# INPLASY PROTOCOL

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# Prediction models for prognosis of vespidae sting: A protocol for systematic review and meta-analysis

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Support: None.

Review Stage at time of this submission: Piloting of the study selection process.

Conflicts of interest: None declared. Review question / Objective: Adult; Patients with wasp sting who have bad prognosis; Patients with wasp sting who have good prognosis; Risk of disease due to the wasp sting; Prospective/retrospective cohort study, RCT, etc. Condition being studied: Vespidae sting.

Information sources: We will search the EMBASE, Web of

Knowledge, PubMed, ClinicalTrials.gov and Cochrane Library from inception to Mar 2021 to retrieve relevant studies using the search strategy: ("bee sting" OR "wasp sting" OR " vespidae sting") AND (prognosis OR prediction models). No language restrictions will be applied. We will also search citations of relevant primary and review.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 22 March 2021 and was last updated on 22 March 2021 (registration number INPLASY202130076).

## **INTRODUCTION**

Review question / Objective: Adult; Patients with wasp sting who have bad prognosis; Patients with wasp sting who have good prognosis; Risk of disease due to the wasp sting; Prospective/ retrospective cohort study, RCT, etc. Condition being studied: Vespidae sting.

**METHODS** 

Participant or population: Adults patient (age ≥18 years old) diagnosed with vespidae sting.

#### Intervention: None.

Comparator: None.

Study designs to be included: Prospective/ retrospective cohort study, RCT, etc.

Eligibility criteria: Age <18 years old, pregnant woman Animal studies ,cadaver studies, case reports, comments, letters, protocols, guidelines, unpublished articles and review papers will be excluded.

Information sources: We will search the EMBASE, Web of Knowledge, PubMed, ClinicalTrials.gov and Cochrane Library from inception to Mar 2021 to retrieve relevant studies using the search strategy: ("bee sting" OR "wasp sting" OR " vespidae sting" ) AND (prognosis OR prediction models ). No language restrictions will be applied. We will also search citations of relevant primary and review.

Main outcome(s): This systematic review and meta-analysis will provide clinical evidence for predicting the prognosis of vespidae sting, inform our understanding of the value of the predictive model in predicting the prognosis of vespidae sting in the early stage. The conclusions drawn from this study may be beneficial to patients, clinicians, and health-related policy makers.

Quality assessment / Risk of bias analysis:

The the Grading of Recommendations, Assessment, Development and Evaluation (GRADE) assessment tool will be used for conducting an appraisal of the studies' methodological quality. Every selected study will be evaluated by 2 reviewers independently, a third one as a consulter. The GRADE evaluation system included bias risk; heterogeneity; indirectness; imprecision; publication bias. And each level of evidence is divided into "very low", "low", "moderate", or "high" judgment.

Strategy of data synthesis: For qualified articles, we would like to combine the collected data according to characteristics

of eligible trials. In line with the Cochrane guideline, we will express risk ratio with 95% confidence intervals(95%CI) using fixed effect model. Besides the random effect model will be used for continuous outcomes because of clinical heterogeneity. Statistical heterogeneity will be investigated using  $\chi^2$  test and I2 statistic (50%, strong heterogeneity). We will assess possible publication bias using the Egger funnel plot. All data will be performed by using Review Manager(RevMan version 5.4.0) software and P value <.05 will be considered statistically significant.

Subgroup analysis: None.

Sensitivity analysis: None.

Language: No language restrictions will be applied.

Country(ies) involved: China.

Keywords: Prediction models; vespidae sting; prognosis; 3433562hx.

#### **Contributions of each author:**

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