

Neonatal Infection Guideline Update- Committee Meeting

Date: 16/01/2020 & 17/01/2020

Location: NICE Office Manchester

Minutes: Final

Committee members present:	
Waqaar Shah (WS) (Chair)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Sumiah Al-Azeib (SA)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Philip Banfield (PB)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Melanie Carpenter (MC)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Mark Davies (MD)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Nicole Gannon (NG)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Jim Gray (JG)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Paul Heath (PH)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Stephanie Jenkins (SJ)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Jane Plumb (JP)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Aung Soe (AS)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 8
Richard Tubman (RT)	Day 1 Present for notes 1 – 5
	Day 2 Present for notes 1 – 7

In attendance:			

Clare Dadswell	Technical Analyst	Day 1 Present for notes 1 – 5 Day 2 Present for notes 1 – 8
Chris Harris	NICE - Project Manager	Day 2 Present for notes 1 – 8
Kathryn Hopkins	Technical Adviser	Day 1 Present for notes 1 – 5
		Day 2 Present for notes 1 – 8
Justine Karpusheff	Guideline Commissioning Manager	Day 2 Present for notes 1 – 7
Vonda Murray	NICE - Project	Day 1 Present for notes 1 – 5
	Manager	Day 2 Present for notes 1 – 8
Gabriel Rogers	NICE - Technical	Day 1 Present for notes 1 – 5
	Adviser Health Economics	Day 2 Present for notes 1 – 8
Stacey Chang-Douglass	NICE_Technical	Day 1 Present for notes 1 – 5
	Analyst Health Economics	Day 2 Present for notes 1 - 8
Sue Spiers	Associate Director	Day 1 Present for notes 1 – 5
		Day 2 Present for notes 1 – 8
Adam Storrow	Business Analyst -	Day 1 Present for notes 1 –
	Resource Impact Assessment	partway through item 4

Apologies:	
Justine Karpusheff	NICE-Guideline Commissioning Manager – Day 1
Christine Harris	NICE-Project Manager – Day 1
Adam Storrow	NICE - Business Analyst - Resource Impact Assessment – Day 2

Observer:	
Lucy Giannasi	NICE - Project manager – Day 1
Olivia Havercroft	NICE- Editor – Day 2

Day 1 – Thursday 16th January 2020

1. Welcome and objectives for the meeting

The Chair welcomed the Committee members and attendees to day 1, of the 5th meeting on Neonatal infections.

The Chair informed the Committee that apologies had been received. These are noted above.

The Chair outlined the objectives of the meeting, which included:

- Understanding the role of resource impact in guidelines
- Clinical evidence for which maternal and fetal risk factors for early-onset neonatal infection should be used to guide management, and what risk factors in the baby (including symptoms and signs) should raise suspicion of infection within 72 hours of birth
- An update on what maternal risk factors for late-onset neonatal infection should be used to guide management, and which risk factors in the baby (including symptoms and signs) should raise suspicion of late-onset infection

The Chair confirmed that, for the purpose of managing conflicts of interest, the matter under discussion was: maternal and fetal risk factors for neonatal infection.

The DOI register was reviewed by the Chair and Committee and the Chair asked everyone to verbally declare any interests that have arisen since the last meeting. These are noted below.

Name	Job title, organisation	Declarations of Interest, date declared	Type of interest	Decision taken
Jane Plumb	lay member	Direct non-financial professional and personal	Provided a quote on behalf of Group B Strep Support, for a BBC article on group B screening in pregnancy	Declare and participate The quote did not represent a conflict of interest.

The DOIs were considered by the Chair, no conflict of interest was identified for the meeting, and all Committee members were eligible to attend the Committee meeting and contribute to the discussions.

The Chair asked the Committee if it wanted any changes made to the minutes of the last meeting. The Committee agreed that the minutes were a true and accurate account of the meeting.

2. Resource Impact introduction

The Chair introduced AS, Business Analyst - Resource Impact Assessment, for the guideline, who gave a presentation on the what resource impact is, and the role of the team. The Chair thanked AS for their presentation.

3. RQ1.1 Which maternal and fetal risk factors for early-onset neonatal

infection should be used to guide management?

