National Clinical Guideline Centre

Excluded economic studies

Pneumonia

Diagnosis and management of community- and hospital-acquired pneumonia in adults

Clinical guideline 191 Appendix K 3 December 2014

Final version

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Disclaimer

Healthcare professionals are expected to take NICE clinical guidelines fully into account when exercising their clinical judgement. However, the guidance does not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of each patient, in consultation with the patient and/or their guardian or carer.

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1 CAP

1.1 Diagnostic tools

Reference	Reason for exclusion
Oppong 2013 ⁹ [NOR/SWE]	This study has been selectively excluded as the NCGC reanalysed the paper to include UK costs and the results of the applicable review.
Cals 2011 ³	This study has been selectively excluded due to the inclusion of more applicable evidence.

1.2 Severity assessment

Reference	Reason for exclusion
Jo 2012 ⁵	This study was assessed as not applicable with very serious limitations. The study was performed in South Korea, where the pathogens causing pneumonia are significantly different to those in the UK. In addition, the paper does not provide cost components and the calculation of cost savings does not appear correct, leading to uncertainty in the results.

1.3 Microbiological tests

Reference	Reason for exclusion
Sinclair 2012 ¹⁴ [CAN]	This study undertakes a cost-effectiveness analysis of pneumococcal antigen test against other tests. It has been selectively excluded due to its exclusion from the clinical review.
Oosterheert 2003 ⁸ [NET]	This study creates an algorithm to estimate the cost savings from performing gram stains and pneumococcal antigen tests. Selectively excluded due to the availability of more applicable evidence.

1.4 Antibiotic therapy

Reference	Reason for exclusion
Backhouse1995 ¹ [UK]	Selectively excluded due to very serious limitations including the age of the study, age of effectiveness data and that the effectiveness data used in the model was selected by a panel of GPs.
Bassi 1998 ² [ITA]	This study compares seven different antibiotics across three classes but only compares antibiotic costs against length of stay producing cost- effectiveness ratios, with no incremental analysis presented.
Metge2001 ⁶	Excluded as it was a cost minimisation analysis considering only cost of drugs.
Nicolle 1996 ⁷ [CAN]	This study compares the cost of antibiotics, nurse time and supplies when comparing ceftriaxone and ampicillin. However, no incremental analysis is performed.
Richerson1998 ¹⁰ [US]	This study compares azithromycin and levofloxacin, but within the model uses clinical data from File1997 ⁴ , which has been excluded in the clinical review due to methodological issues.
Rittenhouse2000 ¹² [US]	The analysis of this study was based on the clinical trial by File1997 ⁴ which has been excluded from the clinical review.
Rittenhouse1999 ¹¹ [US]	The analysis of this study was based on the clinical trial by File1997 ⁴ which has been excluded from the clinical review.
Siegel 1999 ¹³ [US]	Excluded as it was a cost analysis considering only cost of drugs.
vanBarlingen1998 ¹⁵	Excluded as it was a cost comparison study and no incremental cost-

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Reference

Reason for exclusion

effectiveness ratio could be calculated.

1.4.1 Timing of antibiotic therapy

None identified.

1.4.2 Duration of antibiotic therapy

None identified.

1.5 Glucocorticosteroid treatment

None identified.

1.6 Gas exchange

None identified.

1.7 Monitoring

None identified.

1.8 Safe discharge

None identified .

1.9 Patient information

None identified .

2 HAP

2.1 Diagnostic tools

None identified .

2.2 Severity assessment

None identified.

2.3 Microbiological tests

None identified .

2.4 Antibiotic therapy

None identified.

2.4.1 Timing of antibiotic therapy

None identified.

2.4.2 Duration of antibiotic therapy

None identified.

2.5 Glucocorticosteroid treatment

None identified.

2.6 Gas exchange

None identified .

2.7 Monitoring

None identified .

2.8 Safe discharge

None identified.

2.9 Patient information

None identified.

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