

**Date and Time:** **Wednesday 11<sup>th</sup> September 2013, 10:00-16:00**

**Minutes:** [Final](#)

**Guideline Development Group Meeting 8 Lipid Modification (update)**

**Place:** *Linacre Room, Royal College of Physicians  
11 St Andrews Place, London NW1 4LE*

**Present:**

Anthony Wierzbicki (Chair)	(Present for notes 1 – 7)
Rajai Ahmad (Cardiologist)	(Present for notes 1 – 7)
Lindsay Banks (Pharmacist)	(Present for notes 1 – 7)
Liz Clark (Patient/carer member)	(Present for notes 1 – 7)
Eleanor Grey (Patient/carer member)	(Present for notes 1 – 7)
Michael Khan (Diabetologist)	(Present for notes 1 – 7)
Emma McGowan (Nurse)	(Present for notes 1 – 7)
Dermot Neely (Chemical pathologist and lipidologist)	(Present for notes 1 – 7)
Nadeem Qureshi (General practitioner)	(Present for notes 1 – 7)
Alan Rees (Metabolic/general medicine/elderly care physician)	(Present for notes 1 – 7)
Gary Collins (Co-opted member)	(Present for notes 1 – 7)
Jo Farrington (Co-opted member)	(Present for notes 1 – 7)
Angela Cooper (Senior research fellow)	(Present for notes 1 – 7)
Martin Harker (Health economist)	(Present for notes 1 – 7)
Norma O'Flynn (Clinical director)	(Present for notes 1 – 7)
Silvia Rabar (Senior project manager and research fellow)	(Present for notes 1 – 7)

**In attendance:**

NICE Staff:		
Caroline Keir	(Guideline commissioning manager, NICE)	(Present for notes 1 – 7)

**Observers:**

Steven Ward	(Health Economist, NICE)	(Present for notes 1 – 7)
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## Notes

1. The Chair welcomed the group to the eighth meeting of this GDG. Apologies were received from Alan Rees, Martin Duerden, Gary Collins, Lina Gulhane and David Wonderling. The Chair informed the GDG that David Wald had made a new declaration of a personal pecuniary interest in July in an area covered by this guideline and has therefore withdrawn from the GDG. The Chair asked all GDG members to declare any relevant conflicts of interest. The following interests were declared
  - 1.1. Anthony Wierzbicki  
Personal non-pecuniary interest:  
Clinical Lead: Blood Sciences (including clinical biochemistry) Laboratories GSTS Pathology (2010- now)  
Site investigator: Clinical trial of Amgen AMG-145 in familial hypercholesterolaemia (2013)  
Site investigator: Clinical trial of anacetrapib in patients with cardiovascular disease (HPS3/REVEAL) (2012- 2017)  
Site investigator: Clinical outcomes trial of AMG-145 in patients at high cardiovascular risk (to start 2013)
  - 1.2. Michael Khan  
Personal pecuniary interest:  
CMO and Director of Silence Therapeutics Ltd. This is an RNAi therapeutics development company, which has an oncology drug (siRNA against PKN3) in clinical trials in pancreatic cancer. There are no lipid-related drugs in clinical development yet, but the company are interested in preclinical studies of novel targets for homozygous FH, including ApoB, which has no connection to this panel.  
I have shares in and am a director (unpaid) of Pharmalogos Ltd (owned by my wife), which provides bioinformatics support and histology services in cancer biology and also produces educational materials in cancer biology. They have provided educational/training activity in FH (not related to this CDDG) on behalf of Astra-Zeneca. There is no link to any other lipid or CVD related area at this point, but the company may provide consultancy/advisory services in these areas in the future.  
I have sat on paid advisory boards (Genzyme/Sanofi) for FH and severe hypertriglyceridaemia (Novartis). These are not related to this CGDG.  
Personal family interest:  
My wife is a director of Pharmalogos Ltd (see above).  
Non-personal pecuniary interest:  
Course Director of the Warwick masters and PGA in Cardiovascular Risk. This course hasn't run during the period of activity of this CGDG. When it does there is no particular viewpoint promoted the course lectures simply provide a presentation of the national guidelines from NICE and other relevant bodies as they stand at the time.  
Personal non-pecuniary interest:  
I am running a clinical trial of a PCSK9 monoclonal antibody (Amgen) in FH. Astra-Zeneca and Pfizer have provided financial support to my Trust (UHCW) to help establish our FH cascade screening programme. This is part of a joint-working agreement between Astra-Zeneca and UHCW. I have no personal financial interest and the remit is solely around FH, which is not related to this CGDG
  - 1.3. Emma McGowan  
Non-personal pecuniary interest:  
I am currently study coordinator for an Amgen study. This is looking at a PCSK9 inhibitor for patients with Familial Hypercholesterolaemia (FH)
  - 1.4. Dermot Neely

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Non-personal pecuniary interest:

I am employed by Newcastle upon Tyne Hospitals NHS Foundation Trust as a Consultant and Clinical Lead for Clinical Biochemistry Department, a contracted provider of lipid profiles and other blood tests to primary and secondary care organisations which generate income for the Trust. I am also Clinical Lead for the Lipid and Metabolic Clinic in the same Trust, which accepts patient referrals for investigation and management of lipid disorders, which generate income for the Trust.

1.5. Nadeem Qureshi:

Non-personal pecuniary interest:

I am supervising a PhD looking at new metrics to assess risk prediction models. As part of this organising a CME sessions for General Practitioners on risk prediction models.

Published on quality of family history in GP datasets.

Cardiovascular lead for the vascular check programme in Derby city PCT up to 2011.

Writing a paper with a health economist about target versus universal CHD screening

1.6. Jo Farrington

Personal non-pecuniary interest:

I am the Chair of the Cardiovascular and Respiratory Dietitians, a specialist interest group of the British Dietetic Association. We advise other members and the wider community of dietitians on hyperlipidaemia management and prevention.

2. The minutes of the last meeting of this group were agreed as a true and accurate account of the meeting.
3. An update was then given to the GDG on progress since the last meeting.
4. The Chair introduced Silvia Rabar, senior project manager and research fellow at NCGC, and Martin Harker, health economist at NCGC, who gave presentation on risk assessment tools for predicting the risk of CVD events in adults without established CVD (primary prevention), with and without diabetes.  
The GDG then discussed the evidence presented in relation to this guideline and drafted recommendations. The Chair thanked Silvia Rabar and Martin Harker for their presentation.
5. The Chair introduced Angela Cooper, senior research fellow at NCGC, and Martin Harker, health economist at NCGC, who gave presentation on the clinical and cost effectiveness of dietary intervention strategies versus usual diet in primary and secondary prevention of CVD.  
The GDG then discussed the evidence presented in relation to this guideline and drafted recommendations. The Chair thanked Angela Cooper and Martin Harker for their presentation.
6. The Chair introduced Angela Cooper, senior research fellow at NCGC, and Martin Harker, health economist at NCGC, who gave presentation on the clinical and cost effectiveness of phytosterol (stanol and sterol)-enriched foods or supplements versus placebo in primary and secondary prevention of CVD.  
The GDG then discussed the evidence presented in relation to this guideline and drafted recommendations. The Chair thanked Angela Cooper and Martin Harker for their

## Notes

presentation.

- 7 There were no other businesses to discuss. The Chair closed the meeting and thanked everybody for attending.

## Date, time and venue of the next meeting

- 12 September 2013, 10:00-16:00, at the National Clinical Guideline Centre, Boardroom, 180 Great Portland Street, London W1W 5QZ