

Kidney Cancer GCOM 12 (day 1) minutes

Kidney Cancer update – committee meeting 12 (day 1) minutes

**Date:** 03/06/2025

**Location:** Virtual

Minutes: Final

Committee members present:			
Baljit Singh	Chair	Present for items 1-12	
Lisa Browning	Histopathologist	Present for items 4 -12	
John Connolly	Lay Member	Present for items 1-12	
Stuart Evans	Oncology Pharmacist	Present for items 2 -12	
Geraldine Fox	Lay Member	Present for items 1-12	
David Mole	Nephrologist (co-opted member)	Present for items 1-12	
Vishal Patil	Anaesthetist (co-opted member)	Present for items 1-12	
Ankit Rao	Medical Oncologist	Present for items 2-7	
Ana Semedo	Vice Chair, Oncology Cancer Nurse	Present for items 1-7	
Grant Stewart	Topic Adviser	Present for items 1-12	
Maxine Tran	Urological Surgeon	Present for items 1-7	
James Whitworth	Clinical Geneticist (co-opted member)	Present for items 1-12	
Rose Woodward	Lay Member	Present for items 1-12	

In attendance NICE:			
Marie Harrisingh	Topic Lead	Present for items 1-12	
Sarah Boyce	Senior Technical Analyst	Present for items 1-12	
Danielle Conroy	Project Manager	Present for items 1-12	
Lindsay Claxton	Health Economics Adviser	Present for items 1-12	
Benjamin Gregory	Business Analyst, Resource Impact	Present for items 3-12	
Lina Manounah	Technical Analyst	Present for items 10-12	
Sarah Matthews	Technical Analyst	Present for items 1-7	
Agnesa Mehmeti	Technical Analyst	Present for items 1-12	
Hannah Tebbs	Senior Health Economist	Present for items 1-11	
Ellie Zachariades	Senior Guidance Content Designer	Present for items 1-12	

Yuanyuan Zhang	Senior Health Economist	Present for items 1-12
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Apologies:	
Axel Bex	Urological Surgeon, committee member
Janet Brown	Medical Oncologist, committee member
Amarnath Challapalli	Clinical Oncologist (General), committee member
Amy Clifford	Clinical Oncologist (SABR), committee member
Olivia Crane	Senior Technical Analyst, NICE
David Cullen	Urology Cancer Nurse, committee member
Fayiza Habeeb	Lead Nurse Practitioner, committee member
Sandeep Singh Randhawa	General Practitioner, committee member
Tze Min Wah	Interventional Radiologist, committee member
Sam Withey	Diagnostic Radiologist, committee member

### 1. Welcome, Introductions and DOIs

The Chair, Baljit Singh (BS) welcomed the committee members and NICE attendees to day 1 of the 12th committee meeting for the NICE Kidney Cancer guideline.

BS informed attendees that apologies had been received as noted above. BS asked all committee members to verbally declare any new interests.

No new interests were declared but BS reminded the group of the following recorded interests which are relevant to the day's discussion:

Name	Job title, organisation	Declarations of Interest, date declared	Type of interest	Decision taken
Professor Grant Stewart	Professor of Surgical Oncology, University of Cambridge, Honorary Consultant in Urological Surgery, Cambridge University Hospitals NHS Foundation	Harrison, H., Stewart, G.D. and Usher-Smith, J.A. (2023), Patient experience of follow-up after surgery for kidney cancer: a focus group study. BJU Int, 132: 47-55. https://doi.org/10.1111/bju.15982  Declared 04/2025	Specific, non-financial professional and personal	Declare and partial exclusion. Included study for RQ1 on information needs. Participate in discussion but withdraw from drafting recommendations.

