The Clinical Effectiveness Bulletin aims to highlight some key pieces of evidence, published in the previous month.

Where possible, links to the full text documents are included. If you are employed by UHN, NSCHT, Stoke on Trent Public Health or you are MPFT, CCG or practice staff in North Staffordshire, get in touch to find out more about your NHS library service.
Current Sources:

Cochrane Library  http://www.thecochranelibrary.com/
Health Technology Assessment (HTA) Database  http://www.journalslibrary.nihr.ac.uk/hta
National institute of Health Research  https://discover.dc.nihr.ac.uk/portal/home
Department of Health  http://www.gov.uk/dh
King’s Fund  http://www.kingsfund.org.uk/
Nice Guidance  https://www.nice.org.uk/guidance/published
Social Care Institute for Excellence  https://www.scie.org.uk/news/
SIGN  http://www.sign.ac.uk/our-guidelines.html
Primary Care Commissioning  www.pcc-cic.org.uk
Chartered Society of Physiotherapy  www.csp.org.uk
Queen’s Nursing Institute:  http://www.qni.org.uk/
NMC  https://www.nmc.org.uk/news/
RCN  https://www.rcn.org.uk/professional-development/publications
Campbell Collaboration  http://www.campbellcollaboration.org/
Local patient and public information groups
BMC  https://bmcmusculoskeletdisord.biomedcentral.com/
BMC  https://archivesphysiotherapy.biomedcentral.com/
Meridian  https://meridian.wmahsn.org/subdomain/meridian/end/home

Contents in this issue:

Commissioning.......................................................................................................................... 3
Public Health and Lifestyle Services.............................................................................................. 6
General Practice.............................................................................................................................. 8
Rehabilitation and Occupational Health.......................................................................................... 12
Physiotherapy.............................................................................................................................. 12
Health Visiting and Nursing .......................................................................................................... 13
Social Care ................................................................................................................................... 14
Mental Health............................................................................................................................... 14
Children and Young People......................................................................................................... 17
Older Adults................................................................................................................................. 18
Allied Health Professional........................................................................................................... 19
Pharmacy ..................................................................................................................................... 19
Key reports

**Prevention is better than cure: our vision to help you live well for longer**  
*Department of Health - Policy Paper*

The document sets out the government’s vision for:
- stopping health problems from arising in the first place
- supporting people to manage their health problems when they do arise

The goal is to improve healthy life expectancy by at least 5 extra years, by 2035, and to close the gap between the richest and poorest.

A [collection of case studies](#) has been published, showing examples of good practice in preventing health problems from happening.

**Budget 2018: what it means for health and social care**  
*Kings Fund – report*

In this joint piece with the Health Foundation and Nuffield Trust, we analyse what was announced in the 2018 Budget and what it means for health and social care.

**A vision for population health: Towards a healthier future**  
*Kings Fund - report*

“Over the past 100 years, in common with other developed countries, England has made a great escape from poor health and short life expectancy. This has been due to improvements in sanitation, medicines and health care, underpinned by economic growth, improved living standards and the establishment of the welfare state. Life expectancy has improved and, although inequalities in health have been ever-present, as a population we are healthier than ever before.”

Commissioning

**NEW FUNDING FOR NURSE-LED FRAILTY PROJECTS**  
*Primary Care Commissioning - news*

Community nursing charity the Queen’s Nursing Institute has announced a new programme of funding for nurse-led projects to improve patient care. The theme of the funding programme is improving the healthcare of people living with frailty. The charity is seeking ten projects led by nurses in the community to receive up to £5000 each. The project leaders will also receive a year-long programme of professional development from the QNI. The funding is available for nurses working in community and primary care settings in England, Wales and Northern Ireland. Applications must be received by 31 January 2019 and the chosen projects will start in April and run for 12 months.
CONSULTATION AND CCG GUIDANCE ON PRESCRIBING IN PRIMARY CARE

Primary Care Commissioning - news
A national public consultation has been launched on proposals to update and review commissioning guidance about items that should not be routinely prescribed in primary care. In the majority of cases there are other more effective, safer and/or cheaper alternatives available. CCGs are asked to engage with their local communities on these proposals where they have not already taken action in this area.

