National Institute for Health and Care Excellence

IP1815 Artificial iris insertion for congenital aniridia

IPAC date: 16 January 2020

Com. no.	Consultee name and organisation	Sec. no.	Comments	Response Please respond to all comments
1.	Consultee 1 RNIB	**1.2**	Given the comments provided by the Aniridia Network in their submission, we would suggest that studies which compare outcomes between solid and flexible artificial irises should also be included in the recommendations.	Thank you for your comment. Section 1.2 of the draft guidance has been changed to include details of the type of implant used.
2.	Consultee 2 NHS England Specialised Commissioning	**1.1**	NHS England's Specialised Commissioning Specialised ENT & Ophthalmology Clinical Reference Group agreed and supported the conclusions in the draft consultations for Artificial iris insertion for congenital aniridia that this procedure should only be used in research.	Thank you for your comment. Consultee agrees with main recommendation.
3.	Consultee 3 Aniridia Network Patient organisation	**General**	We are happy to see that separate recommendations have been made for congenital and acquired aniridia. We would like to see NICE consider the pros and cons of flexible silicone implants separately from the rigid non-flexible implants. These two different types of implants could have different potential complications and one may be superior to the other, or they may both have their merits but one may be more appropriate than the other depending on a patients individual needs. We think some recommendations for clinicians on when each type of implant should/should not be used would be helpful (if this cannot be be done now, then in the future when more data is available). We also do not want the differing cost of the two implant types to lead to patients getting an inferior treatment option.	Thank you for your comment. Section 1.2 of the draft guidance has been changed to include details of the type of implant used. Cost is not within the remit of the IP programme.

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