

NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

Centre for Clinical Practice

Review of Clinical Guideline (CG50) - Acutely ill patients in hospital

Background information

Guideline issue date: 2007

3 year review: 2010

National Collaborating Centre: Short Clinical Guidelines -Centre for Clinical Practice (NICE)

Final review decision

- The guideline should not be updated at this time.
- The guideline will be reviewed again in 3 years.

Factors influencing the decision

Literature search

1. From initial intelligence gathering and a high-level randomised control trial (RCT) search clinical areas were identified to inform the development of clinical questions for focused searches. 27 studies were identified relevant to the guideline scope which were related to the following clinical areas within the guideline:

- Parameters for physiological “track and trigger” systems.
- The sensitivity and specificity of “track and trigger” systems.
- Clinical and cost-effectiveness of different critical care outreach services.

The latter two clinical areas are also the research recommendations in the guideline.

2. Four review questions were developed based on the clinical areas above, qualitative feedback from other NICE departments and the views expressed by the Guideline Development Group, for the more focused literature searches. In total, 45 studies were identified through the focused searches but no identified new evidence contradicts the current guideline recommendations.

3. No evidence was identified that was sufficiently significant to address the research recommendations in the original guideline.

Guideline Development Group and National Collaborating Centre perspective

4. A questionnaire was distributed to GDG members and the guideline development team asking about the need for an update of the guideline. Two GDG members responded highlighting implementation related issues. There appears to have been a variation in uptake of the recommendations in various settings, with some recommendations being implemented more thoroughly than others.

5. The scope of Guideline was considered to be adequate in its exclusions. Both respondents stated that there is insufficient variation in current practice, supported by adequate evidence at this time to warrant an update of the current guideline.

Implementation and post publication feedback

6. No new evidence was identified through post publication enquiries or implementation feedback that would indicate a need to update the guideline.

Relationship to other NICE guidance

7. The related NICE Guidance CG83 Rehabilitation after critical illness does not affect the need for updating the current NICE guidance as its remit considers rehabilitation of adults after a period of critical illness requiring a stay on ITU. Related guidance to CG50 can be viewed in Appendix 1.

Summary of Stakeholder Feedback

Review proposal put to consultees:

The guideline should not be updated at this time.

The guideline will be reviewed again according to current processes.

8. Fourteen stakeholders commented on the review proposal recommendation during the 2 week consultation period.

9. Ten stakeholders agreed with the review proposal recommendation that this guideline should not be updated at this time.

10. Three of the respondents highlighted issues around two aggregate weighted “track and trigger” systems namely NEWS and ViEWS. NEWS is likely to be published by Royal College of Physicians and implemented within next two years. Recent publication on ViEWS was considered during the literature search. The guideline did not recommend any particular system but set out the various parameters that systems should use. Further evidence from both of the above should contribute to a future review.

11. Specific early warning system in pregnancy was also pointed out as an area that was not covered by the original guideline. The current guideline provided collective recommendations on identification and response strategies for acutely ill adults in hospital without stratifying into specific recommendations for specific subgroups. Recommendations for specific subgroups (including in pregnancy) could be considered in any future reviews if sufficient adequate evidence warrants a decision to do so.

Anti-discrimination and equalities considerations

12. No evidence was identified to indicate that the guideline scope does not comply with anti-discrimination and equalities legislation. The original scope is inclusive of all adult patients in hospital, including patients in the Emergency Department and those in transition.

Conclusion

Through the process no additional areas were identified which would indicate a significant change in clinical practice. There are no factors described above which would invalidate or change the direction of current guideline recommendations. The Acutely ill patients in hospital guideline should not be updated at this time.

Fergus Macbeth - Centre Director
Sarah Willett - Associate Director
Mrityunjai Kumar - Technical Analyst

Centre for Clinical Practice
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Appendix 1

The following NICE guidance is related to CG50:

Guidance	Review date
CG83: Rehabilitation after critical illness, 2009	Expected review date: March 2012