

# NICE HTA: Clopidogrel and Modified Release Dipyridamole for the prevention of occlusive vascular events (review of TA No.90)

## Appraisal Consultation Document Response



**Joint Submission Diabetes UK and Association of British Clinical Diabetologists**

**August 2010**

### **Diabetes UK**

Diabetes UK is the leading charity for the three million people in the UK with diabetes, funding research, campaigning and helping people living with the condition. Our mission is to improve the lives of people with diabetes and work towards a future without diabetes. Diabetes UK works for people with diabetes, their carers, family and friends. We represent the interests of people with diabetes by campaigning for better standards of care and the best quality of life.

### **ABCD**

The Association of British Clinical Diabetologists is the national organisation of Consultant Physicians in Britain who specialise in Diabetes Mellitus. Most are also Acute General Physicians, and many are also Specialists in Endocrinology and Lipid Metabolism. ABCD was established in 1997 with the principal objective of ensuring high quality care for all UK diabetes patients. It is essentially a professional organisation committed to the preservation and support of diabetes specialist care services. ABCD believes that local diabetes specialists are uniquely qualified to provide guidance and leadership for district diabetes services.

### **Has all of the relevant evidence been taken into account?**

Although people with diabetes were not considered as a separate subgroup in this appraisal, it would be valuable for the appraisal consultation document to acknowledge that people with diabetes are considered a high risk group, and once they have cardiovascular disease, are at increased risk of further occlusive vascular events. The conclusions of the appraisal will therefore have a bearing on the care of people with diabetes.

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### **Are the provisional recommendations sound and a suitable basis for guidance to the NHS?**

It would be pertinent, as with some other technology appraisals, that a recommendation is included to ensure that people requiring antiplatelet therapy are provided with information about the benefits, risks, side effects, method, volume and frequency of administration of each appropriate antiplatelet therapy. This is important to support individuals to make an informed decision in partnership with their healthcare professional, helping tailor care to the needs of the individual. The committee noted the contribution of patient experts that identified people value factors such as ease of administration and few side effects.

We welcome the fact that the recommendations acknowledge contraindications and where medications may not be tolerated. The contraindications highlighted in the SPCs underscore the need for appropriate screening for pre-existing conditions and complications that would inform decisions about treatment options.

In line with the committees recognition that clinical specialists said they would value "clear, straight forward, guidance", it would be useful, when producing implementation support for this guidance, that a chart of the different treatment options, the recommendations, and the benefits, risks and side effects, is provided for clinical use.

### **Conclusion**

As identified in our prior joint submission, these technologies should be available as antiplatelet therapies provided they are considered safe and effective. Decisions about treatment choice should be individually tailored and made in partnership between the healthcare professional and person with diabetes. In considering the treatment options available the following factors should inform decision making:

- Licensed indications of the treatment
- Clinical suitability, efficacy and patient choice
- Quality of life considerations including known side effects such as headaches, bleeding, gastritis, nausea, vomiting
- medication administration
- Risks, safety, and contraindications