

Familial Breast Cancer GC1 minutes

Familial Breast Cancer update – guideline committee meeting 1 minutes

Date: 11/12/2025

Location: Hybrid – London and virtual

Minutes: Final

Committee members present:		
Alison Cameron	Chair	Present for items 1-11
Kay Davies-Crowley	Advanced Nurse Specialist	Present for items 1-6
Helen Hanson	Clinical Geneticist	Present for items 1-11
Sadaf Haque	General Practitioner	Present for items 1-11
Ashley Hurst	Lay member	Present for items 1-11
Sarah Pugh	Genetic Counsellor	Present for items 1-11
Kathryn Rigby	Breast Surgeon	Present for items 1-11
Tamsin Sargeant	Lay member	Present for items 1-11
Hannah Seabrook	Clinical Psychologist	Present for items 1-11
Liz Sherwin	Clinical Oncologist	Present for items 1-11

In attendance NICE:		
Sarah Boyce	Senior Technical Analyst	Present for items 1-11
Victoria Carter	Implementation Lead	Present for items 1-11
Danielle Conroy	Project Manager	Present for items 1-11
Marie Harrisingh	Topic Lead	Present for items 1-11
Lina Ford	Technical Analyst	Present for items 1-11
Sarah Matthews	Technical Analyst	Present for items 1-11
Lisa Miles	Technical Analyst (observing)	Present for items 1-10
Eric Slade	Health Economics Adviser	Present for items 1-11
Adam Storrow	Resource Impact (observing)	Present for items 1-9
Daniel Tuvey	Information Specialist	Present for items 1-11
Maheen Qureshi	Technical Analyst (observing)	Present for items 1-11

Apologies:	
Rachael Griffin	Co-opted Lay member, committee
Gareth Haman	Senior Guidance Content Designer, NICE
Zoe Kemp	Clinical Geneticist, Committee
Tzujung Lai	Health Economist, NICE

Yolanda Martinez	Technical Analyst, NICE
Magdalena Watras	Pharmacist Clinical Adviser, NICE

1. Welcome, Introductions and apologies

The Chair, Alison Cameron (AC) welcomed the committee members and NICE attendees to the first in-development committee meeting for the NICE Familial Breast Cancer guideline update which will focus on initial assessment, genetic testing and risk reducing mastectomy.

Apologies were noted and the group introduced themselves.

2. Declaration of interests:

- **Background and policy**
- **Any new declarations**

The Chair introduced Marie Harrisingh (MH), Topic Lead who gave a short presentation on NICE's declaration of interest policy and reminded committee members of their responsibility of disclosing relevant interests so they can be managed appropriately.

The Chair then asked the committee to declare any new interests which were not already captured on the topic's register of interests. No new interests were declared.

3. Overview of guideline development process and timeline

MH then outlined the aims of the meeting and provided an overview of the NICE guideline development process and flagged key stages and dates in the topic timeline.

The Chair thanked MH for her input.

4. Introduction to protocol development

The Chair introduced Sarah Boyce (SB), Senior Technical Analyst who provided the committee with an introduction to protocol development.

This covered key terms, important elements such as subgroups and stratification and issues that need to be taken into consideration when drafting a review protocol.

The committee had the opportunity to ask questions of clarification.

The Chair thanks SB for her input.

5. Review protocol for RQ5 – risk reducing surgery

The Chair introduced Sarah Matthews (SM), Technical Analyst who presented the first protocol for committee consideration that will underpin the evidence review looking at the effectiveness of risk-reducing mastectomy.

The committee considered different elements including population, interventions, comparator and study types.

The committee had the opportunity to discuss as a group, offered their expert input and answered questions from the NICE team.

The Chair thanked the committee for their input.

6. Review protocol for RQ1 – tools for carrier probability assessment

SM then went on to present the protocol to answer the question of ‘in people with breast cancer or suspected predisposition to breast cancer, which diagnostic models are best to calculate the probability of having a pathogenic variant in breast cancer predisposition genes?’

The committee considered different diagnostic prediction models and their study designs including diagnostic accuracy at different thresholds. They offered their input on relevant populations, subgroups and which diagnostic prediction models were used in practice.

The Chair thanked SM for her input.

7. Review protocol for RQ4 – tools to assess risk of developing breast cancer

The Chair introduced Lina Ford (LF), Technical Analyst who presented the protocol to consider which validated prognostic tools are most effective at predicting the risk of future breast cancer.

The committee were asked to think about study design, population, outcomes, different prognostic tools, stratification and subgroups.

8. Review protocol for RQ4 – tools to assess risk of developing breast cancer - continued

This item continued after lunch.

The committee had the opportunity to discuss as a group and ask questions.

The Chair thanked the committee for their input.

9. Review protocols for RQ2 and RQ3 - thresholds for genetic testing

LM went on to present the final protocol for review question 2, which will consider at what carrier probability should people with a personal history of breast cancer be offered germline genetic testing. Before moving on to review question 4, which will consider at what carrier probability should people without breast cancer who are suspected to have a heritable predisposition to breast cancer, be offered germline genetic testing.

The committee provided their expert input on appropriate population, primary and

secondary outcomes, stratification and subgroups.

The Chair thanked LF and the committee for their input.

The NICE team will make edits to the review protocols based on committee's discussion and decisions today.

10. Introduction to health economics and prioritisation process for economic modelling

The Chair introduced Eric Slade (ES), Health Economics Adviser who provided committee with an introduction to health economics including why it is important for NICE and the NHS and how this is incorporated into guidance.

ES explained how review questions were prioritised for original economic modelling and presented NICE's proposals in relation to this update to the committee for their input.

The committee had the opportunity to discuss as a group and ask questions.

Several committee members volunteered to help ES with the economic plan.

The results of the health economics work will be presented to committee at a later meeting.

The Chair thanked ES for his input.

11. AOB and close

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

Date of next meeting: 27th February 2026

Location of next meeting: Virtual