INPLASY PROTOCOL

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Conflicts of interest: None declared.

INTRODUCTION

Review question / Objective: At present, there is no systematic review on the treatment of dorsonuchal myofascitis by tuina. This study will evaluate the effectiveness and safety of the treatment of

Tuina for Dorsonuchal myofascitis: A systematic review protocol

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Review question / Objective: At present, there is no systematic review on the treatment of dorsonuchal myofascitis by tuina. This study will evaluate the effectiveness and safety of the treatment of dorsonuchal myofascitis by tuina, and provide evidence for the clinical application of tuina.

Condition being studied: Dorsonuchal myofascitis is a common soft tissue injury disease in clinic. This is due to trauma, improper treatment, or long-term strain, or external wind chill and other factors, so that the back muscle and fascia damage or aseptic inflammation. The affected muscles were stiff, the cord-like tendons or nodular tendons were palpable at the pain site, and the movement of the neck and back was limited. In addition, with the popularity of mobile phones and other electronic devices, the incidence of dorsonuchal myofasciitis is gradually increasing, and the trend of younger age. The treatment effect is not ideal and the disease recurs, which seriously affects the patient's work and life.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 08 April 2022 and was last updated on 08 April 2022 (registration number INPLASY202240051).

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METHODS

Participant or population: Patients over 18 years of age with dorsonuchal myofascitis were included. Participants of any gender or race will be enrolled.

Intervention: The treatment group used tuina or tuina combined with other therapies.

Comparator: The control group used oral drugs, acupuncture, physiotherapy and other treatments, or even notreatment.

Study designs to be included: Randomized controlled trials (RCTs).

Eligibility criteria: This review will include randomized controlled trials (RCTs) on Tuina for dorsonuchal myofascitis

Information sources: We will conduct searches in EMBASE, PubMed, Cochrane Library, Web of Science, China Nation Knowledge Infrastructure, Chinese Scientific and Technology Journal Database (VIP) and Wanfang Database.We will consider articles published between the database initiation and January 2023.

Main outcome(s): The main outcome of this study is the total effective rate.

Quality assessment / Risk of bias analysis:

Two authors will use the Cochrane Collaboration Bias Risk Assessment Tool to assess the risk of bias for all included studies. We will assess the risk of bias in

the following areas: sequence generation, assignment sequence hiding, the blindness of participants and staff, and result evaluators, incomplete outcome data, selective outcome reporting, and other sources of bias. The assessment of bias risk is divided into low, high and unclear. In the event of inconsistent results, the third author (XX) will make the final decision.

Strategy of data synthesis: If studies are adequately homogeneous in design and comparison, we will conduct data synthesis using Review Manager Software 5.3. The fixed-effects or random effects model will be chosen depending on the I2 value. A 95% confidence interval will be the effective size for data synthesis. We will perform qualitative analysis if the data is not fit for quantitative analysis.

Subgroup analysis: When sufficient data are available, we will conduct subgroup analyses to study heterogeneity, investigate differences in age and sex, interventions, etc.

Sensitivity analysis: Sensitivity analyses will be performed to assess the robustness and reliability of pooled results. The main analysis points include the impact of method quality, sample size, and missing data on the study. If the results are unstable, we may remove studies with a high risk of bias.

Country(ies) involved: China.

Keywords: dorsonuchal myofascitis; protocol; tuina; systematic review.

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