

## FOR PUBLIC CONSULTATION ONLY

### SPECIALISED COMMISSIONING - CLINICAL EVIDENCE EVALUATION CRITERIA FOR CLINICAL COMMISSIONING POLICY DEVELOPMENT

URN: B14X06

TITLE: Urethroplasty for benign urethral strictures in adult men

CRG: Specialised Urology

NPOC: Cancer

Lead: Nicola McCulloch

Date: 20<sup>th</sup> January 2016

The panel were presented a policy proposal for routine commissioning

Question	Conclusion of the panel	If there is a difference between the evidence review and the policy please give a commentary
<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?	A: 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	
<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?	A: The population subgroups defined in the policy are the same or similar as those for which there is evidence in the evidence review	

## FOR PUBLIC CONSULTATION ONLY

<u>Outcomes - benefits</u> 3. Are the clinical benefits demonstrated in the evidence review consistent with the eligible population and/or subgroups presented in the policy?	A: The clinical benefits demonstrated in the evidence review support the eligible population and/or subgroups presented in the policy	
<u>Outcomes – harms</u> 4. Are the clinical harms demonstrated in the evidence review reflected in the eligible population and/or subgroups presented in the policy?	A: The clinical harms demonstrated in the evidence review are reflected in the eligible population and/or subgroups presented in the policy	
<u>The intervention</u> 5. Is the intervention described in the policy the same or similar as the intervention for which evidence is presented in the evidence review?	A: The intervention described in the policy the same or similar as in the evidence review	
<u>The comparator</u> 6. Is the comparator in the policy the same as that in the evidence review?	A: The comparator in the policy is the same as that in the evidence review.	

## FOR PUBLIC CONSULTATION ONLY

<p>7. 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.</p>	<p>A The comparators in the evidence review include plausible comparators for patients in the English NHS and are suitable for informing policy development.</p>	
<p><u>Advice</u> The Panel should provide advice on matters relating to the evidence base and policy development and prioritisation. Advice may cover:</p> <ul style="list-style-type: none"> <li>• Uncertainty in the evidence base</li> <li>• Challenges in the clinical interpretation and applicability of policy in clinical practice</li> <li>• Challenges in ensuring policy is applied appropriately</li> <li>• Issues with regard to value for money</li> <li>• Likely changes in the pathway of care and therapeutic advances that may result in the need for policy review.</li> </ul>		<p>Title change: clarify age + sex, e.g. (in adult men)</p> <p>Change language on age throughout document: From 'elderly' to 'patients with significant co-morbidities'</p> <p>Section 3, p. 6, 1<sup>st</sup> paragraph – include: comma after 'voiding'</p> <p>Section 7, p. 10, 3<sup>rd</sup> inclusion criteria - replace: '...Pros and cons...' with '...risks and benefits...'</p>

### Overall conclusions of the panel

The policy reflects the findings of the clinical evidence review. It should progress as a routinely commissioned policy following suggested updates.

## FOR PUBLIC CONSULTATION ONLY

Report approved by:

Jeremy Glyde  
Clinical Effectiveness Team  
10 February 2016