INPLASY PROTOCOL

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Corresponding author:
Zhiwen Cao

3082702175@qq.com

Author Affiliation:
Jiangxi University of Traditional Chinese Medicine

Support: **81860877、81660821、20181BBG7004.**

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

Conflicts of interest:
None declared.

The efficacy and safety of cupping therapy for treating of Intractable peripheral facial paralysis: a protocol for systematic review and meta-analysis

Cao, Z[1]; Jiao, L[2]; Wang, H[3].

Review question / Objective: **This study comprehensively searched the literature to further systematically evaluate The efficacy and safety of cupping therapy in the treatment of Intractable peripheral facial paralysis, with a view to clinically treating Intractable facial paralysis, alleviating its related clinical symptoms and preventing its further development, and providing the latest evidence-based medical evidence.**
Condition being studied: **Intractable peripheral facial paralysis. This article doesn't limit the age, gender and source of the patient.**
Information sources: **Including PubMed, Web of Science, the Cochrane Database, EMBASE, China Knowledge Network (CNKI), Wanfang Data Knowledge Service Platform, VIP Chinese Science and Technology Periodical Database (VIP) and China Biomedical Literature (CBM) Database.**

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 19 February 2021 and was last updated on 19 February 2021 (registration number INPLASY202120062).

INTRODUCTION

Review question / Objective: **This study comprehensively searched the literature to further systematically evaluate The efficacy and safety of cupping therapy in the treatment of Intractable peripheral facial paralysis, with a view to clinically treating Intractable facial paralysis, alleviating its related clinical symptoms and preventing its further development, and providing the latest evidence-based medical evidence.**

Condition being studied: **Intractable peripheral facial paralysis. This article**

doesn't limit the age, gender and source of the patient.

METHODS

Participant or population: The inclusion of this literature must be RCT that meets the diagnostic criteria for Peripheral facial paralysis will be included and the course of disease are more than 2 months. This article does not limit the age, gender and source of the patient. Exclude patients with other diseases in patients with chronic cholecystitis.

Intervention: Patients with Intractable facial paralysis in the test group must be treated with cupping therapy as the main regimen (either in combination with other treatments or alone) and the control group must be treated with non-cupping therapy.

Comparator: The control group can include blank control, medicine (traditional Chinese medicine , western medicine) treatment, conventional symptomatic treatment, etc. 1. cupping therapy vs no treatment; 2. cupping therapy vs placebo; 3. cupping therapy vs symptomatic or active treatment.

Study designs to be included: A randomized controlled trial (RCT) study on cupping therapy treatment of Intractable facial paralysis, published in any language.

Eligibility criteria: Types of study:All randomized controlled trials (RCT s) study on cupping therapy treatment of Intractable facial paralysis.Others such as case reports, animal experiments, non-RCTs, or RCT protocol will be excluded.

Information sources: Including PubMed, Web of Science, the Cochrane Database, EMBASE, China Knowledge Network (CNKI), Wanfang Data Knowledge Service Platform, VIP Chinese Science and Technology Periodical Database (VIP) and China Biomedical Literature (CBM) Database.

Main outcome(s): The total effective rate.

Quality assessment / Risk of bias analysis: Two reviewers performed rigorous methodological quality evaluation of the included studies with reference to the Cochrane Collaboration Bias Risk Assessment Tool for the extracted methodological features.

Strategy of data synthesis: Meta analysis was performed using RevMan5.3 provided by the Cochrane collaboration network.Relative risk (RR) was used for the two categorical variables, and mean difference(MD) was used for the continuous variables. Both were expressed with 95% confidence intervals (CI). The heterogeneity test between the results of the included studies was performed using the I^2 test.The I^2 value reflects the proportion of the total variation in the effect size due to the existence of heterogeneity. (I^2 > 50%) , indicating that heterogeneity is more obvious. If there is no obvious heterogeneity between the research results (I^2 50%), the source of the heterogeneity is analyzed first, which may lead to heterogeneity Factors for subgroup analysis. If statistical heterogeneity exists in each subgroup without clinical heterogeneity, a random effects model is used for analysis. If the heterogeneity is too large and the results cannot be combined, a descriptive analysis is used and a sensitivity analysis is performed if necessary.

Subgroup analysis: Subgroup analysis will be handled according to the differences in cupping methods, patient conditions, and control.

Sensitivity analysis: Sensitivity analyses will be performed to verify the robustness of the review conclusions. The impacts of study design, methodological quality, and missing data will be evaluated. Sensitivity analyses were planned by studies considered being at low risk of bias.

Language: No limited.

Country(ies) involved: China.

Keywords: cupping; Intractable periphera facial paralysis; meta-analysis; systematic review.

Contributions of each author:
Author 1 - Zhiwen Cao.
Author 2 - Lin Jiao.
Author 3 - Hongyu Wang.