**Omega-3 fatty acids for the primary and secondary prevention of cardiovascular disease**
*Cochrane Library*
This is the most extensive systematic assessment of effects of omega-3 fats on cardiovascular health to date. Moderate- and high-quality evidence suggests that increasing EPA and DHA has little or no effect on mortality or cardiovascular health (evidence mainly from supplement trials). Previous suggestions of benefits from EPA and DHA supplements appear to spring from trials with higher risk of bias. Low-quality evidence suggests ALA may slightly reduce CVD event and arrhythmia risk.

**Omega-6 fats for the primary and secondary prevention of cardiovascular disease**
*Cochrane Library*
This is the most extensive systematic assessment of effects of omega-6 fats on cardiovascular health, mortality, lipids and adiposity to date, using previously unpublished data. We found no evidence that increasing omega-6 fats reduces cardiovascular outcomes other than MI, where 53 people may need to increase omega-6 fat intake to prevent 1 person from experiencing MI. Although benefits of omega-6 fats remain to be proven, increasing omega-6 fats may be of benefit in people at high risk of MI. Increased omega-6 fats reduce serum total cholesterol but not other blood fat fractions or adiposity.

**Polyunsaturated fatty acids for the primary and secondary prevention of cardiovascular disease**
*Cochrane Library*
This is the most extensive systematic review of RCTs conducted to date to assess effects of increasing PUFA on cardiovascular disease, mortality, lipids or adiposity. Increasing PUFA intake probably slightly reduces risk of coronary heart disease and cardiovascular disease events, may slightly reduce risk of coronary heart disease mortality and stroke (though not ruling out harms), but has little or no effect on all-cause or cardiovascular disease mortality. The mechanism may be via TG reduction.
**Probiotics for treating eczema**
*Cochrane Library*
Evidence suggests that, compared with no probiotic, currently available probiotic strains probably make little or no difference in improving patient-rated eczema symptoms. Probiotics may make little or no difference in QoL for people with eczema nor in investigator-rated eczema severity score (combined with participant scoring for eczema symptoms of itch and sleep loss); for the latter, the observed effect was small and of uncertain clinical significance. Therefore, use of probiotics for the treatment of eczema is currently not evidence-based. This update found no evidence of increased adverse effects with probiotic use during studies, but a separate adverse events search from the first review revealed that probiotic treatment carries a small risk of adverse events.

**Bariatric surgery, lifestyle interventions and orlistat for severe obesity: the REBALANCE mixed-methods systematic review and economic evaluation**
*NIHR- HTA*
Weight management programmes generally cost less than £20,000/QALY and bariatric surgery, though costly, was the most effective and cost-effective strategy over a 30-year time horizon.

**Telemedicine programme can prolong life for heart failure patients**
*NIHR Signal*
Remote patient management in patients with heart failure might help to detect early signs and symptoms of cardiac decompensation, thus enabling a prompt initiation of the appropriate treatment and care before a full manifestation of a heart failure decompensation. We aimed to investigate the efficacy of our remote patient management intervention on mortality and morbidity in a well defined heart failure population.

**Guided online interventions can help people recover from depression**
*NIHR Signal*
Internet-based interventions combined with remote professional support can improve outcomes for people with depression. Those receiving the intervention show better initial response to treatment and higher recovery rates compared with control groups who are either waiting for treatment or receiving less support.
This meta-analysis shows people using guided internet therapy are over twice as likely to respond to treatment and achieve remission. This finding reinforces current NICE guidance which recommends this type of approach for mild to moderate depression.
**Insulin pumps offer little value over multiple injections for children at the onset of diabetes**

*NIHR Signal*

Young people newly diagnosed with type 1 diabetes achieve similar blood glucose control by 12 months if they are treated with multiple daily insulin injections or continuously via an insulin pump. Adverse events are rare and occur at similar rates. Pumps are more expensive with no clear benefit to quality of life.

