

INPLASY PROTOCOL

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Conflicts of interest:
None declared.

Oral herbal medicine for treatment of radiation enteritis: A protocol for systematic review and meta-analysis

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Review question / Objective: Oral herbal medicine for treatment of radiation enteritis: A protocol for systematic review and meta-analysis.

Information sources: pubmed,web of science, EMBASE, MEDLINE, China National Knowledge Infrastructure,China Science and Technology Journal Database,Wan fang Database, Cochrane Central Register of Controlled Trials,the Chinese Biomedical Literature Database (CBM). Randomised clinical trials published up to April 2023 were included without language restrictions.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 29 April 2023 and was last updated on 29 April 2023 (registration number INPLASY202340108).

INTRODUCTION

Review question / Objective: Oral herbal medicine for treatment of radiation enteritis: A protocol for systematic review and meta-analysis.

Condition being studied: Radiation enteritis is an intestinal complication of pelvic, abdominal and retroperitoneal malignancies caused by radiation therapy.

METHODS

Participant or population: Patients diagnosed with radiation enteritis.The exclusion criteria were as following: (1)observational studies;(2)animal experiments;(3)case reports;(4)reviews and other non randomized controlled trials; (5)data cannot be extracted and the quality of the literature is poor or repeated.

Intervention: Traditional Chinese medicine (herbal compound, Chinese patent medicine) is used alone or in combination with other treatment methods.

Comparator: Other treatments (including any other non-Chinese medicine treatment) or combined with fake Chinese medicine.

Study designs to be included: Patients with radiation enteritis with clear diagnostic criteria; Randomized controlled trials.

Eligibility criteria: Observational studies, animal experiments, case reports, reviews and other non-randomized controlled trials; Data cannot be extracted and the quality of the literature is poor or repeated; studies without available data can be extracted; non-original studies (letters, reviews, editorial editorials).

Information sources: Pubmed, web of science, EMBASE, MEDLINE, China National Knowledge Infrastructure, China Science and Technology Journal Database, Wan fang Database, Cochrane Central Register of Controlled Trials, the Chinese Biomedical Literature Database (CBM). Randomised clinical trials published up to April 2023 were included without language restrictions.

Main outcome(s): Clinically effective.

Quality assessment / Risk of bias analysis: The two authors will use the Cochrane Handbook for Systematic Reviews of Interventions to assess the risk of bias and trial quality in the selected literature.

Strategy of data synthesis: RevMan V.5.4 software was used for meta-analysis. We will choose random or fixed effect models for data statistics based on the results of the heterogeneity test. Continuous data will be described as mean, standard deviation. Dichotomous data will be described as proportions and event rates. Statistical heterogeneity of the results will be evaluated with P . If $P > 0.1$ indicates that there is no statistical heterogeneity between studies. Heterogeneity was

assessed using I^2 , if $I^2 > 50\%$ indicates that statistical heterogeneity between studies is within acceptable limits.

Subgroup analysis: If we found significant heterogeneity in the included studies, we planned to perform the following subgroup analyses to determine the source of heterogeneity: age, sex, duration of treatment, types of herbal medicine, or other factors that may affect the results.

Sensitivity analysis: Sensitivity analyses will be performed by excluding low-quality trials. We will perform sensitivity analyses based on methodological study quality, sample size, missing data to assess robustness of the comprehensive results.

Country(ies) involved: China.

Keywords: radiation enteritis, herbal medicine, meta-analysis, protocol, systematic review.

Contributions of each author:

Author 1 - Meng xiangyue.

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