

Interests Register

*interests declared before 31st March 2018 were processed under the NICE conflicts of interest policy 2014, but have been re-categorised under the 2018 policy

*interests declared from 1st April 2018 were processed under the NICE conflicts of interest policy 2018

Urinary incontinence (update) and pelvic organ prolapse in women: management guideline committee Publication Date: April 2019

Name	Role with NICE	Type of interest	Description of interest	Relevant dates			Comments GL= guideline lead
				Interest arose	Interest declared	Interest ceased	
Suzanne Biers	Committee Member	Direct, non-financial	Elected member of the executive committee for the British Association of Urological Surgeons (BAUS) section of Female, Neurological and Urodynamic Urology (FNUU) January 2017 to run for three years.	January 2017	14.1.2017		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-financial.
Suzanne Biers	Committee Member	Direct, financial	In May 2016 the member will be paid a speaker fee by Astellas pharmaceutical company for delivering 2 talks at the Cambridge Urodynamic Study Day, Bury St Edmunds (an industry sponsored educational event for East of England doctors and nurses).	May 2016	14.1.2017		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is financial, but is not specific to the scope.

Suzanne Biers	Committee Member	Direct, financial	In June 2016 Astellas pharmaceutical company sponsored and provided 4 nights' accommodation to assist the member's attendance at the British Association of Urological Surgeons (BAUS) annual conference in Liverpool.	June 2016	14.1.2017		<p>Declare and participate</p> <p>Agreed by GL and NICE CA at recruitment</p> <p>Rationale: The interest is financial, but is not specific to the scope.</p>
Suzanne Biers	Committee Member	Direct, non-financial	<p>Sub-investigator for hospital based clinical research studies:</p> <p>(1) MASTER - Male synthetic sling versus Artificial urinary Sphincter Trial: Evaluation by Randomised controlled trial. Randomising men with post prostatectomy stress incontinence to surgery with either Male AdVance sling or artificial urinary sphincter. Involves in recruiting and surgery. Ongoing recruitment.</p> <p>(2) RELIEF II - A Prospective, Non-Randomized, Multi-Center Clinical Investigation of the Safety and Performance of GT Urological, LLC's Phenix Device Artificial Urinary Sphincter. Ongoing recruitment.</p> <p>(3) ALTAR study - ALternative To prophylactic Antibiotics for the treatment of Recurrent urinary tract infections in women (ALTAR study). Investigating the role of methenamine in recurrent UTI. Recruitment in progress.</p>	February 2017	14.1.2017		<p>Declare and participate</p> <p>Agreed by GL and NICE CA at recruitment</p> <p>Rationale: The interest is non-financial.</p>

Suzanne Biers	Committee Member	Direct, financial	Teacher on a course on Mens Health Erectile Restoration and Male Continence Surgery Hands-on Training Masterclass in collaboration with the ESSM (European Society for Sexual Medicine) in Cambridge in September 2017. This involves providing male incontinence surgery training on a course for urology surgeons organised by Boston Scientific. Fees received.	September 2017	18.7.2017	<p>Partial exclusion: the initial view was that she could participate fully. However, it was subsequently agreed that she would need to be partial excluded from decision-making on mesh interventions given that Boston Scientific makes mesh. This action is effective for all future committee meetings.</p> <p>Agreed by GL and NICE GCM under the 2014 policy and revised under the 2018 policy.</p> <p>Rationale: The interest is financial and specific. The organiser Boston Scientific manufactures products used for mesh interventions</p>
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							which are a specific interest.
Suzanne Biers	Committee Member	Direct, non-financial	Faculty and teacher on urology course for junior trainees – reconstructive techniques in urology. Member does not receive a fee for her participation. The course received sponsorship from Boston Scientific. The course is not related to and does not use prolapse or incontinence devices or products.		10.1.2018		Agreed by GL on 27.03.18 Partial exclusion – For questions on mesh interventions, the member can answer specific questions about the evidence, but cannot take part in decision-making for recommendations. This action is effective for all future committee meetings.
Suzanne Biers	Committee Member	Direct, non-financial	Member is arranging a urinary incontinence and reconstructive cadaveric surgical skills course for trainees on behalf of the British Association of Urological Surgeons (BAUS) Section of Female, Neurological and Urodynamic Urology. The	September 2018	19.03.2018	10.01.2019	Agreed by GL and Chair on 27.03.18 Partial exclusion – For questions on mesh interventions, the member can

			<p>member has drafted a course and will potentially run it in September and October.</p> <p>The course includes training in the insertion of midurethral (mesh) tapes for incontinence as one section (amongst demonstration of all other techniques of stress urinary incontinence surgery). It also uses artificial urinary sphincters. These devices and the course will require part sponsorship from the company Boston Scientific.</p> <p>The member will teach and run the course, but will not receive payment personally from the company.</p>				<p>answer specific questions about the evidence, but cannot take part in decision-making for recommendations. This action is effective for all future committee meetings.</p>
Suzanne Biers	Committee Member	Direct, financial	<p>Teacher on a course on Men's Health Male Contenance Surgery Hands-on Training Masterclass. This involves providing male incontinence discussion of cases and surgery training on a course for urology surgeons organised by Boston Scientific.</p> <p>Member has agreed either to have her fees paid to her employer or to not claim for fees.</p>	26.4.2018	28.03.2018		<p>Partial exclusion – For questions on mesh interventions, the member can answer specific questions about the evidence, but cannot take part in decision-making for recommendations. This action is effective for all future committee meetings.</p>

							<p>Agreed by GL on 13.6.2018</p> <p>Rationale: the organiser Boston Scientific manufactures products used for mesh interventions which are a specific interest. The member agreed to try to have the fee paid directly to the hospital rather than receiving it directly, but has also agreed to the above partial exclusion to avoid any potential conflict of interest should this arrangement not be possible.</p>
Suzanne Biers	Committee Member	Direct, financial	Participated as a teacher on a surgical training course on 2nd and 3rd October 2018 on male urinary incontinence (not related to the NICE	2.10.2018	15.10.2018	3.10.2018	Agreed by GL on 15.10.2018

			female UI guideline) organised by Boston Scientific, who have also offered a fee. I have asked that this fee is paid via my hospital.				<p>Partial exclusion – For questions on mesh interventions, the member can answer specific questions about the evidence, but cannot take part in decision-making for recommendations. This action is effective for all future committee meetings.</p> <p>Rationale: The organiser Boston Scientific manufactures products used for mesh interventions which are a specific interest. The member agreed to have the fee paid directly to the</p>
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							hospital rather than receiving it directly.
Suzanne Biers	Committee Member	Direct, financial	Teaching at a surgical skills course on reconstruction and urinary incontinence surgery on 23th and 24th December 2018. I will not receive any fee for this. Boston Scientific have provided support via an educational grant paid directly to the Evelyn surgical Skills Centre in Melbourne(via Addenbrooke's hospital Cambridge postgraduate centre) to allow this teaching course to purchase materials to run the course. Course is also partly sponsored by Health Education England grant.	23.12.2018	15.10.2018	24.12.2018	Partial exclusion – For questions on surgical management and surgery of SUI, the member can answer specific questions about the evidence, but cannot take part in decision-making for recommendations. This action is effective for all future committee meetings. Agreed by GL on 15.10.2018 Rationale: the organiser Boston Scientific manufactures products used for mesh

							interventions which are a specific interest. Support through a grant has been paid directly to the hospital's postgraduate centre rather than directly to the committee member, but the member has also agreed to the above partial exclusion to avoid any potential conflict of interest should this arrangement not be possible.
Suzanne Biers	Committee Member	Direct, non-financial	I am member of faculty on a female urology course running at University College Hospital London (9th annual Masterclass in Urology & Urogynaecology). I do not receive any fee for this teaching.		15.10.2018	Ongoing	Declare and participate Agreed by GL on 18.12.2018 Rationale: The interest is not specific to the

							scope of the guideline.
Suzanne Biers	Committee Member	Direct, non-financial	I will attend a Contura sponsored dinner as I am a member of faculty, but I will pay for my own meal. There will not be any Contura talks or input at the meal, but during the course we will be demonstrating bulking agent surgical technique (as we are demonstrating all forms of surgery).		6.12.2018		<p>Declare and participate</p> <p>Agreed by GL on 18.12.2018</p> <p>Rationale: Specific to the guideline but as the member will pay for own dinner it is not likely to conflict with or influence guideline development.</p>
Suzanne Biers	Committee Member	Direct, non-financial	Meeting on sacral nerve neuromodulation of the bladder (due to new commissioned local clinical service) with dinner provided (Medtronic). Review/revision of SNS was not included in this version of the guideline.	16.01.2019	16.01.2019	16.01.2019	<p>Declare and participate</p> <p>Agreed by GL on 16.01.2019</p> <p>Rationale: Not specific to guideline as sacral nerve neuromodulation of the bladder was not covered in this update.</p>

Steven Brown	Committee Member (Co-opted)	Direct, non-financial	Member applied for a grant for an HTA study on rectal prolapse. This was rejected at the second stage and the member therefore believe it represents no academic conflict of interest.		8.1.2018		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-financial.
Steven Brown	Committee Member (Co-opted)	Direct, non-financial	The member has published a consensus statement through The Pelvic Floor Society. Copy enclosed. There was no financial inducement or payment. Mercer-Jones MA, <i>Brown SR</i> , Knowles CH, Williams AB Position Statement by The Pelvic Floor Society on behalf of The Association of Coloproctology of Great Britain and Ireland on the use of mesh in ventral mesh rectopexy (VMR). <i>Colorectal Dis.</i> 2017 Sep 19. doi: 10.1111/codi.13893. [Epub ahead of print]	19.9.2017	8.1.2018		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-financial.
Steven Brown	Committee Member (Co-opted)	Direct, non-financial	Member has been involved in a published meta-analysis on hitching procedures for obstructed defecation (copy provided to developer). There was no financial inducement or payment.	19.9.2017	8.1.2018		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-financial.

