

HEALTH TECHNOLOGY ASSESSMENT AND EVIDENCE SYNTHESIS BULLETIN



Welcome Message

From
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- Deputy Chief Executive
- Director of Health Technology Assessment

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Welcome to our third bulletin of the year, covering activities from July through September in the area of health technology assessment (HTA) and evidence synthesis. Our aim is to provide a brief overview of our most recent reports and presentations to support evidence-based decision-making in health. All of our publications are available to read in full on our website, www.hiqa.ie.

During this period, we published two major immunisation assessments: one HTA of shingles (herpes zoster) vaccination for adults, the other a rapid HTA of immunisation against respiratory syncytial virus (RSV). You can read about those in this issue. Following our public consultation earlier this year, we are finalising a HTA of moving to an enhanced inactivated influenza vaccine for those aged 65 years and older in the HSE Seasonal Influenza Vaccination Programme.

We have also announced that a HTA of extending BowelScreen to those aged 50 to 54 years is underway, and that we are looking at the potential of a national telephone line for acute, non-urgent medical care needs. See more on those inside.

In other news, we were delighted to be awarded €2.5 million from the Health Research Board to continue to support the development of national clinical guidelines aimed at ensuring safer, better healthcare. This four-year award will fund the Centre in Ireland for Clinical guideline support and Evidence Reviews (CICER), a partnership comprising HIQA, Trinity College Dublin, and clinical and methodological experts, until 2028. Members of the CICER team met with international collaborators at the Global Evidence Summit in Prague in September.

As always, we appreciate your feedback, and welcome suggestions for future editions. Reach out to us at htanews@hiqa.ie.



CICER
Tacaíocht don Treoiríne Chliniciúil
Clinical Guideline Support

HRB AWARDS HIQA AND PARTNERS €2.5 MILLION FOR CONTINUED SUPPORT OF NATIONAL CLINICAL GUIDELINES

In August we were awarded €2.5 million from the [Health Research Board \(HRB\)](#) to continue to support the development of national clinical guidelines aimed at ensuring safer, better healthcare. The four-year award will fund the Centre in Ireland for Clinical guideline support and Evidence Reviews (CICER), a partnership comprising HIQA, Trinity College Dublin, and clinical and methodological experts, until 2028.

CICER provides evidence to inform National Clinical Guidelines through the [National Clinical Effectiveness Committee \(NCEC\)](#), established in 2010 by the Minister for Health and supported by the Department of Health. The NCEC is responsible for assuring the quality of National Clinical Guidelines for use in healthcare in Ireland.

These guidelines aim to promote healthcare that is current, effective and consistent, ensuring the best possible outcomes for patients. To achieve this, guidelines must be based on the best available scientific evidence and incorporate the budget impact of their implementation.

This award will build on research funding from a previous competitive process spanning the period from 2017 to 2024, during which we supported the development of National Clinical Guidelines.

In this new phase of the grant, CICER will aim to strengthen public and patient involvement throughout the guideline development process, and to foster additional national and international collaborations. Learn more about this work on our [website](#).



CICER team with colleagues from the Royal College of Surgeons Ireland (RCSI), the Health Service Executive (HSE) and Department of Health, reconnecting at the National Patient Safety Office (NPSO) annual conference in Dublin.

REPORTS

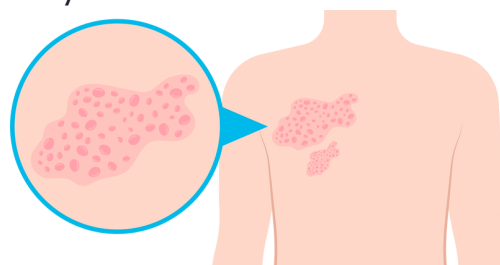
HTA OF ADDING SHINGLES VACCINE TO THE NATIONAL IMMUNISATION PROGRAMME FOR ADULTS



In July, we published our HTA of shingles (herpes zoster) vaccination for adults. This final report followed a draft that was open to public consultation from 19 March to 30 April. Details of the consultation are provided in a statement of outcomes report.

Our assessment determined that the shingles vaccine is safe and effective, but that the benefit of the vaccine decreases over time. Also, at the current vaccine price, we found that adding shingles vaccination to the routine immunisation schedule for the general population aged 50 years and older would not be an efficient use of HSE resources.

