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There are no conflicts of
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Effectiveness and Safety of Acupuncture and Moxibustion for Perimenopausal depression: An Overview of systematic Reviews and Meta-analysis

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Review question / Objective: This overview aims to summarize the available evidence from current systematic reviews for the efficacy of acupuncture therapy for Perimenopausal depression.

Condition being studied: The risk of depression and other adverse changes in perimenopausal women is higher than at any other stage of a woman's life. Western medicine and psychotherapy are not always effective in treating the disease, which has attracted increasing attention from scholars. Some studies have shown that depression is the second of the ten indications for acupuncture and moxibustion. This overview aims to summarize the available evidence from current systematic reviews for the efficacy of acupuncture therapy for Perimenopausal depression.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 02 June 2020 and was last updated on 02 June 2020 (registration number INPLASY202060007).

INTRODUCTION

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that depression is the second of the ten indications for acupuncture and moxibustion. This overview aims to summarize the available evidence from current systematic reviews for the efficacy of acupuncture therapy for Perimenopausal depression.

METHODS

Participant or population: Patients with Perimenopausal depression.

Intervention: Needle acupuncture, electro-acupuncture, auricular acupuncture, moxibustion, acupressure, point injection, or any combination of the above.

Comparator: Western medicine, placebo, sham acupuncture, no treatment, or any combination of these.

Study designs to be included: All systematic reviews and meta-analysis on the use of acupuncture and moxibustion for perimenopausal depression.

Eligibility criteria: Published systematic reviews which were reported in Chinese or English, and meet the "PICOS", will be considered for inclusion in this overview.

Information sources: Pubmed, Embase, Cochrane Library, Chinese Biomedical Literatures Database(CBM), China National Knowledge Infrastructure (CNKI), WangFang Database (WF), Chinese Scientific Journal Database (VIP).

Main outcome(s): The effective rate, the Hamilton depression scale(HAMD) score, cure rate.

Quality assessment / Risk of bias analysis: Assessment of Multiple Systematic Reviews 2 (AMSTAR-2) measurement tool, Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA), Grading of Recommendations Assessment, Development and Evaluation(GRADE) approach.

Strategy of data synthesis: We will provide a narrative description of the findings of

the included systematic reviews (SRs). Tables will be produced to detail the included studies and their outcomes. In addition, we will synthesis these reviews and provide pooled treatment effects for all SRs which include the following outcomes: The effective rate, the Hamilton depression scale(HAMD) score, cure rate. If necessary, the results will combine in a meta-analysis, the statistical analyses were conducted using the RevMan5.3 software. The summary effect size was estimated by using mean difference (MD) with 95% confidence intervals (CI) for continuous outcomes.

Subgroup analysis: If the necessary data are available, subgroup analysis will be carried out according to different factors as follows: 1. Control interventions (eg, sham/placebo moxibustion, no treatment, other TCM treatment or non-TCM treatment). 2. Type of acupuncture and moxibustion (eg, needle acupuncture, electro-acupuncture, auricular acupuncture, heat-sensitive moxibustion, thunder fire miraculous moxa roll, warm needling moxibustion, suspended moxibustion or mild moxibustion).

Sensitivity analysis: No sensitivity analysis required in overview.

Country(ies) involved: China.

Keywords: Perimenopausal depression ; acupuncture; moxibustion; AMSTAR-2; PRISMA; GRADEE; overview.

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