

Minutes: Confirmed

Guideline Development Group Meeting 1: Cirrhosis and Non-Alcoholic Fatty Liver Disease

Date and Time: 11th July 2014, 10am-4pm

Place: NCGC, 180 Great Portland Street, London, W1W 5QZ

Present:

**NAFLD GDG
members (AM only)**

Christopher Byrne	Professor of Endocrinology & Metabolism, University of Southampton
Chris Day	GDG Chair, Professor of Liver Medicine & Honorary Consultant Hepatologist, Newcastle University
Kevin Moore	Professor of Hepatology, University College London
Benjamin Mullish	ST in Hepatology & Gastroenterology, Imperial College London (Specialist Trainee Adviser)
Philip Newsome	Professor of Experimental Hepatology & Honorary Consultant Hepatologist, Birmingham University
Rachel Pryke	General Practitioner Partner, Winyates Health Centre, Redditch
Jane Putsey	Patient/carer representative
Roy Sherwood	Professor of Clinical Biochemistry, King's College London (co-opted expert adviser)
Indra van Mourik	Consultant Paediatric Hepatologist & Clinical Lead Liver Unit, Birmingham Children's Hospital NHS Foundation Trust
Bronwen Williams	Gastroenterology & Hepatology Research Nurse, Hull Royal Infirmary

**Cirrhosis GDG
members (AM and
PM)**

Andrew Fowell	Consultant Gastroenterologist & Hepatologist, Queen Alexandra Hospital, Portsmouth
Lynda Greenslade	Clinical Nurse Specialist in Hepatology, Royal Free London NHS Foundation Trust
Phillip Harrison	GDG Chair, Senior Lecturer & Consultant Hepatologist, King's College London
Brian Hogan	ST5 in Intensive Care Medicine, Homerton University Hospital (Specialist Trainee Adviser)
Susan McRae	Patient/carer representative
Marsha Morgan	Principle Research Fellow & Honorary Consultant Physician, UCL Institute for Liver & Digestive Health
Valerie Ross	Lead Pharmacist in Hepatology, Barts Health NHS Trust

NCGC technical team

Joanna Ashe	Senior Information Scientist
Angela Cooper	Senior Research Fellow
Emily Davies	Senior Research Fellow
Martin Harker	Senior Health Economist
Katie Jones	Senior Project Manager
Qudsia Malik	Research Fellow
Jill Parnham	Operations Director
Heather Stegenga	Research Fellow
Amelia Unsworth	Project Manager

In attendance:

Caroline Keir	Guideline commissioning manager, NICE	AM only
Emma Chambers	Public involvement programme advisor, NICE	AM only

Observers:

James Mahon	Intern, NCGC	AM only
Emily Holmes	Intern, NCCC	AM only

Apologies

Ben Doak	Guidelines Commissioning Manager, NICE
David Fitzmaurice	Professor of Primary Care, University of Birmingham
Iain Brew	General Practitioner, Leeds Community Healthcare NHS Trust
Mark Hudson	Consultant Hepatologist & Gastroenterologist, Newcastle Hospitals NHS Trust
Serena Carville	Associate Director
Clare Jones	Senior Research Fellow

1. CD and PH welcomed the group to the first meeting of the Cirrhosis and Non-alcoholic fatty liver disease GDGs. Apologies were received from IB (Cirrhosis GDG), MHd (Cirrhosis GDG), DF (NAFLD GDG), BD (NICE), SC (NCGC) and CJ (NCGC).
2. CK presented to the group on 'Working with NICE'. CD thanked CK for her presentation.
3. JPa presented to the group on the 'NCGC work programme and declarations of interests'. CD thanked JPa for her presentation.
4. EC presented to the group on 'Patient involvement' and the NICE Public Involvement unit. CD thanked EC for her presentation.
5. JA presented to the group on 'Searching for the evidence'. CD thanked JA for her presentation.
6. AC presented to the group on 'Reviewing the evidence'. CD thanked AC for her presentation.
7. MHk presented to the group on 'Health economics'. CD thanked MHk for his presentation.