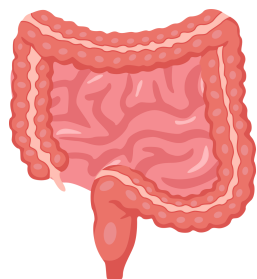
This HTA has been submitted as advice to the Minister for Health to inform a policy decision on whether to provide shingles vaccination as part of the adult immunisation programme in Ireland. The report and related documents can be found [here](#).



HTA OF EXTENDING BOWELSCREEN TO THOSE AGED 50 TO 54 YEARS UNDERWAY



Also in July, we announced that we had begun an assessment of extending Ireland's national colorectal cancer screening programme, BowelScreen, to people aged 50 to 54 years. BowelScreen uses a home test kit that looks for a level of blood in the stool. If this level is above the screening limit, participants are referred for a colonoscopy. The programme currently invites those aged 59 to 69 years for screening every two years, and there is a commitment to screen those aged 55 to 74 in the future.



Announcing the HTA, Dr Máirín Ryan, our Deputy CEO, said "In this assessment, we will explore the benefits, potential harms, and organisational and ethical implications of extending the colorectal cancer screening age for patients, the general public, and the healthcare system in Ireland."

Once completed, our draft assessment will be made available for the public to provide feedback on the draft findings. This feedback will be reflected in the final HTA report submitted to the National Screening Advisory Committee.

The protocol for the HTA can be found [here](#).

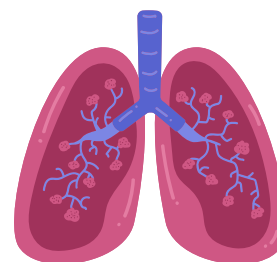
REPORTS

RAPID HTA OF IMMUNISATION AGAINST RESPIRATORY SYNCYTIAL VIRUS (RSV)

In August, we published our rapid HTA of immunisation against respiratory syncytial virus (RSV), which looked at the one-year costs for the Health Service Executive (HSE) of different immunisation strategies involving infants aged less than one year and for adults aged 65 and older for the 2025-2026 season. The report and related documents can be found [here](#).

Since 2022, new medicinal products have become available to protect infants and older adults against RSV, with clinical trial data and emerging real-world evidence supporting the safety and effectiveness of these products.

We will now conduct a larger assessment to provide advice to inform a longer-term policy decision about RSV immunisation. This will include emerging international evidence as well as experience from the HSE's RSV Immunisation Pathfinder Programme, which is being piloted for the upcoming 2024-2025 season.



POTENTIAL OF A TELEPHONE LINE FOR ACUTE, NON-URGENT MEDICAL CARE NEEDS



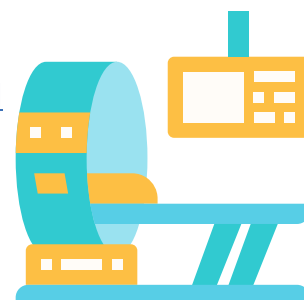
Also in August, we published the [protocol](#) for a HTA of an alternative to the 112/999 national emergency phone line that would address acute, non-urgent medical care needs of the public.

We are undertaking this study at the request of the HSE, and will look at the implications for service users and the healthcare system of an alternative national phone line. Our findings will be submitted as advice to inform decision-making by the Minister for Health and the HSE.

JUSTIFICATION OF IONISING RADIATION PRACTICES

Magnetic resonance imaging-guided radiotherapy: Protocol for an evidence review to inform generic justification

We received an application requesting the justification by HIQA of the practice of using external beam radiotherapy involving magnetic resonance imaging-guided radiotherapy. We published our [protocol](#) which outlines the process by which the Evidence Review Team in the HTA Directorate will undertake a review of the evidence to inform this generic justification decision. The approach adopted is consistent with that outlined in our [methods for the generic justification of new practices in ionising radiation](#).





CONFERENCES

GLOBAL EVIDENCE SUMMIT

From 10-13 September, we attended and presented on our work and research at the [Global Evidence Summit](#) in Prague. The event aimed to provide a multidisciplinary platform to exchange ideas about how best to produce, summarise, disseminate and use evidence to inform policy and practice to improve people's lives.

Michelle O'Neill, our Deputy Director of HTA, presented on 'Adapting the GRADE evidence-to-decision framework to facilitate robust decision-making: two case studies'. You can learn more about GRADE and EtD [here](#).

