



**INTERVENTIONAL PROCEDURE
PROGRAMME GUIDELINE**

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

**Subject: Guideline No 301 –
Transmyocardial Laser Revascularisation for
Refractory Angina Pectoris**

Circular Reference: HSC (SQSD) (NICE) 25/2009

Date of Issue: 16 June 2009

For action by:

Chief Executives, HSC Trusts

Medical Directors, HSC Trusts, for cascade to:

- Associate Medical Directors
- Clinical Directors
- Heads of Governance
- Consultant cardiologists
- Consultant surgeons
- Consultant anaesthetists

Directors of Nursing, HSC Trusts & HSC Board

Chief Executive RQIA for cascade to

- *Independent hospitals and clinics*

For Information to:

- Chief Executive, HSC Board
- Chief Executive, Public Health Agency
- Director of Public Health, Public Health Agency
- Director of Nursing, Public Health Agency
- Professor David Woolfson, Head of School of Pharmacy, QUB
- Professor Linda Johnston, Head of Nursing & Midwifery, QUB
- Professor Hugh McKenna, Head of Life and Health Sciences, UU
- Dr Owen Barr, Head of School of Nursing, UU
- Staff Tutor of Nursing, Open University
- Director, Safety Forum
- GP Medical Advisers in HSC Board
- Chairs, Local Commissioning Groups
- CSCG/Risk management leads

Summary of Contents:

Current evidence on safety suggests that the procedure may pose unacceptable risks. Therefore, this procedure should not be used.

Enquiries:

Any enquiries about the content of this Circular should be addressed to:

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Related documents:

Guideline 302 – Percutaneous Laser Revascularisation for Refractory Angina Pectoris

Superseded documents

Status of Contents:

Action

Implementation:

Immediate

Additional copies:

Available to download from

<http://www.dhsspsni.gov.uk/index/phealth/sqs/sqsd-guidance.htm>

Dear Colleagues

Interventional Procedure Programme Guideline No 301 – Transmyocardial Laser Revascularisation for Refractory Angina Pectoris

The National Institute for Clinical Excellence (NICE) produces guidance as part of the Interventional Procedure Programme. Clinicians who have developed new procedures send these to NICE to evaluate their effectiveness. Cost is not considered as part of this evaluation. Solely for this programme, NICE communicates directly with the HSC in Northern Ireland and consequently Departmental circulars are not normally required. An exception has been made for this and the related guidance NO. 302 due to the safety risks identified.

The advice in the NICE guideline states:

Current evidence on transmyocardial laser revascularisation (TMLR) for refractory angina pectoris shows no efficacy, based on objective measurements of myocardial function and survival. Current evidence on safety suggests that the procedure may pose unacceptable risks. Therefore, this procedure should not be used.

The Department expects the HSC sector to comply with this guidance in their delivery of services to patients with angina pectoris.

Angina pectoris is chest discomfort, often described as pressure or pain, typically occurring on exertion. It is caused by inadequate delivery of oxygen to the heart muscle, usually because of coronary artery disease. Refractory angina is a severe form of angina that cannot be controlled by normal medical or surgical treatment.

Angina treatment depends on the patient's symptoms, medical history, and coronary angiography findings. Treatments include anti-anginal medication and revascularisation interventions (coronary angioplasty, stenting, or coronary artery bypass surgery). For patients with refractory angina, these treatments have either failed or are not clinically suitable.

Outline of the procedure

Transmyocardial laser revascularisation for refractory angina pectoris is carried out with the patient under general anaesthesia. Ischaemic areas are selected for treatment using echocardiography or myocardial perfusion scan and coronary angiography before surgery. A

left thoracotomy is performed and the pericardium opened. A laser device is then used to create a number of channels in the myocardium. Transoesophageal echocardiography confirms complete passage across the myocardial wall by the laser.

A number of different types of laser can be used for this procedure.

The full NICE intervention procedure guideline is available for download at:

<http://www.nice.org.uk/guidance/IPG301>

The HSC sector also should note that;

NICE has published interventional procedures guidance on percutaneous laser revascularisation for refractory angina pectoris available for download at:

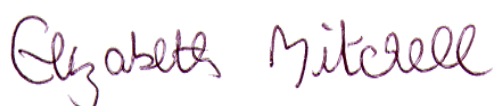
<http://guidance.nice.org.uk/IPG302>; and

technology appraisal guidance on myocardial perfusion scintigraphy for the diagnosis and management of angina and myocardial infarction available for download at:

<http://guidance.nice.org.uk/TA73>.

NICE is developing a clinical guideline on the management of stable angina. See

<http://guidance.nice.org.uk/CG/Wave17/25> .



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