Date and Ti	ime: 2	st June 2012, 10.00 – 16.00 hrs

Minutes: 8th Guideline Development Group Meeting		
Present:	Nik Hirani (Chair) Angela Key Annette Duck Geraldine Burge Nicholas Kim Harrison Patrick Wilson Sue Copley(am) Tessa Lewis Izaba Younis, Research Fellow Vicki Pollit, Acting Senior Health Economist Nina Balachander, Senior Research Fellow and Project Manager Vanessa Delgado Nunes, Guideline Lead	
	e: leton, NICE Guidelines Commissioning Manager ey, NICE Editor	
Apologies: Ann Millar Malcolm Wea	llan	

Notes

Melissa Hippard Richard Hubbard Nick Screaton

1. Nik Hirani welcomed the group to the eighth GDG meeting. Apologies were received from Ann Millar, Malcolm Weallans, Melissa Hippard, Richard Hubbard and Nick Screaton. The Chair asked all GDG members to declare any relevant conflicts of interest.

NKH declared a non-personal pecuniary interest. NKH will be a co-investigator on a trial investigating the end of life needs of patients with IPF and their carers due to commence later in 2012 (date to be confirmed). The trial is funded by the Marie Curie Research Programme, and payment goes to a Palliative Care hospital.

AD declared a personal pecuniary interest. AD conducted a two-day training on End of Life care in Cambridge in May, on behalf of the Association of Respiratory Nurse Specialists, for which she received £300 per day.

VDN declared a non-personal pecuniary interest. VDN will be attending a meeting in St Petersburg, for which travel and accommodation is being funded by Pfizer. Consultancy fee will be paid into the NCGC account. Pfizer does not manufacture any IPF related

Notes

drugs.

There were no changes in any of the other GDG members' or NCGC staff's DOIs since the last meeting.

No actions were taken following these declarations and none of the GDG members withdrew as none of the declarations conflicted with clinical areas to be discussed during the GDG meeting.

Presentations:

Each of the following presentations were given:

- 1. NICE editorial process for guidelines JE
- 2. Clinical and cost effectiveness evidence for Psychosocial Support IY & NB
- 3. Clinical and cost effectiveness evidence for Patient Review and Follow-up NB & VP
- 4. Health economic model update VP
- 5. NICE implementation costing brief NB
- 6. Workplan NB
- 1. JE informed the GDG of the NICE editorial guideline process, the NICE editor's role and presented amended draft IPF recommendations as examples of edits.
- 2. IY presented the clinical evidence for psychosocial support which included 1 quantitative study and 2 qualitative surveys. VP presented the costs of health professional's time (involved with psychosocial support of patients with IPF) per hour of patient contact.
- 3. NB informed the GDG that there was no evidence retrieved for patient review and follow-up. VP presented HE considerations to the GDG, asking them to consider the cost associated with a patient review and follow-up in terms of staff time and resources.
- 4. VP presented an update of the methods used for the heath economic model. VP presented an update of the assumptions assumed for the natural history of IPF progression and prognostic risk factors, and presented resource use and costs of the pulmonary rehabilitation programmes assessed. These were discussed by the GDG
- 5. NB tabled an amendment to the agenda and presented the evidence review protocols for lung transplantation and ventilation. Evidence for these questions will be presented at the next GDG meetings.
- 6. NB reminded the GDG of key upcoming dates in the IPF guideline and ongoing work required from the GDG.

Any other business:

None

Date, time and venue of the next meeting:

GDG 9: 25th July 2012, NCGC Boardroom, 180 Great Portland Street.