**NIHR**

**The future for diagnostic tests of acute kidney injury in critical care: evidence synthesis, care pathway analysis and research prioritisation**

Three tests (Nephrocheck, NGAL, and cystatin C) of 152 potential tests and biomarkers, were subjected to detailed review. Analysis was limited by variable reporting standards, study quality and heterogeneity, but sensitivity was between 0.54 and 0.92 and specificity was between 0.49 and 0.95 depending on the test. In the economic model the incremental cost-effectiveness ratios ranged from £11,476 to £19,324 per quality-adjusted life-year (QALY), with a probability of cost-effectiveness between 48% and 54% when tests were compared with current standard care.

Health Technology Assessment
Systematic search: Yes
June 2018
[https://www.journalslibrary.nihr.ac.uk/hta/hta22320/#/abstract](https://www.journalslibrary.nihr.ac.uk/hta/hta22320/#/abstract)

**KINGS FUND**

**Innovative models of general practice**

In this report, we look at innovative models of general practice from the UK and other countries and identify key design features we believe will be important in designing effective GP services in the future. We set out five attributes that underpin general practice: person-centred, holistic care; access; co-ordination; continuity; and community focus.

Kings Fund report
Systematic search: No
June 2018

**The role of cities in improving population health: international insights**

Drawing on international case studies, this report explores the role of cities in improving population health and the conditions needed for success. It is based on 50 interviews with leaders from 14 cities and includes an extended case study on London that examines the lessons the city might learn from elsewhere.

Kings Fund report
Systematic search: No
June 2018

**Digital change in health and social care**

The use of digital technology in health and social care can improve quality, efficiency and patient experience as well as supporting more integrated care and improving the health of a population. This report shares practical learning from a series of case studies where significant large-scale digital change is happening.

Kings Fund report
Systematic search: No
Scottish Medicines Consortium

everolimus (Votubia)
everolimus (Votubia) dispersible tablets are accepted for use within NHS Scotland for
the adjunctive treatment of patients aged two years and older whose refractory partial-
onset seizures, with or without secondary generalisation, are associated with tuberous
sclerosis complex (TSC).  
SMC advice  
Systematic search: No  
June 2018  
https://www.scottishmedicines.org.uk/medicines-advice/everolimus-votubia-
fullsubmission-133118/

inotuzumab ozogamicin (BESPONSA)
inotuzumab ozogamicin (BESPONSA) is accepted for restricted use within NHS
Scotland as monotherapy for the treatment of adults with relapsed or refractory CD22-
positive B cell precursor acute lymphoblastic leukaemia (ALL). Adult patients with
Philadelpia chromosome positive relapsed or refractory B cell precursor ALL should
have failed treatment with at least one tyrosine kinase inhibitor. Treatment is
restricted to patients for whom the intent is to proceed to stem cell transplantation.  
SMC advice  
Systematic search: No  
June 2018  
https://www.scottishmedicines.org.uk/medicines-advice/inotuzumab-ozogamicin-
esponsa-fullsubmission-132818/

midostaurin (Rydapt)
midostaurin (Rydapt) is accepted for use within NHS Scotland, in combination with
standard daunorubicin and cytarabine induction and high-dose cytarabine
consolidation chemotherapy, and for patients in complete response followed by
midostaurin single agent maintenance therapy, for adult patients with newly
diagnosed acute myeloid leukaemia (AML) who are FMS like tyrosine kinase 3
(FLT3) mutation-positive.  
SMC advice  
Systematic search: No  
June 2018  
https://www.scottishmedicines.org.uk/medicines-advice/midostaurin-rydapt-for-aml-
fullsubmission-133018/

crizotinib (Xalkori)
crizotinib (Xalkori) is accepted for use within NHS Scotland for the treatment of
adults with ROS1-positive advanced non-small cell lung cancer (NSCLC).  
SMC advice  
Systematic search: No  
June 2018
telotristat ethyl (Xermelo)
telotristat ethyl (Xermelo) is accepted for restricted use within NHS Scotland for the treatment of carcinoid syndrome diarrhoea in combination with somatostatin analogue therapy in adults inadequately controlled by somatostatin analogue therapy. Xermelo is restricted to patients with CS diarrhoea who experience an average of four or more bowel motions per day, despite receiving somatostatin analogue therapy.
SMC advice
Systematic search: No
June 2018

