

## Interests Register

**Note:**

Interests declared up to and including 31<sup>st</sup> March 2018 were processed under the 2014 NICE policy on conflicts of interest.

Interests declared from 1<sup>st</sup> April 2018 were processed under the 2018 NICE policy on conflicts of interest.

<sup>1</sup> Interest declared during recruitment before 31<sup>st</sup> March, but processed under 2018 policy as appointment occurred after 1<sup>st</sup> April.

### Abortion Care Advisory Committee

**Publication Date: September 2019**

Name	Role with NICE	Type of interest	Description of interest	Relevant dates			Comments
				Interest arose	Interest declared	Interest ceased	
Julia Anderson	Abortion Care Co-opted Committee Member		<p>Advisor to RIQAS quality assurance scheme, Randox</p> <p>Participated in a meeting for healthcare professionals sponsored by Shire, February 2018, but declined an honorarium/speaker fees</p> <p>Attended the Bayer Expert Clotters' meeting, January 2017 with travel and accommodation sponsored by Bayer plc</p>	January 2017	20.03.2019	2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: Interest is non-specific.</li> </ul>
Iain Cameron	Abortion Care	Direct – financial	As Dean of the Faculty of Medicine, University of Southampton, he has overall responsibility for the Faculty's	August 2010	13.3.2017	31 July 2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> </ul>

	Committee Chair		research portfolio and its associated funding. There is industry involvement in basic research and clinical trials run by the Faculty, including provision of funding for the research itself and some staff posts. As Dean he does not normally have direct involvement in negotiating this funding or deciding how it is spent.				<ul style="list-style-type: none"> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Interest is non-specific.</li> </ul>
Iain Cameron	Abortion Care Committee Chair	Direct – financial	He received funding from Medical Schools Council (conference fees and travel) to attend the conference of the International Association of Medical Regulators in Melbourne in September 2016.	September 2016	13.3.2017	Sept 16	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Interest is non-specific.</li> </ul>
Iain Cameron	Abortion Care Committee Chair	Direct - Direct - Non-financial professional and personal	Published research and clinical investigations widely on the topics of reproductive medicine, including studies on abortion from 1984-88 and 1997-98.	1984	14.11.2017	1998	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE GCM in November 2017</li> <li>• Rationale: Despite interest being specific to the scope, it falls well before the development of the guideline.</li> </ul>

Iain Cameron	Abortion Care Committee Chair	Direct – financial	He is a non-executive director of the Medical and Dental Defence Union of Scotland, co-opted to the Board in April 2017 and formally appointed in September 2017. This is a paid role.	September 2017	22.01.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in September 2017</li> <li>• Rationale: Interest is non-specific.</li> </ul>
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct – financial	Investigator Initiated research funding from Pfizer, to conduct research on feasibility and acceptability of provision of repeat injections of progestogen only injectable contraception from community pharmacists (ended 2016).	January 2017	19.4.2017	2016	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Interest is non-specific.</li> </ul>
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct – financial	Received an honorarium from Exelgyn for attending an advisory board to work on developing educational information for healthcare professionals on abortion care e.g. FAQs and answer booklets. Activity ended November 2016.	November 2016	19.4.2017	November 2016	<ul style="list-style-type: none"> <li>• Declare and withdraw from discussions on patient information until November 2017</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: The interest is specific so the member was</li> </ul>

							asked not to participate for 1 year after the activity ended.
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional and personal	<p>Published the following papers:</p> <ol style="list-style-type: none"> <li>1. Heller, R., Purcell, C., Mackay, L., Caird, L., Cameron, S. T., Barriers to accessing termination of pregnancy in a remote and rural setting: a qualitative study, <i>Bjog-an International Journal of Obstetrics and Gynaecology</i>, 123, 1684-1691, 2016</li> <li>2. Purcell, C., Cameron, S., Caird, L., Flett, G., Laird, G., Melville, C., McDaid, L. M., Access to and experience of later abortion: accounts from women in Scotland, <i>Perspectives on Sexual and Reproductive Health</i>, 46, 101-108, 2014</li> <li>3. Cameron, S. T., Glasier, A., Johnstone, A., Shifting abortion care from a hospital to a community sexual and reproductive health care setting, <i>Journal of Family Planning &amp; Reproductive Health Care</i>J Fam</li> </ol>	2015	19.4.2017	2017	<ul style="list-style-type: none"> <li>• Declare and partial exclusion</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Specific to the guideline therefore she answered questions only and did not lead topic groups and was not involved in drafting recommendations relating to providing information, abortion before</li> </ul>

			<p>Plann Reprod Health Care, 42, 127-32, 2016</p> <p>4. Purcell, C., Cameron, S., Lawton, J., Glasier, A., Harden, J., Contraceptive care at the time of medical abortion: experiences of women and health professionals in a hospital or community sexual and reproductive health context, Contraception, 93, 170-177, 2016</p> <p>5. Heller, R., Cameron, S., Termination of pregnancy at very early gestation without visible yolk sac on ultrasound, Journal of Family Planning &amp; Reproductive Health Care, 41, 90-5, 2015</p> <p>6. Cameron, S. T., Glasier, A., Johnstone, A., Comparison of uptake of long-acting reversible contraception after abortion from a hospital or a community sexual and reproductive healthcare setting: an observational study, Journal of family planning and reproductive health care, 43, 31-36, 2017.</p>				ultrasound evidence, access to services and contraception
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional and personal	<p>She has published papers on abortion expressing her opinions. The papers published/ accepted in the last 12 months related to abortion are:</p> <p>1. Kavanagh A, Wielding S, Sim J, Cochrane R, Johnstone A, Cameron</p>	September 2016	23.1.2018	September 2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and GCM in January 2018</li> </ul>

