

Supplementary

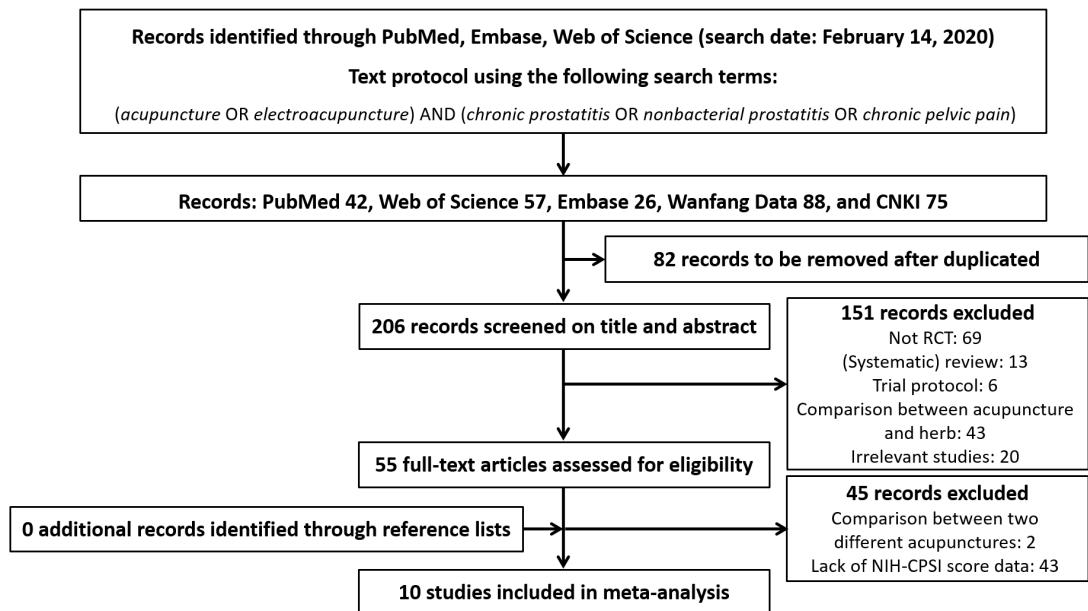


Figure S1 Flow diagram of search strategy.

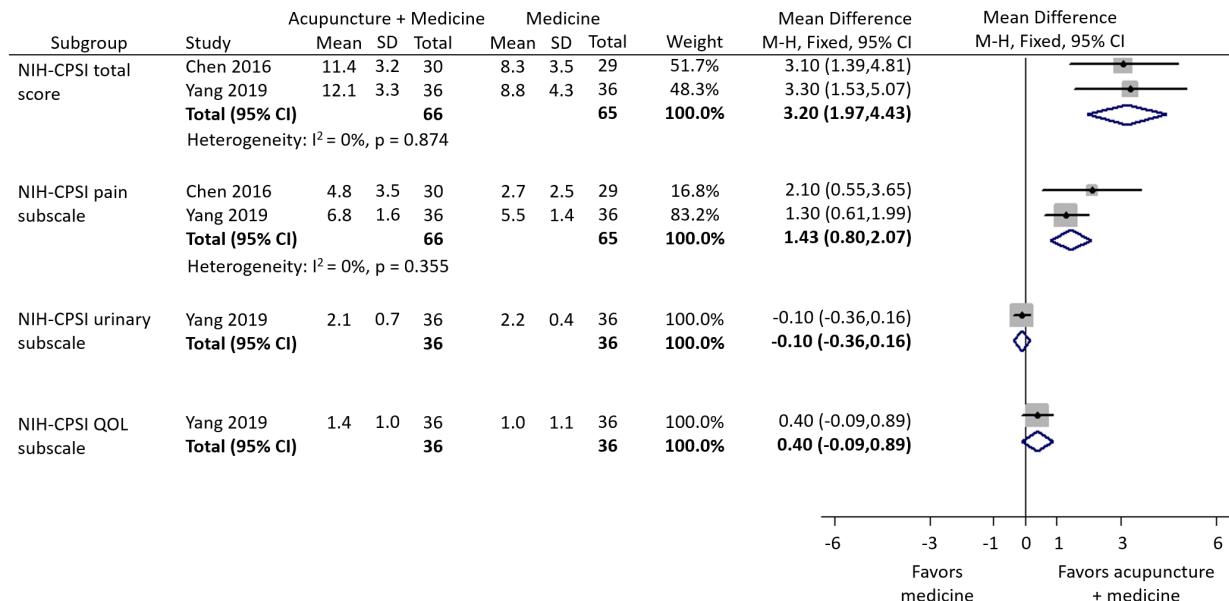


Figure S2 Forest plot of comparisons of NIH-CPSI score reduction between acupuncture combined with medication and medication monotherapy groups. NIH-CPSI, National Institute of Health-Chronic Prostatitis Index.

