

**Health Technology Appraisal  
Ischaemic heart disease – coronary artery stents (review)  
Appraisal Consultation Document**

Thank you for giving me the opportunity to respond to this document.

My comments are as follows:

**i) Do you consider that all the relevant evidence has been taken into account?**

I am very concerned that the British Cardiac Society do not feel that this is the case and I feel that their views should be considered very carefully before finalising this guidance. I feel the guidance in its current form would leave cardiologists in a very difficult position where they are forced to deliver less than optimal therapy, and that this will have a very demoralising effect on both the doctors and their patients.

**ii) Do you consider that the summaries of clinical and cost effectiveness are reasonable interpretations of the evidence and the preliminary views on the resource impact and implications for the NHS are appropriate?**

I do not feel in a position to comment on the validity of the summaries but, once again, I am very concerned that the British Cardiac Society do not feel that the economic analysis is sound and I feel that their views should be considered very carefully before finalising this guidance.

**iii) Do you consider that the provisional recommendations of the Appraisal Committee are sound and constitute a suitable basis for the preparation of guidance to the NHS?**

No, I do not. Whilst I have no argument with your data I do not think that the figure of £600 can determine the treatment that individuals receive. We need to be pro-active and get the cost of Drug Eluting Stents reduced rather than just accepting an inferior level of service. How does Scotland and the rest of Europe manage to afford them?

**iv) Are there any equality related issues that may need special consideration?**

Yes, there are. The proposal to introduce, what is effectively a two tier system, i.e. those who can afford to pay and those who have paid through their national insurance contributions, is totally unacceptable.

Liz Clark  
Expert Patient

15<sup>th</sup> August, 2007