Public Health Key Documents: June & July 2023

## NIHR

Nil

## The King's Fund

## The practice of collaborative leadership: across health and care services

Many people now need more co-ordinated care across primary, community, social and hospital services. Such care requires organisations and staff to collaborate well across organisational and professional boundaries. This report draws on interview and survey data and shows that health and care leaders at all levels have a critical role in modelling and rewarding collaborative behaviours but this is insufficient on its own. Leaders also need to pay attention to six leadership practices if they want to build a stronger collaborative ethos. This style of working is hard especially in a resource-constrained environment. Leaders must give greater attention to designing more participatory processes and developing the collaborative skills of other groups of staff. They should extend the practice of collaborative leadership to work with a broader range of local organisations as well as local communities.

Systematic search: No July 2023 <u>https://www.kingsfund.org.uk/publications/practice-collaborative-leadership</u>

## Driving better health outcomes through integrated care systems: the role of district councils

The report, based on interviews in four areas, found that district councils can play a valuable role within integrated care systems (ICSs) because they can influence the wider determinants of health; can act and react in fast and agile ways; and have strong, close connections with local communities. ICB leaders need to ensure prevention is at the heart of ICSs' mission and purpose, create opportunities for district councils to lead, and use district councils to trial new place-based projects. District councils need to actively promote the contribution they can make to system working, identify areas of shared priority with other councils, accept accountability for delivering agreed goals on behalf of the system, and invest in building relationships across the ICS. Systematic search: No

## July 2023

https://www.kingsfund.org.uk/publications/driving-better-health-outcomes-integrated-caresystems-role-district-councils

## How does the NHS compare to the health care systems of other countries?

The UK health care system has fewer key resources than its peers. It performs relatively well on some measures of efficiency but waiting times for common procedures were 'middle-of-the-pack' before the Covid-19 pandemic and have deteriorated sharply since. The UK performs well on protecting people from some of the financial costs of ill health, but lags behind its peers on important health care outcomes, including life expectancy and deaths. The latter could have been avoided through timely and effective health care, and public health and preventive services. There is little evidence that one particular 'type' of health care system or model of health care funding produces systematically better results than another. Countries predominantly try to achieve better health outcomes by improving their existing model of health care, rather than by adopting a radically different model.

Systematic search: No

June 2023

https://www.kingsfund.org.uk/publications/nhs-compare-health-care-systems-other-countries

Scottish Medicines Consortium (SMC Advice)

# azacitidine (Onureg®)

Accepted for use as maintenance therapy in adult patients with acute myeloid leukaemia who achieved complete remission or complete remission with incomplete blood count recovery following induction therapy with or without consolidation treatment and who are not candidates for, including those who choose not to proceed to, haematopoietic stem cell transplantation. Systematic search: No

July 2023

https://www.scottishmedicines.org.uk/medicines-advice/azacitidine-oral-onureg-full-smc2533/

## apalutamide (Erleada®)

Accepted for use in adults for the treatment of non-metastatic castration-resistant prostate cancer (nmCRPC) who are at high risk of developing metastatic disease.

Systematic search: No July 2023 <u>https://www.scottishmedicines.org.uk/medicines-advice/apalutamide-erleada-abbreviated-smc2579/</u>

## avalglucosidase alfa (Nexviadyme®)

Accepted for use as long-term enzyme replacement therapy for the treatment of patients with Pompe disease (acid α-glucosidase deficiency). Systematic search: No July 2023 <u>https://www.scottishmedicines.org.uk/medicines-advice/avalglucosidase-alfa-nexviadyme-abb-smc2546/</u>

# ropeginterferon alfa-2b (Besremi®)

NOT recommended for use as monotherapy in adults for the treatment of polycythaemia vera without symptomatic splenomegaly.

