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The efficacy of Sijunzi decoction on immune function in patients with gastrointestinal cancers after surgery: An integrated study of systematic review and network pharmacology

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ADMINISTRATIVE INFORMATION

Support - Special Subject of Medical Research of Longhua District Medical Association (2023LHMA02).

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

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202440001

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 01 April 2024 and was last updated on 01 April 2024.

INTRODUCTION

Review question / Objective To assess the efficacy of Sijunzi decoction (SJZD), the Chinese classical formula, on immune function in patients with gastrointestinal cancers.

Condition being studied Gastrointestinal cancers are the leading causes of cancer deaths. Surgery is an important treatment method for gastrointestinal cancers, but patients often have impaired immune function after surgery. The decreased immune function needs to be solved.

METHODS

Search strategy "gastrointestinal neoplasms OR Gastrointestinal Cancers OR esophageal cancer OR gastric cancer OR colorectal cancer OR Colon cancer OR rectal cancer", "randomized", and, "sijunzi".

Participant or population All adults who met the diagnostic criteria of gastrointestinal cancers, and patients with gastrointestinal cancers were treated surgically.

Intervention Administration of Sijunzi decoction plus conventional therapies after operation.

Comparator Conventional therapies after operation.

Study designs to be included RCTs.

Eligibility criteria Included RCTs had to report on immune cells or immunoglobulin. Sijunzi decoction cannot be modified.

Information sources PubMed, Cochrane Library, and Embase, Web of Science and CNKI, Wanfang Data, VIP Database, and CBM Database was searched.

Main outcome(s) (1) immune cells, including CD3+, CD4+, CD8+, CD4+/CD8+, natural killer (NK) cells, or immunoglobulin (IgA, IgG, and IgM).

Additional outcome(s) Albumin (ALB); Safety (adverse events).

Quality assessment / Risk of bias analysis The methodological quality of the RCTs was appraised by the Cochrane risk of bias tool.

Strategy of data synthesis The dichotomous variables used Risk Ratio as the effect size measure, and continuous variables used the mean difference as the effect size measure. The results were calculated with 95% CIs. Moreover, heterogeneity between articles was assessed by the I2 test. If the value of I2 is more than 50%, the random-effects model or descriptive analysis was performed.

Subgroup analysis Subgroup analysis will be done according to pathological type.

Sensitivity analysis Evaluate the combined results and heterogeneity after removing the included studies one by one.

Language restriction English or Chinese.

Country(ies) involved China.

Keywords compound decoction; TCM; gastrointestinal cancers; randomized controlled trials; immune.

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