably read that if you've been taking the pill for ten years, now is the time to stop, because you know. I remember my friends at the time saying they were going to stop taking the pill, you know, because of getting to a certain age, and we've been taking it for so long, and it's not good so we stopped...I don't know whether there was something in the news at the time. I smoke as well you see, so that was a big no no, smoking and taking the pill. Yes, so I decided to stop taking it. But my periods really had been fine while I was on it." (1:266-84)</i></p>
Genetics a factor?	<i>"I've spoken about having problems again, and she said you must get it sorted out, go and ask the doctor if you can have your hormone levels checked, and see if you're producing too much of oestrogen or too much progesterone, or whatever. I don't know, I mean I don't know the medical ins and outs. So, because she said she'd had problems with endometriosis...(and) she thinks there might be some sort of connection with the way she was and the way I am." (1:37-47)</i>
Long history of gynaecological problems	<p><u>Ovarian cyst, abnormal smear - (1:47-70)</u></p> <p><i>"So you see, it's like a catalogue of, you know, and whether they're all, you know, they're connected or not I don't know, but it's all pretty much the same to me because it's all causing me problems down there." (1:67-70)</i></p>
Increasingly heavy painful periods with sudden flooding and passing large clots since birth of 2 nd child 6 years ago and discontinuing the OCP	<i>"Then I became pregnant with my daughter. Fine, no complications or anything there. Periods all seemed sort of okay after my daughter. No, as I say, it was after my second pregnancy that I just felt it kind of started going downhill really. Although, I mean no woman likes, likes to have a period do they? You know. I remember saying when I was pregnant the only nice thing about being pregnant is not having a period. (Laughs!) And another nice thing about pregnancy is it's followed by breastfeeding and you don't get periods then either! ((Laughs)) So a good reason to keep on getting pregnant really! Yes, so that's, yes. But really since [son] was born six years ago, I've not been very good at all." (1:72-87)</i>
Heavy blood loss has less of an impact upon quality	<i>"I can cope with the heavy blood loss because I know that once I've got past that stage I'm going to feel better. It's the, it's the bloating, it's the lack of concentration, the feeling of, the feeling of not feeling normal, not feeling myself, that's, that's the worst part about it."</i>

of life than the associated symptoms	<p>Yes, definitely. It's just awful." (1:133-7)</p> <p>"Energy levels are low. And, you see before-hand yes, energy levels can be low and you don't feel like doing anything. Come on my period, blood loss, yes, and that can make me, it's the sort of, it's the mental and the physical. Previous to bleeding I feel it's all up here in my head and I feel urgh! And that's apart from the bloatedness, but it's the head feeling that's worse. And then I have the heavy bleeding, but I know, I know I can deal with that. I know I've got to pad up well, and I've got to you know, wear a skirt, and take a couple of baths, or showers, a day. You know, and just, you know...you feel dirty don't you when you're ((hand movements to indicate flooding)), and yes pad up well...you just take precautions. And you know, I can cope with that in a way because you can put things in place to deal with it." (1:171-87)</p>
Needs to sleep during menses	<p>"Apart from being so tired you don't feel like doing anything, I mean I can't go swimming or anything like that. And I have to be careful if I go out, where I'm going. ((Laughs)) I mean I can go out, except in summertime when you don't wear such heavy clothing and if you do have an accident. But I mean I'm usually quite on the ball with it, and I can feel as well, I can feel the loss. Because it comes out in, I mean not to be too graphic. It's like big lumps of liver. So you can feel yourself passing them, so you know right, I'll go to the toilet. And, and so I sort of do it that way. But then I can think right, I'll stay at home today, you know, have a days rest, or may be I have to go to bed as well." (1:213-30)</p> <p>"Well taking a Paracetamol and going to bed (helps), yes great, lovely. But then I feel like a, I feel like some sort of depressive, I think, "oh God!" Mind you I lived in Spain for a few years, and I did enjoy a siesta of an afternoon, so ((laughs)) I can sort of, you know, make an excuse that, you know, I'm just having my siesta, but you know, I do need to. And hot water bottles. Yes, Paracetamol, hot water bottle, and bed. Great. Yes, and wake up feeling a bit better." (1:339-46)</p> <p>"I'm hoping this month is not going to be as bad as last month as usually I get a bit of respite. If I get one bad period then usually the next one's not so bad, and it can go a bit like that." (1:204-6)</p>
A lot of time lost because of feeling unwell with menses	<p>"And you feel then that there's not much time within a month where you do actually feel good, and feel yourself. And, whether that's actually true or not, I mean, I know I should, you see it's something as well I try to push aside and forget about, and I know I should perhaps write a diary, I should write a diary of how you know, how it's all going, how I feel, so I can sort of look and compare, and you know, make comparisons and things, but I do start jotting things down and then I forget, or when I feel okay I think that's alright, I won't bother with that, and it'll go in the bin. ((Laughs!)) You know, so. No I must discipline myself to do something like that. But then again you don't want to be, I don't know, I don't want to make too much of a big thing of it for myself sometimes, because it's, you know, it's bad enough. I don't know, work on that one." (1:140-54)</p> <p>"But it's such a waste of time as well. You think, "crickey", you know, "if I'm losing so many days in each month, look at all this time that's been, that's been wasted. And I could have done this that and the other." You know? So when I do feel better I'm like, "ooh!" I start rushing round trying to catch up and do the things that I'm meant to have done, you know, when I wasn't feeling so good. Oh, it is a terrible waste of time." (1:348-54)</p> <p>"I'm like Jackal and Hyde. ((Laughs)) Yes, it's like two different people. It's crazy, yes." (1:356-7)</p>
Unsure how would cope with paid employment	<p>"I don't know how I would cope as well (with paid employment). Sort of, because if you do get days like that it's not nice. And it's okay if you're at home, but if you have to go out and do a job, then it's not nice. I don't know. I've never had to do it, touch wood ((touches table)), so I don't know." (1:236-9)</p>
Heavy periods	<p>"But then again, I can feel, I do get, I mean last month I did get quite run down, and that</p>

negatively affect general health	<i>affects well, all sorts of things. Apart from, I mean I know it sounds funny, but it affects my teeth. And, I went to the dentist. I get, well I get, if I get run down my teeth become affected and my teeth are sort of quite vulnerable. This time I got ulcers in my mouth. And I got so run down I went and got a course of antibiotics from the doctor. But previous to that the doctor had said I'd had a virus, but I think it was just a combination of things, and whether it was a virus that made me have a particularly bad period, I don't know. But I went to the dentist and he said to me, you know, "have you been run down?" And I said, "yes I have". And he knows me well, "this is why you're having problems with your teeth again". (1:189-202)</i>
Concerned pain at ovulation is instead a sign of something more serious	<i>"I'm very ignorant really about the menstrual cycle...I used to have a brilliant book." (1: 92-98)</i> <i>"So yes, I'm quite ignorant about the cycle...I mean I've been having a pain here [RHS lower abdomen] the past few days, I'm sure, I mean it must be, I mean I'm in the middle of my cycle so I must be ovulating. And I'm getting pain. And I said to my husband, "oh, I've got this pain again", and he said, "oh, what do you think it is?" And I said, "look we've been here before, you know what it is." Because he keeps going, "oh, it's not appendicitis is it?" ((Laughs)) "No it's because I'm ovulating." But that's worrying because it's there [RHS lower abdomen], and you think, it is isn't it? And you think it must be because I've had it before." (1:98-11)</i>
Not knowing why bleed is so heavy is causing anxiety	<i>"Well my concern is not knowing why. Now I've come to realise it doesn't have to be like this, or people have said to me, "you don't have to, it doesn't have to be like this", or my mum said "surely someone can do something to help you?" It's the not knowing why it's so heavy. That's, that's, you know. I mean sometimes ignorance is bliss, but not in this case, it's why? Why am I suffering like this? I want to know the reasons, and I want, I want a cure. ((Laughs)) Or I want something that's going to, you know, I mean I talk about it like it's an illness, which is, you know, but it does feel like that sometimes, at certain times of the month." (1:244-53)</i> <i>"My mum said I must go and have my hormone levels checked, because she's sure there's something not quite right there. She thinks I'm producing too much or not enough of something." (1:115-7)</i>
Experience of treatments for menorrhagia	<i>Over the past 6 years, has received unsuccessful treatment for pain, heavy bleeding and bloating. Has mainly used over-the-counter painkillers and vitamins. Prompted to consult GP again by ACUMEN poster in surgery waiting room. Pleased with GP empathy and prescription for tranexamic acid. Sympathetic reception raised interest in returning to enquire about hormone tests.</i>
Unsuccessful treatment for pain, heavy bleeding and bloating over past 6 years	<i>"And it's sort of what to do. And I've not really gone and complained to the doctor about it. I've been occasionally when things have been bad, and I've said, you know ((hand signal to indicate flooding)), or I've been with pains." (1:89-92)</i> <i>"(The pain) it's because I'm ovulating. But that's worrying because it's there [RHS lower abdomen], and you think, it is isn't it? And you think it must be because I've had it before. So I've been to the doctor about that in the past, and I've been for scans. And then I've occasionally, I've once been on water tablets because of the bloating. And then nothing else really, up until recently, the tablets to reduce the bleeding. And that's it really." (1:108-14)</i> <i>"I mean most of the time I haven't bothered because I've thought well this is just how it is. But lately I've thought no! ((Laughs)) Talking to people it's like, "no, you shouldn't be, you know, you shouldn't be feeling like that, and you shouldn't be swelling." I mean I've told you haven't I that two people in one-day thought I was pregnant? (1:89; 119-122)</i>
Over-counter painkillers and	<i>"Just my own sort of vitamins and Paracetamol, whatever, Ibuprofen." (1:291-2)</i>

<p>vitamins</p> <p>Prompted to consult GP by ACUMEN poster and pleased with GP empathy and prescription for tranexamic acid</p> <p>Interested in having hormone levels checked</p>	<p><i>"Well I went to see doctor about, what did I go to see [doctor] about? Oh it was about not feeling great and what have you, and I'd seen your poster in the surgery and you know, she'd given me the prescription for the heavy blood loss, and I'd said, you know, "look I've seen the poster asking about the study." And [doctor] said, "oh, great well I'll fax your details through and hopeful you'll hear something". So that was that. But as I say, I have coped with it, I've accepted it for so long and then, but you see I saw your poster there previous to that as well. But that time at the doctor's surgery was great because I felt as if somebody had actually listened to what I was saying." (1:298-304)</i></p> <p><i>"I know I'm not very good at, I don't really sort of explain myself, or tell people. I remember my mum saying, "you must tell people, you must tell people how you feel!" ((Laughs)) And I'm not very good at doing that...So I put a brave face on and that, you know, and I don't say anything, and yes, my poor husband has to put up with it." (1:312-9)</i></p> <p><i>"I actually meant to go back to ask her to perhaps go into more detail. Well, to go into detail. We haven't really touched the surface really! ((Laughs)) And like my mum said, you know, I could may be ask if I could have my hormone levels checked and see what's you know, going on there." (1:330-4)</i></p>
<p>Using acupuncture – motives</p> <p>ACUMEN poster in GP surgery led to trial participation</p> <p>Wanted explanation and effective treatment for symptoms</p> <p>Concerned about side effects of drug therapy</p> <p>Liked idea of natural, low tech intervention</p>	<p>Enquired about ACUMEN in response to surgery poster. Key motive for joining study was to find an explanation and effective treatment for symptoms, therefore open to GP referral to a study that might involve the option of acupuncture. Wish to use acupuncture closely linked to an interest in CAM and concerns about side effects from drug therapy. Liked the idea of using a natural or low-tech intervention.</p> <p><i>"Well I went to see doctor about, what did I go to see [doctor] about? Oh it was about not feeling great and what have you, and I'd seen your poster in the surgery and you know, she'd given me the prescription for the heavy blood loss, and I'd said, you know, "look I've seen the poster asking about the study." And [doctor] said, "oh, great well I'll fax your details through and hopeful you'll hear something". So that was that. But as I say, I have coped with it, I've accepted it for so long and then, but you see I saw your poster there previous to that as well. But that time at the doctor's surgery was great because I felt as if somebody had actually listened to what I was saying." (1:298-304)</i></p> <p><i>"I mean sometimes I think, "God what have I come to! Maybe it's not worth it, maybe it's just me, may be I'm just potty!" ((Laughs)) You know. And then you think, "oh God, if somebody", I was thinking this morning, "there must be somebody in the world who could just come along and say, "right Julia, I know why this is happening and this is why you're feeling like this." If somebody could just come and say that, oh that would be great, yes! But I haven't found anyone! ((Laughs)) Oh dear, this all sounds very dramatic." (1:157-66)</i></p> <p><i>"I would just like to, I suppose like it, like it was when I was taking the pill, when I sometimes wouldn't even realise I was about to come on my period, which was like, great! You know, have my period and nothing else is different. That's the only, that's you know, a little bit of blood loss, fine, you know, hopefully over in a few days time, and that's it... (My ideal treatment would be like) oh, a magic wand I think. Yes a magic wand." (1:361-372)</i></p> <p><i>"I've been interested in the past in complementary medicine and alternative. And although I haven't tried, well I've not really tried anything, I suppose in the way of conventional medicine because I've been like, well I suppose the pill is conventional isn't it? And I, you know, I had to stop taking that, and it does, I think my body does get abused with it, and I do have a fear of taking, taking tablets. So anything, anything that's away from that. I mean I haven't mentioned it, I might have put it on the questionnaire, but I used to go and have a massage, an aromatherapy massage. I used to go sort of once a month, which I found that helped...Yes, so that's why. It's not a tablet, it is a hands on thing." (1:376-402)</i></p> <p><i>"And I know a couple of people who've had acupuncture who firmly believe it has helped them, so I'm hoping that, yes, it will help me." (1:405-6)</i></p>

Using acupuncture – expectations	Held a positive outlook and thought acupuncture might help, but did not have high expectations. Expected acupuncture to involve the insertion of needles at specific sites. In a similar way to reflexology, expected acupuncture points that may not be near the uterus to be connected to and have an affect on the uterus. Expected treatment to involve relaxing with the needles in for a period of time, and thought the acu-points might be related to nerve endings.
Positive outlook, but did not have high expectations	<i>"Yes, just a positive person I guess, but yes I do (think acupuncture might help)." (1:421)</i> <i>"I'm not expecting anything at the moment...Oh yes, a positive approach but not, but yes, if it does something then great, but if it doesn't then, you know, at least I've tried it. But no I don't think I can go in with high expectations, it wouldn't be fair on me." (1:446-9)</i>
Involves insertion of needles at specific sites that may not be near uterus	<i>"Well I was thinking actually, I thought, "where will they put the needles? Will they put them into my tummy? Or will they put them somewhere completely different like into my ears or?" I expect I'll either be, depending where the needles go, either sitting or lying, and quite relaxed, and have some needles strategically placed, and maybe be left for whatever, a period of time, and then remove them and that's it. So, yes, I'll find out on Wednesday if I'm right or not! ((Laughs)) (1:409-15)</i>
Involves relaxing with needles in	
Acu-points related to nerve endings?	<i>"I think the needles are strategically placed. I don't know if they're placed at nerve endings or, so that's about as much as I know really. Yes, so I mean I'd presume they'd be ((holds and looks at abdomen)), but then there's so many different connections in the body isn't there?...I mean it's like reflexology isn't it? They work on the feet and you know, the big toe relating to the head? I mean that's a long way from the head, but!" ((Laughs)) (1:423-37)</i>

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THEME CHART: A safe, natural alternative to drugs and surgery (page 1 of 3) Acupuncture for Menorrhagia Qualitative Study: Exploring the meaning of treatment acceptability

	"It's more natural isn't it"	Other
Linda	<p>I would prefer to go somewhere like that (acupuncture clinic) than to the doctors, if it was like there, you know, because I think it's more natural isn't it? It's more, I mean you're not pumping yourself with loads of drugs and what have you, you know? But I think like, you know, I'd prefer to do that, something that's more natural, that's in line with your body than go and get loads of drugs. (2: 170-9)</p> <p>I'm thinking about taking cod liver oil by the bottle! ((laughs))...Well, I do take it, when I can remember. But I'm not very good at taking pills. To be honest, I hate taking them. So its like, sometimes I think its like more of a, "oh gosh! I've forgotten my pill, ah!" If I do remember when I'm, say when I'm in at breakfast time then I will take them, but if I have forgotten them, I've forgotten them, so. (3:109-115)</p>	
Sarah	<p>I would much prefer a treatment like that than taking a tablet that I can't see, I can't see what's happening with a tablet once it's in my body, you know what I mean? (2:130-2)</p> <p>It's always pills that they (GPs) give, which I'm not a big fan of, you know, they never give any advice, well they haven't to me, I don't know if they do to anyone else, they don't ever give any advice about calming down your life and eat warm food and have a break. Doctor's would not give you that advice, whereas [acupuncturist] did. (2:264-8)</p> <p>...my sister's going through menopause, and because in our family we can't have, is it HRT?, because you know, I've got a problem with my blood and certain drugs and so has she, so she's having acupuncture for menopause. (2:478-81)</p> <p>Plus the fact it's very good for you, it's very relaxing and puts you in touch with your own body, so it's got to be better than taking a pill hasn't it? (2:488-90)</p> <p>The doctors aren't doing anything because the tablets they could prescribe me I couldn't take because of my blood, and so what I got from the doctor's was a, "it will stop when it will stop", and that's why I never really went back basically. (2:493-5)</p> <p>But I would travel 3 hours to go there (acupuncture clinic) rather than go to the bottom of my street to get a pill that doesn't really help, what's the point? (2:615-6)</p> <p>If you go to the doctor for a period problem, whether it's heavy or whatever, they're going to give you a pill that stops the heavy bleeding, and surely, isn't it better to go somewhere for acupuncture that does it naturally, so you're not putting a pill into your body anyway? Some people don't mind that, but it does it naturally it's not about giving you a pill to suppress the bleeding, which you don't know what else it's doing. I mean it's thickening your blood. And I mean if you've got a problem, I mean they could have a problem like me that they don't know about, that's not been detected, that thickens their blood and causes a clot, right. These are the danger zones of just being given pills all the time. (2:626-35)</p> <p>I could have gone round to the doctor's, and say I could have taken a pill and they'd given me that pill and they'd stopped me bleeding 3 months ago, right, I'd took the pill, it stopped me bleeding, I would have still felt completely washed out, because I'd been bleeding for 3 months, they'd have just said take some iron, it would have taken me ages to build back up what I'd lost - if they'd have given me any iron tablets, so they'd just have given you a pill and left you, they would have, they'd have given me a pill to stop me bleeding and said, "well there you are, that's what you asked for," and I would have still felt, I don't think I'd have got, it would have taken me a lot longer to get where I am now I think, in terms of a regular cycle, if, I mean I don't know if I would have had a regular cycle, because it only stops you bleeding, it doesn't give you a regular cycle, they told me that. So you know, it could have stopped me bleeding, but I could have gone back to irregular periods. You know, so they would have just helped one thing, and that's the difference between acupuncture and doctor's I think, it treats the whole problem, the whole thing that causes it, stops it happening again, and treats you as a whole. (2:659-73)</p> <p>I know that if I'd gone to the doctor's and I could have taken this pill, I'd have stopped bleeding and I could be sat here maybe still having irregular periods, still really not knowing if I was ovulating or not, and also still probably trying to get my energy levels up. You know, I'd have had no nutrition advice, I'd have still been tired, and maybe my hormones, because they wouldn't have balanced my hormones,</p>	

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	"It's more natural isn't it"	Other
	<p>unless I'd have just kept badgering and badgering them and I'd got some hormone tests. But then what would they do? They'd give you a pill to balance your hormones! ((Laughs)) (2:673-80)</p> <p>Oh yes, catch the problem early on. But then it's easy for me to say because you know, 6 months ago I should have done that and I didn't. Or you know, 8 months ago, 9 months ago when it first started for me. Someone should have said to me, "look, go and get help." But then I mean I did try, I did go to the doctors, you know, 4 times in 3 weeks. But because you get no feedback, or they don't think it's a problem, or they're not going to help, you just think, "oh well, it must be me". And all the time it's escalating, but there isn't anyone there to help, really. I think that's frightening. So if a friend of mine, or family, if that happened to them and they went to the doctors, I wouldn't say do this or do that, I'd let them do what they wanted to do first, but certainly if the doctors didn't help them, as they didn't with me, I'd say try acupuncture, try it, it's not going to make you feel worse at least, it'll either make you feel better or make you feel the same, so it's worth a try. And I have actually, because both my sister and my niece are now going to acupuncture now. Because my sister's going through menopause and she can't have HRT because of our family history, I can't have HRT, and she was going through quite a bad time, but again you don't recognise it yourself, and it was only after we got together after 4 or 5 months it was, "enough's enough, go and get some help". And you know, I said try acupuncture, just try it, and if you don't like it don't bother again. And she's doing that now and she's a different girl, well lady, you know, she's back to normal, she's coping with it. So it's nice that there is alternative medicine out there, because, you know, doctor's don't suit everybody, normal medicine's don't suit everybody. (3:256-76)</p> <p>It's only when your poorly that you realise they can't offer an alternative, there isn't an alternative in their eyes. You can't have HRT, so there's nothing they can do, you can't have a tablet to stop you bleeding, which was my problem, and then it's well it'll stop on it's own. And that was the advice I got from them, "it'll stop, it'll stop". That's all they kept saying to me, you know, and that's not enough. It's not enough. It is frightening when you're that heavy. It's very depleting for your energies and on your body, and I thought a doctor would have understood that more than anybody. And I think that's what has knocked my faith more than anything really in the GPs... "You can't have this tablet." "So is there anything else?" "No." That was the attitude I met, and I tried 3 different doctors, so it wasn't as if I kept going back to the same doctor. I tried 3 different doctors in the same practice, and then that's when you start doubting yourself, which I did really, I thought, "maybe it's not a problem and I am just a bit paranoid or whatever," and then you speak to someone else and they say, "well no you shouldn't be bleeding for 3 months, they should be able to do something, when are they going to do something?" You know, "are they going to leave you for 6 months, for 8 months?" You know, by which time your anaemic and, you know, there was no advice either. They didn't say to me, "oh, you'd better watch your iron intake", or "take these iron tablets, because we can't do anything and you might get anaemic". There just wasn't anything. No tests, no blood tests, no hormone tests. Nothing. And I think an experience like that does put you off, and put you off for a long time from your GP. (3:281-303)</p> <p>I'm not a pill-popper anyway really. I mean I can't anyway, but even if I could, it's not something I'd prefer to do. I'd rather have something that was natural. And I think, well acupuncture can't hurt you, so why not give it a go? You know, the worst that's going to happen is that you don't feel better, whereas if you take tablets, if you go to the doctor's and take a course of antibiotics, say, yes you might feel better because it's gotten rid of what you'd gone for, but 2 weeks later you're coming down with another illness because the antibiotics have stripped away at your immune system, which it does, it leaves you vulnerable, so you pick up something else, you know, it's an ongoing cycle, and that's just antibiotics. (2:343-51)</p>	
Ann	<p>I've stopped taking the HRT, the "Prempac C" that I was on. I actually didn't take any advice from nobody on that, I just stopped it because I was forgetting to take them. And I don't like taking tablets as I've said before, in case I have side effects, with having 3 children and a disabled husband. So I thought, well I've missed so many that there's no point starting another packet I might as well forget these, I'm having the acupuncture, I'll see how I go with that, I might as well forget the tablets. It's one thing less to remember and no side effects, so I've given up the tablets. (2:387-97)</p> <p>I think my body actually, as I say, with missing so many, not taking them as I should do, my system was only sort of half and half, it was only sort of half doing the job. But, as I say, I thought to myself, "well I'm wasting National Health money, a prescription, getting it and leaving it in the drawer, worrying about the side-effects, forgetting to take them because I was holding everybody else up", so it's one thing</p>	

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	"It's more natural isn't it"	Other
	<p>less. (2:401-6)</p> <p>I think, "well it's not tablets." (3:32)</p> <p>As I've said before I don't like taking tablets and I forget to take them, and ((Laughs)) it's like my hormone replacement tablets, I was forgetting more than I was taking, and I thought, "well I'm on acupuncture now", so I, they're in the cupboard, I don't have them anymore. (3:358-63)</p> <p>(The paracetamol) it was mainly for the migraine, although having said that, paracetamol don't often touch me, but that is the only thing that I really take, because I'm frightened of being poorly or having side effects from tablets...It's just, you know, with having [husband] like he is, I just daren't take anything in case I'm not well, because how am I going to cope with him if I'm not well? (3:367-73)</p> <p>I wouldn't be able to have anything like an operation at this moment in time. And tablets are no good, as I say they're out of the question. No acupuncture would definitely be my first choice. (3:388-90)</p>	
Julia	<p>I do, well I said to you in the beginning, I do feel there is, there really is something to alternative therapies. And it's just so much pleasanter than going to the doctors and well, a lot of the time you think why do I bother going to the doctor? You know, what are they going to do? But then you have to, you get to the point where you think oh well, I've got no alternative, I'll have to go. (2:120-4)</p> <p>And it's also like you've chosen, you've been given a choice, whereas with doctors you aren't given a choice. It's basically you have this or you do this, and that's it I think. Don't you think? In a way I've chose to do the acupuncture, well you've given me the opportunity, but I've chosen to do this as well. You don't get a choice like that at the GP. It's like you either take this tablet or you have this treatment. That's it...It's about feeling in control, yes. (2: 128-40)</p> <p>It's not invasive in the respect that you're not having well yes, an operation, which is something that is absolutely major, major. You don't have to take chemicals. You don't have to go to a smelly, stuffy doctors! ((Laughs)) (3:246-8)</p> <p>Well I think as much of these things you can avoid the better really, but I know were exposed to things all the time anyway, but it's whether you intentionally take it. But obviously if you try to keep things to a minimum, you know, that's much better isn't it? (2:272-5)</p> <p>And it's been good, so thank you very much for letting me take part in it, because I remember it was a very big thing as well when I'd gone to Dr [name], I don't know, it was just important to me, and I'd have been really disappointed I think, if I hadn't been included in the research, because I just felt, "there's got to be something, please let me try this, let me try this please, I'm getting desperate." So yes, thank you. (3:303-8)</p>	
Clare	<p>I don't like taking lots of tablets, I don't want to have to take tablets, but this is the first month, even when I was on the pill, that I have not had to take a Solpadine. I had a Paracetamol for the pain, but that was it, and I haven't had that even when I was on the combined pill. (2:210-14)</p> <p>And hopefully, I'd like, I'd like to come off the Progesterone and for the acupuncture to rebalance my body sufficiently that my body can, you know, just keep ticking on the same. That's, ((Laughs)) that's the ideal, but whether it will happen I don't know. (2:402-8)</p>	
Lyn	<p>Well, I think (women) they'd like it because they'd feel it is maybes a way of treating their problems without having to go to surgery, which is what I like it for. (2:277-8)</p>	

THEME CHART: The acupuncture treatment process (page 1 of 15)
Acupuncture for Menorrhagia Qualitative Study: Exploring the meaning of treatment acceptability

	"Just a little pin prick"	"You feel so relaxed and you have this feeling of well-being when you come out"	"It does take time"	"Someone listening, someone understanding"	Other: Acupressure massage, Chinese herbs, moxabustion, cupping, kinesiology, BBT charts, receptionist, how does it work?, undressing/privacy, treatment focus and long term plan
Linda	And sometimes when she's put a needle in and that, she'll say to me, "now how does that feel?" And I'll say "well nothing", and she'll twang one and "ah, ooh!" ((Laughs)) And you actually feel it going right up your leg. Well you feel like a pull...and to think that that little pin is in line with something, you know, it's amazing. (2:220-32)	Well I've found it really relaxing actually. (2:19) It's very relaxing I find that hour a very relaxing time. (2:26) You know, to go there and have someone to chat to and to be able to relax and just unwind, and to have to, have to chill out, have to not do anything. For that hour you've got to just relax, and it's nice, you know. (2:386-9) You just have to stop and just chill, just unwind, and that is a really, I mean although it's annoying in a way because you think, "God, all the things you could be getting done!" ((Laughs)) But it is, you think, "well I'm here and I've got to do it, so sod everything else and just sit there and enjoy it, you know, which I do, so that's a positive thing, you know...and I've really enjoyed it. (2:398-404) It's such a relaxing thing. It's	I don't get a great deal of time for myself so its making me, forcing me to have that hour off, you know, and just put myself in somebody else's hands really. (2:22-4) Because I am always pushed for time, there are times when I've thought I could do with not going, but when I've got there I'm glad I've been. (2:322-4) Well I think people have got to realise that it's not going to happen over night. I think it's took time. I mean I didn't expect it to take as long. (2:327-33) I didn't expect it to take as long. And as I say, and I think if I was paying for it, it would just, you know I think I maybes would give up. (2: 333-7) I think now I'm only just starting to see results really. It's only just the last week I would say, you know,	S/he puts you at ease when you go in there. (2:21) But a lot of the things that she said, that she picked up on, I already knew. But s/he picked up on them anyway, you know, like she knew where I was having trouble in my joints and things like that, she could feel it, like I said, s/he could feel the cold and where I get pain and that. You know, so she knew a lot of things that I hadn't told her. (2:133-6) She's accommodating, yes. I mean, there have been times when I've not been able to make it at that time, but she's always like, been able to fit me in, you know. (2:302-4)	And I mean it's not just the acupuncture, it's just the touch and things like that as well, you know, because s/he'll do like a touch thing or something, you know. It's not a massage, it's like pressure points, things like that (kinesiology), so I find that very relaxing, really relaxing. (2:27-33) Just as I say, the acupuncture and the, she cupped me. Have you heard of that? (2:122-3) Even with like the pressure points I've found amazing as well, because like she's said she can feel something, you know, when she's touching me with the gentlest of touches ((puts hands on head)) and I could feel...it was really amazing the first time she did it because I felt this, like I felt my face was all ((holds hands out from head and blows cheeks out))...and the next time s/he did it, it didn't do that because she'd aligned it. (2:234-43)

