

Supplementary Table 1: Main characteristics of included studies

Author, Year, Country	Aim, Sample size, Study design	Acupressure point, Treatment	CT regimen, Intervention, Control	Participant characteristics (Inclusion, exclusion criteria), Mean age of participants in years (SD)	Emetogenicity rating, Tools, Outcome	Key findings, Adverse report
<ul style="list-style-type: none"> • Dibble, 2000, USA [26] 	<ul style="list-style-type: none"> • To compare differences in nausea experience and intensity in women undergoing chemotherapy for breast cancer between those receiving usual care plus acupressure training and treatment and those receiving only usual care • 17 (I-8, C-9) • Parallel design 	<ul style="list-style-type: none"> • Neiguan (P6) + Zusanli (ST36) • Acupressure with finger for maximum of three minutes. Each point was held in the morning and as needed throughout the day. 	<ul style="list-style-type: none"> • CMF (Combination of Cyclophosphamide, methotrexate, and fluorouracil) or doxorubicin contained • Acupressure + antiemetic • Antiemetic 	<ul style="list-style-type: none"> • Participants were receiving either CMF or a regimen containing doxorubicin, nausea with previous chemotherapy, ability to communicate (both oral and written) in English, and willingness to participate in the study. • 49.5 (6.0) years 	<ul style="list-style-type: none"> • Moderate/ High • Index of nausea and vomiting and retching (INVR) • Acute nausea, Delayed nausea 	<ul style="list-style-type: none"> • Significant differences existed between the two groups in regard to nausea experience ($p < 0.01$) and nausea intensity ($p < 0.04$) during the first 10 days of the chemotherapy cycle, with the acupressure group reporting less intensity and experience of nausea. • No adverse effects
<ul style="list-style-type: none"> • Roscoe, 2005, USA [29] 	<ul style="list-style-type: none"> • To assess the effectiveness of acustimulation bands for control of chemotherapy-induced nausea • 63 (I-32, C-31) • Parallel design 	<ul style="list-style-type: none"> • Neiguan (P6) • Acupressure with band worn for five days 	<ul style="list-style-type: none"> • Doxorubicin, Cyclophosphamide • Acupressure + Antiemetic • Acupressure (sham) + Antiemetic 	<ul style="list-style-type: none"> • Women with breast cancer 18 years of age or older who were about to receive their second doxorubicin-based chemotherapy treatment at one of four Rochester area cancer centers and who experienced nausea and/or vomiting after their first chemotherapy cycle were potentially eligible to participate. 	<ul style="list-style-type: none"> • High • 7-point rating scale • Acute nausea, Delayed nausea 	<ul style="list-style-type: none"> • There were no significant differences in any of these study measures among the three treatment conditions ($P > 0.1$ for all). Study results do not support the hypothesis that acustimulation bands

				<ul style="list-style-type: none"> • Patients with clinical evidence of bowel obstruction, symptomatic brain metastases, or who were using a cardiac pacemaker or undergoing concurrent radiotherapy or interferon treatment were excluded. • 49.5 years 		<p>are efficacious as an adjunct to pharmacological antiemetics for control of chemotherapy-related nausea in female breast cancer patients.</p> <ul style="list-style-type: none"> • Not reported
<ul style="list-style-type: none"> • Molassiotis, 2007, UK [31] 	<ul style="list-style-type: none"> • To evaluate the effectiveness of using acupressure in Pericardium 6 (Neiguan) acupoint in managing chemotherapy-induced nausea and vomiting. • 36 (I-17, C-19) • Parallel design 	<ul style="list-style-type: none"> • Neiguan (P6) • Acupressure with band worn for five days 	<ul style="list-style-type: none"> • FEC (Combination of Fluorouracil, Epirubicin, Cyclophosphamide), CMF • Acupressure + Antiemetic • Antiemetic 	<ul style="list-style-type: none"> • Participants were with breast cancer diagnosis, stage of cancer I—III, no prior experience of chemotherapy, receiving Doxorubicin and Cyclophosphamide or equivalent Epirubicin protocols, and willing to sign a consent form. • Patients were excluded if they received palliative chemotherapy, life expectancy was less than 3 months, had metastatic disease, suffered from bowel obstruction, were undergoing concurrent radiotherapy or had lymphoedema of the arms. • 49.5 (10.5) years 	<ul style="list-style-type: none"> • Moderate/High • Index of nausea and vomiting and retching (INVR) • Acute vomiting, Acute nausea, Delayed vomiting, Delayed nausea 	<ul style="list-style-type: none"> • It was found that nausea and retching experience, and nausea, vomiting and retching occurrence and distress were all significantly lower in the experimental group compared to the control group (P<0.05). The only exception was with the vomiting experience, which was close to significance (P=0.06). • No adverse effects
<ul style="list-style-type: none"> • Suh, 2012, South Korea [30] 	<ul style="list-style-type: none"> • To evaluate the effects of pericardium 6 (P6) acupressure and nurse-provided counseling on chemotherapy-induced nausea and vomiting (CINV) 	<ul style="list-style-type: none"> • Neiguan (P6) • Acupressure with band worn for five days 	<ul style="list-style-type: none"> • FAC (Combination of Fluorouracil, Adriamycin, Cyclophosphamide), ACT (Combination of Adriamycin, Cyclophosphamide, Taxol) 	<ul style="list-style-type: none"> • Participants were older than 20 years, diagnosed with breast cancer stage I—III, previously received definitive breast surgery, currently undergoing the second cycle of adjuvant chemotherapy with either the FAC or ACT regimen, had more than mild levels of nausea and vomiting with the first cycle of chemotherapy, had no problem 	<ul style="list-style-type: none"> • Moderate/High • Index of nausea and vomiting and retching (INVR) • Acute nausea and vomiting, Delayed nausea and vomiting 	<ul style="list-style-type: none"> • The levels of CINV were significantly different among the groups from day 2 to day 5. The effects of acupressure were proven from day 2 to day 5, and the effects of nurse-provided counselling were