Systematic search: No July 2023 <u>https://www.scottishmedicines.org.uk/medicines-advice/ropeginterferon-alfa-2b-besremi-</u> resubmission-smc2563/

## polatuzumab vedotin (Polivy®)

Accepted for use in combination with bendamustine and rituximab for the treatment of adult patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) who are not candidates for haematopoietic stem cell transplant (HSCT). Systematic search: No

July 2023

https://www.scottishmedicines.org.uk/medicines-advice/polatuzumab-vedotin-polivyreassessment-smc2524/

## belumosudil (Rezurock)

The SMC has completed its initial assessment on treatment of patients aged 12 years and older with chronic graft-versus-host disease (chronic GvHD) who have received at least two prior lines of systemic therapy. Health Boards will be notified when this medicine is available for prescribing. In the meantime any requests should be considered through local non-formulary processes Systematic search: No

July 2023

https://www.scottishmedicines.org.uk/medicines-advice/belumosudil-rezurock-uo-smc2583/

# tixagevimab plus cilgavimab (Evusheld<sup>®</sup>)

NOT recommended for pre-exposure prophylaxis of COVID-19 in adults who are not currently infected with SARS-CoV-2 and who have not had a known recent exposure to an individual infected with SARS-CoV-2 and who are unlikely to mount an adequate immune response to COVID-19 vaccination or for whom COVID-19 vaccination is not recommended.

Systematic search: No

June 2023

https://www.scottishmedicines.org.uk/medicines-advice/tixagevimab-cilgavimab-evusheld-collabsmc2580/

# upadacitinib (Rinvoq®)

Accepted for use for the treatment of adult patients with moderately to severely active Crohn's disease (CD) who have had an inadequate response, lost response or were intolerant to either conventional therapy or a biologic agent, or for whom such therapies are not advisable. Systematic search: No

June 2023

https://www.scottishmedicines.org.uk/medicines-advice/upadacitinib-rinvoq-abb-smc2575/

# pembrolizumab (Keytruda®)

Accepted for use in combination with chemotherapy as neoadjuvant treatment, and then continued as monotherapy as adjuvant treatment after surgery, for the treatment of adults with locally advanced, or early stage triple-negative breast cancer (TNBC) at high risk of recurrence. Systematic search: No

June 2023

https://www.scottishmedicines.org.uk/medicines-advice/pembrolizumab-keytruda-na-m-tnbc-fullsmc2538/

## polatuzumab vedotin (Polivy®)

Accepted for restricted use in combination with rituximab, cyclophosphamide, doxorubicin, and prednisone (R-CHP) for the treatment of adult patients with previously untreated diffuse large B-cell lymphoma (DLBCL). Restricted to patients with an International Prognostic Index score of 2 to 5. Systematic search: No

June 2023

https://www.scottishmedicines.org.uk/medicines-advice/polatuzumab-vedotin-polivy-full-smc2525/

## treosulfan (Trecondi®)

Accepted for restricted use in combination with fludarabine as part of conditioning treatment prior to allogeneic haematopoietic stem cell transplantation (alloHSCT) in adult patients with malignant and non-malignant diseases, and in paediatric patients older than one month with malignant diseases.

Systematic search: No June 2023 <u>https://www.scottishmedicines.org.uk/medicines-advice/treosulfan-trecondi-full-smc2527/</u>

## nivolumab (Opdivo<sup>®</sup>)

Accepted for use in combination with fluoropyrimidine- and platinum-based combination chemotherapy for the first-line treatment of adult patients with unresectable advanced, recurrent or metastatic oesophageal squamous cell carcinoma (OSCC) with tumour cell programmed death ligand 1 (PD-L1) expression ≥1%. Systematic search: No

## June 2023

https://www.scottishmedicines.org.uk/medicines-advice/nivolumab-opdivo-oscc-full-smc2519/

## metreleptin (Myalepta)

This product was assessed under the ultra-orphan process as an adjunct to diet as a replacement therapy to treat the complications of leptin deficiency in lipodystrophy (LD) patients with: confirmed congenital generalised LD (Berardinelli-Seip syndrome) or acquired generalised LD (Lawrence syndrome) in adults and children 2 years of age and above; confirmed familial partial LD or acquired partial LD (Barraquer-Simons syndrome), in adults and children 12 years of age and above for whom standard treatments have failed to achieve adequate metabolic control. Health Boards will be notified when it is available for prescribing; in the meantime any requests to access treatment should be considered through local non-formulary processes Systematic search: No June 2023

https://www.scottishmedicines.org.uk/medicines-advice/metreleptin-myalepta-ultra-orphansmc2559/

# tafasitamab (Minjuvi®)

NOT recommended for use in combination with lenalidomide followed by tafasitamab monotherapy for the treatment of adult patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) who are not eligible for autologous stem cell transplant (ASCT). Systematic search: No June 2023 https://www.scottishmedicines.org.uk/medicines-advice/tafasitamab-minjuvi-full-smc2522/

