Advice Statement 005/13 May 2013

What is the clinical and cost effectiveness of dynamic elastomeric fabric orthoses (DEFOs) for cerebral palsy?

This advice has been produced following completion of technologies scoping report 14 by Healthcare Improvement Scotland, in response to an enquiry from NHS Lothian

SHTG advises that:

- There is insufficient evidence to determine whether or not dynamic elastomeric fabric orthoses (DEFOs) – often referred to as lycra® splinting – are effective in improving function in cerebral palsy. Synthesis of the evidence is difficult due to the heterogeneity in types of orthoses worn (eg glove/body suit), manufacturers’ designs, types of cerebral palsy (CP) in clinical samples and outcomes measured. Further research is required to determine the clinical effectiveness of individual DEFO garment designs in specific forms of CP.

- No evidence was identified relating to cost effectiveness of DEFOs.

- There is considerable variation in service provision and use of DEFOs across NHSScotland boards.

- In the absence of clinical and cost effectiveness evidence to support or refute the effectiveness of DEFOs to improve function in CP, their continued use should be considered in the context of local research and audit examining their clinical and cost effectiveness and patient experience.

Advice context:

The status of SHTG Advice Statements is advisory.

No part of this advice may be used without the whole of the advice being quoted in full. This advice represents the view of the SHTG at the date noted.

It is provided to inform NHS boards in Scotland when determining the place of health technologies for local use. The content of this Advice Statement was based upon the evidence and factors available at the time of publication. An international evidence base is reviewed and thus its generalisability to NHSScotland should be considered by those using this advice to plan services. It is acknowledged that the evidence constitutes only one of the sources needed for decision making and planning in NHSScotland. Readers are asked to consider that new trials and technologies may have emerged since first publication and the evidence presented may no longer be current. SHTG Advice Statements will be considered for review on a 2-yearly basis. The evidence will be updated if requested by the clinical community, dependent on new published reports. This advice does not override the individual responsibility of health professionals to make decisions in the exercise of their clinical judgment in the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Chair, Scottish Health Technologies Group

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