方法 检索 PubMed、Web of Science、Embase、Cochrane Library、中国知网（CNKI）、维普(VIP)、万方(WanFang)、中国生物医学文献服务系统(SinoMed)建库至 2026 年 3 月的相关研究

10.12201/bmr.202608.00029V1

通讯作者：贺正琼，电子信箱 hezhengqiong7879@163.com 基金信息：四川省中医药管理局面上项目（25MSZX227）；

10.12201/bmr.202608.00029V1

[redacted]

1 [redacted]

1.1 [redacted]

[redacted]

1.2 [redacted]

[redacted]中国知网（CNKI）、维普(VIP)、万方(WanFang)、中国生物医学文献服务系统(SinoMed)[redacted]

Pneumonia，Mycoplasma auricular point pressing Moxibustion “Acupuncture”

1.3

1.4

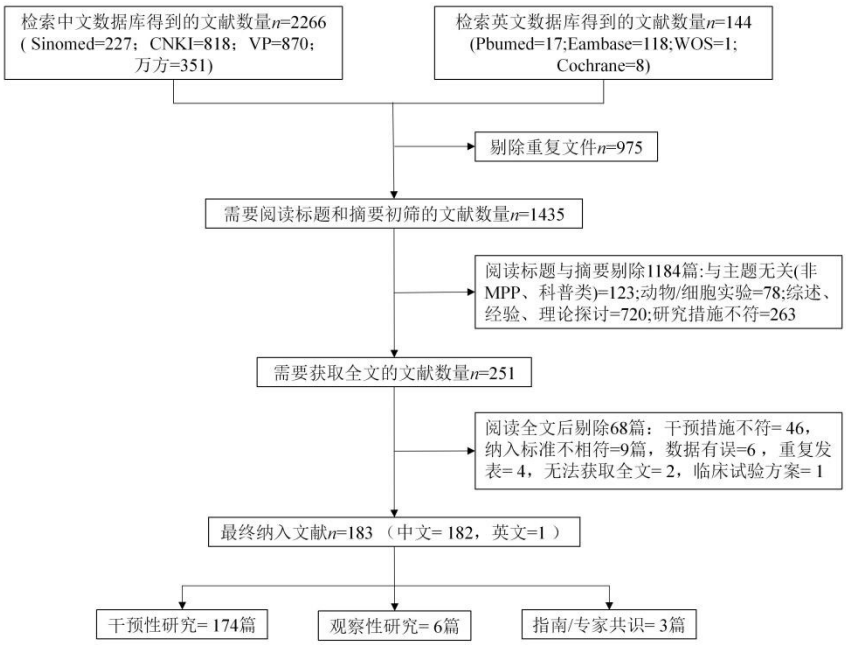
1.5

两名研究者独立评估文献质量，若有分歧，则引入第 3 名研究者裁定。采用 Cochrane RoB 2.0，对纳入的 RCTs 进行质量评价

1.6

2

2.1



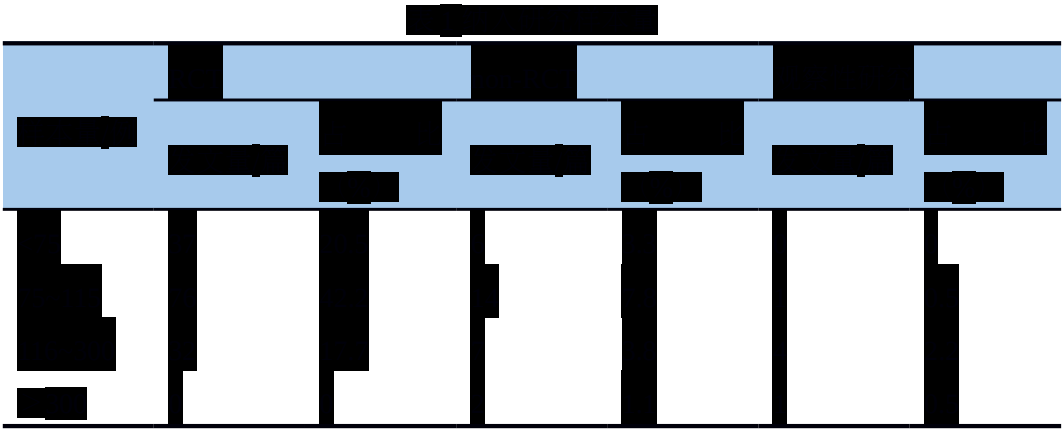
[redacted]

