Document not locked to allow for amendments

# Lung cancer Committee meeting

**Date:** 22/01/2018

Location: NICE offices Manchester

Minutes: Final



Committee members present:	
Gary McVeigh (GM) (Chair)	Present for all
Shahzeena Aslam (SA)	Present for all
Lynn Campbell (LC)	Present for all
Jesme Fox (JF)	Present for all
Tom Haswell (TH)	Present until during item 11
Andrea McIver (AM)	Present for all
Neal Navani (NN)	Present for all
David Waller (DW)	Present for all
Rhiannon Walters-Davies (RW)	Present for all
Nigel Westwood (NW)	Present from item 3
Clifford Wyn Jones (CW)	Present for all

In attendance:		
Sohaib Ashraf (SAS)	NICE – Technical Analyst Health Economics	Present for all
Rupert Franklin (RF)	NICE – Commissioning Manager	Present for all
James Hall (JH)	NICE – Medical Advisor	Present until end of item 3
Ross Maconachie (RM)	NICE – Technical Advisor Health Economics	Present for all
Toby Mercer (TM)	NICE – Technical Analyst	Present for all
Caroline Mulvihill (CM)	NICE – Technical Advisor	Present for all
Vonda Murray (VM)	NICE – Project Manager	Present for all
Gary Shield (GS)	NICE – Resource Impact Lead	Present until the end of item 4

# 4.0.03 DOC Cmte minutes

Sue Spiers (SS)	NICE – Associate Director	Present for all
	Guideline Updates Team	

Apologies:	
Elaine Borg	Committee member
Sujal Desai	Committee member
Sue Maughn	Committee member
Nigel Westwood	Committee member

#### Item 1

- Welcome
- Objectives
- Declarations of interest
- Minutes of the last meeting

#### Item 1

The Chair welcomed the Committee members, and attendees to the 3<sup>rd</sup> meeting on lung cancer.

The Chair Introduced and welcomed DW, Thoracic Surgeon to the committee. DW provided some information on his professional background. GS introduced himself, and a brief summary of his role. JH, provided a brief introduction Apologies were noted, as recorded above.

The objectives of the meeting, were outlined by the Chair. The minutes were reviewed from Gcomm 2; Monday 4<sup>th</sup> December 2017. The minutes were agreed to be an accurate record.

The DOI register was made available to the Chair, and committee. The Chair reviewed the DOI register, a number of new declarations were made, and these are noted below. The DOI's were considered by the Chair, it was agreed that all committee members were eligible to attend the committee meeting and contribute to the discussions and drafting of any recommendations.

Attendee	Declaration	Action
Rhiannon Walters-Davies	5th Prostate Forum Wales- 11th December, education event sponsored by Astellas. Honorarium paid to pharmacy education endowment fund at Velindre (not the budget holder for the fund)	Declare and participate

# 4.0.03 DOC Cmte minutes

Rhiannon Walters-Davies	British Thoracic Oncology Group conference attendance Jan 24th-26th 2018 – fees, accommodation and travel paid by Boehringer	Declare and participate
Jessme Fox	Attended an Advisory Board meeting for Takeda (lung cancer related but not on any of the topics covered in the guideline) Honorarium paid to employer. Travel and accommodation paid. Donation given to employer	Declare and participate

#### Item 2

• Lay members slot

#### Item 2

Agreed, slot not required on this occasion

## Item 3

The role of the editorial lead

#### Item 3

JH presented information on the role of the editorial lead on the guideline, and advice around the wording of recommendations

## Item 4

Resource impact

#### Item 4

GS introduced the role of resource impact team, the difference of economic analysis and resource impact assessment. Also GS explained what the team can create for a guideline.

## Item 5

Clinical presentation (background to RQ 4.1 and 4.2)

#### Item 5

SA provided a clinical introduction on; cranial radiotherapy for brain metastases in non-small cell lung cancer (NSCLC) and prophylactic cranial radiation (PCI) for small cell lung cancer (SCLC). The committee asked a number of questions. The Chair thanked SA for her presentation.

### Item 6

4.1 What is the clinical and cost effectiveness of cranial irradiation for brain metastases in people with NSCLC?

• Presentation of evidence and recommendations from the draft Brain tumour and brain metastases guideline

• Committee develop stakeholder comments on these draft recommendations.

### Item 6

CM explained to the committee that evidence for review question 4.1 concerning the clinical and cost effectiveness of cranial irradiation for brain metastases in people with non-small cell lung cancer, has been reviewed by the guideline committee for the brain tumours (primary) and brain metastases in adult's guideline. The guideline will be out for consultation until the 23<sup>rd</sup> February 2018. CM provided an overview of the evidence considered by the brain tumour and brain metastases guideline committee and the lung cancer guideline committee were asked to provide comments which will form a stakeholder response to the evidence review and recommendation. It is proposed that, following consultation and publication of the brain tumours (primary) and brain metastases in adult's guideline the lung cancer guideline will consider cross referral to the recommendation.

#### Item 7

4.2 What is the clinical and cost-effectiveness of prophylactic cranial irradiation to prevent brain metastases in people with SCLC?

• Evidence presentation & discussion

#### Item 7

TM presented the evidence on the clinical effectiveness of prophylactic cranial irradiation to prevent brain metastases in people with for small cell lung cancer. The committee discussed the evidence. The committee updated these recommendations accordingly.

•

## Item 9

1.3 What is the clinical and cost-effectiveness of routine imaging of the head in the management of people with lung cancer before radical therapy with curative intent?

• Discuss list of studies for inclusion

#### Item 9

The committee discussed what possible studies could provide evidence for the clinical and cost-effectiveness of routine imaging of the head in the management of people with lung cancer before radical therapy with curative intent.

## Item 10

3.3 What is the clinical and cost effectiveness of the following systemic anticancer therapy regimens for treating NSCLC:

- platinum combinations compared with non-platinum combinations in people with advanced NSCLC (stage III or IV)
- non-platinum monotherapy compared with non-platinum combinations in people with advanced NSCLC (stage III or IV) who cannot tolerate platinum combinations

Update following further discussion

## Item 10

CM discussed with the committee the proposed approach for review question 3.3.

## Item 11

Health Economics (discussion of plans for modelling)

## Item 11

SAS provided an overview on modelling diagnostic test accuracy. SA and RM then moved onto discussing with the committee the proposed plan for health economic modelling.

RM then discussed with the committee the interventions in the protocol for RQ 3.1. It was agreed that the intervention of interest were surgery with chemotherapy vs chemoradiotherapy vs surgery with chemoradiotherapy.

## Items 12

• AOB

## Items 12

## • Review questions 1.1. and 1.2

RQ1.1 What is the clinical and cost effectiveness of using non-ultrasound-guided TBNA, EBUS-TBNA or EUS-FNA as the first test for people with an intermediate probability of mediastinal malignancy?

RQ1.2 What is the clinical and cost-effectiveness of EBUS-TBNA alone, EUS-FNA alone or EBUS-TBNA and EUS-FNA in combination compared with surgical staging to diagnose and/or stage lung cancer?

The committee discussed the recommendations

## Item 13

• Summary and next steps

# Item 13

The Chair thanked the committee for their input, and reminded the committee the next committee meeting would be held on, Monday 26th and Tuesday 27th February 2018, in London.

**Date of next meeting:** 26/02/2018 and 27/02/2018

Location of next meeting: NICE Offices – London