Public Health Key Documents March/April 2018

NIHR

High-throughput non-invasive prenatal testing for fetal rhesus D status in RhDnegative women not known to be sensitised to the RhD antigen: a systematic review and economic evaluation.

High-throughput NIPT is sufficiently accurate to detect fetal RhD status in RhDnegative women from 11 weeks' gestation and would considerably reduce unnecessary treatment with routine anti-D immunoglobulin, potentially resulting in cost savings of between £485,000 and £671,000 per 100,000 pregnancies if the cost of implementing NIPT is in line with that reflected in this evaluation. Health Technology Assessment Systematic search: Yes March 2018 https://www.journalslibrary.nihr.ac.uk/hta/hta22130/#/abstract

KINGS FUND

Nil

Scottish Medicines Consortium

SMC advice: ribociclib (Kisqali)

ribociclib (Kisqali) is accepted for use within NHS Scotland, in combination with an aromatase inhibitor, for the treatment of postmenopausal women with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative locally advanced or metastatic breast cancer as initial endocrine-based therapy. SMC advice Systematic search: No March 2018 https://www.scottishmedicines.org.uk/medicines-advice/ribociclib-kisqali-fullsubmission-129518/

SMC advice: pembrolizumab (Keytruda)

pembrolizumab (Keytruda) is accepted for restricted use within NHS Scotland as monotherapy for the treatment of adult patients with relapsed or refractory classical Hodgkin lymphoma who have failed autologous stem cell transplant and brentuximab vedotin, or who are transplant-ineligible and have failed brentuximab vedotin. SMC advice Systematic search: No March 2018 <u>https://www.scottishmedicines.org.uk/medicines-advice/pembrolizumab-keytrudachl-fullsubmission-129618/</u>

SMC advice: atezolizumab (Tecentriq)

atezolizumab (Tecentriq) is not recommended for use within NHS Scotland as monotherapy for the treatment of adult patients with locally advanced or metastatic urothelial carcinoma after prior platinum-containing chemotherapy or who are considered cisplatin ineligible. SMC advice Systematic search: No March 2018 https://www.scottishmedicines.org.uk/medicines-advice/atezolizumab-tecentriqfullsubmission-129718/

SMC advice: teduglutide (Revestive)

teduglutide (Revestive) is accepted for restricted use within NHS Scotland for the treatment of patients aged 1 to 17 years with short bowel syndrome. SMC advice Systematic search: No April 2018 <u>https://www.scottishmedicines.org.uk/medicines-advice/teduglutide-revestive-</u> fullsubmission-113916/

SMC advice: sofosbuvir-velpatasvir-voxilaprevir (Vosevi)

sofosbuvir-velpatasvir-voxilaprevir (Vosevi) is accepted for restricted use within NHS Scotland for the treatment of chronic hepatitis C virus (HCV) infection in adults. Vosevi is restricted to patients who have failed to achieve a sustained virologic response with a direct-acting anti-viral, or who are DAA-naïve, have genotype 3 (GT3) HCV infection, with or without cirrhosis, and are suitable for treatment with an eight-week course. SMC advice Systematic search: No April 2018 https://www.scottishmedicines.org.uk/medicines-

advice/sofosbuvirvelpatasvirvoxilprevir-vosevi-fullsubmission-131718/

SMC advice: sofosbuvir-velpatasvir (Epclusa)

sofosbuvir-velpatasvir (Epclusa) is accepted for restricted use within NHS Scotland for the treatment of chronic hepatitis C virus (HCV) infection in adults who genotype 1 or 4 HCV infection. SMC advice

Systematic search: No April 2018 https://www.scottishmedicines.org.uk/medicines-advice/sofosbuvir-velpatasvirepclusa-resubmission-127117/

SMC advice: sarilumab (Kevzara)

sarilumab (Kevzara) is accepted for restricted use within NHS Scotland, in combination with methotrexate, for the treatment of moderately to severely active rheumatoid arthritis in adult patients who have responded inadequately to, or who are intolerant to one or more disease-modifying anti-rheumatic drugs. Sarilumab can be given as monotherapy in case of intolerance to methotrexate or when treatment with methotrexate is inappropriate.