			<p>S. Abortion or a termination of pregnancy? Views from abortion care providers in Scotland on abortion terminology. <i>BMJ sexual &amp; Reprod Health Care</i> 2018 (accepted subject to revision)</p> <p>2. Cameron S, Lohr P, Ingham. Abortion terminology: views of women seeking abortion in Britain. <i>J Fam Plann Reprod Health Care</i> 2017 43(4):265-268</p> <p>3. Millar S, Cameron ST. Comparison of two low sensitivity urine pregnancy tests used for the self-assessment of the success of early medical abortion. <i>BMJ Sexual and reproductive healthcare</i> 17 Nov 25. pii: jfprhc-2017-101868. doi: 10.1136/bmjshr-2017-101868. [Epub ahead of print</p> <p>4. ESHRE Capri Workshop Group. Induced Abortion. <i>Hum Reprod</i> 2017 Apr 10:1-10. doi: 10.1093/humrep/dex071</p> <p>5. Purcell C, Riddell J, Brown A, Cameron S, Melville C, Flett G, Bhushan Y, McDaid L. Women's</p>				<ul style="list-style-type: none"> <li>• Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
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			experiences of more than one termination of pregnancy within two years: a mixed-methods study. BJOG 2017sep 18.doi 10.1111/1471-0528.1940 Epub ahead of print].				
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional and personal	Purcell C, Cameron S, Lawton J, Glasier A, Harden J. Self-management of first trimester medical termination of pregnancy: a qualitative study of women's experiences. BJOG. 2017 Dec;124(13):1983-1992	September 2016	23.1.2018	September 2018	<ul style="list-style-type: none"> <li>• Declare and partial exclusion</li> <li>• Agreed by GL and GCM in January 2018</li> <li>• Specific to the guideline therefore she answered questions only and did not lead topic groups and was not involved in drafting recommendations relating to access to services.</li> </ul>
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional	She has published papers on abortion expressing her opinions. The papers published/ accepted in the last 12 months related to abortion are:	September 2016	23.1.2018	September 2016	<ul style="list-style-type: none"> <li>• Declare and partial exclusion</li> <li>• Agreed by GL and GCM in January 2018</li> </ul>

		and personal	<p>1. Hognert H, Kopp Kallner H, Cameron S et al. Insertion of an etonogestrel releasing implant at medical abortion does not affect the efficacy of treatment but reduce subsequent unintended pregnancy – a randomised controlled equivalence trial. Human Reproduction 2016 Sep 22. [Epub ahead of print] PMID:27664217</p> <p>2. Sherman S, Cattnach D, Harden J, Cameron S. Providing experiential information on the early medical abortion: a qualitative evaluation of an animated testimonial, 'Lara's story' J Fam Plann Reprod Health Care 2017 43(4):269-273.</p>				<ul style="list-style-type: none"> <li>• Rationale: Specific to the guideline therefore she answered questions only and did not lead topic groups and was not involved in drafting recommendations relating to providing information and contraception.</li> </ul>
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional and personal	<p>President of FIAPAC (International Federation of Abortion &amp; Contraception Professionals).</p> <p>As President she is the chair of the scientific organising committee for the international congress. She gives the welcome and closing words at the congress, chair board meetings, and writes the foreword for the FIAPAC newsletter. She has the capacity to publically express opinions related to</p>	2016	18.2.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and GCM in February 2018</li> <li>• Rationale: no opinions have been expressed and therefore</li> </ul>

			abortion on behalf of FIAPAC, but has not done so in last 18 months.				there is no need to withdraw.
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional and personal	Invited reviewer for update of WHO guideline on medical abortion. Have commented on drafts of the update	Aug 18	14.8.18	Aug 18	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in August 2018</li> <li>• Rationale: whilst both guidelines cover medical abortion, this guideline asks questions relevant to NHS practice in England, whilst the scope of the WHO guideline is much broader. Therefore limited potential for there to be a conflict.</li> </ul>
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional and personal	<p>Published the following papers:</p> <ul style="list-style-type: none"> <li>• Lord J, Regan L, Kasliwal A, Massey L, Cameron S. Early medical abortion: best practice now lawful in Scotland, planned for Wales but not available to women in England. BMJ Sex Reprod Health 2018 doi:10.1136/</li> </ul>	2017	29.8.18	2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in August 2018</li> <li>• Rationale: Specific to the guideline but were not</li> </ul>

			<ul style="list-style-type: none"> <li>Lang C, Chen ZE, Johnstone A, Cameron S. Initiating depot medroxyprogesterone acetate 24-48 hours after mifepristone administration does not affect success of early medical abortion. BMJ Sexual Reprod Health Care 2018 Jul 26. pii: bmjsrh-2017-101928. doi: 10.1136/bmjsrh-2017-101928. [Epub ahead of print]</li> </ul>				<p>included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</p> <ul style="list-style-type: none"> <li></li> </ul>
Sharon Cameron	Abortion Care Committee Topic Advisor	Direct - Direct - Non-financial professional and personal	<p>Appeared on the following BBC programmes:</p> <ul style="list-style-type: none"> <li>BBC news at 6PM 24 July 2018: RCOG spokesperson on home use of misoprostol</li> <li>BBC Victoria Derbyshire documentary 25 July 2018: implementation of home misoprostol in Scotland</li> </ul>	July 2018	29.8.18	July 2018	<ul style="list-style-type: none"> <li>Declare and participate</li> <li>Agreed by GL in August 2018</li> <li>Rationale: despite being a specific interest, the balance of risks is such that there is no need to withdraw. Clinical practice in Scotland is outside the remit of NICE guidelines.</li> </ul>
Jayshree Dave	Abortion Care Co-opted		No interests to declare.				

