

INPLASY PROTOCOL

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Corresponding author:
lingxia xu

xulingxia94@163.com

Author Affiliation:
Academician Workstation,
Jiangxi University of Chinese
Medicine, Nanchang, Jiangxi,
China.

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None declared.

Efficacy of Acupuncture for Pelvic Pain associated with Endometriosis in Women: A protocol for systematic review and meta-analysis

Xu, LX¹; Sun, P²; Yan, DM³; Tu, B⁴.

Review question / Objective: P: pelvic pain associated with EMs; I: acupuncture; C: non-penetrating needles; O: reduce the pain level.

Condition being studied: The usage of acupuncture for pelvic pain caused by endometriosis is common, although studies have not been conducted to establish its effectiveness. Hence, we will conduct a systematic review to assess the effectiveness of acupuncture in treating endometriosis-related pelvic pain.

Eligibility criteria: Study participants were eligible based on the following criteria: 1) 18-45 years old; 2) following menarche; 3) complete uterus and at least one ovary; 4) all patients had EMs

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 03 March 2023 and was last updated on 03 March 2023 (registration number INPLASY202330006).

INTRODUCTION

Review question / Objective: P: pelvic pain associated with EMs; I: acupuncture; C: non-penetrating needles; O: reduce the pain level.

Condition being studied: The usage of acupuncture for pelvic pain caused by endometriosis is common, although studies have not been conducted to establish its effectiveness. Hence, we will conduct a systematic review to assess the

effectiveness of acupuncture in treating endometriosis-related pelvic pain.

METHODS

Search strategy: From the following seven databases, studies were extracted to February 2023: PubMed, EMBASE, web of science, Cochrane Library, China National Knowledge Infrastructure (CNKI), Wan Fang Database (WanFang), sinomed and Weipu Database for Chinese Technical Periodicals (VIP). We searched the international and Chinese clinical trial registration platforms up to February 2023.

Participant or population: Study participants were eligible based on the following criteria: 1) 18-45 years old; 2) following menarche; 3) complete uterus and at least one ovary; 4) all patients had EMs.

Intervention: Acupuncture.

Comparator: Non-penetrating needles.

Study designs to be included: RCTs.

Eligibility criteria: Study participants were eligible based on the following criteria: 1) 18-45 years old; 2) following menarche; 3) complete uterus and at least one ovary; 4) all patients had EMs.

Information sources: PubMed, EMBASE, web of science, Cochrane Library, China National Knowledge Infrastructure (CNKI), Wan Fang Database (WanFang), sinomed and Weipu Database for Chinese Technical Periodicals (VIP).

Main outcome(s): Our study aimed to determine whether acupuncture can reduce the pain level (primary outcome), improve different aspects of the quality of life by Quality-of-life scales (the SF-36) and the take-home-baby rate (secondary outcome) for patients with EMs.

Quality assessment / Risk of bias analysis: An assessment of bias risk was performed by two investigators, with any disagreements being resolved by three

investigators. Seven items were included in this study, which were evaluated using the RoB 2 tool: random sequence generation; allocation concealment; blinding of patients and doctors; blinding of outcome assessment; incomplete and missing outcome data; selective outcome data reporting; other bias.

Strategy of data synthesis: The continuous data will be measured by Mean difference or Std Mean difference, 95% Confidence interval and P values. The dichotomous variables include will be estimated by Relative risk, 95% Confidence interval and P values. The chi-squared test and I² statistic will be used to test the statistical heterogeneity.

Subgroup analysis: 1) by age: patients were stratified into two groups: mean age >35 years and mean age ≤35 years. 2) by the severity of endometriosis: patients were stratified into three groups: I, II, or III endometriosis.

Sensitivity analysis: Sensitivity analysis will be performed by excluding studies with high risk of bias and changing the statistical model.

Country(ies) involved: China.

Other relevant information: Endometriosis (EMs) is a chronic disease caused by active endometrial tissue (glands and stroma) growing outside the uterus. EMs is characterized primarily by pain, and 87.7% of patients experience dysmenorrhea, 71.3% experience non-menstrual pain in the abdomen, 57.4% experience total abdominal pain, 56.2% experience pain during intercourse, 46.2% experience anal pain, and 39.5% experience painful bowel movement, which negatively influences their mental and physical health, and increases the social medical burden. Modern medicine has a good analgesic and lesion inhibition effect, but pelvic pain is prone to relapses.

Keywords: Acupuncture, Pelvic Pain, Endometriosis, systematic review, meta-analysis.

Contributions of each author:

Author 1 - LINGXIA XU.

Email: xulingxia94@163.com

Author 2 - PENG SUN.

Email: xlx1992a@126.com

Author 3 - dongmei yan.

Email: yandongmei2021@outlook.com

Author 4 - qing tu.

Email: 2720477121@qq.com

Author 5 - bin li.

Email: bin2021li@outlook.com