INPLASY PROTOCOL

To cite: Wen et al. Can acupuncture reverse oxidative stress and neuroinflammatory damage in animal models of vascular Dementia? A preclinical systematic review and meta-analysis. Inplasy protocol 202330114. doi: 10.37766/inplasy2023.3.0114

Received: 28 March 2023

Published: 28 March 2023

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Support: NSFC.

Review Stage at time of this submission: Data analysis - Completed but not published.

Conflicts of interest: None declared.

Can acupuncture reverse oxidative stress and neuroinflammatory damage in animal models of vascular Dementia? A preclinical systematic review and meta-analysis

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Review question / Objective: Participant: vascular dementia animals established by various surgical methods. Intervention: Acupuncture treatment was received after surgical modeling. Comparison: untreated vascular dementia animal model (impaired group) and vascular dementia animal model receiving placebo acupuncture (non-acupoint group). Outcomes: Morris water maze(escape latency, number of crossing the original platform), number of NissI positive neurons The rate of Tunel positive cells. Superoxide dismutase(SOD) activity, malondialdehyde (MDA) content glutathione peroxidase (GSH-PX) activities, The levels of TNFa,IL-1B,andIL-6. Particioant; dementiaanimals established by various surgical methods. Intervention Acupuncture treatment was received after surgical modelingComparison: untreated vascular dementia mode animal(impaired group) and vascular dementia animamodereceiving placebo acupuncture (nonacupoint groupoutcomes: Morris water maze(escape latency, number ocrossing the original platform), number of Nisslpositivtneurons, The rate of Tunel positive cells. Superoxidedismutase(SOD) activity, malondialdehyde (MDA) content glutathione peroxidase (GSH-PX) activities, The levels of TNF.a,IL-1B,andIL-6.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 28 March 2023 and was last updated on 28 March 2023 (registration number INPLASY202330114).

INTRODUCTION

Review question / Objective: Participant: vascular dementia animals established by various surgical methods. Intervention:

Acupuncture treatment was received after surgical modeling. Comparison: untreated vascular dementia animal model (impaired group) and vascular dementia animal model receiving placebo acupuncture (non-

acupoint group). Outcomes: Morris water maze(escape latency, number of crossing number of Nissl the original platform), positive neurons, The rate of Tunel positive cells. Superoxide dismutase(SOD) activity, malondialdehyde (MDA) content glutathione peroxidase (GSH-PX) activities, The levels of TNF-a,IL-1B,andIL-6. Particioant: dementiaanimals established by various surgical methods. Intervention Acupuncture treatment was received after surgical modelingComparison: untreated vascular dementia mode animal(impaired group) and vascular dementia animamodereceiving placebo acupuncture (non-acupoint groupoutcomes: Morris water maze(escape latency, number ocrossing the original platform), number of Nisslpositivtneurons, The rate of Tunel positive cells. Superoxidedismutase(SOD) activity, malondialdehyde (MDA) content glutathione peroxidase (GSH-PX) activities, The levels of TNF.a,IL-1B,andIL-6.

Condition being studied: In order to improve the accuracy of clinical research and grasp the internal mechanism acupuncture, research on animal models of acupuncture for VD has sprung up. We learned that acupuncture mainly achieves the purpose of treating VD models by inhibiting oxidative stress., inflammation apoptosis and increasing neurotransmitters and synaptic plasticity. Itis well known that oxidative stress is one of the most important pathological mechanisms of VD. It can trigger an inflammatory storm and induce neuronal apoptosis. Recent studies have found that it is also involved in two new cell death processes, ferroptosis and copper death. Therefore, the study of oxidative stress has become the main trend of acupuncture in animal models of VD.

METHODS

Participant or population: Vascular dementia animals established by various surgical methods, animal species, sex, weight, and age are not limited. Vascular

dementia animals established by various surgical methods.

Intervention: Acupuncture treatment was received after surgical modeling, with no restrictions on acupuncture methods acupoint combinations, treatment frequency, or stimulation intensity. Acupuncture treatment was received after surgical modeling.

Comparator: Untreated vascular dementia animal model (impaired group) and vascular dementia animal model receiving placebo acupuncture (non-acupoint group).

Study designs to be included: This study included literature on the treatment of vascular dementia with acupuncture which mainly studied the mechanisms of oxidative stress, inflammation, and apoptosis.

Eligibility criteria: Exclusion Criteria:(1)Non-simple acupuncture research.(2) Non-vascular dementia research.(3) Anima experiments with non-randomized control design. (4) Research on the mechanism of non-oxidative stress inflammation and apoptosis. (5)Studies with different measurement units under each outcome indicator (which cannot be converted into each other).(6) Review. abstract, conference paper, dissertation.(7)Repeated and data-identical studies.

Information sources: This meta-analysis was conducted according to the PRISMA2020 statement: an updated guidelines for reporting systematic reviews. This review does not have any preregistered protocols. two authors independently searched the databases of Pubmed, Embase, Web science(including Medline). The search time is limited to the establishment of the database until May 2022. The search terms are: acupuncture electroacupuncture. acupoint, vascular dementia, infarct dementia, vascular cognitive impairment. each search Word are used alone or in combination.

Main outcome(s): Morris water maze(escape latency, number of crossing the original platform), number of Nissl positive neurons, The rate of Tunel positive cells Superoxide dismutase (SOD) activity malondialdehyde (MDA) content glutathione peroxidase (GSH-PX) activities. The levels of TNF-a, IL-1B, and IL-6.

Quality assessment / Risk of bias analysis:

Two investigators independently assessed the risk of bias for each included stud)using the SYRCLEs Risk of Bias tool which included the following: selection bias(sequence generation, baseline characteristics and allocation concealment), performance bias (random housing and blinding), detection bias random outcome assessment and blinding), attrition bias (incomplete outcome data), reporting bias (selective outcome reporting), other sources of bias. If disagreements are encountered, they will be resolved through discussions with a third author.

Strategy of data synthesis: Review Manager 5.3 was used for statistical analysis of the data. First the heterogeneity test was performed. When studies were homogenous(P≥0.05,I2 ≤50%), the fixedeffects model (FE)was used for analysis. If there was significant heterogeneity among the studies (P<0.05,I2 > 50%),a randomeffects model (RE) was used for the analysis, and a sensitivity analysis was performed to examine the sources of heterogeneity and to assess the stability of the results. The outcome indicators of this study were all continuous variables, and their outcomes were expressed by standard mean difference(SMD) and 95% confidence interval (95%CI). The 95% CI did not contain 0.indicating that the results were statistically different (P < 0.05), and finally a funnel plot was used to analyze potential publication bias.

Subgroup analysis: Subgroup analysis: In order to observe the effect of different acupuncture prescriptions on the results

when measuring the outcomes of the morris water maze, we set up subgroups according to different acupoint combinations, acupuncture methods, and treatment courses.

Sensitivity analysis: If random-effects model (RE) was used for the analysis, and a sensitivity analysis was performed to examine the sources of heterogeneity and to assess the stability of the results.

Country(ies) involved: China.

Keywords: acupuncture; vascular dementia; oxidative stress; inflammation:apoptosis; animal; Meta-analysis.

Contributions of each author:

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Author 3 - Kunze He.

Author 4 - Min Li.