	Committee Member						
Joanne Fletcher	Abortion Care Committee Member	Direct – financial	<p>Manual vacuum aspiration trainer for Durbin Sexual Health Supplies</p> <p>Update on 31.10.2017 training event at Association of Early Pregnancy Units annual scientific conference, x 2 lecturers - travel expenses received, fee was waived</p> <p>Update on 1.11.2017</p> <p>No longer accepting payment from Durbin during guideline development. Date of last payment November 2016.</p>	November 2016	4.8.2017; further details provided 31.10.2018 and 1.11.2018	October 2017	<ul style="list-style-type: none"> <li>• Declare and withdraw from questions that involve manual vacuum aspiration until November 2017</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: The interest is specific so the member was asked not to participate for 1 year after the activity ended.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Direct - Non-financial professional and personal	Co-founder of and co-chair of British Society of Abortion care providers.	June 2015	4.8.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Despite this being a specific interest, the balance of risks</li> </ul>

							is such that there is no need to withdraw.
Joanne Fletcher	Abortion Care Committee Member	Direct - Direct - Non-financial professional and personal	Royal Society of Medicine - Sexuality & Sexual Health Council Member – Honorary Treasurer (2011 -2015), President Elect (2014- 2015), President (2015-2017)	2011	4.8.2017	2017	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: This is a non-specific interest.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Direct - Non-financial professional and personal	Scientific committee member, Association of Early pregnancy units.	2012	4.8.2017	2015	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: This is a non-specific interest.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct – financial	Manual Vacuum aspiration trainer for Royal College of Obstetrics and Gynaecology (unpaid). Travel expenses paid, no remuneration.	August 2017	4.8.2017	August 2017	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Despite this being a specific interest, the travel expenses</li> </ul>

							received were in line with NICE policy.
Joanne Fletcher	Abortion Care Committee Member	Direct - Direct - Non-financial professional and personal	Chief investigator for local study: A comparison of termination of pregnancy procedures: Patient choice, emotional impact and satisfaction with care.	2015	At recruitment (4.8.2017)	January 2017	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Despite this being a specific interest, the balance of risks is such that there is no need to withdraw as this study was conducted locally and would not form part of the evidence base.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Direct - Non-financial professional and personal	Principle Investigator for National study: VESPA (variations in the organizations of early pregnancy assessment units in the UK and their effects on clinical, service and patient centered outcomes).	2015	At recruitment (4.8.2017)	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: non-specific interest</li> </ul>

							and outside of the scope.
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Principle investigator for National study: PRISM (progesterone in spontaneous miscarriage).	2015	At recruitment (4.8.2017)	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: non-specific interest and outside of the scope.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Recent publication: Vacuum aspiration for induced abortion could be safely and legally performed by nurses and midwives. Journal of Family Planning & Reproductive Healthcare, published online Jan 2017, journal October 2017.	January 2017	7.11.2017	October 2017	<ul style="list-style-type: none"> <li>• Declare and withdraw from discussions of review questions that include manual vacuum aspiration</li> <li>• Agreed by GL and NICE GCM in November 2017</li> <li>• Rationale: This is a specific interest.</li> </ul>
Joanne Fletcher	Abortion Care	Direct - Non-financial professional	Publication:	2013	7.11.2017	2013	<ul style="list-style-type: none"> <li>• Declare and participate</li> </ul>

	Committee Member	and personal	Fletcher, J. (2013) Latex allergy in women's health care. The Practising Midwife 16(7), 33-36. Unpaid.				<ul style="list-style-type: none"> <li>• Agreed by GL in November 2017</li> <li>• Rationale: non-specific interest and outside of the scope.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: 2010, Termination of pregnancy services: experiences of gynaecological nurses. Journal of Advanced Nursing 66(10), 2245-2256. Unpaid.	2010	7.11.2017	2010	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore but the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Contributed to Oxford Handbook of Women's Health Nursing (chapter 14 – Unwanted Fertility) (2010). Oxford University Press. Unpaid.	2010	7.11.2017	2010	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: non-specific interest.</li> </ul>

Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-wrote and edited Royal College of Nursing (2008) Abortion guidelines for nurses. Midwives and community health practitioners, RCN. Unpaid.	2008	7.11.2017	2008	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Document was published 10 years previous to the development of this guideline, and therefore does not represent a conflict.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Contribute to SANDs Guidelines for health professionals (2007) – Abortion & miscarriage management chapters. Unpaid.	2007	7.11.2017	2007	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Document was published 10 years previous to the development of this guideline, and therefore does not represent a conflict.</li> </ul>

Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: Chlamydia screening in pregnancy: A missed opportunity? British Journal of midwifery, July 2006. 14(7). 390-392. Unpaid.	2006	7.11.2017	2006	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: non-specific interest and outside of the scope.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: 2003. Medical termination of pregnancy in the late first trimester. The Journal of Family Planning & Reproductive Health Care. 29(4). 243-244. (Awarded Organon Laboratories prize for best oral presentation at Faculty of family Planning & Reproductive Health Care AGM, May 2003). Unpaid.	2003	7.11.2017	2003	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore but the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: 2002. Therapeutic termination of pregnancy. Current Obstetrics & Gynaecology, vol.12. 22-27. Unpaid.	2002	7.11.2017	2002	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> </ul>

