

NIHR

Barriers to and facilitators of smoking cessation in pregnancy and following childbirth: literature review and qualitative study

Perceptions and experiences of barriers to and facilitators of smoking cessation in pregnancy are fluid and context dependent. Effective interventions for smoking cessation in pregnancy should take account of the interplay between the individual, interpersonal and environmental aspects of women's lives.

Health Technology Assessment

Systematic search: Yes

June 2017

<https://www.journalslibrary.nihr.ac.uk/hta/hta21360/#/abstract>

Faecal immunochemical tests to triage patients with lower abdominal symptoms for suspected colorectal cancer referrals in primary care: a systematic review and cost-effectiveness analysis

Faecal immunochemical testing is likely to be a clinically effective and cost-effective strategy for triaging people who are presenting, in primary care settings, with lower abdominal symptoms and who are at low risk for CRC. Further research is required to confirm the effectiveness of faecal immunochemical testing in primary care practice and to compare the performance of different FIT assays.

Health Technology Assessment

Systematic search: Yes

June 2017

<https://www.journalslibrary.nihr.ac.uk/hta/hta21330/#/abstract>

Screening strategies for atrial fibrillation: a systematic review and cost-effectiveness analysis

A national screening programme for AF is likely to represent a cost-effective use of resources. Systematic opportunistic screening is more likely to be cost-effective than systematic population screening. Nurse pulse palpation or modified blood pressure monitors would be appropriate screening tests, with confirmation by diagnostic 12-lead electrocardiography interpreted by a trained GP, with referral to a specialist in the case of an unclear diagnosis. Implementation strategies to operationalise uptake of systematic opportunistic screening in primary care should accompany any screening recommendations

Health Technology Assessment

Systematic search: Yes

June 2017

<https://www.journalslibrary.nihr.ac.uk/hta/hta21290/#/abstract>

Multiplex tests to identify gastrointestinal bacteria, viruses and parasites in people with suspected infectious gastroenteritis: a systematic review and economic analysis

The systematic review and cost-effectiveness model identify uncertainties about the adoption of gastrointestinal pathogen panel (GPP) tests within the NHS. GPP testing will generally correctly identify pathogens identified by conventional testing;

however, these tests also generate considerable additional positive results of uncertain clinical importance.

Health Technology Assessment

Systematic search: Yes

June 2017

<https://www.journalslibrary.nihr.ac.uk/hta/hta21230/#/abstract>

What carcinoembryonic antigen level should trigger further investigation during colorectal cancer follow-up? A systematic review and secondary analysis of a randomised controlled trial

The results suggest that (1) CEA testing should not be used alone as a triage test; (2) in year 1, testing frequency should be increased; (3) the threshold for investigating a single test result should be raised to 10 µg/l; (4) after the second CEA test, decisions to investigate further should be made on the basis of the trend in CEA levels; (5) the optimal threshold for investigating the CEA trend falls over time; and (6) continuing smokers should not be monitored with CEA testing.

Health Technology Assessment

Systematic search: Yes

June 2017

<https://www.journalslibrary.nihr.ac.uk/hta/hta21220/#/abstract>

KINGS FUND

Tackling variations in clinical care: Assessing the Getting It Right First Time (GIRFT) programme

Through an informal assessment of the programme, this paper sets out what the programme is, why it is needed, what is different about it, what it has achieved, what challenges it faces and what potential it has. It also contains vignettes illustrating hospitals' experiences of the programme.

Kings Fund report

Systematic search: No

June 2017

<https://www.kingsfund.org.uk/publications/tackling-variations-clinical-care>

HIS

Evidence note 68: What is the evidence for the effectiveness and cost-effectiveness of vocational rehabilitation in relation to health outcomes and non-health outcomes for people with inflammatory arthritis?

Vocational rehabilitation is a complex intervention which has several definitions in the literature. Variation across studies limits conclusions around the most effective format, intensity or duration of intervention and prevents identification of those individuals most likely to benefit. Qualitative studies emphasise the need to tailor interventions to the perspectives, needs and goals of individual patients and highlight the importance of symptom management, particularly in relation to fatigue.

