INPLASY PROTOCOL

Corresponding author:
Xiang Qi

84299694@qq.com

Author Affiliation:
Guangzhou First People's Hospital.

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

Conflicts of interest:
None declared.

The Influence of pegaspase on coagulation function and remission rate in adult patients with acute lymphoblastic leukemia

Xiang, Q[1]; Zhang, Y[2].

Review question / Objective: D: Adult acute lymphoblastic leukemia; I: pegaspase Treatment; C: Control group L-asparaginase treatment; O:The Influence of patients' coagulation function and disease remission rate; S: Randomized control.
Condition being studied: Introduce what is acute lymphoblastic leukemia and related knowledge about the disease.

INTRODUCTION

Review question / Objective: D: Adult acute lymphoblastic leukemia; I: pegaspase Treatment; C: Control group L-asparaginase treatment; O:The Influence of patients' coagulation function and disease remission rate; S: Randomized control.

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METHODS

Search strategy: Adult acute lymphoblastic leukemia I: pegaspase Treatment

+pegaspase Treatment+Randomized control.

Participant or population: Adult patients with acute lymphoblastic leukemia.

Intervention: Pegaspase Treatment.

Comparator: L-asparaginase treatment.

Study designs to be included: RCT.

Eligibility criteria: Inclusion criteria: A randomized controlled study and a non-randomized controlled study on the treatment of adult acute lymphoblastic leukemia with pegaspase and L-asparaginase were published at home and abroad. Research objects: Adult patients with acute lymphoblastic leukemia were included, and the stratified diagnostic criteria were based on the 2012 Chinese Expert Consensus on the Diagnosis and Treatment of Adult Acute Lymphoblastic Leukemia, consistent with their race, nationality and course of disease Intervention measures Pegaspase treatment group as the test group L-asparaginase as the control group Observe the changes of blood coagulation function after the use of pegasparagase and L-asparaginase, the induction rate of remission and the occurrence of complications. Exclusion indicators: 1. Liver function damage caused by the primary disease and other drugs; 2. The type of study is not clearly stated, and effective outcome data cannot be extracted from the article 3. The full text, review, conference report, etc. cannot be obtained 4. The sample size is too small.

Information sources: Wanfang Database, CBM.

Main outcome(s): The changes of blood coagulation function and Remission rate.

Additional outcome(s): Complication.

Quality assessment / Risk of bias analysis: Cochrane tool.

Strategy of data synthesis: Non-heterogeneity selection of fixed-effects pooled data There is heterogeneity, first investigate the source of heterogeneity, and then choose a reasonable way to merge. For example, if the source of heterogeneity is statistical heterogeneity, you can choose random effects to merge data.

Subgroup analysis: No subgroups.

Sensitivity analysis: After deleting the data of any one of the documents, Whether the result of the merging of the remaining literature data differs greatly from the original.

Country(ies) involved: China.

Keywords: acute lymphoblastic leukelnia；L—asparaginase；pegaspargase；coagulation disorder.

Contributions of each author:
Author 1 - Xiang Qi.
Author 2 - Zhang Yuping.