

<p>HEALTH TECHNOLOGY APPRAISAL:</p> <p>on</p> <p>Stapled Haemorrhoidectomy for the treatment of haemorrhoids</p>	
<p>TO: NICE</p>	<p>FROM: NHS Quality Improvement Scotland</p>

The report is well presented and clearly laid out. The chapters and sub-headings are clearly labelled and easy to follow. The writing style is crisp, authoritative and flows easily. The reader is clearly led through the text to accompanying tables, appendices and references where appropriate. The executive summary provides an accurate précis of the contents of the main report.

The objectives of the study are clearly defined. The systematic review of the literature appears to be comprehensive and the authors search strategy will have ensured that all relevant research papers are included.

The authors have correctly identified the important short and long-term outcomes measure that need to be assessed within this study. These include pain, bleeding, prolapse and reintervention rate. There are no important outcome variables that have been overlooked. They have taken each outcome variable and thoroughly examined the data relevant to it. They have highlighted the limitations and heterogeneity of the data where appropriate.

The authors have performed a thorough and analytical evaluation of the available clinical data from all the randomised controlled trials. Their conclusions are entirely consistent with the data and provide a comprehensive summary of the present status of stapled haemorrhoidectomy.

I can see no significant methodological errors in this report but I would not be qualified to comment on the statistical methods used here. I am not qualified to comment on the methodology used in the economic assessment. The authors have correctly identified that if stapled haemorrhoidectomy is to be cost effective then the higher operating costs (principally the costs of the stapling gun) must be offset by reduced length of stays compared to conventional surgery.

The research recommendations are found on page 170 in a section entitled **Recommendations for research**. The authors have highlighted the need for

specifically designed trials to address areas where current data is too limited to reach firm conclusions. These recommendations seem thorough and appropriate

This is a comprehensive review of the Level 1 evidence comparing stapled haemorrhoidectomy to conventional haemorrhoidectomy. The conclusions of this report are entirely consistent with the findings presented within it.

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