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		<p>because you have to give yourself that time to sort of relax, and you have to stop thinking about housework and walking the dogs and everything else, and you just sort of like, it's just that time, just a lie down and just. (3:258-61)</p> <p>You just have to stop and just chill, just unwind. And that is a really, I mean although its annoying in a way because you think, “oh God, all these things you could be getting done!” ((Laughs)) But it is, you think, “well, I’m here and I’ve got to do it, so sod everything else and just sit here and enjoy it”, you know, which I do. So that’s a positive thing, you know...and I’ve really enjoyed it. (2:397- 404)</p>	<p>that I've really looked at it and thought well yes, this has happened and that has happened. I'm only just starting to see little results now, you know, after this time. So I think people have got to understand it's not going to take. (2:340-5)</p> <p>It's not like a couple of sessions. (2:348)</p> <p>No, it's not immediate. (2:353)</p> <p>I can't say there's anything I dislike about it, except for the time it takes. You know, I mean if you've got that hour to spare, you know what I mean? To take time out, to actually go, that's all right at first, but then after a while you start thinking, “oh, you could be doing this, you could be doing that.” So I mean, because it's a long thing you tend to. People have to be prepared to put that time aside each week to have that done. That's, I think that's the, and because it's a long drawn out thing, it's not an instant fix. But I think that's the only thing not to</p>		<p>I would say go for it, if you've got the resources to carry on until it's sorted. (2:345-6)</p> <p>Well only, what was it, she did tell me to do, she did advise me not to do this cream that the doctor's had given me because it's like steroids or something, and to try something else. But I didn't do it because I felt that the other method was tried and tested and I needed to get it sorted. (2:112-5)</p>

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			like because the whole experience is a very nice experience. (2:376-86)		
Sarah	<p>...the needles going in the different areas, s/he always explains why they're there and what it's going to do. (2:50-1)</p> <p>It doesn't hurt, the needles don't hurt when they go in. (2:86)</p> <p>There's just a little pinprick and then that's it. It doesn't hurt at all. But there's a funny sensation that when they go in s/he has to twist it until you get like an achy feeling. It goes to a deeper level, so s/he's in the right level, so you put the needle in, which doesn't hurt, and then they twist it, and when they twist it I can feel, and I'll say, "stop", and then that's when you get like an achey feeling, and a heaviness in my legs or in my arms, and that's quite strange... But then I thought well it must be working, because that's what I was supposed to feel, and I've got quite used to that now. (2:88-96)</p>	<p>Relaxing. It took me a while to get used to the relaxing part. (2:84)</p> <p>S/he leaves you to relax and s/he says, "clear your mind and don't think about anything." And when I first went that was very difficult, because you know, I was a bit of a schizo up there! ((Laughs)) (2:96-9)</p> <p>I was really stressed and it was very difficult to try and relax, but I made the conscious effort and, you know, now I go there and s/he walks out the door and within 2 minutes I'm asleep, it makes me go to sleep. And then afterwards I'm so relaxed, completely and utterly relaxed. And you know, I come home and I can't really do anything for an hour afterwards. (2:101-6)</p> <p><u>Plans quiet day (2:105-11)</u></p> <p>I couldn't even drive, for the first 4</p>	<p>I know it's a little bit further away for me. I mean I have to travel to the other side of town in the car, whereas my doctor's is at the bottom of my street. But I would travel 3 hours to go there rather than go to the bottom of my street to get a pill that doesn't really help, what's the point? (2: 613-16)</p>	<p>[Acupuncturist] who does my acupuncture is just a wonderful wo/man anyway. I mean, s/he can do no wrong in my eyes. (2:13-4)</p> <p>S/he tries to explain to me where the needles are going and why the needles are going in certain areas of my body. (2:214-16)</p> <p>I had complete trust from the start because s/he understood what I had, and I wasn't just someone making it up, which the doctor's can make you feel a bit, I find my doctor can make me feel like that sometimes. (2:45-9)</p> <p>I think what helped was someone understanding, someone listening for that amount of time. You get 5 minutes with a doctor if you're lucky...and I think that I trusted her/him. (2:262-8)</p> <p>S/he was so confident. S/he said, "no, you'll stop bleeding, that's</p>	<p>So I keep this temperature chart and we also note down the side effects I get through the month, the different changes in my body through the month and when they occur. And it's, I'm on about my fourth chart now, I've just started my fourth chart and we can see the pattern. So now I know when I'm going to, when I'm ovulating on the wrong side, you know, on the side that doesn't have the tube, and so obviously the egg doesn't go anywhere and I can't get pregnant. But also the periods are going to be bad that month. And so s/he puts the needles in a different area and s/he helps the pain by doing that. Because, you know, I can tell if I'm going to have a period and if it's ovulated on the right hand side by the 18th 19th day I can tell, so then we start putting the needles in the area. So the first couple of periods were quite painful on that side, and every time now it's getting less and less. And</p>

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	<p>The first session... when s/he took the needles out... I sat up and I nearly passed out. And that frightened me... And she said to me, "don't be frightened, it does relax you, but if you're body is out of sorts anyway, it's just getting everything working in rhythm." And no it doesn't worry me, because I really did trust her/him completely. (2:118-28)</p> <p>Everybody says to me, "doesn't it hurt?" And I say, "no, it doesn't", and they say, "but it must!" And I say, "it doesn't hurt at all." I mean, you know, I don't like needles. I don't even like my blood being taken, I can't even look at it, and yet can go to acupuncture and not be apprehensive at all... and it's safe, the needles are disposed of. (3:363-9)</p>	<p>sessions my husband had to drive me home. (2:115)</p> <p>Well the first session I had, when I got, after having the needles, when s/he took the needles out, and s/he said that I would feel very tired and I wasn't to do anything on the night, just to sit down and relax, because my body was tired to begin with so I was at a disadvantage compared to other people having acupuncture, because you know, I'd been bleeding for so long I was very, very run-down, very tired. (2:118-23)</p> <p>For the first few sessions my husband drove me home and I would just sit and do nothing for most of the night and go to bed early, that's how much it knocked me out. And it's got better with each session... I completely relax when I'm there, I go to sleep and I wake up and feel very relaxed. I don't feel faint or anything, I just feel really relaxed, and I come home and I try to keep that feeling for as long as possible because it's</p>		<p>fine, don't worry about it, we'll stop you bleeding and get your menstrual cycle regulated. (2:350-1)</p> <p>You know, the first thing [acupuncturist] said to me was, "this pain is going to stop. That was just because it's your first cycle," and s/he was going to make sure that pain wouldn't be like that, and it wouldn't be as heavy next time. But I was just so glad to have a normal period, for it to stop. But I completely trusted her/him, and s/he never said it's not going to work, or you might carry on bleeding. S/he had such confidence in her/his medicine that that gave me confidence, because she never once wavered, you know. (2:377-85)</p> <p>They're very good with the appointment system. They work it around when I can go... And in fact over Christmas [acupuncturist] was on holiday and s/he came in off her/his holiday so I could, you know, so he had a day there where people who had to see</p>	<p>that's by, you know, listening to your own body and monitoring your own body. (2: 68-79)</p>

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		<p>great to have that feeling in your everyday life when it's usually so stressed. (2:132-8)</p> <p>The relaxation side of it is so important when you have a heavy lifestyle, when you have a very hectic lifestyle you know, and I like that feeling. (2:232-4)</p> <p>Acupuncture does give you this wonderful feeling of relaxation, and I'd never had that before. I mean I've done sports and you have that thrill where afterwards you're "yes I feel great" and then an hour after that you can't walk and you feel really tired! ((Laughs)) You know, whereas with, acupuncture makes you feel really relaxed for probably most of the night, a bit chilled out, I couldn't really do anything even if I wanted to, that kind of feeling. And s/he said that's good because it means it's still working and it's getting the best out of your body. (2:272-6)</p>		<p>her/him on a weekly basis could go in and see her/him, I mean what doctor would do that? You know, I just think it is so different. (2:607-13)</p> <p>Also the fact that they are more sympathetic and listen to you a lot more and help with the problem on a regular basis. A doctor will listen and say, "okay we'll give you this tablet", and then that's where it ends, isn't it? (2:639-42)</p>	
Ann	She explained it all quite well really, and the first appointment was mainly a discussion. Yes,	The first one, I felt really tired after it. Really drowsy. But that seems to wear off, the tiredness. You	I mean some of the time, yes, you're thinking of what you could be doing, or what you should have	[Acupuncturist's] a very nice person, so calm, cool and collected. (2:62)	[Acupuncturist] did, s/he said that after it, you've not got to use all the energy up. Otherwise you were

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	<p>there was a little bit of treatment, but s/he explained what they were going to do, because obviously, first time I think you are a bit nervous...because you think, "oh, acupuncture needles!" which yes, I mean not always, but I mean sometimes you're a bit more sensitive than others. (2:13-24)</p> <p>Sometimes just before a period, actually just before a period I've noticed that as well, I sometimes get more sensitive if I'm due. (2:26-9)</p> <p>S/he inserts the needles and asks if they hurt, if it's a pain or just a twinge. You know sometimes you can have just a twinge as they go in...because, like, where the least flesh is you get a different sensation, or you appear to do. Whether it's because you are slightly more tense or what, I don't know, but where there's least flesh you do tend to jump more, or s/he'll say "oh, I'm sorry", you know, and there's a different feeling, whereas when s/he comes to the tummy it's not as severe.</p>	<p>don't come out feeling as tired the more you go, but you do feel relaxed. And the relaxed, the way you feel relaxed is different to the way you felt when you were tired. Are you with me? When you came out, may be the first couple of sessions, you felt really tired, "oh, I can't lift my head up, I'll have to have a sleep, I won't get anything done tonight." Not that you're supposed to! ((Laughs)) But, you know, you felt really tired and lethargic and, you know, "I'm going to sleep tonight," whereas as it progresses you just feel as if, when you're having the treatment you feel as if you're drifting, you feel so relaxed. I mean when I get on that couch, that bed, and [acupuncturist] gets the needles in and you think, "ah, this is it", you know? S/he leaves you for what, half an hour or whatever it is? And half the time I fall asleep and half the time I'm nodding. (2:31-47)</p> <p>So yes, a good rest time for me really. (2:144)</p> <p>It's better than I expected. Yes. I</p>	<p>done, or what you've got to do, but you're not supposed to, so if you can shut your eyes, you are more relaxed if you just lay there and think of England! (2:47-8)</p> <p>I mean it's quite a few hours it takes up of my time, because I go on the bus usually...from Selby to York on the bus...spend at least an hour there, and then have to come back and not always a bus there, you've to wait for the bus back, and I mean it's nearly an hour on the bus, which as I say I don't mind because it's done me good and it's got me out. (2:144-54)</p> <p><u>Provides time for self, is now part of the family routine (2:156-72)</u></p> <p>The children have got used to me going and they know that, they say to me on a Wednesday morning "Is it acupuncture today mum?" "Yes." "Right we'll see you when you get home", you know, and as soon as I get in "how many needles have you had?" "Well I don't know, I didn't count!"</p>	<p>Yes, s/he can tell if your energy levels are low. S/he can tell by your eyes if you've had a bad week. It all tells in your face as soon as s/he sees you I think. S/he takes your pulse, looks at your tongue. (2:65-9)</p> <p>If you've got a nice acupuncturist it does make a difference, because as I say, mine is cool, calm and collected. Very calm, you know, don't look as if s/he's got anything on her mind, and everybody must have something. Everybody! ((Laughs)) (2:476-9)</p> <p>I know s/he's not a doctor, but having got to know her/him over this past 6 months, I feel as if I've known her/him for years. And s/he's such a nice disposition, such a nice person, that I feel that s/he knows all my history and I could tell her/him anything and feel at ease with her/him, you know. (3:24-9)</p> <p>And I know [acupuncturist] is not there to be the doctor, but it is nice</p>	<p>defeating the object. (2: 57-60)</p> <p>[Acupuncturist] did give me some powder, Chinese powder that she said was, at the beginning, if I became heavier that I could take this. And you mix it to a paste. Well I mixed it to a paste and tried drinking it out of an eggcup and it was awful, it was really, really awful. It was just like curry powder, and I thought, what is s/he trying to do to me! ((Laughs)) The wo/man is trying to poison me! And it was really, really hot as well, and when I went the following week I said to her I can't take it [Acupuncturist], I'm sorry, I was heavier but I couldn't take it. And [acupuncturist] said you mix it, the idea is to mix it to a thicker paste take it off the spoon, but as soon as you've taken it off the spoon have some raisins in your other hand to take straight after. The juice from the raisins and the powder you see, they mix, the burn, and that would have cured it...I haven't tried it again no...It hasn't been as heavy as what it was at the beginning, so I haven't</p>	<p>Chinese herbs, moxabustion, cupping, kinesiology, BBT charts, receptionist, how does it work?, undressing/privacy, treatment focus and long term plan</p>

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	<p>But I suppose it's because there's more flesh, I think that's the reason." (2: 69-86)</p> <p>Certainly, yes, I'm glad I did it. I mean I wasn't really nervous, I was a little bit hesitant I suppose at the beginning, yes. Not as much as I thought I would be, because I'd had acupuncture on my neck. (2:430-2)</p> <p>Well I don't really think there is any bad bits really. The good bits are the way it's made me feel and what it's done for me. But actually the bad bits, even if you're frightened of needles, you don't want to think that way because it's not like having a blood test. When you, I mean you say to yourself, you might think to yourself "oh I'm frightened of needles" and you might go to the nurse for a blood test, give her your arm and say "get on with it, tell me when you've finished." It's not a bit like that, they're a lot smaller needles, and when they're inserted, if you get like a sharp scratch or, sometimes as I say, when there's not much</p>	<p>didn't think I'd feel like I do. As I say, I feel so relaxed when I come out of there, you go in with all the world on your shoulders, and I know s/he can't get rid of all your problems, but they seem so minor when you come out, because you do feel relaxed. And it's like, well you feel as if it's another day. Yes, you feel as if it's another day really, because you feel more...yes, you take it in your stride, yes. (2:185-97)</p> <p>Well I think (women) they'll like it, I mean mainly I suppose for what it does for you. If they are successful, if they go for period pains, or if they go for heavy periods, if it's successful then yes they, and to be relaxed. (2: 473-5)</p>	<p>((Laughs)) "Do you feel all tired?" "I do a bit, yes. Are you going to be good tonight?" "Yes, we'll be good." And if you say, "mum's having an early night tonight," then that's fine. (2:172-8)</p> <p>From a time point of view as well, it's better than going to your doctor's because [acupuncturist] spends more time with you. I mean they say go to your doctor's if you've got any problems, but how can you go to your doctor's because you can't have time that you might need to talk to your doctor can you? You know, appointments are maybe every 10 minutes at a doctor's surgery, whereas [acupuncturist] is there talking to you before hand, and obviously she leaves you to relax, and when she comes back if you've got any questions you can ask her. (2:371-80)</p> <p>...because like your own doctor, you've only got 10 or 15 minutes for an appointment, haven't you? And I know s/he's not a doctor, but having got to know her/him over</p>	<p>to be able to go because, as I say, I feel at home with her/him. I feel as if I've known her/him for years. And you know, she asks you what kind of a week you've had, and how things have been, and as I say, I just feel I could tell her/him anything. (3:166-71)</p>	<p>tried it again. But I think when you get heavy you would try it. You would think to yourself, I must try it. You know, it's been advised. I mean there's no point in going if you're not going to take the advice. You've gone there for help so you've got to, you've got to take what advice she gives you otherwise you're wasting your time aren't you? There's no point [acupuncturist] spending an hour on you or whatever, and, so. (2:257-84)</p> <p><u>Missed appointments when husband in hospital (3:7-11)</u></p> <p>I've had massage, yes. (3:215)</p>

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	<p>flesh you sort of feel it go in and it feels as though it's gone through a little bit of tough skin, you know, it's like a sensation that sort of goes up you leg, but it's not a pain. I wouldn't describe it as a pain at all, and I mean I don't like needles, but these are not very big needles. (2: 441-56)</p> <p>If (women) they're nervous about needles yes. They need to know that it's not like a blood test or they're very fine needles, they're very small. And I mean even if they're twiddled, if they're put in and then they're twiddled, five minutes after it's not painful....sometimes it's just like a tickle. It's not painful. No way. None of it's painful. And I mean I don't like pain. But no I wouldn't say it was painful. (2:460-9)</p>		<p>this past 6 months I feel as if I've known her/him for years. (3:21-5)</p> <p>And it's got its disadvantages, because yes, I have to travel there on public transport. But it's half a day for me. And (husband) is not here on a Wednesday because he's at the hospice, so it's half a day for me. (3:32-7)</p>		
Julia	My first treatment was absolutely fine and the needles didn't bother me, I didn't feel them going in or anything, but as it's progressed I've become more and more...I	<p>It's very comfortable and it's just a very relaxed and comfortable atmosphere. (2:14-15)</p> <p>Crickey, going once a week to</p>	<p>I think if people are going to do it, they've got, you must go, you must go once a week and stick to it throughout the treatment... You need to have consistency really.</p>	<p>You're treated so well, and it's like someone really cares about my health, you know, apart from, someone apart from me and my family, somebody else cares about</p>	<p>I know it's all been very easy. I mean it's only [street name], and I cycle up there. And reception has always been extremely helpful. (2:12-14)</p>

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	<p>don't know whether I'm just quite tense and anxious, and don't know whether it's because I know what to expect...(but) the strength of them going in now... "Oh!" I thought, "I'll do my deep breathing!" ((Laughs))...Some of the needles, they're a pricking feeling, the ones in my tummy tickle, that's okay, it's my feet where I really feel it. (2:19-36)</p> <p>It's not so pleasant now at the moment because of the needles going, because now I can feel them. But that's only when they're inserting them, I get, you know, I mean it last's a second. (2:341-5)</p> <p>And then there's the anxiety about, "Is it going to hurt, how much is it going to hurt?" Or you know, that sort of thing...It does hurt. But momentarily. It's seconds, yes. You know, if my children are going to have an injection, I'm not going to tell them it doesn't hurt, because it does, it does. But they're not even similar to injections really. It's just me, I'm quite sensitive at the moment.</p>	<p>somewhere like the acupuncture centre, which is, you know, very pleasant. It's a pleasant experience going there. (2:339-41)</p> <p>So you know, it's a seconds discomfort and then I lie there and it's lovely! ((Laughs)) And it's time-out as well, it's great! You know, that is allowing me to go and, it's saying, "yes it's okay Julia, for you to go to this place, lie down, and relax for half an hour", which is like, "yes, okay, I don't mind that!" ((Laughs)) (2:347-51)</p> <p>I mean it's like a lot of things isn't? You've got to make things happen haven't you, and you've got to make a point of, "yes, I'm going to go do whatever, and you know, I'm not going to do the ironing and I'm not going to do the hovering, I am going to sit down and read a book." But you don't, well I don't... because you always think that, well I do, I'm silly, I know, and I get told off for it, even my friends tell me off for that, you know, I've got to, you know, my priorities are not</p>	<p>(3: 283-90)</p> <p>So you know, it's a seconds discomfort and then I lie there and it's lovely! ((Laughs)) And it's time-out as well, it's great! You know, that is allowing me to go and, it's saying, "yes it's okay Julia, for you to go to this place, lie down, and relax for half an hour", which is like, "yes, okay, I don't mind that!" ((Laughs)) (2:347-51)</p>	<p>it. And that makes you feel better again. (2:116-9)</p> <p>I do have a good relationship with [acupuncturist] and s/he knows me now, and I know how she works, so it makes sense really. I mean s/he did say that I could go to the teaching clinic and see somebody else (for private treatment post ACUMEN), and it maybe a student, but I'd be more happy dealing with someone who's dealt with me before. (3:56-7)</p> <p>I've appreciated going to a, well, being cared for I suppose really. (3:138)</p> <p>[Acupuncturist] is really good, yes [acupuncturist] is great. (3:145)</p>	<p>I don't think I've really had anything explained to me at all. [Acupuncturist] sat me down and asked me some questions, and just said I'm going to do this and this. But I'm clueless really, I just don't know, I don't know. I don't know how it's worked, it worked. I mean I feel better but I don't know, is it working or is it something else? I don't know, I've no idea. (2:44-8)</p> <p>I would like to have just a very, very basic knowledge of what the needles, where they're going, and what the idea is behind actually putting the needles into wherever they're going. I don't know if they're going into the ends of nerves or what, I don't know. Some sort of basic knowledge of that and I'd also perhaps like to know, I mean I don't even know if acupuncture has worked for people who've had problems with their menstrual cycle. I'm totally, totally ignorant to it all. I just go along! ((Laughs)) (2:52-8)</p>

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	<p>(2:502-11)</p> <p><u>Accidents at home that bruised foot near acupoint (2:511-22)</u></p> <p>But gosh, there's a price to pay for everything isn't there? And it's a very small price to pay if it's working and not giving me the, the, terrible feelings I was having and that awful bleeding. You know, I mean crickey! (2:522-5)</p> <p>It does hurt, but momentarily...but gosh, there's a price to pay for everything isn't there? And it's a very small price to pay if it's working." (2:522-3)</p> <p>I said to [acupuncturist], "what makes somebody want to stick needles into somebody else? It's a really weird thing to do!" But it's like, you know, her answer was, "well, okay, but I'm doing someone some good, if the end product is beneficial, what's a little prick with the needles?" You know it's benefits far outweigh what that little needle does. (2:138-44)</p>	<p>right sometimes. I put cleaning and washing and what-have-you, before myself. (2:357-66)</p> <p>It's a nice experience. (2:271)</p> <p>I've appreciated...going to a pleasant, relaxed environment where people are very, extremely pleasant (3:138-9)</p> <p>I mean it's nice to go in and lie down and listen to classical music. (3:152-3)</p> <p>It's not sort of a real clinical environment as well. I mean it had to have it's, you know, some parts of it have to be, but yes, the non-clinical environment was nice, homely... You'd go in and smell fresh coffee, and sit on nice chairs and read nice magazines, and yes a nice carpet and pictures on the walls. And really good treatment rooms. It doesn't have that smell of disinfectant, ugh!, which is just so off-putting when you go into a hospital, God it's horrible! (3:153-62)</p>			<p>And I mean my sister said, and I actually said to [acupuncturist] on the first appointment, she said my sister said, "I often wonder what, what is it about, that drives someone to do something like that? To want to put needles into other people?" ((Laughs)) And [acupuncturist], well she just said, "well you know, that by doing it I'm doing somebody some good." So that was her answer. (2:58-65)</p> <p>She's done some heat (moxa), which is extremely pleasant. It is an absolutely wonderful feeling. (2:143-5)</p> <p>I've noticed the needles are different. Some of them are chrome and some of them, I don't know whether they've got copper on the top? So there are different metals used, and the only thing I know about that is that when I had what I thought was a little bit of arthritis in my wrist, I got a copper bracelet and used that, and it worked...perhaps attached to something, but I've thought that myself and I might be totally</p>

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	<p>I think there's lots of people that are nervous about needles and things...it's making that person realise, convincing them, that the benefits far outweigh the slight discomfort that you might have while having the treatment. And everything that goes with it, you know the nice environment and everything. I mean I used to just enjoy going. I mean it is a bit unpleasant having the needles, and I did, I was sometimes reluctant because sometimes they can catch and hit something, and it's like, "oh my goodness!" You know, the pain can be a bit, you know, occasionally. But then you know, I forgot about that because it was an overall pleasant experience really. (3: 181-95)</p> <p>I became more sensitive... (and) I used to have this strange sensation going across my foot, not while the needles were in, but...during the week I'd have this strange feeling in my foot...the treatment stopped... and I don't have it any more. It's no big deal, but I did wonder. (3:198-209)</p>	<p>I enjoyed the warming, I had like incense on my tummy, that was really, really pleasurable, really nice. (3:232-5)</p> <p>I appreciated being able to lie down. Oh it was lovely! "I have to do this, it's part of a research program, I've got to lie here! I'd not just be letting myself down, I'd be letting somebody else down if I don't do it!" ((Laughs)) Yes, I mean that was very pleasant, it was great resting listening to music. (3:238-42)</p> <p>I hope there won't be any doctor's listening to this, but I know they try to make the surgeries as pleasant as possible, but oh God! Oh I know it's difficult. There's lots of people going in and out. You know, there's kids and, but I find is so hot as well, hot and smelly. Mind you I do remember sitting in [Dr's name] surgery on [address], which was completely different because it was very old fashioned. It was like somebody's front room, and you were always there with hundreds of people. And that has</p>			<p>wrong! ((Laughs)) ...I should get a book or something and start reading up about it. (2:146-56)</p> <p>I mean, yes you do have to strip off basically, you know. I usually keep my top on, and bra and knickers, so that might be a bit off putting (to women). But then [acupuncturist] leaves you to do it, and then you cover yourself with towels, but I know it's still a bit, yes, you still feel a bit conscious, you know. But I mean it doesn't bother me, though I know it does bother other people a lot. (2:492-5)</p> <p>I enjoyed the, well if this is what you mean, I enjoyed the warming, I had like an incense on my tummy (moxa). That was really, really pleasurable, really nice. I enjoyed that, that was nice. (3:232-5)</p> <p>Well I only feel sorry that, well there was a part in the study where we had a bit of a blip and it was my fault because I just wasn't, I don't know, something happened, I can't remember what it was, and we had a bit of a blip and so my</p>

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		<p>changed, you don't have to wait so long. I used to have to wait and wait for ages. Anyway, that was a long time ago. But I don't remember that ever being hot, in fact I think that one was cold and horrible! ((Laughs)) (3:249-61)</p> <p>In terms of the relaxing, you're there and you're seen straight away, if you're not then read a magazine. Did I ever have a cup of coffee? I don't know that I did, but anyway. You were seen to straight away basically. (3: 267-9)</p>			<p>sort of regime of going once a week, I think I missed it for about ten days, and I felt awfully guilty about that and I'm sure that made a difference. But anyway, not huge you know. (3:278-83)</p>
Clare	<p>I was a bit apprehensive of it to start with, but I'm well into it now and don't bother about it. [Acupuncturist's very good and sort of takes it easy. (2:26-8)</p> <p>It was what I expected in that the pins go in, and that, the fact that the pins going in doesn't hurt, but the sensation that you get when it picks a point, it's not horrible, but I don't look forward to it, you know, finding it, it can be really jerky can't it? And have a strong reaction to</p>	<p>What I wasn't expecting was the feeling of calmness, you know, while you're having it, that nice warmth and just sort of out-of-it feeling, really nice. (2:134-6)</p> <p>So I didn't expect it to be pleasant. So I'd say there was a pleasant side. (2:134-41)</p> <p>I always feel a bit knocked out for the whole day afterwards, which I hadn't realised...it's quite nice, it's like you've been to the pub, and</p>	<p>When you go to see the doctor it's just a rush. ...The acupuncture is... "how has it changed? And lets work on how it's changed", you know, they take notice of what has happened...(they) delve into it a bit more, ask questions around it to try and get the full story...s/he seems to have more time to find out what's going on. (1:232-51)</p> <p>Just like it actually takes up time. You can't just take a tablet and get on with your day. You've got to</p>	<p>When you go to see the doctor it's just a rush. The acupuncture is "how has it changed? And lets work on how it's changed", you know, they take notice of what has happened...(they) delve into it a bit more, ask questions around it to try and get the full story...s/he seems to have more time to find out what's going on. (2: 232-51)</p> <p>[Acupuncturist] was very confident that the acupuncture would help the periods, the pain and the</p>	<p>[Acupuncturist's] plan is that the acupuncture that's concentrating on the back will lessen and then s/he can put more into the acupuncture to get the periods straight. Though s/he's still getting the, still putting something in to do that, but the balance has changed slightly, for this middle month, six weeks or something, then it will go back to concentrating more on the period and hopefully that will reduce the blood flow, that's what I'm hoping will happen. (2:383-92)</p>

