INPLASY PROTOCOL

Comparison the therapeutic effects among different surgical approaches in robot-assisted partial nephrectomy：a systematic review and Meta-analysis

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ABSTRACT

Review question / Objective: Compare the therapeutic effects among different surgical approaches in robot-assisted partial nephrectomy which is better.

Condition being studied: The study is about the comparison between the transperitoneal or retroperitoneal approach in robot-assisted partial nephrectomy.

Strategy of data synthesis: This meta-analysis was performed according to the Quality of Reporting of meta-analyses (QUOROM) guidelines of the Cochrane collaboration. The weighted mean differences (WMDs) and the odds ratios (ORs) were used to compare continuous and dichotomous variables, respectively. All outcomes were reported with 95% confidence intervals (CIs).

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 03 April 2020 and was last updated on 03 April 2020 (registration number INPLASY202040015.

INTRODUCTION

Review question / Objectives: Compare the therapeutic effects among different surgical approaches in robot-assisted partial nephrectomy which is better.

Condition being studied: Shan Guo.

METHODS

Participant or population: Patients undergoing the robot-assisted partial nephrectomy.

Intervention: The transperitoneal approach in robot-assisted partial nephrectomy.

Comparator: The retroperitoneal approach in robot-assisted partial nephrectomy.

Study designs to be included: Randomized controlled trials, case-control studies, retrospective matched-pair studies design.

Eligibility criteria: The literature is about the comparison between TP-RAPN and RP-RAPN..

Information sources: Several databases were searched including PubMed, EMBASE, Cochrane Library, Web of Science, CNKI, CBM, Wan Fang, VIP, et al.

Main outcome(s): Intraoperative variables, postoperative variables, postoperative complications, et al.

Additional outcomes: Oncological outcomes.

Quality assessment / Risk of bias analysis: An assessment of the methodological quality of the studies was according to the Newcastle-Ottawa Scale (NOS).

Strategy of data synthesis: This meta-analysis was performed according to the Quality of Reporting of meta-analyses (QUOROM) guidelines of the Cochrane collaboration. The weighted mean differences (WMDs) and the odds ratios (ORs) were used to compare continuous and dichotomous variables, respectively. All outcomes were reported with 95% confidence intervals (CIs).

Subgroup analysis: Subgroup analysis to minimize the effects of heterogeneity by the area.

Sensibility analysis: Sensitivity analysis was performed for high-quality studies with more than 3 items in the meta-analysis. Sensibility analysis to minimize the effects of heterogeneity.

Coutries involved: Included studies were conducted in U.K, U.S.A, South Korea, China and Japan, respectively.

Keywords: transperitoneal; retroperitoneal; robotic surgical procedures; partial nephrectomy; Meta-analysis.