

Distintas referencias bibliográficas demuestran que la punción seca es igual de efectiva que la infiltración de sustancias como la toxina botulínica en el tratamiento del dolor miofascial.

Aquí se señalan algunas de ellas:

1. Jaeger B, Skootsky SA. Double blind, controlled study of different myofascial trigger point injection techniques. *Pain*. 1987; (4): S292.
2. Garvey TA, Marks MR, Wiesel SW. A prospective, randomized, double-blind evaluation of trigger-point injection therapy for low-back pain. *Spine*. 1989 Sep; 14(9): 962-4.
3. Hong C-Z. Lidocaine injection versus dry needling to myofascial trigger point. The importance of the local twitch response. *Ann J Phys Med Rehabil*. 1994 Jul-Aug; 73 (4): 256-63.
4. Ga H, Choi JH, Park CH, Yoon HJ. Acupuncture needling versus lidocaine injection of trigger points in myofascial pain syndrome in elderly patients-a randomised controlled trial. *Acupunct Med*. 2007 Dec; 25(4): 130-6.
5. Venancio Rde A, Alencar FG, Zamperini C. Different substances and dry-needling injections in patients with myofascial pain and headaches. *Cranio*. 2008 Apr; 26(2): 96-103.
6. Venancio Rde A, Alencar FG, Jr., Zamperini C. Botulinum toxin, lidocaine, and dry-needling injections in patients with myofascial pain and headaches. *Cranio*. 2009 Jan; 27(1): 46-53.