

INPLASY PROTOCOL

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A meta-analysis of different health education models for intestinal preparation before colonoscopy

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None declared.

Review question / Objective: P:Adults over 18 who are preparing for colonoscopy. Exclusion criteria:special groups include illiteracy, deafness, blindness, mental disease, etc. Alimentary tract hemorrhage, The intestinal stenosis, etc. special disease. I: the intervention group received different kinds of health education on the basis of routine nursing standards. C:The control group was standard nursing process. O:The primary outcome was intestinal cleanliness (Boston scale or Ottawa scale),secondary outcome was polyp detection rate. S:Include only randomised controlled trials(RCTs).

Eligibility criteria: Adults over 18 who are preparing for colonoscopy. Exclusion criteria: special groups include illiteracy, deafness, blindness, mental disease, etc. Alimentary tract hemorrhage,The intestinal stenosis, etc. special disease.

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INTRODUCTION

Review question / Objective: P:Adults over 18 who are preparing for colonoscopy. Exclusion criteria:special groups include illiteracy, deafness, blindness, mental disease, etc. Alimentary tract hemorrhage, The intestinal stenosis, etc. special disease. I: the intervention group received

different kinds of health education on the basis of routine nursing standards. C:The control group was standard nursing process. O:The primary outcome was intestinal cleanliness (Boston scale or Ottawa scale),secondary outcome was polyp detection rate. S:Include only randomised controlled trials(RCTs).

Condition being studied: Colonoscopy is an important means to diagnose and screen colonic lesions. It plays an important role in colon cancer screening, and its diagnosis is accurate. The safety of and treatment largely depends on the quality of intestinal cleaning. Quantity. Studies have shown that adenomatous rest in the intestine can be found early under enteroscopy. Meat can significantly reduce the risk of colon cancer. Inadequate bowel preparation. Division can cause unclear visual field under colonoscopy, resulting in colonic lesions (such as rest). Missed diagnosis of meat, tumor, etc.), increased difficulty of examination, prolonged examination time, and increased incidence and additional costs. American Society for digestive endoscopy (ASGE) guidelines indicate that patients should be oral and oral before intestinal preparation. The method and purpose of preparation shall be fully informed in writing to improve the patient's ability to take medicine. Compliance and adequate notification are independent predictors of intestinal cleanliness. A large number of studies at home and abroad have shown that there are many new ways, such as video, SMS and wechat Letter, telephone, etc. Nursing intervention or health education can improve the intestinal function of patients. Road preparation quality. At present, the main intervention methods include information software, wechat and multi-channel Media education, video education, SMS or telephone education, telephone re education, video education. Different methods are adopted for post frequency retelling, individualized education, smart phones, etc. The effects of nursing intervention on the quality of intestinal preparation were different. face A variety of nursing intervention or health guidance methods are mostly limited by pairwise comparison, but It is not possible to determine the optimal nursing intervention or health guidance to provide effective nursing care. Methodological support. The meta-analysis method can quantitatively compare different intervention measures for the same research object, rank the advantages and disadvantages according

to a certain outcome index, and then select the best intervention measure.

METHODS

Search strategy: Embase, sinimed, scopus, OVID, CINAHL PULS, MEDLINE, cochrane library, etc. Scopus:((TITLE-ABS-KEY (colonoscopy OR digestive AND endoscopy OR coloscope OR coloscopy OR colonoscope OR sigmoidoscopy OR enteroscopy OR enteroscopes OR endoscopy OR endoscope OR intestine AND endoscopy OR rectoscopy OR rectoscopy) AND NOT gastroscop) AND ((TITLE-ABS-KEY ("bowel cleaning" OR "bowel preparation" OR "intestinal tract cleaning" OR "intestinal tract preparation" OR "intestine cleaning" OR "intestine preparation"))) AND (TITLE-ABS-KEY (education OR "propaganda education" OR guidance OR educat* OR guid*))) AND (rct OR "randomized control trial" OR "randomized controlled trial" OR "controlled trial" OR cohort OR "case control").

Participant or population: Adults over 18 who are preparing for colonoscopy.

Intervention: the intervention group received different kinds of health education on the basis of routine nursing standards.

Comparator: RevMan, stata, NoteExpress.

Study designs to be included: RCT.

Eligibility criteria: Adults over 18 who are preparing for colonoscopy. Exclusion criteria: special groups include illiteracy, deafness, blindness, mental disease, etc. Alimentary tract hemorrhage, The intestinal stenosis, etc. special disease.

Information sources: Embase, PubMed, Sinomed, Scopus, OVID, CINAHL PULS, MEDLINE, cochrane library, CNKI, VIP万方数据库.

Main outcome(s): The meta-analysis method can quantitatively compare different intervention measures for the

same research object, rank the advantages and disadvantages according to a certain outcome index, and then select the best intervention measure.

Data management: NotePress.

Quality assessment / Risk of bias analysis: 《Cochrane Handbook》 (Version 5.0), AMSTAR-2 Scale, H statistic, forest plot, funnel plot.

Strategy of data synthesis: MTC Meta-analysis.

Subgroup analysis: Crowd characteristics, Research quality, publication date.

Sensitivity analysis: Trim and fill method or Copas-selection model analysis.

Country(ies) involved: China.

Keywords: colonoscopy; bowel preparation; health education; nursing; meta-analysis.

Contributions of each author:

Author 1 - Liu Yafeng.

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