							<ul style="list-style-type: none"> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore but the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: 2000. Termination of pregnancy: patients perceptions of care. The Journal of Family Planning & Reproductive Health Care. 27(2). 72-77. Unpaid.	2000	7.11.2017	2000	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore but the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Joanne Fletcher	Abortion Care	Direct - Non-financial professional	Co-authored publication: 1999. Low dose mifepristone with vaginal misoprostol for first trimester termination	1999	7.11.2017	1999	<ul style="list-style-type: none"> <li>• Declare and participate</li> </ul>

	Committee Member	and personal	of pregnancy: a report of 2000 consecutive cases. Women's Health – Into the New Millennium. Abstract Book from the Fourth International Scientific Meeting of the Royal College of Obstetricians & Gynaecologists (South Africa). Unpaid.				<ul style="list-style-type: none"> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore but the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: 1998. A comparison of medical and surgical termination of pregnancy: choice, emotional impact and satisfaction with care. British Journal of Obstetrics and Gynaecology. Vol.105: 1288-1295. Unpaid.	1998	7.11.2017	1998	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore but the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>

Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: 1997. Impact of new methods on therapeutic abortion at the Royal Infirmary of Edinburgh. (Correspondence). British Journal of Obstetrics and Gynaecology. Vol. 104: 871. Unpaid.	1997	7.11.2017	1997	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore but the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Joanne Fletcher	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-authored publication: 1996. A comparison of Medical and Surgical Methods of Termination of Pregnancy: Choice, Psychological Consequences and Satisfaction with Care. A report commissioned and funded by Sheffield Health. Unpaid.	1996	7.11.2017	1996	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL in November 2017</li> <li>• Rationale: Document focused on local NHS practices and published 10 years previous to the development of this guideline, and therefore does not</li> </ul>

							represent a conflict.
Kati Gray	Abortion Care Committee Member		No interests to declare.				
Helgi Johannsson	Abortion Care Co-opted Committee Member	Direct – financial	Undertakes private practice in general surgery and obstetrics. Occasional private practice in abortion (approximately 1 procedure every 2 months). All private practice paid on a fee per service basis. Would be willing not to do private practice in abortion for the duration of the guideline (except for if an emergency procedure was needed). <sup>1</sup>	June 2017	8.10.2017	March 2018 (when appointed to guideline)	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA in February 2018</li> <li>• Private practice in this area is a small proportion of the individual's overall practice and mirrors their NHS work. Based on the need for the committee member's expertise and a view that the potential for gain is minimal, in this instance NICE has confirmed that the individual</li> </ul>

							can continue to participate fully.
Helgi Johannsson	Abortion Care Co-opted Committee Member	Direct – financial	Paid by Medtronic in May 2017 to attend a conference on minimally invasive oesophagectomy. <sup>1</sup>	May 2017	8.10.2017	2017	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA in February 2018</li> <li>• Rationale: Interest is non-specific.</li> </ul>
Helgi Johannsson	Abortion Care Co-opted Committee Member	Direct – financial	Seconded from Imperial to Marie Stopes (1 day a week) to act as Lead Anaesthetist. Responsible for writing their anaesthesia policy and governance of the service, including ensuring consultant anaesthetists who deliver anaesthesia at Marie Stopes are doing this in accordance with the policy. <sup>1</sup>	June 2017	8.10.2017	2017	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA in February 2018</li> <li>• Rationale: Sessions at Marie Stopes constitute employment and anaesthesia policy is focused on governance and safety, not what interventions to use.</li> </ul>

Patricia Lohr	Abortion Care Committee Member	Direct – financial	Research funding from HRA Pharma (makers of emergency contraceptive ellaOne (ulipristal acetate). Grant ended in December 2016 - organizational support provided, no personal financial support provided in the grant.	08.9.2014	14.8.2017	12.07.2016	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: The interest is non-specific and the member did not personally benefit financially.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct – financial	Research funding from Medicem (makers of Dilapan osmotic cervical dilators). Grant ended in December 2016 – organisational support provided, no personal financial support provided for in the grant.	10.04.2015	14.8.2017	December 2016	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: The interest is specific but the member did not personally benefit financially.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct – financial	Project Supervisor/Co-investigator (Principal Investigator Jennifer K. Hsia, Family Planning fellow at University of California, Davis) - Early Medical Abortion Between 64 and 70 Days Gestation in the UK: Effectiveness of an	16.12.2016	14.8.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> </ul>

			Interval Misoprostol Protocol. Funder: Anonymous. Funding received to support BPAS Research Nurse, no personal financial support.				<ul style="list-style-type: none"> <li>• Rationale: Interest is specific, but the member did not personally benefit financially.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct – financial	Co-investigator/applicant: Improving the Acceptability and Uptake of Long acting Reversible Contraception to Young Women. Co-investigator (Principal Investigator Judith Stephenson). Funder: NIHR/HTA. Neither BPAS nor member received funding to assist in this project.	17.03.2016	14.8.2017	26.05.2017	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: The intervention is included in the scope but not in this context so the interest is non-specific</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct – financial	Co-investigator/applicant: Human Developmental Biology Resource (HDBR): an embryonic and fetal tissue bank for the new genetics technologies. Co-investigator (Principal Investigators Andrew Copp, Steve Robson). Funder: MRC-Wellcome. Neither BPAS nor member received funding to assist in this project. As a Co-investigator she is a member of the Joint Steering Committee.	2009	14.8.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: The interest is non-specific.</li> </ul>

Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	Course organiser for RCOG/FSRH/BSACP Manual Vacuum Aspiration training days which are delivered twice a year. Durbin, a supplier of medical devices, provides the aspirators and cannulas used during the practical sessions. She received no financial payment for organising or leading the course.	August 2017	14.8.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Specific interest, but did not personally benefit financially.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	Treasurer, British Society of Abortion Care Providers (RCOG specialist society)	2015	14.8.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Despite this being a specific interest, the balance of risks is such that there is no need to withdraw.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	Publications in last 12 months: 1. Gerdts C, DeZordo S, Mishtal J, Barr-Walker J, Lohr PA. Experiences of women who travel to England for abortions: an	2016	14.8.2017	As per publication dates	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> </ul>

			<p>exploratory pilot study. Eur J Contracept Reprod Health Care. 2016 Aug 19:1-7. [Epub ahead of print]</p> <p>2. van den Berg GF, Picavet C, Hoopman R, Lohr PA, Op de Coul EL. Chlamydia screening and prophylactic treatment in termination of pregnancy clinics in the Netherlands and Great Britain: a qualitative study. Eur J Contracept Reprod Health Care. 2016:1-7. [Epub ahead of print]</p> <p>3. Aiken A, Lohr PA, Aiken CE, Forsyth T, Trussell J. Contraceptive method preferences and provision after termination of pregnancy: a population-based analysis of women obtaining care with the British Pregnancy Advisory Service. BJOG. 2016 Nov 14. doi: 10.1111/1471-0528.14413. [Epub ahead of print]</p> <p>4. ESHRE Capri Workshop Group. Induced abortion. Hum Reprod. 2017;32(6):1160-1169.</p> <p>5. Cameron S, Lohr PA, Ingham R. Abortion terminology: views of women seeking abortion in Britain. J Fam Plann Reprod Health Care. 2017 Jul 11. pii: jfprhc-2016-101631. doi: 10.1136/jfprhc-2016-101631. [Epub ahead of print]</p>				<ul style="list-style-type: none"> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
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Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	<p>Past publications that may be considered by the committee in relation to abortion:</p> <ol style="list-style-type: none"> <li>1. <b>Lohr PA</b>, Reeves MF, Hayes JL, Harwood B, Creinin MD. Oral mifepristone and buccal misoprostol administered simultaneously for abortion: a pilot study. <i>Contraception</i>. 2007;76(3):215-20.</li> <li>2. <b>Lohr PA</b>, Hayes JL, Gemzell-Danielsson K. Surgical versus medical methods for second trimester induced abortion. <i>Cochrane Database of Systematic Reviews</i> 2008, Issue 1. Art. No.: CD006714. DOI: 10.1002/14651858.CD006714.pub2</li> <li>3. Reeves MF, <b>Lohr PA</b>, Hayes JA, Harwood BJ, Creinin MD. Doxycycline serum levels at the time of dilation and evacuation with two dosing regimens. <i>Contraception</i>. 2009;70(2):129-133.</li> <li>4. Reeves MF, Fox MC, <b>Lohr PA</b>, Creinin MD. Endometrial thickness following medical abortion is not predictive of subsequent surgical intervention. <i>Ultrasound Obstet Gynecol</i>. 2009;34:104-9.</li> <li>5. <b>Lohr PA</b>, Wade J, Riley L, Fitzgibbon A, Furedi A. Women's</li> </ol>	2007	14.8.2017	As per publication dates	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
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			<p>opinions on the home management of early medical abortion in the UK. J Fam Plann Reprod Health Care. 2010;36(1):21-5.</p> <p>6. <b>Lohr PA</b>, Reeves MF, Creinin MD. A comparison of transabdominal and transvaginal ultrasonography for determination of gestational age and clinical outcomes in women undergoing early medical abortion. Contraception. 2010;81(3):240-4.</p> <p>7. Kapp N, <b>Lohr PA</b>, Ngo TD, Hayes JL. Cervical preparation for first trimester surgical abortion. Cochrane Database of Systematic Reviews 2010, Issue 2. Art. No.:CD007207. DOI: 10.1002/14651858.CD007207.pub2</p> <p>8. Lyus R, <b>Lohr PA</b>, Taylor J, Morroni C. Outcomes with same-day cervical preparation with Dilapan-S osmotic dilators and vaginal misoprostol before dilatation and evacuation at 18 to 21+6 weeks' gestation. Contraception. 2013;87:71-5.</p> <p>9. Fisher J, <b>Lohr PA</b>, Lafarge C, Robson SC. Termination for fetal anomaly: Are women in England given a choice of method? J Obstet Gynaecol. 2014 Jul 24:1-5. [Epub ahead of print]</p> <p>10. Myers AJ, <b>Lohr PA</b>, Pfeffer N. Disposal of fetal tissue following</p>				
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			elective abortion: what women think J Fam Plann Reprod Health Care Published Online First: 8 September 2014] doi:10.1136/jfprhc-2013-100849				
Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	Bracken H, <b>Lohr PA</b> , Taylor J, Morroni C, Winikoff B. RU OK? The acceptability and feasibility of remote technologies for follow-up after early medical abortion. Contraception. 2014;90:29-35.	2014	14.8.2017	2014	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Specific to the guideline therefore she answered questions only and did not lead topic groups and was not involved in drafting recommendations relating to follow-up care.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	Ongoing research in a related area with plans for publication:  Lohr PA, Parsons JH, Taylor J, Morroni C. Outcomes of dilation and evacuation with and without feticide by intra-cardiac	2017	14.8.2017	2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> </ul>

