APPENDICES

Appendix1. Search strategy used for EMBASE(via OvidSp)

1. exp Acupuncture/
2. Acupuncture .tw.
3. Acupoints .tw.
4. Body acupuncture .tw.
5. Scalp acupuncture .tw.
6. manual acupuncture .tw.
7. Auricular acupuncture .tw.
8. ear acupuncture .tw.
9. Electroacupuncture .tw.
10. Fire needling .tw.
11. dermal needle .tw.
12. plum blossom needle .tw.
13. 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12
14. exp Leukopenia/
15. Leucopenia .tw.
16. Aleucocytosis .tw.
17. Aleukocytosis .tw.
18. Hypoleucocytosis .tw.
19. Hypoleukocytosis .tw.
20. Oligoleukocythemia .tw.
21. Oligoleukocytosis .tw.
22. Hypoleukia .tw.
23. G-CSF .tw.
24. Granulocyte colony-stimulating factor .tw.
25. GM-CSF .tw.
26. Granulocyte monocyte colony-stimulating factor .tw.
27. 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26
28. randomized controlled trial.pt.
29. controlled clinical trial.pt.
30. randomized.ab.
31. placebo.ab.
32. clinical trials as topic.sh.
33. randomly.ab.
34. trial.ti.
35. 28 or 29 or 30 or 31 or 32 or 33 or 34
36. exp animals/ not humans.sh.
37. 35 not 36
38. 13 and 27 and 37

Appendix2. Search strategy used for CENTRAL(Wiley Online Library)

1. MeSH descriptor Acupuncture explode all tree
2. Acupuncture :ti,ab,kw
3. Acupoints :ti,ab,kw
4. Body acupuncture :ti,ab,kw
5. Scalp acupuncture :ti,ab,kw
6. manual acupuncture :ti,ab,kw
7. Auricular acupuncture :ti,ab,kw
8. ear acupuncture :ti,ab,kw
9. Electroacupuncture :ti,ab,kw
10. Fire needling :ti,ab,kw
11. dermal needle :ti,ab,kw
12. plum blossom needle :ti,ab,kw
13. 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12
14. MeSH descriptor Leukopenia explode all tree
15. Leucopenia :ti,ab,kw
16. Aleucocytosis :ti,ab,kw
17. Aleukocytosis :ti,ab,kw
18. Hypoleucocytosis :ti,ab,kw
19. Hypoleukocytosis :ti,ab,kw
20. Oligoleukocythemia :ti,ab,kw
21. Oligoleukocytosis :ti,ab,kw
22. Hypoleukia :ti,ab,kw
23. G-CSF :ti,ab,kw
24. Granulocyte colony-stimulating factor :ti,ab,kw
25. GM-CSF :ti,ab,kw
26. Granulocyte monocyte colony-stimulating factor :ti,ab,kw
27. 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26
28. 13 and 27

Appendix3. Search strategy used for CNKI \Wan-Fang\VIP Database

Strategy in Chinese phonetic alphabet(i.e., Pinyin):

SU=terms which refer to title, abstract or key words.

(SU="zhenjiu" or SU="zhenci" or SU="zhen" or SU="tizhen" or SU="toupizhen" or SU="erzhen" or SU="dianzhen" or SU="huozhen" or SU="sanlengzhen" or SU="meihuazhen") and (SU="baixibaojianshao" or SU="baixibaojiangdi" or SU="lixibaojiluocijiyinzi" or SU="chongzurenlixibaojiluocijiyinzi") and (SU="suijiduizhaoshiyan" or SU="linchuanguancha" or SU="suiji" or SU="linchuangshiyan" or SU="shiyan")

SU=字段(题目、摘要 or 关键词)

(SU="针灸" or SU="针刺" or SU="针" or SU="体针" or SU="头皮针" or SU="耳针" or SU="电针" or SU="火针" or SU="三棱针" or SU="梅花针") and (SU="白细胞减少" or SU="白细胞降低" or SU="粒细胞集落刺激因子" or SU="重组人粒细胞集落刺激因子") and (SU="随机对照试验" or SU="临床观察" or SU="随机" or SU="临床试验" or SU="试验")

Appendix4. Search strategy used for CBM database

Strategy in Chinese phonetic alphabet(i.e., Pinyin):

SU= terms which refer to title or abstract.

(SU="zhenjiu" or SU="zhenci" or SU="zhen" or SU="tizhen" or SU="toupizhen" or SU="erzhen" or SU="dianzhen" or SU="huozhen" or SU="sanlengzhen" or SU="meihuazhen") and (SU="baixibaojianshao" or SU="baixibaojiangdi" or SU="lixibaojiluocijiyinzi" or SU="chongzurenlixibaojiluocijiyinzi") and (SU="suijiduizhaoshiyan" or SU="linchuanguancha" or SU="suiji" or SU="linchuangshiyan" or SU="shiyan")

SU=字段(题目 or 摘要)

(SU="针灸" or SU="针刺" or SU="针" or SU="体针" or SU="头皮针" or SU="耳针" or SU="电针" or SU="火针" or SU="三棱针" or SU="梅花针") and (SU="白细胞减少" or SU="白细胞降低" or SU="粒细胞集落刺激因子" or SU="重组人粒细胞集落刺激因子") and

(SU=“随机对照试验” or SU=“临床观察” or SU=“随机” or SU=“临床试验” or SU=“试验”)

Appendix5. Extraction sheet of selected studies

Quality of life E/C										
Adverse Events E/C										
NNT E/C										
▲ WBCs E/C										
Other treatments										
Chemotherapy										

