Date and Time: Thursday 16 October 2014, 10:00-16:00

Minutes: Confirmed

LBP Guideline Development Group Meeting 8 Place: NCGC, 180 Great Portland Street, London, W1W 5QZ

Present:

Stephen Ward (Chair) Ian Bernstein Patrick Hill	Consultant in Pain Medicine, Brighton & Sussex University Hospitals NHS trust General Practitioner, Gordon House Surgery, London Consultant Clinical Psychologist, Birmingham Community Healthcare NHS Trust
Gary MacFarlane	Chair (clinical) in Epidemiology, University of Aberdeen
Mark Mason Neil O'Connell	Patient/carer representative Lecturer, School of Health Sciences & Social Care Brunel University
Philip Sell	Consultant Orthopaedic Surgeon, University Hospitals of Leicester NHS Trust
Simon Somerville	General Practitioner, Park Medical Centre, Leek, Staffordshire
Steve Vogel	Vice Principal (Research), British School of Osteopathy
David Walsh	Honorary consultant rheumatologist, Sherwood Forest Hospitals NHS Foundation Trust
Chris Wells	Consultant in Pain Medicine
In attendance:	
Serena Carville	Guideline Lead, NCGC
Sophia Kemmis- Betty	Health Economist, NCGC
Qudsia Malik	Research Fellow, NCGC
Paul Miller	Senior Information Scientist, NCGC
Ben Pordes	Project Manager, NCGC
Silvia Rabar	Senior Research Fellow, NCGC

Ben Doak	Guideline Commissioning Manager, NICE

Apologies:

Babak Arvin	Consultant Neurosurgeon, Queens Hospital
Kate Lovibond	Senior Health Economist, NCGC
Wendy Menon	Patient member

1. Welcome, apologies and DOIs

New declarations were received from SS, CW and PS:

- SS declared a non-specific personal non-pecuniary interest: Had a presenting role in a film giving advice to patients with back pain released by AXA/PPP and Keele University. The film has been in existence for a few years and was made prior to appointment on the GDG. SS was not paid for his role.
- CW declared a non-specific personal pecuniary interest: Attended an IASP meeting in Buenos Aires 7–11th October. Hospitality was provided by Pfizer, Grunenthal and Mundipharm. Fee and hospitality was provided by Mallinckrodt.
- PS declared a personal non-pecuniary interest: He is an executive for spine society of Europe and has been involved in stakeholder council negotiation with Med Tech industry on funding society activities.

Chair reviewed these and it was determined that all could declare and participate. No other new declarations were received from GDG members and therefore no further action was required

Apologies were received from WM, BA and KL.

2. Agree GDG6&7 notes and NICE minutes

Some small amendments were made and subsequently, the working notes and NICE minutes were agreed to present an accurate report of GDG6&7.

3. Evidence Review: Pharmacological therapy

QM presented additional clinical evidence for the pharmacological review. In accordance with their previous declarations of interest, CW, GM and DW left the meeting for the duration of this item.

4. Evidence Review: Electrotherapy

SR presented the updated clinical evidence for electrotherapy. A search had been carried out for cohort studies, but none had been identified.

5. **Evidence Review: Psychological therapy**

PH defined the cognitive behavioural therapy (CBT) approach and studies were re-categorised accordingly.

6. Evidence Review: Pharmacological therapies (cont.)

QM presented the clinical evidence for the one paracetamol trial found. In accordance with their previous declarations of interest, CW, GM and DW left the meeting for the duration of this item.

7. Evidence Review: Manual therapies

SR presented updated clinical evidence for manual therapies. There were no cohort studies found.

8. **Protocol: Radiofrequency ablation**

SW noted that radiofrequency for discogenic pain is covered by a NICE IP guidance to use under special arrangements only. It was agreed if we did not think there would be evidence to change this, we could cross refer to the IP.

9. **Protocol: Facet joint injections**

SC pointed out that the scope mentioned injections, not specifically 'facet joint injections'. As a result the protocol and review question was changed to 'spinal Injections'. 10. **AOB**

SW requested that GDG9 could be a longer meeting until 6pm to allow time for the combination therapy review.

11. Close of meeting

Date, time and venue of the next meeting

GDG9, Tuesday 25 November 2014, 10am-6pm, Boardroom NCGC