Date and Time: **9th & 10th July 2009**

Minutes:

Guideline Development Group Meeting

Place: Level 1A
City Tower
Piccadilly Plaza
Manchester
M1 4BD

Present

Damien Longson (Chair) (DE)
Laurence Lovat
Ricky Forbes-Young
Hugh Barr
Robert Mason (Day 2 only)
Janusz Jankowski
Pradeep Bhandari
David Poller
Andrea Nicholls
Mimi McCord

NICE Staff
Kathryn Chamberlain (KC)
Beth Shaw (EJS)
Nicole Elliott (NE)
Hanna Lewin (HL)
Ben Doak (BD) (Day 2 only)
Mark Baker (Day 2 only)
Francis Ruiz (FR) (Day 1 only)
Prashanth Kandaswamy (PK) (Day 1 only)
Nichole Taske (Observer) (Day 2 only)

Apologies None received

Thursday 9th July 2009

1.1 Agenda item 1:Introductions & GDG working

DL welcomed the group and all GDG members and NICE staff introduced themselves.

Apologies for day 1 were received by Robert Mason.

DL gave a presentation of GDG working including his role as the chair of the group. There was some discussion about the title of the guideline. It was clarified that the guideline would include high grade dysplasia and intramucosal cancer.

The group requested that the date of publication be brought forward by approximately two weeks to coincide with an International conference to be held in May 2010.

1.2 Agenda item 2:

- **Developing NICE clinical guidelines:** EJS gave a presentation on clinical guidelines and process development, indicating how the process with work for this guideline. She discussed the evidence and explained that GRADE methodology would be used to assess the quality of the evidence. Concerns that this could lead to some things that the group considered important being left out. The group will be able to see a copy of all the included and excluded studies.
- **Literature searching:** HL gave a presentation on literature searching. A question was asked about what the overlaps between the databases used for the searches are. HL explained that there is very little overlap. Concerns were expressed that unpublished studies would not be picked up, and as this is a rapidly moving area there will be a lot of pre publication data. HL informed the group that we can look at abstracts, although we may not be able to use them as evidence. A discussion is planned to consider whether the make a call for evidence.
- **Health Economics:** PK gave a presentation on health economics. PK will talk about the health economics specific to this guideline at a later stage in the meeting.

1.3 Agenda item 3: NICE - Overview/SCG and DoI

NE gave the GDG an overview of NICE, the work of the centre for clinical practice, and the short clinical guidelines team and declarations of interest (DoI).

1.4 **Agenda item 4: Summary of scope**

EJS presented a summary of the scope. The group discussed

1.5 Agenda item 5: General discussion/generate themes

The group discussed the title of the guideline and felt it did not currently represent what the guideline should consist of. NE explained that a change in the remit would need to be referred back to the department of health, but we would consider looking at the title, or possibly include a section in the introduction of the guideline to fully reflect the content of the guideline.

The group considered equality and diversity and all groups that this guideline would relate to.

1.6 Agenda item 6: Care Pathway

PB, with input from the GDG, drew a flow diagram to show a general care pathway.

1.7 Agenda Item 7: Health Economics – general discussion

PK presented his proposals on what the health economics for this guideline may consist of, and the group considered the health economics to be included in the guideline.

1.8 Agenda item 8: Summary of Day 1

DL closed the meeting. KC asked all attendees to return the confidentiality, DoI and explained that we were using a new system to claim travel and subsistence allowances. If anyone had any problems with the system they should contact either KC or Chris Hay in the Finance department at NICE.

Friday 10th July 2009

1.9 Agenda item 1: Review of Day 1

DL welcomed the group and introduced attendees who had not been present the previous day.

1.10 Agenda item 2: Interventional procedures

BD gave a presentation on interventional procedures (IP) explaining the process and the relevance the IP's in relation to this guideline. The group needed to decide whether to refer the IP's back to the IP programmed for review. A review would only take place if there was sufficient strong evidence to warrant this.

1.11 Agenda item 3: High grade dysplasia diagnosis

EJS gave a presentation on diagnosis and staging. She asked whether we assume that high-grade dysplasia is classified using a specified system. If so, which classifications should be adopted?

1.12 Agenda item 4: Key clinical questions

EJS presented the clinical questions and asked the group for comments. She will then revise the questions and forward them to the group to finalise, prior to GDG 2.

1.13 Agenda item 5: Agree and define outcomes

EJS presented the outcomes and asked the group for comments. She will then revise the questions and forward them to the group to finalise, prior to GDG 2.

1.14 Agenda item 6: Writing out for evidence

The group decided that there are various methods that can be used for searching for evidences including checking:

- abstracts at conferences and meetings
- International centres of excellence
- Barrett's registry (held by the Barrett's oesophagus campaign)
- British society for gastroenterology
- Manufacturers.

If the group are approached by a manufacturer regarding something that relates to this guideline, they should refer them to NICE. KC should be the first point of contact.

1.15 Next steps

The group will be asked to comment on items following the discussions at this meeting. At the next meeting they will be presented with evidence tables and asked to agree a set of evidence statements. Based on the evidence, the GDG will begin to write the recommendations.

DL closed the meeting.