

NHS is too slow to adopt NICE approved treatments, MPs hear

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London

The NHS is too slow in adopting treatments approved by the drugs watchdog the National Institute for Health and Clinical Excellence, MPs have been told.

Witnesses appearing before the parliamentary health select committee on 27 November said that good guidance from NICE was too often ignored or delayed by commissioners as a way to save money.

MPs, holding an evidence session as part of their inquiry into the institute, asked about implementation of guidance, which provoked different views from the witnesses present.

Laura Weir, chairwoman of Patients Involved in NICE, a coalition group representing more than 80 patients' groups, said that patients had a legal right to receive drugs and other treatments approved for use by NICE and that this was a right enshrined in the NHS Constitution but that commissioners were still wriggling out of implementing NICE approved treatments or delaying them.

She said, "NICE does a fantastic job, and it produces some brilliant guidance. However, that guidance is only going to help people if it's implemented.

"Currently there is no scrutiny or monitoring of NICE approved medicines, and there's no one body that is responsible for making sure that we do have much broader implementation of NICE guidance.

"I think there is a role there for the Care Quality Commission, potentially together with Monitor, to assist the NHS Commissioning Board to do that and monitor the new clinical commissioning groups and help them in providing that scrutiny."

Peter Johnson, chief clinician for Cancer Research UK, also giving evidence, said, "I am not sure there is an enormous amount of failure of implementation of NICE guidance. There are some cases and some instances, but our general experience is that once a positive appraisal has been given, the uptake is reasonably broad and reasonably rapid."

Fellow witness Stephen Whitehead, chief executive of the Association of the British Pharmaceutical Industry, disagreed, saying, "The UK is both low and slow in terms of adoption even of approved NICE technologies, with huge regional variations.

"The UK is the slowest adopter of innovation in Europe against all DH [Department of Health] standards. Although often there will be medicines that go on the formulary, there is often not the freedom of the healthcare professional to prescribe the most appropriate medicine for that patient.

"This has been explicitly recognised by government through the publication of *Innovation, Health and Wealth*,¹ which says the uptake of NICE medicines is a problem in the UK."

Johnson argued back, saying: "We have a medical workforce that is relatively more conservative than in some parts of Europe about the adoption of new forms of treatment.

"There are a variety of reasons why innovative treatments are not being taken up as rapidly as they are in the better off parts of western Europe. I would not put the majority of the blame on obstruction of the implementation of NICE guidance."

Linda Patterson, clinical vice president of the Royal College of Physicians, also giving evidence, said, "There is an issue about implementation, which is partly about practice and the clinical decision maker implementing the guidance or not.

"On wider implementation, that is a debate about how we encourage good practice to be implemented across the country without variation. At the moment, there is a rather grey area as to who is responsible."

1 Department of Health. Innovation, health and wealth: accelerating adoption and diffusion in the NHS. 5 Dec 2011. www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_134597.pdf.

Cite this as: *BMJ* 2012;345:e8138

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