guselkumab (Tremfya)
guselkumab (Tremfya) is accepted for restricted use within NHS Scotland for the treatment of moderate to severe plaque psoriasis in adults who are candidates for systemic therapy. Tremfya is restricted to patients who have failed to respond to conventional systemic therapies (including ciclosporin, methotrexate and phototherapy), are intolerant to, or have a contraindication to these treatments.
SMC advice
Systematic search: No
June 2018

SGHD

Scotland's Public Health Priorities
The Scottish Government and COSLA, working with a range of partners and stakeholders, have developed a set of public health priorities for Scotland. The agreed priorities reflect public health challenges that are important to focus on over the next decade to improve the public's health.
Scottish Government report
Systematic search: No
June 2018
http://www.gov.scot/Publications/2018/06/1393

SIGN
Nil

HEALTH SCOTLAND
Nil
NICE

ES18 Chronic obstructive pulmonary disease: fluticasone furoate, umeclidinium and vilanterol (Trelegy)
Fluticasone furoate/umeclidinium/vilanterol may be suitable for some people with moderate-to-severe COPD who have found triple therapy beneficial using more than 1 inhaler, who have difficulty using multiple inhalers and can use a dry powder inhaler.
Evidence summary
Systematic search: Yes
June 2018
https://www.nice.org.uk/advice/es18/chapter/Key-points

NG36 Cancer of the upper aerodigestive tract: assessment and management in people aged 16 and over
This guideline covers assessing and managing cancers of the upper aerodigestive tract in people aged 16 and over. These are cancers of the airways of the head and neck, including the mouth, throat, larynx (voicebox) and sinuses. It aims to reduce variation in practice and improve survival.
NICE Guideline
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ng36

NG97 Dementia: assessment, management and support for people living with dementia and their carers
This guideline covers diagnosing and managing dementia (including Alzheimer’s disease). It aims to improve care by making recommendations on training staff and helping carers to support people living with dementia.
NICE Guideline
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ng97

NG98 Hearing loss in adults: assessment and management
This guideline covers some aspects of assessing and managing hearing loss in primary, community and secondary care. It aims to improve the quality of life for adults with hearing loss by advising healthcare staff on assessing hearing difficulties, managing earwax and referring people for audiological or specialist assessment and management.
NICE Guideline
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ng98

TA217 Donepezil, galantamine, rivastigmine and memantine for the treatment of Alzheimer's disease
The three acetylcholinesterase (AChE) inhibitors donepezil, galantamine and rivastigmine as monotherapies are recommended as options for managing mild to moderate Alzheimer's disease under all of the conditions specified in the NICE
Memantine monotherapy is recommended as an option for managing Alzheimer's disease for people with moderate Alzheimer's disease who are intolerant of or have a contraindication to AChE inhibitors, or who have severe Alzheimer's disease.

NICE Technology Appraisal
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ta217

**TA521 Guselkumab for treating moderate to severe plaque psoriasis**
Guselkumab is recommended as an option for treating plaque psoriasis in adults, only if the disease is severe (PASI ≥ 10 or DLQI > 10) and the disease has not responded to other systemic therapies, including ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet A radiation), or these options are contraindicated or not tolerated.

NICE Technology Appraisal
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ng97

**TA522 Pembrolizumab for untreated locally advanced or metastatic urothelial cancer when cisplatin is unsuitable**
Pembrolizumab is recommended for use within the Cancer Drugs Fund as an option for untreated locally advanced or metastatic urothelial carcinoma in adults when cisplatin-containing chemotherapy is unsuitable, only if pembrolizumab is stopped at 2 years of uninterrupted treatment or earlier if the disease progresses.

