Public Health Key Documents August 2018

NIHR

Screening women aged 65 years or over for abdominal aortic aneurysm: a modelling study and health economic evaluation

A discrete event simulation model was developed to provide a clinically realistic model of screening, surveillance, and elective and emergency AAA repair operations. Input parameters specifically for women were employed. The model was run for 10 million women, with parameter uncertainty addressed by probabilistic and deterministic sensitivity analyses. The accepted criteria for a population-based AAA screening programme in women are not currently met. Health Technology Assessment Systematic search: Yes August 2018 https://www.journalslibrary.nihr.ac.uk/hta/hta22430/#/abstract

KINGS FUND

Nil

Scottish Medicines Consortium

niraparib tosylate monohydrate (Zejula)

niraparib tosylate monohydrate is accepted for restricted use within NHS Scotland, as monotherapy for the maintenance treatment of adult patients with platinum-sensitive relapsed high grade serous epithelial ovarian, fallopian tube, or primary peritoneal cancer who are in response (complete or partial) to platinum-based chemotherapy. Zejula is restricted to patients who do not have a germline BRCA mutation. SMC advice Systematic search: No August 2018 <u>https://www.scottishmedicines.org.uk/medicines-advice/niraparib-tosylatemonohydrate-zejula-fullsubmission-134118/</u>

alectinib (Alecensa)

alectinib is accepted for use within NHS Scotland as monotherapy for the first-line treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer. SMC advice Systematic search: No August 2018 <u>https://www.scottishmedicines.org.uk/medicines-advice/alectinib-hydrochloride-</u> alecensa-fullsubmission-smc2012/

glycerol phenylbutyrate (Ravicti)

glycerol phenylbutyrate is accepted for use within NHS Scotland use as adjunctive therapy for chronic management of adult and paediatric patients ≥ 2 months of age

with selected urea cycle disorders who cannot be managed by dietary protein restriction and/or amino acid supplementation alone. Glycerol phenylbutyrate must be used with dietary protein restriction and, in some cases, dietary supplements (e.g. essential amino acids, arginine, citrulline, protein-free calorie supplements). SMC advice Systematic search: No August 2018 https://www.scottishmedicines.org.uk/medicines-advice/glycerol-phenylbutyrateravicti-fullsubmission-134218/

conestat alfa (Ruconest)

conestat alfa is accepted for use within NHS Scotland for treatment of acute angioedema attacks in adults and adolescents with hereditary angioedema due to C1 esterase inhibitor deficiency. SMC advice Systematic search: No August 2018 https://www.scottishmedicines.org.uk/medicines-advice/conestat-alfa-ruconestfullsubmission-74511/

sapropterin dihydrochloride (Kuvan)

sapropterin dihydrochloride is not recommended for use within NHS Scotland for the treatment of hyperphenylalaninaemia in adults and paediatric patients with phenylketonuria who have been shown to be responsive to such treatment. SMC advice Systematic search: No August 2018 <u>https://www.scottishmedicines.org.uk/medicines-advice/sapropterin-kuvan-fullsubmission-smc55809/</u>

patiromer (Veltassa)

patiromer is not recommended for use within NHS Scotland for the treatment of hyperkalaemia in adults. SMC advice Systematic search: No August 2018 https://www.scottishmedicines.org.uk/medicines-advice/patiromer-sorbitex-calciumveltassa-fullsubmission-smc2084/

SGHD

Transforming Social Care: Scotland's progress towards implementing selfdirected support 2011-2018

This publication reports on the outcomes achieved from the funding the Scottish Government has committed to support implementation of self-directed support, identifying the progress made between 2011 and 2018 towards delivery of this transformational change in social care.

Scottish Government report

Systematic search: No

August 2018 https://www.gov.scot/Publications/2018/08/1509

SIGN

Nil

HEALTH SCOTLAND

Youth health services - reviewing the benefits of a holistic approach

Using existing primary and review-level evidence, this briefing aims to evaluate the impact of youth health services which encourage young people's appropriate use of clinical services by co-locating them with other youth friendly health promotion activities. Rapid Review

Systematic search: Limited August 2018 <u>http://www.healthscotland.scot/publications/youth-health-services-reviewing-the-</u> benefits-of-a-holistic-approach

Social prescribing resources

Social prescribing is an approach used to support self-management. It is primarily used for connecting people to non-medical sources of support or resources within their community. It can also be used by professionals working in other services and enhances the holistic approaches to addressing health, wellbeing and mental health problems. The resources here include a background paper, a guidance paper, written case studies and video case studies.