	Trust			
Professor Grant Stewart	Professor of Surgical Oncology, University of Cambridge, Honorary Consultant in Urological Surgery, Cambridge University Hospitals NHS Foundation Trust	Ranieri, V., Warren, H., Florez, I., Neves, J.B., Walkden, M., Bernstein, D.E., Santiapillai, J., Williams, N., Wildgoose, W.H., Patki, P., Stewart, G.D., Kinsella, N., Pizzo, E., Barod, R., Bex, A., Mumtaz, F., El-Sheikh, S., Gurusamy, K. and Tran, M.G.B. (2024), Identifying the facilitators and barriers to implementation of renal tumour biopsy in the diagnostic pathway for small renal masses. BJU Int, 134: 796-804. https://doi.org/10.1111/bju.16470	Specific, non-financial professional and personal	Specific  Declare and partial exclusion.  Included study for RQ1 on information needs.  Participate in discussion but withdraw from drafting recommendations.  (Full exclusion from recommendation drafting due to having 2 included studies for this review that spanned multiple stages of the treatment pathway.)
Professor Grant Stewart	Professor of Surgical Oncology, University of Cambridge, Honorary Consultant in Urological Surgery, Cambridge University Hospitals NHS Foundation Trust	Dabestani, Saeed; Beisland, Christian; Stewart, Grant D; Bensalah, Karim; Gudmundsson, Eirikur; Lam, Thomas B; Gietzmann, William; Zakikhani, Paimaun; Marconi, Lorenzo; Fernandez-Pello, Sergio; Monagas, Serenella; Williams, Samuel P; Powles, Thomas; Van Werkhoven, Erik; Meijer, Richard; Volpe, Alessandro; Staehler, Michael; Ljungberg, Borje; Bex, Axel; Increased use of crosssectional imaging for follow-up does not improve post-recurrence survival of surgically treated initially localized R.C.C.: results from a European multicenter database (R.E.C.U.R.).; Scandinavian journal of urology; 2019; vol. 53 (no. 1); 14-20	Specific, non-financial professional and personal	Specific Declare and partial exclusion Study included in the evidence base for RQ5b on follow up however committee member's expertise is essential to this discussion. Participate in discussion but withdraw for drafting recommendations.
Professor Grant Stewart	Professor of Surgical Oncology, University of Cambridge, Honorary Consultant in Urological	Dabestani, Saeed; Beisland, Christian; Stewart, Grant D; Bensalah, Karim; Gudmundsson, Eirikur; Lam, Thomas B; Gietzmann, William; Zakikhani, Paimaun; Marconi, Lorenzo; Fernandez-Pello, Sergio; Monagas, Serenella; Williams, Samuel Paul; Torbrand, Christian; Powles, Thomas; Van	Specific, non-financial professional and personal	Declare and partial exclusion  Study included in the evidence base for RQ5b on follow up however committee member's expertise

	Surgery, Cambridge University Hospitals NHS Foundation Trust	Werkhoven, Erik; Meijer, Richard; Volpe, Alessandro; Staehler, Michael; Ljungberg, Borje; Bex, Axel; Intensive Imaging-based Follow-up of Surgically Treated Localised Renal Cell Carcinoma Does Not Improve Post-recurrence Survival: Results from a European Multicentre Database (RECUR).; European urology; 2019; vol. 75 (no. 2); 261-264		is essential to this discussion.  Participate in discussion but withdraw for drafting recommendations.
Maxine Tran		Ranieri, V., Warren, H., Florez, I., Neves, J.B., Walkden, M., Bernstein, D.E., Santiapillai, J., Williams, N., Wildgoose, W.H., Patki, P., Stewart, G.D., Kinsella, N., Pizzo, E., Barod, R., Bex, A., Mumtaz, F., El-Sheikh, S., Gurusamy, K. and Tran, M.G.B. (2024), Identifying the facilitators and barriers to implementation of renal tumour biopsy in the diagnostic pathway for small renal masses. BJU Int, 134: 796-804. https://doi.org/10.1111/bju.16470	Specific, non-financial professional and personal	Declare and partial exclusion. Included study for RQ1 on communication. Participate in discussion but withdraw from drafting recommendations about information to be provided about biopsy. Able to draft recommendations on information to be provided at other stages of the treatment pathway
Maxine Tran		Author on an unpublished paper: A multi-centre feasibility study and cost effectiveness analysis to compare the outcomes of 99m Tc-SestaMIBI SPECT/CT, biopsy or empiric surgery in the diagnosis of kidney tumours  Declared 05/2025	Specific, non-financial professional and personal	Declare and partial exclusion. Included study for RQ2b on biopsy. Participate in discussion but withdraw from recommendation drafting.

Grant Stewart (GS) was an author on papers included in the evidence review for RQ1 and RQ5b being discussed. It was agreed that the member could remain in the room to answer questions as his expertise was required but he would need to remain silent whilst new recommendations on information needs were being made and recommendations on follow-up were being revised.