Publication Year	Country	Sample Size E/C	Gender E/C		Age E/C	Tumor Stage E/C		Cancer	Acupuncture Type	Acupuncture Points	Intensity	Frequency

First Author										

E=Experimental Group

C=Control Group

Gender E/C: number of male patients of female patients

i.e. E: 10\12(male and female, respective) C:12\14(male and female, respective)

Age E/C: age of patients in experimental of control groups(mean age\median age)

Tumor Stage E/C: number of patients in every stage(stage I\II\III\IV)

i.e. E: 10\12\13\14 C:12\14\16\16\17

Caner: number of every kind of cancer patients

i.e. breast:10, lung:12, liver:13

Acupuncture Type: i.e. ear acupuncture

Intensity: i.e. 20 minutes

Frequency: once a day for 2 weeks

Chemotherapy: i.e. FOLFOX

WBCs E/C: difference value between baseline and endpoint(M±SD)

Otherwise: fill the sheet with baseline and endpoint value(M±SD)

Adverse Events E/C: will describe the adverse events and the frequency

i.e. E: acupuncture-related infection:20 C: acupuncture-related infection:33

Quality of life E/C: difference value between baseline and endpoint(M±SD)

All QoL measurement tool used in the studies will be synthesized(NO. of studies, if>2)

i.e. E:QLQ-C30 18±9 C:QLQ-C30 10±3

Physical condition: difference value between baseline and endpoint(M±SD)

All tools ,which are used to measure physical condition and have been used in the studies ,will be synthesized(NO. of studies, if>2)

i.e. E:KPS 18±9 C:KPS 10±3

Appendix 6

PRISMA-P (Preferred Reporting Items for Systematic review and Meta-Analysis Protocols)

2015 checklist: recommended items to address in a systematic review protocol*

Section and topic	Item No	Checklist item	Page
ADMINISTRATIVE INFORMATION			
Title:			
Identification	1a	Identify the report as a protocol of a systematic review	1
Update	1b	If the protocol is for an update of a previous systematic review, identify as such	1
Registration	2	If registered, provide the name of the registry (such as PROSPERO) and registration number	2
Authors:			
Contact	3a	Provide name, institutional affiliation, e-mail address of all protocol authors; provide physical mailing address of corresponding author	1
Contributions	3b	Describe contributions of protocol authors and identify the guarantor of the review	9
Amendments	4	If the protocol represents an amendment of a previously completed or published protocol, identify as such and list changes; otherwise, state plan for documenting important protocol amendments	10
Support:			
Sources	5a	Indicate sources of financial or other support for the review	9
Sponsor	5b	Provide name for the review funder and/or sponsor	9

Role of sponsor or funder	5c	Describe roles of funder(s), sponsor(s), and/or institution(s), if any, in developing the protocol	9
INTRODUCTION			
Rationale	6	Describe the rationale for the review in the context of what is already known	2-3
Objectives	7	Provide an explicit statement of the question(s) the review will address with reference to participants, interventions, comparators, and outcomes (PICO)	3
METHODS			
Eligibility criteria	8	Specify the study characteristics (such as PICO, study design, setting, time frame) and report characteristics (such as years considered, language, publication status) to be used as criteria for eligibility for the review	3-4
Information sources	9	Describe all intended information sources (such as electronic databases, contact with study authors, trial registers or other grey literature sources) with planned dates of coverage	4-6
Search strategy	10	Present draft of search strategy to be used for at least one electronic database, including planned limits, such that it could be repeated	5
Study records:			
Data management	11a	Describe the mechanism(s) that will be used to manage records and data throughout the review	6
Selection process	11b	State the process that will be used for selecting studies (such as two independent reviewers) through each phase of the review (that is, screening, eligibility and inclusion in meta-analysis)	6
Data collection process	11c	Describe planned method of extracting data from reports (such as piloting forms, done independently, in duplicate), any processes for obtaining and confirming data from investigators	6
Data items	12	List and define all variables for which data will be sought (such as PICO items, funding sources), any pre-planned data assumptions and simplifications	6
Outcomes and prioritization	13	List and define all outcomes for which data will be sought, including prioritization of main and additional outcomes, with rationale	4

Risk of bias in individual studies	14	Describe anticipated methods for assessing risk of bias of individual studies, including whether this will be done at the outcome or study level, or both; state how this information will be used in data synthesis	6-7
Data synthesis	15a	Describe criteria under which study data will be quantitatively synthesised	7-8
	15b	If data are appropriate for quantitative synthesis, describe planned summary measures, methods of handling data and methods of combining data from studies, including any planned exploration of consistency (such as I^2, Kendall's τ)	7-8
	15c	Describe any proposed additional analyses (such as sensitivity or subgroup analyses, meta-regression)	8
	15d	If quantitative synthesis is not appropriate, describe the type of summary planned	8
Meta-bias(es)	16	Specify any planned assessment of meta-bias(es) (such as publication bias across studies, selective reporting within studies)	7
Confidence in cumulative evidence	17	Describe how the strength of the body of evidence will be assessed (such as GRADE)	8

*** It is strongly recommended that this checklist be read in conjunction with the PRISMA-P Explanation and Elaboration (cite when available) for important clarification on the items. Amendments to a review protocol should be tracked and dated. The copyright for PRISMA-P (including checklist) is held by the PRISMA-P Group and is distributed under a Creative Commons Attribution Licence 4.0.**

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