HIS Evidence Note

Systematic search: Limited

June 2107

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_-_evidence_notes/evidence_note_68.aspx

Evidence note 69: In patients with suspected rheumatoid arthritis, does the use of musculoskeletal ultrasound increase the ability of rheumatologists to confirm or rule out a diagnosis of rheumatoid arthritis at an earlier stage compared to routine diagnostic assessment?

Evidence from two overlapping systematic reviews indicates that adding musculoskeletal ultrasound imaging to clinical assessment and laboratory testing improves early diagnosis of rheumatoid arthritis. This was supported by other observational studies.

HIS Evidence Note

Systematic search: Limited

June 2107

http://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/shtg_-_evidence_notes/evidence_note_69.aspx

A review of the clinical effectiveness of direct oral anticoagulants for the prevention of stroke and systemic embolism in adult patients with non-valvular atrial fibrillation

No direct comparisons between DOACs were identified therefore this rapid review is based entirely on indirect evidence from published network meta-analyses. The effects of apixaban 5mg, edoxaban 60mg and dabigatran 150mg on stroke and systemic embolism prevention were similar. Rivaroxaban 20mg was less effective than dabigatran 150mg. In analysis of absolute risks, rather than relative risks, the absolute risk of stroke and systemic embolism for NVAf patients treated with a standard dose DOAC was lowest for dabigatran 150mg.

HIS Review

Systematic search: Limited

June 2107

http://www.healthcareimprovementscotland.org/our_work/cardiovascular_disease/programme_resources/doac_review_report.aspx

SGHD

NHS Dumfries and Galloway Case Study: Balancing Capacity with Demand at Dumfries and Galloway Royal Infirmary

A large rise in the number of visitors to the Emergency Department prompted Dumfries and Galloway Royal Infirmary to undertake an urgent review of patient flow. The hospital's improvement team decided to implement Daily Dynamic Discharge on one ward after being inspired by a workshop at a National Unscheduled Care event. It proved such a success that the model has now been implemented across the hospital and is being rolled out to the community. This is their story.

Case Study

Systematic search: No

June 2017

<http://www.gov.scot/Publications/2017/06/3617>

SIGN

Nil

HEALTH SCOTLAND

Maximising the role of NHSScotland in reducing health inequalities

This resource provides senior NHSScotland staff an overview of their unique and key contributions to reducing health inequalities. It describes practical actions staff can put in place to reduce health inequalities ensuring the best attainable health outcomes for both the people and communities they serve and the staff they employ.

Health Scotland Statement

Systematic search: No

June 2017

<http://www.healthscotland.scot/publications/maximising-the-role-of-nhsscotland-in-reducing-health-inequalities>

Just getting on with it

How cooking skills courses in Scotland support people who are experiencing food insecurity

CFHS Research Report

Systematic Search: No

June 2017

<http://www.healthscotland.scot/publications/just-getting-on-with-it>

NICE

PH42 Obesity: working with local communities

This guideline covers how local communities, with support from local organisations and networks, can help prevent people from becoming overweight or obese or help them lose weight. It aims to support sustainable and community-wide action to achieve this.

NICE Public Health Guideline

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ph42>

CG176 Head injury: assessment and early management

This guideline covers the assessment and early management of head injury in children, young people and adults. It promotes effective clinical assessment so that people receive the right care for the severity of their head injury, including referral directly to specialist care if needed.

NICE Clinical Guidance

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/cg176>

NG65 Spondyloarthritis in over 16s: diagnosis and management

This guideline covers diagnosing and managing spondyloarthritis that is suspected or confirmed in adults who are 16 years or older. It aims to raise awareness of the features of spondyloarthritis and provide clear advice on what action to take when people with signs and symptoms first present in healthcare settings. It also provides advice on the range of treatments available.

