

Antimicrobial Stewardship: changing risk-related behaviours in the general population Committee meeting

Date: 12/05/2015

Location: Derwent, NICE London office

Minutes: Final

NICE National Institute for
Health and Care Excellence

Committee members present:		
Susan Jebb (Chair)		Present for items 1 – 17
Chris Packham (Vice chair)		Present for items 1 – 17
Mireia Jofre Bonet		Present for items 1 – 13
Toby Prevost		Present for items 1 – 17
Joyce Rothschild		Present for items 1 – 17
Amanda Sowden		Present for items 1 – 14
Lucy Yardley		Present for items 1 – 17
Simon Howard (Topic member)		Present for items 1 – 17
Cliodna McNulty (Topic member)		Present for items 1 – 17
Gillian Orrow (Topic member)		Present for items 1 – 9
Anna Sallis (Topic member)		Present for items 1 – 17
Jacqueline Sneddon (Topic member)		Present for items 1 – 17
Susan Walsh (Topic member)		Present for items 1 – 17

In attendance:		
Charlotte Haynes	Analyst, NICE	Present for items 1 – 17
James Jagroo	Analyst, NICE	Present for items 1 – 17
Caroline Mulvihill	Analyst, NICE	Present for notes 1 – 17
Alastair Fischer	Health economist, NICE	Present for items 1 – 17
Johanna Hulme	Associate Director, NICE Medicines Advice Team	Present for items 1 – 17
Sarah King	RAND, Contractor	Present for items 1 – 9
Jo Exley	RAND, Contractor	Present for items 1 – 9
Richard Pinder	Department of Health/ Public Health England	Present for item 10-11

Observers:**Jayne Ellis, Alere**

Present for items 1-9

Apologies:**Alison Lloyd**

Core committee member

1. Welcome and objectives for the meeting

The Chair welcomed the Committee members and attendees to the 15th PHAC A meeting and the first on Antimicrobial stewardship. The Committee members and attendees introduced themselves.

The Chair welcomed the members of the public to the meeting. The members of the public had been briefed already, both verbally and in writing by the NICE team, and the Chair reminded them of the protocol for members of the public, whose role is to observe (they should not speak or ask questions). No filming or recording of the meeting is permitted. The Chair reminded all present that the Committee is independent and advisory, that its decisions and recommendations to NICE do not represent final NICE guidance, and that they may be changed as a result of public consultation.

The Chair informed the Committee that apologies had been received. These are noted above.

The Chair outlined the objectives of the meeting, which included:

- Receive and discuss the evidence review that is to be used to inform this guideline
- Hear expert testimony from Anna Sallis and Richard Pinder on Behaviour change and antibiotic prescribing in healthcare settings (patient behaviours)
- Consider related NICE guidance, and potential links with this guideline.
- Discuss potential gaps in the evidence, and develop potential research recommendations or possibly expert testimony which may fill this gap

2, 3 Confirmation of matter under discussion, and declarations of interest

The Chair asked all core members to verbally declare any conflicts of interest that have arisen since the last meeting.

The Chair asked all topic members to declare all conflicts

The Chair explained that verbal declarations of interest are a standing item on every agenda and a matter of public record.

The PHAC comprises both core members who are standing members of PHAC A, and topic members who are members solely for this guideline. The Chair confirmed that, for the purpose of managing conflicts of interest, the matter under discussion was antimicrobial stewardship: changing risk-related behaviours in the general population.

Simon Howard – personal non-financial interest: worked with the chief Medical officer as a Public Health Specialty Registrar in the field of antimicrobial resistance for 14 months, including co-authoring a number of publications calling for public health action on the topic; continues to co-author publications with CMO on the topic without payment.

