

National Institute for Health & Clinical Excellence**Neuropathic Pain****Guideline Development Group (GDG) meeting 1**Monday 30th July 2012

Level 1A, City Tower, Piccadilly Plaza, Manchester, M1 4BD

GROUP MEMBERSHIP

In Attendance	
GDG Members	
Damien Longson (DL) (Chair)	Vera Neumann (VN)
Brigitta Brandner (BB)	Charles Lane (CL)
Annette Gibb (AG)	Ammy Pui-Chi Lam (AP)
Heather Wallace (HW)	Paul Howard (PH)
Marie Fallon (MF)	Issak Bhojani (IB)
Sailesh Sankar (SS)	
Karen Cavanagh (KC)	
NICE Staff	
Stephanie Mills (SM)	Sarah Glover (SG)
Heather Stegenga (HS)	
Caroline Keir (CK)	
Gabriel Rogers (GR)	
Dylan Jones (DJ)	
Michael Heath (MH)	
Nicole Elliott (NE)	
Apologies:	
Sam Chong (SC)	Rachel Ryle (NICE)

MINUTES OF THE MEETINGMonday 30th July 2012**1.1 Agenda item 1: Introductions & guideline development group (GDG) working**

DL welcomed all new GDG members. Apologies for the meeting were received from SC and RR. DL began the GDG working presentation and asked everyone to introduce themselves.

As part of the presentation, DL explained the task of the group – to write with NICE's input a short clinical guideline on the pharmacological management of neuropathic pain, which shows how the GDG moved from evidence to recommendations. The scope was highlighted to be the boundary of the project and that the approach of the group must always be consistent with the scope. DL talked about the different role each member had but how each person on a GDG is equal. The Chair highlighted it was not his role to write the guideline but facilitate this process, moving the group towards consensus, ensuring everyone

is heard, ensuring jargon is avoided and declarations of interest are handled appropriately.

GDG members were encouraged to express their own views and not that of their respective organisations. It was also explained that the content of meetings was confidential and this should be respected by all GDG members. DL thanked the group for committing their time to the guideline and hoped that they would enjoy the experience.

1.2 Agenda item 2: Developing NICE clinical

EW talked to the GDG about the Patient and Public Involvement Programme (PPIP). The importance of patient/ carer involvement in clinical guidelines was highlighted and how in writing the guideline, the views and choices of patients and carers should be an on-going consideration. GDG lay members will also help to develop understandable versions of the guideline for the public.

SG explained the role of the Information Specialist working on a short clinical guideline. The group were advised of the different databases which are searched to look for articles relevant to the guideline. The GDG looked at example search terms and search results to develop a greater understanding of this work.

HS explained about the overall process of guideline development. HS told the group more about the purpose of the scope and the review protocol for the clinical guideline and highlighted that clinical guidelines do not replace clinical judgement. Linking evidence to recommendations was addressed as part of the presentation and the different elements that underpin NICE recommendations such as cost-effectiveness, clinical effectiveness and social value judgements.

CK presented to the GDG on the role of the Guidelines Commissioning Manager (GCM) and the Commissioning team. The GDG were shown the different phases of guideline development. CK gave an overview of the number of clinical guidelines NICE produces with the different developing centres. The group heard about the different guideline products that are produced and also about the public sector equality duty.

SM talked to the group about the role of project manager, timelines, expenses and declarations of interest. SM emphasised that a declaration of interest was an activity or work that may influence or affect your ability to participate on a guideline development group or how that participation is perceived. SM encouraged GDG members to get in touch if they had anything around this timelines and declarations of interest they needed to discuss.

GR talked to the GDG about the health economics for the guideline covering some terminology and how health economics should be approached by GDG members. GR discussed with the group priorities for the modelling but reassured the group there would be much more on health economics at the next meeting.

1.3 Agenda item 3: Summary of the scope

HS talked the group through what was in and out of scope, the review questions the guideline would consider and the main outcomes that would be searched for in the neuropathic pain literature. It was understood that this guideline would only cover a small part of the care pathway for patients with neuropathic pain. It was also stressed that 'specialist pain management services' would not be covered. The group discussed some of the drugs included within the scope and the parameters in which they would be able to make recommendations.

1.4 Agenda item 4: Review protocol (part 1)

HS explained the purpose of the review protocol and took the GDG through the way it was structured. The GDG looked at the items within the review protocol. It was agreed that only RCTs would be looked for but not those that used enriched enrolment. The group also believed it would be best not to look at conference abstracts. HS also took the group through search terms and the appropriate length of follow-up that should be looked for as part of inclusion and exclusion criteria for studies.

1.5 Agenda item 5: Review protocol (part 2)

HS finished off with review protocol with the GDG and checked everyone was in agreement with it. HS moved on to talk about continuous and dichotomous outcomes and got the GDG to think about what was preferred. It was agreed that extracting all possible outcomes at multiple time points throughout the studies was the best approach. The GDG also thought about the grouping and splitting of individual neuropathic pain conditions. DJ indicated this was an important issue but a clear answer on this would not be needed until the next meeting. HS also introduced the group to the idea of a network meta-analysis.

1.6 Agenda Item 6: Summary of the day

DL thanked the group for their input and wished everyone a good summer break. SM told the group the date for the next meeting would be the 4th September at NICE Offices in Manchester.