The Association for Clinical Biochemistry & Laboratory Medicine

Better Science, Better Testing, Better Care

Summary of NICE Guidelines

Title	SeHCAT (tauroselcholic [75 selenium] acid) for the investigation of diarrhoea due to bile acid malabsorption in people with diarrhoea-predominant irritable bowel syndrome (IBS-D) or Crohn's disease without ileal resection
NICE Reference	DG7
Date of Review:	December 2018
Date of Publication	November 2012
Summary of Guidance (Max 250 words)	SeHCAT (Tauroselcholic[75Selenium]acid) is a radiopharmaceutical used for measuring bile acid pool loss and investigating malabsorption. It can also be used to assess ileal function, investigate inflammatory bowel disease and to study enterohepatic circulation. Diarrhoea is defined as the abnormal passage of loose or liquid stools more than 3 times daily or a volume of stool greater than 200g/day. Ordinarily 97% of bile acids are recycled; however in patients with bile acid malabsorption excess bile in the colon stimulates electrolyte and water secretion thus leading to chronic watery diarrhoea. This clinical guideline was developed in order to determine the clinical and cost effectiveness of SeHCAT in diagnosing chronic diarrhoea due to bile acid malabsorption. In order to ascertain this, a de-novo model was developed and an in-depth literature review was performed to develop parameters for the model. The model consisted of 2 parts; a decision model reflecting the diagnostic and initial treatment phase, and a Markov model to estimate long term costs and effects. The model was used for both the IBS-D and Crohn's population but different parameters values were used. A range of scenarios to investigate the estimates on health outcomes and costs associated were modelled. In some scenarios the use of SeHCAT was cost effective whereas in others it was not cost effective, therefore considerable uncertainty remains over the use of SeHCAT and whether it is recommended for routine use by NICE. Further research is recommended in order to fully evaluate this technology and whether there are any suitable alternatives.
Impact on Lab (See below)	☐ None: This NICE guideline has no impact on the provision of laboratory services
Lab professionals to be made aware	None
Please detail the impact of this guideline (Max 150 words)	The use of SeHCAT is increasing although NICE neither encourages or discourages its use. The guidelines evaluated its cost effectiveness and made no recommendations for any changes in current practice. The guidelines did however suggest that more research was required and

	that laboratory testing may provide an alternative to SeHCAT as methods are currently being developed. However there were no specific instructions that were currently relevant to laboratory services.

Impact on Lab

- **None**: This NICE guideline has no impact on the provision of laboratory services
- **Moderate**: This NICE guideline has information that is of relevance to our pathology service and may require review of our current service provision.
- **Important:** This NICE guideline is of direct relevance to our pathology service and will have a direct impact on one or more of the services that we currently offer.

Written by: **David Marshall**
Reviewed by: **Brian Keevil**