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	<p>it, but then it's passed. Momentary. (2:128-34)</p> <p>I don't like that ((hands indicate sudden strong jerky sensation)) when they're put in. (2:142)</p> <p>The pins going in don't hurt at all, it's not like having an injection or anything like that. And there is definitely a good side to it, it makes you feel more, the sensation that you get is nice it's not horrible, so it's worth getting over the phobia that the pins will hurt, and going through that first tingle. It is worth it, because it's nice afterwards. (2:425-30)</p> <p>When s/he was sorting out all this stuff into the muscle, then that was sore the next couple of days, and that wasn't very pleasant...(but) it felt as though it was doing some good...I wasn't worried about it. (2:448-69)</p> <p>I can see that some people wouldn't take to it having seen my husband's reaction. So I don't know. All people must react</p>	<p>you can't quite think straight!...No it's not even that...it makes me feel relaxed and tired. So I don't arrange for anything too much after I've had it, but then I don't halt my life either, it's just that I don't arrange to be zooming around town in the afternoon. (2:432-42)</p>	<p>take time, make time to do it. (2:478-9)</p> <p>Women might be put off because it does take time to go and do it, but having said that, it's not time that is horrible, it's just that you've got to take time off in the day to do it. So it's alright for me that's not working, but if you're then fitting it in, but then it might be quite nice after you've done a days work to come and have an hour of quiet and calm, but you've got to make that time. They'd have to, I think (women) they'd find that difficult, and I think that's what most, you know, talking to people, "well, how much time is that going to take?", sort of thing, "how will I fit that in?" And if you've got other kids to look after, "well, what happens to them then?" So that's the side of it that will be difficult to do. (2: 481-500)</p> <p>(But) it is only an hour, so it's not a long time, not so long that you couldn't say to somebody "could you have the kids for an hour for me?" Or you know, can your husband do, you know, get his</p>	<p>heavy bleeding, and to try to boost my energy. And those were the three things really that were on the priority list. And that we would work from there. (2:42-50)</p> <p>I think the fact that s/he's taken it on, that s/he's got to get me better, you know, the whole system working better, that helps. (2:195-7)</p> <p>(Women) They would like it because somebody shows an interest and they listen to what you've got to say. (2:476-7)</p>	

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	<p>differently to it mustn't they? It mustn't be the same sensation. (2:545-50)</p> <p>And the needles, they shouldn't call them needles should they, because they're so fine, they shouldn't put people off. (3:497-9)</p>		own tea or whatever? (2:478-512)		
Lyn	<p>I didn't know what to expect really. It wasn't painful like I expected, quite relaxing really. (2:26-7)</p> <p>Sometimes they're in my feet, sometimes they're in my legs, sometimes they're in my stomach, wrists. I had one in my head the other week, which was a bit, "Oooh! No skin there!" (2:32-4)</p> <p>She said, "I'm going to put one in your head." And I thought ((raised eye brows)). She said, "you'll feel like it just dragging on your scalp". It didn't hurt. It was just like someone pulling your hair. So I'm always fascinated when she puts them in different places. (2:36-9)</p> <p>Last week she put 2 in just above my big toe. And s/he said, s/he warned me, s/he said that's, I'm doing the worst one first. Because</p>	<p>Quite relaxing really. When you come out, I feel quite relaxed. It's good. (2:27-8)</p> <p>The first couple of weeks when I came home I was asleep more or less straight away...s/he said you'll go home and feel tired for the first couple of weeks. But now I do wake up after the session, but I sleep a lot better. (2:183-6)</p> <p>Well I would reassure them (women) that it doesn't really hurt...and you have this feeling of well being when you come out. (3:195-6)</p>	<p>(People) they always ask me if it's painful, and things like that, and "how often do you have to go?" (2:256-8)</p> <p>The only negative thing really, is not the treatment, it's getting to York, travelling to York for it. But if it was more local. I'm lucky, my husband can arrange his work so I can have the car to go. It would be a pain if I had to get on the bus to go, because then I'd have to go straight from work to York... Well it takes, it depends as I say, half an hour but sometimes it's longer. (2:279-88)</p> <p>And probably not to expect too much too soon as well. So it wasn't like, you know, you're going to have this acupuncture and it's</p>	<p>Well I arrived and s/he gave me like an in-depth interview as well. And she explained what was going to happen, and how often I would be going, probably. (2:18-20)</p> <p>S/he's explained everything really well. And if I ask something s/he always has an answer. S/he's really good. S/he's very calming. (2:69-70)</p> <p>S/he got a true picture I think, before I started, of me...s/he knew before s/he started what I was like really. Yes, s/he's really good. (2:144-7)</p> <p>Oh no, I'm confident, I'm confident in his/her abilities. S/he knows what s/he's doing, and when s/he targets certain things it does seem to have that affect, so yes I'm very</p>	<p>Regularity of treatments, number missed (2:20-4)</p> <p>I mean I always ask questions now, because I'm amazed that each week the needles are going in different places. And I'll say why are they going there this week, you know? Because it's aiming for different parts of the month, you know regarding to your period. She's aiming for different parts, essential parts of your body. (2:28-31)</p> <p>S/he did give me a herbal powder that looked absolutely disgusting. But s/he said, "if you feel as though the flow is too much you can take this dissolved in water". And it did seem to help, but I only took it this last month, you know, just to try it and see. (3:35-40)</p>

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	<p>there's no skin there is there. And that did hurt, but it's seconds, you know, because you breathe in and breathe out, and s/he puts the needle in as you're breathing out. So by the time you've expelled your breath it's in. So it's seconds really. And they stop hurting as soon as they're in, they stop hurting. And the odd time you get a tingle. But I've never had any trouble with the needles really. (2:72-84)</p> <p>(People) they always ask me if it's painful, and things like that. (2:256)</p> <p>I would reassure them (women) that it doesn't really hurt, because that, I thought, "oh they're sticking needles in you, it must hurt." It doesn't, and you have this feeling of well being when you come out. (3:194-6)</p>		<p>going to cure you straight away. It was a slow process. So give it time. It did take the 6 months to address all the problems. I mean it's hard to keep going, you know, through something when it isn't, you know, "oh it's not working I'll give up", but I just say, "give it a chance to work." (3:213-25)</p>	<p>hopeful, I'm very confident... Yes I feel great. (2:300-6)</p>	<p>... sometimes she's aiming at like the PMT symptoms, if it's like, the week before. (2:45-6)</p> <p>S/he said that, she explained that if the cycle was lengthened, then it would regulate me, and hopefully the flow. It was all to do with the flow and it being regular and everything, you know, s/he did explain it. (2:65-7)</p> <p>S/he said hopefully the next 2 will, s/he'll be able to reduce the flow. That's what s/he's targeting. S/he was targeting trying to get me regular, and trying to cut out the pain, and the PMT, and boost my energy levels, and s/he says it's like a balancing scales, once you get all that, then you can hopefully regulate the flow. So we'll wait and see. (2:207-17)</p> <p><u>Offers to influence when period starts to fit in with holiday plans (2:308-32)</u></p>

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 Acupuncture for Menorrhagia Qualitative Study: Exploring the meaning of treatment acceptability

	Feeling better completely, as a whole	The diet thing as well, that's been really good	Other:
Linda	<p>I didn't expect them things to change. I expected just, I was hoping that just my period would get lighter. I didn't expect all the other things as well. So that's quite a good thing. So it's like the whole package, sorting me out whole body wise, you know, so it's good. (2:79-82)</p> <p>[Acupuncturist] takes that time to sort of like talk to me about other things, and the rest of my health and my well-being, and things like that. And s/he'll maybe stick an odd needle in for good luck, you know! ((Laughs)) Like I have, if I don't go to the toilet during the night, I get very bad pains down my back here and s/he pummelled me...and stuck a few needles in for water retention and what have you, and I've noticed that been better since I've been going. So you know, she's given me an all round health treatment really. (2:85-93)</p> <p>Well yes, I didn't know I was ill! I mean, it's like, you know, I tell her/him, "oh, I've got this and I've got that", and s/he says, "oh, you should see to this and see to that." And like, really, where I think it's like just ordinary aches and pains that everybody's getting, and then s/he's saying, "well, no, you know, you shouldn't be and this can be cured." You know, things that I've maybe been putting up with for all these years, you know, and there's actual things you can do about it. So I'm more aware of my aches and pains now than I ever was, I think ((laughs))! (2:184-92)</p> <p>You just think that maybe you should put up with these things, you know what I mean? But I think by going to [acupuncturist] it's made me realise that maybe you don't have to put up with these things, you know, just because I'm getting on a bit I</p>	<p>S/he's very, you know, very good on advice on how to, you know, deal with health problems and what have you, what I should be doing and shouldn't be doing. Like medications, different herbal remedies and things like that, you know, for different things, for my stomach acids, I've got acids, and different exercises, she's telling me exercises and things... To tell the truth, I haven't done them much. Well basically because the times I remember to do them is basically the times I'm getting bad acids and I can't do them, because I'm usually running around doing other things, you know. So it's getting the time to actually do it. I do do them when I can remember to do them, you know, but it's an ongoing thing this acid thing. (2:91-110)</p> <p>No not really, there's nothing really lifestyle wise I can do really, I think. (2:121-2)</p> <p>Just a more healthy lifestyle, you know. I think, because of looking at my body in a different way, and maybe's thinking, "well I shouldn't maybe's be eating that sort of thing because really it's not going to do me, my body, and good," you know, and thinking that, I don't know, just wanting to look after it a bit better. (2:253-7)</p> <p>Well just changes like I know, I knew before that I should have been making but, you know, like what I should be putting inside like, because we were talking about wheat. I mean that's another that s/he's told me about, like cutting down on my wheat intake because s/he's talking about my digestive system and the intake of wheat could be, it could have something to do with it, maybe's taking too much wheat in, because s/he's asked</p>	<p>Well she says sometimes I'm cold, and she's noticed my pulse is a lot better now than what it was, because I was very, very out of sink and that, and she says that's stabilised a lot more now. When I first went that was very out of balance, you know. (2:125-8)</p> <p>Well I think it makes you look at your body in a different way, your body is like, you know, you've got all these lines and you've got all these energy bits and bobs. And I think you don't realise all that, you know, so acupuncture sort of like makes you realise. I mean, you know, I don't know what I thought acupuncture was really. I think it was just like a, well I don't know what it was. I just knew that they stick pins in you and it's suppose to help you, or something. I thought maybe it was the end of a nerve, or something like that, but it's not just that is it? It's like energy lines. And sometimes when she's put a needle in... you actually feel it going right up your leg...and to think that that little pin is in a line with something, you know, it's amazing. (2:211-32)</p> <p>...you get more aware of how things</p>

	<p>shouldn't have all these aches and pains, so...It's made me realise I should be doing something about it...it's making me look at things, and have maybe a healthier lifestyle. (2:196-207)</p> <p>Just that I found it, I mean that I really, really found that the whole thing, I thought like, because I had visions of like, if you're going to have acupuncture that's what it would be. You were just going to have some needles, you know, pushed in you, and you know, you'd be waiting with them tingling or what have you, you know, for however long, and that would be it. But it's so different from that, and you're having them things (needles), but it's not just that, it's talking and it's finding out about yourself. It's a whole different experience than what you actually expect, I think. You know, it's, altogether it's a different experience to what you'd expect. Oh, what are the words I'm looking for? It's all about you, you know what I mean? It's all, that time is all about you and maybe your problems, or your, you know, and it's talking about what you can do to benefit yourself. So it's a different experience than you think. It's not just going there and getting jabbed, you know. It's a, it's a finding out process, it's like you're finding out maybe why? What's causing different things? And things that you didn't think were, you know, things that maybe you didn't give any significance to. You find out, well it does have a significance for certain other things, you know, because the pain that you're getting in your joint, in your elbow, might be caused by something completely different to the pain in your shoulder. Do you know what I mean? It could be caused by something else completely, you know? So it's a whole new way of looking at your-self, I think. Does that make any sense? (3: 253-77)</p> <p>It was just a lovely time to think about nobody but myself, and it was, yes. And how many times do people actually do that, you know? Actually sit there and think, you know. Especially people with families and that, you just don't have time to think</p>	<p>me about what I eat and that in a day, and I've noticed since I have done as s/he said, not cut it out but cut it down, I've noticed it has been better. And s/he's just taken an interest in what I'm eating, you know, because it could be a factor in a lot of things, you know, what you put in. (2:261-70)</p> <p>Well I know [acupuncturist] is trying to make me more assertive I think, because she's trying to tell me to sort of like, that I should be, that I should do more things for myself. So it's mental, you know, as well. (2:273-6)</p> <p>(And) I did it today, I was going to pick up the baby (grandson), but I thought, "no, I just need a little bit of time on my own", so I've done that this morning, and I actually didn't ((Ehm)) but it's hard to not do the guilt bit, because actually I was sat here and I was sorting out my bag, you see, you still have to do something. I feel I always have to do something, I can't just, just sit. So, well I put the TV on but I was feeling a bit guilty because I know there's a pile of washing upstairs. ((Laughs)) But I knew I should be having some time to myself, so I thought, "oh, but what could I do while I was doing that?", you see, so I thought, "sort out my bag while I was doing that." So I still did a little something, but yes, I'm taking it all on board, and I'm trying to lead a little bit different lifestyle wise. (2:273-96)</p> <p>And all this out of a little bit of acupuncture eh? (2: 298)</p> <p>So I am taking more wheat in again now, but I think I'm more aware of that. If I've had something, some wheat in the morning, I've tried to cut down the amount in the evening, you know. So yes, it's like there's loads of factors isn't there? There's loads of things that I'm, you know, some people tell us are good for us, and other people tell us that, well maybe it isn't that good for you, and maybe you should, you know, like some people say that, you know, wheat is good for you, bran's</p>	<p>are working inside yourself. You get an insight to things that you wouldn't necessarily have thought about before. You know, you just go along. You don't realise that may be something that you're doing would effect something else, or you know. So you do tend to maybe be a little bit more aware of what you've put inside you, or what you're actually doing to yourself, so yes, it does, it does give you awareness of your workings, and there's more to it than meets the eye sort of thing! ((Laughs)) (3:181-8)</p>
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	<p>about your own aches and pains and trying to get them sorted, and sort of looking after yourself a little bit better, you know, and worry about, well not worrying because you're getting it sorted, or your doing something, you know, because you might have a like a pain in your, you know, your head, because I kept getting a recurring pain in the back of my head, and I went in one day and so, "oh, I've got such an awful pain in my head", and [acupuncturist] saying, "oh, how long have you had that?" So you know, then you'd be discussing things which you wouldn't have, you know what I mean? You wouldn't have thought about talking to anyone about it, or, you know, but if somebody was actually concerned about you, and concerned about that pain, and how to get rid of it for you, you know. So you think, "oh, well maybe I should have thought about that and maybe, you know," and finding out that if I did something, or if I ate something differently or changed a little bit of something or, you know, then you might not get that any more, so there you go. So it was like a whole new world. (3:279-97)</p> <p>So yes it was a nice, a very nice experience. You know, I learnt a lot. (3: 300)</p>	<p>good for you, and all that, and then you find out that maybe it isn't, you know, or just a little bit, maybe. Because once-upon-a-time I would eat bran till it was coming out of my ears, you know what I mean? Things with bran in, or you know, because my digestive system wasn't very good, so I would eat that sort of thing. And then I would find out, you know, like maybe, you know like that's the wrong thing to do. I mean I'm not saying that's all through acupuncture, you know, but it makes you look into more things. You know, of what you're doing that could be wrong, you know, that you thought was right but are possibly not. (3:200-14)</p> <p>I think that, as I said before, you're finding out more about your body, and I found out more about the things that are healthier for you, you know, the things that, what was pointed out to me was that maybe it isn't so good in the amount maybe I was taking it, you know, it's like everything in moderation sort of thing, you know, just maybe cut down on the things that are not necessarily too good for you. (3:219-26)</p> <p><u>Busy lifestyle and family commitments making it difficult to create time for self. (3:236-43)</u></p> <p>...and finding out that if I did something, or if I ate something differently or changed a little bit of something or, you know, then you might not get that any more, so there you go. So it was like a whole new world. (3:294-7)</p>	
Sarah	<p>I liked the fact that the acupuncture could treat a lot of things in one go. You know, when I first went to [acupuncturist], one of the first things s/he did was explain that you couldn't do it overnight. Everything that was wrong with me wouldn't go away overnight. You know, you go to the doctor's and they give you penicillin or something and then that's it. And s/he said it doesn't work like that, because they have to go in stages, and</p>	<p>S/he also said to me that I would have to change my habits as well, with stress, because I was leading a very stressful life, having no time to sit down. I wasn't actually eating sitting down, I wasn't taking any time out. I had terrible habits really. I was stressed at work, I was stressed here [at home] and that, as s/he said, had a knock on effect in that in the end the food gave up trying to digest, because I wouldn't sit down and let it. And</p>	<p>BBT chart a very useful fertility tool (2:318-36)</p> <p>BBT chart a very useful fertility tool (2:409-14)</p> <p>BBT chart a very useful fertility tool</p>

	<p>they have to build back up the stages. So you know, by the time I'd got to her/him I was very stressed and I was very ground down. And as well as all the physical aspects of that, my digestive system was completely kuppit, and I was extremely tired, extremely stressed, verging on depression I would say, as well as all the physical side of it, you know, the pain, the fact I'd been bleeding for so long and how that makes a woman feel. You know you bleed for 5 days and that's bad enough. But to bleed for 3 months and you know, that was also awful. And s/he explained that there were 3 stages that s/he could do for me. And one was to first get my digestive system right, because I was suffering with bloatedness and I was suffering with sickness, feeling sick, not being able to eat. I would eat a meal and it would stop in my chest, and that was because of stress. So stress and digestive system and then that would then clear the way to regulate my periods, because stress can irregnulate your periods. And then the painful side of it, and the heaviness of it, and then the step after that would be to go on and make me fit for conceiving, and make sure that my periods are a proper cycle. So s/he explained that first which was great, really to be explained like that really, because I knew it wasn't going to be overnight, and for her/him to understand, you know to listen, s/he went into my history, asked me questions that doctors don't ask, you know, about how I ate, you know, what did I feel like after eating, because I didn't really know I had a digestive problem at that time, I just know that I was having this problem with the fact that it wasn't going down, the fact that I was bloated all the time, and I didn't know if that was just having an ongoing period, which you're bloated with anyway, you know, I didn't really know any of that. And s/he sat and explained all the symptoms that I had and more and why I had those, which was great, you know. (2:16-45)</p> <p>Every session that I go to we first sit down and it's, "How are you feeling this week? What's different?" And how to interpret</p>	<p>you know, s/he explained it all to me, why these things were happening to me, and you know, said that you're going to have to work with it to get the maximum out of it, you know, otherwise you're going to always be stressed and always be tired. So you know, at work I would work 8 hours without a break, without any food, or I would eat food at the desk really quickly, and it would be cold food, and it would be my main meal of the day, you know, like a sandwich or something, and you know, that's why it wasn't digesting, and that's why I got to the point where I was wanting to be sick, because it actually wouldn't get anyway past my chest area really. So you know, s/he told me to think about that. And I did, and it's made a big difference in my life, because my husband, you know, agreed with me, I mean because he couldn't get through to me. You know, my husband would say you've got to take a break at work, you've got to eat properly, don't do the diner and then stand up and do the washing-up and vacuum straight afterwards, you know. And like [acupuncturist] said have your main dinner and then I want you to sit down for half an hour afterwards, no matter what there is to do. Sit down for half an hour and then you do your jobs. I'm not saying don't do your jobs, I'm just saying sit down for half an hour and let your food get down and let your body get the energy from it. So I now, I followed, everything s/he said I followed. I did that. And s/he told me what kind of food to eat, just for a while, just to get everything back to normal. (2:138-65)</p> <p>Well s/he said I would need hot food. Food that would be easily digestible, like instead of on a lunchtime, instead of having a sandwich, which was cold and my system couldn't handle, I'd got to the point where it couldn't handle a sandwich anymore. You know, it was cold and that's why it wasn't digesting and that's why I would get bloated and I would feel sick. So s/he said lets take it easy and lets start with soup and beans and toast, which is warm bread, everything make sure that it is</p>	<p>(2:442-50)</p> <p>BBT chart a very useful fertility tool (2:454-64)</p> <p>So to me, I just think that, you know, my health was so bad, you know, that there's no way I would have kept that last pregnancy, because I just think I'd started to deteriorate by then anyway, you know. And there's no way my body would have been able to hold it. And certainly by the time I went to see [acupuncturist], you know, s/he said don't try for a baby until I get you sorted out, you know, s/he was quite adamant on that, s/he said, "no way would you sustain it." I couldn't even sustain a sandwich, never mind a pregnancy! And that was something else, even when I was feeling that low, I just thought that the answer to it all would be to get pregnant. But you know, if I would have, I would definitely have lost it again, because, you know, s/he said that your body is just depleted of everything and it needs building back up so you're at your fittest to carry it through, to actually conceive and then hold it. Because it's not the conceiving I'm finding hard it's the holding on to the child that's my problem. And if you're not healthy enough and your body's not strong enough, which it wasn't, and it must</p>
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	<p>my own body, you know, which I've never ever done. You know I just thought that a period was a period. I now know that the different side-effects I get through the month, you know it is slightly different with me because I've only got one tube, so if I ovulate on that side, then the period is completely different to when I ovulate on the normal side. If I ovulate on the right hand side where the tube is missing the pain is more and it's more swollen and bloatedness, and everything else that goes with that, and we worked that out by keeping like a diary as such, you know, side effects through the month and when I got them, and how it was just before the period and how the period was. And that coincided with recently keeping a temperature chart to see if I was ovulating, because you know with trying for a baby as well. (2:51-66)</p> <p>I mean, I thought I was just going and s/he was going to, basically to regulate my cycles and do something for my periods, you know, and stop the pain when I had the periods, obviously, stop the heaviness or stop the bleeding. And that's solely what I thought s/he would do. And so when I went and I explained everything to her/him and it was, you know, s/he listened to my lifestyle and everything else that was going on at that time, because it wasn't just about the bleeding, the bleeding had then affected every aspect of my life, my relationship, my stress levels, the fact I was so tired, the tiredness had then led to the digestive problems, but I didn't think s/he'd treat those. So, it was, it was, s/he treated it, and that's what I mean, that's what was so different about it, was that s/he's treated it all. Everything. Instead of giving me a pill, you know, and saying, "there you go", you know, "that's for your cold, that'll make you feel better", s/he's treated everything, but in little sections, you know, so s/he's chipped away and made the digestive system work properly and then stopped my bleeding, and then you regulate the period, and all the time you're working on keeping a good well-being inside. (2: 216-30)</p>	<p>warm food which is easier to digest. For your dinner, when I was here [home], to have a dinner and sit down, and lunch, to sit down for at least half an hour and get the energy from that before getting up and doing your jobs. And that I was to take a break at work and have soup. And that if for any reason I couldn't, it would be better for me not to rush eating food at a desk bent over, and just not to bother. So I did that. I changed the food I was eating, and it was really funny, because I remember saying to her/him once that I'd come home from work and I'd had nothing to eat, and I thought, "well I can't go to be on an empty stomach, what can I have that's nice on my stomach?" And I had bran flakes with cold milk and I was sick halfway through the night and I had terrible stomach cramps, and that's when s/he gave me nutrition advice. S/he said, "well it's cold milk on an empty stomach with bran flakes, which are quite hard to digest anyway, with nothing on your stomach." And I was like, "but I just thought it would be easy", you know, and so s/he sat and s/he discussed nutrition with me, and this was the very early days, on what to eat, how to eat it slowly, to sit down, never stand up, which on a lunch time, I would never sit down, I would just eat a sandwich on-the-go, and to take a break at work. So I did, and it did change within 2 weeks. (2:168-95)</p> <p>Within 4 weeks I felt completely different really. The stress levels had gone completely down, and that was, you know, partly due to the fact s/he was treating me for stress, the needles were going in my foot, which was for stress, but also I made a conscious effort in that a enough was enough and I was going to slow down my life, because the way I had been living, obviously as well as the periods, had caused this break down in my energy levels and my body basically, which just wasn't working right, and it was getting worse and worse, and I have never, I have never felt that low, I'd never felt that ill before, and so I was frightened and that's why I listened to her/him intently</p>	<p>have been a lot weaker than I thought, because my mind is strong, so you tend to think your body is, so there would have been no ((Ehm)) so I haven't been trying and am just waiting till s/he gives me the all clear. (2:505-23)</p>
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	<p>S/he's given me advice on the whole of my lifestyle to get the best out of this treatment. 100% out of this treatment. (2:269-70)</p> <p>The only thing I ever thought would affect my periods was stress, because once before when my parents died, the stress from that made me miss out on a period for 4 years, and the doctor's did say "this is stress, and it does affect your periods". I know stress could affect the period, and that if something happened you can miss a period. I knew that, but not that a hectic lifestyle would, or eating wrongly, or eating the way I was, or anything like that. No I didn't, I just didn't. I never read about it, I didn't really look into it, I just thought well, you know, sometimes stress affects your periods, and that's that. But s/he's treated the whole body, the whole problem, rather than just the periods. You know, which is good, because I don't want someone to come along and say, "there you go, there's a pill", or "you can have this treatment and your periods or not as heavy, or I've regulated them for you," when you've still got all the problems that made them be like that in the first place, because no one's treated them, or even told you about those. (2: 302-15)</p> <p>Yes, so it's prevention isn't it? It's curing, and then prevention so it doesn't happen again. You know, looking after your body, listening. (2: 317-8)</p> <p>S/he said, "no, you'll stop bleeding, that's fine, don't worry about it, we'll stop you bleeding and get your menstrual cycle regulated, but firstly work on the digestive system and energy levels," because I was so tired and washed-out, and my hormones were raging, and my moods were all over the place. (2:349-52)</p>	<p>and that's why I completely put all my trust in her/him and I thought I will go with it 100% and I will help. When s/he tells me to do something I'll do it, and I'll change my lifestyle a little bit. I mean I know I can't finish any earlier at work, but I can have a break and I can have some warm food, and I can sit down and I can let it digest, you know, and things like that. And I did that for the first couple of months of seeing her/him I followed that and I've never had any problems with digestion, with my digestive system, since. (2:197-213)</p> <p>You know, because the relaxation side of it is so important when you have a heavy lifestyle, when you have a very heavy hectic lifestyle, you know. And I like that feeling, and I thought "well lets carry it on a little bit, lets make a few little minor changes and see if it does make any difference". You know, I don't get stressed at work anymore, I don't let them put on me anymore, I don't kill myself there, you know, I do take my breaks no matter how busy we are. And you know at home, as well, I mean I would have my dinner and think yes there is all these jobs to do, but I'll eat dinner and I'll let it go down and then I'll do the jobs. And the jobs are still done, but they're done with a bit of energy and my food has gone down and so then I don't feel sick, you know. And my husband said to me, well I've been trying to tell you that for years, you know! ((laughs)) You know, the vacuuming can wait. And I said I know, I know, I think I just got to that point, and [acupuncturist] said I got to that point in my life where, you know, mentally I had this list of things that I had to do in a day, and I've always done it, and it doesn't matter what's wrong with me, how ill I am, whether I've just had a baby or not, you know, that's me, I have these lists and I do it. And I do it whatever the consequences, I don't think about them. It's like running with a stitch. Like I can run with a stitch and I just don't think about the stitch and I carry on running, and it's a bit like that. I can be doing the housework and I'm really tired and I could feel like being sick because my</p>	
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	<p>If (women) they've taken pills before and it helps them, then that's fine. But give acupuncture a go because not only does it help the problem, the period, the heavy bleeding, but it will help you as a person. It will give you relaxation, it'll make you stress free, it will give you a good feeling about yourself. (2: 633-7)</p> <p>I think it's just that acupuncture covers more than a pill does. That is the big thing for me. When you go for acupuncture it will help your periods and it will help the blood loss and it will help the pain, but it will also help your body, because that's what acupuncture works on. It makes your body run smoothly. (2:642-5)</p> <p>The whole thing. Acupuncture will treat what's wrong with you, but it also gives you this feeling of well being, and you know, it's going to make you feel better full stop, because that's what the treatment does, that's what acupuncture does. You know, if there's any discrepancies in your body it clears you all, so it will help you as a whole, as well as your problem, whereas a pill will just help that problem. (2:647-51)</p> <p>I could have gone round to the doctor's, and say I could have taken a pill and they'd given me that pill and they'd stopped me bleeding 3 months ago, right, I'd took the pill, it stopped me bleeding, I would have still felt completely washed-out, because I'd been bleeding for 3 months, they'd have just said, "take some iron", it would have taken me ages to build back up what I'd lost - if they'd have given me any iron tablets, so they'd just have given you a pill and left you. They would have, they'd have given me a pill to stop me bleeding and said, "well there you are, that's what you asked for," and I would have still felt, I don't think I'd have got, it would have taken me a lot longer to get where I am now I think, in terms of a regular cycle, if, I mean, I don't know if I would have had a regular cycle, because it only stops you bleeding, it doesn't give you a regular cycle,</p>	<p>foods still here ((indicates to chest)) but I would still do it, because it has to be done. I would never do that now, never. And that's all part of it as well. I mean, could you imagine a doctor suggesting you make a change like that? I couldn't. (2:231-54)</p> <p>S/he's given me advice on the whole of my lifestyle to get the best out of this treatment, 100% out of this treatment. I'll help her/him and then s/he'll help me, you know, so you've to work in conjunction with it really. (2:269-71)</p> <p>Well, I think I was living at such a fast pace and never, never, listened to my body before. I just don't, I don't take any notice of it at all, and I just keep going straight on, and s/he said, "you know, it's just so important that you listen to your body." And you know, the first couple of sessions I went there s/he was very direct, I mean s/he said to me, I'm living my life like I did with the energy of an 18-year-old when my body is 34, and I've pushed it and I've pushed it so much that it's basically rebelling against me and saying, you know, "you're not 18 anymore, this list of jobs that you've got mentally, you know, you just can't listen, I'm tired, listen to your body." And that, I've never done that before. I've never even thought about that before, you know, I just thought that it was good that I didn't listen, and that I just did these jobs like superwoman, "look at me, I can do a job and look after a child, and my house is spotless, and the car's clean and," you know, I thought that that was good. And so it's made me realise that, you know, you've got to have it in proportion and that I count as well, and that if I carried on like that my body would give up, and it was, it was giving up. And you know, s/he speaks to you like that, listen to your body, not just for the menstrual cycle, but for the energy levels and the stress levels, and it's a big improvement, because stress does affect your periods, it really does. (2: 281-97)</p>	
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	<p>they told me that. So you know, it could have stopped me bleeding, but I could have gone back to irregular periods. You know, so they would have just helped one thing, and that's the difference between acupuncture and doctor's I think, it treats the whole problem, the whole thing that causes it, stops it happening again, and treats you as a whole. I know that if I'd gone to the doctor's and I could have taken this pill, I'd have stopped bleeding and I could be sat here maybe still having irregular periods, still really not knowing if I was ovulating or not, and also still probably trying to get my energy levels up. You know, I'd have had no nutrition advice, I'd have still been tired, and maybe my hormones, because they wouldn't have balanced my hormones, unless I'd have just kept badgering and badgering them and I'd got some hormone tests. But then what would they do? They'd give you a pill to balance your hormones! ((Laughs)) (2:657-78)</p> <p>Every session that I go to we sit down first and it's "how are you feeling this week? What's different?" And how to interpret my own body, you know, which I've never done. You know, I just thought a period was a period. I now know...if I ovulate on the right hand side where the tube is missing, the pain is more and it's more swollen and bloatedness, and everything else that goes with that. And that's by, you know, listening to your own body and monitoring your own body. (3:51-80)</p> <p>It all works in conjunction with everything, so your whole insides work together really, which is what acupuncture is about isn't it? It's seeing your body as a whole isn't it? And having it all, your energy levels and your channels clear and working together. So it's not about a certain part, the whole of you has to be healthy from top to bottom. So that's taught me that. (3:214-8)</p> <p>I mean, acupuncture, as I say, is about treating the whole thing. They're getting to the root, the cause. Whereas normal</p>	<p>I was helping with the food, and I was helping by not doing too much at work. And certainly the stress dropped straight away. The first week the stress stopped because I made a conscious effort that I wasn't going to be that stressed anymore. (2:357-60)</p> <p>Yes, identify the problem and give me the information of how to, of how I could help. It's not just about her/him treating me, it's about me helping my own lifestyle as well, so. (2:360-2)</p> <p>And then the digestive system, I was doing everything he told me to do, and that made a big difference, you know, straight away, yes straight away, because I'd changed what I was eating, I sat down and let it go down. (2:368-70)</p> <p>And I do have a very hectic lifestyle, and I think that's just me really, I can't sit down, as much as I do try, I can't just sit. But I still try to put in place that you eat, and you slow down, and you have your lunch hour and you have your dinner and you sit down for half an hour to eat it. And I still do that, and I have no problems with digestion at all. And I still follow that, and I'd be terrified not to in case it came back, in case it happened again. (3:73-8)</p> <p>I never get stressed at all now...and it think that was one of the biggest improvements as well really...I always want to be able to think, "well I'm too busy, so I'll slow down for a couple of days"... So I tend to do that, and that is, you know, a big change. And that was all [acupuncturist] and her/his advice about stress and taking a step back. (2:120-36)</p>	
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	<p>practice, normal doctors, they just give you a tablet for what's wrong with you, you know, to get to those symptoms you've got at the moment, not to get at the cause of it. So you might be alright for a few minutes, but then it comes back again, you know, whereas that's the big difference, I find, with acupuncture. Yes, they make you feel better straight away - well they did with me, but then they get to the root of the cause and stop it coming back. They ask, "why is it happening? Lets look at the whole thing and make sure it doesn't come back again." Whereas doctors don't do that. You go to the doctor and you say, "I'm bleeding" and they give you this tablet, and that's alright for, you know, you may be lucky and it may not come again, but then you've not really got to the reason to why it's come in the first place. And they're not really bothered. They haven't got the time, they're not really interested in getting to the reason for why it's happening. They just give you this tablet, and if you're alright you're alright. Whereas acupuncture does get to the root of the cause and it does make you feel better completely, as a whole. (3:325-40)</p>		
Ann	<p>Well [acupuncturist] hoped it would work for me, I mean s/he hoped it would reduce the period and the pain. S/he said s/he was inserting needles in different parts of me, which, I have had them (needles) from the waist down mainly. I have had a couple for tension and I've had 2 for stress. I had about 3 ((indicates to neck and shoulders)), but mainly I do have them from the waist down. They are focusing on blood loss and pain. (2:90-7)</p> <p>You see when I went to my own doctor, a while ago, probably 18 months ago, with my neck, the acupuncture he gave me just tret me neck. It just took the pain away from me neck for a short time, and then I went back and had some more, I went about 3 times, and then it lasted quite a while. But it just affected my neck, you know? I mean he didn't say to me go home and take</p>	<p>Lifestyle, yes, I could do with a bit less hectic routine, but unfortunately that's the way it has to be. [Acupuncturist] has realised and does know that I have quite a lot on my plate. (2:140-2)</p> <p>But, you know, [acupuncturist] has coped with me. [Acupuncturist] has advised me what to do as well, I mean s/he didn't have to. I mean last week when I said to her I still don't feel right, I still feel everything's all congesting here ((points to chest)), I still feel sickly and didn't think I'd feel like this. And it had worried me a bit, because if this is how I feel after losing an uncle, I shouldn't think like this, but what is going to happen when I lose my dad? And I know there's other people that live miles away from their parents, but it bothered me, you know? And [acupuncturist] said, "oh well, a good cry or a good long</p>	

