Date and Time: 11.00am – 5.15pm  29th October 2014
9.30am – 4.00pm  30th October 2014

Minutes: Confirmed

Guideline Development Group Meeting: Tuberculosis

Place: NICE offices, London

Present: Andrew Hayward (AH) (Chair)
Ibrahim Abubakar (IA) (Day 1 only)
Sudy Anaraki (SA)
Christine Bell (CB)
Timothy Collyns (TC)
Michael Eisenhut (ME)
Mango Hoto (MH)
Amy McConville (AM)
Marc Lipman (ML)
Francis Drobniiewski (FD) (Day 1 only)
Uday Katkar (UK)

Apologies: Francis Drobniiewski (FD) (Day 2 only)
Ibrahim Abubakar (IA) (Day 2 only)
Al Story (AS)
Ann Chapman (AC)
Bertie Squire (BS)
Horace Reid (HR)

In attendance:

**NICE Staff:**
Lucy Hoppe (LH)
Margaret Derry (MD)
Alastair Fischer (AF) (Day 1 and part of day 2 only)
Catherine Swann (CS) (Day 1 am only)
Rachel Kettle (RK) (Day 1 and part of day 2 only)
Hugh McGuire (HM) (Day 1 pm only)
Chris Gibbons (CG)
Gabriel Rogers (GR)
Ben Doak (BD) (Day 1 only)

**Co-opted expert:**
John Watson (Day 2 only)

**Imperial College:**
Mark Jit (MJ) (Day 1 am only)
Peter White (PW) (Day 1 am only)

**Warwick Evidence Team:**
Aileen Clarke (AC) (Part of Day 1 only)
Alex Tsertsvdaze (AT) (Part of Day 1 only)
Joshua Pink (JP) (Part of Day 1 only)
Peter Auguste (PA) (Part of Day 1 only)
Notes: 29th October 2014

1. AH welcomed all to the 15th TB GDG meeting. Apologies were noted and the minutes of the last meeting were agreed as an accurate record. The Chair provided a brief overview of the day highlighting the information that would be discussed.

2. All GDG members were asked to share any new conflicts of interest which have not previously been declared. No new conflicts of interest were declared by the group or the NICE team, with the following exception: ML declared an interest as being funded by Oxford Immunotec to travel to speak at the Russian National TB Congress meeting. The Chair acknowledged this and confirmed this did not affect ML’s involvement in discussions.

3. GR summarised health economic evidence discussions from the last meeting on the following review questions, answering questions as they arose:
   - ‘For people with latent TB infection in which drug resistance is not suspected, which regimen is the most effective in preventing the development of active TB?’
   - ‘According to their risk factors, which people with latent TB infection should receive drug treatment to prevent the development of active TB?’

4. PW then presented the HE modelling findings, for both the latent TB questions. The group discussed the findings and drafted recommendations.

5. The team from Warwick Evidence presented the model structure and key assumptions they are planning to use for the review questions on diagnostic strategies in latent TB infection. The group discussed the structure and assumptions and suggested some changes. It was agreed that additional feedback would be provided to Warwick Evidence in a separate meeting.

6. No further business was discussed.

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7. AH provided a recap of day 1 and outlined the objectives for day 2. He welcomed JW as a co-opted expert for the discussions. JW declared the following interest:

   **Non Specific Personal Financial Interest**

   In November 2014, Otsuka Pharmaceuticals (Manufacturer of Delaminid, new drug for MDR TB), paid JW to act as a consultant for a single “expert council” meeting of European MDRTB specialists in Munich

   AH confirmed that because principles of treatment were being discussed but individual drugs were not, JW could partake in discussions.

8. ML and TC presented a position paper they and BS had prepared about management strategies for drug-resistant TB. They outlined their experiences and the group discussed the most effective approaches.

10. LH presented the clinical reviews for the review question: *In people with suspected or confirmed active TB, which relative risk factors are associated with a higher level of: i) multidrug resistance, or ii) any drug resistance?*

LH went through the review protocols, search strategies and included evidence used to inform these questions. The GDG discussed the evidence available and updated the existing recommendations from CG117.

11. LH and MD took the GDG through the draft recommendations made over the 2 days. The group discussed and amended where appropriate.

12. AH provided a summary of the day and thanked all for their attendance and input.

**Date, time and venue of the next meeting**
10:30am – 27th and 28th November at the NICE offices in London.