

NIHR

Optimal strategies for monitoring lipid levels in patients at risk or with cardiovascular disease: a systematic review with statistical and cost-effectiveness modelling

While acknowledging known and potential unknown harms of statins, we find that more frequent monitoring strategies are cost-effective compared with others. Regular lipid monitoring in those with and without CVD is likely to be beneficial to patients and to the health service.

Health Technology Appraisal

Systematic search: Yes

December 2015

<http://www.journalslibrary.nihr.ac.uk/hta/volume-19/issue-100#abstract>

KINGS FUND

Nil

HIS

Comment on: MTA 374 Erlotinib and gefitinib for treating non-small-cell lung cancer that has progressed after prior chemotherapy

Erlotinib is recommended as an option for treating locally advanced or metastatic non-small-cell lung cancer that has progressed in people who have had non-targeted chemotherapy because of delayed confirmation that their tumour is epidermal growth factor receptor tyrosine kinase (EGFR-TK) mutation-positive

SMC Advice

Systematic search: No

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/mta_resources/appraisal_374.aspx

Comment on: MTA 373 Abatacept, adalimumab, etanercept and tocilizumab for treating juvenile idiopathic arthritis

Abatacept, adalimumab, etanercept and tocilizumab are recommended as options for treating polyarticular juvenile idiopathic arthritis (JIA), including polyarticular-onset, polyarticular-course and extended oligoarticular JIA.

SMC Advice

Systematic search: No

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/mta_resources/appraisal_373.aspx

Comment on: STA 372 Apremilast for treating active psoriatic arthritis

Apremilast (Otezla) is accepted for restricted use within NHS Scotland, alone or in combination with disease modifying anti-rheumatic drugs (DMARDs), for the

treatment of active psoriatic arthritis (PsA) in adult patients who have had an inadequate response or who have been intolerant to a prior DMARD therapy. Patients should have had an inadequate response with at least two prior DMARD therapies or be intolerant to such therapies. There is a material difference between the recommendations of the NICE STA and SMC.

SMC Advice

Systematic search: No

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/stas/appraisal_372.aspx

Comment on: STA 371 Trastuzumab emtansine for treating HER2-positive, unresectable locally advanced or metastatic breast cancer after treatment with trastuzumab and a taxane

Trastuzumab emtansine (Kadcyla) is not recommended for use within NHS Scotland for the treatment of adult patients with human epidermal growth factor type 2 (HER2)-positive, unresectable locally advanced or metastatic breast cancer who previously received trastuzumab and a taxane, separately or in combination.

SMC Advice

Systematic search: No

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/stas/appraisal_371.aspx

Comment on: STA 370 Bortezomib for previously untreated mantle cell lymphoma

Bortezomib (Velcade®) is accepted for use within NHS Scotland in combination with rituximab, cyclophosphamide, doxorubicin and prednisone for the treatment of adult patients with previously untreated mantle cell lymphoma who are unsuitable for haematopoietic stem cell transplantation.

SMC Advice

Systematic search: No

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/stas/appraisal_370.aspx

Comment on: STA 369 Ciclosporin for treating dry eye disease that has not improved despite treatment with artificial tears

Ciclosporin 1mg/mL (0.1%) eye drops emulsion (Ikervis) is accepted for use within NHS Scotland for the treatment of severe keratitis in adult patients with dry eye disease, which has not improved despite treatment with tear substitutes.

SMC Advice

Systematic search: No

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/stas/appraisal_369.aspx

Evidence note 55. Is magnetic resonance guided focused ultrasound surgery (MRgFUS) for the treatment of uterine fibroids clinically effective, safe and cost

effective compared with uterine artery embolisation, myomectomy and hysterectomy

Evidence comparing MRgFUS with other uterine-preserving treatments is limited to two non-randomised studies suggesting that UAE results in better outcomes.

Evidence on the safety of MRgFUS from uncontrolled observational studies suggests that major complications are rare. The effects of the procedure on fertility and future pregnancy are uncertain. Overall, the evidence is inconsistent and inconclusive surrounding the cost effectiveness of MRgFUS.