Steven Brown	Committee Member (Co-opted)	Direct, non-financial	Member is a member of the Executive of The Pelvic Floor Society. This is not a paid position.	Ongoing	8.1.2018		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-financial.
Steven Brown	Committee Member (Co-opted)	Direct, financial	Member undertakes private practice which involves patients who have obstructed defecation which may be related to POP.	Ongoing	8.1.2018		Declare and ensure the areas of interest are clearly noted around specific reviews: 7.1, 8.1, 8.3, 8.4 Agreed by GL and NICE CA at recruitment Rationale: The interest is financial and specific, but this work makes up a small proportion of the member's overall work so the member is able to contribute to the guideline so long

							as his interests are clearly noted.
Steven Brown	Committee Member (Co-opted)	Direct, non-financial	Submission of a study proposal on full thickness rectal prolapse to HTA . Development of previous idea with different study design. This is currently being assessed by HTA Board.	April 2018	7.12.2018		Declare and participate. Agreed by GL on 18.12.2018 Rationale: submission of a study proposal not specific to the scope of the guideline.
Jacq Emkes	Committee member (Lay)	Direct, financial	Member of the Lower Urinary Tract Symptoms (LUTS) expert group. Expenses paid. February 2016 workshop and Its Personal the 'Campaign Training' workshop February 2015.	February 2015	13.2.2017		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-specific and occurred more than 12 months before the member joined the committee.

Jacq Emkes	Committee member (Lay)	Direct, financial	Patient advocate and contributor to Guidelines issued December 2015 on NHS England Excellence in Continence Care (EICC) Programme Board. Payments: expenses	December 2015	13.2.2017		<p>Declare and participate</p> <p>Agreed by GL and NICE CA at recruitment</p> <p>Rationale: The interest is non-specific and occurred more than 12 months before the member joined the committee.</p>
Jacq Emkes	Committee member (Lay)	Direct, non-financial	Patient Advocate for the 'All Party Parliamentary Group for Continence Care' (APPG).		13.2.2017		<p>Declare and participate</p> <p>Agreed by GL and NICE CA at recruitment</p> <p>Rationale: The interest is non-specific</p>

Jacq Emkes	Committee member (Lay)	Direct, financial	Invited guest speaker at the Coloplast Annual Conference 12th April 2016 due to member being a catheter user (no particular brand). Payments: Honorarium £100 and expenses.	12.4.2016	13.2.2017		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-specific
Jacq Emkes	Committee member (Lay)	Direct, financial	The member spoke at a conference for the British Association of Urological Nurses about the patient's journey. Reasonable expenses paid.	November 2015	13.2.2017		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-specific and occurred more than 12 months before the member joined the committee.
Jacq Emkes	Committee member (Lay)	Direct, financial	Former trustee Bladder and Bowel Foundation to July 2016. Expenses paid.		13.2.2017	July 2016	Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-specific and

							ceased before the member joined the committee.
Jacq Emkes	Committee member (Lay)	Direct, non-financial	<p>Member involved in research projects:</p> <ul style="list-style-type: none"> • Patient representative for the Leeds SaFaRi Trial under Professor David Jayne. (SaFaRI: Sacral nerve stimulation versus the FENIX TM magnetic sphincter augmentation for adult faecal incontinence: a randomised Investigation. • Recurrent surgery co-applicant as the patient for a grant application by Douglas G Tincello, University of Leicester. 		13.2.2017		<p>Declare and participate</p> <p>Agreed by GL and NICE CA at recruitment</p> <p>Rationale: The interest is non-specific</p>
Jacq Emkes	Committee member (Lay)	Direct, non-financial	<p>Patient representative for the NIHR project 'Surgical care for female urinary incontinence' under Professor Jan van der Meulen London School of Hygiene and Tropical Medicine. Publication expected May 2018.</p>	June 2016	13.2.2017		<p>Declare and participate</p> <p>Agreed by GL and NICE CA at recruitment</p> <p>Rationale: The interest is specific, but is non-financial so it does not pose a conflict of interest.</p>

Jacq Emkes	Committee member (Lay)	Direct, financial	The member set up a small private company called TKJEDS in January 2017 with two doctors. The aim is to develop an app which supports patients with urinary tract infections.	January 2017	13.2.2017		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: The interest is non-specific.
Jacq Emkes	Committee member (Lay)	Direct, non-financial	Invited by the charity Bladder Health UK to contribute quotes for Hearst UK magazine on the experience of continence health problems.		8.6.2017		Declare and participate Agreed by GL Rationale: The interest is non-financial and non-specific.
Jacq Emkes	Committee member (Lay)	Direct, financial	Contributor to NHS England Excellence in Continence Care (EICC) Programme. Payments: travel expenses only.	2015	19.9.2017		Declare and participate Agreed by GL Rationale: The interest is specific and financial, but financial benefit only includes travel costs that fall within the NICE travel and subsistence policy.

Jacq Emkes	Committee member (Lay)	Direct, non-financial	Member of the patient steering group for a study on the effectiveness of pelvic floor exercise apps for female UI. Duties are to provide patient perspective advice only. No expenses received.		11.11.2017		Declare and participate Agreed by GL Rationale: The interest is non-financial.
Jacq Emkes	Committee member (Lay)	Direct, financial	Appearing on patient panel for incontinence conference on 28/29 November at the Institute of Mechanical Engineers, London. Travel costs only.	28.11.2018	11.11.2017		Declare and participate Agreed by GL Rationale: The interest is non-specific.
Jacq Emkes	Committee member (Lay)	Direct, non-financial	Featured in a digital photo exhibition for the 'Hygiene: A Circle of Life' exhibition. Not named or identified in the photo exhibition and not taking place in any discussions or other promotional activities. No payment received.	7.11.2017	11.11.2017		Declare and participate Agreed by GL Rationale: The interest is non-specific and non-financial.
Jacq Emkes	Committee member (Lay)	Direct, financial	Patient advisor for the project team for the NIHR project 'surgical care for female urinary incontinence' from June 2016 to approximately December 2019. Duties are to advise on the design, methods for data collection and analysis, interpretation of the results and approach to dissemination. Travel costs only.	June 2016	11.11.2017		Declare and participate Agreed by GL Rationale: The interest is specific and financial, but financial benefit only includes

							travel costs that fall within the NICE travel and subsistence policy.
Jacq Emkes	Committee member (Lay)	Direct, financial	<p>Member will be a speaker at a series of Masterclasses. The content will be based on a study conducted and should equip Specialist Nurses to support female patients to overcome the barriers they face when introduced to CISC (clean intermittent self-catherisation). We will also be working with Rik Bes – a Motivational Interviewing expert.</p> <p>Member’s travel and accommodation will be covered and she will receive an honorarium.</p> <p>The Masterclasses are organised by Coloplast Ltd who manufacture mesh products for prolapse repair.</p> <p>The Masterclasses are scheduled for the following dates:</p> <p>05/03/18 Ireland 24/04/18 Birmingham 19/06/18 London</p>		27.03.2018		<p>Partial exclusion – For questions on mesh, the member can answer specific questions about the evidence, but cannot take part in decision-making for recommendations. This action is effective for all future committee meetings</p> <p>Agreed by GL and Chair on 28.3.2018</p> <p>Rationale: the activity is sponsored by Coloplast who manufacture mesh products for prolapse repair. As mesh is a key</p>

							part of the guideline, the decision was made that the member could not be involved in decision-making around mesh.
Jacq Emkes	Committee member (Lay)	Direct, financial	A urological clinician's conference in March sponsor is Coloplast. Topic is patient experience of being on NHS England Excellence in Continence Care Board. Expenses and honorarium paid.	February 2019	05.02.2019	March 2019	<p>Partial exclusion – For questions on mesh, the member can answer specific questions about the evidence, but cannot take part in decision-making for recommendations. This action is effective for all future committee meetings</p> <p>Rationale: the activity is sponsored by Coloplast who manufacture mesh products for prolapse repair.</p>