NICE Guidance

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ng65>

NG70 Air pollution: outdoor air quality and health

This guideline covers road-traffic-related air pollution and its links to ill health. It aims to improve air quality and so prevent a range of health conditions and deaths. This guideline recommends taking a number of actions in combination, because multiple interventions, each producing a small benefit, are likely to act cumulatively to produce significant change.

NICE Guidance

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ng70>

TA446 Brentuximab vedotin for treating CD30-positive Hodgkin lymphoma

Brentuximab vedotin is recommended as an option for treating CD30-positive Hodgkin lymphoma in adults, only if they have relapsed or refractory disease after autologous stem cell transplant [or within the conditions of the Cancer Drug Fund].

NICE Technology Appraisal

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ta446>

TA447 Pembrolizumab for untreated PD-L1-positive metastatic non-small-cell lung cancer

[Within the Cancer Drugs Fund] Pembrolizumab is recommended for use as an option for untreated PD-L1-positive metastatic non-small-cell lung cancer in adults, only if their tumours express PD-L1 with at least a 50% tumour proportion score and have no epidermal growth factor receptor- or anaplastic lymphoma kinase-positive mutations, and pembrolizumab is stopped at 2 years of uninterrupted treatment with no documented disease progression.

NICE Technology Appraisal

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ta447>

TA448 Etelcalcetide for treating secondary hyperparathyroidism

Etelcalcetide is recommended as an option for treating secondary hyperparathyroidism in adults with chronic kidney disease on haemodialysis, only if treatment with a calcimimetic is indicated but cinacalcet is not suitable.

NICE Technology Appraisal

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ta448>

TA449 Everolimus and sunitinib for treating unresectable or metastatic neuroendocrine tumours in people with progressive disease

Everolimus and sunitinib are recommended as options for treating well- or moderately differentiated unresectable or metastatic neuroendocrine tumours (NETs) of pancreatic origin in adults with progressive disease.

Everolimus is recommended as an option for treating well-differentiated (grade 1 or grade 2) non-functional unresectable or metastatic NETs of gastrointestinal or lung origin in adults with progressive disease.

NICE Technology Appraisal

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ta449>

TA450 Blinatumomab for previously treated Philadelphia-chromosome-negative acute lymphoblastic leukaemia

Blinatumomab is recommended as an option for treating Philadelphia-chromosome-negative relapsed or refractory precursor B-cell acute lymphoblastic leukaemia in adults.

NICE Technology Appraisal

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ta450>

TA451 Ponatinib for treating chronic myeloid leukaemia and acute lymphoblastic leukaemia

Ponatinib is recommended as an option for treating chronic-, accelerated- or blast-phase chronic myeloid leukaemia in adults when the disease is resistant to dasatinib or nilotinib, when they cannot tolerate dasatinib or nilotinib and for whom subsequent treatment with imatinib is not clinically appropriate, or the T315I gene mutation is present. Ponatinib is recommended as an option for treating Philadelphia-chromosome-positive acute lymphoblastic leukaemia with the same prerequisites.

NICE Technology Appraisal

Systematic search: Yes

June 2017

<https://www.nice.org.uk/guidance/ta451>

ES13 Preventing recurrence of Clostridium difficile infection: bezlotoxumab

Bezlotoxumab is the first medicine that is indicated for preventing the recurrence of C. difficile in adults who are at high risk of recurrence. However, its place in therapy is currently unclear given the small reduction in recurrent infections and the significant proportion of untreated patients who did not have a recurrent infection.

NICE Evidence Summary

Systematic search: Yes

June 2017

<https://www.nice.org.uk/advice/es13/chapter/Key-points>

ES14 Obese, overweight with risk factors: liraglutide (Saxenda)

Liraglutide (Saxenda) is a potential pharmacological treatment option for adults who have not reached their target weight loss or have reached a plateau on dietary, activity and behavioural changes, in line with the recommendations of CG189 'Identifying, assessing and managing obesity'.

