Meta Analysis of Xue Fu Zhu Yu Tang Treasures Treatment of Nerve Counterness in Diabetes

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Abstract: Objective: Therapeutic effect of Xue Fu Zhu Yu Tang to treat neuropathy in diabetes. Method: Computer retrieves PubMed, Embase, Cochrane Library, CNKI, Wanfang Database, Veps.com, CBM Gets Document, Search Date, March 7, 2021. Information extraction and quality evaluation included in the literature, and the META analysis was performed using Review Manager 5.3. Meta analysis results show that: Xue Fu Zhu Yu Tang Group Total Efficiency, Total Nerve SNCV, Total Nerve MNCV, Niji Nervine SNCV, Nervine Nerve Mncv, Valler SNCV, Valler Nervous MNCV, Tibi Nerve SNCV, Piece Nerve MNCV {[[Rr = 1.26, 95% CI (1.20, 1.32), P <0.00001], [MD = 5.56, 95% Ci (3.95, 7.18), P <0.00001], [MD = 6.83, 95% CI (3.28, 10.39) P <0.00001], [MD = 4.77, 95% Ci (3.25, 6.30), P <0.00001], [MD = 5.46, 95% Ci (3.77, 7.16), P <0.00001], [MD = 2.94, 95 % CI (-1.02, 6.89), P = 0.15], [MD = 4.56, 95% Ci (1.84, 7.28), P = 0.001], [MD = 4.92, 95% Ci (2.01, 7.83), P = 0.0009], [MD = 4.84, 95% Ci (1.72, 7.96), p = 0.002]} All over the control group, Xue Fu Zhu Yu Tang group's whole blood specific viscosity [MD = -0.73, 95% Ci (-0.89 , -0.56), P <0.00001] is lower than the control group. Conclusion: Xue Fu Zhu Yu Tang Treated the efficacy of neuropathy around diabetes, but in this study, it is necessary to confirm the clinical study of higher quality and large samples.

1. Introduction

Diabetic Peripheral Neuropathy, DPN is the most common chronic complication of diabetes [1], its incidence is as high as 60% -90% [2]. DPN is the main clinical manifestation of numbness, bloating, constipation, pain, sweating, muscle atrophy, etc[3]. The pathogenesis of the DPN is still unclear. At present, Western Medicine is mostly used for conventional support, and general symptomatic treatment, but the clinical effect is not good, and there are more adverse reactions. The DPN belongs to the category of Chinese medicine "Xue Fu Zhu Yu Tang as the first part of the blood circulation, and many clinical trials have shown that Xue Fu Zhu Yu Tang has a significant effect on DPN, but there is still an ending indicator, and the conclusion is inconsistent Problem, this study of the efficacy of Xue Fu Zhu Yu Tang Treat DPN for META analysis and system evaluation, assessing its effectiveness and safety, and provides reference for related clinical trials.

2. Method

2.1 Retrieval method

By retrieving Chinese database and English database, including PubMed, Embase, Cochrane Library, China Journal Full-text Database (CNKI), Wan Fang Data Knowledge Service Platform (WAN Fang, Viip.com, China Biomedical Literature Database (CBM), Language is limited to Chinese and English, and the retrieval date is as of March 2021. Using the subject word to combine free words, neuropathy in diabetes; diabetes tip neuropathy; blood blush soup; Diabetic peripheral neuropathy; diabetic peripheral neuropathy; Xue Fu Zhu Yu Tang; xuefu zhu gecoction is search Word retrieval database. PubMed search strategy See Figure 1.

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#1 "diabetic peripheral neuropathy"[ti/ab] OR DPND[ti/ab]
#2 "xuefu zhuyu tang"[Title/Abstract] OR "xuefu zhuyu decoction"[Title/Abstract]
#3 "Systematic Review" [Publication Type]
#4 "Systematic review"[Title/Abstract] OR Meta-analysis[Title/Abstract]
#5 #3 OR #4
#6 #1 AND #2 AND #5
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Figure 1: PubMed retrieval strategy

2.2 Incorporation and exclude standard

①Research objects are patients with neuropathy in diabetic, unlimited gender, age, course; ②The test group was intervened with Xue Fu Zhu Yu Tang as interventions, no restrictions and medication, and the control group was Western medicine, blank control or other conventional treatment; ③ Outcome indicator: Total effectiveness, total neurotic nerve SNCV, Spicia God SNCV, nunopa nerve MNCV, nervine nerve SNCV, ruler nerve MNCV, tibial nerve SNCV, tibial nerve MNCV, FBG, adverse reactions, 11 8-ISO- PGF2α, whole blood is viscosity; ④Study on Randomized Control Experiment.