SMC advice Systematic search: No April 2018 https://www.scottishmedicines.org.uk/medicines-advice/sarilumab-kevzara-fullsubmission-131418/

SMC advice: dimethyl fumarate (Skilarence)

dimethyl fumarate (Skilarence) is accepted for restricted use within NHS Scotland for the treatment of moderate to severe plaque psoriasis in adults in need of systemic medicinal therapy. Skilarence is restricted to use in patients for whom other nonbiologic systemic treatments (methotrexate, ciclosporin and acitretin) are not appropriate or have failed and who are considered unsuitable for biologic therapy given their current disease state or personal preference. SMC advice Systematic search: No April 2018 <u>https://www.scottishmedicines.org.uk/medicines-advice/dimethyl-fumarateskilarence-fullsubmission/</u>

SGHD

Management of Chronic Pain in Children and Young People

This guideline is a summary of available evidence, combined with a consensus group agreement on key recommendations and suggested patient pathways. This guideline will facilitate the transition to adult services. Our aim is to ensure all health professionals are delivering a consistent, evidence-based approach. National Clinical Guideline Systematic search: Yes March 2018 http://www.gov.scot/Publications/2018/03/8609

Veterans' Health & Wellbeing - A Distinctive Scottish Approach

This report looks at the current and future provision of health and social care for veterans in Scotland. Its ambition is to protect and enhance provision for veterans, and to ensure veterans' healthcare is a properly planned and embedded feature of the new health and social care landscape in Scotland.

Scottish Veterans Commissioner report Systematic search: No April 2018 http://www.gov.scot/Publications/2018/04/2093

SIGN

Nil

HEALTH SCOTLAND

Role of Health and Social Care Partnerships in reducing health inequalities

This publication is aimed at people working in Health and Social Care Partnerships. It describes practical actions as a way of considering health inequalities at the beginning when developing plans and priorities. Health Scotland Report Systematic search: No April 2018 <u>http://www.healthscotland.scot/publications/role-of-health-and-social-care-partnerships-in-reducing-health-inequalities</u>

A systematic review of adolescent physiological development and its relationship with health related behaviour

The aim of this review is to understand the relationship between bodily changes and health-related behaviours in adolescence, in order to take the chance to use this unique time of change to influence young people's health choices. Health Scotland Research Report Systematic search: Yes April 2018 http://www.healthscotland.scot/publications/a-systematic-review-of-adolescentphysiological-development-and-its-relationship-with-health-related-behaviour

NICE

NG87 Attention deficit hyperactivity disorder: diagnosis and management

This guideline covers recognising, diagnosing and managing attention deficit hyperactivity disorder in children, young people and adults. It aims to improve recognition and diagnosis, as well as the quality of care and support for people with ADHD.

NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng87

NG88 Heavy menstrual bleeding: assessment and management

This guideline covers assessing and managing heavy menstrual bleeding. It aims to help healthcare professionals investigate the cause of heavy periods that are affecting a woman's quality of life and to offer the right treatments, taking into account the woman's priorities and preferences NICE Guidance

Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng88

NG89 Venous thromboembolism in over 16s: reducing the risk of hospitalacquired deep vein thrombosis or pulmonary embolism

This guideline covers assessing and reducing the risk of venous thromboembolism and deep vein thrombosis in people aged 16 and over in hospital. It aims to help healthcare professionals identify people most at risk and describes interventions that can be used to reduce the risk of VTE. NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng89

NG90 Physical activity and the environment

This guideline covers how to improve the physical environment to encourage and support physical activity. The aim is to increase the general population's physical activity levels. The recommendations in this guideline should be read alongside NICE's guideline on physical activity: walking and cycling (https://www.nice.org.uk/guidance/ph41).

NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng90

NG91 Otitis media (acute): antimicrobial prescribing

This guideline sets out an antimicrobial prescribing strategy for acute otitis media. It aims to limit antibiotic use and reduce antimicrobial resistance. Acute otitis media can be caused by viruses or bacteria. It lasts for about a week, and most children get better in 3 days without antibiotics. Serious complications are rare. NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng91

NG92 Stop smoking interventions and services

This guideline covers stop smoking interventions and services delivered in primary care and community settings for everyone over the age of 12. It aims to ensure that everyone who smokes is advised and encouraged to stop and given the support they need. It emphasises the importance of targeting vulnerable groups who find smoking cessation hard or who smoke a lot.

NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng92

NG93 Learning disabilities and behaviour that challenges: service design and delivery

This guideline covers services for children, young people and adults with a learning disability (or autism and a learning disability) and behaviour that challenges. It aims to promote a lifelong approach to supporting people and their families and carers, focusing on prevention and early intervention and minimising inpatient admissions. This guideline should be read alongside the NICE guideline on challenging behaviour and learning disabilities: prevention and interventions

(https://www.nice.org.uk/guidance/ng11).

NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng93

NG94 Emergency and acute medical care in over 16s: service delivery and organisation

This guideline covers organising and delivering emergency and acute medical care for people aged over 16 in the community and in hospital. It aims to reduce the need for hospital admissions by giving advanced training to paramedics and providing community alternatives to hospital care. It also promotes good-quality care in hospital and joint working between health and social services.

NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ng94

TA508 Autologous chondrocyte implantation using chondrosphere for treating symptomatic articular cartilage defects of the knee

Autologous chondrocyte implantation using chondrosphere is recommended as an option for treating symptomatic articular cartilage defects of the femoral condyle and patella of the knee in adults only if the person has not had previous surgery to repair articular cartilage defects, there is minimal osteoarthritic damage to the knee, and the defect is over 2 cm^2 .

NICE Technology Appraisal Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ta508

TA509 Pertuzumab with trastuzumab and docetaxel for treating HER2-positive breast cancer

Pertuzumab, in combination with trastuzumab and docetaxel, is recommended for treating HER2-positive metastatic or locally recurrent unresectable breast cancer, in adults who have not had previous anti-HER2 therapy or chemotherapy for their metastatic disease NICE Technology Appraisal Systematic search: Yes March 2018

https://www.nice.org.uk/guidance/ta509

TA510 Daratumumab monotherapy for treating relapsed and refractory multiple myeloma

Daratumumab monotherapy is recommended for use within the Cancer Drugs Fund as an option for treating relapsed and refractory multiple myeloma in adults whose previous therapy included a proteasome inhibitor and an immunomodulator, and whose disease progressed on the last therapy, only if they have daratumumab after 3 previous therapies.

NICE Technology Appraisal Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ta510

TA511 Brodalumab for treating moderate to severe plaque psoriasis

Brodalumab is recommended as an option for treating plaque psoriasis in adults, only if the disease is severe (PASI > 10 and DLQI > 10) and the disease has not responded

to other systemic therapies, including ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet A radiation), or these options are contraindicated or not tolerated NICE Technology Appraisal Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ta511

TA512 Tivozanib for treating advanced renal cell carcinoma

Tivozanib is recommended as an option for treating advanced renal cell carcinoma in adults, only if they have had no previous treatment. NICE Technology Appraisal Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ta512

TA513 Obinutuzumab for untreated advanced follicular lymphoma

Obinutuzumab is recommended as an option for untreated advanced follicular lymphoma in adults (that is, first as induction treatment with chemotherapy, then alone as maintenance therapy), only if the person has a FLIPI score of 2 or more. NICE Technology Appraisal Systematic search: Yes March 2018 <u>https://www.nice.org.uk/guidance/ta513</u>

TA514 Regorafenib for previously treated advanced hepatocellular carcinoma

Regorafenib is not recommended for treating advanced unresectable hepatocellular carcinoma in adults who have had sorafenib. NICE Technology Appraisal

Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ta514

TA515 Eribulin for treating locally advanced or metastatic breast cancer after 1 chemotherapy regimen

Eribulin is not recommended for treating locally advanced or metastatic breast cancer in adults who have had only 1 chemotherapy regimen. NICE Technology Appraisal Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/ta515

TA516 Cabozantinib for treating medullary thyroid cancer

Cabozantinib is recommended as an option for treating progressive medullary thyroid cancer in adults with unresectable, locally advanced or metastatic disease. NICE Technology Appraisal Systematic search: Yes March 2018 <u>https://www.nice.org.uk/guidance/ta516</u>