**Improving access and continuity in general practice**

*Nuffield Trust – Report*

This summarises our key findings and provides a series of recommendations for commissioners and policy-makers on the impact of improved access upon continuity of care.

**Mental health data and analysis: a guide for health professionals**

*Public Health England – Guidance*

Guidance for commissioners and health professionals to make decisions about mental health services and interventions based on data and analysis.

**Public Health and Lifestyle Services**

**Baclofen for alcohol use disorder**

*Cochrane Library*

None of the primary or secondary outcomes of the review showed evidence of a difference between baclofen and placebo. The high heterogeneity among primary studies results limits the interpretation of the summary estimate, the identification of moderators and mediators of baclofen's effects on alcohol use remains a challenge for further research. Even though some results from RCTs are promising, current evidence remains uncertain regarding the use of baclofen as a first-line treatment for people with AUDs.

**Probiotics for treating eczema**

*Cochrane Library*

Evidence suggests that, compared with no probiotic, currently available probiotic strains probably make little or no difference in improving patient-rated eczema symptoms. Probiotics may make little or no difference in QoL for people with eczema nor in investigator-rated eczema severity score (combined with participant scoring for
eczema symptoms of itch and sleep loss); for the latter, the observed effect was small and of uncertain clinical significance. Therefore, use of probiotics for the treatment of eczema is currently not evidence-based. This update found no evidence of increased adverse effects with probiotic use during studies, but a separate adverse events search from the first review revealed that probiotic treatment carries a small risk of adverse events.

**Strategies to improve the implementation of workplace-based policies or practices targeting tobacco, alcohol, diet, physical activity and obesity**

*Cochrane Library*
Available evidence regarding the effectiveness of implementation strategies for improving implementation of health-promoting policies and practices in the workplace setting is sparse and inconsistent. Low certainty evidence suggests that such strategies may make little or no difference on measures of implementation fidelity or different employee health behaviour outcomes. It is also unclear if such strategies are cost-effective or have potential unintended adverse consequences. The limited number of trials identified suggests implementation research in the workplace setting is in its infancy, warranting further research to guide evidence translation in this setting.

**Bariatric surgery, lifestyle interventions and orlistat for severe obesity: the REBALANCE mixed-methods systematic review and economic evaluation**

*NIHR- HTA*
Weight management programmes generally cost less than £20,000/QALY and bariatric surgery, though costly, was the most effective and cost-effective strategy over a 30-year time horizon.

**UK Public Health Rapid Support Team annual review: 2018**

*Department of Health- Corporate Report*
The UK Public Health Rapid Support Team (UK-PHRST) had its first annual review in July 2018. The annual review sets out reflections on:

- project management
- finance
- lessons learned

The Department of Health and Social Care’s UK-PHRST is a UK aid-funded project delivered through Public Health England and the London School of Hygiene and Tropical Medicine.

The project aims to:

- rapidly investigate and respond to disease outbreaks at the source
- conduct rigorous research to aid epidemic preparedness and response
- build overseas capacity for response to disease outbreaks
The next annual review will be completed in July 2019.

**Urinary tract infection (catheter-associated): antimicrobial prescribing**  
*NICE Guidance*  
This guideline sets out an antimicrobial prescribing strategy for catheter-associated urinary tract infection in children, young people and adults. It aims to optimise antibiotic use and reduce antibiotic resistance.

**Mental health data and analysis: a guide for health professionals**  
*Public Health England - Guidance*  
Guidance for commissioners and health professionals to make decisions about mental health services and interventions based on data and analysis.

Back to topics

**General Practice**

**GPs stopped from prescribing gluten free pizzas, cakes and biscuits**  
*NHS England - news*  
NHS England has already ordered an end to the routine prescribing of 18 low value items such as homeopathy and products that are available over the counter, often at lower cost, to treat 35 minor conditions such as paracetamol and cough mixture. The initiatives could free up more than £200 million a year for reinvestment in frontline care.

