

Issue 1 - 2026
January - March
www.hiqa.ie

BULLETIN

**Health Technology Assessment
Evidence Synthesis**

Find out what we did



Quarterly Newsletter

Spring has sprung in Ireland, and during this period of change, we are reflecting on the work we have completed during Quarter 1 in our first bulletin of 2026! This edition covers the work and activities completed between December and March in the area of health technology assessment (HTA) and evidence synthesis. Our aim is to provide a brief overview of our most recent reports and to highlight the conferences we have attended and academic publications we have published.

All of our publications are available in full on our website, www.hiqa.ie.

Our team has been busy over the last three months. In March, we launched two online courses designed to promote and address the need to include more patients, members of the public and healthcare professionals in developing National Clinical Guidelines.

Our publication consultation on our draft health technology assessment (HTA) of immunisation against respiratory syncytial virus (RSV) was also held during this period. The full report will be published later this year.

We announced two new screening health technology assessments, examining familial hypercholesterolaemia (FH) in children and potential modifications to BreastCheck.

We also participated in and contributed to several conferences, highlighting the role of HTA in informing healthcare policy and practice.

Read more about these activities and other updates in the following pages.



As always, we appreciate your feedback, and welcome suggestions for future editions. Reach out to us at htanews@hiqa.ie — and please share this bulletin with anyone you think may be interested.



DR MÁIRÍN RYAN

Deputy Chief Executive
Director of Health
Technology Assessment

In this newsletter you can expect:

Public
Consultation

Health
technology
assessments

Learning Courses

Sphere
conference

CICER

CICER

Management of acute asthma attack in adults

Our Centre in Ireland for Clinical Guideline Support and Evidence Reviews (CICER) team is funded by the Health Research Board (HRB) and hosted by HIQA. CICER conducts evidence synthesis to assist with the development of National Clinical Guidelines.

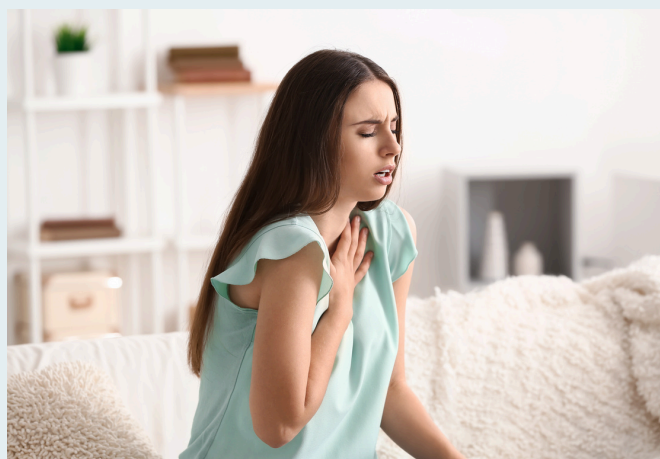
Guideline development group

Recently, CICER supported a guideline development group to update National Clinical Guideline No. 14: Management of an Acute Asthma Attack in Adults (aged 16 years and older). This guideline was last updated in 2015.

What is asthma?

An acute asthma attack is a sudden worsening of asthma symptoms. This can appear as a shortness of breath, cough, wheezing or chest tightness.

These events can range from mild to life-threatening and lead to thousands of inpatient admissions in Ireland each year.



To support this process, CICER undertook a systematic review to identify and appraise current international clinical guidelines on the management of acute asthma attacks in adults. This review was published in December.

CICER

Learning courses to support involvement in clinical guideline development

In March, CICER launched two new online learning courses to help patients, the public and healthcare professionals take part in developing National Clinical Guidelines. The short modules and videos are designed for people who want to contribute but may be unfamiliar with the details and process of clinical guideline development.

Clinical guidelines provide evidence-based recommendations to support safe, effective and consistent care across the health service. They outline how interventions should be implemented and resourced.

They are strongest when developed in partnership with the people who use and deliver health services. Patients and healthcare professionals bring valuable insights into lived experience and day-to-day care, but many do not get involved due to limited access to training or support.

To address this, CICER worked with patients and healthcare professionals to co-create online learning materials that explain the guideline development process and the roles contributors can play. The resources aim to build confidence and encourage wider participation in guideline development groups.