2.2 [redacted]

2.2.1 [redacted]

[redacted]

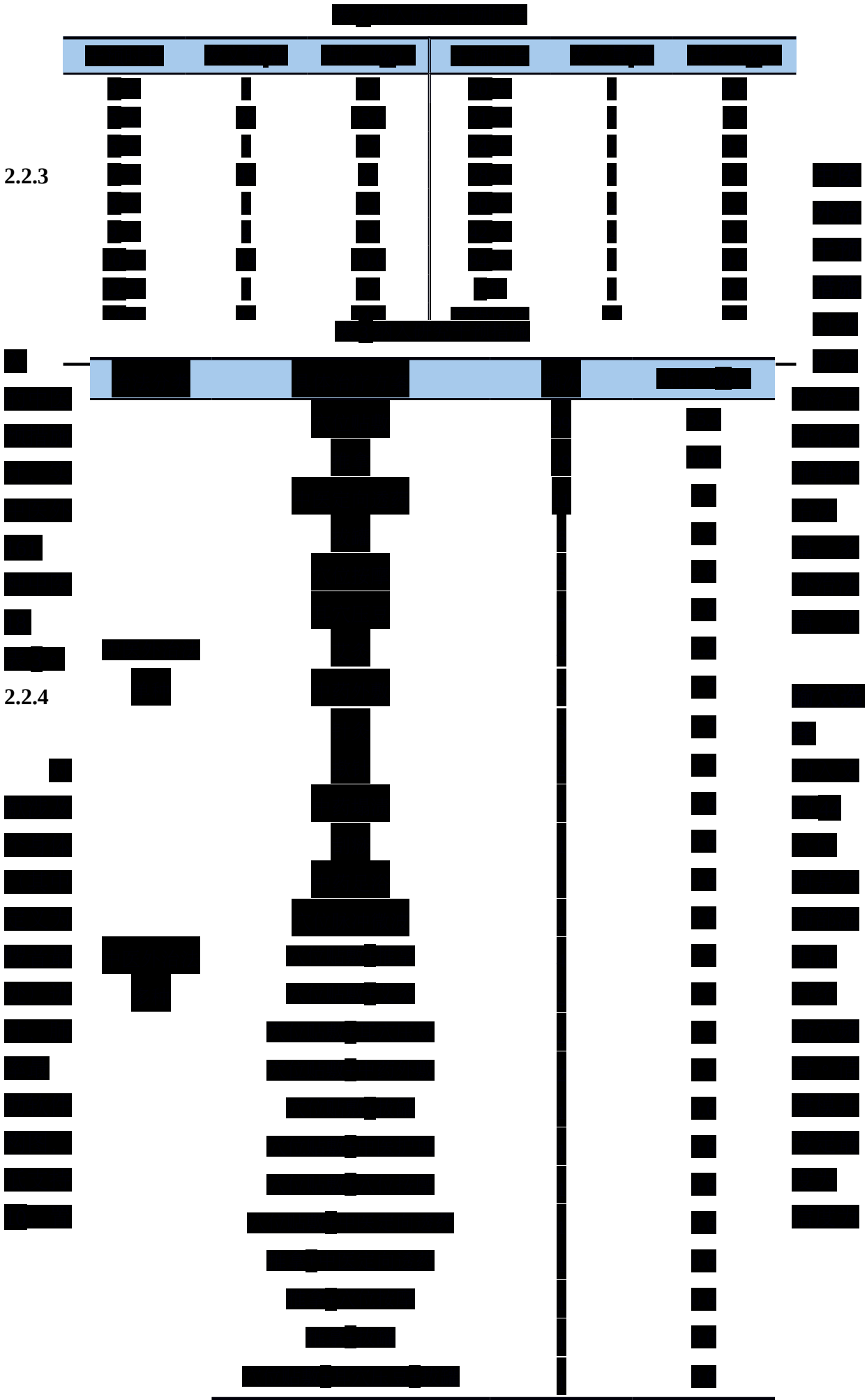
[redacted]



