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Neoadjuvant Immunotherapy for non-metastatic rectal Cancer: A systematic review and meta-analysis

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ADMINISTRATIVE INFORMATION

Support - No.

Review Stage at time of this submission - Preliminary searches.

Conflicts of interest - None declared.

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Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 28 July 2024 and was last updated on 28 July 2024.

INTRODUCTION

eview question / Objective P: patients with primary cancer of the non-metastatic rectal cancer. I: neoadjuvant immunotherapy combined with or without chemotherapy or chemoradiotheraoy, C: neoadjuvant antineoplastic scheme without immunotherapy. O: prognostic effectiveness. S:single-arm study, cohort or prospective study, retrospective study and RCTs.

Condition being studied Non-metastatic rectal cancer.

METHODS

Participant or population It include patients with non-metastatic rectum cancer.

Intervention Receiving neoadjuvant immunotherapy combined with or without chemotherapy or chemoradiotheraoy.

Comparator Neoadjuvant antineoplastic schemes without immunotherapy.

Study designs to be included Single-arm study, cohort or prospective study, retrospective study and RCTs.

Eligibility criteria The inclusion criteria were 1) English language, 2) patients with primary cancer of the rectal cancer, 3) nonmetastatic disease, 4) neoadjuvant immunotherapy (programmed cell death protein 1 [PD-1] inhibitor or cytotoxic Tlymphocyte-associated protein 4 inhibitor), and 5) reporting on 10 or more cases, 6) single-arm study, cohort or prospective study, retrospective study and RCTs. **Information sources** The following databeses, PubMed, Embase, and Web of Science, the Cochrane Library, WanFang Database, China National Knowledge Infrastructure (CNKI), were searched .The search terms used included "rectal cancer," "neoadjuvant immunotherapy," "PD-1," "PD-L1," and "neoadjuvant therapy."

Main outcome(s) Pathological complete response (pCRs), major pathological response (MPR), objective response rate (ORR), R0-resection and anus preserving rate.

Quality assessment / Risk of bias analysis The revised version of MINORS was used for the quality assessment of observational or non-randomized studies, while NOS scores guideline was used for the quality assessment of controlled clinical or cohort studies. The third reviewer (JXX) resolved the inconsistencies between the above two authors.

Strategy of data synthesis STATA/SE version 15.1 was used for all statistical analyses. A randomeffect model was employed, and heterogeneity between studies was categorized as low (I2 50%) using the Cochran Q chi-square test and I2 statistics. Sensitivity analysis was conducted by sequentially excluding studies contributing to high heterogeneity in pooled data.

Subgroup analysis Secordary outcomes (pCRs and MPR) of subgroup analysis between deficient mismatch repair/microsatellite instability-high group (dMMR/MSI-H) and proficient mismatch repair/microsatellite stable group (pMMR/MSS), female and male groups, early stage group and locally advanced stage group were analyzed for the final results.

Sensitivity analysis In order to ensure the stability of the primary outcomes, we will perform sensibility analysis of these studies with high risk of bias according to sample size, study design, heterogeneity qualities etc.. If the result of sensitivity analysis is quite different from metaanalysis, we will consider to conduct descriptive analysis.

Country(ies) involved China.

Keywords non-metastatic rectal cancer; neoadjuvant immunotherapy; meta-analysis.

Contributions of each author

Author 1 - Huan Zhang - Data curation, Formal analysis, Methodology, Investigation, Project

administration, Software, Supervision, Validation, Visualization, Writing – review & editing.

Author 2 - Laiyan Zhou - Data curation, Formal analysis, Project administration, Resources, Supervision, Visualization, Writing – review & editing.

Author 3 - Jianxin Xue - Conceptualization, Formal analysis, Investigation, Methodology, Project administration, Visualization, Writing – review & editing.