

INPLASY PROTOCOL

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None declared.

Thought Imprint Psychotherapy in a lowed resistance state(TIP) for Depression: A Systematic Review Based on RCT

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Review question / Objective: The aim of this systematic review is to evaluate the effectiveness and safety of Thought Imprint Psychotherapy in a lowed resistance state(TIP) for depression.

Condition being studied: Depression is a kind of mental disease which is characterized by low mood and loss of interesting in daily life, accompanied by disturbance of appetite, sleep disturbance, psychomotor, retardation or agitation, loss of energy, feeling of worthlessness and guilt, difficulty in thinking and even recurrent thought of death or suicide. According to WHO, more than 320 million people are suffering from depression, which had caused great financial burden. It affects all kinds of people and all aspects of life, including performance at school, productivity at work, relationships with family and friends, and ability to participate in the community.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 13 April 2022 and was last updated on 13 April 2022 (registration number INPLASY202240076).

INTRODUCTION

Review question / Objective: The aim of this systematic review is to evaluate the effectiveness and safety of Thought Imprint Psychotherapy in a lowed resistance state(TIP) for depression.

Rationale: TIP is a kind of localized psychotherapy involved theory and diagnosis of traditional Chinese medicine (TCM)in China. It combines hypnosis, suggestion and cognitive therapy by means of the theory of TCM, and creatively adds “regrowth method” to correct the patient's personality. Now it can be used in clinical

treatment of mood disorders, anxiety disorders, etc. However, since it a new kind of psychotherapy, there is no systematic review of its effectiveness and safety, thus, its effectiveness has not been recognized. Depressive disorder belongs to one-way mood disorder, as well as a main treatment direction of TIP and involves the indicators, such as, depression, anxiety and sleep condition, which can show the treatment effect of TIP in different aspects. If it can be proved to be effective and safe in the treatment of depression, it will be helpful to popularize it in clinical practice and promote the localization of psychotherapy in China.

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METHODS

Search strategy: Take PubMed for example: #1 randomized controlled trial [Publication Type]

#2 controlled clinical trial [Publication Type]

#3 randomized [Title/Abstract]

#4 placebo [Title/Abstract]

#5 drug therapy [MeSH Subheading]

#6 randomly [Title/Abstract]

#7 trial [Title/Abstract]

#8 groups [Title/Abstract]

#9 #1 OR #2 OR #3 OR #4 OR #5 OR #6 OR #7 OR #8

#10 animals [MeSH Terms] NOT humans [MeSH Terms]

#11 #9NOT#10

#12 (thought induction psychotherapy[MeSH Terms]) AND

((psychotherapy[MeSH Terms]) OR (psychology[MeSH Terms]))

#13 ((((((TIP[Title/Abstract]) OR (Thought Imprint Psychotherapy[Title/Abstract])) OR thought induction psychotherapy[Title/Abstract]) OR (static state Qigong[Title/Abstract])) OR (Qigong[Title/Abstract])) OR (under hypnosis[Title/Abstract])) OR (low resistance[Title/Abstract])) OR (thought induction[Title/Abstract])

#14(((((((Traditional Chinese Medicine[Title/Abstract]) OR (combined Western medicine[Title/Abstract])) OR (treatment[Title/Abstract])) OR (system[Title/Abstract])) OR (integrative medicine[Title/Abstract])) OR (complementary[Title/Abstract] AND alternative medicine[Title/Abstract])) OR (CAM[Title/Abstract])) OR (non-drug therapy[Title/Abstract])) OR (non-medicine therapy[Title/Abstract])

#15 #13 AND #14

#16 #12 OR #15

#17 ((anxiety[MeSH Terms]) OR (insomnia[MeSH Terms])) OR (depression[MeSH Terms])

#18((((((((anxiety[Title/Abstract]) OR (insomnia[Title/Abstract])) OR (depression[Title/Abstract])) OR (HAMD[Title/Abstract])) OR (HAMA[Title/Abstract])) OR (BDI[Title/Abstract])) OR (CPSS[Title/Abstract])) OR (PSQI[Title/Abstract])) OR (SDS[Title/Abstract])) OR (MMPI[Title/Abstract])

#19 #17 OR #18

#20 #11 AND #16 AND #19

We planned to search the following database: (1)China National Knowledge Infrastructure (CNKI), (2) Chinese Scientific Journal Database (VIP), (3) WanFang Database (WanFang), (4) Chinese biomedical literature service system (Sinomed) (5)PubMed, (6)Embase, (7)the Cochrane Library.

