Long term effects of COVID-19 – maintaining a 'living' approach to guidance





# NICE's role in the system

As set out in the Regulations

NICE

## Our regulatory foundation

Health and Social Care Act 2012 - Established as a non-departmental public body.

### **Our remit**

- Give advice and guidance on matters relating to the provision of NHS services, public health services or social care in England.
- Deliver education & training on therapeutics and medicines management to healthcare professionals.
- Provide advisory services to bodies e.g. devolved administrations & pharmaceutical companies.

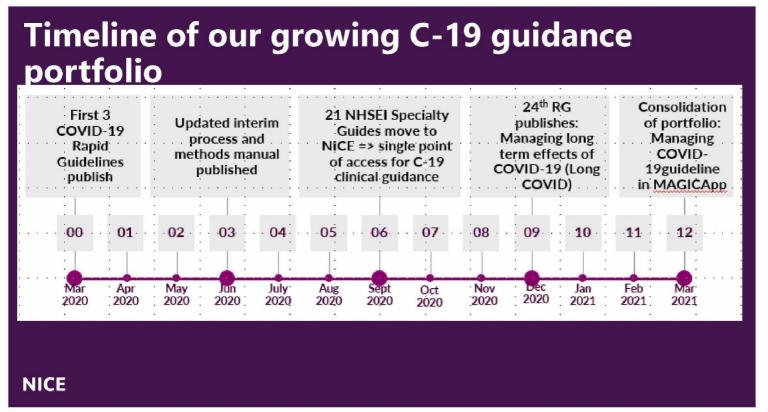


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NICE



### **Development time**

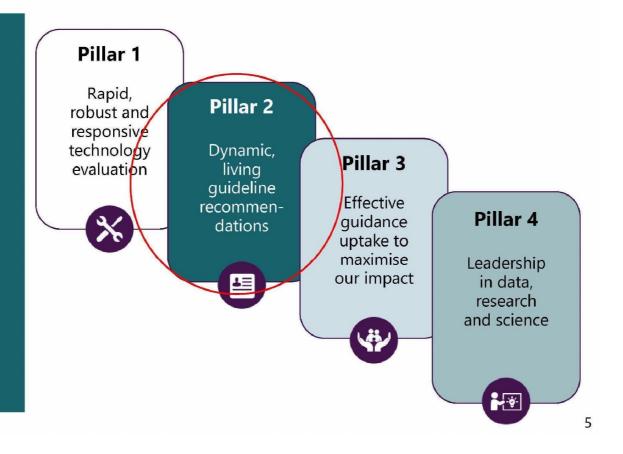
- Old world: 12-24 months
- During height of early pandemic: compressed timescale of 5-10 days
- Future: our new strategy builds on our learnings from COVID-19 with focussed, rapid, living guidelines



# Four strategic pillars

Underpinned by internal transformatio n

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# Rapid process for long-term effects

Case definition and coding Developing key questions Rapid recruitment – including people with lived experience

Reviewing the evidence base/real world evidence/expert consensus

Targeted peer review

Quality assurance

## Scope of rapid guideline Development began

- October 2020
- Collaborative approach SIGN and RCGP

#### **Inclusion of case definitions**

- Acute COVID-19 infection (up to 4 weeks)
- Ongoing symptomatic COVID-19 (from 4 weeks up to 12 weeks)
- Post COVID-19 syndrome (Long COVID) (signs/ symptoms beyond 12 weeks)

#### **Population**

• Adults, young people and children diagnosed with COVID-19, based on signs and symptoms, with or without a positive SARS-CoV-2 test whose symptoms continue for more than 4 weeks from start of infection







# **Key areas of the guideline: Recommendations**

- Identification
- Assessment
- Investigations and referral
- Planning care
- Management
- Follow-up and monitoring
- Sharing information and continuity of care
- Service organisation

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Area of guidance		Evidence
Identification	Initial presentation and consultation	Patient experience evidence
	Understanding symptomatology	Under representation in data
Investigations and referral	• Testing	Limited evidence, use of consensus
Assessment	Presentation and likelihood	Limited and uncertain evidence
Planning and Management	Self-management	Patient experience evidence and consensus
	• Therapeutics	Gap in evidence
	Rehabilitation	Limited evidence, consensus and expert testimony
Follow-up and monitoring	Follow-up	Limited evidence – largely in hospitalised settings
	Continuity of care	Patient experience evidence
Service organisation		Limited evidence, use of consensus and expert testimony

# Research recommendation s

### **Risk factors**

What factors influence the risk of developing post-COVID-19 syndrome What factors influence the trajectory of post-COVID-19 syndrome?

### **Interventions**

What are the most clinically effective interventions?

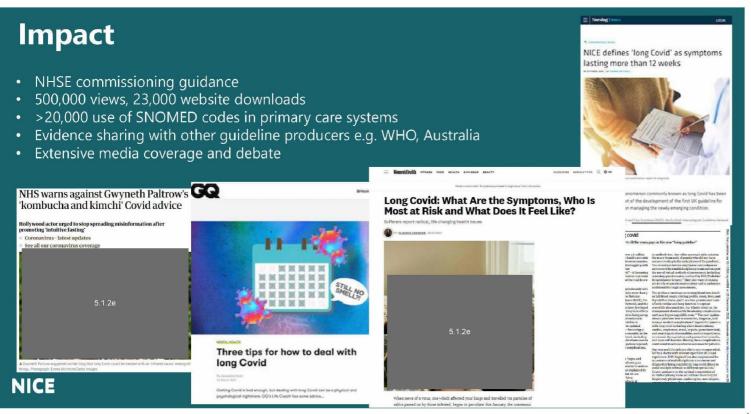
How do these vary across different population groups

Do any symptoms of post-COVID-19 syndrome predict the need for specialist intervention?

### **Prevalence**

What is the prevalence and incidence of post-COVID-19 syndrome? Does it differ from the prevalence and incidence across different population groups

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### 'Living' recommendations

- ✓ Active surveillance
- ✓ Identification of 'hot topics'/noise
- ✓ Weekly evidence sift
- ✓ Codesets of interest
- ✓ Expert panel
- ✓ Rapid updating



Research to access pathway for investigational drugs for COVID-19 (RAPID-C19)

A multi-agency initiative to enable safe and timely patient access to medicines showing evidence of benefit in treating symptomatic COVID-19 patients in current and any future waves

Interim 'group' approach, significantly streamlining and accelerating the standard patient access pathway

Identifies and prioritises technologies currently in research with most promising signals for rapid regulatory consideration and interim clinical policy development. Technologies continue to collect data to support licensing and HTA approval whilst in use

NICE, working with NIHR, coordinate horizon scanning activities and the process for identifying the most promising candidate medicines

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### Next steps



- Continuing surveillance of new evidence
- Threshold for updating –
   challenging/changing recommendations
   and strengthening evidence
- Addressing gaps e.g. young people and PIMS/ Therapeutics/ Rehabilitation
- NIHR funded work into long term effects of COVID-19 in non-hospitalised patients
  - case definition
  - translation of guideline into practice
- National & international collaboration

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### Any questions?

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