NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Interventional Procedures Advisory Committee

Minutes of the Committee’s 170th meeting held at 10:30 on 14th June 2018 at NICE, 10 Spring Gardens, London, SW1A 2BU.

PRESENT:
Dr Tom Clutton-Brock (Chair)
Dr Wael Agur
Mrs Sally Brearley
Dr Nicholas Chalmers
Mr Mahmoud Elfar
Mrs Rosemary Harris
Mr Anthony Hatswell
Mr Colin Howie
Mr Alistair Jenkins
Mr Malcolm Lowe-lauri
Dr Neil McGuire
Mr Kieran Murphy
Mr Frank Smith
Dr Dhiraj Tripathi
Dr James Tysome

In Attendance
NICE Staff:
Mrs Bijal Joshi - Programme Manager, IPP
Mrs Helen Gallo - Analyst, IPP
Professor Kevin Harris - Programme Director Clinical Advisor, IPP
Miss Chloe Kastoryano - Public Involvement Adviser, PIP
Professor John Powell, Consultant Clinical Advisor, IPP
Ms Deonee Stanislaus – Administrator (Temp), IPP
Mrs Vassilia Verdiel - Analyst IPP
Mrs Lakshmi Mandava- Analyst IPP

Observers: Sophia Lee

Apologies: Dr Andrew Cook
Dr Chris Carroll
Dr Anthony Emmerson
Mr Jonathan Anderson
Dr Peter Murphy
Mr Tim Jackson
Dr Tim Kinnaird
Dr Zahida Adam
Dr Neil Mcguire

Note: The order in which the Committee took items of business at the meeting might differ from the agenda

Meeting started: 10:35
Introduction to the meeting

The Chairman welcomed the Committee Members and observers. Sophia Lee was welcomed as an observer. She is doing an internship at NICE. Bijal Joshi – Programme Manager has returned from maternity leave. Deonee Stanislaus – Administrator will be leaving NICE.

The Chairman also welcomed the members of the public and company representatives present at the meeting.

Code of conduct for members of the public and company representatives attending the meeting

The Chairman outlined the code of conduct for the members of the public and company representatives attending the meeting.

1. Any Other Business

Mark Campbell will be the Acting Programme Director whilst Mirella Marlow will be covering a different team. Meindert Boysen has been appointed as Centre Director. Outstanding annual declarations of interest forms which to be completed today and returned to Administrator. Previous Committee Member Stephen Large has been honoured at the recent NHS hero’s awards. David Haslam has been knighted in Queen’s birthday honours for his services to NHS Leadership.

2. Minutes of previous meeting

Members accepted these as a correct record except for the following: Page 8 – Title of brief spelt incorrectly. Thomas Clutton-Brock advised that this correction has already been made.

3. Matters arising

None

4. Agenda changes

The chairman informed the Committee that the ordering of agenda items is correct.

5. NICE’s Advisory Body guide to declaring a conflict of interest

The Chairman drew the Committee’s attention to NICE’s advisory body quick guide for declaring conflicts of interest.
6. **Newly Notified Procedures**

**IP1043 - Transcranial MRI guided focused ultrasound thalamotomy for neuropathic pain**

The discussion on IP1043 - Transcranial MRI guided focused ultrasound thalamotomy for neuropathic pain started at 10:46.

Kieran Murphy declared a direct financial interest in a competitor product for this procedure and therefore left for the discussion and did not participate in the decision making.

The Committee was reminded that equalities issues was discussed at the brief stage.

Introduced by **Anthony Hatswell** and **Alistair Jenkins**

The Chairman declared a Part Two and members of the public as well as company representatives left the meeting at 11:08.

The Committee made its provisional recommendations on the safety and efficacy of the procedure.

The discussion on IP1043 Transcranial MRI guided focused ultrasound thalamotomy for neuropathic pain ended at 11:34.

Kieran Murphy and members of the public as well as company representatives returned at 11:37.

**IP1097/2 - Platelet-rich plasma injections for osteoarthritis of the knee**

The discussion on IP1097/2 - Platelet-rich plasma injections for osteoarthritis of the knee started at 11:37.

Colin Howie declared that he has a colleague involved in research related to this IP. This was considered an indirect interest and he was allowed to stay for the discussion and decision making.

Anthony Hatswell declared that he was a co-author on two abstracts on the cost effectiveness of glucosamine for treating osteoarthritis (2011 and 2013). As this was more than 12 months before he joined the committee it was not considered a conflict of interest. He was allowed able to stay for the discussion and decision making.

The Committee was reminded that equalities issues was discussed at the brief stage.

Introduced by **James Tysome** and **Colin Howie**

The Chairman declared a Part Two and members of the public as well as company representatives left the meeting at 12:17.

The Committee made its provisional recommendations on the safety and efficacy of the procedure.
The discussion on IP1097/2 - Platelet-rich plasma injections for osteoarthritis of the knee ended at 12:43.

The members of the public as well as company representatives returned at 13:22.

7. Public Consultation comments

IP395/2 - Intravesical microwave hyperthermia and chemotherapy for superficial bladder cancer

The discussion on IP395/2 - Intravesical microwave hyperthermia and chemotherapy for superficial bladder cancer did not go ahead due to an administrative error with the collation of public consultation comments.

IP 1192 - Leadless cardiac pacemaker implantation for bradyarrhythmias

The discussion on IP - 1192 Leadless cardiac pacemaker implantation for bradyarrhythmias started at 13:22.

No conflicts of interest were declared for this procedure.

No other conflicts of interest were declared.

The Committee was reminded that equalities issues was discussed at the brief stage.

Introduced by Tom Clutton-Brock

The Committee considered the consultation comments and made changes to sections 3.7, 1.2, 2.2, 2.3, 2.4, 3.6, 1.5 and lay box in part 1.

