Public Health Key Documents: November 2023

**NIHR**

**Exercise therapy for tendinopathy: a mixed-methods evidence synthesis exploring feasibility, acceptability and effectiveness** (includes authors from NHS Grampian)

Despite a large body of literature on exercise for tendinopathy, methodological and reporting limitations influenced the recommendations that could be made. Although the findings must be interpreted within the context of the quality of the available evidence, they provide some support for the use of exercise combined with another conservative modality; flexibility and proprioception exercise for the shoulder; and a combination of eccentric and concentric strengthening exercise across tendinopathies.

Systematic search: Limited

November 2023

<https://www.journalslibrary.nihr.ac.uk/hta/TFWS2748/>

**The King’s Fund**

**Tackling health inequalities on NHS waiting lists: learning from local case studies**

In 2020, NHS England asked NHS trusts and systems to disaggregate waiting times by ethnicity and deprivation to identify inequalities and to take action in response. Between December 2022 and June 2023, The King’s Fund undertook qualitative case studies about the implementation of this policy in three areas, interviewed a range of people about using artificial intelligence (AI) to help prioritise care and reviewed published and grey literature. Work on the policy was found to be at an early stage, although there were examples of effective interventions that made appointments easier to attend, and prioritised treatment and support while waiting. Reasons for the lack of progress included a lack of clarity about the case for change, poor data, cultural issues including different views about a fair approach, and a lack of accountability for the inclusive part of elective recovery. Taking an inclusive approach to tackling waiting lists can contribute to a more equitable health system and healthier communities. NHS England, ICBs and trusts need to work with partners to make the case for change, take action and hold each other to account to improve progress.

Systematic search: Limited

November 2023

<https://www.kingsfund.org.uk/publications/health-inequalities-nhs-waiting-lists>

**Scottish Government**

**Mental health and wellbeing strategy: evidence summary**

Narrative review of published evidence on the current situation and trends in mental health and wellbeing in Scotland. It examines levels of population mental wellbeing, prevalence and burden of mental health conditions, trends and influences on mental health and wellbeing. Key challenges impacting upon population mental health and wellbeing and evidence-based approaches to addressing these challenges are considered. Gaps in existing data and evidence are highlighted.

Systematic search: Limited

November 2023

<https://www.gov.scot/publications/evidence-summary-mental-health-wellbeing-strategy/>

**SIGN**

**Assessment, diagnosis, care and support for people with dementia and their carers (SIGN 168)**

This guideline covers: the identification and diagnosis of dementia, investigative procedures, post-diagnostic support, non-pharmacological distressed behaviours, grief and dementia, the changing needs of people with dementia, and palliative approaches.

Systematic search: Yes

November 2023

<https://www.sign.ac.uk/our-guidelines/assessment-diagnosis-care-and-support-for-people-with-dementia-and-their-carers/>

**Public Health Scotland**

**Minority ethnic women and violence against women and girls: insights gathering project**

PHS commissioned this report from the Improvement Service. It gives insight into what is needed from VAWG policy and practice to improve the lives of minority ethnic women and girls and address the inequalities they face as victims and survivors of violence and abuse.

Systematic search: No

November 2023

<https://publichealthscotland.scot/media/23350/minority-ethnic-women-and-violence-against-women-and-girls-insights-gathering-project.pdf>

**Scottish Medicines Consortium (SMC Advice)**

**efgartigimod alfa (Vyvgart®)**

NOT recommended as an add-on to standard therapy for the treatment of adult patients with generalised Myasthenia Gravis (gMG) who are anti-acetylcholine receptor (AChR) antibody positive.

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/efgartigimod-alfa-vyvgart-full-smc2561/>

**durvalumab (Imfinzi®)**

Accepted for use in combination with gemcitabine and cisplatin for the first-line treatment of adults with locally advanced, unresectable, or metastatic biliary tract cancer.

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/durvalumab-imfinzi-full-smc2582/>

**pegunigalsidase alfa (Elfabrio®)**

NOT recommended for use as long-term enzyme replacement therapy in adult patients with a confirmed diagnosis of Fabry Disease (deficiency of alpha-galactosidase).