CG90 Depression in adults: recognition and management

This guideline covers identifying and managing depression in adults aged 18 years and older, in primary and secondary care. It aims to improve care for people with depression by promoting improved recognition and treatment. NICE Guidance Systematic search: Yes April 2018 https://www.nice.org.uk/guidance/cg90

CG137 Epilepsies: diagnosis and management

The guideline covers diagnosing, treating and managing epilepsy and seizures in children, young people and adults in primary and secondary care. It offers best practice advice on managing epilepsy to improve health outcomes so that people with epilepsy can fully participate in daily life NICE Guidance

Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/cg137

CG173 Neuropathic pain in adults: pharmacological management in nonspecialist settings

This guideline covers managing neuropathic pain with pharmacological treatments in adults in non-specialist settings. It aims to improve quality of life for people with conditions such as neuralgia, shingles and diabetic neuropathy by reducing pain and promoting increased participation in all aspects of daily living.

NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/cg173

CG185 Bipolar disorder: assessment and management

This guideline covers recognising, assessing and treating bipolar disorder in children, young people and adults. The recommendations apply to bipolar I, bipolar II, mixed affective and rapid cycling disorders. It aims to improve access to treatment and quality of life in people with bipolar disorder.

NICE Guidance Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/cg185

CG192 Antenatal and postnatal mental health: clinical management and service guidance

This guideline covers recognising, assessing and treating mental health problems in women who are planning to have a baby, are pregnant, or have had a baby or been pregnant in the past year. It covers depression, anxiety disorders, eating disorders, drug- and alcohol-use disorders and severe mental illness (such as psychosis, bipolar disorder and schizophrenia). It promotes early detection and good management of mental health problems to improve women's quality of life during pregnancy and in the year after giving birth.

NICE Guidance

Systematic search: Yes March 2018 https://www.nice.org.uk/guidance/cg192

NG95 Lyme disease

This guideline covers diagnosing and managing Lyme disease. It aims to raise awareness of when Lyme disease should be suspected and ensure that people have prompt and consistent diagnosis and treatment. It does not cover preventing Lyme disease.

NICE Technology Appraisal Systematic search: Yes April 2018 https://www.nice.org.uk/guidance/ng95

NG96 Care and support of people growing older with learning disabilities

This guideline covers care and support for adults with learning disabilities as they grow older. It covers identifying changing needs, planning for the future, and delivering services including health, social care and housing. It aims to support people to access the services they need as they get older.

NICE Technology Appraisal Systematic search: Yes April 2018 https://www.nice.org.uk/guidance/ng96

TA517 Avelumab for treating metastatic Merkel cell carcinoma

Avelumab is recommended as an option for treating metastatic Merkel cell carcinoma in adults, only if they have had 1 or more lines of chemotherapy for metastatic disease. Avelumab is recommended for use within the Cancer Drugs Fund as an option for treating metastatic Merkel cell carcinoma in adults, only if they have not had chemotherapy for metastatic disease.

NICE Technology Appraisal Systematic search: Yes April 2018 https://www.nice.org.uk/guidance/ta517

TA518 Tocilizumab for treating giant cell arteritis

Tocilizumab, when used with a tapering course of glucocorticoids (and when used alone after glucocorticoids), is recommended as an option for treating giant cell arteritis in adults, only if they have relapsing or refractory disease, they have not already had tocilizumab, and tocilizumab is stopped after 1 year of uninterrupted treatment at most.

NICE Technology Appraisal Systematic search: Yes April 2018 https://www.nice.org.uk/guidance/ta518

TA519 Pembrolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy

Pembrolizumab is recommended for use within the Cancer Drugs Fund as an option for treating locally advanced or metastatic urothelial carcinoma in adults who have

had platinum-containing chemotherapy, only if pembrolizumab is stopped at 2 years of uninterrupted treatment or earlier in the event of disease progression. NICE Technology Appraisal Systematic search: Yes April 2018 https://www.nice.org.uk/guidance/ta519

EPPI Centre

Nil

AHRQ (Agency for Healthcare Research and Quality - USA)

Effects of Dietary Sodium and Potassium Intake on Chronic Disease Outcomes and Related Risk Factors

This review aims to synthesize the evidence regarding the effects of dietary sodium reduction and increased potassium intake on blood pressure and risk for cardiovascular diseases and renal disease outcomes and related risk factors. AHRQ Research Synthesis Systematic search: Yes March 2018 https://effectivehealthcare.ahrq.gov/topics/sodium-potassium/final-report-2018

Intermittent Inhaled Corticosteroids and Long-Acting Muscarinic Antagonists for Asthma

This review aims to assess the efficacy of intermittent inhaled corticosteroids in different populations of patients with asthma and to assess whether adding long-acting muscarinic antagonists improves outcomes for patients with uncontrolled, persistent asthma.

