INPLASY PROTOCOL

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**Corresponding author:**
**Xiao Song**

**song-xiaoyao@163.com**

**Author Affiliation:**
**Pharmacy College, Shaanxi University of Chinese Medicine**

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**Review Stage at time of this submission:** **Piloting of the study selection process.**

**Conflicts of interest:**
**The authors declare that they have no conflict of interest.**

# The therapeutic efficacy of Huashi Baidu Formula combined with antiviral drugs in the treatment of COVID-19: A protocol for systematic review and meta analysis

Han, LZ[1]; Wang, YL[2]; Hu, KX[3]; Tang, ZS[4]; Song, X.

**Review question / Objective:** **Huashibaidu Decoction plays an important role in the clinical treatment of COVID-19 and has been widely used. It is believed that Huashibaidu Decoction combined with antiviral drugs can improve the therapeutic effect of COVID-19. This plan aims to evaluate Huashi The efficacy of Baidu Decoction combined with antiviral drugs in the treatment of COVID-19.**
**Condition being studied:** **We will search the studies in MEDLINE/PubMed, the China National Knowledge Infrastructure (CNKI), Wanfang database, VIPdatabase, the Cochrane Library, Embase, the Chinese Biomedical Database (CBM) and the Chinese Science Citation Database (CSCD). For Huashi Baidu Formula and COVID-19, we are looking for suitable articles with no language restrictions on keywords. Electronic database retrieval will be supplemented by manual retrieval of the included article reference list.**

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 23 August 2020 and was last updated on 23 August 2020 (registration number INPLASY202080098).

## INTRODUCTION

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## METHODS

**Participant or population:** COVID-19( as diagnosed by a clinician, or using any recognized diagnostic criteria ), the therapeutic effect of Huashi Baidu Formula combined with antiviral drugs was compared with that of single use of antiviral drugs.

**Intervention:** The treatment group was treated with Huashi Baidu Formula combined with antiviral drugs.

**Comparator:** The control group was treated with antiviral drugs alone.

**Study designs to be included:** All included studies are described as RCTs.

**Eligibility criteria:** According to the suggestions of a rheumatologist, we designed the inclusion criteria as follows: (1) Patients in RCTs were diagnosed with 2019-nCoV the criteria of Diagnostic Criteria of New Coronavirus Pneumonia Diagnosis and Treatment Program. (2) All trails mentioned were describe as RCTs. (3) The experimental group was treated with Huashi Baidu Formula combined with antiviral drugs, and the control group was treated with antiviral drugs only. (4) Outcome measurements of each study must have included a minimum of two of the following indices: TER, DROMCF (such as fever, cough, myalgia or fatigue), DROMS (such as headache, dizziness, diarrhea, nausea), shortness of breath, RR≥30 beats/min, white blood cell (WBC), lymphocyte (LYM), C reaction Protein (CRP), immunoglobulin G (IgG), immunoglobulin M (IgM), lung CT, adverse events (AE).

**Information sources:** PubMed/MEDLINE, the China National Knowledge Infrastructure (CNKI), Wanfang database, VIPdatabase, the Cochrane Library, Embase, the Chinese Biomedical Database (CBM) and the Chinese Science Citation Database (CSCD).

**Main outcome(s):** The total effective rate (TER) the main clinical feature disappearance rate (DROMCF) the minor symptom disappearance rate (DROMS) ter, dromcf and droms were regarded as binary variables and expressed as odds ratio (OR) and described by 95% confidence interval (95% CI).Contents of inflammatory cytokines (WBC, LYM, CRP, IgG, IgM) are continuous variables, using weighted mean difference (WMD) or standardized mean difference (SMD) as the effect index, and 95% CI for description. The Q test was used for analysis, combined with I2 to quantitatively determine the degree of heterogeneity. If $P \geq 0.1$ and $I2 < 50\%$, it is considered that there is no statistical heterogeneity.

**Quality assessment / Risk of bias analysis:** The Cochrane bias risk assessment was conducted to judge the generation of random sequence, allocation concealment, implementation of blind method, incomplete outcome data, selective reporting outcome and other biases.

**Strategy of data synthesis:** Describing the results of the detailed index, the detailed information concealed by the allocation indicates that the risk of selection bias is low. None of the included studies mentioned blinding and was judged to be a high risk of bias. The experimental information in the study is incomplete, incomplete outcome data, and selective reports cannot judge the risk of bias.

**Subgroup analysis:** After treatment, the disappearance rate of main clinical features (fever, cough), the disappearance rate of minor symptoms (muscle pain, shortness of breath, chest tightness), CT improvement rate, nucleic acid conversion rate, and critical illness rate were analyzed

to analyze the statistical differences between the studies qualitative.

**Sensibility analysis:** Two researchers independently assessed the quality of the included studies, excluded low-quality studies, and analyzed the same data using different statistical models.

**Language:** Search without language restrictions.

**Country(ies) involved:** China.

**Keywords:** COVID-19; Huashi Baidu Formula; Antiviral Drugs; Meta-analysis.

**Contributions of each author:**
Author 1 - Lizhu Han - Collect and select literature drafted the manuscript.
Author 2 - Yunlan Wang - Performed the data extraction.
Author 3 - Kunxia Hu - Analyzed the data.
Author 4 - Zhishu Tang - Check and input data.
Author 5 - Xiao Song - Designed the study and amended the paper.