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/pegunigalsidase-alfa-elfabrio-full-smc2591/>

**risankizumab (Skyrizi ®)**

Accepted for use for the treatment of patients 16 years and older with moderately to severely active Crohn's disease who have had an inadequate response to, lost response to, or were intolerant to conventional therapy or a biologic therapy, or if such therapies are not advisable.

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/risankizumab-skyrizi-abb-smc2534/>

**bimekizumab (Bimzelx®)**

Accepted for restricted use alone or in combination with methotrexate, for the treatment of active psoriatic arthritis in adults who have had an inadequate response or who have been intolerant to one or more disease-modifying antirheumatic drugs (DMARDs).

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/bimekizumab-bimzelx-abb-smc2605/>

**tafamidis (Vyndaqel®)**

Accepted for use for the treatment of wild-type and hereditary transthyretin amyloidosis in adult patients with cardiomyopathy (ATTR-CM).

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/tafamidis-vyndaqel-2nd-resubmission-smc2585/>

**mercaptamine (Procysbi®)**

NOT recommended for use as treatment of proven nephropathic cystinosis.

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/mercaptamine-procysbi-2nd-resub-smc2571/>

**avacopan (Tavneos®)**

Accepted for use in combination with a rituximab or cyclophosphamide regimen, for the treatment of adult patients with severe, active granulomatosis with polyangiitis (GPA) or microscopic polyangiitis (MPA).

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/avacopan-tavneos-full-smc2578/>

**selpercatinib (Retsevmo®)**

Accepted for restricted use within NHSScotland on an interim basis subject to ongoing evaluation and future reassessment as monotherapy for the treatment of adults with advanced rearranged during transfection (RET) fusion-positive non-small cell lung cancer (NSCLC) not previously treated with a RET inhibitor.

Systematic search: No

November 2023

<https://www.scottishmedicines.org.uk/medicines-advice/selpercatinib-retsevmo-full-smc2573/>

**NICE - Technology Appraisal Guidance**

**TA931 Zanubrutinib for treating chronic lymphocytic leukaemia**

Systematic search: No

November 2023

[**https://www.nice.org.uk/guidance/ta931**](https://www.nice.org.uk/guidance/ta931)

**TA930 Lutetium-177 vipivotide tetraxetan for treating PSMA-positive hormone-relapsed metastatic prostate cancer after 2 or more treatments**

Systematic search: No

November 2023

[**https://www.nice.org.uk/guidance/ta930**](https://www.nice.org.uk/guidance/ta930)

**TA928 Cabozantinib for previously treated advanced differentiated thyroid cancer unsuitable for or refractory to radioactive iodine**

Systematic search: No

November 2023

[**https://www.nice.org.uk/guidance/ta928**](https://www.nice.org.uk/guidance/ta928)

**TA929 Empagliflozin for treating chronic heart failure with preserved or mildly reduced ejection fraction**

Systematic search: No

November 2023

[**https://www.nice.org.uk/guidance/ta929**](https://www.nice.org.uk/guidance/ta929)

**NICE – Guidelines**

**NG237 Suspected acute respiratory infection in over 16s: assessment at first presentation and initial management**

This guideline covers assessment of people aged 16 and over with symptoms and signs of acute respiratory infection (bacterial or viral) at first remote or in-person contact with NHS services. It also covers the initial management of any infections and aims to support healthcare practitioners in making sure that reatment follows the best care pathway. It forms part of a suite of work on virtual wards being undertaken by NICE.

Systematic search: Limited

November 2023

<https://www.nice.org.uk/guidance/ng237>

**Public Health Wales Observatory Evidence Service**

**Risk factors for the development of mental illnesses: An agile scope of the literature**

A meta-umbrella systematic review of umbrella reviews focussing on non-purely genetic risk or protective factors for any ICD/DSM mental disorders was conducted. The most robust risk factors for dementia were found to include type 2 diabetes mellitus, depression, and low frequency of social contacts. For non-organic psychotic disorders, the most robust risk factors were clinical high-risk state for psychosis, cannabis use, and childhood adversities. For opioid use disorders, the most robust risk factor was tobacco smoking. Risk factors for depressive disorders included widowhood, sexual dysfunction, three to five metabolic factors, childhood physical and sexual abuse, job strain, obesity, and sleep disturbances. For ADHD, the most robust risk factors were maternal pre-pregnancy obesity, maternal smoking during pregnancy, and maternal overweight pre/during pregnancy. The most robust risk factor for autism spectrum disorder was maternal overweight pre/during pregnancy.

