

Public Health Key Documents: January 2024

NIHR

Nil

The King's Fund

Nil

Scottish Government

Women's health plan: second annual progress report - January 2024

The plan aims to improve health outcomes and health services for all women and girls in Scotland. This report provides a summary of the progress made on delivering the Plan. Areas examined include contraception, sexual health, the menopause, endometriosis and heart health.

Systematic search: No

January 2024

<https://www.gov.scot/publications/womens-health-plan-second-annual-report-progress-january-2024/>

Type 2 Diabetes Mellitus - quality prescribing strategy: improvement guide 2024 to 2027

This guide is intended to support clinicians across the multidisciplinary team and people with Type 2 Diabetes Mellitus (T2DM) in shared decision-making and the effective use of medicines. It offers practical advice and options for tailoring care to the needs and preferences of individuals.

Systematic search: No

January 2024

<https://www.gov.scot/publications/quality-prescribing-strategy-type-2-diabetes-mellitus-guide-improvement-2024-2027/>

Taking a children's human rights approach: guidance

Guidance providing information and resources to support public authorities and other organisations to implement a children's human rights approach.

Systematic search: No

January 2024

<https://www.gov.scot/publications/guidance-taking-childrens-human-rights-approach/>

SIGN

Nil

Public Health Scotland

Transport poverty: a public health issue

This briefing describes a multidimensional definition of transport poverty, outlines causes within and beyond the transport system and details how transport poverty can influence health and health inequalities. It aims to inform discussion and shape future policy, action and evaluation to ensure the causes of transport poverty are addressed leading to more equitable transport options for all.

Systematic search: No

January 2024

<https://publichealthscotland.scot/publications/transport-poverty-a-public-health-issue/transport-poverty-a-public-health-issue/>

Scottish Medicines Consortium (SMC Advice)

burosumab (Crysvita)

Accepted for use within NHSScotland for the treatment of X-linked hypophosphataemia in children and adolescents aged 1 to 17 years with radiographic evidence of bone disease.

Systematic search: No

January 2024

<https://www.scottishmedicines.org.uk/medicines-advice/burosumab-crysvita-uo-smc2588/>

pembrolizumab (Keytruda)

Accepted for use as monotherapy for adults with microsatellite instability high (MSI-H) or mismatch repair deficient (dMMR) colorectal cancer in limited settings. Also accepted for use as monotherapy for the treatment of MSI-H or dMMR tumours in adults with advanced or recurrent endometrial carcinoma or unresectable or metastatic gastric, small intestine, or biliary cancer in limited circumstances.

Systematic search: No

January 2024

<https://www.scottishmedicines.org.uk/medicines-advice/pembrolizumab-keytruda-msi-hdmmr-full-smc2589/>

belantamab mafodotin (Blenrep)

NOT recommended for use as monotherapy for the treatment of multiple myeloma in adult patients, who have received at least four prior therapies and whose disease is refractory to at least one proteasome inhibitor, one immunomodulatory agent, and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy.

Systematic search: No

January 2024

<https://www.scottishmedicines.org.uk/medicines-advice/belantamab-mafodotin-blenrep-full-smc2597/>

NICE - Technology Appraisal Guidance**TA946 Olaparib with bevacizumab for maintenance treatment of advanced high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer**

Systematic search: No

January 2024

<https://www.nice.org.uk/guidance/ta946>

TA944 Durvalumab with gemcitabine and cisplatin for treating unresectable or advanced biliary tract cancer

Systematic search: No

January 2024

<https://www.nice.org.uk/guidance/ta944>

NICE – Guidelines

Nil

Health and Care Research Wales Evidence Centre**Wellness in work - supporting people in work and assisting people to return to the workforce: An economic evidence review**

high-quality evidence suggests that interventions in the following areas could help improve cost savings and reduce absenteeism: supporting employees at risk of common mental health disorders;

promoting healthy eating and physical activity; influenza vaccination programs (where high numbers of workforce engage). Moderate-quality evidence suggests standing desks are cost-effective in improving productivity. Mixed evidence suggests that the following interventions are cost-effective: supporting employees with musculoskeletal conditions (including arthritis) differently to 'usual care'; workplace screening, self-guidance, individual placement support & workshops to reduce illicit drug use. It is unclear whether workplace smoking cessation programmes are cost-effective. The review also identified gaps in the evidence base in the following areas: wellbeing and worklessness in older populations with particular focus on the impact of missing social connections, mental stimulation & feeling confident and valued; women in work with particular interest in interventions for menopausal-age women and women with endometriosis; neurodiversity within the workforce with particular interest in interventions for those with severe/specific learning difficulties and autism.

