Date and Time: 1<sup>st</sup> November, 10:30-16:30

## Minutes: Confirmed

# Hepatitis B GDG Meeting 2

Place: NCGC Boardroom, 180 Great Portland Street, London, W1W 5QZ

# Present: GDG

1. Howard Thomas (Chair)	HT
2. Elizabeth Boxall	EB
3. FJavier Vilar	FJV
4. Alan Mitchell	AM
5. Geoffrey Dusheiko	GD
6. Aftab Ala	AA
7. Emily Lam	EL
8. Steven Bradley	SB

### NCGC Technical team

9. Gill Ritchie	GR
10. Grammati Sarri	GS
11. Rosa Lau	RL
12. Laura Sawyer	LS
13. Amy Kelsey	AK
14. Richard Whittome	RW

### NICE

15. Sarah Dunsdon	SD	
16. Jane Cowl	JC	

#### Observers

17. Grant Hill-Cawthorne	GHC	
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# Apologies

18. Angela Narbey	AN
19. Gareth Tudor-Williams	GTW

## Notes

- The Chair welcomed the group to the Hepatitis B Guideline Development Group (GDG) meeting 2. Apologies were received from Angela Narbey and Gareth Tudor-Williams. The Chair welcomed Alan Mitchell (GP) to the GDG. The Chair introduced Jane Cowl, NICE PPIP Programme Manager and Grant Hill-Cawthorne, NICE Clinical Fellow, as observers to the group.
- 2. The Chair asked the GDG to declare if they had any personal specific, personal nonspecific, non-personal specific or non-personal non-specific interests to declare since their previous declaration (upon acceptance of their GDG role).

GD declared a personal pecuniary interest in having served as an advisor and received consulting fees for GlaxoSmithKline, Schering-Plough/Merck, Bristol Myers Squibb and Gilead Sciences in 2011. It was noted that GD would withdraw from recommendation making discussions.

EB declared a personal pecuniary interest to having taken part in a focus group for Gilead Sciences in February 2011. The meeting discussion centred on the impact of Health Service re-organisation and commissioning.

JV declared a non-personal pecuniary interest stating that Gilead Sciences agreed to support an audit in his unit into Hepatitis B. The sponsorship consists of supporting a part-time data collecting clerk. Also that Roche has supported a Hepatitis C study in his department through an unrestricted grant.

It was agreed that in line with NICE policy, if a members' DOI form is deemed to be a conflict of interest for the question being discussed at a GDG meeting, that member will step out of the meeting room when recommendations are being formed.

- 3. The Chair then briefed the group on the meetings objectives.
- 4. The Chair introduced Grammati Sarri, NCGC Senior Research Fellow, who gave a presentation on Guidelines, Decision making and GRADE. GS then took questions from the group.
- 5. GS then gave a presentation on the clinical evidence review on pharmacological monotherapies in achieving remission of the activity of CHB in adults. The GDG then discussed the evidence presented. The Chair thanked Grammati for her presentations.
- 6. The Chair introduced Laura Sawyer, NCGC Senior Health Economist, who gave a presentation on the health economic review of pharmacological monotherapies and combinations in achieving remission of the activity in CHB. The GDG then discussed the evidence presented.
- 7. LS then gave a presentation on the prioritisation of topics for original modelling. The GDG discussed the presentation and agreed on the high priority areas. The Chair thanked Laura for her presentations.
- 8. GS then presented the clinical evidence review on pharmacological monotherapies and combinations in achieving remission of the activity in CHB in people co-infected with Hepatitis C and D. The GDG then discussed the evidence presented. The Chair thanked Grammati for her presentation.
- 9. The Chair introduced Amy Kelsey, NCGC Project Manager, who gave a presentation on the development of guideline recommendations. The Chair thanked Amy for her presentation.
- 10. The Chair then led a discussion on the clinical and cost effectiveness of pharmacological monotherapies and combinations in achieving remission of the activity in CHB in people

## Notes

co-infected with Hepatitis C and D. The GDG drafted 3 recommendations.

- 11. GS and Rosa Lau, NCGC Research Fellow, then led discussion with the GDG on the research protocols for 2 clinical questions. The protocols for genotypic testing and non-invasive methods were agreed and signed off by the GDG.
- 12. There was no other business to discuss. The Chair closed the meeting and thanked everyone for attending.

### Date, time and venue of the next meeting

13. Tuesday 29th November 2011, 10:30-16:30, NCGC Boardroom, 180 Great Portland Street, London, W1W 5QZ.