	<p>it easy for the rest of the day, so I probably did things that I shouldn't have done after the treatment, or probably it wasn't as strong as what [acupuncturist] is giving me. The strength's probably different, I don't know. But it was successful, but this has been much better than I expected...because I thought it was just focusing on my periods, but it seems to have taken me over. (2:330-46)</p> <p>Well [acupuncturist] does ask you about all of your health when you go. That might be of an interest to different people. I mean s/he asks how your bowels are working, and how your waterworks are working. You know, general health. I mean sometimes, well at the beginning, one day I came home and I just thought I was going to wee for England! ((laughs)) Couldn't stop going! And [acupuncturist] will say, you know, "how's your bowels? Is it bitty, or have you been constipated, or are you not going or?" You know, as I say, I think it's helped all round - waterworks, bowels, periods. It's certainly made me feel a lot different... Yes, I think (women) they need to know of that. (2:539-52)</p> <p>If I say, "I've had a bad week, I've had a migraine", or whatever, s/he'll treat me for that, or if I've been uptight, s/he'll treat me for that. Like I've got a bad back at the moment, and it's about a fortnight, three weeks, since I went and said, "I've got this bad back." And I've had some pain in my neck before, and I'd got this pain in my neck back, and s/he said, "oh well, I think we'll turn you the other way then this week". So s/he did all my back and then she stretched my neck. And my back's slightly better. Not fully better, but I think I know what that is anyway. But my neck is better than it was. I mean I'd had acupuncture on my neck before t my local doctor's surgery. But as I say, I just mentioned it when I was there with [acupuncturist], and as I say, s/he treated that for me. And s/he said, "I'll just stretch it a little bit, how tall do you want to be?" ((Laughs)) And as I say,</p>	<p>walk, don't bottle things up," which I have tended to I must admit. S/he gave me an anti-sickness one (acupoint) last week, which hasn't taken it all off, but ((touches table)) touch wood, today's one of my better days. It's more or less the first day that I've felt like this. It's still there, but it's not as bad. But I also took her/his advice and did a 4-mile walk on Saturday. So whether that. (2:225-45)</p> <p>She's said, you know, take care and eat well, you know. Get plenty of rest. Or your energy levels are a bit low this week, you know, you must have a couple of early nights, or. Yes she has given odd tips, yes. (3:219-21)</p> <p>When she said to me once, "couple of early nights this week Ann, you're tired and your energy levels are low." I did think to myself, "well that's easier said than done." But I made a point of trying hard to get those early nights, because I knew I was. I knew she was in the right. I knew what she was saying was exactly right. And I thought, "well if [acupuncturist's] noticed, I really ought to try and," because if somebody else says, "oh you look absolutely shattered today, you look absolutely wiped out." You think, "oh that's all I wanted to hear!" you know. But then you think, "well yes I do, what am I going to do?" You think, "well I've got to sort something out," don't you...because as I say, her/his professional side of it, for her/him to say, you know, then it must be showing. (3:219-40)</p>	
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	it's done some good. It's not just treating my periods. (3:174-93)		
	Pain relief for most things. I mean although initially I thought because it was for periods I thought it would only be for periods, that's all it would address, yes. But no, as I say, if you say you've got a bad neck or a bad back, you can have a little bit there and that helps...It's looking at me. (3:202-9)		
Clare	<p>But the best thing, and I read it in the newspaper article, the best thing was that it was somebody talking to you about the whole, your whole system, not just one symptom. And [acupuncturist] took it right back to the beginning to when my periods started and how I was then, and then took it forward to what has happened to me, and did the whole thing, and asked all sorts of questions about it. And it was good because it made me think about it as a whole as well, you know, from when it started and my system, and how my system has reacted over the years as well, so that, it was good. [(2:30-9)</p> <p>And with the acupuncture s/he started off doing my, the periods, concentrating solely on that. But as that went on, I have had a lot of groin pains since [daughter] was born, and I thought it was to do with the stitching and with all that had happened...and I mentioned it to her/him, and I said, "well I've had trouble with my back." So she/he said, "oh well, lets have a look at your back." And s/he's found that there's a bit here that is not right at all. And, and with some of the acupuncture sessions I can feel that groin pain when s/he treats my back. But s/he has found all sorts round here and here ((indicates to lower back))... Yes, as though something's not been right there and its all got out of kilter. (2:50-4; 69-80)</p> <p>I think it's helped me ((Ehm)) I don't know about understand it, it's helped me, s/he put it that things weren't, because s/he</p>	<p>Well the thing s/he has said, is that I ought to change my diet, in that I have a hot breakfast and a hot lunch, don't just have cold milk on cereal, s/he put me on porridge for breakfast and soup for lunch. And that seems to have done me a lot of good, definitely, in that my energy has gone up and I keep going better. I can go all morning, and don't tend to have the dip after lunch, I can just keep going ((laughs)), just keep going to the end of the day! But I don't seem to be as tired as I was, so I do feel better for it. And I don't know whether it's the fact that it's hot, or it's the fact that because it's hot I have to take longer to eat it, so I'm not rushing as soon as I've eaten something, I'm not getting up and rushing round, it makes you Stop. And the warmth must help mustn't it? (152-71)</p> <p>I mean s/he put it to me in that it's, your body has to heat up the food to break it down when it goes in, so if it can go in hot, your body doesn't have to put that energy into it to start breaking it down, and so you are using up less energy, and you get more goodness out of the food if it's hot. And s/he said that you've got to have it hot enough that you feel the warmth in your body when you've had it. And I am warmer, I do notice that since changing my diet, my feet do still get cold, but generally id do feel warmer. (2:173-80)</p> <p>The diet thing as well, that's been really good. It's these benefits I didn't expect from acupuncture. I thought you'd just</p>	

	<p>thinks a lot of the menstrual trouble is it can't get itself right, because it's too busy trying to get everything else that's wrong right first. And if I haven't got any extra energy to put it right then it won't, it won't, it will go rumbling on, and it won't stand a chance of getting itself right. So s/he's changed my view on that, in that I've got to be healthier, generally healthier first, before the periods can start to get better. So that's changed my view point on that. (2:187-95)</p> <p>I just think it's a good idea people are having ((Ehm)) having spoken to the [acupuncturist] about it and seen what [acupuncturist's] view is, why people who get the trouble with their periods don't seem to get over their problems with the periods, it is usually because the system, the whole system is having trouble. It's like it's overloaded and you can't put everything right at once. And so I think it's worth going to see an acupuncturist, because they seem able to sort out what the source of the problem might be and work each bit out. (2:517-24)</p> <p>But having said that my husband has had acupuncture for his shoulder he went to a physio and he said, "lets try some acupuncture on it", and he hated it, he didn't like the sensation at all, said it made him feel hot and cold and sweaty, and the physio said that was good, it meant it was stimulating something in there. But my husband didn't like the sensation at all and didn't want any more of it. But then that was just, I don't know, it didn't seem to be like the whole, it wasn't the whole treatment of the system. Well it was just, it was just getting this one muscle untangled... Whereas I think he would actually benefit from it. I think if he went to an acupuncturist and they could sort out the shoulder, you know, they could sort that out, but I think it would actually make his system work better, it might trigger it into, you know, the system working better. (2:533-41)</p>	<p>go and have the acupuncture treatment and that would be it, it wasn't the, you know, a bit like going to a chiropractor, you'd just go and get that bit sorted. But it was the diet, go and try this diet to improve your whole, your whole body health. (2:526-32)</p>	
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	<p>Well the only thing I'd say, when I went to see the acupuncturist at the beginning and we were talking about it, and we were chatting about why, you know, why women have these troubles with their periods, and [acupuncturist] was saying that a lot of the people s/he sees, it's other things that aren't right with their bodies, they've got out of sync, and it seemed to be that once they got those right, then your body had a chance of balancing the periods then. And certainly with me, you know, it certainly got rid of the groin pain and the hip pain and the back pain, and all that, and it's given me a chance, the best chance possible to balance it out. So anybody who, it's not just the period that it will sort out, and that's the benefit of it, it treats your whole system, it's all the other added benefits, so okay you might say, "well I can put up with this period pain or this discomfort or whatever, so I won't bother to make the effort to go to acupuncture", but it is worth making the effort because it's all the added benefits that you get, it keeps you healthier, it keeps you, you know, it might get rid of that niggly pain that you've had, or your digestive system, or whatever, you know, you might suffer from wind or something. I don't know, but it's got a chance of clearing, clearing this and setting you, setting you up for the rest of your life really. If it can balance you properly then you've got a better, it will improve your quality of life, it won't just improve your periods, whether it does or it doesn't work for your periods. (3:468-87)</p>		
<p>Julia</p>	<p>(Acupuncturist asked) about my menstrual and about, you know, how I felt. A lot of the questions that you'd asked...and my basic health, and my sleep and my diet and exercise. I think that was about it really. I mean, she knows a lot about me now, because I go in and I'm bu bu bu bu (hand gesture indicates talking)). I never stop talking! ((Laughs)) I bet she's thinking, "shut up" sometimes! (2:67-74)</p>		<p>I have started taking more vitamins, or a better type of vitamins....and I got myself a detox tea, I was going to do a detox week. So yes....it makes you think more about looking after yourself. (2:163-73)</p> <p>But then that's me again, always</p>

	<p>And she's good as well because, I mean obviously it's, well I think it's a holistic approach as well, and she seems concerned about, you know, other parts of my health. It's not just purely sort of focused on the menstrual cycle. You know, she gave me a little massage for my neck, because she sort of asked about any, did I have any effects, or did I feel different at all. And the only thing, I said, "oh I had this strange sensation down my arm and my leg, which I hadn't had before, and I didn't know what it was." I was worried it might be something to do with circulation, or something. And she went to my neck whilst I was laid down, and I think she thought it was maybe stress related. So you know, that was good. (2:78-87)</p> <p>Well I collect, my stress all collects on my left shoulder, and apparently, [acupuncturist] says, its habit forming. Once it, I mean you're not quite aware, but once it starts it often goes, it goes to the same place. Yes, and yes she eased it for me and said it was very knotted up. (2:89-97)</p> <p>Well obviously, yes, at each session we sat down and had a chat, you know and [acupuncturist] asked me how things were going and how things had been, and s/he was interested in all aspects, with all of me. So, so, not just "how've your periods been"? ((Laughs)) (3:167-70)</p> <p>But then that's me again, always aiming for perfection. You probably wouldn't think so to look at me, but I do, you know, I've got high standards and you know, I'm one of these who thinks, "right I've got an appointment and I've got to be there half an hour before", you know, that sort of. I spoke to [acupuncturist] about this actually, and I like to have consistency, a routine, and I do like to achieve things each day, and then when you aren't, well, those sorts of things, I mean they are just so frustrating. So I said this to [acupuncturist], and [acupuncturist] said, "well, even if, you know, people", oh, I can't remember what she said,</p>	<p>aiming for perfection...I spoke to [acupuncturist] about this actually...we talked about all sorts of things. (3:292-303)</p>
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Appendix 47

	"but people working, who do have a nine to five job, do you think they perhaps even they might not be achieving as much in a day as you?" Oh, I don't know, we talked about all sorts of things. (3:292-303)		
Lyn	...s/he said I eat a healthy diet really, you know, s/he asked me what I eat and if I skip meals and things like that, which I don't ((laughs))! So, just things like that. Yes, she said I'm basically a healthy person apart from these heavy periods. And she said how would I feel if that was sorted? I said I'd be marvellous, which I would wouldn't I? Because that's the only area, I'm basically a fit and healthy woman. She asked me what exercise I do, and things like that you see. Things about my job, and things like that, and if I had any extra energy to do anything else on a night. Things like that, so s/he got a true picture I think, before I started, of me...she knew before she started what I was like really. (2:128-47)	<p>Yes. S/he told me dietary advice. S/he told me to cut down on coffee, which I have done actually...Because, it was all to do, if you have heavy periods for a long time it can lead to osteoporosis when you're old. And coffee is like a toxin as well, and so s/he said it was just like something you could do to aid that. So I did cut down, because I was drinking too much coffee, I knew that. (2:89-104)</p> <p>S/he asked me all what I ate and everything. I mean I have got a good appetite, and s/he was asking me what times of the month have I had cravings? Did I have any cravings at all? And what times of the month did I? Well, I craved sweet stuff before, and then afterwards, I'm just really, really hungry when I've finished, because my appetite dips while I am on, you know, because you're feeling really tired and can't be bothered. And then afterwards, I'm really, really hungry for a couple of days. I'll just eat anything. Sandwiches and, savoury. And then she asked me what I drink. And she said I drink a lot of water, but I was drinking a lot of coffee as well, so she said try and cut down on your coffee. Yes. She said it doesn't help really. It doesn't help. So I try and cut down, which I have done...S/he said don't cut down straight away, just knock one off, and then come off slow. I was drinking about 6, and s/he said try and get down to 3, but don't do it straight away because you'll get headaches. So I've done that now, and I have small cups. So that's fine, yes. (2:104-22)</p> <p>Yes, s/he gave me a few tips. But with regards my diet she said I ate right well anyway. S/he said there was nothing wrong with my lifestyle really, it was just the fact that I had these heavy</p>	

		<p>periods, s/he couldn't see any reason why. You know s/he's given me a few tips. S/he said rest, you know, and things like that, and look after yourself. So I am more conscious of doing that really. (3:160-7)</p> <p>S/he just said take care of yourself and rest, you know. S/he did tell me to cut down on my coffee, which I have done. S/he said that does, when you lose a lot of blood, it can affect your bones if you drink coffee as well, because that's toxins. S/he explained it. So s/he said cut down on your coffee, and plus it leads to, it gives you fluid retention, which I don't suffer with that now. So s/he's just given me a few helpful tips really, you know. (3:171-80)</p>	
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Appendix 48

THEME CHART: Perceived health outcomes from acupuncture (page 1 of 22)
Acupuncture for Menorrhagia Qualitative Study: Exploring the meaning of treatment acceptability

	"So easy now, so light" "It's manageable now, you know, I can cope" "Heavy, heavy enough to worry me"	"The treatment I had had an affect on all of me" Areas of <u>positive change</u> : PMT, dysmenorrhoea, irregular menses, bodily pain, mental health, immunity, digestion, energy, personal relationships <u>Worsening of / new symptoms</u> : onset of pain behind naval	"I'm making a conscious effort to keep relaxed and keep stress free and keep healthy really"	Other
Linda	At first I didn't think there was that much happening. I mean I enjoyed the sessions, but I kept thinking, "but there's nothing really happening here". But actually, when we looked into, when we were talking this session, we were actually talking about it, and there is quite a few things that have happened. I've noticed my periods are still heavy, but I've noticed this time I didn't have to get up during the night. Now normally I'd be up three, four times during the night to change, because, you know, and I've slept all night not having to. I've still been full in the morning, but I've not woke-up with it during the night, so you know, that's good, it's obviously died down.... Oh yes, I'd still be flooding in the morning yes, but this could happen about three, four times at the night, during the night I'd be getting up, so it obviously. It really used to be really tiring with getting broken sleep all the time. (2:33-48) Well, the plus side is that hopefully, you know, you're going to get, at the end of it, you're going to be, you're going to feel better, and you're going to hopefully have lighter periods as well. I mean, if you're like me and you have a disturbed sleep and the changing of the bed, you know, and a night	I'm getting a full night's sleep now, yes. So I noticed that, and I've noticed because I get really bad pains down my legs when I'm on a period. And this has stopped, the pains in my legs has stopped. I still get aching feelings, I still get tummy cramps and I still get my aching fingers and wrists, but the pains in my legs have stopped, and actually the pains in my wrists aren't as severe as they were. But I still get poorly tummies, you know, and you know. And I'm still heavy during the day. What else have I noticed? But that's very good isn't it? (2: 51-60) Oh, I'm regular as well. I'm getting more regular, yes, because I mean I could go two, three weeks over and things like that. And I know that was quite good, because it would be a long time before I'd see a period, but with it being so irregular, I'd find it hard to plan things, you know. Like I say, book a holiday and you could guarantee I'd turn unwell, and things like that, so that's good, it getting more regular, so of course I can plan more things, you know... Yes, I think that's down to a couple of days now, out, and that's it (2:62-75) But regular, and although I had stomach ache, I tell	...you get more aware of how things are working inside yourself. You get an insight to things that you wouldn't necessarily have thought about before. You know, you just go along. You don't realise that may be something that you're doing would effect something else, or you know. So you do tend to maybes be a little bit more aware of what you've put inside you, or what you're actually doing to yourself, so yes, it does, it does give you awareness of your workings, and there's more to it than meets the eye sort of thing! ((Laughs)) (3:181-8) So I am taking more wheat in again now, but I think I'm more aware of that. If I've had something, some wheat in the morning I've tried to cut down the amount in the evening, you know. So yes, it's like there's loads of	Summary: Discontinued tranexamic acid, Mirena coil fitted, successful conventional treatment for 'stomach acids' and kinesiology effects I tried it for some time (reducing wheat), but I actually found out that I had a, because I had really, really bad acid, and this is one of the things that [acupuncturist] had picked up on, and she was trying to sort of like suggest things you know, to me about certain things that could be causing that, you know, but what they found out at the hospital was that I had a helio bacteria, you know, a sort of a germ or something that could be causing it, and they treated that, and actually it has, that's gone. (3:192-8) And it's like even with the like the pressure points I've found amazing as well, because like she's said she can feel something, you know, when she's touching me, and with

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changing, because it's not just your pad you change at night, you know, it's like everything, you know. And as I say, my periods are still heavy, I mean I still changed, I went through four pairs of trousers in one day. That was this period, you know, just straight through. But it wasn't during the night, and I mean I felt better for having a full nights sleep, you know, even though I was still wacked and still, you know. But at the end of the day, if you've got it, there's a lot of things, I mean it's like I'm still anaemic, I still go anaemic after a period. I'm still having to take iron tablets and things like that, but at the end of the day, if you get a result and all that's going to end, (acupuncture) it's got to be worth it. (2:356-69)	you what I had this month and I've never, I've never had for a long time, I mean very, very rare was the achy boobs, and I got that this time. Still had pains in my wrists and in my fingers, you know, like achy pains, but not in my legs. Still heavy, but regular. (3:15-26)	factors isn't there? There's loads of things that I'm, you know, some people tell us are good for us, and other people tell us that, well maybe it isn't that good for you, and maybe you should... You know like some people say that, you know, wheat is good for you. Bran's good for you, and all that. And then you find out that maybe it isn't, you know, or just a little bit, may be. Because once upon a time I would eat bran till it was coming out of my ears, you know what I mean, things with bran in or you know, because my digestive system wasn't very good, so I would eat that sort of thing. And then I would find out, you know, like maybe, you know like that's the wrong thing to do. I mean I'm not saying that's all through acupuncture, you know, but it makes you look into more things. You know, of what you're doing that could be wrong, you know, that you thought was right but are possibly not. (3: 200-14)	the gentlest of touches, ((puts hands on head)), and I could feel, I could feel, it was really amazing the first time she did it because I felt this, like I felt my face was all ((holds hand out from head and blows cheeks out)) you know, sort of thing, on this side... like a balloon, and then it went back. And the next time she did it, it didn't do that, you know, the next time she did it, it didn't do that because she'd aligned it. I felt like, I felt like it had gone right, you know... Balanced, yes. Feeling balanced, yes. I wasn't lopsided suddenly ((laughs))! I don't know how [acupuncturist] would put that, but you know ((laughs))! (2:234-46)
Well I've just had a period now. So I've just finished a period. It was very heavy. So heavy I was having to wear incontinence pads. So heavy I was like trousers, everything ((indicates flooding)), you know, changing it all. So heavy I marked my friends settee, I felt so embarrassed. Yes. But regular, and although I had stomach ache, I tell you what I had this month and I've never, I've never had for a long time, I mean very, very rare was the achy boobs, and I got that this time. Still had pains in my wrists and in my fingers, you know, like achy pains, but not in my legs. Still heavy, but regular. (3:7-26)	Well I can say I feel healthier. I can say I feel I've got a bit more energy, but I don't know if that's with the acupuncture or because I've joined the gym now. So it's like I don't know, you know. But then again I must have had the energy to think of joining the gym in the first place ((laughs)), because before hand I think I would have thought "Oh no way"! ((Laughs)) (3:118-22)	I think that, as I said before, you're finding out more about your body and I found out more about the things that are healthier for you, you know, the things that ((Ehm)). What was pointed out to	
But I'm disappointed that my periods are still heavy, you know, because I did think with my last period, not the one that's just gone but the one before that, I did think, "oh, I'm bleeding less". Well it was heavy, but not as heavy as this one. (3:33-6) You know, because as I say, you know, it's embarrassing going to somebody's house and you know somebody sort	So yes it was a nice, a very nice experience, you know, I learnt a lot. (3:300)		

