Review question / Objective: The aim of this meta-analysis is to evaluate the affect of radiotherapy in patients with upper urinary tract urothelial carcinoma to the prognosis. Condition being studied: The role of radiotherapy in patients with upper tract urothelial carcinoma is controversial. At present, there is no meta-analysis to neutralize this contradiction. Information sources: We will search, with no time restrictions, the following databases for relevant English language literature: PubMed, the Cochrane Library and Embase. INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-AnalysisProtocols (INPLASY) on 09 April 2022 and was last updated on 09 April 2022 (registration number INPLASY202240054). Support: None. Review Stage at time of this submission: Data extraction. Conflicts of interest: None declared.
present, there is no meta-analysis to neutralize this contradiction.

METHODS

Participant or population: Patients with upper tract urothelial carcinoma (as diagnosed by a clinician, or using any recognized diagnostic criteria) undergoing radiotherapy will be included.

Intervention: Patients undergoing radiotherapy.

Comparator: Patients without radiotherapy.

Study designs to be included: Retrospective study; prospective study.

Eligibility criteria: We will search, with no time restrictions, the following databases for relevant English language literature: PubMed, the Cochrane Library and Embase. Patients with upper tract urothelial carcinoma (as diagnosed by a clinician, or using any recognized diagnostic criteria) undergoing radiotherapy will be included.

Information sources: We will search, with no time restrictions, the following databases for relevant English language literature: PubMed, the Cochrane Library and Embase.

Main outcome(s): OS; CSS; LRFS; RFS; MFS.

Quality assessment / Risk of bias analysis: Two reviewers will independently assess the quality of the selected studies according to the Newcastle-Ottawa Scale(NOS). Items will be evaluate in three categories: selection, comparability and exposure.

Strategy of data synthesis: Hazard risk (HR) for both fixed and random effects models (weighting by inverse of variance) will be used. According to the Cochrane handbook, the I² will be considered non-important (60%). Results will be assessed using forest plots and presented as HRs for the main outcome and secondary outcomes. An influence analysis will be performed to ascertain the results of the meta-analysis by excluding each of the individual studies. Publication bias will be assessed by a funnel plot for meta-analysis. Statistical analysis will be conducted using Review Manager 5.3.

Subgroup analysis: We will consider subgroups such as Study period, Country, Treatment and Tumor stage.

Sensitivity analysis: Import the data into Stata software for sensitivity analysis.

Country(ies) involved: China.

Keywords: Radiotherapy; Upper tract urothelial carcinoma; Prognosis.

Contributions of each author: Author 1 - Xiao Zhou. Author 2 - Guangcheng Luo.