Date and Time: **29th of October 2010, 10 am to 4 pm**

Minutes: Confirmed

Guideline Development Group Meeting 4 Acute Upper GI Bleeding Guideline
Place: **Boardroom, National Clinical Guideline Centre, 180 Great Portland Street, London W1W 5QZ**

Present

GDG

1. Kelvin Palmer	KP
2. Kenneth Halligan	KH
3. Mimi McCord	MM
4. David Patch	DP
5. Mark Donnelly	MD
6. Simon McPherson	SM
7. Dan Greer	DG
8. Markus Hauser	MH
9. Ricky Forbes Young represented by Linda Greenslade (*Clinical Nurse Specialist in Hepatology, Royal Free Hospital*)	RF/LG
10. Carlos Gomez	CG

NICE / NCGC

11. Bernard Higgins	BH
12. Katharina Dworzynski	KD
13. Richard Whittome (pm only)	RW
14. Panos Kefalas	PK
15. Philippe Laramee	PL
16. Sarah Dunsdon	SD
17. Stephen Atkinson	SA

Apologies

18. Joseph Varghese	JV
19. Mark Vaughan	MV

Notes

1. **Introduction Formalities**

The Chair (KP) welcomed attendees to the Acute Upper GI Bleeding (UGIB) guideline development group (GDG) meeting 4 and asked all GDG members to declare any relevant conflicts of interest.

DP declared his personal pecuniary interest arising from receipt of honoraria from Ferring Pharmaceuticals for lecturing. As Ferring manufactures terlipressin whose clinical and cost-effectiveness is reviewed in this meeting, the GDG agreed that DP will be allowed to answer questions during the meeting but will be excluded from the discussions on the drafting of the recommendations

Notes

All other GDG members declared that they had no personal specific, personal non-specific, non-personal specific or non-personal non-specific interests to declare since their previous declaration (upon acceptance of their GDG role).

Then the minutes, and LETR of the last meeting of this group were agreed as a true and accurate account of the meeting.

Subsequently, the Chair briefed the group on the objectives of the GDG meeting 4.

2. **Update on HE Analysis on "Timing of Endoscopy"**

PL presented next steps with respect to the development of an in-house health-economic (HE) model that assesses the cost-effectiveness of the "timing of endoscopy". The GDG agreed the source of the clinical data to be used in the HE model.

3. **Evidence Review for "Pharmacological therapy for the management of patients with variceal UGIB; optimal therapy choice and duration":**

KD first presented the evidence available on the relative clinical effectiveness of terlipressin, somatostin and octreotide in patients with variceal UGIB and the optimal treatment duration. The GDG agreed that there were limitations with the current evidence base due to lack of robust data on the comparative effectiveness of these agents. Furthermore many of the studies considered were old and did not reflect current clinical practice.

PL then proceeded with presenting the HE evidence, according to which terlipressin was shown to be more cost-effective than octreotide. The GDG expressed some concerns due to the indirect comparison between the two agents used in the HE analysis as well as the fact that some of the clinical evidence used in this analysis was unpublished data.

The GDG agreed that terlipressin is currently the most-widely used pharmacological therapy for the management of patients with variceal UGIB.

By taking into account all the above, the GDG proceeded with the drafting of the recommendations

4. **Review protocols:**

KD and RW presented and obtained agreement from the GDG on the Review Protocols for clinical questions related to:

- Band ligation vs. sclerotherapy for oesophageal varices
- PPI use in intensive care for UGIB prophylaxis
- Continuation / discontinuation of NSAIDs, clopidogrel, aspirin, dipyridamol in UGIB management

Date, time and venue of the next meeting

The next GDG meeting will take place on the 10th of December, 2010 from 10 am to 4 pm, at the National Clinical Guideline Centre, 180 Great Portland Street, London W1W 5QZ