AHRQ Research Synthesis Systematic search: Yes March 2018 <u>https://effectivehealthcare.ahrq.gov/topics/asthma-pharmacologic-treatment/research-</u> 2017

Role of Immunotherapy in the Treatment of Asthma

This review aims to assess the efficacy and safety of immunotherapy for treating allergic asthma. AHRQ Research Synthesis Systematic search: Yes March 2018 https://effectivehealthcare.ahrq.gov/topics/asthma-immunotherapy/research

Physiologic Predictors of Severe Injury: Systematic Review

This review aims to summarize evaluations of physiologic measures that can be used by emergency medical services personnel to identify patients at high risk of serious injury and inform decisions about the level of trauma care needed. AHRQ Research Synthesis

Health Foundation

Nil

Canadian Agency for Drugs and Technologies in Health (CADTH)

Dental Amalgams Compared With Composite Resin

The evidence shows that dental restorations with dental amalgam last longer and cost less compared with restorations with composite resins, with no clinically important differences in safety. Health Technology Assessment Systematic search: Yes

Systematic search: Yes March 2018 https://www.cadth.ca/dental-amalgams-compared-composite-resin

Fetal Scalp Lactate Testing During Intrapartum Pregnancy with Abnormal Fetal Heart Rate: A Review of Clinical Effectiveness, Cost-Effectiveness, and Guidelines

The available evidence indicated that fetal scalp lactate testing was more likely to be successful with fewer scalp incisions and the results were available in less time than with pH estimation. Three guidelines recommended the use of fetal scalp blood sampling for women in labour when there is an abnormal or non-reassuring cardiotocography result.

CADTH Rapid Response Report

Systematic search: Limited

March 2018

https://www.cadth.ca/fetal-scalp-lactate-testing-during-intrapartum-pregnancyabnormal-fetal-heart-rate-review-clinical-0

Off-Label Use of Intravenous Immunoglobulin (IVIG) for Hematological Conditions: A Review of Clinical Effectiveness

Evidence was found on the use of IVIG for patients with fetal and neonatal alloimmune thrombocytopenia and hemolytic disease of the fetus and neonate. The studies compared IVIG with or without corticosteroids to no treatment, placebo, or a combination of treatments. Overall, the evidence on the effectiveness of off-label use of IVIG for haematological conditions was mixed; the studies were heterogeneous and there were some limitations in study quality.

CADTH Rapid Response Report

Systematic search: Limited

March 2018

https://www.cadth.ca/label-use-intravenous-immunoglobulin-hematologicalconditions-review-clinical-effectiveness-0

Off-Label Use of Intravenous Immunoglobulin (IVIG) for Neurological Conditions: A Review of Clinical Effectiveness

The evidence for the use of IVIG for the treatment epilepsy and chronic inflammatory demyelinating polyneuropathy was mixed. Some studies suggested that IVIG treatment of neurological or neuromuscular conditions may be promising but many of the identified studies had a high risk of bias and their results should be treated with caution.

CADTH Rapid Response Report Systematic search: Limited March 2018 <u>https://www.cadth.ca/label-use-intravenous-immunoglobulin-neurological-conditions-</u> review-clinical-effectiveness

Transcatheter Aortic Valve Implantation for Patients with Severe Aortic Stenosis at Various Levels of Surgical Risk: A Review of Clinical Effectiveness

There is strong evidence that compared to standard therapy or SAVR, TAVI reduced or maintained the risk of all-cause death, all strokes, and rehospitalization rate in patients with severe aortic stenosis at all levels of risk for open surgery. In patients with a high risk for open surgery, TAVI via transfemoral route (TAVI-TF) performed better than via transapical route (TAVI-TA) in reducing the risks of all-cause mortality. Health status significantly improved in patients with high or intermediate surgical risk treated with TAVI or SAVR.