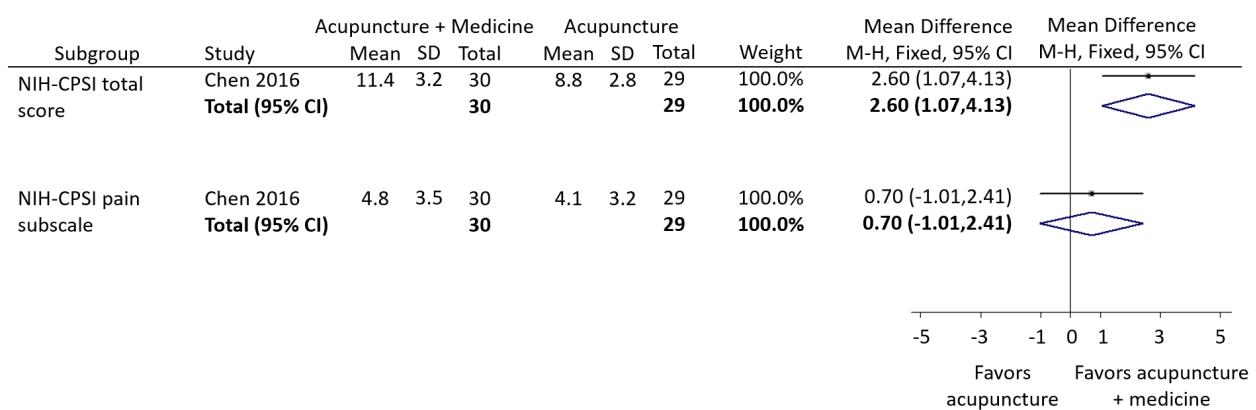


Figure S3 Forest plot of comparisons of NIH-CPSI score reduction between acupuncture combined with medication and acupuncture monotherapy groups. NIH-CPSI, National Institute of Health-Chronic Prostatitis Index.

Table S1 The baseline characteristics of the patients of the included studies

Study	Inclusion criteria	Sample size (acupuncture vs. control)	Acupuncture type	Treatment session	Treatment time	Control intervention	Follow-up time
Lee, 2008	CP/CPPS	44:45	Acupuncture	Twice a week for 10 weeks	20 min	Sham acupuncture	5, 10, 14, 22, 34 weeks
Lee, 2009	CP/CPPS (category III)	12:12	Electroacupuncture	Twice a week for 6 weeks	20 min	Sham electroacupuncture	3, 6 weeks
Sahin, 2015	CP/CPPS (category III B)	45:46	Acupuncture	Every week for 6 weeks	20 min	Sham acupuncture	6, 8, 16, 24 weeks
Qin, 2018	CP/CPPS	34:34	Acupuncture	3 times a week for 8 weeks	30 min	Sham acupuncture	8, 20, 32 weeks
Kucuk, 2015	CP/CPPS (category III B)	26:28	Acupuncture	Twice a week for 7 weeks	NA	Levofloxacin 500 mg qd + ibuprofen 200 mg bid	17 weeks
Geng, 2016	CP/CPPS (category III B)	28:28	Acupuncture	Every 2 days for 4 weeks	30 min	Tamsulosin 0.2mg qd	4 weeks
Huang, 2019	CP/CPPS	60:60	Electroacupuncture	8 times per 10 days for 4 weeks	30 min	Prostat 74mg bid + sparfloxacin 100mg bid	4 weeks
Zhao, 2014	CP/CPPS (category III B)	29:28:29	Acupuncture	Twice a week for 4 weeks	20 min	Sham acupuncture/ tamsulosin 0.2 mg qd	4 weeks
Chen, 2016	CP/CPPS	29:29:30	Acupuncture	Every day for 4 weeks	30 min	Lewfloxacin 200 mg bid + tamsulosin 0.2 mg qd/ acupuncture + lewfloxacin 200 mg bid + tamsulosin 0.2 mg qd	4 weeks
Yang, 2019	CP	36:36	Acupuncture + lewfloxacin 200 mg bid + tamsulosin 0.2 mg qd	Every day for 4 weeks	30 min	Lewfloxacin 200 mg bid + tamsulosin 0.2 mg qd	4 weeks

CP/CPPS, chronic prostatitis/chronic pelvic pain syndrome; min, minutes, mg, milligram, qd, quaque die (Latin), bid, bis in die (Latin).

Table S2 The chosen acupoints of the included studies

Study	Acupoints
Lee, 2008	CV1 (Huiyin), CV4 (Guanyuan), SP6 (Sanjinjiao), SP9 (Yinlingquan)
Lee, 2009	BL32 (Ciliao), BL33 (Zhongliao), GB30 (Huantiao)
Sahin, 2015	BL33 (Zhongliao), BL34 (Xialiao), BL54 (Zhibian), CV1 (Huiyin), CV4 (Guanyuan), SP6 (Sanyinjiao), SP9 (Yinlingquan)
Qin, 2018	BL23 (Shenshu), BL33 (Zhongliao), BL35 (Huiyang), SP6 (Sanyinjiao)
Kucuk, 2015	UB28 (Pangguangshu), GB41 (Zulinqi), LI4 (Taichong), LI4 (Hegu), SP6 (Sanyinjiao), SP8 (Diji)
Geng, 2016	BL6 (Chengguang), BL7 (Tongtian), BL28 (Pangguangshu), BL32 (Ciliao), CV3 (Zhongji), CV4 (Guanyuan), GV20 (Baihui), GV21 (Qianding), GV22 (Xinhui), GV24 (Shenting)
Huang, 2019	LR3 (Taichong), ST36 (Zusanli), KI11 (Henggu), KI12 (Dahe), CV3 (Zhongji), CV4 (Guanyuan), SP6 (Sanyinjiao), SP9 (Yinlingquan), BL18 (Ganshu), BL23 (Shenshu), BL28 (Pangguangshu), BL32 (Ciliao), BL54 (Zhibian)
Zhao, 2014	LU7 (Lieque), SI3 (Houxi), SP4 (Gongsun)
Chen, 2016	EX-HN1(Sishencong), GV20 (Baihui), CV3 (Zhongji), CV4 (Guanyuan), CV6 (Qihai), SP6 (Sanyinjiao), SP9 (Yinlingquan), GB34 (Yanglingquan), ST36 (Zusanli)
Yang, 2019	CV1 (Huiyin), CV3 (Zhongji), CV4 (Guanyuan), BL23 (Shenshu), BL28 (Pangguangshu), BL32 (Ciliao), SP6 (Sanyinjiao)