

NIHR

[Algorithm-based remote monitoring of heart failure risk data in people with cardiac implantable electronic devices: a systematic review and cost-effectiveness analysis](#)

The review sought to determine the clinical and cost-effectiveness of the four remote monitoring algorithms (CorVue, HeartInsight, HeartLogic and TriageHF) for detecting heart failure in people with cardiac implantable electronic devices. It found a lack of comparative evidence across all technologies included in the scope. Evidence for HeartLogic and TriageHF suggests that they may have acceptable prognostic accuracy for predicting heart failure events. However, further evidence is required to confirm these results. Only a single published study was identified for HeartInsight, therefore there are insufficient data to draw conclusions on prognostic accuracy and the benefits on clinical and intermediate outcomes. It is likely remote monitoring systems for CorVue, HeartInsight, HeartLogic and TriageHF would be cost-effective were they to result in fewer hospitalisations in heart failure patients; however, in general, this may apply to any device lowering the hospital visit. In addition, any potential benefits of reduced hospitalisation need to be carefully balanced with chances of overtreatment resulting from alerts.

Systematic search: Yes

October 2025

[Tumour profiling tests to guide adjuvant chemotherapy decisions in lymph node-positive early breast cancer: a systematic review and economic evaluation](#)

The review sought to evaluate the effectiveness and cost-effectiveness of four tumour profiling tests (Oncotype DX, Prosigna, EPclin and MammaPrint), compared with current decision-making (no testing), to guide use of adjuvant chemotherapy in people with hormone-receptor positive, human epidermal growth factor receptor 2 negative, early-stage breast cancer with one to three positive lymph nodes. All four tests provide prognostic information on the risk of relapse. The evidence on prediction of relative chemotherapy benefit is weaker and mostly limited to Oncotype DX. The economic analyses indicate that Oncotype DX and EPclin may have favourable cost-effectiveness profiles in post-menopausal lymph node-positive subgroups, although this is uncertain.

Systematic search: Yes

October 2025

[Quantitative faecal immunochemical tests to guide colorectal cancer pathway referral in primary care. A systematic review, meta-analysis and cost-effectiveness analysis](#)

For all faecal immunochemical test brands, there are strategies at which the incremental net monetary benefit is positive compared with current care. The exact brand and threshold(s) that generate the greatest incremental net monetary benefit could not be robustly determined due to the similarity of incremental net monetary benefit values, parameter uncertainty and the possibility of omissions from the model structure. More data are needed on comparative diagnostic test accuracy and whether different thresholds should be used in some patients (e.g. anaemic, male/female, younger/older).

Systematic search: Yes

September 2025

[Diagnostic strategies for suspected acute aortic syndrome: systematic review, meta-analysis, decision-analytic modelling and value of information analysis](#)

The Aortic Dissection Detection Risk Score and D-dimer provide useful diagnostic information and may offer cost-effective strategies for selecting patients for computed tomographic angiography, but their role depends upon how clinicians identify suspected acute aortic syndrome. Primary research is required to compare different combinations of Aortic Dissection Detection Risk Score with D-

dimer in practice, explore how suspected acute aortic syndrome is identified and evaluate alternative biomarkers.

Systematic search: Yes

September 2025

[Perioperative oxygen therapy in patients undergoing surgical procedures: an overview of systematic reviews and meta-analyses](#)

There is no clear evidence that either a high or a low fraction of inspired oxygen improves outcomes in surgical patients. Existing evidence is insufficient for recommending routine use of non-invasive ventilation or high-flow nasal oxygen. Future RCTs should stratify participants by type of surgery, anaesthesia technique and documented risk factors for postoperative complications (e.g. BMI).

Systematic search: Yes

September 2025

The King's Fund

Nil

SIGN

Nil

Public Health Scotland

[National infectious respiratory diseases health inequalities plan](#)

This plan sets out how PHS will identify and report inequalities in respiratory infections such as COVID-19, influenza and RSV. It outlines actions to improve understanding of how factors such as deprivation, ethnicity, housing, and underlying health conditions influence infection risk and outcomes. It includes a literature review, data mapping to identify gaps, and the development of case studies to inform future reporting and interventions. It is hoped the plan will strengthen evidence, collaboration and reporting on respiratory health inequalities, supporting more equitable prevention and care across Scotland.

