# INPLASY PROTOCOL

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## Traditional Chinese medicine for Restless legs syndrome Study protocol for a network meta-analysis

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**Review question / Objective:** Is Chinese medicine more effective in treating restless legs syndrome than simple western medicine?

Condition being studied: Restless legs syndrome (Restless legs syndrome, RLS) Also known as restless legs or restless legs syndrome, it is a common central god Sensory dyskinesia diseases are divided into primary and secondary. The incidence of RLS in the population is 5%-10%, and it varies with age There is a clear upward trend in the growth. The pathogenesis of RLS is complicated, diagnosis and treatment Different, and I clinicians often lack of understanding of it, and it is easy to be misdiagnosed in clinic. Missed diagnosis. Some clinical studies have shown that traditional Chinese medicine is effective in treating restless legs syndrome. This study uses a network meta-analysis method to evaluate the published literature at home and abroad.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 09 September 2020 and was last updated on 09 September 2020 (registration number INPLASY202090041).

## INTRODUCTION

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## **METHODS**

Search strategy: Search terms are: "traditional Chinese medicine", "Chinese herbal medicine", "Chinese patent medicine", "acupuncture,", "moxibustion", "massage", "Restless legs syndrome".

Participant or population: Randomized controlled trial.

Intervention: The experimental group only used Chinese medicine therapies, such as Chinese medicine, Chinese patent medicine, acupuncture, moxibustion, massage.

**Comparator:** The control group was treated with Western medicine alone.

Study designs to be included: RCTs based on different Chinese medicine treatments for restless legs syndrome, the language is limited to Chinese and English.

**Eligibility criteria:** Patients diagnosed with restless legs syndrome meet the diagnostic criteria of the "Diagnostic Efficacy Criteria for TCM Diseases" and have clear efficacy criteria, regardless of age, race, gender, and source of cases.

Information sources: Computer search of Chinese databases: China Knowledge Network (CNKI), Wanfang (WAN-FANG), VIP (VIP), China Biomedical Literature Database (CBM), English database search PubMed and Cochrane library. Chinese search terms are: "Chinese medicine", "Chinese herbal medicine", "Chinese patent medicine", "acupuncture", "moxibustion", "massage", "restless legs syndrome", "restless legs syndrome", search in English The words are: "traditional Chinese medicine", "Chinese herbal medicine", "Chinese patent medicine", "acupuncture,", "moxibustion", "massage", "Restless legs syndrome". The search time is from the establishment of the database to September 9, 2020. All search strategies used multiple searches in the form of subject terms + free words, and manually searched relevant references.

Main outcome(s): Total effective rate, International Restless Leg Syndrome Rating Scale, Visual Analog Scale, Pittsburgh Sleep Quality Index and Adverse Events.

Quality assessment / Risk of bias analysis: Two reviewers independently conducted a bias risk assessment on the final included literature in this study with reference to the Cochrane reviewer bias risk assessment tool, including selection bias, implementation bias, measurement bias, follow-up bias, reporting bias, and other source biases of all included literature. The evaluation results are evaluated in terms of "high risk", "low risk" and "unclear risk".

Strategy of data synthesis: The English search terms are: "traditional Chinese medicine", "Chinese herbal medicine", "Chinese patent medicine", "acupuncture,", "moxibustion", "massage", "Restless legs syndrome". The search time is from the establishment of the database to September 9, 2020. All search strategies are searched multiple times in the form of subject terms + free words, and relevant references are searched manually.

Subgroup analysis: If the I2 >50%, we will explore sources of heterogeneity by subgroup analysis and meta-regression, the STATA software will be used for subgroup analysis and meta-regression analysis according to the characteristics of the test.

Sensibility analysis: Sensitivity analysis will be completed by changing the effect model or removing 1 study at a time to investigate the influence of a single study on the overall pooled estimate.We will evaluate the robustness of the meta-analysis results through sensitivity analysis, and exclude such as small-sample trials and low-quality trials to explore the impact of trial quality on efficacy estimates.

### Country(ies) involved: China.

Keywords: Traditional Chinese Medicine; Traditional Chinese Medicine; Acupuncture; Restless Legs Syndrome; Network Meta Analysis.

#### Contributions of each author: Author 1 - Liting Liu.

Author 2 - Rongfang Xie. Author 3 - Chunhua Huang. Author 4 - Ruiqi Wang.