INPLASY PROTOCOL

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None declared.

To explore the efficacy of naloxone combined with hemodialysis in acute severe alcohol intoxication : a meta-analysis

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Review question / Objective: **To evaluate the efficacy of naloxone combined with hemodialysis in acute severe alcohol intoxication and provide evidence-based medical evidence for naloxone combined with hemodialysis in the treatment of acute severe alcohol intoxication.**
Condition being studied: **There is no evidence-based medical evidence for the efficacy of naloxone combined with hemodialysis in acute severe alcohol intoxication. This study aims to evaluate the efficacy of naloxone combined with hemodialysis in acute severe alcohol intoxication.**
Information sources: **Five Chinese databases, seven English databases and clinical trial centers in China and the United States.**

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 03 May 2022 and was last updated on 03 May 2022 (registration number INPLASY202250014).

INTRODUCTION

Review question / Objective: **To evaluate the efficacy of naloxone combined with hemodialysis in acute severe alcohol intoxication and provide evidence-based medical evidence for naloxone combined with hemodialysis in the treatment of acute severe alcohol intoxication.**

Condition being studied: **There is no evidence-based medical evidence for the efficacy of naloxone combined with hemodialysis in acute severe alcohol**

intoxication. This study aims to evaluate the efficacy of naloxone combined with hemodialysis in acute severe alcohol intoxication.

METHODS

Participant or population: Acute severe alcohol intoxication.

Intervention: Naloxone combined with hemodialysis.

Comparator: Naloxone.

Study designs to be included: Randomized controlled trial.

Eligibility criteria: The experimental group was treated with naloxone combined with hemodialysis, and the control group was treated with naloxone. Other specific inclusion and exclusion criteria are to be developed.

Information sources: Five Chinese databases, seven English databases and clinical trial centers in China and the United States

Main outcome(s): Efficacy, length of stay, coma time, the time of poisoning symptoms vanished, complication rate.

Quality assessment / Risk of bias analysis: Cochrane collaboration tool.

Strategy of data synthesis: We used the RevMan software (version 5.3) provided by the Cochrane Collaboration and Stata (version 14 and 16) for data analysis. Dichotomous variable was presented as Risk ratios (RR). Ordinal categorical variable was presented as Odds ratios (OR). Continuous outcomes were presented as the mean difference and with a 95% confidential interval (CI) rate.

Subgroup analysis: According to the unit of the outcome indicator, subgroup analysis was performed as appropriate.

Sensitivity analysis: According to the change of effect size after deleting one of the studies.

Language: Chinese and English.

Country(ies) involved: China.

Keywords: acute severe alcohol intoxication, naloxone, hemodialysis, meta-analysis.

Contributions of each author:
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