Date and Time:  6th & 7th November 2014

Minutes: Confirmed

Guideline Development Group 12:  Coeliac disease

Place:  Bollin, NICE Manchester offices

Present:  Damien Longson (Chair) (DL)
          Peter Gillett (PG)
          Anne Holdoway (AH)
          Norma McGough (NM)
          Rita Shergill-Bonner (RSB)
          Steph Briggs (SB)
          Simon Murch (SM)
          Mike Forrest (MF)
          Gerry Robins (GR)
          Martin Dadswell (MD)
          David Sanders (DS)
          Sorel Burden (SBu)

Apologies:  Jeremy Woodward (JW)
            Rajeev Gupta (RG)
            Mohamed Abuzak (MA)
            Berne Ferry (BF)
            Sorel Burden (SBu) (Day 2 only)
            Simon Murch (SM) (Day 2 only)

In attendance:

<table>
<thead>
<tr>
<th>NICE Staff:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Laura Downey (LD)</td>
<td>Gabriel Rogers (GR)</td>
</tr>
<tr>
<td>Rachel Houten (RH)</td>
<td>Louise Shires (LS)</td>
</tr>
<tr>
<td>Maggie Derry (MD)</td>
<td>Annette Mead (AM) Part of day 2 only</td>
</tr>
<tr>
<td></td>
<td>Apologies:</td>
</tr>
<tr>
<td></td>
<td>Hugh McGuire (HM)</td>
</tr>
</tbody>
</table>

Notes – 6th November

1.  DL welcomed the group to the 12th meeting of this GDG. Apologies were noted and, with the exception of a minor change, the minutes of the last meeting were agreed as an accurate record.

2.  All GDG members were asked to share any new conflicts of interest which have not been previously declared. No additional conflicts of interest were declared by the group or the NICE team, with the following exception:
SBu declared an interest as a systematic reviewer for a project run by NPS Pharma UK Ltd on ‘Investigating the Burden of disease and Quality of Life of patients on long term parenteral nutrition’. A fee for this work will be paid to SBu’s employer – Manchester University. SBu confirmed NPS Pharma do not develop drugs for coeliac disease, though further checks will be made. It was agreed this is a ‘non-personal pecuniary, non-specific interest and SBu could participate in discussions.

3. RQ (Review Question) 1a - Presenting clinical features and conditions associated with coeliac disease: Clinical signs and symptoms which raise suspicion of coeliac disease. LD re-presented the evidence for this question and confirmed she would exclude 3 existing studies due to the low quality of the evidence. The group confirmed they were happy with this approach and reviewed the wording of the recommendation.

4. RH presented the results of the health economic model for RQ 3 & 4 - Sensitivity and specificity of the serological tests for coeliac disease & the most appropriate serological test to diagnose coeliac disease. The group discussed the results and which test strategy to use. It was highlighted that an upcoming paper would further inform the strategy for testing children. Clarity is needed about when the study will be published. The group made a number of draft recommendations in light of the available evidence.

Notes – 7th November

5. RH and GR presented the health economics model structure and parameters for RQ 2 - Implementing active case finding in people at increased risk of coeliac disease. The group discussed this in detail, particularly ‘a-symptomatic’ cases, agreed parameters and recommended a number of additional papers for consideration. The results of the model will be presented at the next meeting.

6. AM went through suggested editorial changes to recommendations made so far. The group discussed these but agreed it would be prudent to postpone full review until the next meeting when the LEfTR tables can be referenced also. This will ensure clarity about what was recommended and why and prevent discussions being re-opened.

7. MD informed the group that the next GDG meeting will be held in London on 12th December 2014. This will be the last GDG meeting before consultation and there will be a lot of agenda items to cover on the day. DL thanked the group for their hard work.