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	<p>of saying, "oh you can sit here" and thinking, "I don't really want to sit there, just in case," you know. You sit on your honkers on the blinking floor because you daren't sit on a surface. But I did think I'd be alright because I had, I had just changed myself and taken a roll of toilet paper there as well, so I felt well protected, like, you know. So I mean normally I would of, I mean I did think about whether I should go or not, but when she offered us to come round to watch this movie, and I did think, "should I go?" because I was like this, and then I thought, "oh no, I'll be alright", you know. (3:64-73)</p> <p>I wouldn't say I'm worried. It's just a bind. Its just, it doesn't worry me, it's just, although why I'm saying that, because every time I have a heavy period I get anaemic, so I mean that worries me. (3:145-7)</p>			<p>me that maybes isn't so good in the amount maybes I was taking it. You know, it's like everything in moderation sort of thing. You know, just maybes cut down on the things that are not necessarily too good for you. (3:219-26)</p>	
Sarah	<p>First of all when I went to see [acupuncturist] within like the third session I'd stopped bleeding, s/he'd stopped the bleeding completely. That was three weeks after starting, I have one session a week, and that was just fantastic, just to stop bleeding after so long. I mean it was a great feeling. I was a little bit frightened that I might start again, because I had stopped bleeding for a couple of days and then started bleeding again before I went to see [acupuncturist]. (2:341-44)</p> <p>And the stress levels dropped, the bleeding stopped, and that just then, I just thought this is great, within 3 weeks, After 3 months of no one doing anything and getting worse and worse and worse, you know, and within 3 weeks for that to happen, I thought was amazing, but, you know I'd stopped bleeding and the stress had gone and my energy was slowly coming</p>	<p>Within 4 weeks I felt completely different really. The stress levels had gone completely down, and that was, you know, partly due to the fact s/he was treating me for stress, the needles were going in my foot, which was for stress, but also I made a conscious effort in that a enough was enough and I was going to slow down my life, because the way I had been living, obviously as well as the periods, had caused this break down in my energy levels and my body basically, which just wasn't working right, and it was getting worse and worse, and I have never, I have never felt that low, I'd never felt that ill before, and so I was frightened and that's why I listened to her/him intently and that's why I completely put all my trust in her/him and I thought I will go with it 100% and I will help. When s/he tells me to do something I'll do it, and I'll change my lifestyle a little bit. I mean I know I can't finish any earlier at work, but I can</p>	<p>Well I've never been in tune with my body. You don't when you're younger do you really? I mean it's only when you start having problems and you start taking an interest in yourself. And I do watch now, you know, I do make sure that I do eat properly, and that I do sit down afterwards, and that there's no stress in my life, and that if there is, then I take a different direction, which is all to do with the advice I got from this [study]. And I mean I want to maintain a regular cycle, and a regular cycle is to me disturbed by stress, and I'm sure it is to do with me when I get stressed, or</p>		

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<p>back. I noticed the difference in my energy every week, you know, every week I could tell, you know? (2:362-9)</p> <p>(My first cycle during treatment) was heavy and it was painful, and it lasted for about 5 days and then stopped...I was just so glad to have a normal period, for it to stop. (2:378-82)</p> <p>And I've stopped bleeding, so I don't feel so horrible all the time. If you're bleeding all the time it does make you feel awful, doesn't it really, as a woman? ...Not so clean and, you know, I wouldn't use tampons all the time, because I don't like the idea of tampons being in side me for 3 months, and so I just felt awful about myself. (2:399-403)</p> <p>Every period that I've had, and I've had 3 now, and the 2 after the first one have been like normal, as I used to have them – for 4 days, it wasn't so heavy, and not so much pain either, not half as much pain. The second period was great, but that was from my left hand side, so there was no pain and I bled for 4 days and it was normal. (2:450-4)</p> <p>Gosh yes it seems longer than six months...It just seems such a long time, so distant, how I felt then to how I feel now. I think that's probably why it feels so long ago, which is good! ((Laughs)) (3:3-7)</p> <p>I mean, they were improved as much as they can be really, because they're back to how they were, you know, before, which is, I mean I've never had problems with periods really, until I started having them. Before that it was fine. I mean, they were</p>	<p>have a break and I can have some warm food, and I can sit down and I can let it digest, you know, and things like that. And I did that for the first couple of months of seeing her/him I followed that and I've never had any problems with digestion, with my digestive system, since. Nothing at all, I don't have the bloatedness, sickness, the cramps to do with the food, after eating the food, so. (2:198; 213-4)</p> <p>I'm completely different...And the energy that it's given me, you know, I feel 80% better...and probably the only reason I don't feel 100% is because I'm not pregnant. (2:260; 278-80)</p> <p>So after the third session I stopped bleeding and slowly, slowly the energy came up, because I was gone so far. And I did notice after every session that I went to, I did notice the following week an improvement in my energy. (2:354-6)</p> <p>And then the digestive system, I was doing everything s/he told me to do, and that made a big difference, you know, straight away, yes straight away, because I'd changed what I was eating, I sat down and let it go down, and that changed straight away, you know, the sickness wasn't there, bloating was still there for maybe 6, 7 weeks. (2:368-72)</p> <p>I mean before I went to see [acupuncturist], I wouldn't say it was PMT, I would say it was just continual. I didn't know if I was coming or going, my moods were erratic, I had no control really over my body or anything, and you know I was so fed up with it and it was affecting everything. It was affecting my quality of life, my relationship with my husband and</p>	<p>something happens in my life, it does send everything out of synch. And I mean it's been proved that stress can stop periods, hasn't it? And because when you are trying for a baby you do want that regularity, because you've got no chance otherwise. So that's always at the back of mind, to keep healthy. And now I am healthy I want to keep healthy, you know, for me. Whether I was trying for a baby or not, you know, I want to keep this level of healthiness and being in tune with your own body, and you know, just watching out for the early warning signs, you know. (3:1143-57)</p> <p><u>Job change to support health benefits, improve relationship with husband and improve conception chances (162-73)</u></p> <p>I mean we last met 3 months ago, and I'd noticed then a difference. And it is, I mean we're back on track. And I mean he's very supportive anyway and nothing would have happened, but you know, when I look back I just feel so sorry for him really, because he was just living with this monster. And he, you know, men</p>
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<p>irregular, but I never had pain and I never had lots of blood, and then suddenly – and I mean that's why it was such a big change for me, and the thought that that's how they're going to be now, probably frightened me even more, you know? But no, they've gone back to exactly how they were, you know, they're here for 4, 5 days at the most, fairly light, which is how I've always been, fairly light and with just a bit a slight stomachy ache on the first day, take 2 Nurofen and that's fine. And that's how they'd always been before that, you know, I'd never, you know, had periods where it wiped you out and you were in so much pain the Nurofen didn't even touch it, you know, which was what was happening really. (3:26-37)</p> <p>And you know, I speak to girls that have a terrible time with their periods, you know, like the pain and all the side effects are a hell of a lot worse than mine, you know, things like breast tenderness, and bloating and water retention so they can't get their jeans up, I mean I can still get my jeans up I just can't wear a top tucked in! ((Laughs)) [normal?] Or their skin, or they get really bad pain. I mean mine are just so easy now, and so light. Just 4 or 5 days at the most and it's really like... It's probably the best they've ever been, so yes if they stayed like this I'd be very happy if they stayed like this, and I'm sure they will. (3:108-17)</p> <p>So yes, it's all about maintaining how I feel now. I'm always frightened thinking, "God, is it ever going to come back, am I ever going to start feeling poorly again?" (3:198-200)</p>	<p>he must have been so fed up with me, I was so touchy and so tired that everything I had to do was such an effort that it made a big deal, you know, and you know, it was a terrible time. And that was always improving, every time I went, the energy was always improving, and my mood and my hormones after about 4 or 5 weeks I noticed a complete change, that I was more level, more calm, the stress had gone, the digestive system was sorted by then, I'd had my first cycle, which had stopped, and I was monitoring my second cycle with the chart, hoping that it would arrive on time, because that was such a big thing for me, because I'd never had a regular cycle, which was a part of the problem in getting pregnant really, because I'd never had a regular cycle. And, and as you say, as your energy goes up, so does your mood go up. (2:385-99)</p> <p>And each week s/he'd notice, you know, I'd smile and say, "yes I've had no arguments this week", and s/he'd say, "you're getting there aren't you? You're looking better," and I'd say, "yes". (2:407-9)</p> <p>The last 6 weeks or so have just been so different, I just, you know I was telling you I used to get up in the morning and I used to think, "God, I just want to go back to bed, I don't want the day to happen", or "how am I going to be able to get through the day without shouting or being in a mood or crying?", you know, and really I noticed getting up on a morning and having these rushes and thinking, "I feel great, I feel", I mean it must have been the last 6 weeks, and I'd phone my husband up at work and say, "I'm really happy now, I feel really great". And he'd say, "yes that's lovely, you know, but I'm at work love!" But it</p>	<p>don't really understand what's going on, he just thought it was because I couldn't get pregnant, or you know, I'd had 3 miscarriages or whatever. And a part of it was, but the other part of it was, you know, you just can't control your hormones and I mean you can't explain that to a man, or even a healthy woman, you can't explain that to, you know, they say, "oh, I don't believe in PMT and things like". And you know it's all to do with hormones and you get up and you know you don't want to be bad tempered, and you know you don't want to have an argument, but you just have this stuff coming out of your mouth and you just think, "what am I doing? Why am I arguing about this? It's trivial." But that's your hormones for you, and I think that's frightening, and so keeping my hormones balanced is a high priority of mine! ((Laughs)) It really is. I get the Evening Primrose Oil and Star Flower Oil, anything that says hormone balance, you know! Yes, I take those, I thought "well, they can't do any harm, and so I'm taking them just in case!" You know, because I just want my hormones to keep normal. I</p>
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	<p>was such, I never thought I'd be able to get back to that, you know, and I probably feel better now than I have done for maybe 3 or 4 years really. I feel positive, I feel extremely healthy and I've got loads of energy, which then in turn affects everything. My relationship is better with my husband, I'm positive thinking, so I'm thinking, "right okay, if I'm going to get fed-up what I'm going to do to stop me getting fed-up?" So I make these plans and you know, that's all positive thinking, and that's all from this, because I wouldn't have done it otherwise, I'd still be in a miserable woe is me state. And especially, s/he must have balanced all my hormones as well, for me to have been that severe really, and I was pretty severe, to feeling this good and this happy really. It's mentally as well as physical, and for me it was the mental really that was affecting me as person more than anything else. You know, because if you feel you've lost control of your life that's horrible. (2:414-34)</p> <p>...s/he was feeling around and it was more lumpy up on the right hand side ((of lower abdomen)). You could feel it, s/he was showing me, you know, and that's where s/he put the needles and things. So when I did have my period it hurt slightly on, it was an ache on the right hand side, but I think it would have been a lot worse if s/he hadn't have done that, I had the treatment just before I came on my period, yes, because I'd been starting to have twinges and pain and I said, "you know, I think I'm going to have a painful period", and s/he said, "oh well lets put the pins in there", all around the right hand side, and I did, I had my period still on time, and that period was regular, and for 4, 5 days normal blood loss, with</p>	<p>mean if I'm in a bad mood I want to know it's because I'm in a bad mood, and not because my hormones are just having a bad day, you know? (3:175-94)</p> <p>I mean I've never been ill. I mean, and when I look back and see how I felt then, I mean it wasn't just an illness. I mean it just, it made everything, it affected all of my life, it affected work, it affected my relationship and just everything, every day to day, which then led to me feeling depressed I suppose. I mean I was so fed-up, I was so, I mean big time! ((Laughs)) And I never want to be like that again and so it's really important, you know, for me to be healthy and to maintain being healthy and have like a regular cycle and my hormones nice and even, and just, you know, keep healthy and not have stress. So that's why I'm living my life how I am now. I'm taking vitamin tablets to keep my hormones nice and level, I don't have stress because I don't want it to affect my cycle, you know, and I eat properly and healthily. Which I did before, anyway, but just taking time out to eat a meal and just prioritising things a little</p>
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		<p>hardly any pain, the pain aspect is getting better and better. And the fact that it's regular and it stops after 5 days! ((Laughs)) (2:462-73)</p> <p>And also I think it's good with your immune system, I think it builds your immune system up, because I've not been ill this year, and I always have about 4 colds by December, and I've not had 1, you know, I'm sure it's to do with that. I'm sure it's to do with feeling well, and feeling, you know, a good immune system and relaxed as well as everything – that's the whole. (2:654-8)</p> <p>I mean right from 15, from when I first started having periods, they've never ever been regular. You know, I could go for 6 months without a period and then I might have a period and then it might be, you know, a month and a half, you know. And I mean there wasn't even any regularity in the fact that you could go two months and have a period. You know, there was no regularity in that what-so-ever, you know, and so now I've got a proper cycle, you know, every month it's between 28 and 30 days. (3:41-7)</p> <p>Yes I can feel it, that's right, whether I'm ovulating or not. It is, it is strange. You see the side effects are more pronounced on the right hand side where the tube is missing, I can feel it a lot more, the whole process of the cycle. I get a little bit more bloated, I get water retention, and I feel movement about 3 days before hand and to some point, right up until the day I'm going to come on my period when it's the right hand side. And the pain is, that's more painful when it's the right hand side, but it's only for a day. And when it's a normal cycle I don't really have any</p>	<p>bit. (3:202-13)</p> <p>I'm making a conscious effort to keep it all nice. You know to keep relaxed and keep stress free and keep healthy really. (3:229-31)</p>	
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		<p>pain at all when it's a normal left hand side period. Yes, I don't really get any pain at all, which is great, you know. And I think when I do get the pain that it's probably due to the scar tissue and things, which [acupuncturist] said could cause the problem, you know, but it's not pain as in, you know, how I have been with the period before, that proper pain that was for days and days. This is just a bit of an ache on the first day when it's the right hand side, and the Nurofen takes it away, so it is a big difference. (2:50-62)</p> <p>It's probably stayed the same in that I got all my energy back. I mean I just feel as good as I did 3 months ago, the last time we met, yes I probably feel as good at that. But then, you know, I did feel such an improvement then from how I felt at the beginning, and the energy was such a big part of it really. (3:69-72)</p> <p>And energy levels still are up. I mean I do get tired, but that's probably because I've been on the go for 24 hours! ((Laughs))... Yes, it's a normal tiredness, and it's accepting that I can't do now what I did at 24 even though I do try! ((Laughs)) (3:78-82)</p> <p>I mean there's no energy crisis or anything like that. You just get tired at the end of the day, which is normal. But the only time is, about a week before, I feel a bit, not, "oh, I need to sit down all day", but I do notice a definite change where I just feel a bit urgh, a bit washed out, you know, "oh, can I be bothered to do my hair?" But I know it's to do with the cycle really, and it's only for those few days (3:84-89)</p>		
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		<p>And it's not anywhere, you know, like when I had the problem and I first went to [acupuncturist], that energy was, it wasn't anything like it is now. I mean that was, that was no energy and completely ill, really. Whereas no, now I just feel a bit sluggish I suppose for a couple of days, but then I've always had that. It's just that you're more in tune with your body now, and I can put it into the cycle almost... I mean you know there's a bit of sluggishness, and your skin's not as good, and your hair's not as good, but it's only for a few days. And I've had that all the time, but not really noticed it before, you know. Like people get bad skin before they're due on and things like that, and I mean it's not extreme in my case, you know, like it is in some other people, it's nothing like that you know, but I do notice a little bit of a difference, but it is only for 3 or 4 days. And then when I come on then everything stops, you know, there's no bloatedness, there's no tiredness, your skin's fine, your hair's fine. It's just those few days before. It's the build up I think, all the hormones, but it's good that it is only for a couple of days. (3:84-108)</p> <p>It's the stress the factor that was another part of it. It was all tied up into the one package really, but I'm sure it had something to do with it. I mean, I was very stressed out at the time, but you don't, because I was that busy, you don't stop to actually have a look at your life and think, "oh," you know, "you're just dashing from here to there and you don't have time to think". And like now, I'm not like that at all. I never, ever get stressed at all now. I can be rushed, I can be short-tempered sometimes, but not stressed, no way, not like I used to be. And I think that's one</p>	
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		<p>of the biggest improvements as well really, is that I don't let anything get to me that much any more, because I always have this in the back of my mind now, that I never want to be like I was 6 months ago, because it was a nightmare and it was quite frightening at the time, really, because by the time I recognised something was going on, you know, I was at the bottom somewhere, you know, I was quite far gone really. And I never want to do that again, I always want to be able to think "well, I'm too busy, so I'll slow down for a couple of days", you know, if this is stressful then just step back a little bit. So I tend to do that. And that is, you know, that is a big change. And that was [acupuncturist] and his advice about stress and taking a step back and taking time for yourself and realising that you can't do what you did when you were 18...you know, I think even up to last year I didn't realise I was getting older really, I used to think well if I could do it 10 or 15 years ago I can do it now, but you know, things are going to slow down slightly. (3:120-41)</p> <p>And so yes, I feel fine and I feel calm and I don't have PMT and I've never had PMT really, apart from when I was ill and it was constant for 3 months! ((Laughs)) (3:194-6)</p> <p>Yes, s/he does build your energy levels. (2:65)</p> <p>"Well I'm a lot calmer person. I don't get, well I find that I don't shout at the children as much, because like, just before a period you tend to get a bit wound-up don't you? Pre-menstrual tension as my daughter would call it. No I don't shout as much, and as I say, I feel more relaxed in myself. And before a period, as I say, I don't shout at the children as much, I don't</p>		
Ann	<p>But yes, it's worked for me. (2:52)</p> <p>Yes, and s/he can stop a period as well. I wish I'd known that years ago! ((Laughs))... I went one week and s/he'd asked me how I was, because we have a chat before she starts the treatment every week. And I said, "oh, I've been on a period a week", and s/he said, "how's it been?" And I said, "well, the Wednesday, Thursday, and the Friday it wasn't too</p>		<p>Life event (daughter moving out) to illustrate how being less "wound-up" has changed her approach to life (3:251-321)</p>	

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<p>bad," I said, "but the Saturday, Sunday, Monday was horrendous." And I said I was still bleeding that Wednesday when I went, and s/he said, "you mean you've been on a week?" I said, "yes." "And you've had three or four bad days?" I said, "yes, and I'm still bleeding now." S/he said, "oh, I think you've had enough. I think we ought to try and stop you." And as I say, I think it was, I think it was just an extra needle in my tummy, and on the Thursday when I got up there was hardly anything there, and I got out the bath, I was most surprised, and through the day it was just small blood loss, and by Thursday evening it was back to panty liners just in case. Yes. And Friday morning there was nothing. So I was really chuffed! ((Laughs)) Really chuffed! (2:97-122)</p> <p>Well I don't think [acupuncturist] can make me any better than what [acupuncturist] has done over the next five (treatments), but hopefully [acupuncturist] will keep me calm. (2:369-71)</p> <p>So, and as I say it's done me good, and anything thing that does me good. (3:31)</p> <p>And this month, actually, I haven't been on the period as long. Now, looking back, I don't know whether it was about the second or the third month, but looking back, around that time I'd actually gone over due. I think I went six or seven weeks without a period. Well I haven't done that, I've done that I think twice or maybe three times, I haven't done it recently, I was on time this time, but this time, I had two really heavy days and then the other four were light and was only on 6 days. That was an improvement, because I can be eight to ten. Yes, as</p>	<p>get as much pain with the period. And I have been known to go seven weeks between periods, which was excellent. I mean last time I went five weeks, I had a five week cycle. But there was an occasion one month where I went seven... Oh fantastic! ((Laughs)) Couldn't thank [acupuncturist] enough. I don't know what s/he did, but it was fantastic! Yes. And all the cramps have gone out of my bottom. You know I used to get cramps in me bottom? Pains in me legs, which I mean I've got varicose veins, all pains in me veins, me veins used to really tingle when I was on a period, I've had none of that, no. The only thing I've had, I've had a little bit of tummy ache, and yes I've had a couple of migraines, but as you know we've had a bereavement and that caused one. (2:200-19)</p> <p>And all the cramps have gone out of my bottom...Pains in my legs, which I mean I've got varicose veins, all pains in my veins, my veins used to really tingle when I was on a period, I've had none of that, no. The only thing I've had, I've had a little bit of tummy ache. (2:211-8)</p> <p>I just thought it would deal with the period pains and I didn't expect it to take it away, you know, I didn't think the cramps and the vein pain, I didn't think it would go away, I thought it might ease it off, but I didn't think it would go. And I couldn't see how needles could do it, basically. (2:249-52)</p> <p>We've got an improvement with the pain, we've got an improvement as far as being relaxed...Headaches are, occasionally I've woken up and sort of had a, what I would call a woozy head. You know when</p>	
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I say, the first two days, yes I hardly dare walk about, because I can just feel. You have to wear something slack because you know you're padded up. (3:78-91)	<p>you've slept too heavy? - But I mean I don't get enough sleep, because of my husband being disabled. But sometimes you get up with a woozy head. I've had that with a period rather than a migraine. I've had a couple of migraines, but not as many as I was having...(Before) oh, I got them every month. (2:287-99)</p> <p>Well yes, because as I say I'm more relaxed now. I'm not as tense as I was. Yes. And I mean if I'm having a bad day, I just look forward to this appointment on Wednesday. I just think, "oh, it'll do me Wednesday", you know, or. (2:362-6) I'm not short-tempered. I don't shout as much. I'm a lot calmer, a lot more relaxed. I don't get as much pain, in fact I get hardly get any pain. I get no leg cramps and no cramps in my bottom. If I get any pain it's low down ((abdomen)), but I don't get as much. (3:75-8)</p> <p>But the migraines have been a lot less. I've had what I call a fuddly head, a woozy head rather than a migraine. I mean I have had a few migraines, but it's always been, there's always been, something else that's happened as well. Like I lost my uncle at the beginning of the year, and I had a period at that time, and because of the stress I had a terrific migraine So that could have been down to that. As I say the migraines that I've had, looking back, there's been something else as well...I mean the day (husband) went into hospital, I was having my period and I was fine while I was waiting for the ambulance, and it's the only time that I've not actually gone with him. I've normally, when he's gone in (to hospital 20 miles away) I've normally gone with him you see. And this particular day, because he was going to the (local</p>	
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		<p>hospital) I didn't go with him, I said, "no, I'll follow in a couple of hours. I'll get my washing out and I'll follow you in a couple of hours. And he'd only been gone out the house about ten minutes, and I didn't know where to put myself when it came on, sick, migraine, awful. I think it was the stress, yes. I don't think it was anything to do with the period, but the period was there at the same time... So, as I say when I've had a terrific migraine, there's been something else there.</p> <p>(3:91-124)</p> <p>It's an overall affect. Yes, it's helped me. It's helped me keep calm, it's helped me not be as tense, it's helped my neck, it's helped my back, it's helped my periods. (3:197-99)</p> <p>I'm not, as I say, I'm not as wound up as I was, I mean I set myself very high standards. And I still set myself standards. But if I can't quite meet what I've set out to do that day, I'm not as bothered as I used to be. (3:246-8)</p> <p>You know, as I say, the treatment I had had an affect on all of me. (3:330)</p>		
Clare	<p>And as far as my periods are concerned, I had my first session a week before, my first period, and there wasn't a lot of change or anything. The second one there was less bleeding, but the pain was still as intense, but this last period that I had there was no pain. I didn't have any pain, but the bleeding was horrendous. But I can cope with that, I can almost cope with that. I mean, with the heavy bleeding you know when it is going to happen, because I'm pretty</p>	<p>But as time went on, and it did seem to, the first, the first few sessions did seem to stimulate healing, it did seem to stimulate something down in the groin that was happening. I had sensations like I had after [daughter], it did seem to stimulate it... Just a warmth, a warmth and a pain. It was sore, it was sore like it was after [daughter]. Well not as extreme, but it was that sort of pain, that sort of feeling, and that just happened, I don't know, just for a couple of weeks, 3</p>		<p>(I'd have liked the Mirena coil earlier), yes, because it's been at the back of my mind anyway, because of the contraception side of it as well, because that would have been a disaster. And it just takes so long to get anything done, because, you know, the</p>

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<p>regular, and I could almost cope with that, it was just the pain that I couldn't cope with. But having said that, they have just started me on this progesterone treatment, the same time as I started the acupuncture, which is unfortunate, so it is difficult to tell what's affected, you know, which bit's done which, but the pain has definitely gone, so which ever has worked I'm pleased about. (2:99-114)</p> <p>(The progesterone treatment) that's the one where you just take, well this one I take, you just take on day 19 to day 26, I take two tablets a day of progesterone, and then the period starts two days afterwards, and it's supposed to reduce the blood loss, but this last time I ended up having to take the Methenamic acid to reduce the bleeding, it was just horrendous, but no pain. ((Laughs)) Yes, so there was some improvement! (2:116-24)</p> <p>I mean, the way the period is at the moment, I don't know whether the bleeding will change, but if the pain can go then that's a huge benefit to me, because I can cope with the bleeding, because the heavy bleeding doesn't last for days and days, the heavy bleeding is only ever like for a couple of days, and then it rumbles on for a good number of days afterwards. But I can cope with that, it was the pain, because I couldn't do anything about it. (2:200-8)</p> <p>...the middle month I didn't have any clots at all whether they be fibrous or just blood clots, I didn't have anything, but the last one, there was a slight fibrous clot, and quite a lot of ordinary blood clotting, and so, and so the clotting has changed it's not the gunk that was coming out before. That just seems,</p>	<p>weeks maybe, and then that went, but I was still getting this groin pain. (2:54-69)</p> <p>And the groin pain has lessened. I wouldn't say it had totally gone, but it has lessened. So I can walk, because I couldn't walk in town for, you know if I was in town for two hours, well that was me done. But I can do that now, without having to think, "I need to sit down." And the pain does seem to be moving from the groin and more to the back. So I can feel that the pain has shifted. It has shifted. I can feel it more in my back, so now when I get tired, I think, "oh, my back hurts," not, "oh, its my groin that hurts, its my back that hurts." So that's, I find that absolutely fascinating...So I wouldn't say I'm pain free, but it's changing, and that's what I'm pleased about. (2:82-99)</p> <p>Well the thing s/he has said is that I ought to change my diet, in that I have a hot breakfast and a hot lunch, don't just have cold milk on cereal, s/he put me on porridge for breakfast and soup for lunch. And that seems to have done me a lot of good, definitely...In that my energy has gone up, and I keep going better, I can go all morning and don't tend to have the dip after lunch, I can just keep going! ((Laughs)) Just keep going to the end of the day. I'm still tired at the end of the day, but then everyone's tired at the end of the day aren't they? But I don't seem to be as tired as I was, so I do feel better for it. (2:152-63)</p> <p>...generally because my energy is better, you know, I do keep going better. So I am, I am more able to cope with the ups, you know, with the things going on</p>	<p>periods are every, every month and just getting the Mirena fitted took two months, because I had to have it fitted at a certain time of the month, so that's another two months gone, and then I think it's going to take at least six months to settle in, and in fact it could take a year. So I'm going to have to wait a year to see if it gets any better, and that just seems to be a lot of your life gone before you can...and they'll say, "oh well if this doesn't work we'll do something else," and I'm just thinking, "my word, how long away is that?" ((Laughs))... Yes. So it just seems to take such a long time, considering that I've had this trouble since my daughter was born, which is four years ago. And as I was saying to you, I was thinking about going back to work, and I can't till I've got, I just don't feel as though I could do it until I'm fully functioning...Just the energy to work. (3:268-89)</p>
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	<p>but I wouldn't, I can't say that it's, you know that it's completely gone or anything, because it hasn't been reliable enough, one month it was like this, the next like this... But I'd say the fibrous ones seem to cause the pain, and they seem to have lessened. (2:262-78)</p> <p>The periods haven't got any better in terms of flow. They've been heavy, and heavy enough to worry me, they've been that heavy. It's only a couple of days that they're heavy, but they're tremendously heavy, and the one, not last month but the month before that, was terribly heavy, I actually woke up in the night it was that heavy, but the pain's gone, which was a main factor, so the pain has gone, so I can cope with it, it's just the amount of flow that's there. (3:13-20)</p> <p>There was a time around Christmas, or was it before Christmas? ((Ehm)) [acupuncturist] had been treating my periods by doing my back, and in that time there were a couple of months, there were a couple of periods, that were less, and this week s/he has gone back, just recently, s/he has gone back to treating my back, to see if it does make a difference, but the last period I had was just dreadful. (3:87-94)</p> <p>I mean it has changed it in that my period has gone ((laughs)), its actually got longer...the flow of my period actually lasts longer, which isn't necessarily a good thing, but it has changed something, and whether continued treatment would make it change further I don't know. (3:298-305)</p> <p>Still heavy, with the flooding and clots and fibrous material. ((Cries)) (3: 457)</p>	<p>in my life, yes. (2:298-301)</p> <p>I still do get pain, some pain in this bit here, but it seems to be the second week and I get, and I've got it today, the pain behind the naval, and it seems to be the week after my period, I've sort of, I've noticed enough now to sort of, it is cyclical. Because it was, [acupuncturist] was saying that, "well is it at any particular time?" and it is, it's the week after my periods finished that these pains come on...It's still the same pain, and they are talking about, it might be endometriosis I've got, and I looked up on the website, and it said that one of the things you can get is pain behind the naval, but why it should, I don't understand why it should effect here ((groin)). I don't know if that is something different, with it being in your bottom, that doesn't make sense to me, but anyway, that's the way they're talking at the moment, that it might be that. (3:39-62)</p> <p>They have improved, my energy levels have improved, in that I do get times in the month when I do have energy. I get that now for ten days. Say ten days out of the twenty-eight, I do have energy but then it goes again. The energy does go quite a lot. (3:64-8)</p> <p>Yes. But I feel better in myself, you know? Generally I feel better, from six months ago when I hit the energy dip, I thought, "well, I used to feel like this all the time, and that doesn't happen now, I don't feel like that all the time." And then fighting the pain, I mean that was the worst part. (3:72-76)</p> <p>I think, I think acupuncture has done a lot for my</p>	
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		<p>general health, and I don't think the Mirena coil would have done that. And it got rid of the pain very quickly, the pain went, and I'm sure now that it did that, I feel as though it is that more than the hormone treatment, because it happened straight away on going for the treatment. And like today, I say, "well I've got a pain in my tummy," and if [acupuncturist] puts a pin in there I know it will go. And it's done wonders for my hip as well, so I think for my general health and the pain it's been great. (3:255-64)</p> <p>I'm not as, it's not such a black hole, it's not as worrying. I feel as though something's been done. And because my general health is better I'm more able to cope, I'm much better able to cope with it...I had to break down at the doctors for them to take it seriously. And the acupuncture helped me with all that... Yes, the emotional side of it, because my general health is better I can cope with the, the thought of it, the thought of the horrible bleeding every month and although I get tired I don't get desperately tired, I don't have to go to bed in the afternoons now, maybe a couple of days, one day, may be a couple of days a month I might have to go and lie down, but I'm not like every day having to go up and lie on the bed just to get to the end of the day. So that's a big plus. (3:426-443)</p> <p>Yes, and the priority for me in the beginning was the pain, and the pain's gone. I don't take much in the way of a painkillers at all now, whereas six months ago I was writhing on the bed in agony, and that's gone. (3:449-52)</p>		
Julia	Well it's just incredible, as I kept saying to [acupuncturist] that, well the first period that I've had	Subconsciously, I mean consciously, I don't know. I mean being involved in this was just absolutely great,	I've always, I have started taking more vitamins or a better type of	

