

Technology Appraisal Committee Meeting (Committee B)

Minutes: Unconfirmed

Date and Time: Tuesday 13 January, 10.00am to 5.00pm

Venue:

Prospero House
241 Borough High Street
London
SE1 1GA

Present:		
1.	Chair, Dr Amanda Adler	Present for all notes
2.	Vice Chair, Professor Ken Stein	Present for all notes
3.	Professor John Cairns	Present for all notes
4.	Mr Matthew Campbell-Hill	Present for all notes
5.	Professor Imran Chaudhry	Present for notes 1 to 21
6.	Mr Mark Chapman	Present for all notes
7.	Dr Neil Iosson	Present for all notes
8.	Anne Joshua	Present for all notes
9.	Dr Rebecca Kearney	Present for all notes
10.	Dr Sanjay Kinra	Present for all notes
11.	Dr Miriam McCarthy	Present for all notes
12.	Professor Ruairidh Milne	Present for all notes
13.	Dr Peter Norrie	Present for all notes
14.	Christopher O'Regan	Present for all notes
15.	Professor Stephen Palmer	Present for all notes
16.	Dr Sanjeev Patel	Present for all notes
17.	Professor John Poundsford	Present for all notes
18.	Dr Danielle Preedy	Present for all notes
19.	Dr John Rodriguez	Present for all notes
20.	Alun Roebuck	Present for all notes
21.	Cliff Snelling	Present for all notes
22.	Dr Marta Soares	Present for notes 1 to 21
23.	Professor Andrew Stevens	Present for all notes
24.	Dr Nicky Welton	Present for notes 1 to 21

In attendance:

Meindert Boysen	Programme Director, National Institute for Health and Care Excellence	Present for all notes
Dr Elisabeth George	Associate Director, National Institute for Health and Care Excellence	Present for all notes
Jeremy Powell	Project Manager, National Institute for	Present for all notes

	Health and Care Excellence	
Stuart Wood	Administrator, National Institute for Health and Care Excellence	Present for all notes
Anwar Jilani	Technical Analyst, National Institute for Health and Care Excellence	Present for notes 1 to 16
Joanna Richardson	Technical Adviser, National Institute for Health and Clinical Excellence	Present for notes 1 to 16
Martyn Burke	Technical Analyst, National Institute for Health and Care Excellence	Present for notes 16 to 24
Dr Jeremy Jones	Principle Research Fellow, Southampton Health Technology Assessment Centre	Present for notes 1 to 16
Dr Jo Picot	Research Fellow, Southampton Health Technology Assessment Centre	Present for notes 1 to 16
Dr Clive Grattan	Consultant Dermatologist Nominated by British Association of Dermatologists (BAD)	Present for notes 1 to 16
Dr Sinisa Savic	Consultant Clinical Immunologist Nominated by Novartis and Royal College of Pathologists	Present for notes 1 to 16
Dr Shuaib Nasser	Consultant in Allergy and Asthma Nominated by British Society for Allergy and Clinical Immunology	Present for notes 1 to 16
Maureen Jenkins	Patient Expert Nominated by Allergy UK	Present for notes 1 to 16
Deborah Shipman	Patient Expert Nominated by Allergy UK	Present for notes 1 to 16

Non-public observers:

Heidi Livingstone	NICE PIP Staff	Present for notes all notes
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Notes**Welcome**

1. The Chair welcomed all members of the Committee and other attendees present to the meeting. The Chair reviewed the agenda and timescales for the meeting, which included the appraisals of omalizumab for treating previously treated chronic spontaneous urticaria.
2. The Chair welcomed Dr Sanjay Kinra to his first meeting as a member of the Appraisal Committee
3. Apologies were received from Professor Keith Abrams, Dr Ray Armstrong, Dr Jeff Aronson, Dr Lisa Cooper, Professor Daniel Hochhauser and Dr Nerys Woolacott

Any other Business

4. None

Notes from the last meeting

5. The minutes of the meeting held on Wednesday 19 November were approved.

Appraisal of omalizumab for treating previously treated chronic spontaneous urticaria**Part 1 – Open session**

6. The Chair welcomed the invited experts: Dr Clive Grattan, Dr Sinisa Savic, Dr Shuaib Nasser, Dr Jeremy Jones and Dr Jo Picot to the meeting and they introduced themselves to the Committee.
7. The Chair welcomed company representatives from Novartis to the meeting.
8. The Chair asked all Committee members to declare any relevant interests
 - 8.1. Dr Amanda Adler, Professor Ken Stein, Professor Keith Abrams, Professor John Cairns, Mr Matthew Campbell-Hill, Professor Imran Chaudhry, Mr Mark Chapman, Dr Neil Iosson, Mrs Anne Joshua, Dr Rebecca Kearney, Dr Sanjay Kinra, Dr Miriam McCarthy, Professor Ruairidh Milne, Dr Peter Norrie, Professor Stephen Palmer, Dr Sanjeev Patel, Professor John Poundsford, Dr Danielle Preedy, Dr John Rodriguez, Mr Alun Roebuck, Mr Cliff Snelling, Dr Marta Soares, Professor Andrew Stevens and Dr Nicky Welton all declared that they knew of no personal specific pecuniary interest, personal non-specific pecuniary interest, non-personal specific pecuniary interest, non-personal non-specific pecuniary interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of omalizumab for treating previously treated chronic spontaneous urticaria.

