

# INPLASY PROTOCOL

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submission:** Preliminary  
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**Conflicts of interest:**  
None declared.

## Tubulointerstitial nephritis and uveitis syndrome: a case report and a systematic review in China

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**Review question / Objective:** Tubulointerstitial nephritis and uveitis syndrome: a case report and a systematic review in China. We performed a systematic review to further study on epidemiological characteristics, clinical manifestations, diagnosis and treatment methods and clinical outcomes of TINU syndrome by analyzed the previous case reports and small sample observational studies in China.

**Eligibility criteria:** ①Various literatures related to TINU syndrome, ②Documents containing duplicate data in the same medical center are reserved for recent publication, ③In line with the diagnostic criteria of TINU syndrome proposed by Mandeville in 2001.

**INPLASY registration number:** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 12 May 2023 and was last updated on 12 May 2023 (registration number INPLASY202350050).

### INTRODUCTION

**Review question / Objective:** Tubulointerstitial nephritis and uveitis syndrome: a case report and a systematic review in China. We performed a systematic review to further study on epidemiological characteristics, clinical manifestations, diagnosis and treatment methods and

clinical outcomes of TINU syndrome by analyzed the previous case reports and small sample observational studies in China.

**Condition being studied:** Study patients were diagnosed with TINU syndrome by Mandeville' diagnostic criteria, which is an autoimmune disease involving multiple

systems, causing acute kidney injury and uveitis.

## METHODS

**Search strategy:** Using the five databases of PubMed, Web of Science, Wanfang, CNKI, and VIP, a systematic literature search was conducted in September 2022. The language was restricted to English and Chinese.

**Participant or population:** The literature comparing the outcomes of all reported patients with TINU syndrome in china between Male and female or <18 years and ≥18 years. Inclusion criteria: ①Various literatures related to TINU syndrome, ②Documents containing duplicate data in the same medical center are reserved for recent publication, ③In line with the diagnostic criteria of TINU syndrome proposed by Mandeville in 2001. Exclusion criteria: ①Repeated cases reported in different databases, ②Cases lacking demographic data, ③Cases not reported in China, ④reviews.

**Intervention:** Hormone, immuno-suppressant and traditional Chinese medicine.

**Comparator:** Not applicable.

**Study designs to be included:** Case report and case series.

**Eligibility criteria:** ①Various literatures related to TINU syndrome, ②Documents containing duplicate data in the same medical center are reserved for recent publication, ③In line with the diagnostic criteria of TINU syndrome proposed by Mandeville in 2001.

**Information sources:** Using the five databases of PubMed, Web of Science, Wanfang, CNKI, and VIP, a systematic literature search was conducted in

September 2022. The language was restricted to English and Chinese.

**Main outcome(s):** Recurrence of kidney disease or CKD and Recurrence of uveitis or Chronic uveitis. The following data were collected: age at diagnosis, sex, cause of disease (infection, drug), prodrome (fever, fatigue, gastrointestinal symptoms, weight loss, nocturia increase), eye symptoms (redness, pain, blurred vision, photophobia), type of uveitis, the occurrence of sequence of uveitis and TIN (uveitis occurs before renal injury, and both occur in parallel: the time difference between uveitis and renal injury is within 3 weeks; uveitis occurs after renal injury), treatment, follow-up time and prognosis. In addition, the following laboratory details were retained: creatinine, urea, erythrocyte sedimentation rate (ESR), white blood cell count, urinalysis, antinuclear antibodies (ANAs), C3, C4, anti-neutrophil cytoplasmic antibodies (ANCA).

**Quality assessment / Risk of bias analysis:** We aimed to provide an overview of TINU symptoms, regardless of the risk of bias in the included studies. Therefore, the methodological quality of the included studies was not formally evaluated.

**Strategy of data synthesis:** SPSS25.0 software was used for statistical analysis. The measurement data conforming to the normal distribution is expressed by  $\bar{x} \pm s$ , and the comparison between groups is conducted by t test. The measurement data of non-normal distribution are expressed by the median and quartile interval, and the inter-group comparison is conducted by the rank sum test. The counting data is described by rate. When the theoretical frequency is  $\geq 5$  and  $n > 40$ , the inter-group comparison is adopted  $\chi^2$  Inspection; When the theoretical frequency is less than 5 or  $n < 40$ , Fisher's exact probability method is used for inter-group comparison.  $P < 0.05$  is statistically significant.

**Subgroup analysis:** The literature comparing the outcomes of TINU syndrome between Male and female or <

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18 years and  $\geq 18$  years will be analysed as a sub-group.

**Sensitivity analysis:** None.

**Country(ies) involved:** China.

**Keywords:** Tubulointerstitial nephritis; uveitis; TINU syndrome; glucocorticoid; systematic review.

**Contributions of each author:**

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Author 2 - xu shaoyan.

Author 3 - chen jianxiang.

Author 4 - wu henglan.