National Institute for Health and Care Excellence IP1800 Magnetic resonance therapy for knee osteoarthritis

IPAC date: 10-06-2021

Com.	Consultee name and	Sec. no.	Comments	Response
no.	organisation			Please respond to all comments
1	Consultee 1 Company Cell Regeneration Itd	General and 3.6	This is a very inaccurate analysis of the MBST technology. The comment of the low fields would mean that it would not create impact just proves that whoever was head of interpreting the data did not understand it. The basic science proves that MBST is not magnetic fields it instead is magnetic resonance. Therefore completely debunks your overall analysis. The fields don't require to be higher and if they were, MRI is used at 10,000 times higher millitesla so even if that was a factor there is already evidence approved by nice that MRT is safe!	Thank you for your comments. Interventional procedures advisory committee (IPAC) considered your comments about interpretation of science and noted that it is the magnetic field that resonates and passes through the knee and the energy is provided by the magnetic field. Therefore, IPAC did not agree to make any changes to section 3.6 or section 1 in the guidance. 3 relevant clinical studies published in English language focusing on osteoarthritis of the knee were included in table 2 in the overview. Other relevant studies published in German language or other languages, in-vitro studies, animal studies, reviews were not included, in line with IP process and methods. In further searching undertaken post discussion at the committee, we have found 2 studies

			Also, the studies analysed were not the correct ones and may I make a comment that no patient comments were ever requested or sought after by nice. Very disappointed by the inaccuracy of nice and this process.	(Levers 2011 a cohort study, and Schmidt 2021 a scoping review). IPAC discussed these studies and added them to table 2 in the overview. NICE's public involvement programme (PIP) made efforts to obtain patient commentary for this procedure in line with our usual processes. They have sent patient survey to Arthritis Action, ARMA – the Arthritis and Musculoskeletal Alliance, National Rheumatoid Arthritis Society (NRAS) and Versus Arthritis with the intention that the organisations promote the survey to their communities. They have also asked the organisations to respond with a submission which could have been presented at IPAC meeting. Unfortunately, there has been a lack of response from patient organisations. NICE PIP was unable to send questionnaires to clinicians as contact details were not available.
2	Consultee 1 Company Cell Regeneration Itd	General	'I have used the technology for 10 years on our patients within our physiotherapy clinic and this is extremely disturbing how wrongly NICE interpreted the data. It has made me lose faith completely in its capabilities as an organisation.'	Thank you for your comments. NICE interventional procedures programme has followed the published processes and methods for development of this guidance. IPAC discussed your comments about interpretation of data but decided not to amend the guidance.

[&]quot;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."