INPLASY

Efficacy of endoscopic hemoclip placement for gastrointestinal Dieulafoy's lesions: A meta-analysis

INPLASY202440118
doi: 10.37766/inplasy2024.4.0118
Received: 29 April 2024
Published: 29 April 2024

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ADMINISTRATIVE INFORMATION

Support - None.

Review Stage at time of this submission - Preliminary searches.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202440118

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 29 April 2024 and was last updated on 29 April 2024.

INTRODUCTION

Review question / Objective To evaluate the efficacy of endoscopic hemoclip placement in the treatment of gastrointestinal Dieulafoy disease. Population:gastrointestinal Dieulafoy disease. Intervention:endoscopic hemoclip placement. Comparison:other endoscopic treatments. Outcome: Effective rate,Early hemostasis rate, Rebleeding rate. Study: RCT.

Condition being studied Dieulafoy's lesions, also known as gastric submucosal constant diameter arterial rupture and hemorrhage, is a rare hemorrhagic disorder of the upper digestive tract. The lesions were small and the amount of bleeding was large and repeated, severe life-threatening, is one of the internal medicine emergency.In terms of treatment, domestic and foreign literature reported a variety of methods such as internal medicine, endoscopic therapy, interventional therapy and surgical treatment, but the efficacy was not consistent.The purpose of this study was to evaluate the effectiveness of titanium clip placement compared with other endoscopic treatments.

METHODS

Participant or population Patient with gastrointestinal Dieulafoy's lesions, regardless of age, gender.

Intervention Endoscopic hemoclip placement.

Comparator Other endoscopic treatments.

Study designs to be included Only randomized controlled trials(RCTs) will be included in this study.

Eligibility criteria Inclusion Criteria:(1) Study type: randomized controlled trial; (2) Subjects: consistent with endoscopic DieulafoyThe diagnostic criteria of the disease; (3) Interventions: endoscopic hemoclip placement; (4) Primary outcome: total hemostasis in each intervention groupNumber of work.

Information sources Pubmed, Embase, Cochrane Library, Web of science,Chinese Biomedical Literatures Database(CBM), China National Knowledge Infrastructure (CNKI) , WangFang Database (WF), Chinese Scientific Journal Database (VIP),from the establishment of the database to April 20, 2024.

Main outcome(s) Effective rate, early hemostasis rate, rebleeding rate.

Quality assessment / Risk of bias analysis Included randomised studies will be assessed for risk of bias by two independent raters(Xiahan Huang and Min Xiao) using the Cochrane Collaboration's tool for assessing risk of bias in randomised trials. Any disagreements will be resolved through discussion or consultation with a third reviewer(Li Li).

Strategy of data synthesis Data synthesis will be conducted with RevMan V.5.3 software provided by the Cochrane Collaboration. Before data meta-analysis, we measure the heterogeneity with a standard test. Depending on the level of heterogeneity, those studies with high heterogeneity ($p>0.10$) will use fixed-effect model. We will use the RR for dichotomous data and SMD for continuous data and mean difference with 95% CIs. Those studies with low heterogeneity ($p=0.10$), we use the random-effect model.

Subgroup analysis If the necessary data are available, subgroup analysis will be carried out according to control measures.

Sensitivity analysis To assess the influence of each individual study, leave-one-out sensitivity analysis was performed iteratively by removing one study at a time to confirm that the findings were not influenced by any single study.

Country(ies) involved China.

Keywords endoscopic hemoclip placement,endoscopic hemoclip placemen, efficacy.

Contributions of each author

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