REF: NR/CB/JSM

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Dr Elisabeth George
Associate Director, Centre for Health Technology Evaluation
National Institute for Health and Clinical Excellence
MidCity Place
71 High Holborn
London WC1V 6NA

Dear Dr George

National Osteoporosis Society comments on Technology Appraisals (TA) 160/161 Decision Support Unit (DSU) report

Thank you for inviting comment on the contents of the (DSU) report. I assume, as we have not been contacted with further information, that an unredacted version of the report was not made available.

I feel that the issue surrounding the documentation of the model is being viewed differently by NICE and the consultees. There is no argument that the model has been detailed in the public domain. However, describing the contents of the model is different from the request being made by consultees which is a well documented model; allowing full understanding of the entries in cells within the worksheets and assumptions within the model. It is evident within the report that the DSU team had some problems understanding the model themselves (p.42 “The DSU could not establish the rationale for including the variables ‘phbonusat2.5’ and wristbonus2.5”).

This request for well documented economic models is a larger issue NICE should consider to address the elements of Patient Access Scheme Submission documents which rely on updating economic models and providing sensitivity analysis to support submissions.

Although some issues raised by consultees did relate to input assumptions, which were not to be considered by the DSU, we still feel that these issues indicate that the assessments have not done justice to people with osteoporosis. Moreover, changes should be made as there are inconsistencies between the model and guidance. It should not matter whether these change the cost-effectiveness but, for example, calculating a risk using >2 units of alcohol daily but issuing guidance of >4 units could cause confusion and also misrepresents the known data.

We remain dissatisfied with the current technology appraisals and hope that the NICE Guidance Executive seriously considers reviewing and revising TA 160 and 181 in July 2010. The National Osteoporosis Society will be very disappointed if NICE does not pursue revising this guidance to ensure it is workable and relevant to those providing and needing treatment.

Yours sincerely