

From the Chief Medical Officer  
**Dr Michael McBride**



Department of  
**Health, Social Services  
and Public Safety**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

**Circular HSC (SQSD) (NICE) 32/08 TA 136**

AN ROINN

**Sláinte, Seirbhísí Sóisialta  
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydënter Heisin  
an Fowk Siccar**

Chief Executives of HSS Boards – **for distribution to:**  
Directors of Public Health  
Directors of Nursing  
Directors of Pharmaceutical Services  
Directors of Primary Care – for cascade to prescribing and GP  
Advisors

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Chief Executives of HSC Trusts – **for distribution to:**  
Medical Directors – for cascade to relevant staff  
Directors of Nursing – for cascade to relevant staff  
Directors of Pharmaceutical Services – for cascade to relevant  
staff

Date: 3 July 2008

General Practitioners

HSC Clinical and Social Governance Leads

Chief Executives of HSC Special Agencies and NDPBs

#### **For Information**

Chairs of HSS Boards  
Chairs of HSC Trusts  
Chief Executive, Regulation & Quality Improvement Authority  
Chief Officers HSC Councils  
Chief Executive/Postgraduate Dean, NIMDTA  
Chief Executive, NIPPET  
Chief Executive, NIPEC  
Chief Executive, RMSC

Dear Colleagues

### **Technology Appraisal No 136 – Structural Neuroimaging in First Onset Psychosis**

Psychosis is not a diagnosis in itself but a term used to describe a group of conditions in which severe symptoms of mental illness such as delusions and hallucinations occur, accompanied by the inability to distinguish between subjective experiences and reality.

Structural neuroimaging techniques (either magnetic resonance imaging or computed axial tomography scanning) are not recommended as a routine part of the initial investigations for the management of first-episode psychosis.

DHSSPS advises that this appraisal guidance is valid for Northern Ireland and endorses it for implementation in HSC.

The full NICE technology appraisal is available for download at:  
<http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11930>

The HSC sector also should note that;

1. The Department expects HSC organisations to comply with this guidance with immediate effect.
2. This advice does not override or replace the individual responsibility of health professionals to make appropriate decisions in the circumstances of their individual patients, in consultation with the patient and/or guardian or carer. This would, for example, include situations where individual patients have other conditions or complications that need to be taken into account in determining whether the NICE guidance is fully appropriate in their case.

NICE has developed tools to help organisations implement this guidance. These are available at <http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11930> and include costing tools, implementation advice and audit criteria to monitor local practice.

All NICE guidance endorsed by the Department to date can be accessed on the DHSSPS website at <http://www.dhsspsni.gov.uk/sqsd-guidance-nice-guidance>

Circular HSS (PPMD) (NICE)01/006 issued on 30 June 2006 provides further information on the Northern Ireland process for reviewing NICE guidance and further details on the local status of the Institute's guidance. This circular can be accessed at:  
[http://www.dhsspsni.gov.uk/nice\\_guidance\\_01-06.pdf](http://www.dhsspsni.gov.uk/nice_guidance_01-06.pdf)



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