FOR PUBLIC CONSULTATION ONLY

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

URN: D14X01
TITLE: Bone morphogenetic protein-2 in spinal fusion

CRG: Specialised orthopaedics
NPOC: Trauma
Lead: Jacquie Kemp

Date: 20th 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?	The eligible population(s) defined in the policy is not the same or similar to the population(s) for which there is evidence of effectiveness that considered in the evidence review	*The eligible population defined in the policy included situations using BMP2 as an alternative to bone graft. The panel felt that BMP should only be used where there is no alternative to bone graft – this must be stated in commissioning criteria in section 7.*
<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?	There is a difference between the population subgroups defined in the policy and the populations for there is evidence in the evidence review	*See above.*

<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?	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?	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?	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? 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.	The comparator in the policy is the same as that in the evidence review. The comparators in the evidence review include plausible comparators for patients in the English NHS and are suitable for informing policy development.	
<u>Advice</u> The Panel should provide advice on		*The panel noted that the policy title does not adequately reflect the content of the policy*

matters relating to the evidence base and policy development and prioritisation. Advice may cover: • Uncertainty in the evidence base • Challenges in the clinical interpretation and applicability of policy in clinical practice • Challenges in ensuring policy is applied appropriately • Issues with regard to value for money • Likely changes in the pathway of care and therapeutic advances that may result in the need for policy review.		*proposition.* *The panel requested that the commissioning criteria be updated to be clear that BMP should only be used where there is no other bone alternative.* *The panel agreed that the policy proposition should proceed with the restriction to the commissioning criteria above.*

Overall conclusions of the panel

The policy reflects the findings of the clinical evidence review and should progress

Report approved by:

James Palmer
Chair
27 January 2016