

**National Institute for Health and Care Excellence**  
**IP1795 Laparoscopic renal denervation for loin pain haematuria syndrome**

IPAC date: 12 August 2021

| Com . no. | Consultee name and organisation  | Sec. no. | Comments   | Response  |
|-----------|----------------------------------|----------|--|---|
|           |                                  |          |  | Please respond to all comments  |
| 1         | Consultee 1<br>Renal Association | 1.1      | Any research study must specify whether laparoscopic denervation is being compared with other less invasive procedures (e.g. blocks, RFA) or with open surgical denervation. It is important to note that laparoscopic denervation does not include capsulotomy which may be included in open surgical denervation.  | Thank you for your comment.<br><br>The procedure description in the draft guidance and overview has been changed.                           |
| 2         | Consultee 1<br>Renal Association | 2.2      | In addition to oral analgesics and drugs which alter perception of pain, step-up treatments include TENS, regional nerve blocks, initially temporary and then more permanent (e.g. phenol), and RFA. More invasive treatment for resistant symptoms includes surgery with an escalation of interventions which include surgical neurectomy (denervation), capsulotomy (often performed in conjunction with renal denervation), nephrectomy and auto-transplantation. | Thank you for your comment.<br><br>Section 2.2 of the guidance and the description of current treatments in the overview have been changed. |
| 3         | Consultee 1<br>Renal Association | 3.2      | These are indeed the key efficacy outcomes of any intervention. Any study of laparoscopic renal denervation should compare other less invasive denervation techniques, including blocks and RFA.   | Thank you for your comment.   |

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| 4         | Consultee 1<br>Renal Association | 3.4      | There is a LPHS group on Facebook - has the moderator been approached for comment?   | Thank you for your comment.<br>The process for IP guidance includes asking clinicians who do the procedure to forward questionnaires to their patients. Appropriate patient organisations that are identified at the briefing stage are also included as stakeholders for consultation.<br>We do not routinely approach Facebook groups. |
| 5         | Consultee 1<br>Renal Association | 3.5      | Please see comments regarding any planned clinical research study and the need to define clearly any comparative treatment arm.  | Thank you for your comment.  |
| 6         | Consultee 1<br>Renal Association | 3.5      | Evidence of benefit from surgical denervation is not overwhelming. Laparoscopic denervation may be less invasive than open surgery but that is not enough to make it more effective. | Thank you for your comment.  |
| 7         | Consultee 1<br>Renal Association | 3.7      | Escalation of treatments from simple (eg medication) to more invasive is a standard approach for management of LPHS patients.  | Thank you for your comment.<br><br>Section 3.7 of the guidance has been deleted.   |

*"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."*