International Platform of Registered Systematic Review and Meta-analysis Protocols

INPLASY

INPLASY2023100080 doi: 10.37766/inplasy2023.10.0080 Received: 23 October 2023

Published: 23 October 2023

Corresponding author:

Aditya Gupta

agupta@mediproberesearch.com

Author Affiliation: Mediprobe Research Inc.

The impact of therapies for male pattern baldness: protocol for a network meta-analysis study

Gupta, AK1; Bamimore, MA2; Wang, T3.

ADMINISTRATIVE INFORMATION

Support - None.

Review Stage at time of this submission - Formal screening of search results against eligibility criteria.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY2023100080

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 23 October 2023 and was last updated on 23 October 2023.

INTRODUCTION

eview question / Objective Numerous agents are used to treat pattern baldness, a condition that is also referred to as a androgenetic alopecia (AGA) or pattern hair loss; it is the most common form of alopecia in men and women. This condition is not only the most common form of hair loss but is also associated with negative psychosocial consequences (e.g., anxiety). The overall aim of the proposed study is to determine the relative impact of therapies used for pattern baldness. The impact of the various agents used to address AGA has been investigated in numerous trials-thereby making the evidence base for this condition expansive. Evidence on agents' therapeutic effects, in a hierarchal sense, would aid clinical decision making.

Rationale The condition's expansive evidence base, coupled with its psychological morbidity, warrants identifying agents comparative impact.

Condition being studied Men diagnosed with pattern baldness.

METHODS

Search strategy Searches were made in electronic databases including PubMed.

Participant or population Males diagnosed with pattern baldness.

Intervention Therapies used for treating pattern baldness.

Comparator comparatoors can include placebo, vehicle or other active agents.

Study designs to be included Quantitative analyses will include evidence from randomized trials.

Eligibility criteria Data from studies published in a non-English language will be excluded.

Information sources Electronic databases and trial registries (e.g., ClinicalTrials.gov).

Main outcome(s) Outcomes measures will include relevant clinical endpoints, such as 6-month change in total hair density.

Data management Quantitative syntheses will include Bayesian network meta-analyses.

Quality assessment / Risk of bias analysis We plan to use the Cochrane Collaboration's risk of bias (RoB) tool to evaluate evidence quality.

Strategy of data synthesis Quantitative syntheses will include Bayesian network meta-analyses.

Subgroup analysis The extracted data would determine whether subgroup analyses would be conducted.

Sensitivity analysis Specifics of sensitivity analyses would be finalized after reviewing extracted data.

Language restriction Our analyses would evidence presented in a non-English language.

Country(ies) involved Canada.

Keywords pattern baldness; total hair density; terminal hair density; dihydrotestosterone.

Contributions of each author

Author 1 - Aditya Gupta. Email: agupta@mediproberesearch.com Author 2 - Mary Bamimore. Email: mbamimor@alumni.uwo.ca Author 3 - Tong Wang. Email: twang@mediproberesearch.com