Systematic search: Limited

May 2023

<https://phw.nhs.wales/services-and-teams/observatory/evidence/evidence-documents/mh-agile-scope-2023/>

**Health and Care Research Wales Evidence Centre**

**A rapid review exploring the effectiveness of artificial intelligence for cancer diagnosis**

The evidence map identified 52 studies in which the AI models were in the early stages of development and validation, and highlighted breast, lung and prostate cancers as the type of cancers most frequently reported on. 28 studies evaluating an established model and focusing on the diagnosis of breast, lung, and prostate cancer were included in the in-depth synthesis. All studies included in the in-depth synthesis were classified as diagnostic accuracy studies. Only one study evaluated an AI model that was commercially available in the UK. Most studies reported results in favour of the AI models, however, these improvements were not always statistically significant. The studies also varied considerably in terms of AI models studied, type of cancer, images used, and comparison made; and were limited in terms of their methodology. When used as a standalone diagnostic tool, there is evidence to suggest that AI can improve diagnostic accuracy or is comparable to experienced radiologists, however this may be dependent on the AI model being used. AI may be beneficial when used as a support tool for less experienced clinicians/radiologists. AI may speed up the diagnostic timeline when the level of cancer suspicion is low but may increase diagnostic timelines when the level of cancer suspicion is high.

Systematic search: Limited

November 2023

<https://researchwalesevidencecentre.co.uk/artificial-intelligence-cancer-diagnosis>

**EPPI Centre**

Nil

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

**Cervical Degenerative Disease Treatment: A Systematic Review**

There were few differences in benefits between surgical approaches and. There were some differences in the frequency of adverse events for some comparisons.

Systematic search: Limited

November 2023

<https://effectivehealthcare.ahrq.gov/products/cervical-degenerative-disease/research>

**Pharmacotherapy for Adults with Alcohol Use Disorder in Outpatient Settings: Systematic Review**

As there are too few studies, very little evidence exists to evaluate the effectiveness of treatment with medications for alcohol use disorder among specific populations or in primary care settings.

Systematic search: Limited

November 2023

<https://effectivehealthcare.ahrq.gov/products/alcohol-use-disorders/research>

**Health Foundation**

**What we know about the UK’s working-age health challenge**

The Health Foundation’s REAL Centre projects that around 0.5 million more working-age people will be living with major illness by 2030. Since the pandemic, 470,000 more people are out of the workforce on ill-health grounds, while many more continue to work despite long-term health problems. 3.7 million working-age people are in work with a health condition that is ‘work-limiting’. Work-limiting conditions are more common among women and older workers, as well as those without university-level education. There are also differences between ethnic groups. The rate of work-limiting conditions has grown fastest among younger workers. This means a 16–34-year-old employed in 2023 is as likely to report a work-limiting condition as someone aged 45–54 years 10 years ago. The rise in work-limiting conditions is being driven by sharp increases in reported mental ill health. Musculoskeletal and cardiovascular conditions remain the most common form of work-limiting health condition. Along with measures to address people leaving the workforce, government and employers need to develop new and better ways to support employees to remain well in work. A new independent Commission for Healthier Working Lives, supported by the Health Foundation, is being set up to explore these issues and build a comprehensive evidence base.

Systematic search: No

November 2023

<https://www.health.org.uk/publications/long-reads/what-we-know-about-the-uk-s-working-age-health-challenge>

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

**Buprenorphine Naloxone Film versus Tablets for Opioid Use Disorder**

Limited evidence suggests that sublingual BUP-NAL films may lead to lower substance abuse rates compared to sublingual BUP-NAL tablets but more rigorous research is required.

Systematic search: Limited

November 2023

<https://www.cadth.ca/buprenorphine-naloxone-film-versus-tablets-opioid-use-disorder>

**Intraocular Lenses for Cataract Surgery**

Toric IOLs may be better than nontoric IOLs for postoperative astigmatism, but this may be dependent on the measurement of astigmatism evaluated. Toric IOLs may be better than nontoric IOLs for postoperative uncorrected visual acuity (VA), but it is unclear if this results in a clinically meaningful difference to the patient. Patient-centred outcomes were rarely reported across studies.

