Authors' objectives
This is the protocol for a review and there is no abstract. The objectives are as follows:
To determine the diagnostic accuracy of each scoring system as triage to screen for diabetic peripheral neuropathy (DPN) involving limbs within different settings, or as replacement of nerve conduction studies (NCS) for the clinical diagnosis of DPN involving limbs, with NCS as the reference standard.
To estimate the relative accuracy of scoring systems for screening DPN involving limbs, with NCS as the reference standard.
To assess the impact of potential sources of heterogeneity on the performance of scoring systems for DPN involving limbs: (1) related to the study population (spectrum of the disease: with versus without other vascular complications; symptoms of DPN: people with no neurological symptoms versus neurological symptoms (if available, positive versus negative neurological symptoms); duration of diabetes; level of glycosylated haemoglobin A1c (HbA1c) in adults: < 7% versus ? 7%; body mass index (BMI) in adults: < 25 versus ? 25 kg/m²; types of diabetes: type 1 versus type 2 diabetes mellitus; age: <18 years old versus ?18 years old); (2) related to the scoring systems (different thresholds; examiner's expertise: specialists in diabetes or neurology versus other healthcare professionals); (3) related to the reference standard (numbers of body sites tested with NCS; examiner's expertise: specialists in electrodiagnosis versus other healthcare professionals); (4) related to the healthcare setting (community versus outpatient setting versus inpatient setting); (5) related to the methodology based on the QUADAS-2 items (risk of bias for patient selection, index test, reference standard, and flow and timing; concerns regarding applicability of patient selection, index test, and reference standard).


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