

## NATIONAL COLLABORATING CENTRE FOR CANCER (NCC-C)

### Suspected Cancer

#### Twelfth Guideline Development Group (GDG) meeting

Thursday 13<sup>th</sup> and Friday 14<sup>th</sup> March 2014

Board Room, NCC-C, Park House, Greyfriars Road, Cardiff

#### GROUP MEMBERSHIP & ACTION LIST

GDG Members	
Dr Steve Hajioff (SHa)	Dr Lindsay Smith (LS)
Professor Willie Hamilton (WH)	Dr Stuart Williams (SW)
Dr Euan Paterson (EP)	Dr Yoryos Lyratzopoulos (YL)
Dr Jeanne Fay (JF)	Mr David Martin (DM)
Mrs Nicki Doherty (ND)	Dr Richard Osborne (RO) (Day 1)
Dr Liliana Risi (LR) (Day 2)	Dr Karen Sennett (KS)
NCC-C staff	
Angela Bennett (AB)	Katrina Asquith-Coe (KAC)
Dr Andrew Champion (AC) (Day 1)	Dr Mia Schmidt-Hansen (MSH)
Victoria Kelly (VK)	Mathew Prettyjohns (MP) (Day 1)
NICE staff	
Katie Perryman-Ford (KPF)	
Apologies	
Dr Richard Osborne (RO) (Day 2)	Dr Liliana Risi (LR) (Day 1)
Dr Joan Meakins (JM)	Mrs Susan Hay (SH)

#### REPORT OF DISCUSSIONS AT THE MEETING

##### 1 Welcome and apologies

SHa welcomed everyone to the 12<sup>th</sup> meeting of the Suspected Cancer GDG.

Apologies for absence were received from Stuart Williams and Nicki Doherty (day two only).

##### 2 Declarations of interest

The following declarations of interest were noted:

WH declared he had been successful in obtaining 2 grants from CRUK:

- OGRE: grant for £306,000 looking at the use of risk assessment tools for suspected oesophago-gastric cancer. WH reported that YL is also a co-applicant. This was categorised as non-personal pecuniary non-specific meaning that WH can participate in discussion on all guideline topics as not funded by the healthcare industry.
- BODYSHOP: grant for £120,000 looking at symptom profiles of bowel disease in people below 50 years. This was categorised as non-personal pecuniary specific meaning that WH can participate in discussion on all guideline topics as not funded by the healthcare industry.

WH and YL declared the following successful grant from NAEDI:

- £82,000 to review how English practices vary in 2ww referrals and explore consequences of cancer outcomes. YL is the principle investigator, WH co-applicant. This was categorised as non-personal pecuniary specific meaning that YL and WH can participate in discussion on all guideline topics as not funded by the healthcare industry.

The GDG were reminded that if they take on any new interests, these must be declared to the NCC-C as soon as they happen so that the necessary action can be taken.

**3 Minutes of the last GDG meeting on 27 & 28 January 2014**

The minutes of the last meeting were agreed as a true and accurate record of the meeting.

**4 Discussion**

The preliminary results of the health economic analysis for the economic priority topic was presented.

The clinical for SCC of the skin was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

The clinical evidence for melanoma was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

The clinical evidence for bone sarcoma was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

The clinical evidence for soft tissue sarcoma was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

The clinical evidence for oral cancer was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

The clinical evidence for laryngeal cancer was presented to the GDG. The GDG discussed the evidence and drafted recommendations.

**5 Close of meeting**

SHa thanked members for their input to the meeting, reminded them that the next meeting would be on Tuesday 22 & Wednesday 23 April 2014 at NCC-C, Cardiff.