

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Implementing Vitamin D Guidance

3rd Meeting of the Public Health Advisory Committee A

4th September 2013

Prince of Wales Suite, NICE Offices, London

Final Minutes

Attendees:	<p><i>PHAC Members</i> Susan Jebb (Chair), Mireia Jofre Bonet (left the meeting at 1.45pm), Alison Lloyd, Adrian Martineau, Eleanor McGee, Colin Michie (arrived at 10am), Judy More, Chris Packham, Toby Prevost, Frances Quinn, Amanda Sowden, Lucy Yardley</p> <p><i>NICE Team</i> Jane Huntley, Adrienne Cullum, Victoria Axe, Alastair Fischer, Caroline Mulvihill</p> <p><i>Review Team (York Health Economics Consortium (YHEC))</i> Victoria Burley (left the meeting at 1pm), Lily Lewis (arrived at 10.25am and left the meeting at 1.45pm), Anne Morgan (left the meeting at 1pm), Matt Taylor (arrived at 10.25am and left the meeting at 1.45pm)</p> <p><i>Observers</i> Lauren Johnston (PHD Student, University of West of Scotland), Ann Nevinson (PHAC F Community Member), Thomas Wilkinson (NICE)</p>
Apologies:	<p><i>PHAC Members</i> Joyce Rothschild</p>

Author	Project Manager
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Audience	PHAC members, NICE team, members of the public

Item		Action
<p>1. Welcome and objectives for the meeting</p>	<p>The Chair welcomed the Public Health Advisory Committee (PHAC) to the third committee A meeting and the first committee meeting on the Implementing Vitamin D Guidance.</p> <p>The PHAC members introduced themselves to the group.</p> <p>The Chair welcomed the members of the York Health Economics Consortium review and health economics team to the meeting.</p> <p>The Chair welcomed the observers, Lauren Johnston, Ann Nevinson and Thomas Wilkinson to the meeting. Lauren Johnston had previously requested permission to record the meeting for her PHD thesis and the Chair reminded the committee that the recording was taking place.</p> <p>The Chair noted that there were no members of public attending.</p> <p>The Chair reminded the group that the information discussed at these meetings should be held in confidence.</p> <p>The Chair outlined the general housekeeping for the venue which included noting all fire exits.</p> <p>The Chair outlined the objectives of the meeting which included:</p> <ul style="list-style-type: none"> • Discussing the background information on vitamin D and the scope. The Chair noted that the group should remain focused on the scope. • Receiving a presentation from the review team and discussing the evidence review • Listening to an introduction to health economics on vitamin D • Developing recommendations and implementing the current Vitamin D guidance. • Considering potential expert testimony <p>The Chair informed the PHAC that apologies had been received. These are noted above.</p>	
<p>2. Declarations of Interests</p>	<p>The Chair explained that verbal declarations of interest are a standing item on every agenda and are recorded in the minutes as a matter of public record. The Chair</p>	

