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The Effect of Sevoflurane on Postoperative Sleep Quality: a Systematic Review

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ADMINISTRATIVE INFORMATION

Support - No funding.

Review Stage at time of this submission - Preliminary searches.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202370019

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 06 July 2023 and was last updated on 06 July 2023.

INTRODUCTION

Review question / Objective The objective of the study was to evaluated the effect of sevoflurane on postoperative sleep quality in patients receiving general anesthesia. The control intervention can be other intravenous anesthetics. The types of studies can be RCT, case-control studies, or cohort studies.

Condition being studied Postoperative sleep quality may impact postoperative recovery, which should not be ingored in perioperative period. Previous studies showed that dexmedetomidine and esketamine can improve postoperative sleep quality. Sevoflurane was widely used in the maintance of general anesthesia. However, the influence of sevoflurane on postoperative sleep quality was not clear. Therefore, we plan to conduct a systematic review on the effect of sevoflurane on postoperative sleep quality.

METHODS

Participant or population Patients receiving general anesthesia.

Intervention The use of sevoflurane during general anesthesia.

Comparator Comparator was other anesthetic in the control group (eg. propofol).

Study designs to be included RCTs, case-controls studies, and cohort studies.

Eligibility criteria The inclusion criteria were: (1) sevoflurane was used during anesthesia. (2) Postoperative sleep quality was assessed in the follow-up period. The exclusion criteria were: (1) case report. (2) Review. (3) basic research.

Information sources Pubmed, Embase, Web of Science, and ClinicalTrial.gov.

Main outcome(s) The main outcomes were postoperative sleep quality of patients.

Quality assessment / Risk of bias analysis In RCTs, the risk of bias was assessed using Cochrane Bias Assessment Tool. In cohort studies, the risk of bias was assessed using Newcastle-Ottawa Scale (NOS).

Strategy of data synthesis Meta-analyses were not applicable because the heterogeneity of patients and measurments.

Subgroup analysis Studies were assumed to be grouped by ages of patients (such as children and adults).

Sensitivity analysis Not applicable, because the heterogeneity of patients and measurments.

Language restriction Only English language references were included.

Country(ies) involved China (Fudan University Shanghai Cancer Center).

Keywords Sevoflurane; postoperative; sleep quality.

Contributions of each author

Author 1 - Yuecheng Yang.

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Author 3 - Jun Zhang.