NICE Technology Appraisal
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ta522

**TA523 Midostaurin for untreated acute myeloid leukaemia**
Midostaurin is recommended as an option in adults for treating newly diagnosed acute FLT3-mutation-positive myeloid leukaemia with standard daunorubicin and cytarabine as induction therapy, with high-dose cytarabine as consolidation therapy, and alone after complete response as maintenance therapy.

NICE Technology Appraisal
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ta523

**TA524 Brentuximab vedotin for treating CD30-positive Hodgkin lymphoma**
Brentuximab vedotin is recommended as an option for treating CD30-positive Hodgkin lymphoma in adults with relapsed or refractory disease, only if they have already had autologous stem cell transplant or they have already had at least 2 previous therapies when autologous stem cell transplant or multi-agent chemotherapy are not suitable.

NICE Technology Appraisal
Systematic search: Yes
June 2018
TA525 Atezolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy
Atezolizumab is recommended as an option for treating locally advanced or metastatic urothelial carcinoma in adults who have had platinum-containing chemotherapy, only if atezolizumab is stopped at 2 years of uninterrupted treatment or earlier if the disease progresses.
NICE Technology Appraisal
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ta525

TA526 Arsenic trioxide for treating acute promyelocytic leukaemia
Arsenic trioxide is recommended as an option for inducing remission and consolidation in acute promyelocytic leukaemia (characterised by the presence of the t[15;17] translocation or the PML/RAR-alpha gene) in adults with untreated, low-to-intermediate risk disease (defined as a white blood cell count of 10x10³ per microlitre or less), when given with all-trans-retinoic acid (ATRA), or with relapsed or refractory disease, after a retinoid and chemotherapy.
NICE Technology Appraisal
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ta526

TA527 Beta interferons and glatiramer acetate for treating multiple sclerosis
Interferon beta-1a is recommended as an option for treating multiple sclerosis only if the person has relapsing–remitting multiple sclerosis. Interferon beta-1b (Extavia) is recommended as an option for treating multiple sclerosis, only if the person has relapsing–remitting multiple sclerosis and has had 2 or more relapses within the last 2 years or has secondary progressive multiple sclerosis with continuing relapses. Glatiramer acetate is recommended as an option for treating multiple sclerosis only if the person has relapsing–remitting multiple sclerosis. Interferon beta-1b (Betaferon) is not recommended as an option for treating multiple sclerosis.
NICE Technology Appraisal
Systematic search: Yes
June 2018
https://www.nice.org.uk/guidance/ta527

EPPI Centre
Nil

AHRQ (Agency for Healthcare Research and Quality - USA)
Sodium and Potassium Intake: Effects on Chronic Disease Outcomes and Risks
Reducing sodium intake, increasing potassium intake, and use of potassium-containing salt substitutes in the diet significantly decreases blood pressure,
particularly among those with hypertension. Limited evidence also suggests that sodium intake is associated with risk for all-cause mortality, and that reducing sodium intake may decrease the risk for CVD morbidity and mortality.

AHRQ Research Synthesis
Systematic search: Yes
June 2018
https://effectivehealthcare.ahrq.gov/topics/sodium-potassium/final-report-2018

Noninvasive Nonpharmacological Treatment for Chronic Pain: A Systematic Review
Exercise, multidisciplinary rehabilitation, acupuncture, CBT, and mind-body practices were most consistently associated with durable slight to moderate improvements in function and pain for specific chronic pain conditions. Our findings provided some support for clinical strategies that focused on use of nonpharmacological therapies for specific chronic pain conditions.
AHRQ Research Synthesis
Systematic search: Yes
June 2018
https://effectivehealthcare.ahrq.gov/topics/nonpharma-treatment-pain/research-2018

Health Foundation

The social determinants of young people’s health
This paper provides an overview of evidence on the social determinants of young people’s health. Drawing on a model of social determinants that includes money and resources, living conditions, family factors, peers and social groups, education and work and worklessness, we ask (a) what is known about the most important social determinants of health in the 12-24 age group and (b) what proportions of today’s young people experience the kinds of social disadvantage we know are associated with poorer health outcomes? The second half of this report demonstrates that significant proportions of today’s young people aged 12-24 are experiencing disadvantage that is likely to be associated with long term health outcomes.
Health Foundation Working Paper
Systematic Search: Limited
June 2018

