

NIHR

Nil

KINGS FUND

Nil

HIS

Evidence note 67 What is the most clinically effective and cost effective non-FDG tracer for use in PET-CT for staging and assessment of patients with suspected recurrent prostate cancer?

There is limited evidence to recommend replacing choline tracers with 68Ga-PSMA or anti-18F-FACBC for detection of recurrent prostate cancer. Studies suggest that 68Ga-PSMA is more accurate in detecting recurrent disease compared with radioactive labelled choline.

See also Advice Statement 004/17

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_advice_statements/advice_statement_004-17.aspx

HIS Evidence Note

Systematic search: Limited

April 2107

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_evidence_notes/evidence_note_67.aspx

Evidence note 64 Is Transcatheter aortic valve implantation (TAVI) clinically and cost effective for severe symptomatic aortic stenosis (AS) in adults at high surgical risk?

The evidence reviewed offers support for the provision of TAVI for adults with AS who are deemed to be at high surgical risk, although there is uncertainty surrounding the generalisability of the trial participants' risk scores to clinical practice in Scotland. Compared with surgical AVR, TAVI was found to be clinically effective and cost effective, subject to the modelling conditions.

See also Advice Statement 001/17

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_advice_statements/advice_statement_001-17.aspx

HIS Evidence Note

Systematic search: Limited

April 2107

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_evidence_notes/evidence_note_64.aspx

**Comment on: NICE (Multiple) Technology Appraisal Guidance No 439
Cetuximab and panitumumab for previously untreated metastatic colorectal cancer**

Cetuximab is recommended as an option for previously untreated epidermal growth factor receptor (EGFR)-expressing, RAS wild-type metastatic colorectal cancer in adults in combination with 5-fluorouracil, folinic acid and oxaliplatin (FOLFOX), or 5-fluorouracil, folinic acid and irinotecan (FOLFIRI).

Panitumumab is recommended as an option for previously untreated RAS wild-type metastatic colorectal cancer in adults in combination with FOLFOX, or FOLFIRI.

SMC Advice

Systematic search: No

April 2017

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/mta_resources/appraisal_439.aspx

SGHD

Nil

SIGN

Nil

HEALTH SCOTLAND

Income, Wealth and Poverty

This is the 8th in the series of inequality briefings from NHS Health Scotland. This briefing focuses on the role of income, wealth and poverty in creating health inequalities, and the evidence for effective actions to reduce health inequalities in this area.

Health Scotland briefing

Systematic search: No

April 2017

<http://www.healthscotland.scot/publications/income-wealth-and-poverty>

NICE

TA440 Pegylated liposomal irinotecan for treating pancreatic cancer after gemcitabine

Pegylated liposomal irinotecan, in combination with 5-fluorouracil and leucovorin, is not recommended for treating metastatic adenocarcinoma of the pancreas in adults whose disease has progressed after gemcitabine-based therapy.

NICE Technology Appraisal

Systematic search: Yes

April 2017

<https://www.nice.org.uk/guidance/ta440>

TA441 Daclizumab for treating relapsing–remitting multiple sclerosis

Daclizumab is recommended as an option for treating multiple sclerosis in adults only if the person has active relapsing–remitting multiple sclerosis previously treated with disease-modifying therapy, or rapidly evolving severe relapsing–remitting multiple sclerosis (that is, at least 2 relapses in the previous year and at least 1 gadolinium-enhancing lesion at baseline MRI), and alemtuzumab is contraindicated or otherwise unsuitable

NICE Technology Appraisal

Systematic search: Yes

April 2017

<https://www.nice.org.uk/guidance/ta441>

TA442 Ixekizumab for treating moderate to severe plaque psoriasis

Ixekizumab is recommended as an option for treating plaque psoriasis in adults only if the disease is severe (defined by a total PASI of 10 or more and a DLQI of more than 10), and the disease has not responded to standard systemic therapies, these treatments are contraindicated or the person cannot tolerate them. Stop ixekizumab treatment at 12 weeks if the psoriasis has not responded adequately (as defined).

NICE Technology Appraisal

Systematic search: Yes

April 2017

<https://www.nice.org.uk/guidance/ta442>

TA443 Obeticholic acid for treating primary biliary cholangitis

Obeticholic acid is recommended as an option for treating primary biliary cholangitis in combination with ursodeoxycholic acid for people whose disease has responded inadequately to ursodeoxycholic acid, or as monotherapy for people who cannot tolerate ursodeoxycholic acid.

NICE Technology Appraisal

Systematic search: Yes

April 2017

<https://www.nice.org.uk/guidance/ta443>

CG100 Alcohol-use disorders: diagnosis and management of physical complications

This guideline covers care for adults and young people (aged 10 years and older) with physical health problems that are completely or partly caused by an alcohol-use disorder. It aims to improve the health of people with alcohol-use disorders by providing recommendations on managing acute alcohol withdrawal and treating alcohol-related conditions.

