

21 November 2017

Optical Diagnosis Implementation Group statement in response to NICE diagnostics guidance 28:

Virtual chromoendoscopy to assess colorectal polyps during colonoscopy

It has been identified that there are currently several barriers preventing immediate safe implementation of DG28 in the UK. These barriers include

- lack of HD endoscopy equipment throughout UK
- lack of validated training materials and training pathway
- lack of assessment and certification process
- ability to audit outcomes

Following publication of DG28 by NICE in May 2017, relevant stake holders from UK endoscopy (British Society of Gastroenterology, Joint Advisory Group, Association of Coloproctology of Great Britain and Ireland) met with NICE to discuss these issues in the context of implementation of DG28.

As a result of this meeting an *Optical Diagnosis Implementation Group (ODIG)* was formed to develop a cohesive strategy to facilitate safe implementation of the DG28 guidance in the UK practice.

ODIG welcomes the role the NICE guidance DG28 could play in improving quality and supporting innovation. The group is committed to addressing the current deficiencies in UK endoscopic technology and training to allow implementation of this guidance and more importantly improvement of endoscopy quality.

We anticipate that overcoming these barriers and developing and validating the right infrastructure required to support the implementation of DG28 is likely to take 3-5 years to reach general clinical practice, with pilot and pathfinder sites starting earlier. This is however dependent upon an appropriate level of support, particularly in regards to training modules and competency assessment.

ODIG have concluded that until this work is completed implementation of DG28 is currently very challenging in the UK. We therefore advise that a robust training and governance structure needs to be in place and endoscopy services in the UK should wait until this has been developed and validated before implementing DG28.

NICE has committed to work with us on helping to overcome the barriers to implementing DG28 and views the engagement with ODIG and the professional bodies as a positive and constructive process which will ensure clinically appropriate use of the guidance.

Brian McKaig

Chair, Optical Diagnosis Implementation Group