

**NATIONAL INSTITUTE FOR HEALTH AND CARE
EXCELLENCE**

Centre for Clinical Practice – Surveillance Programme

Recommendation for Guidance Executive

CG146: [Osteoporosis: assessing the risk of fragility fracture](#)

Proposal for GE

GE is asked to consider the following proposal and the attached paper:

- The clinical guideline CG146: Osteoporosis should not undergo a surveillance review at the 2-year timepoint.
- The next surveillance review should be scheduled to begin after the MTAs to replace TA160, 161 and 204 have completed.

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Decision on surveillance strategy for CG146: [Osteoporosis: assessing the risk of fragility fracture](#)

Background information

Guideline issue date: August 2012

1. Two year surveillance reviews are currently based on related Evidence Update products as outlined in the [interim clinical guideline surveillance process and methods guide 2013](#). The related NICE Evidence Update is used as the basis for judgements about changes in evidence since guideline publication.

Surveillance strategy decision

2. A surveillance review decision on the clinical guideline CG146: Osteoporosis should not be undertaken at the 2-year surveillance timepoint.

Factors influencing the decision

3. At Guidance Executive on 8 April 2014 it was agreed that an Evidence Update on this topic would no longer be required for the following reason:
 - a. There were a number of earlier TAs relating to two generations of treatment for osteoporosis. These TAs were based on a risk assessment tool which was, subsequently, altered in context by CG146. Technology Appraisals have undertaken a feasibility study to bring the TAs in line with the clinical guideline and this formed the basis of the decision to conduct MTAs to replace TA160, 161 and 204.
 - b. On this basis, any amendments to the risk assessment approach at this time would not enable a consistent approach across programmes.
4. Given the forthcoming MTAs, a surveillance decision on CG146: Osteoporosis is no longer required at the 2-year timepoint.

Implications for other NICE programmes

5. A Quality Standard on osteoporosis has been referred with a provisional start date still to be agreed.

Conclusion

6. Based on the above information it is proposed that the clinical guideline CG146: Osteoporosis should not undergo a surveillance review at the 2-year timepoint. The next surveillance review should be scheduled to begin after the MTAs to replace TA160, 161 and 204 have completed.

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