

Date: 8th January 2015

Minutes: Final

Guideline Development Group Meeting 2 Parkinson's Disease

Place: NICE Offices, 10 Spring Gardens, London, SW1A 2BU

Present: Paul Cooper (Chair)
Alistair Church (AC)
Beverly Sheaf (BS) – co-opted expert
Debbie Davies (DD)
Fiona Lindop (FL)
Graham Lennox (GL)
Ivan Benett (IB)
Jane Little (JL)
Janine Barnes (JB)
Julian Evans (JE) – co-opted expert (present PM via teleconference)
Lynne Osborne (LO)
Matthew Sullivan (MS)
Nicholas Miller (NM) – co-opted expert
Paul Shotbolt (PS)
Richard Grunewald (RG)
Robin Fackrell (RF)
Richard Walker (RW)

Apologies: Angela Birleson (AB) – co-opted expert

In attendance:

NICE Staff:

Sue Spiers (SS)
Laura Downey (LD)
Stephanie Mills (SM)
Steven Ward (SWard)
Gabriel Rogers (GR)
Hugh McGuire (HM)
Louise Shires (LS)
Jenny Kendrick (JK)

Observers:

Holly Irwin

NICE Project Manager

Thurs 8th January 2015

1. PC welcomed the group to the second meeting of this guideline development group

(GDG). Apologies were received from AB and JE would join the group in the afternoon via teleconference to hear the presentation on health economics and go through review protocols. LO and GL declared personal, non-financial interests which did not affect their participation in the meeting. No further conflicts of interest above what had been made known to the NICE team were declared by any other person present.

The GDG looked over the minutes of the previous meeting and agreed they were an accurate representation of the meeting in November 2014.

PC explained that the meeting on the day would include looking at the evidence on physiotherapy and agreeing further review protocols. PC stressed the importance of getting the research question correct.

2. LD presented the findings of the review on physiotherapy. The GDG mentioned a very recent and relevant trial which had been published. LD and SM explained that towards the end of guideline development, re-run searches would be conducted which would identify any important studies which have not been included at this point. The GDG would then be able to consider if these would impact on recommendations.

The GDG were taken through the outcomes of interest which were searched for and what information had been available to extract from the studies. LD also explained the criteria on which some of the evidence for different outcomes was downgraded.

The GDG considered the more holistic nature of physiotherapy interventions and how delivery of physio interventions was highly variable. SWard presented a paper he had found which looked at the cost effectiveness of physiotherapy interventions. The GDG took this information into consideration and went on to make recommendations.

3. Following lunch, SM gave an overview of the expenses system to the GDG, explaining how to input claims for items such as subsistence and travel.
4. LD took the GDG through the draft linking evidence to recommendations table which had been put together to capture the discussions the group had had when generating the recommendations on physiotherapy. LD explained that this would be tidied up and circulated to the GDG following the meeting for their comments.
5. SWard presented to the GDG the work he had been doing to support the health economic priority setting. The GDG debated what would be the best area for de novo modelling, and whether it was possible to combine more than one intervention into a model considering the different populations that certain interventions may be suitable for.
6. LD took the GDG through some of the review protocols for deep brain stimulation, impulse control disorders, palliative care and nutrition. LD confirmed that comments from the GDG would be incorporated into the review protocol for nutrition. GR highlighted that an additional review question may be needed to support the health economic modelling. SM explained that remaining review protocols would be sent out to different GDG members for input but that there would be an opportunity for everyone on the GDG to have a final look at these. SM explained when the next meeting would be and confirmed that the draft evidence chapter would be sent to the GDG following the meeting.

Next meeting – 19th February 2015 at the NICE offices in Manchester from 10am – 5pm.

- **Review question:** 15. *What is the comparative effectiveness of nutritional support compared with usual care?*
- **Review question:** 21. *What are the needs of people with Parkinson's disease for advance directives and palliative care plans throughout the course of their disease?*
- **Ratify review protocols**