Public Health Key Documents: October 2023

**NIHR**

**Alternative cascade-testing protocols for identifying and managing patients with familial hypercholesterolaemia: systematic reviews, qualitative study and cost-effectiveness analysis**

Based on limited evidence, most cost-effective cascade-testing protocols, diagnosing most relatives, select index cases by genetic testing, with services directly contacting relatives, and contacting second-degree relatives even if first-degree relatives have not been tested. Combined approaches to contact relatives may be more suitable for some families.

Systematic search: Limited

October 2023

<https://www.journalslibrary.nihr.ac.uk/hta/CTMD0148/>

**The King’s Fund**

Nil

**Scottish Government**

**Low-level pollution - health impacts: evidence review**

This review explores the existing evidence on the health effects associated with low-level pollution in countries that have levels of ambient air pollution similar to Scotland. Evidence from global studies and reviews consistently supports the association between air pollution and various health outcomes, including CVD, respiratory health, mortality, cancer, neonatal health, type-2 diabetes, ocular outcomes, primary care healthcare service use, cognition, and neurological health. The studies also highlight the association between air pollution and mental health, including self-harm, psychopathology, major depressive disorder, and cognitive impairments. Air pollution contributes to the development and exacerbation of dementias and is associated with neurological diseases such as Parkinson's disease, stroke, multiple sclerosis, and nervous system disorders. While the global evidence is robust, the specific evidence regarding air pollution and health outcomes in Scotland is limited and inconclusive. When specifically considering CVD, some studies in Scottish cohorts support the global consensus, showing associations between air pollution and CVD, while others did not find significant associations. Further research in the Scottish context is necessary to provide more conclusive insights into the relationship between air pollution and health outcomes.

Systematic search: Limited

October 2023

<https://www.gov.scot/publications/review-assessment-evidence-health-impacts-low-level-pollution-countries-levels-ambient-air-pollution-comparable-scotland/pages/6/>

**Equality evidence: Inclusive evidence resources**

Advice for researchers to aid inclusivity when collecting evidence.

Systematic search: No

October 2023

<https://www.gov.scot/publications/equality-evidence-inclusive-evidence-resources/>

**SIGN**

**Cutaneous melanoma (SIGN 146)**

Guideline has been updated to cover new evidence in pathological reporting, sentinel lymph node biopsy and completion lymphadenectomy, systemic anticancer therapies and follow-up surveillance.

Systematic search: Yes

August 2023

<https://www.sign.ac.uk/our-guidelines/cutaneous-melanoma/>

**Public Health Scotland**

**Evaluability assessment of low emission zones: Glasgow low emission zone**

This working paper describes a preliminary evaluability assessment of low emission zones (LEZs), using the Glasgow LEZ as an example. It outlines a theory of change demonstrating the links between the LEZ and the range of possible outcomes that could, in theory, be assessed if resources were available. It is intended to encourage further discussion by relevant agencies and to prompt more detailed examination of specific options for evaluation. It was written in 2019 but publication was delayed due to the Covid-19 pandemic. Any significant policy changes, and evidence, since then should be considered when reading the report.

Systematic search: Yes

October 2023

<https://www.publichealthscotland.scot/publications/evaluability-assessment-of-low-emission-zones-glasgow-low-emission-zone/evaluability-assessment-of-low-emission-zones-glasgow-low-emission-zone>

**Scottish Medicines Consortium (SMC Advice)**

**semaglutide (Wegovy®)**

Accepted for restricted use within NHSScotland as an adjunct to a reduced-calorie diet and increased physical activity for weight management, including weight loss and weight maintenance, in adults with an initial Body Mass Index (BMI) of ≥30kg/m2 (obesity), or ≥27kg/m2 to <30kg/m2 (overweight) in the presence of at least one weight-related comorbidity.

SMC restriction: BMI of ≥30kg/m2\* in the presence of at least one weight-related comorbidity. Patients should be treated in a specialist weight management service.

[\*a lower BMI cut-off may be more appropriate for members of minority ethnic groups known to be at equivalent risk of the consequences of obesity at a lower BMI than the white population.]

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/semaglutide-wegovy-full-smc2497/>

**darolutamide (Nubeqa®)**

Accepted for use for the treatment of adults with metastatic hormone-sensitive prostate cancer (mHSPC) in combination with docetaxel.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/darolutamide-nubeqa-ft-resub-smc2604/>

**zanubrutinib (Brukinsa®)**

Accepted for restricted use as monotherapy for the treatment of adult patients with chronic lymphocytic leukaemia in whom chemo-immunotherapy is unsuitable.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/zanubrutinib-brukinsa-abbreviated-smc2600/>

**atogepant (Aquipta®)**

Accepted for restricted use for the prophylaxis of migraine in adults who have at least 4 migraine days per month. Restricted to patients with chronic and episodic migraine who have had prior failure on three or more migraine preventive treatments.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/atogepant-aquipta-abbreviated-smc2599/>

**maribavir (Livtencity®)**

Accepted for use for the treatment of cytomegalovirus (CMV) infection and/or disease that are refractory (with or without resistance) to one or more prior therapies, including ganciclovir, valganciclovir, cidofovir or foscarnet in adult patients who have undergone a haematopoietic stem cell transplant (HSCT) or solid organ transplant (SOT).

