LOWER URINARY TRACT SYMPTOMS GUIDELINE 5th Guideline Development Group Meeting

Meeting Held on Friday 6th June 2008 at 10.30am – 4.00pm Ronald Raven Room at The Royal College of Surgeons of England

6th June 2008 – Minutes

Present: GDG members: Christopher Chapple (CC) Chair, William Turner (WT), Mark Speakman (MS), Jonathan Rees (JR), Julian Spinks (JS), Roy Latham (RL), Paul Joachim (PJ), Adrian Wagg (AW), Malcolm Lucas (ML).

NCC-AC

Clare Jones (CJ), Elisabetta Fenu (EF), Jennifer Hill (JH), Caroline Lawson (CL), Kate Homer (KH), Hanna Lewin (HL), John Browne (JB) from 10.40am - 12.30pm, Lee-Yee Chong (LYC).

Apologies: Angela Billington (AB), Thomas Ladds (TL) and James N'Dow (JN)

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 Introductions and apologies for absence (Chris Chapple – Chair) 	CC welcomed everyone to the 5 th LUTS GDG Meeting.
	Apologies Apologies were received from AB, TL and JN.
2. Declaration of interests (Chair)	CC asked for each GDG member to declare their interests verbally and asked them to complete their forms. Each attending GDG member declared his/her interests in front of all those present.
	CC declared a personal pecuniary interest, he has attendance in National and International conferences for BAUS, EAU, ICS and AUA. He declared that he knew of no personal family interest. He declared his non-personal pecuniary interest, consultancy, lecture and research honorarium from Pfizer, Astellas, Novartis, Allergan, AMS and UCB – this has been put into the department to provide funding for a researcher. He declared a personal non- pecuniary interest, principle investigator and author on pharmaceutical sponsored papers. He is the Adjunct Secretary General of EAU and responsible for education and overseeing their guidelines. He is also a member of BAUS – female and reconstructive urology section. He has written books on the subject of BPH/LUTS. He is editor in chief of Neurourology and Urodynamics journal.

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AW declared a personal pecuniary interest, since last declaration, speaker for Pfizer at launch meeting for Fesoterodine. Astellas pharmaceutical - consultant. Pfizer - occasional consultant. Pfizer pharmaceutical advisory board. Sense of leadership course for Pfizer. SCA conference. Lecture fees from Astellas and telephone symposium on LUTS on geriatric medicine. He did not declare a personal family interest. He declared a nonpersonal pecuniary interest, fees for lectures/writing to research healthcare commission - research fund for Pfizer, Astellas, and UCB. Pfizer research study, European C.I. and UK principal investigator. BUPA grant for research £13K. Sponsorship to EAU by Astellas. He declared a personal non-pecuniary interest, Vicechairman of the Continence Foundation and Incontact (merged). Researcher for Astellas. Plethora, Boehringer Ingelheim -Lilly. Associate Director CEEU, Royal College of Physicians. He is the National leader for audit of the Continence care. Papers for Pharma funded studies.

RL declared a personal pecuniary interest, he acted as a Lay Member on an Invited Service Review carried out by the Royal College of Physicians (July 07). He received a fee for this. He did not declare a personal family interest or non-personal pecuniary interest. He declared a personal non-pecuniary interest, he is personally affected by BPH/LUTS as a patient and as the relative/friend of affected people.

WT declared a personal pecuniary interest, private practice in urology. He did not declare a personal family interest. He declared a non-personal pecuniary interest, he is the principal local investigator in clinical trials with Allergan (not yet opened), Dianippo Sumuto, Yamanouchi (now Astellas), Schwarz Pharma and Novartis. He declared a personal non-pecuniary interest, executive committee member section of female and reconstructive urology, British Association of Urological surgeons. Author of papers, chapters and book on urology. Member of NICE Topic Selection Panel and Technology Appraisal Committee.

JR declared a personal pecuniary interest, involved in private urological practice. He declared that he knew of no personal family interest, non-personal pecuniary interest or personal nonpecuniary interest.