**New standard to improve information sharing between community pharmacies and GP practices**  
*NHS Digital - news*  
A new standard that will improve sharing clinical information between community pharmacies and GP practices has been published.

This will allow information that community pharmacists gather from patients when providing services such as vaccinations, medications and guidance with minor ailments and share that information digitally with patients’ GPs.

Improving data sharing between community pharmacies and GP practices is expected to cut medication errors, improve patient safety and reduce administrative work for staff.
The first part of the standard, which has been developed by NHS Digital, the Professional Record Standards Body and other partners, details what information should be recorded about vaccinations administered and emergency medicines supplied by community pharmacies.

**Omega-3 fatty acids for the primary and secondary prevention of cardiovascular disease**
*Cochrane Library*

This is the most extensive systematic assessment of effects of omega-3 fats on cardiovascular health to date. Moderate- and high-quality evidence suggests that increasing EPA and DHA has little or no effect on mortality or cardiovascular health (evidence mainly from supplement trials). Previous suggestions of benefits from EPA and DHA supplements appear to spring from trials with higher risk of bias. Low-quality evidence suggests ALA may slightly reduce CVD event and arrhythmia risk.

**Omega-6 fats for the primary and secondary prevention of cardiovascular disease**
*Cochrane Library*

This is the most extensive systematic assessment of effects of omega-6 fats on cardiovascular health, mortality, lipids and adiposity to date, using previously unpublished data. We found no evidence that increasing omega-6 fats reduces cardiovascular outcomes other than MI, where 53 people may need to increase omega-6 fat intake to prevent 1 person from experiencing MI. Although benefits of omega-6 fats remain to be proven, increasing omega-6 fats may be of benefit in people at high risk of MI. Increased omega-6 fats reduce serum total cholesterol but not other blood fat fractions or adiposity.

**Polyunsaturated fatty acids for the primary and secondary prevention of cardiovascular disease**
*Cochrane Library*

This is the most extensive systematic review of RCTs conducted to date to assess effects of increasing PUFA on cardiovascular disease, mortality, lipids or adiposity. Increasing PUFA intake probably slightly reduces risk of coronary heart disease and cardiovascular disease events, may slightly reduce risk of coronary heart disease mortality and stroke (though not ruling out harms), but has little or no effect on all-cause or cardiovascular disease mortality. The mechanism may be via TG reduction.
**Baclofen for alcohol use disorder**

*Cochrane Library*

None of the primary or secondary outcomes of the review showed evidence of a difference between baclofen and placebo. The high heterogeneity among primary studies results limits the interpretation of the summary estimate, the identification of moderators and mediators of baclofen's effects on alcohol use remains a challenge for further research. Even though some results from RCTs are promising, current evidence remains uncertain regarding the use of baclofen as a first-line treatment for people with AUDs.

**Probiotics for treating eczema**

*Cochrane Library*

Evidence suggests that, compared with no probiotic, currently available probiotic strains probably make little or no difference in improving patient-rated eczema symptoms. Probiotics may make little or no difference in QoL for people with eczema nor in investigator-rated eczema severity score (combined with participant scoring for eczema symptoms of itch and sleep loss); for the latter, the observed effect was small and of uncertain clinical significance. Therefore, use of probiotics for the treatment of eczema is currently not evidence-based. This update found no evidence of increased adverse effects with probiotic use during studies, but a separate adverse events search from the first review revealed that probiotic treatment carries a small risk of adverse events.

**Bariatric surgery, lifestyle interventions and orlistat for severe obesity: the REBALANCE mixed-methods systematic review and economic evaluation**

*NiHR- HTA*

Weight management programmes generally cost less than £20,000/QALY and bariatric surgery, though costly, was the most effective and cost-effective strategy over a 30-year time horizon.