2.3 Document Incorporation and Information Extraction

The document retrieval and data extraction work is independently completed by 2 training qualified researchers (Li Jiarui, Wang Huixia). If there is a difference, the third researcher (Peng Wei) is determined. Firstly, through reading the literature titles and summary first screening, then download the full text reading document, further screening. After the completion of the qualified document, establish a literature basic information data extraction table: 1 first author and the year; 2 research type; 3 diagnosis, 4 interventions: experimental group and control group; 5 sample quantity; 6 research object age; 7 Research object gender distribution; 8 research objects diabetic peripheral neuropathic disease; 9 course; Mncv, post-tibial nerve SNCV, post-tibial nerve MNCV, FBG, adverse reactions, 11 8-ISO-PGF2α, whole blood specific viscosity.

2.4 Literature evaluation

A researcher (Li Jiarui, Wang Huixia) was carried out by the Cochrane bias risk assessment tool for quality assessment.

2.5 Data analysis

2.5.1 Statistical analysis

Statistical analysis of the data extracted in this study using REVIEW Manager 5.3. Use risk ratio (Risk Ratio) to express the amount of combined effects of the second classification variable. For two cases of the combined effect of continuous variables, the weight mean difference is selected, and the standardized mean difference is selected for the measurement method or the measurement unit of the same outcome indicator, and the Std Mean Difference is selected. It is for use in different measurement methods or units. The setup interval is 95%, and there is a statistical significance when $P < 0.05$ is described.

2.5.2 Heterogeneity Analysis

The use of Cochrane Q for heterogeneity analysis of the data, taking a significant level $\alpha = 0.1$, when $P > 0.1$, there is no statistical heterogeneity in the study, and there is statistically heterogeneity. At the same time, if $I2 > 50\%$, the fixed effect model is selected, and there is a substantial heterogeneity, and if $i2 < 50\%$, the random effect model is selected.

2.5.3 Subgroup analysis

As $I2 \geq 50\%$, or the number of devices contained in the indicator is more than enough to discuss heterogeneous sources.

2.5.4 Released bias

When the number of documents contained in the ending indicator is ≥10, the funnel map detection is delayed.

3. Result

3.1 Literature search results

This analysis has been retrieved from 196 documents, and the layers were filtered and eventually included in 23 documents. Document screening is shown in Figure 2.
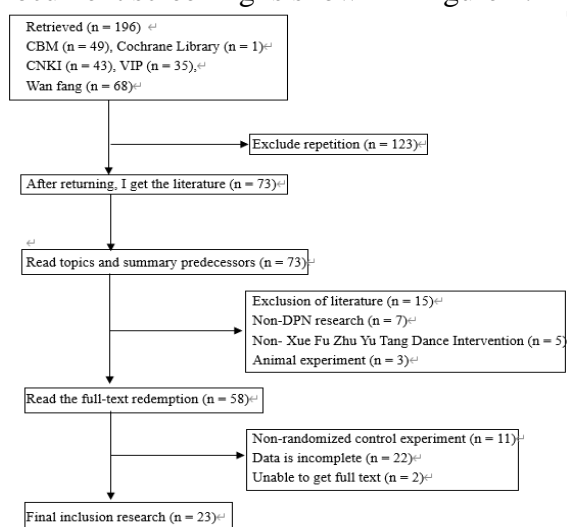

Figure 2: Literature screening process

3.2 Literature Basic Information

The basic information included in the literature is shown in Table 1.