							As mesh is a key part of the guideline, the decision was made that the member could not be involved in decision-making around mesh.
Jacq Emkes	Committee member (Lay)	Direct, financial	<p>I've been asked to speak at an ACA event (Association of Continence Advisors) in June. Paid expenses only. I am speaking about patient journey from ureteric injury to Boston flap to nephrectomy to self-catheterisation. How my career, family and sport social life, etc., affected. Expenses and honorarium paid.</p> <p>No product placement.</p>	February 2019	05.02.2019	June 2019	<p>Declare and participate</p> <p>Agreed by GL</p> <p>Rationale: The interest is specific and financial, but is beyond publication of the guideline.</p>
Jacq Emkes	Committee member (Lay)	Direct, non-financial	<p>Co-writing APPG letter to BMJ about Continence and costs to NHS. Not mesh, just Continence utis bladder bowel containment products.</p> <p>No payments. It is part of my already declared NHS ENGLAND EICC guidance 2018 and APPG Continence. Extract is....an integrated service will benefit both patients and the healthcare system, further evidence will be essential and it is hoped that all providers will be mandated to support</p>	February 2019	05.02.2019		<p>Declare and participate</p> <p>Agreed by GL</p> <p>Rationale: The interest is non-financial and unlikely to influence</p>

			research proposed by all professionals working in bladder and bowel care.				decision-making of the committee.
Polly Harris	Committee Member	Direct, non-financial	Provided comment on a national recommendation document (publication pending) as a member of the ACA.		14.3.2017		Declare and participate Agreed by GL during recruitment Rationale: non-financial interest
Polly Harris	Committee Member	Direct, non-financial	Attended a hospital multidisciplinary team meeting where lunch was provided with a presentation of pessary devices by Medi Plus. Member does not use this type of device in the practice as the service does not manage POP.		8.6.2017		Declare and participate Agreed by GL Rationale: non-financial interest
Polly Harris	Committee Member	Direct, financial	Future job role will change from Clinical Lead/Nurse Specialist to Community Matron. However, operational leadership for the Bladder and Bowel (Continence) Service will remain within her remit. Start date for new role not confirmed – pending outcome of future recruitment into exiting team.		18.4.2018		Declare and participate Agreed by GL on 19.4.2018 Rationale: non-specific interest
Polly Harris	Committee Member	Direct, non-financial	She has seen a number of representatives of companies who manufacture continence and catheter devices as part of her role as nurse specialist. This is a culmination of a long process involving NHS Shared Business Services and East Lancashire Medicine's Management Board,		4.7.2018		Declare and participate Agreed by GL on 9.7.2018 Rationale: While the interest is

			to update the local formulary for preferred prescribing options.				specific, the member does not benefit financially from this activity and it is undertaken as part of her regular employment.
Polly Harris	Committee Member	Direct, financial	Change in job role – now actively working as a Matron (including operational management of the Bladder and Bowel Service).	Sept 2018	4.12.2018	Ongoing	Declare and participate Agreed by GL on 4.12.2018 Rationale: part of her regular employment
Polly Harris	Committee Member	Direct, non-financial	Budget holder and contract signatory for an NHS supply chain home delivery of continence products for East Lancashire Hospitals Trust contract.	January 2017	4.12.2018	Ongoing	Declare and participate Agreed by GL on 18.12. 2018 Rationale: While the interest is specific, the member does not benefit financially from this activity and it is undertaken as

							part of her regular employment.
Catherine Heffernan	Committee member (Lay)		No interests to declare.				
Rohna Kearney	Topic Advisor	Direct, financial	Travel and accommodation paid by Medtronic to attend sacral neuromodulation training.		12.10.2016		Declare and participate Agreed by GL and NICE CA during recruitment Rationale: non-specific interest
Rohna Kearney	Topic Advisor	Direct, financial	Allergan paid honorarium member's travel to talk on Botulinum toxin at Continence Foundation Ireland meeting October 2016.	October 2016	12.10.2016		Declare and participate Agreed by GL and NICE CA during recruitment Rationale: although the interest is financial and specific, the payment only covers travel expenses and falls within reasonable amounts in NICE's travel and

							subsistence policy.
Rohna Kearney	Topic Advisor	Direct, financial	Practices urogynaecology privately. 10-15% of her work is private and includes all the areas covered by the guideline except for neurostimulation.		12.10.2016		<p>Declare and participate</p> <p>Agreed by GL and NICE CA during recruitment</p> <p>Rationale: Private practice that does not make up a significant part of her overall workload and are activities that she would undertake in the NHS.</p>
Rohna Kearney	Topic Advisor	Direct, financial	Co-investigator for the VUE study on vault or uterine prolapse study evaluation.		14.3.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p> <p>Rationale: The interest is financial, but the payment is not received directly by the member.</p>

Rohna Kearney	Topic Advisor	Direct, financial	Co-applicant for a trial of self-management of pessary in prolapse. To be submitted to NIHR HTA March 2017.	March 2017	14.3.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: The interest is financial, but the payment is not received directly by the member.
Rohna Kearney	Topic Advisor	Direct, non-financial	Member of steering committee of the James Lind Alliance Priority Setting Partnership for pessary and prolapse.	Ongoing	14.3.2017		Declare and participate Agreed by GL Rationale: The interest is non-financial
Rohna Kearney	Topic Advisor	Direct, non-financial	Clinical Lead for the RCOG Women's Network.	Ongoing	14.3.2017		Declare and participate Agreed by GL Rationale: The interest is non-financial and non-specific
Rohna Kearney	Topic Advisor	Direct, non-financial	Member of United Kingdom Continence Society committee on standardisation of urodynamic practice.		22.5.2017		Declare and participate Agreed by GL

							Rationale: The interest is non-financial and non-specific
Rohna Kearney	Topic Advisor	Direct, non-financial	Chief investigator on NIHR funded study HTA Project: 16/82/01 - A multicentre randomised controlled trial, with process evaluation, to test the clinical and cost-effectiveness of self-management of vaginal pessaries to treat pelvic organ prolapse, compared to standard care to improve women's quality of life. TOPSY trial: Treatment Of Prolapse with Self-care pessary.	August 2017	31.8.2017		Declare and participate Agreed by GL Rationale: The interest is non-financial.
Rohna Kearney	Topic Advisor	Direct, non-financial	<u>Co-author on the following publications:</u> 1. United Kingdom Continence Society: Minimum Standards for Urodynamic Studies, 2018. Abrams P, Eustice S, Gammie A, Harding C, Kearney R, Rantell A, Reid S, Small D, Toozs-Hobson P, and Woodward M, the Working Group of the UKCS. Accepted for publication Neurourology and Urodynamics. 2. Conservative Management of Prolapse. L Dwyer, R Kearney. Obstet Gynecol Reprod Med 2017; 28:15-21. 3. The impact of anal sphincter injury on perceived body image		17.12.2018		Declare and participate Agreed by GL 18.12.2018 Rationale: No specific personal opinion was expressed as part of the publications and not likely to conflict with or influence guideline development.