Systematic search: Limited

November 2023

<https://www.cadth.ca/intraocular-lenses-cataract-surgery>

**Anti–Vascular Endothelial Growth Factor Drugs for Age-Related Macular Degeneration**

All identified guidelines recommend anti-VEGF drugs for adults with wet active AMD and personalised and patient centred approaches for selecting, switching and discontinuing anti-VEGF medications. Further research is needed on newer drugs.

Systematic search: Limited

November 2023

[**https://www.cadth.ca/anti-vascular-endothelial-growth-factor-drugs-age-related-macular-degeneration**](https://www.cadth.ca/anti-vascular-endothelial-growth-factor-drugs-age-related-macular-degeneration)

**McGill University Health Centre (Canada)**

Nil

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

**An overview of national approaches to stockpiling of medical countermeasures for public health emergencies**

The report examined stockpiling for public health emergencies in France, Latvia, Lithuania, the Netherlands and Norway. All five countries use physical stockpiles, where items are stored in a warehouse and can be sent to wherever they are needed quickly. To date these countries have considered this approach to be less costly and quicker to access than using a ‘virtual stockpile’ (where companies store a certain amount of stock that the government can buy if needed in an emergency). One of the challenges faced by the countries reviewed was waste due to unused stock. Some countries were managing this by rotating this stock so that when stock is close to expiration, the stock is either sold or given away to hospitals or charities, so that it is not wasted. All countries used experts to guide them in deciding what items they needed to stockpile and how much of each item to stockpile. The COVID-19 pandemic changed what some countries include in their stockpiles, with countries now stockpiling items such as facemasks, gloves and ventilators. These countries are now deciding if they should keep doing this due to the high costs involved. Some countries offered suggestions including having a group to decide what threats to stockpile for, and having a group to manage the stockpile on a day-to-day basis. Another suggestion was that stockpiles should be stored in different locations in case access to a particular location is not possible in an emergency situation.

Systematic search: Limited

November 2023

<https://www.hiqa.ie/reports-and-publications/health-technology-assessment/protocol-overview-national-approaches>

**Ultra-hypofractionated adjuvant radiotherapy for breast cancer: Evidence synthesis to support a generic justification decision**

While ultra-hypofractionated radiotherapy is not suitable for all patients, for those for whom it is appropriate, the available evidence indicates that, it is as effective and safe as moderately hypofractionated radiotherapy as part of the treatment for breast cancer. As with all treatments, the radiation oncologist must consider the individual patient characteristics when deciding which approach to take. An important advantage of ultra-hypofractionated radiotherapy is that patients only have to attend the hospital for five sessions over one-week, rather than 15 sessions over three weeks. There are side effects associated with both types of regimens, but current evidence indicates that there are no important differences between them.

Systematic search: Limited

November 2023

<https://www.hiqa.ie/sites/default/files/2023-11/ultra-hypofractionated-radiotherapy-for-the-treatment-of-breast-cancer.pdf>

**Overview of multiplex antigen near-patient tests for acute respiratory infections**

HIQA reviewed the evidence for the potential use of multiplex antigen near-patient tests delivered by a healthcare worker in residential and primary care settings. While the tests are quick, cheap and easy to perform, the advantages, disadvantages, feasibility and acceptability of their use in these settings remains unknown. Their effectiveness at accurately detecting infection is also unclear. Further research is needed.

Systematic search: Limited

November 2023

<https://www.hiqa.ie/reports-and-publications/health-technology-assessment/overview-multiplex-antigen-near-patient-tests>

**Campbell Collaboration**

**Digital interventions to reduce social isolation and loneliness in older adults: An evidence and gap map**

Most evidence came from high-income countries. Over 70% of the systematic reviews were of very low quality and 25% have been published since the pandemic began. The most common interventions are digital interventions to enhance social interactions with family, friends and the community via videoconferencing and telephone calls. Digital interventions to enhance social support, particularly socially assistive robots and virtual pets, were also common. Most interventions focus on reducing loneliness and depression and improving quality of life of older adults. Community level outcomes and process indicators are rarely reported, and no included studies or reviews assess affordability or lack of accessibility, although the value of accessibility and barriers caused by lack of accessibility were discussed in three studies and three reviews. Adverse effects are reported in very few studies and reviews.

