

PRESS RELEASE

NICE clinical guideline sets out recommendations for NHS care of people who have suffered a head injury

The National Institute for Clinical Excellence (NICE) has issued its latest clinical guideline, on the triage, assessment, investigation and early management of head injury within the NHS in England and Wales. Each year 1.4 million people attend hospitals in England and Wales after suffering a head injury, of whom 150,000 are admitted to hospital. Although most patients recover without specific or specialist treatment, in others, persistent disability or even death can result from the effects of complications, which can potentially be minimised or avoided with early detection and appropriate treatment. The NICE guideline will ensure that no matter where people live in England and Wales, they can be confident that the health professionals caring for them are working to high-quality evidence based national standards.

Today's guideline, *Triage, Assessment, Investigation and Early Management of Head injury in Infants, Children and Adults*, outlines best practice for health professionals caring for individuals who have suffered a head injury, including:

- Initial assessment (for example, appropriate use of the Glasgow Coma Scale and Glasgow Coma Score to measure the level of consciousness, and the provision of appropriate training for GPs, nurse practitioners, dentists and paramedics to ensure they can accurately triage head injured patients).
- Recommendations to telephone advice services (for example, NHS Direct), Community Health Services and NHS minor injury clinics on when it is appropriate to refer patients who have sustained a head injury to a hospital A&E department.
- Assessment and investigation in A&E, ensuring that the main focus is establishing the risk of clinically important brain injuries and injuries to the cervical spine and the consequent need for imaging.
- Risk factors which determine the selection of patients for CT imaging of the head and cervical spine, and the time-frame within which this needs to be carried out.

In addition, the guideline makes clear recommendations about when it is appropriate to admit patients to hospital following a head injury, about what level of care they should receive whilst in hospital and about protocols when transferring patients to specialist head injury units. Finally, the guideline makes detailed recommendations about when and how patients presenting with a head injury should be discharged from hospital.

The National Collaborating Centre (NCC) for Acute Care has developed the guideline. The NCC is a group of health professional and patient/carer organisations who manage the development of clinical guidelines for NICE. The NCC follow international standards of guideline development. They established a guideline development group consisting of service users and carers, health professionals and academics who reviewed the worldwide data alongside current clinical practice and the experience of service users; and the feedback they receive from two rounds of widespread consultation.

Professor Peter Littlejohns, Clinical Director and Executive Lead, said: “Some of the guideline’s key recommendations concern when it is appropriate to use CT scanning to diagnose clinically important injuries to the brain and cervical spine, the net effect of which will be to substantially increase its use. Clearly, whilst it is in the interests of service users that the implementation timeline, as determined by each local health community, is as rapid as possible, we do recognise that the full implementation of this guideline will require investment over the longer term, particularly in areas such as staff training and recruitment needed to address current staff shortages in radiology.

Professor Littlejohns continued: “In addition, it is also likely that full implementation of this guideline will require continuing investment in new scanning equipment, as well as expansion of the out-of-hours scanning capacity. Nevertheless, we would urge NHS organisations to review the skills of existing staff and teams, identify gaps and put in place training arrangements that will ensure that staff are adequately equipped to implement the recommendations in this guideline.”

Professor David Yates, Chairman of the Guideline Development Group, said: “Every day thousands of, mainly young, people attend their local Emergency Department after suffering a head injury. Early diagnosis and appropriate management improves outcomes but is sometimes more difficult to achieve than might be imagined. However, this new guideline, based on a review of the most up-

to-date research, identifies improved methods of initial assessment and care that have very recently been shown to be both safe and effective. It will mean some changes to the way we manage head injured patients but should lead to a reduction in the number of unnecessary admissions and a more focussed system of head injury care. Careful analyses must be undertaken to monitor the effectiveness of the new guideline but I am optimistic that it will lead to a real reduction in the burden imposed on our young people by this modern epidemic.”

Graham Nickson, Policy and Campaigns Manager of brain injury association Headway and a member of the Guideline Development Group said: “Headway welcomes the head injury clinical guideline as an important step in raising the standard of medical care in hospital for people who have sustained a head injury.”

Ends

Notes to Editors

About NICE

1. NICE is part of the NHS. It is the independent organisation responsible for providing national guidance on treatments and care for those using the NHS in England and Wales. Its guidance is for healthcare professionals and patients and their carers to help them make decisions about treatment and healthcare. For further information about NICE you can visit www.nice.org.uk.
2. NICE produces guidance in three areas of health:
 - the use of new and existing medicines and treatments within the NHS in England and Wales – technology appraisals
 - the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales – clinical guidelines.
 - whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use– interventional procedures.
3. NICE also funds three enquiries that undertake research into the way patients are treated to identify ways of improving the quality of care (the investigations are known as confidential enquiries).
4. NICE guidance and recommendations are prepared by independent groups that include professionals working in the NHS and people who are familiar with the issues affecting patients and carers.

About clinical guidelines

5. Clinical guidelines are recommendations on the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales. They sit alongside, but do not replace, the knowledge and skills of experienced health professionals.
6. NICE clinical guidelines are developed by independent groups that include healthcare professionals working in the NHS, patients and people who are familiar with the issues affecting patients and carers. Professional and patient/carer groups whose members are likely to be affected by the guideline are able to submit information and comment on the recommendations before they are finalised.

7. For details of NICE clinical guidelines currently in development, log on to the website at <http://www.nice.org.uk/catcq1.asp?c=20055>.

About the head injury guideline

8. A briefing sheet on the guideline is also available on the NICE website at <http://www.nice.org.uk/cat.asp?c=56817>. This sheet contains information on head injuries, together with more details on the guideline.

The National Collaborating Centre for Acute Care is based at the Royal College of Surgeons. The following partners have member status on the management board of the centre:

- [Faculty of Dental Surgery](#)
- [Royal College of Anaesthetists](#)
- [Royal College of Ophthalmologists](#)
- [Royal College of Surgeons](#)
- [Department of Public Health and Policy, London School of Hygiene and Tropical Medicine](#)
- [Patient liaison group, Royal College of Surgeons](#)

Additional professional partners include:

- [Royal College of General Practitioners](#)
 - [Royal College of Nursing](#)
 - [Royal College of Physicians](#)
 - [Royal College of Pathologists](#)
 - [Royal College of Radiologists](#)
 - Clinical Effectiveness Forum for Allied Health Professionals
 - [Intensive Care Society](#)
 - [Ambulance Association](#)
 - [British Association for Accident & Emergency Medicine](#)
 - All surgical and dental speciality associations
9. Local health communities should review their existing service provision for people with head injuries against this guideline as they begin the development of their Local Delivery Plans. The review should consider the resources required to implement fully the recommendations set out in Section 1 of the guideline, the people and processes involved, and the timeline over which full implementation is envisaged.