

Public Health Key Documents: February 2026

NIHR

[Enzyme replacement therapy compared with best supportive care for the treatment of Pompe Disease: a systematic review and network meta-analysis](#)

Enzyme replacement therapy modestly improves 6-minute walk test and forced vital capacity % predicted after 1 year versus placebo in enzyme replacement therapy-naive patients. However, there is limited evidence to suggest meaningful differences in outcomes between alglucosidase alfa, avalglucosidase alfa and cipaglucosidase alfa with miglustat. Observational data suggest declines beyond 2–3 years, lasting up to 15 years. Long-term comparative effectiveness remains uncertain, as does enzyme replacement therapy's impact on disease progression and supportive care needs.

Systematic search: Yes

February 2026

[The clinical and cost-effectiveness of improving sleep via carer delivered strategies in people with dementia: the DREAMS START parallel multi-centre RCT](#)

DREAMS START is a six-session, multicomponent, manualised intervention delivered to family carers of people with dementia who implement strategies to improve their relatives' sleep. It is delivered face to face or remotely by non-clinically trained graduates weekly or fortnightly and incorporates information about sleep and dementia, promotes de-arousal at night, adaptive stimulus control (e.g. bedtime routine maintenance), daytime behavioural activation, increasing access to light, improving carer sleep and making a tailored action plan. DREAMS START plus treatment as usual is clinically effective in reducing sleep disturbance in people living at home with dementia at 8 months, demonstrating sustained effectiveness beyond intervention delivery. It is likely to be cost-effective, and delivery by non-clinically trained graduates increases potential for NHS implementation at scale.

Systematic search: No

February 2026

The King's Fund

Nil

SIGN

Nil

Public Health Scotland

[Why buses matter for health and reducing transport poverty](#)

A collection of reports which summarise work to investigate how and why bus services impact on health and transport poverty in Scotland. They include recommendations to integrate consideration of health and health inequalities into policy making for bus and related policies.

Systematic search: No

February 2026

[Income maximisation in health settings \(full report and executive summary\)](#)

The aim of the project was to understand how to strengthen the contribution of NHS Scotland to maximising incomes through social security. The project focused on income maximisation pathways within health settings and services most likely to reach and support low-income families with children, including the child poverty priority families. The services included were: maternity health visiting family nurse partnership (FNP) general practice (GP) acute children's hospital settings (within one NHS board area). The report includes key findings and recommendations.

Systematic search: No

February 2026

Scottish Government

Nil

NICE – Guidelines

Nil

UKHSA

[Effectiveness of IPC measures for high prevalence of C. difficile](#)

This rapid systematic review aimed to identify and summarise evidence relating to infection prevention and control (IPC) measures, in addition to standard IPC practice, to prevent spread of *Clostridioides difficile* (C. difficile) in the context of high prevalence in health and social care settings. No evidence was identified that met the inclusion criteria.

Systematic search: Limited

February 2026

[Effectiveness of isolation strategies for people with C. difficile](#)

The findings of this evidence review suggest that isolation strategies including single-patient rooms, cohorting patients with C. difficile, isolation for the duration of hospitalisation or from the point of symptom development (rather than from confirmation of C. difficile) were associated with a reduction in C. difficile incidence. Two studies found cohort wards to lead to a reduction in C. difficile incidence compared to single room isolation, both included dedicated cohort medical staff. Where it could be assessed, the evidence was rated as very low certainty and was subject to risk of bias across all studies. Most studies did not report information on trends in C. difficile incidence over time therefore limiting the ability to assess whether changes in infection rates were due to the intervention or other factors. The conclusions of this review should be interpreted with caution.

Systematic search: Limited

February 2026

[Shooting Up: infections among people who inject drugs in the UK](#)

Annual overview of infections and injecting-related harms among PWID in the UK.