Systematic search: No

October 2025

[Understanding the reasons behind an apparent reduction in the number of people accessing specialist alcohol and drugs treatment in Scotland](#)

PHS has investigated an observed reduction in the number of people accessing specialist alcohol and drug treatment services across Scotland through a three-phase programme of work.

Systematic search: No

October 2025

[Eating Out, Eating Well and Children's Code of Practice pilot research](#)

Whilst the initiative would benefit from some changes before being rolled out across the country, the research suggests that introducing the EOEW Framework and COP across Scotland's OOH food outlets would result in an overall positive outcome for public health.

Systematic search: No

September 2025

[PHS Climate Impact Indicators \(CII\) feasibility report](#)

The report explores the feasibility of developing indicators to assess the impacts of climate change on the health of the population in Scotland. It includes a summary of how health is affected by climate change, in particular the impacts of heat, cold, flooding, and air quality. Additionally it

outlines definitions and parameters for proposed indicators to monitor the impact of climate on health and describes the data sources that can be used to create these indicators. The report recommends that an initial set of indicators is developed focused on the direct impacts of heat and cold periods on health. It is anticipated that Scotland's first set of climate health impact indicators will be published on the ScotPHO profiles website as a new section in the autumn of 2025.

Systematic search: No
September 2025

[Interventions to reduce harms from cocaine](#)

This scoping review gives an overview on how to reduce harms associated with cocaine use.

Systematic search: Yes
September 2025

[Commissioning peer research to support human rights in practice: guidance for duty bearers](#)

This guidance outlines how public bodies can commission peer research to uphold human rights and reduce health inequalities. It highlights the value of involving people with lived experience in shaping research, decision-making, and services, and explains how this can help shift power and strengthen participation. Practical steps are provided for commissioning peer research, with a strong emphasis on equity, safeguarding, and ensuring meaningful involvement.

Systematic search: No
September 2025

[Exploring the alignment of public health and human rights legal duties in Scotland](#)

This paper examines how existing public health duties in Scotland align with the proposed duties in the forthcoming Scottish Human Rights Bill. It offers a practical resource to support strategic planning for the implementation of the right to health.

Systematic search: No
September 2025

[Health and human rights: Rights-based decision-making in healthcare settings](#)

This report explores real-world examples of rights-based decision-making (RBDM) in Scotland's healthcare settings. Applying the PANEL Principles and FAIR framework, it finds promising but limited evidence of practice that fully reflects a human rights-based approach. To support improvement, the research team developed a practical RBDM flowchart designed to help healthcare professionals embed rights into decision-making. The report also makes recommendations for training, engagement, and further research to strengthen implementation across the sector.

Systematic search: No
September 2025

[Consensus approach on prevention of substance use harm among children and young people](#)

The consensus approach is structured around five key themes: foundations for developing a strategy and implementation plan; essential components for delivering prevention in Scotland; priorities for those at highest risk; principles for universal prevention measures; focus on structural factors.

Systematic search: No
September 2025

[Rapid review of evidence about alcohol marketing and advertising: influences on consumer attitudes and behaviours, and the effects of regulation on those behaviours](#)

Alcohol marketing and advertising is pervasive and persuasive, and frequent exposure to it drives alcohol consumption and related harms, including among children and young people. The evidence for the effectiveness of restrictions on alcohol marketing and advertising is somewhat less clear cut,

but the weight of evidence supports the conclusion that restricting alcohol marketing and advertising can be effective, and cost effective, in reducing exposure and consumption.

Systematic search: Limited

September 2025

Scottish Government

[People who self-harm: rapid evidence review and survey of practitioner perspectives](#)

This review and survey investigated if self-harm can be a barrier to accessing support and services, and what measures can be taken to overcome these barriers.