Systematic search: Limited

January 2024

<https://researchwalesevidencecentre.co.uk/wellness-work-supporting-people-work-and-assisting-people-return-workforce-economic-evidence-review>

EPPI Centre

Nil

AHRQ (Agency for Healthcare Research and Quality – USA)

Nil

Health Foundation

Doing more for less? a mixed-methods analysis of the experience of primary care networks in socioeconomically deprived areas

Primary care networks (PCNs) were established in England in 2019, bringing together general practices into local groups to provide additional services to patients. Backed by extra funding, PCNs were expected to recruit new staff, deliver additional appointments and new services, and work to improve health and reduce health inequalities. PCN leaders broadly welcome additional staffing and report that PCNs have enabled better collaboration between local general practices and links with other local services. But leaders also felt funding does not reflect the additional workload of caring for patients in deprived areas, many of whom face multiple social and economic barriers to good health. PCNs in areas of high deprivation need funding that meets the greater needs of their populations. But with the right long-term resources, stability and organisational support, they could represent an important route for addressing local health inequalities.

Systematic search: No

December 2023

<https://www.health.org.uk/publications/reports/doing-more-for-less>

Canadian Agency for drugs and Technologies in Health (CADTH)

Ketamine for Adults with Treatment-Resistant Depression or Posttraumatic Stress Disorder: A 2023 Update

There is some clinical effectiveness and cost-effectiveness evidence and a guideline recommendation to support the short-term use of ketamine in adults with TRD. Clinical effectiveness evidence and a guideline recommendation do not support the use of ketamine in adults with PTSD. Future research is necessary to understand the effectiveness and safety of ketamine as therapy for TRD in larger populations over longer periods and for PTSD for any follow-up duration.

Systematic search: Limited

January 2024

<https://www.cadth.ca/ketamine-adults-treatment-resistant-depression-or-posttraumatic-stress-disorder-2023-update>

Endobronchial Valves for the Management of Severe Emphysema

Endobronchial valves are a potential therapy for people with severe emphysema with some favourable clinical and cost outcomes, but the evidence for their safety is unclear.

Systematic search: Limited

January 2024

<https://www.cadth.ca/endobronchial-valves-management-severe-emphysema>

Ketorolac for Renal Colic

There is no specific evidence available on the efficacy oral ketorolac in the management of renal colic in the community setting. Without comparative evidence, decision-makers may want to consider how oral ketorolac is used for related indications (e.g., procedures for removing kidney stones, ureteroscopies) to examine how it performed compared with alternative analgesics.

Systematic search: Limited

January 2024

<https://www.cadth.ca/ketorolac-renal-colic>

Leucovorin Dosing for Gastrointestinal Cancer

Since 2008, the shortage of leucovorin has had a significant impact on fluorouracil-based chemotherapy. Many institutions worldwide provided possible options to relieve the shortage, including using treatment without leucovorin, lowering the standard dose, or using alternative drugs. Limited evidence from this review suggests that the standard weight-based dosing of leucovorin may be reduced to a low flat-dose. However, a larger trial to confirm these findings is needed.

Systematic search: Limited

January 2024

<https://www.cadth.ca/leucovorin-dosing-gastrointestinal-cancer>

Ketamine for Chronic Non-Cancer Pain: A 2023 Update

Evidence suggests that ketamine treatment was associated with short-term pain reduction in patients with chronic non-cancer pain. However, the long-term efficacy of ketamine in pain relief remains unclear. Adverse events (AEs) associated with ketamine treatment were psychedelic effects, discomfort, dizziness, fatigue, headache, and nausea; all of those events appeared to be short-lasting. Well-controlled studies with larger populations and longer follow-ups are needed to determine the optimal treatment protocol of ketamine for each specific type of chronic pain. Given that ketamine is a dissociative drug that could be associated with the development of a substance use disorder, decision-makers may wish to consider the use of ketamine for long-term treatment of chronic non-cancer pain. The long-term effects and dangers of ketamine remain to be determined.

