

Varicose Veins Guideline Development Group Meeting (GDG) 5

Date and Time: *Wednesday 7th March 2012 (10:00–16:30)*

Minutes: Confirmed

Place: *Boardroom, National Clinical Guideline Centre (NCGC), 180 Great Portland Street, London W1W 5QZ*

GDG Present: *(All present for notes 1–10 except where stated)*

Prof. Alun Davies (Chair) (AD)	
Dr Mustapha Azzam (MA)	
Prof. Andrew Bradbury (AB)	
Dr. Jocelyn Brookes (JB)	
Joyce Calam (JC)	(present for notes 3-10)
David Evans (DE)	(present for notes 1-7)
Mr Nick Hickey (NH)	
Mr Keith Poskitt (KP)	(present for notes 3-10)
Hazel Trender (HT)	
Dr Mark Vaughan (MV)	

In attendance: *(All present for notes 1–10 unless where stated)*

Expert Advisors: Jenny Greenfield (JG)

NICE Staff Caroline Keir (CK)

NCGC Staff:

Dr Katharina Dworzynski (KD)	(Present for notes 1-4)
Karen Head (KH)	
Dr Kate Kelley (KK)	
Grace Marsden (GM)	
Dr Mark Perry (MP)	
Richard Whittome (RW)	(Present for notes 1-4)

Apologies None

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1. Welcome

AD welcomed the group to the fifth Varicose Veins Guideline Development Group Meeting (GDG5). It was noted that JC and KP would be arriving late and that DE would be leaving early.

AD invited everyone to declare their interests. AD declared new personal pecuniary interests: he has attended the American Venous forum (AVF) meeting in Florida for which registration was paid for by the AVF, which will have had industrial sponsorship; he has attended a working lunch with Sapheon to discuss commencing a trial in the UK on vein ablation. AD declared new non-personal pecuniary interests: a grant of £45,000 has been awarded to his department. At imperial college by Sapheon to commence a trial in the UK on vein ablation; a grant of £225,000 has been awarded to his department at Imperial College for a trial of Clarivein compared with VNU5. MA declared a personal non-pecuniary interest; he has attended a meeting about the GEKO stimulator device. AB declared a

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new non-personal pecuniary interest 'have attended meetings where my travel and accommodation costs have been offset by sponsorship from various companies, some of whom make VV related products' .

There were no changes to any of the other GDG members' and NCGC staff's DOIs since the last meeting. No actions were taken following these declarations and none of the GDG members withdrew during discussion.

The minutes of GDG 4 were agreed as an accurate reflection of the meeting, there were no matters arising.

2. Information Protocol

MP presented the review protocol for the patient information question. The GDG agreed the focus of the question should be on perceptions and expectations of patients with varicose veins including of the natural history and treatments, and how these expectations can be addressed.

3. Diagnosis and Referral Protocols

MP presented the review protocol for the question about whether duplex ultrasound completed prior to surgery improved patient outcomes. The GDG discussed the need to include all interventional treatments in this section as well as surgery. The GDG requested that an additional question looking at the diagnostic accuracy of duplex ultrasound compared with hand held Doppler to be included.

KH presented an overview of the possible questions relating to the indications for referral to specialist care. The GDG agreed the main reasons to treat varicose veins could be broadly categorised into providing relief from symptoms and/or preventing potential complications (such as venous ulcers). The GDG developed a draft review question relating to the prevention of complications. The review question relating providing relief of symptoms requires further work and will be discussed at the next meeting.

4. Review question - Compression post-ablative treatment vs. ablative treatment alone

Members of the NCGC Technical Team presented the clinical and health economic evidence found for this question to the GDG.

5. Review question - Adding tributaries to truncal treatment vs. truncal treatment alone

Members of the NCGC Technical Team presented the clinical and health economic evidence found for this question to the GDG.

6. Health Economics

There was not time for this item. It will be reviewed at the next meeting.

7. Network Meta Analysis (NMA)

Members of the NCGC Technical Team presented a background to NMA and whether this technique could be used within the guideline. The GDG asked the NCGC technical team to investigate the use

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of quality of life measures as an outcome for the NMA.

8. Review of the Existing LETRs

Members of the NCGC Technical Team presented a combined list of existing LETRs. It was noted that these may change when the cost effectiveness model is completed.

9. Work plan and review of GDG dates

Members of the NCGC Technical Team presented work to be completed for next week and a review of forthcoming GDG dates.

10. Any other business and summary of next steps

No items of additional business were raised.

Date, time and venue of the next meeting

Wednesday April 18th (10:00–16:30); Boardroom, NCGC, 180 Great Portland Street, London W1W 5QZ

The meeting closed at 3.45pm.