**Guided online interventions can help people recover from depression**

*NiHR Signal*

Internet-based interventions combined with remote professional support can improve outcomes for people with depression. Those receiving the intervention show better initial response to treatment and higher recovery rates compared with control groups who are either waiting for treatment or receiving less support. This meta-analysis shows people using guided internet therapy are over twice as likely to respond to treatment and achieve remission. This finding reinforces current NICE guidance which recommends this type of approach for mild to moderate depression.
**Methylphenidate remains first-choice drug treatment for children and young people with ADHD**

*NIHR Signal*

The stimulant methylphenidate has the best balance of effectiveness against side effects in children and young people with attention deficit hyperactivity disorder. Amphetamines are more effective, but also more likely to be stopped for a reason other than side effects.

This large, NIHR-funded systematic review compared a range of drugs against each other through a network meta-analysis. Effectiveness and tolerability were assessed at about 12 weeks of treatment. Other second-line drug treatments were also effective and well-tolerated, including modafinil which is currently not licensed for children in the UK.

There were some quality issues due to risk of bias. But this study supports NICE guidance on the range of potential drug options to consider in conjunction with behavioural and support strategies for children and young people with attention deficit hyperactivity disorder.

**Joint infection after hip replacement is linked to some risk factors that could be modified**

*NIHR Signal*

Ten years of National Joint Registry data show that many factors may increase the risk of joint infection following hip replacement. Less than 1 in 1,000 people on average needed revision surgery for infection per year.

Several modifiable patient factors increased risk, such as obesity and diabetes. Using ceramic components, and approaching surgery from the back rather than the side of the hip, may slightly reduce infection risk.

**Urinary tract infection (catheter-associated): antimicrobial prescribing**

*NICE Guidance*

This guideline sets out an antimicrobial prescribing strategy for catheter-associated urinary tract infection in children, young people and adults. It aims to optimise antibiotic use and reduce antibiotic resistance.

**Urinary tract infection: diagnostic tools for primary care**

*Guidance - news*

Quick reference materials for primary care on diagnosing and understanding culture results for urinary tract infections (UTI).
NHS screening programmes: information for GPs and practice staff
PHE - Guidance
How to support patients in accessing population screening programmes and obtaining screening results.

Rehabilitation and Occupational Health

Public Health England to issue new guidelines on promoting activity
Chartered Society of Physiotherapy
New guidelines on physical activity, with a focus on musculoskeletal issues and strengthening, are due next year from Public Health England (PHE).

NHS should reuse more medical equipment, says health minister
Chartered Society of Physiotherapy
NHS patients should be able to return equipment they no longer need, such as crutches, walking aids and wheelchairs, so they can be reused or donated to charity, the government has urged.

Physiotherapy

Healthy Spaces: building better places - How a physio helped design a healthy new town
Chartered Society of Physiotherapy
As a physiotherapist, Claire Powell had no experience of environmental design but her vision for encouraging people to be more physically active in urban spaces was shortlisted in an international landscape design competition to create the first garden city in a century. Her Everyday Adventures concept, in collaboration with a Kent-based landscape architectural firm, and environmental charity Commonwork Trust, was selected in July for the first stage of the Ebbsfleet Garden City Landscape for Healthy Living International Design Ideas Competition.
Public Health England to issue new guidelines on promoting activity
Chartered Society of Physiotherapy
New guidelines on physical activity, with a focus on musculoskeletal issues and strengthening, are due next year from Public Health England (PHE).

NHS should reuse more medical equipment, says health minister
Chartered Society of Physiotherapy
NHS patients should be able to return equipment they no longer need, such as crutches, walking aids and wheelchairs, so they can be reused or donated to charity, the government has urged.

Joint infection after hip replacement is linked to some risk factors that could be modified
NIHR Signal
Ten years of National Joint Registry data show that many factors may increase the risk of joint infection following hip replacement. Less than 1 in 1,000 people on average needed revision surgery for infection per year.

Several modifiable patient factors increased risk, such as obesity and diabetes. Using ceramic components, and approaching surgery from the back rather than the side of the hip, may slightly reduce infection risk.

