

INPLASY PROTOCOL

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Moxibustion for Diarrhea in Children: A protocol for systematic review and meta analysis

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**Review Stage at time of this
submission:** Preliminary
searches.

Conflicts of interest:
None declared.

Review question / Objective: The purpose of this study is to verify the effectiveness and safety of moxibustion in the treatment of pediatric diarrhea.

Condition being studied: Infantile Diarrhea is a common and frequent digestive tract disease in children. The causes of this disease are relatively complex and the onset time is relatively long. At present, there is no specific treatment method in western medicine. Moxibustion is a simple and painless external treatment. However, due to the lack of high-quality evidence to support the effectiveness and safety of moxibustion therapy for pediatric diarrhea. Therefore, the purpose of this study is to verify the effectiveness and safety of moxibustion in the treatment of pediatric diarrhea.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 24 March 2021 and was last updated on 24 March 2021 (registration number INPLASY202130091).

INTRODUCTION

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METHODS

Participant or population: All the children included were diagnosed with diarrhea.

Intervention: The moxibustion methods in the experimental group could be traditional moxibustion, heat-sensitive moxibustion, needle warming moxibustion and other types of moxibustion therapy.

Comparator: The control group received one of the following treatments: conventional drug treatment, no treatment, or placebo.

Study designs to be included: All the children included were diagnosed with diarrhea, regardless of gender, age, race, nationality, or severity.

Eligibility criteria: Only publications in Chinese and English as the first language were included in this study, and only randomized controlled trials(RCTs) were included.

Information sources: PubMed, Web of Science, Cochrane Library, China National Knowledge Infrastructure (CNKI), Wanfang Database, China Scientific Journals Database (VIP), and China Biomedical Literature Database (CBM).

Main outcome(s): The curative effect such as cure rate, apparent efficiency, effective rate and inefficiency will be the main evaluation indexes.

Quality assessment / Risk of bias analysis: The authors use the Cochrane collaboration of bias risk assessment tools to evaluate each other law quality, and the bias risk assessment included in the study are available from the following aspects:

the formation of sequence, allocation concealment, the result data is imperfect, the interpretation of the results, the wrong data coding and other bias. The bias can be divided into three risks: high risk, low risk, and uncertain risk.

Strategy of data synthesis: I² test was used to test the heterogeneity of the study. If $P > .10$ and $I^2 \leq 50\%$, no statistical difference is considered, fixed effect model will be used. If $P \leq .10$ and $I^2 > 50\%$, the heterogeneity is considered to be high, and the random effect model will be adopted.

Subgroup analysis: In the case of sufficient literature data, subgroup analysis can be conducted according to the severity of diarrhea or the intervention mode of moxibustion therapy. 1. The severity of diarrhea (such as duration, frequency of stools, associated symptoms, etc.) 2. Types of moxibustion (such as Heat-sensitive moxibustion, needle warming moxibustion, traditional moxibustion, etc.).

Sensitivity analysis: According to the outcome indicators of the data, literatures were excluded one by one in terms of method quality, sample size, data missing, measurement, etc., to see whether the heterogeneity was changed. If the results of the sensitivity analysis are consistent, the results are relatively robust. On the contrary, it is not robust and should be treated with caution.

Country(ies) involved: China.

Keywords: Moxibustion, children, diarrhea, random, systematic review and meta-analysis.

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