

National Institute for Health and Care Excellence (NICE) Guidance (Table 1) FEBRUARY 2018

No.	Title (click link)	Findings/ Recommendations/Conclusions	Implications/For Discussion	Commissioners	
TA160	Raloxifene for the primary prevention of osteoporotic fragility fractures in postmenopausal women	UPDATED: First published in 2008. Strontium ranelate has been removed because this is no longer available in the UK.		CCG	
TA161	Raloxifene and teriparatide for the secondary prevention of osteoporotic fragility fractures in postmenopausal women	UPDATED: First published in 2008. As above, strontium ranelate has been removed because this is no longer available in the UK.		CCG	
TA464	Bisphosphonates for treating osteoporosis	UPDATED: First published in 2017. Clarifies reported uncertainties about the correct treatment cohort. Eligible population is those with a 10 year probability of fracture of at least 1% in people who fulfil the entrance criteria in CG 146.	As specified in CG 146, the eligible population for assessment include:-women aged ≥ 65 years and men aged ≥ 75 years. Younger individuals are also included if they have specified, the additional risk factors. The risk assessment tool is then applied to this group of people. May be a requirement for GP education.	CCG	
TA501	Intrabeam radiotherapy system for adjuvant treatment of early breast cancer	Low energy radiation beam which can be delivered in theatre. Not recommended for routine commissioning.	Commissioners will require assurances that the system is not being used routinely.	CCGs and NHS England	
TA502	Ibrutinib for treating relapsed or refractory mantle cell lymphoma	Recommended as an option in patients who have received only one previous line of therapy.	Formerly funded by the Cancer Drugs Fund. Only 240 patients in England expected to be eligible per annum.	NHS England	
TA503	Fulvestrant for untreated locally advanced or metastatic oestrogen-receptor positive breast cancer	Not recommended.	Evidence on clinical effectiveness is uncertain. Commissioners will require assurances that this is not being prescribed.	NHS England	
TA504	Pirfenidone for treating idiopathic pulmonary fibrosis	Pirfenidone is an immunosuppressant with anti-inflammatory and anti-fibrotic effects. Recommended as an option in adults with an FVC between 50% – 80%. Treatment must be stopped on evidence of disease progression (decline of FVC of 10% in any 12 month period)	No resource impact is expected.	NHS England	
TA505	Ixazomib with lenalidomide and dexamethasone for treating relapsed or refractory multiple myeloma	Recommended as an option in the cancer drugs fund in adults who have received 2 – 3 lines of therapy.	No significant resource impact.	NHS England	

TA506	Lesinurad for treating chronic hyperuricaemia in people with gout	Not recommended.	Commissioners will require assurances that lesinurad is not being prescribed	CCG	
TA507	Sofosbuvir–velpatasvir–voxilaprevir for treating chronic hepatitis C	Recommended as an option in adults with specified genotypes and previous treatment history. Recommended length of treatment is either 12 or 8 weeks.	Decision to treat should be made by multidisciplinary team put in place by NHS England.	NHS England	
HST7	Strimvelis for treating adenosine deaminase deficiency–severe combined immunodeficiency	This highly specialised technology is recommended as an option in patients with this very rare and serious condition. Strimvelis is a gene therapy treatment.	The approximate cost per person is around £500,000.	NHS England	
CG147	Peripheral arterial disease: diagnosis and management	UPDATE: First published in 2012. Recommendations on diagnosing peripheral arterial disease in people with diabetes are amended.	Expected to be cost neutral.	CCG	
NG84	Sore throat (acute): antimicrobial prescribing	Suggesting that most acute sore throats are viral in origin, will last for around 1 week and do not require antibiotics. Recommends using a recognised scoring system (e.g. FeverPain or Centor score) to identify those most likely to benefit from antibiotics. Scores stratified into mild, moderate or severe with only the latter requiring an immediate antibiotic prescription. “Back up” antibiotics for moderate disease.	Scoring systems depend on presence/absence of fever, speed of onset, tonsillar exudate. Recommended antibiotics are penicillin V or macrolides. Self-care recommendations are analgesics and fluids. May be a requirement for education in the use of the screening tool. Expected to be cost neutral.	CCGs and NHS England	
NG85	Pancreatic cancer in adults: diagnosis and management	Detailed recommendations on diagnosis and including CT scanning, PET scanning and ultrasound. Also recommendations on chemotherapy and other surgical treatments.	Expected to be cost neutral.	NHS England	
NG86	People's experience in adult social care services: improving the experience of care and support for people using adult social care services	Intended for practitioners, managers and commissioners in adult social care services. Guideline is person centred and includes recommendations on provision of information, needs assessment and care planning, personal budgets, maintaining continuity and consistency of care and promoting positive relationships. Specific recommendations for residential settings. Staff should have the appropriate skills and experience and recruited using a values-based approach.	Guideline is based on evidence on the views of people who use the services. Costs should be assessed locally and commissioners are encouraged to use the baseline assessment tool which is available on the NICE website. https://www.nice.org.uk/guidance/ng86/resources	Local authorities	
MTG9	PleurX peritoneal catheter drainage system for vacuum-assisted drainage of treatment-resistant, recurrent malignant ascites	Designed to remain in place indefinitely - patients and carers are trained to perform regular drainage when required. Available clinical evidence suggests system is clinically effective.	Should be considered for use.		
MTG8	MiraQ for assessing graft flow during coronary artery bypass graft surgery	Uses ultrasound for non-invasive assessment of graft blood flow during coronary artery bypass graft. Evidence for use is supportive.	Estimated cost saving of £141 per patient compared with clinical assessment.		

