



Ministry  
of Defence

LEO DOCHERTY MP  
PARLIAMENTARY UNDER-SECRETARY OF STATE AND MINISTER  
FOR DEFENCE PEOPLE AND VETERANS

4/4/2/6/ap

26 May 2022

Dear Tobias,

Thank you for your letter of 14 March 2022 regarding Traumatic Brain Injury (TBI) and the use of magnetoencephalography (MEG) to aid diagnosis and treatment. I appreciate your continued interest in this matter, your concern for veterans who suffer with TBI and, indeed, their families. Please accept my apologies for the length of time taken to respond.

As outlined in previous correspondence, the Independent Medical Expert Group (IMEG) was tasked in June 2019 to review mild Traumatic Brain Injury (mTBI), with particular reference to the clinical utility of MEG. IMEG published an updated review in March 2021<sup>1</sup> and concluded that MEG research has not yet reached sufficient sensitivity and specificity for application to mTBI or PTSD in routine clinical practice. A further systematic review, examining the evidence for MEG to provide an imaging biomarker in mTBI, was published in May 2021.<sup>2</sup> This review also confirmed there is currently insufficient evidence to support its routine clinical use.

As previously advised, an mTBI-Predict trial will be driven by the Royal Centre for Defence Medicine and the University of Birmingham in collaboration with leading experts in their respective fields from across the UK and beyond. Without this sort of longitudinal follow up study the evidence to drive improvement in clinical outcomes will remain elusive. The research will deliver a step-change in the care of patients with mTBI and will bring much-needed advances in patient management.

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<sup>1</sup> [20180524-request\\_service\\_details\\_NOK\\_part1\\_v6.2\\_1.pdf \(publishing.service.gov.uk\)](#)

<sup>2</sup> [Magnetoencephalography abnormalities in adult mild traumatic brain injury: A systematic review \(nih.gov\)](#)

The Rt Hon Tobias Ellwood MP  
Chair, Defence Committee  
Committee Office  
House of Commons  
London  
SW1A 0AA

The research will evaluate which biomarkers (imaging, clinical and biofluid) are best to predict diagnosis and outcomes in mTBI that will allow identification of those at risk of long-term health issues who stand to benefit most from prompt and targeted therapy. The Principal Investigator (University of Birmingham) has met with US counterparts, and the Ministry of Defence (MOD) will continue to engage to with colleagues in the US in the research. It is expected that the outcome of the research will benefit both military and civilian patients by informing UK TBI guidelines and contributing to future NHS and MOD clinical commissioning decisions.

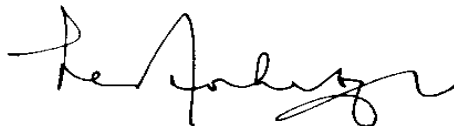
The Defence Medical Services has provided the initial funding for the mTBI-Predict trial and would welcome the Committee's support to secure funding as the research progresses to the next stages.

As you will appreciate, veterans' healthcare is the responsibility, of the NHS and it will be for the Department of Health and Social Care to provide advice on the guidance to Clinical Commissioning Groups (CCGs) on the use of MEG in veterans' healthcare; however, as I have outlined above, recent reviews have not supported the routine clinical use of MEG in mTBI at the current time.

I would be happy to write to the Committee to update you on the mTBI-Predict study as the research progresses.

I trust this clarifies the MOD position.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Leo Docherty', written in a cursive style.

**LEO DOCHERTY MP**