

Date and Time: 17th January 2012, 10:30-16:30

Place: NCGC Boardroom, 180 Great Portland Street, London, W1W 5QZ

Present: GDG

1. Howard Thomas (Chair) - present for notes 2-12	HT
2. Elizabeth Boxall – present for notes 5-12	EB
3. F Javier Vilar	JV
4. Angela Narbey	AN
5. Geoffrey Dusheiko – present for notes 1-9 and 11-12	GD
6. Alan Mitchell	AM
7. Gareth Tudor-Williams	GTW
8. Emily Lam	EL
9. Steven Bradley	SB

NCGC Technical team

10. Gill Ritchie	GR
11. Grammati Sarri	GS
12. Rosa Lau	RL
13. Laura Sawyer	LS
14. Amy Kelsey	AK
15. Richard Whittome – present for notes 11-12	RW
16. Sarah Bermingham	SB
17. Grant Hill-Cawthorne	GHC

NICE

18. Sarah Dunsdon	SD
19. Catharine Baden-Daintree – present for notes 7-11	CBD

Apologies

20. Aftab Ala	AA
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Observers

21. Grace Marsden	GM
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Notes

Minutes: Confirmed

Hepatitis B GDG Meeting 4

1. GR informed the group that the Chair was running late and, in his place, welcomed the group to the Hepatitis B Guideline Development Group (GDG) meeting 4. Apologies were received from Aftab Ala. GR also passed on apologies from EB who was running late due to train problems. GR welcomed Gareth Tudor-Williams (paediatrician) to the GDG. She then introduced Sarah Bermingham, NCGC Health Economist, to the GDG. SB will be taking over the health economist role from Laura Sawyer when she leaves at the end of January. GR then introduced Grace Marsden, NCGC Health Economist, as a meeting observer. The Chair arrived at 11:00am.
2. The Chair asked the GDG to declare if they had any personal specific, personal non-specific, non-personal specific or non-personal non-specific interests to declare since their previous declaration (upon acceptance of their GDG role).

GTW declared a personal non-pecuniary interest – he is a PI on a multi-national study sponsored by Roche that is looking at the use of pegylated interferon in children.

GD declared a personal pecuniary interest in having served as an advisor and received consulting fees for GlaxoSmithKline, Schering-Plough/merck, Bristol Myers Squibb and Gilead Sciences in 2011. As there were no changes in GD's previous declarations of interest, it was agreed that he would step out of the meeting room during the recommendation making discussions for the cirrhosis and liver decompensation question.

3. The Chair then briefed the group on the meetings objectives.
4. The Chair introduced Amy Kelsey, NCGC Project Manager, who gave a Claromentis demonstration to the group. The Chair thanked AK for her demonstration.
5. The Chair gave a short introductory presentation on sequential drug therapy to the group. He then introduced Grammati Sarri, NCGC Senior Research Fellow, who gave a presentation on the clinical effectiveness of sequential drug therapy (add-on or switching monotherapies) in achieving remission of the activity of CHB. The GDG then discussed the evidence presented. The Chair thanked GS for her presentation.
6. The Chair introduced Laura Sawyer, NCGC Senior Health Economist, who gave a presentation on the cost-effectiveness of sequential drug therapy (add-on or switching monotherapies) in achieving remission of the activity of CHB. The Chair thanked LS for her presentation. The GDG then discussed the evidence presented. The Chair thanked LS for her presentation.
7. The Chair introduced Catharine Baden-Daintree, NICE editor, who gave a short presentation on editing draft recommendations. The Chair thanked CBD for her presentation.
8. The Chair introduced Rosa Lau, NCGC Research Fellow, who gave a presentation on the clinical effectiveness of antiviral therapies for CHB patients with decompensated liver disease or advanced fibrosis/cirrhosis.

Notes

9. The Chair introduced Sarah Bermingham, NCGC Health Economist, who gave a presentation on the cost-effectiveness of antiviral therapies for CHB patients with decompensated liver disease or advanced fibrosis/cirrhosis.
10. The GDG then discussed the evidence presented and drafted 3 recommendations. Due to his potential conflicts of interest, GD was not included in the recommendation making discussions.
11. GS and RL then led discussion with the GDG on the research protocol for 2 clinical questions. The protocols for healthcare setting and referral thresholds were discussed by the GDG.
12. There was no other business to discuss. The Chair closed the meeting and thanked everyone for attending.

Date, time and venue of the next meeting

13. Tuesday 28th February 2012, 10:30-16:30, NCGC Boardroom, 180 Great Portland Street, London, W1W 5QZ.