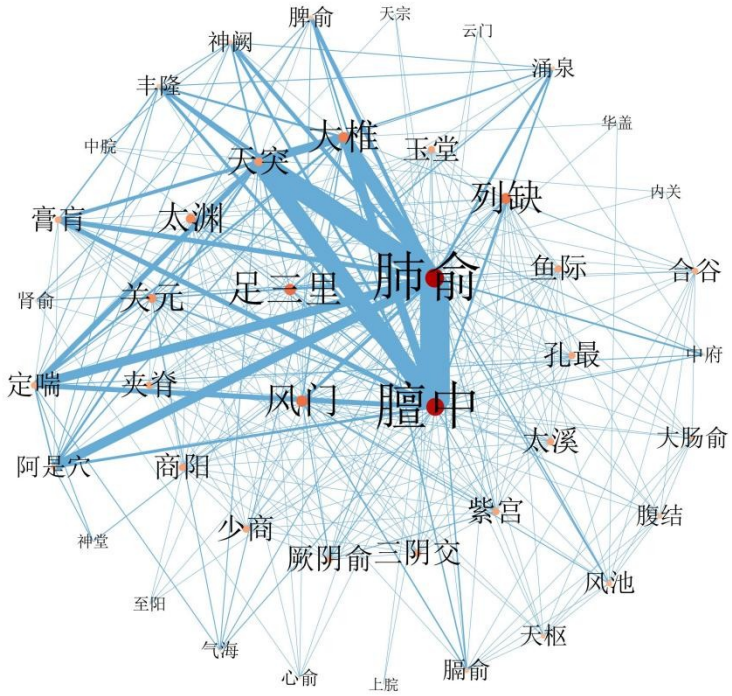
2.2.2 [redacted]

[redacted]

[redacted]



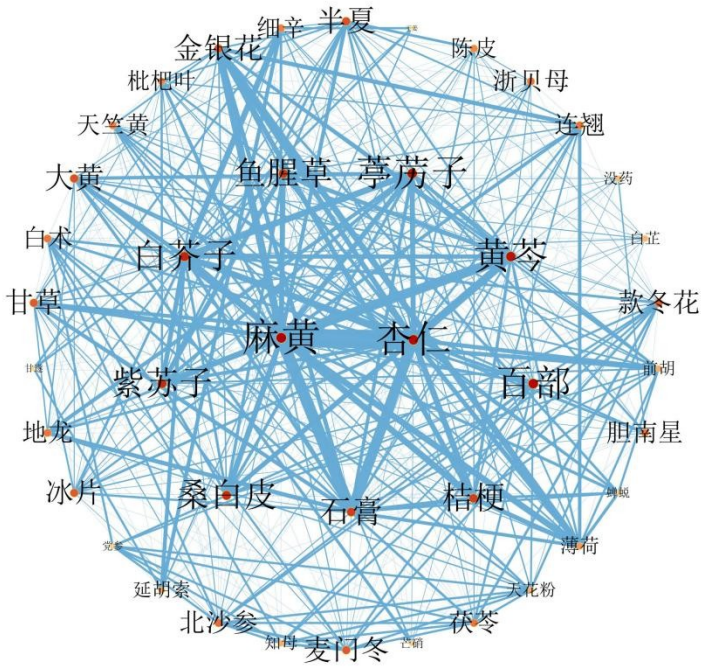
[redacted]



