at The Royal College of Surgeons of England, 35-43 Lincoln's Inn Fields, London WC2A 3PE T: 020 7869 6630 F: 020 7869 6639

LOWER URINARY TRACT SYMPTOMS GUIDELINE 6th Guideline Development Group Meeting

Meeting Held on Monday 14th July 2008 10.30am – 4.00pm Committee Room 3 at The Royal College of Surgeons of England

<u>14th July 2008 – Minutes</u>

Present: GDG members: Christopher Chapple (CC) Chair, William Turner (WT), Mark Speakman (MS), Jonathan Rees (JR), Julian Spinks (JS), Roy Latham (RL), Paul Joachim (PJ), Adrian Wagg (AW), Malcolm Lucas (ML), Angela Billington (AB), Thomas Ladds (TL)

NCC-AC

Clare Jones (CJ), Elisabetta Fenu (EF), Jennifer Hill (JH), Caroline Lawson (CL) left meeting at 12.15pm, Kate Homer (KH), Hanna Lewin (HL), Lee-Yee Chong (LYC), Karen Head – observed from 1.45pm.

Apologies: Apologies were received from James N'Dow (JN)

Agenda Item	Discussion/Outcome
 Introductions and apologies for absence (Chris Chapple – Chair) 	CC welcomed everyone to the 6 th LUTS GDG Meeting.
	Apologies Apologies were received from JN.
2. Declaration of interests (Chair)	CC asked for each GDG member to declare their interests verbally and asked them to complete their forms. Each attending GDG member declared his/her interests in front of all those present.
	CC, RL, WT, JR, JS, ML and PJ declared they knew of no personal pecuniary interest, personal family interest, non- personal pecuniary interest or personal non-pecuniary interest, above those declared at previous meetings.
	AW declared a non-personal pecuniary interest, Chairman of Bladder Master class for Astellas Pharma. He declared a personal non-pecuniary interest, he had dinner courtesy of Pfizer at the ICI meeting in Paris and BAUS. He declared that he knew of no personal pecuniary interest or personal family interest, above those declared at the previous meeting.
	MS declared a personal pecuniary interest, single lecture (debate) on anticholinergics for Astellas. He declared that he

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Agenda Item

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knew of no personal family interest, non-personal pecuniary interest or personal non-pecuniary interest, above those declared at the previous meeting. AB declared a personal pecuniary interest, she is involved in an educational package for Pfizer and educational symposium for Coloplast. Articles for nursing press on catheters. She had dinner courtesy of Pfizer at the ICI meeting. She did not declare a personal family interest, non-personal pecuniary interest or personal non-pecuniary interest. TL declared that he knew of no personal pecuniary interest, personal family interest or personal non-pecuniary interest. He declared a non-personal pecuniary interest, lecture fees for Astrazeneca and Coloplast Ltd, which were paid to departmental charitable research fund. NCC-AC Staff: CJ, EF, CL, KH, HL, JB and LYC all declared that they knew of no personal pecuniary interest, personal family interest, nonpersonal pecuniary interest and personal non-pecuniary interest. JH declared that she knew of no personal pecuniary interest, personal family interest, personal non-pecuniary interest. She did declare a non-personal pecuniary interest, manages the NCC-AC which is funded by NICE. The chair noted that no action was required on these personal pecuniary interests as none of the products involved were discussed at this meeting. 3. Minutes of the last The minutes of the last meeting were reviewed by the group and meetings were accepted as an accurate record. 4. Progress report CJ presented the progress update and the main aims of the meeting to the GDG members. KH gave an introductory presentation on meta-analysis, forest 5. Meta-analysis and understanding forest plots and GRADE. plots/Introduction to GRADE -Presentation (Kate Homer) 6. Review of clinical KH presented the systematic review on the conservative evidence on pelvic floor management of LUTS by pelvic floor muscle training. muscle training. 7. Review of clinical CJ and LYC presented the evidence on conservative products to evidence on products the GDG.

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8. Review of clinical evidence on bladder training

LYC presented the evidence on conservative bladder training.

9. Review of clinical evidence on patient views
Presentation (Clare Jones and Lee-Yee Chong)
10. Workshop on evidence and recommendations – conservative treatments
Presentation (Clare Jones)
Sub-group work

CJ and LYC gave a presentation on patient views evidence for conservative interventions.

A workshop was completed where the GDG worked in four subgroups to discuss the conservative evidence.

11. Results of the workshop on evidence and recommendations	Each group reported back to the entire GDG the results of their discussions in the sub-groups.
12. Any other business	PJ requested that the GDG consider recommendations specifically for men with cognitive impairments at a later meeting.
13. Close and date of next meeting	CC thanked everyone for attending and closed the meeting. The next meeting will take place on Monday 8 th September 2008 in the Ronald Raven Room at the Royal College of Surgeons of England.