Back to topics

Health Visiting and Nursing

NHS should reuse more medical equipment, says health minister
Chartered Society of Physiotherapy
NHS patients should be able to return equipment they no longer need, such as crutches, walking aids and wheelchairs, so they can be reused or donated to charity, the government has urged.

Urinary tract infection (catheter-associated): antimicrobial prescribing
NICE Guidance
This guideline sets out an antimicrobial prescribing strategy for catheter-associated urinary tract infection in children, young people and adults. It aims to optimise antibiotic use and reduce antibiotic resistance.
Pressure ulcers: safeguarding adults protocol
Department of Health and Social Care - Guidance
This document helps practitioners and managers across health and care organisations to provide caring and quick responses to people at risk of developing pressure ulcers. It also offers a process for the clinical management of harm removal and reduction where ulcers occur, considering if an adult safeguarding response is necessary. Pressure ulcers, which are largely preventable, cause distress to individuals and their families and create financial pressures for the NHS. While the treatment of pressure ulcers is mainly clinical, prevention is a shared responsibility.

Urinary tract infection: diagnostic tools for primary care
PHE - Guidance
Quick reference materials for primary care on diagnosing and understanding culture results for urinary tract infections (UTI).

Social Care

LOCAL GOVERNMENT GREEN PAPER
Primary Care Commissioning - news
The Local Government Association has published the results of a consultation on its green paper on adult social care, which was published in July. The report sets out 14 recommendations to the government from the consultation for achieving two key objectives: stabilising and sustaining the here and now, and moving towards a system that could be better.

Mental Health

One in eight of five to 19 year olds had a mental disorder in 2017 major new survey finds
NHS Digital – news
One in eight (12.8%) of children and young people aged between five and 19, surveyed in England in 2017, had a mental disorder¹ according to a major new report which provides England’s best source of data on trends in child mental health.
“Mental Health of Children and Young People in England, 2017”, published today by NHS Digital, collected information from 9,117 children and young people and combines information - depending on their age - from children and young people or their parents and teachers. For the first time, the survey has covered children aged two to 19, whereas previous surveys have focused only on the five to 15-year-old age group.

**National survey highlights decline in people’s experiences of community mental health services**
*CQC – Press Release*
People’s experiences of the care they receive from community-based mental health services have continued to deteriorate, according to an annual survey from the Care Quality Commission (CQC).

**More than half of patients who finished psychological therapy recovered in 2017-18**
*NHS Digital – News*
A total of 50.8% of courses of treatment for anxiety and depression ended in a patient’s recovery in 2017-18, new statistics from NHS Digital reveal. This is the first financial year when the recovery rate passed 50%. There were 1,440,000 referrals to talking therapies in 2017-18. Of these, 1,010,000 referrals began a course of treatment, with 555,000 finishing treatment, according to figures published in the Psychological Therapies: Annual Report on the use of IAPT services, England, 2017-18.

**Baclofen for alcohol use disorder**
*Cochrane Library*
None of the primary or secondary outcomes of the review showed evidence of a difference between baclofen and placebo. The high heterogeneity among primary studies results limits the interpretation of the summary estimate, the identification of moderators and mediators of baclofen's effects on alcohol use remains a challenge for further research. Even though some results from RCTs are promising, current evidence remains uncertain regarding the use of baclofen as a first-line treatment for people with AUDs.

**Cognitive behavioural therapy plus standard care versus standard care plus other psychosocial treatments for people with schizophrenia**
*Cochrane Library*
Evidence based on data from randomised controlled trials indicates there is no clear and convincing advantage for cognitive behavioural therapy over other - and sometimes much less sophisticated and expensive - psychosocial therapies for people with schizophrenia. It should be noted that although much research has been carried
out in this area, the quality of evidence available is mostly low or of very low quality. Good quality research is needed before firm conclusions can be made.

**Guided online interventions can help people recover from depression**

*NiHR Signal*

Internet-based interventions combined with remote professional support can improve outcomes for people with depression. Those receiving the intervention show better initial response to treatment and higher recovery rates compared with control groups who are either waiting for treatment or receiving less support.