Table 1: Document Basic Information Table

Incorporate research	Research object	Type of Study	Diagnostic criteria	Intervention measures		Course of disease		Medication		Outcome indicator
				Test group	Control group	Test group	Control group	Test group	Control group	
Zhang Ting 2012 [4]	Neuropathy around diabetes	Random	Diagnostic criteria proposed by the American Diabetes Association (ADA) 1997	Xue Fu Zhu Yu Tang+ Material	Material	(5.80±4.10)y	(4.50±2.30)y	4w	4w	①
Xing Qinghong 2010 [5]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Material	Material	6m-3y	6m-3y6m	90d	90d	①
Wang Quan 2011 [6]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Mecobalamin	Mecobalamin	(1-8.50)y	(1.50-9.0)y	6w	6w	①⑬
Wang Aijun 2007 [7]	Neuropathy around diabetes	Random	Diagnostic criteria proposed by the American Diabetes Association (ADA) 1997	Xue Fu Zhu Yu Tang+ Conventional Treatment	Conventional treatment	(3.5±2.5)y	(3.8±2.1)y	7w	7w	④⑤⑥ ⑦⑧⑨
Tan Yichong 2013 [8]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ TCM Disease Care	TCM syndrome care	(10.60±4.3)y	(11.2±5.1)y	2w	2w	①
Shao Xueqing 2016 [9]	Neuropathy around diabetes	Random	Diagnostic criteria proposed by the American Diabetes Association (ADA) 1997	Xue Fu Zhu Yu Tang+ Basic Treatment	Basic treatment	(2-8)y	(2-8)y	30d	30d	①
Lin Chengxi 2019 [10]	Neuropathy around diabetes	Random number table	WHO formulated standard	Xue Fu Zhu Yu Tang+ Mecobalamin	Mecobalamin	(1-8)y	(2-10)y	3m	3m	①⑩ ⑫⑬
Liang Zhen 2018 [11]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Mecobalamin	Mecobalamin	(1-11)y	(2-13)y	6w	6w	①
Li Weiyun 2015 [12]	Neuropathy around diabetes	Random	Surgery "Internal Science" 6 edition	Xue Fu Zhu Yu Tang+ Basic Treatment	Basic treatment	(4.5-20.0)y	(4.2-20.1)y	30d	30d	①②③ ④⑤
Hu Xiaolong 2005 [13]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Basic Treatment	Basic treatment	(4.8±5.9)y	(4.7±2.4)y	2m	2m	①②③ ④⑤⑩
Cai Liya 2016 [14]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Mecobalamin	Mecobalamin	(7.60±3.20)y	(7.50±3.30)y	4w	4w	①②③ ⑧⑨
Lu Ping 2017 [15]	Neuropathy around diabetes	Random number table	New version of the American Diabetes Society "Chinese Journal 2015"	Xue Fu Zhu Yu Tang+ Conventional treatment	Conventional treatment	2m-9y	3m-7y	60d	60d	①②③ ④⑤⑩ ⑫⑬
Wang Wei 1999 [16]	Neuropathy around diabetes	Random	WHO diagnosis	Xue Fu Zhu Yu Tang+ Basic Treatment	Basic treatment	(1-24)m	(1-18)m	20d	4w	①
Chen Jing 2007 [17]	Neuropathy around diabetes	Random	WHO diabetes diagnostic criteria	Xue Fu Zhu Yu Tang+ Basic Treatment	Basic treatment	1m-20y	1m-30y	3m	3m	①②③ ⑥⑦⑪
Guo Mengxiang 2008 [18]	Neuropathy around diabetes	Random	Lu Renhe "Diabetes and Its Complications Chinese and Western Medical Treatment"	Xue Fu Zhu Yu Tang+ Mecobalamin	Mecobalamin	6m-15y	5m-14y	6m	6m	①
Tamakoji 2009 [19]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Amy denten	Amy denten	20d-3y	20d-3y	3w	3w	①
Lu Qunying 2010 [20]	Neuropathy around diabetes	Random number table	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Material	Material	5m-7y	4m-6.5y	2m	2m	①②③ ⑪
Yang Hua 2012 [21]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Material	Material	(2-11)y	(2-10)y	4w	4w	①