Systematic search: No

February 2026

[Healthcare provision at events: a rapid scoping review](#)

The purpose of this review was to identify and summarise existing UK guidance on healthcare provision at events to identify current practice and gaps with the aim of informing the development of an Event Healthcare Standard. The review includes 49 guidance documents. Overall, the guidance differs in the level of detail provided and in content, strengthening the need for the Event Healthcare Standard. In particular, there is a need for clear and consistent guidance in how to engage with Safety Advisory Groups (SAGs) as there are variations across local authorities. There is also a need for more detailed and consistent guidance to support event organisers in planning for major incidents, including engaging with Emergency Preparedness Resilience and Response (EPRR) teams, as well as in relation to recording medical usage and post-event assessments. There is also a need for more guidance on medical risk assessments (or equivalent), medical plans, and procedures for liaising with local NHS provision and patient handover.

Systematic search: Limited

February 2026

[ACMD review of the evidence on the use and harms of etomidate](#)

The Advisory Council on the Misuse of Drugs found etomidate and related compounds may pose a risk to public health and considered their suitability for control under the Misuse of Drugs Act 1971.

Systematic search: Limited

February 2026

[Carisoprodol: review of the evidence on its use and harms](#)

The Advisory Council on the Misuse of Drugs recommends: making carisoprodol a Class C drug; testing for carisoprodol and its metabolite in all overdose cases; creating resources for health professionals about the dangers of carisoprodol; providing clear information to the public about the risks of carisoprodol, including addiction and overdose.

Systematic search: Limited

February 2026

[Tuberculosis: contact tracing for exposures in low-incidence countries](#)

This rapid systematic review identified and assessed evidence on the effectiveness of contact tracing strategies for detection of TB in people exposed to a person with active TB in low TB incidence countries. No studies matching the inclusion criteria were identified.

Systematic search: Limited

February 2026

[Nutrition and maternal weight outcomes: SACN report](#)

This report is a Scientific Advisory Committee on Nutrition (SACN) risk assessment on nutrition and maternal weight outcomes during pregnancy and up to 24 months after delivery. The assessment covers: evidence on maternal diet and maternal weight outcomes dietary intakes and nutritional status of women of childbearing age the prevalence of overweight and obesity in both pregnant and non-pregnant women of childbearing age. It makes recommendations for government and researchers in relation to women who are pregnant or breastfeeding, and girls and women of childbearing age (aged 14 to 49 years).

Systematic search: Limited

February 2026

Health and Care Research Wales Evidence Centre

[How do Exercise Referral Schemes impact participant healthcare resource utilisation and health-related outcomes? a rapid evidence summary](#)

The National Exercise Referral Scheme (NERS) was rolled out across Wales in 2012. It is a long-term condition prevention and management programme, which aims to improve the health and well-being of sedentary and inactive adults who are at risk of developing a long-term condition or who have an existing long-term condition. This Rapid Evidence Summary (RES) aimed to evaluate the impacts that Exercise Referral Schemes (ERSs) have had on participant healthcare resource utilisation (HCRU) and health-related outcomes. From the limited evidence identified, ERSs were not effective in reducing participant HCRU. As a mechanism aimed to solely reduce HCRU, ERSs alone may not be the most effective option. However, ERSs were found to be effective in generating improvements in participant physical activity, HRQoL and blood pressure outcomes.

Systematic search: Limited

February 2026

[Nurse-led, community-based interventions for people with or at risk of frailty: A rapid review](#)

The review includes 23 eligible studies conducted in the UK and Europe. These studies included 16 distinct nurse-led interventions. The interventions differed considerably in factors including the

procedures they used, how they were delivered and how tailored this was to individual needs, and their duration/intensity. Whilst the evidence suggests some specific types of interventions may be beneficial, the evidence is insufficient to conclude that these interventions would offer benefit if deployed. The findings could be used to explore how these interventions fit into the wider context of community care. No evidence was found suggesting that the use of nurse-led community-based interventions was detrimental when compared with usual care. Therefore, such interventions may offer added value by reducing the demand for, and/or the costs associated with, care delivered by other health care professionals.