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/maribavir-livtencity-full-smc2576/>

**voclosporin (Lupkynis®)**

Accepted for use in combination with mycophenolate mofetil for the treatment of adult patients with active class III, IV or V (including mixed class III/V and IV/V) lupus nephritis.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/voclosporin-lupkynis-full-smc2570/>

**regorafenib (Stivarga®)**

Accepted for use as monotherapy for the treatment of adult patients with metastatic colorectal cancer who have been previously treated with, or are not considered candidates for, available therapies.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/regorafenib-stivarga-full-smc2562/>

**fenfluramine (Fintepla®)**

Accepted for use for the treatment of seizures associated with Dravet syndrome as an add-on to other anti-epileptic medicines for patients 2 years of age and older.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/fenfluramine-fintepla-full-smc2569/>

**olaparib (Lynparza®)**

Accepted for use as monotherapy or in combination with endocrine therapy for the adjuvant treatment of adult patients with germline BRCA1/2-mutations who have human epidermal growth factor receptor 2 (HER2)-negative, high risk early breast cancer previously treated with neoadjuvant or adjuvant chemotherapy.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/olaparib-lynparza-full-smc2518/>

**lutetium (177Lu) vipivotide tetraxetan (Pluvicto®)**

NOT recommended for use for the treatment of adult patients with prostate specific membrane antigen (PSMA)-positive metastatic castration-resistant prostate cancer (mCRPC) who have been treated with androgen receptor (AR) pathway inhibition and taxane-based chemotherapy or who are not medically suitable for taxanes.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/lutetium-177lu-vipivotide-tetraxetan-pluvicto-full-smc2517/>

**belzutifan (Welireg®)**

Accepted for use as treatment of adult patients with von Hippel-Lindau (VHL) disease who require therapy for VHL associated renal cell carcinoma (RCC), central nervous system (CNS) hemangioblastomas, or pancreatic neuroendocrine tumours (pNET), and for whom localised procedures are unsuitable or undesirable.

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/belzutifan-welireg-full-smc2587/>

**brexucabtagene autoleucel (Tecartus®)**

Accepted for use for the treatment of adult patients 26 years of age and above with relapsed or refractory B-cell precursor acute lymphoblastic leukaemia (ALL).

Systematic search: No

October 2023

<https://www.scottishmedicines.org.uk/medicines-advice/brexucabtagene-autoleucel-tecartus-full-smc2548/>

**NICE - Technology Appraisal Guidance**

**TA917 Daratumumab with lenalidomide and dexamethasone for untreated multiple myeloma when a stem cell transplant is unsuitable**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta917>

**TA924 Tirzepatide for treating type 2 diabetes**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta924>

**TA925 Mirikizumab for treating moderately to severely active ulcerative colitis**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta925>

**TA926 Baricitinib for treating severe alopecia areata**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta926>

**TA923 Tabelecleucel for treating post-transplant lymphoproliferative disorder caused by the Epstein-Barr virus (terminated appraisal)**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta923>

**TA919 Rimegepant for treating migraine**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta919>

**TA920 Tofacitinib for treating active ankylosing spondylitis**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta920>

**TA921 Ruxolitinib for treating polycythaemia vera**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta921>

**TA922 Daridorexant for treating long-term insomnia**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta922>

**TA927 Glofitamab for treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic treatments**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta927>

**TA918 Bimekizumab for treating axial spondyloarthritis**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta918>

**TA915 Pegunigalsidase alfa for treating Fabry disease**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta915>

**TA916 Bimekizumab for treating active psoriatic arthritis**

Systematic search: No

October 2023

<https://www.nice.org.uk/guidance/ta916>

**NICE – Guidelines**

**NG236 Stroke rehabilitation in adults**

This guideline covers rehabilitation after stroke for over 16s. It aims to ensure people are assessed for common problems and conditions linked to stroke, and get the care and therapy they need. Includes recommendations on the organisation and delivery of rehabilitation in hospital and the community.