			<p>potassium chloride injection: a service evaluation. Contraception. 2018 Apr 19. pii: S0010-7824(18)30146-X. doi: 10.1016/j.contraception.2018.04.010. [Epub ahead of print]</p> <ul style="list-style-type: none"> <li>PA Lohr, JE Starling, JG Scott, ARA Aiken Simultaneous administration of mifepristone and misoprostol increases access to early medical abortion where home-use of misoprostol is not permitted. Contraception. May 2018 Volume 97, Issue 5, Pages 463–464</li> </ul>				<ul style="list-style-type: none"> <li>Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct - financial	Representation at the Oireachtas Committee on the Eighth Amendment in Dublin. Her talk will mainly be on Irish women's experiences of travelling to BPAS to obtain abortion care and will touch on things like cost, method mix, gestational age at presentation, disparities in contraception uptake and receipt and the disadvantages of the legal framework within which we work in GB from a clinical perspective. She will also speak a bit on statistics and the safety of abortion. Travel expenses only.	2017	20.11.2017	22.11.2017	<ul style="list-style-type: none"> <li>Declare and participate</li> <li>Agreed by GL</li> <li>Rationale: Interest is specific, but the content is broad and expenses are within reasonable amounts and are the only financial benefit.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional	<p>Publication of 3 manuscripts from prior research</p> <p>1. Lohr PA, Aiken ARA, Forsyth T, Trussell J. Telephone or integrated</p>	2018	21.5.2018	As per publication dates	<ul style="list-style-type: none"> <li>Declare and participate</li> <li>Agreed by GL</li> </ul>

		and personal	<p>contraception counselling before abortion: impact on method choice and receipt. <i>BMJ Sex Reprod Health</i>. 2018 Apr;44(2):114-121.</p> <p>2. Lohr PA, Parsons JH, Taylor J, Morroni C. Outcomes of dilation and evacuation with and without feticide by intra-cardiac potassium chloride injection: a service evaluation. <i>Contraception</i>. 2018 Apr 19. pii: S0010-7824(18)30146-X. doi: 10.1016/j.contraception.2018.04.010. [Epub ahead of print]</p> <p>3. Kung SA, Darney BG, Saavedra-Avendaño B, Lohr PA, Gil L. Access to abortion under the health exception: a comparative analysis in three countries. <i>Reprod Health</i>. 2018 Jun 13;15(1):107.</p>				<ul style="list-style-type: none"> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	<p>Lohr PA, Starling JE, Scott JG, Aiken ARA. Simultaneous Compared With Interval Medical Abortion Regimens Where Home Use Is Restricted. <i>Obstet Gynecol</i>. 2018 Apr;131(4):635-641.</p>	2018	21.5.2018	April	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: Specific to the guideline therefore she answered questions only and did not lead topic groups</li> </ul>

							and was not involved in drafting recommendations.
Patricia Lohr	Abortion Care Committee Member	Direct - Non-financial professional and personal	Participant in expert working group convened to advise the RCOG and the DHSC on guidance and approval wording for home use of misoprostol	September 2018	February 2019	December 2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: Specific to guideline and likely to provide useful information on other organisations approach to this topic so not a conflict.</li> <li>•</li> </ul>
Patricia Lohr	Abortion Care Committee Member	Direct - financial professional and personal	Appointed as an Associate Editor of the journal BMJ Sexual and Reproductive Health	2019	25.06.2019	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> </ul> <p>Rationale: The interest is non-specific.</p>
Patricia Lohr	Abortion Care	Direct - financial professional	Hsia JK, Lohr PA, Taylor JT, Creinin MD. Contraception. 2019 May 16. pii: S0010-7824(19)30169-6. doi:	2019	25.06.19	2019	<ul style="list-style-type: none"> <li>• Declare and participate</li> </ul>

	Committee Member	and personal	10.1016/j.contraception.2019.05.006. [Epub ahead of print]				<ul style="list-style-type: none"> <li>• Agreed by GL</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional and personal	Council member (Doctors' representative & portfolio holder for quality) of British Society of Abortion Care Providers (BSACP)	2016	19.7.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Specific to guideline and likely to provide useful information on other organisations approach to this topic so not a conflict.</li> </ul>

Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional and personal	"Quality and abortion services" Lord J. J Fam Plann Reprod Health Care 2017;43:16-17	2017	19.7.2017		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct – financial	Invited lecture (travel expenses paid) - "Pain relief for MVA", RSM October 2017	October 2017	19.7.2017		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: the interest is specific as manual vacuum aspiration is covered in the guideline, but the member did</li> </ul>

							not benefit financially beyond having expenses paid.
Jonathan Lord	Abortion Care Committee Member	Direct – financial	Trainer (travel expenses paid), RCOG manual vacuum aspiration course, twice yearly	2017	At recruitment (19.7.2017)	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: the interest is specific as manual vacuum aspiration is covered in the guideline, but the member did not benefit financially beyond having expenses paid.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct – financial	Delegate, ESHRE annual scientific conference July 2017 (travel expenses paid by CellOxess; He is not aware of any links to any product used in abortion care).	July 2017	9.11.2017		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: the interest is non-specific and the member only</li> </ul>

							received travel expenses.
Jonathan Lord	Abortion Care Committee Member	Direct – financial	On 8.9.17 attended inaugural UK and Netherlands Advisory Panel Meeting for Minimally Invasive Surgery for which expenses were paid by Hologic (medical devices manufacturer; He is not aware of any links to any product used in abortion care).	September 2017	9.11.2017		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: the interest is non-specific and the member only received travel expenses.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct - financial	Member, Chapter M Gynae and N Obstetrics Expert Working Group, NHS Digital (travel expenses paid)	Nov 17	9.11.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: the interest is non-specific and the member only received travel expenses.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct – financial	Whilst he has previously had private practice privileges granted in a local hospital, he has never taken these up and they would no longer be valid. He does treat IVF patients for whom NHS funding is denied and who therefore have		27.11.2017, updated 24.1.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> </ul>