			<p>D Iles, R Khan, K Naidoo, R Kearney, J Myers, F Reid. Eur J Obstet Gynecol Reprod Biol 2017;212:140-3.</p> <p>4. Surgical Management of stress urinary incontinence. R Imran, R Kearney. Obstet Gynecol Reprod Med 2016;26:20-25.</p> <p>5. Self-management of vaginal pessaries for pelvic organ prolapse. R Kearney, C Brown. BMJ Qual Improv Report 2014;3:doi:10.1136/bmjquality.u206180.</p> <p>6. Childbirth after pelvic floor surgery: analysis of Hospital Episode Statistics in England. A Pradhan, DG Tincello, R Kearney. BJOG 2013;20:200-4.</p> <p>7. Evaluation of urogynaecology care of an elderly population in a specialist urogynaecology centre. A Pradhan, C Aiken, Kearney R, Slack M. J Obstet Gynaecol 2013;33:60-3.</p> <p>8. Surgical management of stress urinary incontinence. Hussain U, Kearney R. Obstet Gynecol Reprod Med 2013;4:108-113.</p> <p>9. The new laparoscopic uterine sling suspension procedure: first year follow-up data.</p>				
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			<p>A Vashist, R Kearney, A Cutner. <i>Gynecol Surg</i> 2011; 8(3):321-3.</p> <p>10. Levator ani injury in primiparous women with forceps delivery for fetal distress, forceps for second stage arrest, and spontaneous delivery. Kearney R, Fitzpatrick M, Brennan S, Behan M, Miller J, Keane D, O'Herlihy C, DeLancey JO. <i>Int J Gynaecol Obstet.</i> 2010;111:19-22.</p> <p>11. Surgical management of stress urinary incontinence. Pradhan A, Kearney R. <i>Obstet Gynecol Reprod Med</i> 2010;20:207-211.</p> <p>12. Postpartum Voiding Dysfunction. Kearney R, Cutner A. <i>The Obstetrician and Gynaecologist</i> 2008;10:71-74.</p> <p>13. Surgical treatment of Urinary Incontinence. Kearney R. <i>Obstet Gynaecol Reprod Med</i> 2007;17:261-265.</p> <p>14. Vaginal birth and de novo stress incontinence: relative contributions of urethral dysfunction and mobility. DeLancey JO, Miller JM, Kearney R, Howard D, Reddy P, Umek W, Guire KE, Margulies RU, Ashton-Miller JA. <i>Obstet Gynecol</i> 2007;110:354-62.</p>				
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			<p>15. Laparoscopic uterine sling suspension: a new technique of uterine suspension in women desiring surgical management of uterine prolapse with uterine conservation. Cutner A, Kearney R, Vashisht A. BJOG 2007;114:1159-62.</p> <p>16. Comparison of levator ani muscle defects and function in women with and without pelvic organ prolapse. DeLancey JO, Morgan DM, Fenner DE, Kearney R, Guire K, Miller JM, Hussain H, Umek W, Hsu Y, Ashton-Miller JA. Obstet Gynecol 2007;109:295-302.</p> <p>17. Appearances of the levator ani muscle subdivisions in MR Images. R Margulies, Yvonne Hsu, R Kearney, T Stein, W Umek, JOL DeLancey. Obstet Gynecol 2006;107:1064-9.</p> <p>18. Obstetric factors associated with levator ani muscle injury after vaginal birth. R Kearney, J Miller, JA Ashton-Miller, JOL DeLancey. Obstet Gynecol 2006;107:144-9.</p> <p>19. Interrater reliability and physical examination of the pubovisceral portion of the levator ani muscle; Validity comparisons using MR imaging.</p>				
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			<p>R Kearney, J Miller, JOL DeLancey. Neurourol Urodyn 2006;25:50-4.</p> <p>20. Levator ani muscle anatomy evaluated by origin-insertion pairs, a review. R Kearney , R Sawhney , JOL DeLancey. Obstet Gynecol 2004; 104:168-73.</p> <p>21. The axial location of structural regions in the urethra: a MR study in nulliparous women. W Umek, R Kearney, D Morgan, J Ashton-Miller, J DeLancey. Obstet Gynecol 2003; 102:1039-45.</p> <p>22. Selecting suspension points and excising excess vagina during Michigan 4 wall sacrospinous suspension. R Kearney, JOL DeLancey. Obstet Gynecol 2003;101:2:325-30</p> <p>23. Levator ani muscle abnormalities seen in MR images after vaginal delivery. JOL DeLancey, R Kearney, Q Chou, S Speights, S Binno. Obstet Gynecol 2003;101:1:46-53.</p> <p>24. Maternal morbidity after elective repeat caesarean section after two or more previous procedures. C Lynch, R Kearney, MJ Turner. Euro J Obstet Gynecol Reprod Biol 2003;106:1:10-13</p>				
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			<p>25. What are the implications for the next delivery in primigravidae who have an elective caesarean section for breech presentation? Coughlan C, Kearney R, Turner M. Br J Obstet Gynecol 2002;109:6:624-626</p> <p>26. An audit of patients investigated by laparoscopy and dye for infertility. Kearney R, Skinner J, Turner MT. J Obstet Gynaecol 2001;21:396-8</p>				
Rohna Kearney	Topic Advisor	Direct, non-financial	<p><u>Book Chapters</u></p> <p>1. Rajeshkar S, Kearney R. Difficult Sacrospinous Fixation. Gynaecology and Obstetric surgery: Challenges and Management options. Arri Coomarasamy, Mahmood Shafi, G. Willy Davila, and K. K. Chan. Wiley Blackwell. 2016</p> <p>2. Pradhan A, Kearney R. Anatomic basis of normal and abnormal pelvic support. Clinical Gynaecology. Bieber, Sanfillipo, Horowitz & Shafi. Second edition. In Press</p> <p>3. Kearney R and C O’Herlihy. Pelvic floor injury and perineal repair. High Risk Pregnancy:</p>		17.12.2018		<p>Declare and participate</p> <p>Agreed by GL 18.12.2018</p> <p>Rationale: No specific personal opinion was expressed as part of the book chapters and not likely to conflict with or influence guideline development.</p>

			<p>Management Options; Steer, Weiner, Gonik, James. Fourth edition. Elsevier.</p> <p>4. Kearney R. Other laparoscopic support procedures . Textbook of Female Urology and Gynaecology. Ed: L Cardozo and D Staskin Third edition. Informa Healthcare.</p> <p>5. Kearney R, Cutner A. Laparoscopic colposuspension and paravaginal repair. Textbook of Female Urology and Gynaecology. Ed: L Cardozo and D Staskin. Second Edition, Informa Healthcare</p> <p>6. O'Herlihy C, Kearney R. Pelvic floor injury and perineal repair. High Risk Pregnancy: Management Options; Steer, Weiner, Gonik, James. Chapter 73, 3rd Ed; Saunders, WB Co Ltd.</p>			
Rohna Kearney	Topic Advisor	Direct, non-financial	<p><u>Invited Talks/Faculty</u> (expenses including travel and accommodation paid. No other financial benefit received)</p> <p>1.RCOG Understanding urodynamics course 2 per year Talk on urodynamics in mixed incontinence</p>		17.12.2018	<p>Declare and participate</p> <p>Agreed by GL 18.12.2018</p> <p>Rationale: The talks/courses are part of her professional role</p>

			<p>2. BSGE 2018 Talk on laparoscopic incontinence surgery</p> <p>3. Annual surgical masterclass, BSUG RCOG 2017 Workshop on surgery for stress urinary incontinence</p> <p>4. Annual surgical masterclass, BSUG RCOG 2017 Talk on management of mesh complications</p> <p>5. UCLH Surgical Masterclass November 2018 Faculty member</p> <p>6. Co-organiser and Chair Northern Professional Development Conference RCOG, 2018</p>				<p>and she does not receive honoraria. The payments only cover travel expenses, are not sponsored by industry and fall within reasonable amounts in NICE's travel and subsistence policy.</p>
Sarah Love-Jones	Committee member (Co-opted)	Direct, financial	<p>Consultant advisor to St Jude Medical, Boston Scientific and Nevro Corporation, all Spinal cord stimulator (SCS) device companies. SCS are used to treat some chronic pain conditions.</p>		17.2.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p> <p>Rationale: Member has been co-opted to provide niche expertise and provides input on these topics only when specifically requested.</p>

Fergus Macbeth	Chair		No interests to declare.				
Doreen McClurg	Committee member	Direct, non-financial	Past chair of the Pelvic Obstetrician and Gynaecology Physiotherapy special interest group of the CSP.	Sept 2013	Sept 2016		Declare and participate Agreed by GL 18.12.2018 Rationale: not specific to the scope of the guideline.
Doreen McClurg	Committee member	Direct, non-financial	Chair of the Physiotherapy committee of the International Continence Society	Sept 2014	Sept 2019		Declare and participate Agreed by GL 18.12.2018 Rationale: Specific to guideline but not likely to conflict with or influence guideline development
Doreen McClurg	Committee member	Direct, non-financial	Second supervisor of a PhD student who has been conducting a James Lind Alliance project to identify the top ten research priorities relating to the use of pessaries for POP.		10.2.2017		Declare and participate Agreed by GL and GCM at recruitment

							Rationale: The interest is non-financial.
Doreen McClurg	Committee member	Direct, non-financial	Clinical advisor of an HTA funded study looking at modes of delivering PFMT within the NHS. This study has yet to recruit.		10.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: The interest is non-financial.
Doreen McClurg	Committee member	Direct, non-financial	Member of the Scottish Government's working group set up in response to the MESH issue. Main input has been in the development of the Patient Information Leaflet.		10.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: The interest is non-financial and non-specific.
Doreen McClurg	Committee member	Direct, non-financial	PI of a Cochrane Overview on the Conservative Management of UI in women. The protocol has been published. Completion is due in 2017.		10.2.2017	2017	Declare and participate Agreed by GL and GCM at recruitment Rationale: The interest is non-

							financial and non-specific.
Doreen McClurg	Committee member	Direct, financial	Co-applicant on a cohort follow-up study of participants who had taken part a RCT comparing an intervention of PFMT and advice to advice only in women who had stage 1, 2 or 4 prolapse but had not sought treatment (ICS Abstract, Tokyo 2016).	2016	10.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: The interest is financial, but the payment is not received directly by the member.
Doreen McClurg	Committee member	Direct, financial	Co-applicant of an RCT, the OPAL study which is comparing PFMT to PFMT +Biofeedback in women with UI. This study completed recruitment at Christmas 2016 with a 2 year follow-up. No publications to date.	2016	10.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: The interest is financial, but the payment is not received directly by the member.
Doreen McClurg	Committee member	Direct, financial	Co-applicant of a study which has been temporarily suspended due to procedural issues looking at the re-use of intermittent catheters. The MULTICATH study. This study will resume in 2018/19.		10.2.2017		Declare and participate