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	<p>after...in fact it's, yes, it's hard, you know you forget things quickly, don't you? I mean I haven't had the pain or the bleeding, it's not been. I just can't believe it. I really can't. It's incredible. And I mean I keep waiting, I've had three periods while I've had the treatment, and I'm actually, I am a little bit, I'm a bit bloated, and I'm a little bit tender, because my period is due next week, and I keep waiting, for like, I think, "right this'll be the one. It'll come with, you know, with fury. It'll be there!" ((Laughs)) So I've been a bit, pessimistic as well, and I've been saying to [acupuncturist], well I actually said, "well, the third one will be like a marking point won't it? To see what's happening, to see if it's doing any good?" And the third one came and went, no problem. It was just like, I don't know, a natural period I suppose... Yes, they've been regular and I've been able to use tampons... Well whatever normal is, but in fact, to me I thought, "hang on, we've gone too much the otherway here, I've dried up!" ((Laughs)) Do you know what I mean?...I'm just a bit, because it's gone from one extreme to the other. I feel. It's probably not. I mean I put in the back of the questionnaire that this is probably just natural, I don't know. (2:183-223))</p> <p>Well I haven't had to, just for like freshening up and cleanliness sake now, you know, I'd like change tampons, but before I was having to like really pad up, like sort of nappy stuff, and then feel the clots coming out and think, "ah quick! I've got to go to the loo." And I think back, it was close to that time I'd gone to assembly ((at children's school)), and I had to get up three or four times in an assembly, which lasts about half an hour, three quarters of an hour,</p>	<p>because it was like somebody's listening. Somebody is actually, you know listening, and somebody is prepared to help me try and do something about it. And even that makes you feel so much better. You may still be suffering the, the, you know, the symptoms. But the fact that somebody's actually said right we're going to try and do something about this makes a hell of a difference. (2:108-14)</p> <p>I mean I don know that I am due, and my husband is still aware where I am in my menstrual cycle but, it's no, what's the word, I can't think of the word. Anyway it's no big deal, it doesn't put me out like it did. It doesn't, there is a word, but I can't find it ((Ehm)). But yes, no problem. (2:252-5)</p> <p>And yes, I do get a bit of discomfort, but nothing compared to what I used to have. I mean, my God, I used to go to bed for the afternoon, or have to have a hot water bottle and, you know? (2:259-61)</p> <p>But I'm more active, I've, when did I start doing this? This is recently as well. I've started going and helping a couple of elderly people, cleaning their houses and that was through somebody else. And I've actually, I'm building up quite a sort of client group, by people saying, you know, referral. (Laughs) So I am working in that respect, although it's not a proper job. So I'm not sat at home doing nothing. I'm out Monday, Tuesday is usually a free day, so that's quite good, and Wednesday's is acupuncture, but I then, I go afterwards to [street name] to see this gentleman and this lady that I help. Thursday I go somewhere else, up near [address]. And Friday is a free day. So you know, I am...It's</p>	<p>vitamins. I take vitamin C and then I take, oh, the other one is a multi-vitamin and iron, and I've started taking these as well ((shows bottle)) for tenseness, irritability and agitation. But that wasn't, I haven't taken those because of the, and I haven't put them on the thing, I haven't taken those because of my periods. I've taken them because of moving and feeling I should. And I got myself a detox tea, I was going to do a detox week. So yes, I find I'm thinking, it makes you think more about looking after yourself... I only started taking those about, I mean I've always taken a multi-vitamin, but I've only taken the other things for about a week. So it's early days really. (2:163-78)</p> <p>It does yes, it does make me more aware. I mean, when I do do things, of course I enjoy doing things for myself, and you know, it's great. But you know, two children have to come first, then my husband, when he's at home, he often comes before me, and down to, you know, sitting down and watching, and I very rarely watch the television, but sitting down and watching something I</p>
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	<p>and it was embarrassing you know, because I thought, "if I don't go I'm going to end up leaving a mess on the chair", you know? And now it's nothing like that. It's just ... changing when you need to, not having to be so conscious of you know? Yes, yes, just every now and then to freshen up. I just have a dip in the bath. No, no, none of that ((showering twice a day)). In fact, almost don't realise that you're having a period, because it's no big deal. (2:228-47)</p> <p>...before it was like crickey, you know, being out and not feeling great, and having to run to the toilet. I mean, I could never have an office job or anything like that anyway, I mean whatever...No it's not me. (2:271-5)</p> <p>And I don't know what's happened or whether, like I say, I don't know, whether it's going to come back with a vengeance, that's what I was thinking of, I don't know, we'll see...because it's, well also it's been so quick and dramatic, that it just doesn't seem right in a way! ((Laughs)) Well it doesn't, because I've sort of suffered that since [son] was born, which is six years, and then to go and have some treatment and more or less, well after, well I can't exactly remember my first period, but it wasn't bad, and it more or less instantly just, you know I'm not taking lots of tablets or, you know, I'm just going and having these needles putting in ((laughs)), and it just seems a bit bizarre in a way! I've had these needles put in and become a changed woman! Can you imagine if you said that to somebody? "Oh right, yes!" ((Raises eyebrows, laughs)) (2:275-89)</p> <p>I mean at the time, ((sighs)) I was sat on that sofa when you first came and I felt, I didn't feel good then.</p>	<p>great. I'm happy to do it. And also it's such a thing as well that, like today, [son] today wasn't well this morning and I rang up [name of client] and so, "oh, I can't come this morning", and he said, "fine, fine." I said, "I'll come tomorrow, alright then?" So I'm not, you know, what was I saying? Against popular belief, contrary to popular belief, I don't sit at home doing nothing! ((Laughs!))... I think it's just, I don't know, I think there was a period not so long before this [study] where I felt pretty depressed and tired. And I felt that I wasn't doing anything, and it was like, "oh God, you're not asleep again?" "Oh well, that's nice, to be sat at home", or, you know. People just sort of say things, and I thought well I can't, I can't always, you know, I haven't got the energy. But I have now. I have...I mean obviously, yes, I haven't been like, you know, I haven't been suffering like this all my life. But, since [son] was born seven years ago, I've had peaks and troughs, but I feel like I'm on an even keel now. Oh, I'll start to weep in a minute! ((Laughs)) (2:393-427)</p>	<p>want to watch just doesn't happen. And if I dare say like I did the other night, "could I please watch Elizabeth that we taped," that you know, I've seen it at the cinema, but, Elizabeth I, we taped at Christmas. And then it's, "well I wanted to watch so-and-so-and-so-and-so." And I said, "but you've watched your films like duh duh duh duh." And I think, "oh, it's better just not to say anything!" ...And it's like, "can't you watch it when you're at home in the afternoon or something?" And it's, "no I can't really, but anyway." ((Laughs)) (2:376-91)</p> <p>And overall the whole experience, it's just been a positive experience. (2:541)</p>	
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	<p>And I felt like, you know, and looking at myself, imagining myself, you know I was like this ((hunches over)). Just hunched up and, you know, feeling dreadful. And now I'm, you know ((sits up and pulls shoulders back)), tall and opened. And if a few needles going in to my body is going to make that difference, then so be it! ((Laughs)) (2:525-31)</p> <p>As I say, I've got on very well actually with it. I mean it was, as I say, you know coming up to this point and reflecting, I think I'm completely different to what I was when I started, and even in the middle. I am coming up to a period at the moment, and I have been a bit ((indicates bloated stomach)), but I mean it's, that's not bad. I can cope with that. (3:11-5)</p> <p>I just feel as though things have levelled off now. Well I'm still sort of keeping my fingers crossed and hoping that, you know, I mean each month still I think, "oh, what is it going to be like this time?" You know, but it just seems to be balancing out, and obviously going to the side of, you know, me being okay. I mean it's, what I experience now, I feel as if they're, I mean I've got a bit of tummy ache now, but I think, that to me, that's natural. That's acceptable, compared to what I had before, which was not acceptable at all. Though looking back, at the time I did accept it, because. Well I don't know. I think you get yourself into a bit of a rut as well, you get so down, and it was like two weeks out of every month I felt rotten, in one way or another, whether it be feeling tired, or feeling ratty, or being bloated and having pain, and then bleeding and having the big clotting, and everything that went with that. And it was just like, it got you down, and then you had sort</p>		
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	<p>of like, a couple of weeks respite to recover from the two weeks that you were going through, been going through. And also, I think losing a lot of blood, I'd get, you know, I'd be run down, and then you'd be back on it again! ((Laughs)) But it was like, I was just there with it the majority of the time. I didn't feel as if there was any space to sort of, but now I'm on an even keel. Do you understand what I'm saying? It's because I don't, I'm not experiencing all those terrible things that were related to my menstrual cycle, that I'm well, normal. (3:81-104)</p> <p>I had one tiny, tiny little bit ((blood clot in menstrual flow)), but no big pieces of liver. I know, it sounds awful! Oh! But that's what it was. (3:110-1)</p>			
Lyn	<p>...like the last time I went, a couple of weeks ago I was actually on, and I was quite heavy because she'd asked me not to take my tablets that month [tranexamic acid], and so she tried to decrease the flow. (2:48-52)</p> <p>Well I've had 3 months now, since I had the treatment, and the first 2 months s/he told me to carry on with the tablets, which I did do, so the flow was manageable. But last month she said try and go without the tablets, but the flow was heavy. But s/he did, we missed the one before I was due, and s/he said s/he thinks with hindsight I shouldn't have missed that one. I should have had the extra acupuncture treatment and then that would have probably helped with the flow, but it wasn't painful, so I managed, because it wasn't stopping me doing anything really, it was just inconvenient because of the flow. I didn't have the pain, so I didn't feel it was</p>	<p>...but as I say, she's lengthened the cycle, which is good... Yes, it was quite short... I'm getting to the month nearly now, so that's a lot better... Yes, 3 weeks in between. Yes it's about 26, 27 days, so she's lengthened the cycle. (2:52-61)</p> <p>Yes, well my cycle's lengthened, and I've had, I use to get really bad period pains, and, touch wood ((touches table)), I've had like, what I would say what normal period pains used to be years and years ago. ... You know, like the odd period pain which you would expect, but nothing like the pain, you know I used to sit on the toilet and cry sometimes with the pain, and then a big clot would come, but I haven't had big clots. So, I've a feeling the pain's to do with big clots. So I haven't had those... "Oh, I'm on my period and that's a period pain", but I don't have to take a tablet. It's not severe enough to take a tablet, so that's a lot better, you know. (2:51-64)</p>		<p>Well, I take my vitamins B6. Is that what you mean? Yes, I carried on taking them, and the Oil of Evening Primrose. Yes, I carried on with that, but I haven't taken the drugs prescribed by the doctor, so. (2:229-35)</p>

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<p>a real problem. It was a nuisance, but not a real problem. (2:188-97)</p>	<p>So the fact that the cycle's lengthened is a big plus, and the flow has got shorter too. It used to be a full week, but last time I started on the Monday and finished on the Friday, and that was it done, so there was no dribbling bits for 2 days. It was done from Monday to Friday, so that was a lot better. (2:334-8)</p>	<p>Yes, pain is minimal now, very little. I don't know I'm coming on usually, you know, like I don't get any of that pre-cramps before hand, or during or after! ((Laughs)) Yes the pain is very minimal now. There's a little bit there but nothing like what it used to be. (3:17-22)</p>	<p>I only took tablets (tranexamic acid) the first month I think, and she said try without, and I haven't taken them since. But she did give me a herbal powder, that looked absolutely disgusting, but she said if you feel as though the flow is too much you can take this dissolved in water, and it did seem to help, but I only took it this last month, you know, just to try it and see, but I haven't taken the tranexamic acid. (3:32-41)</p>	<p>I would say it's heavy for 3 days and it's like continuous blood for 3 days, very bright, but it's manageable, because there's no big clots, and no stopping and starting... Well, there is a lot of flow, but it's not flooding. No, because I was stopping and starting, you know, and then when it starts again it's like whoosh! You know, you stand up and you get a whoosh! So I haven't had that, but I would say it is</p>	<p>I'm a lot better. PMT I'm a lot better. Definitely I'm a lot better. (2:166)</p> <p>And I seem to have more energy. In the morning I'm up doing things whereas before I never used to. I used to get up have a cup of coffee with my breakfast and go to work, and just sit in the kitchen area, or maybe come and watch telly. But now I do get up and do things, you know, a bit of housework before I go. I'm waking up refreshed and I think that's helping. I'm sleeping better, because then when I wake up I'm refreshed rather than groggy and you can't be bothered to do anything. So it's better, and everyone else has noticed anyway... My well-beings, yes, improved, yes. Yes I've slept much better. Especially the night I've had my treatment. (2:168-80)</p> <p>S/he builds my energy up, my levels up, up to the period ready for, that's what s/he says, "I'm building your energy levels up so you're able, you'll have more energy while you're on and be able to cope"... Yes there are definitely improvements. (2:200-5)</p> <p>And I don't get the ratty moods beforehand I used to get. So like I say, it has helped with before, during and after, because I'm recovering quicker. (3:78-9)</p> <p>Yes, there was a few like minor changes at the beginning, and then like the second 3 months seemed to be there were more, addressing more problems each month, it was progressively better. (3:228-30)</p> <p>I've got more energy in the morning, whereas I never used to have any energy on a morning, but now I</p>
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	<p>still heavy, but it's 3 days, whereas before it used to be like, you know, 5 or 6 days and then a big whoosh! and clots at the end, and a big clear out at the end. So it has narrowed, the period's narrowed, you know. It's something like 5 of 6 days now, or 3 days heavy and a couple of days mediocre, and that's it, whereas before it was stretching to a week or more. (3:45-62)</p> <p>Well obviously you're not losing as much blood are you, and you've got the energy to recover quicker because I'm not on as heavy or for very long. About 3 days usually...I have to get up to change still. Yes, I'm always conscious of that, you know, and I usually wake up once or twice when I'm heavy. It wakes me up, I am conscious of that, so, but it's only like 2 nights, and then usually it's slowed down and it's okay. (3:66-75)</p> <p>Because I'm recovering quicker, so I have longer days in between where I'm full of energy, whereas before, you know, if it was 3 weeks, you'd get the pre-menstrual, the PMT, and then the heavy periods and then the washed out feelings a few days after, and then you'd have like a week, and then it would be back to square one. So it was like... Yes, a relentless cycle, yes, but now it's a lot better, as I say, because of the treatment. (3:81-9)</p> <p>Well, I just hope that each month it doesn't go back to what it was before. So, I'm just hopeful that it carries on as it is. It's manageable now, you know, I can cope. I just go into it hoping it's going to be okay really. (3:155-7)</p>	<p>tend to do a few jobs before I go, whereas before I never did anything. So now I do. I've got more energy definitely...throughout the month, yes. I've got more energy, definitely. (3:238-44)</p>	
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THEME CHART: Acupuncture and conventional medicine – patterns of use (page 1 of 17)
Acupuncture for Menorrhagia Qualitative Study: Exploring the meaning of treatment acceptability

	Perceived role for conventional medicine and acupuncture	Predicted future use of acupuncture	Other
Linda	<p>(Would I have acupuncture again if I could go back in time 6 months?) I don't know. I really don't know. I think, it's hard to think what I was like. I would have it, you know, if it was going to make me regular, and if the achy pains do stay away in my legs, that's a good thing, but I'm disappointed that my periods are still heavy, you know, because I did think with my last period, not the one that's just gone, but the one before that, I did think, "oh, I'm bleeding less". Well it was heavy, but not as heavy as this one. (3:31-6)</p> <p>You know I don't know what's out there really... Well, if there was, if there was anything on the market that would make it lighter, yes, I think I'd try anything. (3:60-4)</p> <p>Oh, I don't know about surgical. No I wouldn't have like surgical, anything, not unless it was something that was, that maybe they thought was going to, that was going to like lead to something else, you know, like a cancer or something, or, you know, that bone disease or something, you know, if they said to me, "oh well, if you have this, this will probably happen." Then I would maybe go to surgery, but that would be the very last resort. (3:77-83)</p> <p>(And drug therapies?) Yes, I think yes... If there was something on the market that I could take, yes I'd give it a go. (3:87-9)</p> <p>(If you went back in time 6 months, would you still choose to have acupuncture?) Well I think I would. I think I would, because, well yes, I think I would, because the pains are bad, and if they said to me, "oh, we'll be able to maybe, if you know, we are not guaranteeing that the bleeding will be less, but we are saying that there will definitely be some gains from it," then I think I would try it to see what, you know. (3:134-8)</p> <p>But I don't say I feel the things I've always felt. It just makes you think, you know, you've got to live with it, you know, it's something you've got to get on with. (3:149-50)</p>	<p>You see the trouble with acupuncture and all these, all these alternative things, I do, I have a very open mind where, you know, I think it's nice to try these things, but you know, what puts me off, and a lot of people like me, is the cost of it. If you were actually paying, you know. I mean, at the moment I'm loving it, because I'm thinking I don't have that worry, you know? But I think, you know, it must put a lot of people off, the thought of, you know, to actually continue with that if say, you know, once these trials have been finished and that. I mean, because I don't know how much they charge. I mean, I went to one guy, what do they call them? ((Indicates neck)) (Chiropractor?) Yes. And he charged me £25 a session, you know, and I think that that's, well, that's an awful lot of money really, to keep forking out every week, you know. I think the same thing with all the other stuff. I mean it's like, it's like this herbal thing, this lemon thing, which [acupuncturist] gave me, which actually was lovely, but the point is they gave me it, a glass of it, a little bit, but it was £7 for a little, you know, and I mean that's so expensive, you know what I mean? (2:141-58)</p> <p>But you know what I mean, the cost of these things is so expensive, it must put a lot of people off getting them, you know. I couldn't afford it. (2:164-8)</p> <p>But the thing is, like I say, it's just, I think it's just so expensive. (2:179-80)</p> <p>(What about now?) I don't know to tell you the truth. So, I don't think I'd have acupuncture again, because it took up a lot of my time. Only because it hasn't, I mean if it had gone, you know, if it had gone a lot lighter, you know, then I would go for another course of treatment if it started getting heavy again. But being as heavy as I am, I think, you know, I wouldn't go through, I wouldn't. Even though it was an enjoyable experience I don't think, I don't think I'd go and have it done again if I was given the opportunity. (3:44-53)</p> <p>The only thing that puts me off acupuncture, there's only one factor that puts me off acupuncture, and that is the price, the cost. (3:303-4)</p> <p>If there was something that, if I felt it was a problem and I didn't want, before I'd like say, maybe the doctors would say, "oh, I think maybe you'll have to get an operation," or something like that, then I might think, "oh, I'll give acupuncture a try," you know, I think like, because I think, you know, there's so many things, there's so many different things that, about your body that conventional medicine doesn't look</p>	

	<p>Well I think I would say, "well, give it a try, because it might be different for you than it was for me. I mean, I think everybody is individual aren't they? What hasn't worked for me can't, you know, doesn't necessarily say that its not going to work for you." (3:154-57)</p> <p>I had all the information, you know, given to me. You know, I think it's a thing that you just have to try for yourself, you know. I would sort of say, "well, you know, its an enjoyable experience, its like, it's a relaxing experience." I mean, its like. But, I don't know, I couldn't say, it depends on what you, you know, that's not really why you're going, you're going to see if you can sort your periods out, so well, I can sort of say, "well, give it a go." You know, I mean, there is no information I could possibly give them (women), just that, "it does not hurt and its not, you know, it's a relaxing experience, it's not nothing to be nervous about, or anything like that, and it, you know, it may work for you, and if it doesn't, if it doesn't cure your periods, it might cure other things that you might have going on as well as that, you know what I mean?" (3:166-77)</p> <p>So if I went to the doctors, and I said to them, "well, okay, my periods are really, really heavy and I keep going anaemic, like you know I keep going anaemic", why haven't they offered me like a drug treatment? (3:386-8)</p>	<p>into, or it's too easy isn't it, to go on and have something dished out or something, you know? And I think like, if, or I might have it in conjunction with... Like I think, like, if you were having treatment. Say if I had cancer, or anything like that, I think I might have acupuncture as well, you know, something that I think might help the healing process, you know, or I just think a lot of the things that they do would help in conjunction. (3:307-19)</p> <p>In something like an injury, a sports injury, or something like tha, I think it would be good for, actually. Yes, I think acupuncture is good, very good for that, because I mean I had a shoulder complaint and that, and I know that she did acupuncture on that, but she did something else before she did that, just sort of pummelling like that ((demonstrates)) and it worked a treat, you know what I mean. So she just knew where to get to the point that she needed to get to – and it was fabulous. I've had, in fact I've had no trouble with it since. So, you know, so yes, I think someone like that, that knows your body so well, not just your organs, but your things that link things, you know, your A to your B, and know where, just know where them lines are that, that maybes we can't see. You know, I think it's great for injury and that type of thing. Yes, I would have it for that, even with the cost. (3:321-41)</p> <p>Yes, well I mean at the end of the day, you know, you would pay a private hospital, if you think you're going to get a better service. If you think, you know, if you think that, if it's your health, I think it's really, really important. But the thing is if you think you can, I just think with a lot of women we have so much to pay for, so much to, you know, so much, that I think a lot of women do put their own health on the back burner, you know, I do think we tend to, don't pay it the importance that maybes we should, you know? And so, you know, I suppose it depends on how financially okay you are, you know, really, or whether you would feel it was. (3:347-57)</p> <p>I went to a chiropractor for months, you know, and I paid him to sort it out for me, so yes I would, yes because I've had that really positive thing from [acupuncturist] I would definitely, definitely, if I had that complaint again I wouldn't go to a chiropractor, I'd go to an acupuncturist. Yes. (3:367-71)</p> <p>I thought it was a very long, a very, very long, a very long course of treatment. To actually finance that would be ((puffs)), whereas a shoulder, a couple of sessions and it's gone. (3:375-7)</p>
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Sarah	<p>Well I'd never tried it before, I knew nothing about it, so I started reading a little bit about the origins and things like that and I tried to be prepared for it. (2:11-13)</p> <p>Incredible change. I mean I just am so thankful to her/him and I think its just such a brilliant thing, you know, to be able to do that to someone's life, to be able to completely change it round, I mean I phoned my sister, I phoned my niece and I've got them on acupuncture because my sister's going through menopause...and my niece has just come off the pill because she wants to try for a baby and all her hormones are completely up the swaney because she's been on the pill about 20 years or something and she can't get her body back in sync. And she never had a period for 3 months and she was bloated and she put on 2 stone and she's got acne and she's at her tethers end, and so I said go get acupuncture, and so she's having it now as well. And my sister is coping great on it, you know, the mood swings and what-not, and she says she's coping great, because it would be that or nothing really, because she's not able to have HRT. (2:473-86)</p> <p>I'm not giving up on doctors. I think they're very good for certain things. Certainly, if I didn't get pregnant in you know, another 6 months, I'd go back and say you know, can you do some tests to make sure everything is okay. And they've assured me, because you know I had tests after the last miscarriage showing everything was alright and there was no infection and I had a scan and everything, and so if the tube was blocked, if the other tube was blocked, they would see if there was anything like that. So as far as I know, everything is, and that's what the doctor's have told me, everything is in working order, you know, they've scanned me, my tube is not blocked, there's no reason, I'm ovulating, and they've tested me for certain things that can affect it, clamidia they've tested me for, and endometriosis, they've checked me for that, and all stuff like that, and they've said that there's no reason why I shouldn't be getting pregnant. (2:494-505)</p> <p>I know that there are certain things, I know that acupuncture cannot unblock a tube, it cannot give me a tube that I haven't got, you know what I mean? It can help in the fact that it helps ovulation, and it helps keep my hormones level, and to me that's really important, because if your hormones are haywire, or</p>	<p>I would ask [acupuncturist] if they could sort a health problem out first. I mean there are certain things I do know that it can't do, I know that, you know that if there was anything wrong with me internally, you know, s/he's not going to be able to operate and make that right. I would need that operation, for the hospital to sort it out, you know, if I had something wrong with my tube, or polycystic ovaries, or anything like that really. I just know that s/he's not going to be able to do that, but if it was certain other things, like I would go for acupuncture to help with the menopause, if I had problems with my hormones I would go back. I would go there first, if I was uncertain whether s/he could treat it or not, I would telephone and say, "can you help me, yes or no?" Then if s/he couldn't, then I would go to the doctors, and that's only because there'd be nowhere else to go. (2:588-98)</p> <p>The cost, the cost. I would say the cost, because if I'd had to pay for it I would have done, I would have paid for it, but it would have been, certainly for me, it would have been a big chunk out of my money, you know. I'd probably have had acupuncture and not have been able to buy clothes for 6 months, you know, because it is a lot. People pay £20, £30 for a session, and they have one session a week, you know, that would be the only draw back for normal workingwomen like me. (2:681-6)</p> <p>I'm always frightened my periods will go funny again, for whatever reason, but you've just got to hold onto the fact that you are healthy now. And if anything ever did happen again, then I'd just go back, I'd just go back to [acupuncturist] really! ((Laughs)) But I think the only time it's going to go wrong again, and I do believe this, I mean, if it does go out of synch again, if the periods do go out of synch again, I would get help fairly early on, before that had a knock on effect with everything else, which is what happened last time. So I'd just go back to [acupuncturist], or I'd have a look in my life and see what's causing that really. You know, "why is it?" (3:221-9)</p> <p>I mean, it does worry me, but I've always got that, you know, that if it did happen, I would just go back to [acupuncturist], and I know that it would be sorted. I mean, within a month I think I'd be back on track, you know, because that's what happened before, and I was pretty poorly by the time I went to see [acupuncturist], and s/he stopped me bleeding within a few weeks, which to me was a miracle really, because I'd been bleeding for 3 months, and no- one had stopped me, and yet these few little needles for a couple of sessions and it stopped straight away.</p>
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	<p>you're not ovulating, or you're not having a regular cycle, you've got no chance at all in getting pregnant, even before you even start, there's no chance. If you're not ovulating at a regular time, or you're not ovulating at all, or your hormones are haywire, it's just not going to work. So that to me, acupuncture is helping me in that way, in that it's helping me get my body fit, it's helping me regulate my cycle, which has never ever been regular, I've never had a regular cycle. That's the important thing for me, because there's no point in keeping a chart if I'm not regular, if one month I have a period and the next month I don't, so this is, you know. And the doctor's, I'd ask them to scan me again to make sure the tubes okay, because you can, when you lose one tube it can cause infection in the other, you know, you're more susceptible to losing your other, and you know, I would use them for that, but I wouldn't use them for regulating my period or anything like that really. Just to basically make sure that everything is all right internally. (2:526-42) Well I mean, the hospital I find completely different to the doctor's, because by the time you get to the hospital they are doing the tests that you want them to do. They're doing scans and testing you for proper things. I just find that the doctors have just let me down so many times, and they've never helped really. To go to the doctor's after your third loss of a child in a year, and to be told, "you'll stop bleeding when you stop bleeding, stop worrying about having a child," I find unforgivable. I really do. If I hadn't have been so low at that particular point, I probably would have said what I wanted to say to that doctor, but I was so tired and fed-up by the time I went to see him, I was just, "all right step over me, I'm a doormat," kind of thing, but now I wouldn't...I was emotionally vulnerable, and I needed their help then, and if they couldn't see that. And I did go to them just before I went to acupuncture, I did go to the other doctor and say, "I'm bleeding, I'm losing a lot of blood, I was in tremendous pain, you know, and it was affecting everything I was doing," and that was the response I got, and I don't think I could ever get that trust back really. I mean I know they can do a good job, and if you've got an infection and need antibiotics, I suppose you've got no other choice, but, you know, they're not something I would use unless I really, really had to, the doctors now. (2:545-63)</p> <p>Yes, what acupuncture couldn't cover, I would then go to the doctor's. I mean, I know acupuncture can't cover certain things, you know, and then I would go to the doctors, and I would ask for referral to the hospital, and just not let them</p>	<p>And from then on, really, I sort of had faith in it. I didn't know what to expect when I first went, really, but I mean, when s/he did that within a couple of sessions, I thought, "well that's more than anyone's done in 3 months," and that was 2 one hour sessions, so you know, I definitely would go back. And it's nice that there's always someone, there's always help out there. (3:233-44)</p> <p>Yes, and I'd do it fairly straight away as well, you know, if my cycle was messed up for 2 months in a row or something, I'd just go back, because what can the doctors do? You know, I know the doctors can't do anything, because they didn't do anything! ((Laughs)) And so I would definitely not go to them really, because they're not going to. I mean, I don't think they can do anything with your cycle. They didn't anyway when I was bleeding for 3 months, so, and so I wouldn't, I wouldn't go to them. (3:247-53)</p>
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	<p>fob me off again for as long as they have. And I think it's down to money, and I don't think they can mess with peoples lives for the sake of money. When they say, "we won't refer you to a consultant just yet," it's because it costs too much money. I mean, I know what it's about. "I won't let you go for that scan just yet, or give you this test just yet". Why not?... God, no one was more worthy than me. I'd had 3 loses of a child in less than 2 years, and all I was asking for was, one to stop me bleeding, and two, for a hormone test. That's all I was asking them for, I wasn't asking for anything else. I was asking for hormone tests, because I knew my hormones were gone, and for someone to acknowledge that bleeding for 3 months was not normal. And not once did they say that bleeding for 3 months was not normal. And the first thing [acupuncturist] said when I went in was it isn't normal to bleed for 3 months, and that was the first time anyone had said that to me. And in those 3 months I must have been to the doctors 6 times, and not the same doctor, I'd seen 3 different doctors for different opinions, and not one of them said. (2:566-84)</p> <p>Well if I had a friend who was suffering with bad periods, whether it was heavy or whether it was painful or irregular, I would always, always tell them to go for acupuncture now. (2:622-4)</p> <p>(Pregnancy) I mean I didn't expect that from [acupuncturist] anyway, you know what I mean? I didn't expect her/him to do that for me! ((Laughs)) I mean that's really not what I went there for, I mean it is the icing on the cake, but that wasn't part of my plan for, you know, I didn't have those expectations at all, you know, "oh, I'll be pregnant at the end of it," you know, my main aim was to get healthy, and I think that was a big percentage of the problem with my miscarrying really, was you know, my body wasn't ready to carry a baby. (3:17-23)</p> <p>I'm sure if I went to see a consultant at the hospital, you know, that's a different kettle of fish, because they are specialised and I'm sure they would have probably taken some tests and realised it was my hormones, or done something. It's just you can't get to them. You can't get passed your GP can you? The only way you get to a consultant is lying on a trolley! ((Laughs)) I'm just sure if I'd got there, there'd have been a lot more help, because they are specialised in this are aren't they? You know, whereas doctors have to have a</p>	
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	<p>brief outline of everything. (3:303-10)</p> <p>Well the only time I've had anything to do with consultants was when I had the ectopic. And they were, it's just a different level of care isn't it? You know, I thought they were lovely. And you know they explained everything they were going to do. They were quite blunt, but that's how I like it. I want to know what's happening. I want to know what they're going to do, and they were saying afterwards, "look, are you ready to go home, because if you're not ready to go home you can stay here." Things like that, you know, they were concerned. But when do you see a consultant? You can wait up to a year to see a consultant, and that's only with persistence. The only time you see, the only way to see a consultant any other way is an emergency, like with an ectopic pregnancy. That's the only reason I got to see one. And then they check to see your tubes are okay, your hormones are okay. (3:312-22)</p> <p>It's difficult really, because I do prefer myself alternative therapy anyway, so I wasn't frightened of trying something like acupuncture. It seemed perfectly normal to me, but I do know other people where you'd meet the response, "what's a few needles in you, what does that do, how can that make you feel better?" And they don't understand, you know, and that's going to be quite difficult, you know, to get over to those kinds of people. But for people who are going on the study, and for other people, you know, they've just got to try it. It's not going to harm them. (3:356-62)</p> <p>Because some people are very narrow minded, and especially with alternative therapies, because there's not a lot, there is recently, but there hasn't been that much information on it, it's only been coming into it's own in the last couple of years really. But I think, as a woman, if you're ill, or you've got painful periods and I know doctors are not, you know, that helpful, then why not? Why not give it a try and see if it helps? I mean I'm a successful case, you know, it's worth trying isn't it? (3:369-75)</p> <p>I'm a poster advertisement for it really! (3:380)</p>	
Ann	<p>I mean, I read in a woman's magazine only a couple of weeks ago, where one lady had had it for her migraines. She'd had acupuncture for migraines, which had helped, and I thought, "well, I wish I'd read this, you know, years ago!" All</p> <p>Yes, oh yes. I've got addicted! ((Laughs))... To having that time, and having the acupuncture, yes. Don't honestly know how I'm going to manage without it. ((Cries)) (2:180-3)</p>	