Systematic search: Limited

October 2023

<https://www.nice.org.uk/guidance/ng236>

**UKHSA Knowledge & Library Services evidence briefings & syntheses**

Nil

**EPPI Centre**

**Defensive healthcare practice: systematic review of qualitative studies and systems-based logic model**

The qualitative evidence synthesis included 15 studies. Clinicians describe a range of practices which may be motivated by the risk of litigation, including Caesarean delivery, induction of labour, foetal monitoring, diagnostic testing, and referrals. Some report avoiding certain types of patients or settings which are seen as carrying higher risk of litigation. However, not all participants who recognised the importance of defensive practice could cite specific examples. Many also described other dimensions of practice such as over-documentation. The threat of litigation is widely felt, but defensive practice is also motivated by other concerns (e.g. wanting to avoid adverse events, feeling under pressure from patients or families). The perception of defensive practice may be related to broader issues around clinicians’ roles and relationships with patients. The analysis for the systems-based logic model identifies that whilst defensive practice may have been initially driven by a rational fear of litigation, over time the fear of litigation has transcended the objective risk of litigation. The widespread fear of litigation and awareness of the phenomenon means that defensive practice has developed into a cultural norm with key institutional practices and policies reflecting, and entrenching, defensive practice. The findings highlight widespread concerns about defensive practice, but suggest that they may often not be linked to specific clinical decisions. This casts doubt on a linear model of causation, and on policy solutions narrowly focused on litigation risk. The idea of defensive practice includes a range of concerns, including perceptions that clinical roles are being deskilled and that practice is becoming bureaucratised and depersonalised. There is wide variation in how clinicians understand the concept, and high self-reported rates of defensive practice do not prove that the objective risk of litigation is contributing to sub-optimal care. Defensive motivations are bound up with other reasons for inappropriate treatment, and should be seen in the context of research on, for example, overtreatment and over-diagnosis in specific populations. This broader context should also include patient perspectives, which were absent from this review.

Systematic search: Limited

October 2023

<https://eppi.ioe.ac.uk/cms/Default.aspx?tabid=3918>

**AHRQ (Agency for Healthcare Research and Quality – USA)**

Nil

**Health Foundation**

Nil

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

**Refractive Laser Surgery for Vision Conditions**

None of the identified studies were of sufficient quality to formulate conclusions on the clinical effectiveness of refractive laser surgeries compared to conventional vision correction for people with vision conditions.

Systematic search: Limited

October 2023

[**https://www.cadth.ca/refractive-laser-surgery-vision-conditions**](https://www.cadth.ca/refractive-laser-surgery-vision-conditions)

**Cost-Effectiveness of Nirsevimab for Prevention of Respiratory Syncytial Virus Outcomes in Infants**

The results from 3 studies (from Canada, US and England) varied considerably, and the nirsevimab programs differed (e.g., in terms of patients eligible for immunization). In general, nirsevimab was generally more effective and associated with lower total costs than comparator programs. The results were sensitive to the modelled region, source of efficacy data, price of nirsevimab, and severity of the respiratory syncytial virus season.

Systematic search: Limited

October 2023

[**https://www.cadth.ca/cost-effectiveness-nirsevimab-prevention-respiratory-syncytial-virus-outcomes-infants**](https://www.cadth.ca/cost-effectiveness-nirsevimab-prevention-respiratory-syncytial-virus-outcomes-infants)

**Semaglutide 2 mg for Type 2 Diabetes**

For patients with type 2 diabetes mellitus, a single randomized controlled trial (SUSTAIN FORTE) suggested that once-weekly subcutaneous semaglutide 2.0 mg may achieve better glycemic control than once-weekly subcutaneous semaglutide 1.0 mg. However, it is unclear whether between-group differences are clinically meaningful. Gastrointestinal disorders were the most common adverse event resulting in premature discontinuation in both groups. One participant in each study arm experienced a cardiovascular disorder serious enough for premature discontinuation.

Systematic search: Limited

October 2023

[**https://www.cadth.ca/semaglutide-2-mg-type-2-diabetes**](https://www.cadth.ca/semaglutide-2-mg-type-2-diabetes)

**Point of Care Ultrasound for Guided Central Venous Catheter Insertion**

Limited evidence suggested that the use of point-of-care ultrasound (POCUS) to guide the insertion of central venous lines in adults was effective and safe compared with traditional or fluoroscopic guidance method. All 3 included guidelines recommend the use of POCUS to guide cannulation through different locations of insertion in both adults and children.

Systematic search: Limited

October 2023

[**https://www.cadth.ca/point-care-ultrasound-guided-central-venous-catheter-insertion**](https://www.cadth.ca/point-care-ultrasound-guided-central-venous-catheter-insertion)

**Radiofrequency Ablation for Chronic Knee, Hip, and Shoulder Pain**

For patients with knee osteoarthritis (OA), radiofrequency ablation may reduce pain and improve function compared to other nonsurgical interventions without increasing adverse events. There is insufficient evidence to suggest that radiofrequency ablation reduces pain or improves function among patients with chronic hip pain. No studies or guidelines were found on the clinical effectiveness of radiofrequency ablation for treating chronic shoulder. Three guidelines conditionally recommend the use of radiofrequency ablation for patients with knee OA, and one guideline conditionally recommends it for hip joint pain following diagnostic blocks.

