# INPLASY PROTOCOL

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#### **Review Stage at time of this submission:** Formal screening of search results against eligibility criteria.

Conflicts of interest: None declared.

## Anti-COVID-19 of Heat-clearing and detoxifying traditional Chinese Medicine: A systematic review protocol

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**Review question / Objective:** Heat-clearing and detoxification traditional Chinese medicine plays an important and positive role in the treatment of COVID-19 patients, but there is no systematic evaluation report on its efficacy and safety. The purpose of this agreement is to evaluate the efficacy and safety of heat-clearing and detoxifying herbs in the treatment of COVID-19.

**Condition being studied:** The electronic database with effective retrieval strategy was used to search the literature related to the treatment of COVID-19 with heat-clearing and detoxifying traditional Chinese medicine. The extracted data were further analyzed by Review Manager 5.3 software. The selected studies should be assessed, and woodlands and funnel plots will be run by RevMan5.3.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 09 March 2021 and was last updated on 09 March 2021 (registration number INPLASY202130028).

### INTRODUCTION

**Review question / Objective:** Heat-clearing and detoxification traditional Chinese medicine plays an important and positive role in the treatment of COVID-19 patients, but there is no systematic evaluation report on its efficacy and safety. The purpose of this agreement is to evaluate the efficacy and safety of heat-clearing and detoxifying herbs in the treatment of COVID-19.

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### **METHODS**

Participant or population: Mild or ordinary COVID-19 patients who meet the diagnostic criteria of "COVID-19 diagnosis and treatment Plan" (including clinically diagnosed cases).

Intervention: The treatment group was treated with heat-clearing and detoxifying traditional Chinese medicine on the basis of the control group.

**Comparator:** The control group was treated with routine western medicine or placebo on this basis.

Study designs to be included: Randomized controlled trials will be Included.

Eligibility criteria: The type of study is the published randomized controlled trial at home and abroad ((randomized controlled trial,RCT), which involves the study of heatclearing and detoxifying traditional Chinese medicine in the treatment of COVID-19. The languages are Chinese and English, and the research area is not limited.

Information sources: Literature search will be conducted through PubMed, Cochrane Library, Medline, Cochrane Library, Web of Science, EBASE, Springer, WHO International Clinical trial Registration platform (ICTRP), China National knowledge Infrastructure (CNKI), Wanfang Database, China Biomedical Literature Database (CBM), China Science Journal Database (VIP) and other electronic databases that may adopt effective retrieval strategies for heat-clearing and detoxification of traditional Chinese medicine treatment COVID-19 related literature. Main outcome(s): Through the analysis of fever duration, pneumonia absorption rate, virus nucleic acid negative conversion rate, fever disappearance rate, fatigue disappearance rate, cough disappearance rate, white blood cell count, lymphocyte count, lymphocyte percentage, incidence of adverse reactions and aggravation rate of pneumonia in patients with COVID-19, the efficacy and safety of heat-clearing and detoxification traditional Chinese medicine in the treatment of COVID-19 were verified. To provide support for the clinical application of heat-clearing and detoxification traditional Chinese medicine in the treatment of COVID-19.

Quality assessment / Risk of bias analysis: The included RCT used the Cochrane

collaboration network bias risk assessment tool for bias risk assessment, and the included cohort study used the Newcastle Ottawa scale for bias risk assessment. The selected literature can be divided into seven considerations for assessing bias risk: random sequence generation method, allocation concealment, blind participants and personnel, blind outcome evaluation, incomplete outcome data, selective reporting and other offset sources. Each consideration is divided into three levels: "low risk", "high risk" and "unclear". If the two researchers do not reach an agreement, we will consult the third author to discuss the differences in the choice of research. In addition, the differences will be resolved through consultation.

Strategy of data synthesis: Revman5.3 software was used for Meta analysis. The effects of two classified variables were analyzed by risk ratio (RR) and its 95% confidence interval (95%Cl), and the effects of continuous variables were analyzed by weighted mean difference (WMD) analysis.  $\chi$  2 test and I2 quantitative test were used to test the heterogeneity among studies. When P < 0.10, there is heterogeneity among studies, random effect model is selected for Meta analysis; when P > 0.10, I2 < 50%, there is no obvious heterogeneity, fixed effect model is selected for Meta analysis.

Subgroup analysis: If the heterogeneity is obvious, we will conduct a subgroup analysis according to the disease time, intervention, treatment time and measurement outcome.

Sensitivity analysis: The common method is to eliminate each included study one by one, then combine the effects, change the inclusion criteria or eliminate some types of literature, and then combine the effects.

### Country(ies) involved: China.

Keywords: COVID-19, traditional Chinese medicine, heat-clearing and detoxification, meta-analysis, protocol, systematic review.

### Contributions of each author:

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