[redacted]

2.2.5 [redacted]

[redacted]

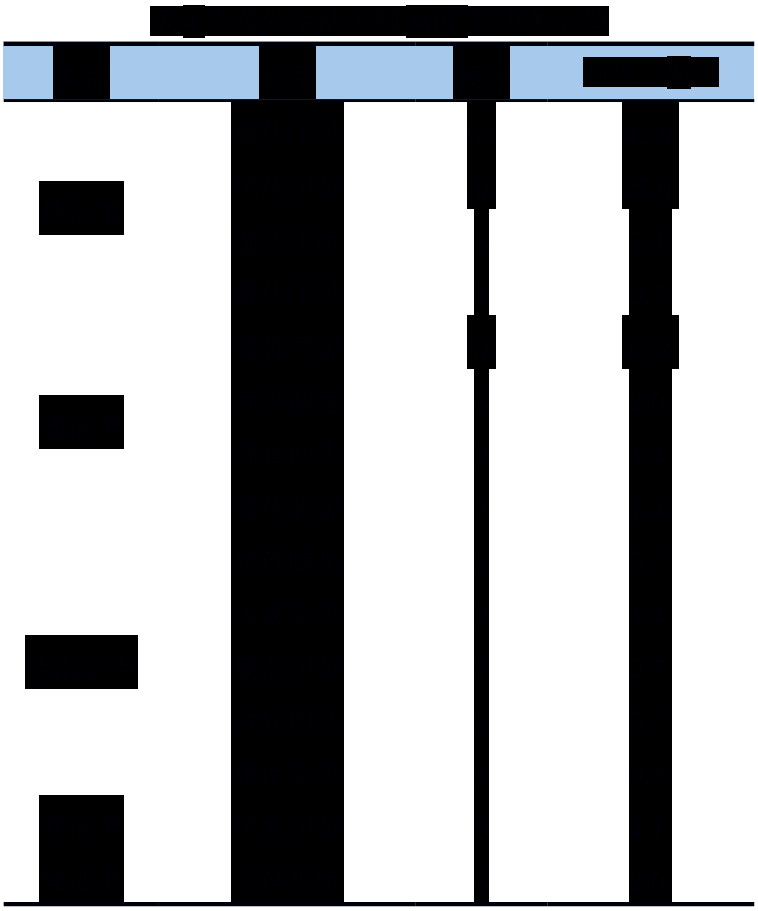


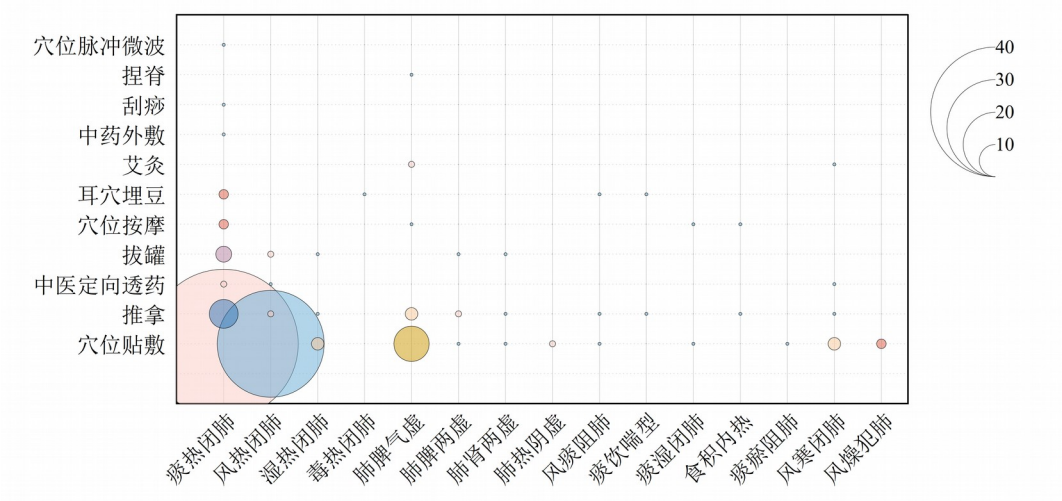
[redacted]

