

PE1952/H: Specialist services for patients with autonomic dysfunction

Minister for Public Health and Women's Health, 4 April 2024

Thank you for the Committee's correspondence to the Scottish Government of 8 March 2024 regarding petition PE1952: '*Specialist services for patients with autonomic dysfunction*', and the opportunity to respond to the Committee's query following its meeting of 6 March 2024.

The Committee states that it is keen to understand whether the Scottish Government will work to create specialist autonomic clinics in Scotland and, if not, how the Scottish Government can be confident that the expertise in local and regional clinical services is sufficient to treat those with autonomic dysfunction.

Scotland has robust and well-established processes to assess the need for new services or providers of specialist services. These processes are administered by NHS National Services Division. There are no current plans to develop a dedicated specialist autonomic service in Scotland.

Most people with autonomic symptoms experience them as part of other underlying conditions, such as Parkinson's disease or related disorders, neuropathies, diabetes and multiple sclerosis. These people are cared for within existing pathways for their underlying condition.

We are advised that it is well within the remit of neurologists to diagnosis and manage these symptoms as part of their routine practice in the vast majority of cases. Where required, secondary care services also work with GPs and community nursing teams to help people manage their condition and symptoms outside of hospital.

Cardiologists may also see people with autonomic symptoms for assessment and investigation, particularly if the nature of their autonomic dysfunction is suspected to be cardiovascular, or when autonomic symptoms do not occur as part of a separate neurological disease.

Primary autonomic failure is uncommon and may require input from further specialties if there is diagnostic difficulty or more complex testing of autonomic function is required. In circumstances where the local or regional specialist teams feel they do require additional expertise - which is not available within Scotland - pathways are in place to allow access to services commissioned by NHS England.

Regarding long COVID specifically, as the committee is aware, in June 2023 the National Strategic Network developed a recommended pathway for the assessment and management of Postural Orthostatic Tachycardia Syndrome in people living with long COVID, for use by NHS Boards.

While the Scottish Government's role is to set the strategic policy for the NHS in Scotland, the provision of healthcare services is the responsibility of NHS boards, taking into account national guidance, local service needs and priorities for investment. We expect all boards to provide care that is person-centred, effective and safe and to deliver services that meet the needs of their local populations. Therefore, we would expect that all boards ensure that people who require care for the symptoms of autonomic dysfunction have access to a range of professionals to provide the appropriate management of their condition.

I hope this reply is helpful to the Committee.

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