

Date and Time: 31st October 2013, 10.30 – 15.05

Minutes: Final

Guideline Development Group Meeting 3: Diabetic Foot Problems

Place: NICE Offices
Level 1a, City Tower
Piccadilly Plaza
Manchester
M1 4BT

Present: Damien Longson (Chair)
Stella Vig (SV)
Rachael Hutchinson (RH)
Laurie King (LK)
Catherine Gooday (CG)
Sheila Burston (SBu)
Rachel Berrington (RB)
Gerry Rayman (GR)
Susan Benbow (SBe)
Sue Brown (SBr)

Apologies: Nicholas Foster (NF)
Issak Bhojani (IB)

In attendance:

NICE Staff:

Stephanie Mills (SM)
Mike Heath (MH)
Gabriel Rogers (GR)
Toni Tan (TT)
Sarah Palombella (SP)
Sarah Dunsdon (SD)
Vicky Gillis (VG)

Apologies
Chris Gibbons (CG)

Observers:

Susannah Moon – NICE Staff
Besma Nash – NICE Staff
Diana O'Rourke – NICE Staff

1. DL welcomed all to the third diabetic foot guideline development group (GDG) meeting. Apologies were received from NF and IB. DL stated that the objectives for the day were to look at the clinical utility and accuracy of tools for assessing and diagnosing foot ulcers (including severity), soft tissue infections, osteomyelitis, and gangrene. Following this conflicts of interest were taken from the group. No conflicts above what had already been made known to the NICE team were given. The group were asked to look at the minutes for GDG 2. They were agreed without amendment.
2. TT presented the evidence for review question 6. The GDG discussed which classification systems for severity of foot ulcer were used in UK clinical practice and how easy they were to use. TT took the group through GRADE and also explained how factors such as indirectness and imprecision impact on the quality of the evidence base. The GDG commented on the heterogeneity of the presented evidence. TT brought the GDG on to think about the sensitivity and specificity of imaging tests for osteomyelitis. The GDG considered how these are used in UK clinical practice and emphasised the importance of good clinical judgement.

The GDG agreed that the evidence statements presented were representative summary of the conclusions of the studies which were included in the evidence review.

3. There was no health economics to update on so following lunch, SP told the GDG about the role of the editor and how the editor supports the development of the guideline. The GDG were given information on the wording and strength of recommendations. SP demonstrated how the NICE pathways worked and also talked about the shortened NICE version of the guideline to be produced and Information for the Public.
4. The group moved onto making recommendations. The GDG discussed at length how the recommendations should flow from community into secondary care settings and debated how these should be worded so they would be clear.
5. In the last section of the day VG asked the group the sort of outcomes and tests that should be looked for as part of the two remaining protocols for the evidence reviews on charcot arthropathy.
6. DL thanked the group for their hard work. SM explained that the next GDG was scheduled to be a 2 day meeting but that this was likely to be made into a 1 day meeting. SM said that the group would be informed of this as soon as possible.

Date and venue of the next meeting

Fri 13th December 2013 – Red rooms, City Tower adjacent to NICE Offices, Manchester