See also Advice Statement 001/15

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_advice_statements/advice_statement_001-15.aspx

HIS Evidence Note

Systematic search: Limited

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_-_evidence_notes/evidence_note_55.aspx

Evidence note 56. Is magnetic resonance guided focused ultrasound surgery (MRgFUS) clinically effective, safe and cost effective compared with radiotherapy or other palliative treatment alternatives for painful bone metastases?

There are no published studies comparing magnetic resonance guided focused ultrasound surgery (MRgFUS) with radiotherapy or other treatment alternatives for painful bone metastases. Limited evidence using a sham control procedure suggested MRgFUS was safe and effective; procedure related pain is the most commonly reported adverse effect. Two ongoing RCTs comparing MRgFUS with radiotherapy were identified. There are no published evaluations of cost effectiveness.

See also Advice Statement 002/15

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_advice_statements/advice_statement_002-15.aspx

HIS Evidence Note

Systematic search: Limited

December 2015

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_-_evidence_notes/evidence_note_56.aspx

Evidence note 57. Is patient self-monitoring (including self-testing and self-management) of oral anticoagulation therapy safe, efficacious and cost-effective?

Meta-analyses of mainly low quality RCTs in patients receiving long-term oral anticoagulation therapy with vitamin K antagonists report that self-management of INR reduces the incidence of thromboembolic events, compared with usual care, without increasing major bleeding events. The benefit is not seen with self-testing. It is likely that self-monitoring is a safe option for competent and motivated patients.

See also Advice Statement 003/15

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_advice_statements/advice_statement_003-15.aspx

HIS Evidence Note

Systematic search: Limited

December 2015

[http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg - evidence notes/evidence note 57.aspx](http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_-_evidence_notes/evidence_note_57.aspx)

HTA 13 Antimicrobial wound dressings (AWDs) for chronic wounds

The published evidence base on the clinical effectiveness of antimicrobial wound dressings was found to be of insufficient quality to support or refute their use. SIGN and SHTG researchers recruited NHS Scotland staff to participate in a modified Delphi process resulting in a series of eight statements to guide practice.

HIS Health Technology Assessment

Systematic search: Yes

December 2015

[http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg - hta/hta13 antimicrobial dressings.aspx](http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_-_hta/hta13_antimicrobial_dressings.aspx)

SGHD

Nil

SIGN

Next guidelines due “Spring 2016”

HEALTH SCOTLAND

Nil

NICE

NICE MTA 374 Erlotinib and gefitinib for treating non-small-cell lung cancer that has progressed after prior chemotherapy

Erlotinib is recommended as an option for treating locally advanced or metastatic non-small-cell lung cancer that has progressed in people who have had non-targeted chemotherapy because of delayed confirmation that their tumour is epidermal growth factor receptor tyrosine kinase (EGFR-TK) mutation-positive

NICE Multiple Technology Assessment

Systematic search: Yes

December 2015

<http://www.nice.org.uk/guidance/ta374>

NICE MTA 373 Abatacept, adalimumab, etanercept and tocilizumab for treating juvenile idiopathic arthritis

Abatacept, adalimumab, etanercept and tocilizumab are recommended as options for treating polyarticular juvenile idiopathic arthritis (JIA), including polyarticular-onset, polyarticular-course and extended oligoarticular JIA.

NICE Multiple Technology Assessment

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ta373>

NICE STA 372 Apremilast for treating active psoriatic arthritis

Apremilast alone or in combination with disease-modifying antirheumatic drug (DMARD) therapy is not recommended for treating adults with active psoriatic arthritis that has not responded to prior DMARD therapy, or where such therapy is not tolerated.

NICE Single Technology Assessment

Systematic search: Yes

December 2015

<http://www.nice.org.uk/guidance/ta372>

NICE STA 371 Trastuzumab emtansine for treating HER2-positive, unresectable locally advanced or metastatic breast cancer after treatment with trastuzumab and a taxane

Trastuzumab emtansine is not recommended for treating adults with human epidermal growth factor 2 (HER2) positive, unresectable locally advanced or metastatic breast cancer previously treated with trastuzumab and a taxane.

NICE Single Technology Assessment

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ta371>

NICE STA 370 Bortezomib for previously untreated mantle cell lymphoma

Bortezomib is recommended as an option for previously untreated mantle cell lymphoma in adults for whom haematopoietic stem cell transplantation is unsuitable.