NICE Clinical Guideline

Systematic search: Yes

April 2017

<https://www.nice.org.uk/guidance/cg100>

NG68 Sexually transmitted infections: condom distribution schemes

This guideline covers condom distribution schemes. The aim is to reduce the risk of sexually transmitted infections (STIs). In addition, these schemes can provide a good

introduction to broader sexual and reproductive health services, especially for younger people, and help prevent unplanned pregnancies.

NICE Guideline

Systematic search: Yes

April 2017

<https://www.nice.org.uk/guidance/ng68>

CG61 Irritable bowel syndrome in adults: diagnosis and management

This guideline covers diagnosing and managing irritable bowel syndrome (IBS) in people aged 18 and over. It details how to accurately diagnose IBS, and aims to improve the quality of life for adults with IBS by promoting effective management using dietary and lifestyle advice, pharmacological therapy and referral for psychological interventions.

NICE Clinical Guideline

Systematic search: Yes

April 2017

<https://www.nice.org.uk/guidance/cg61>

ES12 Non-cystic fibrosis bronchiectasis: inhaled tobramycin

Evidence shows inhaled tobramycin can reduce the number of exacerbations, the number of hospital admissions, the number of days in hospital, and the density of *P aeruginosa* in sputum. The optimal duration of treatment with inhaled tobramycin for treating non-cystic fibrosis bronchiectasis exacerbations caused by *P aeruginosa* has not been established.

NICE Evidence Summary

Systematic search: Yes

April 2017

<https://www.nice.org.uk/advice/es12/chapter/Key-points>

EPPI Centre

Nil

AHRQ (Agency for Healthcare Research and Quality - USA)

Nil

Health Foundation

Focus on: Emergency hospital care for children and young people

The report analyses Hospital Episode Statistics from 2006/07 to 2015/16, giving a picture of how children and young people used emergency care at NHS hospitals over the past 10 years, what conditions they needed care for, and what may be happening to care quality in some areas. It finds that some age groups saw significant rises in emergency admissions, and many children were hospitalised for conditions that could be treated in other settings. The report, therefore, also raises questions about where

children and young people can access high quality treatment outside the hospital emergency care setting.

Health Foundation report

Systematic search: No

April 2017

<http://www.health.org.uk/publication/focus-emergency-hospital-care-children-and-young-people>

Canadian Agency for Drugs and Technologies in Health (CADTH)

Central Venous Access Devices (CVADs) and Peripherally Inserted Central Catheters (PICCs) for Adult and Pediatric Patients

Limited evidence showed that there was no difference between valved and non-valved PICCs in the incidence of occlusion of the catheters or PICC-related blood stream infection and complications. A meta-analysis showed that in general heparin saline and normal saline had similar efficacy in maintaining the patency of central venous catheters, but patency with heparin use is statistically better than normal saline when placement was 30 days or less.

CADTH Rapid Response Report

Systematic search: Limited

March 2017

<https://www.cadth.ca/central-venous-access-devices-cvads-and-peripherally-inserted-central-catheters-piccs-adult-and>

Laser Spine Surgery for Herniated Discs and/or Nerve Root Entrapment: A Review of Clinical Effectiveness, Cost-Effectiveness and Guidelines

In general, findings from non-randomized and observational research report that laser spine surgery is effective in reducing pain in patients with herniated disc and/or nerve root entrapment. There are no significant differences in short-term post-operative back pain or functional disability between patients who have surgery using laser versus conventional techniques. There may be differences in long-term pain, with patients who underwent laser spine surgery reporting higher levels of lumbar back pain or radicular pain at times from 14 days to one-year post-surgery. Limited evidence suggested that at one-year follow up, a significantly higher proportion of patients in the laser spine surgery group had required re-operation with conventional, open surgery.

CADTH Rapid Response Report

Systematic search: Limited

March 2017

<https://www.cadth.ca/laser-spine-surgery-herniated-discs-andor-nerve-root-entrapment-review-clinical-effectiveness-cost>

Magnesium as an Alternative or Adjunct to Opioids for Chronic Pain: A Review of the Clinical Effectiveness and Guidelines

Definitive conclusions on the effectiveness of magnesium (intravenous, intramuscular, or oral) for the treatment of chronic pain were not possible. For migraine treatment with magnesium compared with placebo, the results from systematic reviews on prophylaxis and severity were mixed. Results for complex regional pain syndrome, were similarly mixed. For refractory chronic low back pain,

one RCT showed that intravenous magnesium followed by oral magnesium, was statistically significantly beneficial for pain management compared to placebo. Guidelines were also mixed in their recommendations on the use of magnesium in migraine.

CADTH Rapid Response Report

Systematic search: Limited

March 2017

<https://www.cadth.ca/magnesium-alternative-or-adjunct-opioids-chronic-pain-review-clinical-effectiveness-and-guidelines-0>

The Use of Medical Cannabis with Other Medications: A Review of Safety and Guidelines

Limited data on medical cannabis and drug-drug interactions were obtained from a low quality systematic review. Nabilone may have additive depressant effects with diazepam when taken together with alcohol and codeine, and it may decrease the need for opioids, nonsteroidal anti-inflammatory drugs, tricyclic antidepressants, dexamethasone and ondansetron when used concomitantly.

