

Brain Tumour (primary) and metastases, Guideline Committee meeting 6

Date: Thursday 28th April 2017

Location: Royal College of Obstetricians and Gynaecologists (RCOG)

Minutes: final

Committee members present	
Eileen Andrews	Present for items 1-8
Sebastian Brandner	Present for items 1-8
Alison Cameron	Present for items 1-8
Catherine Derbyshire	Present for items 1-8
Sara Erridge	Present for items 1-8
Zoe Faulkner	Present for items 1-8
Sarah Jefferies	Present for items 1-8
Ingela Oberg	Present for items 1-8
Sara Robson	Present for items 1-8
Dr Tom Roques (Chair)	Present for items 1-8
Stuart Smith	Present for items 1-8
David Summers	Present for items 1-8
John Graham	Present for items 1-8
Jeremy Rees	Present for items 1-8
Isabella Robbins	Present for items 1-8
Helen Bullbeck	Present for items 1-8
David Summers	Present for items 1-8
Garth Cruickshank	Present for items 1-8
NGA staff	
Alex Bates, Guideline Lead	Present for items 1-8
Eva Gonzalez, Systematic Reviewer	Present for items 1-8
James Hawkins, Health Economist	Present for items 1-8
Mia Schmidt Hansen, Systematic reviewer	Present for items 1-8
Victoria Rowlands, Project Manager	Present for items 1-8
NICE staff	
Katie Perryman Ford	Present for items 1-8
Clifford Middleton	Present for items 1-8
Adam Storrow	Present for items 1-8
Apologies	
Stephanie Arnold- Information scientist John Graham – Clinical Advisor Colin Watts- Committee member	

1. Welcome, housekeeping, introductions, apologies

Welcome, housekeeping, introductions and apologies

2. Confirmation of matter under discussion, and declarations of interest

Members of the Committee declared Declarations of interest, these are noted in the above.

Name	Job title, organisation	Declaration of interest	Type of interest	Decision taken
Stuart Smith	Clinical Associate Professor Neurosurgery, Nottingham University Hospitals	Research project with Inovitro (research arm of Optune) – no financial support, loan of research equipment and technological advice.	Personal, non-financial, non-specific	Declared and participated

3. Lay member forum

No specific issues were raised by the Lay members of the Committee.

4. Protocol agreement- “What is the most effective method for optimising maximal safe resection of glioma (for example with 5ALA, awake craniotomy, intraoperative ultrasound, intraoperative MRI”

The sub group and guideline lead took the rest of the committee through the above protocol, slight changes were made and the committee signed off on this protocol.

5. Presentation– NICE Resource impact

Adam Storrow took the Committee through the presentation on NICE resource impact.

6. Draft HE results on “what is the most effective intracranial treatment (surgery, stereotactic radiotherapy, whole-brain radiotherapy or combinations of these) for a single brain metastases, along with review of recs.

James Hawkins took the committee through the Health Economics presentation on the above question, the committee agreed this would be returned to again in a future meeting.

7. Presentation- What are the health and social care support needs of people with brain tumours (primary) and brain metastases and their family and carers?

The Committee Drafted recommendations on the following question- What are the health and social care support needs of people with brain tumours (primary) and brain metastases and their family and carers?

8. Presentation – What are the facilitators and barriers to providing appropriate neurological rehabilitation assessment in people with brain tumours (primary) and brain metastases?

Mia Schmidt-Hansen presented on the evidence found for the above question.

9. Draft recs: What are the facilitators and barriers to providing appropriate neurological rehabilitation assessment in people with brain tumours (primary) and brain metastases?

The Committee drafted recommendations on the above question.

10. Presentation – Which adults with inoperable or incompletely excised or recurrent meningioma should be offered radiotherapy?

Mia Schmidt-Hansen took the committee through the evidence for the above question.

11. Draft recommendations- Which adults with inoperable or incompletely excised or recurrent meningioma should be offered radiotherapy?

The committee drafted recommendations on the above question.

12. Protocol agreement: 2d- What is the optimal management (surgery, radiotherapy, chemotherapy, combinations of these, or other therapies such as metformin or tumour- treating fields) of recurrent high-grade glioma?

The sub group and guideline lead took the rest of the committee through the above protocol, slight changes were made and the committee signed off on this protocol.

13. AOB and close

No other business was raised. The next committee meeting will be held on the 14th & 15th June 2017.

The chair closed the meeting.