			<p>to self-fund. He doesn't view this as different to his NHS work (in that the cost of treatment is merely directed to the patient rather than to their CCG who should be paying), but owing to the complexity of the invoicing system they have to administer this through a limited company of which he is a director. Through their company they organise the split of funds to the various parties (IVF lab, their own hospital Trust and their own payments). Rather than take a salary or get paid via the Trust for their time, they simply have twice yearly payments via dividends. This is only applicable to his fertility (assisted conception) work and there is no cross over to abortion care. He has never received income from a patient to provide abortion services, and has never taken out indemnity insurance for any private work.</p>				<ul style="list-style-type: none"> <li>• Rationale: the interest is non-specific. The private practice does not relate to the scope of the guideline.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional and personal	Member of the Northern Ireland abortion scheme oversight group, Department of Health and Social Care, London from April 2018. No payment.	April 2018	2.7.2018		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: Despite this being a specific interest, the balance of risks is such that there is no need</li> </ul>

							to withdraw as relates to abortion in Northern Ireland and not England
Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional and personal	Lead author on a Paper (publication 10.7.18): “Early medical abortion: best practice now lawful in Scotland and Wales but not available to women in England [editorial]”. BMJ-SRH, 2018. Jonathan Lord, Lesley Regan, Asha Kasliwal, Louise Massey, Sharon Cameron.	July 2018	2.7.2018		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member’s expertise in this topic outweighs a risk of bias.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional and personal	Elected co-chair BSACP, Dublin (Institute of Gynaecology); RCOG annual professional development conference (speaker in abortion thread); EMA training courses & mentor to GPs (ICGP, Dublin, Ireland); Hologic clinical advisory board (London – expenses and honarium; no link with abortion care)	October 2018	November 2018	n/a	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: the interest is non-specific and the member only received travel expenses</li> </ul>

Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional and personal	Co-chair, RCOG abortion taskforce (travel expenses paid), from January 2019	January 2019	March 2019	January 2019	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: Despite this being a specific interest, the balance of risks is such that there is no need to withdraw.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional and personal	Author, joint RCOG / FSRH / BSACP Clinical Guidelines for Early Medical Abortion at Home – England, December 2018	December 2018	March 2019	December 2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</li> </ul>
Jonathan Lord	Abortion Care Committee Member	Direct - Non-financial professional	RCOG World Congress (June 2019) organising committee & BSACP stream lead (travel expenses paid)	June 2019	March 2019	June 2019	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL</li> </ul>

		and personal					<ul style="list-style-type: none"> <li>Rationale: the interest is non-specific and the member only received travel expenses</li> </ul>
Sarah Makstutis	Abortion Care Committee Member (Lay)		No interests to declare.				
Michael Nevill	Abortion Care Committee Member	Direct – financial	He is the Director of Nursing for British Pregnancy Advisory Service.	2017	13.7.2017		<ul style="list-style-type: none"> <li>Declare and participate</li> <li>Agreed by GL and NICE CA at recruitment</li> <li>Rationale: Despite this being a specific interest, the balance of risks is such that there is no need to withdraw as only interventions being used in the NHS are being investigated by the guideline.</li> </ul>

Michael Nevill	Abortion Care Committee Member	Direct - Non-financial professional and personal	He is a member of the scientific programme committee for the Infection Prevention Society and as part of that he attends their annual conference.	2010	1.11.2017		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: the interest is non-specific.</li> </ul>
Michael Nevill	Abortion Care Committee Member	Direct - Non-financial professional and personal	Author of opinion article. Nevill M (2017) Access to late abortion must be protected. Nursing Standard. Published 9 August 2017.	2017	1.11.2017		<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: Access relating to legal issues is beyond the scope of the guideline.</li> </ul>
Michael Nevill	Abortion Care Committee Member	Direct - Non-financial professional and personal	Article published in nursing standard on conscientious objection	November 2018	November 2018	n/a	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> </ul> <p>Rationale: Specific to the guideline but were not included in the</p>

							evidence review and therefore the benefit of member's expertise in this topic outweighs a risk of bias.
Kate Randall	Abortion Care Committee Member (Lay)		No interests to declare.				
Fiona Regan	Abortion Care Co-opted Committee Member	Direct - Non-financial professional and personal	Co-author of the RCOG Greentop Guideline No: 65  Surendran SK, Allard S, REGAN F. The Management of Women with Red Cell Antibodies during Pregnancy. Greentop Guideline Number 65. RCOG May 2014. <a href="https://www.rcog.org.uk/globalassets/documents/guidelines/rbc_gtg65.pdf">https://www.rcog.org.uk/globalassets/documents/guidelines/rbc_gtg65.pdf</a>	2014	4.5.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: The interest is non-financial and non-specific.</li> </ul>
Clare Searle	Abortion Care Committee Member		No interests to declare.				

Peter Taylor	Abortion Care Committee Member	Direct – financial	<p>He has no pecuniary interests of any kind to be declared in relation to abortion services.</p> <p>He does commission, for an NHS CCG, such services and as such a direct professional interest in the outcome of this work.</p>	2013	26.6.2017	20/12/2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: This interests is the member's employment and the interest is broad and non-specific to the scope.</li> </ul>
Peter Taylor	Abortion Care Committee Member	Direct – financial	In the field of assisted conception, he provides consultancy work for pharmaceutical companies. He acknowledges that such companies may be part of a larger group that has an arm dealing with medicines and/ or devices in use for abortion procedures and in relation to contraception products and devices.	Dec 2012	26.6.2017	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE CA at recruitment</li> <li>• Rationale: interest is non-specific.</li> </ul>
Peter Taylor	Abortion Care Committee Member	Direct – financial	On occasion, he is asked to speak at conferences in fields outside of his abortion Commissioner role (primarily relating to fertility treatment) for which he receives honorarium. He has only spoken at one such event in the past year (from January 2017) which did not relate to abortion.	January 2017	23.1.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by GL and NICE GCM</li> <li>• Rationale: interest is non-specific.</li> </ul>