Participant or population: We included the patients who had been diagnosed according to Diagnostic and Statistical Manual of Mental Disorders(DSM-5), Chinese Criteria for classification and Diagnosis of Mental Disorders (CCMD-3), or The ICD-10 Classification of Mental and Behavioral Disorders. Besides if the patients whose score reached the

diagnostic criteria of Hamilton depression scale(HAMD), Beck Depression Inventory (BDI), or Self-rating depression scale(SDS) will also be include.

Intervention: Thought Imprint Psychotherapy in a low resistant state (TIP) was used alone or accompanied by conventional therapy.

Comparator: When TIP was used alone, the comparison can be between TIP and Western Medicine or evidenced-based psychotherapy. When TIP was used with conventional therapy, the comparison can be between TIP plus conventional therapy and conventional therapy or conventional therapy plus other evidence-based psychotherapy.

Study designs to be included: Randomized controlled trials.

Eligibility criteria: RCTs reported as full text, published as abstract only, or unpublished. Restrictions on language, time frame or country were not applied during study selection. Meeting one of the following outcomes can be excluded: Duplicate publications studies that considered TIP as the intervention of control group Studies in which data are not available:review, theoretical discussion, methodological research, Meta analysis, etc Two studies of the same research group were similar and published in different journals.

Information sources: Electronic database including China National Knowledge Infrastructure (CNKI), Chinese Scientific Journal Database (VIP), WanFang Database (WanFang), Chinese biomedical literature service system (Sinomed) , PubMed, Embase, the Cochrane Library.

Main outcome(s): (1)Total effective rate: HAMD scores decreased by 50% or more can be considered as effective. (2)HAMD, BDI or SAS scores after treatment

Additional outcome(s): (1)Hamilton Anxiety Scale (HAMA) or Self-Rating Anxiety Scale(SAS) scores after treatment.

(2)Pittsburgh sleep quality index (PSQI) scores and data of Polysomnography(PSG) after treatment. (3)adverse effect after treatment. (4)Treatment compliance.

Data management: Two researchers will screen and extract the included literature independently. If there was any disagreement, they would discuss it or a third reviewer would help solve it. Data extraction included publication time, first author, literature title, sample size, baseline, randomization method, interventions, course of treatment, outcomes, adverse reactions, etc.

Quality assessment / Risk of bias analysis: Based on the risk assessment method of bias recommended by the Cochrane Collaboration, publication bias assessment will be carried out for all the included studies by two researchers independently. Following domains was considered in the assessment: (1)random sequence generation; (2)allocation concealment; (3)blinding of participants and personnel; (4)blinding of outcome assessment; (5)incomplete outcome data; (6)selective outcome reporting; (7) other sources of bias. There were three levels for every item: high, low, unclear.

Strategy of data synthesis: We will use RevMan 5.4 software provided by the Cochrane collaboration network to conduct meta-analysis. Risk ratios (RRs) will be applied for dichotomous data and mean differences (MDs) for continuous data, both with 95% confidence intervals (CIs).

Subgroup analysis: For heterogeneity, we will consider the following factors : (1)different types of conventional therapy (Western Medicine, psychotherapy, or routing care) (2)Different antidepressants and (3)different psychological therapies.

Sensitivity analysis: We will conduct sensitivity analyses of the main outcomes to assess the impact of Risk of bias: We will do a sensitivity analysis by including or excluding trials judged as “high risk of bias” in an meta-analysis.

Language: English and Chinese.

Country(ies) involved: China.

Other relevant information: None.

Keywords: TIP; TCM psychotherapy; depression; randomized controlled trial; systematic review; meta-analysis.

Dissemination plans: Journal publication.

Contributions of each author:

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