bowel symptoms in patients with

Gu, B<sup>1</sup>; Zhou, J<sup>2</sup>; Yu, Z<sup>3</sup>; Shi, C<sup>4</sup>; Chen, B<sup>5</sup>.

the two diets.

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## **INPLASY** PROTOCOL

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**Conflicts of interest:** None declared.

## **INTRODUCTION**

**Review question / Objective: The purpose** of this study was to investigate the efficacy difference between low-FOdmap diet and normal diet in the treatment of guiescent inflammatory bowel disease, and the included research method was RCT clinical trial. Fecal calprotectin and quality of life scale were used as the main outcome indicators to compare and analyze the two diets.

Condition being studied: The supporting institution of this study has the right to use CNKI, Cochrane and other databases to search relevant literatures. Most of the participants were front-line clinicians or data statisticians, with professional knowledge of IBD and data analysis ability.

## **METHODS**

Participant or population: patients with quiescent inflammatory bowel disease.

Intervention: The Low-FODMAP diet.

Comparator: Normal diet.

Study designs to be included: Randomized controlled trial.

Eligibility criteria: Inflammatory bowel disease diagnosed according to the standards of the American Gastrointestinal Association or the European Society for Gastrointestinal Endoscopy.

Information sources: From inception up to December 20, 2021, the PubMed, Web of Science, Embase, AMED,Cochrane Library, CNKI, VIP, CBM, and Wanfang databases will besearched.

Main outcome(s): The primary outcome measures will include the Harvey Bradshaw Index or MAYO score, and Fecal calprotectin.

Quality assessment / Risk of bias analysis: STATA software was used for sensitivity analysis, and the sensitivity of the literature was corrected by the change of effect size after deleting one of the literature.

Strategy of data synthesis: STATA software was used for registry analysis, and I squared > 50% and P < 0.1 were considered as heterogeneity, heterogeneity selection random effect combined effect size, and heterogeneity selection fixed effect combined effect size.

Subgroup analysis: A subgroup analysis will be performed for ulcerative colitis and Crohn's diseaseNo subgroup analysis will be performed.

Sensitivity analysis: STATA software was used for sensitivity analysis, and the sensitivity of the literature was corrected by the change of effect size after deleting one of the literature.

Language: No language limits in the study.

Country(ies) involved: China.

Keywords: FODMAP diet.

## **Contributions of each author:**

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