

INPLASY

Laparoscopic ultrasonography reduce biliary tract injury during cholecystectomy

INPLASY202390024

doi: 10.37766/inplasy2023.9.0024

Received: 08 September 2023

Published: 08 September 2023

Qiu, F¹; Gao, Y².

Corresponding author:

Feng Qiu

brightlight@126.com

Author Affiliation:

Beijing Luhe Hospital affiliated to Capital Medical University.

ADMINISTRATIVE INFORMATION

Support - No.

Review Stage at time of this submission - Preliminary searches.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202390024

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 08 September 2023 and was last updated on 08 September 2023.

INTRODUCTION

Review question / Objective If laparoscopic ultrasonography can reduce biliary tract injury during cholecystectomy?

Condition being studied Patients with cholecystitis, gallstone or cholecystic polypus.

METHODS

Participant or population Patients undergoing laparoscopic cholecystectomy.

Intervention Laparoscopic ultrasonography.

Comparator Cholecystectomy without Laparoscopic ultrasonography.

Study designs to be included RCT.

Eligibility criteria Patients undergoing laparoscopic cholecystectomy.

Information sources cnki; wanfang; pubmed; scopus; web of science.

Main outcome(s) complication; conversion to laparotomy.

Quality assessment / Risk of bias analysis Corhrane.

Strategy of data synthesis STAT software was selected for data analysis. Heterogeneity was considered for $I > 50\%$ and $P < 0.1$. If there was heterogeneity, random effect combined effect size was selected and fixed effect combined effect size was selected.

Subgroup analysis Elective surgery, emergency surgery.

Sensitivity analysis The STAT software performs a sensitivity analysis to reflect the sensitivity of the article by the change in the effect size after the deletion of one of the articles.

Country(ies) involved China.

Keywords Laparoscopic ultrasonography ; biliary tract injury; complication.

Contributions of each author

Author 1 - Feng Qiu.

Author 2 - Yue Gao.