



Surveillance report 2016 – Hyperglycaemia in acute coronary syndromes: management (2011) NICE guideline CG130

Surveillance report

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Surveillance decision

We will transfer the guideline to the [static list](#) because:

- No evidence was identified that would impact on the current guidance and no major ongoing research has been identified as due to be published in the near future (that is, within the next 3–5 years).
- We will consider integrating this guideline into other related NICE guidelines on acute coronary syndromes in the future.

Reason for the decision

We found 12 new studies through surveillance of this guideline.

This included new evidence on metabolic management of acute coronary syndromes (ACS) and hyperglycaemia in patients with a diagnosis of diabetes and patients without a previous diagnosis of diabetes that supports current recommendations. We also found new evidence on risk factors associated with diabetes in patients with hyperglycaemia. None of the new evidence was thought to have an effect on current recommendations. We asked topic experts whether the new evidence would affect current recommendations on hyperglycaemia in acute coronary syndromes. Generally, the topic experts thought that an update was not needed.

We did not find any new evidence on information that patients with ACS and hyperglycaemia (who are at high risk for developing diabetes) should be provided.

None of the new evidence considered in surveillance of this guideline was thought to have an effect on current recommendations.

In addition, no major ongoing studies or research due to be published in the next 3–5 years was identified.

Other related NICE guidelines on acute coronary syndromes were identified through surveillance into which this guideline can be integrated.

Equalities

No equalities issues were identified during the surveillance process.

Overall decision

After considering all the new evidence and views of topic experts, we decided not to update this guideline and transfer to the static list.

We will consider integrating this guideline into other related NICE guidelines on acute coronary syndromes in the future.

See [how we made the decision](#) for further information.

Commentary on selected new evidence

With advice from topic experts we did not select any studies for further commentary.

How we made the decision

We check our guidelines regularly to ensure they remain up to date. We based the decision on surveillance 4 years after the publication of [hyperglycaemia in acute coronary syndromes: management \(2011\) NICE guideline CG130](#).

For details of the process and update decisions that are available, see [ensuring that published guidelines are current and accurate](#) in 'Developing NICE guidelines: the manual'.

Previous surveillance [update decisions](#) for the guideline are on our website.

New evidence

We found 9 new studies in a search for randomised controlled trials and systematic reviews published between 18 September 2012 and 11 February 2016.

Evidence identified in previous surveillance 2 years after publication of the guideline was also considered. This included 3 studies identified by search on the 2-year surveillance decision.

From all sources, 12 studies were considered to be relevant to the guideline.

We also checked for relevant ongoing research, which will be evaluated again at the next surveillance review of the guideline.

See [appendix A](#): summary of new evidence from surveillance and references for all new evidence considered.

Views of topic experts

We considered the views of topic experts, including those who helped to develop the guideline.

Views of stakeholders

Stakeholders commented on the decision not to update the guideline and to transfer the guideline to the static list. Comments received from stakeholders at consultation supported the decision not to update the guideline and to transfer the guideline to the static list. See [appendix B](#) for stakeholders' comments and our responses.

See [ensuring that published guidelines are current and accurate](#) in 'Developing NICE guidelines: the manual' for more details on our consultation processes.

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