

# FOR PUBLIC CONSULTATION ONLY



## REPORT FROM CLINICAL PANEL

Title: **B10X01**  
**Surgical correction for pectus deformity (all ages)**  
CRG: Thoracic Surgery  
NPOC: Cancer  
Lead: Nicki McCulloch

Date: 19 November 2015

The Panel were presented a policy proposal to not routinely commission

<b>Question</b>	<b>Conclusion of the panel</b>	<b>If there is a difference between the evidence review and the policy please give a commentary</b>
<u>The population</u>  1. What are the eligible and ineligible populations defined in the policy and are these consistent with populations for which evidence of effectiveness is presented in the evidence review?	The eligible population(s) defined in the policy are the same or similar to the population(s) for which there is evidence of effectiveness considered in the evidence review.	The population in the studies is very heterogeneous, with no distinction between those with primarily cosmetic versus physiological issues as a result of pectus chest deformity.
<u>Population subgroups</u>  2. Are any population subgroups defined in the policy and if so do they match the subgroups for which there is evidence presented in the evidence review?	No sub groups identified	The evidence and policy proposition did not identify any specific subgroup, for whom benefit was convincingly demonstrated.

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<p><u>Outcomes - benefits</u></p> <p>3. Are the clinical benefits demonstrated in the evidence review consistent with the eligible population and/or subgroups presented in the policy?</p>	<p>The clinical benefits demonstrated in the evidence review support the eligible population and/or subgroups presented in the policy.</p>	
<p><u>Outcomes – harms</u></p> <p>4. Are the clinical harms demonstrated in the evidence review reflected in the eligible population and/or subgroups presented in the policy?</p>	<p>The clinical harms demonstrated in the evidence review are reflected in the eligible population and/or subgroups presented in the policy.</p>	
<p><u>The intervention</u></p> <p>5. Is the intervention described in the policy the same or similar as the intervention for which evidence is presented in the evidence review?</p>	<p>The intervention described in the policy the same or similar as in the evidence review.</p>	
<p><u>The comparator</u></p> <p>1. Is the comparator in the policy the same as that in the evidence review?</p>	<p>Not applicable</p>	<p>There was evidence comparing different types of pectus surgery, but not pectus surgery versus next best treatment.</p>

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2. Are the comparators in the evidence review the most plausible comparators for patients in the English NHS and are they suitable for informing policy development?	The comparators in the evidence review do not include plausible comparators for patients in the English NHS and are not suitable for informing policy development.	
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### Overall conclusions of the panel

The policy reflects the findings of the clinical evidence review and should progress. The clinical panel supported the not routine commissioning position as no clear clinical benefits were demonstrated by the evidence review.

The clinical panel requested that the evidence review be amended to clarify the assessment of the Chen et al. meta-analysis and the implications for the policy proposition

Report approved by:

Jeremy Glyde  
Clinical Effectiveness Team  
16<sup>th</sup> December 2015