2.3 [redacted]

[redacted]

[redacted]



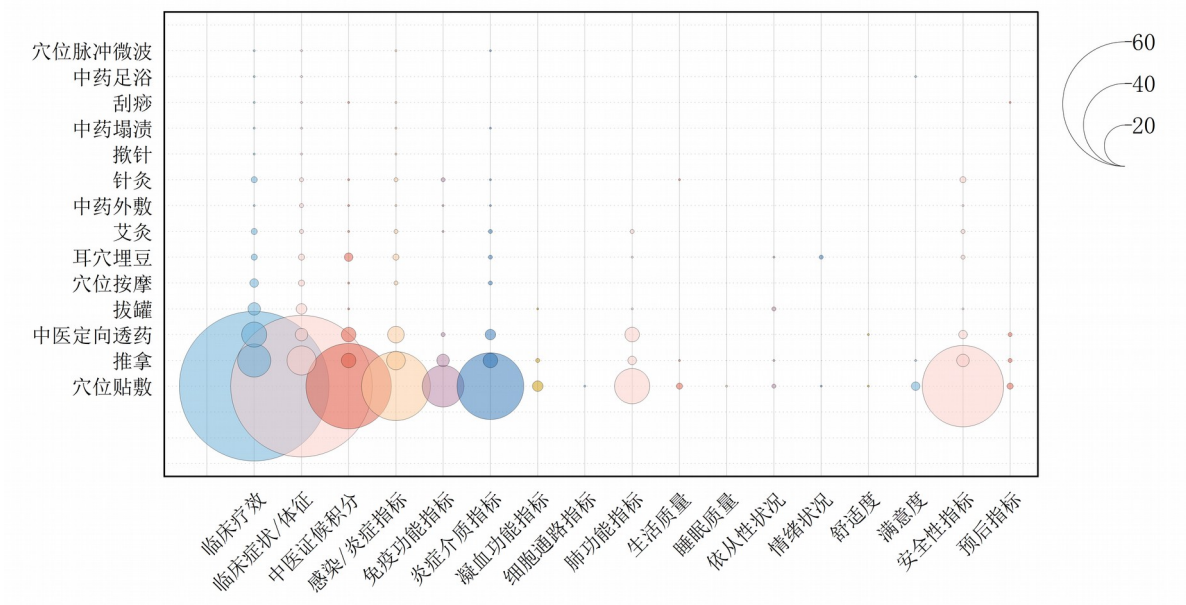


[redacted]

2.4 [redacted]

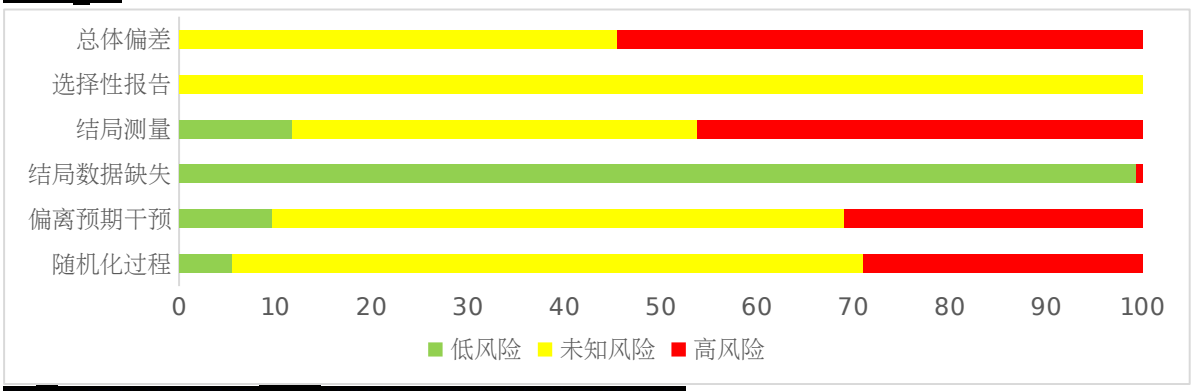
[redacted]

