INPLASY PROTOCOL

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None declared.

Safety and efficacy of acupuncture combined with traditional Chinese medicine in the treatment of chronic kidney disease

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Review question / Objective: Chronic kidney disease (CKD) is a common clinical chronic disease, which seriously affects the physical and mental health and quality of life of patients. The application of traditional Chinese medicine in the treatment of chronic kidney disease can reduce serum creatinine and urea nitrogen, reduce proteinuria, play a role in kidney protection, delay the occurrence and development of chronic kidney disease, and fully reflect the broad prospect of traditional Chinese medicine. Acupuncture is an important part of complementary and alternative medicine in Western countries and has been used in traditional Chinese medicine for thousands of years. However, there are relatively few reports on acupuncture combined with TCM in the treatment of CKD, which prompted us to conduct a systematic review and meta-analysis. We hope that the results of this work will provide scientific evidence and a credible medical reference for evaluating the safety and efficacy of this combination therapy in the treatment of patients with CKD in a clinical setting.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 12 August 2022 and was last updated on 12 August 2022 (registration number INPLASY202280042).

INTRODUCTION

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medicine for thousands of years. However, there are relatively few reports on acupuncture combined with TCM in the treatment of CKD, which prompted us to conduct a systematic review and meta-analysis. We hope that the results of this work will provide scientific evidence and a credible medical reference for evaluating the safety and efficacy of this combination therapy in the treatment of patients with CKD in a clinical setting.

Condition being studied: Chronic kidney disease (CKD) refers to chronic kidney disease or systemic diseases involving the kidney that can cause progressive irreversible decline of renal function, resulting in various clinical symptoms and metabolic disorders. Chronic kidney disease (CKD) is a common clinical chronic disease, which seriously affects the physical and mental health and quality of life of patients. Acupuncture combined with traditional Chinese medicine has been clinically shown to delay the progression of chronic kidney disease; however, no systematic review of the efficacy of this combination has been reported. Therefore, we aimed to conduct a systematic review and meta-analysis to evaluate the safety and efficacy of acupuncture combined with traditional Chinese medicine in the treatment of chronic kidney disease.

METHODS

Participant or population: Confirmed chronic kidney disease.

Intervention: Patients in the intervention group were treated with conventional treatment plus acupuncture combined with traditional Chinese medicine.

Comparator: Routine symptomatic treatment.

Study designs to be included: Randomized controlled trial.

Eligibility criteria: Participants were older than 18 years of age;The type of study was a randomized controlled trial

Information sources: PubMed、Embase, Cochrane、CBM、CNKI、VIP.

Main outcome(s): The total curative effect.

Additional outcome(s): 24-hour total urinary protein; Scr; BUN.

Data management: Endnote X9.

Quality assessment / Risk of bias analysis: Two investigators will independently assess the risk of bias in the included literature using the Cochrane Collaboration Bias Risk Tool. Methods for random assignment generation, assignment hiding, participant blindness, outcome assessor blindness, selective reporting, outcome data integrity, and other sources of bias will be evaluated. Each field will be appropriately rated as: high bias risk for uncertainty and low bias risk. Objections will be discussed and resolved by 2 researchers. If no agreement can be reached, a third party will be involved.

Strategy of data synthesis: In this study, RevMan 5.4 software will be used for statistical analysis. Hazard ratios and 95% confidence intervals (CI) were collected for enumeration data, respectively, and continuous outcome data were calculated using mean or standardized mean differences and 95% confidence intervals. The I2 statistic was calculated to test the heterogeneity of the data. When I2 was 50%, there was significant statistical heterogeneity between trials. A meta-analysis will be performed when there is homogeneity in the pooled results in a sufficient number of studies. In addition, subgroup analyses were performed to investigate the causes of heterogeneity.

Subgroup analysis: Subgroup analyses will be performed based on age, interventions, controls, and population size.

Sensitivity analysis: We will conduct sensitivity analyses to investigate the robustness and stability of the results by deleting studies with low methodological quality. The main points of analysis

included method quality, sample size, and the impact of missing data on the study. In this way, we will be able to assess the impact of individual studies on the overall results and determine whether the results are robust.

Country(ies) involved: China.

Keywords: chronic kidney disease; acupuncture; traditional Chinese medicine.

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