Systematic search: Limited

January 2024

<https://www.cadth.ca/ketamine-chronic-non-cancer-pain-2023-update>

McGill University Health Centre (Canada)

Nil

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

A rapid HTA of gene expression profiling tests for guiding the use of adjuvant chemotherapy in early-stage invasive breast cancer

Different groups of breast cancer patients who are eligible to receive GEP tests were examined. For people with cancer that has spread to their lymph nodes, the test with the strongest evidence was Oncotype DX®. For people with cancer that had not spread to their lymph nodes, data was more limited; however, the available evidence supported the continued use of Oncotype DX®.

Systematic search: Limited

January 2024

<https://www.hiqa.ie/hiqa-news-updates/hiqa-publishes-report-genetic-tests-inform-chemotherapy-use-patients-breast>

Campbell Collaboration

Nil

Glasgow Centre for Population Health

Nil

Selected other recent reports

Institute for Public Policy Research (2024) Healthy places, prosperous lives

The UK is getting poorer and sicker - with poorer and sicker areas getting poorer and sicker the most quickly. The IPPR held a series of workshops across the country exploring people's understanding of health, its relationship with prosperity, and priorities for change. Based on these priorities, it developed a new framework: 'Seven for Seven' – or seven foundations for seven healthy life years. The report identifies examples of transformative place-level interventions, either in the UK or internationally, which are already making a difference. It also recommends the creation of Health and Prosperity Improvement Zones (HAPI), targeted at places where need is highest.

Systematic search: No

January 2024

<https://www.ippr.org/articles/healthy-places-prosperous-lives>

Institute for Research and Innovation in Social Services (Iriss) (2023) Re-examining child neglect in the changing policy landscape (Insight 75)

Timely identification of neglect is vital. There is some evidence suggesting use of structured assessment tools can support practitioners to confidently identify neglect, however these must be used critically and in conjunction with professional holistic assessment and judgement. Where there are concerns of neglect, a full assessment of need is crucial. If the family declines to engage in this, supervision and consideration of statutory measures is key to avoid drift. Access to consistent high-quality supervision is important when professionals have been working with chronic neglect to challenge complacency. The view that neglect is less severe than other forms of abuse must be challenged, and where neglect coexists with resistance, timely consideration of escalation to ensure ongoing assessment is crucial. Neglect is not solely a social work issue - multi-agency working, and information sharing, is key to obtaining a full understanding of the presentation and impact of neglect and to improving outcomes for children. Given the clear links between poverty and neglect, there is a compelling argument for continuing to emphasise the whole family approach, whilst simultaneously targeting Children's Services Planning and subsequent intervention on a community level. Partnership working with third sector colleagues is essential.

Systematic search: No

November 2023

<https://www.iriss.org.uk/resources/insights/re-examining-child-neglect-changing-policy-landscape>

UKHSA (2024) UKHSA Pathogen Genomics Strategy

The strategy outlines UKHSA's vision for pathogen genomics over the next 5 years via 7 strategic aims: using pathogen genomic data to optimise clinical/public health decision-making, from local to global settings; using pathogen genomic data to drive improvements in diagnostics, vaccines and therapeutics; providing a nationally coordinated, scaled-up pathogen genomics service; supporting a pathogen genomics workforce transformation; committing to pathogen genomic data sharing and global collaboration; driving innovation; building high-impact pathogen genomic services that are good value for money. Each of these strategic aims will support UK capability in 3 priority public health areas: antimicrobial resistance; emerging infections and biosecurity; vaccine preventable diseases and elimination programmes.

Systematic search: No

January 2024

https://assets.publishing.service.gov.uk/media/65aff68ef2718c000dfb1bd8/Pathogen_Genomics_Strategy_2024.pdf

NICE FORWARD PLANNING – Publications due February 2024

Diabetic retinopathy

Clinical guideline

Nivolumab-relatlimab for untreated unresectable or metastatic melanoma

Technology appraisal

Evinacumab for treating homozygous familial hypercholesterolaemia in people aged 12 years and over

Technology appraisal

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

Technology appraisal

Olaparib with abiraterone for untreated hormone-relapsed metastatic prostate cancer

Technology appraisal

Etrasimod for treating moderately to severely active ulcerative colitis

Technology appraisal

Nirmatrelvir plus ritonavir for treating COVID-19 (Partial Rapid Review of TA878)

Technology appraisal