## **Scottish Government**

## Whole Family Approach: rapid review of literature

Reviews the evidence on Whole Family Approaches to family support, focussing on examples of best practice in the context of substance use and implications for the training and learning development of substance use practitioners and wider workforce. Systematic search: No July 2023 https://www.gov.scot/publications/rapid-review-literature-whole-family-approach/

## A caring, compassionate and human rights informed drug policy for Scotland

Outlines what a progressive, evidence-based drugs policy would look like with public health and the reduction of harm as its underlying principles.

Systematic search: No July 2023 https://www.gov.scot/publications/caring-compassionate-human-rights-informed-drug-policyscotland/

## Tackling child poverty - progress report 2022 to 2023: annex d - cost of living focus report

Evidence review on the impact of the cost of living crisis for families living in low income households. Examines support given and barriers to receiving support. Confirms that the crisis is significantly impacting the mental health of both parents and children.

Systematic search: No

June 2023

https://www.gov.scot/publications/annex-d-focus-report-cost-living/

## Women's experiences of discrimination and the impact on health: research

Findings from research on how women in Scotland experience discrimination and how it affects their health. The evidence review involved database searches and grey literature searches. Focus groups and interviews were also conducted. Participants noted that various parts of their identity (age, gender identity, weight status, mental health status and relationship status) were sometimes used by health professionals as reasons for symptoms they were reporting. They described how these reasons were used against women as "excuses" to not investigate or suggest treatment for a range of mental and physical health concerns. Women from ethnic minority backgrounds stressed the exhaustion and mental strain of navigating racism.

Systematic search: Limited

June 2023

https://www.gov.scot/publications/womens-experiences-discrimination-impact-health/

## Enablers and barriers to trauma-informed systems, organisations and workforces: evidence review

Findings of a rapid evidence review of the international literature published between 2016-2022 describing the enablers that support the effective implementation of trauma-informed approaches across different systems, organisations and workforces, as well as barriers.

Systematic search: Limited

June 2023

https://www.gov.scot/publications/evidence-review-enablers-barriers-trauma-informed-systemsorganisations-workforces/

# Siblings - Staying Together and Connected National Implementation Group: executive summary report

Summarises the work of the Siblings: Staying Together and Connected National Implementation Group, the progress made, and the priorities for further work, to allow Scotland to continue on its journey to ensure brothers and sisters with care experience stay together and connected. Systematic search: No

June 2023

https://www.gov.scot/publications/siblings-staying-together-connected-national-implementationgroup-executive-summary-report/

# Violence Against Women and Girls - Independent Strategic Review of Funding and Commissioning of Services: report

The Independent Review was led by Lesley Irving, former Head of the Scottish Government's Equality Unit, who was supported by an Advisory Group comprising key figures from local government, academia and the third sector. It makes recommendations on legislation, minimum core services, prevention and funding as well as immediate priorities for action.

Systematic search: No

June 2023

https://www.gov.scot/publications/violence-against-women-girls-independent-strategic-review-funding-commissioning-services-report/

## SIGN

## Care of deteriorating patients (SIGN 167)

Replaces SIGN 139. Includes guidance on planning and decision making, recognition of clinical deterioration, early warning scores (NEWS2 should be used to monitor all acutely ill adult patients in prehospital, emergency department, acute hospital and community settings), sepsis, response to deterioration and handover communication.

Systematic search: Yes June 2023 https://www.sign.ac.uk/our-guidelines/care-of-deteriorating-patients/

#### **Public Health Scotland**

# Working together to build climate-resilient, healthy and equitable places: A briefing for local government and partners

An introductory briefing developed by Public Health Scotland, Adaptation Scotland and the Improvement Service. It aims to increase awareness of how climate change and adaptation responses can affect health and health inequalities. It also sets out evidence-based public health principles that support a whole-system approach to achieve climate resilience, health and equity. These principles can be used to inform ways of working at a local level so that actions contribute to improved health and equity alongside climate resilience.

Systematic search: No July 2023

https://www.publichealthscotland.scot/publications/working-together-to-build-climate-resilienthealthy-and-equitable-places-a-briefing-for-local-government-and-partners/

#### The case for prevention and sustainability of health services

This paper provides further evidence on why investment in prevention should be central to managing the demands on the health service now and in the future.