Fan Ruimin 2013 [22]	Neuropathy around diabetes	Random	World Health Organization (WHO) Diagnostics in 1999	Xue Fu Zhu Yu Tang+ Mecobalamin	Mecobalamin	(2-12)y	(3-11)y	4w	4w	①
Fan Zhongnong 2014 [23]	Neuropathy around diabetes	Random	"Practical Diabetes"	Xue Fu Zhu Yu Tang plus the foot bath + basic treatment	Basic treatment	(2-17)y	(3-15)y	2m	2m	①②③④⑤⑥⑦
Bi Ninna 2017 [24]	Neuropathy around diabetes	Random	2009 Chinese Physician Association endocrine metabolic physician branch	Xue Fu Zhu Yu Tang directional transaction + basic treatment	Basic treatment	(3.0±1.8)y	(3.2±1.9)y	4w	4w	⑫
Chang Yuehui 2018 [25]	Neuropathy around diabetes	Random number table	"Neurology"	Xue Fu Zhu Yu Tang+ + Needle knnife	Needle knife	(1-8)y	(1-9)y	6w	6w	①②③④⑤⑪
Zhou Yan 2018 [26]	Neuropathy around diabetes	Random number table	Pang Guoming "Diabetes Peripheral Neurological TCM Diagnosis Standardization Program"	Xue Fu Zhu Yu Tang+α hydrochloric acid	α hydrochloric acid	(5.37±2.05)y	(5.05±2.71)y	1m	1m	①②③④⑤⑪⑫

Note: Outcome indicators:①Total efficiency; ②Pilotic neuron SNCV; ③Pilotic nerve MNCV; ④Niochong nerve SNCV; ⑤Niochong nerve MNCV; ⑥Fax nerve SNCV; ⑦Fax nerve MNCV; ⑧Nerve SNCV; ⑨Nervous nerve mncv; ⑩FBG; ⑪Adverse reactions, ⑫8-iso-PGF2α, ⑬Whole blood ratio viscosity

3.3 Document quality evaluation

In the 23 articles included, only 5 [12, 17, 22, 27, 28] mentioned the specific random method, and all of the random measures were mentioned, and the remaining 18 documents were only random. All documents have not been included in allocation hidden methods. No literature mentioned a single blind, double blind results measurement blind method. The result data of all documents has integrity, and there is no lossless bias. 2 [17, 20] documents have an ending indicator report. Other potential bias risks are not found. The specific information is shown in Figure 3.
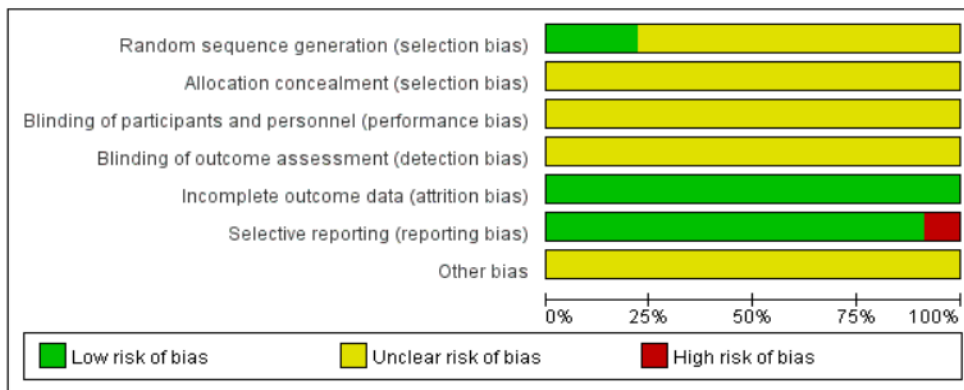

Figure 3: Quality evaluation map

3.4 META analysis results

(1) Total effectiveness There are 21 [6-9, 11-25, 27-28] RCT reports total efficiency, including 1782 samples. See the total efficiency of the total efficiency of the test group [Rr = 1.26, 95% CI (1.20, 1.32), P <0.00001], higher than the control group, and the difference has statistically significant. Different interventions subgroups showed that Xue Fu Zhu Yu Tang United Western medicine group, total efficient merge analysis effect [RR = 1.25, 95% Ci (1.19, 1.32), P <0.00001], higher than the control group, difference Statistical significance; Xue Fu Zhu Yu Tang Group Total efficiency combined analysis effect [RR = 1.27, 95% CI (1.14, 1.42), P <0.0001], higher than the control group, and differences were statistically significant.

