

## **Termination of Pregnancy Committee meeting**

**Date:** 5<sup>th</sup> & 6<sup>th</sup> July 2018

Location: RCOG, London

Minutes: FINAL

### Day 1

Committee members present:	
Iain Cameron	Present for notes 1 – 6
Sharon Cameron	Present for notes 1 – 6
Patricia Lohr	Present for notes 1 – 5
Jo Fletcher	Present for notes 1 – 6
Michael Nevill	Present for notes 1 – 6
Jonathan Lord	Present for notes 1 – 6
Peter Taylor	Present for notes 1 – 6
Kati Gray	Present for notes 2 – 4
Sarah Makstutis	Present for notes 1 – 6
Kate Randall	Present for notes 1 – 6
Clare Searle	Present for notes 1 – 6
Jayshree Dave	Present for notes 1 – 5

In attendance:		
Angela Bennett	NGA Guideline Lead	Present for notes 2 – 5
Laura O'Shea	NGA Systematic Reviewer	Present for notes 1 – 5
Eleanor Howat	NGA Project Manager	Present for notes 1 – 5

Apologies:	
Nick Staples	NICE Guideline Commissioning Manager
Anuja Pandey	NGA Systematic Reviewer
Mia Schmidt-Hansen	NGA Senior Systematic Reviewer
James Hawkins	NGA Health Economist

# 1a. Welcome and objectives for the meeting

The Chair welcomed the Committee members and attendees to day one of the sixth

meeting on termination of pregnancy.

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

The Chair outlined the objectives of the meeting, which included: reviewing draft recommendations and editorial suggestions, making research recommendations and reviewing draft themes identified by one of the reivews.

### 1b. Confirmation of matter under discussion, and declarations of interest

The Chair confirmed that, for the purpose of managing conflicts of interest, the matter under discussion was termination of pregnancy.

The Chair asked everyone to verbally declare any interests that have arisen since the last meeting.

Name	Job title, organisation	Declarations of Interest, date declared	Type of interes t	Decision taken
Jayshre e Dave	Consultant Microbiologist , London PHL, Public Health England	No interests to declare.		
Fiona Regan	Consultant Haematologis t (Transfusion), Imperial College Healthcare NHS Trust and NHS Blood & Transplant, London	Co-author of the RCOG Greentop Guideline No: 65  Surendran SK, Allard S, REGAN F. The Management of Women with Red Cell Antibodies during Pregnancy. Greentop Guideline Number 65. RCOG May 2014. https://www.rcog.org.uk/globalasse ts/ documents/guidelines/rbc_gtg65.p df	Direct – non- financia I	<ul> <li>Declare and participate</li> <li>Agreed by GL and NICE CA at recruitment</li> <li>Rationale: The interest is non-financial.</li> </ul>
Julia Anderso n	Consultant Haematologis t, Royal Infirmary of Edinburgh, NHS Lothian	No interests to declare.		
Jonatha n Lord	Consultant in Obstetrics & Gynaecology, Royal	Member of the Northern Ireland abortion scheme oversight group, Department of Health and Social Care, London from April 2018. No	Direct – non- financia I	Declare and participate      Agreed by

	Cornwall	payment.		GL
	Hospital			Rationale:     Despite     this being     a specific     interest,     the     balance of     risks is     such that     there is no     need to     withdraw     as relates     to abortion     in     Northern     Ireland     and not     England
Jonatha n Lord	Consultant in Obstetrics & Gynaecology, Royal Cornwall Hospital	Lead author on a Paper (publication 10.7.18): "Early medical abortion: best practice now lawful in Scotland and Wales but not available to women in England [editorial]". BMJ-SRH, 2018. Jonathan Lord, Lesley Regan, Asha Kasliwal, Louise Massey, Sharon Cameron.	Direct – non- financia I	<ul> <li>Declare and participate</li> <li>Agreed by GL</li> <li>Rationale: Despite this being a specific interest, the balance of risks is such that there is no need to withdraw</li> </ul>

The Chair and a senior member of the Developer's team noted that the interests declared did not prevent the attendees from fully participating in the meeting.