Systematic search: No

July 2023

https://www.publichealthscotland.scot/publications/the-case-for-prevention-and-sustainability-of-health-services/

# Community Benefit Gateway case studies (Shopmobility Paisley and District, Ayrshire Cancer Support, Garnock Valley Men's Shed, Harbourside Men's Shed)

The Community Benefit Gateway (CBG) is an online portal which allows NHS suppliers to identify how they can support a local community in Scotland.

Systematic search: No

June 2023

<u>https://www.publichealthscotland.scot/publications/?ic=phs\_publication\_type-case-</u> <u>study&q=community+benefit+gateway&fq=phs\_publication\_type%3ACase+study%23&sort=pdesc</u>

# Evaluating the impact of minimum unit pricing for alcohol in Scotland: a synthesis of the evidence

The final report from the PHS evaluation of minimum unit pricing for alcohol in Scotland. Evidence shows that MUP has had a positive impact on health outcomes, including addressing alcohol-related health inequalities. It has reduced deaths directly caused by alcohol consumption by an estimated 13.4% and hospital admissions by 4.1%, with the largest reductions seen in men and those living in the 40% most deprived areas. MUP led to a 3% reduction in alcohol consumption at a population level, as measured by retail sales. The reduction was particularly driven by sales of cider and spirits through the off-trade (supermarkets and shops) products that increased the most in price. The greatest reductions were amongst those households purchasing the most alcohol, with little impact on households purchasing at lower levels. For those people with alcohol dependence there was limited evidence of any reduction in consumption and some evidence of consequences for those with established alcohol dependence on low incomes that led them to prioritise spending on alcohol over food. At a population level, there is no clear evidence of substantial negative impacts on social harms such as alcohol-related crime or illicit drug use. Systematic search: No

June 2023

https://www.publichealthscotland.scot/publications/evaluating-the-impact-of-minimum-unitpricing-for-alcohol-in-scotland-a-synthesis-of-the-evidence

NICE – Guidelines Nil

**NICE - Technology Appraisal Guidance** 

TA911 Selpercatinib for untreated RET fusion-positive advanced non-small-cell lung cancer Systematic search: Limited July 2023 https://www.nice.org.uk/guidance/ta911

**TA909 Lorlatinib for untreated ALK-positive advanced non-small-cell lung cancer** Systematic search: Limited July 2023 <u>https://www.nice.org.uk/guidance/ta909</u>

TA906 Rimegepant for preventing migraine Systematic search: Limited July 2023 https://www.nice.org.uk/guidance/ta906

TA908 Olaparib for maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube or peritoneal cancer after 2 or more courses of platinum-based chemotherapy Systematic search: Limited July 2023 https://www.nice.org.uk/guidance/ta908

TA907 Deucravacitinib for treating moderate to severe plaque psoriasis Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta907

TA902 Dapagliflozin for treating chronic heart failure with preserved or mildly reduced ejection fraction Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta902

TA903 Darolutamide with androgen deprivation therapy and docetaxel for treating hormonesensitive metastatic prostate cancer Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta903

TA904 Pembrolizumab with lenvatinib for previously treated advanced or recurrent endometrial cancer Systematic search: Limited June 2023

#### https://www.nice.org.uk/guidance/ta904

**TA905 Upadacitinib for previously treated moderately to severely active Crohn's disease** Systematic search: Limited June 2023 <u>https://www.nice.org.uk/guidance/ta905</u>

TA898 Dabrafenib plus trametinib for treating BRAF V600 mutation-positive advanced non-smallcell lung cancer Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta898

**TA900 Tixagevimab plus cilgavimab for preventing COVID-19** Systematic search: Limited June 2023 <u>https://www.nice.org.uk/guidance/ta900</u>

TA893 Brexucabtagene autoleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people 26 years and over Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta893

**TA894 Axicabtagene ciloleucel for treating relapsed or refractory follicular lymphoma** Systematic search: Limited June 2023 <u>https://www.nice.org.uk/guidance/ta894</u>

TA895 Axicabtagene ciloleucel for treating relapsed or refractory diffuse large B-cell lymphoma after first-line chemoimmunotherapy Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta895

