# INPLASY PROTOCOL

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## Corresponding author: Wang Ziming

254806326@qq.com

### **Author Affiliation:**

Renmin Hospital of Wuhan University.

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Conflicts of interest: None declared.

## **INTRODUCTION**

Review question / Objective: To evaluate the efficacy of Traditional Chinese Medicine, specifically Jianpi Bushen

## Effects of Bushen Jianpi Huoxue Therapy for Treatment of Diabetic Nephropathy: A Meta-Analysis of Randomized controlled Trials

Wang, Z1; Mei, S2; Wu, Z3; Song, E4.

Review question / Objective: To evaluate the efficacy of Traditional Chinese Medicine, specifically Jianpi Bushen huoxue (JPBSHX) therapy, for treatment of patients with Diabetic Nephropathies (DN).

Condition being studied: Diabetic Nephropathies; Jianpi Bushen Huoxue Therapy.

Eligibility criteria: Inclusion Criteria. (1) Study type: randomized controlled trial (RCT). (2) Object of study: patients diagnosed with DN. (3) Intervention measures: control group patients with conventional comprehensive treatment, but except with BSJPHX therapy; experimental group patients with the treatment of the control group and BSJPHX therapy. (4) Outcome indicators: outcome indicators should be at least one of the following: clinical effective rate, fasting blood glucose (FBG), triglycerides(TG), 24-h urine protein quantification(UTP), serum creatinine (Scr), and blood urea nitrogen (BUN). Exclusion Criteria. (1) Languages other than Chinese or English; (2) Systematic evaluation, review, animal experiments (3) Original text cannot be obtained; (4) Not RCT or the design is not rigorous; (5) Patients with other renal diseases; (6) Intervention measures or control measures are not consistent with this study; (7) Repeated publication of data.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 18 March 2022 and was last updated on 18 March 2022 (registration number INPLASY202230088).

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Condition being studied: Diabetic Nephropathies; Jianpi Bushen Huoxue Therapy.

#### **METHODS**

Participant or population: Inclusion Criteria. (1) Study type: randomized controlled trial (RCT). (2) Object of study: patients diagnosed with DN. (3) Intervention measures: control group patients with conventional comprehensive treatment, but except with BSJPHX therapy; experimental group patients with the treatment of the control group and BSJPHX therapy. (4) Outcome indicators: outcome indicators should be at least one of the following: clinical effective rate, fasting blood glucose (FBG), triglycerides(TG), 24-h urine protein quantification(UTP), serum creatinine (Scr), and blood urea nitrogen (BUN). Exclusion Criteria. (1) Languages other than Chinese or English; (2) Systematic evaluation, review, animal experiments (3) Original text cannot be obtained: (4) Not RCT or the design is not rigorous; (5) Patients with other renal diseases; (6) Intervention measures or control measures are not consistent with this study; (7) Repeated publication of data.

Intervention: The interventions of included studies must include the Tonifying-Kidney, Strengthening-Spleen and Invigorating-Blood Circulation(Bushen-Jianpi-Huoxue, BSJPHX) principle in the experimental group. BSJPHX principle must includes the three elements of tonifying kidney, strengthening spleen and invigorating blood circulation. The treatment method is traditional Chinese medicine, which includes Chinese herbal medicine. acupuncture and moxibustion combined with Chinese herbal medicine, acupoint catgut embedding and so on. The dosages and courses were not limited in our studies.

Comparator: Patients in the control group were given conventional western medicines alone.

Study designs to be included: All published RCTs that meet the requirements.

Eligibility criteria: Inclusion Criteria. (1) Study type: randomized controlled trial (RCT). (2) Object of study: patients diagnosed with DN. (3) Intervention measures: control group patients with conventional comprehensive treatment, but except with BSJPHX therapy; experimental group patients with the treatment of the control group and BSJPHX therapy. (4) Outcome indicators: outcome indicators should be at least one of the following: clinical effective rate, fasting blood glucose (FBG), triglycerides(TG), 24-h urine protein quantification(UTP), serum creatinine (Scr), and blood urea nitrogen (BUN). Exclusion Criteria. (1) Languages other than Chinese or English; (2) Systematic evaluation. review, animal experiments (3) Original text cannot be obtained; (4) Not RCT or the design is not rigorous; (5) Patients with other renal diseases; (6) Intervention measures or control measures are not consistent with this study; (7) Repeated publication of data.

Information sources: Seven different databases (China National Knowledge Infrastructure, Wanfang Database, VIP, China Biological Medicine Database, PubMed, Cochrane Library and Embase) were independently searched from inception to February 2022.

Main outcome(s): Outcome indicators should be at least one of the following: clinical effective rate, fasting blood glucose (FBG), triglycerides(TG), 24-h urine protein quantification(UTP), serum creatinine (Scr), and blood urea nitrogen (BUN). The sample, age, sex and clinical indications, such as FBG, TG, 24h UTP, Scr, BUN of patients in the BSJPHX therapy and Western medicine group.

### Quality assessment / Risk of bias analysis:

The Cochrane Risk Bias Assessment Tool was used as the standard for rigorous evaluation as following aspects: (1) method of random allocation and allocation concealment; (2) blinding method of participants and personnel; (3) blinding

method of outcome assessment; (4) selectivity of result reporting; (5) other biases.

Author 3 - Wu Zihong. Author 4 - Song Enfeng.

Strategy of data synthesis: RevMan 5.4 was performed to data analyses. Relative risk (RR) was used as the effect size for dichotomous outcomes. Mean difference (MD) was used as the effect size for continuous outcomes with 95% confidence interval (CI). Q test and I 2 test were used to assess heterogeneity. If P>0.10 and I 2<50%, the fixed-effect model was applied; if not, the random effect model was applied.

Subgroup analysis: There are some planned subgroup analyses that will be performed: different specific therapies included in the tonifying-kidney, strengthening-spleen and invigoratingblood circulation (bushen-jianpi-huoxue) principle, different kinds of treatment methods (traditional Chinese herbal medicine, acupuncture and moxibustion combined with traditional Chinese herbal medicine, acupoint cataut embedding, and acupoint injection), different treatment periods and different follow-up periods (≤3 months, 3-6 months, >6 months). Sensitivity analysis was carried out to find the source of heterogeneity. Further subgroup analyses were applied to heterogeneity determine clinical study and methodology. P<0.05 was considered as statistically significant difference.

Sensitivity analysis: Sensitivity analysis was carried out to find the source of heterogeneity. Further subgroup analyses were applied to heterogeneity determine clinical study and methodology. P<0.05 was considered as statistically significant difference.

Country(ies) involved: China.

**Keywords:** Diabetic Nephropathy, Bushen Jianpi Huoxue therapy, Meta-Analysis, RTC.

Contributions of each author:

Author 1 - Wang Ziming. Author 2 - Mei Shasha.