Canadian Agency for Drugs and Technologies in Health (CADTH)

e-Therapy Interventions for the Treatments of Substance Use Disorders and Other Addictions: A Review of Clinical Effectiveness
There is strong evidence that therapist-guided e-therapy is superior to no treatment and wait list in reducing alcohol consumption or cannabis use, and the effect was small. There was no benefit for patients with gambling addiction. With respect to substances, evidence was limited to the treatment of problematic alcohol and cannabis use and it is therefore unclear if the results generalize to the misuse of other substances. The evidence on gambling was limited to those who participated in online video poker.
e-Therapy Interventions for the Treatment of Post-Traumatic Stress Disorder: Clinical Evidence
There is limited evidence that e-Therapy with therapist support may be beneficial in managing PTSD symptoms when compared to waitlist, treatment as usual, or other active treatment. However, the between group differences were not always statistically significant.

Laser Refractive Surgery for Vision Correction: A Review of Clinical Effectiveness and Cost-effectiveness
Evidence on long-term clinical effectiveness of laser refractive surgery for vision correction defined as the number of years that a patient remains independent of corrective eyewear was not identified. Patients who underwent Laser-Assisted in situ Keratomileusis reported having higher overall patient satisfaction compared to those wearing contact lenses. No difference in patient satisfaction or vision-related quality of life was detected among refractive eye surgery techniques.

Premium versus Standard Intraocular Lenses for Cataracts: A Review of Clinical Effectiveness and Cost-Effectiveness
Although there is extensive evidence, there is no consistent pattern on clinical effectiveness or patient-centered outcomes, with some studies reporting no difference between premium and monofocal intraocular lenses, and others describing a benefit for either premium or standard monofocal intraocular lenses. The cost-effectiveness analysis reported increased aggregate direct costs for premium intraocular lenses with clinical benefits favouring either premium or monofocal intraocular lenses variably.

Endovascular Thrombectomy for Patients with Ischemic Stroke: A Review of Guidelines
One high-quality evidence-based guideline provides detailed recommendations regarding screening, patient selection, and optimal treatment methods.
Deployment of military personnel to military missions: Impact on mental health and social functioning
Deployment to military operations negatively affects the mental health functioning of military personnel. For assessments taken more than 24 months since exposure, we consistently found adverse effects of deployment on all mental health domains (PTSD, depression, substance abuse/dependence, and common mental disorders), particularly on PTSD. For assessments taken less than 24 months (or a variable number of months since exposure) the evidence was less consistent and in many instances inconclusive.
Campbell systematic review
Systematic search: Yes
June 2018

Police-initiated diversion for youth to prevent future delinquent behavior: a systematic review
Police-led diversion of low-risk youth who come into contact with the justice system is more effective in reducing a youth’s future contact with the justice system than traditional processing.
Campbell systematic review
Systematic search: Yes
June 2018
NICE FORWARD PLANNING – Publications due July 2018

Crizotinib for treating ROS1-positive advanced non-small-cell lung cancer
Single Technology Appraisal

Niraparib for ovarian cancer
Single Technology Appraisal

Nivolumab for treating metastatic or unresectable urothelial cancer after platinum-based chemotherapy
Single Technology Appraisal

Brain tumours (primary) and brain metastases in adults
Clinical Guideline

Rheumatoid arthritis
Clinical Guideline

Early and locally advanced breast cancer
Clinical Guideline

End of life care for adults in the last year of life: service delivery
Clinical Guideline

Pembrolizumab for untreated PD-L1 positive metastatic non-small-cell lung cancer
Single Technology Appraisal

Decision making and mental capacity
Clinical Guideline

Neuroendocrine tumours (metastatic, unresectable, progressive) - 177 Lu-dotatate
Multiple Technology Appraisal

Cenegermin for treating neurotrophic keratitis
Single Technology Appraisal

Ocrelizumab for treating relapsing multiple sclerosis
Single Technology Appraisal

Abatacept for treating active psoriatic arthritis after DMARDs
Single Technology Appraisal