	<p>in patients with breast cancer.</p> <ul style="list-style-type: none"> • 48 (I-25, C-23) • Parallel design 		<ul style="list-style-type: none"> • Acupressure + Antiemetic • Acupressure (sham) + Antiemetic 	<p>communicating in Korean, and willing to participate in the study.</p> <ul style="list-style-type: none"> • Patients with chronic diseases such as diabetes, hypertension, arthritis, or psychiatric diseases or with a history of other types of cancer were not eligible. • 45.35 (8.66) years 		<p>proven on day 4 and were close to significance level on day 5.</p> <ul style="list-style-type: none"> • Not reported
<ul style="list-style-type: none"> • Eghbali, 2016, Iran [32] 	<ul style="list-style-type: none"> • To determine the effect of auricular acupressure in relieving nausea and vomiting among the women who received chemotherapy. • 48 (I-24, C-24) • Crossover design 	<ul style="list-style-type: none"> • Point zero, stomach, brainstem, shenmen, and cardia of ear. • Before chemotherapy, both auricular of pinna were initially cleansed by 75% alcohol and then point zero, stomach, brainstem, shenmen, and cardia that are effective for controlling nausea and vomiting were identified. Then, an ear seed was placed on each point and pasted it with a special non-latex adhesive. Afterwards, the patients were trained and asked to 	<ul style="list-style-type: none"> • Cisplatin and Anthracycline • Auricular Acupressure + Antiemetic + Antinauseants • Antiemetic + Antinauseants 	<ul style="list-style-type: none"> • Participants were aged more than 18 years, receiving chemotherapy with mild to severe stages using such as cisplatin and anthracycline, have a normal, uninjured and healthy state, do not have any record of using acupressure within the last three months, do not take any anti-nausea and vomiting agents (other than those prescribed by their own doctor), and do not suffer from nausea-inducing diseases like liver and kidney disorders, digestive problems, acute hepatitis B, obstruction of digestive system, and cerebral malignancies. • Patients who were receiving total radiotherapy in the upper stomach or ear and those who were not willing to participate in the research were excluded. • 46.02 (7.23) years 	<ul style="list-style-type: none"> • Moderate/High • Morrow standard questionnaire (7-degree Likert scale) • Acute nausea and vomiting, Delayed nausea and vomiting, Frequency of acute and delayed nausea, Frequency of acute and delayed vomiting 	<ul style="list-style-type: none"> • The use of auricular acupressure led to the decrease in the number and intensity of nausea and vomiting in both the acute and delayed phases in experimental group which were significantly lower than the control group (P = 0/001). • No adverse effects

		<p>press each point at least 3 times every day (morning, noon and night) for 3 min. The pressure techniques included a mild stimulation through a stable and gradually firmer pressure until started having mild tingling sensation or a slight sense of discomfort. This action was to be preferably done before vomiting once having the sensation of nausea. The ear seeds remained in their place for 5 days, after which it was removed.</p>				
<ul style="list-style-type: none"> • Tan, 2022, China [33] 	<ul style="list-style-type: none"> • To examine the effects of auricular acupressure on CINV in breast cancer patients undergoing chemotherapy. • 75 (I-37, C-38) • Randomized controlled trial 	<ul style="list-style-type: none"> • Seven acupoints: “Cardia”, “Stomach”, “Spleen”, “Liver”, “Shenmen”, “Sympathetic”, and “Subcortex”. • Acupoint detector was used to locate the 	<ul style="list-style-type: none"> • Anthracycline-based regimens including AC combination (doxorubicin plus cyclophosphamide), with or without paclitaxel, and EC 	<ul style="list-style-type: none"> • Participants had a confirmed diagnosis of breast cancer, stage I to III (without distant metastasis), chemotherapy naïve, auricular therapy-naïve, were scheduled to receive the first cycle of chemotherapy with moderately-high to highly emetogenic potential, such as anthracycline-based regimens including AC combination (doxorubicin plus 	<ul style="list-style-type: none"> • Moderately-High to High • MASCC Antiemesis Tool (MAT), Index of Nausea, Vomiting and Retching (INVR), Functional Assessment of 	<ul style="list-style-type: none"> • Both the true and sham auricular acupressure groups reported improved CINV outcomes than the standard care group, with the true auricular acupressure demonstrating larger effects than the sham comparison. The true