Systematic search: Yes

November 2023

<https://www.campbellcollaboration.org/better-evidence/digital-interventions-social-isolation-loneliness-older-adults-egm.html>

**Oral language interventions can improve language outcomes in children with neurodevelopmental disorders: A systematic review and meta-analysis**

Effects from the meta-analysis were significantly related to these elements: (1) receptive vocabulary and omnibus receptive measures showed smaller effect sizes relative to expressive vocabulary, grammar, expressive and receptive discourse, and omnibus expressive tests; and (2) the length of the intervention, where longer sessions conducted over a longer period of time were more beneficial than brief sessions and short-term interventions. Reporting quality for the studies examined in the review was poor. The current evidence base is promising but inconclusive.

Systematic search: Yes

November 2023

<https://www.campbellcollaboration.org/better-evidence/language-interventions-linguistic-outcomes-children-developmental-disorders.html>

**Glasgow Centre for Population Health**

Nil

**Selected other recent reports**

**Joseph Rowntree Foundation (2023) Poverty in Scotland 2023**

Over one million people still live in poverty in Scotland, with almost half (490,000) living in very deep poverty. The statutory child poverty reduction targets are unlikely to be met without significant additional Scottish Government action. Just over 10% of workers in Scotland are locked in persistent low-pay i.e. they are paid below the real Living Wage – 72% of them are women. Five high-priority industries play a key role in maintaining in-work poverty – retail, hospitality, manufacturing, health and social work and the administration and support services. The report provides several recommendations for the Scottish and UK Governments and provides specific and recommendations for the high-priority industries to work with and support their employees to make ends meet.

Systematic search: No

October 2023

<https://www.jrf.org.uk/report/poverty-scotland-2023>

**Joseph Rowntree Foundation (2023) Destitution in the UK 2023**

Approximately 3.8 million people experienced destitution in 2022, including around one million children - almost two-and-a-half times the number of people in 2017, and nearly triple the number of children. Among the recommendations offered in the report are that Universal Credit should have an ‘Essentials Guarantee’ to ensure everyone has a protected minimum amount of support to afford essentials such as food and household bills; wider reforms to social security; ensuring cash-first emergency financial assistance is available in all areas, along with free and impartial advice services to address debt, benefits and housing issues that keep people destitute. Local authorities, charities, independent funders and housing providers should also work together to prevent destitution and homelessness for people with restricted entitlement.

Systematic search: No

October 2023

<https://www.jrf.org.uk/report/destitution-uk-2023>

**Nuffield Trust (2023) Growing up inside: understanding the key health care issues for young people in young offender institutions and prisons.**

Serious challenges remain over the health and care of children in young offender institutions, as well as for younger people in prisons across the country. Missed appointments and admissions relating to violent incidents or self-harm are far more common among younger people in prisons. Support within the system for people with neurodivergent conditions remains a concern, with diagnoses of ADHD associated with higher hospital admissions for violence among young adult males.

Systematic search: No

October 2023

[**https://www.nuffieldtrust.org.uk/research/growing-up-inside-understanding-the-key-health-care-issues-for-young-people-in-young-offender-institutions-and-prisons**](https://www.nuffieldtrust.org.uk/research/growing-up-inside-understanding-the-key-health-care-issues-for-young-people-in-young-offender-institutions-and-prisons)

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

**Skin cancer update**

Quality Standard - update (new clinical practice evidence)

**Epilepsies in children, young people and adults (update)**

Quality Standard - update (underpinning guideline updated)

**Neonatal infection update**

Quality Standard - update (underpinning guideline updated)

**Transition from children’s to adults’ services - update**

Quality Standard - update (new clinical practice evidence)

**Cardiovascular disease: risk assessment and reduction, including lipid modification - Escalation of Therapy**

Clinical Guideline - update (new clinical practice evidence)

**Secukinumab for treating moderate to severe hidradenitis suppurativa**

Technology appraisal

**Dupilumab for treating prurigo nodularis**

Technology appraisal

**Nivolumab-relatlimab for untreated unresectable or metastatic melanoma**

Technology appraisal

**Setmelanotide for treating obesity and hyperphagia in Bardet-Biedl syndrome**

Technology appraisal

**Olaparib with abiraterone for untreated hormone-relapsed metastatic prostate cancer**

Technology appraisal

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

Technology appraisal

**Empagliflozin for treating chronic kidney disease**

Technology appraisal