Systematic search: Limited

February 2026

EPPI Centre

Nil

AHRQ (Agency for Healthcare Research and Quality – USA)

Nil

Health Foundation

[GLP-1 drug prescriptions for obesity: Who is turning to private weight-loss treatment?](#)

The characteristics of 113,630 patients of an online weight management provider (Voy), who received a private prescription for a GLP-1 weight-loss drug between November 2024 and October 2025 were analysed. Private GLP-1 treatments are dominated by women in mid-life. Affluent areas see far higher rates of prescriptions despite lower obesity prevalence. Per person rates in the most deprived areas are around 32% lower than in the least deprived. After adjusting for the higher rate of obesity in more deprived areas, inequalities in uptake are more pronounced. People living in the least deprived areas are more than twice as likely to access GLP-1 treatments per person living with obesity, compared with those in the most deprived areas. People living in more deprived areas tend to access treatment at a higher body mass index (BMI). In the most deprived areas, around 45% of those using the drugs aged 30 to 49 had a starting BMI of 35 or more, compared with around 30% in the least deprived. This indicates later intervention and a greater accumulated health risk. Given limitations in current NHS provision, these private-sector patterns risk shaping who benefits first from GLP-1 treatments. The patterns observed offer insight into where demand is currently concentrated and could help to inform more equitable rollout across the NHS as eligibility expands.

Systematic search: No

February 2026

Canadian Agency for drugs and Technologies in Health (CADTH)

[Ferric derisomaltose for heart failure](#)

There was insufficient evidence to strongly support the use of IV ferric derisomaltose for the treatment of patients with heart failure with reduced ejection fraction and iron deficiency. It is not known how well ferric derisomaltose works or how safe it is compared with other treatments.

Systematic search: Limited

February 2026

McGill University Health Centre (Canada)

Nil

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

[Anti-interleukin-5 therapy in adults presenting to hospital with acute asthma: a systematic review of clinical and cost-effectiveness](#)

One small study investigating the use of anti-IL-5 therapy in acute exacerbations of asthma with high blood eosinophil counts found that patients in the combined intervention groups had a lower risk of subsequent exacerbations at 90 days post-exacerbation, and experienced improved asthma control and quality of life at 28 days. No studies investigating cost-effectiveness were identified.

Systematic search: Yes

February 2026

Campbell Collaboration

Nil

Glasgow Centre for Population Health

Nil

Selected other recent reports

Anna Freud (2026) [The INTEGRATE Report](#)

The INTEGRATE report outlines a practical approach to integrating psychological support for common mental health difficulties during pregnancy and after birth within universal services.

BMA (2026) [Improving the nation's diet: the impact of ultra-processed food](#)

The BMA is calling for the UK Government to urgently implement effective regulation and policies around UPF.

Centre for Mental Health (2026) [Future minds: a roadmap to transform children and young people's mental health by 2035](#)

The roadmap puts forward solutions to address the concerns of children, young people, and their families. It calls for: a shift from hospital to community; stabilising specialist and inpatient services while shifting investment towards earlier, community-based support to cut the cost of crisis; a new digital age of treatment and support (safely harnessing digital tools and AI to widen access, reduce waiting times, and increase productivity); a new era of prevention (embedding wellbeing support in schools, youth services, and families).

Getting it right first time (GIRFT) (NHS England) (2026) [GIRFT Greener Pathways. A practical guide to decarbonising the total hip replacement pathway](#)

Includes 13 recommendations for actions that can help to deliver sustainable elective total hip replacement care.

Joseph Rowntree Foundation (2026) [UK Poverty 2026](#)

Latest annual report examining the nature of poverty in the UK and considers trends.

Scottish Parliament (2026) [Promoting Healthy Ageing in Scotland \(briefing\)](#)

Useful overview of ageing in Scotland. Includes sections on life expectancy and healthy life expectancy, eating well, staying active and maintaining social connections.

NICE FORWARD PLANNING – Publications due March 2026

Kidney Cancer

Clinical Guideline – new

Kidney Cancer Quality Standard

Quality Standard (new)

Fertility problems: assessment and treatment - update 1 and 2

Clinical Guideline - update (new pharmaceutical and clinical practice evidence)

Suspected Cancer: recognition and referral (update)

Clinical Guideline - new