RQ1.2 What risk factors in the baby (including symptoms and signs) should raise suspicion of infection within 72 hours of birth?

Presentation of clinical evidence

The Chair introduced CD, Technical Analyst, who gave a presentation on the clinical evidence for maternal and fetal risk factors for neonatal infection. The Committee discussed the evidence presented. The Chair thanked CD for her presentation.

4. RQ5.1 What maternal risk factors for late-onset neonatal infection should be used to guide management?

RQ5.2 Which risk factors in the baby (including symptoms and signs) should raise suspicion of late-onset infection?

Update

The Chair in consultation with the Committee confirmed this item would be carried forward to day 2 of the meeting.

5. AOB, summary and next steps

The Chair updated the Committee on discussions about the best guideline for recommendations on meningitis in neonates.

The Chair thanked the Committee for their time and contribution to the meeting and reminded the committee of the start time of day 2 of the meeting.

Day 2 – Friday 17th January 2020

1. Welcome and objectives for the meeting

The Chair welcomed the Committee members and attendees to day 2, of the 5th meeting on Neonatal infections.

The Chair informed the Committee that apologies had been received. These are noted above.

The Chair outlined the objectives of the meeting, which included:

- An update on what maternal risk factors for late-onset neonatal infection should be used to guide management, and which risk factors in the baby (including symptoms and signs) should raise suspicion of late-onset infection?
- Health Economic modelling on the clinical and cost effectiveness of immediate delivery versus expectant management in women between 34- and 37-weeks gestation with preterm prelabour prolonged rupture of membranes and vaginal or urine group B streptococcus detection?
- Clinical evidence for which investigations should be performed before starting treatment in babies with symptoms of late-onset neonatal infection?
- A presentation and discussion on the clinical and cost effectiveness of intrapartum antibiotic prophylaxis for preventing early-onset neonatal infection?

The Chair confirmed that, for the purpose of managing conflicts of interest, the matter under discussion was; maternal and fetal risk factors and investigations for neonatal infection. The Chair asked everyone to verbally declare any interests that have arisen since the last meeting, no new interests were declared.

2. RQ5.1 What maternal risk factors for late-onset neonatal infection should be used to guide management?

RQ5.2 Which risk factors in the baby (including symptoms and signs) should raise suspicion of late-onset infection?

Update

The Chair reminded the Committee that the item on maternal risk factors for lateonset neonatal infection from day 1 was carried forward to be discussed as part of day 2's agenda. The Chair introduced CD, Technical Analyst, who presented the update. The Chair thanked CD for their presentation.

3. Health Economic modelling

RQ3.1 What is the clinical and cost effectiveness of immediate delivery versus expectant management in women between 34- and 37-weeks gestation with

preterm prelabour prolonged rupture of membranes and vaginal or urine group B streptococcus detection?

The Chair introduced GR, Technical Adviser (Health Economics) who provided an update on the health economic models. The Chair thanked GR for his presentation.

4 and 5. RQ6.1 What investigations should be performed before starting treatment in babies with symptoms of late-onset neonatal infection?

Presentation of clinical evidence

The Chair introduced CD, Technical Analyst, who gave a presentation on an update for maternal risk factors for late-onset neonatal infection. The Chair thanked CD for her presentation.

6. RQ2.1 What is the clinical and cost effectiveness of intrapartum antibiotic prophylaxis for preventing early-onset neonatal infection?

Clinical presentation

The Chair introduced PH, Consultant Paediatrician, who gave a presentation on the clinical and cost effectiveness of intrapartum antibiotic prophylaxis for preventing early-onset neonatal infection. The Chair thanked PH for his presentation.

7. RQ2.1 What is the clinical and cost effectiveness of intrapartum antibiotic prophylaxis for preventing early-onset neonatal infection?

Discussion

The Chair introduced KH, Technical Adviser, who gave a presentation on the clinical and cost effectiveness of intrapartum antibiotic prophylaxis for preventing early-onset neonatal infection. The Chair thanked KH for their presentation.

8. AOB, summary and next steps

No other business to discuss.

The Chair thanked the Committee for their time and contribution to the meeting. The venue, date and time of the next meeting was confirmed.

Date of next meeting: 6/03/2020

Location of next meeting: NICE offices – London