### 1c. Minutes of last meeting

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

## 2. Reviewing NICE edits to recommendations for 2.3 and 2.4

The Chair introduced Angela Bennett, NGA Guideline Lead, who led a discussion with the committee to review and agree recommendations made for these questions, following feedback from the NICE Editor:

- 2.3 What is the optimal antibiotic prophylaxis regimen (including no antibiotic prophylaxis as an option) for women who are having medical termination of pregnancy?
- 2.4 What is the optimal antibiotic prophylaxis regimen for women who are having surgical termination of pregnancy?

The Chair also introduced Jayshree Dave, Co-opted Microbiologist, who provided clinical expertise on these questions and supported the committee to agree final recommendations. The committee then amended and agreed the rationale, impact and committee discussion sections for these questions.

#### 3. Research recommendations for 2.3 and 2.4

The Chair introduced Angela Bennett, NGA Guideline Lead, who led a discussion with the committee to agree research recommendations for the following questions:

- 2.3 What is the optimal antibiotic prophylaxis regimen (including no antibiotic prophylaxis as an option) for women who are having medical termination of pregnancy?
- 2.4 What is the optimal antibiotic prophylaxis regimen for women who are having surgical termination of pregnancy?

### 4. Reviewing NICE edits to recommendations for 2.6

The Chair introduced Angela Bennett, NGA Guideline Lead, who led a discussion with the committee to review and agree recommendations made for this question, following feedback from the NICE Editor:

2.6 What is the optimal regimen for cervical priming (including no cervical priming as an option) before surgical termination of pregnancy up to and including 13<sup>+6</sup> weeks gestation?

The committee then amended and agreed the rationale, impact and committee discussion sections for this question.

### 5. Reviewing NICE edits to recommendations for 2.7

The Chair introduced Angela Bennett, NGA Guideline Lead, who led a discussion with the committee to review and agree recommendations made for this question, following feedback from the NICE Editor:

2.7 What is the optimal regimen for cervical priming before surgical termination of pregnancy after 14<sup>+0</sup> weeks gestation?

The committee then amended and agreed the rationale, impact and committee discussion sections for this question.

### 6. Themes for service delivery question 4.1 and drafting protocol 4.2

The Chair introduced Laura O'Shea, NGA Systematic Reviewer, who gave a presentation on themes found in evidence review 4.1 What factors help or hinder the accessibility and sustainability of a safe termination of pregnancy service?

The committee agreed themes from evidence review 4.1 to be included in the protocol for review question 4.2 What strategies improve the factors that help or hinder the accessibility and sustainability of a safe termination of pregnancy service?

The committee also discussed which interventions should be included in the protocol for review question 4.2.

Day 2

Committee members present:	
lain Cameron	Present for notes 1 – 7
Sharon Cameron	Present for notes 1 – 6
Patricia Lohr	Present for notes 3 – 7
Jo Fletcher	Present for notes 1 – 6
Michael Nevill	Present for notes 2 – 7
Jonathan Lord	Present for notes 1 – 7
Peter Taylor	Present for notes 2 – 7
Kati Gray	Present for notes 2 – 7
Sarah Makstutis	Present for notes 1 – 7
Kate Randall	Present for notes 1 – 7
Clare Searle	Present for notes 1 – 7
Julia Anderson	Present for note 2
Fiona Regan	Present for note 3

In attendance:		
Gareth Murphy	NICE Business Analyst	Present for notes 1 – 6
Angela Bennett	NGA Guideline Lead	Present for notes 1 – 7
Laura O'Shea	NGA Systematic Reviewer	Present for notes 1 – 7
Eleanor Howat	NGA Project Manager	Present for notes 1 – 7
Mia Schmidt-Hansen	NGA Senior Systematic Reviewer	Present for notes 5 – 6
James Hawkins	NGA Health Economist	Present for note 6
Anuja Pandey	NGA Systematic Reviewer	Present for notes 1 – 5

Apologies:	
Nick Staples	NICE Guideline Commissioning Manager
Elise Hasler	NGA Information Scientist

## 1a. Welcome and objectives for the meeting

The Chair welcomed the Committee members and attendees to day two of the sixth meeting on termination of pregnancy.

