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None reported.

Traditional Chinese Medicine Nonpharmacological Interventions for Management of the Symptom Cluster In cancer survivors: A Systematic Review of Randomized Controlled Trials

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## **ADMINISTRATIVE INFORMATION**

**Support - None reported.** 

Review Stage at time of this submission - The review has not yet started.

Conflicts of interest - None declared.

**INPLASY registration number:** INPLASY202410076

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 18 January 2024 and was last updated on 18 January 2024.

## INTRODUCTION

Review question / Objective (1) What are the current Traditional Chinese Medicine nonpharmacological interventions for cancer symptom clusters? (2) What is the effectiveness of Traditional Chinese Medicine nonpharmacological interventions in improving symptom clusters and quality of life (QoL) in cancer survivors? (3) What is the safety of Traditional Chinese Medicine nonpharmacological interventions for symptom clusters in cancer survivors?

Rationale Due to the advancements in cancer diagnosis and treatment, the escalating number of the cancer survivors has been considered as a global public health problem. Prolonged cancer experiences and cancer-related therapies subject cancer survivors to a range of distressing symptoms, such as pain, fatigue, sleep distress, anxiety, depression, etc. These symptoms always occur simultaneously, therefore forming a

symptom cluster. The symptom clusters not only hinder the individual's functional abilities but also lead to a decline in their overall quality of life. Moreover, the cumulative impact of symptom clusters surpasses that of single symptoms. Traditional Chinese medicine (TCM) nonpharmacological interventions are becoming increasingly popular for cancer treatment and rehabilitation interventions given their costeffectiveness, safety, and acceptability among survivors. Although existing systematic reviews have ostensibly incorporated studies within the context of symptom clusters, a rigorous scrutiny reveals that these so-called clusters are often individually symptoms rather than authentic and distinct symptom clusters. Notable, there is lacking evidence about the on what effectiveness of TCM nonpharmacological interventions on symptom clusters in cancer survivors.

Condition being studied A symptom cluster is defined as two or more concurrent symptoms related to one another, and the quality of life is jeopardized. TCM interventions include moxibustion, acupuncture, acupressure, acupoint massage, Tai Chi, Tai Chi sword, Qigong, Wuqinxi (five mimic-animal exercise), Baduanjin (eight-sectioned exercise), and othertechniques.

#### **METHODS**

Search strategy The Mesh terms, keywords, and entry terms both in English and Chinese will be used as search terms to identify possible studies:neoplasms,cancer,carcinoma,癌症,and恶性肿瘤,ect.; syndrome, symptom cluster ,and 症状群 etc,; 随机, 对照, and randomized controlled trials, etc.

Participant or population Adults (≥18 years old) with cancer diagnosed of any type and stage; the cancer survivors have reported a truly symptom cluster.

Intervention Inclusion criteria: Any form of traditional Chinese medicine nonpharmacological intervention method will be considered. This term encompasses disease intervention methods that do not involve drug treatment. TCM interventions include moxibustion, acupuncture, acupressure, acupoint massage, Tai Chi, Tai Chi sword, Qigong, Wuqinxi (five mimic-animal exercise), Baduanjin (eight-sectioned exercise), and other techniques.

**Comparator** Comparisons will include waitlist control, non-intervention, pharmacological intervention or sham control.

**Study designs to be included** Randomised controlled trial.

**Eligibility criteria** Studies reported in English or Chinese with full-text. Since the symptom cluster was first defined in 2001, this review will limit the publication since 2001.

Information sources We will conduct a comprehensive search for published studies in 8 electronic databases, including: 1.English-language electronic databases: PubMed, Web of Science, EMBASE, CINAHL, Cochrane Library, 2.Chinese electronic databases: Chinese National Knowledge Infrastructure (CNKI), WanFang database, and Chinese Biomedical Literature Database.

**Main outcome(s)** Primary outcome: cancer-related symptom clusters. Secondary outcomes: quality of life, safety.

Data management Endnote.

Quality assessment / Risk of bias analysis The revised Cochrane risk of bias (ROB version 2) tool recommended by the latest Cochrane Handbook was used by two authors to assess the quality of the included RCTs.

**Strategy of data synthesis** Narrative and descriptive analysis will be used in this study. The results will be categorized based on the reported intervention types and outcomes. Subsequently, these findings will be summarized and synthesized in a narrative format.

Subgroup analysis NA.

Sensitivity analysis NA.

Language restriction English, Chinese.

Country(ies) involved China.

**Keywords** Symptom cluster; Neoplasm; Traditional Chinese Medicine; Quality of life; Safety.

## Contributions of each author

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