							<p>Agreed by GL and GCM at recruitment</p> <p>Rationale: The interest is financial, but the payment is not received directly by the member and the interest is non-specific.</p>
Doreen McClurg	Committee member	Direct, financial	Co-applicant on the ANTIC study which is a RCT of once Daily Prophylaxis antibiotics to no prophylaxis. Due to report mid-2017.		10.2.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p> <p>Rationale: The interest is financial, but the payment is not received directly by the member and the interest is non-specific.</p>
Doreen McClurg	Committee member	Direct, financial	Chairs the TSC of ALternatives To prophylactic Antibiotics for the treatment of Recurrent urinary tract infection in women (ALTAR study); a pragmatic randomised trial of urinary antiseptic versus prophylactic antibiotic which is currently recruiting.		10.2.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p>

							Rationale: The interest is financial, but the payment is not received directly by the member and the interest is non-specific.
Doreen McClurg	Committee member	Direct, financial	Co-applicant on NIHR funded study HTA Project: 16/82/01 - A multicentre randomised controlled trial, with process evaluation, to test the clinical and cost-effectiveness of self-management of vaginal pessaries to treat pelvic organ prolapse, compared to standard care to improve women's quality of life. TOPSY trial: Treatment Of Prolapse with Self-care pessary.	2016	7.9.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: The interest is financial and specific, but the payment is not received directly by the member.
Doreen McClurg	Committee member	Direct, non-financial	Personal Invite to Surgical Mesh Stakeholder Workshop	28.11.2018	12.10.2018	28.11.2018	Declare and participate Agreed by GL and GCM on 15.10.2018 Rationale: member can attend on condition that committee

							deliberations are kept confidential.
Vikky Morris	Committee member	Direct, financial	Speaker fees and travel expenses paid by Astellas for 2 day educational continence conference for geriatric SpRs in Manchester 1.3.2017. Spoke on Assessing urinary incontinence in older patients and conservative and behavioural strategies in frail and robust older people.	March 2017	11.3.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and the expenses were minimal.
Vikky Morris	Committee member	Direct, financial	Received speaker fees for 2 Astellas sponsored satellite symposiums at 2 separate BGS conferences with a variety of topics represented related to continence in the frail elderly on 12/5/16-BGS and 23/11/16- BGS.	2016	11.3.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and the expenses were minimal.
Vikky Morris	Committee member	Direct, financial	Astellas paid for flight and International Continence Society conference fees to attend the Nocturia and Nocturnal enuresis working group in Tokyo 2016.	2016			Declare and participate Agreed by GL and GCM at recruitment

							Rationale: the interest is non-specific and the expenses covered travel and conference fees only.
Vikky Morris	Committee member	Direct, financial	<p>I was chair at the below conference. Expenses were paid by the British Geriatric Society.</p> <p>BGS Bladder & Bowel conference, November 3rd 2017. Sponsored by:</p> <p>Pierre Fabre (Urothelial cancer drug Javior), Allergan (Botox), Ferring (Desmomett – Desmopressin), Grunenthal (Palexia for pain with constipation)</p>	November 2017	27.11.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p> <p>Rationale: the chair expenses were not beyond reasonable amounts and the member did not have direct contact with the conference sponsors.</p>
Vikky Morris	Committee member	Direct, financial	Bladder and Bowels BGS meeting – Expenses for lodging and travel paid. Meeting had some sponsorship from Kyowa Kirin	21.09.2018	12.12.2018	21.09.2018	<p>Declare and participate</p> <p>Agreed by GL on 18.12.2018</p> <p>Rationale: the expenses were within reasonable amounts in</p>

							NICE's travel and subsistence policy and the member did not have direct contact with the conference sponsors.
Vikky Morris	Committee member	Direct, non-financial	Bladder and bowels British Geriatric society (BGS) special interest group chair	2015	12.12.2018	Ongoing	Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to the scope of the guideline.
Vikky Morris	Committee member	Direct, non-financial	International continence society nocturia and nocturnal enuresis working group forum	2015	12.12.2018	Ongoing	Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to the scope of the guideline.
Vikky Morris	Committee member	Direct, non-financial	Just accepted for publication in Neurourology and urodynamics : Manuscript id: NAU-18-0646 Manuscript title: INTERNATIONAL		12.12.2018		Declare and participate Agreed by GL on 18.12.2018

			CONTINENCE SOCIETY (ICS) REPORT ON THE TERMINOLOGY FOR NOCTURIA AND NOCTURNAL LOWER URINARY TRACT FUNCTION Part of ICS nocturia and nocturnal enuresis working group.				Rationale: not specific to the scope of the guideline.
Vikky Morris	Committee member	Direct, non-financial	Continence care for people with dementia living at home in Europe: a review of literature with a focus on problems and challenges. Dianne Gove, Anthony Scerri, Jean Georges, Paul van Houten, Nicole Huige, Daniela Hayder-Beichel, Kai Leichsenring and Vikky Christina Morris. Journal of Clinical Nursing, 26, 356–365, 2016.		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: Specific to guideline but not likely to conflict with or influence guideline development.
Vikky Morris	Committee member	Direct, non-financial	Embedding comprehensive geriatric assessment in the emergency assessment unit: the impact of the COPE zone. Helen Wood, Rachel Ward, Vikky Morris, Peter Campbell. Clin Med June 1, 2016 vol. 16 no. 3 304		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to the scope of the guideline.

Vikky Morris	Committee member	Direct, non-financial	Managing Urinary Incontinence in Patients with Dementia: Pharmacological Treatment Options and Considerations. Susie Orme, Vikky Morris, William Gibson, Adrian Wagg. <i>Drugs Aging</i> . 2015 Jul;32(7):559-67.		12.12.2018		Declare and participate Agreed by GL Rationale: Specific to guideline but not likely to conflict with or influence guideline development.
Vikky Morris	Committee member	Direct, non-financial	NICE Guidance addresses shortcomings in care for women with UI. Vikky Morris and Susie Orme. www.guidelinesinpractice.co.uk/august15_NICE_QS77_urinaryincontinence#.VeSrdOmcO04		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: Specific to guideline but not likely to conflict with or influence guideline development.
Vikky Morris	Committee member	Direct, non-financial	Recurrent Urinary Tract Infections. Vikky Morris. <i>British Journal of Family Medicine</i> , May/June 2015.		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to the

							scope of the guideline.
Vikky Morris	Committee member	Direct, non-financial	Does fesoterodine have a role in the treatment of poorly managed patients with overactive bladder. Vikky Morris, Adrian Wagg. Drug Design, Development and Therapy 2014;8:113-119.		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to the scope of the guideline.
Vikky Morris	Committee member	Direct, non-financial	A Comparison of the Effect of Age on Levator Ani and Obturator Internus Muscle Cross-Sectional Areas and Volumes in Nulliparous Women. Vikky C. Morris, Meghan P. Murray, John O.L. DeLancey, and James A. Ashton-Miller. Neurourology and Urodynamics 31:481–486 (2012).		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to scope of the guideline.
Vikky Morris	Committee member	Direct, non-financial	Falls and urinary incontinence: a link ripe for intervention? Dr Vikky Morris, Dr Kathleen Hunter, Dr Adrian Wagg GM, 41, June 2011		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to scope of the guideline.

Vikky Morris	Committee member	Direct, non-financial	<u>A cross-sectional study of ultrasound estimated bladder weight in a sample of men and women without lower urinary tract symptoms.</u> Vikky Morris, <u>Nigel Steventon</u> , <u>Saleh Hazbun</u> , <u>Adrian Wagg</u> . Neurourology and Urodynamics 09/2009; 28(8):995-7		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: not specific to the scope of the guideline.
Vikky Morris	Committee member	Direct, non-financial	Lower urinary tract symptoms, incontinence and falls in elderly people: time for an intervention study. V Morris, A Wagg. International Journal of Clinical Practice 03/2007; 61(2):320-3		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: Specific to guideline but not likely to conflict with or influence guideline development
Vikky Morris	Committee member	Direct, non-financial	<u>Overactive bladder syndrome in the elderly.</u> A <u>Wagg</u> , V Morris. Therapy 01/2007; 4(2):201-211		12.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: Specific to guideline but not likely to conflict

							with or influence guideline development
Carol Paton	Committee member (Co-opted)	Direct, financial	Participated in a European Neurosciences advisory board for Eli Lilly to discuss compounds in early clinical trials for neurodegenerative conditions. The subject matter is unlikely to relate to the guideline, but Eli Lilly do manufacture some medicines related to UI & POP.	2015	13.7.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and financial, however the member acts as a co-opted expert to the committee
Carmel Ramage	Committee member	Direct, financial	Funded by Astellas to attend the National Bladder forum October 2016.	October 2016	16.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific.
Carmel Ramage	Committee member	Direct, non-financial	Vice Chair BSUG Governance committee.		16.2.2017		Declare and participate

							Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and non-financial.
Carmel Ramage	Committee member	Direct, non-financial	Member IUGA Public Relations committee.		16.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and non-financial.
Carmel Ramage	Committee member	Direct, non-financial	Chair UK Continence Society (until March 2017).		16.2.2017	March 2017	Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and non-financial.
Carmel Ramage	Committee member	Direct, financial	<u>Attendance at meetings which have had various industry sponsors:</u>		17.12.2018		Declare and participate

			<p>Surgical Masterclass in Urogynaecology (talk on Colposuspension 2018, chair stress incontinence surgery session 2016)</p> <p>BSUG / RCOG Update on Urogynaecology (workshop of Urodynamics 2016, debate on Urodynamics 2017)</p> <p>UKCS meetings</p> <p>Urogynaecology for GPs talk</p> <p>BSUG / RCOG Urodynamics course – talk on training</p> <p>International Urogynaecology Association Annual meeting</p> <p>53 Degrees North research meeting</p>	<p>May 2016 & May 2018</p> <p>Nov 2016 & Nov 2017</p> <p>April 2016, March 2017 & April 2018</p> <p>February 2018</p> <p>September 2016, September 2017 & September 2018</p> <p>June 2017</p>			<p>Agreed by GL 18.12.2018</p> <p>Rationale: the committee member did not receive funding to attend these meetings and did not have direct contact with the conference sponsors.</p>
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			<p>RCOG Annual Professional Development meeting</p> <p>Urogynaecology nurse specialists study day (debate on the role of mesh in urogynaecology)</p> <p>Yorkshire Regional Urogynaecology forum</p>	<p>February 2017</p> <p>November 2016</p> <p>November 2016</p> <p>November 2016</p>			
Carmel Ramage	Committee member	Direct, non-financial	<p><u>Local Principal investigator for research studies</u></p> <p>PROSPECT (surgery for prolapse inc the use of mesh)</p> <p>VUE (surgery for apical prolapse inc the use of mesh)</p> <p>LATITUDE (choice of continence procedure, long term follow-up of Bulkamid)</p> <p>FUTURE (the role of Urodynamics in women with OAB)</p>	<p>2011</p> <p>2013</p> <p>2016</p> <p>2017</p>	17.12.2018	<p>2013</p> <p>2015</p> <p>Ongoing</p> <p>Ongoing</p>	<p>Declare and participate</p> <p>Agreed by GL on 18.12.2018</p> <p>Rationale: despite this being a specific interest, the balance of risks is such that there is no need to withdraw from discussions.</p>
Carmel Ramage	Committee member	Direct, non-financial	<p><u>Books</u></p> <p>Minimum Standards in Continence Care</p> <p>Minimum Standards in Urodynamic practice</p>	<p>Published 2015</p> <p>Published 2009</p>	17.12.2018		<p>Declare and participate</p> <p>Agreed by GL on 18.12.2018</p>

							Rationale: No specific personal opinion was expressed as part of book chapter and not likely to conflict with or influence guideline development.
Carmel Ramage	Committee member	Direct, non-financial	<u>Publication:</u> To mess with mesh? An update on surgery for pelvic organ prolapse, JACPWH 2011, 108, 21	2011	17.12.2018		Declare and participate Agreed by GL on 18.12.2018 Rationale: Specific to guideline but not likely to conflict with or influence guideline development as it falls well before the development of the guideline.
Lucy Ryan	Committee Member (Lay)	Direct, non-financial	Co-ordinator for The Pelvic Partnership supporting women with pelvic girdle pain related to pregnancy.		15.2.2017		Declare and participate Agreed by GL and GCM at recruitment

							Rationale: the interest is non-specific and non-financial.
Lucy Ryan	Committee Member (Lay)	Direct, non-financial	Member of the Sling the Mesh campaign Facebook support group, but not involved in the campaign itself.		6.3.2018		Declare and participate Agreed by GL Rationale: the interest is specific, but it is non-financial and the member has minimal involvement.
Julian Spinks	Committee Member	Direct, financial	Received an honorarium for membership of the LUTS Expert Group which receives an unrestricted grant from Astellas.(Astellas Pharma Ltd. initiated the development of the expert group on LUTS and nominated its membership. Astellas pays MHP Health to provide secretariat support for the group. Astellas has no editorial control over the content of expert group materials except for reviewing compliance with the ABPI Code of Practice.)		13.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific.
Julian Spinks	Committee Member	Direct, financial	Received Lecturer's fees from Pfizer for participating in the Sense of Leadership Conference in May 2016.	May 2016	13.2.2017		Declare and participate

							Agreed by GL and GCM at recruitment Rationale: the interest is non-specific.
Julian Spinks	Committee Member	Direct, financial	Received adviser and speaker's fees from Atlantic Therapeutics in relation to the Innovo Pelvic floor stimulator in April 2016.	April 2016	13.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific.
Julian Spinks	Committee Member	Direct, non-financial	Chairman of Kent Local Medical Committee.	2014	13.2.2017	April 2017	Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and non-financial.
Julian Spinks	Committee Member	Direct, non-financial	GP advisor to the Association for Continence Advice.	2009	13.2.2017		Declare and participate

							Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and non-financial.
Julian Spinks	Committee Member	Direct, non-financial	GP advisor to RLS-UK, a restless legs syndrome charity.	2011	13.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and non-financial.
Julian Spinks	Committee Member	Direct, non-financial	Chairman of Medway Practices Alliance, a GP federation.	2015	13.2.2017		Declare and participate Agreed by GL and GCM at recruitment Rationale: the interest is non-specific and non-financial.

Julian Spinks	Committee Member	Direct, financial	Member of the Bowel Interest Group which receives an unrestricted grant from Convatec.	2015	13.2.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p> <p>Rationale: the interest is non-specific and the payment is not directly paid to the member.</p>
Julian Spinks	Committee Member	Direct, financial	Kent Local Medical Committee receives sponsorship for some meetings from various pharma companies.		13.2.2017 and again 25.4.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p> <p>Rationale: the interest is non-specific and the payment is not directly paid to the member.</p>
Julian Spinks	Committee Member	Direct, non-financial	Now Vice-Chairman of Kent Local Medical Committee rather than Chairman.	April 2017	25.4.2017		<p>Declare and participate</p> <p>Agreed by GL and GCM at recruitment</p>

							Rationale: the interest is non-specific and non-financial.
Julian Spinks	Committee Member	Direct, financial	I attended the Global Forum on Incontinence in Rome. Travel, accommodation and meals were provided by Essity and were the same as provided to other delegates from the UK.	16.04.2018	29.4.2018		Declare and participate Agreed by GL on 1.5.2018 Rationale: the interest is non-specific, the expenses were prepaid and were within reasonable amounts in accordance with the NICE travel and subsistence policy.
Julian Spinks	Committee Member	Direct, financial	Resigned membership from the Bowel Interest Group steering committee, as the member was concerned future work/publications may create a conflict of interest due to sponsorship by Coloplast, who manufacture mesh products.	13.2.2017	29.4.2018	28.3.2018	Declare and participate Agreed by GL on 30.4.2018 Rationale: the member has withdrawn membership to avoid a potential conflict of interest.

Julian Spinks	Committee Member	Direct, non-financial	Since 2006 I have written and lectured on the management of Urinary incontinence on many occasions. Some of the meetings will have received sponsorship from pharma companies. At these meetings my talks have been based on the previous NICE guidelines on Female UI. My articles and lectures will have contained information on all aspects of the primary care management of Female UI including drug treatment and operations carried out in secondary care. In the latter example the aim was to inform GPs about the possible secondary care options for treatment rather than recommend any particular procedure.	2006	17.12.2018	Ongoing	Declare and participate Agreed by GL on 18.12.2018 Rationale: the interest is specific but not likely to conflict with or influence guideline development.
James Stephenson	Committee Member (Co-opted)	Direct, non-financial	Committee Member of the British Society of Gastrointestinal and Abdominal Radiology.	2016	27.1.2018		Declare and participate Agreed by GL and NICE CA at recruitment Rationale: the interest is non-financial.
James Stephenson	Committee Member (Co-opted)	Direct, non-financial	Co-authored a paper assessing MR imaging of Strattice mesh used to reconstruct the pelvic floor following APER for rectal cancer.	2015	18.7.2017		Declare and participate Agreed by GL Rationale: the interest is non-financial.

