INPLASY PROTOCOL

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Review Stage at time of this submission: Preliminary searches.

Conflicts of interest:
We declare there are no conflicts of interest.

An update of fire needle acupuncture for acute herpes zoster and prevention of postherpetic neuralgia in adults: a protocol for systematic review and meta analysis

Wang, J[1]; Wang, X[2]; Xia, H[3]; Zhang, N[4]; Lin, S[5]; Zeng, J[6]; Lin, G[7].

Review question / Objective: How effective is fire needle acupuncture for acute herpes zoster and will it reduce the incidence of postherpetic neuralgia(PHN)? PICO: P (participants): adults with acute herpes zoster; I (Intervention): fire needle acupuncture mainly; C (Comparator): chemical drugs; O (Outcome): pain intensity or incidence of PHN.

Condition being studied: We systematically evaluate the efficacy of fire needle acupuncture for acute herpes zoster and its prevention effect of PHN.

Information sources: Four English (PubMed, Embase, the Cochrane Library, the Web of Science) and four Chinese databases (China national knowledge infrastructure (CNKI), Wanfang Data E-Resources (Wanfang), VIP Citation Database (VIP) and China Biology Medicine (CBM)) will be searched dating until November 2020 with no language restrictions, and translations will be sought where necessary.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 10 December 2020 and was last updated on 10 December 2020 (registration number INPLASY2020120058).

INTRODUCTION

Review question / Objective: How effective is fire needle acupuncture for acute herpes zoster and will it reduce the incidence of postherpetic neuralgia(PHN)? PICO: P (participants): adults with acute herpes zoster; I (Intervention): fire needle acupuncture mainly; C (Comparator): chemical drugs; O (Outcome): pain intensity or incidence of PHN.

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METHODS

Participant or population: Adults with acute herpes zoster.

Intervention: Fire needle acupuncture mainly.

Comparator: Chemical drugs.

Study designs to be included: Randomized controlled trials (RCTs).

Eligibility criteria: Patients: adults with acute herpes zoster (less than 7 days) from 18 to 70 years old. There are no restrictions on ethnic distribution, and gender. Intervention: fire needle acupuncture alone or mild assistance with other acupuncture techniques such as electroacupuncture cupping moxibustion bloodletting et al. Control: conventional chemical drugs for acute herps zoster. Outcome: pain intensity or incidence of PHN.

Information sources: Four English (PubMed, Embase, the Cochrane Library, the Web of Science) and four Chinese databases (China national knowledge infrastructure (CNKI), Wanfang Data E-Resources (Wanfang), VIP Citation Database (VIP) and China Biology Medicine (CBM)) will be searched dating until November 2020 with no language restrictions, and translations will be sought where necessary.

Main outcome(s): Pain intensity (VAS scale) or incidence of PHN.

Quality assessment / Risk of bias analysis: Two researchers (HX and NZ) will independently assess the risk of bias of the included studies using the Cochrane Risk of Bias tool (RoB).18 The RoB tool prompts judgements regarding biases in five domains: random sequence generation, allocation concealment, blinding of participants and personnel, blinding of assessment, incomplete outcome data, selective reporting, and other biases. Each domain will be judged by the level of risk of bias: high level, low level or unclear level. Any disagreements will be solved by discussion or a third researcher's adjudication (GL).

Strategy of data synthesis: A narrative synthesis approach will initially be used to systematically describe the characteristics and quantitative data from the included studies. The continuous variables (VAS pain scale, pain relief time of 30%, duration of pain) will be represented by standard mean differences (SMD), while count data (the incidence of PHN) will be represented using relative risk (RR), and for both, a 95% confidence interval (CI) will be calculated. $P < 0.05$ will be statistically significant.

Subgroup analysis: We aim to carry out subgroup analysis to explore heterogeneity between studies. If possible, the subgroup analysis will be based on: 1. Age of patients (18-50 years old, 50-70 years old). 2. Onset of disease (1-3 days, 4-7 days). 3. Course of treatment (1-10 days, 10 days and above). 4. Therapeutic method (Fire needle acupuncture alone, fire needle acupuncture combined with other acupuncture techniques).

Sensibility analysis: Sensitivity analysis will be done to assess the robustness of the results by excluding studies with high risk of bias or high weighted studies.

Country(ies) involved: China.

Keywords: acupuncture, fire needle, herpes zoster, postherpetic neuralgia.

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