

**LOWER URINARY TRACT SYMPTOMS GUIDELINE
Tenth Guideline Development Group Meeting**

**Meeting Held on Friday 16th January 2009 10.30am – 4.00pm
in Committee Room 3 at The Royal College of Surgeons of England**

Friday 16th January – Minutes

Present: **GDG Members:**
**Christopher Chapple (CC) Chair, William Turner (WT), Julian Spinks (JS),
Paul Joachim (PJ), Adrian Wagg (AW), Malcolm Lucas (ML), Angela
Billington (AB), James N'Dow (JN), Thomas Ladds (TL).**

NCC-AC

Clare Jones (CJ), Kate Homer (KH), Lee-Yee Chong (LYC), Kamsha Maharaj
(KM), Hanna Lewin (HL) from 1pm, Jenny Hill (JH).

Apologies: Jon Rees (JR), Roy Latham (RL), Mark Speakman (MS), Sarah Willett (SW),
Elisabetta Fenu (EF)

Agenda Item

Discussion / Outcome

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| 1. Welcome and apologies
for absence (Chris Chapple
– Chair) | CC welcomed everyone to the 10th LUTS GDG Meeting.
Apologies were received from JR, RL, MS, SW and EF. |
| Declaration of interests(Chair) | CC asked for each GDG member to declare their interests verbally and
asked them to complete their forms. Each attending GDG member
declared his/her interests in front of all those present.

CC, WT, ML, AB, JN and PJ declared they knew of no personal
pecuniary interest, personal family interest, non-personal pecuniary
interest or personal non-pecuniary interest, above those declared at
previous meetings.

TL declared a personal pecuniary interest, that he has notified his NHS
employer, Central Manchester University Hospitals NHS Foundation Trust
that he wished to terminate his contract with them on 27 th March 2009.
He is in the process of setting up a limited company, TL Consulting Ltd, of
which he will be the director and sole shareholder; he will be employed
there from April 1 2009. TL Consulting Ltd. has entered into a contract
with ProstaLund Operations AB of Sweden to supply services, including
advising them on clinical issues and potential business activities in the UK
and overseas. This contract will be operational from April 1 2009.
ProstaLunc AB currently develops, manufacture and supply equipment,
consumables and software in the field of microwave thermotherapy for
BPH. TL Consulting may also negotiate and enter into contracts with other
suppliers in urology pharmaceutical and medical technical sectors in the
future. He declared that he knew of no non-personal pecuniary interest,
personal non-pecuniary interest or personal family interest, above those
declared at the previous meeting. |

Agenda Item

Discussion / Outcome

JS declared a personal non-pecuniary interest, he attended a planning meeting for the "Sense of Leadership" organised by Pfizer. He declared that he knew of no personal pecuniary interest, personal family interest or non-personal pecuniary interest, above those declared at the previous meeting.

AW declared a non personal pecuniary interest, donation to fellows research fund from Astellas. He declared that he knew of no personal pecuniary interest, personal family interest or personal non-pecuniary interest, above those declared at the previous meeting.

NCC-AC Staff:

CJ, KH, LYC and KM all declared that they knew of no personal pecuniary interest, personal family interest, non-personal pecuniary interest and personal non-pecuniary interest.

JH declared that she knew of no personal pecuniary interest, personal family interest, personal non-pecuniary interest. She did declare a non-personal pecuniary interest, manages the NCC-AC which is funded by NICE.

Minutes of the last meeting	The minutes from the last meeting were reviewed and accepted as an accurate record.
2. Plan for the Day	CJ outlined the main aims of the meeting to the GDG members.
3. Conservative versus surgical interventions	KH presented the evidence on conservative versus surgical interventions.
4. Acute retention patients	CJ presented the clinical and economic evidence on patients with acute urinary retention. CC requested that AW, AB, JS and TL withdrew from the meeting due to their personal pecuniary interests (see previous minutes) whilst the GDG discussed pharmacological recommendations.
5. Diuretics versus placebo	LYC presented the clinical evidence on the comparison of diuretics and placebo. Following the discussion of draft recommendations, AW, AB, JS and TL returned to the meeting.
6. Pharmacological interventions – phytotherapy	CJ and KH presented the clinical evidence on phytotherapy. AW, AB, JS and TL withdrew from the meeting due to their personal pecuniary interests whilst the GDG discussed pharmacological recommendations.
7. Surgical interventions for storage symptoms - Results of consensus exercise - GDG discussion	HL presented the results of the consensus exercise to the entire GDG. The GDG discussed the recommendations for surgical interventions for storage symptoms.
8. Workshop for chapters write up	A workshop was completed where the GDG worked in four sub-groups to discuss the guideline chapters and write-up.
9. Any other business	There was no other business discussed.
10. Close and date of the next meeting	CC thanked everyone for attending and closed the meeting. The next meeting will take place on 23 rd February in Committee Room 3 at the Royal College of Surgeons of England.