MS declared a personal pecuniary interest, he is involved in giving lectures for drug companies at national and international meetings in last 12 months (Asteltas, GSK, Boehringer Ingelheim,

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Pfizer). No new consulting work and new projects declined for duration of guideline. Involved in private practice. He did not declare a personal family interest. He declared a non-personal pecuniary interest, investigator in BPH trials (Astellas, Bayer, GSK, Pfizer, MSD, Allergan). None in last 12 months (sponsorship). Previous research sponsorship from Yamanouchi and MSD in last 5 years. He declared a personal non-pecuniary interest, his clear opinion - author of BAUS BPH Guideline 2004. Author of a number of peer-reviewed LUTS/BPH papers. Member Editorial Board European Urology.

JS declared a personal pecuniary interest, I have received sponsorship to attend the EAU congress in Milan from Pfizer. I have received speaker fees to speak at a conference from Pfizer on GPs and OAB. He is a member of advisory boards on LUTS and received honoraria from Boehringer Ingeliheim (March 07). He has attended advisory boards on Restless legs syndrome organised by RLS UK with payment from Boehringer Ingelheim. He has been paid for attendance at a focus group on faecal incontinence by Continence UK (Nov 07). He has been paid to speak and chair meetings by Astellas, BMS and ALK. He is a paid member of the editorial boards of Continence UK. He has received payment of attending focus meetings on child growth hormone. He did not declare a personal family interest of nonpersonal pecuniary interest. He declared a personal nonpecuniary interest, member of the strategy board of Incontact, Chairman of the local division of the BMA and board member of RLS UK.

PJ did not declare a personal pecuniary interest or personal family interest. He declared a non-personal pecuniary interest, trustee of Incontact, a charity that benefits from grants from the industry. He declared a personal non-pecuniary interest, trustee of Incontact (as above) Chair of the patient advisory board. He has had personal and family experience of symptoms.

ML declared a personal pecuniary interest, I have received lecture fees from Pfizer, UCB Pharma and Astellas within the last 12 months and sponsorship to attend national and international meetings also from Pfizer, Gynecare and AMS. I am not involved in private practice and I am not now accepting invitations to serve on advisory boards. Any current income from lecturing will be payable to a research fund which pays expenses for research fellow and nurses. He did not declare a personal family interest. He declared a non-personal pecuniary interest, I am Principle local investigator for trials with Astellas, Plethora and

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	Bioxell and Lead investigator for trials with Astra. All income goes to Clinical Research Unit, Swansea NHS Trust. He declared a personal non-pecuniary interest, current chairman of Section of Female and Reconstructive Urology, BAUS.
	NCC-AC Staff: CJ, EF, CL, KH, HL, JB and LC all declared that they knew of no personal pecuniary interest, personal family interest, non- personal pecuniary interest and personal non-pecuniary interest.
	JH declared that she knew of no personal pecuniary interest, personal family interest, personal non-pecuniary interest. She did declare a non-personal pecuniary interest, management of NCC- AC.
	The chair noted that no action was required on these personal pecuniary interests as none of the products involved were discussed at this meeting.
 Minutes of the last meetings (notes of last meeting) 	The minutes of the last meeting were reviewed by the group and were accepted as an accurate record.
 4. Consensus exercise on diagnostic tests (John Browne) - Consensus exercise 	JB facilitated a structured consensus exercise discussion regarding the recommendations on diagnostic tests.
 Clinical questions for treatment (Clare Jones) Sub-group work 	The GDG worked in sub-groups to discuss relevant comparison for medical and surgical interventions. This was followed by a discussion with the entire group and the comparisons to be reviewed were agreed.
6. Additional agenda item added – Conservative: Products presentation (Lee- Yee Chong)	LC presented the clinical evidence on conservative products.
7. Work Plan (Clare Jones)	CJ gave a summary of the work plan.
8. Any other business	There was no other business.
9. Close and date of next meeting	CC thanked everyone for attending and closed the meeting. The next meeting will take place on Monday 14 th July 2008 in Committee Room 3 at the Royal College of Surgeons of England.