

***National Collaborating Centre for  
Women's and Children's Health***

**4<sup>th</sup> Constipation in Children Guideline Development Group Meeting  
Minutes**

**Tuesday, 15<sup>th</sup> July 2008; 10 – 4pm at RCOG**

**Present:**

Jenny Gordon (JG)	GDG Chair
Huw Jenkins (HJ)	Consultant Paediatric Gastroenterologist
Janet Blannin (JB)	Parent Carer and Clinical Nurse Advisor to ERIC
Karen Tucker (KT)	Parent/carer
Kate Blakeley (KB)	Consultant Paediatric Clinical Psychologist
Lynne Watson (LW)	Specialist Health Visitor - Special Need and Children's Continence
Nick Nelhans (NN)	Consultant Paediatrician
Sian Hooban (SH)	Team Leader, Community Children's Nurses
James Cave (JC)	General Practitioner
Sara Mancell (SM)	Dietician/nutritionist

**NCC staff:**

Monica Lakhanpaul (ML)	Co-Director (Children's Health), NCC-WCH
Roz Ullman (RU)	Senior Research Fellow, NCC-WCH
Lauren Bardisa-Ezcurra (LBE)	Research Fellow, NCC-WCH
Michela Tinelli (MT)	Health Economist, NCC-WCH
Debbie Pledge (DP)	Senior Information Scientist, NCC-WCH
Rosie Crossley (RC)	Work Programme Co-ordinator, NCC-WCH

**In attendance:**

Caroline Keir (CK)	Commissioning Manager, NICE
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**External Advisor:**

David Candy (DC)	Consultant Paediatric Gastroenterologist
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**Apologies:**

June Rogers (JR)	Team Director Promocon, Disabled Living
Kate Blakeley (KB)	Consultant Paediatric Clinical Psychologist
David Tappin (DT)	Community paediatrician and public health doctor

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**1. Welcome and apologies  
Declarations of interest  
Minutes of meetings 2&3**

JG welcomed the group to the meeting. Apologies were received from KB, DT and JR. The GDG's Expert Advisor, David Candy, was introduced to the group.

The minutes of the 2<sup>nd</sup> and 3<sup>rd</sup> GDG meetings were agreed as an accurate record.

**2. Grading the evidence**

A presentation was given on how evidence is graded for NICE guidelines.

**3. DRE Recommendations (revisited)**

The draft evidence statement and recommendation for DRE were read out.

A GDG interpretation was drafted live and the recommendation was amended.

**4. Review on abdominal x-ray**

The review for abdominal x-ray was presented.

The review for colonic transit time and disimpaction will be presented in September.

LBE will find out what is said about abdominal x-ray in the urinary tract infection in children guideline and bring references to the next meeting.

A recommendation was drafted live.

**5. Review on ultrasound**

The review for abdominal ultrasound was presented.

The GDG discussed the value of abdominal ultrasound. The group's surgeon will need to input on instances to use abdominal ultrasound.

The GDG interpretation and recommendation were drafted live.

Further research may demonstrate the usefulness of ultrasound.

The recommendations on x-ray and ultrasound may be combined; the group will come back to this in a later meeting.

**6. Impaction and disimpaction – definitions**

A presentation was given on the definitions of impaction and disimpaction.

The group debated the definition of faecal impaction. The PAACT definition can be used as a starting point. Definitions will be included in the introduction to the disimpaction chapter and in the glossary.

**7. Health economics update**

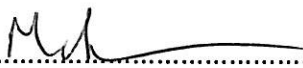
The health economic model for initial treatment and maintenance therapy for constipation was presented.

**8. Constipation and maltreatment**

The group were informed that the maltreatment in children guideline is in progress. The GDG looked at the recommendations drafted by the GDG for the "When to suspect maltreatment" guideline regarding when to suspect maltreatment in children with constipation and adjusted them based on their expertise and experience.

**9. Involving children**

At the scoping stage of this guideline, it was felt that children should be involved in developing recommendations in guidelines pertaining to children. The opinions of children will add an important dimension to the guideline. The GDG would like to know what is important to children, especially in terms of diagnosis and treatment. A consultation using a simple questionnaire will be conducted at the beginning of the guideline development process to find out if the questions that are important to children have been included. A discussion group will be conducted towards the end of the guideline to see if children feel their views have been taken into consideration.

Signed:  Date: 16/9/08  
Monica Lakhanpaul, Clinical Co-Director (Children's Health)

Signed:  Date: 16/09/08  
Jenny Gordon, GDG Chair