This meta-analysis shows people using guided internet therapy are over twice as likely to respond to treatment and achieve remission. This finding reinforces current NICE guidance which recommends this type of approach for mild to moderate depression.

**Peer support may reduce readmissions following mental health crises**

*NiHR Signal*

People discharged from mental health crisis teams are less likely to re-enter acute services within a year if they receive self-management support. The support in this study was provided by a peer worker, someone with experience of mental illness. The peer worker used a workbook to provide information and talk through recovery goals. The study compared this with those who had received the workbook by post.

**Methylphenidate remains first-choice drug treatment for children and young people with ADHD**

*NiHR Signal*

The stimulant methylphenidate has the best balance of effectiveness against side effects in children and young people with attention deficit hyperactivity disorder. Amphetamines are more effective, but also more likely to be stopped for a reason other than side effects.

This large, NiHR-funded systematic review compared a range of drugs against each other through a network meta-analysis. Effectiveness and tolerability were assessed at about 12 weeks of treatment. Other second-line drug treatments were also effective and well-tolerated, including modafinil which is currently not licensed for children in the UK.

There were some quality issues due to risk of bias. But this study supports NICE guidance on the range of potential drug options to consider in conjunction with behavioural and support strategies for children and young people with attention deficit hyperactivity disorder.
**Mental health data and analysis: a guide for health professionals**

*Public Health England - Guidance*

Guidance for commissioners and health professionals to make decisions about mental health services and interventions based on data and analysis.

[Back to topics](#)

---

**Children and Young People**

**One in eight of five to 19 year olds had a mental disorder in 2017 major new survey finds**

*NHS Digital – news*

One in eight (12.8%) of children and young people aged between five and 19, surveyed in England in 2017, had a mental disorder according to a major new report which provides England’s best source of data on trends in child mental health.

“Mental Health of Children and Young People in England, 2017”, published today by NHS Digital, collected information from 9,117 children and young people and combines information - depending on their age - from children and young people or their parents and teachers.

For the first time, the survey has covered children aged two to 19, whereas previous surveys have focused only on the five to 15-year-old age group.

**Methylphenidate remains first-choice drug treatment for children and young people with ADHD**

*NiHR Signal*

The stimulant methylphenidate has the best balance of effectiveness against side effects in children and young people with attention deficit hyperactivity disorder. Amphetamines are more effective, but also more likely to be stopped for a reason other than side effects.

This large, NIHR-funded systematic review compared a range of drugs against each other through a network meta-analysis. Effectiveness and tolerability were assessed at about 12 weeks of treatment. Other second-line drug treatments were also effective and well-tolerated, including modafinil which is currently not licensed for children in the UK.
There were some quality issues due to risk of bias. But this study supports NICE guidance on the range of potential drug options to consider in conjunction with behavioural and support strategies for children and young people with attention deficit hyperactivity disorder.

**Mental health data and analysis: a guide for health professionals**  
*Public Health England- Guidance*  
Guidance for commissioners and health professionals to make decisions about mental health services and interventions based on data and analysis.

**Older Adults**

**Urinary tract infection (catheter-associated): antimicrobial prescribing**  
*NICE Guidance*  
This guideline sets out an antimicrobial prescribing strategy for catheter-associated urinary tract infection in children, young people and adults. It aims to optimise antibiotic use and reduce antibiotic resistance.

**Pressure ulcers: safeguarding adults protocol**  
*Department of Health and Social Care- Guidance*  
This document helps practitioners and managers across health and care organisations to provide caring and quick responses to people at risk of developing pressure ulcers. It also offers a process for the clinical management of harm removal and reduction where ulcers occur, considering if an adult safeguarding response is necessary. Pressure ulcers, which are largely preventable, cause distress to individuals and their families and create financial pressures for the NHS. While the treatment of pressure ulcers is mainly clinical, prevention is a shared responsibility.