Health Scotland Guidance Systematic search: No August 2018 http://www.healthscotland.scot/publications/social-prescribing-resources

NICE

NG102 Community pharmacies: promoting health and wellbeing

This guideline covers how community pharmacies can help maintain and improve people's physical and mental health and wellbeing, including people with a long-term condition. It aims to encourage more people to use community pharmacies by integrating them within existing health and care pathways and ensuring they offer standard services and a consistent approach. It requires a collaborative approach from individual pharmacies and their representatives, local authorities and other commissioners. NICE Guideline Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ng102

NG103 Flu vaccination: increasing uptake

This guideline covers how to increase uptake of the free flu vaccination among people who are eligible. It describes ways to increase awareness and how to use all opportunities in primary and secondary care to identify people who should be encouraged to have the vaccination. NICE Guideline

Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ng103

TA534 Dupilumab for treating moderate to severe atopic dermatitis

Dupilumab is recommended as an option for treating moderate to severe atopic dermatitis in adults, only if the disease has not responded to at least 1 other systemic therapy, such as ciclosporin, methotrexate, azathioprine and mycophenolate mofetil, or these are contraindicated or not tolerated. Stop dupilumab at 16 weeks if the atopic dermatitis has not responded adequately.

NICE Technology Appraisal Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ta534

TA535 Lenvatinib and sorafenib for treating differentiated thyroid cancer after radioactive iodine

Lenvatinib and sorafenib are recommended as options for treating progressive, locally advanced or metastatic differentiated thyroid cancer (papillary, follicular or Hürthle cell) in adults whose disease does not respond to radioactive iodine, only if they have not had a tyrosine kinase inhibitor before or they have had to stop taking a tyrosine kinase inhibitor within 3 months of starting it because of toxicity (specifically, toxicity that cannot be managed by dose delay or dose modification). NICE Technology Appraisal

Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ta535

TA536 Alectinib for untreated ALK-positive advanced non-small-cell lung cancer

Alectinib is recommended as an option for untreated anaplastic lymphoma kinase (ALK)-positive advanced non-small-cell lung cancer in adults. NICE Technology Appraisal Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ta536

TA537 xekizumab for treating active psoriatic arthritis after inadequate response to DMARDs

Ixekizumab alone, or with methotrexate, is recommended as an option for treating active psoriatic arthritis in adults, only if it is used as described in NICE's technology appraisal guidance on etanercept, infliximab and adalimumab for the treatment of psoriatic arthritis (TA199), or the person has had a TNF-alpha inhibitor but their

disease has not responded within the first 12 weeks or has stopped responding after the first 12 weeks, or TNF-alpha inhibitors are contraindicated. NICE Technology Appraisal Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ta537

TA538 Dinutuximab beta for treating neuroblastoma

Dinutuximab beta is recommended as an option for treating high-risk neuroblastoma in people aged 12 months and over whose disease has at least partially responded to induction chemotherapy, followed by myeloablative therapy and stem cell transplant, only if they have not already had anti-GD2 immunotherapy. NICE Technology Appraisal Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ta538

TA539 Lutetium (177Lu) oxodotreotide for treating unresectable or metastatic neuroendocrine tumours

Lutetium (177Lu) oxodotreotide is recommended as an option for treating unresectable or metastatic, progressive, well-differentiated (grade 1 or grade 2), somatostatin receptor-positive gastroenteropancreatic neuroendocrine tumours in adults.

NICE Technology Appraisal Systematic search: Yes August 2018 https://www.nice.org.uk/guidance/ta539

EPPI Centre

Self-care for minor ailments

The broad aim of these three reviews and their overarching synthesis is to explore the factors that may enhance, or limit, the effectiveness of interventions or services designed to promote self-care for minor ailments and to synthesise evaluations of existing interventions/services to estimate their effectiveness. The review findings suggest interventions should be multi-modal; educational interventions on their own are unlikely to be effective. A range of feasible interventions, based on the behavioural analysis, could be implemented and tested for effectiveness in practice. Existing effective behaviour change interventions should continue to be supported, including issuing back-up (delayed) antibiotic prescriptions for minor conditions. Evidence Report Systematic search: Yes August 2018 http://eppi.ioe.ac.uk/cms/Default.aspx?tabid=3728

AHRQ (Agency for Healthcare Research and Quality - USA)

Treatment for Bipolar Disorder in Adults: A Systematic Review

All antipsychotics approved by the FDA, except aripiprazole, had low-strength evidence for benefit for acute mania in adults with bipolar I disorder (BD-I). Lithium improved short-term for acute mania and resulted in longer time to relapse in the long term versus placebo in adults with BD-I. Aside from low-strength evidence showing CBT and systematic/collaborative care having no benefit for a few outcomes, evidence was insufficient for nondrug interventions. AHRQ Research Synthesis Systematic search: Yes August 2018 https://effectivehealthcare.ahrq.gov/topics/bipolar-disorder-treatment/final-report-

2018

Nonsurgical Treatments for Urinary Incontinence in Women: A Systematic Review Update

Network meta-analyses demonstrated that most nonpharmacological and pharmacological interventions are more likely than no treatment to improve UI outcomes and quality of life. Behavioral therapy, alone or in combination with other interventions, is generally more effective than 2nd line (pharmacological) therapies alone for both stress and urgency UI. Onabotulinum toxin A may be more effective than neuromodulation as third-line therapy for women with urgency UI.