NICE Evidence Summary

Systematic search: Yes

June 2017

<https://www.nice.org.uk/advice/es14/chapter/Key-points>

DG29 Multiple frequency bioimpedance devices to guide fluid management in people with chronic kidney disease having dialysis

There is currently not enough evidence to recommend the routine adoption of the BCM – Body Composition Monitor to guide fluid management in people with chronic kidney disease having dialysis in the NHS. Further research is recommended to show the effect of using the BCM – Body Composition Monitor on clinical outcomes.

There is currently not enough validation or clinical-outcome data to recommend the routine adoption of the InBody S10 or the MultiScan 5000 to guide fluid management in people with chronic kidney disease having dialysis in the NHS.

NICE Diagnostic Guidance

Systematic search: Limited

June 2017

<https://www.nice.org.uk/guidance/dg29>

EPPI Centre

Nil

AHRQ (Agency for Healthcare Research and Quality - USA)

Venous Thromboembolism Prophylaxis in Major Orthopedic Surgery: Systematic Review Update

VTE prophylaxis after major orthopedic surgery (total hip or knee replacement, or hip fracture) trades-off lowered VTE risk with possible adverse events – in particular, for most interventions, major bleeding. There may be selective outcome reporting bias as most studies include asymptomatic and other low-risk DVTs. There is also relatively sparse evidence on interventions other than LMWH.

AHRQ Research Synthesis

Systematic search: Yes

June 2017

<https://www.effectivehealthcare.ahrq.gov/ehc/products/628/2480/thromboembolism-update-report-170622.pdf>

Health Foundation

The need for a complex systems model of evidence for public health

The Health Foundation is working with Dr Harry Rutter from the London School of Hygiene and Tropical Medicine to develop a new model of evidence that will inform

public health research, policy and practice. As part of this work Dr Rutter and co-authors from the Health Foundation and around the world have published a new Viewpoint paper – The need for a complex systems model of evidence for public health – in The Lancet, which outlines the need for new approaches to designing and evaluating population-level interventions to improve health.

Research paper

Systematic search: No

June 2017

<http://www.health.org.uk/publication/need-complex-systems-model-evidence-public-health>

Canadian Agency for Drugs and Technologies in Health (CADTH)

Seasonal Influenza Immunization of Health Care Workers for the Prevention of Influenza in Patients: A Review of the Clinical Effectiveness

An overview of systematic reviews concluded that there is no clear evidence to support the vaccination of health care workers; within the overview, the conclusions of individual systematic reviews were mixed. Two low quality non-randomised studies reported results in favour of vaccinating health care workers, however their results need to be interpreted with caution.

CADTH Rapid Response Report

Systematic search: Limited

June 2017

<https://www.cadth.ca/seasonal-influenza-immunization-health-care-workers-prevention-influenza-patients-review-clinical>

Laser Eye Surgery for Vision Correction: A Review of Clinical Effectiveness and Guidelines

No studies were identified that specifically examined patient populations with a new requirement for refractive correction or patient populations with changing vision correction requirements. No studies were identified that examined laser eye surgery as compared to eyeglasses, corrective lenses, or control patients receiving no treatment.

CADTH Rapid Response Report

Systematic search: Limited

June 2017

<https://www.cadth.ca/laser-eye-surgery-vision-correction-review-clinical-effectiveness-and-guidelines>

Day Surgery versus Overnight Stay for Laparoscopic Cholecystectomy and Laparoscopic Hernia Repair: A Review of Comparative Clinical Effectiveness and Guidelines

Findings from a systematic review and controlled clinical trials showed that day surgery led to comparable post-operative complication rates and similar quality of life compared with overnight stay in adult and pediatric patients undergoing laparoscopic cholecystectomy. There was no evidence on the comparative clinical effectiveness of laparoscopic hernia repair performed as a day surgery versus overnight stay.