James Stephenson	Committee Member (Co-opted)	Direct, financial	Currently undergoing induction to start private practise in the near future. Through this he will scan patients, however it is highly unlikely he will scan any patient with a mesh complication.	2018	13.2.2018		Declare and participate Agreed by GL Rationale: the interest is financial, but is likely to be non-specific.
Karen Ward	Topic Advisor	Direct, financial	Co-applicant FUTURE study (Female Urgency. Trial of Urodynamics as Routine Evaluation) 15/150/05		15.10.2016		Declare and participate Agreed by GL Rationale: The interest is financial, but the payment is not received directly by the member.
Karen Ward	Topic Advisor	Direct, financial	Sacroneuromodulation training accommodation funded by Medtronic June 2016		15.10.2016		Declare and participate Agreed by GL Rationale: The interest is non-specific.
Karen Ward	Topic Advisor	Direct, non-financial	Provided training for local gynaecologist in Botox for detrusor overactivity (payment to Warrell Unit by Allergan for training)		15.10.2016		Declare and participate

							Agreed by GL Rationale: the interest is specific, but the payment was not received directly by the member.
Karen Ward	Topic Advisor	Direct, financial	Lecture on urethral diverticulum at Mersey urogynaecology society meeting (sponsored by Astellas - £200 honorarium) 2016		15.10.2016		Declare and participate Agreed by GL Rationale: The interest is non-specific.
Karen Ward	Topic Advisor	Direct, non-financial	Vice Chair BSUG training subcommittee – from February 2017		14.3.2017		Declare and participate Agreed by GL Rationale: the interest is non-financial and non-specific
Karen Ward	Topic Advisor	Direct, financial	Grant holder: FUTURE study (previously co-applicant) – from Nov 2016 • Randomised controlled trial, to evaluate the clinical and cost effectiveness of invasive Urodynamics over and above comprehensive clinical (non-invasive) assessment. NIHR funded		14.3.2017		Declare and participate Agreed by GL Rationale: The interest is financial, but the payment is not

							received directly by the member.
Karen Ward	Topic Advisor	Direct, non-financial	Independent Member of study steering committee: HS&DR Project 14/70/162 from November 2016 •Surgical care for female urinary incontinence in England		14.3.2017		Declare and participate Agreed by GL Rationale: the interest is non-financial
Karen Ward	Topic Advisor	Direct, non-financial	Vice Chair of UK Continence society – April 2017		6.6.2017		Declare and participate Agreed by GL Rationale: the interest is non-financial and non-specific
Karen Ward	Topic Advisor	Direct, non-financial	Chair of British Society of Gynaecologists Training committee November 2017 (will sit on RCOG subspecialty committee). Was previously Vice Chair of the same committee.		6.12.2017		Declare and participate Agreed by GL Rationale: the interest is non-financial and non-specific
Karen Ward	Topic Advisor	Direct, financial	Involved in the UI and Ireland TVT Trial Group, coordinating a trial that was supported by a grant from Ethicon Ltd who also provided materials and additional support to collaborating centres. Fees were reimbursed by Ethicon Ltd for	1998	15.10.2018	2006	Declare and participate

			conference expenses where this, and related work has been presented.				Agreed by GL and GCM Rationale: member's involvement on the trial is mentioned in a BMJ article, but this relates to when she was a trainee at the time of her research and dates back to 2004, which is outside of the NICE COI policy.
Karen Ward	Topic Advisor	Direct, non-financial	Personal Invite to Surgical Mesh Stakeholder Workshop to attend on behalf of NICE	26.11.2018	15.10.2018	28.11.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: the interest is non-financial and the member was invited to attend the workshop on behalf of NICE.
Karen Ward	Topic Advisor	Direct, non-financial	Incontinence Research Network Meeting – Guys and St Thomas	02.12.2016	17.12.2018	02.12.2016	Declare and participate

							Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	British Society of Urogynaecology research meeting – RCOG	11.11.2016	17.12.2018	11.11.2016	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Lecture on Perineal trauma: Mersey Advanced Labour ward practice course. Liverpool Women's Hospital	18.08.2017	17.12.2018	18.08.2017	Declare and participate

							Agreed by GL on 18.12.2018 Rationale: not specific to the scope of the guideline.
Karen Ward	Topic Advisor	Direct, non-financial	Lecture on Urogynaecology: MRCOG part 2 course. RCOG	25.01.2017	17.12.2018	25.01.2017	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	The Pelvic Floor Society Annual Scientific Meeting. Cardiff	25.01.2017	17.12.2018	25.01.2017	Declare and participate Agreed by GL on 18.12.2018 Rationale: this is part of her professional role and is not specific to the scope of the guideline.

Karen Ward	Topic Advisor	Direct, non-financial	53 degrees North Research Meeting. Sheffield	10.02.2017	17.12.2018	10.02.2017	Declare and participate Agreed by GL on 18.12.2018 Rationale: this is part of her professional role and is not specific to the scope of the guideline.
Karen Ward	Topic Advisor	Direct, non-financial	Course on Educator development day. HENW - Liverpool	13.02.2017	17.12.2018	13.02.2017	Declare and participate Agreed by GL on 18.12.2018 Rationale: this is part of her professional role and is not specific to the scope of the guideline.
Karen Ward	Topic Advisor	Direct, non-financial	Course on Revalidad Medical Update meeting, Manchester	22.03.2017	17.12.2018	22.03.2017	Declare and participate Agreed by GL on 18.12.2018 Rationale: this is part of her professional role and is not specific

							to the scope of the guideline.
Karen Ward	Topic Advisor	Direct, non-financial	UK Continence society Annual Scientific Meeting, Newcastle Upon Tyne	29.03.2017	17.12.2018	31.03.2017	Declare and participate Agreed by GL Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Urogynaecology: MRCOG part 2 course. RCOG	11.07.2017	17.12.2018	11.07.2017	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Surgery for SUI study, Steering committee meeting, RCOG	28.07.2018 & 09.02.2018	17.12.2018	28.07.2018 & 09.02.2018	Declare and participate

							Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Chair: Native surgery for prolapse. BSUG annual Scientific Meeting. RCOG	02.10.2018	17.12.2018	03.10.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	BSUG representative on RCOG Subspecialty training Committee. 4 meetings per year, review subspecialty training centre applications and subspecialty trainees	01.02.2018	17.12.2018	Ongoing	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to

							conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	North of England Obstetrical and Gynaecological Society Meeting, Liverpool	23.03.2018	17.12.2018	23.03.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	UK Continence Society Meeting, Telford. Meeting attendance, chair of session and member scientific committee	18.04.2018	17.12.2018	20.04.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.

Karen Ward	Topic Advisor	Direct, non-financial	Chair: Native surgery for prolapse. BSUG surgical masterclass in Urogynaecology	25.05.2018	17.12.2018	25.05.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Annual Postgraduate Medical & Dental Educators Conference, HENW, Haydock Racecourse	21.09.2018	17.12.2018	21.09.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Course Convenor – Understanding Urodynamics, RCOG	25.09.2018	17.12.2018	26.09.2018	Declare and participate

							Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Lecture on Urodynamics, Manchester Urodynamics Course	12.10.2018	17.12.2018	12.10.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Pain and Implanted Materials, British Pain Society Meeting, RCA, London	12.11.2018	17.12.2018	12.11.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to

							conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	North of England Obstetrical and Gynaecological Society Meeting, Manchester	23.11.2018	17.12.2018	23.11.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Speaker: Management of Mesh Complications. UCLH 9 th Annual Masterclass Urogynaecology and Female Urology , UCLH London	26.11.2018	17.12.2018	28.11.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.

Karen Ward	Topic Advisor	Direct, non-financial	Meeting Organiser and Co-Chair at the UK Mesh Centre Meeting, Sheffield	03.12.2018	17.12.2018	03.12.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	Speaker: Surgery for Vault Prolapse, Non-Mesh Surgery for Stress Incontinence. 9th ERC-RCOG International Conference, Cairo	02.03.2019	17.12.2018	03.03.2019	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Karen Ward	Topic Advisor	Direct, non-financial	<u>Presentations at conferences and abstracts</u> 1. <u>Ward KL</u> , Hilton P. A randomised trial of colposuspension and tension-free vaginal tape (TVT) for primary genuine stress incontinence – 2 year follow up. 26 th		17.12.2018		Declare and participate

