NICE National Institute for Health and Care Excellence

NICE Medical Technologies Evaluation Programme

TECHNOLOGY SELECTION QUESTIONNAIRE

Virtual Touch Quantification has been notified as a technology for possible inclusion in NICE's medical technologies work programme. **Virtual Touch Quantification is a technology used to measure the stiffness of a patient's liver and thus determine the amount of fibrosis in the liver tissue. Liver fibrosis occurs in people with hepatitis B and C, alcoholic liver disease and other conditions such as cystic fibrosis. In these patients it is important to determine the amount of fibrosis and monitor it over time. This is usually done by performing a liver biopsy, which is invasive and can lead to complications such as internal bleeding and infection. Virtual Touch Quantification uses Acoustic Radiation Force Impulse (ARFI) technology to measure the amount of fibrosis in the liver. The procedure is non-invasive and painless, and the results are available quickly. It is claimed that Virtual Touch Quantification provides an alternative to liver biopsy at a reduced cost and with greater benefits for patients. Further information can be found at: http://healthcare.siemens.com/ultrasound/tissue-strain-analytics/virtual-touch-tissue-quantification**

The NICE Medical Technologies Advisory Committee, which includes lay people, will consider this technology and assess it against formal criteria to decide how important it is that NICE develops guidance on the technology in the future.

To inform the work of the Committee, we welcome your views on this technology, the condition it treats, and any opinions you might have as to advantages or disadvantages of adoption of the technology. We would particularly ask you to comment about this technology in comparison with existing methods of diagnosis or treatment. Any information you can provide would be helpful. If you feel that a question isn't relevant or you don't have a particular view on that question, please leave it blank.

Please note that the fact that NICE is considering this technology is confidential at this stage. Please do not elicit comments via your website, or advertise this opportunity publically in any other way. You may circulate this questionnaire internally within your organisation.

A. About you

1. Your name	**Andrew Langford**
2. Name of organisation	British Liver Trust

3. Job title or position	Chief Executive
4. Are you (please tick all that apply)	☒ an employee of a patient/voluntary organisation relevant to the technology
	☐ a patient with a condition relevant to the technology
	☐ a carer of a patient with a condition relevant to the technology
	☐ a health professional with expertise in this area (please specify which patient or carer organisation you are linked to):
	☐ other (please specify):

B. Benefits for patients

5. What do patients and/or carers consider to be the benefits of **Virtual Touch Quantification** for identifying **liver fibrosis** compared with how the condition is currently diagnosed or monitored?

   These might include the effect of **Virtual Touch Quantification** on:

   - their physical symptoms, level of disability, pain, mental health etc.
   - their quality of life (e.g. lifestyle, work, activities of daily living etc.)
   - how quickly and/or accurately they receive a diagnosis
   - greater convenience or comfort of their investigation or treatment (e.g. outpatient rather than inpatient, less painful, quicker, less travel/expense involved for them and their carers/family)

   This non-invasive test can assess and monitor a person's liver health and avoid unecessary invasive tests. It also provides a rapid outcome that can be discussed by clinician and patient asap

6. Do you think that there are any particular subgroups of patients with **liver fibrosis** who might get particular benefit from **Virtual Touch Quantification** compared with current management? If so, please describe who these patients are and what particular benefits they might expect.

   All diagnosed patients could benefit but very importantly this could be used in the early diagnosis of new patients

7. Is **liver fibrosis** associated with any social stigma, which makes its diagnosis and monitoring using **Virtual Touch Quantification** a matter of particular importance for patients?

☒ **Yes** ☐ **No**

If you have ticked Yes, please explain:

there is a common misconception that all liver disease is caused by alcohol and whilst some is nearly all liver patients face the same stigma regardless of the cause of their disease. Easier, quicker, less time consuming, cheaper and better QoL interventions must be encouraged

C. Disadvantages for patients

8. Please list any possible disadvantages or possible problems that might arise from **liver fibrosis** being diagnosed or monitored using **Virtual Touch Quantification** compared with current management.

Disadvantages might include:

- Possible side effects
- Potential to make the condition worse, or no better
- Practical difficulties, for patients and/or carers, in using the technology
- Raising the possibility of an unexpected diagnosis which might cause distress and require further investigations, which would not otherwise have been done
- Increased inconvenience for patients and/or their families (e.g. additional cost of travel, or the cost of paying a carer)

With the right support post VTQ scanning there are no disadvantages.

D. Equalities issues

9. Do any of the following subgroups of patients need special consideration in relation to **Virtual Touch Quantification** compared to the general patient population (e.g., because they have higher levels of ill health, poorer outcomes, problems accessing or using treatments or procedures)?

Please tick all that apply. If there is a specific group within a ticked category, please give further details.

☐ Gender groups, for example: sex, sexual orientation, gender identity

☐ Specific age groups

☐ People with physical disabilities

☐ People with communication difficulties

☐ People with learning disabilities

☒ People with mental health problems

☐ People from black and minority ethnic groups

☐ People of particular religions or beliefs

☒ Any other groups

If you have ticked any of the above, please explain why they need special consideration: Some patients because of their lifestyles, esp alcohol and drug use, need faster less invasive interventions to get best possible compliance

E. Usefulness of NICE guidance on Virtual Touch Quantification

10. Is there any evidence and/or reason to believe that, if NICE does not produce guidance on **Virtual Touch Quantification** there is, or will be, difficulty for some groups of patients, or for patients in some parts of England, getting access to this technology?

☒ **Yes** ☐ **No** If you have ticked Yes, please explain

NICE guidance would encourage more clinicians to use non-invasive testing

11. Do you believe that NICE guidance on **Virtual Touch Quantification**

would improve equal access to the technology for all patients who might benefit from its use, throughout England?

☒ **Yes** ☐ **No** If you have ticked Yes, please explain

It would allow patienst to question more successfully if they are not being offered this intervention

12. Do you believe that there are any particular obstacles or barriers to the introduction of **Virtual Touch Quantification** into the health service and/or to patients getting access to it?

☒ **Yes** ☐ **No**

If you have ticked Yes, please explain

There are some clinicians who still need to increase their understanding and confidence in utrasound testing and monitoring

F. Timeliness and urgency

13. Are there any factors not covered in earlier sections that suggest that guidance on **Virtual Touch Quantification** ***should*** be produced as a matter of urgency, such as:

- it provides a significant change in the way **liver fibrosis** is diagnosed or monitored
- it is needed for a newly recognised disease
- it addresses an issue of significant public concern

☒ **Yes** ☐ **No**

If **yes**, please list the factors(s) that suggest an urgent need for this guidance: it would address most of the new NHS domains in providing improved acre for people with, and at risk of, liver disease

G. Importance of the proposed topic

14. Are there other technologies or treatments for **liver fibrosis** that you would consider more important for NICE to develop guidance on?

☒ **Yes** ☐ **No**

If yes: please state alternative technology or treatment:

Guidance on all of the non-invasive markers for liver disease

H. Other comments

15. Even if you have been unable to complete the specific questions in this questionnaire, please identify whether this is a technology you would be interested in learning more about/getting involved in if it is selected by NICE for development of guidance.

☒ **Yes** ☐ **No**

16. Please use the space below for any other comments relating to the selection or non selection of this technology for future NICE guidance:

Thank you for your time.

Please return your completed questionnaire, declaration of interests form and consent form to laura.norburn@nice.org.uk

For more information about the NICE Medical Technologies Evaluation Programme, please visit the NICE website: http://www.nice.org.uk/aboutnice/whatwedo/aboutmedicaltechnologies/medicaltechnologiesprogramme.jsp