Maxine Tran (MT) was an author on a paper included in the evidence review for RQ1 and RQ2b being discussed. It was agreed that the member could remain in the room to answer questions as her expertise was required but would need to remain silent

whilst recommendations about biopsy and information to be provided about biopsy were being revised.

Finally, the minutes from committee 11 (day 2) were checked and agreed to be an accurate record.

#### 2. Drafting RQ1 information needs recs continued:

- Post surgery information
- Advanced RCC

The Chair introduced Marie Harrisingh (MH), Topic Lead who led recommendation drafting on what information should be provided to patients after surgery and what information should be provided to those diagnosed with advanced renal cell carcinoma.

The committee had the opportunity to ask questions and discuss as a group. Cross referencing to other relevant NICE guidelines and a glossary of terminology to assist patients was considered. Initial recommendation wording was then drafted which would be taken away for further edits.

GS withdrew from participating in recommendation drafting due to a conflict of interest.

The Chair thanked the committee for their input.

#### 3. RQ1: heritable RCC predisposition syndrome information

The committee then moved on to discuss what information should be provided in relation to heritable renal cell carcinoma predisposition syndromes. After a group discussion, initial wording was drafted which will be taken away for further edits.

GS withdrew from participating in recommendation drafting due to a conflict of interest.

The Chair thanked the committee for their input.

## 4. Revisiting recs: RQ5ci/ii genetic assessment, management and follow up of RCC in people with heritable RCC and predisposition syndromes?

MH presented the previously drafted recommendations for genetic assessment, management and follow up of people with heritable renal cell carcinoma and predisposition syndromes for committee review.

The committee had the opportunity to discuss as a group, answer questions from the NICE team and revise the recommendation wording as required.

The Chair thanked the committee for their input.

### 5. New recs RQ5c: what to do for other types of heritable RCC and predisposition syndromes?

The committee considered appropriate management and follow-up required for other types of heritable renal cell carcinoma and predisposition syndromes including Von Hippel-Lindau (VHL), Birt-Hogg Dube (BHD) and hereditary leiomyomatosis and renal cell carcinoma (HLRCC).

The committee discussed as a group, answered questions and drafted initial recommendation wording which will be taken away for further edits.

The Chair thanked the committee for their input.

#### 6. New recs RQ2b: biopsy for heritable RCC syndromes

MH presented the recommendations on biopsy for heritable renal cell carcinoma syndrome which the group had started to draft at a previous meeting for further committee input and ratification.

MT withdrew from participating in recommendation drafting due to a conflict of interest.

The Chair thanked the committee for their input.

#### 7. Revisiting recs: RQ2b biopsy information

MH presented the previously drafted recommendations for information to be provided about biopsy for committee review and further input.

The committee had the opportunity to discuss as a group, answer questions from the NICE team and revise the recommendation wording as required.

GS and MT withdrew from participating in recommendation drafting due to a conflict of interest.

The Chair thanked the committee for their input.

#### 8. Revisiting recs: RQ2b biopsy

The committee discussed the recommendations on biopsy, answered questions from the NICE team and revised the recommendation wording as required.

MT withdrew from participating in recommendation drafting due to a conflict of interest.

The Chair thanked the committee for their input.

#### 9. Revisiting recs: RQ5a active surveillance

MH presented the recommendations for active surveillance for committee review and input. Any impact on or deviations from current practice were noted.

Wording was revised as a group which will be taken away for further edits.

The Chair thanked the committee for their input.

# 10. Revisiting recs: RQ5a active surveillance continued (Oncocytomas and Bosniak cysts)

The committee continued to consider appropriate recommendations for active surveillance in relation to oncocytomas and Bosniak cysts.

The committee discussed as a group and considered any variations needed due to cyst size.

The Chair thanked the committee for their input.

#### 11. Revisiting recs: RQ5b follow up

MH presented the previously drafted recommendations on follow-up for further committee input. The committee considered scheduling, testing, imaging and discharge and agreed necessary revisions to wording.

GS withdrew from participating in recommendation drafting due to a conflict of interest.

The Chair thanked MH and the committee for their input.

#### 12. Next steps and AOB

BS summarised the main actions from the day and asked for items of any other business. As there was no further business to discuss, BS brought the meeting to a close.

Date of next meeting: 13/06/2025

**Location of next meeting:** Virtual