		<p>selected acupoints, and vaccaria seeds were attached to the acupoints using hypoallergenic tapes. Participants were instructed to press the taped seeds until achieving a sensation of heaviness, soreness, distension or tingling—the “deqi” sensation. Auricular acupressure was conducted three times daily in the morning, afternoon, and evening, with each time lasting about 4 to 7 min, adding pressure to all the seeds on both ears from Day 1 to Day 5 of the first chemotherapy cycle. In addition to the regular</p>	<p>combination (epirubicin plus cyclophosphamide), with or without paclitaxel/docetaxel; TC combination (cyclophosphamide plus docetaxel)</p> <ul style="list-style-type: none"> • Auricular acupressure + Antiemetic • Antiemetic 	<p>cyclophosphamide), with or without paclitaxel, and EC combination (epirubicin plus cyclophosphamide), with or without paclitaxel/docetaxel; TC combination (cyclophosphamide plus docetaxel), and other less-frequently used combinations with moderately-high to highly emetogenic potential, and were provided with standard antiemetics, including 5-HT3 receptor antagonists and/or dexamethasone.</p> <ul style="list-style-type: none"> • Participants were excluded if they were extremely weak, disabled, or had immune deficiency, were unable to follow the study instructions and cooperate with the study procedures, had concurrent radiotherapy or other antineoplastic treatments, were participating in other clinical studies, had other health problems that may interfere with the chemotherapy induced nausea and vomiting symptoms, such as gastrointestinal conditions, migraines, and tinnitus, etc., had ear skin problems that were not appropriate for auricular acupressure. • 47.3 (8.2) years 	<p>Cancer Therapy-Breast (FACT-B).</p> <ul style="list-style-type: none"> • Delayed nausea and vomiting, 	<p>and sham auricular acupressure groups had higher complete response (CR) rates of CINV when compared with the standard care group, with the difference in the CR of acute CINV achieving statistical significance ($p = 0.03$). Both the true and sham auricular acupressure groups demonstrated lower incidence and severity of acute CINV compared with the standard care group with the among-group difference reaching statistical significance for the occurrence ($p = 0.04$) and severity ($p = 0.001$) of acute nausea.</p>
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		acupressure, the participants were told to do additional auricular acupressure when they had the feeling of nausea.				
<ul style="list-style-type: none"> • Genc, 2015, Turkey [38] 	<ul style="list-style-type: none"> • To determine the effect of acupressure applied to the pericardium 6 (P6 or neiguan) acupuncture point on chemotherapy-induced nausea, vomiting, and anxiety in patients with breast cancer. • 64 (I-32, C-32) • Quasi experimental 	<ul style="list-style-type: none"> • Neiguan (P6) • Continuously wear this band on both wrists for five days, taking it off only to wash hands and arms or to take a shower, and putting it back on as soon as possible. 	<ul style="list-style-type: none"> • Doxorubicin, Cyclophosphamide, and/or Epirubicin or CMF [Cyclophosphamide, Methotrexate, and 5-Fluorouracil]) • Acupressure + Antiemetic • Antiemetic 	<ul style="list-style-type: none"> • Participants were receiving the same chemotherapy regimen (doxorubicin, cyclophosphamide, and/or epirubicin or CMF [cyclophosphamide, methotrexate, and 5-fluorouracil]), capable of communicating, had relatives to fill out the forms for illiterate patients, had no lymphedema in their arms, and not receiving simultaneous radiotherapy treatment. • 51.04 (10.6) years 	<ul style="list-style-type: none"> • Moderately high to high • Index of Nausea, Vomiting, and Retching, Beck Anxiety Inventory • Acute nausea and vomiting, Delayed nausea and vomiting 	<ul style="list-style-type: none"> • Mean nausea, vomiting, and retching scores, the total (experience, occurrence, and distress) scores, and the mean anxiety scores for patients to whom acupressure was applied at the P6 acupuncture point were statistically significantly lower compared with the scores of patients in the control group. • Not reported

I- Intervention group, C- control group