Barrie Tyner, our Health Technology Assessment Analyst, presented research on 'Advances in guideline development: A scoping review of key innovations'. You can read more [here](#).

Andrew Dullea, our Health Services Researcher, presented on 'Sensitivity, precision and efficiency of search strategies built using PubReMiner compared with current best practice search strategy building'. This research is supported by the ESI SWAR Award. Additionally, Andrew received honourable mention as runner-up for best poster for his poster on 'Assigning GRADE levels in an overview of reviews using general principles identified from current GRADE guidelines'.

HIQA collaborator Dr Barbara Clyne, Senior Lecturer at the Royal College of Surgeons Ireland, presented on 'Investigating how the GRADE Evidence to Decision (EtD) framework is used in Clinical Guidelines: A scoping review', while Dr Melissa Sharp, Senior Postdoctoral Researcher, presented on 'How did media coverage of health research published by Irish academic institutions (2017–2023) change over time?' You can read more about Melissa's work, which aims to help researchers communicate more effectively with the public, [here](#).



CICER members gather during the Global Evidence Summit held from 10-13 September in Prague.

L-R: Prof Zachary Munn, Dr Barbara Clyne (RCSI), Shelley O'Neill (HIQA), Prof Holger Schünemann, Barrie Tyner (HIQA).



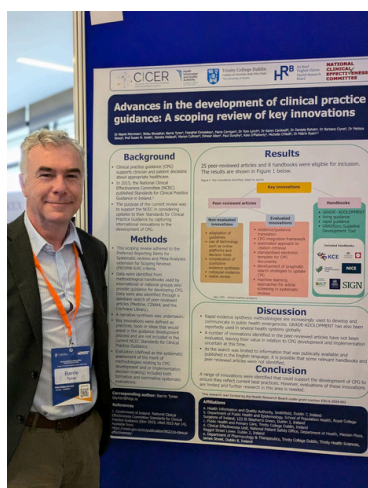


CONFERENCES

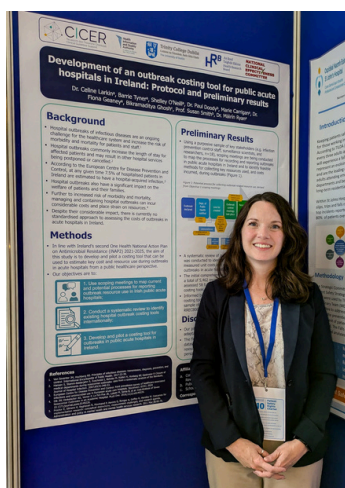
NATIONAL PATIENT SAFETY CONFERENCE

We participated in the annual conference of the National Patient Safety Office in Dublin on 17 September, where we shared key findings from our work.

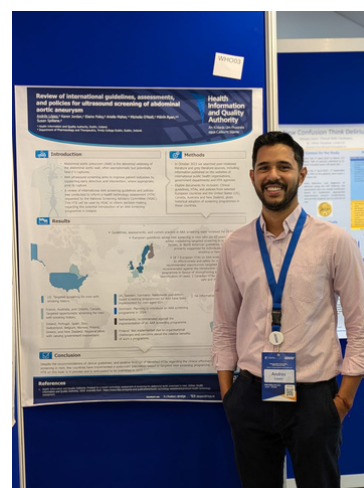
Our analyst Barrie Tyner presented a poster on 'Advances in the development of clinical practice guidance: A scoping review of key innovations', while our analyst Andres Lopez presented a poster on 'Review of international guidelines, assessments, and policies for ultrasound screening of abdominal aortic aneurysm'. (Read about our AAA screening work [here](#).) Dr Celine Larkin, our senior analyst, presented a poster on 'Development of an outbreak costing tool for public acute hospitals in Ireland: Protocol and preliminary results'. Colleagues from CICER (see page 2) were also in attendance and gathered to highlight their work.



Barrie Tyner



Celine Larkin



Andres Lopez

HERCA

In mid-September, we were represented by Dr Agnella Craig, Regional Manager Ionising Radiation from our Healthcare Directorate, and Health Services Researcher Maeve McGarry from our HTA Directorate, at the Heads of European Radiological Protection Competent Authorities (HERCA) Working Group on Medical Applications.

HERCA brings together radiation protection authorities to identify issues and propose practical solutions. Find out more about our work in ionising radiation [here](#).