NICE Single Technology Assessment

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ta370>

NICE STA 369 Ciclosporin for treating dry eye disease that has not improved despite treatment with artificial tears

Ciclosporin is recommended as an option for treating severe keratitis in adult patients with dry eye disease that has not improved despite treatment with tear substitutes.

NICE Single Technology Assessment

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ta369>

NG32 Older people: independence and mental wellbeing

This guideline covers interventions to maintain and improve the mental wellbeing and independence of people aged 65 or older and how to identify those most at risk of a decline. It includes recommendations on principles of good practice, group-based activities, one-to-one activities, and volunteering.

NICE Guidance

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ng32><https://www.nice.org.uk/guidance/ng32>

NG31 Care of dying adults in the last days of life

This guideline covers the clinical care of adults who are dying during the last 2 to 3 days of life. It aims to improve end of life care for people in their last days of life by communicating respectfully and involving them, and the people important to them, in decisions and by maintaining their comfort and dignity. The guideline covers how to manage common symptoms without causing unacceptable side effects and maintain hydration in the last days of life.

NICE Guidance

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ng31>

NG30 Oral health promotion: general dental practice

This guideline covers how general dental practice teams can convey advice about oral hygiene and the use of fluoride. It also covers diet, smoking, smokeless tobacco and alcohol intake. The recommendations cover oral health advice given by dentists and dental care professionals, and how dentists and dental care professionals can adopt a patient-centred approach

NICE Guidance

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ng30>

NG29 Intravenous fluid therapy in children and young people in hospital

This guideline covers general principles for managing intravenous (IV) fluids for children and young people under 16 years, including assessing fluid and electrolyte status and prescribing IV fluid therapy. It applies to a range of conditions and different settings. It does not include recommendations relating to specific conditions.

NICE Guidance

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ng29>

NG27 Transition between inpatient hospital settings and community or care home settings for adults with social care needs

This guideline covers the transition between inpatient hospital settings and community or care homes for adults with social care needs. It aims to improve people's experience of admission to, and discharge from, hospital by better coordination of health and social care services.

NICE Guidance

Systematic search: Yes

December 2015

<https://www.nice.org.uk/guidance/ng27>

NHS EVIDENCE: PUBLIC HEALTH EVIDENCE AWARENESS BULLETIN

Late diagnosis of HIV in the United Kingdom: an evidence review

This review looks at the published evidence on late diagnosis of HIV in the UK. It outlines the characteristics of people who are diagnosed late, individual and professional barriers to prompt diagnosis, and interventions to reduce late diagnosis.
[Centre for Public Health, Liverpool John Moores University](#)

Sexual health promotion for young people delivered via digital media: a scoping review

This scoping review summarises evidence of the effectiveness, cost effectiveness and mechanism of action of interactive digital interventions for sexual health. The focus is on young people aged 13 to 24 years in the UK.

[Public Health Research 3\(13\)](#)

EPPI Centre

Nil

AHRQ (Agency for Healthcare Research and Quality - USA)

Management of Insomnia Disorder

Low to moderate strength evidence supported several interventions for insomnia disorder. This review supports the efficacy of cognitive behavioral therapy for insomnia (CBT-I) in both the general adult population and the older adult population. Other psychological interventions did not have sufficient evidence of efficacy. In older adults, multicomponent behavioral therapy as well as CBT-I has evidence of efficacy across several sleep outcomes. Evidence shows the efficacy of nonbenzodiazapine hypnotics for treating insomnia disorder across several outcomes among the general adult population and older adults. Overall, several options exist to treat insomnia disorder in adults and older adults. Psychological approaches may be more sustainable and are less likely to harm.

AHRQ Research Synthesis

Systematic Search: Yes

December 2015

<http://www.effectivehealthcare.ahrq.gov/ehc/products/548/2164/Insomnia-executive-151230.pdf>

Diagnosis of Right Lower Quadrant Pain and Suspected Acute Appendicitis

Studies assessing multiple tests are typically not designed to provide comparative information so while there is fairly strong evidence about the performance of individual tests, there is little about comparative effectiveness. Clinical symptoms and signs and laboratory tests have relatively limited test performance when used in isolation. All three major imaging modalities (US, CT, & MRI) have adequate test performance.