CADTH Rapid Response Report

Systematic search: Limited

March 2018

https://www.cadth.ca/transcatheter-aortic-valve-implantation-patients-severe-aorticstenosis-various-levels-surgical-risk

Intravesical Botulinum Toxin for Adults with Non-Neurogenic Bladder Conditions: A Review of Clinical Effectiveness, Cost-Effectiveness and Guidelines

There is strong evidence that intravesical onabotulinumtoxinA (onabotA) improved overactive bladder (OAB) and bladder pain syndrome/interstitial cystitis (BPS/IC) symptoms compared to placebo or various anticholinergics. European cost analyses found that onabotA 100U is more cost-effective than best supportive care alone for OAB.

CADTH Rapid Response Report Systematic search: Limited March 2018 <u>https://www.cadth.ca/intravesical-botulinum-toxin-adults-non-neurogenic-bladder-</u> conditions-review-clinical-effectiveness

Gabapentin for Adults with Neuropathic Pain: A Review of the Clinical Effectiveness

The evidence for the effectiveness of gabapentin (GBP) on neuropathic pain is limited by quantity and quality. While some studies reported little to no difference in pain, the limited data prevent strong conclusions to be drawn for the clinical efficacy of GBP. Limited evidence suggests that there is no difference between GBP and topiramate for the treatment of neuropathic pain.

CADTH Rapid Response Report

Systematic search: Limited March 2018 <u>https://www.cadth.ca/gabapentin-adults-neuropathic-pain-review-clinical-effectiveness-0</u>

Guanfacine Hydrochloride Extended-Release (GXR) for Attention Deficit Hyperactivity Disorder: A Review of Clinical Effectiveness, Cost-Effectiveness, and Guidelines

There is strong evidence that GXR produces significant improvements in subjective ADHD rating scales as well as scales in executive function compared to placebo in children and adolescents with ADHD. There were no significant differences between GXR and active ADHD treatments; however, it was concluded that GXR may have a moderate effect on efficacy compared to active treatments.

CADTH Rapid Response Report Systematic search: Limited

March 2018

https://www.cadth.ca/guanfacine-hydrochloride-extended-release-attention-deficithyperactivity-disorder-review-clinical-0

Percutaneous Rhizotomy for Chronic Back or Neck Pain: A Review of Clinical Effectiveness, Cost-Effectiveness, and Guidelines

Although there is some evidence on the use of percutaneous rhizotomy for chronic back or neck pain it is of low quality and the benefits appear to be conflicting. The majority of guidelines also recognized there is limited available data for this procedure and either had weak recommendations or did not recommend percutaneous rhizotomy. Patients who may benefit must be carefully selected and identified. CADTH Rapid Response Report

Systematic search: Limited March 2018

https://www.cadth.ca/percutaneous-rhizotomy-chronic-back-or-neck-pain-reviewclinical-effectiveness-cost-effectiveness

Drugs for the Management of Rheumatoid Arthritis

For rheumatoid arthritis patients with moderate to severe disease in whom treatment with methotrexate has failed or who are intolerant to methotrexate, conventional synthetic disease-modifying antirheumatic drugs (alone or in combination), biologics (including biosimilars), and targeted synthetic disease-modifying antirheumatic drugs appear to be effective for different outcomes, though it is unclear how the efficacy and safety of the treatments compare with one another.

Health Technology Assessment Systematic search: Yes April 2018 https://www.cadth.ca/drugs-management-rheumatoid-arthritis

Off-Label Use of Intravenous Immunoglobulin (IVIG) for Dermatological Conditions: A Review of Clinical Effectiveness

The evidence for the use of IVIG for conditions such as Stevens-Johnson Syndrome (SJS), toxic epidermal necrolysis (TEN), polymyositis (PM), dermatomyositis (DM), bullous pemphigoid (BP), and systemic sclerosis (SS) is weak, in part due to the small size and heterogeneity of studies. There may be a positive correlation between high

IVIG dosage and clinical benefits such as mortality rate and recovery time for some patients. Pediatric patients treated with IVIG seemed to have lower mortality than adults. For some conditions, IVIG combined with corticosteroid improved muscle strength and improved biochemical profile compared to placebo or corticosteroid alone, while IVIG alone did not seem to have any impact.

