

**National Collaborating Centre for
Women's and Children's Health**

Confirmed 7th Meningitis in Children Guideline Development Group (GDG) Minutes
Wednesday 11th February 2009, at the Royal College of Obstetricians and Gynaecologists

Present:	Andrew Pollard (AP)	(Chair)
	Philip Monk (PM)	Public Health Medicine
	Caroline Haines (CH)	Hospital Children's Nurse
	Nelly Ninis (NN)	General Paediatrician
	Alistair Thomson (AT)	General Paediatrician
	Simon Nadel (SN)	Paediatric Intensive Care
	Angela Cloke (AC)	Patient/Carer Representative
	Linda Glennie (LG)	Patient/Carer Representative
	Mathew Thompson (MT)	General Practitioner
	Simon Kroll (SK)	Paediatric Infectious Diseases - Children
	Paul Heath (PH)	Paediatric Infectious Diseases - Neonates
	Ian Maconochie (IM)	Paediatric Emergency Medicine
	Martin Richardson (MR)	General Paediatrician
NCC Team:	Shona Burman Roy (SBR)	Research Fellow, NCC-WCH
	Jay Banerjee (JB)	Clinical Co-director in Child Health, NCC-WCH
	Maria Peila (MP)	Work Programme Co-ordinator, NCC-WCH
	Paul Jacklin (PJ)	Senior Health Economist, NCC-WCH
	Roz Ullman (RU)	Senior Research Fellow, NCC-WCH
	Rupert Franklin (RF)	Project Manager, NCC-WCH
	Wendy Riches (WR)	Executive Director, NCC-WCH
Invited:	David Turner (DT)	External Advisor - Clinical Microbiologist
	Caroline Keir (CK)	Guidelines Commissioning Manager, NICE
Apologies:	Sheila McQueen (SM)	Hospital Children's Nurse

1. AP called the meeting to order at 10:00

SBR and RF were introduced to the GDG and their future roles explained. Apologies were received from SM. There were a few minor changes to the minutes of the 6th GDG meeting, and they were approved as an accurate record of the meeting.

There were no new interests declared by those present at the meeting. It was agreed that no interests declared at the meeting or previously warranted exclusion of any GDG members from discussions of evidence or formulation of recommendations. Declarations are kept on record at the NCC-WCH and will be published in the full guideline.

The GDG were briefed on the forthcoming meetings and what to expect.

2. IMMUNODEFICIENCY

The relevant studies on immunodeficiency were presented.

The group voted on which strains of the infection should be tested for. They also discussed potential research recommendations.

Break

3. PETECHIAL RASH

The evidence on petechial rash was presented.

The GDG discussed the evidence statement and presented evidence.

Two research recommendation proposals were suggested.

4. LONG-TERM SEQUELAE

The evidence on long-term sequelae was presented and the group discussed it.

The topic group was asked to prepare a translation and recommendations to be reviewed at a later date.

LUNCH

The group were informed that JB and MP will be leaving the guideline.

5. HEALTH ECONOMICS

The health economist presented preliminary health economics prepared in relation to the PCR question.

The GDG suggested some slight changes to the model.

6. REVIEW OF RECOMMENDATIONS – SKIN ASPIRATES

The GDG reviewed the recommendations for this section and suggested amendments.

7. REVIEW OF RECOMMENDATIONS – CT SCAN

The GDG reviewed the recommendations for this section and suggested amendments.

8. REVIEW OF RECOMMENDATIONS – PRE-HOSPITAL ANTIBIOTICS

The GDG were presented with some rewording of these recommendations. The group discussed these proposed changes

9. REVIEW OF RECOMMENDATIONS – IMPERIC ANTIBIOTICS

The GDG reviewed the recommendations for this section and suggested amendments.

10. REVIEW OF RECOMMENDATIONS – SPECIFIC ANTIBIOTICS

The GDG discussed the interpretation and suggested amendments to clarify the justification for the recommendations.

Break

11. REVIEW OF RECOMMENDATIONS – FLUIDS & VASOACTIVE AGENTS

The GDG felt the information contained in this section needed to be rearranged and presented with more clarity and order. The GDG will revisit this section at the next meeting.

12. REVIEW OF RECOMMENDATIONS – PRE-EMPTIVE INTUBATION

The interpretation section was made more explanatory and less directive.

13. ALGORITHMS

The GDG reviewed the two algorithms. Each topic group was asked to check that the recommendations in their sections are covered (boxed) in the algorithm.

14. AOB

AP introduced glossary terms to the group and asked them to define their assigned words

Meeting adjourned at 16:00

Signed:..... Date:.....
Dr Jay Banerjee, Clinical Co-director, NCC-WCH

Signed:..... Date:.....
Dr Andrew Pollard, Meningitis in Children GDG Chair