TA896 Bulevirtide for treating chronic hepatitis D Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta896

TA897 Daratumumab with bortezomib and dexamethasone for previously treated multiple myeloma Systematic search: Limited June 2023 https://www.nice.org.uk/guidance/ta897

EPPI Centre Nil

AHRQ (Agency for Healthcare Research and Quality – USA)

## Postpartum Care up to 1 Year After Pregnancy: a Systematic Review and Meta-analysis

Evidence was very limited and from an American setting. For general postpartum care, whether the visit is conducted at home/by telephone or at the clinic may not impact depression or anxiety symptoms. For breastfeeding care, whether the initial visit is conducted at home or at the pediatric clinic may not impact depression symptoms (up to 6 months postpartum), anxiety symptoms (up to 2 months), hospital readmission (up to 3 months),or other unplanned care utilization (up to 2 months). For breastfeeding care, peer support is probably associated with higher rates of any breastfeeding at 1 month and 3 to 6 months and of exclusive breastfeeding at 1 month but with comparable rates of exclusive breastfeeding at 3 months and nonexclusive breastfeeding at 1 and 3 months. Care by a lactation consultant is probably associated with higher rates of any breastfeeding at 6 months but not at 1 month or 3 months. Lactation consultant care is probably associated with comparable rates of exclusive breastfeeding at 1 or 3 months. Systematic search: Yes June 2023

https://effectivehealthcare.ahrq.gov/products/postpartum-care-one-year/research

## **Health Foundation**

Nil

# Canadian Agency for drugs and Technologies in Health (CADTH)

## Liraglutide for Pediatric Patients with Type 2 Diabetes

There is very limited evidence of limited quality to support the effectiveness of liraglutide (Victoza) in attaining glycemic control when added to treatment with metformin, with or without basal insulin, in children and adolescents with type 2 diabetes. Adverse events, such as hypoglycemia and gastrointestinal issues, are reportedly higher in patients receiving liraglutide (Victoza) than in those receiving placebo. There is a lack of long-term safety data evaluating the use of liraglutide (Victoza) in children and adolescents with type 2 diabetes.

Systematic search: Yes July 2023

https://www.cadth.ca/liraglutide-pediatric-patients-type-2-diabetes

# **Electrostimulation Devices for Wounds**

Electrostimulation as an adjunct to usual wound care might be better than usual care alone for wound management without increasing the risk of adverse events. Electrostimulation therapy may have greater effectiveness for patients with chronic wounds versus acute wounds or those with venous leg ulcers (VLUs) who do not have surgery compared with those who do have surgery. Pulsed current may have greater effectiveness on wound management than using direct current for patients with pressure ulcers. Limited evidence suggests that the effectiveness of electrostimulation may be similar to negative pressure wound therapy (NPWT) in wound surface area (WSA) and time to complete wound healing. One economic evaluation study suggests that electrostimulation is less costly and more effective than placebo at 24 weeks. No studies reporting on the cost-effectiveness between electrostimulation and NPWT that met the inclusion criteria for this report were found. A patient with lived experience of using an electrostimulation device for the treatment of a wound was involved in this report. He identified outcomes that are important to patients, primarily avoiding hospitalization and surgery, which were not outcomes reported in the identified literature. Systematic search: Yes

July 2023

https://www.cadth.ca/electrostimulation-devices-wounds

Point-of-Care HIV and Syphilis Screening

Dual point-of-care tests for HIV and syphilis and standalone point-of-care tests for syphilis may be useful in prenatal care for screening people for potential HIV and/or syphilis infections, based on findings from test accuracy studies. In prenatal care, point-of-care tests for syphilis have the potential to be cost-effective and may increase the proportion of people screened and treated for syphilis. Decision-makers should consider the potential for point-of-care HIV and syphilis screening to increase access to timely treatment for birthing parents and newborns, particularly in rural and remote communities and certain equity-deserving groups. However, the identified studies for this report provided few details about included populations, limiting an assessment of potential health inequities related to point-of-care screening. None of the included studies used point-of-care tests for HIV or syphilis in people in labour.