	<p>of sudden, because I've started having acupuncture, I've heard of other people that have had it! And yet, you know, until you do it yourself you don't really know. (2:349-54)</p> <p>I've found it great. "Fantastic," in a word! ((Big smile and laugh)) Oh yes, it's been a good move. (2:382-4)</p> <p>Oh, go for it! Try it. I mean, it might not work for everybody, I mean, I don't know what the success rate is, but you can try it can't you, and see if it's good for you? (2:436-8)</p> <p>Well I think (women) they'll like it, I mean, mainly I suppose for what it does for you, if they are successful, if they go for period pains, or if they go for heavy periods, if it's successful, then yes, and to be relaxed. And also if you've got a nice acupuncturist, it does make a difference. (2:473-6)</p> <p>I mean, as I say, it might not work for everybody, but it must work for the majority, which is why, or it wouldn't still be going strong would it?... You know, I mean, she wouldn't still be in her job if it didn't work for people. It must work for the majority. (2:553-8)</p> <p>When I lost my uncle I got some tablets from the doctor for my migraines and sickness for a while. Because I was feeling very sick, I didn't eat for a while. So I did have tablets for a couple of days. (3:352-8)</p>	<p>I don't know how I'm going to manage. ((Cries)) Don't know how I'm going to cope without it to be honest. That was one of the questions, "how long will the treatment last?" ...No I haven't mentioned it, that was just one of the things that I thought last week, "oh, I wonder how many sessions there is left, and I wonder how long it will last?" Because obviously, if I'm going to benefit like I have benefited, I mean, if it's going, if it's not going to be any detriment to me I think I could, I mean, I certainly could go once a month. I would like to carry on going. I don't want to give it up completely. I can't see me managing without it. I just wish I'd known about it years ago. But I'd never seen it advertised anywhere before you see, and I'd not read anything on acupuncture before. (2:307-25)</p> <p>I mean, if anybody said to me again, "you've got this pain, will you have acupuncture?" The answer would certainly be yes, definitely. (2:433-4)</p> <p>It was brilliant, oh yes. I don't want to stop. ((Cries))...My main concern is how long is it going to be before it all wears off? Am I always going to feel this good? And really, have I got the time to carry on going? Which I've got the time. I mean, I probably can't afford it on a weekly basis, and I'd rather not ask how much it is, but if it would carry on helping the periods by going once a month, then I'm sure that would be ideal...Oh, I'd love to carry it on. (2:499-511)</p> <p>That's it, I've got to keep it ticking over, its got to stay as it is, I've got to be like I am now. I don't want it to wear off, otherwise I'm back to square one. So I do need to know how long it's going to last, whether it be 3 months, 6 months or whatever, but if I can carry on going, as I say, even once a month that might just keep it from wearing off, I don't know, keep me altogether! (2:526-31)</p> <p>And I'm staying on! ((Laughs)) Oh yes, can't do without it... Can't do without it, and it's nice to know that (acupuncturist) is there. (3:14-19)</p> <p>And as I say, it's done me good, so I'm keeping with it (2:38)</p> <p>Well, I don't know how I'm going actually yet. I went last week, and I've got an appointment for next week. Having said that, last week should have been cancelled really, because (acupuncturist) was away, and it was the students, but I was due for</p>
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	<p>a period, and as I've just finished, I could have done to have gone this week. Really, next week you see, I'm going to be sort of in the middle of the month again, which might not be quite as beneficial. I find, just before a period, if I have the acupuncture just before and just after, it's better. If you have it before hand, there's a chance that the pain might not be there, or you might not get a migraine or whatever. And then if you go, say the week that you should be finishing, if you haven't finished it can finish it. So, as I say, I don't know if I shall go fortnightly, or three, or four weekly, I don't know yet... Yes. Well, just at the moment, as I say, the first one is next week, could have done with it this week instead of next week, but ((shrugs)) just the way it fell. (3:40-67)</p> <p>I mean, whilst my husband was in hospital, as I say, I went 6 weeks without any acupuncture, and I made an appointment, I rang her to say that he was home, and I made the appointment, I think that was the Thursday, but the Friday, the previous week, I could feel myself uptight inside, and as I say, my husband said that I'd shouted a few times, I'd raised my voice a couple of times over the weekend. So I was ready for going back. I can't see myself missing 6 weeks, and, like [acupuncturist] said, at the moment, it's not really the right time to give it up...And also, I'm probably going into the change of life. I'm at a funny age! ((Laughs)) There's a lot of things to consider, as I say, I can't go 6 weeks without it, I know I can't now, that was probably a test, it was unforeseen, but looking back it's useful that it happened, because we know that I can't go 6 weeks without. I mean a normal person with a normal life might find that the benefits wouldn't wear off for maybe some months, but my lifestyle, yes, I have got quite a bit on my plate. (3:127-53)</p> <p>Yes, I think it's going to be beneficial. Yes, yes. (3:160)</p> <p>Well as I say, I don't think I can carry on without it. And I know (acupuncturist) is not there to be the doctor, but it is nice to be able to go, because as I say, I feel at home with her/him. I feel as if I've known her/him for years, and you know, s/he asks you what kind of a week you've had, and how things have been, and as I say, I just feel like I could tell her/him anything. (3:166-71)</p> <p>(If my periods became heavy again) acupuncture would be the answer, most definitely, definitely. (3:378)</p>	
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		<p>Well, if my lifestyle is still the same as today, no. Because obviously if a hysterectomy was offered I wouldn't be able to take that up, with having my husband like he is, because I can't, I couldn't have anything like that... The time away, and how it would have to be afterwards. Yes. It's just out of the question, I wouldn't be able to cope with [husband] when I got home or whatever, so no, I wouldn't be able to have anything like an operation at this moment in time, and tablets are no good, as I say, they're out of the question. No, acupuncture would definitely be my first choice. (3:381-90)</p> <p>It suited me right down to the ground. I didn't realise at the time. I thought, you know, it might just be three or four needles, and I didn't realise I would be going every week and having probably nine needles! ((Laughs)) I mean, I don't know an awful lot about it, but it has worked for me. (3:392-5)</p>	
Clare	<p>I was pretty down at Christmas, but I had, there's been something wrong, in my tummy over the Christmas I got severe pains behind my navel, and went to the doctor and he gave me some antibiotics for it, said he thought it was an infected cyst underneath the skin, there (2:286-91)</p> <p>Yes, well the Progesterone happens every month, and the Mefenamic, if it's needed to stop the flow...It was because the Mefenamic acid couldn't, wasn't controlling the, wasn't doing anything for the pain, much for the pain, and wasn't controlling the flow enough, so that's why he put me on Progesterone to control the, well the pain and the flow, to see if it would have the right effect...I don't know, I suppose, I don't know, I feel pretty bloated at the moment, but that's because, I think that's because of whatever's been going on here ((indicates to navel)) a reaction. Yes. I wouldn't say the bloatedness has gone, but it's not excessive in any way. I'm not bothered by it particularly, if anything what the Progesterone does do, it does make my face worse, I always have trouble with a spotty face, and the reason I used to be on Dianette, which was the combined pill, which controlled the periods, but it also did have an effect on my face, my skin, and the Progesterone seems to have changed when my face is spotty, it's actually as soon as I've finished my period that my face gets Spotty, about every, and then it will clear up again. So that I think it must be to do with the Progesterone, that it's changed the cycle, so the spots used to be the week before I had my period and now it's the week after. (2:309-41)</p>	<p>I don't really know, in terms of going back (for more acupuncture), I don't know, because I don't know how much more I can get out of it, if I continued on it privately, or whatever happens with it, what the doctor says. I don't know how much more I'd get. I have got, my energy has increased, but I don't think acupuncture is going to solve everything. (3:101-5)</p> <p>I feel as though (more acupuncture) it could have an impact, but I don't know whether, to manage, managing it I've had to resort to conventional medicine to control it. So, I don't know whether I'd do it instead, I'm not sure. And I'm slightly bothered that my energy levels will go, will disappear again, once I stop coming for the acupuncture, I don't know. ((Laughs)) ...And I really wanted it to work for the flow, I wanted to go, and one time I did go when I had real heavy flow, he stuck a pin in my toe and it stopped, the bleeding stopped. But, but I'd have to time it, you know, to go along at just that time, yes, which would be better than taking a tablet, I'd rather have a pin stuck in my toe than take a tablet, but, I don't know, it's convenient isn't it? (3:312-27)</p>	

	<p>Well it's not difficult to manage (using medication and acupuncture together) and it does seem to be, if the pain can go, I could do with it reducing the blood flow a bit, but if that works well, that would be a satisfactory outcome. I mean the main thing, one of the biggest advantages, is if it can sort my back out and get rid of that pain and the groin pain during the month anyway, then that's a huge benefit. (2:346-52)</p> <p>...the period pain could well be to do with the back problem, and I don't think the, I couldn't, I couldn't say the Progesterone is the key to getting rid of the pain, you know, I think, because there's so much referred pain from my back, then it could well be to do with why the pain has been so excessive during the period. So it is the two together that's worked...I don't think if had just had the Progesterone I would have seen such a big change...I know I have experienced the hormonal tablets before, and I know that I've still always had to have Solpadine, in whatever form I've, whichever hormonal tablet I've had.</p> <p>So, I know it's never done it before, and that's Progesterone and oestrogen, so I've just dropped the oestrogen and having Progesterone, so why should that suddenly get rid of all the pain? So I think that it is both working, so I don't whether just acupuncture would have sorted it or not, I don't know. (2:355-73)</p> <p>I'm due to see the Gynaecologist at the hospital, and they'll take me off, I think what they'll do is they'll take me off, they'll keep me on the Progesterone for a few more months, but they don't keep you on it for ever, and then I'll see what I'm like without it, and hopefully, I'd like, I'd like to come off the Progesterone and for the acupuncture to rebalance my body sufficiently that my body can, you know, just keep ticking on the same. That's ((laugh)) that's the ideal, but whether it will happen I don't know. (2:395-408)</p> <p>But maybe men have a different attitude to it than women, I think maybe women are more likely to have a go at it than the men are, at least the ones I've spoken to, yes, because they seem more, you know, ((laugh)) they're not frightened of a bit of pain! ((Laughs)) Well, it's not pain, but it's you know, they might be prepared to try it... and it's not something you can see working is it? It's not obvious. I think they might have more trouble trusting it. (2:562-74)</p>	
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	<p>...the pain has gone, so I can cope with it, it's just the amount of flow that's there, and then I take the Mefenamic Acid and that seems to sort of sort me out, in terms of the flow... Yes, but I only take it once the flow has got to being heavy, I then take it, and that seems to sort of settle down, so I don't take it before or anything, I just take it once it's got heavy, and I just take it for a couple of days and that sorts me out. (3:19-30)</p> <p>(My skin), it has, it has improved. I went to the doctor, because he put me on this, I'm on Norathisterone, and that's made my face a bit worse, and I asked if there was anything he could give me, and he just gave me an antibiotic, just a mild form of antibiotic, and that seems to be, it keeps it better, better than it's been for a long while. (3:80-5)</p> <p>They've just, I've been to the hospital over the past few months, and they've suggested, well they've recommended that I have the Mirena coil, and I've just had that put in last week, and the thought behind that is that in about a years time that should stop all the periods. Most of it anyway, and stop the bleeding, and if it stops the bleeding it may stop the pain... So I suppose that's the next step with the doctor, in that he will just monitor that and see if it does make a difference. (3:107-120)</p> <p>(Mirena coil) it was a bit sore to start with, I could feel something, but I think that's a lot of the thing, if I do get, if there is any, you know, if I go for a smear, or if I've had to have an internal, I do tend to suffer from it. That disruption does seem to have an effect on me, and so I had it on Wednesday and by Sunday, well definitely by yesterday, I was miles better, but by Sunday I was okay, and I wouldn't say it was, you know, awful, it was just a bit niggley. (3:122-34)</p> <p>Apparently, because the Progesterone goes directly into the womb that should, the thinking is that if it stops the bleeding there, it should stop any bleeding from other tissue. That's, so it should stop. She (gynaecologist) said that's the way that they, they can't tell that I've definitely got it (endometriosis), unless they do a laparoscopy, but she said the treatment, if I have got it, from today the treatment would help them to start tracking things. (3:138-45)</p>	
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	<p>Of the whole experience, it was when I ended up at the hospital that was the most weird experience, you know, I went in there and, you know, how they have to say, "so what do you want?" I don't know if I told you this last time, I can't remember? And I went in there, and she did the examination and afterwards, and she didn't tell me what she thought it was, she just said, she just launched into these different options that I could possibly have, and they ranged from having a hysterectomy to having, you know, the inside of your womb burnt out, to going on these hormone tablets that have these horrible effects on your body, and the least invasive was having a Mirena coil fitted. And so she went through these, and there must have been ten options, which she just fired at me, and then said, "so what do you want?" And I'm going, "well ((laughs)) I don't know, what have I got? And, you know, you tell me." And it was a most peculiar experience, because, "well, I'll have this one because it's the least invasive. And a letter came back and said, "well, we have discussed with Mrs (name) whether she wants a hysterectomy, but she says she doesn't want it at this time." ((Laughs)) So it was just a most peculiar way of going about it...And then, just as I was about to go she said, "yes, because your doctor suspects that you've got endometriosis". Not that she suspects I've got endometriosis, but he thinks that I might have endometriosis...And then she said about, well if it is endometriosis then the Mirena coil may well sort it out...It was just a most peculiar way of going about it, and I came out just, well feeling I should have asked more, but it is only when you get to the end of the consultation that you have all the information. It just wasn't satisfying, you know, I came back and then I did go back to my doctor and I said, "well look," you know, "what does all this mean?" And he got the letter that he'd got from her. It did make sense. The end conclusion did seem to make sense, and I'm sure that's what she was recommending I have, but she couldn't say that, she could just say basically, "what do you want to do?" It wasn't very good, so I wasn't very impressed with her. (3:147-90)</p> <p>It makes sense and I'm willing to give it a go. I'm not a hundred per cent sure that it will work, because my elder sisters' had a Mirena coil fitted and she says that after a year her periods are better, but she says there is still some bleeding, it hasn't got rid of all the bleeding, so I'm a bit wary as to whether it will sort things out...And the point of treating the endometriosis is to stop the bleeding altogether, so then I'm not a hundred per cent convinced that it will</p>	
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	<p>work, but it might, it might work... (My sister) she had slightly different problems, in that she had, it was heaviness, but she didn't have any fibrous stuff coming away, and she did get some pain, but it was just that her periods were getting longer and longer I think, she wasn't getting much time in between. Yes. So that's why she had it fitted. It was the length rather than, but and heaviness, but not, not drastic pain, and not drastic heaviness, it was just that she wasn't getting a break...h she is very happy with it.</p> <p>It's done all that she wanted it to do...and the benefit that I've found in just having it, is that I do feel more relaxed about the contraception side of it, at least it's taken that worry away! ((Laughs)) (3:209-43)</p> <p>I think, I think acupuncture has done a lot for my general health, and I don't think the Mirena coil would have done that. And it got rid of the pain very quickly, the pain went, and I'm sure now that it did that, I feel as though it is that more than the hormone treatment, because it happened straight away on going for the treatment. And like today, I say well I've got a pain in my tummy, and if [acupuncturist] puts a pin in there I know it will go. And it's done wonders for my hip as well, so I think for my general health and the pain it's been great. But I have to say that I'd have the Mirena for the bleeding because it's so heavy, but whether it works. (3:255-65)</p> <p>(I'd have liked the Mirena coil earlier), yes, because it's been at the back of my mind anyway, because of the contraception side of it as well, because that would have been a disaster. And it just takes so long to get anything done, because, you know, the periods are every, every month and just getting the Mirena fitted took two months, because I had to have it fitted at a certain time of the month, so that's another two months gone, and then I think it's going to take at least six months to settle in, and in fact it could take a year. So I'm going to have to wait a year to see if it gets any better, and that just seems to be a lot of your life gone before you can...and they'll say, "oh well if this doesn't work we'll do something else," and I'm just thinking, "my word, how long away is that?" ((Laughs))... Yes. So it just seems to take such a long time, considering that I've had this trouble since my daughter was born, which is four years ago. (3:268-82)</p> <p>So, yes the acupuncture, I mean, I'd recommend it to other people that were</p>	
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	<p>worried about having acupuncture and, you know, in fact my mother in law is having trouble with her neck, and I said, "so why don't you go and have some acupuncture done?" Because it's done so much for me, that I thought, "well yes," so I do, you know, I do recommend it to people to try it. (3:289-94)</p> <p>It would fit, it would fit that if it is endometriosis, the fact that I've had it from very young and they had to put me on the pill young, to control the pain and the flow, and that makes sense that it's constitutional in that way, it's actually physical... Rather than just a hormone imbalance. I don't really know about endometriosis, does it just happen because of the hormone imbalance? I don't know, but once it, I don't know... I feel as though (acupuncture) it couldn't, if the damage is being, no, I understand that it can help you heal things, because it has definitely got rid of the groin pain for me, and I think that's all to do with when my daughter was born, and things like that. That's really helped, it did stimulate that to get better, all this pain round here and my back, that's sorted itself out, but I'm not sure about, if it's all this, the endometriosis is all this material, womb material that's dotted about that's bleeding, I don't see how it can get rid of that womb material. And all I can do is stop the bleeding, so that it doesn't do any further damage, further scarring. I could understand that the acupuncture would get, help the scarring to heal, but if it's continually being aggravated, I think you're asking a lot of the acupuncture to do it, because it's causing it all the time.</p> <p>Yes, and that's more than a balance isn't it, that's saying, "we'll put the womb into a permanent state of pregnancy," and you can't, you couldn't do that with acupuncture, because that would be upsetting your balance wouldn't it? That's not, that's not normal. ((Laughs))... So that's how I look on it, and perhaps if, you know, if you reach menopause and you've got all this damage to heal, then I think that acupuncture would help heal that, but it's just that, I don't think, yes, it couldn't switch it off. I suppose it could reduce it, but everybody must have a different level of blood flow that's normal, that's balanced? (3:339-80)</p> <p>If the Mirena doesn't work, if in six months time they say that there isn't any change in my periods since I had it fitted, then they are going to do a laparoscopy, and a hysteroscopy, to see if they can see what's wrong, and then, I suppose the ultimate is that I don't want to have a hysterectomy. But even that, I don't fully understand, because even if they take the whole lot out,</p>	
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	<p>and it is endometriosis, and there's bits of endometriosis lying about, I don't understand how they can, well it wouldn't get rid of all that, it would only get rid of the womb wouldn't it?</p> <p>So I'm not fully, I'm not sure what the steps are. Yes. I certainly don't want to go through all the, you know, the hormone treatment that they talk about, they change your voice ((laughs)), and basically turn you into a man, as far as I can gather... I don't need all that now. I'm quite, well I don't want to get rid of it all unless I have to, because I kind of think there is always some side effect to having surgery, no matter what has happened. So I don't want to have to have it, but if it made me feel, if it made me feel better in the long run then I would try, but I would have to be convinced that it would sort it. (3:386-422)</p> <p>I'm not as, it's not such a black hole, it's not as worrying, I feel as though something's been done, and because my general health is better I'm more able to cope, I'm much better able to cope with it. And also the hospital side of it, at least I am now in the system so somebody is doing something about it. They are taking it seriously. (3:426-32)</p> <p>Because a friend of mine was talking about it, and she's had really terrible trouble with her periods, they've been horrendous, and I said you ought to attempt to get on to it (study), because the acupuncture would, she's got all sorts of other things that are out of sync, and that would just sort all those problems, and then she'd have a better chance of getting well. And certainly, before I started this, I didn't know acupuncture could help with so much, and I think it does, I think it might work for everybody, so I tell people it's worth giving it a try. (3:489-97)</p>	
Julia	<p>I've no idea. I mean, when I started out with this, I had no expectations what so ever. I was just like, "right okay, we'll give it a shot." You know? "Anything's worth a try, yes we'll go for it." And it was comfortable and easy to do, so, you know, "let's give it a shot." And it's better than going to the doctors because they'll never do anything with you anyway, you know. So yes. (2:314-8)</p> <p>I don't feel as though I had a lot of information. It was, I saw the advert in the doctors, and it was like, oh, you know, I'd been talking to her about my periods, and you know, she'd handed me this prescription for these tablets, and it was,</p>	<p>...it's been so quick and dramatic, that it just doesn't seem right in a way! ((Laughs)) Well it doesn't, because I've sort of suffered that since [son] was born, which is six years. And then to go and have some treatment and more or less, well after, well I can't exactly remember my first period, but it wasn't bad, and it more or less instantly just, you know, I'm not taking lots of tablets or, you know, I'm just going and having these needles putting in ((laughs)), and it just seems a bit bizarre in a way! I've had these needles put in and become a changed woman! Can you imagine if you said that to somebody? "Oh, right yes!" ((Raises eyebrows, laughs))....And I'm thinking, "Is there something else? Is it a psychological thing maybe? Maybe it was a psychological thing and maybe, has something changed</p> <p>(ACUMEN Patient Information Sheet) Oh, I'd forgotten about that. Did I read it? ... I must have read it</p>