**Mental health data and analysis: a guide for health professionals**  
*Public Health England- Guidance*  
Guidance for commissioners and health professionals to make decisions about mental health services and interventions based on data and analysis.

**Back to topics**
Allied Health Professional

NHS should reuse more medical equipment, says health minister
Chartered Society of Physiotherapy
NHS patients should be able to return equipment they no longer need, such as crutches, walking aids and wheelchairs, so they can be reused or donated to charity, the government has urged.

Back to topics

Pharmacy

New standard to improve information sharing between community pharmacies and GP practices
NHS Digital - news
A new standard that will improve sharing clinical information between community pharmacies and GP practices has been published.

This will allow information that community pharmacists gather from patients when providing services such as vaccinations, medications and guidance with minor ailments and share that information digitally with patients’ GPs.

Improving data sharing between community pharmacies and GP practices is expected to cut medication errors, improve patient safety and reduce administrative work for staff.

The first part of the standard, which has been developed by NHS Digital, the Professional Record Standards Body and other partners, details what information should be recorded about vaccinations administered and emergency medicines supplied by community pharmacies.

GPs stopped from prescribing gluten free pizzas, cakes and biscuits
NHS England - news
NHS England has already ordered an end to the routine prescribing of 18 low value items such as homeopathy and products that are available over the counter, often at lower cost, to treat 35 minor conditions such as paracetamol and cough mixture. The initiatives could free up more than £200 million a year for reinvestment in frontline care.
**NHS PRESCRIPTION SERVICES NEWSLETTER**

*Primary Care Commissioning – news*

NHS Prescription Services produces a quarterly newsletter called Hints and Tips for Dispensing Contractors. The latest edition contains information and advice on endorsing guidance, the national Check Before You Tick campaign and GPs piloting electronic prescriptions for controlled drugs.

**Probiotics for treating eczema**

*Cochrane Library*

Evidence suggests that, compared with no probiotic, currently available probiotic strains probably make little or no difference in improving patient-rated eczema symptoms. Probiotics may make little or no difference in QoL for people with eczema nor in investigator-rated eczema severity score (combined with participant scoring for eczema symptoms of itch and sleep loss); for the latter, the observed effect was small and of uncertain clinical significance. Therefore, use of probiotics for the treatment of eczema is currently not evidence-based. This update found no evidence of increased adverse effects with probiotic use during studies, but a separate adverse events search from the first review revealed that probiotic treatment carries a small risk of adverse events.

Results show significant, unexplainable heterogeneity between individual trial results. Only a small number of studies measured some outcomes. Future studies should better measure QoL scores and adverse events, and should report on new probiotics. Researchers should also consider studying subgroups of patients (e.g. patients with atopy or food allergies, adults) and standardising doses/concentrations of probiotics given.

**Methylphenidate remains first-choice drug treatment for children and young people with ADHD**

*NIHR Signal*

The stimulant methylphenidate has the best balance of effectiveness against side effects in children and young people with attention deficit hyperactivity disorder. Amphetamines are more effective, but also more likely to be stopped for a reason other than side effects.

This large, NIHR-funded systematic review compared a range of drugs against each other through a network meta-analysis. Effectiveness and tolerability were assessed at about 12 weeks of treatment. Other second-line drug treatments were also effective and well-tolerated, including modafinil which is currently not licensed for children in the UK.

There were some quality issues due to risk of bias. But this study supports NICE guidance on the range of potential drug options to consider in conjunction with
behavioural and support strategies for children and young people with attention deficit hyperactivity disorder.

**Urinary tract infection (catheter-associated): antimicrobial prescribing**

*NICE Guidance*

This guideline sets out an antimicrobial prescribing strategy for catheter-associated urinary tract infection in children, young people and adults. It aims to optimise antibiotic use and reduce antibiotic resistance.

**Urinary tract infection: diagnostic tools for primary care**

*PHE - Guidance*

Quick reference materials for primary care on diagnosing and understanding culture results for urinary tract infections (UTI).