INPLASY PROTOCOL

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Conflicts of interest: No.

Efficacy of Chinese Herbal Injections for the Treatment of Primary Nephrotic Syndrome: A Bayesian Network Meta-Analysis of Randomized Controlled Trials

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Review question / Objective: Treatment of adult patients with primary nephrotic syndrome with traditional Chinese medicine injection.

Condition being studied: This research is currently in the data analysis stage.

Information sources: A systematic literature review including studies published before May 28,2020, was conducted in PubMed, the Cochrane Library, Embase, Web of Science, the Chinese Biological Medicine Literature Service System (CBM), the China National Knowledge Infrastructure (CNKI) database, the Chinese Scientific Journal Database (VIP), and the Wanfang Database (WF).

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 22 August 2020 and was last updated on 22 August 2020 (registration number INPLASY202080091).

INTRODUCTION

Review question / Objective: Treatment of adult patients with primary nephrotic syndrome with traditional Chinese medicine injection.

Condition being studied: This research is currently in the data analysis stage.

METHODS

Participant or population: Adult patients with primary nephrotic syndrome.

Intervention: Western medicine treatment + Chinese herbal injection.

Comparator: Western medicine treatment + another Chinese herbal injection.

Study designs to be included: RCT or CCT.

Eligibility criteria: i. Study type: all published randomized controlled trials (RCT) or controlled clinical trials (CCT), in Chinese and English only; ii. Subjects: The subjects of the study are those who meet the requirements of the PNS diagnostic criteria.age, gender, disease duration, race, and region are not limited; iii. Interventions: the treatment group adopts traditional CHIs in combination with conventional western medicine(WM), the control group was treated with another CHIs in combination with WM or with WM alone whereas WM treatment needs to be consistent between treatment group and control group.

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Main outcome(s): Outcomes: Total Clinical Effectiveness (TER), 24-hour urinary protein excretion (24h-UTP), serum albumin (ALB), the literatures including one item is sufficient.

Quality assessment / Risk of bias analysis: 2 researchers independently used the risk of bias assessment tool recommended by the Cochrane Systematic Evaluator's Handbook 5.3 to assess the included studies. The researchers cross-checked the study independently and if there was any disagreement, it was resolved through discussion or with the assistance of a 3rd researcher.

Strategy of data synthesis: The Total Clinical Effectiveness is the count data, so the odds ratio (OR) and its 95% CI are used. aswell we uesd the mean difference (Mean Difference, MD) and its 95% CI to calculate Measuring data, such as Ending indicators 24h-UTP, ALB, etc. Direct comparison of heterogeneity between studies using χ 2 test for analysis (test level of α =0.05). The inconsistency factor IF and the Z-test P value were used to determine the consistency of the results of direct and indirect comparisons, if P > 0.05 and IF Smaller values indicate better consistency.

Subgroup analysis: Patients from different races or skin colors.

Sensibility analysis: Exclude low-quality research.

Country(ies) involved: China.

Keywords: Network meta analysis;

Primary nephrotic syndrome; Chinese herbal injections.

Contributions of each author:

Author 1 - Hangxing Yu. Author 2 - Miaoru Han. Author 3 - Wei Lin. Author 4 - Lin Wang. Author 5 - Pangying Liu. Author 6 - Kang Yang. Author 7 - Hongtao Yang. Author 8 - Ming Pei.