Steve Robson	Abortion Care Co-opted Committee Member	Direct – financial	Occasional legal work in abortion (approx. once every 3 years). Produce expert reports on surgical abortions. <sup>1</sup>	Ongoing	19.3.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: no potential to benefit from involvement in the guideline as a result of this interest (interest is undertaken infrequently and expert reports are used in legal cases which are unlikely to directly impact clinical practice)</li> </ul>
Steve Robson	Abortion Care Co-opted Committee Member	Direct - Non-financial professional and personal	<p>Written papers based on published data in collaboration with the charity Antenatal Results and Choices.<sup>1</sup></p> <p>Publications relating to Abortion Care:</p> <ol style="list-style-type: none"> <li>1. Graham RH, Robson SC, Rankin JM. Understanding feticide: An analytical review. Social Sci Med 2008; 66: 289-300.</li> <li>2. Lie MLS, Robson SC, May CR. Experiences of abortion: A narrative</li> </ol>	2008	19.3.2018	2019	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: Specific to the guideline but were not included in the evidence review</li> </ul>

			<p>review of qualitative studies. BMC Health Services Res 2008; 8: 150.</p> <p>3. Graham RH, Mason K, Rankin J, Robson SC. The role of feticide in the context of late termination of pregnancy: a qualitative study of health professionals' and parents' views. Prenat Diagn 2009; 29: 875-881.</p> <p>4. Robson SC, Kelly T, Howel D, Deverill M, Hewison J, Lie MLS, Stamp E, Armstrong N, May CR. Randomised preference trial of medical versus surgical termination of pregnancy less than 14 weeks' gestation (TOPS). Health Technol Assess 2009; 13: 53.</p> <p>5. Lie M, May C, Kelly T, Robson SC. 'Let the computer choose?': the experience of participants in a randomised preference trial of medical versus surgical termination of pregnancy. Sociol Health Dis 2011; 1-15.</p> <p>6. Lyus R, Robson SC, Parsons J, Fisher J, Cameron M. Second trimester abortion for fetal abnormality. Br Med J 2013; 347:f4165.</p> <p>7. Fisher J, Lohr PA, Lafarge C, Robson SC. Termination for fetal anomaly: Are women in England given a choice</p>				<p>and therefore the benefit of member's expertise in this topic outweighs a risk of bias.</p>
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			of method? J Obstet Gynaecol 2015; Feb 35:168-72. 8. Crowe L, Graham RH, Robson S, Rankin J. Negotiating acceptable termination of pregnancy for non-lethal fetal anomaly: a qualitative study of professional perspectives. BMJ Open 2018; 1:8(3):e020815				
Steve Robson	Abortion Care Co-opted Committee Member	Direct - Non-financial professional and personal	1. Kelly T, Suddes J, Howel D, Hewison J, Robson SC. A randomised controlled trial comparing medical versus surgical termination of pregnancy at 13-20 weeks. BJOG 2010; 117: 1512-20.	2008	19.3.2018	2019	<ul style="list-style-type: none"> <li>• Declare and partial exclusion</li> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: Specific to the guideline therefore he answered questions only and did not lead topic groups and was not involved in drafting recommendations relating to choice of procedure.</li> </ul>
Steve Robson	Abortion Care Co-	Direct – financial	Undertake commercial research but not in the area of Abortion Care. Funding	19.3.2018	19.3.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> </ul>

	opted Committee Member		goes to the Trust, no personal payment received. <sup>1</sup>				<ul style="list-style-type: none"> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: interest is non-specific and non-financial.</li> </ul>
Steve Robson	Abortion Care Co-opted Committee Member	Direct - Non-financial professional and personal	He has written an opinion piece in collaboration with BPAS on surgical abortion for fetal abnormality advocating choice of method. <sup>1</sup>	2014	19.3.2018	19.3.2018	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: involvement in this paper is unlikely to be prejudicial to an objective interpretation of the evidence as the paper advocates that women have a choice of method but does not advocate one particular method over another.</li> </ul>

Steve Robson	Abortion Care Co-opted Committee Member	Direct - Non-financial professional and personal	Chairman of the Research Advisory Committee for the charity Wellbeing of Women. Chairs the panel that awards research grants. <sup>1</sup>	01.06.2015	19.3.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: interest is non-specific.</li> </ul>
Steve Robson	Abortion Care Co-opted Committee Member	Direct – financial	Co-applicant on MRC/Wellcome Human Developmental Biology Resource. Part of panel who assess requests for access to the tissue samples from researchers worldwide. <sup>1</sup>	2007	19.3.2018	Ongoing	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: interest is non-specific.</li> </ul>
Steve Robson	Abortion Care Co-opted Committee Member	Direct – financial	Clinical Director of the Clinical Research Network for North East and North Cumbria. Covers research in all specialties. <sup>1</sup>	2014	19.3.2018	Stepping down 30.09.2019	<ul style="list-style-type: none"> <li>• Declare and participate</li> <li>• Agreed by NICE CA at recruitment</li> <li>• Rationale: interest is non-specific.</li> </ul>

## GUIDANCE NOTES FOR COMPLETION OF THE INTERESTS REGISTER

**Relevant dates:** Detail here the date the interest arose, the date it was first declared and when it ceased, if applicable. For example, if an individual has ceased to hold shares or undertake relevant private practice.

