

4.0.03 DOC Cmte minutes

Prostate Cancer Committee meeting

Date: 18/04/2018

Location: NICE – Manchester

Minutes: Final



Committee members present:	
Waqar Shah (WS) (Chair)	Present for all
Pauline Bagnall (PB)	Present for all
Charles Frost (CF)	Present for all
Howard Kynaston (HK)	Present for all
Brian McGlynn (BM)	Present for all
Jon Oxley (JO)	Present for all
Jonathan Richenberg (JR)	Present for all

In attendance:		
Jean Bennie (JB)	GUT – Technical Analyst	Present for all
Chris Carmona (CC)	GUT – Senior Technical Analyst	Present for all
Fadi Chehadah (FC)	NICE – Health Economist	Present for all
Rupert Franklin (RF)	NICE – Senior Guidelines Commissioning Manager	Present for all
Adam O’Keefe (AO)	GUT – Project Manager	Present for all
Gabriel Rogers (GR)	NICE – Technical Adviser (HE)	Present for all

Expert witness:		
Rita Faria	Centre for Health Economics, University of York	Present for item 5

Observer:	
Alice Biggane (AB)	Present for all

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Apologies:	
Abi Ademoyero	Committee member
Guy Chetiyawardana	Committee member
John Graham	Committee member
Sadaf Haque	Committee member
Peter Jenkins	Committee member
Sanjeev Madaan	Committee member
Mark Robinson	Committee member
Karen Stalbow	Committee member
Sue Spiers	GUT - Associate Director

1. Introductions and guideline committee working

The Chair welcomed the Committee members and attendees to the fifth meeting on Prostate cancer. The Committee members and attendees introduced themselves. There were no new declarations of interest.

The Chair explained that KS was absent from today's meeting due to a conflict of interest relevant to the topics being discussed. The Chair advised that in addition to KS's absence, a large number of apologies had been received and as such, the meeting was not quorate. The Chair explained that the meeting could go ahead but that recommendations could not be drafted. These will need to be agreed at the next meeting. The Chair then reminded the Committee of the importance of complying with NICE's Conflicts of Interest policy for the duration of their membership of the guideline committee.

The Chair outlined the objectives of the meeting, which included evidence presentations for review questions 1 and 3 and a presentation from Rita Faria from the University of York to inform review question 1.

Minutes of the previous meeting were agreed as an accurate record.

2. Clinical introduction to Review Questions 1 & 3

PB presented a brief clinical introduction on the topics being discussed today for the benefit of the committee and the NICE team. The Chair invited questions before thanking PB for her presentation.

3. Expert witnesses

CC updated the Committee on possible sources of expert testimony. CC advised the committee that as the PRECISION trial had now published, this would be picked up during the relevant evidence review, should it meet the predefined inclusion criteria.

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The Committee discussed how this trial is pertinent to the pathway they are discussing and the importance of it being considered, along with any other relevant RCTs. The NICE team agreed to discuss the Committee's preferences further with the NICE team and look at ways of considering these sources of data.

4. Review Question 1: Which of the following, alone or in combination, constitutes the most clinical and cost- effective pathway for diagnosing prostate cancer: Multiparametric MRI; Transrectal ultrasonography (TRUS) biopsy; Transperineal template biopsy?

Review Question 3 Which of the following, alone or in combination, constitutes the most clinical and cost- effective pathway for excluding the clinically significant progression of prostate cancer in people with low to intermediate risk (as defined in NICE CG175): Multiparametric/ functional MRI, TRUS biopsy, Transperineal template biopsy?

- **Clinical evidence presentation and discussion**

JB presented the clinical evidence identified for Review Questions 1 and 3 for the Committee's consideration. The Committee discussed the evidence and agreed to continue their discussions following presentation of the Health economic evidence on the topic and the presentation of expert testimony.

5. Expert testimony from Rita Faria on PROMIS health economics

Miss Faria provided expert testimony on health economics work carried out alongside the PROMIS study for the consideration of the committee. Committee members were then given the opportunity to ask Miss Faria questions related to her testimony.

6. Review Question 1: Which of the following, alone or in combination, constitutes the most clinical and cost- effective pathway for diagnosing prostate cancer: Multiparametric MRI; Transrectal ultrasonography (TRUS) biopsy; Transperineal template biopsy?

Review Question 3 Which of the following, alone or in combination, constitutes the most clinical and cost- effective pathway for excluding the clinically significant progression of prostate cancer in people with low to intermediate risk (as defined in NICE CG175): Multiparametric/ functional MRI, TRUS biopsy, Transperineal template biopsy?

- **Health economics and drafting of recommendations**

FC summarised Miss Faria's presentation in the context of Review Questions 1 and 3 for the benefit of the Committee. As there were not sufficient Committee member's present to draft recommendations, those present discussed potential

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recommendations and agreed to formalise these at the next Committee meeting.

7. Health Economics Update

This item was deferred due to time constraints.

8. Next steps

The Chair confirmed the venue, date and time of the next meeting, as detailed below and thanked the Committee and others present for their contribution to the meeting before closing the meeting.

Date of next meeting: 21 and 22 May 2018

Location of next meeting: NICE - London