	<p>asked everyone to verbally declare the interests they had made in writing at the time of their application to join the PHAC and also to declare any additional interests that may have arisen since then.</p> <p>Those declarations previously minuted can be found on our PHAC website here.</p> <p>The potential conflicts of interest declared both verbally and in writing were as follows:</p> <p>Personal pecuniary interest</p> <p>Susan Jebb amended her previous potential conflicts by declaring that her professional role has changed and she is now paid by the University of Oxford.</p> <p>Judy More declared that she is a member of the Infant and Toddler Forum which is an expert group, funded by an educational grant from Danone UK, to produce evidence-based nutritional information and practical educational tools on feeding infants and toddlers for healthcare professionals and parents. She has acted as a nutrition consultant to the following companies that manufacture infant formulas and baby food: Danone, UK; Pfizer Nutrition; Mumtaz and Organix. Judy declared that she is a freelance paediatric dietician and is paid to write articles on a number of websites.</p> <p>Non personal pecuniary interest</p> <p>Victoria Burley declared that she is a member of the scientific advisory committee for the BNF and that she has supervised a PhD student supported financially by Kellogg's UK.</p> <p>Lily Lewis declared that her employment, York Health Economics Consortia receives funding from pharmaceutical companies for health economics consultancy. None of this work has been in relation to vitamin D Deficiency.</p> <p>Matt Taylor declared that his employer, York Health Economics consortium, has received funding from pharmaceutical manufactured for health economics consultancy. However, this has not been related to vitamin D.</p> <p>Personal non-pecuniary interest</p> <p>Alison Lloyd declared that she is a trustee of Manchester Action on Street Health working with needle exchange users and sex workers.</p>	
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	<p>Adrian Martineau declared that he has expressed clear opinions, reached as the conclusions of research projects, about the clinical effectiveness of vitamin D supplementation in particular conditions and for particular indications. None of these opinions could reasonably be interpreted as prejudicial to an objective interpretation of the evidence however.</p> <p>Eleanor McGee declared that she has co-written a paper (ref below) on vitamin D supplementation, published in 2012, which stated views on how current policy should be implemented. Moy RJ, McGee E, DeBelle GD, Mather I, Shaw NJ. Successful public health action to reduce the incidence of symptomatic Vitamin D deficiency. Arch Dis Child 2012;952-954</p> <p>Frances Quinn declared that she has completed a small research study on limited mobility and weight management, but this did not cover vitamin D deficiency or interventions. She noted she is a member of British Polio which represents people with limited mobility and is also a tutor on a self-management of Long-term conditions course. As part of these small group activities she signposts people to information on exercise and nutrition; vitamin D is included where relevant.</p> <p>Matt Taylor declared that he is a member of a (different) PHAC.</p> <p>There were no further additional conflicts of interest.</p> <p>The Chair and the Associate Director noted that the interests declared did not prevent the attendees at committee from fully participating in the meeting</p>	
<p>3. Vitamin D – background to topic</p>	<p>Adrienne Cullum (AC) gave a presentation giving a brief background on the Vitamin D topic.</p> <p>The PHAC were invited to comment on AC's presentation and a number of issues were raised and discussed.</p>	
<p>4. Vitamin D Scope</p>	<p>AC gave a presentation on the scope of Vitamin D – implementing existing guidance. AC noted which areas will and will not be covered within the guidance. AC also noted that NICE are currently working to produce guidance on sun exposure.</p> <p>The PHAC discussed the scope and were given the opportunity to ask questions.</p> <p>The PHAC noted that there were limitations and barriers to the evidence and the Chair informed the</p>	

	group that expert testimony can help to rectify this issue.	
5. Evidence review	YHEC gave a presentation entitled: Vitamin D: A Systematic Review of Effectiveness of Activities to Increase Awareness, Update and Provision of Vitamin D Supplements in at Risk Groups.	
6. Evidence review - discussion	<p>The PHAC were invited to ask YHEC questions in regard to the review and the PHAC discussed the limited evidence, especially in regard to the elderly populations.</p> <p>The Chair noted that there may be a need for research recommendations and the PHAC could consider this when drafting the guidance.</p> <p>Action: Due to the limited evidence available, YHEC to check whether publications received after the inclusion cut off for review (programmes in Manchester and Bradford) contain any information of relevance to the review.</p> <p>Action: YHEC to re-draft the section on potential concerns in regard to overdose and to clarify whether any studies observed any evidence of risk for the level of supplement recommended.</p> <p>Action: YHEC to extend the section on health inequalities making clear the theoretical considerations.</p> <p>Action: YHEC to extend the section on gaps in the evidence noting the type of interventions that might be evaluated or potentially useful.</p> <p>Action: The Chair to write to the Department of Health to request data (if necessary, in confidence) on the uptake of healthy start vitamins per se and in comparison to update the broader Healthy Start programme.</p> <p>Action: The NICE Team to ask SACN for the data on the epidemiology of Vitamin D deficiency from the NDNS.</p>	<p>YHEC</p> <p>YHEC</p> <p>YHEC</p> <p>YHEC</p> <p>The Chair</p> <p>NICE Team</p>
7. Health economics – key issues for this topic area	<p>YHEC gave a presentation entitled An Economic Evaluation of Interventions to Implement Vitamin D Strategies.</p> <p>The PHAC were invited to ask YHEC questions in regard to the review.</p> <p>It was noted that the SACN review would be published</p>	