Susan Jebb personal financial interest: salary from University of Oxford ;Advisory Board – Tanita Ltd (ended March 2015);Writing and lecture fees – Rosemary Conley Diet and Fitness magazine (ended January 2014);

Susan Jebb non-personal financial interest: Science Advisor on Obesity for Department of Health

Susan Jebb personal non-financial interest Chair of Public Health Responsibility Deal Food Network; Trustee – Association for the Study of Obesity (ended Sept 2014);Member – European and International Associations for the Study of Obesity; Member - National Heart Forum

Clodna McNulty personal non-financial interest: Observer on BSAC Council; Member of ARHAI and ESPAUR; CM has spoken at antimicrobial resistance symposiums sponsored by public bodies, and one by bioMerieux but received no payment. Member of NICE Antimicrobial stewardship: systems and processes for effective antimicrobial medicine use Guideline Development Group. CM was the lead in the development of TARGET and promotes the TARGET resources hosted by the RCGP. CM leads the e-Bug project across Europe.

Clodna McNulty non-personal non-financial interest: leads the development of national Public Health England antibiotic and lab use guidance for GPs which covers the diagnosis and treatment of infections;

Clodna McNulty non-personal financial interest: She has received grants from several publically funded research bodies.

Gillian Orrow personal non-financial interest: I have published research on the effectiveness of physical activity promotion in primary care (Orrow G, Kinmonth AL, Sanderson S, Sutton S. Physical Activity Promotion based in Primary Care: A Systematic Review and Meta-Analysis of Randomised Controlled Trials. BMJ

2012;344:e1389)

Chris Packham Personal non-financial interest: Member DH Advisory Group on Hepatitis; Chair of Examiners, UK Chair of Examiners (final professional examination), Faculty of Public Health, Royal College of Physicians (London); Partner is Named Nurse for Child Safeguarding, Nottingham University Hospitals NHS Trust, Nottingham; Special Professor at Nottingham University Clinical Commissioning Champion, Centre for Commissioning, Royal College of General Practitioners, London.

Chris Packham Personal financial interest: Associate Medical Director and Consultant Public Health Physician, Nottinghamshire Healthcare NHS Trust ;GP Associate, St Luke's Surgery, Radford Health Centre, Nottingham;GP and Section 12 MHA approved doctor, Nottingham Emergency Medical Services Personal pecuniary interest

Toby Prevost Personal financial interest: AstraZeneca – shares were owned by his wife but were sold in March 2014.

Toby Prevost Non-personal financial interest: Co-investigator on health research grants principally from NIHR; TP is the statistical member of a health research team for a project called “eCRT2 which is an electronically-delivered, multi-component intervention to reduce unnecessary antibiotic prescribing in primary care. A cluster randomised trial using electronic health records.” It is funded by the NIHR HTA (13/88/10; Led by Martin Gulliford, KCL) which reimburses his university for my time spent on it. (Started January 2015); TP is the statistical member of a Trial Steering Committee for a study called “What is the clinical and cost effectiveness of oral steroids in the treatment of acute lower respiratory tract infection (LRTI). A placebo controlled randomised trial.” which aims to reduce antibiotic consumption. It is funded by NIHR School of Primary Care Research (12/SW/0180; Led by Richard Hay, Bristol). There is no funding to reimburse his time (Started July 2012); TP is the statistical member of a Data Monitoring Committee for a study called “Children's drops for ear pain in acute otitis media: the CEDAR randomised controlled trial. It is funded by the NIHR HTA (13/88/13; Led by Richard Hay, Bristol). There is no funding to reimburse his time. (Started November 2014)

Joyce Rothschild. Personal financial interest: JR's husband is a governor at the Heart of England Foundation Trust (HEFT)

Anna Sallis Personal financial interest: employee of Public Health England and contracted by civil service terms and conditions.

Jaqueline Sneddon Personal financial interest: Project Lead for Scottish Antimicrobial Prescribing Group which leads stewardship programme in NHS Scotland (2008 to date); Fee-paid co-author of educational booklet Practical Guide to

Antimicrobial stewardship in hospitals published by bioMerieux 2013 ;Fee-paid speaker on antimicrobial stewardship at bioMerieux User Group Meeting, Birmingham, October 2014

Susan Walsh Personal financial interest SW is a member of staff for Primary Immunodeficiency UK (PID UK) who help people with faulty immune systems for whom antibiotics are life-saving medicines; Sponsorship from BPL Ltd to SW to attend European Society of Immunodeficiencies conference – unrelated to AMS.

