NATIONAL COLLABORATING CENTRE FOR CANCER (NCC-C)

Suspected Cancer

Eigth Guideline Development Group (GDG) meeting on Wednesday 4 September 2013, Board Room, NCC-C, Park House,

Greyfriars Road, Cardiff

GROUP MEMBERSHIP

GDG Members	
Dr Steve Hajioff (SHa)	Dr Lindsay Smith (LS)
Professor Willie Hamilton (WH)	Dr Stuart Williams (SW)
Dr Euan Paterson (EP)	Mrs Nicki Doherty (ND)
Dr Jeanne Fay (JF)	Mr David Martin (DM)
Mrs Nicki Doherty (ND)	Dr Richard Osborne (RO)
Mrs Susan Hay (SH)	
NCC-C staff	
Angela Bennett (AB)	Dr Nathan Bromham (NB)
Dr Andrew Champion (AC)	Laura Bunting (LB)
Katrina Asquith-Coe (KAC)	Victoria Kelly (VK)
Delyth Morris (DM)	David Jarrom (DJ)
NICE staff	
Katie Perryman-Ford (KPF)	
Apologies	
Dr Joan Meakins (JM)	Mrs Susan Ballard (SB)
Dr Karen Sennett (KS)	Dr Yoryos Lyratzopoulos (YL)
Dr John Graham (JG)	Dr Mia Schmidt-Hansen (MSH)

REPORT OF DISCUSSIONS AT THE MEETING

1 Welcome and apologies

SHa welcomed everyone to the 8th meeting of the Suspected Cancer GDG and introduced himself as the new Chair to the group. SHa is a consultant in public health medicine and his current role is specialised commissioning. SHa is the English National Public Health Lead for Women's and Children's services and the London Public Lead for Women's and Children's services. SHa has a background of 20 years in general practice including academic practice in clinical decision support software. SHa left general practice 5 years ago to become Medical Director of the world's largest producer of clinical risk prediction models and Chief Officer of the British Medical Association. SHa is also a member of NICE accreditation advisory committee which approves organisations to produce guidelines. The GDG also introduced themselves.

SHa informed that due to prior commitments he will need to leave the meeting slightly early and that RJO has volunteered to Chair on his behalf.

SHa informed that due to the workload of the guideline an additional 2 day meeting will be required next year. KAC has emailed the GDG with potential dates and requested members reply with their availability as soon as possible. Once the additional meeting has been finalised KAC will circulate the final list of meeting dates to the GDG.

Apologies for absence were received from Joan Meakins, Sue Ballard, Yoryos Lyratzopolous, Karen Sennett and Mia Schmidt-Hansen. SHa welcomed Delyth Morris, David Jarom and James Hawkins from the NCC-C as observers. SHa also welcomed Nathan Bromham who will be presenting the clinical evidence on behalf of Mia Schmidt-Hansen who is on annual leave.

2 Declarations of interest

The following declarations of interest were noted:

SHa declared that he is a member of NICEs accreditation advisory committee. This was classed as personal non-pecuniary meaning that SHa can participate in discussion on all guideline topics.

SHa declared that he is the medical director of charity that promotes testicular self examination in young men. This was classed as personal non-pecuniary meaning that SHa can participate in discussion on all guideline topics.

WH declared that he has submitted the following grant applications to CRUK:

- OGRE looking at the use of risk assessment tools for suspected oesophago-gastric cancer. Results of the grant application are not expected until Spring 2014. WH reported that YL is also a co-applicant. If WH is awarded the grant it will be classed as non-personal pecuniary meaning that WH can participate in discussion on all guideline topics.
- BODYSHOP looking at symptom profiles of bowel disease in young people. If WH is awarded the grant it will be classed as non-personal pecuniary meaning that WH can participate in discussion on all guideline topics.
- Breast cancer awareness measures. If WH is awarded the grant it will be classed as nonpersonal pecuniary meaning that WH can participate in discussion on all guideline topics.
- ABCDEEP creating a league table of cancers where symptomatic diagnosis is of value in terms of mortality. WH reported that YL is also a co-applicant. If WH is awarded the grant it will be classed as non-personal pecuniary meaning that WH can participate in discussion on all guideline topics.

The GDG were reminded that if they take on any new interests, these must be declared to the NCC-C as soon as they happen so that the necessary action can be taken.

3 Minutes of the last GDG meeting on 23 and 24 July 2013

The minutes of the last meeting were agreed as a true and accurate record of the meeting. No corrections were noted.

4 Discussion

The GDG discussed expert advisors.

The GDG discussed the health economic proposals for the guideline.

The clinical evidence for leukaemia was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

The clinical evidence for myeloma was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

The clinical evidence for mesothelioma was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

5 Close of meeting

SHa thanked members for their input to the meeting, reminded them that the next meeting would be on Thursday 3 & Friday 4 October 2013 at NCC-C, Cardiff.