Systematic search: No

October 2025

[Tuberculosis - RNOH/GIRFT review: national report](#)

The GIRFT Tuberculosis (TB) report is a comprehensive, data-driven national review of TB services across Scotland. It contains 65 recommendations, many of which are relatively straightforward, in that they require a focus on providers to modify and standardise their services. Many of these changes can be implemented with little additional funding and are likely to improve outcomes for patients, their carers, those individuals on preventative programs and reduce the clinical and financial burden of TB in Scotland.

Systematic search: No

September 2025

[Cancer prehabilitation in Scotland: 2025 survey findings report](#)

Overall, 2025 survey findings reaffirm support for prehabilitation amongst staff, and a stronger perception that the 'Key Principles for Implementing Cancer Prehabilitation across Scotland' underpin delivery of local prehabilitation activities. Awareness of the Key Principles, the availability of prehabilitation activities locally, and the accessibility of activities show few changes from 2022. However, there have been examples of local service improvements over the past 18 months, for example, in reaching patients with a wider variety of cancer types, trialling screening tools, and developing leadership roles to embed prehabilitation in ways of working.

Systematic search: No

September 2025

NICE – Guidelines

NG252 [Rehabilitation for chronic neurological disorders including acquired brain injury](#)

This guideline covers rehabilitation in all settings for children, young people and adults with a chronic neurological disorder, neurological impairment or disabling neurological symptoms due to acquired brain injury, acquired spinal cord injury, acquired peripheral nerve disorder, functional neurological disorder or progressive neurological disease.

Systematic search: Yes

October 2025

NG251 [DMD Care UK's guideline on cardiac care of children with dystrophinopathy and females carrying DMD-gene variations: NICE review](#)

NICE reviewed [DMD Care UK's guideline on cardiac care of children with dystrophinopathy and females carrying DMD-gene variations](#) and concluded it is a useful resource that will help clinicians improve care in this area.

Systematic search: Limited

September 2025

NG250 [Pneumonia: diagnosis and management](#)

This guideline covers diagnosing, assessing, and treating community-acquired and hospital-acquired pneumonia, including bacterial pneumonia secondary to COVID-19, in babies over 1 month (corrected gestational age), children, young people and adults. It aims to optimise antibiotic use and reduce antibiotic resistance.

Systematic search: Yes

September 2025

UKHSA

Research and analysis on zoonotic TB transmission:

[Transmission of zoonotic TB from humans to animals](#)

[Transmission of zoonotic TB between humans](#)

[Transmission of zoonotic TB from animals to humans](#)

Systematic search: Limited

September 2025

[Antibiotics for the treatment of invasive PVL-SA infection](#)

This rapid systematic review identified and summarised evidence of the effect of antibiotic treatment on morbidity and mortality in hospital inpatients with invasive PVL-SA infection.

Systematic search: Limited

September 2025

[Lived experience: informing inclusive health protection](#)

This report explores how insights from people with lived experience can inform inclusive approaches to health protection. This report is a synthesis of findings from individual Voluntary, Community and Social Enterprise (VCSE) organisation reports

Systematic search: No

September 2025

[Public health communication strategies during CBRNe events](#)

This report summarised evidence on the effectiveness of strategies for communicating with the public about chemical, biological, radiological, nuclear or explosive attacks (CBRNe) and related civil incidents.

Systematic search: Limited

September 2025

Health and Care Research Wales Evidence Centre

[What approaches have been used to implement direct payments within health systems, and how do various factors influence the effectiveness of these approaches in supporting personalisation, governance, and equitable access to care: a rapid evidence summary](#)

Direct payments can work well in healthcare, but only if they are introduced with caution. When well supported, they can improve people's lives by offering more choice and control. However, without the right systems in place, they may lead to increased stress or create inequalities.

Systematic search: Limited

September 2025

EPPI Centre

Nil

AHRQ (Agency for Healthcare Research and Quality – USA)

Nil

Health Foundation

[Labour's first year](#)

This report assesses the government's record on NHS and social care policy so far.