AHRQ Research Synthesis Systematic search: Yes August 2018 <u>https://effectivehealthcare.ahrq.gov/topics/urinary-incontinence-update/final-report-2018</u>

Health Foundation

Reducing emergency admissions: unlocking the potential of people to better manage their long-term conditions

This briefing summarises research that explores the link between how well patients feel able to manage their long-term conditions such as asthma, diabetes and depression and their use of health care. The findings show the NHS could reduce avoidable health care use and improve people's quality of life, if they were better supported to manage their long-term conditions. The briefing points to solutions and calls for national policy makers and the local NHS to take action now, including by prioritising support for self-management in the NHS long-term plan.

Health Foundation Briefing

Systematic search: No

https://www.health.org.uk/reducing-emergency-admissions-better-manage-long-termconditions

Canadian Agency for Drugs and Technologies in Health (CADTH)

Methoxyflurane for Acute Pain in the Emergency Department: A Review of Clinical Effectiveness, Cost-Effectiveness and Guidelines

Methoxyflurane was effective for pain relief when compared with placebo, and adverse events were primarily mild and transient.

CADTH Rapid Response Report Systematic search: Limited August 2018 https://www.cadth.ca/methoxyflurane-acute-pain-emergency-department-reviewclinical-effectiveness-cost-effectiveness-and

Radioembolization with yttrium-90 Microspheres for the Management of Uveal Melanoma Liver Metastases: A Review of Clinical Effectiveness and Cost-Effectiveness

Limited evidence suggests patients on Selective internal radiation therapy (SIRT) both as first-line therapy or following failed systemic chemotherapy had a statistically significant improvement in median overall survival time compared to those on historical systemic chemotherapy, and this effect was larger in the group of patients who received SIRT as first-line treatment.

CADTH Rapid Response Report Systematic search: Limited August 2018 <u>https://www.cadth.ca/radioembolization-yttrium-90-microspheres-management-uveal-melanoma-liver-metastases-review-0</u>

Biologics Dose Escalation for the Treatment of Inflammatory Bowel Disease: A Review of Clinical Effectiveness, Cost-Effectiveness, and Guidelines

Limited evidence suggest that higher or more frequent dosing of adalimumab or infliximab had similar clinical effects as standard dosing. Doubling the infliximab dose and shortening the intervals of infliximab infusion were similarly effective to achieve clinical response, compared to switching to adalimumab in the short or long term.

CADTH Rapid Response Report Systematic search: Limited August 2018 <u>https://www.cadth.ca/biologics-dose-escalation-treatment-inflammatory-bowel-</u> disease-review-clinical-effectiveness-cost-0

Rituximab for the Treatment of Myasthenia Gravis: A Review of Clinical Effectiveness, Cost-Effectiveness, and Guidelines

Limited evidence suggests that rituximab treatment offers some clinical benefit to adult patients with refractory myasthenia gravis. Quality of life was reported in a few studies and there was suggestion of improvement with rituximab treatment.

CADTH Rapid Response Report

Systematic search: Limited

August 2018

https://www.cadth.ca/rituximab-treatment-myasthenia-gravis-review-clinicaleffectiveness-cost-effectiveness-and-0

McGill University Health Centre (Canada)

Hydrogel Spacer to reduce rectal toxicity in prostate cancer radiotherapy: a health technology assessment

The evidence indicates that the use of SpaceOAR is effective in increasing the distance between the prostate and rectal wall and thus decreasing the amount of radiation received by the rectum during prostate cancer radiotherapy. However, it remains unclear whether the reduction in rectal dose-volume results in reduced rectal toxicity and improved quality of life. Health Technology Assessment Systematic search: Yes https://muhc.ca/sites/default/files/micro/m-TAU/SpaceOARFinalMay10_2018_updatesJune%2018th.pdf

Health Information & Quality Authority (Ireland)

Nil

Campbell Collaboration

Nil

Glasgow Centre for Population Health

Nil

NICE FORWARD PLANNING – Publications due September 2018

Pembrolizumab for classical Hodgkin lymphoma Single Technology Appraisal

Pancreatitis: diagnosis and management Clinical Guideline

Preventing suicide in community and custodial settings Public Health Guidance

Chronic heart failure in adults: diagnosis and management Clinical Guideline

Inotuzumab ozogamicin for treating relapsed or refractory acute lymphoblastic leukaemia Single Technology Appraisal