

IQWiG Reports - Commission No. H16-02A

Ultrasound-guided highintensity focused ultrasound therapy for uterine endometriosis¹

Executive Summary

¹ Translation of the executive summary of the assessment according to §137h Social Code Book (SGB) V Sonografiegesteuerte hochfokussierte Ultraschalltherapie bei der Endometriose des Uterus (Version 1.0; Status: 30 January 2017). Please note: This translation is provided as a service by IQWiG to English-language readers. However, solely the German original text is absolutely authoritative and legally binding.

30 January 2017

Publishing details

Publisher:

Institute for Quality and Efficiency in Health Care

Topic:

Ultrasound-guided high-intensity focused ultrasound for uterine endometriosis

Commissioning agency:

Federal Joint Committee

Commission awarded on:

19 December 2016

Internal Commission No.:

H16-02A

Address of publisher:

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30 January 2017

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IQWiG thanks the medical-scientific advisor for his contribution to the §137h assessment. The sole responsibility for the content of this assessment lies with IQWiG.

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Keywords: high-intensity focused ultrasound ablation, endometriosis, assessment of potential, benefit assessment

 $^{^{2}}$ Due to legal data protection regulations, employees have the right not to be named.

30 January 2017

Executive summary

The Federal Joint Committee (G-BA) commissioned the Institute for Quality and Efficiency in Health Care (IQWiG) to assess ultrasound-guided high-intensity focused ultrasound (USgHIFU) therapy for uterine endometriosis according to §137h Social Code Book (SGB) V – Statutory Health Insurance. The assessment documents were transferred to IQWiG on 19 December 2016.

According to the requesting hospital, the method aims to destroy endometriosis lesions in patients with uterine endometriosis.

A total of 9 case series, as well as 1 non-randomized comparative study, were available for the assessment. However, the comparative study comprised a comparison that was not relevant for the assessment.

In contrast to a hysterectomy, USgHIFU offers the advantage of uterus preservation. In addition, due to the non-invasive mode of action, positive effects of USgHIFU in comparison with hysterectomy are basically possible. However, the studies submitted (primarily case series) did not indicate that USgHIFU showed an advantage regarding symptom severity or health-related quality of life in a direct or indirect comparison with placebo or no treatment, or that USgHIFU possessed a sufficiently similar effectiveness in comparison with a surgical control intervention.

Hence, on the basis of the assessment documents submitted, neither a benefit nor a potential of a required treatment alternative can be inferred for ultrasound-guided high-intensity focused ultrasound therapy for uterine endometriosis.

For this reason, no key points for a testing study were specified for the method.

The full report (German version) is published under https://www.iqwig.de/de/projekte-ergebnisse/projekte/nichtmedikamentoese-verfahren/h16-02a-sonografiegesteuerte-hochfokussierte-ultraschalltherapie-bei-der-endometriose-des-uterus-bewertungen-gemass-137h-sgb-v.7715.html