The STAKEholder project

These new materials form part of the STAKEholder project, which also informed CICER's 2025 conference, Our Healthcare System, Our Voices. A final report on the project has now been published, which along with the online courses and two micro-learning videos, is available on the HIQA website.

CICER

Paediatric Early Warning System in Emergency Settings

Quarter 1 was particularly busy for our CICER team, who also published a protocol for a scoping review of paediatric early warning systems and a systematic review of clinical guidelines.

The review looked at whether there are any guidelines from other countries about using early warning systems for children in the emergency department.

Despite searching through databases of scientific reports and websites of health organisations internationally, no relevant guidelines from other countries were found that could be used to help build an Irish guideline.

Our protocol outlined how we will review existing paediatric early warning systems and the report will be published later this year.



Public Consultation

Draft assessment of RSV immunisation



Between December and January, we held a public consultation on our draft health technology assessment (HTA) of immunisation against respiratory syncytial virus (RSV) in Ireland.

RSV is a common viral infection affecting the lungs and airways. While most people recover without medical care, it can cause severe illness in infants, young children and older adults. Each winter in Ireland, more than 7,000 people are diagnosed with RSV, with infants under one year of age historically accounting for a large proportion of hospital admissions.

This assessment will help to inform a long-term policy decision by the Minister for Health on an RSV immunisation strategy for infants and older adults in Ireland. The full HTA will be published in 2026.

Health Technology Assessments

Assessment on breast density in the BreastCheck screening pathway

We are working on a HTA examining potential modifications to BreastCheck, Ireland's national breast cancer screening programme. The protocol for this assessment was published in March.

The National Screening Advisory Committee asked HIQA to review evidence on whether breast density should be considered within the BreastCheck pathway. Breast density refers to the amount of dense tissue compared with fatty tissue in the breast. It is usually higher in younger women, is a risk factor for breast cancer, and can make tumours harder to detect on a mammogram.

Women with dense breasts could potentially benefit from additional imaging, such as digital breast tomosynthesis, MRI, contrast-enhanced mammography or ultrasound.



This assessment will examine the epidemiology of breast density and review the technology, clinical effectiveness, safety, and ethical, patient and social considerations associated with screening pathways that take breast density into account. It will also consider whether measuring and notifying women of their breast density, or offering alternative pathways for those with high density, could improve outcomes.

Depending on the findings, further work may be carried out to assess the economic and organisational implications of incorporating breast density into BreastCheck.

Health Technology Assessments

Population-based screening for familial hypercholesterolaemia in children

In February, we published the protocol for population-based screening for familial hypercholesterolaemia (FH) in children. We are currently reviewing international practice while also looking at how common FH is in Ireland, how effective early intervention is, and the ethical considerations associated with this type of screening.

The National Screening Advisory Committee requested this assessment to inform its recommendation to the Minister for Health on whether or not to introduce population-based screening for FH in children.

FH is an inherited condition that causes very high lifelong levels of total cholesterol, and specifically, low-density lipoprotein (LDL) cholesterol.

High levels of LDL cholesterol can lead to the development of atherosclerotic cardiovascular disease, which includes coronary artery disease, heart attack, stroke, and peripheral artery disease.

Without screening, FH is often only diagnosed opportunistically (such as from routine blood tests) or after a person experiences a cardiovascular event. Screening for FH in children may enable earlier detection and management of FH.



Sphere Conference

HIQA at the SPHeRE Network 12th Annual Conference

We were delighted to attend the SPHeRE Network 12th Annual Conference, Bridging the Gap: Advancing Population Health Equity in Ireland, on 19 February. This year's event focused on how Ireland can move toward a more equitable health system, recognising that access to high-quality healthcare is a fundamental determinant of population health. When access is uneven, it becomes a significant driver of health inequities.



At present, health resources in Ireland are largely allocated on a uniform basis. The conference explored what it would mean to shift toward a more equitable model—one that aligns resources with the specific health needs and circumstances of different populations.

Throughout the day, we hosted a stand, spoke with attendees, showcased a range of posters from across our projects, and delivered several presentations and workshops. Below is a brief overview of some of the HTA work we shared.