AHRQ Research Synthesis

Systematic Search: Yes

December 2015

<http://www.effectivehealthcare.ahrq.gov/ehc/products/528/2159/appendicitis-executive-151214.pdf>

Management and Outcomes of Binge-Eating Disorder

Overall, we found the body of evidence to be small and uneven. Nevertheless, we can conclude that antidepressants as a class, lisdexamfetamine, topiramate, and CBT effectively address major characteristics of binge eating. On the other hand, we were able to draw few conclusions regarding the comparative effectiveness of interventions or combinations of interventions.

AHRQ Research Synthesis

Systematic Search: Yes

December 2015

<http://www.effectivehealthcare.ahrq.gov/ehc/products/563/2156/binge-eating-executive-151207.pdf>

Nonpharmacological Versus Pharmacological Treatments for Adult Patients With Major Depressive Disorder (MDD).

The available evidence indicates that second-generation antidepressants and CBT do not differ significantly in symptomatic relief as first-step treatments for adult outpatients with mild to severe MDD. The evidence is insufficient to draw conclusions about the comparative risk of serious adverse events, such as suicidal ideas and behaviors.

AHRQ Research Synthesis

Systematic Search: Yes

December 2015

<http://www.effectivehealthcare.ahrq.gov/ehc/products/568/2152/major-depressive-disorder-executive-151202.pdf>

Health Foundation

A practical guide to self-management support

This guide provides an overview of self-management support and the key components for effective implementation. It will be useful both for those starting their self-management support journey and those building on and improving the support that they already provide. The guide explains what self-management support is and why it is important. It then looks at various aspects of putting it into practice, including planning and commissioning, building knowledge, skills and confidence, and measurement and evaluation.

Health Foundation Review

Systematic search: No

December 2016

<http://www.health.org.uk/publication/practical-guide-self-management-support>

Behavioural insights in health care: Nudging to reduce inefficiency and waste

It has been suggested that nudges – approaches that steer people in certain directions while maintaining their freedom of choice – might offer an effective way to change behaviour and improve outcomes at lower cost than traditional policy tools. This review addresses the gap in coverage of nudge-type behaviour change interventions in health care by providing a map of the evidence of their application and considering opportunities for reducing inefficiency and waste in health care.

Health Foundation Review

Systematic search: No

December 2016

<http://www.health.org.uk/publication/behavioural-insights-health-care>

Canadian Agency for Drugs and Technologies in Health (CADTH)

Viscoelastometric Point-of-Care Testing for Vascular Surgery and Obstetrics: A Review of Clinical Utility and Guidelines

Significant reductions were reported in the transfusion of some allogeneic blood products, with patients undergoing aortic surgery under the rotational thromboelastometry (ROTEM)- or thromboelastography (TEG)-guided protocol, compared to patients under standard care. Significant reductions were also reported in the administration of some coagulation factors, with patients undergoing aortic surgery under the ROTEM-guided protocol, compared to patients under standard care.

CADTH Rapid Response Report

Systematic search: Limited

December 2015

<https://www.cadth.ca/viscoelastometric-point-care-testing-vascular-surgery-and-obstetrics-review-clinical-utility-and>

Telehealth for Patients with Heart Failure: A Review of the Clinical Effectiveness, Cost-effectiveness and Guidelines

In general, the use of telehealth such as structured telephone support or home telemonitoring using telecommunications technologies contributed to reductions in hospitalizations and mortality, and improved quality of life and lifestyle behaviour. A limited amount of evidence on cost-effectiveness showed inconsistent findings on the cost-effectiveness of telehealth compared to usual care. In Canada, the use of a Health Lines intervention (nurses available on telephone to provide suggestions) may be more cost-effective than usual care.

CADTH Rapid Response Report

Systematic search: Limited

December 2015

<https://www.cadth.ca/telehealth-patients-heart-failure-review-clinical-effectiveness-cost-effectiveness-and-guidelines>

Biologic Switching for Patients with Rheumatoid Arthritis: A Review of Clinical Effectiveness, Safety, and Guidelines

Adult patients with RA reported significant improvement in various measures of clinical effectiveness, without significant increase in safety issues, when switching from one or more tumor necrosis factor-alpha (TNF-) inhibitors to another biologic, whether a TNF- inhibitor or non-TNF inhibitor, over placebo or no other treatment. Recommendations from ten evidence-based guidelines, and the strength of those recommendations, were mixed: some recommended both within-class and out-of-class switching after failing one TNF- inhibitor, others only switching to non-TNF inhibitors after failing one or more TNF- inhibitors.

