

National Institute for Health and Care Excellence

Medical technologies evaluation programme

GID-HTE10020 Digital health technologies to help manage symptoms of psychosis and prevent relapse in adults and young people Consultation comments table

There are 13 consultation comments from 2 consultees:

- 13 comments from 2 professional organisation

The comments are reproduced in full, arranged in the following groups (**some comments contain multiple issues and have been split**):

- Recommendations: comments 1 to 3
- Care pathway: comments 4 to 6
- Cost-effectiveness: comments 7 to 9
- Evidence generation: comment 10
- Implementation: comments 11 to 13

#	Consultee ID	Role	Section	Comments
Recommendation				
1	1	Organisation	1.3	This topic was originally about adults, not children. Please can you confirm why there is also an inclusion of children and what ages? What is the rationale for discussing both as they would be treated in different way (at different ages), so unsure what the comparator is. I'm not sure it's clear through the document then what is referred to adults and what to children, so this needs to be clearer in the document. 'More research' could be interpreted as a positive signal from NICE, but later on in the document it says that there is no research at all. This framing needs to be clearer there is currently no research in this space or removed.
2	1	Organisation	1.6	Are these recommended for older adults as well as working age adults? If so, access to and familiarity with DHTs needs to be considered
3	2	Organisation	1.6	In section 3.9 on managing risks, it says that 'For all the technologies, there were a few serious adverse events that were possibly related to the technology'. Can this be included here as well to highlight that there have been serious adverse events possibly related to the technologies.

				Section 3.9 also says: 'CareLoop uses an algorithm to recognise worsening mental health and potential relapse. The committee considered that services would need staff and resources to monitor and respond to these alerts, and to escalate care when needed.' Could something also be added to the section here on clinical support regarding the need to set up systems to monitor and respond to these alerts.
Care pathway				
4	1	Organisation	2.2	Where it states 'longer term treatment' should state 'After 3 years in a EIP service following a first episode of psychosis, longer term...' Also 'longer term treatment and care may then be provided in primary care or secondary care including EIP services' - remove EIP services from that list Remove 'subsequent' from final sentence
5	1	Organisation	2.4	Include 'do not have access to' in second sentence. I.e. 'most adults with psychosis who are having treatment outside of early intervention psychosis services do not have access to the' Instead of 'another option for managing symptoms' it should read 'offering a non-medical intervention'
6	2	Organisation	2.3	2.3. In-line with NICE recommendations (rec 1.3.4.1 and 1.4.2.1 in CG178 and 1.3.11 in CG155) can it say 'oral antipsychotic' rather than just 'antipsychotic'
Cost-effectiveness				
7	2	Organisation	2.6	The NICE guideline on Psychosis and schizophrenia in adults CG178 includes recommendations on physical health checks for people with psychosis or schizophrenia (e.g. see section 1.1.3 and 1.5.3.1 to 1.5.3.5) and recommendations on monitoring for people on antipsychotics (such as response to treatment, monitoring for side-effects and movement disorders, weight and waist measurements, blood pressure and pulse, blood glucose/HbA1c, lipids and overall physical health-e.g. see rec 1.3.6.4). These physical health checks, medication reviews and associated monitoring checks would still need to be done if someone was using the CareLoop digital health technology. Has this been taken into account in cost-effectiveness and resource use calculations?
8	2	Organisation	3.5	The NICE guideline on Psychosis and schizophrenia in adults CG178 includes recommendations on physical health checks for people with psychosis or schizophrenia (e.g. see section 1.1.3 and 1.5.3.1 to 1.5.3.5) and recommendations on monitoring for people on antipsychotics (such as response to treatment, monitoring for side-effects and movement disorders, weight and waist measurements, blood pressure and pulse, blood glucose/HbA1c, lipids and overall physical health-e.g. see rec 1.3.6.4). These physical health checks, medication reviews and associated monitoring checks would still need to be done if someone was using the CareLoop digital health technology. Has this been taken into account in cost-effectiveness and resource use calculations?
9	2	Organisation	Are the summaries of clinical and cost effectiveness reasonable	The NICE guideline on Psychosis and schizophrenia in adults CG178 includes recommendations on physical health checks for people with psychosis or schizophrenia (e.g. see section 1.1.3 and 1.5.3.1 to 1.5.3.5) and recommendations on monitoring for people on antipsychotics (such as response to treatment, monitoring for side-effects and movement disorders, weight and waist measurements, blood pressure and pulse, blood glucose/HbA1c, lipids and overall physical health-e.g. see rec 1.3.6.4). These physical health checks,

			interpretations of the evidence?	medication reviews and associated monitoring checks would still need to be done if someone was using the CareLoop digital health technology. Has this been taken into account in cost-effectiveness and resource use calculations?
Evidence generation				
10	2	Organisation	1.6	Bullet point 2: 'rates of relapse or worsening of symptoms, including patient safety monitoring, frequency and effectiveness of continued or repeated use.' This bullet point covers several different issues (e.g. rates of relapse, safety monitoring and effectiveness of continued or frequent use). Could these issues be covered in more than 1 bullet to make it clearer regarding what requires more research.
Implementation				
11	1	Organisation	1.2	Will there be resources available? These companies are not privately funded organisations, but academic groups
12	1	Organisation	1.2	Will there be resources available? These companies are not privately funded organisations, but academic groups
13	1	Organisation	1.5	As above re funding

"Comments received in the course of consultations carried out by NICE are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the submissions that NICE has received, and are not endorsed by NICE, its officers or advisory committees."