Minutes: confirmed

Guideline Development Group Meeting: ACS, GDG 4
Date and Time: 10.30-4.30pm, Thursday 31st July 2008

Place: National Collaborating Centre for Chronic Conditions
Royal College of Physicians
11 St Andrew’s Place
Regent’s Park
London
NW1 4LE

Present:

GDG members
Huon Gray Clinical Advisor
Jill Parnham NCC-CC assistant director (operations) - Chair
Sotiris Antoniou Pharmacy representative
Jenny Cadman CCU nurse representative
Nicola Sloan NCC-CC research fellow
Rob Henderson Cardiologist representative
Kate Lovibond NCC-CC health economist
Gavin Maxwell Patient and carer representative
Francis Morris A&E Physician representative
Claire Turner NCC-CC Senior Project Manager (minutes)
Richard Underwood Cardiac imaging representative
David Geldard Patient and Carer representative
Sharon Buttle Emergency care practitioner (deputy for Alun Roebuck)

Notes

Welcome

1. JP welcomed the group and the following observers were introduced to the group: David Hill (chest pain guideline project manager), Neil Calvert (chest pain guideline health economist), Jo Lord (NICE technical advisor), David Wonderling (NCC-CC senior health economist), Susan Latchem (NICE commissioning Manager), and Georgina Kirwin (NCC-CC research fellow). Apologies were received from Mark de Belder, John Camm. Emily Crowe and Alun Roebuck. The declarations of interests register was made available to the GDG chair. The chair requested updates to the existing declarations of interests from GDG members. No new declarations were declared. No declarations of interests were deemed in conflict with the agenda topics and clinical questions under discussion at the meeting.

Notes
2. Areas for potential health economic analysis were prioritised, discussed and finally agreed by the group. The health economic work plan will now be submitted to NICE for sign off. It was noted that the Intra-Aortic Balloon Pump Counterpulsation has been inserted into the clinical work schedule. It was noted that this maybe a medium priority for HE analysis however this may change following the evidence review.

3. The GDG discussed the clinical and health economic evidence tables and statements, and formulate recommendations for the following:
   Do early psychosocial and educational interventions, mobilisation and discharge planning (cardiac rehabilitation – Phase 1) improve emotional and physical wellbeing and long-term outcomes in people with unstable angina or NSTEMI compared to deferred (cardiac rehabilitation Phase 2)?

5. The minutes of the last meeting of this group were agreed as a true and accurate account of the meeting. A number of typographical changes were made.

6. Any other business
   None

Next meeting: 5th GDG meeting (GDG4), 4th Sept 2008, 10:30 – 16:00, Henry Cohen Room, Jerwood Education Centre, RCP