			<p><i>Annual meeting of the International Urogynaecological Association, Melbourne, Australia. 5-8 December 2001. (Oral presentation)</i></p> <p>2. <u>Ward KL</u>, Hilton P, Browning JJ. A randomised trial of colposuspension and tension-free vaginal tape (TVT) for primary genuine stress incontinence. <i>30th Annual meeting of the International Continence Society, Tampere, Finland. 28-30 August 2000. (Oral presentation).</i></p> <p>3. <u>Ward KL</u>, Hilton P, Browning JJ. Urodynamic variables in a randomised comparison of colposuspension and tension-free vaginal tape (TVT) for primary GSI. <i>30th Annual meeting of the International Continence Society, Tampere, Finland. 28-30 August 2000. (Oral presentation).</i></p> <p>4. <u>Ward KL</u>, Hilton P, Browning JJ. Changes in quality of life following surgery with tension free vaginal tape (TVT) or colposuspension for primary genuine stress incontinence. <i>30th Annual meeting of the International Continence Society, Tampere, Finland. 28-30 August 2000. (Poster).</i></p> <p>5. Sculpher MG, Manca A, <u>Ward KL</u>, Hilton P. A comparison of hospital costs of tension-free vaginal tape (TVT) and</p>				<p>Agreed by GL on 18.12.2018</p> <p>Rationale: No specific personal opinion was expressed as part of the publications and not likely to conflict with or influence guideline development.</p>
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			<p>colposuspension. <i>30th Annual meeting of the International Continence Society, Tampere, Finland. 28-30 August 2000. (Poster)</i></p> <p>6. <u>Ward KL</u>, Hilton P. Tension-free vaginal tape (TVT)—early experience. <i>23rd Annual meeting of the International Urogynecological Association, Buenos Aires, Argentina. 18-20 November 1998. (Oral presentation)</i></p> <p>7. <u>Ward KL</u>, Hilton P, Sculpher M. A preliminary cost comparison of tension Free Vaginal Tape and colposuspension. <i>23rd Annual meeting of the International Urogynecological Association, Buenos Aires, Argentina. 18-20 November 1998. (Poster)</i></p>				
Karen Ward	Topic Advisor	Direct, non-financial	<p><u>Publications</u></p> <ol style="list-style-type: none"> 1. Jones R, Abrams P, Hilton P, <u>Ward K</u>, Drake M. Risk of tape-related complications after TVT is at least 4%. <i>Neurourol Urodyn.</i> 2010;29(1):40-1. 2. <u>Ward, K.</u> and P. Hilton. Tension-free vaginal tape versus colposuspension for primary urodynamic stress incontinence: 5-year follow up. <i>British Journal of Obstetrics and Gynaecology</i> 2008;11(2):226-33 		17.12.2018		<p>Declare and participate</p> <p>Agreed by GL on 18.12.2018</p> <p>Rationale: No specific personal opinion was expressed as part of the publications and not likely to conflict with or influence</p>

			<p>3. <u>Ward, K.</u> and P. Hilton (2005). "Minimally invasive synthetic slings: emerging complications." The Obstetrician and Gynaecologist 7(4): 223-32</p> <p>4. <u>Ward KL</u>, Hilton P. A prospective multi-centre randomised trial of tension-free vaginal tape (TVT) and colposuspension for primary urodynamic stress incontinence – 2 year follow up. American Journal of Obstetrics and Gynecology 2004; 190:324-31.</p> <p>5. Hilton P, Mohammed KA, Ward K. Postural perineal pain associated with perforation of the lower urinary tract due to insertion of a tension-free vaginal tape. British Journal of Obstetrics and Gynaecology 2003;110(1):79-82</p> <p>6. Manca A, Sculpher MJ, <u>Ward K</u>, Hilton P. A cost-utility analysis of tension-free vaginal tape versus colposuspension for primary urodynamic stress incontinence. British Journal of Obstetrics and Gynaecology 2003; 110(3):255-62.</p> <p>7. Hilton P, <u>Ward KL</u>. Pleasing some of the people none of the time. British Medical Journal 2002; 325(7376):1361.</p> <p>8. <u>Ward K</u>, Hilton P. Prospective multi-centre randomised trial of tension-free vaginal tape and colposuspension as primary treatment for stress incontinence.</p>				guideline development.
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			<p>British Medical Journal 2002;325(7355):<u>67</u>.</p> <p>9. Azam U, Frazer MI, Kozman EL, <u>Ward K</u>, Hilton P, Rane A. The tension-free vaginal tape procedure in women with previous failed stress incontinence surgery. J Urol 2001; 166(2):554-6.</p> <p>10. Moran PA, <u>Ward KL</u>, Johnson D, Smirni WE, Hilton P, Bibby J. Tension-free vaginal tape for primary genuine stress incontinence: a two-centre follow-up study. British Journal of Urology 2000;86(1):39-42.</p>				
Karen Ward	Topic Advisor	Direct, non-financial	<p><u>Book chapter</u></p> <p><u>Ward K</u>. Cost-Effectiveness in Laparoscopic and Robotic Surgery in Urogynecology. In: Cardozo L, Staskin, D., editor. Textbook of Female Urology and Urogynecology. 2. 4th ed: Taylor and Francis; 2017. p. 1154-60.</p>		17.12.2018		<p>Declare and participate</p> <p>Agreed by GL on 18.12.2018</p> <p>Rationale: No specific personal opinion was expressed as part of book chapter and not likely to conflict with or influence guideline development.</p>

Kate Welford	Committee member	Direct, financial	Organising and speaking on GP study day on pessary management of POP. Sponsored by Bioleque Pessary Company who are paying for room hire and refreshments. Not being paid for speaking.		14.3.2017		<p>Declare and participate</p> <p>Agreed by GL and NICE CA at recruitment</p> <p>Rationale: the member was not paid to organise or speak at the event and expenses covered by the company were for event management only and not paid to the member.</p>
Kate Welford	Committee member	Direct, financial	Taken to dinner by Genisis Manufacturer of Urodynamic equipment to the approximate value of £35-40 on 16 October 2017.		17.10.2017		<p>Declare and participate</p> <p>Agreed by GL</p> <p>Rationale: the member did not receive expenses beyond reasonable amounts as set out in NICE's travel and subsistence policy.</p>

Kate Welford	Committee member	Direct, non-financial	Participated in an education study day sponsored by Bulkamid.	31.5.2018	28.6.2018		<p>Declare and participate</p> <p>Agreed by GL and Chair on 28.6.2018</p> <p>Rationale: Bulkamid manufactures a soft hydrogel used for the treatment of stress urinary incontinence, which is specific to the scope. However, the event was for educational purposes only and the member was not paid to attend or speak at the event.</p>
Kate Welford	Committee member	Direct, non-financial	Attended UKCS annual conference April 2018. Self funded Travel, accommodation and conference fee	April 2018	17.12.2018	April 2018	<p>Declare and participate</p> <p>Agreed by GL on 18.12.2018</p> <p>Rationale: self-funded and not likely to conflict with or influence</p>

							guideline development.
Kate Welford	Committee member	Direct, non-financial	Attended ICS annual conference October 2017. Self funded Travel, accommodation and conference fee	October 2017	17.12.2018	October 2017	Declare and participate Agreed by GL on 18.12.2018 Rationale: self-funded and not likely to conflict with or influence guideline development.
Kate Welford	Committee member	Direct, non-financial	Member of North West London Collaboration of CCGs Continence Formulary	February 2018	17.12.2018	Ongoing	Declare and participate Agreed by GL on 18.12.2018 Rationale: This is part of her professional role and not likely to conflict with or influence guideline development.
Kate Welford	Committee member	Direct, non-financial	Attended UK Mesh Centre meeting. Travel and meeting fee paid by Consultant colleagues. Self funded accommodation	03.12.2018	17.12.2018	03.12.2018	Declare and participate

							Agreed by GL on 18.12.2018 Rationale: self-funded accommodation and travel and meeting fee paid by consultant colleagues. Not likely to conflict with or influence guideline development.
Kate Welford	Committee member	Direct, non-financial	Attended Female Urology and Urogynaecology Masterclass UCLH. Free of charge sponsored by Boston Scientific, Speciality European Pharma, Allergan, Medtronic, Laborie Vesica Urology Ltd, Mediplus, Aspire	26.11.2018	17.12.2018	28.11.2018	Declare and participate Agreed by GL on 18.12.2018 Rationale: despite this being a specific interest and being sponsored by manufacturers, she did not receive funding to attend.
Kate Welford	Committee member	Direct, non-financial	<u>Publications</u> Prostate Gland Disorders, Nursing the Elderly vol3 No 4 July 1991		17.12.2018		Declare and participate

		<p>Testing Lower Urinary Tract Function, Nursing Standard Vol 9 Issue 7 Nov 1994</p> <p>Continence Lessons in Self-Support Nursing Times 1999 Feb 10-16 95(6):64 67-8</p> <p>Comparing indwelling and intermittent catheterization Nursing Times Supplement 26 October 2010</p> <p>Urodynamics Chapter in Urological Nursing Edited by Clive Laker Scutari Press London 1994</p> <p>Urodynamics Chapter in Urological Nursing 2nd Ed Edited by S Fillingham and J Douglas Balliere Tindall 1997</p> <p>Co Author Conservative Management of Urological Problems Chapter in Urological Nursing 3rd Ed Edited by S Fillingham and J Douglas Balliere Tindall 1997</p> <p>Urodynamics Chapter in Urological Nursing 3rd Ed Edited by S Fillingham and J Douglas Elsevier 2004</p> <p>Co Author Conservative Management of Urological Problems Chapter in Urological Nursing 3rd Ed Edited by S Fillingham and J Douglas Elsevier 2004</p> <p>Co Author Urinary Drainage Systems Chapter in Urological Nursing 2nd Ed Edited by</p>				<p>Agreed by GL on 18.12.2018</p> <p>Rationale: not likely to conflict with or influence guideline development as the publications fall well before the development of the guideline.</p>
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			S Fillingham and J Douglas Elsevier 2004				
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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.