

## Prostate Cancer Committee meeting

**Date:** 11/09/2018 – 12/09/2018

**Location:** NICE offices, Manchester

**Minutes:** Approved

**NICE** National Institute for  
Health and Care Excellence

<b>Committee members present:</b>		
	<b>Day 1</b>	<b>Day 2</b>
Waqar Shah (WS) (Chair)	Present for all	Present for all
Pauline Bagnall (PB)	Present for all	Present for all
Guy Chetiyawardana (GC)	Present for all	Present for all
Charles Frost (CF)	Present for all	Present for all
John Graham (JG)	Present for all	Present for all
Sadaf Haque (SH)	Apologies	Present from item 3
Howard Kynaston (HK)	Present for all	Present for all
Sanjeev Madaan (SM)	Present from partway through item 2	Present until partway through item 5
Brian McGlynn (BM)	Present for all	Present for all
Jon Oxley (JO)	Present for all	Present for all
Mark Robinson (MR)	Present for all	Present for all
Karen Stalbow (KS)	Present for all	Present for all

<b>In attendance:</b>		
	<b>Day 1</b>	<b>Day 2</b>
Jean Bennie (JB) GUT – Technical Analyst	Present for all	Present for all
Chris Carmona (CC) GUT – Senior Technical Analyst	Present for all	Present for all
Fadi Chehadah (FC) NICE – Health Economist	Present for all	Present for all
Rupert Franklin (RF) NICE – Senior Guidelines Commissioning Manager	Present for all	Present for all
Gareth Haman (GH) NICE – Senior Medical Editor	Apologies	Present for all
Adam O’Keefe (AO) GUT - Project Manager	Present for all	Present for all
Gabriel Rogers (GR) NICE - Technical Adviser (HE)	Present for all	Present for all
Susan Spiers (SS) GUT – Associate Director	Present for all	Present until partway through item 4

<b>Observer:</b>	
Alice Biggane	Present for all on both days

<b>Apologies:</b>
Abi Ademoyero – Committee member
Peter Jenkins – Committee member
Jonathan Richenberg – Committee member

**Day 1 Tuesday 11 September 2018:**

<b>1. Welcome, apologies, minutes of the last meeting, declarations of interest</b>
<p>The Chair welcomed the Committee members and attendees to the day 1 of the eighth meeting on Prostate cancer. Apologies for the meeting were received as detailed above.</p> <p>The minutes of the previous meeting were agreed as an accurate record, with one minor amendment.</p> <p>Each committee member was asked to declare any new conflicts since the previous meeting. No new interests were declared. The Chair confirmed that, having reviewed the historical declaration of interests table that the remaining committee members present were eligible to attend the committee meeting and contribute to the discussions and drafting of any recommendations.</p>
<b>2. Review Question 9: What is the most clinically- and cost-effective follow-up protocol for people with prostate cancer who have had radical treatment, with specific regard to: duration of follow-up, frequency of follow-up appointments, the type of examination or blood tests, the respective roles of primary and secondary care in follow-up?</b>
<p>JB presented the clinical evidence identified for Review Question 9 for the Committee’s consideration. FC advised the Committee that no Health Economic evidence had been identified.</p> <p>The Committee discussed the evidence, deleted one recommendation and drafted one new recommendation.</p>
<b>3. Review Question 8: What is the most clinically- and cost-effective follow-up protocol for people who have a raised PSA, negative MRI and/ or negative biopsy?</b>
<p>JB presented the clinical evidence identified for Review Question 8 for the Committee’s consideration. The Committee discussed the evidence and agreed to continue their discussions following presentation of the final Health economic model.</p>
<b>4. Presentation of final economic model</b>
<p>FC and GR presented to the committee the final version of the health economic model developed to inform the guideline. The committee then revisited and edited recommendations previously drafted on Review Question 8: What is the most clinically- and cost-effective follow-up protocol for</p>

people who have a raised PSA, negative MRI and/ or negative biopsy?

The committee discussed the clinical and Health Economic evidence supporting this review question and drafted two recommendations.

### **5. Next steps**

The Chair thanked the committee for their input and confirmed day 2 would commence at 10am as scheduled.

## **Day 2 Wednesday 12 September 2018:**

### **1. Welcome, apologies, declarations of interest**

The Chair welcomed the Committee members and attendees to day two of the eighth meeting of the prostate cancer guideline committee. Apologies for the meeting were received as detailed above.

Each committee member was asked to any new conflicts. No new interests were declared. The Chair advised that Committee members excluded from discussions or drafting of recommendations at previous meetings due to a conflict of interest, remain conflicted and will be excluded from those discussions under item 4. The Chair listed those Committee members for whom this applied, as follows:

Review Question 1: KS

Review Question 2: JO, HK

Review Question 4: JG

Review Question 5/6: JO

Review Question 7: JO

### **2. NICE pathway**

GH explained to the Committee the function of NICE Pathways in bringing together everything NICE has said on a topic in an interactive flowchart. GH advised that a draft, updated pathway will be created prior to consultation and requested volunteers from the Committee to help ensure that the flow and intent are respected and that all relevant links are included.

GH then explained to the committee that the recommendations from CG175 not being reviewed by this Committee will be refreshed to bring them up to date with current NICE style. These minor edits will be reviewed by the committee prior to consultation.

### **3. Preference sensitive decision points**

CF talked to the Committee about his experiences as a patient and about the information important to a person with prostate cancer. The Committee then considered whether the

information in the preference sensitive decision tables linked to some recommendations is the right core information

#### **4. Review of additional evidence identified at re-runs**

JT and GR presented additional clinical and health economic evidence that had been identified for a number of review questions. The committee discussed this evidence and amended draft recommendations accordingly.

#### **5. Algorithms**

CC presented the committee with the algorithms for this guideline, updated to include the draft recommendations from this update. The committee reviewed the documents to ensure that the new or updated recommendations were included appropriately.

#### **6. Research recommendations**

The committee reviewed the research recommendations drafted during guideline development and edited as appropriate. Due to time constraints, it was agreed that the prioritisation of the five research recommendations to be listed in the short version of the guideline as priorities for further research will be agreed via email following the meeting.

#### **7. 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:** 4 February 2019

**Location of next meeting:** NICE - Manchester