

Venous thromboembolic diseases: The management of venous thromboembolic diseases and the role of thrombophilia testing

Stakeholder Scoping Workshop: 17th February 2010

The stakeholder scoping workshop is held in addition to the formal consultation on the scope which is taking place from the 29th March until the 26th April 2010.

The objectives of the scoping workshop were to:

- obtain feedback on the key clinical issues included in the first draft of the scope
- identify which patients or population subgroups should be specified
- seek views on the composition of the Guideline Development Group (GDG)
- encourage applications for GDG membership

The scoping group (Technical Team, NICE and GDG Chair) presented a summary of the guideline development process, the role and importance of patient representatives, the process for GDG recruitment and proposed constituency for this group, and the scope. The stakeholders were then divided into 4 groups which included a facilitator and a scribe and each group had a structured discussion around the key clinical issues.

Guideline title:

Most groups agreed that the title was appropriate.

Population:

Stakeholders suggested that the population should not only include confirmed cases as people are often treated with suspected venous thromboembolic diseases. There was mixed opinion between the groups whether pregnant women should be excluded from the guideline.

Key clinical issues:

Generally all stakeholders agreed that diagnosis is a very important topic that should be given high priority and covered in the guideline.

All groups agreed that the duration of pharmacological treatment is a key issue as there are wide variations in practice.

Thrombophilia testing was discussed and most groups agreed that the important question is whether the tests should be carried out and if so, who should be tested. Less importance was placed on the accuracy of the individual tests.

Points of discussion:

Stakeholders discussed the following areas:

- compression stockings
- self monitoring
- mobilisation or rest
- screening for cancer in patients with spontaneous VTE

Outcomes:

Overall, stakeholders agreed that all the main outcomes had been included in the guideline scope.

GDG membership:

The stakeholders were asked for feedback on the following GDG constituency:

- GP
- Acute physician
- Haematologist
- Vascular surgeon
- Radiologist or vascular technologist
- Chest physician
- A&E physician
- Anticoagulation pharmacist
- Oncologist

Overall, stakeholders agreed with the proposed GDG membership but suggested adding nurses to complete the group.

The facilitators for each group closed the meeting by explaining the scoping group will subsequently meet to summarise all key themes that emerge from the workshop.

The facilitators for each group also encouraged that stakeholders should submit all their comments more formally through the scoping process.