CADTH Rapid Response Report

Systematic search: Limited

March 2017

<https://www.cadth.ca/use-medical-cannabis-other-medications-review-safety-and-guidelines-0>

Anticoagulants for VTE Prevention in the Hospital Setting

There may be differences between unfractionated heparin (UFH) and low-molecular-weight heparin (LMWH) when used to prevent VTE, including the risks of bleeding and heparin-induced thrombocytopenia. Given the widespread use of heparin-based VTE prophylaxis, even small differences in outcomes and costs may have significant clinical and economic implications. Although the cost of LMWH has been substantially higher than the cost of UFH, the difference has been decreasing recently. The objective of this evaluation is to determine the incremental cost-effectiveness of LMWH compared with UFH for the prevention of VTEs in hospitalized general surgical or medical patients.

CADTH Economic Evaluation

Systematic search: Limited

March 2017

<https://www.cadth.ca/anticoagulants-vte-prevention-hospital-setting>

Increasing Frequency of Self-Monitoring Blood Glucose Test Strips During Pregnancy: A Review of the Clinical and Cost-Effectiveness and Guidelines

No relevant clinical or economic studies were found. One Canadian guideline on diabetes and pregnancy recommended self-monitoring blood glucose (SMBG), to be performed at least four times per day, irrespective to the use of insulin, while a US guideline recommended SMBG for all pregnant women with diabetes and suggested that SMBG should be performed before and after each meal, at bedtime, and during the night.

CADTH Rapid Response Report

Systematic search: Limited

March 2017

<https://www.cadth.ca/increasing-frequency-self-monitoring-blood-glucose-test-strips-during-pregnancy-review-clinical-0>

Disposable, Non-Sterile Gloves for Minor Surgical Procedures: A Review of Clinical Evidence

A meta-analysis that included outpatients undergoing cutaneous surgical procedures with healthcare professionals found the risk of postoperative surgical site infections was not statistically different among patients when healthcare professionals used sterile or non-sterile gloves.

CADTH Rapid Response Report

Systematic search: Limited

March 2017

<https://www.cadth.ca/disposable-non-sterile-gloves-minor-surgical-procedures-review-clinical-evidence-0>

Polyurethane Foam Dressings for the Prevention of Pressure Ulcers: Clinical and Cost-Effectiveness and Guidelines

Evidence suggested that polyurethane foam dressings may reduce the incidence of pressure ulcers in at-risk adults in most settings. The use of polyurethane foam may result in cost savings but the single cost-benefit analysis may not apply outside of the Australian context. Two guidelines provided weak recommendations to consider the application of a polyurethane foam dressing to bony prominences (e.g., sacrum and heels), in addition to all other prophylactic measures that are part of standard care.

CADTH Rapid Response Report

Systematic search: Limited

March 2017

<https://www.cadth.ca/polyurethane-foam-dressings-prevention-pressure-ulcers-clinical-and-cost-effectiveness-and>

McGill University Health Centre (Canada)

Nil

Health Information & Quality Authority (Ireland)

HTA of smoking cessation interventions

The health technology assessment (HTA) has carried out an independent evaluation of the clinical and cost-effectiveness of smoking cessation interventions, along with an analysis of the wider implications of potential changes to how these services are delivered in Ireland.

Health Technology Assessment

Systematic search: Yes

April 2017

<https://www.hiqa.ie/reports-and-publications/health-technology-assessment/hta-smoking-cessation-interventions>

Campbell Collaboration

Effect of early, brief computerized interventions on risky alcohol and cannabis use among young people

Computerized brief interventions are easy to administer, and the evidence from this review indicates that such brief interventions might reduce drinking for several months after the intervention. Additionally, there is no evidence for adverse effects. This means that brief, computerized interventions could be feasible ways of dealing with risky alcohol use among young people. The evidence on cannabis consumption is scarcer, suggesting the need for more research.

Systematic Review

Systematic search: Yes

April 2017

<https://www.campbellcollaboration.org/library/computerised-inteventions-youth-alcohol-cannabis-use.html>

Glasgow Centre for Population Health

Nil

NICE FORWARD PLANNING – Publications due May 2017

Psoriatic arthritis - certolizumab pegol and secukinumab (after DMARDs)

Single Technology Appraisal

Eating disorders - recognition and treatment

Clinical Guideline

Dupuytren's contracture - collagenase clostridium histolyticum

Single Technology Appraisal

Mastocytosis (systemic) – masitinib

Single Technology Appraisal

Nivolumab for treating recurrent or metastatic squamous-cell carcinoma of the head and neck after platinum-based chemotherapy

Single Technology Appraisal

Virtual chromoendoscopy to assess colorectal polyps during colonoscopy

Diagnostic Technology

Psoriasis (plaque, moderate, severe) - ixekizumab

Single Technology Appraisal