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Letter

NICE clinical guidelines

Authors' reply

EDITOR—Clinical guidelines are different when they are produced by the National Institute for Clinical Excellence (NICE). NICE is an organisation charged with promoting the cost effective use of limited NHS resources. Our experience, and that of many of our colleagues who have been involved in the production of NICE clinical guidelines, is that the current processes do not facilitate the appropriate consideration of cost effectiveness issues.

We believe that the process of guideline development requires adjustment. Whether the blame for this lies with the health economics community or elsewhere, we share the hopes of Littlejohn et al and Pilling et al that our editorial will prompt a constructive debate about the appropriate methods for developing truly cost effective guidelines.

We do not claim that only health economists adopt a societal view, as Eccles says. Neither do we suggest that ranked cost utility lists should be produced. We do, however, acknowledge the scarcity of NHS resources and the need to compare options across NHS activities.

To date, guideline development groups have produced high quality guidelines, but these have been based predominantly on clinical effectiveness considerations. Technology appraisals may be imperfect, but they are an internationally reputed means for making health service policy decisions underpinned by cost effectiveness analysis. Clinical guidelines and appraisals may be different, but they also have common characteristics. The technology appraisal approach cannot be translated lock, stock, and barrel, but many of its core elements are equally relevant to guidelines.

Allan Wailoo, *lecturer in health economics*

a.j.wailoo@sheffield.ac.uk, Sheffield Health Economics Group, School of Health and Related Research (ScHARR), University of Sheffield, Sheffield S1 4DA

Jennifer Roberts, *senior lecturer in health economics*, **John Brazier**, *professor of health economics*, **Chris McCabe**, *senior lecturer in health economics*

Sheffield Health Economics Group, School of Health and Related Research (ScHARR), University of Sheffield, Sheffield S1 4DA

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