	<p>in 2013 and therefore the YHEC team would wait to understand what the content of this SACN review would be before the work on the economic model commenced. To ensure consistency, the NICE Team will be meeting with SACN prior to the next PHAC meeting, and the findings from the SACN review would hopefully be included in the economics model.</p> <p>There was a discussion around the focus on the implementation and the cost effectiveness of the intervention.</p> <p>Action: YHEC to look at the previous work NICE has done on Vitamin D and at the previous cost models that were used.</p> <p>Action: YHEC to draft an economic model for the next PHAC meeting.</p>	<p>NICE Team</p> <p>YHEC</p>
<p>8. Drafting recommendations, consideration or research recommendations</p>	<p>The Chair asked the PHAC to consider the outline guidance that the NICE team had drafted, which had been previously circulated to the PHAC.</p> <p>AC gave a presentation on developing recommendations and the PHAC began to draft recommendations, considerations and research recommendations on the basis of the evidence that they had heard.</p> <p>AC asked the PHAC to think about the following while drafting recommendations:</p> <ul style="list-style-type: none"> • Whose health will benefit? • Who should take action? • What action should they take? <p>The Chair asked the topic expert and community PHAC members for their opinion on what they believed would be an important recommendation for NICE to make that would improve uptake and practice.</p> <p>A number of areas were discussed including: ensuring suitable supplementation for pregnant women, children and at risk groups; improving the understanding of the definition of “at risk”; and improving training.</p> <p>The Chair then asked the core member if they wished to discuss any additional areas, or challenge the previously mentioned areas using the evidence that had been given.</p> <p>A number of areas were discussed including universality, training and monitoring. It was noted that there are inconsistencies with current</p>	

	<p>recommendations.</p> <p>Action: The NICE team to ask the Department of Health about the new legislation that prevention the sale of healthy start supplements.</p> <p>Action: Amanda Sowden to look at the Cochrane database to identify evidence on the sorts of interventions that are best at increasing uptake and to consider whether there is an individual who may be able to give testimony on this issue.</p> <p>Action: The NICE team to look at Marmot’s work on Healthy Start contribution to health, around older people and ethnic minorities.</p>	<p>NICE Team</p> <p>Amanda Sowden</p> <p>NICE Team</p>
9. Proposals for expert testimony	<p>The Chair noted that the PHAC have limited time to discuss recommendations for this short piece of work but members may still wish to set aside some time at the next meeting for expert testimony. Members may be particularly interested in testimony on:</p> <ul style="list-style-type: none"> • At risk groups where there is limited evidence. • Practical implementation of schemes to improve uptake of guidance <p>The National Osteoporosis Society was suggested as an organisation who could fill the evidence gaps with the over 65s population.</p> <p>It was noted that other gaps included universality; uptake of services; implementation trials and supply of supplements.</p> <p>Action: The PHAC members to email the NICE team in regard to any suggestions for people who may be able to share their expertise with the areas above.</p>	PHAC
10. Summary of the day and any Other Business/Next steps	<p>AC informed the group of the next steps. These included the NICE team drafting the recommendations and sending them out to the PHAC on 4th October.</p> <p>AC asked the PHAC to check their job titles in the draft guidance and contact her if anything needed amending.</p>	
11. Minutes of the last meeting and matters arising	<p>The Chair asked the PHAC if they had any changes to the minutes of the last meeting.</p> <p>The minutes were confirmed as accurate by the core members of the PHAC committee, however it was requested that they be visited again at the next meeting on Needle and Syringe Programme.</p>	

12. Any other business	<p>The PHAC requested that all references to “sun” should actually refer to “sunlight”.</p> <p>Lauren Johnston conveyed her thanks to the committee for allowing her to observe and record the meeting.</p> <p>There was no other business.</p>	
11. Close	<p>The meeting closed at 4pm.</p>	