NICE National Institute for Health and Care Excellence

Date and time: ***4th & 5th Sept 2013, 10.30 – 16.00***

Minutes: Final

Guideline Development Group Meeting

Place: *NICE Offices*
Piccadilly Plaza
Manchester

Present:
Damien Longson (Chair)
Natasha Jacques (NJ)
Amanda Adler (AA)
Anne Fittock (AF)
Ian Lewin (IL)
Sailesh Sankar (SS)
Maria Cowell (MC)
Jonathan Roddick (JR)
Yvonne Johns (YJ)
Mohammed Roshan (MR)

Apologies:
Mohammed Roshan (MR) (for the morning of 4th Sept 2013)
Natasha Marsland (NM)
Prunella Neale (PN)

In attendance:

NICE Staff:

Abitha Senthinathan (AS)
Stephanie Mills (SM)
Mike Heath (MH)
Robby Richey (RR)
Steven Ward (SWard
Toni Tan (TT)
Gabriel Rogers (GR)
Jenny Kendrick (JK)

NICE Staff apologies:

Clifford Middleton (CM)

Observers:

n/a		

Notes

1. DL welcomed the group to the fifth meeting of this GDG. Apologies were received from

Notes

MR, NM and PN. The Chair asked all GDG members to declare any relevant conflicts of interest. SS declared a conflict which had been discussed with SM and DL at NICE. The Chair decision was for SS to declare and participate. The rest of the group declared that they knew of no personal specific, personal non-specific, non-personal specific or non-personal non-specific interest in the development of this guideline beyond those which had previously been declared.

DL asked whether the group agreed that the minutes of the previous meeting were a clear and accurate record. The minutes were agreed by all with no amendments to be made. The GDG heard that the objectives of the meeting would be to look at the evidence on target values for HbA1c and blood glucose measures and whether intensive or conventional target values should be pursued for managing HbA1c levels.

SM gave the GDG a brief update on joint working between the diabetes guidelines.

2. RR first presented the evidence on intensive vs. conventional target values. The GDG discussed the appropriateness of the included evidence and also a number of notable systematic reviews and trials which investigated this question. The GDG considered the quality of the data and took into account issues of safety within their discussions.

3. SWard presented the health economic literature which met the inclusion criteria for the self-monitoring evidence review, talked further about the quality of the literature and pointed out key issues for the GDG to consider as part of their decision-making.

4. The GDG felt that recommendations could not begin without looking at the evidence for review question 3 which looked at target values. RR presented this to the group following lunch. The GDG were taken through a large number of outcomes for the studies. The GDG remarked on the challenge of interpreting the evidence for these questions.

5. SWard gave an overview on the health economics for review question 3 and also updated the group on the health economic work covering pharmacological management of blood glucose levels.

6. DL felt that the meeting could be brought to a close after the first day and so asked the GDG to return to discussion and decision-making. The GDG held a long discussion about optimal targets considering all the evidence presented and current clinical practice. The GDG made a number of recommendations but it was agreed that these would be returned to.

7. DL thanked the group for their hard work and participation. SM informed the group of the date of the next meeting and encouraged members to be involved with any ongoing work before the next meeting.

Date, time and venue of the next meeting

Wed 30th October 2013 – NICE Offices, Manchester