National Institute for Health and Care Excellence

IP1054 – Phrenic nerve transfer in brachial plexus injury

Consultation Comments table

IPAC date: 13 September 2013

Com.	Consultee name and	Sec. no.	Comments	Response
no.	organisation			Please respond to all comments
1	NHS Professional	1	It should be absolutely clear that this procedure should not be used in children. Phrenic nerve injury in children can cause life threatening respiratory problems.	Thank you for your comment. Most of the patients in studies presented in the Overview were younger male patients (mean age range between 23 and 31 years), with total brachial avulsion or trunk injuries caused by accidents. There were very few patients (2% in 1 study) with obstetric damage. One specialist adviser also stated that the procedure is contraindicated for obstetric brachial plexus injuries. IPAC added a Committee comment in a section 6 of the guidance which states that The Committee was advised that impairment of respiratory function is of particular concern in children and in general this procedure would not be suitable for children.

Com.	Consultee name and	Sec. no.	Comments	Response
no.	organisation			Please respond to all comments
2	NHS Professional	2	As above. It should be absolutely clear that this procedure should not be used in children. Phrenic nerve injury in children can cause life threatening respiratory problems.	Thank you for your comment.
				Section 2 in the guidance is a short summary of the indication and current treatments and a brief description about the procedure.
				See response to comment 1.
3	NHS Professional	5	I have some concerns regarding safety of dividing the Phrenic nerve, having observed long term problems with recurrent chest infections in patients with injury to the Phrenic nerve. I would advise life time follow-up in cases performed. Phrenic nerve injury in children can cause life threatening respiratory problems.	Thank you for your comment. The papers presented in the Overview do not identify any cases of recurrent chest infection following the procedure. The Specialist Advisers identified chest infections as a theoretical adverse event but this was not included in the draft Guidance.
				See response to comment 1

"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."