Sphere Conference

SPHeRE Network Presentations

Specialist assessment and self-management education for acute asthma exacerbation

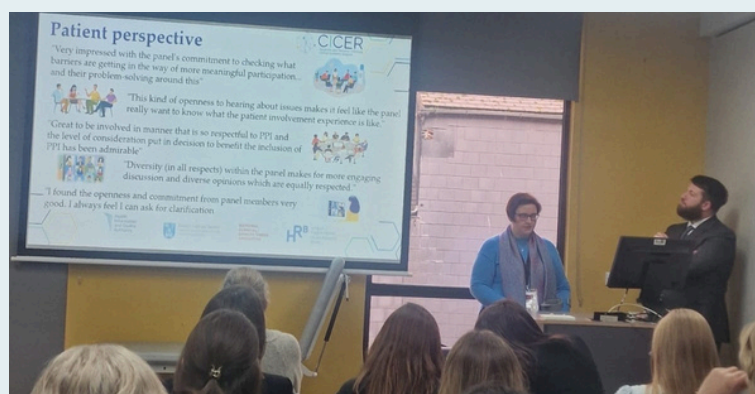
Dr Molly Mattsson discussed the role of specialist assessment and self-management education following an acute asthma exacerbation. Although recommended in several international guidelines, no systematic review had previously examined this topic in this population.

Dr Mattsson's findings indicate that self-management educational interventions, with or without specialist assessment, may improve clinical outcomes—though the certainty of the evidence remains low.



Meaningful patient and public involvement in guideline development

Dr Paul Doody and Stacey Grealis presented on the development of an innovative, process-focused PPI panel to support National Clinical Guideline development. While the importance of PPI is widely recognised, there is limited patient-informed methodology for integrating lived experience into guideline processes. The CICER PPI panel is co-developing a strategy to ensure that clinical guideline recommendations reflect not only the best available scientific evidence but also the needs, values, preferences and experiences of patients, carers and healthcare providers.



All of the posters we presented are available to view online at Sphere.

Publications

Sensitivity and Precision of Search Strategies Built Using a Text-Mining Word Frequency Tool (PubReMiner) Compared to Current Best Practice for Building Search Strategies: A Study Within a Review (SWAR)

A study was embedded across multiple reviews to determine the sensitivity and precision of search strategies developed using a text-mining tool compared to conventional search strategies developed by a librarian at our institution.

Date of publication: 18 Feb 2026

Authors: Andrew Dullea, Marie Carrigan, Lydia O'Sullivan, Isabelle Delaunois, Helen Clark, Martin Boudou, Martina Giusti, Kieran A. Walsh, Patricia Harrington, Susan M. Smith, Máirín Ryan

Journal: Cochrane Evidence Synthesis and Methods

Characteristics of published mini and rapid Health Technology Assessments (HTA) reports: a cross-sectional analysis

Whilst the conduct of rapid health technology assessments (HTA) is important for decision-makers, there is no universally accepted definition or standardised methods. The objective of this study was to analyse the content and conduct of published rapid HTA reports.

Date of publication: 06 Feb 2026

Authors: Sharon McLaughlin, Aanisa Abeer, Melissa K. Sharp, Kieran A. Walsh, Cassandra Nemzoff, Sheilagh Foley, Ed Clifton, Michelle Flood, Susan Spillane, Patricia Harrington, Conor Teljeur, Michelle O'Neill, Susan M. Smith, Máirín Ryan & Barbara Clyne

Journal: International Journal of Technology Assessment in Health Care

Voices in clinical guideline development: a qualitative study of Irish guideline developers' perspectives on developing recommendations

Guidelines are essential tools for improving healthcare decision-making. The objective of this study was to explore the perspectives and experiences of stakeholders on the social processes of developing recommendations in decision-making contexts in Ireland.

Date of publication: 02 Jan 2026

Authors: Waleed Serhan, John Paul Byrne, Melissa K Sharp, Michelle O'Neill, Susan M Smith, Marion Cullinan, Máirín Ryan, Barbara Clyne

Journal: Evidence & Policy



Published by the Health Information and Quality Authority (HIQA).

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