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

The Chair outlined the objectives of the meeting, which included: preparing review protocols, reviewing clinical and health economic evidence and making recommendations.

### 1b. Confirmation of matter under discussion, and declarations of interest

The Chair confirmed that, for the purpose of managing conflicts of interest, the matter under discussion was termination of pregnancy.

The Chair asked everyone to verbally declare any interests that have arisen since declarations were made on day one. No new interests were declared.

### 2. Drafting protocol 2.5

The Chair introduced Mia Schmidt-Hansen, NGA Senior Systematic Reviewer, and Laura O'Shea, NGA Systematic Reviewer, who led a discussion with the committee to develop the protocol for question 2.5 In women who are undergoing a termination of pregnancy, and who are identified as requiring thromboprophylaxis, what is the optimal timing and duration of VTE prophylaxis?

The Chair also introduced Julia Anderson, Co-opted Haematologist, who gave a presentation on VTE prophylaxis which informed the protocol.

### 3. Drafting protocol 2.2

The Chair introduced Mia Schmidt-Hansen, NGA Senior Systematic Reviewer, and Laura O'Shea, NGA Systematic Reviewer, who led a discussion with the committee to develop the protocol for question 2.2 Should women who are RhD negative and having termination of a first trimester pregnancy receive anti-D prophylaxis?

The Chair also introduced Fiona Regan, Co-opted Haematologist, who provided clinical expertise on RhD which informed the protocol.

### 4. Drafting protocol 4.2

The committee revisited the protocol for review question 4.2 What strategies improve the factors that help or hinder the accessibility and sustainability of a safe termination of pregnancy service? and agreed interventions and outcomes.

### 5. Evidence review 1.1

The Chair introduced Mia Schmidt-Hansen, NGA Senior Systematic Reviewer, who gave a presentation on evidence review 1.1 What information would women who

have requested a termination of pregnancy like?

The committee reviewed the clinical evidence, discussed and drafted recommendations, and drafted the content of the rationale and impact sections of the evidence report.

### 6. Evidence review 2.8

The Chair introduced Mia Schmidt-Hansen, NGA Senior Systematic Reviewer, and James Hawkins, NGA Health Economist, who gave presentations on evidence review 2.8 What is the effectiveness, safety and acceptability of surgical compared to medical termination between 13<sup>+0</sup> and 24<sup>+0</sup> weeks gestation?

The committee reviewed and discussed the clinical and health economic evidence. Further work was needed on the health economic analysis so recommendations were not drafted.

### 7. Reviewing NICE edits to recommendations for 2.12

The Chair introduced Angela Bennett, NGA Guideline Lead, who led a discussion with the committee to review and agree recommendations made for this question, following feedback from the NICE Editor:

2.12 For women who are having medical termination of pregnancy and plan to use a progestogen-only contraceptive implant or depot injection, does administration of the contraception at the same time as mifepristone influence the efficacy of the termination?

The committee then amended and agreed the rationale, impact and committee discussion sections for this question.

### 8. Outstanding agenda items

It was agreed that discussion of draft research recommendations for 2.7 (What is the optimal regimen for cervical priming before surgical termination of pregnancy after 14+0 weeks gestation?) and reviewing/agreeing recommendations following feedback from the NICE Editor for 3.2 (For women who have had medical termination of pregnancy, how soon afterwards is it safe to insert an intrauterine contraceptive device?) would be conducted over email.

**Date of next meeting:** 10 September 2018

**Location of next meeting:** The Institute of Materials, Minerals and Mining,

London