(2) Pilotic neuron SNCV There are nine [14-17, 19, 22, 25, 27-28] RCT reported the total neuroblus SNCV,

including 819 cases of the sample.The combined analysis effect of Phiral nerve SNCV in patients with META analysis [MD = 5.56, 95% Ci (3.0.56, 95% Ci (3.0.00001), P <0.00001] is higher than the control group, and the difference has statistically significant. Different interventions subgroups showed that Xue Fu Zhu Yu Tang in the United Western medicine group, the combined analysis effect of the total nerve SNCV [MD = 5.73, 95% Ci (3.39, 8.08), P <0.00001], higher than the control group, difference It has statistical significance; the combined analysis effect of Xue Fu Zhu Yu Tang Group Total Nerve SNCV [MD = 4.41, 95% Ci (2.84, 5.99), P <0.00001], higher than the control group, and the difference has statistical significance.

(3) Pilotic nerve MNCV There are 9 [14-17, 19, 22, 25, 27-28] RCT reported the total nerve MNCV, including the sample quantity of 819 cases.Meta Analysis of the combined analysis effect of Phiral Nerve MnCV in patients with the test group (MD = 6.83, 95% CI (3.28, 10.39), P <0.00001], the difference has statistically significant. Different interventions subgroups showed that Xue Fu Zhu Yu Tang in the United Western medicine group, the combined analysis effect of the total nerve MNCV [MD = 7.88, 95% Ci (4.09, 11.67), P <0.00001], higher than the control group, difference Statistically significant; Xue Fu Zhu Yu Tang Complete Analysis Effect [MD = 3.59, 95% Ci (1.78, 5.39), P <0.00001], higher than the control group, difference

(4) Niochong nerve SNCV There are 7 [10, 14-15, 17, 25, 27-28] RCT reports the primary nerve SNCV, including the sample size 718.The combined analysis effect of the positive neuronal SNCV of the test group [MD = 4.77, 95% Ci (3.25, 6.30), P <0.00001], the difference has statistically significant. Different interventions subgroups showed that Xue Fu Zhu Yu Tang United Western Pharmaceutical group Statistical significance; the combined analysis effect of the blood of the Blood Blood Section [MD = 4.70, 95% Ci (3.25, 6.30), P <0.00001], higher than the control group, and the difference has statistically significant.

(5) Niochong nerve MNCV There are 7 [10, 14-15, 17, 25, 27-28] RCT reports the primary nerve MNCV, including the sample size 718.The combined analysis effect of the positive nerve MNCV of the test group [MD = 5.46, 95% Ci (3.77, 7.16), P <0.00001], the difference has statistically significant. Different interventions subgroups showed that Xue Fu Zhu Yu Tang in the Western Medicine Group, the combined analysis effect of niochong nerve MNCV [MD = 5.64, 95% Ci (3.77, 7.50), P <0.00001], higher than the control group, the difference has Statistical significance; the combined analysis effect of Xue Fu Zhu Yu Tang Group [MD = 4.40, 95% Ci (2.65, 6.15), P <0.00001], higher than the control group, and differences were statistically significant.

(6) Fax nerve SNCV There are 3 [10,19,25] RCT reported the feet of nerve SNCV, including the sample amount 223. The merger analysis effect of feet in the test group patient [MD = 2.94, 95% Ci (-1.02, 6.89), P = 0.15], the difference has statistical significance.

(7) Fax nerve MNCV There are 3 [10,19,25] RCT reported the ruler nerve MNCV, including sample quantity 223.The merger analysis effect of feet in the test group patient [MD = 4.56, 95% Ci (1.84, 7.28), P <0.05], and the difference has statistically significant.

(8) Nerve SNCV There are 2 [10,16] RCT reported that the gangna nerve SNCV contains the sample amount 190.The combined analysis effect of the tibial nerve SNCV in the test group [MD = 4.92, 95% CI (2.01, 7.83), P<0.05], the difference has statistically significant. Different interventions subgroups showed that Xue Fu Zhu Yu Tang in the Western Pharmaceutical group It has statistical significance; the combined analysis effect of Xue Fu Zhu Yu Tang Group [MD = 3.56, 95% Ci (3.16, 3.96), P <0.00001], higher than the control group, and differences were statistically significant.