[redacted]

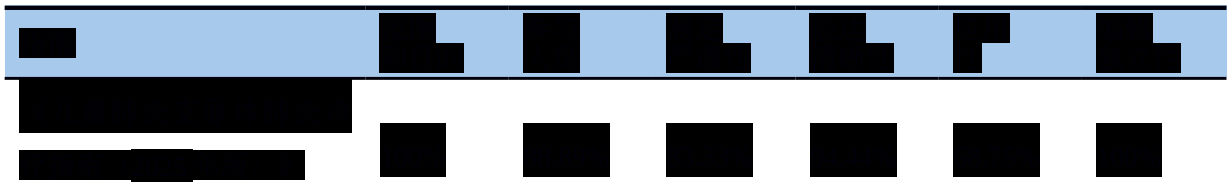


2.5

2.5.1



2.5.2



3

基于上述局限，未来研究应从以下方向突破：在研究顶层设计上，应推进大样本、多中心研究，关注疾病的全周期证型演变，为精准辨证施治提供循证支撑在研究方法层面，积极探索盲法策略，提升研究证据等级与真实性。在结局指标层面，建立中医外治法核心结局指标集在指南转化层面，提高临床实践指南的应用性，明确辨证论治的具体实施路径与操作规范，促进中医外治从经验向循证的有效转化，为 MPP 患者提供更安全、个性化的中医解决方案。

参考文献

[1] Choo S, Lee Y Y, Lee E. Clinical significance of respiratory virus coinfection in children with Mycoplasma pneumoniae pneumonia[J]. BMC Pulmonary Medicine, 2022,22(1): 212.

[2] Hu J, Ye Y, Chen X, et al. Insight into the Pathogenic Mechanism of Mycoplasma pneumoniae[J]. Current Microbiology, 2022,80(1): 14.

[4] Hsieh Y, Li S, Chen Y, et al. Global Genome Diversity and Recombination in Mycoplasma pneumoniae[J]. Emerging Infectious Diseases, 2022,28(1): 111-117.

[5] Wang X, Li M, Luo M, et al. Mycoplasma pneumoniae triggers pneumonia epidemic in autumn and winter in Beijing: a multicentre, population-based epidemiological study between 2015 and 2020[J]. Emerging Microbes & Infections, 2022,11(1): 1508-1517.

[8] Zhang G, Li Q, Zhang J. Clinical effects of traditional Chinese medicine + azithromycin in the treatment of Mycoplasma pneumonia[J]. International Journal of General Medicine, 2025,18: 825-833.

[11] Sterne J A C, Savović J, Page M J, et al. RoB 2: a revised tool for assessing risk of bias in randomised trials[J]. BMJ, 2019,366: l4898.

[13] Brouwers M C, Kho M E, Browman G P, et al. AGREE II: advancing guideline development, reporting and evaluation in health care[J]. Journal of Clinical Epidemiology, 2010,63(12): 1308-1311.

10.12201/bmr.202608.00029V1

[30] Kok H C, Mccallum G B, Yerkovich S T, et al. Twenty-four Month Outcomes of Extended- Versus Standard-course Antibiotic Therapy in Children Hospitalized With Pneumonia in High-risk Settings: A Randomized Controlled Trial[J]. Pediatric Infectious Disease Journal, 2024,43(9): 872-879.
[31] Schulz K F, Altman D G, Moher D, et al. CONSORT 2010 statement: updated guidelines for reporting parallel group randomised trials[J]. BMJ, 2010,340: c332.

10.12201/bmr.202608.00029V1