CADTH Rapid Response Report

Systematic search: Limited

June 2017

<https://www.cadth.ca/day-surgery-versus-overnight-stay-laparoscopic-cholecystectomy-and-laparoscopic-hernia-repair-0>

Platelet-Rich Plasma Injections for Wound Healing and Tissue Rejuvenation: A Review of Clinical Effectiveness, Cost-Effectiveness and Guidelines

While there were some reports indicating modest improvements in some outcomes for PRP injections relative to comparators such as placebo, hyaluronic acid, or no PRP treatment, it is not possible to make definitive conclusions regarding the effectiveness of PRP in any of the clinical indications reviewed due to the heterogeneity of clinical context, PRP intervention, and comparator agents.

CADTH Rapid Response Report

Systematic search: Limited

June 2017

<https://www.cadth.ca/platelet-rich-plasma-injections-wound-healing-and-tissue-rejuvenation-review-clinical-0>

Group Cognitive Processing Therapy for Adults with Post-Traumatic Stress Disorder, Anxiety, or Mood Disorders: A Review of Clinical Effectiveness and Guidelines

Evidence suggested that compared with other group therapies, group cognitive processing therapy had a similar effect in improving clinical symptoms in adult patients with post-traumatic stress disorder, though its effectiveness should be interpreted with caution due to the quality of the included trials. One evidence-based clinical practice guideline developed in Australia suggests that group cognitive behavioral therapy may be provided as adjunctive to, but not be considered an alternative to, individual trauma-focused therapy.

CADTH Rapid Response Report

Systematic search: Limited

June 2017

<https://www.cadth.ca/group-cognitive-processing-therapy-adults-post-traumatic-stress-disorder-anxiety-or-mood-disorders-0>

McGill University Health Centre (Canada)

Use of Extracorporeal Membrane Oxygenation for Cardiac Life Support in adult subjects

The objective of this report is to review the evidence on outcomes, efficacy, and safety of veno-arterial ECMO (VA-ECMO). Data on survival rates for VA-ECMO relative to alternative options are inconclusive given the limited evidence base, heterogeneous study populations, and inconsistent results. The current literature has not yet established clear normative guidelines due to the heterogeneous study population and limited body of evidence on clear indicators for survival.

Technology Assessment

Systematic search: Yes

June 2017

http://www.mcgill.ca/tau/files/tau/muhc_tau_2017_ecmo.pdf

Health Information & Quality Authority (Ireland)

Nil

Campbell Collaboration

Nil

Glasgow Centre for Population Health

Evaluating Sistema Scotland: Big Noise Torry - initial findings report

This report documents the findings of an initial phase of evaluation assessing the delivery and impacts of Sistema Scotland's Big Noise Torry programme in Aberdeen City. Alongside this, recommendations are made for the strategic and operational planning and delivery of the programme. This early assessment shows positive impacts on emotional wellbeing, education and learning, social and life skills and health behaviours.

Research Report

Systematic search: No

June 2017

http://www.gcph.co.uk/publications/716_evaluating_sistema_scotland_big_noise_torry-initial_findings_report

NICE FORWARD PLANNING – Publications due July 2017

Chronic obstructive pulmonary disease – roflumilast

Single Technology Appraisal

Hyperuricaemia (chronic) in gout – lesinurad

Single Technology Appraisal

Breast cancer (refractory, HER2 positive) - trastuzumab-emtansine

Single Technology Appraisal

Idiopathic pulmonary fibrosis - pirfenidone

Single Technology Appraisal

Daratumumab for multiple myeloma

Single Technology Appraisal

Ustekinumab for previously treated moderate to severe active Crohn's disease

Single Technology Appraisal

Obesity, overweight with risk factors - naltrexone-bupropion (prolonged release)

Single Technology Appraisal

Psoriasis (plaque, chronic, severe, children, young people) - adalimumab, etanercept and ustekinumab
Single Technology Appraisal

Hyperuricaemia (chronic) in gout - lesinurad
Single Technology Appraisal

Multiple myeloma - carfilzomib (with dexamethasone, after prior therapy)
Single Technology Appraisal

Nivolumab for treating relapsed or refractory classical Hodgkin lymphoma
Single Technology Appraisal

Uveitis (non-infectious) - adalimumab and dexamethasone
Single Technology Appraisal