(9) Nervous nerve mncv There are 2 [10,16] RCT reported that the gangli nerve MNCV contains the sample amount 190.The combined analysis effect of the tibial nerve MNCV in the test group [MD = 4.84, 95% Ci (1.72, 7.96), P<0.05], and the difference has statistical significance. Different interventions subgroups showed that Xue Fu Zhu Yu Tang combined with Western medicine groups, the combined analysis effect of the nerve MNCV after the tibial nerve [MD = 6.58, 95% CI (4.70,

8.46), P <0.00001], higher than the control group, difference It has statistical significance; the combined analysis effect of Xue Fu Zhu Yu Tang Group [MD = 3.38, 95% Ci (3.03, 3.73), P <0.00001], higher than the control group, and the difference has statistical significance.

(10) FBG There are 3 [12,15,17] RCT reported FBG, including sample quantity 372.The combined analysis effect of FBG in the test group [MD = -8.78, 95% CI (-20.05, 2.48), P>0.05], and there is no statistical significance.

(11) Adverse Reactions There are 4 [19, 22, 27-28] RCT reported that the adverse reactions include the sample amount 330. Among them, three RCT report experiments did not have adverse reactions, and the remaining RCT reports had a non-performing reaction of rash, vomiting nausea and face-colored. The merger analysis effect of adverse reactions in patients in the test group [MD = 1.29, 95% CI (0.59, 2.81), P>0.05], and there is no statistical significance.

(12) 8-ISO-PGF2α There are 4 [12, 17, 26, 28] RCT reported 8-ISO-PGF2α, including sample quantity 288.The combined analysis effect of 8-ISO-PGF2α in the test group [MD = -0.48, 95% Ci (-7.12, 6.16), P> 0.05], and there is no statistical significance.

(13) Whole blood ratio viscosity There are 3 [9, 12, 17] RCT reported the viscosity of all blood, including the sample amount 210. The combined analysis effect of whole blood-specific viscosity in patients with the test group [MD = -0.73, 95% Ci (-0.89, -0.56), P <0.00001], the difference is statistically significant. Different interventions subgroups showed that Xue Fu Zhu Yu Tang in the United Western medicine group, the combined analysis effect of whole blood ratio [MD = -0.69, 95% Ci (-0.98, -0.40), P <0.00001], higher than the control The group, the difference has statistically significant; the combined analysis effect of Xue Fu Zhu Yu Tang Group [MD = -0.73, 95% Ci (-0.95, -0.54), P <0.00001], lower than the control group, difference has statistical significane.

2.5 Published bias There are 21 [7-9, 11-25, 27-28] RCT reports total efficiency, including 1782 samples. The funnel chart shows that basic asymmetry, so there may be a bias.

4. Discussion

Meta analysis results show that:Xue Fu Zhu Yu Tang is superior to the control group in an effectiveness indicator such as the total efficiency, the total nerve SNCV, the nerve SNCV, niocathic nerve SNCV, all blood. Therefore, it indicated that Xue Fu Zhu Yu Tang treatment was significant. However, there is no statistical significance of the difference between FBG, and the forest map and basic information are known. One of them is to study [17] The diseased diseases of the research objects are larger than other research spans, shorter treatment, and differential methods The group is different, which may be due to its high heterogeneity. There is no statistically significant difference between the defective reaction group, analyzes forest maps and basic information, 2 of which research [19,22] did not report adverse reactions, resulting in small samples. There is no statistical significance of the 8-ISO-PGF2α group, and the forest maps and basic data can be analyzed that 1 of the experimental groups of [12] reduce the effect of 8-ISO-PGF2α below the control group, which does not match it.

There is also a certain limitations in this study: ①Most studies have not reported adverse reactions, so that in the later experiments, drug safety is not overlooked. ②Document [12, 17, 22, 27-28] describes the specific random method, and the random sequence of most studies is unknown, which may result in bias. ③Total efficient funnel chart shows the basic asymmetry, and there is a bias.

In summary, Xue Fu Zhu Yu Tang Treated DPN has a significant clinical efficacy, it is worth learning, but still needs more high quality and high-quality clinical studies to confirm that providing more reliable evidence for evidence-based medicine.

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