Systematic search: No

September 2025

Canadian Agency for drugs and Technologies in Health (CADTH)

[Myoelectric and Microprocessor-Enabled Prostheses](#)

Based on low quality literature, microprocessor-enabled prostheses, specifically those with microprocessor knees, may provide more or no additional clinical benefits and may be more cost-effective than conventional prostheses for adults with above-the-knee amputations.

Systematic search: Limited

October 2025

[Upfront Dual Therapy for Pulmonary Arterial Hypertension](#)

Based on limited evidence, initial combination therapy with 2 oral medications, an ERA and a PDE5 inhibitor, may provide better treatment outcomes in patients with PAH compared to monotherapy.

Systematic search: Limited

October 2025

McGill University Health Centre (Canada)

Nil

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

[HTA of providing a telephone service for acute, non-urgent medical care needs in the pre-hospital setting](#)

The HIQA undertook a health technology assessment on providing a national phone line specifically for people with acute, non-urgent medical care needs. HIQA found that this type of telephone service can help guide patients to appropriate care. However, it is unclear whether these services reduce pressure on frontline services.

Systematic search: Limited

October 2025

Campbell Collaboration

Nil

Glasgow Centre for Population Health

Nil

Selected other recent reports

Alzheimer's Society (2025) [Survey report: Lived experiences of dementia 2025](#)

The report was based on a survey and interviews with people with dementia and carers in England, Wales and Northern Ireland. It found that too many people affected by dementia experience stigma

and have poor experiences with diagnosis and care. Whilst experiences of treatments and interventions are positive, access can be difficult.

Growth and Reform Network (2025) [Improving Health Through Economic Development: a Structured Evidence Review](#)

Six critical features of socioeconomic policies improve health: multi-component design, sustained intensity and duration, context-sensitive delivery, workforce capacity and implementation quality, delivery infrastructure and financial sustainability, and embedded learning and political coherence.

IPPR (2025) [Taking stock: Counting the economic costs of alcohol harm](#)

This report uses newly available data to dig deeper into the effects of alcohol harm on the UK workforce. It argues that alcohol has clear negative impacts on workforce productivity as a whole and that employers have a significant role to play in reducing alcohol harm.

MIND (2025) [The big mental health report](#)

The report examines the current state of mental health in England, the drivers of poor mental health, experiences of support and mental health stigma and discrimination. At present, 1 in 5 adults in England is living with a common mental health problem and rates are rising steadily. Adults in the most deprived areas have higher rates of mental health problems (26.2%) than those in the least deprived areas (16.0%).

Trussell (2025) [Hunger in the UK 2025](#)

The report provides a 'state of the nation' look at the scale and drivers of food bank provision and food insecurity across the UK. A third of children under five are living in UK homes where there is not enough access to healthy and nutritious food. Surveys by the charity found more than 14 million people in the UK faced the prospect of going hungry last year due to lack of money. This marks an increase from the trust's last survey in 2022 when that number was 11.6 million people.

WHO (2025) [WHO global report on trends in prevalence of tobacco use 2000–2024 and projections 2025–2030](#)

The number of tobacco users has dropped from 1.38 billion in 2000 to 1.2 billion in 2024. Since 2010, the number of people using tobacco has dropped by 120 million – a 27% drop in relative terms. Yet, tobacco still hooks one in five adults worldwide, fuelling millions of preventable deaths every year. WHO estimated global e-cigarette use – more than 100 million people worldwide are now vaping. This includes: at least 86 million adult users, mostly in high-income countries; at least 15 million children (13–15 years) already using e-cigarettes. In countries with data, children are on average nine times more likely than adults to vape.

NICE FORWARD PLANNING – Publications due November 2025

Intrapartum Care - Water birth: second stage of labour

Clinical Guideline - update (new clinical practice evidence)

Suspected sepsis: recognition, diagnosis and early management

Clinical Guideline - update (new clinical practice evidence)