INPLASY PROTOCOL

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Meta-analysis of randomized controlled trials of admission commitment therapy in the treatment of depressive disorder

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Review question / Objective: Meta-analysis of randomized controlled trials of admission commitment therapy in the treatment of depressive disorder

Condition being studied: Depressive disorder is a common mental disorder with significant and persistent depression, fatigue, and loss of interest as the main clinical manifestations. Currently, the global annual prevalence of depression is about 6%, and the lifetime prevalence is about 18%. The World Health Organization pointed out in the "Global Burden of Disease Survey" that depressive disorder is the third largest disease burden in the world, and it is expected to jump to the number one disease burden in the world by 2030.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 13 September 2022 and was last updated on 13 September 2022 (registration number INPLASY202290055).

INTRODUCTION

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significant and persistent depression, fatigue, and loss of interest as the main clinical manifestations. Currently, the global annual prevalence of depression is about 6%, and the lifetime prevalence is about 18%. The World Health Organization pointed out in the "Global Burden of Disease Survey" that depressive disorder is the third largest disease burden in the

world, and it is expected to jump to the number one disease burden in the world by 2030.

METHODS

Participant or population: Depressed patients.

Intervention: Acceptance and commitment therapy.

Comparator: Waiting list control, CBT, CT, TAU.

Study designs to be included: Randomised controlled trial.

Eligibility criteria: (P) Intervention objects: patients with depressive disorder, in line with the DSM-IV diagnosis of depressive disorder. Patients with comorbidities were excluded. (I) Intervention measures: the experimental group received ACT intervention, excluding ACT combined with other treatments; (C) Control measures: the control group received conventional treatment or other treatments such as CBT; (O) Outcome indicators: depression index, psychological flexibility, quality of life Index; (S) Type of Study: Randomized Controlled Trial of Interventions for **Depressive Disorders. Exclusion criteria: (1)** Lack of outcome indicators or key information. (2) Repeated articles. (3) Intervention measures were ACT combined with other treatments.

Information sources: Web of Science Core Collection, Pubmed, EMBASE, Cochrane Library, PsycINFO, cnki, wanfang, vip database

Main outcome(s): ACT can effectively reduce the level of depression in patients with depressive disorder, improve psychological flexibility and quality of life, and has a good maintenance effect.

Quality assessment / Risk of bias analysis:

Two researchers independently assessed the quality of the included literature according to the Cochrane Manual 5.0.1

quality assessment criteria. The evaluation contents include random sequence generation, allocation concealment, blinding of participants and personnel, blinding of outcome assessment, incomplete outcome data, selective reporting, and other bias.

Strategy of data synthesis: Meta-analysis of the included literature was carried out using RevMan5.4 software.

Subgroup analysis: Meta-analysis of the included literature was carried out using RevMan5.4 softwareSubgroup analysis.

Sensitivity analysis: Meta-analysis of the included literature was carried out using RevMan5.4 softwareSubgroup analysis.

Country(ies) involved: China.

Keywords: acceptance and commitment therapy; randomised controlled trial; depression; Meta-analysis.

Contributions of each author:

Author 1 - bing zhao - Author 1 screened the literature, contributed to the risk of bias assessment and drafted manuscript.

Author 2 - jing guo.

Author 3 - liping wang.