

INPLASY PROTOCOL

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None declared.

Efficacy and safety of Anti-angiogenesis combined with chemoradiotherapy in the treatment of locally advanced cervical cancer: A Meta-Analysis of Randomized Controlled Trials

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Review question / Objective: To Systematically evaluate of the clinical efficacy and safety of the combination of anti-angiogenesis and simultaneous radiotherapy in the treatment of cervical cancer.

Condition being studied: Locally advanced cervical cancer. We searched databases including PubMed, Cochrane Library, Embase, Web of Science CNKI, Wanfang, VIP and CBM, and the International Clinical Trial Registry Platform (ICTRP) and the Chinese Clinical Registry(ChiCTR) to collect the clinical studies about the randomized controlled trial (RCTS) of anti-angiogenic drugs (mainly Endu, apatinib and bevacizumab) combined with chemoradiotherapy in the treatment of cervical cancer. The time limit is from the establishment of the database to April 2022. RevMan 5.4 software was used to analyze the short-term efficacy and the incidence of adverse reactions.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 16 July 2022 and was last updated on 16 July 2022 (registration number INPLASY202270077).

INTRODUCTION

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studies about the randomized controlled trial (RCTs) of anti-angiogenic drugs (mainly Endu, apatinib and bevacizumab) combined with chemoradiotherapy in the treatment of cervical cancer. The time limit is from the establishment of the database to April 2022. RevMan 5.4 software was used to analyze the short-term efficacy and the incidence of adverse reactions.

METHODS

Search strategy: We searched Chinese databases including CNKI, Wanfang, VIP and CBM, as well as English databases including PubMed, Cochrane Library, Embase and Web of Science, and ICTRP, ChiCTR. Search terms included: cervical cancer, Apatinib, endostar, Bevacizumab, Chemoradiotherapy, randomized controlled trial. Using "OR" to connect each subject word with the free words, and using "AND" to connect other search terms. The time limit is from the establishment of the database to April 2022.

Participant or population: Patients pathologically diagnosed with cervical cancer, clinically inoperable or refusing surgery and excluded contraindications of radiotherapy and chemotherapy.

Intervention: Anti-angiogenesis combined with chemoradiotherapy.

Comparator: Chemoradiotherapy.

Study designs to be included: Randomized Controlled Trials.

Eligibility criteria: Patients pathologically diagnosed with cervical cancer, clinically inoperable or refusing surgery and excluded contraindications of radiotherapy and chemotherapy.

Information sources: PubMed, Cochrane Library, Embase, Web of Science CNKI, Wanfang, VIP and CBM, and the International Clinical Trial Registry Platform (ICTRP) and the Chinese Clinical Registry(ChiCTR).

Main outcome(s): Objective response rate (ORR), Complete response (CR).

Additional outcome(s): Disease control rate(DCR), Incidence of adverse reactions including: Gastrointestinal reaction, Anemia, leukopenia, neutropenia, thrombocytopenia, hypertension, genitourinary reaction.

Data management: EndNote.

Quality assessment / Risk of bias analysis: We will use the Cochrane Collaboration's tool to assess the quality of the selected randomized controlled trials.

Strategy of data synthesis: RevMan 5.4 software was used to perform statistical analysis. Odds ratio (OR) was used as the index of combined effect, and 95% confidence interval (95% CI) was used to measure the index. All data analysis results will be presented in the form of forest plots, and $P < 0.05$ indicated statistically significant difference. Q test and I² statistic will be used for heterogeneity test of data. When $I^2 < 50\%$ and $P > 0.1$, heterogeneity was relatively low, using fixed effect model for data analysis; otherwise using random effect model. We will assess the potential publication bias by funnel plots.

Subgroup analysis: The ORR of different antiangiogenic agents combined with chemoradiotherapy for cervical cancer was analyzed in subgroup.

Sensitivity analysis: The sensitivity analysis will be carried out by RevMan 5.4 software. By eliminating each literature one by one and recombining the effect size, if the effect size changes significantly before and after the elimination, it indicates that the study is highly sensitive and the results are not stable.

Language: English.

Country(ies) involved: China.

Keywords: cervical cancer, endostar, Bevacizumab, Chemoradiotherapy, Apatinib, RCT.

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