

INPLASY PROTOCOL

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**Review Stage at time of this
submission:** The review has not
yet started.

Conflicts of interest:
The authors declare no
conflicts of interest.

INTRODUCTION

Review question / Objective: To evaluate the effectiveness which acupuncture and moxibustion technique is more effective for primary dysmenorrhea.

Which acupuncture and moxibustion technique is more effective for primary dysmenorrhea: a protocol for a network meta-analysis of randomized controlled trials

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Review question / Objective: To evaluate the effectiveness which acupuncture and moxibustion technique is more effective for primary dysmenorrhea.

Condition being studied: Primary dysmenorrhea (PD) refers to a woman's menstrual period in genital no organic disease, abdominal pain, under the belly and other discomfort for the characteristics of disease of department of gynaecology, also called functional dysmenorrhea, main clinical manifestation is: under the menstrual abdomen spastic pain, radiation to the lumbar di ministry, vulva and anus and inner thighs, some patients accompanied by nausea, vomiting, dizziness, fatigue, symptoms such as edema, even collapse.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 28 May 2020 and was last updated on 28 May 2020 (registration number INPLASY2020500106).

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METHODS

Participant or population: Patients with abdominal pain before or after menstruation or during menstruation, mainly concentrated in the lower abdomen, and with none of the other symptoms, including headache, dizziness, nausea and vomiting, diarrhea, waist and leg pain.

Intervention: Acupuncture and Moxibustion stimulating acupoints or pain points.

Comparator: Control group: including medication, placebo or other treatment.

Study designs to be included: Only randomized controlled trials(RCTs) will be included in this study.

Eligibility criteria: Only randomized controlled trials will be included in this study.

Information sources: We're going to use systematic electronic search, including PubMed, MEDLINE, Web of Science, Embase, Cochrane library, SinoMed, China National Knowledge Infrastructure (CNKI), WangFang Database(WF), and Chinese Scientific Journal Database (VIP).

Main outcome(s): The extent of pain in the lower abdomen measured by visual analog scale (VAS), and relief from symptoms.

Additional outcome(s): 1.Quality of life(QoL); 2.Adverse events.

Quality assessment / Risk of bias analysis: Two of our researchers will use the bias risk tool provided by the Cochrane Collaboration to evaluate the quality of the literature using RevMan 5.3 software. This recommended tool includes 7 important

items: sequence generation, allocation concealment, blinding of participants and personnel, blinding of results evaluation, incomplete result data, selective result reporting, and other biases. Make "Low risk," "High risk," and "unclear risk" judgments for each research literature. Finally, a "risk of deviation" summary and a chart are generated to show the results. As with the previous process, it will be independently assessed by 2 researchers. If there is disagreement, it will be discussed with the 3rd researcher.

Strategy of data synthesis: This study will use RevMan5.3 software for data integration and analysis. The measurement data will use the mean difference (MD) as the effect indicator, and the count data will use the odds ratio (OR) as the effect index. Each effect indicator will be given as a point estimate with 95% confidence interval. The heterogeneity and size of each study result will be judged using statistical methods. For studies with no statistical heterogeneity, the analysis will be performed using a fixed-effect model, whereas a randomized effects model will be applied if for studies with significant statistical heterogeneity.

Subgroup analysis: A subgroup analysis will be conducted for the efficacy of acupuncture and moxibustion in patients with primary dysmenorrhea at different ages and treatment time.

Sensibility analysis: To assess the influence of each individual study, leave-one-out sensitivity analysis was performed iteratively by removing one study at a time to confirm that the findings were not influenced by any single study.

Language: English.

Country(ies) involved: China.

Keywords: acupuncture, moxibustion, primary dysmenorrhea, network meta-analysis, randomized controlled trials.

Contributions of each author:

Author 1 - Zenan Wu - conceive and design this protocol.

Author 2 - Jun Xiong - Revise this protocol; search strategy.

Author 3 - Qiongshan Xie - Data collection; analysis of results.

Author 4 - Xingyu Yu - Analysis of results.