Susan Walsh non personal financial interest: Un-restricted grant from CSL Behring to PID UK of which SW is a member of staff not related to AMS; Restricted grant from Biotest UK Ltd to PID UK not related to AMS.

Lucy Yardley non personal financial interest: Co-investigator on proposal submitted to HTA for trial of an exercise referral scheme ;Co-investigator on two NIHR funded grants to reduce antibiotic prescribing (and on proposals for EU and further NIHR funding)

The Chair and a senior member of the NICE team noted that the interests declared may prevent Cliodna McNulty and Lucy Yardley from fully participating in the meeting. These members may need to leave the next PHAC meeting where findings directly relating to their own research are discussed during recommendation development.

4. Presentations

4.1. The Chair introduced Charlotte Haynes, NICE, who gave a presentation on the scope of the forthcoming guideline on Antimicrobial stewardship: changing risk-related behaviours in the general population

4.2. The Chair introduced Johanna Hulme from the NICE Medicines Advice team within the Centre for Clinical Practice at NICE who gave a presentation on the scope and draft NICE guideline for Antimicrobial stewardship: systems and processes for effective antimicrobial medicine use

4.3. The Chair introduced Sarah King and Jo Exley, RAND, who gave a presentation on the evidence review for Antimicrobial stewardship: changing risk-related behaviours in the general population.

4.4. The Chair introduced Alastair Fischer, NICE, who gave a presentation on the economics approach and rationale.

4.5. The Chair introduced Anna Sallis, Public Health England and Richard Pinder, Imperial College London who gave a presentation on Behaviour change and antibiotic prescribing in healthcare settings – findings from a literature review and

behavioural analysis.

4.6. The Chair introduced James Jagroo, NICE, who gave a presentation on evidence gaps.

4.7. The Chair introduced Charlotte Haynes, NICE, who gave an overview of the key themes in the evidence review.

5. Questions and discussion

5.1. The Committee discussed the issues presented in relation to the scope for the Antimicrobial stewardship: changing risk-related behaviours in the general population. The committee raised concerns that there may be interventions targeted at both healthcare professional and patients that were not being identified as evidence by either of the antimicrobial stewardship guidelines.

5.2. The committee discussed the evidence review from RAND. They noted that most studies focussed on changes in knowledge, with very few interventions assessing changes in behaviour.

5.3. The committee questioned the exclusion of studies in the evidence review that only measured prescribing rates. These were excluded because it was considered that in the absence of any measures of patient knowledge or behaviour it is not possible to conclude that changes in prescribing reflect changes in a patient's knowledge or behaviour as prescribing is under the control of the prescriber, not patient. The Committee however felt that if an intervention was solely targeting patients or the general public, that prescribing rates may be a reasonable outcome measure as changes in patient behaviour may be affecting doctors' prescribing habits.

5.4. The committee noted that multiple-level interventions where education was not the main component were excluded from the evidence review and asked that details of the intervention components be clarified and studies reconsidered for inclusion.

5.5. The committee agreed with the decision analysis economics approach.

5.5. The Committee developed the draft recommendations and considerations and discussed the evidence gaps and made suggestions for possible expert testimony.

6. Next steps

Action: NICE team agreed to undertake a review of systematic reviews of educational interventions that target both healthcare professionals and patients in relation to antimicrobial use, misuse and antimicrobial resistance.

Action: NICE team agreed to look at studies that were excluded from the evidence

review on the basis that they only reported on prescribing rates. Those studies that were solely targeted at patients/general public would be identified and included.

Action: The review team (RAND) agreed to provide details of the intervention components of all excluded multi-component studies, for the Committee to consider.

Action: The review team (RAND) agreed to check inclusion criteria of any papers that the committee had expected to be included in the review and to incorporate these into the evidence review if they met the inclusion criteria.

Action: NICE team agreed to look into inviting experts to provide expert testimony on national antibiotic awareness campaigns and on school education interventions on food hygiene.

8. Any other business

None

Date of next meeting: 18th June 2015

Location of next meeting: Prince Philip House, 3 Carlton House Terrace, London