Systematic search: Yes

July 2023

https://www.cadth.ca/point-care-hiv-and-syphilis-screening

## Antimicrobial or Antiseptic Cleansers for Wounds

For chronic wound care, the majority of evidence suggested that antiseptic agents do not add additional clinical benefits compared with saline. No differences were observed between antiseptics and saline in the incidence of adverse events. For surgical wound care, irrigation with antibiotic agents is likely associated with lower rates of surgical site infections compared with saline irrigation. Depending on the type of antiseptic agent, type of surgery, and depth of infection, antiseptic irrigation may have superior or similar efficacy compared with saline in surgical site infection and wound healing rates. Indirect evidence suggested antibiotics were not superior to antiseptics for prevention of surgical site infections. No differences were observed between antiseptic irrigation and saline irrigation in the incidence of adverse events and length of hospital stay. For acute traumatic wound care, a limited number of studies provided mixed results on the effectiveness of povidone-iodine compared with saline for preventing infection. The effect of antiseptic agents on bacterial load was unclear. No robust conclusions could be drawn due to very low certainty of the evidence.

Systematic search: Yes June 2023 https://www.cadth.ca/antimicrobial-or-antiseptic-cleansers-wounds

# McGill University Health Centre (Canada)

Nil

# Health Information & Quality Authority (Ireland) – Health Technology Assessments

## Interventions to improve Long COVID symptoms: A systematic review

The review found 57 randomised controlled trials that considered interventions for adults with symptoms of Long COVID. A wide range of pharmaceutical and non-pharmaceutical interventions were identified, with most only examined in single studies. These studies were generally small, had short follow-up periods and typically only included people who had symptoms of Long COVID for less than one year. No definitively effective treatments were identified. There was also limited reporting on the safety of these interventions. It was noted that "the evidence suggests there are potential short-term improvements from personalised exercise interventions for dyspnoea, fatigue, physical function and the physical domain of quality of life (QoL) among some people with Long COVID. The evidence for physiotherapy and rehabilitation programmes also suggested potential short-term benefits, with breathing-related interventions reporting the potential for improvements in respiratory function, dyspnoea, and QoL. However, long-term changes were not assessed for both interventions and even minimal exertion may worsen symptoms among people with post-exertional malaise (that is, the worsening of symptoms following even minor physical or mental exertion)." A

better understanding of the pathophysiology of Long COVID would help researchers in designing more targeted interventions that address the complex nature of Long COVID. Systematic search: Yes July 2023 https://www.higa.ie/higa-news-updates/higa-reviews-interventions-improve-symptoms-long-covid

**Campbell Collaboration** 

Nil

# **Glasgow Centre for Population Health**

**Commuting, COVID and Decarbonising Transport: evidence from five Scottish institutions on their progress in decarbonising transport and supporting active and sustainable travel** The report focusses on the progress University of Strathclyde, University of Glasgow, City of Glasgow College, Glasgow City Council, and the Scottish Parliament are making in achieving a shift to more active and sustainable travel among staff and students. The information gathered describes the context of each organisation, staff travel trends, the impacts of COVID-19 on travel, and active and sustainable travel policies and schemes to promote more sustainable travel. Systematic search: No June 2023

https://www.gcph.co.uk/assets/0000/9833/Sustainable\_transport\_case\_studies\_final\_June\_23.pdf

## NICE FORWARD PLANNING – Publications due August 2023

**Venous thromboembolic diseases: diagnosis, management and thrombophilia testing** Clinical Guideline - update (new pharmaceutical and clinical practice evidence)

**Metastatic spinal cord compression in adults: risk assessment, diagnosis and management** Clinical Guideline - update (new clinical practice evidence)

Caesarean birth - diamorphine for spinal analgesia

Clinical Guideline - update (new clinical practice evidence)

## Caesarean birth - surgical opening technique

Clinical Guideline - update (new clinical practice evidence)

**Ectopic pregnancy and miscarriage - medical management of miscarriage** Clinical Guideline - update (new clinical practice evidence)

**Cipaglucosidase alfa with miglustat for treating late-onset Pompe disease** Technology Appraisal

Atogepant for preventing migraine Technology Appraisal

Belantamab mafodotin for treating relapsed or refractory multiple myeloma after 4 or more therapies

Technology Appraisal

Daratumumab with lenalidomide and dexamethasone for untreated multiple myeloma when stem cell transplant is unsuitable Technology Appraisal

Voxelotor for treating sickle cell disease Technology Appraisal