The following study, identified during consultation, will be added to the main table of the Overview:


Tjong et.al., Leadless pacemaker versus transvenous single chamber pacemaker therapy: a propensity matched analysis. Heart Rhythm, 2018, April 27 (635 patients, of which 254 leadless and 381 transvenous)

Yarlagadda et.al., Safety and feasibility of leadless pacemaker in patients undergoing atrioventricular node ablation for atrial fibrillation. Heart Rhythm 2018, Mar 1 (127 patients, of which 60 leadless and 67 transvenous)


Tjong FVY, Knops RE et al 92018), midterm safety and performance of a leadless cardiac pacemaker: 3 year follow-up to the leadless trial (Nanostim safety and performance trial of a leadless cardiac pacemaker system). Circulation 137:633-35. (add 3 year data to study 1)

The Chairman declared a Part Two and members of the public as well as company representatives left the meeting at 14:18.
The Committee upheld its decision on the safety and efficacy of the procedure.

The discussion on IP - 1192 Leadless cardiac pacemaker implantation for bradyarrhythmias ended at 14:40.

The members of the public as well as company representatives returned to the meeting at 14:42.

IP865/2 - Sutureless Aortic Valve Replacement for aortic stenosis
The discussion on IP865/2 - Sutureless Aortic Valve Replacement for aortic stenosis started at 14:43.

No conflicts of interest were declared for this procedure

No other conflicts of interest were declared.

The Committee was reminded that equalities issues was discussed at the brief stage.

Introduced by Tom Clutton-Brock

The Committee considered the consultation comments and made changes to sections 2.3, 2.4, 3.7, 3.1, 1.3 and a title change.

The Chairman declared a Part Two and members of the public as well as company representatives left the meeting at 15:05.

The Committee then made changes to section.

The Committee upheld its decision on the safety and efficacy of the procedure

The discussion on IP865/2 - Sutureless Aortic Valve Replacement for aortic stenosis ended at 15:10.

The members of the public as well as company representatives returned to the meeting at 15:11.

IP1567 - Superior rectal artery embolisation for haemorrhoids
The discussion on IP1567 - Superior rectal artery embolisation for haemorrhoids started at 15:12.

No conflicts of interest were declared for this procedure

The Committee was reminded that equalities issues was discussed at the brief stage.

Introduced by Nicholas Chalmers

The Committee considered the consultation comments.
The Committee upheld its decision on the safety and efficacy of the procedure.

The discussion on IP1567 - Superior rectal artery embolisation for haemorrhoids ended at 15:22.

The members of the public as well as company representatives returned to the meeting at 15:24.

IP1555 - Transurethral water vapour ablation for lower urinary tract symptoms caused by benign prostatic hyperplasia

The discussion on IP1555 - Transurethral water vapour ablation for lower urinary tract symptoms caused by benign prostatic hyperplasia started at 15:24.

No conflicts of interest were declared for this procedure

The Committee was reminded that equalities issues was discussed at the brief stage.

Introduced by Mahmoud Elfar

The Committee considered the consultation comments and made changes to sections 2.2 and 2.3

The following studies, identified during consultation, will be added to the main table of the Overview:


The Chairman declared a Part Two and members of the public as well as company representatives left the meeting at 15:41.

The Committee upheld its decision on the safety and efficacy of the procedure.

The discussion on IP1555 Transurethral water vapour ablation for lower urinary tract symptoms caused by benign prostatic hyperplasia ended at 15:43.

8. Briefs of procedures for future assessment

IP1709 - Laser treatment for an anal fistula

The discussion on IP1709 - Laser treatment for an anal fistula started at 15:44.
The Chair reminded the committee that the equalities and diversity section is in the brief and should be reviewed and commented on as necessary by all the Committee.

Tom Clutton–Brock declared he is a co-recipient of a grant from the NIHR into a treatment for anal fistula. This was considered a non-financial professional and personal conflict of interest.

Introduced by Tom Clutton-Brock

The Committee advised on the content of the brief for evaluation of this procedure.

The discussion on IP1709 - Laser treatment for an anal fistula ended at 15:52.

IP1703 - Barnett Continent Intestinal Reservoir (modified continent ileostomy) to restore continence following removal of the colon and rectum.

The discussion on IP1703 - Barnett Continent Intestinal Reservoir (modified continent ileostomy) to restore continence following removal of the colon and rectum started at 15:52.

The Chair reminded the committee that the equalities and diversity section is in the brief and should be reviewed and commented on as necessary by all the Committee.

No conflicts declared

Introduced by Tom Clutton-Brock

The Committee advised on the content of the brief for evaluation of this procedure.

The discussion on IP1703 Barnett Continent Intestinal Reservoir (modified continent ileostomy) to restore continence following removal of the colon and rectum ended at 15:58.

IP1718 - High intensity focused ultrasound ablation for symptomatic benign thyroid nodules

The discussion on IP1718 - High intensity focused ultrasound ablation for symptomatic benign thyroid nodules started at 15:58.

The Chair reminded the committee that the equalities and diversity section is in the brief and should be reviewed and commented on as necessary by all the Committee.

No conflicts declared

Introduced by Nicholas Chalmers

The Committee advised on the content of the brief for evaluation of this procedure.
The discussion on IP1718 - High intensity focused ultrasound ablation for symptomatic benign thyroid nodules ended at 16:10.

10. **Date of the next meeting**

The 171th meeting of the Interventional Procedures Advisory Committee will be held on **Thursday 12 July 2018**, and will start promptly at 10:30. The meeting will be held at **NICE, 10 Spring Gardens, London, SW1A 2BU**.

The meeting ended at **16:10**.