8.1. Chris O'Regan declared a non-personal specific pecuniary interest as his company markets montelukast, which can be used in combination with other drugs in the treatment pathway of chronic spontaneous urticaria. However, (1) omalizumab is licensed as an add on therapy, and therefore it is not expected that a specific product is displaced, (2) the company making omalizumab only provided analyses that positioned omalizumab after use of therapies including montelukast, and (3) montelukast is a generic drug manufactured by more than one company. For NICE's conflicts policy, competitive interest refers to an interest in a company which produces a product which is a competitor to the one under consideration in an appraisal, and whose position is likely to be significantly influenced by the guidance. This is not the case in this situation.

8.1.1. It was agreed that this declaration would not prevent Chris O'Regan from participating in this section of the meeting.

9. The Chair asked all NICE Staff to declare any relevant interests.

9.1. All declared that they knew of no personal specific pecuniary interest, personal non-specific pecuniary interest, non-personal specific pecuniary interest, non-personal non-specific pecuniary interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of omalizumab for treating previously treated chronic spontaneous urticaria.

10. The Chair asked all other invited guests assessment group and invited experts, not including observers) to declare their relevant interests.

10.1. All declared that they knew of no personal specific pecuniary interest, personal non-specific pecuniary interest, non-personal specific pecuniary interest, non-personal non-specific pecuniary interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of omalizumab for treating previously treated chronic spontaneous urticaria.

11. The Chair introduced the key themes and additional analyses arising from the consultation responses to the Appraisal Consultation Document (ACD) received from consultees, commentators and through the NICE website.

12. The Committee then discussed the clinical effectiveness, patient perspective and cost effectiveness of omalizumab for treating previously treated chronic spontaneous urticaria on the basis of the evidence before them, and potential equality issues raised in this appraisal. They sought clarification and advice from the experts present. The discussions included:

- 12.1. A recap of the discussions at the first appraisal committee meeting, including the rationale for preliminary 'minded-no' recommendation and the specification of additional analyses requested by the Committee.
- 12.2. The additional evidence and revised cost-effective analyses submitted by the company and critique by the Evidence Review Group.
- 12.3. The key themes arising from the consultation responses to the Appraisal Consultation Document (ACD) received from consultees, commentators and from the members of public through the NICE website.

- 12.4. The views and concerns of clinical and patients' experts.
- 12.5. The Committee's view on the additional evidence, revised analyses and issues raised in consultation comments
13. The Chair asked the company representatives whether they wished to comment on any matters of factual accuracy.
14. The Chair explained that "representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest" (Section 1(2) Public Bodies (Admission to Meetings) Act 1960)" and all public attendees left the meeting.
15. The Chair then thanked the experts, company representatives and academic group for their attendance, participation and contribution to the appraisal and they left the meeting.

Part 2 – Closed session

16. The Committee continued to discuss the clinical and cost effectiveness of omalizumab for treating previously treated chronic spontaneous urticaria.
17. The Committee instructed the technical team to prepare the Final Appraisal Determination (FAD) in line with their decisions.

Appraisal of pomalidomide for treating relapsed and refractory multiple myeloma previously treated with both lenalidomide and bortezomib

Part 2 – Closed session

18. The Chair asked all Committee members to declare any relevant interests
 - 18.1. Dr Amanda Adler, Professor Ken Stein, Professor Keith Abrams, Professor John Cairns, Mr Matthew Campbell-Hill, Professor Imran Chaudhry, Mr Mark Chapman, Dr Neil Iosson, Mrs Anne Joshua, Dr Rebecca Kearney, Dr Sanjay Kinra, Dr Miriam McCarthy, Professor Ruairidh Milne, Dr Peter Norrie, Professor Stephen Palmer, Dr Sanjeev Patel, Professor John Poundsford, Dr Danielle Preedy, Dr John Rodriguez, Mr Alun Roebuck, Mr Cliff Snelling, Dr Marta Soares, Professor Andrew Stevens and Dr Nicky Welton all declared that they knew of no personal specific pecuniary interest, personal non-specific pecuniary interest, non-personal specific pecuniary interest, non-personal non-specific pecuniary interest, personal specific family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of pomalidomide for treating relapsed and refractory multiple myeloma previously treated with both lenalidomide and bortezomib.
19. The Chair asked all NICE Staff to declare any relevant interests.
 - 19.1. All declared that they knew of no personal specific pecuniary interest, personal non-specific pecuniary interest, non-personal specific pecuniary interest, non-personal non-specific pecuniary interest, personal specific

family interest or personal non-specific family interest for any of the technologies to be considered as part of the appraisal of pomalidomide for treating relapsed and refractory multiple myeloma previously treated with both lenalidomide and bortezomib.

20. The Chair reminded the Committee of the key themes arising from the consultation responses to the Appraisal Consultation Document (ACD) received from consultees, commentators and through the NICE website.
21. The Committee reconsidered its discussion of the clinical effectiveness and cost effectiveness of pomalidomide for treating relapsed and refractory multiple myeloma previously treated with both lenalidomide and bortezomib on the basis of the evidence before them. The discussions included:
 - 21.1. The quality of the evidence available for the comparator interventions.
 - 21.2. The data available for overall survival with current care in the NHS.
 - 21.3. The overall survival in the economic model.
22. The Committee instructed the technical team to prepare the Final Appraisal Determination (FAD) in line with their decisions.

Date, time and venue of the next meeting

23. Tuesday 10 February, 2015 at the Royal College of General Practitioners, 30 Euston Square, NW1 2FB