CADTH Rapid Response Report

Systematic search: Limited

December 2015

<https://www.cadth.ca/biologic-switching-patients-rheumatoid-arthritis-review-clinical-effectiveness-safety-and-0>

Insulin Pumps for Adults with Type 1 Diabetes: A Review of Clinical Effectiveness, Cost-effectiveness and Guidelines

The clinical effectiveness of continuous subcutaneous insulin infusion (CSII) versus multiple daily injections (MDI) in adult patients or in pregnant women with type 1 diabetes remains uncertain. Insulin pumps with integrated CGM (sensor augmented insulin pump therapy (SAPT) appear to have better glycemic control without increasing the risk of hypoglycemia compared with MDI. We did not identify relevant evidence on the comparative clinical effectiveness of insulin pumps plus CGM compared with standard insulin pump in adults with type 1 diabetes. CSII may not be cost-effective compared with MDI. According to the guidelines, glycemic targets in adults with type 1 diabetes can be achieved with MDI or CSII. CSII therapy is recommended for patients who are unable to maintain a satisfactory glycemic control with MDI.

CADTH Rapid Response Report

Systematic search: Limited

December 2015

<https://www.cadth.ca/insulin-pumps-adults-type-1-diabetes-review-clinical-effectiveness-cost-effectiveness-and-guidelines>

Dicyclomine for Gastrointestinal Conditions: A Review of the Clinical Effectiveness, Safety, and Guidelines

Recent evidence on the use of dicyclomine for GI tract conditions involving smooth muscle spasm is lacking. A limited amount of evidence published before 2005, identified in selected guidelines, has shown that dicyclomine is superior to placebo in improving IBS global assessment, and leads to more adverse events. Guidelines based on this evidence have recommended dicyclomine as a pharmacological treatment of IBS, as well as other antispasmodics such as mebeverine and alverine citrate. The recommendation was considered by the authors to be definitive based on low-quality evidence with uncertain trade-offs between benefits and harms.

CADTH Rapid Response Report

Systematic search: Limited

December 2015

<https://www.cadth.ca/dicyclomine-gastrointestinal-conditions-review-clinical-effectiveness-safety-and-guidelines>

McGill University Health Centre (Canada)

Nil

Health Information & Quality Authority (Ireland)

Health technology assessment of chronic disease self-management support interventions

This report examines the clinical and cost-effectiveness of both non-disease-specific and disease-specific self-management support interventions.

Health technology assessment

Systematic search: Yes

December 2015

<http://www.hiqa.ie/publications/health-technology-assessment-chronic-disease-self-management-support-interventions>

Campbell Collaboration

Nil

NICE FORWARD PLANNING – Publications due January 2016

Gastric cancer (metastatic) - ramucirumab (after chemotherapy) [ID741]

Single Technology Appraisal

Idiopathic pulmonary fibrosis - nintedanib [ID752]

Single Technology Appraisal

Lung cancer (non-small-cell, anaplastic lymphoma kinase positive, previously treated) - ceritinib [ID729]

Single Technology Appraisal

Multiple myeloma - panobinostat (post 1 prior therapy) [ID663]

Single Technology Appraisal

Ovarian, fallopian tube and peritoneal cancer (BRCA 1 or 2, mutated, relapsed, platinum-sensitive) - olaparib (maintenance) [ID735]

Single Technology Appraisal

Prostate cancer (hormone relapsed, bone metastases) - radium-223 dichloride [ID576]

Single Technology Appraisal

Prostate cancer (metastatic, hormone-relapsed) - enzalutamide [ID683]

Single Technology Appraisal

Type 1 diabetes: Integrated sensor-augmented pump therapy systems for managing blood glucose levels (The MiniMed Paradigm Veo System and the Vibe and G4 PLATINUM CGM system)

Diagnostic Technology