Systematic search: Limited

October 2023

[**https://www.cadth.ca/radiofrequency-ablation-chronic-knee-hip-and-shoulder-pain**](https://www.cadth.ca/radiofrequency-ablation-chronic-knee-hip-and-shoulder-pain)

**IV Acetaminophen for Acute Pain in Emergency Departments**

For adults with moderate to severe pain in the emergency department (ED), IV acetaminophen may offer similar levels of pain relief and a similar risk of adverse events as oral acetaminophen or IV nonsteroidal anti-inflammatory drugs (NSAIDs). For adults with moderate to severe pain in the ED, IV acetaminophen may offer a similar or modestly lower level of pain relief, and a lower risk of adverse events, when compared to IV opioids.

Systematic search: Limited

October 2023

[**https://www.cadth.ca/iv-acetaminophen-acute-pain-emergency-departments**](https://www.cadth.ca/iv-acetaminophen-acute-pain-emergency-departments)

**McGill University Health Centre (Canada)**

Nil

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

**Review of national public health strategies in selected countries**

National public health strategies were identified for Australia, Austria, Canada, England, Finland, Northern Ireland, Portugal, Scotland, Spain, Sweden and Wales. While the overall aim of these strategies was to improve the health and well-being of citizens, secondary aims focused on health inequities and inequalities, monitoring emerging threats, and sustainable health. All of the included strategies went further than focusing on just health, with many directly aligned to the United Nations Sustainable Development Goals. Most countries prioritised promoting healthy living or behaviours, strengthening public health, climate change or environment, and equity or equality. All included strategies were developed based on evidence and engagement with stakeholders, including the public, experts, and representatives from governmental and non-governmental organisations at local, regional and national levels.

Systematic search: Limited

October 2023

<https://www.hiqa.ie/reports-and-publications/health-technology-assessment/review-national-public-health-strategies>

**Campbell Collaboration**

Nil

**Glasgow Centre for Population Health**

Nil

**Selected other recent reports**

**Barnardo’s (2023) The Missing Link Social Prescribing for Children and Young People**

Currently around 1.4 million people under the age of 19 are estimated to have a probable mental health disorder. This report outlines how social prescribing, with adequate funding, could make a real difference to the mental health of children and young people as part of a range of sustainable options to suit a person’s specific needs.

Systematic search: No

October 2023

[**https://www.barnardos.org.uk/sites/default/files/2023-10/report-missing-link-social-prescribing-children-young-people.pdf**](https://www.barnardos.org.uk/sites/default/files/2023-10/report-missing-link-social-prescribing-children-young-people.pdf)

**Local Government Association (2023) Tackling gambling related harm: A whole council approach**

Includes examples of initiatives from local authorities in England.

Systematic search: No

October 2023

https://www.local.gov.uk/publications/tackling-gambling-related-harm-whole-council-approach#a-council-wide-approach-to-identifying-people-impacted-by-gambling-related-harms-and-signposting-to-support

**Royal College of Psychiatrists (2023) Infant and early childhood mental health: the case for action**

Developed in consultation with parents, charities and other organisations, the report identifies evidence-based interventions that can be provided to babies, under 5s and their families to minimise the risk of lifelong mental health conditions. It also features examples of existing good practice, including Wandsworth Early Help: Parental Mental Health Service in South London, Salford Early Help Service and Hertfordshire Community Perinatal Mental Health Service.

Systematic search: No

October 2023

<https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/College-report-CR238---Infant-and-early-childhood-mental-health.pdf>

**NICE FORWARD PLANNING – Publications due November 2023**

**Empagliflozin for treating chronic heart failure with preserved ejection fraction**

Technology appraisal

**Lu vipivotide tetraxetan for treating PSMA-positive hormone-relapsed metastatic prostate cancer after 2 or more therapies**

Technology appraisal

**Ritlecitinib for treating severe alopecia areata in people 12 years and over**

Technology appraisal

**Belumosudil for treating chronic graft versus host disease after 2 or more lines of systemic therapy**

Technology appraisal

**Ravulizumab for treating generalised myasthenia gravis**

Technology appraisal

**Loncastuximab tesirine for treating relapsed or refractory diffuse large B-cell lymphoma and high-grade B-cell lymphoma after 2 or more systemic therapies**

Technology appraisal

**Foslevodopa-foscarbidopa for treating Parkinson’s disease with motor symptoms**

Technology appraisal

**Zanubrutinib for treating chronic lymphocytic leukaemia**

Technology appraisal

**Ganaxolone for treating seizures caused by CDKL5 deficiency disorder in people 2 years and over**

Technology appraisal

**Etranacogene dezaparvovec for treating moderately severe or severe haemophilia B**

Technology appraisal