CADTH Rapid Response Report Systematic search: Limited April 2018 <u>https://www.cadth.ca/label-use-intravenous-immunoglobulin-dermatological-</u> conditions-review-clinical-effectiveness-0

Off-Label Use of Intravenous Immunoglobulin (IVIG) for Autoimmune or Inflammatory Conditions: A Review of Clinical Effectiveness

Overall, considering the limitations in the study designs, reporting of outcomes, limited sample sizes, and risk of bias, there is limited evidence to suggest that offlabel IVIG is clinically effective for the treatment of autoimmune diseases.

CADTH Rapid Response Report Systematic search: Limited April 2018 https://www.cadth.ca/label-use-intrav

https://www.cadth.ca/label-use-intravenous-immunoglobulin-autoimmune-orinflammatory-conditions-review-clinical-0

Telehealth for the Assessment and Treatment of Depression, Post-Traumatic Stress Disorder, and Anxiety: Clinical Evidence

Limited evidence suggests that psychological assessment via telehealth is clinically effective in patients with depression, but there is no evidence on effectiveness in patients with anxiety or PTSD. The limited evidence suggests that psychological treatment delivered by telehealth is clinically effective and that the magnitude of the treatment effect is comparable to traditional means.

CADTH Rapid Response Report

Systematic search: Limited

April 2018

https://www.cadth.ca/telehealth-assessment-and-treatment-depression-post-traumaticstress-disorder-and-anxiety-clinical-0

Chest X-Rays Around Placement in Long-Term Care Facilities: A Review of Clinical Utility and Guideline

Only one evidence-based guideline from the Public Health Agency of Canada was identified that met the inclusion criteria for the report. It recommended that adults over the age of 65 from certain higher risk groups receive chest x-rays prior to admission to long-term care to screen for active tuberculosis and that individuals aged 65 and under from those higher risk groups be screened for latent tuberculosis infection with a two-step tuberculin skin test.

CADTH Rapid Response Report

Systematic search: Limited

April 2018

https://www.cadth.ca/chest-x-rays-around-placement-long-term-care-facilitiesreview-clinical-utility-and-guidelines

Bowel Preparation for Colorectal Procedures: A Review of Clinical Effectiveness, Cost-Effectiveness and Guidelines

There is low quality evidence that there is benefit to adding MBP to intravenous antibiotics, but no benefit to administering both oral and intravenous antibiotics. Guidelines were also based on low quality evidence but they generally recommend the use of mechanical bowel preparation plus oral antibiotics before colorectal surgery in adults.

CADTH Rapid Response Report Systematic search: Limited April 2018 <u>https://www.cadth.ca/bowel-preparation-colorectal-procedures-review-clinical-</u> effectiveness-cost-effectiveness-and-1

Cyclosporine for Moderate to Severe Plaque Psoriasis in Adults: A Review of Clinical Effectiveness and Safety

Good evidence suggests there is no difference between cyclosporine and methotrexate in common outcomes (PASI 90, PASI 75, PGA), but cyclosporine was inferior to some biologics on these outcomes. Other evidence that supports this position may suffer from being underpowered. Given the lack of long-term efficacy data and headto-head comparisons for cyclosporine and biologics, the evidence base is limited. CADTH Rapid Response Report Systematic search: Limited April 2018 https://www.cadth.ca/cyclosporine-moderate-severe-plaque-psoriasis-adults-reviewclinical-effectiveness-and-safety

McGill University Health Centre (Canada)

Nil

Health Information & Quality Authority (Ireland)

Nil

Campbell Collaboration

Nil

Glasgow Centre for Population Health

Nil

NICE FORWARD PLANNING – Publications due May 2018

Atezolizumab for treating non-small-cell lung cancer after platinum-based chemotherapy

Single Technology Appraisal

Bezlotoxumab for preventing recurrent Clostridium difficile infection Single Technology Appraisal

Afamelanotide for treating erythropoietic protoporphyria Highly Specialised Technology Evaluation

Multiple sclerosis - interferon beta, glatiramer acetate Multiple Technology Appraisal