<p>so it was something, it was something like, you know, "try this." And I didn't know anything about acupuncture, bar that there were needles put in certain places of your body... Never spoke to anybody, oh, I did, I had a friend who had, I had a friend? I've still got a friend, but I don't see her very often, who had acupuncture to help her with her MS. Bar that I didn't know anybody else who'd had acupuncture, and she'd never explained it to me in great detail, what it's like or anything. So I just, you know. But I'm, I'm one of these people who, I am willing to try things, and I'm not silly about things, but I am willing to give things a go. So I can't really say more than that, and I'm still here! So I don't know. (2:439-61)</p> <p>I have thought about it, but I don't know. I mean, obviously I've mentioned to friends that I've been doing this, having acupuncture, but nobody's, you know, I don't think people know an awful lot about it to be able to comment to be honest. I think that's what it is, because they've not really said very much at all. So yes, people don't know. (3:175-9)</p> <p>Yes. Now, I did say to somebody who said to me, I was talking to my friend [name], and she had had acupuncture, she'd had problems with her neck, and I'd asked her, and she'd said, "well nobody knows, they just don't know. At the end of the day nobody knows, but if it works why question it!" ((Laughs)) "You know? Why do you have to go right down, right down to the roots and the nitty gritty, and you know, if it works, just accept it." And that's just me, you know, wanting to question everything down to the real nitty gritty and the finest grain! ((Laughs)) But I should just accept it. It works, so... No. But I am like that with a lot of things though. "But why?" "Because it's." "Well I know that, but why?" "Oh, I don't know." "Oh, right!" ((Laughs)) So I do, I do want to go down to the bare bones. But no I've accepted that it works, be happy. (3:214-28)</p> <p>And it's been good, so thank you very much for letting me take part in it. Because I remember it was a very big thing as well when I'd gone to [Dr name], I don't know, it was just important to me, and I'd have been really disappointed I think if I hadn't been included in the research, because I just felt there's got to be something, please let me try this, let me try this please I'm getting desperate. So yes, thank you. (3:303-8)</p>	<p>psychologically? Or has something chemically changed? Or has it been a big coincidence?" You know what a mean?... That's what I'm questioning. I'm questioning that because I don't know. Well, I'm worried because I'm thinking, "well, it's more than likely that it is the acupuncture that's changed things, that's made me feel better, so do I have to go on and have this for the rest of my life? So, do I have to go and have this on a regular basis for the rest of my life until I, you know, get the menopause? And then, if I do have to do that, is that such a bad thing, you know?" (2:282-308)</p> <p>[Acupuncturist] did also say that I may need a bit of a top up anyway. So I think after I've moved I'm going to go and see [acupuncturist]. (3:15-8)</p> <p>Just maybe a top-up now and again. But no, as far as [acupuncturist] is concerned, [acupuncturist] was saying that's it. You know, basically you're sorted. So the treatment's been done, and that's it, which I just find absolutely incredible, really, astonishing. (3:32-7)</p> <p>Well, I don't know. It's just that, like you say, it's like a magic wand, you know, you think, "well, how can 6 months of treatment carry you forward for the rest of your, you know, your, what's the word? Until, whatever, for the rest of your life basically?" Or until you get to, you know, I can't think this morning, what is it when you stop having periods? Menopause! ((Laughs)) Gosh, but that's, I mean, as far as I'm aware, that's what I understood from [acupuncturist]. (3:40-7)</p> <p>Well, [acupuncturist] said that because I've got this big stress in my life with moving, I think particularly because of that, I'll need to go and have a top-up after. And then I suppose we'll take it from there, which I don't mind, I mean, if I have to go and see [acupuncturist] once every few months, that doesn't matter, that's fine. (3:50-54)</p> <p>Well yes, my only concern is am I going to continue to feel better? You know is it, I mean it's a pessimistic reply, but you do don't you. It's caution isn't it? You think "oh, is it going to come back? Is it? Am I going to get a bad month, and then I'm going to have bad months again?"... What would I do? No, I don't know really... Well I'd go back and have some acupuncture, yes, yes. (3:120-30)</p>	<p>surely...I think a case study, maybe, of somebody who'd had it... Somebody who'd had it as a treatment and how they felt. That would be useful. And a bit more in depth information about how it does actually work. (2:462-82)</p>
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<p>Lyn</p>	<p>Well I've told a couple, but I don't really know many people that suffer like me, so, I have told a couple of people, you know, that it's working for me, and to give it a whirl, you know, I have said that. (2:246-51)</p> <p>Probably what the treatment entails. (Other women) they always ask me if it's painful, and things like that, and, "how often do you have to go? And in what way has it helped?" Really just asking general questions about it, because not many people I know have had acupuncture. I know a couple of people who've had it to help them stop smoking, and I work with a girl who's had it on her neck for arthritis, and she told me, when I was about to start, she said, "oh, it does work," because it worked for her arthritis. (2:254-62)</p> <p>Well, I just hope that each month it doesn't go back to what it was before. So, I'm just hopeful that it carries on as it is. It's manageable now, you know, I can cope. I just go into it hoping it's going to be okay really. (3:155-7)</p> <p>It's been excellent yes, definitely yes. Oh, yes, I have recommended it to people. Oh, yes. (3:182-6)</p> <p>Yes, so I think it's knowing what to expect really, but with regards the treatment, well I found it very good you know. But it's difficult to know what I would have wanted to know beforehand. I just went into it with an open mind hoping it would do the trick. I've just said to people, "try it, give it a whirl, you know, you're not losing anything." (3:198-201)</p>	<p>After the end of treatment, she did say to me, "see how it goes now," and she did say, "you may have a relapse and you may be okay." Well, I did have a relapse the last month, not this one, the one before, after my treatment finished, I did have like, I was on for the week, and then I had a flood on the Friday, I came on on the Monday, and had my 3 days and then a couple of days normal, and sort of tapering off, and then on the Friday I woke up and had this horrendous period pains, and I was laid in bed, and I just knew it was big clots, so I had to go to work well planned ((lots of sanitary protection)). So, I phoned her up the next day, because she said, "you need to come and have a fine tune." So, I've been back for one, and she said, "see how this month's been." Well I haven't had the clotting and the floods this time, so I just have to ring up and see what she says.... So I did pay for that one. (3:93-105)</p> <p>But I would say really for the 6 months it did address 90% of the problem, you know? So, it probably was long enough really, it's probably just me that has that little, but that used to happen before you see, every so often I used to have a sudden, it's like a clearing out I call it, you know, right big clots and that, so, but that was the first time in 6 months that that'd happened, you know, when the treatment had finished, so it makes you think that while I'm having it, it was working, you know what I mean?... Yes, once it stops, but she did say, "oh, you might need a fine tune," so I just went back and had one, and this last one was a lot better, like the previous ones, so. (3:108-20)</p> <p>Yes, she said, "play it by ear, and see how you are," and I might have to go back, but she said I might just have to have maybe 1 or 2 a year, just to keep things level... Yes, yes, I won't mind doing that. (3:122-5; 31)</p> <p>If it came back as bad as it was before, I would think, "right, I'll go and try another course of treatment (acupuncture) first, because it did address all the problems, so it obviously works for me". (3:145-7)</p>
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Appendix 50: The York Acupuncture for Back Pain GP Survey Questionnaire

	Questionnaire Items	Response category construction
1	With reference to this back pain research project, were there any factors which reduced your willingness to participate in the trial?	"Yes" "No" "Tick all boxes that are appropriate"
A.	Patients had only a 66.6% chance of being allocated to the acupuncture group	
B.	Your personal time constraints within the consultation	
C.	Your uncertainty of the benefits of acupuncture	
D.	Your uncertainty of the acupuncture service itself	
E.	Other ongoing treatment modalities	
F.	Difficulty for patients attending clinics (?travel)	
G.	Other factors	"please specify"
2	Were there any factors which increased your willingness to participate in the trial?	"Yes" "No" "Tick all boxes that are appropriate"
A.	Your belief in the potential benefits of acupuncture	
B.	Wish to support this research project	
C.	Positive feedback from patients who have received acupuncture	
D.	Acupuncture provided an additional treatment option	
E.	Other factors	"please specify"
3	Is there anything we could have done to encourage you to identify patients?	"please comment"
4	Did you find the main entry requirements for patients into the study:	"Yes" "No"
A.	Clear	
B.	Easy to apply	
C.	Easy to remember	
5	Has the introduction of the Acute Back Pain Service at the York District Hospital affected your referrals to this project?	"Yes" "No"
6	Does your practice have a current contract with a private physiotherapist, or other service (eg osteopath) related to back care?	"Yes" "No"
7	Has your practice made any new contracts with private physiotherapists which has affected your referrals to the project?	"Yes" "No"
8	Has your management of back pain changed over the last 3 years?	"Yes" "No"
9	If yes, then is this in response to:	"Yes" "No"
	The back pain project?	
	The fact that you have gone fund-holding/	
	The Clinical Standards Advisory Group (CSAG) report published in 1994?	
	The Royal College of General Practitioners (RCGP) guidelines, concerning the management of back pain in the primary care situation, which was sent to GP's in the Autumn of 1996?	
	Another reason	"please specify"
10	If your management of back pain has changed please indicate in what way:	"Increased" "decreased"
	Prescription of analgesics	
	Prescription of anti-inflammatories	
	Prescription of physiotherapy	
	Advised exercise	
	Advised rest	"please specify"
	Other	
11	Over the course of the project we have tried to maintain a high profile with you. Has this been effective? Do you recall	"Yes" "No" "tick all boxes which are appropriate"
	Project reminder letters	
	Back pain logo	
	Project updates	
	The "green" forms	
	Personal practice visits	
12	Are there any other examples you can recall which have been particularly effective?:	(white space provided)
13	If a similar acupuncture service was set up in York would you consider referring appropriate patients?	"Yes" "No"
14	How would you see this being funded?	"Yes" "No"
	GP contract with acupuncturist	
	Patients self funding	
15	We are very grateful for your participation in this project and would welcome any further comments you may wish to make, e.g. with respect to the design, management and execution of the project.	"Comments:"

Appendix 51

Cover Letter for the ACUMEN GP Survey

ACUMEN - A Research Collaboration

THE UNIVERSITY of York

Department of Health Sciences

FOUNDATION for TRADITIONAL
CHINESE MEDICINE

Registered Charity
No. 702083



MEDICAL CARE
RESEARCH UNIT

University of Sheffield



ACUMEN Research Centre

122A Acomb Road, York, YO24 4EY

Tel: 01904 781630

20th April 2001

Dear Dr

Survey to identify barriers to active GP participation in the York and Selby acupuncture for menorrhagia exploratory trial (ACUMEN)

This survey is part of a DPhil project supervised collaboratively between the Department of Health Sciences, University of York, the York-based research Foundation for Traditional Chinese Medicine, and the Medical Care Research Unit, University of Sheffield. The survey aims to identify barriers to active GP participation in the York and Selby acupuncture for menorrhagia (ACUMEN) exploratory trial, and in so doing inform future research as to the feasibility of a full-scale trial that relies upon GPs to initiate patient recruitment.

Your answers to this questionnaire are important, as they will determine the design and conduct of future research in this area. It is important therefore that you respond as candidly as possible. And it is for this reason that the questionnaire is confidential. A unique study number will identify your questionnaire, and all data stored on computer will be anonymised and coded with this unique number. In recognition of the value of your responses and the time given by you to support the survey, all GPs returning a completed questionnaire will be entered into the prize draw to win a case of fine wines.

We thank you in advance for your support of the **ACUMEN GP Survey** and we wish you the very best of luck in the prize draw.

Yours sincerely

Elison Gamon
Phil Student,
University of York

Prof. Ian Russell
Academic Supervisor
University of York

Dr Hugh MacPherson
Director, Foundation for
Traditional Chinese
Medicine

Ms Kate Thomas
Academic Co-Supervisor
University of Sheffield

Dr Manuela Fontebasso
GP Advisor to Project

Appendix 52

ACUMEN GP Postal Questionnaire Survey - *version for GPs participating in ACUMEN*

*Please note that the original version was printed on A3 lilac paper
and folded to create a booklet format.*



GP ID: --

York and Selby Acupuncture for Menorrhagia Exploratory Trial

CONFIDENTIAL GP QUESTIONNAIRE

With reference to the Acupuncture for Menorrhagia Exploratory Trial:
(Summary of the study and flow diagram printed on the reverse as a reminder)

1. Did any of the following factors reduce your willingness to participate in the Acupuncture for Menorrhagia trial?

(Please circle one number on each line)

	Yes	No	Poss-ibly
A. Menorrhagia is not an area of specific interest for you	1	2	3
B. Acupuncture is not a therapy of interest to you	1	2	3
C. You see few eligible patients	1	2	3
D. Patients had only a 50% chance of being allocated to the acupuncture group	1	2	3
E. Your personal time constraints within the consultation	1	2	3
F. Your uncertainty of the benefits of acupuncture for menorrhagia	1	2	3
G. Your uncertainty about the acupuncture service itself	1	2	3
H. Your uncertainty as to whether acupuncture would be acceptable to patients	1	2	3
I. Other ongoing treatment modalities	1	2	3
J. Difficulty for patients attending acupuncture clinics (?travel)	1	2	3
K. Dislike the trial design (pragmatic RCT)	1	2	3
L. Involvement in experimental studies disrupts doctor-patient relationship	1	2	3
M. Insufficient financial compensation	1	2	3
N. Involved in too many research projects	1	2	3
O. Other factors (please specify in the box below)	1	2	3



**Complete and Return this Questionnaire NOW
and You could Win a
Selection of 6 Fine Wines.**



2. Did any of the following factors increase your willingness to participate in the Acupuncture for Menorrhagia trial?

(Please circle one number on each line)

	Yes	No	Poss-ibly
A. Your belief in the potential benefits of acupuncture	1	2	3
B. Patient interest	1	2	3
C. Your wish to support this research project	1	2	3
D. The involvement of a GP advisor	1	2	3
E. Positive feedback from patients who have received acupuncture	1	2	3
F. Acupuncture provided an additional treatment option	1	2	3
G. Positive personal experience of acupuncture	1	2	3
H. The pragmatic trial design	1	2	3
I. Financial compensation	1	2	3
J. ACUMEN Newsletters	1	2	3
K. Other factors (please specify in the box below)	1	2	3

3. Did you find the **trial protocol** clear and straightforward?

(Please tick one)

Yes ☐ 1

No ☐ 2

Fairly ☐ 3

4. Did you find the **entry criteria for patients** into the study clear and straightforward?

(Please tick one)

Yes ☐ 1

No ☐ 2

Fairly ☐ 3

5. **Roughly what proportion of eligible patients did you ask to consider taking part in the trial** (whether or not they agreed to consider participating)? (Please tick one)

☐ 1 100% ☐ 2 75% ☐ 3 50% ☐ 4 25% ☐ 5 10% ☐ 6 <10%

6. What do you think were **your reasons for not asking all your eligible patients** to consider taking part in the trial? (Please tick all that apply)

☐ a) Time constraints

☐ b) Not sure if patient would find acupuncture an acceptable treatment option (too unusual)

☐ c) Patient distress (e.g. life events)

☐ d) Disruption of doctor patient relationship

☐ e) Forgot!

☐ f) Your confidence in efficacy of available medical treatments

☐ g) Patient co-morbidity

☐ h) Patient likely to find attending acupuncture clinics too difficult (?travel/time)

☐ i) Other (please give details):

7. This question asks you to think about **different recruitment methods**. **A) ACUMEN** asked you to invite eligible patients to consider taking part during a consultation (see flow diagram on the reverse of the questionnaire). **B) Would you have found it easier to identify eligible patients on your practice list and then have written to them inviting them to contact the researcher directly** (if we had provided materials and funding)?

Yes ☐ 1

No ☐ 2

Possibly ☐ 3

8. Is there **anything else we could have done to encourage you to ask patients** to consider taking part in the trial? Please comment:

.....

.....

9. Over the course of the study we have tried to maintain a high profile with you. Has this been effective?

Yes ☐ 1

No ☐ 2

Fairly ☐ 3

10. Do you recall.....? (Please circle one number on each line)	Yes	No
A. ACUMEN Logo	1	2
B. ACUMEN study colour	1	2
C. Phone calls from the researcher	1	2
D. Patient acknowledgement letters	1	2
E. ACUMEN Newsletters	1	2
F. ACUMEN Posters for the surgery waiting room	1	2
G. ACUMEN Information Packs	1	2
H. Other (please specify):	1	2

11. How **TRUE** or **FALSE** is **each** of the following statements for you?

(Please circle one number on each line)

<i>I would feel confident recruiting patients for a trial looking at.....</i>	Definitely True	Mostly True	Not sure	Mostly False	Definitely False
a. Acupuncture for low back pain	1	2	3	4	5
b. Acupuncture for menorrhagia	1	2	3	4	5
c. Acupuncture for depression	1	2	3	4	5
d. Acupuncture for migraine	1	2	3	4	5

Thank you for your help with this questionnaire. In recognition of your time, the name of each doctor returning a completed questionnaire will be entered into the prize draw for a selection of 6 fine wines. Good Luck!

Acupuncture for Menorrhagia Exploratory Trial

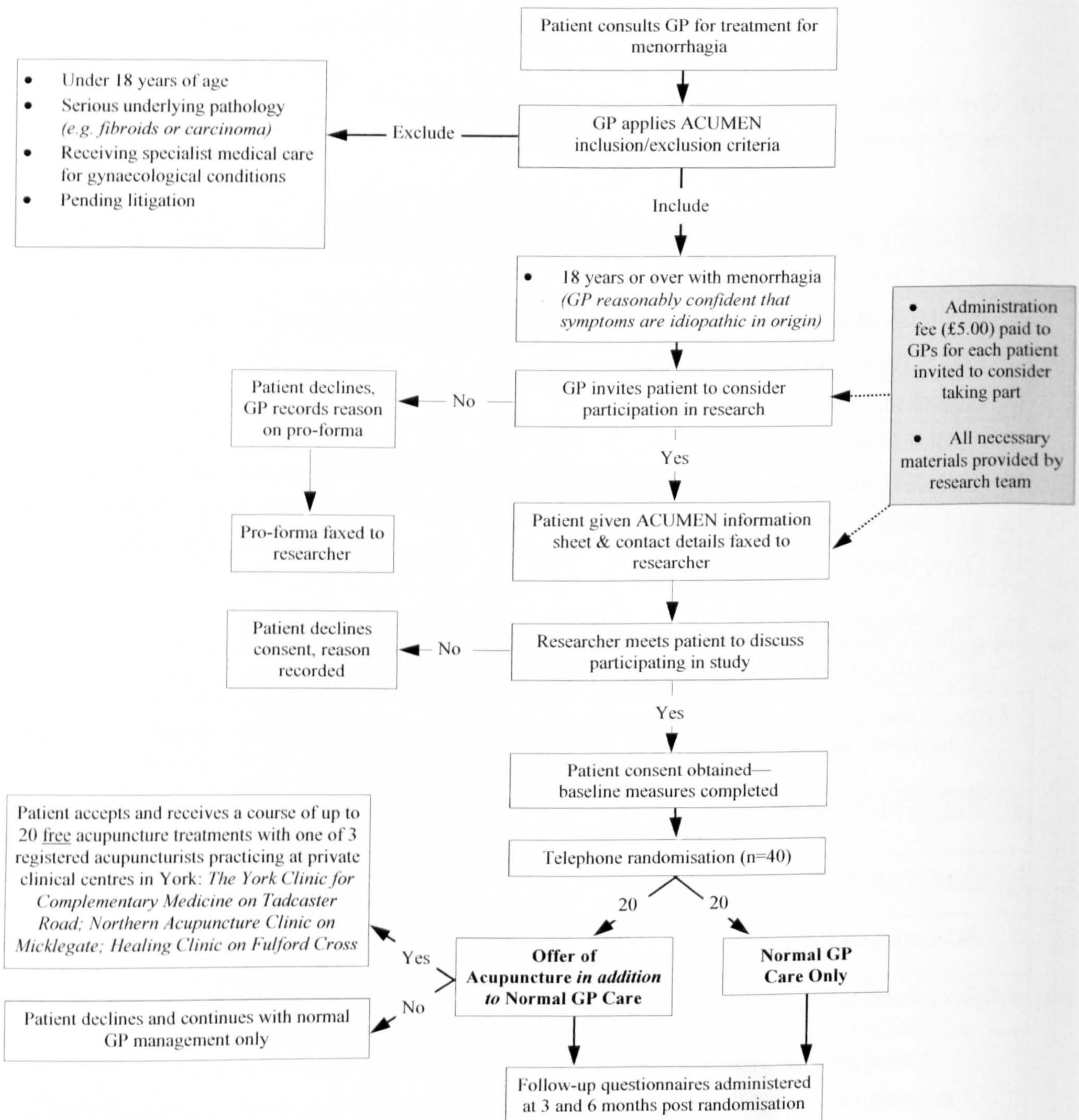
To assess the feasibility of a full-scale trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care

Summary:

A 12 month exploratory trial to develop and test a protocol for the rigorous evaluation of offering acupuncture to patients with menorrhagia assessed as suitable for management in primary care.

A parallel qualitative study, based on interviews with a subset of six patients accepting the offer of acupuncture, will examine the acceptability and appropriateness of acupuncture treatment for menorrhagia.

Figure 1: Trial design



Appendix 53

ACUMEN GP Postal Questionnaire Survey - *version for GPs not participating in ACUMEN*

Please note that the original version was printed on A4 lilac paper.



GP ID: _ _ _ _

York and Selby Acupuncture for Menorrhagia Exploratory Trial

CONFIDENTIAL GP QUESTIONNAIRE



**Complete and Return this Questionnaire NOW
and You could Win a
Selection of 6 Fine Wines.**



With reference to the Acupuncture for Menorrhagia Exploratory Trial (ACUMEN):
(Summary of the study and flow diagram printed on the reverse as a reminder)

1. Did any of the following factors reduce your willingness to participate in the Acupuncture for Menorrhagia trial?

(Please circle one number on each line)

	Yes	No	Poss-ibly
A. Menorrhagia is not an area of specific interest for you	1	2	3
B. Acupuncture is not a therapy of interest to you	1	2	3
C. You see few eligible patients	1	2	3
D. Patients had only a 50% chance of being allocated to the acupuncture group	1	2	3
E. Your personal time constraints within the consultation	1	2	3
F. Your uncertainty of the benefits of acupuncture for menorrhagia	1	2	3
G. Your uncertainty about the acupuncture service itself	1	2	3
H. Your uncertainty as to whether acupuncture would be acceptable to patients	1	2	3
I. Other ongoing treatment modalities	1	2	3
J. Difficulty for patients attending acupuncture clinics (?travel)	1	2	3
K. Dislike the trial design (pragmatic RCT)	1	2	3
L. Involvement in experimental studies disrupts doctor-patient relationship	1	2	3
M. Insufficient financial compensation	1	2	3
N. Involved in too many research projects	1	2	3
O. Other factors (please specify in the box below)	1	2	3

Acupuncture for Menorrhagia Exploratory Trial

To assess the feasibility of a full-scale trial to evaluate the clinical and economic benefits of offering acupuncture to patients with menorrhagia in primary care

Summary:

A 12 month exploratory trial to develop and test a protocol for the rigorous evaluation of offering acupuncture to patients with menorrhagia assessed as suitable for management in primary care.

A parallel qualitative study, based on interviews with a subset of six patients accepting the offer of acupuncture, will examine the acceptability and appropriateness of acupuncture treatment for menorrhagia.

Figure 1: Trial design

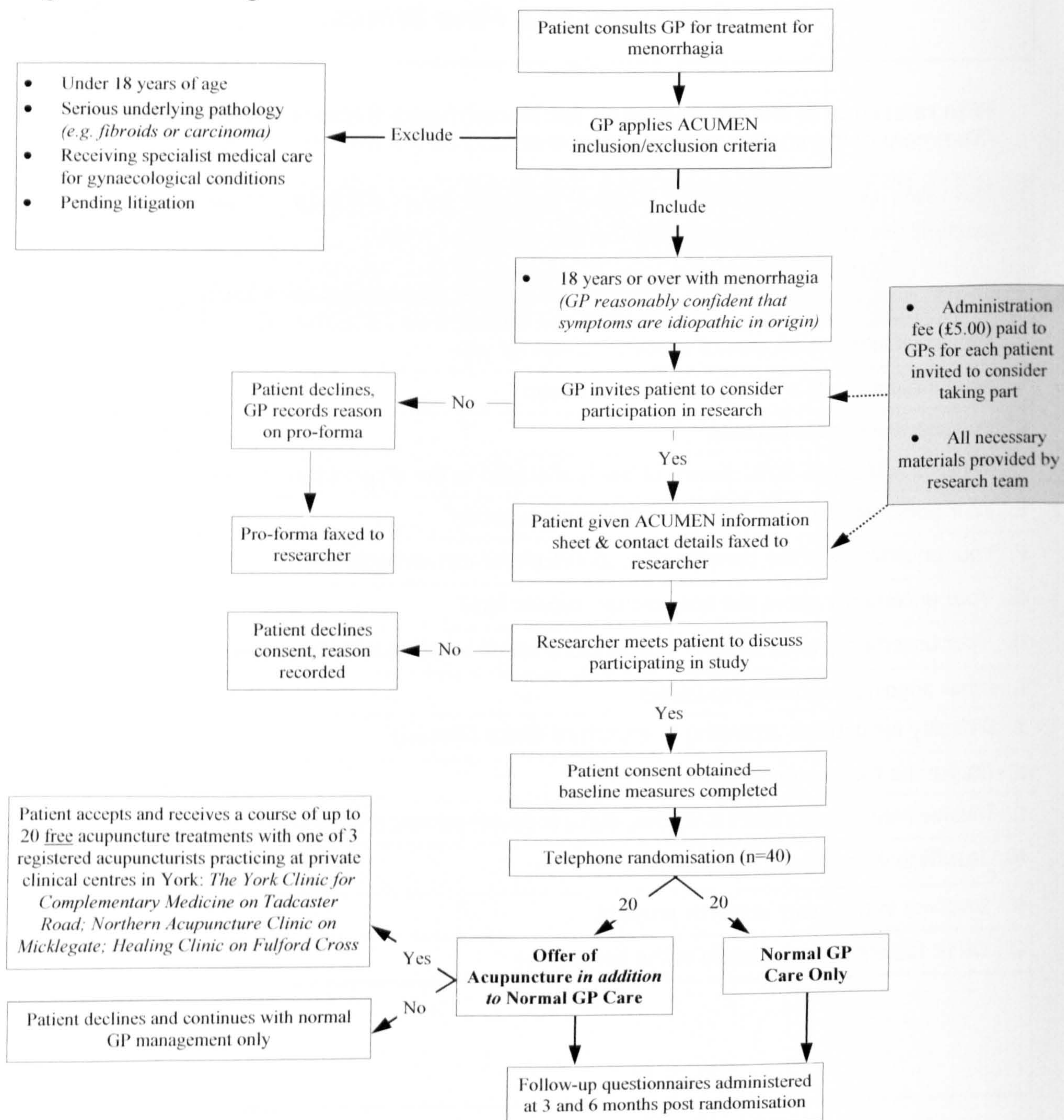


Table 49b: Factors that reduced ACUMEN GP willingness to participate in ACUMEN - *treating apparently partial answers as if no answers at all*

	Factors in descending order of popularity with the most frequent response category per factor highlighted in bold	Yes Valid percent (number)	No Valid percent (number)	Poss Valid percent (number)	Total
1	Other ongoing treatment modalities	45.5 (10/22)	40.9 (9/22)	13.6 (3/22)	22/23
2	Personal time constraints within the consultation	45.5 (10/22)	45.5 (10/22)	9.1 (2/22)	22/23
3	See few eligible patients	40.9 (9/22)	54.5 (12/22)	4.5 (1/22)	22/23
4	Uncertainty of the benefits of acupuncture for menorrhagia	31.8 (7/22)	63.6 (14/22)	4.5 (1/22)	22/23
5	Uncertainty about the acupuncture service itself	19 (4/21)	76.2 (16/21)	4.8 (1/21)	21/23
6	Uncertainty as to whether acupuncture would be acceptable to patients	18.2 (4/22)	68.2 (15/22)	13.6 (3/22)	22/23
7	Menorrhagia is not an area of specific interest	13.6 (3/22)	77.3 (17/22)	9.1 (2/22)	22/23
8	Involved in too many research projects	13.6 (3/22)	77.3 (17/22)	9.1 (2/22)	22/23
9	Patients had only a 50% chance of being allocated to the acupuncture group	13.6 (3/22)	81.8 (18/22)	4.5 (1/22)	22/23
10	Difficulty for patients attending acupuncture clinics (?travel)	9.1 (2/22)	81.8 (18/22)	9.1 (2/22)	22/23
11	Acupuncture is not a therapy of interest	4.5 (1/22)	90.9 (20/22)	4.5 (1/22)	22/23
12	Insufficient financial compensation	0 (0/22)	86.4 (19/22)	13.6 (3/22)	22/23
13	Involvement in experimental studies disrupts doctor-patient relationship	0 (0/22)	90.0 (20/22)	9.1 (2/22)	22/23
14	Dislike the trial design (pragmatic RCT)	0 (0/21)	95.2 (20/21)	4.8 (1/21)	21/23

Table 50b: Factors that reduced Non-ACUMEN GP willingness to participate in ACUMEN - treating apparently partial answers as if no answers at all

	Factors in descending order of popularity with the most frequent response category per factor highlighted in bold	Yes Valid percent (number)	No Valid percent (number)	Poss Valid percent (number)	Total
1	Personal time constraints within the consultation	67.2 (41/61)	19.7 (12/61)	13.1 (8/61)	61/63
2	See few eligible patients	54.2 (32/59)	35.6 (21/59)	10.2 (6/59)	59/63
3	Uncertainty of the benefits of acupuncture for menorrhagia	54.1 (33/61)	31.1 (19/61)	14.8 (9/61)	61/63
4	Other ongoing treatment modalities	46.6 (27/58)	43.1 (25/58)	10.3 (6/58)	58/63
5	Uncertainty about the acupuncture service itself	32.8 (19/58)	56.9 (33/58)	10.3 (6/58)	58/63
6	Difficulty for patients attending acupuncture clinics (?travel)	28.8 (17/59)	44.1 (26/59)	27.1 (16/59)	59/63
7	Uncertainty as to whether acupuncture would be acceptable to patients	25.9 (15/58)	51.7 (30/58)	22.4 (13/58)	58/63
8	Menorrhagia is not an area of specific interest	24.6 (14/57)	63.2 (36/57)	12.3 (7/57)	57/63
9	Insufficient financial compensation	17.2 (10/58)	65.5 (38/58)	17.2 (10/58)	58/63
10	Involved in too many research projects	14 (8/57)	75.4 (43/57)	10.5 (6/57)	57/63
11	Patients had only a 50% chance of being allocated to the acupuncture group	10.7 (6/56)	75 (42/56)	14.3 (8/56)	56/63
12	Acupuncture is not a therapy of interest	8.6 (5/58)	81 (47/58)	10.3 (6/58)	58/63
13	Involvement in experimental studies disrupts doctor-patient relationship	5.3 (3/57)	82.5 (47/57)	12.3 (3/57)	57/63
14	Dislike the trial design (pragmatic RCT)	0 (0/52)	94.2 (49/52)	5.8 (3/52)	52/63

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