1. Declarations of interest

PH asked the group to read out all their submitted declarations of interest to date so that each member of the GDG is aware of all DOI). All GDG members read their declarations of interest to the group and declared the following:

PH declared that he had no known personal or non-personal pecuniary or non-pecuniary interests.

MHk declared that he had no known personal or non-personal pecuniary or non-pecuniary interests.

HS declared that she had no known personal or non-personal pecuniary or non-pecuniary interests.

KJ declared that she had no known personal or non-personal pecuniary or non-pecuniary interests.

ED declared that she had no known personal or non-personal pecuniary or non-pecuniary interests.

JA declared that she had no known personal or non-personal pecuniary or non-pecuniary interests.

JPa declared that she accepted NICE commissions (non-personal pecuniary DOI – action: nil) AF declared that he had no known personal or non-personal pecuniary or non-pecuniary interests.

VR declared that she had no known personal family, non-personal pecuniary or personal non-pecuniary interests. VR declared that she had a personal pecuniary interest in that she had undertaken in the last 12 months advisory board roles for new drugs in HCV for Gilead, BMS and Janssen. She had also given a presentation at BMS training day on 14th July on the background of the roles and responsibilities of the pharmacist in the treatment of HCV and the managed entry of new therapies in the area.

BH declared that he had a personal pecuniary interest in that he was a current member of NHS staff, a personal family interest in that his spouse was a current member of NHS staff and a non-personal pecuniary interest in that he is a co-investigator on a National Multicentre UK Trial of Stents in the treatment of variceal haemorrhage (UKCRN 13392). This trial receives funding from the Stent Manufacturer (Ella-CS, Czech Republic) and from the NIHR (as an on-portfolio study the NHS support costs are met by the NIHR). He had no known non-personal non-pecuniary interests.

LG declared that she had a personal pecuniary interest in that she was a member of an advisory board for Norgine until June 2014. During this time she had received payment for accommodation and dinner in December 2013 and April 2014 and for calls in June 2014. She was also a member of the Norgine Educational Committee Meeting and had participated in meetings in November, December and May 2014. She also declared that she had attended a Norgine sponsored liver nurses meeting in June 2014 for which she had received conference registration, accommodation and dinner, as well as payment for Chairing a session and giving one talk. She declared that she had received payment for speaking at the RCN congress in June 2014 at a Norgine sponsored meeting. She also declared that she had received payment from Norgine to attend the EASL conference and had received conference registration, hotel and dinners. LG also declared a personal non-pecuniary interest that she had provided data on HE patients from Royal Free Foundation Trusts given to advisory board meeting for real world data for Norgine, for which no payment was received. LG declared no personal family interests or non-personal non-pecuniary interests.

SM declared that she had no known personal or non-personal pecuniary interests, or personal family interests. She declared that she had a personal non-pecuniary interest in

that she was employed by the Hepatitis C Trust, the UK HCV Patient Charity, and that the staff are routinely invited to take part in NICE activities and that they are an active advocacy and support group.

MM declared that she had a personal pecuniary interest in that she is a member of an advisory board for the Institute of Alcohol Studies for which she receives an annual stipend of £1000 to support research activities. She also declared that she has taken part in symposia in the UK and abroad on aspects of alcohol dependence and alcohol related liver disease, nutrition in chronic liver disease and hepatic encephalopathy. On some occasions she has received travel and subsistence directly or indirectly by a participating pharmaceutical company but has not received lecture fees. She declared no known non-personal pecuniary or personal non-pecuniary interests.

RS declared that he had no known personal or non-personal pecuniary or non-pecuniary interests.

The Chair deemed that none of the above declarations of interest were in conflict with the discussions and hence no action was required on the 11th July 2014.

2. Review questions

The GDG discussed review questions for inclusion in the guideline.

3. Protocols

The GDG discussed and agreed three protocols for upcoming review questions.

4. Evidence review: spontaneous bacterial peritonitis

Given time limitations, this item was postponed until GDG2.

5. Any other business

There was no other business.

Date, time and venue of the next meeting

Thursday 4th September 2014, 10am – 4pm, Fleming room, Royal College of Physicians.