MTG36	Peristeen transanal irrigation system for managing bowel dysfunction	Transanal irrigation system for managing bowel dysfunction – both for faecal incontinence and constipation. Improves quality-of-life and promotes dignity and independence.	Case for adoption is supported by the evidence.		
MTG35	Memokath-051 stent for ureteric obstruction	Case for adoption is partially supported by evidence.	Useful in selected patients.		
MIB141	Reveal LINQ insertable cardiac monitor to detect atrial fibrillation after cryptogenic stroke	Key uncertainties are lack of studies compared to standard care and generalisability.	Cost is £1800 per unit.		
MIB140	Coban 2 for venous leg ulcers	Very thin, type of compression bandage.	No studies showing better wound healing compared to 4 layer bandages.		
MIB139	EpiFix for chronic wounds	System is an amniotic membrane allograft.	All studies took place in the USA and generalisability to the NHS is uncertain. Cost is around £1000 for one treatment.		
MIB138	Minimally invasive percutaneous nephrolitholapaxy medium (MIP-M) for removing kidney stones	Innovation is reduced size of instrument which saves time and complications.	None of the studies were done in the UK and are all retrospective. Cost per procedure is £4400.		
IPG606	Unilateral MRI-guided focused ultrasound thalamotomy for moderate to severe tremor in Parkinson's disease	Current evidence on safety and effectiveness is adequate.	Should only be used in the context of research.		
IPG605	Ab interno supraciliary microstent insertion with phacoemulsification for primary open-angle glaucoma	Evidence of efficacy is adequate and there are no major safety concerns	Standard arrangements for clinical governance, consent and audit.		
IPG604	Aortic valve reconstruction with processed bovine pericardium	Current evidence on safety and efficacy is inadequate.	Should only be used in the context of research.		

IPG = Interventional Procedure Guidance **CG** = Clinical Guideline **TA** = Technology Appraisal **PHG** = Public Health Guidance **PSG** = Patient Safety Guidance
MIB: Medtech Innovation Briefing **MTG** = Medical Technology Guidance **DG** = Diagnostics Guidance **SSG** = Safe Staffing Guideline **HST** = Highly Specialised Technology Guidance
NG = NICE guideline

Table 2: QUALITY STANDARDS

Title	Publication date	Description
QS93:Atrial fibrillation	February 2018	UPDATED: First published in 2015. Amended in light of guidance on CoaguChek coagulometer and technology appraisal on edoxaban.
QS164:Parkinson's disease	February 2018	Standards include:- point of contact with specialist services, information about impulse control disorders, referrals to therapies, need to take levodopa within 30 minutes of the prescribed administration time and access to clozapine for treatment of hallucinations.
QS163:Mental health of adults in contact with the criminal justice system	February 2018	Standards include:-identifying and responding to features of mental health problems by police officers, referral for comprehensive mental health assessments and sharing of care plans.

Table 3: Evidence summaries (ES) and Key therapeutic topics (KTT)*[This does not constitute formal NICE guidance]*

Asthma: medicines safety priorities	KTT5
Hypnotics	KTT6
Antipsychotics in people with dementia	KTT7
Antimicrobial stewardship: prescribing antibiotics	KTT9
Type 2 diabetes mellitus: medicines optimisation priorities	KTT12
Non-steroidal anti-inflammatory drugs	KTT13
Wound care products	KTT14
Biosimilar medicines	KTT15
Anticoagulants, including non-vitamin K antagonist oral anticoagulants (NOACs)	KTT16
Acute kidney injury (AKI): use of medicines in people with or at increased risk of AKI	KTT17
Multimorbidity and polypharmacy	KTT18
Psychotropic medicines in people with learning disabilities whose behaviour challenges	KTT19
Safer insulin prescribing	KTT20
Medicines optimisation in long-term pain	KTT21
Chemotherapy dose standardisation	KTT22