

# INPLASY PROTOCOL

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**Support:** Qihuang Engineering Project.

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

**Conflicts of interest:**  
None.

## Efficacy and safety of Moxibustion for obesity A protocol for systematic review and meta analysis

Wang, L<sup>1</sup>.

**Review question / Objective:** The main purpose of this system review is the evaluation of the treatment effect that moxibustion for simple obesity, the secondary objective is the evaluation of safety of moxibustion for simple obesity.

**Condition being studied:** Obesity.

**Information sources:** We will electronically search 7 databases as following for literature, regardless of publication status and language: China National Knowledge Infrastructure(CNKI), Chinese Scientific Journal Database, WanFang Database, Chinese Biomedical Literatures Database(CBM), Cochrane Library, PubMed, Embase from their inception to September 2020.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 30 November 2020 and was last updated on 30 November 2020 (registration number INPLASY2020110140).

### INTRODUCTION

**Review question / Objective:** The main purpose of this system review is the evaluation of the treatment effect that moxibustion for simple obesity, the secondary objective is the evaluation of safety of moxibustion for simple obesity.

**Condition being studied:** Obesity.

### METHODS

**Participant or population:** Participants who have been diagnosed as obesity will be included, regardless of race, gender, age,

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nationality, education, occupation, and severity.

**Intervention:** SRs that involved any form of moxibustion(e.g., mild moxibustion, direct moxibustion, indirect moxibustion, suspended moxibustion, needle warming moxibustion, Thunder fire moxibustion, heat-sensitive moxibustion, or crude drug moxibustion) will be included as the sole treatment or as a part of a combination therapy with other active interventions(e.g., conventional drugs, or cupping).

**Comparator:** There is no limit to the treatment of the control group, including placebo, or no treatment, or any control considered for comparison in the individual system review.

**Study designs to be included:** Only SRs and meta analysis of randomized controlled trials(RCTs) for moxibustion in people with obesity, published in English and Chinese will be included.

**Eligibility criteria:** The inclusion criteria of the SRs of moxibustion for obesity was listed below.

2.2.1. Types of studies. Only SRs and meta analysis of randomized controlled trials(RCTs) for moxibustion in people with obesity, published in English and Chinese will be included.

2.2.2. Types of participants. Participants who have been diagnosed as obesity will be included, regardless of race, gender, age, nationality, education, occupation, and severity.

2.2.3. Types of interventions. SRs that involved any form of moxibustion(e.g., mild moxibustion, direct moxibustion, indirect moxibustion, suspended moxibustion, needle warming moxibustion, Thunder fire moxibustion, heat-sensitive moxibustion, or crude drug moxibustion) will be included as the sole treatment or as a part of a combination therapy with other active interventions(e.g., conventional drugs, or cupping).

2.2.4. Type of comparator (s)/ control. There is no limit to the treatment of the control group, including placebo, or no treatment, or any control considered for comp.

**Information sources:** We will electronically search 7 databases as following for literature, regardless of publication status and language: China National Knowledge Infrastructure(CNKI), Chinese Scientific Journal Database, WanFang Database, Chinese Biomedical Literatures Database(CBM), Cochrane Library, PubMed, Embase from their inception to September 2020.

**Main outcome(s):** Obesity related indicators(e.g., weight, BMI, waist circumference, body fat percentage, hip circumference).

**Quality assessment / Risk of bias analysis:** The risk of bias in the included studies will be assessed according to the Cochrane Collaboration Risk of Bias Tool. The methodology will be evaluated according to the following domains: random sequence generation, allocation concealment, blinding of participants and personnel, blinding of outcome assessment, incomplete outcome data, selective reporting and other bias. Two reviewers will categorise each trial as low risk, high risk or unclear risk. A third reviewer will assist in resolving the disagreements.

**Strategy of data synthesis:** We will extract the data from the original study from the SR and conduct statistical analysis using Review Manager(Revman) 5.3.0 (Cochrane Central Executive team, England) recommended by Cochrane Collaboration. For continuous variables(weight, BMI, waist circumference, body fat percentage, hip circumference), the data will be presented data as median, mean, and standard deviation, and the result will be reported as mean difference or standard mean difference, with 95% confidence interval(CI). For dichotomous variables(clinical effectiveness and adverse events), the data will be presented by the proportions and numbers, and the result will be reported as relative risks with 95% CI.

**Subgroup analysis:** 1. Types of moxibustion(e.g., mild moxibustion, direct moxibustion, indirect moxibustion,

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suspended moxibustion, needle warming moxibustion, Thunder fire moxibustion, heat-sensitive moxibustion, or crude drug moxibustion). 2. Types of comparator(s)/control(e.g., placebo, non-TCM treatment, other TCM treatment or no treatment).

**Sensibility analysis:** Sensitivity analysis. If the test for heterogeneity remains at a value of  $p < 0.1$  after subgroup analysis, a sensitivity analysis will be performed. The low quality studies will be excluded, and the meta-analysis will be performed again.

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

**Keywords:** moxibustion, obesity, systematic reviews, meta analysis.

**Contributions of each author:**

Author 1 - Lihua Wang.